



STATE OF NEVADA

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF CHILD AND FAMILY SERVICES

2023 ANNUAL PROGRESS SERVICES REPORT

Cindy Pitlock, DNP, APRN, CNM
Administrator

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INTRODUCTION

Child and Family Services Plan¹

To receive federal funding under Title IV-B, a state must submit a 5-year Child and Family Services Plan (CFSP) and Annual Progress and Services Reports (APSR). The CFSP is a strategic plan that sets forth a state's vision and goals to strengthen its child welfare system. It outlines initiatives and activities that the state will carry out over the next five years to administer and integrate programs and services to promote the safety, permanency, and well-being of children and families. Nevada submitted a five-year plan in June 2019 for 2020-2024 and was approved in November 2020.

Child and Family Services Review Program Improvement Plan

In 2000, the Children's Bureau established a process for monitoring state child welfare programs called the Child and Family Services Reviews (CFSR). States are assessed for substantial conformity with federal requirements for child welfare services.

CFSRs help states improve safety, permanency, and well-being outcomes for children and families who receive services through the child welfare system. The CFSR process enables the Children's Bureau to (1) ensure conformity with federal child welfare requirements; (2) determine what is happening to children and families receiving child welfare services; and (3) assist states in enhancing their capacity to help children and families achieve positive outcomes related to safety, permanency, and well-being.

The CFSRs assess state performance on seven outcomes and seven systemic factors. The CFSR incorporates two key phases: the statewide assessment and an onsite review of child and family service outcomes and program systems. The CFSR is followed by the Program Improvement Plan (PIP) phase, in which states not in substantial conformity with federal standards respond to findings of the CFSR.

The third round of CFSRs began in FY 2015 and concluded in FY 2018 (Round 3). Nevada developed its Program Improvement Plan (PIP) in response to the findings of its CFSR which occurred in 2018. The PIP became effective in November 2019. The 2020-2024 CFSP integrated the planning for and development of the five-year CFSP with the CFSR Process.

Annual Progress and Services Report (APSR)

The APSR provides an annual update on the progress made by the state towards its goals and objectives in the CFSP and outlines the planned activities for the upcoming fiscal year.² It also integrates the activities and progress on the CFSR PIP. The APSR allows Nevada to assess the strengths of its child welfare system and the areas needing improvement on an on-going basis.

¹ ACYF-CB-PI-22-01 APSR Program Instruction February 16, 2022

² The APSR 2023 is submitted in June 2022. The 2023 APSR covers the activities completed during the period since the submission of the 2020-2024 CFSP and addresses planned activities for FY 2023.

Agency Administering the Plan

The Division of Child and Family Services is responsible for the development of the Child and Family Services Plan and administering the Title IV-B and Title IV-E programs under the plan. The DCFS provides a wide range of services for children, youth, and families in Nevada. In addition to child welfare services, the DCFS also manages juvenile justice programs, children's mental and behavioral health services, and victims' services.

DCFS' central administrative structure is organized into four major areas that report to the DCFS Administrator:

- **Administrative Services:** Oversees the Division's fiscal services, information technology services, grants management, and victims' services.
- **Children's Mental Health Services:** Oversees children's mental health services and treatment facilities.
- **Juvenile Justice Services:** Oversees juvenile justice services, facilities, and programs office
- **Child Welfare Services:** Oversees rural child welfare direct services and the Division's teams focused on systems improvement and quality assurance including the Children's Mental Health Planning and Evaluation Unit, Systems Advocate and the Child Welfare Family Programs Office (FPO). The FPO is responsible for 1) oversight of child welfare services in Nevada; 2) compliance with federal and state requirements; and 3) quality improvement of child welfare practice.

Child Welfare Services Administrative Structure

Nevada is one of two states with a hybrid child welfare administrative structure.³ In the two largest urban counties child welfare services are state-administered and county operated. The remaining 15 rural counties are state-administered, and state operated. In SFY 2021, the state received 34,363 child protective services referrals and conducted 15,717 child protective services investigations. There was an average of 4,321 youth in foster care.⁴ The 17 counties are divided into three regions as outlined below.

- The Northern Region encompasses Washoe County and includes the major cities of Reno and Sparks. It has a population of 493,392 residents⁵ making it the second most populous county in the state. Child Welfare Services are delivered by Washoe County Human Services Agency (WCHSA). In SFY 2021 the region conducted 1,788 child protective services investigations with an average of 731 children in foster care.⁶
- The Southern Region encompasses Clark County and includes the major cities of Las Vegas, Henderson, North Las Vegas, Boulder City and Mesquite. It has a population of 2,292,476 residents making it the most populous county in the state.

³ State Vs. County Child Welfare Administration, Child Welfare Information Gateway

<https://www.childwelfare.gov/pubs/factsheets/services/>

⁴ DCFS Data Book. CPS Investigations and Foster Care End of Month, February 28, 2022

⁵ <https://www.census.gov/>

⁶ All data in Child Welfare Services Administrative Structure is from DCFS Data Book as of February 28, 2022

Child Welfare services are delivered by Clark County Department of Family Services (CCDFS). In SFY 2021 the region conducted 13,067 child protective services investigations with an average of 3,193 in foster care.

- The Rural Region encompasses the remaining 15 counties and includes the major cities of Carson City, Fernley, Fallon, Elko, and Pahrump. The 15 rural counties combined has a population of 358,123 residents. Child Welfare services are delivered by offices operated by DCFS. In SFY 2021 the region conducted 862 child protective services investigations with an average of 398 children in foster care.

Reshaping Child Welfare in Nevada

In November 2018, the Administration for Children and Families Children's Bureau issued a call to action to the child welfare field to implement primary prevention strategies.⁷ This paradigm shift to focus on prevention is meant to strengthen families before maltreatment has occurred and prevent the unnecessary removal of children from their homes. Common problems such as limited or loss of income or lack of housing, when left unattended, can escalate to crisis and lead to formal child welfare involvement.

According to Kids Count 2021⁸, Nevada ranks 45th nationally in terms of child well-being based on 16 indicators representing four areas of well-being: Economic (41st), Education (46th), Health (34th), and Family and Community (44th). These rankings reflect the risk of families becoming involved with the child welfare system with the following factors contributing:

- 17% of children (115,000) lived in poverty in 2019.
- 26% of children (178,000) had parents who lacked secure employment in 2019.
- 33% of children (226,000) lived in households with a high house cost burden in 2019.
- 8% of children (52,000) lived in high-poverty areas in 2015 - 2019.

Nevada has spent the last year working in partnership with key internal and external stakeholders to develop plans and interventions that will allow for necessary changes to the current child welfare system. These changes include an emphasis on Diversity, Equity, and Inclusion (DEI) and youth engagement to bring those with lived experience to the table. Nevada continues to support prevention-based interventions that minimize entry and/or reentry into care. These efforts are reflected in the APSR.

Impact of National Health Emergency

Throughout the entire reporting period of this APSR, Nevada has continued to navigate impacts caused by the global COVID-19 pandemic. DCFS, through The Family Programs Office (FPO), has provided guidance to statewide child welfare jurisdictions throughout the pandemic, to include instruction and guidance relating to child welfare practice and safety during the global pandemic.

⁷ Information Memorandum [ACYF-CB-IM-18-05](https://www.acf.hhs.gov/cb/resource/im1805). Retrieved from: <https://www.acf.hhs.gov/cb/resource/im1805>

⁸ Annie E. Casey Foundation 2021 Kids Count Data Book. Retrieved from: <https://assets.aecf.org/m/databook/2021KCDB-profile-NV.pdf>

The 2021 APSR described the initial impact of the pandemic. At the onset of the pandemic most face-to-face interactions were suspended for safety reasons pursuant to federal guidance from the Children's Bureau. The FPO released guidance to the child welfare agencies describing flexibilities in child welfare practice. Jurisdictions were able to adapt to the challenges created by virtual contact with available technology, as well as utilize funding from the CARES Act to update needed supplies such as phones and computers. Nevada Child welfare agencies were also able to use existing funding and CARES Act funding to support families and care providers who were lacking technology resources. The 2022 APSR described the long-term effects of the pandemic and how changes continued to fluctuate throughout the last two years. Progress was made in lowering transmission rates and increasing the availability of vaccines, so restrictions on face-to-face contacts had been eased accordingly.

To date all face-to-face operations with children and families has resumed statewide. Offices are continuing to follow sanitary guidelines. On February 10, 2022, Governor Steve Sisolak ended the statewide mask mandate that had been in place since July 2021 due to the decreasing number of COVID-19 hospitalizations and an abundant supply of vaccines. As of May 20, 2022, Governor Sisolak signed a proclamation formally ending the Declaration of Emergency related to the COVID-19 pandemic which was in place since March 2020.

Court processes have been significantly impacted throughout the COVID-19 pandemic. Initially, all in-person court proceedings were halted and shifted to a virtual courtroom environment for the safety of all parties. Statewide technology was supplied to workers and families which assisted and enabled them to participate in all levels of virtual court hearings. While pandemic restrictions are continuing to ease, court proceedings remain almost entirely virtual in Washoe County, with an exception for trials. Hearings in the rural counties are mostly in person with the option to attend virtually in some of the rural courts. In Clark County, hearings have returned to fully in person. The Court Improvement Council (CIC) advised that all the judicial districts have been considering returning to fully in person but would like to extend the virtual option for specific situations such as a known COVID-19 diagnosis in designated court participants or possible COVID-19 infection rate surges in geographic areas. The CIC has advised FPO that they will provide updates as these decisions continue to be made.

COLLABORATION

The Statewide Assessment conducted in 2018 revealed that a major strength for Nevada was its ability to collaborate and engage internal and external stakeholders in monitoring the identified goals and objectives of its five-year plan. In fact, Nevada received an overall rating of strength during the 2018 CFSR Round 3 for the Systemic Factor Agency Responsiveness to the Community. This performance item (Item 31) assesses how well the agency's responsiveness is to the community system functioning statewide to ensure that the state engages in ongoing consultation with tribes, consumers, service providers, foster care providers, juvenile court, and other agencies. Stakeholder major concerns are included in the goals, objectives, and annual updates of the APSR.

DCFS has continued to organize its collaborative efforts this past year to ensure continued engagement of key stakeholders. The framework for this year's collaborations to support the CFSP goals and PIP activities has been organized around PIP Collaborative Implementation Teams and feedback loops, coordination and collaboration with the Court Improvement Program, implementation planning for the Families First Prevention Services Act and continued implementation efforts for Comprehensive Addictions and Recovery Act (CARA) Plans of Care and Juvenile Victims of Trafficking Act (JVTA), as outlined in the CAPTA section.

PIP COLLABORATIVE IMPLEMENTATION TEAMS

PIP Collaborative Implementation Teams were formed to oversee and implement the PIP activities. The teams were initially formed to identify practice themes that were identified as areas of concern during the 2018 CFSR. The teams were responsible for overseeing the strategies and implementing the key activities of the PIP. Teams were comprised of representatives from the Court Improvement Program, state and county child welfare practice experts, Juvenile Justice, UNITY developers, Nevada Partnership for Training (NPT), and state legal advocates. Teams initially received guidance and technical assistance from the Capacity Building Center for States (CBCS) and Region IX of the Children's Bureau. As a result of the COVID-19 crisis, the CBCS expanded its role to include development and implementation activities to support the state in the timely completion of PIP activities. The PIP teams' interface and provide feedback loops with other stakeholder groups as listed below. The initial PIP ran from November 2019 through October 2021. At that time, Nevada had met most of its PIP goals for the CFSR items; however, had four outstanding items for which it still needed to meet goals. Due to this, Nevada's PIP continued into the non-overlapping year. The work done by the four PIP teams shifted to focus on those four remaining items, while sustaining all activities accomplished and implemented since November 2019.

PIP Teams

The four PIP teams are overseen by the Statewide Quality Improvement Committee (SQIC) which includes membership from Court Improvement Project (CIP) and Nevada's three child welfare jurisdictional agencies. PIP Teams are assembled across four cross cutting performance themes and specific practice areas:

Team 1 Conducting Quality Safety and Risk Assessments

- Conducting comprehensive risk and safety assessments
- Focusing on in-home cases
- Developing appropriate, realistic, and specific safety plans
- Formalizing maltreatment reports on open cases
- Providing safety services

Team 2 Engaging Families Effective family engagement

- Conducting high quality caseworker visits and case planning
- Focusing on in-home cases
- Effective relative engagement
- Conducting accurate needs assessment and case planning

Team 3 Achieving Timely Permanency

- Effective use of concurrent planning
- Effective and timely planning for adoption and provision of adoption services
- Planning for, pursuing, and supporting timely reunification
- Strengthening court case review processes and communication/partnership with courts
- Filing timely TPR petitions per ASFA

Team 4 Continuous Quality Improvement

- Developing a comprehensive CQI system
- Building capacity
- Strengthening data collection, tracking, sharing, and analysis
- Strengthening the link between data analysis and decision-making
- Tracking interventions and outcomes

Decision Making Group

The Decision-Making Group (DMG) is comprised of top-level administrators of the three child welfare agencies, the DCFS Family Programs Office leadership, and the DCFS Administrator. The DMG meets quarterly and provides guidance and final approval to statewide policies, programming, and planning.

Assistant Director Group

The Assistant Director Group (ADG) is comprised of Assistant Directors of the three child welfare agencies, the DCFS Child Welfare Services Deputy Administrator, and the DCFS Family Programs Office Social Services Chiefs. This group meets monthly and serves as the first level of review and approval on statewide child welfare. This group reviews policy recommendations resulting from CFSP, PIP, and continuous quality improvement

activities. This group makes recommendations on statewide policies, programming, and planning activities to the DMG.

Statewide Quality Improvement Committee (SQIC)

The SQIC's purpose is to promote positive outcomes for Nevada's children through continuous oversight and analysis of state and federally identified performance measures and data relevant to continuous quality improvement. In November 2020, the PIP Core Team was converted to the SQIC. All the previous functions of the PIP Core Team were maintained, with the enhancement of the SQIC mission and activities. The charters for the two groups were cross walked and combined. The updated SQIC Charter was approved on October 28, 2020, and the first meeting of the SQIC was November 9, 2020. This group continues to meet twice a month, with one meeting specifically reserved for report-out to the Children's Bureau.

Quality Parenting Initiative (QPI)

The Quality Parenting Initiative was developed statewide to ensure that every child removed from their home due to abandonment, abuse, or neglect is cared for by a foster family who provides skilled, nurturing parenting while helping the child maintain connections with their family. This collaborative engages foster care providers through monthly meetings in each jurisdiction. Additionally, Nevada conducts surveys and focus groups with foster parents to consult with them on service array, training, strengths, and needs of the foster care system.

Advisory Committee

An Advisory Committee was assembled of internal and external stakeholders i.e., peer parent advocates, birth parents, CASA, aged out Foster Youth, Providers, CJA Task Force, and foster parents to identify and make recommendations on some of the areas identified as needing improvement from the CFSR. This committee also served as advisor to the Child and Family Services Plan (CFSP). This committee did not meet during this reporting period due to key staffing shortages made worse by the global pandemic, and generally challenging conditions to meet during the pandemic. Over the next year, the state will re-evaluate how to better engage families including leveraging parent mentoring programs and System of Care activities that exist at the local and state level. The state will also explore how to reconvene this advisory committee as we see the benefits of having an outside perspective, especially of those with lived experience.

Indian Child Welfare Committee

The Indian Child Welfare (ICW) committee meets bi-monthly and is hosted by the DCFS Tribal Liaison. These meetings are held virtually and tribal child welfare workers from the 27 federally recognized tribes, bands, and councils in Nevada are invited to participate. Meetings provide a venue to address training, policy, and practice issues and for obtaining feedback from the tribal communities. Additionally, the DCFS Tribal Liaison participates in quarterly Nevada Department of Health and Human Services (DHHS) meetings to discuss service and policy issues between tribal leaders and the state.

Workforce Innovation Team

The Workforce Innovation Team (WIT) is comprised of the DCFS-FPO, the child welfare jurisdictions, University of Nevada, Las Vegas (UNLV), and the University of Nevada, Reno (UNR), who work collaboratively to manage and improve the child welfare training delivery system. The meeting occurs once per month. The DCFS FPO Chief is responsible for overseeing the work of the WIT and is also the CFSP/PIP Coordinator who provides a feedback loop on matters related to the CFSR, QICR, CFSP, and PIP activities.

This collaborative team is charged with addressing the training needs of the child welfare workforce statewide, as well as guiding and implementing the Coach NV model adopted from the Atlantic Coast Child Welfare Implementation model. Coordination between the child welfare regions and the Nevada Partnership for Training is supported by the Capacity Building Center for States Integrated Capacity Building work plan. The purpose of this intensive project is to implement the coaching model in the three regions of the state and has shifted focus from implementation to sustainability and fidelity.

Children's Justice Act Task Force

The Children's Justice Act Task Force (CJA) is a multi-disciplinary team that meets quarterly to make policy and training recommendations for systems improvements in the investigative, administrative, and judicial handling of child abuse and neglect, and exploitation cases in a manner that limits trauma to the child victims. Multiple members of the CJA Task Force are also active members of PIP teams (SQIC, Team 1, Team 3) and the Court Improvement Program (CIP).

CONSULTATION AND COORDINATION WITH THE COURT IMPROVEMENT PROGRAM

The Court Improvement Program (CIP) Select Committee Meeting meets quarterly. Through this meeting, the Nevada court systems partner with the Division of Child and Family Services (DCFS) on a variety of fronts that focus many of its efforts on implementing the CFSP, APSR, and CFSR. Two CIP members participate in the SQIC. This membership helps align child welfare agencies with the courts in efforts to develop, implement, and monitor child welfare performance and improve outcomes. A special project of the CIP is the development of a legal representation study which includes performance measures and a survey created to be completed by the local judicial districts using the Court Improvement Councils (CIC). Additionally, DCFS has established a formal system to subgrant IV-E funds to entities providing legal representation. The DCFS utilized the CIP Coordinator in the development and implementation of a Title IV-E Plan Families First Prevention Services Act (FFPSA) Amendment PIP.

Court Improvement Councils

All 11 Judicial Districts have collaborative Court Improvement Councils (CICs) which develop annual action plans to improve the handling of the judicial handling of child welfare cases. The CICs meet regularly in their communities and at an annual Summit.

CICs meet monthly or quarterly depending on the judicial district. The CIP Select Committee meets quarterly, and CIC Leads and Stakeholders attend to report on their activities, goals, and barriers. The CICs from all 11 Judicial Districts meet annually for the CIC Summit.

During the 2020 CIC Summit, the CIC members received training and information about various items related to the PIP. This included a panel presentation training on practice guides created for judicial stakeholders about KinGAP, Concurrent and Permanency Planning, and Termination of Parental Rights (TPR), explanation of compelling reasons, and reasonable efforts, as well as a presentation about predictive analysis work completed and outcomes found for Item 3.4.1.

The Nevada court system has partnered with DCFS on a variety of fronts the last year focusing many of its efforts on implementing the goals of the CFSP and PIP. CICs have initiated and supported several of the outcomes and systemic factors because of action planning regarding timeliness, child safety, and hearing quality. CIC members are participants on PIP Team 3 Achieving Timely Permanency.

DEVELOPMENT OF NEVADA'S FAMILY FIRST PREVENTION SERVICES ACT PREVENTION PLAN

Nevada has contracted with the University of Maryland School of Social Work Institution for Innovation and Implementation to support the development of a Title IV-E Prevention Program Plan in Nevada in response to the Family First Prevention Services Act (FFPSA). The FFPSA plan activities supported PIP strategies and activities. DCFS held structured planning meetings with all five of the state divisions under the Department of Health and Human Services (DHHS) which include: DCFS, Aging and Disabilities Services (ADSD), Health Care Financing and Policy (Medicaid), Division of Public and Behavioral Health (DPBH), and Division of Welfare and Supportive Services (DWSS). Additional planning meetings were held with programs within those divisions including Community Based Child Abuse Prevention (DCFS), Children's Mental Health (DCFS), System of Care (DCFS), Mobile Response (DCFS), TANF (DWSS), home visiting, maternal health, and rural children's mental health (DPBH). The purpose of these collaborative meetings was to educate sister agencies on the FFPSA as well as to identify and leverage other DHHS Divisions' programs and resources aimed at increasing child welfare prevention services.

A statewide team led by the Family Programs Office continued to work on Nevada's Prevention Plan including the definition of "candidate for foster care," service array, data and evaluation needs, updates to UNITY, training and workforce development, and policies relating to Qualified Residential Treatment Programs (QRTPs). Nevada is making revisions and providing additional information to the IV-E Prevention Plan and will resubmit the plan for review upon completion.

In a letter dated March 7, 2022, Nevada was notified that it was out of compliance with Sections 472 (c) and 475A(c) of the Social Security Act (the Act) as amended by Public Law 115-123—Family First Prevention Services Act, enacted on July 8, 2018, and needed to submit a PIP to address each of those sections and bring the State into compliance. Section 472 (c) of the Act provides a new definition of foster family home. Section 475A(c) of the Act provides the requirements related to assessment, documentation, and judicial determination for placement in the specified setting of a Qualified Residential Treatment Program (QRTP). To claim Title IV-E reimbursement for

an eligible child placed in a QRTP setting, the setting must meet the requirements of a QRTP as outlined in Section 475A(c) of the FFPSA Act. Nevada had until April 6, 2022, to submit an approvable PIP.

The Nevada team worked closely with the CB Regional Office staff and submitted the State's final Program Improvement Plan (PIP) on April 8, 2022. The CB approved the PIP which is scheduled to be completed by no later than October 4, 2022.

DCFS has developed a statewide definition of family foster home and updated DCFS statewide policies to reflect this definition. The Title IV-E Eligibility Policy Manual has been revised and needs to be provided to the Children's Bureau for completion of Goal #1. For Goal #2, DCFS continues to work with the Court Improvement Program to move forward with the establishment of an Administrative Court Ruling and hopes to have an update on this process after the July Court Improvement Program meeting.

UPDATE TO ASSESSMENT ON CURRENT PERFORMANCE IN IMPROVING OUTCOMES

Nevada entered a Program Improvement Plan (PIP) on November 1, 2019.

On April 6, 2020, DCFS requested a delay of the Clark County case review scheduled for Quarter 3 due to the COVID-19 pandemic.

On April 13, 2020, DCFS requested a delay of certain Quarter 2 PIP items and requested the removal of PIP items 4.5.4 and 4.5.6. DCFS also provided options to account for the requested delay of the Quarter 3 case review in Clark County.

On April 29, 2020, DCFS submitted a revised measurement plan for approval.

On May 8, 2020, the Children's Bureau (CB) approved the revised measurement plan.

On July 29, 2020, the Children's Bureau (CB) held a virtual site visit that included focus group discussions with those who would have been subject to relevant actions in the PIP. During the virtual meeting, the CB met with individuals representing all elements of the PIP, including Nevada leadership, managers and supervisors, caseworkers, the SQIC, and continuous quality improvement staff. The purpose of the virtual visit was to assess the extent to which the state is implementing Key Activities and the effectiveness of those Key Activities as outlined in the PIP.

On August 18, 2020, the Children's Bureau provided a letter to Nevada finding that the state completed all the Key Activities scheduled for Quarters 1 and 2. In this memo, CB agreed to the state's request to eliminate PIP Key Activity 4.5.4 due to redundancy with PIP Key Activity 4.3.5. CB did not approve the state's request to eliminate Key Activity 4.5.6, instead moving the deadline from Q4 to Q6. CB approved the state's request to move the deadline for Key Activities 1.1.2 and 1.2.3 from Q3 to Q4.

On November 30, 2020, DCFS submitted Nevada's PIP Q4 Progress Report. On February 11, 2021, the CB notified DCFS that Nevada had satisfied Q3 and Q4 requirements of the PIP.

On January 20 and 21, 2021, the Children's Bureau (CB) held another virtual site visit that included focus group discussions with those who would have been subject to relevant actions in the PIP during the reporting period. During the virtual meeting, the CB met with individuals representing all elements of the PIP, including Nevada leadership, managers and supervisors, caseworkers, the SQIC, and continuous quality improvement staff. The purpose of the virtual visit was to assess the extent to which the state is implementing Key Activities and the effectiveness of those Key Activities as outlined in the PIP.

In April 2021, the CB agreed to remove the requirement to review one Differential Response case from the Rural Region, and instead review one Differential Response case from Washoe County during the Rural Region Reviews.

On May 25, 2021, DCFS submitted Nevada's PIP Q6 Progress Report. On June 20, 2021, the CB notified DCFS that Nevada had satisfied Q5 and Q6 requirements of the PIP.

In its PIP Q9 Progress Report submitted in February of 2022, Nevada asserted, and the CB confirmed, that the state had met its performance goal for item 4.

In its PIP Q10 Progress Report submitted in May of 2022, Nevada asserted the state had met its performance goal for item 2. At the writing of this report, official confirmation from the CB had not yet been received.

The Children's Bureau provided guidance that allowed the state to reference the PIP when reporting on current performance. For each safety, permanency, and well-being outcome and systemic factor, reference is made to the relevant PIP goal as outlined

below. Items 1, 2, 3, 4, 5, 6, 12, 13, 14, and 15 continue to be monitored by the PIP. For those items requiring additional detail or were not included in PIP activities, the narrative is provided.

- Safety Outcome 1 and Safety Outcome 2 are addressed in PIP Goal 1: Strengthen safety for children in Nevada through improved practice regarding response times, persistent efforts, safety planning, and initial and ongoing safety assessment.
- Permanency Outcome 2, Well-Being Outcome 1, Well-Being 2, Well-Being 3, and Systemic Factor: Staff and Provider Training are addressed PIP Goal 2: Promote effective communication and contact with families.
- Permanency Outcome 1, and Systemic Factors: Case Review System, Foster Parent Recruitment and Retention are addressed in PIP Goal 3: Nevada children have legal permanency and stability in their home lives and their continuity of family relationships and connections are preserved.
- Systemic Factors: Statewide Information System, Quality Assurance Systems, and Service Array are addressed in PIP Goal 4: Improve statewide child welfare outcomes by developing and strengthening the Statewide Quality Assurance System to ensure the system can identify and respond to the strengths and needs of the child welfare system in an efficient and effective manner.

Note: Due to the COVID-19 pandemic the Q3 CFSR case review in Clark County was postponed to Q4. Thus, the first measurement period, as referenced in this document, included Q1, Q2, Q4, and Q5.

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

Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment

The Nevada Revised Statutes (NRS) sets forth parameters for developing regulations establishing reasonable and uniform standards for child welfare services across the state, to include criteria mandating that certain situations be responded to immediately (NRS 432B.260) and those determinations of abuse and/or neglect be made in cases in which an investigation has occurred. Nevada Administrative Code (NAC) requires a process to be established when receiving a referral and determining if that referral constitutes a report of abuse or neglect.

The statewide Intake and Response Time Policy 0506 outlines the expected response time for the type of child maltreatment allegation. The timeline begins the date and time the intake report is received by the agency. The following are child welfare agency response times that are outlined in Intake Policy 0506 (note, each response type requires an attempted face-to-face contact with all alleged victim child(ren) within the assigned priority response time):

- Priority 1: within 6 calendar hours when there is present danger identified.
- Priority 2: within 24 calendar hours when impending danger identified (note: a child fatality or near child fatality suspicious of or related to child maltreatment must be screened as a Priority 1 or Priority 2).
- Priority 3: within 72 calendar hours when maltreatment is indicated, but no safety

factors are identified.

- Priority 3 Differential Response (DR): within 72 business hours when maltreatment is indicated, but no safety factors are identified.

The CFSR Item 1 is measured utilizing a state's response time policy and/or regulation, and cases are applicable for an assessment of this item if an accepted child maltreatment report on any child in the family was received during the period under review. This includes reports assigned for an "Alternative Response" assessment. Reports that are screened out are not considered "accepted." Alternative Response in Nevada is referred to as Differential Response and screened in as a Priority 3 in Clark County and Washoe County. In the Rural Region, Differential Response is provided only to screened-out reports.

Table 1: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 1: Timeliness of Initial Investigations of Reports of Child Maltreatment	58.3%			89.8%			68.9%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	58.33%	41.67%		89.8%	10.2%		
	n=21	n=15	n=44	n=44	n=5	n=36	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

The federal performance expectation for Safety Outcome 1 is 95%. Item 1 Timeliness of Initiating Investigations of Reports of Child Maltreatment is the only performance indicator for this outcome. Nevada received an area needing improvement rating as only 58.3% of the cases rated a strength in the 2018 CFSR. PIP Goal 1 is addressing this item. The state achieved its goal for item 1 during the first measurement period that included Q1, Q2, Q4 and Q5, as reported in the PIP Q4 Progress Report. During that measurement period, the state achieved a strength rating in 80% of the cases reviewed. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 1 in 89.8% of cases reviewed.

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

Item 2: Services to Families to Protect Children in Home and Prevent Removal or Re-Entry into Foster Care

Pursuant to NRS 432B.340, when an agency which provides child welfare services determines that a child needs protection, but is not in imminent danger from abuse or neglect, the agency may offer the parents a plan for services and inform the parents that the agency has no legal authority to compel the family to accept the plan or file a petition pursuant to NRS 432B.490 and if the child is in need of protection, request that the child be removed from the custody of his or her parents. NRS 432B.393 requires that the agency that provides child welfare services make reasonable efforts to keep the child safely in the home before consideration is made to place the child outside of the home.

It is the responsibility of the agency that provides child welfare services per NAC 432B.240 to provide a range of services and commit its resources to preserve the family and prevent the placement of the child outside his/her home when possible and appropriate. All cases open for service must have a written collaborative case plan (Policy 0204 Case Planning) that defines the overall goals of the case and the step-by-step proposed actions for all parties to take to reach the goals within a specified period.

Table 2: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 2: Services to Families to Protect Children in Home and Prevent Removal or Re-Entry into Foster Care	71.88%			82.22%			82.0%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	71.88%	28.13%		82.22%	17.78%		
	n=23	n=9	n=48	n=37	n=8	n=40	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

The overall federal performance expectation for Item 2 Services to Families to Protect Children in Home and Prevent Removal or Re-Entry into Foster Care is 90%. Nevada

received an area needing improvement rating as only 71.88% of the cases rated a strength in the 2018 CFSR. PIP Goal 1 is addressing this item. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 2 in 82.22% of cases reviewed, thus meeting its PIP goal.

The state will continue activities to maintain this achievement. The state ran data summary reports from the OMS specific to this item, then examined the data in small workgroups. Summaries and recommendations were brought to the SQIC for larger group conversations. The state has focused on ensuring consistency in the application of the OSRI across jurisdictions. DCFS will continue to facilitate data analysis and statewide discussion regarding improvements in practice relating to item 2.

PIP key activity 1.1.2 involved updating the Nevada Initial Assessment model to better assess the ongoing needs of children and their families. This has been completed with the updated NIA tool being incorporated over the past year.

PIP key activities 1.2.1 and 1.2.2 initiated the development of an identified expert group of statewide individuals who have significant knowledge of the Nevada Initial Assessment tool and process who can be made available to give guidance to case specific issues that arise to promote better understanding of the guidelines and give suggestions that would more effectively benefit the needs of the families that are served throughout the statewide jurisdictions. This is designed to be a continued resource for the field workers who are directly interacting with the families and responsible for accurately assessing their needs. Through this ongoing coaching approach, correctly identified services will continue to be put into place to prevent families from re-entry into the system.

In addition to the updated Nevada Initial Assessment tool and the peer driven expert group resource to help caseworkers enhance their assessment capabilities, Nevada will continue to monitor and address services that will continue to improve outcomes of statistical re-entries into the child welfare foster care system.

Item 3: Risk Assessment and Safety Management

Per NAC 432B.150, when an agency which provides child welfare services receives a report made pursuant to NRS 432B.220, or from law enforcement, an initial evaluation must be conducted to determine if the situation or condition of the child makes child welfare services appropriate.

If an agency assigns the report for investigation, a safety assessment is required to be completed upon the initial face-to-face contact with the alleged child victim pursuant to NAC 432B.185. In addition, NAC 432B.185 requires the development of a safety plan to ensure the immediate protection of a child while safety threats are being addressed. A Safety Assessment is required to be completed at case milestones as outlined in NAC 432B.185. Policy 0508 Nevada Initial Assessment (NIA) addresses this information.

Performance Item 3 is being addressed by all the activities in Goal 1: Strengthen Safety for children in Nevada through improved practice regarding response times, persistent efforts, safety planning, and initial and ongoing safety assessment.

Table 3: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 3: Risk Assessment and Safety Management	46.25%			65.88%			53.4%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	46.25%	53.75%		65.88%	34.12%		
	n=37	n=43	n=0	n=56	n=29	n=0	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QRT 9, DCFS Rural Region PIP Monitored 2022 QRT 10.

The overall federal performance expectation for Item 3 Risk and Safety Assessment and Management is 90%. Nevada received an area needing improvement rating as only 46.25% of the cases rated a strength in the 2018 CFSR. The state achieved its goal for item 3 during the first measurement period that included Q1, Q2, Q4 and Q5 by achieving a strength rating in 52.94% of the cases reviewed, as reported in the PIP Q4 Progress Report. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 3 in 65.88% of cases reviewed.

As seen in Table 3a, 30% of the applicable cases met the criteria of the OSRI for the initial assessment, and 65% of the applicable cases met the criteria of the OSRI for the ongoing assessment. A review of the OMS data taken from the reviews showed that in the cases rated as ANI, most initial assessments failed to accurately identify various safety concerns that should have been noted by the caseworkers. Of those same identified cases, 75% also failed to effectively continue to conduct quality ongoing assessments to further assess for the proper safety and welfare of the children. Data shows that as a state we need to continue efforts to accurately assess both initial and ongoing assessments of the children being assessed.

Table 3a: Item 3 Initial Versus Ongoing Assessment

If the case was opened during the period under review, did the agency conduct an initial assessment that accurately assessed all risk and safety concerns for the target child in foster care and/or any child(ren) in the family remaining in the home?			During the period under review, did the agency conduct ongoing assessments that accurately assessed all the risk and safety concerns for the target child in foster care and/or any child(ren) in the family remaining in the home?		
Yes	No	NA	Yes	No	NA
31.58%	3.51%	64.91%	77.19%	22.81%	0.0%
N=18	N=2	N=37	N=44	N=13	N=0

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

Table 3b: Recurrence of Maltreatment

National Performance	Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
				Lower CI*	RSP	Upper CI*
9.5%	NCANDS FY 17-18	↓	6.8%	7.9%	8.7%	9.7%
9.5%	NCANDS FY 18-19	↓	7.4%	8.6%	9.5%	10.5%
9.5%	NCANDS FY 20-20	↑	6.4%	7.4%	8.3%	9.2%

Nevada Child and Family Services Review (CFSR 3) Data Profile January 2022.

Red = states performance using RSP interval is statistically worse than national performance

Gray = states performance using RSP interval is statistically no different than national performance

Blue = states performance using RSP interval is statistically better than national performance

For this performance indicator, a lower RSP value is desirable. *CI = Confidence Interval

Nevada has been consistently lower than the national performance over the last two reporting periods and continues to improve.

Table 3c: Maltreatment in Care

National Performance	Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
				Lower CI*	RSP	Upper CI*
9.67%	AFCARS 17AB, FY17	↓	4.31	4.73	5.97	7.52
	AFCARS 18AB, FY18	↓	5.09	5.63	6.96	8.59
	AFCARS 19AB, FY19	↓	5.41	6.00	7.36	9.02

Nevada Child and Family Services Review (CFSR 3) Data Profile January 2022.

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Gray = states performance using RSP interval is statistically no different than national performance

Blue = states performance using RSP interval is statistically better than national performance

For this performance indicator, a lower RSP value is desirable. *CI = Confidence Interval

The observed performance reflected in Table 3c is determined by taking the number of children in care during a 12-month period and the total number of days the children were in care at the end of the 12-month period divided by the number of children in care for the 12-month period that had substantiated or indicated reports of maltreatment.

In 17AB, FY17 the observed performance was 4.31 which was reflective of 67 victimizations in a total of 1,554,944 days of care. 79% of reported cases of maltreatment were in Clark County, 12% were reported in Washoe County, and 9% were reported in the rural counties.

During the 18AB, FY18 period, the observed performance was 5.09 victimizations in a total of 1,610,026 days of care. 86% of the reported maltreatments in care were reported in Clark County, 12.5% were reported in Washoe County, and 1.5% were reported in the rural counties.

Nevada has been consistently lower than the national performance over the last two reporting periods but aims to improve. It was discovered that policy was unclear when determining when an incident is maltreatment that requires a new investigation versus when a maltreatment allegation can be handled through the ongoing case. Nevada has updated the Intake and NIA policies during the PIP and continues to clarify requirements in the Alternative NIA policy to standardize cases of maltreatment in care.

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCE AND STABILITY IN THEIR LIVING SITUATION

Item 4: Stability of Foster Care Placement

Nevada Statutes and Administrative Code supports the placement stability of children in foster care by requiring child welfare agencies to assess the individual needs of the child, and to place that child in the least restrictive environment that is consistent with the identified needs. Relatives are the first placement option considered for all children placed in out-of-home care. Child welfare agencies are also required to place siblings together when possible. The policy requires that the agency provide the foster care provider with appropriate information about the child's family, medical, and behavioral history, as well as discuss the child's plan for permanency, and any needs prior to placement. The purpose of sharing such information is to identify and provide for the most appropriate matched foster home (NRS 424.038(1), NAC 424.465).

NAC further requires that information about the child's situation and needs be continually shared by the child welfare agency and the foster care providers in a timely manner, thereby ensuring that the child's needs are continually addressed with appropriate services (NAC 424.810). NAC supports placement stability by requiring that a foster care provider provide the child welfare agency with 10 working days' notice of any request for the removal of the child from that home unless they have a contrary agreement, or if there are immediate and unanticipated safety issues, thus giving the agency time to respond to issues that may have caused the instability (NAC 424.478). Further, there is a requirement to provide respite for foster care providers (NAC 424.805).

Table 4: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 4 Stability of Foster Care Placement	72.73%			77.19%			80.4%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	72.73%	27.27%		77.19%	22.81%		
	n=40	n=15	n=0	n=44	n=13	n=0	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

The overall federal performance expectation for Item 4 Stability of Foster Care Placement is 90%. Nevada received an area needing improvement rating as only 72.73% of the cases rated a strength in the 2018 CFSR. The state achieved its goal for item 4 during the measurement period that included Q6, Q7, Q8 and Q9 by achieving a strength rating in 80.7% of the cases reviewed, as reported in the PIP Q9 Progress Report. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 4 in 77.19% of cases reviewed. Item 4 will continue to be supported through PIP Team 2 activities. Nevada has developed and completed training for designated staff on both Motivational Interviewing (PIP 2.1.2, 2.1.5) and Trauma Informed Communication (PIP 2.1.3, 2.1.4). These strategies were developed to effectively engage families and assessing key participant needs so that case plans address the identified needs of the family, child, and placement to improve well-being and permanency outcomes. PIP 2.2.4 and 2.2.5 were developed to monitor caseworker contacts with children and parents. Nevada has also developed a rubric to evaluate quality of these caseworker contacts as it is believed that increased frequency and quality of visits will improve engagement leading to timely permanency and improved well-being outcomes. In addition to the CFSR case reviews, Nevada plans to continue monitoring the frequency and quality of the contacts, quarterly, through the SQIC.

Furthermore, Item 4 was supported by PIP Team 3 activities 3.2.2, 3.2.2(A) and 3.3.1. Placement stability is supported as placements with relatives have proven to be more stable long term, and better for the youth's well-being. Key activities 3.2.2 and 3.2.2(A) required updates to the KinGAP policy to soften the language and provide more flexibility. The policy underwent minor revision to include fictive kin as relatives pursuant to NRS 422A.500 to 422A.600.

During this past year, all three Nevada child welfare agencies have continued to access the asynchronous trainings. Each agency developed an individual plan to ensure follow up and adherence to policy to assist staff in utilizing Guardianship and KinGAP as appropriate. The Capacity Building Center for States along with the AOC/CIP presented a refresher segment for the KinGAP Practice Guide created for item 3.2.2 and provided a learning circle to educate dependency stakeholders at the CIC Summit in September 2021. Additionally, the AOC/CIP and Capacity Building Center presented the information from the CIC Summit and learning circle to Clark County to provide further outreach to the court stakeholders. Both child welfare staff and dependency stakeholders were trained on the same concepts as it relates to KinGAP so that they may work collaboratively on the process and utilize KinGAP when it is in the child's best interest. The child welfare supervisors attended learning circles, in May and June 2021, which discussed the proper use of KinGAP, the how and why behind KinGAP, who makes KinGAP decisions, who can receive KinGAP, and provided an open forum for discussions related to improvements in practice. Out of these learning circles a job aid was created for child welfare supervisors and staff to utilize when working with a KinGAP family. The job aide was provided to the child welfare agencies in October of 2021.

Table 4a: Placement Stability

National Performance	Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
				Lower CI*	RSP	Upper CI
4.44 moves per 1,000 days in care	AFCARS 19A - 19B	↓	5.52	5.75	5.99	6.24
	AFCARS 20A - 20B	↓	4.46	4.64	4.86	5.09
	AFCARS 21A – 21B	↓	5.36	5.69	5.95	6.22

Nevada Child and Family Services Review (CFSR 3) Data Profile January 2022.

Red = states performance using RSP interval is statistically worse than national performance

Gray = states performance using RSP interval is statistically no different than national performance

Blue = states performance using RSP interval is statistically better than national performance

For this performance indicator, a lower RSP value is desirable. *CI = Confidence Interval

Nevada is one point worse than the national performance. Placement stability is being addressed through PIP Goals 2 and 3.

Item 4 was not met within the PIP's Q8 timeframe and Nevada was extended on its PIP into the non-overlapping year to support Team 2 and Team 3 activities. In efforts to identify barriers to placement stability, Nevada conducted an additional review of CFSR data. When presented with data from the last four quarters, barriers included identifying an appropriate placement for the mental health and/or behavioral health needs of a child, providing support to caregivers, including how to manage behaviors based on the child's age and developmental needs, and the lack of placement options qualified to address mental/behavioral health needs within Nevada. The state developed goals, with consideration of regional differences, to help address placement stability. Over this past year, the state created workgroups focused on identifying age specific and developmental trainings. These trainings are for caregivers to learn what behavior and development challenges a youth is facing during certain developmental stages. Additionally, in some areas of the state, agencies are utilizing technology programs/applications that will help identify the best placement options to benefit the child, in efforts to minimize placement changes and disruptions. Additionally, agencies are reviewing the practice of utilizing shelter/emergency placements to ensure that youth are placed appropriately, and when placed there, ensure timely progress is being made to move the youth into the least restrictive placement.

Item 5: Permanency Goal for Child

NRS 432B.393, .540, .553, .580 and .590 require agencies that provide child welfare services to adopt a plan for permanency in accordance with the requirements and timeframes in the Adoption and Safe Families Act of 1997 (ASFA); including periodic case review by the courts. NAC 423B.013, .1364, .1366, .160, .180, .185, .190, .200, .210, .240, .261, .2625 and .263 provide the authority and requirements for assessing the child's safety needs, child and family strengths, needs and risk factors to determine the most appropriate permanency goal(s).

The statewide 0204 Permanency and Case Planning Policy, the 0508/0509 Nevada Initial Assessment (NIA) Policies, and Concurrent Planning Guide were updated because of PIP key activities 3.2.1 and 3.3.3. These policies provide the foundation for the development of permanency planning.

Table 5: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP item
Item 5 Permanency Goal for Child	41.82%			56.14%			50.3%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	41.82% n=23	58.18% n=32	n=0	56.14% n=32	43.86% n=25	n=0	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

The overall federal performance expectation for Item 5 Permanency Goal of Child is 90%. Nevada's received an area needing improvement for this item with a 41.82% statewide rating for the CFSR review in 2018. The state achieved its goal for item 5 during the first measurement period that included Q1, Q2, Q4 and Q5 by achieving a strength rating in 70.69% of the cases reviewed, as reported in the PIP Q4 Progress Report. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 5 in 56.14% of cases reviewed.

Item 6: Achieving Reunification, Guardianship, Adoption or Other Planned Permanent Living Arrangement

Reunification: NRS 432B.393 requires agencies to make reasonable efforts to prevent a child's removal from the parents' home, or, if removal is necessary, reasonable efforts to make their safe return possible. NRS 432B.540 requires that if the agency believes it necessary to remove the child from the physical custody of his/her parents, the agency must submit a plan designed to achieve placement of the child in a safe setting as near to the residence of his/her parent as is possible and consistent with the best interests and special needs of the child. NAC 432B.190, .200, .210 and .220 outline case planning requirements with an emphasis on the ways in which the agency is to engage the family and their natural, informal supports to strengthen parental capacities.

Guardianship: Nevada Revised Statutes 432B.466 through .468 allows for guardianship. The statewide 1010 Kinship Guardianship Assistance Program (KinGAP) Policy has been revised and the policy now allows fictive kin to be considered for guardianship.

Other Planned Permanent Living Arrangement (OPPLA): Nevada statutes and policy require that a written case plan be developed for children with this permanency goal and that the plan includes programs and services designed to assist older youth in transitioning out of care. NAC 432B.410 requires child welfare services to ensure that each child in foster care who is eligible for services related to independent living has a written plan for transitional independent living based on the assessment of the youth's skills. Statewide policy 0801 Youth Independent Living Program was developed to address the needs of youth who were likely to remain in care until their 18th birthday and to prepare them for the transition into adulthood. This policy requires agencies that provide child welfare services to establish self-sufficiency goals for youth beginning at age 14. The planning process must be youth focused and driven with an emphasis on the youth's expressed interests, needs, and priorities.

Adoption: NRS 432B.390 specifically mandates that relatives of the child within the fifth degree of consanguinity, or fictive kin, be given preference for placement, when removal from the parents' home is necessary for the child's safety.

NRS 432B.553 requires agencies which provide child welfare services to adopt a plan for the permanent placement of the child for review by the court. NRS 432B.580 requires a semi-annual court review for the child's placement. NRS 432B.590 mandates a court review of the progress toward achievement of the permanency goal at a minimum of six-month intervals. NRS 432B.590 requires that if a child has been placed outside of the home and has resided outside of the home pursuant to that placement for 14 months of any 20 consecutive months, the best interests of the child must be presumed to be served by the termination of parental rights. This is more stringent than the federal requirement of 15 out of 22 months. NAC 432B.2625 requires the agency to identify and document the obstacles to placement of the child, and to specify the steps needed to find an appropriate home for the child in a report to the court if a child has not been placed into an adoptive home within 90 days after the termination of parental rights.

Statewide policies, 0204 Case Planning and 0103 Adoption of Children aged 12 and over, indicate that adoption is the preferred permanency goal when it is determined that a child

cannot be reunited with his or her birth family. The 1001 Diligent Search Process and Notice policy directs agencies to begin search activities and identification of family members during the initial contact with the family and requires that they are initiated no later than at the time the Safety Plan is completed. Statewide policy 0514.0 Termination of Parental Rights (TPR), in compliance with ASFA, requires that adoption proceedings be completed within 24 months of the child's entry into foster care.

The Adoption Call to Action Team (ACTA Team) consists of membership from the three child welfare agencies, Raise the Future (formally the Adoption Exchange), and the Family Programs Office. The Family Programs Office Adoption Specialist leads the ACTA meetings and is a participant on the CIP. The team meets monthly to review adoption programming, address statewide needs, policies, procedures, and progress with the goal of reducing the number of Nevada children and youth waiting to be adopted by identifying and eliminating barriers to achieving permanency.

Since the ACTA Team began meeting in the Fall of 2019, three strategies have been identified by the group surrounding data, permanency, and targeted recruitment. Successes include:

- Monthly updates from Raise the Future on Wendy's Wonderful Kids (WWK) Recruiters. All NV jurisdictions are using the WWK recruiters to help increase statewide adoptions and several success stories have come from finding family members. This ongoing contact strengthens the partnership between the State and Raise the Future.
- (FPO) participated on both PIP Team 3 and the ACTA Team as well as other ACTA Team members from other jurisdictions. Consistency between the statewide PIP and specialized teams such as ACTA allow for unity in successful strategies and program outcomes and ensure communication throughout the state.
- Jurisdictions are coming together to discuss overall adoption topics such as subsidy, child welfare worker safety in the field, resources, contacts, documentation, trainings, funding sources, community events, policies, and procedures, etc. This was not done formally in the past.
- New statewide adoption policies have been drafted and written from workgroups that have been established from the ACTA Team.
- FPO Adoption Specialist, representatives from Raise the Future, and adoption child welfare workers representing different jurisdictions participated in review of statewide data through the DR/ACTA workgroup to better understand challenges and barriers in the foster-adoption process.

Performance Item 6 is being addressed by the following PIP key activities:

- 3.1.3 increases the use of mediation to achieve timely permanency through training to the child welfare workforce
- 3.2.1 and 3.2.1A address concurrent planning
- 3.2.2 and 3.2.2A develops protocols and practice guide to improve the understanding of KinGAP as an alternate permanency plan
- 3.3.3 improves diligent search of relative caregivers
- 3.4.1 initiates practice changes to streamline and expedite the termination of

parental rights (TPR) process; thereby reducing the time to permanency in adoption cases

Table 6: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 6: Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement	18.18%			47.37%			24.8%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	18.18% n=10	81.82% n=45	n=0	47.37% n=27	52.63% n=30	n=0	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QRT 9, DCFS Rural Region PIP Monitored 2022 QRT 10.

The overall federal performance expectation for Item 6 Achieving Reunification, Guardianship, Adoption, and OPPLA is 90%. Nevada received an area needing improvement as only 18.18% of the cases reviewed rated a strength in the 2018 CFSR. The state achieved its goal for item 6 overall during the first measurement period that included Q1, Q2, Q4 and Q5 by achieving a strength rating in 53.45% of the cases reviewed, as reported in the PIP Q4 Progress Report. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 6 in 47.37% of cases reviewed.

Table 6a depicts Item 6 ratings broken down by permanency goal(s) for the reporting period. All permanency goals were rated a strength in at least 50% of applicable cases, with the lowest percentage of strength ratings with the permanency goals of guardianship (50%) and adoption (53.85%), and the highest percentage of strength ratings with the permanency goals of OPPLA (66.67%) and reunification (66.67%). The goals of guardianship and adoption were excluded due to the inclusion of only 1 case.

Table 6a: Item 6 Data by Permanency Goal(s)

Permanency Goal(s)	NV CQI S	NV CQI ANI
Adoption n=23	26.09% n=6	73.91% n=17
Guardianship n=5	60.00% n=3	40.00% n=2
Guardianship, Adoption n=1	0.00% n=0	100.00% n=1
Other Planned Permanent Living Arrangement n=3	100.00% n=3	0.33% n=0
Reunification n=15	66.67% n=10	33.33% n=5
Reunification, Adoption n=10	50.00% n=5	50.00% n=5

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

Table 6b: Permanency for Children in Foster Care

National Performance		Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
					Lower CI*	RSP	Upper CI
12 months for children entering foster care	42.7%	AFCARS 17A-17B	↑	44.6%	42.1%	43.9%	45.6%
		AFCARS 18A-18B	↑	44.2%	41.8%	43.5%	45.4%
		AFCARS 19A-19B	↑	41.6%	39.4%	41.2%	43.0%
12 months for children in care 12-23 months	45.9%	AFCARS 19A - 19B	↑	46.0%	40.2%	42.7%	45.1%
		AFCARS	↑	46.1%	41.1%	43.6%	46.2%

		20A-20B					
		AFCARS 21A-21B	↑	46.61%	41.2%	43.6%	46.1%
12 months for children in care 24 months or more	31.8%	AFCARS 19A- 19B	↑	50.1%	36.9%	39.0%	41.1%
		AFCARS 20A-20B	↑	48.3%	34.9%	36.9%	38.9%
		AFCARS 21A-21B	↑	45.4%	33.4%	35.5%	37.6%
Re-entry to foster care	8.1%	AFCARS 17B-17A	↓	5.6%	5.1%	6.3%	7.8.0%
		AFCARS 18A-18B	↓	4.7%	4.3%	5.5%	6.9%
		AFCARS 19A-19B	↓	4.0%	3.7%	4.9%	6.3%

Red = states performance using RSP interval is statistically worse than the national performance
Gray = states performance using RSP interval is statistically no different than the national performance
Blue = states performance using RSP interval is statistically better than the national performance
Nevada Child and Family Services Review (CFSR 3) Data Profile January 2022. *CI = Confidence Interval

The State Data Profile indicates that permanency in Nevada was achieved in:

- 12 months for children who enter foster care is no different than the national performance
- 12 months for children in care 12-23 months is improving but is slightly worse than the national performance
- 12 months for children in care 24 months or more continues to be better than the national performance.

The State Data Profile indicates that Nevada's re-entry to foster care continues to be better than the national performance.

When looking at data statistics in table 6b information regarding the performance for 12 months for children in care 12-23 months the following trends were noted:

Regional Statistics: A regional snapshot puts Clark at 45.7% for FY2018 and 46.6% for FY2019. Washoe came in at 48.5% in FY2018 and 42.1% for FY2019. The Rural Region showed 47.2% in FY2018 then saw an increase to 48.2% in FY2019.

Age Statistics: For children in the 1-to-5-year age range the state was at 54.9% in FY2018 and 51.6% for FY2019. For children in the 6-to-10-year age range the state was at 41.2% in FY2018 and 42.6% for FY2019. For children in the 11-to-16-year age range the state was at 33.2% in FY2018 and 38.5% for FY2019. For children at the age of 17 the state was at 11.4% in FY2018 and 6.7% for FY2019.

Nevada believes multiple issues contribute to the low performance, including the social summary process is time consuming and not standardized, poor use of concurrent planning and delays in the court process. All these items were addressed by PIP Team 3 and Nevada is hopeful to see an improvement in the performance of this item in the foreseeable future.

Moving forward, disaggregated data will be presented at SQIC meetings for discussion around identifying areas in need of improvement geographically and by age.

PERMANENCY OUTCOME 2: CONTINUITY OF FAMILY RELATIONSHIPS IS PRESERVED FOR CHILDREN

PIP Progress Report: Permanency Outcome 2 is not included in Nevada's PIP, however, Goals 2 and 3 do support improvement in these areas. Analysis of data will be discussed as part of the PIP Core team's SQIC (See COLLABORATION) role following case reviews.

Item 7: Placement with Siblings

NRS 432B.580, NR432B.390 as well as the statewide 1001 Diligent Search Process and Placement Decisions policy, requires that children be placed together unless there is justification for not doing so based on the best interest of the child. NRS 432B.3905 specifies that a child under the age of 6 may not be placed in a childcare institution unless appropriate foster care is not available in the child's home county and reasonable efforts are made to place the child's siblings in the same location, or if placement in a childcare institution is required for the child to access medical services or to avoid separating siblings. NRS 432B.550 creates a presumption that it is in the best interest of the child for siblings to be placed together and 432B.580 (2) (b) requires that, if siblings are not placed together, there must be a report made to the court detailing the agency's efforts in this area, including a visitation plan for approval by the court. NRS 432.525 – NRS 432.530 established a Sibling Bill of Rights. The state continues to be committed to ensuring siblings are placed together.

Nevada is not on a PIP for this item but does continue to work to improve sibling placements through 3.2.2 and 3.3.1.

Table 7: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
	87.5%			94.74%			N/A
Item 7: Placement with Siblings	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	87.5%	12.5%	0%	94.74%	5.26%		
	n=35	n=5	n=15	n=36	n=2	n=19	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

The overall federal performance expectation for Item 7 Placement with Siblings is 90%. Nevada received an area needing improvement rating as only 87.5% of the cases rated a strength in the 2018 CFSR. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 7 in 94.74% of cases reviewed.

Item 8: Visiting with Parents and Sibling in Foster Care

NRS 423B.550(3)(a) provides that a parent of a child that has been removed from the home retains the right to reasonable visitation with the child unless this right has been restricted by the court. The NAC 432B.400(2)(o) requires that the case plan specifically provides for family visitation, including, without limitation, visiting siblings if the siblings are not residing together. NAC 432B.220 requires an arrangement of regular and frequent visits with parents and siblings for a child who is placed outside of his home.

Statewide policy on case planning (0204) requires that a plan for frequent and purposeful visitation with parents and siblings, for the purpose of family preservation, be included in the case planning documentation. Visitation between children and parents, and children and separately placed siblings, must be regular, frequent, and purposeful to facilitate family preservation. The caseworker shall not limit visitation as a sanction for the parent's lack of compliance with court orders or as a method to encourage a child to improve his/her behaviors. Visitation is determined by the best interest, health, safety, and well-being of the child. Visitation shall only be limited or terminated when the child's best interest, safety, health, or well-being is compromised. In addition, recommendations to limit or terminate visitation must be presented to the court.

Nevada is not on a PIP for this item; however, there are several PIP activities that support continuous improvement in this activity such as trauma training, motivational interviewing, increasing the quality and frequency of visits with children, and case planning.

Table 8: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
	67.5%			62.22%			N/A
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
Item 8: Visiting with Parents and Sibling in Foster Care	67.5% n=27	32.5% n=13	n=15	62.22% n=28	37.78% n=17	n=12	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

The overall federal performance expectation for Item 8 Visiting with Parents and Siblings in Foster Care is 90%. Nevada received an area needing improvement rating as only 67.5% of the cases rated a strength in the 2018 CFSR. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 8 in 62.22% of cases reviewed.

Item 9: Preserving Connections

NRS 432B.390 requires that priority be given to family members for placement of children who are removed from their birth families unless doing so would not be in the best interest of the child. DCFS policy 1001 Diligent Search and 1003 Kinship Care requires workers to complete a diligent search for any possible adult family members. Once located, those identified family members are assessed for appropriateness in much the same manner as regular family foster care providers. NRS 432B.560 grants a reasonable right of visitation to grandparents. NRS 432.525-535 establishes a bill of rights for foster children that includes reasonable participation in extracurricular, cultural, and personal enrichment activities that are consistent with the age and developmental level of the child and to attend religious services of his or her choice. Statewide policy 0213 Visitation Policy supports efforts to maintain the continuity of family relationships and preserve connections for children. This policy has been reviewed under PIP activity 2.1.6 and helps to strengthen this item even though it is not a PIP requirement.

NAC 424.495 requires foster homes to give children the opportunity to invite friends to the foster home and to visit in the homes of friends, if appropriate. State policy 0504 Indian Child Welfare Act (ICWA) prioritizes the recognition of a child being an Indian child and assures that the child's tribe be contacted immediately when an Indian child is taken into custody. The Tribe then becomes an active participant in any further proceedings regarding the child.

Nevada's Just in Time web-based training offered through the Quality Parenting Initiative program in Nevada includes training on fostering and nurturing cultural and family

connections.

Table 9: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
	74.55%			77.19%			N/A
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
Item 9: Preserving Connections	74.55%	25.45%		77.19%	22.81%		
	n=41	n=14	n=0	n=44	n=13	n=0	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QRT 9, DCFS Rural Region PIP Monitored 2022 QRT 10.

Nevada is not on a PIP for Item 9; however, the overall federal performance expectation for Item 9 Preserving Connections is 90%. Nevada received an area needing improvement rating as 74.55% of the cases rated a strength in the 2018 CFSR. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 9 in 77.19% of cases reviewed.

Item 10: Relative Placement

NRS 432B.390 and NRS 432B.480 require that priority be given to family members for placement of children who are removed from their birth families unless doing so would not be in the best interest of the children. NRS 432B.550 requires placement preference with a relative within the fifth degree of consanguinity or fictive kin who is suitable and able to provide proper care and guidance. NRS 432B.510 requires relative notification when parents are unable to be found.

Nevada is not on a PIP for this item; however, several key activities in Goal 3 focused on improvement to the diligent search process and the extended use of KinGAP.

Table 10: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 10: Relative Placement	52.73%			75.0%			N/A
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	52.73%	47.27%	n=0	75.0%	25.0%	n=1	
	n=29	n=26		n=42	n=14		

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

The overall federal performance expectation for Item 10 Relative Placement is 90%. Nevada received an area needing improvement rating as only 52.73% of the cases rated a strength in the 2018 CFSR. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 10 in 75.0% of cases reviewed.

Item 11: Relationship of child in care with parents

NRS 432.525-535 established a bill of rights for foster children that includes maintaining contact with parents and family; and the right to reasonable participation in extracurricular, cultural, religious, and personal enrichment activities that are consistent with the age and developmental level of the child. The Foster Child Bill of Rights and the Foster Youth Bill of Rights are maintained on the DCFS website. Statewide policy 1011 Reasonable and Prudent Parent Standard / Normalcy provides guidance to support normalcy for children through the Reasonable and Prudent Parent Standard in foster care by ensuring the status of being in foster care does not limit their ability to experience and participate in community, school, family, or social activities.

Nevada's Just in Time web-based training which is part of the Quality Parenting Initiative program in Nevada for foster parents includes training on fostering and nurturing cultural and family connections. Additionally, the PIP key activity (2.1.3, 2.1.4, and 3.1.1) providing trauma informed training increases workers' understanding of the impact of parent-child separation.

Table 11: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 11: Relationship of child in care with parents	62.07%			63.16%			N/A
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	62.07%	37.93%		63.16%	36.84%		
	n=18	n=11	n=26	n=24	n=14	n=19	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QRT 9, DCFS Rural Region PIP Monitored 2022 QRT 10.

Nevada is not on a PIP for this item. The overall federal performance expectation for Item 11 Relationship of Child in Care with Parents is 90%. Nevada received an area needing improvement rating as only 62.07% of the cases rated a strength in the 2018 CFSR. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 11 in 63.16% of cases reviewed.

This past year, COVID-19 had a declining impact for the child welfare agencies across the state. Over the course of the last year in person caseworker visits, as well as visitation between children and their parents or siblings gradually returned to almost normal conditions. As mask mandates and COVID-19 restrictions were gradually lifted over time the availability of supportive services for families has become more available. Opportunities to involve parents in routine medical appointments, school activities and or extracurricular activities have started to see an increase from the prior year. Since the PUR for several of the case reviews included 2021 COVID-19 could still have some minor impacts to the state's performance on this item.

Over the next year, the state will continue to assess the impact of initiatives and training put into place through PIP activities since Q1. The state plans to look at the impacts that motivational interviewing training, trauma informed communication training and CoachNV have had on the permanency and well-being outcomes for children and families. Throughout the state, efforts to promote and increase the utilization of the QPI model have continued to increase.

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

Item 12: Needs and services of child, parents, and foster parents

Policies 0508 and 0509 Nevada Initial Assessment and 0211 Protective Capacity Family Assessment guide initial assessments of parents and children. NRS 432B.300 and 432B.393 require child welfare agencies to provide services to preserve families, prevent the placement of children if possible, and, if not possible, provide a plan describing those

services that would facilitate the safe return of the child. NAC 432B.190, .200,.210, and .240 requires agencies to provide case planning and agreements with parents using strengths and resources in planning and requires the agency to provide a range of services to preserve the family. NAC 432B.400, .405, and .410 require the agency to provide case planning and services to children in foster care and their parents. 0502 CAPTA-IDEA Part C policy requires a referral for the developmental screening of children under age three. Policy 0801 Youth Independent Living Program policy was developed to ensure that youth aged 14 and older in foster care receive adequate case planning and services for transition to adulthood. Finally, policy 1301 Training, Assessment and Licensing of Foster, Relative, and Adoptive Homes covers the assessment of the appropriateness of potential foster families, licensed relatives, and adoptive families.

Table 12: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 12: Identifying Needs and Services to Child, Parent and Foster Parent	37.5			45.88%			44.4%
	S	ANI	NA	S	ANI	NA	44.4%
	37.5% n=30	62.5. n=59	n=0	45.88% n=39	54.12% n=46	n=0	
Item12 A Needs Assessment and Services to Children	58.75% n=47	41.25% n=33	n=0	72.94% n=62	27.06% n=23	n=0	<i>Intentionally left blank.</i>
Item 12 B Needs Assessment and Services to Parents	41.07% n=23	58.93% n=33	n=24	50.0% n=35	50.0% n=35	n=15	
Item 12 C Needs Assessment and Services to Foster Parents	73.08% n=38	26.92% n=14	n=28	84.62% n=44	15.38% n=8	n=33	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QRT 9, DCFS Rural Region PIP Monitored 2022 QRT 10.

Nevada is on a PIP for Item 12; the overall federal performance expectation for Item 12 and subparts A, B, C Needs and Services of Child, Parents, and Foster Parents is 90%. Nevada received an area needing improvement rating as only 37.5% of the cases rated

a strength for item 12 overall in the 2018 CFSR. Nevada surpassed its PIP goal of 44.4% in the first measurement period including Q1, Q2, Q4, and Q5 with 45.88% of cases reviewed rated a strength. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 12 overall in 45.88% of cases reviewed.

There has been an increase in performance when comparing the state's strength rating during Q3-Q6 (42.35%) to that of the most recent four quarters Q7-Q10 (45.88%). Results from case reviews, as well as discussions with statewide partners revealed that virtual visits had created some barriers for line staff. The family programs office conducted mini focus groups with each agency, and it was determined that item 12 is being impacted as the agency is not conducting quality assessment of mother's and father's needs. Furthermore, there is a need to connect a quality service to an identified need, and to capture these services within case notes. As the state continues to transition away from virtual visits and return to a 100% in person caseworker contact expectation, there should be a continued improvement on the performance of strength ratings for the state moving forward. Additionally, the agencies, as well the SQIC, continue to look at item 12 to identify barriers and suggest interventions for the declining performance.

Item 13: Child and family involvement in case planning

NAC 432B.190-220 encourages the participation of parents in the case planning process and requires engagement of the child's family in using its own strengths and resources throughout the process for planning services. NAC 432B.400, .405, and .410 requires the agency to provide case planning and services to children in foster care and their parents.

The 0204 Permanency and Case Planning policy provides the connection that ties the findings of the child and family assessments to the identification of the permanency goal(s) and the selection of services including both formal and informal services. It is a collaborative, strength based and solution-focused process that empowers and motivates families to identify solutions that will remove barriers, increase functioning, and build protective capacity. The policy requires a working partnership between the case manager and the family. The family is to be assisted in identifying its strengths, needs, culture, supports, and current resources that will affect its ability to achieve and maintain child safety, child permanency, and child and family well-being through an individualized case plan. In the event a parent is not available or refuses to participate in case planning, the case plan team (foster parents, extended relatives, other providers, and child, if appropriate) must still be formed, and a plan developed. In all cases, every effort must be made and continue to be made to involve parents and children (if age appropriate) in the case planning process.

Performance Item 13 is being addressed by all key activities in PIP Goal 2: Promote effective communication and contact with families.

Table 13: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 13: Child and family involvement in case planning	48%			53.16%			55.4%
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	48% n=36	52% n=39	n=5	53.16% n=42	46.84% n=37	n=6	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark: Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

Nevada is on a PIP for Item 13. The overall federal performance expectation for Item 13 Child and Family Involvement in Case Planning is 90%. Nevada received an area needing improvement rating as only 48% of the cases rated a strength in the 2018 CFSR. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 13 in 53.16% of cases reviewed, falling short of our PIP goal to date.

The state continued to make improvements in this item but has yet to meet its PIP goal. The state continues to assess barriers to improved performance. Over the past year, COVID-19 restrictions were lifted for the child welfare agencies across the state. Caseworker visits with parents, children and caregivers have for the most part returned to in person in most areas of the state. The state has seen a consistent increase in this item over the last three quarters.

This past year, PIP Team 2 continued its efforts to develop and refine UNITY reports that track caseworker contacts with parents and children. The state utilized the data from these reports, as well as data from ongoing case reviews, to effectively track statewide performance and continue to identify the opportunities for improvement in target areas. Team 2 also completed an extensive root cause analysis related to this item and identified strategies to increase child and family involvement in the case planning process. Over the next year, the state will continue to review all data related to this item to further assess, identify, and impact any barriers to improved performance.

Additionally, the state continues to explore different types of messaging aimed at improving practice with family engagement. Strategies such as more targeted email and visually driven messaging for the workforce are being implemented and ideas on how to sustain the delivery of that messaging are being explored. Feedback loops and eliciting feedback from families, youth and other stakeholders are action items in the CQI Action Plan developed by PIP Team 4 and will inform messaging and strategies to improve practice.

Item 14: Caseworker visits with child

In accordance with 45 CFR 1355.20, and NAC 432B.405 requiring that children in foster care or children under the placement and care responsibility of a Child Welfare Agency who are placed away from their parents must be visited by their caseworker at least once every calendar month. When a child is placed in foster care, this visit must occur where the child resides in at least 50% of those months. During caseworker visits with children, the caseworker (or other responsible party) must spend a portion of the visit with the child outside the presence of the care providers and a portion of the time alone with the care providers/foster parents if requested. The NAC 432B.405 and state policy 0205 Case Worker Contact with Children, Parents, and Caregivers requires that each child in foster care will be visited by his or her case worker (or other responsible party) at least once every calendar month. A “visit” is defined as a face-to-face in-person contact between the child and the child’s case worker (or other responsible party). Due to COVID-19 and the national health emergency, virtual visits were allowed in lieu of face-to-face in-person visits when appropriate.

PIP Key Activities 2.2.2, 2.2.3, 2.2.4, and 2.2.5 are evaluating and enhancing reports to monitor the frequency and quality of child contacts.

Refer to Update to Service Description Section: [Monthly Caseworker Visit Formula Grants](#) and Standards for Caseworker Visits.

Table 14: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 14: Caseworker visits with child	55%			69.41%			62.1%
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	5%	45%		69.41%	30.59%		
	n=44	n=36	n=0	n=59	n=26	n=0	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

The overall federal performance expectation for Item 14 is 90%. Nevada received an area needing improvement rating as only 55% of the cases rated a strength in the 2018 CFSR. The state achieved its goal for Item 14 during the first measurement period that included Q1, Q2, Q4 and Q5 by achieving a strength rating in 74.12% of the cases reviewed, as reported in the PIP Q4 Progress Report. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 14 in 69.41% of cases reviewed.

Item 15: Caseworker visits with parents

DCFS policy 0205 Caseworker Contact with Children, Parents and Caregivers requires that caseworker contacts focus clearly on case planning, service delivery, safety, strengths and needs of the child and family, family progress and identification of resources and services the family needs to achieve case plan goals.

Performance Item 15 is being addressed by PIP Activities:

- 2.2.2, 2.2.3, 2.2.4 and 2.2.5 focus on quality assurance of case worker contacts through report development and use of data to strengthen quality and frequency.
- 2.1.7 through partnership with FPO, the child welfare agencies developed a statewide newsletter to inform staff of CFSR findings and best practices.

Table 15: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 15: Caseworkers Visits with Parents	46.3%			48.57%			55%
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	46.3%	53.7%		48.57%	51.43%		
	n=25	n=29	n=26	n=34	n=36	n=15	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

The overall federal performance expectation for Item 15 Caseworker Visits with Parents is 90%. Nevada received an area needing improvement rating as only 46.3% of the cases rated a strength in the 2018 CFSR. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 15 in 48.57% of cases reviewed, falling short of our PIP goal to date.

The state has continued to make improvements in this item but has yet to meet its PIP goal. The state continues to assess barriers to improved performance. Over the past year, COVID-19 restrictions were lifted for the child welfare agencies across the state. Caseworker visits with parents, children and caregivers have for the most part returned to in person in most areas of the state. The state has seen a consistent increase in this item over the last three rolling quarters.

Over the past year, efforts have continued by PIP Team 2 to develop and refine UNITY reports to track caseworker contacts with parents. Team 2's continued goal is to utilize the data from these reports, as well as data from ongoing case reviews, to track statewide performance and identify opportunities to improve Team 2 completed an extensive root

cause analysis related to this item and identified strategies to increase quality contact with parents. Data trends reflect the state still falls short of maintaining proper contact with parents, particularly those who are incarcerated. Over the next year, the state will continue to diligently review the data from these reviews to further drive quality contacts with parents to improve performance.

The state continues to explore different types of messaging aimed at improving parental contacts and driving quality engagement. Strategies such as more targeted email and visually driven messaging for the workforce relating to contact requirements and expectations are being implemented. Ideas on how to sustain the ongoing delivery of that messaging are being explored. Feedback loops and eliciting feedback from families, youth and other stakeholders are action items in the CQI Action Plan developed by PIP Team 4 and will inform messaging and strategies to improve practice.

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

PIP Progress Report: This outcome is indirectly tied to Nevada's PIP Goal 2 as it addresses contact with families and engagement. Nevada is not on a PIP for Well-being Outcome 2 or Item 16.

Item 16: Educational Needs

NRS 388E Education of Children in Foster Care and NAC 388E Program of School Choice for Children in Foster Care authorizes the legal guardians or custodians of certain children who are in foster care to apply to the Department of Education to participate in the program which allows such children to choose the school of their choice or remain at the school they were attending prior to being removed from their caretaker. NRS 432B.540 requires educational reports be provided to the court. NRS 432B.580 requires a copy of an academic plan or any other education records for the child per NRS 388E be included in a report to the court prior to any hearing for review of placement. NRS 432B.462 establishes an educational decision maker for all children in foster care. The decision maker shall meet with the child, address disciplinary issues, ensures the child receives a free and appropriate education has access to special programs; and if the child is over 14 participates in transition planning. The decision maker can serve as a surrogate parent for children on an IEP. NRS 432.535 establishes a bill of rights related to education and vocational training for foster children.

Policy 0204 Permanency and Case Planning requires that the child's educational needs be addressed in the case plan including guidelines to support educational stability and to ensure foster parents receive needed child educational records.

Table 16: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 16: Educational Needs of the Child	72.31%			70.59%			N/A
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	72.31%	27.69%		70.59%	29.41%		
	n=47	n=18	n=15	n=36	n=15	n=34	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

Nevada is not on a PIP for Item 16. The overall federal performance expectation for Item 16 Educational Needs of the Child is 90%. Nevada received an area needing improvement rating as only 72.31% of the cases rated a strength in the 2018 CFSR. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 16 in 70.59% of cases reviewed. Over the next year, the child welfare agency will be creating educational data reports which will inform messaging and strategies to improve practice

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

PIP Progress Report: This outcome is indirectly tied to Nevada's PIP Goal 2 as it addresses contact with families and engagement. Nevada is not on a PIP for Well-being Outcome 2.

Item 17: Physical Health of the Child

Statewide Policy 0207 Health Services supports these mandates by outlining processes to ensure that physical, developmental, and mental health needs of custodial children are identified and diagnosed through Early Periodic Screening Diagnostic Treatment (EPSDT) standardized, periodic screenings. Children not requiring immediate medical attention and/or mental health treatment receive a Nevada Medicaid Healthy Kids screening exam (EPSDT) within thirty (30) days of entering custody. EPSDT screening exams are preventative and diagnostic services designed to evaluate the general physical and mental health, growth, development, and nutritional status. The Medicaid Healthy Kids program encourages providers to follow the recommended periodicity schedule set forth by the American Academy of Pediatrics (AAP).

Additionally, statewide policy 0502 CAPTA-IDEA requires, as part of the CAPTA Part-C Requirement for Custodial and Non-Custodial Children, that all children under the age of three, for a developmental assessment where there is a diagnosed physical or mental

condition that has a high probability of resulting in a delay. Lastly, section 422(b) (15) (a) of the Social Security Act requires states to develop a plan for the ongoing oversight and coordination of health care services for children in foster care.

Table 17: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 17: Physical Health of the Child	51.52%			66.67%			N/A
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	51.52% n=34	48.48% n=32	NA n=14	66.67% n=42	33.33% n=21	NA n=22	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable
Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QRT 9, DCFS Rural Region PIP Monitored 2022 QRT 10.

Nevada is not on a PIP for Item 17. The overall federal performance expectation for Item 17 Physical Health of the Child is 90%. Nevada received an area needing improvement rating as only 51.52% of the cases rated a strength in the 2018 CFSR. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 17 in 66.67% of cases reviewed. Over the past year, the child welfare agency created EPSDT data reports which will continue to inform messaging and strategies to improve practice.

Item 18: Mental Health of the Child

Policies 0508 and 0509 Nevada Initial Assessment and 0211 Protective Capacity Family Assessment guide initial assessments of parents and children. Policy 0207 Health Services supports these mandates by outlining processes to ensure that physical, developmental, and mental health needs of custodial children are identified and diagnosed through Early Periodic Screening Diagnostic Treatment (EPSDT) standardized, periodic screenings. Children not requiring immediate medical attention and/or mental health treatment receive a Nevada Medicaid Healthy Kids screening exam (EPSDT) within thirty (30) days of entering custody. EPSDT screening exams are preventative and diagnostic services designed to evaluate the general physical and mental health, growth, development, and nutritional status. The Medicaid Healthy Kids program encourages providers to follow the recommended periodicity schedule set forth by the American Academy of Pediatrics (AAP). Additionally, 0214 Commercially Sexually Exploited Children requires that all children involved with the Agency, aged ten (10) years and older, will be screened using the Nevada Rapid Indicator Tool (NRIT) to assess if a child is 1) A confirmed victim of commercial sexual exploitation, 2) At high risk of commercial exploitation, or 3) No indicators apply to this youth at this time.

NRS 432B.197 states that each agency that provides child welfare services shall establish appropriate policies to ensure that children in the custody of the agency have timely access to and safe administration of clinically appropriate psychotropic medication. The policies must include, without limitation, policies concerning:

- The use of psychotropic medication in a manner that has not been tested or approved by the United States Food and Drug Administration, including, without limitation, the use of such medication for a child who is of an age that has not been tested or approved or who has a condition for which the use of the medication has not been tested or approved;
- Prescribing any psychotropic medication for use by a child who is less than 4 years of age;
- The concurrent use by a child of three or more classes of psychotropic medication;
- The concurrent use by a child of two psychotropic medications of the same class; and
- The criteria for nominating persons who are legally responsible for the psychiatric care of children in the custody of agencies which provide child welfare services pursuant to NRS 432B.4681 to 432B.469, inclusive, and the policies adopted pursuant to this section.

Statewide policy 0209 Psychiatric Care and Treatment states that the child welfare agency will nominate a *“person legally responsible for the psychiatric care of a child,”* for appointment by the Court, for any child entering custody or currently in custody with a prescription for psychotropic medication or who the child welfare agency determines may need.

Table 18: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 18: Mental/Behavioral Health of the Child	66.66%			61.22%			N/A
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	N=37	39.34% n=24	n=19	61.22% n=30	38.78% n=19	n=36	

S=Strength, ANI=Area Needing Improvement, NA=Not Applicable

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored 2021 QTR 7 (metro), Washoe County CFSR PIP Monitored 2021 QTR 8, Clark County CFSR PIP Monitored 2022 QTR 9, DCFS Rural Region PIP Monitored 2022 QTR 10.

Nevada is not on a PIP for Item 18. The overall federal performance expectation for Item 18 Mental/Behavioral Health of the Child is 90%. Nevada received an area needing improvement rating as only 66.6% of the cases rated a strength in the 2018 CFSR. The results of case reviews conducted during the most recent four quarters reflect the state achieved a strength rating for Item 18 in 61.22% of cases reviewed.

SYSTEMIC FACTOR A: STATEWIDE INFORMATION SYSTEM

PIP Progress Report: This Systemic Factor is tied to Nevada's PIP key activities in Goal 4 (Key Activities 4.3.1, 4.3.4, and 4.3.5) **Strategy 3:** *Ensure the accuracy of Permanency Case Plan Goal Data in UNITY for children in out-of-home placement by developing policy and conducting reviews (spot checks) to ensure accuracy of the permanency goals.* This strategy focuses on the practice theme of strengthening data collection, tracking, sharing and analysis.

Item 19: Statewide Information System

UNITY (Unified Nevada Information Technology for Youth) is Nevada's acronym for the federally mandated Statewide Automated Comprehensive Child Welfare Information System/Case Management tool that holds the official case record for all children and families served by child welfare agencies in the state which is a requirement of PL 103-66. UNITY (UNITY 1.0 and UNITY 2.0) has historically been federally designated as a Statewide Automated Child Welfare Information System (SACWIS). Federal child welfare information system regulations changed in 2016, making SACWIS guidelines obsolete. The new regulations are known as Comprehensive Child Welfare Information System (CCWIS) regulations, and details may be found in 45 CFR § 1355.51 – 1355.58. Nevada declared its intent to follow CCWIS regulations and transition its legacy SACWIS to CCWIS. As of June 2018, UNITY 3.0 (web application) is considered a transitional CCWIS by the Children's Bureau.

As a Transitional CCWIS, Nevada's UNITY development activities must work toward meeting CCWIS project requirements outlined in 45 CFR § 1355.52. Unlike SACWIS requirements which mandated that information systems contain certain functionality, CCWIS regulations emphasize activities that will support efficient, effective, and economical design, including the ability to collect federally required data (such as data for AFCARS, NCANDS, and NYTD). CCWIS systems must also include automated functions to support data quality and must implement certain bi-directional data exchanges. States must develop, implement, and maintain a CCWIS Data Quality plan, including it as a part of Advanced Planning Documents (APD) submitted annually to the Children's Bureau. Additionally, states must conduct biennial data quality reviews.

Information in the statewide assessment showed that Nevada's information system can identify the status, demographics, location, and goals of every child who is or within the last preceding 12 months was in foster care. AFCARS error reports are disseminated to each child welfare agency that flags issues with placement locations and permanency goals. Item 19 was rated as an ANI due to user error or oversight and no validation of data accuracy. These issues are addressed through Nevada's PIP Goal 4: Improve Statewide Child Welfare Outcomes by developing and strengthening the Statewide

Quality Assurance System, specifically through Key Activities 4.3.1, 4.3.4, and 4.3.5. To support data quality improvement, IS and data staff are embedded in PIP Teams for Goal 4 to support communication and feedback loops.

Item 19 was addressed by work completed in Q1 for key activity 4.3.1. The findings from key activities 4.3.1 were utilized by the SQIC team to develop statewide policy requirements for establishing permanency goals and UNITY documentation. As part of the work for PIP Activity 3.2.1 completed on 7/31/2020, these requirements were included in the revision of the 0204 Permanency and Case Planning policy. The revisions included clarifying the timeframes for when a case plan goal must be entered in UNITY. PIP activity 4.3.4 further supports the CQI process and this item by conducting statewide semi-annual spot checks to determine if permanency goals in UNITY match court orders in case files.

In January of 2020, spot check results indicated 88% of goals in UNITY matched goals in the most recent court order. In January of 2021, the results had increased to 93%. In the next year, the state will monitor performance during these spot checks to determine if further review of policy, training or job aids will be needed. Improving data entry and developing processes for the validation of data are action items in the CQI Action Plan developed by PIP Team 4 and will further support efforts to improve practice in this area.

SYSTEMIC FACTOR B: CASE REVIEW SYSTEM

PIP Progress report: This Systemic Factor is tied to Nevada's PIP Goal 3.

Item 20: Written Case Plan

Nevada has adopted the following state law: NRS 432B.540, 553 and 580 which obligate child welfare agencies to create a plan for permanency when a child is placed in foster care. This plan must include a description of the type of placement, safety and appropriateness of the home or institution including without limitation that the home or institution will comply with the provisions of NRS 432B.3905, and plan for ensuring the child's proper care, a description of the child's needs and a description of the services to be provided to meet those identified needs. The plan must also provide a description of the services to be provided to the parents to facilitate the child's return to the parents' custody or to ensure the child's permanent placement. NRS 432B.580 provides for a semiannual review of the child and family's status, progress on the written case plan and the recommendations for the future treatment or rehabilitation of the family.

NAC 432B.190 requires that all children in foster care in Nevada have a written case plan. All case plans must be reviewed and approved by the supervisor and caseworker at least once every six months. Each case plan must clearly state the plan's goals, objectives, and actions, including who is responsible for each action item. Case plans must be case specific and related to the family's situation, resources, and capacities, and must safeguard the child. Parents must be encouraged to be active participants in the creation of their case plan and engage in processes for receiving services and assistive resources.

Item 20 was rated as an ANI during the 2018 CFSR. The statewide assessment showed that the state does not develop timely initial case plans because of conflicting timelines

within the state's safety model. Additionally, case plans are not routinely developed jointly with parents and diligent search for parents is not consistently conducted.

Performance Item 20 was addressed by PIP Activity 3.2.1 completed on 7/31/2020 by revising 0204 "Permanency and Case Planning" policy. In addition to the updated policy a corresponding Concurrent Planning Practice Guide was completed for training and educational purposes and distribution to the child welfare staff and dependency stakeholders during Q4 (8/1/2020 – 10/31/2020).

This implementation of the concurrent planning process consisted of supervisor training on the updated statewide policy and additional staff training to discuss appropriateness of concurrent planning and identified when its use is most effective. Each agency has continued to utilize their individual plan to ensure follow up and adherence to policy, such as using permanency round tables and supervisory "PIP Talk Tips" to assist staff in developing concurrent plans as appropriate. The Concurrent Planning practice was presented to dependency stakeholders during the annual CIC Summit in September 2021. The CICs were also encouraged to include the practice guide as a tool for continued use. To further support training efforts, an online training was created discussing concurrent planning and the benefits of utilizing it to achieve timely permanency. The child welfare agency staff and dependency stakeholders were trained on the same ideas as it relates to case planning and concurrent planning so that they may work collaboratively on this process. Progress for compliance and improvement has been monitored through the quarterly case reviews beginning in May 2021.

Furthermore, through PIP Item 3.3.1, the state has been utilizing the diligent search contact tracking sheet, which is completed by parents, to help identify family resources, and the statewide standards and training to improve the quality and consistency of the diligent search data. The parent's involvement in identifying relatives have improved relative engagement and help identify important connections for children. Diligent search efforts are now being attached to court reports, and courts are asking the parents for relative information during hearings. Data will continue to be gathered to ensure efforts are enhancing practice.

Item 21: Periodic Reviews

Although Nevada law allows for administrative reviews, Nevada currently only uses judicial reviews. NRS 432B.580 mandates the court to conduct a hearing at least semiannually and within 90 days after a request by a party to any of the prior hearings. The court may also enter an order directing that the placement be reviewed by a panel of at least three persons appointed by the judge (NRS 432B.585). The contents of the hearing must include evaluations and assessments of progress in carrying out the case plan goals for the child in care (NAC 432B.420) and address ASFA requirements on reasonable efforts. DCFS Policy 0206, Court Hearing Notification, further ensures that foster parents and other care providers are afforded the right to be heard in review hearings with respect to children in their care and to offer information about the services received by the child and family.

This item was rated as a strength during the 2018 CFSR. Information in the statewide assessment showed that Nevada ensures that periodic review hearings are held no less

frequently than every 6 months. Jurisdictions closely track the timeliness of periodic review hearings. Stakeholders said that strong scheduling protocols contribute to the jurisdictions' adherence to the 6-month deadlines. Nevada is continuing to ensure this item is a strength through strong partnership with the Court Improvement Program on PIP activities and various initiatives.

Performance Item 21 was addressed by PIP activities 3.1.1, 3.2.3, and 3.1.2 which address caregiver court templates, trauma informed training for judiciary and stakeholders, and development of a guide to help parents, families and fictive understand the dependency court process.

A Trauma-Focused Communication training was developed and delivered via the CIC Summit in September 2019 and the training and ideas were expanded upon during the follow up education and training at the CIC Summit in September 2020. The child welfare agencies continue to support this training with staff and continue to have internal conversations about changing to a trauma focused child welfare culture.

A statewide judicial workgroup developed the Nevada Court Family Guide and the Nevada Courts Road Map. This guide was designed to provide parents, relatives, and caregivers with an overview of the child welfare process, educate the family on their rights, provide an overview of the court process and timeframes, and clarify expectations for parents and families. The courts have received positive feedback regarding the information provided by the Nevada Courts Road Map. These guides are available on various websites including the Nevada QPI website, Foster Kinship website and jurisdictional websites. Additionally, agencies provide a printed copy of these guides in the local offices.

Item 22: Permanency Hearings

NRS 432.590 and NRS 432.393. NRS 432B.590 mandates a permanency hearing be held no later than 12 months from a child's initial removal. When reasonable efforts are not required, pursuant to NRS 432.393, a permanency hearing must occur within 30 days of the judicial finding. Statewide policy 0206 Court Hearing Notification outlines agency requirements for providing and ensuring notification of court hearings to parents and relevant parties. This is being reviewed as part of PIP activities. Statewide policy 0204 Permanency and Case Planning requires agencies to make and finalize permanency plans by no later than 12 months after the child's removal. Statewide policy 514 Termination of Parental Rights (TPR) provides notice to all the parties to any of the prior proceedings and parents and "any persons planning to adopt the child, relatives of the child or providers of foster care who are currently providing care to the child."

Item 22 was rated as a strength during the 2018 CFSR. Information in the statewide assessment showed that permanency hearings are occurring timely in almost all cases. Stakeholders confirmed that initial permanency hearings occur no less frequently than 12 months from the date children enter foster care and no less frequently than every 12 months thereafter.

Nevada is continuing to ensure this item is a strength through strong partnership with the Court Improvement Program on various initiatives. Although not on a PIP for this item,

PIP Goal 3 supports and strengthens permanency hearings by encouraging caregiver engagement.

Item 23: Termination of Parental Rights

NRS 432B.590 mandates if the child has been placed outside of her or his home for 14 of any 20 consecutive months, the best interests of the child must be presumed to be served by the termination of parental rights and documentation of the plan to TPR is included in the permanency plan. The court is required to use its best efforts to ensure that the procedures required in TPR are completed within six months from that date. The NRS also identifies those circumstances in which the agency is not required to make reasonable efforts for reunification and addresses the issue of compelling reasons when it would not be in the child's best interest to file for TPR. If the court determines it is in the best interest of the child to terminate parental rights the court will use its best efforts to ensure that the procedures required by NRS Chapter 128 Termination of Parental Rights are completed within 6 months after the petition is filed.

NRS Chapter 128 details the process of TPR, specifically who files the petitions, procedures for TPR on ICWA cases, notice of hearings (publication), testimony, appointment of attorneys, specific considerations to various circumstances and restoration of parental rights in certain situations. Pursuant to NRS 128.170, a child (or the legal guardian of the child) who has not been adopted, and whose parental rights have been terminated or relinquished, may petition the Court for restoration of parental rights. The natural parent or parents for whom restoration of parental rights is sought must be fully informed of the legal rights, obligations and consequences of restoration and must consent, in writing, to the petition.

Statewide Policy 0514 Termination of Parental Rights requires timely permanency planning for children in the care and custody of the child welfare agency, and that planning must therefore begin the day the child enters care. The child welfare agency is required to make and finalize alternate permanency plans no later than 12 months after the child's removal. Policy states that absent compelling reasons not to file a TPR, the petition must be filed within 60 days of the court's determination that reasonable efforts are not required.

Item 23 was rated an ANI during the 2018 CFSR. The statewide assessment identified that Nevada failed to demonstrate the state files TPR petitions in accordance with the provisions of the Adoption and Safe Families Act (ASFA). Delays in filing were attributed to a lack of resources at the prosecutors' offices; court decisions to provide parents with additional time to comply with service plans; agency difficulties in locating parents; lack of provision of services to parents; backlogs in the courts; and an insufficient number of adoptive parents.

PIP Activities that support Termination of Parental Rights include PIP 3.2.1, 3.2.3, 3.1.2, 3.4.1, and 3.1.3. A workgroup developed a written guide that explains the dependency court process, parental rights, timeframes, and clarifies expectations for parents and families involved with child welfare. The child welfare agency convened a workgroup to analyze the barriers to timely permanency in the current TPR process. This workgroup identified data to conduct a timeline and predictive analysis to examine the TPR and

adoption process. The workgroup analyzed the predictive analysis data and used the data to develop recommendations to improve the TPR process. The workgroup made recommendations to form a CIP statewide workgroup to discuss and revised Nevada's legal timeframes including setting timeframes for: TPR trial dates, limitation and continuances and extensions, and rules related to completion of a TPR appeal. Furthermore, the team recommended a statewide workgroup to update the statewide social summary template and policy. Further discussion from the workgroup identified a need to have consistent data collection methods across the state for further monitoring and report development.

The child welfare agency worked with community partners and completed the TPR practice guideline to align practice with the courts, provide clarification for federal timelines for TPR, and provide explanations of compelling reasons, concurrent planning, and reasonable efforts. Progress to increase timely TPR's will be monitored utilizing the statewide quarterly case reviews starting in May 2021. Workgroups focused on TPR have continued to meet even after completion of the targeted PIP goals. Nevada continues to identify ways to decrease the barriers to timely TPR's utilizing focus groups and continues to improve the quality of data being entered into UNITY for data collection and tracking purposes. This has been completed by creating additional training around data entry of TPR's, UNITY change requests to improve the system and report building for monitoring data.

Item 24: Notice of Hearings and Reviews to Caregivers

Statewide 0206 Court Notification policy mandates that proper notification of court hearings and court reviews regarding the status of a child in the custody of a child welfare agency must be provided and is necessary to ensure active involvement and participation of caregivers (pre-adoptive, foster parents, relative, fictive kin, etc.) in the child's safety, permanency, and well-being.

Notice of annual and semi-annual court hearings to caregivers must be supplied, pursuant to NRS 432B.580(6)(a)(b), to all parties to any of the prior proceedings, and parents and any persons planning to adopt the child, relatives of the child or providers of foster care who are currently providing care to the child. If a child in protective custody is determined to be of Indian descent, the child welfare agency must notify the tribe in writing at the beginning of the proceedings. If the Indian child is eligible for membership in more than one tribe, each tribe must be notified.

This item was rated as an ANI in the 2018 CFSR. The statewide assessment indicated that the state did not consistently provide notice of hearings to caregivers, failure of notices arriving timely, limited time for court hearings, high caseloads for caseworkers, and the practices of some caseworkers discouraging caregiver attendance were identified as challenges.

PIP Team 3 addressed this through PIP 3.2.3 which developed a template for caregivers to share child information with court.

A statewide workgroup reviewed the current statewide policy 0206 Court Notification and revised it to include federal standards identifying caregivers are afforded the right to

attend and be heard during the Semi-Annual and Permanency hearings. A new attachment, FPO 0206E – Caregiver Notice of Hearing, was added to the policy to provide notification to caregivers. The attachment explains the caregivers' right to be noticed of and attend the Semi-Annual and Permanency court hearings and to speak on behalf of themselves, their family, or the child being cared for, or the ability to submit in writing the update for the child prior to court. This template also provides the caregiver with prompts to identify what child information would be useful in court.

SYSTEMIC FACTOR C: QUALITY ASSURANCE SYSTEM

Item 25: Quality Assurance System

Nevada Revised Statutes 432B.180 and 432.2155 requires DCFS to monitor the performance of child welfare agencies through data collection, evaluation of services and the review and approval of agency improvement plans pursuant to NRS 432B.2155. Nevada Administrative Code 432B.030 details the activities required concerning evaluation of services provided by the child welfare agencies and actions upon determination of noncompliance with certain provisions.

Item 25 was rated as an ANI. Although the state utilizes a quarterly case review data and process that mirrors the Federal CFSR Case Review process including the use of the federal on-site review instrument, the 2018 CFSR identified this item as an area needing improvement.

Item 25 has been addressed previously by PIP Activities 1.1.3, 1.2.3, 1.2.4, 2.2.3, 2.2.4, 3.4.1, 4.1.1, 4.1.2, 4.1.3, 4.1.4, 4.2.1, 4.3.4, and 4.4.1 and ongoing through activities in Goal 4 of the CFSP. From 2020 through 2021, the state conducted a Continuous Quality Improvement (CQI) Self-Assessment with technical assistance from the Capacity Building Center for States (CBCS). It was previously determined that program improvement measures were not linked to the case review results and that relevant reports of the case review results are not utilized to implement improvement measures. The state asserts it has continued to make progress in improving its quality assurance system. This was accomplished with the support of the CBCS and through completing the CQI Self-Assessment which identified areas of opportunity across several domains. This past year, the state continued to embrace a CQI culture in its PIP teams, sub workgroups and within the SQIC. Over the next year, through the activities identified through the self-assessment on the CQI Action Plan, significant progress will continue to be made in this area.

The requirements for this systemic factor and the state's QA/CQI system, as well as any updates to progress in this area are described further in the sections: Quality Assurance System and under Goal 4: Improve Statewide Child Welfare Outcomes by Developing and Strengthening the Statewide Quality Assurance System to Ensure the System Can Identify And Respond To The Strengths And Needs Of The Child Welfare System In An Efficient And Effective Manner. Additionally, please refer to Attachment I: CQI Self-Assessment and Attachment J: Nevada's CQI Action Plan.

SYSTEMIC FACTOR D: STAFF AND PROVIDER TRAINING

Item 26: Initial Staff Training

NRS 432B.195, 432B.397, and NAC 432B.090 requires the state to provide a full staff development and training program which includes a minimum of 40 hours of training related to the principles and practices of child welfare services. This includes specific training related to the Indian Child Welfare Act (ICWA) and cultural competence in working with LGBTQ youth. Statewide training policy 1402 Child Welfare Training Requirements specifies the pre-service training requirements for all case carrying child welfare staff and direct supervisors in the first year of employment.

Preservice training is accomplished through the Title IV-E funded Nevada Partnership for Training (NPT). Pre-service training is provided statewide by University of Nevada, Las Vegas (UNLV) and the University of Nevada, Reno (UNR) which also partner with the child welfare jurisdictions to deliver specific content along with coordinating on-the-job-training. This partnered approach to facilitate the training of new case managers allows for the integration of theory, jurisdictional agency policy, practical information, skill demonstration, and simulated skill practice. Content is delivered in a modular format along the trajectory of the life of a family through the system, and trainees complete pre and post-tests at each module, along with satisfaction surveys. In addition, efforts have been made to provide a standardized assessment and feedback structure for written assignments and simulation experiences.

Item 26 was rated as an ANI. Statewide assessment showed that the state does not have the ability to track initial training over time for newly hired agency staff and differential response staff. Training overall was described as too broad for the various program areas and lacking practical training aimed at completion of basic job tasks.

This is not a specific PIP activity but is addressed through CFSP Goal 3 to support a Healthy Workforce. To monitor and support the workforce, the state purchased and implemented a new Child Welfare Learning Management System (LMS) in March 2018. The Learning Management System (LMS) is a software application for the administration, documentation, tracking, reporting, automation, and delivery of the child welfare educational and training courses. The Universities have been standardizing their systems in partnership with the child welfare agencies to maintain timely workforce data and host in-house training registration and maintain records. A past review determined that the LMS was not being used to its full capacity. The statewide Workforce Innovation Team has monitored the improved utilization of the system including report development, monitoring of staff training and licensure status and increased access to training modules. This monitoring will continue into the upcoming year.

The state asserts it has made progress for this systemic factor. NPTLearn, the state's LMS, has been in use for almost four years now, and the state is starting to use the peer/social networking and analytic capabilities of the system to bolster professional development beyond single training events and support transfer of learning outside of the classroom (more information on this is provided in Attachment D Nevada Training Plan). Additionally, compliance reports have been created for all required PIP training in which the system automatically emails the jurisdictions on a regular basis to aid in monitoring

training attendance. A dashboard has been created in NPTLearn so that executive leadership and managers can monitor the completion of these post training activities and supports of their staff.

NPT continues to evaluate the pre-service training through pre and post-tests, along with satisfaction surveys. These are distributed to participants at the end of each module so that they can self-report their abilities across the training learning objectives, increase in understanding, instructor effectiveness, curriculum effectiveness, and overall perception of the training.

Although rubrics are used for simulation and mock case components, these currently are only shared with the individual learner. NPT is exploring incorporating pre-service rubrics into NPTLearn so that aggregate data can be used for training evaluation.

Local jurisdiction training teams and the universities meet regularly, and test scores along with focus group and survey data are made available to maintain a QA/QI feedback loop and revisions are made on a regular basis.

Item 27: On- Going Staff Training

Statewide policy 1402 Child Welfare Training Requirements requires that all staff engaged in child welfare services and their supervisors/managers must meet the minimum requirements for On-Going Training set forth in NAC 641B.187 which requires consistency with the continuing education requirements set forth by the Nevada Board of Examiners for Social Work for LSW licensees which includes completion of at least thirty (30) hours of continuing education in the field of child welfare practice every two (2) years from date of hire, including the following:

- Completion of four (4) hours of continuing education related to ethics in the practice of social worker every two (2) years from date of hire. The content areas that will count towards the ethics requirement include professional boundaries, confidentiality, dual relationships, documentation, billing, fraud, telehealth, supervision, social media, sexual harassment, exploitation of clients, managing job stress, social work laws and regulations, cultural competency and racial biases, risk management, mandated reporting, scope of practice, professional conduct, standards of care, impaired professionals, and/or certifications for an emergency admission, release from an emergency admission or involuntary court-order.
- Completion of at least two (2) hours of instruction on evidence-based suicide prevention and awareness every two (2) years from date of hire.
- In-service trainings in the field of child welfare practice earned within two (2) years prior to hire by an agency which provides child welfare services are eligible for credit review by the University Training Coordinators.

On-going training is accomplished through the Title IV-E funded Nevada Partnership for Training (NPT) and is provided statewide by University of Nevada, Las Vegas (UNLV) and the University of Nevada, Reno (UNR) in partnership with the child welfare jurisdictions.

Item 27 was rated as an ANI. The statewide assessment identified that the state has limited capacity to track ongoing staff trainings and licensure. There were only a few

mandatory ongoing trainings related to child welfare and most mandatory trainings pertained to personnel concerns. Supervisor training is generic and there is no ongoing supervisor training requirement. CFSP Goal 3, addressing healthy workforce, has driven the statewide implementation of CoachNV to enhance supervisory skills to support workforce development and to reduce staff turnover.

This is not a specific PIP activity but is identified in CFSP Goal 3 to support a Healthy Workforce. To monitor and support the workforce, the state purchased and implemented a new Child Welfare Learning Management System (LMS) in March 2018. The Learning Management System (LMS) is a software application for the administration, documentation, tracking, reporting, automation, and delivery of the child welfare educational and training courses. The Universities have been standardizing their systems in partnership with the child welfare agencies to maintain timely workforce data and host in-house training registration and maintain records. A past review determined that the LMS was not being used to its full capacity. The current LMS is a complex and comprehensive site with different functions and capabilities. It took a couple of years to explore its uses and applicability to the statewide workforce. That, in combination with the COVID-19 pandemic and staffing challenges, delayed the utilization of the LMS to its full potential. The universities continue to work on developing efficient ways to track new employee first and second year training requirements, as well as ongoing training requirements for the workforce. The statewide Workforce Innovation Team has and will continue to monitor a plan to improve the utilization of the system including report development, monitoring of staff training, licensure status and increased access to training modules.

NPTLearn, and the state are starting to use the peer/social networking and analytic capabilities of the system to bolster professional development beyond single training events and support transfer of learning outside of the classroom (more information on this is provided in Attachment D Nevada Training Plan). Additionally, compliance reports have been created for all required PIP training in which the system automatically emails the jurisdictions on a regular basis to aid in monitoring training attendance. A dashboard has been created in NPTLearn so that executive leadership and managers can monitor the completion of these post training activities and supports of their staff.

Ongoing, in-service trainings are delivered live, asynchronous on-line, and synchronous to the statewide child welfare workforce. The Nevada Statewide Child Welfare Policy Manual – 1402 Training Policy, effective April 29, 2019, includes both first year and second year training requirements which dictate specific courses to be taken in these first important years on the job for child welfare staff.

The Nevada Partnership for Training (NPT) developed an entire asynchronous, online mental health series that meets first- and second-year training requirements. Following completion of a foundational course, staff will be able to take an additional course exploring more in-depth information about mental health disorders, as well as an array of shorter courses (17 total) designed to provide more specified detail about mental health diagnostic categories.

Meeting the second-year requirement, the NPT developed a worker well-being training, “Self-Care in Stressful Times.” This instructor-led course provides ways to manage stress in different situations, how to identify and work through burn-out, how to develop a good self-care plan, and the ethical responsibilities of having self-care in the field. Additionally, asynchronous online courses were developed for LGBTQ and CSEC as part of the annual requirement.

Additional in-service training topics developed by NPT include topics related to trauma, child sexual abuse, engaging youth and building resilience, ethics, mandated reporting, motivational interviewing, suicide prevention, and others under development. Two asynchronous online courses were developed as a result of the PIP. The first, “Nevada Juvenile Dependency Mediation Training,” educates child welfare staff so that you can effectively participate during court-ordered dependency mediation. The second, “Trauma, Court, and Engagement – Using Communication Strategies to Improve Outcomes for Children and Families,” informs caseworkers about the court process and the transition toward trauma-informed care in the courtroom. It was developed as a companion piece to the judge’s trauma-informed care training they received and is meant to support the overall court process by helping caseworkers identify how to model and encourage trauma-informed care.

The state asserts it has made progress on this systemic factor. Conversations around reviewing, modifying, and improving the state’s existing supervisor training have continued to be held over the past year during WIT meetings and remains a standing agenda item. The Nevada Statewide Child Welfare Policy Manual – 1402 Training Policy requires that direct supervisors of first- and second-year employees annually complete training in LGBTQ and Cultural Competency and Commercial Sexual Exploitation of Children. In addition to required trainings, in-service trainings targeting supervisors specifically is also provided in partnership with UNR and UNLV. Over the next year, more attention and focus will be placed on this series of training and ways in which CoachNV can be integrated into it. CoachNV focuses on instilling a coaching framework into practice. CoachNV has been delivered to executive leadership, managers and supervisors statewide. The state received intensive technical assistance from the Capacity Building Center for States to support the implementation and evaluation of the coaching model. Currently, the state is refining a fidelity tool to utilize moving forward.

PIP Key Activities 2.1.2, 2.1.4, 2.1.5, 3.1.1, 3.2.1 A, 3.2.3 (A).

Item 28: Foster Parent and Adoptive Training

Nevada Administrative Code Chapter 424 outlines the minimum standards for foster homes, specialized foster homes, group foster and independent living foster homes. NAC Chapter 432A includes the minimum standards for childcare facilities and childcare institutions. Childcare facilities refer to temporary care provided for 5 or more children and institutions are facilities serving 16 or more children who do not routinely return to the home of their parents or guardians. NAC 127.485 outlines training requirements for the adoption of children with special needs.

NAC 424.270 states an applicant for a license for a foster home must have at least eight hours of training in foster parenting provided or approved by the agency that provides

child welfare services in the subjects described in NRS 424.0365, laws and regulations applicable to foster parenting, the structure of agencies which provide child welfare services, childhood trauma, the importance of family relationships and other meaningful relationships and basic first aid, including, without limitation, training in the administration of cardiopulmonary resuscitation. If the home has a pool, hot tub or Jacuzzi or other free-standing body of water or sauna, the applicants must also obtain information on water safety, pool safety and the risk of drowning. Annually each foster parent must complete a minimum of four hours of advanced training in foster parenting provided or approved by the agency that provides child welfare services.

NAC 424.712 requires specialized foster homes or a foster care agency to have a minimum of 40 hours pre-service training and NAC 424.714 requires an additional 20 hours of continuing education training annually. NRS 424.0365 also requires that anyone who “operates a family foster home, a specialized foster home, an independent living foster home or a group foster home shall ensure that each employee who comes into direct contact with children in the home receive training within 90 days after employment and annual thereafter. Such training must include, without limitation, instruction concerning: (a) controlling the behavior children; (b) policies and procedures concerning the use of force and restraint on children; (c) the rights of children in the home; (d) suicide awareness and prevention; (e) the administration of medication to children; (f) applicable state and federal constitution and statutory rights of children in the home; (g) policies and procedures concerning other matters affecting the health, welfare, safety and civil and other rights of children in the home; and (h) working with lesbian, gay, bisexual, transgender and questioning children such other matters as are required by the licensing authority or pursuant to regulations of the Division. NRS 432A.177 requires childcare facilities staff to receive the same training, within 90 days of employment.

The statewide Quality Parenting Initiative program strives at making sure every child living in foster care is cared for by a caregiver (foster, relative, fictive, and/or adoptive) who provides skilled nurturing parenting while helping the child maintain connections to his or her family www.qpinevada.org/. As part of the QPI program, each region has a collaborative QPI committee with foster caregivers and child welfare staff that addresses the training needs of foster parents as well as recruitment and retention of foster homes.

- **Initial Foster and Adoptive Parent Training**

Nevada child welfare agencies use different approaches to licensing foster and adoptive homes. Despite the different approaches, all meet the minimum requirements of Nevada regulations: completion of pre-service and ongoing training, background checks, home study and home inspection requirements. Each region utilizes pre-service training curriculums that exceeds the minimum 8-hour state regulation requirement in NAC 424.270, providing 24 to 30 hours of training. In addition, to the basic competencies required by all foster caregivers, the northern and southern regions offer specialized training sessions for pre-adoptive parents and relative/fictive kin caregivers. Due to the COVID-19 restrictions and protocols agencies transitioned to virtual information sessions and pre-service trainings. Agencies now have a hybrid model offering both in person and online trainings for foster and adoptive parents. Additionally, agencies have

been utilizing the updated training information and materials during these trainings. Furthermore, agencies are implementing licensing programs (such as Prime and Benti) to help track and monitor the initial training process for perspective foster and adoptive parents.

Some updates include providing specific information for carrying out the duties of being a foster parent, communication with the agency, the foster parent's role with the agency and court, and the responsibilities to the child. Some of the identified responsibilities include ensuring children's medical/dental screenings/needs are addressed, helping a child learn to control emotions and behavior, providing needed transportation for the child, and providing opportunities for normalcy in the home. Additionally, the pre-service training includes trauma and conflict management, appropriate consequences for non-compliant behavior, and foster parent ethics, especially around child privacy, confidentiality, and mandated reporting. Pre-service trainings also discuss race and ethnicity with foster and adoptive parents.

To encourage relatives to become licensed foster parents, training requirements have been modified to include reduced training hours, however all the NAC trainings are required for both non-relative and relative/kinship caregivers statewide. Additionally, the offered trainings include relative specific trainings. These trainings include topics such as navigating the relationships with the family/family dynamics, and other topics specific to relative foster care. During 2021, the agencies had 255 households (non-relative) complete the pre-service training statewide, and 832 relative and fictive kin complete training.

- *Specialized Foster Care (SFC)*

Specialized Foster Care Program and Advanced Foster Care are implemented in all child welfare agencies to serve children with significant emotional and behavior problems. NAC 424.712 requires 40 hours of training before providing direct care. Foster parents are required to receive advanced training in an evidenced base foster care treatment model, Together Facing the Challenge. They also receive trauma informed care and medication and administration training. Foster parents receive in-home weekly coaching, direct support, and coaching in utilizing the tools learned in the advanced trainings, ongoing phone support and crisis response when needed. In Specialized Foster Care the support services are provided by a contracted foster care agency and in Advanced Foster Care services are provided by staff employed by a child welfare agency. The DCFS is legislatively mandated to measure outcomes of these programs to determine the success and wellbeing of the higher-need children placed in these homes.

- *Foster Care Agencies: Contracted Foster Homes*

Foster care agencies have the same minimum training requirements as Specialized Foster Care, however, the foster care agencies are responsible for providing and ensuring their contracted foster homes have met the training requirements outlined in NAC 424.712 and NRS 424.0365. They are required to

submit the curriculum to the licensing authority for approval (NAC 424.212 (5)). Each member of the direct care staff foster care agency must complete training before providing supervision or direct care of a child or beginning any other responsibilities related to the supervision or direct care of children.

- **Ongoing Foster Parent Training**

Nevada uses a web-based training and service program, called Just-In-Time training to connect foster parents, kinship or other caregivers with training, peer experts and other resources. Just-In-Time is part of the statewide Quality Parenting Initiative (QPI) program which strives at making sure every child living in foster care is cared for by a caregiver (foster, relative, fictive, and/or adoptive) who provides skilled nurturing parenting while helping the child maintain connections to his or her family www.qpinevada.org/. The state holds a contract, using adoption incentive funding, with the University of South Florida to maintain the QPI/Just-In-Time website which includes data extract and technical support.

As part of the QPI program, a statewide monthly meeting is held to address statewide activities and each region has a collaborative QPI committee to address on-going training needs of foster parents. Each region also has a QPI newsletter informing foster parents of new trainings available through Just-In-Time. In addition to web-based training, in-person advanced trainings are also offered throughout the year. As of 2022, in person ongoing training for foster and adoptive parents has not resumed in person and continues to be available in an online platform. The statewide workgroup has provided trainings in both English and Spanish, along with efforts to ensure all the provided trainings have closed captioning. Additional efforts have been made to ensure that the QPI/Just In Time website has updated culture and diversity trainings available to all caregivers. Just-In-Time provides a post-test, upon passing the post-test the foster caregiver is emailed a certificate of training. The QPI/Just in Time website reports issuing an average of 1,300 completed training certificates per month. Child welfare agency licensing workers annually collect all proof documentation from the foster/adoptive licensees for the ongoing/advanced trainings they have attended during the past year. This information is maintained in the licensee's hard case file.

- **Child Care Institutions**

Requirements for training are identified within NRS 432A.177, and NAC 432A.323, .326. Completion of training requirements are monitored through the State of Nevada Division of Public and Behavioral Health (DPBH) / Child Care Licensing (CCL). The DPBH CCL inspects these facilities in-person, twice a year (semiannual / annual), at which time CCL monitors trainings for all direct caregivers employed by the childcare institution who provide care to children. During the most recent bi-annual inspection in December 2021 of Nevada childcare institutions, it was reported that there were citations made for training deficiencies. The institutions entered into an acceptable plan of correction, and have provided proof regarding staff compliance with training, and are in compliance as of May 2022.

Item 28 was rated as an ANI. The statewide assessment identified that the training provided for foster and adoptive parents differs by jurisdiction and may lack contents specific to carrying out duties of being a foster parent. Additionally, the state did not have a coordinated system in place to monitor and track completion of foster parent training. Following completion of the PIP, the state intends to form a Foster Care Licensing Workgroup to address the tracking of training.

While no activity directly impacts pre and post service foster parent training, there are a few key activities that will impact foster parents: Key Activities 2.1.6, 3.2.1, 3.2.1A, 3.2.2 and 3.2.2B. For Key Activity 2.1.6, Nevada utilized the QPI Nevada website to post policies that directly impact foster parents to better engage foster parents in understanding what the child welfare agencies do regarding caseworker contact and visitation. Nevada believes this will improve family engagement by involving caregivers in collaborative relationships to ensure the well-being of children in care and by educating foster caregivers about practice. PIP Key Activities 3.2.1 and 3.2.2, which updated the KinGAP and Case Planning policies, and Key Activities 3.2.1A and 3.2.2B, will enhance foster parent understanding of these practices as they have received updated and clarified information about case planning and guardianship options from case workers and stakeholders.

Performance Item 28 is being addressed by making policies and educational court guides available to foster parents through the Nevada QPI website. DCFS is working with the University of South Florida and has made enhancements to the Nevada QPI website, which includes reorganization of information, addition of resources for better accessibility, and updating the website with new trainings, to include both English and Spanish, and enhancing each agency's dedicated website areas with updated forms and information. The child welfare agency has continued to educate staff on the revised policies and practices to enhance foster parent understanding and provide clarification about case planning, concurrent planning, and Kinship Guardianship.

As part of the effort to ensure that caregivers are receiving beneficial training that enhances the caregiver's knowledge and skills, the child welfare agency conducted a survey to identify how effective the provided training have been. Due to COVID-19 restrictions and protocols all trainings after March 2020 were conducted online, through learn at your own pace and through virtual instructor led classes. The survey collected the responses of 275 caregivers and the data collected as of 01/31/2021 shows:

- About 72% of caregivers identified that recent trainings have provided them with the knowledge necessary to carry out caregiver duties;
- About 57% of caregivers identified that recent trainings have provided them with the skills necessary to carry out caregiver duties; and
- About 76% of caregivers feel adequately trained to carry out duties regarding foster and/or adopted children.
- Given these results, agencies are continuing to provide trainings to ensure caregivers are provided with useful knowledge and practicable skills to promote the permanency and well-being of youth in foster care. Furthermore, the child welfare agencies will utilize the survey results to facilitate discussions with caseworkers, stakeholders, and foster parents and identify needed changes to

support foster caregivers with knowledge to set realistic expectations and apply these skills in daily life. One outcome of those conversations is a need for more age/developmental specific trainings to include identifying behaviors, for all ages, which agencies will work to create/identify in the upcoming year.

SYSTEMIC FACTOR E: SERVICE ARRAY AND RESOURCE DEVELOPMENT

Item 29: Array of Services

NRS 432.011(a) states that the purposes of the Division of Child and Family Services include ensuring that a sufficient range of services is available to provide care and treatment to children and families in the least restrictive setting appropriate to their needs.

The Nevada Department of Health and Human Services (DHHS) promotes the health and well-being of its residents through the delivery or facilitation of a multitude of essential services to ensure families are strengthened, public health is protected, and individuals achieve their highest level of self-sufficiency. The Department is the largest in state government, comprised of five Divisions along with additional programs and offices overseen by the DHHS' Director's Office. The five Divisions include Aging and Disability Services (ADSD), Child and Family Services (DCFS), Health Care Financing and Policy (DHCFP; Medicaid), Public and Behavioral Health (DPBH) and Welfare and Supportive Services (DWSS). DHHS is the lead agency for the community-based child abuse prevention programs in Nevada and leads the child maltreatment prevention activities in Nevada.

The DCFS oversees the administration and management of all child welfare federal grants. In addition, the DCFS is responsible for administering Victims of Crime Assistance (VOCA) funding to identified child abuse, domestic violence, and sexual assault victims, as well as to underserved populations such as commercially sexually exploited children. The DCFS is also responsible for administering Family Violence and Prevention Services, Victims of Domestic Violence and VOCA Training as well as Technical Assistance grants focused on meeting national certification standards.

Item 29 was rated an ANI. The statewide assessment identified service gaps and lengthy waiting lists, especially with substance abuse services and monitoring and behavioral and mental health service delivery. There are also gaps in housing and transportation. The state does not have the capacity to report service delivery numbers of clients served, track waiting lists, or identify unmet service needs. As part of the Nevada FFPSA Prevention Plan development, Nevada completed a multi-pronged needs collaborative service array assessment with DHHS sister agencies. The purpose of the assessment was to identify new services and expansion opportunities.

This item is addressed by PIP activities 4.5.1, 4.5.2, 4.5.3, 4.5.5, and 4.5.6, which address the service array continuum. Funding streams were identified for service expansion opportunities through PIP activity 4.5.3. The financial crisis experienced as a result of COVID-19 and the ensuing national health emergency caused the timeframe for expanding comprehensive community health services through PIP activity 4.5.6 to be extended from Quarter 4 to Quarter 6 (CB Memo dated August 18, 2020). Although funding for new services was not secured, the state was able to leverage existing funding

available through the state's System of Care Grant to expand existing community services to improve its service array. Some of the expansion of existing community services included expanding coverage areas by incorporating Telehealth platforms, certifying new clinicians in Telehealth, expanding access to psychiatric services/assessments, as well as expanding access to early childhood clinical interventions. The state asserts it has made progress in this area for this performance item.

Item 30: Individualizing Services

NRS 432.011(a) states that the purposes of the Division of Child and Family Services include ensuring that a sufficient range of services is available to provide care and treatment to children and families in the least restrictive setting appropriate to their needs.

Item 30 was rated as an ANI. The statewide assessment revealed that although some services can be individualized the state struggles with services for children with special needs. Specifically, providing interpreters and Spanish speaking counseling, as well as the capacity to individualize services to address developmental, disability and cultural needs are areas of opportunity.

The state asserts it has made progress in this area for this performance item. Improvements to this item are supported by the activities outlined in the [Collaboration, Goal 1A](#) and [Item 29](#) sections. Progress includes continued collaboration with community partners to ensure knowledge and responsiveness to community needs, and expansion of the service array through FFPSA planning and the System of Care grant.

SYSTEMIC FACTOR F: AGENCY RESPONSIVENESS TO THE COMMUNITY

Item 31: State Engagement in Consultation with Stakeholders

NRS 432.0305 and NRS 432B require the DCFS to observe and study the changing nature and extent of the need for child welfare services and to cooperate with the Federal government in adopting and completing state plans that will assist the DCFS in providing services for children and families. This is accomplished through coordination and collaboration with other public and private agencies and entities in developing the five-year Child and Family Services Plan and ongoing annual updates required by Title IV-B. The DCFS collaborates with a variety of entities in this process. Some key examples include:

- The Systems Advocate assists constituents regarding complaints and concerns regarding the programs the Division oversees. This advocate also serves as the Public Information Office, public record request officer and hearing officer.
- The Quality Parenting Initiative was developed statewide to ensure that every child removed from their home due to abandonment, abuse, or neglect is cared for by a foster family who provides skilled, nurturing parenting while helping the child maintain connections with their family. This collaborative holds monthly meetings in each local jurisdiction and includes foster parents from each area. The team continues to address resource parent needs by providing updated trainings and creating policy and guidelines that promote the well-being of the child and interactions between parents and resource parents.

- The Legislative Committee on Child Welfare and Juvenile Justice is an ongoing statutory committee of the Nevada Legislature whose authority and duties are set forth in Nevada Revised Statutes 218E.700 through 218E.730. The Committee meets between the biennial sessions of the Legislature and consists of three members from the Senate and three members from the Assembly, appointed by the Legislative Commission. The chair and vice chair are selected by the Legislative Commission from among the Committee membership. The Committee reviews and evaluates issues relating to the provision of child welfare services and juvenile justice in the state and recommends legislation concerning child welfare and juvenile justice to the Legislature.
- The Nevada Office for Victim Assistance (NOVA) manages the funding and service delivery for victim services throughout Nevada. NOVA strives to continuously improve access for all victims and survivors through strategic planning, communication, and resource sharing among the state agencies that support and fund victim services.
- System of Care is a family driven and youth guided program to serve children who have serious emotional disturbance while also providing support and services to their families. Currently the focus is on expansion of services to the rural counties.
- Additional partners are outlined in the Collaboration section starting on page 7.

Item 31 was rated as a Strength. DCFS collaborates, engages, and responds to internal and external stakeholders such as Tribal representatives, children and families, service providers, foster care providers, the juvenile court, court improvement, and other family-serving agencies in the development of the CFSP, APSR, and CFSR.

The state asserts that it has made progress towards this item. This item continues to be supported by activities outlined in the Collaboration, Goal1A, Item 29 and PIP Item 3.2.3. The child welfare agency is encouraging participation from stakeholders by providing the opportunity to have a representative at meetings and workgroups. In addition to stakeholder representation, the stakeholders have been able to support agency program improvements by implementing changes within their system which correspond with the agency. This engagement and collaboration will continue to advance the child welfare system.

Item 32: Coordination of CFSP Services with other Federal Programs

The state follows the requirements to submit the CFSP, as well as the activities, accomplishments and future initiatives which are submitted annually in the APSR in accordance with the title IV-B, subparts 1 and 2 and Section 477 of Title IV- E of the Social Security Act, CAPTA, and Federal regulations at 45 CFR Part 1357. Nevada has remained in compliance each year with these requirements and has received approval on all plans and reports since the requirement was established in 2005.

The State of Nevada has a system in place to coordinate services under the CFSP with services or benefits by other federal or federally assisted programs serving the same population group. The Department of Health and Human Services (DHHS)/Division of Child and Family Services (DCFS) relies on close relationships with a wide range of partners and interdependencies to coordinate services and benefits to the same

population group. The following Divisions under the umbrella of the DHHS receive federal funding in which active coordination efforts are on-going:

- The Division of Health Care Financing and Policy (DHCFP) who work in partnership with the Centers for Medicare and Medicaid Services to provide Medical Services to Nevada families.
- The Division of Public and Behavioral Health (DPBH) who work in partnership to protect, promote, and improve the physical and behavioral health of the people of Nevada. This includes overseeing and administering clinical and community services.
- The Division of Welfare and Supportive Services who work to provide quality, timely and temporary services enabling Nevada families to achieve their highest levels of self-sufficiency.
- The Aging and Disability Services Division who deliver comprehensive support to elders, adults and children with disabilities or special health care needs.

This item was determined to be strength in the 2018 CFSR. The statewide assessment showed the state collaborates with numerous regional, county, and tribal agencies. Nevada DCFS continues to recognize the importance of coordination with other federal programs, including the federally funded initiatives in the planning of the Family First Prevention Services Act (FFPSA), to prevent duplication of efforts and to leverage funding and collaborative efforts. This item is supported by activities outlined in [Collaboration, Goal1A, Item 29](#) and PIP Items 4.5.1, 4.5.2, 4.5.3, 4.5.5 and 4.5.6.

SYSTEMIC FACTOR G: FOSTER AND ADOPTIVE HOME LICENSING, APPROVAL AND RECRUITMENT

Item 33: Standards Applied Equally

NAC 424-Foster Homes for Children regulations serve as the overarching standards for foster homes. NAC 424.250 specifies staffing ratios in specialized foster homes, family and group foster homes. Statewide policy 1305 Use of Waivers – Foster Care and Adoption outlines procedures for requesting a waiver for certain foster care licensure and/or adoption standards as well as identifies the fiscal ramifications of using a waiver, which can affect IV-E eligibility or non-eligibility for reimbursement of funding through the federal government.

The 2018 Family First Prevention and Services Act (FFPSA) requires Child Care Institutions, which includes group homes, residential treatment centers, shelters, and other congregate care settings in Nevada that provide placement to children in foster care, must meet the same Federal Title IV-E Criminal History and Child Abuse and Neglect Screening (CANS) background checks as foster homes. Statewide Policy1606 Child Care Institution – Criminal Background Checks/Out-of-State Central Registry Checks was finalized in November 2019 to meet this requirement.

The State of Nevada previously reported work on NAC 424 to bring Nevada into compliance with the National Model Licensing Standards by October 2019; however, it was realized through work with the Children's Bureau, Nevada could submit with their

Title IV-E Plan, Family First Prevention Services Act: Deviation from Model Licensing Standards and Waivers for Foster Family Homes outlining where Nevada's standards deviate from the National Model Licensing Standards. Nevada submitted the standards to the Children's Bureau on September 4, 2019 and was provided approval of this submission on September 25, 2019. The changes to NAC 424 are approved and in the process of being updated through the Legislative Commission.

This item was rated an ANI as the state was not systematically tracking the specific reasons for using waivers of licensing standards for foster homes, especially for non-relative foster homes licensed using a waiver. Issuing a waiver to license a foster home in Nevada is now a broader process that requires multiple levels of oversight, through the local child welfare's management and administration as well as through DCFS Administration.

The CFSP outlines a goal of using a statewide quarterly workgroup to review and ensure the statewide policy is being properly implemented and determine if there are consistent criteria for use of non-safety related waivers. This workgroup met in April 2021 and discussed the current practice for waivers. It was agreed the waiver process is running smoothly. Occasionally, there are cases that require back and forth to determine whether the waiver qualifies. The workgroup has continued to convene quarterly to discuss and train on these types of cases that require more research and discussion to determine whether a waiver is needed and so that statewide practice will be consistent. DCFS FPO established a statewide tracking system to easily identify the number and types of waivers approved, reporting of circumstance resolving the need for a waiver and updating regulations as required by law and/or practice changes. The waivers are currently being tracked by DCFS FPO and the tracking information includes approval/denial, agency, name, relative vs. non-relative, NAC requesting to be waived and the reason for request, safety vs. non-safety, and IV-Eligibility.

All waiver requests are submitted for review through the child welfare agencies internal process and then submitted to DCFS FPO. Waivers are required to filter through the DCFS FPO office for review and ensure the statewide policy 1305 Use of Waivers – Foster Care and Adoption is being properly implement, and adequate information is provided for approval by the DCFS administrator. Furthermore, DCFS FPO provides technical assistance for applicability or waiver related questions to the child welfare agencies. From July 1, 2021, through June 1, 2022, there have been 29 waivers statewide: 15 non-relative, 12 relative, 5 safety-related and 22 non-safety related. The process for tracking waivers is currently working to ensure that waivers are being completed consistently and in accordance with the statewide policy as evidenced by the requested waivers and feedback by the workgroup.

Item 34: Requirements for Criminal Background Checks

NRS 424 outlines the requirements for criminal background checks for anyone employed as staff or a director of a group treatment home or anyone applying to be a foster parent. Statewide policy 0515 Child Abuse and Neglect (CANS) and NCID Requirements for Prospective Foster and Adoptive Parents in response to the Adam Walsh Act of 2006 sets forth procedures for conducting and responding to CANS checks; conducting and

establishing statewide standards for authorizing placement of children with caregivers who have undergone an NCID and CANS check. No foster home or adoption applicant is issued a foster home license until all criminal background checks have been completed.

Item 34 was rated as a strength. Information in the statewide assessment showed that criminal background checks were completed as required for all licensed and unlicensed foster caregivers. This item continued to be strengthened in November 2019 with the issuance of statewide policy 1606 Child Care Institution – Criminal Background Checks/Out-of-State Central Registry Checks to address the requirement of the Family First Prevention and Services Act that Child Care Institutions must meet the same Federal Title IV-E Criminal History and Child Abuse and Neglect Screening (CANS) background checks as foster homes which requires that no adult, paid or unpaid, is allowed to work in a Child Care Institution until all criminal and CANS checks have been completed and verify the applicant is cleared.

The CFSP outlines a goal of using a statewide quarterly workgroup to review and discuss issues that arise during the criminal background clearance and solutions to ensure licensure does not occur until receiving clearance.

Item 35: Diligent Recruitment of Foster and Adoptive Homes

As of 2019, the state has the authority through NRS 424.087 to require regional plans for the development of the recruitment and retention of foster homes. A determination of the number of the children in the geographic area addressing the needs of children in foster care to receive care provided in a racially and culturally competent manner. The plan also addresses serving children who have intellectual or developmental disabilities and who have other special needs; and maintaining siblings together. The purpose of the plan is to develop the resources that reflect the diversity of the children in care.

Additionally, NAC 127.480 requires the development of a plan to recruit prospective adoptive parents for children with special needs in the custody of the agency awaiting adoption.

The statewide Quality Parenting Initiative program strives at making sure every child living in foster care is cared for by a caregiver (foster, relative, fictive, and/or adoptive) who provides skilled nurturing parenting while helping the child maintain connections to his or her family www.qpinevada.org/. As part of the QPI program, each region has a collaborative QPI committee with foster caregivers and child welfare staff that addresses the training needs of foster parents as well as recruitment and retention of foster homes.

Nevada formed an Adoption Call to Action (ACTA) team because of attendance at two federal summits held in Washington DC in August 2019 and January 2020. The team consists of membership from the regions, Raise the Future (formerly known as the Adoption Exchange), and the Family Programs Office. The team meets monthly for 90 minutes. The ACTA Team reviews adoption programming and addresses statewide needs with the goal of reducing the number of Nevada children and youth waiting to be adopted by identifying and eliminating barriers to achieving permanency.

Item 35 was rated an ANI as information in the statewide assessment showed a lack of consistency in the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state who need homes across the state. The state continues to improve the collection of demographic data on the state's resource families and continues to train staff on using the data. Additionally, the state has provided staff opportunities to participate in cultural workgroups and cultural competencies trainings through Nevada Partnership for Training (NPT) which provide groundwork for addressing diversity, cultural, racial, and socioeconomic issues. Refer to Attachment A Nevada Foster and Adoptive Parent Diligent Recruitment Plan. Progress of these efforts will be identified through the increase data usage and quality.

The CFSP outlines a goal of using a statewide quarterly workgroup to discuss the various efforts being made in each jurisdiction, identified outcomes and any newly discovered trends or patterns. Recruitment and retention will be standard topics of discussion along with changing and/or differing demographics and how to work more collaboratively statewide in our recruitment efforts.

A workgroup was created including members from the Licensing Team and the Adoption Call to Action Team, to work with the CBCS to evaluate and analyze data that will be used to develop a comprehensive Foster and Adoptive Parent Diligent Recruitment Plan to include more effective strategies to target recruitment of permanent families for youth who have longer stays in foster care. This statewide workgroup began in January 2021 and met monthly to review the statewide Diligent Recruitment plan and to make efforts to identify areas of concern and produce a statewide standard for foster care licensing and recruitment. The group concluded in April 2021 and will use the learned information to update to the identified strategies to assist with recruitment and retaining of foster parents. The workgroup had focused on improving statewide data quality within the CCWIS, Benti, and Prime, and targeted recruitment to address relative placements, diversity, cultural, and racial needs in Nevada.

The Adoption Call to Action Team (ACTA) continues to meet monthly to target the following goal: "Reduce the number of Nevada children and youth waiting to be adopted by identifying and eliminating barriers to achieving permanency." The work of the Adoption Call to Action Team is supported through technical assistance support provided by the Capacity Building Center for States. The following strategies are being targeted through the Adoption Call to Action Plan and the Center for States Integrated Capacity Building Plan:

1. Review initial and ongoing data to inform interventions.
2. Participate in PIP Item 3.4.1 Timely Permanency Workgroup to inform the ACTA team in intervention planning.
3. Participate in targeted recruitment strategies.

Additionally, the Adoption Call to Action Team collaborates to problem solve, share ideas, and develop policies and procedures. The state asserts that it has made progress towards this item through the above activities.

Item 36: State use of cross-jurisdictional resources for permanent placements

The State follows the federal requirements in accordance with P.L. 109-239, P.L. 109-248, 42 U.S.C. 670-679(b), the statutory requirements captured in NRS 127.330, NAC 432B.430, NAC 432B.435, NAC 432B.440, NRS 424.033 and the regulatory requirements in NAC 127.235. In addition to federal and state laws, the state's Interstate Compact for the Placement of Children (ICPC) Central Office also has a Safety Assessment and Family Evaluation (SAFE) policy, which serves as the primary means of evaluating and assessing the appropriateness of potential family foster care and licensed relative and adoptive families.

This item was determined to be an area needing improvement during the 2018 CFSP. In the statewide assessment, Nevada reported a low percentage of home studies from other states completed within the required 60 days. The state identified a lack of cooperation/compliance by the prospective caregivers and delays in processing criminal background checks as barriers to completing home studies timely. Nevada does not maintain data regarding ICPC requests for placement in other jurisdictions within the state. Stakeholders said that ICPC requests are kept open longer than 60 days, with delays commonly attributed to the resistance or ambivalence of the prospective placement home.

Table 36a Incoming and Outgoing Referrals SFY 2021YTD

Total Statewide Annual Incoming Referrals SFY 22 YTD	Total Statewide Annual Outgoing Referrals SFY 22 YTD	Total Statewide Approved Incoming Home Studies SFY 22 YTD	Total Statewide Approved Outgoing Home Studies SFY 22 YTD
529	997	119	439

Table 36a provides placement numbers, both incoming and outgoing, which have remained consistent over the years. The numbers reflect incoming and outgoing referrals as well as home studies for the year to date and are taken from the NEICE system SFY 2022 YTD which includes July 1, 2021, through April 30, 2022. More than one study may be conducted for the same case.

Table 36b Incoming Referrals Approved SFY 2022 YTD

Total Statewide Incoming Home Study Referrals SFY 22 YTD	Total Number of Incoming Home Studies Completed in 60 Days	Statewide Completion percentage in 60 Days
119	41	35%

Table 36b illustrates that during SFY 2022, from July 1, 2021, until April 30, 2022, there were a total of 387 Home Study Request from other states, and 154 of these Home Studies were completed within 60 days. The percentage is based on 154 studies completed within 60 days out of 387 total incoming home study referrals for the period of July 1, 202110 —April 30, 2022. Data is taken from NEICE system.

Table 36c Total Children Processed SFY 2022 YTD

Total Statewide Incoming Children Processed SFY 19 YTD	Total Statewide Outgoing Children Processed SFY 19 YTD	Total Children Processed SFY 19 YTD
529	997	1526

Table 36c illustrates that during SFY 2022 YTD the total number of children processed. Data is taken from NEICE system for SFY 2022 YTD includes July 1, 2021, through April 30, 2022.

Over the past year the following activities have occurred to support CFSP goals and improve outcomes:

- Nevada ICPC has provided ongoing training to jurisdictional staff through the pandemic by being available via telephone, email, and TEAMS to answer questions regarding new and ongoing requests and general questions regarding ICPC from instate and out-of-state providers, ICPC offices and jurisdictional staff. Discussions involved the ICPC process and specifically addressed time frames for home study completion. ICPC conducted TEAMS training on 08/03/2021 with the Washoe County ICPC group; 1/25/22 with Clark County CASA, 1/27/22 with CCDFS ICPC staff and 2/15/22 with DCFS Rural Region Staff.
- NV ICPC has implemented a Preliminary Home Study Report template that will be sent to each staff completing home studies. The template will be sent in conjunction with the Safe & Timely Act reminder. This form is fillable and easy to complete. It was created to allow workers to complete the Preliminary Report at the 50-day mark of the 60-day timeframe. The report identifies missing or incomplete items and requests anticipated date of completion thus meeting the definition of a Preliminary Report per Regulation Number 2 7(a).
- Nevada ICPC continues to track requested home studies both in state and out-of-state to achieve a higher rate of completion within the 60-day time frame. By using the NEICE tracking system and contact with jurisdictions, Nevada ICPC continues to monitor the Safe and Timely Notifications and remains vigilant in requesting updates, preliminary and final reports to meet the federal time frame for home studies. A new Preliminary Report Template is being sent at the same time as the Safe & Timely reminder to meet the federal time frames for home study completion. As noted above, Nevada's compliance with the 60-day time frame has decreased since last fiscal year. In March 2020, Nevada's Governor issued a stay home order which had statewide staff working from home to limit the spread of COVID-19. Most Nevada staff have continued to work from home in the last year. Nevada continued

to complete home studies; however, there were multiple barriers to meeting with people face to face and clearing homes virtually. In the last year there have been many vacancies statewide that lead to ICPC home studies not being completed in a timely manner. Other than Clark County, none of the other jurisdictions have designated staff for completion of home studies. Both Rural and Washoe County rely on contractors to complete the home studies and there is also a shortage of contractors.

- In efforts to ensure safe and permanent placements are achieved, Nevada ICPC has implemented an internal tracking system to request quarterly reports to ensure the safety and well-being of the children placed out of state. These reports are requested at 3-month (quarterly) intervals. The assigned ICPC worker requests the document from jurisdictional staff as well as out-of-state ICPC offices. ICPC asks for additional updates to cases whenever they are requested and makes every effort to get the requested information as well as providing workers with contact information for other assigned staff so they may collaborate with each other.
- The state has collaborated with the regions to assess cross-jurisdictional needs within the state. They all indicated they have a good working relationship with each other and were not in need of a third party to facilitate the intrastate movement of children. Additionally, no concerns have been identified in the current process, therefore, the state ICPC office will not be assuming specific oversight responsibilities. NV ICPC has created an internal list of contacts for this purpose and shares the contacts when requests come thorough the ICPC office. Jurisdictional workers collaborate to resolve conflicts around case management or services. Intra-state supervision is discussed in policy 0201 and does not include the state ICPC office as the gatekeeper of the policy or the program. Nevada ICPC assists state partners in connecting with the appropriate parties when the need arises. Each jurisdiction completes the necessary documents and works collaboratively with one another to ensure proper supervision of the placed child(ren) in receiving jurisdiction. All jurisdictions use the UNITY (SACWIS) system of record and can read case notes and access legal documents in order to insure coordination of services. Regions use child contact reports to monitor the supervision of children in their custody.

UPDATE TO THE PLAN FOR ENACTING THE STATE'S VISION AND PROGRESS MADE TO IMPROVE OUTCOMES

REVISIONS TO GOALS, OBJECTIVES, AND INTERVENTIONS

Nevada entered a Program Improvement Plan (PIP) on November 1, 2019.

The Nevada PIP Q10 progress report supports the achievement of benchmarks for the goals listed below in addition to narrative under "Summary of Progress towards Benchmarks" and "Feedback Loop." Activities identified in state planning meetings have been incorporated into this APSR report. Also included below are narratives around implementation and program support, as well as discussions around technical assistance provided to the regions by the state.

The state did not have any AFCARS or NYTD program improvement plans during this reporting period.

In a letter dated March 7, 2022, Nevada was notified that it was out of compliance with Sections 472 (c) and 475A(c) of the Social Security Act (the Act) as amended by Public Law 115-123—Family First Prevention Services Act that was enacted on July 8, 2018 and needed to submit a PIP to address each of those sections and bring the State into compliance. In summary, Section 472 (c) of the Act provides a new definition of foster family home. Section 475A(c) of the Act provides the requirements related to assessment, documentation, and judicial determination for placement in the specified setting of Qualified Residential Treatment Program (QRTP) in order to claim title IV-E reimbursement for an otherwise eligible child placed at such settings. Nevada had until April 6, 2022, to submit an approvable PIP.

The Nevada team worked closely with the CB Regional Office staff and submitted the State's final Program Improvement Plan (PIP) on April 8, 2022. The CB approved the PIP which is scheduled to be completed by no later than October 4, 2022, and the State will provide a status report on the implementation of the PIP in this document.

UPDATE ON PROGRESS MADE TO IMPROVE OUTCOMES

Goal 1: Improve Child Safety Through Increased Proficient Practice of the SAFE/SIPS Practice Model

Measures of Progress

This goal is measured by Items 1, 2 and 3 in the [Update to Assessment On Current Performance In Improving Outcome.](#)

Table 37: Maltreatment in Care and Recurrence of Maltreatment

National Performance		Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
					Lower CI	RSP	Upper CI
Maltreatment in care (victimizations per 100,000 days in care)	9.67%	AFCARS 19AB, FY19	↑	5.41	6	7.36	9.02
Recurrence of Maltreatment	9.5%	AFCARS FY19-20	↓	6.4%	7.4%	8.3%	9.2%

Red = states performance using RSP interval is statistically worse than the national performance

Gray = states performance using RSP interval is statistically no different than the national performance

Blue = states performance using RSP interval is statistically no different than the national performance

Nevada Child and Family Services Review (CFSR 3) Data Profile February 2021.

Objective 1 Conduct safety related activities

- A statewide committee with representation from all three child welfare agencies in collaboration with FPO identified strategies during the PIP development process to improve the capacity of supervisors to effectively coach staff in their practice of the SAFE/SIPS Practice Model and improve Safety Outcomes. Key activity areas will address the following:
 - Policies will be reviewed (PIP 1.1.2).
 - Training will be provided (PIP 1.1.1, 1.1.2).
 - Data reports will be developed and utilized by supervisors (PIP 1.1.3, 1.2.3, 1.2.4).
 - CQI activities will ensure supervisors receive increased support to enhance their abilities (PIP 1.1.3, 1.2.1, 1.2.2, 1.2.3.,1.2.4. 1.2.5).
- A statewide committee with representation from all three child welfare agencies in collaboration with FPO will work with statewide Information Services (IS) to determine CCWIS changes that will permit accurate reporting of response timeliness. A CCWIS work request and business requirements will be completed. The outcome of this CCWIS system change will result in a streamlined approach to recording response time. FPO will monitor the work request and business requirements progress.

Year 2 Objective 1 Conduct safety related activities

Continue working with IS on data collection and CCWIS enhancements for recording and CQI activities around timeliness of initiating of investigations of Reports of Child Maltreatment.

- Continue implementation of safety related activities launched during year 1 of the CFSP.
- Utilize Quality Improvement Case Review results to monitor and evaluate practice change resulting from safety related activities.
- To continue improving safety outcomes, Child welfare agencies will evaluate NIA and Ongoing managers/coordinators and supervisors for proficiency using a statewide proficiency tool developed during the PIP, which will outline the standard for measuring SAFE/SIPS Practice Model proficiency. The standard will include proficiency in utilizing the SAFE/SIPS Practice Model to conduct comprehensive risk and safety assessments; developing appropriate, realistic, and specific safety plans; and monitoring safety services. This evaluation will establish a baseline percentage of supervisors/coordinators/managers proficient in the SAFE/SIPS Practice Model.

Year 3 Objective 1 Continue safety related activities

- Continue working with IS on data collection and CCWIS enhancements for recording and CQI activities around timeliness of initiating of investigations of Reports of Child Maltreatment.
- Continue implementation of safety related activities launched during year 1 of the CFSP.
- Utilize Quality Improvement Case Review results to monitor and evaluate practice change resulting from safety related activities.
- Gather qualitative data through focus groups to determine whether changes to policies made during PIP have had intended impact. Use qualitative data to inform whether additional training or policy changes are needed.
- FPO will work collaboratively with the child welfare agencies to establish minimum requirements for the SAFE/SIPS Proficiency Plan. This plan should include how the child welfare agencies will determine how they will ensure continued coaching and mentoring of NIA and Ongoing managers/coordinators and supervisors who have not met proficiency, how the agencies will increase the number of NIA and Ongoing managers/coordinators and supervisors who are proficient in the SAFE/SIPS Practice Model, and how the agencies will utilize the statewide team of experts formed during the PIP to improve capacity. The child welfare agencies will provide the SAFE/SIPS Proficiency Plan to FPO

Summary of Progress towards Benchmarks

PIP Goal 1 was prioritized for completion by Q6 as these activities support the improvement of child safety outcomes. Activities focused on reviewing and revising policies, strengthening training for supervisors, and using reports to monitor fidelity to the SAFE/SIPS model. The state asserts that deliverables for Q3, Q4, Q5, and Q6 specified in the Interim Benchmarks were completed at the time of APSR submission.

Feedback Loop

A statewide committee with representation from all three child welfare agencies in collaboration with FPO provides oversight and a feedback loop for all of PIP Goal 1 activities. This statewide committee developed a tool that was used to measure proficiency in the SAFE/SIPs model. The agencies continue to utilize staff who are part of the Expert Team to coach other supervisors within the agency. The Expert Team has developed a Core Team with representatives from each jurisdiction who will develop the agenda for Expert Team meetings centered around policy and practice in Nevada. Data reports that measure safety practices continue to be used by supervisor and managers to improve safety outcome

Implementation and Program Supports

The DCFS is partnering with the Capacity Building Center for States to further develop and evaluate the Proficiency Tool that was developed as part of the PIP. This project will guide the jurisdictions in establishing minimum requirements for a SAFE/SIPS Proficiency Plan. PIP Team 1 has continued to hold a biweekly meeting to sustain implementation of PIP Items that are completed. This includes planning for and executing the Expert Team meetings, report enhancements and review of report and CFSR data. Team 1 will not continue bi-weekly PIP meetings as of June 2022 as the objectives of the team have been met. Team 1 will continue meeting bi-weekly to discuss report enhancements. The Statewide Expert Team is shifting their focus to discuss statewide policies, practices within jurisdictions, and CCWIS needs. The Core Team will collaborate with FPO and then lead the Statewide Expert Team meetings. FPO is continuing quarterly review of reports developed as part of the PIP and CFSR Safety Outcome 1 data.

Goal 1A: Create an Integrated System of Services to Strengthen and Support Families and Prevent Maltreatment (Families First Prevention Services Act Planning)

Measures of Progress

There is no quantitative measurement data for this goal.

Year 1 Objective 1 Begin efforts for prevention planning

- Utilize TA assistance and collaboration from statewide child welfare agencies to develop a Title IV-E Prevention Program Plan to create a prevention system in Nevada.
 - Define “child who is a candidate for foster care” and “imminent risk” (PIP 4.5.2).
 - Take inventory of services and select services for inclusion in plan (PIP 4.5.2).
 - Design rigorous evaluation strategies to ensure fidelity to evidence-based models.
 - Determine congregate care approach.

- Provide analysis of cross-agency funding for FFPSA services in Nevada and efficient ways of financing them, incorporating federal funding maximization, including Medicaid.
- Conduct policy and regulatory analysis to determine any needed changes to align with service and funding approach.
- Conduct policy and regulatory analysis to support implementation congregate care approach
- Submit final Title IV-E Prevention Program Plan to HHS in 2020.

Year 2 Objective 1 Continue efforts for prevention planning

- Utilize Title IV-E Prevention Program Plan developed with TA Assistance to write Action Plan that will move Nevada towards a prevention system.

Year 3 Objective 1 Continue efforts for prevention planning

- Begin implementation of Prevention Action Plan

Summary of Progress towards Benchmarks

DCFS contracted with the University of Maryland in June 2019 to provide consultation and technical assistance to support the development of the Nevada FFPSA Prevention Plan. The contractor has supported project management, work plan development, fiscal analysis and policy and regulatory analysis.

FFPSA planning continued throughout the reporting period. The fiscal impact of the COVID-19 pandemic prompted a review of previous planning due to reduced capacity to allocate funds to FFPSA planning and implementation.

The Nevada team updated the definition of “candidate for foster care” and made significant updates to the service array. The team assessed current capacity to measure fidelity and outcomes of models currently being implemented in the state to determine feasibility of their inclusion in the IV-E Prevention Plan.

Meetings continued between DCFS and sister agencies to leverage funds and expand upon services that already exist in the state. QRTP policies were developed and reviewed by the Children’s Bureau which became effective 2/18/2022.

DCFS received feedback from the Children’s Bureau regarding the Prevention Services plan and is currently in the process of addressing the feedback and providing more details where needed. The implementation of the Prevention Action Plan has been placed on a temporary hold until the plan is approved, and Nevada is prepared to begin the implementation.

Feedback Loop

Recurring workgroup meetings and ad hoc meetings have been used to obtain input and feedback from parent advocacy organizations, DCFS children’s mental health staff, sister agencies representing home visiting and substance use treatment services, and foster

care agencies are stakeholders in the development of the prevention plan. There are no research, evaluation, or management information systems in support of this objective.

Recurring FFPSA focused meetings included:

- Project Management/Technical Assistance Team meetings held biweekly. The purpose of this team was for the University of Maryland team to provide expert consultation and technical support, project management, work plan development, fiscal analysis, policy and regulatory analysis and Nevada FFPSA Prevention Plan review for the DCFS FPO staff leading the FFPSA planning.
- Prevention Workgroup. The primary purpose of the Prevention Workgroup is to make recommendations to the FFPSA Leadership Team on the services and related components that should be included in the state's FFPSA Prevention Plan. Specifically, it will make recommendations related to a) the priority populations to receive Title IV-E prevention services; b) operational definitions for "candidate for foster care" and "imminent risk"; c) prevention services that meet the needs of the priority populations; d) budget requirements related to provision of prevention services; and e) prevention services that could be provided by other, non-IV-E funding, including Medicaid. In making its recommendations, the workgroup will consider feasibility and capacity needs for implementation. This group met as needed.
- Fiscal/IT Workgroup. The Fiscal/IT Workgroup meets 1-2 times per month to discuss data and reporting requirements of FFPSA and the UNITY updates needed to capture that data. A subgroup has been meeting bi-weekly to develop CCWIS enhancements.

Implementation and Program Supports

Nevada is extending the contract with the University of Maryland through June 30, 2023 to provide ongoing support to outline an implementation plan for the state, and to assist with implementation and establishment of data collection and evaluation systems.

Goal 2: Improve Permanency and Well-Being Outcomes for Children and Youth

Table 38: Measures of Progress: Performance Ratings and Goals

CFSR indicator Baseline Percentages ⁹		2020 Target CFSR Performance Item Ratings ¹⁰	2021 CQI CFSR Performance Item Ratings ¹¹	2022 PIP Goal ¹²	2024 CFSP Goal
Item 4	72.7%	76%	77.19%	80.4%	86%
Item 5	41.8%	46%	56.14%	50.3%	56%
Item 6	18.2%	21.5%	47.37%	24.8%	27%
Item 7	87.5%	89%	94.74%	n/a	90%
Item 8	67.5%	69%	62.22%	n/a	77%
Item 9	74.6%	76%	77.19%	n/a	84%
Item 10	52.7%	54%	75.00%	n/a	62%
Item 11	62.1%	64%	63.16%	n/a	72%
Item 12	37.5%	42%	45.88%	44.4%	51%
Item 13	48.0%	51.7%	53.16%	55.4%	57%
Item 14	55.0%	58.55%	69.41%	62.1%	63.5%
Item 15	46.3%	50.65%	48.57%	55.0%	57%*
Item 16	72.3%	75%	70.59%	n/a	83%
Item 17	51.5%	54%	66.67%	n/a	62%
Item 18	60.7%	63%	61.22%	n/a	71%

*The CFSP 2020-2024 erroneously indicated 27%.

Table 39: Measures of Progress: CFSR Data Profile

⁹ Nevada Child and Family Services Review Round 3 – Program Improvement Plan, Part Two: CFSR PIP Measurement Plan.

¹⁰ The Nevada DCFS Child and Family Services Plan 2020-2024.

¹¹ Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 4, Washoe County PIP Monitored QTR 5, Clark County CFSR PIP Monitored QTR 6, DCFS RR CFSR PIP Monitored QTR 7

¹² See footnote State Rating Summary.

Risk Standardized Performance	Nevada's Baseline Performance (RSP)	Nevada's Performance (RSP)	National Performance
Permanency in 12 months (entries)	44.7% 16B17A	41.2% 19A19B	42.7%
Permanency in 12 months (12-23 months)	42.8% 18B19A	43.6% 21A21B	45.9%
Permanency in 12 months (24 + months)	39.2% 18B19A	35.5% 21A21B	31.8%
Re-entry to foster care	7.4% 16B17A	4.9% 19A19B	8.1%
Placement stability (moves/1,000 days in care)	5.64% 18B19A	5.95% 21A21B	4.44%

Children's Bureau Nevada CFSR 3 Data Profile January 14, 2022.

Year 1 Objective 1: Conduct a Review of Organizational Needs and Develop Planning (Foster Care Extension)

- The state will review the organizational needs for targeted grant funding streams. State DCFS Grant Management Unit (GMU) to explore and/or maintain electronic notifications for funding opportunity announcements annually.
- The state will create an implementation and budget plan for extending foster care until the age of 21 years old.
- The state to determine the following:
 - Programmatic priorities to guide decision making in increasing efforts in exploring additional funding streams, including discretionary grant programs to expand on normalcy for youth/children (NRS 432B.174), service array for families, extend foster care to the age of 21 years old, and relationships by improving community events and functions to improve Well-Being and Permanency outcomes. The best interest of the child will remain at the center of grant planning while working with complex factors in enhancing funding streams.
 - The resources and support the organization currently has in place.
 - The additional support needed to apply and support grant writing to access additional funding sources.
 - Effective planning and preparation on how the funding will be disseminated, the gaps in coverage that the grant will not cover in services and needs, and the expertise and stakeholders needed to strengthen collaborative efforts in obtaining the grant.
 - Timeline and process for carrying out the extended foster care program and an analysis of the fiscal impact (Fiscal Plan).

- The state to:
 - Complete an analysis of the implementation and impact of the extended foster care program that allows a child who is over 18 years of age to voluntarily remain under the jurisdiction of a court.
 - Submit a report to the Legislative Committee on Child Welfare and Juvenile Justice that includes a report concerning the status of the plan and recommendations for legislation necessary to improve the implementation of the program to extend foster care.
 - Submit Child Welfare and Budget BDR Request based off implementation plan for the 2021 legislation session.
 - Amend the state plan, when federal criteria are met for foster care and adoption assistance, to extend foster care until a child reaches the age of 21 years old.

Summary of Progress towards Benchmarks

The 2019 Nevada Legislature session approved Assembly Bill 150 which required DCFS to establish a working group to study ways to improve the outcomes of youth who leave the custody of an agency who provides child welfare services when they reach 18 years of age (extension of foster care). The group was charged with analyzing data and the fiscal impact related to implementation and providing recommendations. DCFS contracted with Social Change Partners LLC to assist statewide evaluation and planning. The project was formally referred to as Extended Foster Care Planning in Nevada. The planning included three subcommittees that focused on support and services, placement, and fiscal. AB 150 required the subcommittees to include representation from child welfare, social services organizations, dependency attorneys, and youth. Work on the plan began in April 2020 and recommendations were submitted to the Legislative Interim Committee on Child Welfare and Juvenile Justice on October 1, 2020.

In the 2021 Legislative Session, based on the outcomes of the AB 150 study, the Committee on Child Welfare and Juvenile Justice sponsored Senate Bill 397, a bill providing the legal framework for the Division of Child and Family Services to opt into the federal title IV-E extended foster care program. Senate Bill 397 passed the Nevada Legislature, and implementation is expected following the 2023 Legislative Session. DCFS will continue to contract with Social Change Partners, LLC to complete an impact analysis relating to implementation of title IV-E extended foster care, and an estimate of the fiscal impact, which will be presented for consideration at the 2023 Legislative Session.

Feedback Loop

Participants on the workgroup represented former foster youth, CIP, child welfare, children's mental health, independent living providers, legal advocates, fiscal experts, parent advocates, child advocates with current and former involvement in the child welfare system, and public health.

Implementation and Program Supports

DCFS has initiated a new contract with Social Change Partners LLC starting August 1, 2021, to implement the provisions of SB 397 and prepare for implementation in 2024. Social Change Partners LLC has extensive experience in convening and facilitating public and nonprofit agencies serving transition-age foster and probation youth, community stakeholders and youth themselves, and facilitating collaboration in planning and policy implementation.

Year 1 Objective 2 Improve Families' Involvement in the Court Hearing Process and Develop a Trauma- Focused Communication Process

- Selected Leadership with each Child Welfare Agencies and DCFS will attend the Annual Community Improvement Council (CIC) Summit with the courts and other dependency stakeholders to learn trauma-focused communication and engagement techniques (PIP 3.1.1).
- CIP/NCJFCJ to administer pre and post-test to determine knowledge gained from the training of court/dependency stakeholders and child welfare staff who are members of the CIC. This training is supported by Goal 3 of the PIP and the Healthy Workforce of the CFSP (PIP 3.1.1, 2.1.3).
- Convene a new statewide Achieving Timely Permanency Workgroup, to include Clark, Washoe and Rural Region representatives from DA/DAG, judges, child welfare designated staff, data team members, and any other needed stakeholders to collaboratively support the Nevada child welfare system through the efforts required to improve timely permanency outcomes for children through reunification, guardianship, and adoption (PIP 3.1.2).
- Each child welfare agency leadership will work in collaboration with the Court Improvement Program Director (CIP) to assist in expanding the Juvenile Dependency Mediation Program (JDMP) across the life of the case, pre- and post-petition (PIP 3.1.3).
- DCFS to convene a statewide Policy Workgroup to update the statewide policy 0208 Social Summary Process and condense the adoption template to improve efficiency toward achieving adoption.
- The Workgroup develops a protocol or policy to establish a specific timeline for when a child transfers from a permanency worker to an adoption worker to achieve permanency through adoption (PIP 3.4.1).
- DCFS-FPO leadership and each child welfare agency will partner with CIP, Vivek Sankaran (U of MI), 8th JD, CCDFS, LACSN, and Boyd School of Law to assist in designing a multidisciplinary legal assistance project to provide preventive legal and social work advocacy to families who are at risk or have had children placed in foster care. Implementation to be initially staged in Clark County (Possible name: Clark County Family Advocacy Center).
- DCFS-FPO leadership and each child welfare agency will partner with CIP and Children's Commission to assist in developing a database of resources by location throughout the state.
- Child Welfare Agencies and DCFS will continue to participate in the Community Improvement Councils to implement their hearing quality-focused action plans.

- Each child welfare agency CQI Unit will develop a formal feedback process and disseminate a CFSR Newsletter for caseworkers, supervisors, and managers regarding the most recent CFSR findings for Items 12, 13, 14, 15, 16, 17 and 18 (PIP 2.1.7).
- Each child welfare agency's leadership will issue an instructional memorandum to highlight the importance of using CFSR data and feedback to improve practice and identify staff who are resources for discussing and understanding CFSR feedback discussing the importance of understanding and valuing CFSR feedback (PIP 2.1.7).
 - Leadership (managers and supervisors) will support the transfer of learning process by conducting a 1:1 supervision meeting at the rate of bi-monthly at a minimum (PIP 2.1.7).

Quarterly meetings will be held starting in Q3 (after the dissemination of CFSR Newsletter) among supervisors and managers, who will assess barriers to improved performance and strengths. CQI staff with each jurisdiction and FPO CQI staff will provide technical assistance as needed (PIP 2.1.7)

Summary of Progress towards Benchmarks

Child welfare continues to partner with and attend the local CICs which meet regularly in their communities and hold an annual Summit to develop annual action plans. During the 2019 CIC Summit, the CICs members received PIP required trauma-informed training (PIP 3.1.1 deliverable). The Nevada Partnership for Training developed trauma-informed communication training as required by PIP 2.1.3. Pre and post-test and surveys were included in the training package.

State efforts have focused on the completion of PIP deliverables through Q6 including updating KinGap and Concurrent Planning policies. The social summary statewide template was updated in the Spring of 2022 by the Adoption Call to Action (ACTA) Team and the statewide Adoption Specialist. The social summary process – policy is currently being updated by the ACTA Team as it needs to meet the technical needs of the newer UNITY statewide system on the process of how to download the social summary document. An explanation of the ACTA Team can be found in this report under Item 6, Adoption.

The statewide PIP Team 3 Achieving Timely Permanency Workgroup provided recommendations and subsequent follow up workgroups have met to review and process the recommendations. As a result of the COVID-19 crisis, the Capacity Building Center for States (CBCS) developed a plan to provide intensive project support to support the state's effort to complete PIP deliverables timely and continue to provide support for the completion of the recommendations.

While the CFSP outlined that this workgroup would develop a protocol or policy to establish a specific timeline for when a child transfers from a permanency worker to an adoption worker to achieve permanency through adoption it is not realistic due to various business practices between jurisdictions.

PIP deliverable 3.1.3 addresses improved engagement of families and train workers on the use of mediation to achieve timely permanency. The trainings have improved understanding of mediation throughout all 11 jurisdictions and increased use as a tool to improve timely permanency. The training completed outlines mediation and its benefits while teaching stakeholders and child welfare staff how to use it effectively.

The DCFS FPO leadership and each child welfare agency will partner with CIP, Vivek Sankaran (U of MI), 8th JD, CCDFS, LACSN, and Boyd School of Law to assist in designing a multidisciplinary legal assistance project to provide preventive legal and social work advocacy to families who are at risk or have had children placed in foster care. Implementation to be initially staged in Clark County.

The Children's Commission determined there was no longer a need to develop a separate database as Nevada utilizes 2-1-1 as a web-based data resource site maintained by the Nevada DHHS.

Through partnership with FPO, the child welfare agencies developed a statewide newsletter to inform staff of CFSR findings and best practices. This was a deliverable over the past year.

During Q3-Q6 of the PIP, Team 3, with statewide representation from Child Welfare and the CIP met every other week to facilitate the completion of PIP items due during these quarters, which included all of PIP Team 3's items as described in the PIP Q6 Progress Report. All items were completed successfully during this time and Team 3 continues to monitor implementation and participate in the statewide SQIC meeting to ensure the items change practice. Team 3 has learning circles scheduled for the months of May through July and an ongoing work plan with the Capacity Building Center for States to keep momentum going. Progress of key activities will continue to be monitored through the statewide case reviews beginning in May 2021.

Feedback Loop

There is ongoing communication with CIP, the Children's Commission, and the PIP teams to achieve the objectives of this goal.

Implementation and Program Supports

The Capacity Building Center for States has developed a plan to provide intensive project support to the work of PIP Goal 3 which achieving timely permanency through the end of PIP Q8 or until all the project tasks are completed. There are no research, evaluation, or management information systems in support of this objective.

Year 1 Objective 3 Improve Consistent Practices and Policies for Caseworker Contact, Visitation Policy, Concurrent Planning, KinGAP, and Hearing Notification for Foster Caregivers

- Each child welfare agency will participate in a statewide policy workgroup lead by the DCFS FPO Foster Care Specialist to update the statewide 1001 Diligent Search Policy, 1010 KinGAP Policy, the 0204 Permanency and Case Planning

Policy, and the statewide 0208 Social Summary Process Policy. The social summary template will be condensed to improve efficiency toward achieving adoption. Participants in the workgroup must include a representative from AOC/CIP to enhance the concurrent planning with adoption and KinGAP statewide to reflect the most current best practices. The diligent search procedures will reflect concerted efforts necessary to ensure that immediate and extended family members, and fictive kin are identified, located, informed, and evaluated in a timely manner (PIP 3.2.1, 3.2.2, 3.3.1, 3.3.2).

- Each child welfare agency to assist AOC/CIP develop a form to be distributed by both the court and the child welfare agencies staff to gather information about potential relatives or fictive kin (PIP 3.3.1).
- The Achieving Timely Permanency Workgroup with technical assistance as needed to conduct a timeline analysis for the TPR and adoption process by collecting and requisite new, as well as existing data from the past Focus Groups, APSR, Statewide Assessment, and manual judicial tracking information to assess the barriers to TPR and adoption, explore opportunities for improvement, and determine recommendations for practice changes. DCFS leadership to work in collaboration with the workgroup to determine the impact of practice changes to their agency and ability to implement practice modifications (PIP 3.4.1).
- Each child welfare agency in collaboration with the courts and other dependency stakeholders will develop concurrent planning “Scripts” to also be used by the judiciary and attorneys to help families better understand the importance of concurrent planning for their child(ren)’s well-being and how the parent can provide beneficial input when concurrent planning occurs for the child(ren) to achieve permanency within required timelines (PIP 3.3.2).
- DCFS FPO will begin analyzing the Caseworker Contact and Visitation Policy to ensure the statewide policy is updated and work in collaboration with each jurisdiction if the policies need updating (PIP 2.1.6).
- Each child welfare agency will begin analyzing their Caseworker Contact and Visitation Policy to ensure they both align with the statewide policy and determine if both policies are accessible to all child welfare staff, foster parents, courts, parents, and families involved in the case to enhance stakeholder knowledge (PIP 2.1.6).
- Each jurisdiction will provide their agency’s Caseworker Contact and Visitation Policy to the state DCFS Foster Care Manager/Specialist. DCFS FPO will create a link (by jurisdiction/statewide) to the QPI Website specific to the foster care providers jurisdiction (PIP 2.1.6).

Summary of Progress towards Benchmarks

State efforts have focused on the completion of PIP deliverables through Q6 to include updating KinGAP and Concurrent Planning policies, training the workforce on these updated policies and creating and training the judicial stakeholders on Practice Guides about these topics. The social summary will be assessed for revision by the Adoption Call to Action Team. Diligent search activities were addressed during Q4 of the PIP. CIP is a participant in the PIP teams working on PIP 3.2.1, 3.2.2, 3.3.1, 3.3.2 deliverables as well as members of the PIP Core team.

The statewide Achieving Timely Permanency Workgroup has been convening since November 2019. As a result of the COVID-19 crisis, the Capacity Building Center for States has developed a plan to provide intensive project support PIP deliverables. The Achieving Timely Permanency workgroup completed their activities as outlined in Item 3.4.1 and out of that work came several recommendations now being worked on.

The “scripts” (bench cards) were completed and distributed to courts and stakeholders in SFY2021 (PIP 3.3.2).

The statewide policy is current, ADA accessible, and available on the DCFS Website. Clark and Washoe Child Welfare Agencies both reviewed their internal policies and provided a written submission of their analysis. The agencies have updated their internal Caseworker Contact and Visitation Policies and submitted them to the state DCFS Foster Care Manager/Specialist. The updated policies have been posted to each agency website and the QPINevada.org website.

Feedback Loop

There is ongoing communication with CIP, the Children’s Commission, and the PIP teams to achieve the objectives of this goal. The PIP Core team communicates quarterly to update the Decision Making and Assistant Director groups (*see Collaboration Section*) on the status of PIP implementation (PIP 4.4.1).

Implementation and Program Supports

The Capacity Building Center for States has developed a plan to provide intensive project support to the work of PIP Goal 3 which includes achieving timely permanency through the end of PIP Q8 or until all tasks are completed. The Capacity Building Center for Courts is providing technical assistance to CIP. There are no research, evaluation, or management information systems in support of this objective.

Year 2 Objective 1 Improve Families’ Involvement in the Court Hearing Process /Strengthen the Court Case Review

- Child Welfare Agencies and DCFS to participate in AOC/CIP Workgroup to identify an existing brochure or to develop an informational guide/brochure to share with parents, foster parents and children regarding the dependency process and its legal requirements and timelines (Q5).
- Child welfare agencies in collaboration with AOC/CIP, at regularly scheduled statewide judicial roundtables, discuss and train the judiciary concerning making and documenting compelling reasons for why it is in a child’s best interests to NOT go forward with either reunification or termination of parental rights when a child has been in out-of-home care for 12 months, or 14 out of the last 20 months.
- Child welfare agencies in collaboration with the existing CIP Subcommittee on Statewide Court Order Templates reviews to ensure that the Permanency Hearing Court Order Template outlines the need for a specific finding for a child remaining in out-of-home placement at month 12 or at month 14 of 20 months. Court findings document what the child’s best interest is and the compelling reasons if the primary Case Plan Goal is not changed to adoption.

- DCFS-FPO leadership and Child Welfare Agencies partner with CIP, 8th JD, CCDFS, LACSN, and Boyd School of Law to assist in securing funding, establishing location, and determining staffing for development family advocacy center.
- Child Welfare Agencies and designated staff through designated leadership to partner with CIP and Children's Commission to assist in developing a database of resources by location throughout the state.
- Child Welfare Agencies to support CIP hiring a contractor to develop Resource App first for Android, then for Apple devices.
- Child Welfare Agencies and DCFS leadership will continue to participate in the Community Improvement Councils to implement their hearing quality focused action plans.

Summary of Progress Towards Benchmarks

The child welfare agencies and AOC/CIP workgroup completed the Nevada Road Map which is a guide that identifies the dependency process and its legal requirements and timelines. This road map has been posted in all 11 judicial districts and can be provided to foster parents and parents whose children are involved in the child welfare system.

The AOC/CIP has used the CIC Summit and CIC meetings to educate and train the judiciary team on documenting why compelling reasons are not in the child's best interest to move forward with TPR. The workgroup additionally provided tools consisting of court order templates/outlines and bench cards.

Feedback Loop

There is ongoing communication with CIP, the child welfare agencies, and the PIP teams to achieve the objectives of this goal. The PIP Core team communicates monthly to update the SQIC on the status of PIP implementation.

Implementation and Program Supports

PIP Team 3 continues to work with the Capacity Building Center, judicial districts, AOC/CIP, and the child welfare agencies through the end of PIP Q8 or until all tasks are completed for the implementation of the strategies identified during the workgroups. The workgroup worked with agencies to identify a staggered implementation plan as to not overwhelm staff and stakeholders.

Year 2 Objective 2 Improve Consistent Practices and Policies for Concurrent Planning, KinGAP, and Hearing Notification for Foster Caregivers

- Child Welfare Agencies to work in collaboration with CICs to assist in analyzing permanency timeliness data to identify barriers and solutions to meet federal and state timelines. Child welfare agency CIC representatives will work with local CICs to create action plans to maintain progress in removing barriers to achieving permanency timeliness
- Foster caregivers are regularly and consistently notified of their foster child's court hearings through collaboration with the existing CIP Subcommittee on Court Order

Templates and the Child Welfare Agency staff. DCFS FPO CQI Specialist will develop and received caregiver surveys regarding the notification to caregivers for review hearings (Q6).

Summary of Progress Towards Benchmarks

Through PIP key activity 3.4.1 the team three workgroup, consisting of the child welfare agencies, AOC/CIP, stakeholders, and the Capacity Building Center analyzing data to assess for root cause of TPR barriers and provide recommendations to improve timeliness to permanency. There were additional workgroups created to address the recommendation which included reviewing Nevada law, and policies both internal and statewide, and review the currently data collection process and tracking methods and if needed make recommendations to improve these systems. While the PIP activity has been completed during Q5. The recommendations that came out of this work are still being processed.

Through PIP key activity 3.2.3 the workgroup updated policy 205 Court Hearing Notification and created a template for caregivers to understand their rights and provide updates to the court for the child and youth in their care. Implementation was initiated by a statewide memo sent out to agency staff instructing caregivers will be provided notification of upcoming annual and semi-annual court hearings and have the ability to provide updates on the foster child/youth. Baseline data was gathered and sent to each child welfare agency using a caregiver survey which was sent out in January of 2021. In September 2021, the survey was redistributed to caregivers to monitor progress.

Feedback Loop

There is ongoing communication with CIP, the child welfare agencies, and the PIP teams to achieve the objectives of this goal. The PIP Core team communicates monthly to update the SQIC on the status of PIP implementation.

Implementation and Program Supports

PIP Team 3 continues to work with the Capacity Building Center, judicial districts, AOC/CIP, and the child welfare agencies through the end of PIP Q8 for the implementation of the strategies identified during the workgroups, or until all tasks have been implemented. The workgroup worked with agencies to identify a staggered implementation plan as to not overwhelm staff and stakeholders.

Year 2 Objective 3 Track and Monitor Progress of Extended Foster Care

- DCFS designated through executive leadership to collect data based off the extended foster care plan and monitor the program for modifications for the next legislative session in 2023.

Summary of Progress Towards Benchmarks

The bill was introduced in the 2021 Legislative Session. Through amendments, the final bill provides the legislative framework to build the framework to implement Title IV-E Extended Foster Care following a fiscal appropriation in the 2023 Legislative Session.

Feedback Loop

Extended Foster Care continues to be a topic of discussion at Assistant Directors' Meetings and the Decision-Making Group. Based on the passage of Senate Bill 397, the Family Programs Office will reconvene a statewide group to work towards implementation of Senate Bill 397 and to prepare for further work on Extended Foster Care in the 2023 Legislative Session.

Implementation and Program Supports

The Family Programs Office initiated a new contract with Social Change Partners beginning August 1, 2021, to support further work on Extended Foster Care to begin following the 2023 Legislative Session. Social Change Partners were previously contracted by DCFS to support implementation of Assembly Bill 150 from the 2019 Legislative Session which set the foundation for work on Extended Foster Care in Nevada.

Year 2 Objective 4 Assessing and Improving Trauma Focused Communication

- DCFS FPO CQI Specialist will extract and analyze the latest CFSR Review data for Items 6, 13, 14, and 15 to measure the outcomes for Permanency 1 and Well-Being 1 to support improved family engagement overall.
- DCFS FPO CQI Specialist to determine the impact of trauma focused communications and if judicial stakeholders are using effective techniques to communicate with families through surveys to case participants.
 - Data collected by DCFS FPO Foster Care Specialist and CQI specialist will work in collaboration with Training Manager and training partners to Improve training of trauma focused communication skills and assess if the established curriculum and learning objectives need modifying and/or updated. Modification and updates to be supported through the Healthy Workforce of the CFSP.
 - Supervisors and caseworkers complete training on the updated social summary policies.

Summary of Progress Towards Benchmarks

The state extracts data driven reports from the OMS after every case review has been completed. These reports are reviewed during SQIC meetings.

Discussions during SQIC meetings revolve around the data obtained from the reports that promote evidence of practice change and any impacts of the trauma focused training.

The trauma informed training was modified through PIP activities 2.1.3 and 2.1.4. The training officially went live in Q5. The training was first presented in the CIC Summit in October of 2019. The AOC/CIP continue to talk about the trauma information presented in the training at the 11 local CIC's and had completed another presentation at the 2020 CIC Summit. The AOC/CIP focuses on techniques of trauma-focused communication to engage the parents and relatives and the 11 judicial districts. The AOC/CIC will conduct a survey to continue to monitor the progress of trauma focused engagements throughout the judicial districts.

For the child welfare workforce, the state identified agency staff consisting of investigators and permanency staff to participate in the training. The expectation was to have at least 90% of the identified staff trained by the end of Q8. The state met this expectation as 100% of the initially identified staff have completed the training requirement. Training will continue as needed for identified new staff members and supervisors as they are hired.

Feedback Loop

There is ongoing communication with CIP, the child welfare agencies, and the PIP teams to achieve the objectives of this goal. The PIP teams 2 and 3 communicate monthly to update the SQIC on the status of PIP implementation and progress.

Implementation and Program Supports

There is ongoing communication with CIP, the child welfare agencies, and the PIP teams to achieve the objectives of this goal. The PIP teams 2 and 3 communicate monthly to update the SQIC on the status of PIP implementation and progress.

Year 2 Objective 5 Improve Hearing Notification for Foster Caregivers

- Foster caregivers are regularly and consistently notified of their foster child's court hearings through collaboration with the existing CIP Subcommittee on Court Order Templates and the Child Welfare Agency staff. DCFS FPO CQI Specialist will develop and receive caregiver surveys regarding the notification to caregivers for review hearings.

Summary of Progress Towards Benchmarks

Through PIP key activity 3.2.3 the workgroup updated policy 205 Court Hearing Notification and created a template for caregivers to understand their rights and provide updates to the court for the child and youth in their care. Implementation was initiated by a statewide memo sent out to agency staff instructing caregivers will be provided notification of upcoming annual and semi-annual court hearings and can provide updates on the foster child/youth. Baseline data was gathered and sent to each child welfare agency using a caregiver survey which was sent out in January of 2021. In September 2021, the survey was redistributed to caregivers to monitor progress. Survey responses indicated that there was an increase of 14.28% in caregivers being notified of their right to attend the Semi-Annual Review and Permanency Hearings, and there was an increase of 17.73% in caregivers being notified of their right to be heard at the Semi-Annual Review and the Permanency Hearings. Furthermore, Responses indicated that there was an

increase of 22.54% in caregivers' ability to provide information about the child in their care to the court.

Feedback Loop

There is ongoing communication with CIP, the child welfare agencies, and the PIP teams to achieve the objectives of this goal. The PIP Core team communicates monthly to update the SQIC on the status of PIP implementation.

Implementation and Program Supports

PIP Team 3 continues to work with the Capacity Building Center, judicial districts, AOC/CIP, and the child welfare agencies through the end of PIP Q8 for the implementation of the strategies identified during the workgroups. The workgroup worked with agencies to identify a staggered implementation plan as to not overwhelm staff and stakeholders.

Year 3 Objective 1 Analyze the Impact of the Extension of Foster Care

- The State to analyze the impact of the extension of foster care to date and explore appropriate BDRs to be drafted and submitted to legislation for the 2023 session or any special session, including budget BDRs

Summary of Progress Towards Benchmarks

In the 2021 Legislative Session, based on the outcomes of the AB 150 study, the Committee on Child Welfare and Juvenile Justice sponsored Senate Bill 397, a bill providing the legal framework for the Division of Child and Family Services to opt into the federal title IV-E extended foster care program. Senate Bill 397 passed the Nevada Legislature, and implementation is expected following the 2023 Legislative Session. DCFS will continue to contract with Social Change Partners, LLC and continues working collaboratively on an impact analysis relating to implementation of title IV-E extended foster care, as well as an estimate of the fiscal impact, which will be presented for consideration at the 2023 Legislative Session.

Feedback Loop

Participants on the workgroups related to the implementation of Extended Foster Care (EFC) over the past year have included representatives from the three child welfare jurisdictions, the Family Programs Office, fiscal experts, and independent living providers. The state is currently restructuring the independent living and EFC work groups to create several sub workgroups that will work on more focused program areas. Within these more focused sub workgroups, the state plans to over the next year include representatives from CIP, direct child welfare staff and supervisors, Children's Mental Health, Department of Public Health, Welfare and Supportive Services, as well as youth and young adults with lived experience and expertise.

Implementation and Program Supports

DCFS has initiated a new contract with Social Change Partners LLC starting August 1, 2021, to implement the provisions of SB 397 and prepare for implementation in 2024. Social Change Partners LLC has extensive experience in convening and facilitating public and nonprofit agencies serving transition-age foster and probation youth, community stakeholders and youth themselves, and facilitating collaboration in planning and policy implementation. The state continues to receive technical assistance from the Capacity Building Center for States to work concurrently on identifying programmatic and practice needs in the independent living program as the state moves toward EFC implementation.

Year 3 Objective 2 Improve Families' Involvement in the Court Hearing Process/ Strengthen the Court Case Review:

- DCFS leadership and each child welfare agency in collaboration with CIP will develop and conduct necessary training for Judicial/legal Stakeholders regarding how to refer to and utilize the family advocacy center.
- DCFS leadership in collaboration with CIP will ensure that the first resource application will be installed on CCI server at AOC where it can be maintained by Children's Commission staff (update contact information, add new resources, remove old, track access) and ensure the community stakeholders are aware of the availability for free internet Resource App, including notification to child welfare staff through an instructional memorandum.
- Child Welfare Agencies and DCFS leadership will continue to participate in the Community Improvement Councils to implement their hearing quality focused action plans.

Continued working towards:

- Child welfare agencies in collaboration with the existing CIP Subcommittee on Statewide Court Order Templates completed and began implementation of the templates to ensure that the Permanency Hearing Court Orders address the need for a specific finding for a child remaining in out-of-home placement at month 12 or month 14 of 20 months.
- Child welfare agencies and designated staff through designated leadership to partner with CIP and Children's Commission to assist in developing a database of resources by location throughout the state.
- AOC/CIP contracted with Data Savvy Consultants to do evaluations and analyses on virtual hearing practices, Juvenile Dependency Mediation Program (JDMP) evaluations, Timeliness Report, and short-stayer population to provide feedback and recommendations to CICs and judicial leadership.
- CIP/AOC continues to participate in the Children's Justice Act Task Force (CJA), Statewide Quality Improvement Committee (SQIC), Statewide Independent Living Committee, foster care recruitment initiatives, and the PIP Team 3 Workgroup.

Summary of Progress Towards Benchmarks

The child welfare agencies and AOC/CIP workgroup completed the Nevada Road Map and Child Welfare Court Process Guide Handbook which are guides that identify the dependency process and its legal requirements and timelines. Implementation of the guides has continued such as the AOC/CIP collaborating with child welfare agencies to print and disseminate physical copies and the guides have been posted on all 11 judicial districts' websites, including the Nevada Supreme Court website, and has been provided to foster parents and parents, whose children are involved in the child welfare system. These guides have also been provided to court stakeholders that are new to the Nevada dependency system.

Child Welfare representatives along with AOC/CIP and legal stakeholders completed a permanency training for dependency stakeholders which includes modules on Nevada's Kinship Guardianship Assistance Program (KinGAP), guardianship as a permanency option, concurrent planning, and reasonable efforts. Additionally, the AOC/CIP used the CIC Summit and CIC meetings to educate and train the judiciary team on racial equity, the utilization of guardianship, concurrent planning, KinGAP and reasonable efforts.

The Statewide Court Ordered Templates were completed and implementation across the State has begun. The forms are designed to increase compliance with federal law and regulations and make practice in abuse and neglect cases consistent across Nevada. These forms are also intended to provide consistency and understanding to all parties to improve compliance with those orders. The forms will promote the practice of providing parties with comprehensive orders following each hearing, to improve the quality of proceedings and help families navigate the dependency court process.

CIP contracted with Data Savvy to do evaluations/analyses on virtual hearing practices, short-stayer population, TPR Timeliness Report and JDMP to provide feedback and recommendations to CICs and judicial leadership. Recommendations are made to CICs based on the conducted evaluations/analyses to improve family engagement and best court practices. In addition, CIP/AOC partnered with Data Savvy Consultants to conduct TPR Focus Groups to identify TPR barriers within each jurisdiction and the State which was a result of the Program Improvement Plan (PIP) Goal 3, Item 3.4.1.

Feedback Loop

There is ongoing communication with CIP, the child welfare agencies, and the PIP teams to achieve the objectives of this goal. The ongoing collaboration promotes best practices that advance meaningful and ongoing collaboration among courts, child welfare agencies, and other stakeholders to achieve safety, permanency, and well-being for children and families in the child welfare system in a fair, efficient, just, and timely manner.

The Court Improvement Program (CIP) Select Committee Meeting meets quarterly. Through this meeting, the Nevada court systems partner with the Division of Child and Family Services (DCFS) on a variety of fronts that focus many of its efforts on implementing the CFSP, APSR, and CFSR. Two CIP members participate in the SQIC. This membership helps align child welfare agencies with the courts in efforts to develop, implement, and monitor child welfare performance and improve outcomes. A special

ongoing project of the CIP is the development of a legal representation study which includes performance measures and a survey created to be completed by the local judicial districts using the Court Improvement Councils (CIC). Additionally, DCFS has established a formal system to subgrant IV-E funds to entities providing legal representation.

Implementation and Program Supports

Court Improvement Councils

All 11 Judicial Districts have collaborative Court Improvement Councils (CICs) which develop annual action plans to improve the handling of the judicial handling of child welfare cases. The CICs meet regularly in their communities and at an annual Summit. CICs meet monthly or quarterly depending on the judicial district. The CIP Select Committee meets quarterly, and CIC leads, or stakeholders attend to report on their activities, goals, and barriers. The CICs from all 11 JDs meet annually for the CIC Summit. During the CIC Summits, participants are educated on the various PIP tasks relating to court processes.

The Nevada court system has partnered with DCFS on a variety of fronts over the last year focusing many of its efforts on implementing the goals of the CFSP and PIP. CICs have initiated supporting several of the outcomes and systemic factors as a result of action planning regarding the timeliness, child safety, and hearing quality. CIC members are participants in PIP Team 3 Achieving Timely Permanency.

Court Improvement Program (CIP) Data:

CIP receives a statewide report at least quarterly to review TPR data with the judiciary and CIC stakeholders. Since 2011, the baseline year CIP began timeliness data collection, per the CFS 775 Timeliness reports from UNITY the median days to permanency decreased from CY 2011 (848 median days) to CY 2021 (717 median days). The CFS 775 Timeliness Report is provided to CIP by DCFS, Office of Analytics. Data are pulled from youth under age 18 who are still in agency custody as of the end date of the reporting period who have a removal record and at least one protective custody hearing entered in UNITY for the current foster care episode.

Nevada does not have a unified court system that impacts CIP's data collection method, for that reason CIP contracts with Data Savvy Consultants to analyze and compile court timeliness data that may not be collected by UNITY. Drawing from Foster Court Improvement Nevada website and Chapin Hall data, the Data Savvy Consulting identifies new potential measures as well as updates existing data to demonstrate trends in child welfare outcomes overtime for the State. Per these timeliness measures, 81% of the first permanency hearings took place within 365 days of removal in the first half of 2021, compared to 84% in 2020. Additionally, The CIP, contracted with Data Savvy Consulting to design and implement a study that would provide information about TPR timeliness and sources of delay to the NVCIP, the 2nd and 8th judicial district (JD) dependency courts, and the CICs. This report summarizes findings from a case file review of TPR cases in both the 2nd and 8th JDs to provide a picture of TPR practice relating to timeliness. A

random sample of cases with a TPR petition filed in 2019 in the 2nd and 8th JDs were reviewed, for a total of 171 cases (n=70 for the 2nd JD and n=101 for the 8th JD). Analyses were performed on cases in April of 2021 to give cases time to reach permanency.

Table 40: Median Days Between Key Court Events

Court Events	Median Days (Total)	Median Days 2 nd Judicial (Washoe County)	Median Days 8 th Judicial (Clark County)
Removal to 72 Hour Hearing	4	2.5	4
72 Hour to Petition Filing	10	0	13
Petition Filing to Adjudication	32	44	20
Removal to Disposition	59	55	62
Petition Filing to 1 st Review	162	171	158
Petition Filing to 1 st Perm Hearing	345	357	340

Year 3 Objective 3 Develop a Trauma Informed Child Welfare System

- DCFS-FPO Foster Care Specialist will convene a workgroup with each child welfare agency and CIP representative to develop a Readiness/Implementation Plan to initiate and complete the development of a trauma informed child welfare system. This process is supported through the Healthy Workforce of the CFSP and PIP Key Activity 2.1.1.
- Workgroup to:
 - Identify and make decisions for a trauma informed child welfare system as the actions plan are implemented; and
 - Assist leadership in the development of instructional memoranda to support the Trauma Informed Child Welfare System in connection with the Healthy Workforce of the CFSP.

Summary of Progress Towards Benchmarks

Over the past year, the state has focused on its healthy workforce goal and its objectives that had been delayed due to the COVID 19 national health emergency. As a result, work towards this objective has been delayed as well. Over this past year, a workgroup was formed to develop the satisfaction survey as part of goal three. The plan for this upcoming

year is to utilize this newly formed workgroup as a place to start the discussions around creating a plan to develop a trauma informed child welfare system as it pertains to goal two's objectives.

Feedback Loop

Over the course of the next year, discussions around this objective will occur primarily in the healthy workforce workgroup. This workgroup will relay their planned activities, ideas and decisions to both the WIT and the SQIC for further discussion and decision making, if needed. These groups have representation from the three child welfare agencies, the FPO, NPT and CIP.

Implementation and Program Supports

Over the next year, the state will receive technical assistance from the Capacity Building Center for States and will ensure all objectives around supporting a healthy workforce and a trauma informed child welfare system are included.

Goal 3: The State of Nevada Will Cultivate a Healthy Workforce That Engages, Trains, and Supports Both Agency Staff and Community Stakeholders to Achieve Better Outcomes for Children and Families.

Measures of Progress

There is no quantitative measurement data for this goal.

Year 1 Objective 1 Utilize Technical Assistance from CBCS to Implement Coaching Model

The state continues to work collaboratively with CBCS to implement, evaluate and measure the impact of this model on the workforce. The pandemic impacted the delivery and method of training and ongoing mentor support to management that received the training.

- Identify the Nevada team for Atlantic Coast Child Welfare Implementation Center (ACCWIC) coaching project and coaching curriculum modifications.
- Define/clarify Nevada team, Center for States team roles and responsibilities for coaching project.
- Identify Nevada Practice components to integrate in ACCWIC coaching curriculum.
- Schedule planning calls for review of the modified coaching curriculum.
- Establish a coaching training schedule and identify coaching champions participants for pilot coaching training and subsequent coaching training.
- Identify trainers for pilot coaching training and subsequent trainings.
- Review and finalize the integrated ACCWIC coaching curriculum.
- Identify coaching tools to include evaluation tool/survey for coaching training and coaching documentation tools for use by coaches.

- Develop fidelity tool (Identify coaching behaviors for data on quality of coaching, adherence to coaching practice, and context in which coaching occurs).
- Collect and review data from the training evaluation tool to improve subsequent coaching training, as needed.
- Identify who will coach coaching champions.
- Create a community of practice for coaching champions (observations, on-site individual coaching sessions, group coaching sessions, monthly coaching calls, quarterly learning collaborative, etc.).
- Implement a coaching community of practice for coaching champions to support coaching champions and build sustainability.
- Create communication that allows for the sharing of challenges and barriers related to coaching to continually address/resolve barriers.
- Conduct subsequent coaching trainings.
- Evaluation of the Coaching Model will continue into the years 2022-2024.

Summary of Progress towards Benchmarks

Nevada continues making major strides toward the implementation and sustainability of the ACCWIC coaching model utilizing technical assistance provided by the Capacity Building Center for States.¹³ The Nevada Core Steering Team's ("CoachNV Core Team") mission was to "develop and retain a transformed workforce through implementation of a coaching model that creates, promotes and maintains statewide consistency of a strength-based practice and improves outcomes for children and families." The state and regional partners met regularly to develop a joint implementation plan that included the development of training, evaluation measures, messaging, regional readiness as well as stakeholder buy-in and development of regional implementation champions. This past year the Nevada CoachNV Core Team and its charter were integrated into the WIT, during which CoachNV remains a standing agenda item. Additionally, one WIT meeting a quarter will focus entirely on CoachNV to allow state partners to have focused discussions around sustainability, fidelity, and communication.

The CoachNV Core Team developed training curriculum using the Atlantic Coast Child Welfare Implementation Center (ACCWIC) coaching model to meet Nevada's specific needs. The intent of the coaching model is to create a supportive learning environment by:

- Consistent modeling and development of a trusting environment.
- Increased retention of a more qualified, skilled, and healthy workforce.
- Reinforced training and transfer of learning.
- Increased supervisory capacity.
- Enhanced critical thinking skills, soft skills, practice, and knowledge.
- Improved organizational culture and climate (safe, trusting and collaborative).

The state originally piloted the new curriculum with leadership in the southern region. Since that time, training has commenced for supervisors, managers, and leadership

¹³ CBCS' Semi-annual Report January 2020 State of Nevada Coaching Implementation Project.

statewide. The entire statewide management workforce was not trained as planned due to COVID-19 and orders to shelter in place. This training was designed to be in-person which includes role-playing in a group setting, however, the training was subsequently provided virtually. The state received technical assistance from the CBCS for the delivery of the training and provided individual and group coaching for recipients. CBCS also worked with the state's university partners in the evaluation of the virtual training and utilized this information to further refine and improve the curriculum and its delivery. Discussions around the need to modify the existing curriculum were had during quarterly CoachNV meetings, sub workgroup meetings, as well as with the WIT team. This resulted in the core curriculum remaining intact; however, allowed for some flexibility in the delivery of the training. Training for all statewide leadership and managers was completed this past year and training for supervisors statewide commenced. Training will continue through the upcoming year to ensure any supervisors, or newly promoted managers not yet trained, receive the training. The state also increased its capacity to facilitate the curriculum by identifying regional trainers statewide.

Over the next year, as part of their work plan, the CBCS will work with the state to create advanced coaching tools to assist supervisors in further integrating coaching skills into supervision. The CBCS will also provide support and consultation on how to modify and integrate CoachNV into the state's supervisor core training.

As the ACCWIC model does not have a standard fidelity instrument, members of the CoachNV Core Team developed a fidelity monitoring tool for the coaching model and methodology around the use of the tool. In addition, a logic model exercise was used to develop a set of outcomes. This resulted in a survey assessment that was delivered agency-wide to measure the impact of the coaching model. Feedback received from the initial use of the fidelity tool was utilized to further refine it. Over the next year, the tool will be utilized to evaluate and assess the utilization of coaching by the workforce. The tool assesses whether the different components of coaching are being utilized during a session. The information collected will be evaluated within a sub workgroup to determine the quality of coaching and adherence to coaching practice. The CBCS will provide consultation on the evaluation process to collect and analyze fidelity data to assess whether staff behaviors are showing that the implementation of CoachNV is occurring as intended. The CBCS will also provide consultation on how to utilize the fidelity data and information to address implementation challenges throughout the state including providing consultation on the development of the CQI process so that fidelity assessment data can be utilized to improve the coaching practice of individuals. This data will then be shared with the larger WIT team.

Each region identified coaching champions and is working with its university partner to provide ongoing coaching support to cohorts that have completed CoachNV training. In Spring 2020, a CoachNV community of practice was initiated which includes group coaching sessions, individual coaching sessions, and monthly coaching calls to support sustainability. These efforts to maintain a community of practice will continue through the next year. A communication sub workgroup meets monthly to discuss strategies around messaging to the workforce and ways to engage and support coaches even more. The state's university partners have been discussing the potential of creating an online community through the LMS that would create a landing page with resources, tools and

the ability to connect with other coaches throughout the state with a “coaching buddies” program. Personnel vacancies and budget constraints impacted the advancement of this online community this past year; however, efforts will be renewed over the next year.

Feedback Loop

A communication subcommittee was formed to support consistent statewide communication and messaging. The communication subcommittee will provide monthly updates at WIT Subcommittee, and minutes will be shared with the WIT and DMG.

The fidelity tool will be used to assess how CoachNV has been implemented. The results will provide ongoing data on how coaching is being implemented and impacting the workforce. The data will be used to inform changes to the curriculum and feedback to the trainers throughout the implementation and evaluation process. The CQI process includes ensuring fidelity, performance improvement evaluations, measurement through surveys and focus groups and communication back to coaches and coaches. Additionally, over the next year, the CBCS will provide consultation on the development of a learning circle process.

Implementation and Program Supports

Nevada continues to receive support and technical assistance from the CBCS and received an approved Work Plan from the CBCS in April 2021 to run through December 2021. Specific services are outlined in the Center for States Integrated Capacity Building Plan. Due to the financial impact of COVID-19 and the reduction in trainers, CBCS extended services beyond consultation and technical assistance this past year through the provision of training and mentoring. Technical assistance over the next year will include further facilitation of training and coaching, as well as continued review of the measure of progress for this goal.

Year 1 Objective 2 Form Workforce Innovation Team (WIT) to identify challenges

- Identify members from each jurisdiction (Chair/Co-Chair (2), management (1), HR –manager/analyst (3), data/statistician (1), caseworkers/supervisors (3-4), training (1) for Workforce Innovation Team (WIT).
- Discuss overall workforce goals to create a healthier workforce.
- Identify data that will help prioritize and assess needs.
- Identify major workforce challenges in creating a healthier workforce.
- Develop a communications plan to disseminate information.
- Identify key themes for a meaningful satisfaction survey.
- Administer the first employee satisfaction survey.
- Determine the need for workforce analysis.
- Training curriculum addresses compassion fatigue, burnout, and vicarious trauma.

Summary of Progress towards Benchmarks

The Training Management Team transitioned to become the Workforce Innovation Team (WIT) and expanded their role to include supporting the implementation of CoachNV as well as the activities supporting Healthy Workforce goal. A satisfaction survey of the workforce was administered through CoachNV in January through February 2020. The WIT will review the results and determine how to use the results. The CoachNV Implementation Team, which has many cross over members with the WIT, will develop training standards, trainer feedback loop, use of data to inform any changes made to the training, as well as use of the training survey to improve the curriculum.

Feedback Loop

The CQI process includes ensuring fidelity, performance improvement evaluations, measurement through surveys and focus groups, and communication back to coaches. Additionally, a communication committee has been formed to design a feedback loop to staff on survey results.

Implementation and Program Supports

Nevada continues to receive support and technical assistance from the CBCS for the coaching model and received an approved Work Plan from the CBCS in April 2021 to run through December 2021. There are no research, evaluation, or management information systems in support of this objective.

Year 1 Objective 3 Increase Participation in Family Engagement Training

- Each child welfare agency leadership, in alignment with PIP Activity 2.1.1, will issue an Instructional Memorandum requiring designated child welfare staff to take existing Motivational Interviewing or Advanced Motivational Interview Training, (2020) Working with Traumatized Adults (2023), and Father Engagement (2023) Training through Nevada Partnership for Training (NPT). Staff who have already participated in this training during the past 12 months prior to the acceptance of the PIP are excluded. The remaining staff will be required to have participated in the same training in year 4 of the CFSP.

Summary of Progress towards Benchmarks

The Instructional Memorandum for PIP Activity 2.1.1 has been issued to all jurisdictions. PIP Activity 2.1.3 requires the development of trauma-informed Communication training specific to family engagement using AOC/CIP dependency stakeholder training and trauma-informed communication techniques. This deliverable was met in Q5, and staff began to participate in the training during Q6.

In April of 2021, the state reached 100% of staff participation in the Motivational Interviewing training.

As of September 2021, 100% of the identified staff statewide had already completed the new trauma informed communication training. Moving forward, all new staff will continue to be trained on this topic as they are hired.

Feedback Loop

A PIP Team 2 workgroup, with statewide representation, was responsible for overseeing this objective and serves as a feedback loop to the PIP Core Team.

Implementation and Program Supports

The use of technical assistance and training experts accessed by CIP was used to support this objective. There are no research, evaluation, or management information systems in support of this objective.

Year 2 Objective 1 Improve Trauma Communication Training

- The State Training Manager and/or designee to develop and lead a workgroup to meet regularly and consistently to aggressively plan, problem solve, create, and devise an implementation plan with representative(s) from the courts to develop a Standardized Family Engagement Training that aligns with the Curriculum Guide detailed in Key Activity 2.1.3 of the PIP.
 - Workgroup to be led in a timely fashion to address the forward moving plan of what is needed for goals, competencies, and curriculum.
- Assessment to be completed by the training partners as indicated in Key Activity 2.1.3 of the PIP to determine if current trainings, curricula, and resources that currently exist can be modified and used as a foundation. Assessment to also determine if the training can be disseminated either online, in-person, or both.
 - This training will include information from the CIC Summit training and supported by PIP Goal 3. Goals are designed to ensure child welfare staff learn communication techniques to engage parents, relatives, and children exposed to trauma as well as when engaging with all professionals involved in court processes. This Key Activity will improve the quality and frequency of contact with families, promote achievement of case goals, increase and maintain family engagement, and ensure the well-being of children and youth.
- As indicated in Key Activity 2.1.3 of the PIP, DCFS FPO Training Manager will assist training partners in prioritizing trainings for the purposes of the PIP and CFSP to ensure timelines are met for each quarter.
- Each child welfare agency will use the evaluation provided by the CIP on JDMP created through the permanency and well-being of the CFSP and supported through Goal 3 to make necessary improvements to staff training and/or the expansion of JDMP.
- Selective Leadership will receive family engagement training through the CIC as indicated in the permanency and well-being of the CFSP and Goal 3.

Summary of Progress Towards Benchmarks

The training was first presented in the CIC Summit in October of 2019, and again the following year at the 2020 CIC Summit. The AOC/CIP continue to incorporate what they have learned about Trauma at the 11 local CICs. The AOC/CIP focuses on techniques of trauma-focused communication to engage the parents and relatives and the 11 judicial districts. The AOC/CIC will conduct ongoing surveys to continue to monitor the progress of trauma focused engagements throughout the judicial districts.

The training has also been initiated with the statewide child welfare agencies. The state had set internal goals for the completion of the Trauma Informed training with expectations that at least 90% of all identified staff will be completed by the end of Q8. The state met its desired goal and is currently at 100% completion.

Team 2 coordinates with the Nevada Partnership for Training to track the statistics of completion and this information provided to the agencies on a routine basis and is being discussed in the SQIC. Moving forward, newly hired staff will continue to receive the trauma informed trainings.

Feedback Loop

Discussions around this objective will occur in the WIT, SQIC, and PIP Team 2 workgroup. All of the listed groups have statewide representatives from all jurisdictional agencies and stakeholders with the direct options of input, and delivery of feedback.

Implementation and Program Supports

Moving forward the state and NPT will continue to assess and determine what technical assistance and training are needed to support, assess, and identify all new staff who will be required to complete the training. NPT maintains tracking information of all staff members who complete the training and will ensure that all agencies receive an update status monthly to maintain compliance expectations. This will be an ongoing project as all trainings are continually evaluated and updated to ensure a well-trained workforce.

Year 2 Objective 2 Partner with HR to streamline processes

- Develop and implement recruitment process
- Develop process for anticipatory hiring
- Develop characteristics/competencies for job functions and execute a plan to communicate to staff about the benefits of the competency model/culture
- Develop competency-based behavioral interviewing questions, develop hiring forms and processes, train hiring managers, implement system
- Develop realistic job preview (address community perception as well?)
- Develop and implement onboarding policies
- Develop and implement recruitment process for new employees
- Develop and implement exit survey
- Administer second employee satisfaction survey
- Conduct a Workforce Study

Summary of Progress Towards Benchmarks

Over the past year the state formed a workgroup consisting of representation from the three child welfare jurisdictions, the Family Programs Office and partnered with human resources from across the jurisdictions to address this objective. The workgroup is working on administering an employee satisfaction survey in June 2022. In Nevada, each jurisdiction has their own process in place to address recruitment and competency based behavioral interviewing questions. Some areas of the state are more advanced in their hiring practices and have the following in place, anticipatory hiring practices, exit survey or interview and established onboarding processes. This past year the rural region conducted an agency assessment and workforce focus was a component of that assessment.

Feedback Loop

Discussions around this objective continue to occur in the WIT, SQIC and any identified sub workgroups. Those groups have statewide representation, facilitating the opportunity to collect feedback, and deliver it.

Implementation and Program Supports

The state applied to the Quality Improvement Center for Workforce Development (QIC-WD) to participate in the Child Welfare Workforce Analytics Institute program that focused on child welfare and human resources to work together using data analytics to address workforce challenges. Unfortunately, our state was not chosen to participate in the program.

Year 3 Objective 1 Improving Curriculums

- The State Training Manager and/or designee, in collaboration with each child welfare agency and the Training Program, to develop and lead a workgroup to meet regularly and consistently to aggressively plan, problem solve, create, and devise an implementation plan to develop an online refresher training to support Goal 2 “Promoting effective communication and Contact with Families” by building awareness to concerted efforts and federal expectations
 - Workgroup to be led in a timely fashion to address the forward moving plan of what is needed for goals, competencies, and curriculum.
 - Assessment to be completed to determine if current trainings, curricula, and resources that currently exist can be modified and used as a foundation and if micro trainings would be appropriate.
- Workgroup will include a representative from the courts such as a participant(s) from the Court Improvement Program, attorney, DA, and any other stakeholder identified as appropriate by the workgroup.
- Training will address the following but not be limited to;
 - The federal requirement that a child’s relationship with their parent(s) will be ongoingly assessed following the TPR process to determine if the relationship remains in the best interest of the child. If the relationship is

determined to be in the best interest the agency will demonstrate concerted efforts to maintain the relationship;

- TPR timeframes;
 - Explanation of compelling reasons and reasonable efforts, including which hearings shall include this information;
 - Timelines for identifying and achieving permanency goals;
 - Steps to ensure caseworkers are interacting with parents while they are incarcerated. The expectation of caseworkers to identify and remove barriers to communication;
 - Concerted efforts on assessing the needs and services of children, parents, and foster parents. Specifically;
 - Working to engage families in needed safety-related services and facilitating a family's access to those services;
 - Encouraging a parent's participation in school-related activities, doctor's appointments for the child, or engagement in after-school activities; and
 - Engaging families to be active participants in their family's case planning such as;
 - Having age-appropriate discussions with children and explaining case plans in language they understand.
 - Having age-appropriate discussion with youth about their Independent Living Plan and appropriate goals.
 - Ensuring children understand permanency goals and changes made to goals.
 - Discussing family strengths and needs with children and parents.
 - Evaluating other case plan goals and progress in services with both children and parents.
 - Identifying and removing barriers to achieve case plan goals and/or providing strategies to achieve goals.
 - Ensuring that case planning meetings are arranged based on the family's availability and are utilized to engage the family in case planning discussions.
- The workgroup to further explore learning objectives with the Youth Advisory Board in a manner that is conducive to their schedules
 - The training partners are to ensure the LMS easily identifies and provides the online training required for this Key Activity in a way that is easily accessible to staff in all jurisdictions and training is offered on an ongoing basis and not a rotating basis.
 - DCFS-FPO Training Manager will work in collaboration with the Training Program to ensure the Initial Training Academy courses/material are updated and include current concerted efforts identified in the CFSR review and federal expectations.

Summary of Progress Towards Benchmarks

Over the past year, due in part to limited resources, staff transition and staff vacancies, work towards this objective has not been completed. The state, in partnership with the state's universities developed a trauma informed asynchronous training through 2020 and delivered it in 2021. 100% of the workforce at that time was trained in this training. Due to competing priorities and reasons aforementioned, work towards a refresher training

has not been initiated. The state asserts that various aspects of this objective are being addressed through independent projects occurring statewide, for example, within the independent living program, work is being done to assess if we are having age-appropriate discussions with youth and young adults (YYA) about their Independent Living Plan and appropriate goals. Workgroups formed around improving our existing IL program statewide, as well as implementing EFC, are ensuring YYA are included in those discussions and subsequent planning. Additionally, work around improving the state's performance on item 13, involving mothers, fathers and children in the case planning process continues to be done in PIP Team two. Over the next year, this workgroup will incorporate the specifics of this objective into its work.

Feedback Loop

PIP Team two and the workgroups for independent living are comprised of representatives from the three child welfare jurisdictions and the Family Programs Office. Representatives from NPT and CIP are invited on an as needed basis to these workgroups. The independent living program is currently recruiting young leaders (YL) to participate in workgroups with the intention of them taking information back to regional youth advisory boards (YAB) as well as to the statewide YAB. These workgroups present information, planned activities and results at the SQIC. Information is shared at the WIT and the AD's meeting as appropriate.

Implementation and Program Supports

The state will continue to receive technical assistance from the CBCS and SCP over the next year. They are providing support in both improving the state's independent living program as well as with the implementation of EFC. No other technical supports are needed at this time.

Year 3 Objective 2 Retention- WIT Team

- Develop and implement performance feedback on the competencies essential to achieving the desired results in each job function
- Develop training opportunities for all staff in the competencies essential for successful performance
- Develop and administer competency surveys, analyze findings, develop strategies
 - Using monthly or quarterly for data driven decisions for individuals and agencies
- Administer third employee satisfaction survey, analyze finding, develop strategies
- Utilize coaching as a mechanism to develop staff around the identified competencies
- Develop succession plan (ex. promotional readiness team)
 - Partner with current supervisors to show how to interview and tools to promote up
- All child welfare agencies will train workers on compassion fatigue, burnout, and vicarious trauma

Summary of Progress Towards Benchmarks

Over the past year, due in part to limited resources, staff transition and staff vacancies, work towards this objective has not been completed and is delayed. This past year the state focused on year two objectives that had been delayed due to the COVID 19 national health emergency. In efforts to address those objectives, a workgroup was formed to develop the satisfaction survey and plan its administration. The plan for this upcoming year is to utilize this newly formed workgroup as a place to have deeper discussions around retention, as well as creating a plan to develop a trauma informed child welfare system as it pertains to goal two's objectives. The state asserts that various aspects of this objective are being addressed through independent projects occurring statewide, for example, the Nevada Partnership in Training is currently working towards developing supervisor competencies, and as of September of 2021, all leadership and supervisors across the state had been trained in CoachNV. A coaching culture is actively promoted across the state.

Feedback Loop

Discussions around this objective continue to occur in the WIT, SQIC and any identified sub workgroups. Those groups have statewide representation, facilitating the opportunity to collect feedback, and deliver it.

Implementation and Program Supports

The state has partnered with the Capacity Building Center for States (CBCS) to focus on retention over the next 6 to 9 months. CBCS will provide technical and program support to the workgroup formed to address this goal. As of the writing of this report, the state has met with CBCS once to discuss initial planning of a work plan, priorities for the workforce and how to leverage resources.

Goal 4: Improve Statewide Child Welfare Outcomes by Developing and Strengthening the Statewide Quality Assurance System to Ensure the System Can Identify and Respond to the Strengths and Needs of the Child Welfare System in an Efficient and Effective Manner

Measures of Progress

This will be measured by the progress of the completion of the CQI process.

Year 1 Objective 1: Conduct TA activities related to CQI Self-Assessment using the tool as developed by CBCS

- Request membership from executive leadership, for Assessment and Implementation teams.
- Convene Assessment team, to conduct the assessment.
- Develop the CQI Assessment/Implementation team Charter and Communication Plan
- Continue to conduct case reviews as outlined in the measurement plan and with collaboration from all child welfare agencies as described in MOU (Q1)

Summary of Progress towards Benchmarks

PIP Team 4 is responsible for the CQI Self-Assessment and completed the CQI Self-Assessment in January of 2021. The team moved into evaluating the assessment's results to identify the strengths and weakness of Nevada's CQI system and processes and developed a CQI Action Plan to address deficiencies identified in the CQI self-assessment. The implementation of the CQI Action Plan commenced in April of 2021 and will continue into the upcoming year. The Charter and Communication Plan for PIP Team 4 has been completed. DCFS submitted a budget enhancement request to the Nevada Legislature to expand the capacity of the Family Programs Office to enhance oversight of child welfare programs in Nevada; however, the request was rejected.

Signed memorandum of understanding (MOU) between the DCFS Administrator and the Directors of county child welfare agencies are in place to formalize the commitment to the case review process as a method to support continuous quality improvement. As a result of the COVID-19 national health emergency, a statewide collaborative effort was successful in devising a system to provide and conduct standardized virtual training, communication, and remote case reviews. This included incorporating guidance from the State and Federal governments that impacted individual performance items or systemic factors.

The state conducted four case reviews since the submission of the last APSR. Over the next year, the state will work towards modifying their case reviewer training to incorporate feedback received from participants and align the curriculum with current practice. Training will return to a live and in person training; however, it will still be offered virtually at least once a year.

Feedback Loop

The SQIC and WIT Charter and Communication plans outline feedback loop communication with leadership and staff in each jurisdiction, all PIP teams, Children's Bureau Region 9, child welfare families and youth, as well as other relevant stakeholders such as CIP and Children's Justice Act Task Force.

Agency leads that participate in CFSR and CQI case reviews are members of the SQIC. The SQIC communicates to the Assistant Director group and their respective agency leadership.

Implementation and Program Supports

PIP Team 4 is receiving technical assistance from the CBCS. There are no research, evaluation, or management information systems in support of this objective.

Year 1 Objective 2: Identify data entry standards re: permanency goals in UNITY

- Develop a uniformly agreed-upon data dictionary to include standards of performance regarding the definitions of permanency goals, how to update them in UNITY and which case events would prompt such an update.
- Write or revise the existing policy to inform practice(Q4)

- All child welfare agencies will ensure staff receive these expectations(Q4)
- Develop/Conduct CQI activities to ensure permanency goals in UNITY are accurate and timely (Q2-Q8)

Summary of Progress towards Benchmarks

Data input standards related to timely entry and accuracy of permanency goals in UNITY were addressed by work completed in Q1 for PIP key activity 4.3.1. These findings were utilized by the SQIC team to develop statewide policy requirements for establishing permanency goals and UNITY documentation. As part of the work for PIP Activity 3.2.1 completed on 7/31/2020, these requirements were included in the revision of the 0204 “Permanency and Case Planning” policy. The revisions included clarifying the timeframes for when a case plan goal must be entered in UNITY. PIP key activity 4.3.4 further supports the CQI process and this objective by conducting statewide semi-annual spot checks to determine if permanency goals in UNITY match court orders in case files. In the next year, the state will continue to monitor performance during these spot checks to determine if further review of policy, training or job aids will be needed.

In 2020, the state first collected data on entered permanency goals to determine if permanency goals in UNITY matched the permanency goals in court orders. This process was replicated in January of 2021 and is scheduled to be repeated in July of 2021. In January of 2020, spot check results indicated 88% of goals in UNITY matched goals in the most recent court order. In January of 2021, the results had increased to 93%. In the next year, the state will monitor performance during these spot checks to determine if further review of policy, training or job aids will be needed. Improving data entry and developing processes for the validation of data are action items in the CQI Action Plan developed by PIP Team 4 and will further support efforts to improve practice in this area.

Feedback Loop

The Charter and Communication plan outlines feedback loop communication with leadership and staff in each jurisdiction, all PIP teams, Children’s Bureau Region 9, child welfare families and youth, as well as other relevant stakeholders such as CIP and Children’s Justice Act Task Force.

Implementation and Program Supports

At this time no technical assistance needs have been identified at this time. There are no research, evaluation, or management information systems in support of this objective.

Year 1 Objective 3: Improve and sustain the case review process.

- Complete budget feasibility study and budget request regarding expansion of Family Programs Office oversight as it relates to the statewide case review process
- Provide results of the feasibility study to executive leadership
- Submit a budget request for additional positions, resources, etc. for inclusion in SFY22-23 biennium

Summary of Progress towards Benchmarks

A budget request has been submitted for review and approval by the Governor's office.

Feedback Loop

The state Administrator will communicate through the child welfare leadership Decision Making Group and to the Children's Bureau.

Implementation and Program Supports

At this time no technical assistance needs have been identified at this time. There are no research, evaluation, or management information systems in support of this objective.

Year 2 Objective 1 Complete the assessment and analyze results

- Complete CQI Self-Assessment (Q6)
- Analyze results and develop Action Plan and begin implementation(Q6)

Summary of Progress towards Benchmarks

PIP Team 4 completed the CQI self-assessment in Q5. The team moved into evaluating the assessment's results, with the technical assistance from the CBCS, and worked towards developing a statewide action plan during Q6. The implementation of the action plan commenced during Q6 and will continue into the upcoming year.

An evaluation of the CQI self-assessment identified areas of opportunity in all seven of the assessment domains. In the following four domains, the state has the most opportunity to improve: leadership support and modeling, staff and stakeholder engagement, foundational administrative structure to oversee and implement CQI and quality data collection, infrastructure, extraction, analysis, and dissemination. The CQI Action Plan was developed over 12 weeks and was a collaborative effort by PIP Team 4, which has representation from FPO, regional CQI teams, data analytics and IT. The plan includes actionable items which were assigned a priority. The team identified existing groups and new subgroups that could complete the activities. For more detailed information regarding planned activities, please refer to the Attachment K, the CQI Action Plan.

Feedback Loop

The team's charter and communication plans outline feedback loop communication with leadership and staff in each jurisdiction, all PIP teams, Children's Bureau Region 9, child welfare families and youth, as well as other relevant stakeholders such as CIP and Children's Justice Act Task Force.

Implementation and Program Supports

PIP Team 4 receives technical assistance from the CBCS. This project is included in the current CBCS Work Plan which runs through December 2021. There are no research, evaluation, or management information systems in support of this objective.

Year 3 Objective 1 Implement CQI Improvement Action Plan (AP)

- Convene implementation team to complete activities as outlined in CQI improvement plan
- Develop and initiate a system to monitor progress of implementation team
- Develop systems of feedback to ensure all levels of child welfare staff have a clear understanding of how their work influences performance outcomes
- Implement changes to close gaps as identified by CQI-AP in the following domains:
 - Leadership Support and Modeling
 - Staff and Stakeholder Engagement
 - Communication
 - Foundational Administrative Structure

Summary of Progress Towards Benchmarks

Team 4 with the help of the CBCS established a written set of goals and tasks in the form of Attachment K – The CQI Action Plan. 25 Tasks were identified on the plan. The team assigned those tasks based on priority and feasibility and created sub-work groups to complete the work. As of the writing of this report, three tasks have been completed and another three tasks are currently in progress.

All tasks are tracked by the Team and its sub-groups on a scrum board where all identified members can track and update their progress to ensure all stakeholders remain informed.

Feedback Loop

The team's charter and communication plans outline feedback loop communication with leadership and staff in each jurisdiction, all PIP teams, Children's Bureau Region 9, child welfare families and youth, as well as other relevant stakeholders such as CIP and Children's Justice Act Task Force.

Implementation and Program Supports

PIP Team 4 receives technical assistance from the CBCS. This project is included in the current CBCS Work Plan which runs through December 2021. There are no research, evaluation, or management information systems in support of this objective.

QUALITY ASSURANCE SYSTEM

Nevada Revised Statutes 432B.180(3) requires DCFS to monitor the performance of child welfare agencies through data collection, evaluation of services, and the review and approval of agency improvement plans pursuant to NRS 432B.2155. Nevada Administrative Code details the activities required concerning the evaluation of services provided by the child welfare agencies and actions upon determination of noncompliance with certain provisions.

The state is working towards strengthening its CQI system by following the principles outlined in the [ACYF-CB-IM-12-07](#) on establishing and maintaining Continuous Quality Improvement (CQI) systems.

Foundational Administrative Structure

State and region level CQI staff have utilized the Capacity Building Center for States on-line CQI Academy to improve the capacity of CQI staff to understand the CQI process, how to evaluate outcomes, and the importance of feedback to inform policy, training and program adjustments. Throughout this past year, and as Nevada completed the CQI Self-Assessment, additional training needs that could enhance CQI capacity statewide were identified. Over the next year, the state will explore having its CQI staff participate in more specific data-related trainings around data visualization and data competency. Additionally, the state's CQI staff work closely with the state's data team to identify areas of opportunity around data. The state's data team also works collaboratively with the state's CQI staff to identify CCWIS enhancements that could further support state CQI staff. The state CQI Team utilizes reviewers from the regions designated CQI units to form a pool of reviewers for the quarterly state CQI reviews.

As part of CFSP [Goal 4](#) and PIP Goal 4, The state conducted a Continuous Quality Improvement (CQI) Self-Assessment developed with the Capacity Building Center for States (CBCS) to identify how Nevada can strengthen its CQI/QA System. For more detailed information regarding planned activities, please refer to the Attachment K, Nevada's CQI Action Plan.

Quality Data Collection

The state is able to collect and share various data and produce data reports. Various data is shared regularly with child welfare jurisdictions, DCFS agency leaders, and public stakeholders. Internal data shared with child welfare jurisdictions includes monthly AFCARS, NCANDS, and NYTD data error reports, monthly caseworker visit compliance data, and various scheduled UNITY reports which get saved to a shared folder for access or directly emailed to certain staff for review. Jurisdictional staff have the ability to run over 150 UNITY data reports on demand in two report interfaces (legacy UNITY 1.0 report menu or the online UNITY 3.0 report menu, embedded in the UNITY 3.0 system and accessed via a special page). Another 80+ 'online' reports with data related to specific cases or children can be accessed, printed, or emailed from within various pages within the UNITY application. The latest version of UNITY, UNITY 3.0, uses IBM Cognos Analytics as its reporting subsystem, and legacy reports are being rewritten in the new

platform. All users of the UNITY system have access to Cognos reports through the UNITY 3.0 user interface.

Regular data shared with DCFS agency leaders include various child welfare caseload and budget data, data related to youth placed out of state, and data related to reports, allegations, and victims, among other items. Data shared publicly on the DCFS website includes the DCFS Data Book which has various tables, charts, and other data, the annual Specialized Foster Care Report, the APSR reports, and other child welfare historical reports. Data for these reports often comes from UNITY. Ad hoc data can be extracted from UNITY based on request and user needs. Sometimes ad hoc data requests become recurring tasks or get turned into new reports. The process for requesting and receiving ad hoc data from the UNITY system has been in place for years and seems to be working although it can be slowed down by resource constraints.

Case record review data and process

The state utilizes quarterly case review data and a process that mirrors the Federal CFSR Case Review process. Approximately 80 cases are reviewed annually. The state uses the federal OSRI as well as the Online Monitoring System (OMS) as part of its ongoing CQI/QA process. In addition to state CQI case reviews, the regions conduct additional ad hoc reviews on intake, visitation, child fatality as well as fidelity reviews of various components of the SAFE/SIPS Safety Model.

The state has been strengthening its ability to sustain a state case review process for CFSR purposes through partnership with the county child welfare agencies to develop a pool of reviewers, training and desk manuals. The state utilizes the following desk manuals to conduct statewide case reviews: Nevada State Conducted Case Review Procedures, CFSR Sample Guide and the Nevada On-Site Review (OSR) Procedure Manual. The state is currently soliciting feedback from regional CQI teams on the OSR Manual. Additionally, a training module is being developed to assist in institutionalizing the role of CQI and to ensure new state CQI staff understand the importance and role of federal and state monitoring, the CQI case review process and relation to assessing safety, permanency, and well-being outcomes.

As a result of the COVID-19 national health emergency, a statewide collaborative effort devised a system to provide and conduct standardized virtual training, communication and remote case reviews. This included incorporating guidance from the state and federal government that impacted individual performance items or systemic factors. Over the next year, some case review activities and training will return to an in-person modality if it is safe to do so. The long-term fiscal impacts of the pandemic are unknown at this time, and it is possible some aspects of case reviews will remain virtual.

The state asserts that sufficient capacity exists in the state to ensure sustainability of the case review process in Nevada using the OSRI for subsequent rounds of the CFSR. The state is planning for an update to the CFSR Case Reviewer training to ensure robust training of new reviewers and ongoing booster trainings for seasoned reviewers.

Analysis and Dissemination of Quality Data

Reports are used by CQI staff and management to monitor trends. Regions use various data reports to assist supervisors and managers in monitoring their staff's performance toward specific measures. State and regional Data Books are provided to the public and external agencies. Annual CQI Review reports are available on the DCFS website.

The state is enhancing existing data reports as well as developing new reports as part of PIP Activities in Goals 1,2, and 3. The CBCS continues to provide guidance on how to use the reports to improve practice. From within the OMS, the state is able to run reports based on case review results and analyze current performance. At the conclusion of each quarterly case review, a state rating summary report is produced and the data from that report is shared statewide. As we have reviewed and assessed our performance, the state has been able to identify areas of practice to target and dive deeper into. Item rating summary reports are pulled to look at specific items where we see performance dip or plateau. PIP teams have utilized these reports to dive deeper into specific items and evaluate our rationales and ratings relating to areas in which we have underperformed.

The state routinely shares data from case reviews, as well as from reports developed through the PIP with regional partners during SQIC meetings as well as with the workforce through an internal distribution process for each agency. Conversations around the dissemination of data and targeted messaging continue to be held in PIP sub workgroups.

Feedback to stakeholders and decision makers and adjustment of programs and process.

PIP collaborative implementation teams oversee and implement the PIP activities. The teams are responsible for overseeing the strategies and implementing the key activities of the PIP. Agency leadership and CIP are regularly advised on the progress of PIP activities and guide collaborative efforts. The creation and distribution of a newsletter to improve practice in the field has been issued and included CFSR findings and with jurisdiction-specific results. Managers and supervisors utilized the newsletter to generate discussion around CFSR items, performance, strengths, and barriers towards improved performance. The following formal feedback loops were created this past year:

- Agency managers will conduct one-on-one meetings with supervisors at least bi-monthly, as defined as every two months.
- Leadership (managers and supervisors) will meet quarterly to assess strengths and any barriers to improved performance.
- Supervisors, during one-on-one supervision with line staff, will discuss CFSR information, discuss individual performance, and provide coaching for improvement.

State and regional CQI team members serve as subject matter experts on the CFSR to the field.

The Workforce Innovation Team identified in CFSP Goal Three Healthy Work Force serves as an important part of the CQI process. Results of CQI Case Reviews are shared with the WIT to help inform needed adjustments to training and policy.

Additional Quality Assurance Responses

Nevada is currently on a CFSR PIP. The state's CFSR review process was used to conduct the statewide assessment which was used to inform the PIP, and which continues to be used for the CQI quarterly case reviews.

Nevada is on a PIP and Goal 4 is focused on improving the state's CQI/QA system through a QA self-assessment with CBCS. Refer to the section "Update to the Plan for Enacting the State's Vision and Progress Made to Improve Outcomes" Goal 1 and 2 to describe how the current CQI/QA system was used to measure progress on achieving goals, objectives, and interventions. For more detailed information regarding planned activities, please refer to the Attachment K, the CQI Action Plan.

Refer to the section "Update to the Plan for Enacting the State's Vision and Progress Made to Improve Outcomes" for information on how the state's CQI/QA system was used to revise goals, objectives, and interventions.

See the section "Progress Made to Improve Outcomes" for information around how information generated or acquired as part of the CQI/QA system or for specific projects was used to measure progress on achieving goals, objectives, and interventions.

Refer to the Collaboration section for a description of how feedback loops are being utilized as a part of the CQI/QA process to provide useful information that parents, families, youth, and other partners and stakeholders will find useful to assist the state in system improvement efforts.

Nevada uses the federal OSRI as well as the Online Monitoring System (OMS) as part of its ongoing CQI/QA process. Reports are generated from the OMS at the conclusion of each quarterly case review and the data is reviewed in the state CQI team as well as the SQIC. Additionally, over the past year, the state has increasingly utilized item specific reports in the OMS to look more closely at specific items, their rationales and held discussions on inter-rater reliability at both the reviewer level as well as the QA staff level.

See subsection above titled Case Record Review Data and Process for an update on the state's case review process for CFSR purposes.

UPDATE ON SERVICE DESCRIPTION

STEPHANIE TUBBS JONES CHILD WELFARE SERVICES PROGRAM (TITLE IV-B, SUBPART 1)

Services for Children Adopted from Other Countries (section 422(b)(11) of the Act).

Children who are adopted from other countries have access to the same support services as other adopted children. These support services are funded using the Adoption Promotion/Support funds and the Adoption Incentive funds which are distributed to sub-grantees. Depending on community needs, services may include but are not limited to:

- Information and referral to post adoptive services including community resources is offered statewide.
- Educational programs (parent training) are offered statewide for prospective adoptive parents.
- Support groups for post adoptive families is offered through Clark County Department of Family Services (CCDFS).
- Family Preservations for adoptions completed in Nevada can be made through the Nevada Adoption Reunion Registry (ARR).
- Case management from public child welfare agencies is offered to pre-adoptive families statewide until the adoption is finalized
- Therapeutic interventions/counseling information is offered to post adoptive families.
- Search registries from AdoptUsKids and Raise the Future work with DCFS to promote children available for adoption statewide.

Services for Children Under the Age of Five (section 422(b)(18) of the Act)

The State of Nevada has several efforts underway to address child abuse prevention. Nevada's data shows that infants who come to the attention of child welfare prior to the age of two often end up in protective care within two to four years if families do not receive support and treatment services early on. As such, many of our initiatives, services, and interventions have an early intervention/prevention focus and work to reduce the length of time children under the age of five are in foster care.

Activities to reduce the length of time children under the age of five are in foster care:

- Safe Babies Court-- a collaborative initiative of the Northern Region (Washoe), in collaboration with the Family Treatment Court of the Second Judicial District Court in Washoe County, as well as a contracted technical assistance provider, Zero to Three, aims to provide intensive case management and service provisions with increased court oversight to families with children under the age of three. In this initiative families are randomly selected to participate in this program and are provided intensive services to increase parental capacities while reducing long-term trauma for children and families. Examples of services provided are Child Parent Psychotherapy (CPP) by Nevada Child and Adolescent Services (NNCAS) clinicians, increasing contractor capacity, respite care for participating families, communication enhancements, and transportation services for participating

families. The success of the program is reported to the Safe Babies Court Team national database to monitor outcomes. This program has been incredibly successful and ways to expand these services, including allowing more families to fit criteria to participate, are being explored. Additionally, the Southern and Rural Region have begun to explore funding options to implement the Safe Babies Court within their respective jurisdictions for the FY2023-FY2024.

- The Quality Parenting Initiative (QPI) statewide program continues to work to expand QPI knowledge and skill development for staff and resource families to promote family reunification, permanency, and reduce the length of time that children under five are in foster care. QPI concepts and language is applied to policy and concepts are supported in everyday child welfare practice. QPI has expanded in the Northern Region through a Resource Family Advisory Board as well as a Birth Parent Advisory Board to weigh in on policy and procedure affecting transitions for children in foster care.
- Statewide Nevada continues to work with Nevada Early Intervention Services (NEIS) for children aged birth to age three, with the school district's Child Find program for children aged three to five, and Northern Nevada Adolescent and Child Services (NNACS) to ensure that children with known or suspected developmental disabilities are assessed and provided appropriate services. At the time of a substantiated removal for a child aged 36 months and under, an Early, Periodic Screening, Diagnostic, and Treatment (EPSDT) exam is provided via NEIS. If additional services are recommended, children are referred for further assessments and/or services are provided by NEIS, Child Find, NNACS, or other community providers. Children over the age of 36 months who have been assessed to show developmental delays, or have suspected developmental delays, are referred to the school district's Child Find Program or NNACS for additional assessment and implementation of services. Coordination between the child welfare agency, resource families, birth families, and service providers is important to ensure recommended services are being provided and the child's progress is being monitored. In addition to EPSDT screens, each child coming into care will receive a trauma screening.
- Statewide Nevada has partnered with Nevada Early Head Start, specifically with the Parents as Teachers FFPSA Well-Supported Model to assist families with children under the age of three with parenting skills. Referrals are made to Nevada Early Head Start for families currently involved with child welfare as well as families who come in from "information only" reports where resources may benefit the family.
- Multidisciplinary staffing and/or team meetings are used to regularly review children under the age of five in foster care. These meetings are future focused with the intent of identifying barriers to reunification with family, permanency, placement stability, and services to address solutions to support timely permanency. In addition, weekly meetings are held in the northern region to discuss children living in congregate/emergency care and how to move children from congregate care into more permanent placement settings.
- Data relating to children under age five is reviewed regularly for trends in entries into care, the number of children placed outside the home, length of time in care,

length of time a case remains open, and/or data around reunification and permanency. Trends drive practice change.

Activities to address the developmental needs of children under five years of age:

- As part of FFPSA, zero to five is a priority population and there is a concerted and collaborative effort to expand early intervention services throughout the state.
- Evidenced-based early childhood programs such as Parent-Child Interaction Therapy and Child Parent Psychotherapy are offered through DCFS Mental Health Services and promising practices such as Positively Kids Wrap Program are offered through contract providers.
- All child welfare agencies participate in the statewide collaborative Perinatal Health Network which continues to develop strategic approaches to provide outreach, identification and treatment for postpartum women using evidenced based interventions (See the [CAPTA State Plan and Update](#) for more details). This collaborative supports families with substance misuse disorders and substance exposed infants.
- Children under age 5 are referred to specialized providers such as Nevada Early Intervention Services (NEIS), Child Find, and/or Nevada Adolescent and Child Services for a thorough assessment of developmental status.
- Development of enhanced and enriched visitation and attachment of parents with children aged five and under.

Efforts to Track and Prevent Child Maltreatment Deaths

Each year, data from the National Center for the Review and Prevention of Child Death's database is used by the Executive Committee to Review the Death of Children to complete an annual report which is disseminated statewide to stakeholders and posted on the DCFS website. Data for the report is entered by the regional CDR teams, and the amount data entered varies by teams and the ability to collect the necessary information from the community stakeholders. Nevada's contractor through Nevada Institute for Children's Research and Policy (NICRP) ensures the data that is entered is accurate. This report is updated annually, and the most recent version can be found [here](#). Please note that due to the delay in receiving sufficient information to compile the report, the report is usually 2- 3 years behind, and therefore the 2018 report was published in 2021; the 2019 report was reviewed and approved by the Executive Committee in May 2022; it is currently being remediated and will be uploaded to the website once remediation is complete. Over the past year, Nevada, with the assistance of NICRP, made the annual report more robust and functional and will continue to improve the report each year.

Child fatalities, as a result of child maltreatment, are captured in and reported to NCANDS through the State of Nevada Comprehensive Child Welfare Information System (CCWIS). Child welfare agency staff use a variety of sources to capture and record this data which includes information from child death review teams, law enforcement reports and medical examiners or coroner's reports. Fatalities identified in the information system as maltreatment deaths are reported in the Child File. Deaths not included in the Child File, for which substantiated maltreatment was a contributing factor, are included in the Agency file as an unduplicated count. Reported fatalities can include deaths that occurred in prior

periods, for which the determination was completed in the next reporting period. The total number of NCANDS reported fatalities has decreased 30 percent since the last reporting period (14 in FFY 2020 to 28 in FFY 2021). Reported fatality data in both the Child File and the Agency File are cross-checked with internal state oversight reports and always confirmed with program staff representatives from Clark County Department of Family Services, Washoe County Human Services Agency, and State of Nevada DCFS Rural Region/Family Programs Office staff depending on the jurisdiction of the child's case. These staff review the child death records and confirm that all records included in NCANDS are fatalities due to substantiated maltreatment. In an effort to ensure data accuracy, Nevada has been working with each child welfare jurisdiction over the past year to confirm this information is correctly being entered into the SACWIS system, and it is believed that the increase in the number of maltreatment deaths is a result of more accurate data entry. Although the COVID-19 Pandemic may have affected the number of child deaths, it is too early to determine the extent, as the case review data is still in the process of being vetted.

Nevada continues to maintain the step-by-step procedures as listed in the CFSP 2020-20204 which describes how the data is reported.

- Data is gathered using a canned report (CFS742 Child Fatality Report)
- A manual review is then completed by data and field staff.
- The CFS742 is run for a Federal Fiscal Year and displays all child fatalities that occurred in the year, results are filtered to see only fatalities due to substantiated maltreatment.
- Then the results are compared to the NCANDS Child File for the submission year and all those already included in the Child File are removed from the list.
- The remainder are researched in the child welfare information system (UNITY) by data staff and field staff to check various criteria so that they can get the final list of fatalities that will be included in the Agency file for this element.
- The final number reported for this field is the sum of the decreased youth determined to be eligible who are not already included in the child file.
- More data is gathered manually based on research using internal reports and by coordinating with program staff for review.
- Then when that list is compiled, staff research each child's record in the child welfare information system (UNITY) to find out if the circumstance of this element pertains to that youth. The final number reported for this field is the sum of the decreased youth with this condition.

Nevada continues to make efforts to reduce the number of preventable child fatalities and near fatalities through prevention campaigns, training, and other initiatives. The Executive Committee to Review the Death of Children determined that funding for prevention campaigns would be increased for FY2022 to ensure our partners in prevention could maintain programs despite potential financial losses because of the COVID-19 pandemic. As unsafe sleeping environments and suicide remained two of the top leading manners of child fatalities in Nevada, the Executive Committee to Review the Death of Children decided that campaigns that focused on prevention in these areas would be prioritized for funding. For FY2023, campaigns that focus on safe sleep environments, suicide prevention, and injury prevention will be prioritized for funding. The Executive Committee

determines the areas to be prioritized by the trends that are seen over the course of the year in the Regional Child Death Review Teams.

Goals for fiscal year 2023 are to seek technical assistance from the National Center for Fatality Review and Prevention (CFRP) on Nevada's practices and to develop and implement a comprehensive statewide plan to prevent child maltreatment fatalities. Nevada will use the data collected and the existing steps taken to track child maltreatment deaths to aid in the development of this statewide plan and use the information to determine the best methods of prevention. Through this technical assistance with CFRP Nevada will receive assistance with the revision of the Operating Manual for the Regional Child Death Review Teams as this will begin the process to enhance the prevention recommendations the regional teams provide to the Executive Committee to Review the Death of Children, ensuring consistent data entry into the National Database by the Regional Teams, and assisting the Regional Teams on strengthening their relationships with the community stakeholders who are an integral component to effective child death review teams.

NEW: SUPPLEMENTAL FUNDING TO PREVENT, PREPARE FOR, OR RESPOND TO, CORONAVIRUS DISEASE 2019 (COVID-19)

P.L. 116, DIVISION X-135, Title VIII of Division B of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) provided supplemental title IV-B, subpart 1 funds to prevent, prepare for, or respond to, coronavirus in a manner consistent with the purposes of title IV-B, subpart 1, found in section 421 of the Act.

DCFS awarded the Title VIII of Division B of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) funding to Nevada's child welfare agencies to provide emergency funds to prevent, prepare for or respond to coronavirus consistent with the program purposes of Title IV-B, Subpart 1. The funds were divided and allocated to the three child welfare jurisdictions based on population. The child welfare agencies were required to submit scopes of work in alignment with state and federal requirements and will provide reports of spending to the DCFS Grants Management Unit.

Pursuant to the guidelines for spending provided by DCFS, the child welfare agencies reported spending the funds responding to the COVID-19 pandemic by ensuring that vital child welfare services continue to be provided in a safe manner, and to quickly respond to the immediate needs of families who have been impacted by the pandemic to prevent removal, maintain placement, or reunify youth with their parents.

Specifically, since the last reporting period, the funding was used to:

- Provide emergency assistance to families (e.g., rent, utilities, transportation, food, childcare, respite, basic necessities);
- Promote safety through enhanced cleaning, access to personal protective equipment (PPE), and other risk reduction activities;
- Convert in-person trainings to virtual trainings;
- Purchase technology to assist with shifts to virtual work activities;
- Purchase technology to assist students with accessing virtual school;
- Increase access to mental health screening and services;

- Create safe spaces for family visitation outdoors (e.g., tents, heaters);
- Contract with medical staff to screen for COVID symptoms;
- Support Adoption related travel for youth, pre-adoptive parents, and monthly caseworker visits for children pending adoption finalization outside of Nevada; and
- Fund the Adoption Exchange and FM Marketing campaign around recruitment and retention of new foster and adoptive placements.

Nevada was unable to fully expend the CARES funding to awarded agencies. The funding was distributed to the three (3) child welfare agencies and could not be re-distributed before the performance period ended. Clark County Department of Family Services (CCDFS) reported challenges in getting the funding out into the community. CCDFS reported lower than anticipated requested for COVID related financial assistance.

MARYLEE ALLEN PROMOTING SAFE AND STABLE FAMILIES (PSSF) TITLE IV-B SUBPART 2

DCFS has continued to operate the MaryLee Allen Promoting Safe and Stable Families program throughout all seventeen counties in Nevada. All these services have contributed to the safety, permanency and well-being of children and their families. The DCFS Grants Management Unit (GMU) ensured that services funded through the MaryLee Allen Promoting Safe and Stable Families program are evidence-based programs.

The following chart provides a list of agencies statewide being funded to support family preservation, family support, family reunification and adoption promotion/support for SFY 2022. The target population for the family preservation, family support and family reunification programs are children and families within the child welfare system. The target population for the adoption promotion/support program are adoptive and prospective adoption families.

Table 41: Promoting Safe and Stable Families Subrecipients SFY 2022

Subrecipient	Description of Services	PSSF Program Category	Geographic Region
Baby's Bounty	Educate parents about the dangers of bed sharing, basic baby care, shaken baby syndrome and child abuse prevention.	Family Support	Clark County
Boys Town Nevada	In Home Family Services and Community Counseling Services to families identified as in crises and in danger of disruption. BTN uses the Boys Town Model to identify the unique needs of each	Family Support	Clark County

	family and develop a tailored plan to stabilize families.		
Boys and Girls Club of Southern Nevada	Social Emotional Learning groups, individual and family counseling will be offered for youth ages 6-18 to increase emotional regulation, self-awareness, effective coping skills and family cohesion.	Family Support	Clark County
Bridge Counseling	Family reunification services help families who are seeking to address the conditions that led to the removal of a child and/or are at-risk. Provides multiple services to meet case plan needs, child safety and family reunification goals.	Family Reunification	Clark County
Cappalappa Family Resource Center	Provides case management, resource referrals, child assessments for early intervention, car seat safety classes, Safe Sitters, shaken baby syndrome, child development, and household budgeting.	Family Support	Clark County
Catholic Charities of Northern Nevada	Catholic Charities of Northern Nevada's Thriving Families Support Center will use a trauma informed approach to conduct courses in English and Spanish in-person and virtually throughout Washoe County followed by client-led, peer-to-peer networks.	Family Support	Washoe County
Children's Cabinet	The Children's Cabinet will provide individual and family counseling services to vulnerable, at risk populations of youth and their families referred by Safe Place and Washoe County Human Services Agency	Family Support	Washoe County

	who are experiencing a crisis that could result in family disruption. Therapists will use Motivational Interviewing for change work and Living Ideation to address suicide ideation. When a youth is identified as CSEC or at risk of exploitation, the treating clinician will follow the guidelines in the State of Nevada DCFS Strategic Plan and Toolkit		
Clark County Department of Family Services	Partners with nationally backed local agencies to provide a comprehensive community collaborative approach of targeted services designed to provide safe and stable families for all youth in Clark County care.	Family Preservation Family Support Family Reunification Adoption Promotion and Support	Clark County
Community Chest, Inc	Community Chest, Inc. will provide accessible services to 30 at-risk rural families with children ages 0 to 5 throughout the year.	Family Preservation	Rural Region
Consolidated Agencies of Human Services	Offers family case management, parenting classes, and counseling.	Family Preservation Family Support Family Reunification	Rural Region
Family Support Center	Provides substance abuse and mental health counseling to parents, parenting skill coaching, wellness, support groups, therapy, family mentoring and monitored visitations.	Family Preservation Family Support Family Reunification	Rural Region

Family Support Council of Douglas County	Provides co-parenting classes, supervised visitation to DCFS families and case management.	Family Preservation Family Support	Rural Region
Foster Kinship	Kinship families will be provided Foster Kinship Navigator Model Services to ensure the family is safer, stable, and more nurturing through the following objectives: Community Connection, Legal Capacity, Financial Stability, and Emotional Support.	Family Support	Clark and Washoe Counties
Lyon County Human Services	Provides intensive case management focused on building strengths, reducing risk factors, increasing protective factors, achieving educational engagement/success, and accomplishing goals set by the family. The program provides free parenting classes to increase parental competencies to preserve families. Case managers provide families regular home-visits, parenting information, and a connection to resources.	Family Support	Rural Region
Nevada Outreach Organization	Provide in-home assessment, crisis intervention, referrals to education and programs.	Family Preservation Family Support Family Reunification	Rural Region
Olive Crest	Expedite adoption process through the completion of the adoption home study assessment and social summaries which are required to	Family Preservation Family Support	Clark County

	be updated before children can be adopted.		
Raise the Future	Intensive recruitment services utilizing an evidence based, child focused recruitment model to achieve permanence for adoption and other permanent living arrangements in Washoe County and the Rural Region.	Adoption Promotion and Support	Washoe County Rural Region
Ron Wood	Provides evidence-based parenting classes, family assessments for risk factors, needs assessments, coordination of services, and case management. Individualized resources, intensive therapeutic case management, in-home support services, home safety, cleanliness, nutrition, budgeting, and parenting education as well as outpatient and mental health screening.	Family Preservation Family Support	Rural Region
Safe Embrace	Provide family support services to residential and community clients, increasing and enhancing parent confidence and competence in their abilities through evidence-based curriculum. Specialized case management services provided to the family unit. Parent and child.	Family Support	Washoe County
Specialized Alternatives for Families and	To ensure permanency, safety, and well-being for youth through reunification services. To improve the quality of care and	Family Reunification	Clark County

Youth of Nevada, Inc.	the transition process for youth and their families through improving caregiver relationships		
St Jude's Ranch for Children	The family support program works with families to help keep their children from entering the foster care system. The specialist staff work individually with parents in their home to teach new skills and abilities to maintain a healthy, safe, and stable home environment.	Family Support	Clark County
Step 2	Provides reunification services to women living at STEP's Lighthouse of the Sierra, who are actively attempting to reunify with their children or have been reunified. They provide trauma informed, evidence-based substance abuse treatment concurrently with parenting, life skills and supportive resources, as well as case management to support sustainable safe and sober family reunification.	Family Support Family Reunification	Washoe County
Tahoe Family Solutions	Provides therapy, psychiatry, case management, parent education, information and referrals to children, youth, and families.	Family Support	Washoe County
Tru Vista Foundation	TRU VISTA will provide services to at least 24 designed Child Protective Services participants, upon acceptance into Family Treatment Court by an authorized Judicial Officer of the Family Court.	Family Reunification	Washoe County
Washoe County Human	Provides pre-placement preventative services, respite and temporary childcare, support	Family Preservation	Washoe County

Services Agency	and retention activities for foster and adoptive families, peer to peer support coaching, transportation for parents and post placement support.	Family Support Family Reunification Adoption Promotion and Support	
Washoe County School District Family Resource Center	Provides comprehensive support services to families to alleviate crises, promote stabilization, and mitigate factors contributing to child abuse and neglect. While Family Resource Center (FRC) services are available to all families in Washoe county, the FRC also partners with Washoe County Department of Human Services to provide services to families who are identified as having low level of abuse and or neglect in order to divert them from entering the child welfare system.	Family Support Family Preservation	Washoe County
Wells FRC	Provide family preservation of case management to referred families to support family stabilization and family support services of evidence-based parenting classes to reduce and control potential risk factors that can result in child abuse and neglect.	Family Preservation Family Support	Rural Region

The following chart provides the breakdown of funding allocations from the Promoting Safe and Stable Families FFY21 award with the performance period of July 1, 2021, through June 30, 2022

Table 42: Promoting Safe and Stable Families (Performance Period: July 1, 2021 – June 30, 2022)

PSSF Program Category	Awards Statewide	Program Percentage	Service Numbers from July 1- March 31 # Of Families
Family Preservation	\$612,663	20%	644
Family Support	\$621,117	20%	558
Family Reunification	\$612,663	20%	115
Adoption Promotion and Support	\$704,963	23%	37
Planning/Service Coordination	\$215,000	7%	0
Total	\$2,766,406	90%	12,030 / 1,354

Table 43: Approximate funding allocations for Promoting Safe and Stable Families (Performance Period: July 1, 2021 – June 30, 2022) by jurisdiction

Approximate Awards	
Clark County	\$1,530,844
Washoe County	\$765,421
Rural Region	\$255,141
Statewide	\$215,000

Service Decision Making Process for Family Support Services

A Notice of Funding Opportunity (NOFO) was released in March 2021 to award funds to community-based subrecipients for the performance period of July 1, 2022, through June 30, 2023. The NOFO is for competitive applications and the funding process combines application review with grant allocation. Applications were accepted to provide services in all geographic areas of the state. DCFS believes that the most effective services are in the communities where families live, where they are easily accessible, and culturally responsive. Applications had to describe community needs and address services to be provided to meet these needs. Final funding decisions are still pending however DCFS will ensure that Family Support Services are funded with community-based agencies.

DCFS' GMU collaborates with FPO and subrecipients to ensure family support services are evidence-based, being accessed, and that families' needs are being met through community-based programs such as: in-home family crisis stabilization services, in-home mental health assessments and treatment, substance abuse assessment and services, and in-home homemaker classes.

NEW: EMERGENCY FUNDING FOR THE MARYLEE ALLEN PROMOTING SAFE AND STABLE FAMILIES (PSSF) TITLE IV-B SUBPART 2- DIVISION X

Supporting Foster Youth and Families through the Pandemic Act, Division X of Public Law (P.L.) 116-260, the Consolidated Appropriations Act, 2021 provided supplemental Title IV-B, subpart 2 funds to provide community-based family support, family preservation, family reunification and adoption promotion and support services, consistent with the purposes and definitions in sections 430 and 431 of the Act.

The following chart provides a list of agencies statewide being funded with Division X funding to support the immediate needs of children and families. The target population for the family preservation, family support and family reunification programs are children and families within the child welfare system. The target population for the adoption promotion/support program are adoptive and prospective adoption families.

Table 44: Promoting Safe and Stable Families- Division X Subrecipients

Subrecipient	Description of Services	PSSF Program Category	Geographic Region
Catholic Charities	Catholic Charities of Northern Nevada's Thriving Families Support Center will use a trauma informed approach to provide evidence-based positive parenting skills.	Family Preservation	Washoe County
Clark County Department of Family Services	CCDFS was funded for the professional interpretation of the Foster Family Training Manual from English to Spanish. This request is a critical piece of an ongoing effort by CCDFS to ensure adequate service to LEP clients. CCDFS is also requesting funding to purchase school supplies as necessary for DFS children.	Family Preservation	Clark County

Clark County Department of Family Services	Clark County Department of Family Services (CCDFS) to perform Team Decision Making (TDM) meetings to determine and facilitate the least restrictive placement of children with the goal being prevention of removal or stable placement with a Relative/Fictive while working toward reunification.	Family Reunification	Clark County
Clark County Department of Family Services	Clark County Department of Family Services (CCDFS) is conducting an Art Project to display art depicting the need for Foster/Adoptive homes for Children in DFS care at various events/exhibits throughout Clark County.	Adoption Promotion & Support	Clark County
Family Counseling Service of Northern Nevada	Family Counseling will provide assessments, intakes, and counseling for 20 individuals and approximately 12 families.	Family Reunification	Washoe County
Family Support Council of Douglas County	Family Support Council will partake in a two-part professional development series to solidify the presence of qualified workforce within Douglas County.	Family Preservation	Rural Region
Paths Forward	Services will be provided at our newly built family treatment center. Interventions will include all evidence-based practices such as Parent and Child Intervention Therapy, Cognitive Behavioral Therapy, Functional Family Therapy, Supportive Family Therapy, Psychoeducation, and In-Home services.	Family Preservation	Clark County

Tru Vista	Tru Vista provides services to families in Family Treatment Court and Safe Babies Court to promote family stability and reunification. Our Parent Partners provide peer-to-peer support directly to specialty court clients.	Family Preservation	Washoe County
Washoe County Human Services Agency	WCHSA will provide placement of children through adoption or foster care and facilitate recruitment of foster and adoptive families.	Adoption Promotion and Support	Washoe County
Washoe County Human Services Agency	WCHSA proposes two targeted objectives to support family preservation efforts for families in Washoe County. WCHSA will provide multiple types of mental health services to parents and supportive services in support of family preservation.	Family Preservation	Washoe County
Washoe County Human Services Agency	WCHSA will support such services for parents who are underinsured or uninsured. Also, in the arena of mental health services, we will contract with Alta Vista Mental Health to provide mental health and substance abuse counseling services to parents in our supportive living community.	Family Reunification	Washoe County
Zero to Three	Technical Assistance to create and implement a Safe Babies Court site in the Carson District Court. Access to database site to capture detailed information on children and families, services provided, time to permanency, run customized reports and other important metrics displayed on a data dashboard for real-time	Family Support	Rural Region

	problem-solving and long-term evaluation.		
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The supplemental funding was awarded through an application process. The overall funding distribution was disproportionally awarded due to the applications received and the services proposed. The following chart provides the breakdown of funding allocations from the Promoting Safe and Stable Families Division X award with the performance period of February 1, 2022, through September 30, 2022.

Table 45: Promoting Safe and Stable Families- Division X

PSSF Program Category	Awards Statewide	Program Percentage	Projected Service Numbers Individual
Family Preservation	\$193,092	25%	379
Family Support	\$79,000	11%	25
Family Reunification	\$284,292	39%	490
Adoption Promotion and Support	\$190,000	25%	66
Total	\$746,384	100%	960

Populations at Greatest Risk of Maltreatment

In the 2020-2024 CFSP, Nevada identified populations at the greatest risk of maltreatment as families who are familiar with the state's child welfare agencies, those living in poverty, those that experience homelessness, and those that have histories with law enforcement, incarceration, substance abuse, mental health, and domestic violence. Of the populations at greatest risk of maltreatment, priority populations have been identified, through extensive partnerships with community stakeholders and sister agencies, as Commercially Sexually Exploited Children (CSEC) and children with behavioral and emotional problems. Specialized teams have been created to provide crisis intervention, screening and assessments to families who fall into the populations at greatest risk of maltreatment.

The state collaborates with local jurisdictions, community partners and both internal and external stakeholders to determine how and where to target child abuse prevention resources to ensure that services are easily accessible to children and families at risk. Statewide practice includes the utilization of formal assessment tools such as the Present

Danger Assessment (PDA) and the Nevada Initial Assessment (NIA) to determine present and impending danger when making decisions about which specific children are at risk of maltreatment. Additionally, the Protective Capacity Family Assessment (PCFA) and the Protective Capacity Progress Assessment (PCPA) are used to assess impending danger and identify services needed for these families.

The state's child welfare jurisdictions receive funding for prevention resources through a variety of funding sources. Prior to each funding cycle, representatives from each jurisdiction work with management and the Grants Management Unit Specialists to identify funding priorities. These priorities, by region, are incorporated into the Request for Applications (RFA)/funding announcement and are used to evaluate proposals so that funded projects are closely aligned to an agency's identified service needs and priorities. Scopes of Work and needs assessments are reviewed each year, or more often if requested, to ensure the activities continue to support the identified needs.

Specialty courts have been established statewide to provide intensive case management services for parents who suffer from substance use disorders and/or mental health disorders and have criminal convictions related to child abuse or neglect. Parents and children involved with specialty courts participate in regular Children and Family Treatment (CFT) meetings that include judges, attorneys, caseworkers, and mental health providers. Court hearings are held on a more frequent basis that are titrated down over time as families progress in their case plans. Court officers are assigned by specialty courts to be the intermediary between criminal courts and substance testing. Criminal sentences are deferred during participation and expunged from their record upon successful completion of programs. Specialty courts provide those with substance use disorders and mental health disorders with long-term support to maintain sobriety and stability, which increases safety for children. The child welfare jurisdictions have identified service providers to work with youth with mental health and/or behavioral concerns. The state continues to make efforts to consider a child's emotional and behavioral health when making case decisions, including those surrounding case plan services, placement, and referrals. Efforts continue throughout the state to participate in community meetings on an ongoing basis to discuss needed services and needed supports to prevent maltreatment, as well as to elicit feedback.

One of the biggest challenges Nevada faces is a lack of service providers that can meet the treatment needs of families. In response to the pandemic, Nevada has expanded their ability to provide services virtually. Virtual services have worked well for older children but has shown to not be a sufficient option to meet the needs of younger children, or for the purpose of new patient intake assessments. During the pandemic services that were deemed "non-essential" were stopped and services bringing people together in the same space, such as group therapy, support groups, family therapy, were put on hold or terminated for up to two years due to the pandemic. As COVID cases have declined, providers have started to return to in-person visits and have started resuming some of the services that were put on hold. The intensity of need and the increase in children and families that are experiencing increased mental health disorder symptoms, and additional disorders due to experiencing isolation, grief and loss, interrupted routines, etc., some agencies and service providers have had waitlists develop. Despite all the negative impacts, there have been some benefits of a more virtually connected system. CFT

meetings, court hearings, and other multidisciplinary team meetings have been able to use TEAMS and other virtual platforms, which has improved attendance and efficacy at said meetings.

Unfortunately, the lack of available service providers directly impacts youth with the intensive emotional and behavioral issues. Often children in these families are at risk of disruption due to behaviors. Nevada continues to provide referrals, as available, for crisis intervention, assessment, short-term therapy to families, and in-home parenting support. Participation in statewide community meetings to discuss needed services is a priority for Nevada and includes participation in groups such as Nevada Statewide Children's Behavioral Health Consortium, Washoe County Children's Mental Health Consortium, the Drug Endangered Children's Workgroup, JTNN Coalition, Opioid and Substance Use Taskforce, Statewide System of Care workgroups, State of Nevada CSEC Task Force, and Court Improvement Caucus. Funding received has supported additional training being provided, such as Acceptance and Commitment Therapy (ACT), Trauma-Focused Cognitive Behavior Therapy (TF-CBT), Child-Parent Psychotherapy (CPP), Eye Movement Desensitization and Reprocessing (EMDR) and Circle of Security Parenting (COS-P). Ongoing recruitment for behavioral health providers continues and requests for bids are submitted quarterly. In addition to statewide efforts, the northern region has partnered with Duke University to implement Together Facing the Challenge (TFTC) which is a skills-based training program for therapeutic foster parents who care for children with emotional and behavioral problems. The training program aims to help foster parents build and maintain supportive and involved relationships with children in their care and helps learn and use effective behavior management and communication strategies.

Additional feedback provided by youth is that of the services provided it is difficult to engage as providers "do not look like them" or "do not understand me and my culture. To address this the state has begun efforts to establish a multi-jurisdictional, multi-agency Race and Equity Team, which is workgroup working to create strategies for reducing and/or eliminating disproportionality and disparity by developing and supporting the workforce. The Race and Equity Team is working with Casey Family Programs to analyze and promote organizational interventions focused on developing and retaining a diverse and effective workforce. Current and future policies, practices, and training opportunities provided to the workforce will be analyzed under a race and equity lens to ensure, empower, and provide opportunities to the workforce in support of dismantling patterns of institutional, systemic, and structural racism and bias. Additional technical assistance has been requested from the Capacity Building Center for States and a plan is being developed.

With the assistance of a contracted CSEC Coordinator, Nevada is currently overseeing multiple projects supporting the CSEC population. These projects include, but are not limited to:

- The development of a statewide database to track CSEC victims and youth who are at a high risk of being trafficked and is being compiled across multiple agencies to build a baseline dataset of this population.

- The passing of Senate Bill 274, which is an act that amended NRS 424 1.1-1.7 to provide for the licensure and certification of receiving centers for CSEC victims as well as entities that provide CSEC services to children. Receiving centers will be secured facilities that operate 24/7 to provide specialized inpatient and outpatient services to CSEC children. Each child that is placed in the care of or referred to a receiving center for outpatient care will receive, as necessary, the following services:
 - Mental health triage;
 - Assessment of basic needs;
 - Assessment of medical needs;
 - Psychiatric evaluation;
 - Referral to detoxification;
 - Short-term placement;
 - Mobile crisis response;
 - Academic support;
 - Preventative services for children who are at risk of CSEC;
 - Therapeutic treatment to assist the child in safely transitioning to home-based placement; and
 - Any other services required.
- Ongoing work of the CSEC Coalition, including subcommittees one of which is currently working on goals such as mandating training for those who work with the CSEC population to legislation.
- All statewide child welfare jurisdictions are involved in a statewide CSEC taskforce. This taskforce works to develop training for jurisdictions and stakeholders in the identification and screening of potential CSEC victims and service delivery when risk factors are identified.
- In the southern region a protocol has been developed regarding intake of children who are suspected of being trafficked. Incoming reports are sent to a specialized unit, At Risk Youth Support (ARYS) for assessment. The ARYS unit works with the Southern Nevada Children's Advocacy Center (SNCAC), Las Vegas Metropolitan Police (LVMPD) Vice, LVMPD Sexual Assault Juvenile (SAJ) Unit, the Department of Juvenile Justice Services (DJJS), as well as community-based organizations including The Embracing Project, Purple Wings, RISE, St. Jude's Ranch, Living Grace (home for teen moms), Southern NV Partnership for homeless youth, Purchased, Free International and NV Health Right Medical Clinic.
- In the northern region children aged 14 and over are assigned to a specialized Independent Living (IL) unit who are trained in CSEC policy and can respond appropriately. The IL unit collaborates with local non-profits specific to CSEC to provide additional case management support, mentoring, and educational support to identified victims.

Nevada is currently unable to capture or report data for CARA and CSEC populations in NCANDS, however DCFS has contracted with the University of Las Vegas (UNLV) Statistical Analysis Center to establish a statewide CSEC database. This database will capture a variety of data variables and will provide the state with a baseline count of identified CSEC victims, what agencies victims are involved with, and what services are being provided by identified agencies. Jurisdictions statewide are expected to send UNLV

quarterly data that will be entered into the database. DCFS has also collaborated with community providers who provide CSEC support services who will also provide quarterly data to UNLV for the database. While this project is still in the beginning phases, appropriate Data Use Agreements have been drafted and signed by the jurisdictions and external stakeholders. Additionally, identifications of enhancements to CCWIS have been made that will continue to assist the state in providing CSEC data in the future.

For the last four years the state has partnered with the Division of Public and Behavioral Health to lead a statewide initiative to implement the Comprehensive Addition and Recovery Act (CARA) Plan of Care workgroup that meets quarterly. The initiative has evolved into a statewide collaborative Perinatal Health Network which continues to develop strategic approaches for reporting substance exposed infants, creating CARA Plans of Care when an infant is affected by perinatal substance use, understanding when to report to child welfare, outreach, and identification and treatment for postpartum women using evidence-based interventions. This workgroup is composed of physicians, child welfare agencies, Medicaid/Welfare, private insurances, and hospitals. CARA Grants have been provided to support the goal of continued development and implementation of community response and to respond to the emotional, physical, and well-being of children as affected by perinatal substance use and to prevent children from entering/reentering the child welfare system. CARA grants are an integral part of creating an integrated system of services to strengthen and support families and prevent maltreatment. Additional efforts to the implementation of CARA include:

- Clark County:
 - Community partnership with the Empowered Program has been established with Roseman University who have created the Parenting Project and the Foundation for Positive Kids. These programs offer prevention services to infants identified as being affected by perinatal substance use, their affected siblings, and parents/caregivers.
 - Participation in local meetings including Reproductive Health Network and other relevant workgroups/committees.
- Washoe County:
 - Contracts with the University of Nevada Reno Early Head Start to provide “Parents as Teachers” which is in-home parenting curriculum for families with infants affected by prenatal substance use.
 - Facilitation of the Crossroads Program, a sober living community where individuals who are experiences homelessness or are impacted by mental health and/or substance use disorders can work towards self-sufficiency and long-term sobriety. Families involved with child welfare agencies are prioritized for entry to avoid removal or to facilitate reunification.

Over the next year, services to support these target populations will be prioritized in Nevada’s Family First Prevention Services Act Prevention Plan. The state expects to implement more FFPSA Prevention Services, including evidence-based practices (EBPs) for in-home parent training, mental health (including domestic violence) and substance abuse disorder treatment. The state intends on using transition funds to develop evaluation/CQI plans for selected EBPs. Additionally, training will be provided to both

internal and external providers to increase capacity in various program areas as well as within the community. As part of the FFPSA Prevention Services Plan of selecting evidence-based practices for implementation, the psychotherapy models of Acceptance and Commitment Therapy (ACT) and Trauma-Focused - Cognitive Behavior therapy were chosen for delivery to adult clients and children respectively to prevent entry into, stabilize/treat while in, and/or upon leaving the child welfare system. The state has worked diligently to draft and submit an initial FFPSA plan, however an approved plan has not yet been achieved.

The following tables reflect SFY 2019 and SFY 2020 data for Impending Danger threats associated with the Nevada Initial Assessment (NIA) record, not with specific youth in UNITY. However, for the purposes of this analysis, we are showing the breakdown of impending danger threats selected for the NIA by the age group of the children determined to be “unsafe” on that NIA record. The count of unsafe children represents the count of unique NIA + child ID pairs where the child was unsafe; a child could be marked unsafe on more than one NIA in the year.

Table 46: SFY2020 Statewide – Impending Danger Threats by Age Group

SFY 2020								
Statewide – Impending Danger Threats by Age Group								
	Age 0 -5		Age 6 – 10		Age 11 – 15		Age 16+	
Impending Danger Threat Description	n	%	n	%	n	%	n	%
7. One or both parents/caregivers cannot control their behavior.	1257	70.2	537	67.5	374	62.5	87	47.8
13. One or both parents/caregivers lack parenting knowledge, skills, and motivation which affect child safety.	1275	71.2	538	67.6	410	68.6	121	66.5
8. Family does not have resources to meet basic needs.	628	35.1	188	23.6	161	26.9	41	22.54
6. One or both parents/caregivers’ emotional stability, developmental status or cognitive deficiency	525	29.3	214	26.9	140	23.4	39	21.4

seriously impairs their ability to care for the child(ren).								
5. A parent or caregiver is violent and no adult in the home is protective of the child(ren).	438	24.5	226	28.4	107	17.9	32	17.6
9. No adult in the home will perform parental duties and responsibilities.	260	14.5	111	13.9	135	22.6	54	29.7

Table 47: SFY2021 Statewide – Impending Danger Threats by Age Group

SFY 2021								
Statewide – Impending Danger Threats by Age Group								
	Age 0 -5		Age 6 – 10		Age 11 – 15		Age 16+	
Impending Danger Threat Description	n	%	n	%	n	%	n	%
13. One or both parents/caregivers lack parenting knowledge, skills, and motivation which affect child safety.	1249	79.6	469	73.1	318	69.3	104	75.4
7. One or both parents/caregivers cannot control their behavior.	1179	75.1	458	71.3	282	61.4	62	44.9
8. Family does not have resources to meet basic needs.	534	34.0	169	26.3	109	23.7	21	15.2
6. One or both parents/caregivers emotional stability, developmental status or cognitive deficiency seriously impairs their ability to care for the child(ren).	516	32.9	211	32.9	156	34.0	26	18.8
5. A parent or caregiver is violent and no adult in the home is protective of the child(ren).	519	33.1	201	31.3	142	30.9	35	25.4

9. No adult in the home will perform parental duties and responsibilities.	187	11.9	91	14.2	122	26.6	59	42.8
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Kinship Navigator Funding (Title IV-B, subpart 2)

In FY2021, the IVB-2 funds for Nevada's Kinship Navigator program were cut approximately \$70K. Nevada used \$10K of the available funding towards the finalization of the evaluation reports and the remaining amount was used for direct services to ensure that no family was put on a waitlist or unable to access services.

Unique families served: In 2021, the statewide Kinship Navigator Program at Foster Kinship served 1,725 unique kinship families across the state, which amounted to 1,489 in Clark County, 123 in Washoe County, and 113 in the rural counties.

Navigator Services Provided: 11,443 in Clark County, 633 in Washoe County, 552 in rural counties.

Tangible Resources Provided: Over 5,000 basic need items were distributed to families.

2021 Outcomes: 92% of families achieved legal capacity and financial stability goals. 100% of families were connected to community and parenting resources and caregiver support.

Foster Kinship offers the Kinship Navigator Program to all kinship families in Nevada, targeting the 30,000 children living in kinship care in the state. Foster Kinship's model is designed to serve any kinship caregiver (defined as both relatives and fictive kin) raising children in nonparental care (neither parent resides in the home) in the state of Nevada. We serve all types of kinship families including:

- Formal families (child welfare agency has custody- may be licensed kinship foster parents or unlicensed kinship foster parents),
- Informal families (diverted kinship caregivers and private kinship caregivers who range from physical custody to legal guardianship), and
- Kinship families who have adopted and are now considered the legal parent.

Families are made aware of support services via a toll-free helpline, website (www.FosterKinship.org), referrals from partner organizations. Foster Kinship operates an office and kinship family resource center in Las Vegas, Clark County and has a second office in Reno, Washoe County. All Navigator services are free and available in English and Spanish. The Kinship Navigator program remains connected to the Nevada's 211 which now has a mobile app.

Foster Kinship- Kinship Navigator overview:

1. Our first goal is to build a foundation of safety for children by meeting immediate needs of the kinship family.

2. Our second goal is to provide the most stable home for children by stabilizing the kinship family legally and financially.
3. Our final goal is to meet the well-being needs of children by increasing caregivers' capacity to provide nurturing parenting.

Navigator Goals:

1. **LEGAL CAPACITY:** Kinship families will establish appropriate legal relationships with the children in their homes to increase family stability. To assess the progress towards legal custody, participants will be evaluated based on changes in the custody status of at least one of their kinship children since initial intake. Family Advocates will complete an intake form and will determine if a change in legal status is necessary for the kinship family. For kinship families needing a change in legal status, the model goal is for 80% of kinship caregivers to experience a positive change in legal relationships for at least one of their kinship children upon program completion. We anticipate that for the remaining 20%, some children will be reunified with their parents or placed with other relatives.
2. **FINANCIAL STABILITY:** Kinship families will experience an increase in knowledge and access to available financial resources to help meet their family's needs. To assess this, participants will be evaluated on the change in several financial and community resources utilized since initial intake. Family Advocates will determine if the kinship family is eligible for any financial assistance programs not previously utilized. Upon exiting the Kinship Navigator Program, 80% of kinship caregivers who qualify for additional financial support will have received additional financial benefits for their kinship children. We anticipate that for the remaining 20%, some caregivers will refuse financial assistance for which they are eligible, and some children will be reunified with their parents or placed with other relatives.
3. **PARENTING AND CHILD COMMUNITY CONNECTION:** Family Advocates will complete an intake form to determine the number of community resources utilized at the time of intake. Upon exiting the Kinship Navigator Program, 100% of kinship caregivers will have received a personalized list of community resources to match their identified needs. By case end, 90% of caregivers will have increased their utilization of supportive services. We anticipate that for the remaining 10%, some children will be reunified with their parents or placed with other relatives.
4. **CAREGIVER SUPPORT:** Kinship families will experience an increase in the number of formal and informal supports to increase the caregivers' capacity to meet the well-being needs of the children. To assess this, participants are evaluated on the expansion of their network of support through participation in family events, support groups, or educational classes since initial intake. Upon exiting the Kinship Navigator Program, 90% of kinship caregivers will have connected to someone who understands their unique experiences through participation in at least one of the program activities. We anticipate that for the remaining 10%, some caregivers will refuse to participate in supportive events, and some children will be reunified with their parents or placed with other relatives.

Services:

1. Information, Referrals and Support

- a. General Information regarding community, legal, financial, and emotional resources for kinship families available via a variety of mechanisms to deliver the same information:
 - i. Online Kinship Resource Locator Tool (RLT) (self-service or case manager use)
 - ii. Telephone helpline with toll-free and local numbers staffed by professional family advocates
 - iii. In-person support by professional Family Advocates in local offices
 - iv. Email
 - v. Website: FAQ about guardianship, child only TANF, Kinship Care, and Resources.
- b. Intake Services: provided by Family Advocates specializing in Intake through phone or in-person assessment. Once intake is completed, all families receive a personalized Kinship RLT via in person, email, or mail. Post-intake, if any needs are identified, the family is referred immediately to the case management service.
- c. Community Referrals: to food banks, clothing closets, family resource centers, government services, churches, provided by Family Advocates after intake.
- d. Support Groups: In person groups include meals/childcare. Online groups are also provided. Additionally, a Spanish-speaking only group is offered at least once a month.
- e. Education: Free Nurturing Parenting classes, guardianship assistance clinics, private TPR/adoption assistance clinics, car seat and CPR classes
- f. Family Events: designed to be fun for kids but also as a vehicle for distributing info to caregivers and emergency resources to families: Back to School, Thanksgiving, Christmas, etc.
- g. Online Support Group: "Nevada Kinship Caregivers" managed and moderated by Family Advocates.

2. Case Management:

- a. Case plan unique to the family to determine community, legal, financial, and emotional goals for the kin family conducted by Family Advocate specializing in Case Management. Case plans average 90-120 days until close and at least 90 minutes of services are provided to a kin family by a Family Advocate. Case plans do not extend longer than six months
- b. Application explanation, completion, and submission support including: NRS 159 guardianship, private TPR/adoption, child-only TANF applications/child-support documents, SNAP, Medical, Energy Assistance Program, kinship licensing through foster care, childcare subsidy, WIC, etc.
- c. Financial Assistance in order to meet any case plan goal application requirements (e.g. pay for birth certificates to prove relationship for child-only TANF, or certification of mailing for guardianship)
- d. Notary and Copy Service to meet legal and financial case plan goals
- e. Emergency Resources: diapers, food, clothing, beds, strollers, gift cards, car seats, childcare or rent payments, provided it meets case plan goals

- f. 1:1 emotional support throughout case plan
- g. Regular Follow up with all goal and services outlined in the case plan

Foster Kinship's Navigator Model was submitted to the Federal Families First Clearinghouse in late 2021 for review.

2021 Kinship Navigator Evaluation Summary

Dr. Mark S. Preston of Preston Management and Organizational Consulting remains contracted by Nevada to evaluate Foster Kinship's Navigator Program for formal families. Dr. Preston is an independent research consultant who works with non-profit and governmental human service agencies to strengthen the effectiveness and well-being of both front-line and management staff. The evaluation contract involved conducting three separate, but interrelated, empirically-based evaluation studies. The first was an observational evaluation that sought to ascertain Foster Kinship staff's level of fidelity to its Kinship Navigator Program manual for formal kinship families. The second and third were quantitative evaluations designed to determine whether Foster Kinship's Navigator Program for formal kinship families met the minimum standard for promising practice under FFPSA's evidence-based requirements.

With respect to the observational evaluation, two unique fidelity rubrics were created, one for job tasks performed by the intake unit and a second for the case management unit. Each unit's staff was observed on two separate occasions. Observations were documented on the corresponding fidelity rubric and judged against the protocol tasks listed in the Foster Kinship Navigator Program Manual. Findings uncovered an overall fidelity percentage of 95% across both units. The intake unit's level of fidelity was 93%, whereas the level of fidelity for the case management unit was 96%.

The first external outcome evaluation of the Navigator Program on the formal kinship population in Clark County provided evidence that the program:

- Decreases the likelihood of disruption, preventing children from entering the traditional foster care system. Compared to children whose caregivers did not receive navigator services, those who used our program were 3.41 times more likely to access needed services, and those who used our program were 2.99 times more likely to provide a stable home.
- Increases connection to vital resources, like kinship licensing. Compared to those children whose caregivers did not receive navigator services, those who used our program were 3.41 times more likely to access needed services.
- The external fidelity evaluation showed 93% fidelity to the intake and assessment portion of the model and 96% fidelity to the case management portion of the model.

In the second and third studies, secondary data from Clark County, the Nevada Division of Welfare and Supportive Services (DWSS), and Foster Kinship were analyzed within the framework of a quasi-experimental research design. Equivalent intervention and comparison groups were generated using propensity score matching, using one-to-one nearest neighbor matching without replacement to generate a matched data set of 1,116 children (558 intervention group and 558 comparison group children). Data were analyzed using generalized least squares logistic regression.

Findings in the second study, which matched data from Clark County with Foster Kinship, revealed a statistically significant difference between the groups for the study's two outcomes, access to services and placement stability.

Relative to the comparison group, the intervention group was:

1. 3.40 times more likely to become licensed by Clark County (access to services)
2. 2.99 times more likely to not experience a placement disruption (placement stability)

Additionally, the Cohen's D for each outcome was substantially large at .68 for access to services and .60 for placement stability.

In the third study, secondary data on child only TANF, a form of financial support available to some kinship families from DWSS, was matched with Foster Kinship data and analyzed. A generalized least squares multivariate logistic regression analysis uncovered statistically significant differences between the intervention and comparison groups.

Relative to the comparison group, the intervention group was:

1.71 times more likely to receive Child-only TANF from the State of Nevada (access to services).

In conclusion, results from these evaluation studies not only support fidelity to Foster Kinship's Kinship Navigator Program Manual but also offer rigorous preliminary evidence that Foster Kinship's Kinship Navigator Program would meet the minimum standard for promising practice as outlined by the Handbook of Standards and Procedures for the FFPSA's evidence-based requirements.

The reports can be located at Foster Kinship Navigator Program (nv.gov), and https://dcfs.nv.gov/uploadedFiles/dcfsnvgov/content/Programs/CWS/Foster_Care/ADA_FosterKinship_Final_Report_11292021_002_.pdf, and FosterKinship_Report2.indd (nv.gov). Foster Kinship's Navigator Model was submitted to the Federal Families First Clearinghouse by the state of Nevada in late 2021 for review.

MONTHLY CASEWORKER VISIT FORMULA GRANTS AND STANDARDS FOR CASEWORKER VISITS

The Title IVB-2 Promoting Safe and Stable Families: Caseworker Visitation funding is awarded to Nevada's child welfare agencies to support monthly caseworker visits. During the past year, the regions have used the Monthly Caseworker Visit grant to fund a variety of strategies to improve the frequency and quality of caseworker visits including:

- Using funding to increase caseworker visits with children and completion of documentation by allowing overtime when time does not permit during a normal 40-hour work week.
- Utilizing the grant for travel to see children outside of the State of Nevada to see children in outside residential treatment placements.

- Using funds to purchase meals and appropriate activities for children to utilize during visits to promote engagement and improve the quality of the visit.
- Maintenance of vehicle fleets and utilizing mileage reimbursement to promote worker transportation to visits, especially during COVID-19 restrictions when offices were closed.
- Using funds to purchase technology utilized by staff to conduct visits, including taking pictures, navigational support, and safety during emergency situations, as well as maintaining essential communication between caseworkers and families.
- Promoting comprehensive and ongoing training concerning the importance of child contacts and quality, providing data tools to use during supervision and coaching, and keeping a standing agenda item centered around CQI, frequency of visitation, CFSR items, and Nevada PIP goal items.
- Developing a caseworker parent and child contact report to monitor frequency of visits and ensure documentation in UNITY is timely. The reports are available on demand. In addition to the report, Team 2 has developed a rubric to gauge the quality of visits. This provides standardization of quality visit standards statewide and gives opportunity to coach staff to ensure the safety, permanency, and well-being of children involved with the child welfare system.

Nevada continues to monitor the frequency of caseworker contact using a developed Caseworker Visit report (7D7), as well as various internal contact reports and performance report cards. These reports indicate the days between visits as well as the date the next visit is expected. Supervisors and Managers can run these report as needed to provide them to their staff. In 2021 all jurisdictions were given access to run additional caseworker contact reports in UNITY as part of PIP team 2 major deliverables. These reports help supervisors proactively monitor caseworker visits to coach staff on how to ensure all visits are completed, the frequencies required, and quality to ensure the safety, permanency, and well-being of children involved in the child welfare system.

Statewide, regions continue to experience staff turnover and high caseload volumes which impacts the ability to achieve compliance with the performance measure. Additionally, COVID-19 impacted the frequency and quality of visits as offices statewide were closed under a shut-down order by the Governor commencing March 17, 2020. The shutdown impacted the ability to travel and caused financial hardship statewide well into 2022.

Jurisdictions continue to rely upon CFSR activities to glean insight about the quality of the contact between workers and the families they serve. Those processes include the case review activities itself, as well as conducting focus groups and surveys of parents/caregivers, children, and foster parents.

The following activities are planned in the next reporting period to support quality and frequency of caseworker contacts and visits:

- Both Clark and Washoe County will use the ChildStat program to help monitor caseworker contact with children and the impact of quality engagement on child wellbeing and permanency. A monthly ChildStat data presentation will be provided to staff to promote transparency and to support an improvement in safety,

permanency, and well-being outcomes. Conversations will be facilitated regarding systemic influences that impact the child welfare system.

- Washoe County's CQI team will meet weekly with their Permanency Unit Leadership to discuss visitation reports to support comprehensive ongoing training.
- In the rural region supervisors are conducting monthly case pulls of a minimum of five cases to review caseworker's monthly visit notes. Feedback and coaching is being provided where needed.

Table 48: Compliance of Monthly Caseworker Visits with Children

Reporting Period	Compliance Rate	Performance Goal
FFY 2019	93.57%	95%
FFY 2020	93.81%	95%
FFY 2021 YTD	95.56%	95%
FFY 2022 YTD (10/1/2021 through 4/20/2022)	91.75%	95%

Source: UNITY RPT7D7

Table 49: Compliance of Monthly Caseworker Visits with Children in their Residence

Reporting Period	Compliance Rate	Performance Goal
FFY 2019	91.55%	50%
FFY 2020	92.45%	50%
FFY 2021 YTD	2.51%	50%
FFY 2022 YTD (10/1/2021 through 4/20/2022)	89.56%	50%

Source: UNITY RPT7D7

States are required to ensure the total number of monthly caseworker visits is not less than 95 percent of the total visits that would be made if each child were visited once per month. In addition, at least 50 percent of the total number of monthly visits made by caseworkers to children in foster care must occur in the child's residence (section 424(f) of the Act). The state is not in compliance with the 95% goal.

PIP Items that will strengthen the state's compliance with caseworker visits are in various stages of completion. PIP Items 2.2.2 (Q1), 2.2.3 (Q2) (Q4), 2.2.4 (Q4) (Q5), and 2.2.5 (Q4) (Q6) are evaluating and enhancing reports to monitor the frequency and quality of child contacts. The state is working closely with the CBCS on the development and utilization of these reports.

ADDITIONAL SERVICES INFORMATION

Adoption and Legal Guardianship Incentive Payments

The Adoption and Legal Guardianship Incentive Payment funds have been awarded to Nevada to assist with inter-jurisdictional placements, diligent search for relatives, home studies, social summaries, recruitment of adoptive and foster parents, professional development, and post-adoption services. Subrecipients of the incentive payments include all Nevada's child welfare jurisdictions and Raise the Future (formally the Adoption Exchange). Each subrecipient provides a variety of services to adoptive families and adoptees to achieve timely permanency, including:

- Processing Termination of Parental Rights (TPR's) that allow for youth to become legally available for adoption;
- Diligent searches for potential relatives;
- Completion of home studies and social summaries;
- Marketing and public awareness for recruitment of foster parents, adoptive parents, mentors, and volunteers for youth in care, through different news, radio, and social media outlets;
- Development of Spanish resources to increase outreach efforts;
- Ensuring children out-of-state in permanent placements receive necessary support services related to medical expenses not covered by Medicaid, neuropsychological evaluations, educational needs, basic needs (food, utilities, rent, etc.), specific therapies, hotels for families to travel for the needs of children, and other identified needs to support adoptive placements;
- Sending resource parents and staff to conferences relating to adoption, fostering, and mentoring youth in care;
- Updating technology that supports adoption related activities;
- Travel expenses related to placing youth with adoptive families, including travel expenses for birth parents that live out-of-state to return to Nevada to complete the TPR/relinquishment process to ensure youth are free for adoption;
- Material for adoptive families to use with youth in anticipation of being legally adopted including books, pins, blankets, stuffed animals, etc.; and
- Adoption Day activities
- Raise the Future oversees Nevada's Recruitment Response Team (RRT) funds. Raise the Future's projects include Wendy's Wonderful Kids (WWK), which employs contract recruiters to assist in locating adoptive parents and permanent connections for youth; a strategy identified in the state's Adoption Call to Action Plan. Through Raise the Future, Nevada also uses grant money to pay for a statewide membership to AdoptUsKids, which facilitates national recruitment activities. Raise the Future supports Nevada's statewide efforts in recruiting foster and adoptive families by providing responsive, timely, customer service support for individuals who inquire about becoming foster and/or adoptive families via the

national AdoptUsKids website. Raise the Future's knowledge and expertise of AdoptUSKids' Family Intake Tracking Tool (FITT) enables Nevada to efficiently and effectively compile family intake data, track progress towards the approval process, and encourages families to stay engaged in becoming a true resource for children in care.

Nevada has also contracted with the University of South Florida to provide training and direct services to current and prospective foster/adoptive families, relative caregivers, and birth parents through a collaborative Quality Parenting Initiative (QPI) and Just In Time (JIT) training website. The website provides information and web-based training videos that will facilitate learning strategies to improve parenting skills. Web-based trainings will include such topics as:

- Trauma informed parenting;
- Mentoring of biological parents by foster parents;
- Strategies to support successful reunification;
- Supporting foster children's education;
- Supporting healthy development of infants, toddlers, and youth in care; and
- Importance of providing quality health care.

Adoption Savings

Historically, adoption savings funds have not been available to reinvest in the current state fiscal year or any subsequent year. A statutory change was necessary to allow Nevada to have access to and spend adoption savings funds. Efforts were made during Nevada's 2019 Legislative Session to allow DCFS to not revert the savings back to the General Fund. Bill Draft Request #19A4092104 was submitted during the 80th Regular Session of Nevada's Legislature (2019). While the BDR was submitted, the Governor's Finance Office postponed the consideration of any legislative change until the next biennial Agency Request budget submission.

DCFS prepared and presented a new Bill Draft Request to the 2021 Legislative Session ([Senate Bill 377](#)) to allow DCFS to reinvest adoption savings. The bill passed, paving the way for Nevada to reinvest adoption savings as outlined in the federal law by allowing for reported Adoption Savings Funds to be balanced forward to the next state fiscal year for use in that year. Any unused portion at the end of the following year will revert to the State General Fund. DCFS will begin utilizing the savings in SFY 2023, starting July 1, 2022. Jurisdictions will receive the calculated savings identified in their FY21 CB 496 Part 4 report (See Attachment E). At this time, unused savings calculated for previous years will not be expended as it has not been appropriated by the State Legislature.

NEW: Family First Prevention Services Act Transition Grants

The Family First Prevention Services Act (FFPSA) was enacted on February 9, 2018, as part of P.L. 115-123. Overall, the law supports the use of evidence-based practices to promote the well-being of children, youth, and families and to prevent unnecessary foster care placements. To support implementation of FFPSA and further its goals, Congress passed the Family First Transition Act (henceforth, "Transition Act") as part of P. L. 116-94, signed into law on December 20, 2019, which included an appropriation of

funds. FFPSA funding has been awarded to Nevada for activities directly associated with implementation FFPSA initiatives.

Funds will be used for statewide activities such as:

- Contracting with consultants to assess and expand service arrays in alignment with Nevada's FFPSA Prevention Plan
- Assisting congregate care facilities in meeting the criteria for Qualified Residential Treatment Programs
- Training and implementation of evidence-based models in alignment with Nevada's FFPSA Prevention Plan
- Enhance data collection and CQI capacity as required by FFPSA
- Contract with community providers to monitor prevention plans
- Update UNITY to track data and practices required by FFPSA
- Update Child Welfare Academy trainings to account for changes in practice due to FFPSA

To date, funds have been used by the jurisdictions in the following ways:

- Clark County:
 - Funds for consulting fees to assist with FFPSA implementation. The consultant gathered information regarding a rate study to help determine an appropriate rate for future Qualified Residential Treatment Programs (QRTS) as well as confirming an appropriate rate for the specialized foster care population.
- Washoe County:
 - Contracted with the University of Nevada Reno, Early Head Start Program to facilitate the "Parents as Teachers" program, which is a well-supported model for home visits, assessments, screening, and support.
 - Contracted with a consultation group at the University of Nevada Reno to provide Acceptance and Commitment Therapy (ACT). ACT is a planned mental health model that Washoe intends to use to train staff of FFPSA.
 - Implementation of the mental health intervention of Trauma Focused CBT, in addition to group training and travel costs.
 - Partnership with Collaborative Safety, LLC to implement Collaborative Safety's Safety Science Model for critical incidents as well as an agency wide quality improvement model. The model will use evidence-based practices to provide system reviews to determine root causes and systemic concerns that impact practice to help shift to a culture of psychological safety and learning.
 - Consulting fees for contracts that support FFPSA intervention strategies.
 - Interventions for Emergency Placement support.
 - Additional licenses for IBM-COGNOS which is a data system that will be used to pull data and identify trends.
- Rural Region
 - No FFPSA Transition Grant funds have been used to date.

NEW: Family First Transition Act Funding Certainty Grants

This grant was made available to IV-E waiver demonstration sites. In Nevada, Clark County participated in the IV-E waiver demonstration program, and therefore was eligible for a Family First Transition Act Funding Certainty Grant.

Clark County Department of Family Services will use funds from the Certainty Grant to continue the Child Welfare Integration process by providing child welfare services and determining eligibility and foster care licensing. As reported last year, Clark County is planning on using funds to provide the following activities:

- Enhanced and improved services to the current and increasing needs of children in southern Nevada;
- Coordination of services between parties to meet the current and increasing needs of children in southern Nevada; and
- Background checks and fingerprinting for prospective foster care agencies/homes and licensing family foster homes, specialized foster homes, independent living foster homes or group foster homes and ensure training of employees who have direct contact with children.

Clark County previously used Demonstration Waiver dollars to assist with funding some non IV-E eligible placement costs. After the waiver ended, Clark County used Funding Certainty grant monies to assist with paying up to 11 million dollars in non IV-E placement costs. A lack of adequate increases to the CW Block Grant, during the years that Clark County operated the waiver, contributed to this shortfall. These costs are not currently IV-E eligible. Clark County is working on a plan to increase the penetration rate to limit the amount of non-IVE eligible placement costs in the future. Clark County is anticipating the implementation of FFPSA may help, along with requests to increase the CW Block grant.

JOHN H. CHAFEE FOSTER CARE PROGRAM FOR SUCCESSFUL TRANSITION TO ADULTHOOD (THE CHAFEE PROGRAM)

Nevada's Independent Living (IL) program provides youth individualized case management, workshops, funding for secondary and post-secondary education, job seeking and employment services, and helps build skills that promote self-sufficiency as youth transition into adulthood. IL youth are supported through referrals by the child welfare agency to the IL Unit by CFT meetings that are arranged as close as possible to the youth's 14th birthday to ensure the development of a nurturing relationship between the youth and the IL worker.

Nevada delivers, facilitates, and administers its own IL program in the 15 rural counties with the assistance of public and private partnerships. Clark and Washoe Counties facilitate their own IL programs under the supervision of the state. While each region/jurisdiction develops a service array unique to its community, jurisdictions work collaboratively to implement statewide policies and programming.

The State remains committed to improve the quality of services and support offered through IL programs. Management decided to allocate greater resources to the program,

moving from one to two full time IL Specialists in the Family Programs Office at the onset of 2021. The addition of a second specialist has allowed the state to more effectively monitor and track service provision and outcomes, helping us tailor our programs to meet the needs of our older youth more effectively.

On February 15, 2019, Assembly Bill 150 was introduced during the 80th Nevada Legislative Session, which would require the establishment of a work group to study ways to improve the outcomes for persons who leave the custody of an agency which provides child welfare services when they reach 18 years of age and was approved by the Governor on June 7, 2019. On March 26, 2021, Senate Bill 397 was introduced during the 81st Nevada Legislative Session, which would revise provisions relating to certain persons who remain in foster care beyond the age of 18 years and was approved by the Governor on June 4, 2021. Effective January 1, 2024, Nevada will serve youth up until the age of 21 under the “Extended Young Adult Support Services Program.” Nevada currently provides foster care to youth up until the age of 18. To prepare programmatically and fiscally for implementation of Title IV-E Extended Foster Care, Nevada has contracted with Social Change Partners (SCP), LLC who is currently working with a Nevada team of statewide child welfare, fiscal, and legal representation as well as representatives from the Capacity Building Center for States.

Social Change Partners- SB397 Implementation: The purpose of the consultation with SCP is to support Nevada in deepening our analysis of the implications of the proposed implementation of Title IV-E Extended Foster Care (EFC) as an additional option to support Nevada foster youth ages 18-21. SCP will assist Nevada with a detailed examination and understanding of programmatic implications and fiscal opportunities, determining the structure for a side-by-side implementation of EFC with existing programs, articulating, and planning the development of a strengthened placement and service array, and determining what changes to law, regulation, policy and practice would be necessary to implement all of the above.

August of 2021 marked the initiation of the meetings between SCP and the Nevada team, which is comprised of statewide child welfare representation, CBCS and FPO. As meetings progressed into targeted conversations, DCFS fiscal and state legal representation were included. Throughout the process, SCP has and will continue to provide technical assistance, research support, and analysis to DCFS, CCDFS, and WCHSA to add specificity and detail to ongoing planning regarding the implementation of EFC.

Capacity Building Center for States – Integrated Capacity Building Plan

The IL program has experienced many challenges over the last five or more years. In addition to limited funding, there have been significant changes in program leadership and staff resources. As such, the state developed an Integrated Capacity Building Plan in partnership with the regions and the Capacity Building Center for States in 2021. Upon completion of the plan, Nevada will have Independent Living programs that are well-integrated with programming, resources, and partnerships within and outside the state to meet the needs of youth aging out of care. Staff will be better able to engage and partner

with youth and their family when assessing and planning for youth transitioning out of care.

The work plan was approved by the Children's Bureau on April 16, 2021, and the project team was initiated in July 2021. The project team is comprised of representation from the state, rural counties, Clark County, and Washoe County. The project team also includes SCP, Children's Advocacy Alliance (CAA), which is the organization contracted to assist the state with forming and maintaining the statewide youth advisory board.

Since the project's initiation, the team has conducted a comprehensive review undergoing an extensive process of deeper problem exploration that involved gathering and analyzing secondary (existing) data, as well as collecting and analyzing primary data via interviews with key informants and focus groups with youth and young adults. The first stage of deeper problem exploration involved examining existing data on IL and EFC programs across the state and within counties, including data from NYTD, AFCARS, and state-specific databases.

The second stage of deeper problem exploration involved collecting primary data from two sets of key informants. Individual interviews were conducted with statewide leadership and management-level staff. Interview data was analyzed using content and thematic analysis, and a summary matrix of findings was developed. Following the interviews, two statewide focus groups were conducted with youth and young adults. Focus group data was analyzed using content and thematic analysis, and a summary matrix of findings was developed. The summary matrix was also used to develop a summary visual that was disseminated to focus group participants and others including the SQIC, ADG and YABs. All components of problem exploration generated greater insights of root cause analysis of identified problems and contributing factors. These findings will be critical for the next stage of the work plan of identifying a plan for program enhancements to IL and EFC.

Following a readiness assessment, the state intends to implement findings to strengthen the state's IL programs using an implementation science framework through a team comprised of regional and county partners, youth and young adult representatives, and community partners. Through this collaboration with the CBCS, Nevada will have an enhanced IL service array that is trauma-informed, integrated, and coordinated to better prepare youth aging out of care with the necessary knowledge, skills, resources and supports to achieve goals for independence and have improved safety, permanence (e.g., social, emotional, and family connections) and well-being.

Activities to Solicit Feedback from Youth & Young Adult's Service Needs & Desired Outcomes

Findings and recommendations from the state's comprehensive IL review discussed in the paragraphs above were shared with stakeholders to facilitate ongoing program development. Due to staff turnover, and the recognition of the need to increase youth involvement to provide sustainability, Nevada contracted CAA to facilitate and support the work of the statewide Youth Advisory Board (YAB). Responsibilities of CAA include, but are not limited to, facilitating, and coordinating virtual meetings, strengthening

partnerships with stakeholders, providing leadership training opportunities, and ensuring YAB members are compensated for their participation.

In January, CAA hosted two Child Welfare Network meetings, one in the Northern Region and one in the Southern Region, where youth were presented with the opportunity to talk about Nevada LIFE and engage in active recruitment. Four in-person meetings, two in the Northern Region and two in Southern Region are being planned for July and August 2022. The meetings will include regional and statewide YAB facilitators, current YAB members, as well as interested youth and young adults with lived experience. During their time together, attendees will participate in team building exercises and comprehensive discussions addressing youth engagement, YAB sustainability and how to best streamline the state's IL goals.

While the regional and statewide YABs still encounter barriers in maintaining regular activity due to ongoing COVID-19 restrictions, Nevada continues to encourage youth voices and engagement as part of our work with CBCS and SCP. Earlier this year, two focus groups were conducted virtually that provided a platform for a diverse group of youth and young adults to share their perspective on the current Nevada IL program and service array. All participants were compensated for their time. The focus groups highlighted the importance of ensuring that our work moving forward is youth driven. Although members on our CAA and CBCS teams include individuals with lived expertise, Nevada will continue to ensure youth and young adults remain integral partners in service delivery for the IL program by recruiting more young people. Additionally, monthly meetings have been introduced at the statewide level that include jurisdictional facilitators, statewide YAB facilitators and the FPO. These meetings are used to address barriers, share successes, and strategize innovative solutions that keep youth at the forefront.

National Youth in Transition Database (NYTD)

Although Nevada continues to make data available using National Youth in Transition Database (NYTD) data, the CBCS' work plan focuses on improved data quality requirements. In March 2022, the FPO attended the NYTD peer event presented by CBCS and Children's Bureau where nationwide IL representatives shared their successes and challenges in achieving compliance during each cohort. We learned and are working on a plan to incorporate better ways of establishing and maintaining communication with youth as well as compensating them for their participation as these methods have proven successful in several states. Currently NYTD is also a statewide effort with the FPO IL specialists conducting weekly or bi-weekly reports (dependent on cohort type) that are sent out to each jurisdiction for survey completion updates. NYTD serves as a standing agenda item on each monthly statewide IL meetings as an added support to the jurisdictions – barriers are addressed, and updates are provided. Throughout each cohort, the FPO IL specialists are also available to support the jurisdictions through training and/or technical assistance as needed.

Division X of the Consolidated Appropriations Act

While the past year has been a challenge to older and former foster youth, the IL programs across the state have extended themselves to youth in need of IL services to meet these challenges. 589 of youth under the age of 17 received IL services, while 137 of youth over the age of 18 received services. The pandemic continued to present unique challenges to our IL youth, staff, and programs. However, the impact of *Supporting Foster Youth and Families through the Pandemic Act, Division X of the Consolidated Appropriations Act, 2021, Public Law (P.L.) 116-260*, allowed for flexibility in providing support to IL youth in ways that kept youth safe, secure, and in a position to look forward to and plan for the future, rather than fear long-term negative impacts due to the impact of the pandemic. Below is a summary of the efforts to serve and outcomes for youth who were served in the context of P.L. 116, Division X funds and flexibilities.

To ensure coordinated and consistent use of the P.L.116 enhanced flexible funds across the state, Nevada issued a program instruction on the use of funds and notification requirements and provided each region the names of youth that required notification in compliance with ACYF-CB-PI-21-04. Nevada contracted with FM Marketing, LLC to launch a public awareness campaign that included the development of a social media campaign which was distributed statewide for use by child welfare and community partners (e.g., NSHE, legal aid, public health, CIP). The social media campaign (Twitter, Facebook, posting on sister websites and Department of Motor Vehicles, press release) included a single point of contact for youth to access services within their local community. The contracted media firm enhanced its campaign outreach to include but not limited to; television and radio interviews as well as advertisements targeting eligible youth. The public awareness campaign concluded on September 30, 2021, with 310,643 impressions and a video completion rate of 278,963.

Additionally, Nevada's statewide P.L. 116, Division X Work Group continued to meet weekly through September 30, 2021. P.L. 116 updates are provided regularly via the monthly statewide IL meetings. In addition, the P.L. 116, Division X Work Group came to a consensus around tracking methodology, to be certain that we have a thorough understanding of the needs of youth across the state related to the pandemic, as well as the specific efforts undertaken to meet those needs.

During the Division X timeframe, Nevada wanted to ensure eligible youth and young adults received as much assistance and support as possible by opting into the allowable flexibilities of serving young adults up to the age of 27 and funding room and board expenses greater than the usually allowable 30%. A combination of both needs based payments and enhanced existing programming stipends were provided to 887 youth and young adults who experienced being in care. Funds were provided to assist with housing, utilities, childcare, transportation, driving assistance and other basic living expenses totaling about \$1,874,075 to date. With youth and young adults continuing to experience the ongoing effects of the COVID-19 pandemic, Nevada will continue to ensure their immediate needs including but not limited to; housing, transportation, and basic needs are met using the remaining P.L. 116 funds.

Public and Private Sectors

Child welfare agencies continue to collaborate with local school districts to support continued distance learning in the communities that are continuing to offer this option. In-person learning is now available in all school districts throughout Nevada, however the school districts still experienced quarantine issues based upon the COVID-19 infection rates. The child welfare agencies continued to work closely with the school district and private funders to ensure that all youth were provided educational support, such as technology and virtual tutors.

Nevada implemented a variety of strategies to engage youth and ensure safety during the COVID crisis while maintaining social distancing and safety protocols. Many services, including therapy, were provided through telehealth virtual visits, and have slowly begun implementing in-person therapy services. The child welfare agencies used clinical program staff to address the gap in mental health service delivery. Based on youth needs, short term intervention was provided, both in person and virtually, until more formal support could be arranged.

LGBTQI+ Supports for Youth and Young Adults

During the focus groups referenced in the previous sections, youth and young adults shared that they did not feel their racial, gender, and/or spiritual identity negatively affected their experience in the IL program. Nevada is in its initial stages of planning for providing targeted supports to the LGBTQI+ youth and young adults in care. An LGBTQI+ statewide policy was approved in March 2022 to ensure that LGBTQI+ youth under the custody of a child welfare agency receive non-discriminatory, safe, affirming, and non-detrimental services and interventions, to include but not be limited to mental health, substance abuse, foster care and adoption, and mentoring services without regard to actual or perceived sexual orientation, gender identity or expression (SOGIE).

Coordinated Efforts with Federal and State Programs

The state has undertaken efforts to better understand gaps in Medicaid coverage for eligible youth. During FY2020, one issue that became apparent from the NYTD surveys was that Medicaid applications for youth 18 years and older were routinely denied benefits. The state was able to identify the source of the barrier. Changes in leadership and limited staffing resources have made it difficult for the FPO to make progress but has continued to collaborate with the Department of Welfare & Supportive Services (DWSS) to resolve the issue. The aged-out Medicaid application has been made readily available for youth and young adults on the State's site. Application completion assistance as well as guidance on eligibility and required documentation are also offered.

In coordination with the Nevada Housing Division (NHD), which is partially funded by the U.S. Department of Housing and Urban Development (HUD), the state refers IL youth to the Housing Division for their multiple programs. NHD offers a housing locator in response to Nevada Statutes, NRS 319.143, which requires NHD to create and maintain a state-wide low-income housing database. The Nevada Housing Division provides a comprehensive on-line locator list of affordable housing options at

<http://nvhousingsearch.org/> or by calling 1-877-428-8844. NHD also offer emergency solutions through grants such as rapid rehousing and homeless prevention, weatherization assistance for child welfare families who have a need in this area, as well as multiple homebuyer programs for child welfare families who qualify. Child welfare agencies continue to collaborate with their Regional Housing Authority to revised and/or create the MOU's for both Family Unification Program (FUP) and the Foster Youth Initiative (FYI). The application process is difficult for young people to navigate without considerable assistance. Once awarded the voucher, young people have a short timeframe for it to be used, which has been a cause for concern given the limited housing resources in some counties. Nevada's IL team attended the Nevada System of Higher Education Foster Youth Success (NSHE) Initiative Retreat held virtually in November 2021. The IL Program Specialist also participates in the Nevada Foster Youth Higher Education Committee Meeting and Nevada Foster Youth Education Data Subcommittee. These meetings are designed to partner with stakeholders, including former foster youth, legal advocates, local child welfare, and ETV providers to identify supportive activities and eliminating financial barriers while increasing the number of youth pursuing higher education. These same stakeholders also participate in ongoing, weekly program development meetings with child welfare.

EDUCATION AND TRAINING VOUCHERS (ETV) PROGRAM (SECTION 477 (I) OF THE ACT)

The Education and Training Vouchers Program (ETV) is administered and managed by two entities, Clark County Social Services (CCSS) & The Children's Cabinet. The role of CCSS is to administer the ETV program for the Clark County jurisdiction. The role of The Children's Cabinet is to administer the ETV program for the remaining regions of the state. Both entities are responsible for making contact with current ETV recipients, managing the eligibility requirements and maintaining compliance with the ETV program. If the youth aged out in another state, but currently reside in Nevada, both CCSS & The Children's Cabinet contact the other state's ETV program to ensure no duplication of funds.

Both CCSS & The Children's Cabinet collaborate with child welfare agencies, the legal community, the higher education institutions located throughout Nevada, and regularly attend all statewide IL meetings, including policy workgroups. In addition, both entities have partnered with the Nevada System of Higher Education (NSHE) Foster Youth Success Initiative with the primary mission to recruit more effectively, support, and retain students who have been dependents of the child welfare system. The collaboration allows Nevada to comprehensively track the long-term educational achievements of foster youth. This initiative has also established direct contacts in financial aid and enrollment officers across Nevada's NSHE institutions. These institutions include:

- University of Nevada, Las Vegas
- University of Nevada, Reno
- Nevada State College
- College of Southern Nevada
- Great Basin College
- Truckee Meadows Community College
- Western Nevada College

The Children's Cabinet presented an overview of the ETV program to the CIP select committee in July 2021 to increase program awareness throughout Nevada's legal community. The state, via its administrators, aims to increase efforts to identify former foster youth adopted after age 16 and guardianship/KinGAP youth that are eligible for ETV funds but are not currently utilizing resources.

With the state having two entities providing the ETV program, a review of the existing ETV application has been completed to ensure a cohesive format statewide. To make the application process more user friendly for young people, Nevada is exploring portal options that would streamline the ETV process. In the next year, a workgroup will be formed with the goal of creating a statewide ETV policy.

As of April 20, 2022 (less than 6 months into the grant award year) almost 50% of ETV funding has been utilized via direct financial assistance to students and payment have been made to vendors and eligible educational institutions on their behalf.

COVID-19 Reengagement Efforts

Both ETV providers participated in P.L. 116, Division X weekly meetings to ensure no duplication efforts for services with Chafee and state funding. Through FFY 2022, a temporary increase in monthly stipend of \$200 to \$500 was put in place for those who may have not otherwise been eligible for ETV due to age and/or exceeding maximum allotment that existed under regular Chafee.

The COVID-19 pandemic has not halted contact efforts, and the ETV program has been active in reaching out to previous recipients, as well as maintaining contact with current recipients to aid in program compliance. Contact methods include, phone calls, text messaging, emails and meeting virtually via Google Meet and Zoom. ETV recipients have continued to receive case management and supports including coaching on spending costs associated with an increase in funding so the youth will better understand how best to utilize their funds for any and/or all unmet needs as well as helping them address other education-related matters that might affect them.

Services provided since 2022 APSR

The IL program is currently using their regular ETV funds to meet youth needs such as housing, transportation, and educational expenses. Nevada aims to increase outreach and information dissemination on ETV availability and resources to both youth and young adults. The ETV program will continue to increase efforts to identify former foster youth adopted after age 16 and guardianship/KinGAP youth that are eligible for ETV funds but are not currently utilizing these resources. Statewide, ETV resources are made available to local school districts, higher education institutions as well as foster parents, guardians, and social workers. We expect for knowledge of the ETV program to be strengthened through our additional outreach efforts.

Division X ETV monthly spending has been active, with youth and young adults receiving assistance with housing, tuition, utilities, and other general needs associated to education. The program is on track to use the remainder of the funds before September 30, 2022.

Total ETV Awards for School Years 2019-2020 & 2020-2021

The total number of Education and Training Vouchers (ETV) awarded from July 1, 2020, through June 30, 2021 was 89 with the number of new students receiving vouchers totaled 34.

The total number of Education and Training Vouchers (ETV) awarded from July 1, 2021, through June 30, 2022 was estimated to be 90 with 83 youth being served as of April 16, 2021. The number of new students receiving vouchers totaled 34.

CHAFEE TRAINING

UNLV has developed a training to educate IL caseworkers and IL supervisors on the foundation for the Independent Living Plan (ILP), and to establish a baseline service standard across all jurisdictions. The training curriculum includes, but is not limited to, Chafee and FAFFY funding, the availability of additional financial assistance streams depending upon the youth's age and eligibility, and the use of general funds to support Normalcy for Foster Youth. The online training has launched in three modules and has been piloted to assist UNLV in enhancing the training package. Due to the COVID-19 pandemic, resources were shifted to prioritize the transition of all training to an online platform to meet PIP requirements and training needs of the general child welfare workforce. As a result, postponement of the IL training and implementation occurred but is now available to both IL caseworkers and supervisors. Positive Youth Development and Motivational Interviewing trainings continue to be available to staff to support engagement.

CONSULTATION WITH TRIBES (SECTION 477(B)(3)(G) OF THE ACT)

Following the approval of the CSFP 2020-2024, Nevada's tribal IL provider elected to return previously awarded Chafee funds to be used for services to tribal youth. As a result of significant staffing changes and COVID, a subaward with a tribal entity was not established. Native American children in tribal custody were not specifically targeted nor served. Of the five-youth identified as Native American who aged out of child welfare custody between July 1, 2021 to March 31, 2022, no Native American foster youth accessed IL services. Over the next year, as part of the work with the Capacity Building Center for States work plan, Nevada will evaluate Chafee programming, engagement, and outreach to develop a plan to ensure fair and equitable treatment to Native American youth. Additionally, ETV will also be addressing outreach and service provision over the next year. As is practice, the IL Specialist will continue to collaborate and coordinate with the tribal liaison to inform tribes of the Chafee program and to facilitate access to Chafee benefits and services through the ICWA meetings.

CONSULTATION AND COLLABORATION WITH TRIBES

The State of Nevada has 27 tribal entities that include federally recognized tribes, bands, and colonies. These entities include Battle Mountain Band Council, Carson Colony Community Council, Dresslerville Community Council, Duck Valley Shoshone-Paiute Tribe, Duckwater Shoshone Tribe, Elko Band Council, Ely Shoshone Tribe, Fallon Paiute Shoshone Tribe, Fort McDermitt Paiute-Shoshone Tribe, The Confederated Tribes of the Goshute Reservation, Las Vegas Paiute Tribe, Lovelock Paiute Tribe, Moapa Band of Paiutes, Pyramid Lake Paiute Tribe, Reno-Sparks Indian Colony, South Fork Band Council, Stewart Community Council, Summit Lake Paiute Tribe, Te-Moak Tribe of Western Shoshone, Timbisha Shoshone Tribe, Walker River Paiute Tribe, Washoe Tribe of Nevada and California, Wells Band Council, Winnemucca Colony Council, Woodfords Community Council, Yerington Paiute Tribe, and the Yomba Shoshone Tribe. To gather input from the Nevada tribes, the DCFS tribal liaison conducts bi-monthly Indian Child Welfare (ICW) Committee meetings. The meetings are open to all tribal entities and tribal stakeholders. The DCFS tribal liaison co-hosts the ICW Meetings in collaboration with the local Bureau of Indian Affairs (BIA) social workers. Discussion items are driven by tribal requests for program information.

Services provided since 2022 APSR

To encourage statewide participation, meeting notifications are done by a listserv which includes the agenda and minutes from the prior meeting. The ICW Committee membership includes representatives from Nevada Tribes, Inter-Tribal Council of Nevada (ITCN), Nevada Indian Commission, CIP, Bureau of Indian Affairs (Eastern and Western Nevada Agencies), State of Nevada Attorney General's Office, WCHSA, CCDFS, Nevada Legal Services, Department of Health and Human Services, Nevada Early Intervention Services, The National Council of Judicial and Family Court Judges, and DCFS. The purpose of the committee is to provide an opportunity for consultation and collaboration between state, tribal and county entities. This collaboration provides a forum for discussion and recommendations between state, tribal and county entities for improving the child welfare system. This forum is where policies, procedure and practice interface or relate to Indian children and families and confer on topics of interest to the tribes. Speakers may be added to the agenda to address ongoing Indian child welfare issues and provide opportunities for trainings and listening sessions between jurisdictions and NV tribes on statewide child welfare issues and updates.

This shift in focus on COVID has impacted attendance at of the ICW virtual meetings. The tribal liaison offered to change the frequency of meetings to accommodate tribal needs and increase participation, however, the majority of tribes declined. ICW meetings were held in 2021 on January 28, March 4, April 1, June 24, August 25, and November 2. In March 2020, Nevada's Governor gave orders for all non-essential state employees to work from home. Although the majority of Nevada's federally recognized tribes were closed to the public due to the pandemic in 2020 / 2021, DCFS tribal liaison was able to assist tribal social workers in learning the virtual TEAMS format in order to participate in ICW meetings virtually.

Last year's ICW meeting topics included:

- Indian Child Welfare (ICW) and Indian Child Welfare Act (ICWA)
- Continuing work by the Division of Child and Family Services (DCFS) on a tribal consultation and MOU processes
- The importance of Tribal Stakeholder Representation
- Resource and referrals
- Commercial Sexual Exploitation of Children (CSEC) and strategies NV is implementing to meet the needs of this population.
- IL tribal youth services and supports
- Title IVE and Title IVB funding opportunities
- Respite services for children with special needs

In addition to the ICW meetings, the DCFS tribal liaison continues to gather input, collaborate, and coordinate with the tribes through individual consultations and other ongoing state and/or tribal meetings. Individual consultation focuses on developing and updating MOU's to ensure culturally appropriate cross-jurisdictional placements and to ensure adherence to ICWA. In addition to the ICW, the DCFS Tribal Liaison participates in tribal consultations through the DHHS, Nevada Indian Commission, and the Inter-Tribal Council of Nevada Executive Board Meetings. Tribal leaders are invited to both meetings to discuss issues within Indian Country. DHHS tribal liaisons are required to give updates within their divisions (e.g., Medicaid, Welfare, Aging and Disability) to support cross-collaboration and information exchange.

Barriers to Coordination / Collaboration

Individual tribal elections take place at different times of the year, so leadership may continuously change. This too impacts the validity of existing MOUs which are subject to change upon new tribal leadership. The DCFS tribal liaison will continue to use virtual platforms to engage tribal leaders regarding MOU development until travel restrictions are eased. Tribal input and feedback are always encouraged and noted as well as sharing of available resources to allow for the provision of constructive feedback between the state agency and the tribes.

The main barrier to collaboration and coordination with Nevada tribes has been the COVID 19 Pandemic resulting in the shut-down of outsiders onto tribal lands. Several Nevada tribes closed access to the reservations due to high COVID numbers and deaths. Many tribes were financially impacted as the general population could not shop at stores (smoke shops, retail, gas stations, restaurants) located within tribal land. Priorities within individual tribes shifted to accessing PPE and medical care while trying to meet the basic housing and nutritional needs of their communities. Other barriers to the coordination include COVID illness and related deaths in tribal members, and continuous turnover and changes in tribal and state staff, tribal leadership, tribal council, and tribal social workers. DCFS tribal liaison requests continuous updates in tribal staff contacts through the Inter-Tribal Council of Nevada (ITCN), local Bureau of Indian Affairs (BIA) agencies, and the Nevada Indian Commission (NIC). NV Tribes are required to notify these tribal agencies whenever there is a change in positions.

Over the next year, the DCFS tribal liaison will continue to collaborate and share with tribes the implementation of the CFSP/APSR in the following ways:

- Meet and consult with other state agency tribal liaisons monthly
- Attend quarterly Tribal Consultation Meetings and give updates on DCFS services per request
- Attend quarterly NV Indian Commission (NIC) meetings to stay updated on tribal community issues across the state
- Attend and participate in NV Indian Education Association meetings to address the importance of early childhood welfare topics and issues amongst the state
- Meet with other state agency tribal liaisons monthly to discuss current needs of NV Tribes
- Participate in a quarterly National ICW Manager's calls with other ICWA specialists in other states where ideas from each state are discussed and shared regarding ICWA
- Attend monthly Tribal Health Director's Meetings at ITCN and give updates regarding DCFS-ICW issues involving the tribes
- Monitor and update the ICWA page on the DCFS website which is made accessible to all NV Tribes via internet
- Provide training opportunities from various sources through the NVICWA listserv and announcements at meetings
- Attend bi-annual Committee to Review Suicide Fatalities
- Attend quarterly CJA meetings
- Continue to participate in case reviews and case consultations
- Assist state and tribal partners in the identification of appropriate actions surrounding ICWA.
- Participate in Casey Family Program's Mechanisms of AIAN Inequality in Child Welfare: A Race Equity Improvement Collaborative Conversation.

ICWA

The NV ICWA Policy 0504 was updated and approved in the Fall of 2020 to include the new federal regulations which provided ICWA definitions. Feedback has been received that the federal definitions have caused further confusion rather than clarity as was intended.

DCFS develops and implements MOUs with NV Tribes for the culturally appropriate placement of children across jurisdictions. The MOUs outline protocols coordinating the placement of foster children into tribal licensed foster homes located on tribal land. The establishment of the MOU between the NV tribes and DCFS allows for greater collaboration between the state, tribe, and counties for better provision of services on and off the tribal communities in NV, and the reduction of trauma to Indian children by placing them within their own culturally appropriate communities. The MOU is created through state and tribal consultations in face-to-face meetings or via phone consultations between the DCFS tribal liaison and tribal social services. A complete draft is then presented to the tribal council before being submitted to the state's Attorney General's Office for review. The MOU gives specifics to who is responsible for providing the child welfare services and protections for tribal children. Tribal and state social workers work together with tribal liaison's assistance to collaborate, gather and share the best resources for tribal children. DCFS ensures that active efforts are adhered to by attempting to keep sibling

groups together; engaging the age-appropriate child, parents, extended family and tribal agencies in case planning and Child and Family Team Meetings; identifying appropriate services and helping parents to obtain such services; monitoring progress and participation services; conducting diligent searches for the child's extended family members; supporting regular visitation with parents, siblings and extended family including providing transportation for such visits; and providing post-reunification services through monitoring.

DCFS continues to provide training to tribal, state, and county workers to ensure active efforts are taken to prevent the breakup of the Indian family when a child may be placed in foster care or for adoption. For new state and county social workers, the mandates of ICWA are included in the mandatory Nevada Academy Training. The Nevada Partnership for Training offers an online ICWA training that is open to all jurisdictions. The hope is to continue and support positive relationships between NV tribes and state and county workers for the benefit of tribal children and families. Additionally, the DCFS tribal liaison coordinated and provided refresher training on ICWA and MOUs upon request.

The "Indian Child Welfare Resource Guide for Nevada" was designed to assist state and county child welfare agencies on the law and tribal contacts within NV Tribes. DCFS tribal liaison continues to update ICW Resource Guide available on the DCFS website. The CFSP and APSR are available for public review and inspection on the DCFS website at dcfs.nv.gov/Tips/Reports/. DCFS tribal liaison will continue to share opportunities with NV Tribes to receive funding to include Title IV-E and Title IV-B opportunities. It is up to individual tribes whether they wish to apply or not for any funding sources. It is up to individual tribes to also participate in the MOU process with DCFS. No tribal entity is currently interested in becoming a IV-E eligible due to infrastructure challenges even after a presentation from the Children's Bureau during an ICW meeting in August 2021

During FY 2022, DCFS monitored compliance with ICWA through case compliance/quality assurance review and training and through individual continuous quality improvement case reviews with the Deputy Attorney General who represents DCFS. Item 9 is the only item on the CQI tool that relates to Indian Child Welfare (ICW) in foster care cases by inquiring about preserving connections for Indian children. The 1 Indian child case reviewed reported "Strengths" in all areas of Item 9. Reports are available for review on the DCFS website and per request Nevada will be working over the next year to improve data collection for Native American children and youth in preparation of upcoming AFCARS changes.

CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA) STATE PLAN REQUIREMENTS AND UPDATE

Nevada submitted a CAPTA State Plan in SFY 2011; it remains in effect.

SUBSTANTIVE CHANGES

There have been no substantive changes to state law or regulations, including laws and regulations relating to the prevention of child abuse and neglect that could affect Nevada's eligibility to the CAPTA state grant.

ELECTED PROGRAM AREAS FY 2021

In accordance with section 106(b)(1)(A) of CAPTA, the state plan must specify which of the following program areas described in section 106(a) it will address with the grant funds to improve the child protective services system of the state. Nevada has elected to address the following program areas:

- Section 106(a)(1) the intake, assessment, screening, and investigation of reports of child abuse and neglect
- Section 106(a)(3) case management, including ongoing case monitoring, and delivery of services and treatment provided to children and their families
- Section 106(a)(4) enhancing the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols, including the use of differential response
- Section 106(a)(5) developing and updating systems of technology that support the program and track reports of child abuse and neglect from intake through final disposition and allow interstate and intrastate information exchange
- Section 106(a)(7) improving the skills, qualifications, and availability of individuals providing services to children and families, and the supervisors of such individuals, through the child protection system, including improvements in the recruitment and retention of caseworkers;
- Section 106(a)(8) developing, facilitating the use of, and implementing research-based strategies and training protocols for individuals mandated to report child abuse and neglect;
- Section 106(a)(11) developing and enhancing the capacity of community-based programs to integrate shared leadership strategies between parents and professionals to prevent and treat child abuse and neglect at the neighborhood level.
- Section 106(a)(13) supporting and enhancing interagency collaboration among public health agencies, agencies in the child protective system and agencies carrying out private community-based programs
 - a. To provide child abuse and neglect prevention and treatment services (including linkages with education systems), and the use of differential response
 - b. To address the health needs, including mental health needs, of children identified as victims of child abuse or neglect, including supporting prompt,

comprehensive health and developmental evaluations for children who are the subject of substantiated child maltreatment reports

DESCRIPTION OF ACTIVITIES, SERVICES, AND TRAINING FUNDED UNDER THE CAPTA STATE GRANT

For the reporting period, CAPTA funds were used to support state's approved CAPTA plan. Funds were used to support CPS programming, including CARA program development activities.

The following policies were under review:

- The Developmental Assessments and Services Policy has been updated and provides clarification for when referrals of children ages 0 – 3 to early intervention services are required and the inclusion of referrals to Child Find for children ages 3 and older who may need developmental services.
- The Internet Web Posting of Child Fatality Public Disclosure Forms Policy was merged with the Public Disclosure Policy and revised to provide updated I guidelines for submission of public disclosures of child fatality and/or near fatality website postings.

Positions funded to support the CAPTA program include:

- A Social Services Program Specialist III who serves as the State Liaison Officer and participated in the planning, coordination, evaluation and development of policy statewide; participated in PIP development activities and who participates in multiple monthly meetings for CARA, held by the Division of Public and Behavioral Health, to make recommendations and support the implementation of CARA Plans of Care and other supporting materials; and
- An Administrative Assistant to respond to Central Registry requests statewide

Nevada currently has three Citizens Review Panels (CRP) who each play an integral role in ensuring that Nevada is meeting its goals of protecting children from abuse and neglect. Nevada's current CRPs include:

- The Executive Committee to Review the Death of Children (CDR);
- The Children's Justice Act Task Force; and
- Clark County Department of Family Services Citizens Advisory Committee

The continuing work of these CRPs and their recommendations to DCFS is included within Nevada's annual CRP report received May 2021 (Attachment G). DCFS has responded to and accepted all recommendations made by the CRPs (Attachment H) as of June 2021.

Child Welfare Agencies began implementing CARA Plan of Care monitoring and services at the community level in January 2021. See the Update on Provisions Relating to Substance-Exposed Newborns and Infant Plans of Safe Care.

UPDATE ON PROVISIONS RELATING TO SUBSTANCE-EXPOSED NEWBORNS AND INFANT PLANS OF SAFE CARE

DCFS continues to be a central participant of the Nevada Perinatal Health Initiative (PHI) a project under the Nevada Department of Health and Human Services (DHHS), Division of Public and Behavioral health (which has been underway since November of 2018). The PHI receives technical assistance from the Association of Health and Territorial Health (ASTHO) and the Association of Maternal and Child Health Programs (AMCHP) through the Promoting Innovation in State and Territorial MCH Policymaking (PRISM) Learning Community, which bring a focus on mental health, equity, and the reduction of stigma.

The PHI Action Plan was utilized to continue the work of the Initiative and has guided efforts over the past year. The PHI Core Team guides the initiative in which DCFS represents Child Welfare. There are several workgroups comprised of various stakeholders who make recommendations to the Core Team which has oversight of the action plan. These stakeholders include child welfare representatives, Division of Health Care Financing and Policy representatives, Division of Public and Behavioral Health representatives, social workers from hospitals, medical professionals, non-profit community, and substance use treatment providers in its current work groups

- CARA Leadership
- Reproductive Health Network
- CARA Plan of Care
- Nevada Perinatal Core Team
- Provider Education and Practice Standards (convened as needed)

- DHHS Task Force (convened as needed) **CARA Plan of Care was used in lieu of Infant Plan of Safe Care to avoid confusion with other documents used in child welfare in Nevada.*

Summary of Major CARA Related Activities

- Included CARA implementation in the Nevada PHI Action Plan which is a statewide strategic approach that incorporates best-practice outreach, identification, engagement, management, and care for Nevada's pregnant and postpartum/parenting women with substance use disorders and their infants with prenatal substance exposure so that health safety, and recovery outcomes for this vulnerable population improve. Activities completed during the reporting period include:
 - Development (ongoing) of an FAQ sheet that distinguishes the differences between the CARA Plan of Care and child welfare services.
 - Training to increase medical provider awareness and use of the Screening, Brief Intervention and Referral to Treatment (SBIRT)
 - The PHI has focused on alignment across state priorities as there are multiple initiatives in Nevada with crossover related to substance use disorders with emphasis on pregnant women and women of childbearing age.
 - CARA Plans of Care education materials and resources and CARA outcome data continue to be a priority for PHI Providers are utilizing the OpenBeds platform to complete CARA Plans of Care. Statewide participation by child welfare agencies in the activities of PHI that are related to CARA.

- A Three-part hybrid (virtual and in-person) prenatal substance exposure learning series available to individuals throughout the state of Nevada. Participation has included child welfare agency staff, healthcare providers, and biological and foster parents. Learning topics included:
 - Best practices for SUD treatment, Medicated Assisted Treatment (MAT) for pregnant women, understanding the CARA Plan of Care, and care coordination for infants and families.
 - Understanding the link between trauma and substance use
 - The impact of in-utero substance exposure on neurodevelopment and how to help children who were substance exposed in utero.
- CCWIS enhancements have been developed and became available for child welfare staff to use as of May 2022 to improve data collection related to substance affected infants.
- Nevada's Child Welfare Agencies are further supporting collaboration efforts of CARA at the State and Community levels. Each jurisdiction is implementing efforts that support their communities and the families they serve such as:
 - Referring families to community service providers when the report to the child welfare agency does not meet criteria for investigation. Service provider examples include Early Head Start, Thrive by Five, and Southern Nevada Health District, who provide home visiting services.
 - Multidisciplinary team meetings to ensure the following:
 - Effective implementation of CARA Plans of Care;
 - Identification of community partners/stakeholders needed to ensure the success for implementation of CARA Plans of Care;
 - Community wide requirement and method of timely reports to the child welfare agency are met;
 - Establishment of effective method of communication/information sharing between all stakeholders/partners;
 - Establishment and documentation of a method for determination of need for and implementation of cross training/staff development to ensure consistency of services;
 - A contract with at least one local agency to provide prevention outreach and services;
 - Ongoing support/technical assistance as requested by community providers;
 - Discussion with community providers about cases with barriers to receiving supportive services or who need additional support
 - Integrating the CARA Plan of Care with families case plans and referring both infants and caregivers to identified services and monitoring service provision.
 - Providing technical assistance and training to healthcare providers at hospitals who complete CARA Plans of Care, including ensuring providers understand the CARA Plan of Care and its purpose, are familiar with identifying necessary services, and are completing referrals.

Lessons Learned

The decision by the Department of Health and Human Services' Director to require CARA Plans of Care to be codified in regulation was pivotal in supporting implementation. This was a recognition that CARA was first and foremost a public health issue that needed to address not only infants identified at birth but also to identify pregnant women with substance use disorders to enhance prenatal services, post-partum services and beyond. Additionally, collaboration with the DBPH and medical and substance use treatment providers has been key to identifying a process that works for providers while at the same time meeting the requirements of CARA.

Marijuana and alcohol prenatal substance exposure continues to be a topic of discussion amongst providers, child welfare agencies, and the PHI Core Team. Data suggests that there has been an increase in reported Marijuana use by birthing persons during pregnancy since Marijuana was legalized in Nevada.

Further education continues to be needed to develop mutual understanding of participants roles, i.e., healthcare providers, child welfare, substance abuse treatment providers. Staff turnover has increased the continued need for education amongst those involved with the CARA Plan of Care process.

Data collection has had challenges and the implementation of OpenBeds for CARA Plans of Care in addition to CCWIS enhancements will improve data collection moving forward. Data will help the state understand the service needs of this population and assist the state in ensuring services are provided to these families. Continued conversations around implementation of CARA Plan of Care and the requirements, barriers or challenges faced by hospitals, and ways to strengthen the referral process and monitoring are necessary for strengthening CARA implementation in Nevada.

PLANS FOR USE OF CAPTA STATE GRANT FUNDING

Nevada is currently in development of a statewide mandated reporter training to ensure standardized training for the various professions that are required to take mandated reporter training and who may make reports of child abuse or neglect to Child Welfare.

To support the development, implementation and monitoring of CARA Plans of Care for substance-exposed infants, Nevada continues to provide CAPTA State Grant Funding to the local child welfare agencies. The funding is used to support collaboration at the State and Community levels by allowing local child welfare agencies to participate in the activities of the PHI related to CARA, to provide additional support to families and infants affected by prenatal substance exposure, including monitoring of CARA Plans of Care, and to provide relevant training and education materials to stakeholders throughout Nevada. Additionally, Nevada is continuing collaborative efforts with DPBH and child welfare agencies to utilize CAPTA State Grant Funding to further support CARA implementation, including monitoring of CARA Plans of Care.

For the additional CAPTA State Grant funding because of the American Rescue Plan, Nevada has begun utilizing funding to further support CSEC efforts. In March 2022, Nevada began a racial equity workgroup committed to pursuing sustainable system

change. As this workgroup identifies ways Nevada can address racial equity and improve outcomes for families, CAPTA ARPA funding will be utilized to further their progress towards goals.

Nevada is also exploring the use of CAPTA and/or CAPTA ARPA funds to support implementation efforts for the Families First Prevention Services Act and primary prevention services.

STATE LIAISON OFFICER:

Beverly Brown
Social Services Chief II
Nevada Division of Child and Family Services
4126 Technology Way
Carson City, NV 8970

UPDATES TO TARGETED PLAN WITHIN THE 2020-2024 CFSP

FOSTER AND ADOPTIVE PARENT DILIGENT RECRUITMENT PLAN

Nevada's Diligent Recruitment Plan outlines statewide efforts to reach out to all parts of the community for recruitment of foster and adoptive families. Each Child Welfare Agency in Nevada utilizes specific strategies to meet the needs of their communities. Strategies include:

- Outreach to churches in targeted communities through programs such as Every Church, Every Child, where printed materials are provided to churches and information is provided about varying levels of participation from the community, including, information sessions, donation collection, providing areas to post materials, hosting trainings, and allowing for support groups for foster and adoptive families.
- Providing information at local events, to public employers, through media and social media outlets, and public service announcements.
- Targeted recruitment strategies in communities with higher removal rates and areas with higher rates of families of certain race/ethnicity that are overrepresented in the child welfare system.
- Coordination and collaboration with various local agencies, including but not limited to the University of Nevada, Reno Wolfpack, the Reno Aces, area schools and preschools, local businesses, Parent Teacher Associations, the Discovery Museum and the Society for the Prevention of Cruelty to Animals (SPCA).
- Utilize marketing to produce billboard, newspaper, and radio ads.

Additionally, Nevada believes that supporting and retaining foster caregivers leads to better outcomes for Nevada children. The state's child welfare agencies employ various strategies aimed at providing support to foster caregivers, one of which is QPI Nevada and all the resources provided within that movement. These resources include training, information, comfort calls for children and birth families at removal, implementation of the Ice Breaker process between foster families and birth families. Each jurisdiction provides their own Caregiver Courier newsletter which provides information to caregivers on topics such as caregiving, community events, activities, and other types of meetings. The Caregiver Couriers have been revamped and now solicit participation from caregivers to include spotlights of caregivers, to encourage participation in the Local QPI meetings, and caregivers identifying features and topics they want for upcoming Caregiver Couriers. QPI Nevada strives to provide messaging and create a culture in which the foster parents are an integral part of the child welfare team. To support and retain current foster parents the statewide QPI committee had created policies/processes for child transitions, ice breakers, QPI bench cards, and created infographics for local resources. Further details can be found in Attachment A Nevada Foster and Adoptive Parent Diligent Recruitment Plan.

Nevada has determined both the Foster and Adoptive Parent Diligent Recruitment Plan and Adoption Call to Action Plan may need to be updated to be more data driven. Nevada has engaged with the Capacity Building Center for Technical Assistance to do this work, which has taken place over the past year. A statewide workgroup began in January 2021,

which includes members of the Adoption Call to Action Team and met monthly to review the statewide Diligent Recruitment plan and to make efforts to identify areas of concern and produce a statewide standard for foster care licensing and recruitment. This update also allows Nevada to identify strategies that will assist with retaining foster parents. The workgroup focused on statewide documentation and improving the data quality within the CCWIS. Additionally, the workgroup identified strategies to improve recruitment and support for relative placements. Once identified recommendations will be made to update the statewide Diligent Recruitment plan.

Nevada recognizes the need to increase the racial and ethnic diversity of adoptive homes, and to meet the needs of children who are older, have experienced disrupted adoptions, have special needs, and are part of sibling groups. As a result, the ACTA Team have been working monthly with Raise the Future to improve the recruitment activities and data collection for children identified as needing additional recruitment support.

Recruitment and retention will continue to be standard topics of discussion along with changing and/or differing demographics and how to work more collaboratively statewide in our recruitment efforts.

HEALTH CARE OVERSIGHT AND COORDINATION PLAN

Statewide, the child welfare agencies partnered with their local health districts in response to COVID. Strategies to provide direct services differed based upon COVID positivity rates. As observed during PIP onsite case reviews, the delivery of preventative dental and medical care was impacted and was difficult to access as many medical providers were overwhelmed with emergency services and would not provide routine preventative care.

Consistent with national trends, mental health treatment shifted to telehealth platforms, however, there were not enough providers, even for the general population, to meet community needs. Nevada lacks a sufficient service array to meet the needs for intensive emotional and behavioral issues. As the national pandemic progressed, the state was able to leverage existing funding sources to expand existing community services to improve its service array. Some of the expansion of existing community services included expanding coverage areas by incorporating telehealth platforms, certifying new clinicians in telehealth, expanding access to psychiatric services/assessments, as well as expanding access to early childhood clinical interventions.

Child welfare agencies' clinical teams provided a variety of assessments and services using robust telehealth clinical option for children and families to ensure there was continuity of care. These clinical teams met last year's increased need for mental and behavioral health needs by providing clinical consultation, behavioral consultation, therapeutic referrals, direct crisis intervention, supportive therapeutic services, and referrals for higher levels of care.

As outlined in the Disaster Plan, Nevada:

- Expanded telehealth delivery utilizing various platforms to deliver treatment services with the following exceptions: Psychosocial Rehabilitation (PSR), Basic Skills Training (BST), group therapy, occupational therapy and physical therapy and medical services which required direct contact.
- Expanded and shifted Mobile Crisis to telehealth services in most circumstances, or face-to-face abiding by CDC guidance and utilization of PPE.
- Residential Mental Health Services instituted teletherapy was instituted.
- Upon review of PIP monitored case reviews over the past year, it is apparent that a CQI process must be implemented at the statewide level to ensure children have access to preventative care. and ensuring foster parents and kinship placements receive the copies of health records. While Nevada has declined in this item rating during COVID, the numbers

Many resource families were unwilling to have these children in their homes because of the increased risk of infection to themselves or other members of the household. As a result, and to prevent the spread, a foster family was developed, and continues to be in operation, to provide care for children that are presumptively positive or test positive. NAC 424.555 requires "All children residing in the foster home must be currently immunized against diseases according to the recommendations set forth by the Centers for Disease Control and Prevention of the United States Department of Health and Human Services." As a result, Nevada is attempting to immunize all foster children over the age of 12. Parental consent is being sought, however, if parents decline, the matter is being brought before the courts for review unless the child's pediatrician recommends against the vaccination.

Nevada has strong statutory requirements for all youth receiving psychotropic medications; the court of jurisdiction appoints a Person Legally Responsible for the oversight and management of psychotropics. Nevada Statutes encourages the Person Legally Responsible to be the parent. If the parent is not able or willing, the court may appoint the caregiver, court appointed attorney, guardian ad litem, substitute care giver or the child welfare agency. Over the past year, 42 cases were reviewed for PIP monitoring, of those, only four cases were applicable to psychotropic medication oversight. Those four cases did not identify any concerns with medication management. Nevada does not have a statewide approach to monitoring the impact of the PLR programs. Over the next year, this CQI process will need to be developed including the consistent tracking of data.

In review of Item 17 data for SFY21, Nevada must focus on improving health care services. While preventative services declined during the COVID-19 pandemic, this was an area needing improvement prior to COVID-19. There is a recognition that when placement changes are made, preventative services are not consistently provided to children and information is not shared with the new placement resource. The current statewide report used to monitor EPSDT screening at a child level cannot be used due to the inconsistent use of data elements. To address these problems, the state plans to do the following:

- Finalize the new statewide transition policy to provide guidance on information sharing and activities that must occur to support children and families when placement changes are made.
- CQI processes will be developed over the next year to monitor the impact of the new transition policy requirements.
- The CQI team will address the inconsistent data elements and data definitions in the new action plan developed by PIP Team 4 to improve the usefulness and quality of the health reports.

DISASTER PLAN

While there were no additional natural disasters that affected state operations, the global pandemic continued to impact levels of services throughout the entire state. The Disaster Plan submitted with the 2024-2025 CFSP was updated to address any new circumstances as the pandemic continued to evolve. The Disaster Plan was being utilized by the regions to address the statewide operations and responses but was fluid in nature as Nevada had never faced the circumstances that are created by a pandemic on a global scale. Based on the evolving effects related to transmission rates and a drive to supply the public with vaccinations as they came available any identified deficiencies in the plan were addressed accordingly.

Overall, the Disaster Plan continues to be utilized as a reference to ensure that statewide operations remain in place and continue to function on a level that provides for the continuation of needed services to the children and families that are served as well as maintaining the safest interactions for all parties involved. The Disaster Plan was a resource for all jurisdictional regions throughout the state as the crisis was being dealt with daily.

The primary changes and additions to the plan concerned the status of operations between the agencies and the direct interactions with the clients that are served. As infection rates dropped and vaccinations became more readily available the agencies increased face-to-face contact and direct services while maintaining the safety and social distancing. There were also additions related to federal disaster relief funding that was made available pertaining to the CARES Act as well as P.L. 116, DIVISION X-20 to continue to provide needed services pertaining to children who would otherwise be ageing out of foster care. For more information on the use of P.L. 116, DIVISION X funds, refer to The John H. Chafee Foster Care Program for Successful Transition To Adulthood and ETV sections of this document.

The State of Nevada has distributed the CARES funding throughout the state to respond to the COVID-19 pandemic by ensuring that vital child welfare services continue to be provided in a safe manner in conjunction with continuing to prevent removals, maintain safe placements and continue to reunify youth with their parents.

Services CARES Act funds have been utilized in the following capacity:

- Provide financial emergency assistance to families who have been adversely affected by the pandemic. This includes assistance to provide for the youth in their care and/or stabilize the family unit. Emergency Assistance may include such

items as rent, utilities, groceries, baby food, baby formula, diapers, daycare, bus passes, emergency respite, clothing, furniture, safety items including car seats, etc.; or any small immediate need to the family as a direct result of COVID-19 that serves to maintain the safety and stability of the youth in the Child Welfare System.

- Provide items of operation for the immediate and continuous safety measures necessary to prevent the spread of COVID-19. Such items may include, but are not limited to, PPE, sanitization services, contracted medical/nursing services, small items of medical need, and items to promote social distancing such as small IT peripherals and small activities/activity items.
- Provide Home based crisis intervention, home management skills, employment, and training activities

At the time of this formal submission the state continues to evolve its process to eventually return to full, normal operations at some point in the future.

See attachment C

TRAINING PLAN

The Training Plan, Attachment D to this document, was updated to include any changes to training activities paid for with title IV-E funds. The plan also includes any training activities planned for the upcoming year to be paid for with title IV-E funds. Additionally, the plan includes new trainings developed over the past year, along with details for each of these trainings. The new trainings developed through the PIP this past year include Trauma Informed Communication (Key Activities 2.1.3, 2.1.4) and Juvenile Dependency Mediation Program (JDMP) (Key Activity 3.1.3).

The Training Plan has been updated to include any impacts the state experienced through the national health emergency of COVID-19, which was mostly seen in how trainings were delivered. Also, the plan includes any modifications to existing training and the increased utilization of the state's Learning Management System (LMS). Progress on the implementation and evaluation of CoachNV is also included in the attachment.

STATISTICAL AND SUPPORTING INFORMATION

CAPTA ANNUAL STATE DATA REPORT ITEMS

Information on Child Protective Service Workforce

In 2018, UNLV and UNR launched the statewide child welfare learning management system, NPTLearn. Prior to that time, a rudimentary LMS was used primarily as a training registration system. NPTLearn is funded and managed by UNR and UNLV as part of their Title IV-E training contracts with the State of Nevada. This system, while replacing the former training registration system, is serving as a fully functional child welfare workforce development platform. NPTLearn is currently used to:

- Host personal profile for each member of the child welfare workforce including but not limited to:
 - agency/location
 - demographic data
 - position and changes
 - supervisor and changes
 - start date/end date
 - contact info
 - languages
 - training record (including external trainings)
- Support personal training dashboard
- Support supervisor/manager training dashboard
- Host training registration including:
 - Ability to enroll in currently available class
 - Ability to identify course and receive notification when available
- Host synchronous on-line trainings
- Host asynchronous on-line trainings
- Generate Pre-Tests, Post-Tests, and Evaluation Surveys
- Maintain a training record for the child welfare workforce
- Generate CEU/Certificates of Completion on demand
- Generate reports of all of the above elements
- Use on desktops, laptops, tablets, and phones

With NPTLearn being in use for almost four years now, Nevada is starting to use the peer/social networking and analytic capabilities of the system to bolster professional development beyond single training events and support transfer of learning outside of the classroom (more information on this is provided in the CoachNV section). Additionally, compliance reports have been created for all required PIP training in which the system automatically emails the jurisdictions on a regular basis to aid in monitoring training attendance.

A procedure has been established to ensure personal profile information of each member of the child welfare workforce is updated annually to aide in generation of accurate and current child welfare workforce demographic data reports.

Northern Region: Washoe County Human Services Agency

Information on the education, qualifications, and training requirements established by the state for child protective service professionals, including requirements for entry and advancement in the profession, including advancement to supervisory positions.

All caseworker positions require a Bachelor or Master of Social Work or related degree. To advance to a caseworker supervisor, the person must also have four years of full-time experience performing professional case management in a human services field. A master's degree from an accredited college or university in social work, sociology, psychology, criminal justice, or a closely related field may substitute for one year of experience.

Data on the education, qualifications, and training of such personnel.

Of the 52 child protective services personnel who entered data in the LMS, 60% held a bachelor's degree and 17% held a master's degree (4% indicated other and 19% did not provide their education). Of these, 37% were social work degrees while the remaining percentage held related degrees or declined to answer. Caseworkers are required to complete Academy and additional foundational training, as outlined in the statewide Training Policy, within the first year of employment. Supervisors are also required to complete the supervisor curriculum offered through the Nevada Partnership for Training within one year of entering a supervisory position. All caseworker and supervisory staff are required to complete 30 continuing education units every two years. Suicide Prevention, CSEC, Bridges Out of Poverty, Ethics, and Mandatory Reporting are required courses with staff having the ability to select other training that is relevant to their professional development.

Demographic information of the child protective service personnel

53 child protective services personnel completed data in the LMS. Of those 77% are female, 4% male and 19% declined self-identification. 57% percent are Caucasian, 11% are Hispanic/Latino, 2% African American, 4% Mixed/Dual Background, and 27% declined to answer/did not provide the information. The workforce age demographics identify 25% are 20-30, 28% are 31-40, 19% are 41-50, and 4% are 51-60 and 25% did not provide the information.

Information on caseload or workload requirements for such personnel, including requirements for average number and maximum number of cases per child protective service worker and Supervisor (section 106(d)(10) of CAPTA).

WCHSA provides for a reduced caseload for caseworker trainees while they are in the training unit. Once the case worker trainee has completed pre-service training, the caseload is increased based on workers skills and ability to manage the caseload. The agency does not have a maximum caseload size. WCHSA has implemented a caseload weighting tool for assessment staff that allows for targeted assignment based on the complexity of the case and the staff person's experience level and the weight complexity

of their current workload. This helps ensure a more equitable distribution of cases throughout the units.

Rural Region: Division of Child and Family Services

Information on the education, qualifications, and training requirements established by the state for child protective service professionals, including requirements for entry and advancement in the profession, including advancement to supervisory positions.

There are two classifications of CPS caseworkers: a licensed social worker or a Casework Management Specialist. The Casework Management Specialist (CMS) positions that carry out CPS duties must have a bachelor's degree from an accredited college or university in early childhood education, special education, human growth and development, criminal justice, psychology, counseling, social work or closely related social/human services-related field.

Licensure as a Social Worker, Clinical Social Worker, Independent Social Worker or Associate in Social Work by the State of Nevada Board of Examiners for Social Workers is required to apply for and maintain employment as a case carrying social worker; licensure must be current at the time of appointment and as a condition of employment with DCFS. The Casework Management Specialist (CMS) positions that carry out these duties must have a bachelor's degree from an accredited college or university in early childhood education, special education, human growth and development, criminal justice, psychology, counseling, social work or closely related social/human services-related field. Requirements of employment are the ability to work on call evenings and weekends as required, a valid driver's license at appointment and ongoing, a pre-employment CANS check, criminal history check and fingerprinting are also required. All Social Worker and CMS staff must complete at least 30 continuing education hours every 2 years, of which, 2 hours must relate to ethics in the practice of social work and completion of at least two (2) hours of instruction on evidence-based suicide prevention and awareness every two (2) years from date of hire.

Training begins for case carrying staff and supervisors with the Nevada Partnership for Training (NPT) New Worker Academy Training curriculum; a 10-week course that consists of five weeks of in-class instruction, complete with pre-reading assignments and homework with alternating weeks (5) of on-the-job training. Other required training for staff is as follows, year one: case-carrying child welfare staff and the direct supervisors of case carrying child welfare staff should complete the following courses in addition to Academy in the first year upon hire: LGBTQ and Cultural Competency/Working Effectively with LGTBQ+ Identified Youth; Commercial Sexual Exploitation of Children (CSEC) and the Vulnerability of Youth in Child Welfare; Indian Child Welfare Act (ICWA); a foundational overview of substance use disorders and child welfare practice, childhood trauma and child welfare practice, mental health conditions and child welfare practice, father engagement and child welfare practice, and domestic violence and child welfare practice; year two courses required/provided by NPT include: annual LGBTQ course; annual CSEC course; Worker well-being; Child sexual development; Substance use disorder; Mental health conditions.

Other required trainings provided by DCFS include but not limited to: Mandatory Reporting; Child Abuse Prevention and Treatment Act, 4th, and 14th Amendments; Integrative Case Planning: Developing and Writing Case Plans. Caseworker Contact: Case Note Training for Quality Visits; Persons Legally Responsible: Medical Care and Psychotropic Medication; additionally, training around the Practice model is required: Intake Assessment, Nevada Initial Assessment (NIA), and Conditions for Return, PCFA, and PCPA. In addition, all supervisors are required to complete several distinctly different trainings; Consultative Supervision, Nevada Supervisor Training and implementing this year the coaching model Building Coaching Competency. Requirements for staff to advance to Social Work Supervisor positions include; Licensure or provisional licensure as a Social Worker, Clinical Social Worker, Independent Social Worker or Associate in Social Work and one year of advanced journey level professional experience providing case management in a social work setting equivalent to a Social Worker III in Nevada State service. Requirements for staff to advance to Casework Management Specialist Supervisor require a Bachelor's degree from an accredited college or university in early childhood education, special education, human growth and development, criminal justice, psychology, counseling, social work or closely related social/human services-related field and four years of professional experience providing case management services specific to children in a health and/or human services setting, one year of which included supervising staff who provide case management services to children in a health and/or human services setting; or one year of experience as a Casework Management Specialist IV in Nevada State service; or an equivalent combination of education and experience above the Bachelor's degree level.

Data on the education, qualifications, and training of such personnel.

Of the 28 child protective services personnel who entered data in the LMS, 54% held a bachelor's degree and 18% held a master's degree and 29% did not provide their education). Of these, 61% were social work degrees while the remaining percentage held related degrees or declined to answer. Trainings of staff begins with Nevada Partnership New Worker Academy Training curriculum and trainings detailed above.

Demographic information of the child protective service personnel.

28 child protective services personnel completed data in the LMS. Of those 54% are female, 11% are male and 36% declined self-identification. 29% are Caucasian, 14% are Hispanic/Latino, 4% African American, 4% Mixed/Dual Background, 4% American Indian/Alaskan Native, and 46%declined to answer/did not provide the information. The workforce age demographics identify 7% are 20-30, 25% are 31-40, 4% are 41-50, and 14% are 51-60 and 50% did not provide the information.

Information on caseload or workload requirements for such personnel, including requirements for average number and maximum number of cases per child protective service worker and supervisor (section 106(d)(10) of CAPTA).

Supervisors do not normally carry a caseload, although currently several do. With vacancies in many offices some supervisors and managers carry a caseload in addition to all their other supervisory requirements and requirements for overseeing child welfare

services for the office, until new staff can be hired and trained. There are no caps on caseloads for DCFS. The average number of new CPS cases per month is 6-8, which means a supervisor is responsible for 48 new cases and upwards of 60-70 cases that are in the assessment phase but have not yet concluded. Although caseworkers may have a specific area of concentration, they are generalists and as such perform all necessary child welfare functions such as Emergency On-Call Response, CPS assessments (formerly referred to as investigations) and Substitute Care.

Southern Region: Clark County Department of Family Services

Information on the education, qualifications, and training requirements established by the state for child protective service professionals, including requirements for entry and advancement in the profession, including advancement to supervisory positions.

In Clark County, Family Service Specialist (FSS) provide child welfare services. The education requirements for FSS positions are a bachelor's degree in Social Work, Child Development, Psychology, Special Education, Behavioral Science, Counseling, Early Childhood Education, Health Science, Human Services, Education, Nursing, Criminal Justice, Social services, Sociology, Public Administration, Business Administration, Communications, Marketing or Social Science.

Upon hiring FSS they are required to attend the Nevada Child Welfare Training Academy before they are assigned to any families. All promotional opportunities to become a Senior Family Service Specialist or a Supervisor are internal departmental promotional opportunities. All Family Service Specialist follow the statewide training policy for initial and ongoing training.

Data on the education, qualifications, and training of such personnel.

Of the 228 child protective services personnel who entered data in the LMS, 39% held a bachelor's degree, 23% held a master's degree, 34% did not provide the information, and 3% selected "other" degree. Of these, 7% held social work degrees, while the remaining percentage held related degrees or declined to answer. Caseworkers are required to complete Academy and additional foundational training, as outlined in the statewide Training Policy, within the first year of employment. Supervisors are also required to complete the supervisor curriculum offered through the Nevada Partnership for Training within one year of entering a supervisory position. All caseworker and supervisory staff are required to complete 30 continuing education units every two years. Nevada Partnership for Training within one year of entering a supervisory position. All caseworker and supervisory staff are required to complete 30 continuing education units every two years. Suicide Prevention, CSEC, Bridges Out of Poverty, Ethics, and Mandatory Reporting are required courses with staff having the ability to select other training that is relevant to their professional development.

Demographic information of the child protective service personnel.

228 child protective services personnel who entered data in the LMS, of those 67% are female, 8% male, 1% are non-binary; at 24% declined self-identification 26% are

Caucasian, 15% are Hispanic/Latino, 25% African American, 2% Mixed/Dual Background, 23% did not answer and 4% declined to answer. The workforce age demographics identify 9% are 20-30, 27% are 31-40, 20% are 41-50, 8% are age 51-60, 1 person is 61 or older (0%) and 35% did not provide an age.

Information on caseload or workload requirements for such personnel, including requirements for average number and the maximum number of cases per child protective service worker and Supervisor (section 106(d)(10) of CAPTA).

The average caseload for Family Service Specialist conducting child abuse and neglect assessments in 2021 was approximately 13 families per worker monthly. Based on vacancies and leave due to Covid and/or FMLA definitely presented challenges to determining an accurate average as there were times when caseloads were as high as 20 families per worker per month. In Clark County we review caseloads on a quarterly basis and make adjustments to zip code distributions to our geographical zones in order to ensure that caseloads are balanced across all geographical zones.

Juvenile Justice Transfers

The table below includes the number of children that were transferred to state juvenile custody (committed to a juvenile correctional facility or youth parole) from child welfare (receiving services or in protective custody). These youths were known to the child welfare system prior to entering the juvenile justice system and these numbers are collected monthly via UNITY.

Table 50: Juvenile Justice Transfers SFY 2022 YTD (7/1/2021 through 5/4/2022)

Age	Male	Female	Total # Committed
16	1	1	2
18	0	1	1
Total	1	2	3

Source UNITY Report CFS748*

Youth may be under reported on this report (CFS748) since state-level juvenile justice implemented a new database, Tyler Supervision in SFY2019. Also, there were no transfers listed from Washoe or Rural Counties; all transfers were from Clark County.

INTER-COUNTRY ADOPTIONS

There are no documented instances where a child adopted from another country had a disrupted or dissolved adoption in 2021. Nevada's ACTA team recognized the lack of guidance provided to staff in relation to inter-country disruptions. This lack of guidance impacted the ability to collect data. As a result, the ACTA team drafted a new 0105 Adoption Inter-Country Disruption-Dissolution Policy which was finalized March 2022.

MONTHLY CASEWORKER VISIT DATA

Refer to Update to Service Description Section: [Monthly Caseworker Visit Formula Grants](#) and Standards for Caseworker Visits

FINANCIAL INFORMATION

CFS-101 Parts I, II and III.

The following outlines why Nevada had unspent funding in supplemental Title IV-B, Subpart 1 through the Coronavirus Aid, Relief, and Economic Security (CARES) Act.

Nevada was unable to fully expend the CARES funding to awarded agencies. The funding was distributed to the three (3) child welfare agencies and could not be re-distributed before the performance period ended. Clark County Department of Family Services (CCDFS) reported challenges in getting the funding out into the community. CCDFS reported lower than anticipated requested for COVID related financial assistance.

ACRONYMS

AAP	American Academy of Pediatrics
AB	Assembly Bill
ACTA	Adoption Call to Action
ACCWIC	Atlantic Coast Child Welfare Implementation Center
ACF	Administration for Children and Families
ACYF	Administration on Children, Youth and Families
ADA	American Disabilities Act
ADG	Assistant Director Group
ADSD	Aging and Disability Services Division
AFCARS	Adoption Foster Care Analysis and Reporting System
AI	Adoption Incentive
ANI	Area Needing Improvement
AOC	Administrative Office of the Court
APD	Advanced Planning Document
APSR	Annual Progress & Service Report
ASFA	Adoption and Safe Families Act
ASQ	Ages and Stages Questionnaire
ASTHO	Association of Health and Territorial Health
BDR	Bill Draft Request
BIA	Bureau of Indian Affairs
CAC	Child Advocacy Center
CAHS	Consolidated Agencies of Human Services
CANS	Child Abuse and Neglect Screening
CAPTA	Child Abuse Prevention and Treatment Act

CARA	Comprehensive Addictions and Recovery Act
CASA	Court Appointed Special Advocate
CB	Children's Bureau
CBCS	Capacity Building Center for States
CBCAP	Community Based Child Abuse Prevention
CCDFS	Clark County Department of Family Services
CCL	Child Care Licensing
CCSD	Clark County School District
CCSS	Clark County Social Services
CCWIS	Comprehensive Child Welfare Information System
CDC	Centers for Disease Control
CDR	Child Death Review
CFR	Code of Federal Regulations
CFSP	Child and Family Service Plan
CFSR	Child and Family Services Review
CIC	Court Improvement Council
CIC	Community Improvement Council
CIP	Court Improvement Project
CJA	Children's Justice Act
CMS	Case Management Specialist
COVID-19	Coronavirus Disease 2019
CPR	Cardiopulmonary Resuscitation
CPS	Child Protective Services
CQI	Continuous Quality Improvement
CSEC	Commercially Sexually Exploitation of Children
DA	District Attorney

DAG	District Attorney General
DCFS	Division of Child and Family Services
DCFS RR	Division of Child and Family Services Rural Region
DEI	Diversity Equity and Inclusion
DHCFP	Department of Health Care Financing and Policy
DHHS	Department of Health and Human Services
DHR	Department of Human Resources
DMG	Decision Making Group
DPBH	Department of Public and Behavioral Health
DR	Differential Response
DVRC	Domestic Violence Resource Center
DWSS	Department of Welfare and Supportive Services
EFC	Extended Foster Care
EPSDTS	Early and Periodic Screening, Diagnostic and Treatment
ETV	Educational Training Voucher
FAFFY	Financial Assistance to Former Foster Youth
FASD	Fetal Alcohol Syndrome Disorder
FFPSA	Families First Prevention Services Act
FFY	Federal Fiscal Year
FIMR	Fetal and Infant Mortality Review
FPO	Family Programs Office
FRC	Family Resource Center
FY	Fiscal Year
GMU	Grants Management Unit
HHS	Health and Human Services
HR	Human Resources

HUD	Department of Housing and Urban Development
ICPC	Interstate Compact on the Placement of Children
ICTN	Inter-Tribal County of Nevada
ICWA	Indian Child Welfare Act
IDEA	Individuals with Disabilities Education Act
IEP	Individualized Education Plan
IL	Independent Living
ILA	Independent Living Agreement
ILP	Independent Living Program
ILPS	Independent Living Program Specialist
ILSSPS	Independent Living Social Services Program Specialist
IM	Instructional Memorandum
IS	Information Services
IT	Information Technology
ITCN	Inter-Tribal Council of Nevada
IV-B/2	Title IV-B, Subpart 2
IV-E	Title IV-E
JD	Judicial District
JDMP	Juvenile Dependency Mediation Program
JOIN	Job Opportunities In Nevada
JVTA	Juvenile Victims of Trafficking Act
KinGAP	Kinship Guardian Assistance Program
LACSN	Legal Aid of Southern Nevada
LGTBQ	Lesbian, Gay, Bisexual, Transgender and Questioning
LMS	Learning Management System
LSW	Licensed Social Worker

MI	Motivational Interviewing
MOU	Memorandum of Understanding
NAC	Nevada Administrative Code
NCANDS	National Child Abuse and Neglect Data System
NCID	National Criminal Investigative Database
NCJFCJ	National Council of Juvenile and Family Court Judges
NEICE	National Electronic Interstate Compact Enterprise
NHD	Nevada Housing Division
NIA	Nevada Initial Assessment
NIC	Nevada Indian Commission
NITC	Nevada Inter-Tribal Council
NOFO	Notice of Funding Opportunity
NOTO	Nevada Outreach and Training Organization
NPT	Nevada Partnership for Training
NRIT	Nevada Rapid Indicator Tool
NRS	Nevada Revised Statutes
NV LIFE	Nevada Life Nevada's Youth Advisory Board Leaders in Future Excellence
NYTD	National Youth in Transition Database
OMNI	Neonatal Abstinence Syndrome Initiative
OMS	Online Monitoring System
OPPLA	Other Planned Permanent Living Arrangement
OSR	Onsite Review
PIP	Program Improvement Plan
PPE	Personal Protective Equipment
PYD	Positive Youth Development
PSSF	Promoting Safe and Stable Families

QA	Quality Assurance
QICR	Quality Improvement Case Review
QPI	Quality Parenting Initiative
QRTP	Qualified Residential Treatment Providers
RR	Rural Region
RRT	Recruitment Response Team
RSP	Risk Standardized Performance
SACWIS	Statewide Automated Child Welfare Information System
SAFE	Safety Assessment and Family Evaluation
SAMHSA	Substance Abuse Mental Health Services Administration
SAPTA	Substance Abuse Prevention and Treatment Act
SB	Senate Bill
SCP	Social Change Partners, LLC
SFC	Specialized Foster Care
SFY	State Fiscal Year
SQIC	Statewide Quality Improvement Committee
SSI	Supplemental Security Income
TA	Technical Assistance
TMT	Training Management Team
TPR	Termination of Parental Rights
U of MI	University of Michigan
UNITY	Unified Nevada Information Technology for Youth
UNLV	University of Nevada, Las Vegas
UNR	University of Nevada, Reno
VOCA	Victims of Crime Assistance
WCHSA	Washoe County Human Services Agency

WHO	World Health Organization
WIT	Workforce Innovation Team
WWK	Wendy's Wonderful Kids
YAB	Youth Advisory Board
YL	Young Leader
YTD	Year to Date
YYA	Youth and Young Adults

ATTACHMENTS

Attachment A Foster and Adoptive Parent Diligent Recruitment Plan
Attachment B Health Care Oversight and Coordination Plan
Attachment C Disaster Plan
Attachment D Training Plan
Attachment E Adoption Savings Methodology
Attachment F Education Training Vouchers
Attachment G Citizen's Review Panel Report
Attachment H DCFS' Response to the CRP
Attachment I CQI Self-Assessment
Attachment J CQI Action Plan
Attachment K NV IV-E Plan FFPSA Amendment PIP
Attachment L NV FY2023 CFS-101, Part I, II, III, and Grants for Title IV-B