

STATE OF NEVADA  
Department of Human Resources  
Division of Child and Family Services



ANNUAL PROGRESS  
&  
SERVICE REPORT  
FIVE-YEAR CHILD AND FAMILY SERVICES STATEWIDE PLAN (CFSP)  
FOR  
SFY 2007

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## Glossary of Acronyms

AFCARS	Adoption Foster Care Analysis and Reporting System
APHS	American Public Human Services Association
APSR	Annual Progress & Service Report
ASFA	Adoption and Safe Families Act
ATC	Adolescent Treatment Center
BADA	Bureau of Alcohol and Drug Abuse
CADRE	Citizen's Alliance for Disability Rights and Education
CAPTA	Child Abuse Prevention and Treatment Act
CASA	Court Appointed Special Advocate
CCDFS	Clark County Department of Family Services
CFCIP	Chafee Foster Care Independence Program
CFSP	Child and Family Service Plan
CFSR	Child and Family Services Review
CIP	Court Improvement Project
CMHBG	Community Mental Health Block Grant
CMHS	Community Mental Health Services
CPS	Child Protective Services
CRP	Citizen Review Panel
CRT	Community Resource Teams
CWAF	Child Welfare Action Form
CWS	Child Welfare System
DCFS	Division of Child and Family Services
DHR	Department of Human Resources
DMG	Decision Making Group
DOE	Department of Education
DRS	Differential Response System
DWTC	Desert Willow Treatment Center
ETV	Educational Training Voucher Grant Program
FASS	Family Assessment and Services System
FCAAN	Foster Care and Adoption Association of Nevada
FLH	Family Learning Homes
FPO	Family Programs Office
FRC	Family Resource Center
HCFA	Health Care Finance and Planning
HSSS	Human Services Support Specialist
ICAMA	Interstate Compact on Adoption and Medical Assistance
ICJ	Interstate Compact for Juveniles
ICPC	Interstate Compact on the Placement of Children
ICWA	Indian Child Welfare Act
IFS	Intensive Family Services
ILP	Independent Living Plan
IMS	Information Management System
KIN	Kinship in Nevada Project
MDT	Multi-Disciplinary Team
MEPA/IPA	Multi-Ethnic Placement Act/Inter-Ethnic Placement Act
MHDS	Mental Health and Developmental Services
NAC	Nevada Administrative Code
NCANDS	National Child Abuse and Neglect Data System
NCANS	Nevada Child Abuse and Neglect System
NCC	Neighborhood Care Center
NVCC	Nevada Children's Center
NCCMT	Neighborhood Care Center Management Team
NCFAS	North Carolina Family Assessment Survey
NITC	Nevada Inter-Tribal Council
NNCAS	Northern Nevada Child and Adolescent Services
NRC	National Resource Center
NRS	Nevada Revised Statutes
NWD	Nevada Welfare Division
NTP	Nevada Training Partnership

NYTD	National Youth in Transition Database
OJJDP	Office of Juvenile Justice and Delinquency Prevention
PART	Policy Approval and Review Team
PEP	Parents Encouraging Parents
PRIDE	Parent Resources for Information Development and Education
QA	Quality Assurance
SACWIS	Statewide Automated Child Welfare Information System
SAFE	Structured Analysis Family Evaluation
SAFF	Sierra Association of Foster Families
SAMHSA	Substance Abuse Mental Health Services Administration
SED	Severe Emotional Disturbance
SIG	State Infrastructure Grant
SNCAS	Southern Nevada Child and Adolescent Services
SOC	Systems of Care
TALCIT	Technical Assistance to Local Communities and Indian Tribes
TANF	Temporary Assistance to Needy Families
TPR	Termination of Parental Rights
UNITY	Unified Nevada Information Technology for Youth
VOCA	Victims of Crime Act
WCDSS	Washoe County Department of Social Services
WIN	Wrap-Around In Nevada

## **Section I. Administration of the Plan**

### **State Agency Administering Programs**

The State of Nevada, Division of Child and Family Services (Division), within the Department of Human Services, is specifically dedicated to providing services to children and families. The Division is responsible for Children's Mental Health (in the two largest populated counties), Youth Corrections and Child Welfare Services. The implementation and administration of Title IV-E, Title IV-B, Subpart I (Child Welfare Services) and Subpart 2 (Promoting Safe and Stable Families), Child Abuse and Treatment Act (CAPTA), and the Chafee Foster Care Independence Program (CFCIP) are also the responsibility of the Division.

### **State Demographics**

For the past 20 years, Nevada has been the fastest growing state in the nation. In 2006, the population reached 2,623,050 inhabitants with growth primarily occurring in two counties: Washoe and Clark. Statewide, the average family income is 57,079. The Division's organizational structure and program delivery are influenced by the state size and concentration of population in these two counties. For the most part, growth in Nevada's rural counties has been minimal. For the purpose of this plan, demographic composites have been compiled to reflect three regional service areas; Clark County, Washoe County and the Rural Counties.

*Clark County:* In 2006, the number of residents in Clark County increased by 10% to 1,874,837. This comprises 71% of the state's population. Approximately 26% of Clark County's population is children under the age of 18. In 2006, the average family income is \$56,866. Clark County's child poverty rate is at 16.0% and the teen birth rate is at (49%) per 1,000 females (2003-2005). Clark County reported substantiated abuse and neglect reports at 23.4 % (2002)

*Washoe County:* In 2005, the number of residents in Washoe County increased by 6% to 409,805 residents or 15.8% of the state's overall population. Approximately 25% of Washoe County's population is comprised of children under the age of 18. In 2006, Washoe County reported the highest median family income at \$60,354. The child poverty rate is reported to be 3.3% (2004). Teen birth rates were 41.6% per 1,000 females (2003-2005). Washoe County reported the highest substantiated abuse and neglect reports (25.4% in 2002).

*Rural Counties:* Rural Nevada comprises 12.9% of the state's population and encompasses 15 counties, two of which lost residents in 2005. Overall, the region's population grew by 7% to 325,646 residents. Approximately 24.5% of the population is children under the age of 18. The average family income in rural counties is \$49,169 and the child poverty rate averages 15.5%. Teen birth rates average 21% per 1,000 females. The rural counties have the lowest number of substantiated child abuse and neglect reports (12%).

### **Integration of Child Welfare Services**

In addition to geographic challenges, Nevada is the only state that has operated under a bifurcated child welfare system where counties with populations of 100,000 (Washoe County and Clark County) provided Child Protective Services and the Division provided child welfare services.

#### *Child Protective Services included:*

- Preventative services
- Investigations of abuse and neglect
- Family assessments
- Emergency shelter care and/or short term foster care
- In-home services

#### *Child Welfare Services included:*

- Placement services (family foster care, higher levels including group and residential care)
- Case management for foster care and adoptions
- Independent living
- Family preservation
- Family foster home recruitment, training and licensing

In 1999, a legislatively supported pilot project was conducted in Washoe County between the Washoe County Department of Social Services (WCDSS) and the Division to integrate services. It was recognized that the bifurcated system caused children to remain in the system for a longer period of time due to additional legal actions, multiple case managers, changes in foster homes and service providers. Evaluation results of this two-year pilot demonstrated less duplication of

efforts and more comprehensive and consistent services to children and families in a system that was not bifurcated.

Assembly Bill 1 (AB1), as passed by the 2001 Nevada Special Legislative Session, redefined “child welfare services” to include protective services, foster care services, and services related to adoption. It permits the transfer of child welfare services from the Division of Child and Family Services (Division) to a county whose population is 100,000 or more (Washoe and Clark). The legislation also recognizes that the state and counties have a shared fiscal responsibility for the costs of providing child welfare services and must be committed to ensuring, through negotiation in good faith, future maintenance of efforts in providing those services and to equitably sharing future costs for providing these services.

#### *Washoe County*

Transition of the programs to Washoe County Department of Social Services occurred in two phases, which started in April 2002 and was completed in January 2003. Washoe County provides the full range of child welfare services and is maximizing appropriate federal funding sources such as TANF, Medicaid and Title IV-E.

#### *Clark County*

The transition of programs to Clark County occurred in three phases. The first phase transferred 10.51 FTE in October 2003 to provide Family Preservation Services, and the second phase in April 2004 resulted in the transfer of 42.02 FTE to provide Licensing and Recruitment, Adoption, Interstate Compact on the Placement of Children, and Children’s Resources Bureau services. The third and final phase occurred in October 2004 when the remaining 101.51 FTE transferred to the county to provide Case Management and Eligibility services. Clark County utilizes TANF and Medicaid with submission of its first Title IV-E claim.

### **A. Vision and Principles**

The Division, together in genuine partnership with families, communities and county governmental agencies, provides support and services to assist Nevada’s children and families in reaching their full human potential. We recognize that Nevada’s families are our future and families thrive when they:

- Live in safe, permanent settings;
- Experience a sense of sustainable emotional and physical well being; and
- Receive support to consistently make positive choices for family and common good.

Service principles guide our work towards achieving this vision and are consistent with children and family services principles specified in federal regulations [45 CFS 1355.25(a) through 1355.25(h)]. These practice model principles are:

- Protection-Children’s safety is paramount;
- Development-Children, youth, and families need consistent nurturing in a healthy environment to achieve their full human potential;
- Permanency-All children need and are entitled to enduring relationships that provide a family, stability and belonging, a sense of self that connects children to their past, present and future;
- Cultural Responsiveness-Children and families have the right to be understood within the context of their own family, traditions, history, culture, and community;
- Partnership - The entire community shares accountability for the creation of an environment that helps families raise children to reach their full potential;
- Organizational Competence-Effectively structured and managed organizations with committed, trained, skilled staff are necessary to achieve positive outcomes for children and families.
- Strategic sequencing of continuous quality improvements must occur to reach Nevada’s child and family services vision; and
- Professional Competence-Children and families need a relationship with skilled and empathetic case managers who can provide ethical support, confront difficult issues, and effectively assist them towards positive change that reinforces safety, permanency, well-being and community safety.

### **MISSION**

The Division is responsible for child welfare service delivery in rural Nevada and oversight of urban county-operated child welfare services, children’s mental health services in urban Nevada, juvenile justice services including state-operated youth training centers, youth parole and child care licensing. Our mission encompasses:

#### ***Protection and Permanency for Children***

The Division creates opportunities and programs that prevent and respond to issues of parental/caregiver maltreatment, mental health, and delinquency. The Division strives to support permanency within the child’s biological or primary and extended family so children may grow and develop within stable environments. The Division also recognizes the

responsibility to create and support alternative permanent environments when biological or primary families are unable or incapable of caring for their children. The Division will collaboratively craft public policies to promote the strength and well-being of families.

### ***Preservation of Families***

The Division supports the value that the family is the best structure to assure stability, nurturing, care, and safety of its members and communities. Services are designed to build upon family strengths, honoring the family's traditions, history, and culture.

### ***Juvenile Justice Services for Youth***

The Division recognizes that services must balance youth rehabilitation, treatment, and community safety. Many juvenile offenders have been victims of maltreatment and therefore accountability must be balanced by the provision of services addressing trauma, loss, substance abuse, and mental health issues. Juvenile offenders are held accountable through a comprehensive system of graduated sanctions that include commitment to state-operated juvenile facilities.

### ***Children's Mental Health***

The Division uses a system of care model that strives to provide creative, individualized, strength-based, and culturally responsive services for families with children that experience severe emotional disturbances. A developing continuum of care focuses on meeting the needs of children and families in the least restrictive environment, including utilization of the wraparound process to coordinate effective service delivery that enables children to reside with families when possible and with the assistance of informal supports rather than dependency on government or paid providers.

## **PURPOSES**

The Division is responsible for accomplishing the following purposes:

- Protecting and promoting the welfare and safety of all children, including individuals with disabilities; homeless, dependent or neglected children
- Preventing or remedying, or assisting in the solution of problems that may result in the neglect, abuse, exploitation, or delinquency of children;
- Preventing the unnecessary separation of children from their families by identifying family problems and assisting families in resolving their problems and preventing the breakup of the family where the prevention of child removal is desirable and possible;
- Restoring their families' children, who have been removed and may be safely returned, by the provision of services to the child and the family;
- Assuring adequate care of children away from their homes in cases where the child cannot be returned home or cannot be placed for adoption; and
- Placing children in suitable adoptive homes in cases where restoration to the biological or primary family is not possible or appropriate.

## **B. Goals and Objectives**

The term "Statewide" used in the goals and objectives (Goals and Objectives chart pg.) are collaborative activities involving representatives from Washoe County, Clark County, the Rural DCFS Region, and DCFS Administration. On March 1, 2005 Nevada's Child and Family Services Review (CFSR) Program Improvement Plan (PIP) was approved. Nevada's Child and Family Services Plan (CFSP) was revised on February 28, 2007 simultaneously with the completion of the PIP. Under the PIP, a collaborative structure known as the Decision-Making Group (DMG) comprised of the Administrator of the Division of Child and Family Services, the Division of Child and Family Services Rural Region Manager, the Directors from Clark County Department of Family Services and Washoe County Department of Social Services and other key administrative staff was established. The DMG provides oversight for the direction and implementation of the PIP, approves policies, trainings, and relevant procedures and practice guidelines. Collaborative policy teams comprised of representatives from each child welfare agency as well as select internal and external stakeholders developed policies referenced in the CFSP and also participate in the DMG. The DMG directs the policy teams to respond to any policy refinement needs discovered through the continuous quality assurance and improvement process and policy workgroup activities. Relevant PIP items are cross-referenced under the goals and objectives chart listed below.



## GOALS AND OBJECTIVES CHART

Goal #1 & ACTION PLANNING GROUP	OBJECTIVES	ACTION STEPS
<p>SAFETY OUTCOME 1: Children are first and foremost protected from abuse and neglect.</p> <p>SAFETY ACTION PLANNING GROUP I</p>	<p>I. Statewide standards for substantiations are present. (PIP 1.1, 1.2, 4.3)</p> <p>II. Statewide policy delineates timeframes for initiating a response including face-to-face contact with alleged child victim within established timeframes. (PIP 1.2, 4.3)</p> <p>III. Statewide policy for the use of ongoing safety and risk assessments is in place. (PIP 2.3, 4.1, 30.4, 2.4, 4.2)</p> <p>IV. A case planning protocol on the use of assessment results and the provision of services to families, relatives and guardians is in place. (PIP 3.1, 17.1, 18.1, 20.3, 21.4, 25.1, 35.3)</p>	<p><u>STATEWIDE POLICY</u></p> <p>I. Develop a statewide policy for the use of statewide, standardized CPS intake screening and risk assessment tools.</p> <p>Collaborate with National Resource Center for Child Maltreatment to:</p> <p>develop a CPS intake screening tool and risk assessment tool and,</p> <p>develop evidence based, best practice policies/procedures and,</p> <p>define timeliness of investigation requirements.</p> <p>II. Develop statewide policy to require that law enforcement medical and school personnel have "priority" access in reporting child abuse and child neglect .</p> <p>III. Develop a statewide policy that defines "substantiated reports", "subsequent reports", "immediate", and face-to face contact in compliance with federal requirements.</p> <p>IV. Establish agency capacity for child welfare personnel response to allegations of child abuse and neglect occur on a 7 day 24 hour basis.</p> <p><u>TRAINING</u></p> <p>I. All hotline, assessment and ongoing permanency child welfare and state juvenile services staff will be provided training regarding the intake-screening tool and it's use for all new referrals and for all allegations involving active or ongoing cases.</p> <p>II. Provide training to child welfare and state juvenile services personnel in the risk assessment tool and how to use the form as a tool at the field level throughout the life of the case.</p> <p><u>QUALITY ASSURANCE</u></p> <p>I. Establish a quality assurance measurement to assess compliance with policies.</p> <p>Supervisors will incorporate the risk assessment in a case staffing, case planning and case reviews.</p> <p>II. Explore efficacy of augmentation with UNITY the addition of data elements from the intake-screening tool to facilitate a "pop up" or an alert function to indicate previous CPS reports.</p>

GOAL #2 & ACTION PLANNING GROUP	OBJECTIVES	ACTION STEPS
<p>SAFETY OUTCOME 2: Children are safely maintained in their homes whenever possible and appropriate.</p> <p>SAFETY ACTION PLANNING GROUP 2</p>	<p>I. Consistent assessment, prevention, intervention and support services will be provided to the family to protect children in the home and prevent their removal. (PIP 3.1, 17.1, 18.1, 20.3, 21.4, 25.1, 35.3, 2.3, 4.1, 30.4)</p> <p>II. Consistent assessment, prevention, intervention and support services will be provided to the foster family and/or relatives to protect children in foster care or alternative placement. (PIP 3.1, 17.1, 18.1, 20.3, 21.4, 25.1, 35.3, 2.3, 4.1, 30.4)</p>	<p><u>STATEWIDE POLICY</u> I. Develop a statewide policy for the use of a statewide, standardized safety assessment tool.</p> <p><u>TRAINING</u> II. Provide ongoing mandatory training to case managers and supervisors on the statewide policy and instrument. Include training on how to better engage the family in the assessment process and provide specific supervisor training to improve the monitoring of safety.</p> <p><u>QUALITY ASSURANCE</u> I. Enhance UNITY to measure quality improvement and compliance with the safety assessment statewide policy and use of the assessment tool. II. Develop a statewide case review process and management reports to assess compliance, identify strengths, the need for corrective action and identification of staff training needs. III. Establish baseline data by 2005 and comparative data by 2006 for the Federal Child Welfare Outcome 1 on reduction of recurrence of child abuse and/or neglect. This is the number or percent of all children reported within a specific time frame of 6 months from the date of the report that had another substantiated report. (CAPTA objective and Measure) IV. Establish baseline data by 2005 and comparative data by 2006 for the Federal Child Welfare Outcome 2 on reduction of incidence of child abuse and/or neglect in foster care. This is the number or percent of all children reported within a specific time frame who were the subject of a substantiated report by a foster parent or facility staff. (CAPTA objective and Measure)</p>
<p>SAFETY ACTION PLANNING GROUP 2 (continued)</p>	<p>I. Services will be provided to engage families in the process and assess their service needs in order to protect children in the home and prevent removal. (PIP 3.1, 17.1, 18.1, 20.3, 21.4, 25.1, 35.3, 2.3, 4.1, 30.4)</p>	<p><u>STATEWIDE POLICY</u> I. Identify and implement a Nevada case management model that includes best practices for a) assessment, b) family engagement and c) collaborative case planning.</p> <p><u>TRAINING</u> 1. Provide training to case managers and supervisors on family engagement best practices, the Nevada case management model and use of the assessment tool in the provision of ongoing case management, service assessment and service provider needs and service delivery.</p> <p><u>QUALITY ASSURANCE</u> I. Develop a statewide case review process and management reports to assess compliance, strengths, need for corrective action, identification of service provider needs and identification of staff training needs.</p>

GOAL #2 (CONTINUED) & ACTION PLANNING GROUP	OBJECTIVES	ACTION STEPS
SAFETY ACTION PLANNING GROUP 2 (continued)	<p>I. Children will be protected from risk of harm. (PIP 1.1, 1.2, 4.3, 2.1, 2.2, 2.3, 4.1, 30.4, 2.4, 4.2)</p> <p>II. Client contact and home visitation will ensure that such visits promote the purpose of the case plan and safety of the child. (PIP 13.1, 14.4, 16.2, 15.2, 19.1, 13.2, 14.2, 16.3, 17.3, 18.4, 21.2, 22.2, 23.7, 35.6, 19.2, 21.3, 20.1, 14.3, 16.4, 17.4, 18.5)</p>	<p><b>STATEWIDE POLICY</b> (Please refer to Safety Outcome I, page 6.)</p> <p>I. Develop a statewide policy that requires the use of a checklist on home visits that includes the purpose, quality and frequency of the visit to ensure safety of the child.</p> <p><b>TRAINING</b></p> <p>I. Provide ongoing training to case managers and supervisors on the law, regulation, statewide policy and checklist. Include training on how to better engage the family in the visitation process and provide specific supervisor training to improve the monitoring of client contact and home visitation to ensure safety of the child.</p> <p>II. Provide checklist training that includes the purpose, quality and frequency of the visit to ensure safety of the child.</p> <p><b>QUALITY ASSURANCE</b></p> <p>I. Develop a statewide case review process and management reports to assess compliance, strengths, need for corrective action and identification of staff training needs.</p> <p>II. Establish standardized requirements for the supervisor to observe case managers on home visits.</p>

GOAL #3 & ACTION PLANNING GROUP	OBJECTIVES	ACTION STEPS
<p>PERMANENCY OUTCOME 1: Children have permanency and stability in their living situations.</p> <p>CASE PLANNING AND FAMILY ENGAGEMENT ACTION PLANNING GROUP 1.</p>	<p>I. The statewide case planning policy is based on family assessments and includes youth and family engagement to ensure permanency. (PIP 7.1, 8.1, 9.8, 14.5, 17.2, 18.2, 20.4, 21.5, 25.2, 37.2)</p> <p>II. Thorough, appropriate, consistent and timely permanency goals will be established. (PIP 7.1, 8.1, 9.8, 14.5, 17.2, 18.2, 20.4, 21.5, 25.2, 37.2)</p> <p>III. Prevention of foster care re-entry is effective. (PIP 3.1, 17.1, 18.1, 20.3, 21.4, 25.1, 35.3)</p> <p>IV. Shelter care is not used inappropriately or for extended periods. (PIP 6.1)</p> <p>V. Children in foster care will experience placement stability. (PIP 6.2, 8.2, 30.5)</p>	<p><u>STATEWIDE POLICY</u> (Please refer to Safety Outcome 2, page 7.)</p> <p>I. Collaborate with stakeholders and citizen action committees for discussions and agreement to develop a common definition of concurrent planning that complies with ASFA Guidelines and seek input from judicial members.</p> <p>II. Research best practices for a concurrent case planning format and design a case plan court report. Submit draft report to courts for approval. Submit case plan document to UNITY for creation.</p> <p>III. Revise statewide policy to reflect implementation of revised case plan document and timeliness requirements to be utilized statewide.</p> <p>IV. Develop statewide policy to ensure that all case planning will demonstrate timeliness and youth and family involvement.</p> <p>V. Revise statewide policy manual to reflect implementation of the concurrent case planning document to be utilized statewide.</p> <p>VI. Develop policy and protocol on the utilization of shelter care.</p> <p><u>TRAINING</u></p> <p>I. Create a training module and provide training on involving youth and family in the planning process.</p> <p>II. Provide statewide training on concurrent planning court report format and process to case managers, supervisors, and the judiciary.</p> <p><u>QUALITY ASSURANCE</u></p> <p>I. Discuss with UNITY, changes required for a concurrent case plan court report. Submit revised case plan court report to UNITY for creation.</p> <p>II. Develop a statewide case review process and management reports to assess compliance, strengths, need for corrective action and identification of staff training needs on a) use of the case plan court report and process b) youth and family involvement in the case plan process c) use of shelter care.</p> <p>III. Discuss with UNITY, changes required for a narrative section on youth and family involvement within the case plan court report. Submit revised case plan report to UNITY for creation.</p> <p>IV. Develop reports in UNITY to address timeliness.</p>
<p>CASE PLANNING AND FAMILY ENGAGEMENT ACTION PLANNING GROUP 1 (continued)</p>	<p>I. Legal and social work staff will understand the concurrent planning statewide policy/process and utilization of appropriate permanency goals. (PIP 7.1, 8.1, 9.8, 14.5, 17.2, 18.2, 20.4, 21.5, 25.2, 37.2, 9.2, 29.2)</p>	<p><u>STATEWIDE POLICY</u> (Please refer to page 9.)</p> <p><u>TRAINING</u></p> <p>I. Create a child welfare training module for supervisors and management staff on use of case planning including concurrent planning and court report format in order to provide individualized case manager unit training.</p> <p>II. Utilization of case planning ongoing training including concurrent planning in academy for new case managers.</p> <p>III. Coordinate with Court Improvement Project to provide CLE's for training of legal professionals on ASFA and concurrent case planning.</p> <p><u>QUALITY ASSURANCE</u></p> <p>I. Supervisors will reinforce the use of the concurrent case planning document and training methods during regular supervision activities and staff meetings.</p>

GOAL #3 (continued) & ACTION PLANNING GROUP	OBJECTIVES	ACTION STEPS
FOSTER CARE PLACEMENTS AND ADOPTION ACTION PLANNING GROUP 2	I. The state has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed. (PIP 6.2, 8.2, 30.5, 7.2, 8.3, 9.1, 14.1, 15.1, 16.1, 18.2, 9.2, 29.2, 9.5, 6.7)	<p><u>STATEWIDE POLICY</u></p> <p>I. State to ensure regional recruitment plans address the ethnic and diversity needs of the children in the region and include development of partnerships with local civic and social organizations and tribal entities.</p> <p>II. Enhance statewide policy to initiate on- going and active recruitment of bilingual foster and adoptive parents, staff trainers and recruitment and retention specialists to meet the needs of the state's increasing Hispanic and cross cultural populations.</p> <p>III. Develop strategies to address retention of foster parents.</p> <p>IV. Evaluate challenges to timely licensure of foster homes to reduce the drop out rate and develop strategic approaches to reducing barriers to the licensing process.</p> <p><u>TRAINING</u></p> <p>I. Develop training on new policies and procedures related to diligent recruitment and MEPA requirements.</p> <p><u>QUALITY ASSURANCE</u></p> <p>I. Quality assurance components will be developed upon completion of the above action steps.</p>
FOSTER CARE PLACEMENTS AND ADOPTION ACTION PLANNING GROUP 2	<p>PIP TRANSFER ITEM 10.1.3</p> <p>I. The State will establish a statewide Youth Advisory Board.</p>	<p><u>QUALITY ASSURANCE</u></p> <p>I. Develop a policy on establishment of the Youth Advisory Board's role and function.</p> <p>II. Develop a monitoring system for the establishment of the <i>statewide</i> board.</p> <p>III. Develop a monitoring system for the establishment of <i>local</i> Boards.</p>
CASE REVIEW AND RELATED COURT ISSUES IMPACTING TIMELY PERMANENCY ACTION PLANNING GROUP	<p>I. The case review system provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review. (PIP 31.3)</p> <p>II. The state will have in place a court and legal training component for child welfare staff and their legal representatives. (PIP 9.2, 29.2, 29.1)</p>	<p><u>RECOMMENDATIONS TO THE COURTS</u></p> <p>I. Make a recommendation to the Court Improvement Project to explore implementation of "time certain" review hearings in every jurisdiction statewide.</p> <p><u>STATEWIDE POLICY</u></p> <p>Please refer to goal 3 on page 9 &amp; 10.</p> <p>I. Determine mandatory elements and findings for each case plan court report. <u>TRAINING</u></p> <p>I. IV-E University contractors will develop a training component for child welfare agencies legal representatives.</p>
CASE REVIEW AND RELATED COURT ISSUES IMPACTING TIMELY PERMANENCY ACTION PLANNING GROUP	<p>PIP TRANSFER ITEM 9.2.1</p> <p>I. The state will collaborate with the Administrative Office of the Courts and the Court Improvement Project to identify barriers to permanency and jointly develop strategies to improve permanency efforts statewide.</p>	<p><u>RECOMMENDATION TO THE COURTS</u></p> <p>I. Collaborative meetings with be held to identify barriers and discuss strategies i.e., family involvement in case planning, court review of caseworker visits, role of judges in allowing foster, pre-adoptive parents, and relatives to have an opportunity to be heard in court and notification of hearings. Areas identified as needing training will be addressed in conjunction with the Administrative Office of the courts and the Court Improvement Project. In addition, opportunities to provide training which are mutually beneficial to program and judiciary will be developed with shared financial resources</p>

GOAL #3 (continued) & ACTION PLANNING	OBJECTIVES	ACTION STEPS
CASE REVIEW AND RELATED COURT ISSUES IMPACTING TIMELY PERMANENCY ACTION PLANNING GROUP	<p>PIP Transfer Item 28.3.2</p> <p>I. DCFS and CIP will collaborate to explore strategies and identify solutions to address the lack of legal representation for children and families.</p>	<p><u>RECOMMENDATION TO THE COURTS</u> I. DCFS to recommend to the Court Improvement project to explore the solutions to address the lack of legal representation for children and families.</p> <p><u>QUALITY ASSURANCE</u> I. Develop a statewide case review process and management reports to assess compliance, strengths, need for corrective action and identification of staff training needs on the periodic review of the court/administrative status of each child. II. Develop a mechanism to track legal representation of children and families. III. Monitor the implementation of the solutions.</p>
CASE REVIEW AND RELATED COURT ISSUES IMPACTING TIMELY PERMANENCY ACTION PLANNING GROUP	<p>I. The process for termination of parental rights proceedings is in accordance with provisions of the Adoption and Safe Families Act. (PIP 9.2, 29.2, 28.1, 28.2, 9.9)</p> <p>II. TPRs are completed without delay. (Note: Proper documentation and action steps related to diligent efforts and reasonable efforts are necessary to prevent delay of TPRs.) (PIP 9.2, 29.2, 28.1, 28.2, 9.9)</p>	<p><u>RECOMMENDATION TO THE COURTS:</u> Recommend to the Court Improvement Project that a protocol be developed to streamline the process for TPRs in the court system.</p> <p><u>STATEWIDE POLICY</u> (Please refer to Permanency Outcome 1, page 9.) I. Review the current worksheet and process to streamline the preparation of TPRs. II. Develop a statewide policy defining the process for “diligent efforts”, “reasonable efforts”, and documentation protocol.</p> <p><u>TRAINING</u> I. IV-E University contractors will develop a training component for child welfare agency staff, tribal representatives, legal representatives and the judiciary on what constitutes a “compelling reason” not to file for termination of parental rights and “reasonable efforts”. II. Request National Resource Center for Child Welfare Training and Evaluation to conduct annual training for child welfare agency staff, legal representatives and the judiciary on current ASFA regulations and ICWA III. Develop training for child welfare agency staff on the use of the TPR checklist.</p> <p><u>QUALITY ASSURANCE</u> I. Explore enhancement of data elements in UNITY to track the TPR process. II. Develop a statewide case review process and management reports to assess compliance, strengths, need for corrective action and identification of staff training needs on the completion of TPRs.</p>

GOAL #3 (continued) & ACTION PLANNING	OBJECTIVES	ACTION STEPS
CASE REVIEW AND RELATED COURT ISSUES IMPACTING TIMELY PERMANENCY ACTION PLANNING GROUP	<p>PIP TRANSFER ITEM 29.1</p> <p>The state will have standardized policy and procedure regarding notification of all reviews and hearing for foster parents, pre-adoptive, and relative care givers.</p>	<p><u>STATEWIDE POLICY</u> I. Develop a policy on notification of hearing and reviews.</p> <p><u>TRAINING</u> I. All staff will be trained on the policy via an instructional memorandum.</p> <p><u>QUALITY ASSURANCE</u> I. Initiate a Quality Assurance system to monitor the notification of all reviews and hearings related to foster parents, pre-adoptive and relative caregivers.</p>
CASE REVIEW AND RELATED COURT ISSUES IMPACTING TIMELY PERMANENCY ACTION PLANNING GROUP	<p>I. Foster parents, pre-adoptive parents and relative caregivers of children in foster care will be routinely notified of, and have an opportunity to be heard in any review or hearing held with respect to the child. (PIP 29.1)</p>	<p><u>STATEWIDE POLICY</u> I. Establish statewide policy and protocol for: the use of a notice to primary caregiver (foster parent, pre-adoptive parents, relative caregivers) to encourage participation the development and availability to primary caregivers a comprehensive progress review form that can be forwarded to the judiciary for informational purposes and treatment team efficacy.</p> <p><u>TRAINING</u> I. Develop and provide training for child welfare staff on the statewide policy and protocol for the notification of and involvement in reviews.</p> <p><u>QUALITY ASSURANCE</u> I. Explore ways to provide feedback to foster parents, pre-adoptive parents, and relative caregivers of effectiveness of their court involvement. II. Develop a statewide case review process and management to assess compliance, strengths, need for corrective action and identification of staff training needs on the use of form letters and progress review forms.</p>
FOSTER CARE PLACEMENTS AND ADOPTION ACTION PLANNING GROUP 2	<p>I. Effective use of cross-jurisdictional resources facilitates timely adoption or permanent placements for waiting children. (PIP 9.4, 9.5, 6.7)</p>	<p><u>STATEWIDE POLICY</u> I. Review statewide policy and protocol for revision for: timely adoptions for older children timely permanent placements for older children. II. Develop statewide policy for prospective adopting matching process to include: notification to adoptive parents of a possible match (status); and Adoption Review Team (ART) process. III. Participate with national and regional recruitment organizations, as they provide technical assistance and resources, revising statewide policy and protocol as appropriate.</p> <p><u>TRAINING</u> I. Develop training for child welfare staff on the statewide policy and protocol regarding adoption placement and best practices to minimize barriers.</p> <p><u>QUALITY ASSURANCE</u> I. Enhance cross-jurisdictional and timely adoption through statewide review and solution-focused teams to address interstate placement and recruitment issues. II. Develop management information to assess compliance, need for corrective action and identification of staff training needs on the amelioration of adoption placement barriers.</p>

GOAL #3 (continued) & ACTION PLANNING)	OBJECTIVES	ACTION STEPS
FOSTER CARE PLACEMENTS AND ADOPTION ACTION PLANNING GROUP 2 (continued)	<p>I. Reunification, guardianship or permanent placement with relatives will involve families in all aspects of permanency planning and implementation. (PIP 15.2, 3.1, 17.1, 18.1, 20.3, 21.4, 25.1, 35.3, 6.2, 8.2, 30.5, 7.1, 8.1, 9.8, 14.5, 17.2, 18.2, 20.4, 21.5, 25.2, 37.2)</p> <p>II. Child welfare agencies will make concerted efforts to attain the goal of reunification in a timely manner. (PIP 7.2, 8.3, 9.1, 14.1, 15.1, 16.1, 18.2, 15.2)</p>	<p><u>STATEWIDE POLICY</u> (Please refer to page 7, and 9.)</p> <p>I. Encourage recruitment of fictive families (friends and neighbors considered by the child to "be" family including tribal family members) and provide resources to support those placements.</p> <p>II. Develop statewide policy on involvement of families in all aspects of permanency planning and implementation.</p> <p><u>TRAINING</u></p> <p>I. Train child welfare staff on the purpose, structure and identification of goals and objectives when conducting multidisciplinary planning meetings.</p> <p>II. Train child welfare staff on the reunification statewide policy.</p> <p>III. Train CW staff on licensing standards and applicability to fictive families.</p> <p><u>QUALITY ASSURANCE</u></p> <p>I. Develop a statewide case review process to generate management information to assess compliance, need for corrective action and identification of staff training needs on reunification efforts.</p> <p>II. Identify appropriate caseload size for each program component, evaluate the need to increase the number of case managers and reduce caseloads as determined to facilitate quality program and service delivery improvement.</p> <p>III. Provide technological support (keypads, dictation phones) to help case managers complete paperwork efficiently.</p>
ADOPTION SUBSIDIES ACTION PLANNING GROUP 2	<p>PIP TRANSFER ITEM 9.6.4</p> <p>I. The State will have a standardized process for negotiating adoption subsidies in order to reduce subsidy processing time</p>	<p><u>QUALITY ASSURANCE</u></p> <p>I. Develop a process to measure time to complete the subsidy process.</p> <p>II. Establish a report via UNITY on the amount of subsidies awarded and monitor quarterly.</p> <p>III. Initiate a Quality Assurance system to measure time to complete the subsidy process.</p>
STANDARDIZED FOSTER AND ADOPTIVE HOME STUDIES ACTION PLANNING GROUP 3	<p>PIP TRANSFER ITEM 6.4.4 (9.10.1)</p> <p>I. The State will standardize foster and adoptive home studies through the implementation of the Structured Analysis Family Evaluation (SAFE)</p>	<p><u>QUALITY ASSURANCE</u></p> <p>I. Initiate system of reinforcement.</p> <p>II. Data will be collected and reports run to assess stability of placement to coincide with the system of reinforcement.</p> <p>III. Assess compliance of the foster and adoptive home studies through a Quality Improvement process.</p>



GOAL #3 (continued) & ACTION PLANNING GROUP	OBJECTIVES	ACTION STEPS
<p>PERMANENCY OUTCOME 2: The continuity of relationships and connections is preserved for Children.</p> <p>ASSESSMENT ACTION PLANNING GROUP 1</p>	<p>I. Relative placements are facilitated whenever appropriate. (PIP 15.2)</p> <p>II. Concerted efforts are made to ensure children are placed in close proximity to parents/relatives. (PIP 7.2, 8.3, 9.1, 14.1, 15.1, 16.1, 18.2)</p> <p>III. Concerted efforts are made to ensure children are placed with siblings. (PIP 6.2, 8.2, 30.5)</p> <p>IV. Concerted efforts are made to promote visits with parents and siblings with sufficient frequency. (PIP 13.1, 14.4, 16.2)</p> <p>V. Diligent efforts are made to preserve connections to families, including paternal relatives in addition to maternal relatives and heritage. (PIP 7.2, 8.3, 9.1, 14.1, 15.1, 16.1, 18.2)</p> <p>VI. Diligent efforts are made to support parent-child relationships of children in foster care. (PIP 13.1, 14.4, 16.2)</p>	<p><u>STATEWIDE POLICY</u></p> <p>I. Develop statewide policy on relative search and placement.</p> <p>II. Establish a protocol for continued safety assessment of all placements/home, including relatives.</p> <p>III. Establish protocol for relative search attempts.</p> <p>IV. Develop protocol for assessment of relative placements to identify strengths, needs and resources.</p> <p><u>TRAINING</u></p> <p>I. Provide child welfare staff, including tribal entities, training on ongoing case management responsibilities to emphasize the importance of providing prospective guardians with information on community resources.</p> <p>II. Provide staff training on policies and procedures for relative search and placement, and assessment protocol.</p> <p><u>QUALITY ASSURANCE</u></p> <p>I. Explore UNITY with data elements to measure relative search attempts and results, notifications and create documentation screen for assessment of placement.</p> <p>II. Develop a statewide case review process and management reports to assess compliance, strengths, need for corrective action and identification of staff training needs on relative placements.</p>

GOAL #4 & ACTION PLANNING GROUP (continued)	OBJECTIVES	ACTION STEPS
ASSESSMENT ACTION PLANNING GROUP 1	<p>PIP TRANSFER ITEM 19.3.2</p> <p>I. Increase time available for social workers contact with child, parents and foster parents by streamlining documentation.</p>	<p><u>QUALITY ASSURANCE</u></p> <p>I. Reconfigure UNITY users group to include CIP, managers, supervisors and line staff to improve UNITY functionality and develop strategies for streamlining.</p> <p>II. Develop a strategic plan for using wireless technology, i.e., field keyboards.</p> <p>III. UNITY user group members will review the UNITY functionality to determine what changes can be made by collapsing windows or pre populating and remove repetitive functions.</p> <p>IV Identify challenges and highlight solutions and recommendations to regional IT staff and IMS</p> <p>V. IT staff will analyze the impact and identify strategies that are achievable.</p> <p>VI. Provide and Informational Memorandum to staff instructing them of changes in UNITY regarding the streamlining of documentation.</p>
GOAL #5 & ACTION PLANNING GROUP	OBJECTIVES	ACTION STEPS
<p>WELL-BEING OUTCOME 1: Families have enhanced capacity to provide for their children's needs.</p> <p>CASE PLANNING AND FAMILY ENGAGEMENT ACTION PLANNING GROUP 2</p> <p>&amp;</p> <p>ASSESSMENT ACTION PLANNING GROUP 1</p>	<p>I. The needs and services of children, fathers, mothers, and foster parents are enhanced through the assessment and planning process. (PIP 3.1, 17.1, 18.1, 20.3, 21.4, 25.1, 35.3)</p> <p>II. The service needs of children and fathers will be adequately assessed and addressed. (PIP 3.1, 17.1, 18.1, 20.3, 21.4, 25.1, 35.3)</p> <p>III. More in-depth evaluations for underlying problems will be conducted to meet the needs of children, parents and foster parents. (PIP 21.1, 22.3, 22.1)</p> <p>IV. Case plans are developed with the parents, and address the specific, individualized needs of the children and family. (PIP 3.1, 7.1, 8.1, 9. 8, 14.5, 17.2, 18.2, 20.4, 21.5, 25.2, 37.2)</p> <p>V. Collaborative efforts with stakeholders occur related to CFSP planning process. (PIP narrative pages 1 and 2)</p>	<p><u>STATEWIDE POLICY</u></p> <p>I. Develop and implement a child and family team approach which stresses case planning through collaboration with all available and interested family members, child welfare staff, including tribal entities, and community agencies to address the long-term success of the children and their families.</p> <p>II. In conjunction with the Nevada case management model, develop an initial, uniform, comprehensive assessment of the family's strengths and needs.</p> <p>III. Facilitate statewide policy change statewide for alternative work hours so that plans are developed with child and family at a time convenient to the family and delivered with the oversight of integrated Child and Family teams.</p> <p><u>TRAINING</u></p> <p>I. Train child welfare case managers, on the assessment.</p> <p><u>QUALITY ASSURANCE</u></p> <p>I. Develop a schedule for case managers and their supervisors to perform ongoing case work reviews, documented on a Record of Supervisory Review.</p> <p>II. Standardize employee evaluation tools so they have the same criteria.</p> <p>III. Develop a statewide case review process and management reports to assess compliance, strengths, need for corrective action and identification of staff training needs on the team approach of case planning (Nevada case management model).</p>

GOAL #5 (continued) & ACTION PLANNING GROUP	OBJECTIVES	ACTION STEPS
	<p>I. Engage youth and youth that are fathers. (PIP 7.2, 8.3, 9.1, 14.1, 15.1, 16.1, 18.2, 9.2, 29.2, 13.1, 14.4, 16.2, 15.2)</p> <p>II. Diligent efforts are made to preserve connection to families, including paternal relatives in addition to maternal relatives and heritage. (PIP 13.1, 14.4, 16.2, 15.2)</p>	<p><u>RECOMMENDATION TO THE COURTS</u> Recommend to the CIP that a protocol be established for the courts to routinely order mothers to provide names and information about alleged fathers.</p> <p><u>STATEWIDE POLICY</u> I. Develop a statewide policy on engagement and inclusion of fathers.</p> <p><u>TRAINING</u> I. Gather information and review literature regarding the issues and barriers around engaging fathers, identify best practices and conduct training to child welfare staff including tribal entities. II. a) Provide youth and youth that are fathers with a) training opportunities in positive parenting and have curriculum available for use in foster homes, correctional facilities and treatment centers b) Provide foster home organizations, correctional facilities and treatment centers with training to encourage the establishment of support groups for fathers.</p> <p><u>QUALITY ASSURANCE</u> I. Develop a statewide case review process and management reports to assess compliance, strengths, need for corrective action and identification of staff training needs to ensure the engagement of fathers.</p>
GOAL #6 & ACTION PLANNING GROUP	OBJECTIVES	ACTION STEPS
<p>WELL-BEING OUTCOME 2: Children receive appropriate services to meet their educational needs.</p> <p>CHILD WELFARE SERVICE CONTINUUM AND SERVICE ARRAY GROUP 1</p>	<p>I. Provision of the educational needs of the child will be enhanced by the development of policies, procedures, a standardized assessment instrument and staff training.</p> <p>II. Consistent efforts are made to meet children's educational needs. (PIP 21.1, 22.5)</p> <p>III. The Physical, mental health and substance abuse needs of children are met consistently and effectively. (PIP 22.1, 23.1, 23.2, 23.3, 23.4, 23.5, 23.10, 23.11, 23.12)</p>	<p><u>STATEWIDE POLICY</u> I. a) Develop policies and procedures for assessing, documenting, and providing educational services. b) Develop a policy and protocol to establish a statewide system for educational liaison activities with regionalized points of contact for schools. II. Develop protocol for a statewide child welfare agency educational checklist for both in home and out of home cases. This checklist is to be used by all staff, be broad based in its scope and includes educational-related items. It can be filed in the child record/UNITY. III. Ensure a statewide policy exists, which mandates that the caregiver is provided with or has the knowledge to obtain a child's educational record within 30 days of placement. IV. Develop a protocol for increasing staff awareness and competency in obtaining a child's educational record.</p> <p><u>TRAINING</u> I. Include in case management training a component that focuses on the special education needs of children and the importance of providing the caretaker with this type of information for children with disabilities. II. Coordinate provision of staff/caretaker training that enhances their understanding of the entire educational system to include assessment processes, access to specialized services and management of a child's needs. III Coordinate provision of training to staff/caretakers on the Individuals with Disabilities Education Act (IDEA). IV. Provide training to enhance coordination between IDEA and ILP planning.</p> <p><u>QUALITY ASSURANCE</u> I. Establish a minimum requirement for annual,</p>

		<p>collaborative meetings between the CW agencies and the school district for continued service delivery improvement.</p> <p>II. Explore with Information Management System the enhancement of UNITY to generate an automatic notification letter for schools when a change of placement occurs.</p> <p>III. Develop a statewide case review process and management reports to assess compliance, strengths, need for corrective action and identification of staff training needs on the provision of services to ensure the educational needs of the child are met and that educational records are obtained and placed in the case record.</p>
<b>GOAL #7 &amp; ACTION PLANNING GROUP</b>	<b>OBJECTIVES</b>	<b>ACTION STEPS</b>
<p>WELL-BEING OUTCOME 3: Children receive appropriate services to meet their physical and mental health needs.</p> <p>CHILD WELFARE SERVICES CONTINUUM AND SERVICE ARRAY GROUP 2</p>	<p>PIP TRANSFER ITEM 23.3.1</p> <p>I. The Division of Child and Family Services (DCFS) will participate in collaborative meetings with the University of Nevada, Reno School of Medicine to establish a Child Psychiatry Internship Program that will assist in addressing the shortage of child and adolescent psychiatrists.</p>	<p><u>QUALITY ASSURANCE</u></p> <p>I. The state will continue to meet with UNR School of Medicine to establish a Child Psychiatry Internship Program in Nevada</p>
<p>(Well-Being 3 continued)</p> <p>CHILD WELFARE SERVICES CONTINUUM AND SERVICE ARRAY GROUP 2</p>	<p>PIP TRANSFER ITEM 23.5.2</p> <p>I. The State will identify challenges to hiring mental health professionals and strategies to address them.</p>	<p><u>QUALITY ASSURANCE</u></p> <p>I. The State will meet with UNR and UNLV to discuss the strategies to recruit mental health professionals.</p> <p>II. DCFS will conduct a salary comparison to submit to the State Department of Health and Human Services and to State Personnel for consideration in increase in salaries of mental health professionals.</p> <p>III. Through the Statewide Infrastructure Grant develop a workforce development plan.</p> <p>IV. Develop a monitoring system for implementation of strategies.</p> <p>V. Determine effectiveness of strategies and modify as needed.</p>

GOAL # 8 DATA & QUALITY ASSURANCE	OBJECTIVES	ACTION STEPS
<p>GOAL: THE STATE HAS AN IDENTIFIABLE QUALITY ASSURANCE SYSTEM WITH IDENTIFIABLE REGIONALIZED STRATEGIES</p> <p>SF VI</p> <p>DATA AND QUALITY ASSURANCE ACTION PLANNING GROUP</p>	<p>I. The state is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the CFSP are provided, evaluates the quality of the services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented. (PIP 30.1, 30.2, 31.1, 31.2, 31.3, 31.4, 31.5, 31.6)</p> <p>II. UNITY can identify the status, demographics, location, and goals for children in foster care. (PIP 30.3, 31.2)</p> <p>III. Stakeholders are engaged in the process of identifying goals and objectives of the CFSP. (PIP 31.1)</p> <p>IV. Consultation occurs with representatives on annual reports of progress and services delivered pursuant to the CFSP. (PIP 31.6)</p> <p>V. Standards are applied for foster family homes and child care institutions. (PIP 6.1, 6.2)</p> <p>VI. Background checks are completed. (PIP 6.1, 6.2)</p>	<p><u>STATEWIDE POLICY</u></p> <p>I. Develop statewide policy and procedures to operationalize a formal Quality Assurance (QA) system with the following components:</p> <ul style="list-style-type: none"> <li>a) adopt outcomes and standards</li> <li>b) incorporate QA throughout the agency</li> <li>c) gather data and information</li> <li>d) analyze data and information</li> <li>e) use analyses and information to make improvements.</li> </ul> <p><u>TRAINING</u></p> <p>I. Train staff on the use of the quality assurance system and caseload and management reports.</p> <p><u>QUALITY ASSURANCE DEVELOPMENTAL STEPS:</u></p> <p>I. Evaluate caseworker roles, identify functions that could be provided by paraprofessionals and provide that support for improved QA.</p> <p>II. Establish a collaborative statewide QA review team that meets quarterly and utilizes a system of case review modeled on the Federal Child and Family Services on-site case review process.</p> <p>III. Generate reports ( monthly, quarterly and annually) that will produce documentation demonstrating compliance with specific practice standards. UNITY will produce reports to all staff and organizational levels monthly, quarterly and annually).</p> <p>IV. Distribute information reports (individual worker, caseload, office, district, region, statewide) that track outcomes (including the six national standards) and describe case status and progress toward goals and benchmarks.</p> <p>V. Generate caseworker, supervisor, manager reports that are accessible to multiple levels of staff and have "drill-down" capabilities for report summary and detail.</p> <p>VI. Establish collaborative review teams that will meet to analyze the data from the above reports and case file review reports and compile a report of findings and recommendations.</p> <p>VII. Leadership will assess program improvement recommendations and develop and monitor corrective action plans and outcomes for continuous quality improvement.</p>

GOAL #10 & ACTION PLANNING GROUP	OBJECTIVE	ACTION STEP
TRAINING  SF VIII	PIP TRANSFER ITEM 33.2.1 I. The state will develop a statewide supervisory training program	<u>TRAINING</u> Training development and delivery process: Collaboration between internal (DCFS) and external (University Partnership) stakeholders Develop and training curriculum Train the trainers Execute staff and supervisory child welfare training <u>QUALITY ASSURANCE</u> I. Initiate the Quality Improvement system.
CHILD WELFARE SERVICES CONTINUUM AND SERVICE ARRAY GROUP 2  SF VIII	PIP TRANSFER ITEM 35.1.2  I. The State will promote access to appropriate services for children and families to meet their physical service needs by coordinating with the Division of Health Care Financing and Policy (DHCFP) to develop strategies to recruit and retain Medicaid providers.	<u>QUALITY ASSURANCE</u> I. The State will meet with the Division of Health Care Financing and Policy to develop strategies to retain current Medicaid providers and recruit new Medicaid providers  II. Report annually in the APSR the identified strategies, implementation and impact of Medicaid provider recruitment and retention.
CHILD WELFARE SERVICES CONTINUUM AND SERVICE ARRAY GROUP 2  SF VIII	PIP TRANSFER ITEM 36.1.1  I. The state will promote access to appropriate services for children and families to meet their mental health service needs.	<u>QUALITY ASSURANCE</u> I. The state will meet with the Division of Health Care Financing and Policy to develop strategies to recruit and retain new Medicaid providers II. Report annually in the APSR the strategies identified to promote services to children and families to meet their mental health services needs.
GOAL #11 & ACTION PLANNING GROUP	OBJECTIVE	ACTION STEP
GOAL: THE SYSTEM OF CARE WILL BE CULTURALLY COMPETENT  SF VIII  FOSTER CARE PLACEMENTS AND ADOPTION ACTION PLANNING GROUP 2	I. The state's cultural diversity plan includes staff development to promote service delivery that is culturally responsive to the needs of children and families. (PIP 37.1, 14.6)	<u>STATEWIDE POLICY</u> I. Create a statewide Diversity Committee, with internal and external stakeholders including Nevada Tribal Entities and National Resource Center for Child Welfare of Organizational Improvement to develop a cultural diversity plan. <u>TRAINING</u> I. Train all staff on new policies & procedures related to the cultural diversity plan. <u>QUALITY ASSURANCE</u> I. Develop a statewide case review process and management reports to assess compliance, strengths, need for corrective action and identification of staff training needs on the cultural diversity plan.

## Section II. Planning Process

Nevada's Child and Family Services on-site Review (CFSR) was completed on February 27, 2004. The final report was received June 2, 2004. Nevada has chosen to use the results of the Statewide Assessment and the Final Report Findings as the foundation for the development of the FY 2005-2009 CFSP, which was revised on February 28, 2007 to include the PIP items that were renegotiated in October 2007. The Division of Child and Family Services has instituted a planning process for the Child and Family Services Plan (CFSP). The planning process has occurred in the following four phases:

### **Phase 1:**

The Division used the development of the Child and Family Services Statewide Assessment as an opportunity to identify critical areas to be addressed in the IV-B Plan and in preparation for the Program Improvement Plan (PIP). Internal and external stakeholders, including tribal entities, provided input through surveys and focus groups.

### **Phase 2:**

In January 2004 the Division partnered with the National Child Welfare Resource Center for Organizational Improvement (NCWRCOI) to participate in a training session on the principles of strategic planning and the purpose of integrating the five-year plan with child welfare, mental health and youth corrections in order to achieve better outcomes for children and families in Nevada. The federal requirements for planning, best practice for strategic planning and the logic model process was presented. The upcoming Child and Family Services Review was discussed, as the outcomes of the review will have direct impact on the five-year Child and Family Services Plan. Participants included statewide leadership from child welfare, mental health and youth corrections agencies. The 90 participants, included staff from the Division, representatives from Clark County and Washoe County, Rural Region, mental health services, juvenile services and UNITY, the Division's Statewide Automated Child Welfare Information System.

### **Phase 3:**

A smaller group of state and county policy and decision makers, along with the NRCWRCOI, met in March 2004 to design Nevada's planning structure and to clarify roles and responsibilities. Key stakeholders to include in plan development and oversight were identified.

### **Phase 4:**

In April 2004, 156 internal and external stakeholders came together for a two-day training conference in Las Vegas to develop Nevada's five-year strategic master plan. The NRCWRCOI, in partnership with the Nevada Division Administrator and County Child Welfare Agency Directors, facilitated the overall planning process. Stakeholders were organized in Action Planning Groups that focused on a specific theme that covered one or more items identified from the CFSR. The Action Planning Groups then, through collaborative efforts, submitted specific objectives, action steps and evaluation criteria to the Division for analysis. This analysis was compiled and submitted to key participants, including the Division Administrator, other Division administrative staff, and Directors of county child welfare agencies for additional analysis. Information gleaned

from this final analysis was incorporated into the five-year state plan and will also be incorporated into the Program Improvement Plan (PIP). The participation of all stakeholders in this collaborative effort was the key to the successful completion of the Statewide Five-Year Plan.

Action Planning Groups	
Safety Planning Assessment Foster Care Placement and Adoption	Service Array Case Review/Legal System Independent Living Training Data & Quality Assurance

Each action planning group was given the task to develop action strategies linked to outcome measures from the CFSR. Groups reported to all participants who in turn voted through an automated polling system on priority items for immediate action. The Action Planning Groups were facilitated by co-chairs who were responsible for the completion of the action plan from their group.

An array of statewide internal and external stakeholders participated in the Action Planning Groups. Regional participation was as follows:

Clark County	35%
Washoe County	36%
Rural Counties	26%

Internal Stakeholders	
Internal stakeholder participants represented state and county staff from child welfare, mental health and youth services from the following agencies:	
<div> <div>Division of Child and Family Services</div> <div>Washoe County Department of Social Services</div> <div>Clark County Department of Family Services</div> </div>	
External Stakeholders	
Consumers	Juvenile Services
Parents	Clark County Juvenile Probation
Foster and Group Home Parents	Juvenile Justice Commission
Current and Former Foster Youth	Nevada Association of Juvenile Justice Administrators
Contract Service Providers, Tribal Entities and Nonprofit Organizations	University Partners
Boys and Girls Town	UNR School of Social Work
Stepping Stones Tribal Shelter	Boyd School of Law
Nevada Partnership for Homeless Youth	UNLV School of Social Work
Health Providers/Community Members	Legal Community
Medical Community Representative	Rural and Washoe County Judges
Family Counseling Services	Attorney General's Office
Mental Health Plan Advisory Committee	Chief District Attorney
Mental Health and Developmental Disabilities Committee	Court Improvement Project
Washoe County Mental Health Consortium	Washoe Legal Services-Attorney Representing Children
Child and Family Advocates	Public Defender's Office
Court Appointed Special Advocates	Other State Agencies
Children's Advocates	Nevada Governor's Office
Nevada PEP (Parents Encouraging Parents)	Division of Mental Health and Developmental Services-Rural Clinics
Division of Health - Bureau of Alcohol and Drug Abuse	Division of Health Care Financing and Policy-Medicaid

#### **Phase 5:**

Please refer to the PIP Quarterly report on PIP Communication Plan activities for additional information.



### **Section III. Child and Family Services Continuum**

#### **A. Child Abuse Neglect and Prevention**

##### ***Children's Trust Fund***

Each state has created a State Children's Trust Fund with the specific goal of preventing child maltreatment. Each Children's Trust is charged with coordinating prevention activities by promoting and funding a variety of community-based programs (including CAPTA Title II). In 2003, a statewide restructuring of how grants are managed began under the direction of the Director of the Department of Health and Human Services (DHHS) and a Grants Management Advisory Committee. During the 2005 Special Legislative Session, State Assembly Bill 2 created a formal Grants Management Advisory Committee (Nevada Revised Statutes 232.282-.387), that provides funding recommendations to the Grants Management Unit (GMU) housed within the Nevada Department of Health and Human Services.

The GMU administers state and federal grants to local, regional, and statewide programs serving Nevadans. The Unit ensures accountability and provides technical assistance for social service and health related programs funded through the following six state and federal sources: Children's Trust Fund; Community Services Block Grant; Family to Family Connection; Family Resource Centers; Fund for a Healthy Nevada (tobacco settlement funds); and Title XX Social Services Block Grant. The goal of the GMU is to build on collaborative programming across funding sources, reduce administrative costs, streamline procedures, increase direct program funding, and increase accountability. In addition, communication with other state agencies such as the Welfare Division and the Division of Child and Family Services (DCFS) facilitate community-based programs to access additional funding, minimize administrative costs, and provide a greater percentage of funds to be used for direct services.

Children's Trust Fund grants were awarded to 26 agencies throughout Nevada for the period July 1, 2004 to June 30, 2005 for a total amount of \$1,400,000. Programs funded included family support programs through Family Resource Centers, parenting programs, home visiting programs, skills-based programs for elementary school students, and respite programs for families with children with disabilities, and statewide public awareness of child abuse.

Three respite programs were awarded grants from the Children's Trust Fund. These programs provide center-based and voucher respite programs for families with children with disabilities. One of the respite programs serves families in Reno, NV, while the other two programs serve families in the rural communities in Elko, NV and Fallon, NV where social services are often difficult to access. Also funded are support and educational programs for teen parents conducted in high schools and home visiting for families of infants and young children in underserved areas of Las Vegas and Reno. The programs that offer parenting classes make a concerted effort to recruit and include fathers in the programs.

Although specific activities were conducted during April 2005 as part of Child Abuse Prevention Month, a year-long Child Abuse Awareness campaign was coordinated by the Washoe County District Health Division (WCDHD) with \$300,000 from the Children's Trust Fund. The campaign used slide show ads in movie theaters in Las Vegas and Reno, English and Spanish radio ads, bus stop shelters ads, and print ads in Clark County, Washoe County, and rural Nevada Counties. The campaign's message communicated the signs of child abuse, including both physical and behavioral signs, and urged the viewer/listener to call and report suspected cases of child abuse and neglect to a statewide hotline.

The Department and Division GMUs will increase collaboration related to the Title IV-B State Plan process through participation in IV-B RFP application review and award process. Additionally, any other identified collaborative activities with the Department related to statewide service delivery that will improve the outcomes for the safety of children is welcomed.

#### **B. Intervention and Treatment Services**

##### **1. Child Protective Services**

Nevada Child Protective Services (CPS) agencies conduct activities in preventing, investigating and treating child abuse and neglect in accordance with Chapters 432 and 432B of the Nevada Revised Statutes (NRS) and Nevada's Regulations for the Protection from Abuse and Neglect (NAC 432B). CPS agencies respond to reports of abuse or neglect of children under the age of 18. There are three distinct agencies that provide child welfare services: State of Nevada, Division of Child and Family Services (Division), Clark County Department of Family Services (CCDFS) and Washoe County Department of Social Services (WCDSS).

State and county CPS agencies are committed to building partnerships with local providers that supply an array of services to children and their families. CPS agencies partner with schools, law enforcement, Court Appointed Special Advocates (CASA), juvenile justice systems, community mental health providers, domestic violence programs, child death

review teams and agency multidisciplinary teams. Although Nevada has an array of services that are provided either by a child welfare agency or by a contracted provider, the CFSR identified gaps in services, particularly mental health and substance abuse services. Not all services are always available in all areas of the state.

## **2. Foster Care Services**

The University of Nevada, Las Vegas (UNLV) School of Social Work undertook an extensive, statewide survey of foster parents between May 2005 and January 2006. A total of 226 foster parents were interviewed by telephone; 71.5% of which were from Clark County, 14.6 % from Washoe County and 13.9% from the remaining 15 counties in rural Nevada. An action plan has been developed and all recommendations were met by the PIP. Recommendations from this survey were included in the following:

1. *Continue reduction in caseload size to increase caseworker contact with foster families.*

PIP Action Step/Benchmark In Support Of This Recommendation:

- 1 PIP Item 9.3.1 addressed this recommendation for the 2005 legislative session by forwarding a budget request in an effort to increase staff size and reduce individual caseloads.
  - 2 Evaluate the impact of those resources/case workers upon families from the last legislative session.
2. *Develop policies which require ongoing, regular communication between staff and foster parents; ongoing case reviews should occur to monitor policy compliance.*

PIP Action Step/Benchmark In Support Of This Recommendation:

- 1 PIP Item 6.6.1 (Instructional Memo regarding statutory requirement to inform foster parents about foster child's needs) addresses this recommendation.
  - 2 PIP Item 7.1 (Development of Case Planning Policy) addresses this recommendation
  - 3 PIP Item 13.1 (Development of Caseworker Contact with Children, Parents and Caregivers Policy) addresses this recommendation
  - 4 PIP Item 29.1 (Development of Court Notification Policy) addresses this recommendation
  - 5 PIP Item 30.1 (Development and use of the QI system) addresses this recommendation.
3. *Develop training to meet the ongoing needs of new and experienced foster parents to address the behavioral, education and special needs of foster children.*

PIP Action Step/Benchmark In Support Of This Recommendation:

- 1 PIP Item 9.5.1 is addressed by a statewide recruitment and training team. This study and its results should be forwarded to the team in order to assist them in achieving the benchmark.
4. *The Recruitment and Training Team: Identification and availability of resources to support families.*

PIP Action Step/Benchmark In Support Of This Recommendation:

1. PIP Item 9.5 is addressed by the Statewide Recruitment and Training Team
2. Mental Health of the Child addresses the Medicaid and mental health system.
3. The Statewide Recruitment and Training Team is scheduled to complete the revised training plan
4. Evaluate the number of children placed within one home and its impact upon the foster family
5. Each region must evaluate their existing foster homes and past foster homes for the last two years to determine the number of children and types of children placed in relation to the stability of the placement and the need for services
6. Develop and implement an annual foster parent feedback/review process to document program improvements. In conjunction, it is recommended that "an external ongoing care review process of children in care be done to document worker and organizational accountability
7. Utilize the consumer satisfaction survey be completed on an annual basis by each agency. (The percentage surveyed should be consistent with the survey amount completed in the original study.)

\* To date, all PIP items have been approved and recently concluded.

**Structured Analysis Family Evaluation (SAFE) PIP TRANSFER ITEM 6.4.4 (9.10.1)**

Action Step	Accountable person	Method of Measurement	Benchmark toward achieving goal	Due Date
6.4 The State will standardize foster and adoptive home studies through the implementation of the Structured Analysis Family Evaluation (SAFE)	Statewide Representative (1)  Rural Representative (1)  Southern Representative (1)  Northern Representative (1)	Supervisory review stability data	6.4.4 Initiate system of reinforcement. Refer to Item 30, Action Step 30.1, Benchmark 30.1.5  6.4.4 Data will be collected and reports run to assess stability of placement to coincide with the system of reinforcement. Refer to Item 30, Action Step 30.1, Benchmark 30.1.5	June 30, (Annually)

In June 2005, the State approved and implemented the Structured Analysis Family Evaluation (SAFE) home study tools program in an effort to standardize foster and adoptive home placements for children in the foster care system. The tools are utilized to assess and evaluate prospective adoptive families, foster families, relative care providers, resource families and concurrent planning families. The home study tools were developed by the Consortium for Children and are currently used in many states across the country as a method of evaluating stability of foster placements for children. Results are provided to the worker conducting the assessment in a comprehensive report that is strengths-based. The reports provide a basis for making placement decisions that considers safety, the permanency goal and the well-being of the child. Caseworkers were trained on this program statewide through an Instructional Memorandum in August 2005.

**3. Foster Care Licensing, Recruitment, and Training**

As of July 1, 2005, Parent Resources for Information, Development and Education (PRIDE) has been used statewide as the curriculum for foster parent training. The Spanish-language version of the curriculum is taught (or translation services provided) in all agencies providing child welfare services. Training sessions are co-taught by current and/or former foster/adoptive parents, along with State or county professional staff.

Potential resource families are required to complete orientation and foster parent training prior to licensure. According to regulations, foster parents are required to attend a minimum of eight (8) hours of initial training. Upon analysis, Nevada agencies providing child welfare services have agreed that un-related foster families need additional training in order to adequately care for foster children. The PRIDE curriculum is a twenty-seven (27) hour program that consists of nine (9) three-hour sessions. The program provides an opportunity for families to obtain pertinent information to make an informed decision as to whether or not to continue pursuing licensure.

The listing below outlines the required course topics offered through PRIDE during the pre-service training:

- Session One – Connecting with PRIDE
- Session Two – Teamwork Toward Permanence
- Session Three – Meeting Developmental Needs: Attachment
- Session Four – Meeting Developmental Needs: Loss
- Session Five – Strengthening Family Relationships
- Session Six – Meeting Developmental Needs: Discipline
- Session Seven – Continuing Family Relationships
- Session Eight – Planning for Change
- Session Nine – Taking PRIDE: Making an Informed Decision

Training is a critical part of the recruitment/retention plan. Once families contact the agency, the training process is used to increase their understanding and to assist them in deciding if foster care or adoption is the right choice for their family.

Clark County Department of Family Services (CCDFS) employs two full-time trainers and two contractors to provide training to potential resource families. Sessions are offered six times each week; daily, excluding Sunday. Training materials are available in Spanish, in addition to the provision of translation services. CCDFS also offers a "Fast Track" option with all-day Saturday classes. To date, nearly 10,000 applicants have completed the 27 hour PRIDE training in

Clark County. In addition, a new unit has been created for licensing of relative placements. The unit is notified immediately upon placement of children with a relative and is required to make contact with them within three days. This is intended to encourage and expedite licensing of kinship caregivers.

Washoe County Department of Social Services (WCDSS) employs three full-time recruiter/trainers and utilizes five experienced foster parent co-trainers. Washoe County provides foster parent PRIDE pre-service trainings on rotation every five weeks in English and provides this training in Spanish every quarter. This equates to 10 trainings in English and 3 trainings in Spanish. To date, 152 families have completed PRIDE training in Washoe County and become licensed this fiscal year. In addition, WCDSS staff was actively involved in planning and the agency contributed funding to the Regional Child Welfare Conference hosted by SAFF in April 2007. Foster parents who had not been exposed to PRIDE in their pre-service training are allowed to take some of the classes for advanced training credit. This training is also used for relatives and non-primary staff who are becoming cleared to work in foster homes and well as some treatment agencies. These training sessions average 30 persons per class with an estimated total number of training hours for PRIDE of 10,530 per year. This does not include foster parenting orientations which occurred 28 times this years and provide an additional estimated 1680 hours.

The Division of Child and Family Services (DCFS) Rural Region provides PRIDE training to prospective foster parents in the remaining 15 rural counties. The Rural region recruitment and training staff provides direct services to communities in close proximity to Carson City and Fallon, while supervising a contract that provides services to the outlying areas; including Pahrump, Elko, Ely Winnemucca and Lovelock. Training is offered monthly, on a rotating basis, in communities across the state; with each location being served at least quarterly. A plan is in place to increase training delivery by state staff and discontinue the use of contractors to provide pre-service training. During SFY 2007, 128 rural Nevada applicants completed PRIDE training.

#### **Advanced Training (PIP 29.3)**

Licensed foster families are required to complete four (4) hours of continuing education on an annual basis. The families achieve this through the use of books, videos, available web-based training, i.e., [www.fosterparents.com](http://www.fosterparents.com), community-based training, State and county sponsored training, seminars, workshops and conferences. In addition, WCDSS works in collaboration with the Sierra Association of Foster Families (SAFF) to provide advanced training at monthly association meetings.

The state developed an advanced foster parent training, based on the Child Welfare League of America's (CWLA) PRIDE curriculum advanced competencies. This particular training module, which addresses the roles and responsibility of foster parents related to Court, was introduced with a statewide video-conference on April 27, 2006. The curriculum was provided to all three jurisdictions for inclusion in ongoing advanced foster parent training.

Advanced training also occurs through the efforts of the Nevada Training Partnership at the School of Social Work, University of Nevada, Reno (UNR) and the School of Social Work, University of Nevada, Las Vegas (UNLV).

Advanced training is provided by SAFF through monthly workshops (see below) and a video library. DCFS trainers have conducted additional trainings titled; "Positive Discipline," and "If I Just Do It Right, You'll Love Me." DCFS Rural Region utilizes video-conferencing to provide training to some outlying areas.

SAFF provided training in SFY 2007 on the following topics to Nevada licensed resource families:

July 2006:	Improving Educational Outcomes for Children in Out of Home Care
August 2006:	Job Corps Opportunities for Youth Leaving Foster Care
September 2006:	Identifying the Training Needs of Resource Families
October 2006:	Meeting Medical, Emotional and Mental Health Needs of Foster Children
November 2006:	Understanding Attachment Disorders

January 2007:	Dealing with Methamphetamine Exposures
February 2007:	Accessing Children's Mental Health Services
March 2007:	Grief and Loss Issues
April 2007:	2-Day Regional Training Conference: 3 hour topics included: Ethics for Social Workers Educational Advocacy Preparing for Independent Living Understanding ADD/ADHD Snow Babies: Fetal Drug Exposures Balancing Kinship Care Father's Matters Grief and Loss Issues Alternatives to Disciplining Trans-Racial Adoption Five Love Languages Dealing with Sexually Acting Out Living and Growing with FAS/FAE Anger De-Escalation Develop Physical and Emotional Health Role of Race and Cultural Competence (343 foster parents attended for 12 hours each)
May 2007:	Speech and Language, Development Milestones for At-Risk Children
June 2007:	Parent to Parent Mentoring: Building a Network of Peer-Based Supports

The Resource Family Trainers from WCDSS also coordinated the following specialized trainings:

- Trouble Shooting and Tune-ups A "Hands On" workshop on how to increase desirable behavior
- Power in Positive Parenting
- Here Come the Holidays, Preparing Foster Children for the Holiday Season
- Advocacy for Your Foster Child
- Cultural Competency in the Care of African American Children
- Sexual Acting Out in Foster Care
- If I Just Get it Right, and Other Myths of Foster Care
- Living with Sexual Acting-Out Foster Children
- The Journey of Foster Care, Overcoming Grief and Loss

Licensed foster parents in Clark County have been offered advanced training through the Parenting Project and car seat training by Family to Family Connection. In addition CCDFS has coordinated the following specialized trainings:

- The Basics of Permanency
- The Kinship Experience: Family Change
- The Roles and Responsibilities of Foster Parents in Court
- So Now You Are a Foster Parent-What next
- The ABC's of Fetal Alcohol Spectrum Disorder (FASD)
- An Overview of the Child Welfare Process from Investigation to Permanency
- Conflict Resolution in Parenting
- Early Childhood Development Issues
- Got Foster Kids? Get the Know-How
- It Can Happen to You" addresses allegations of abuse/neglect in foster care.

## ***Supervisory Training***

See Appendix D, Title IV-E Training Plan

## ***Promising Practice***

CCDFS has implemented a Placement Team which, when fully staffed, will plan and coordinate all placements for children in need out of home care. Caseworkers will request placements through the Placement Team for all placements, except in cases of emergency relative care and non-licensed relative care. It is the responsibility of the Placement Team to secure information from resource families regarding what conditions and characteristics they are comfortable working with, and what training and qualifications they possess. The Placement Team will also collect child-specific information on children needing placements and, based on the criteria described in the placement request, find appropriate placements. Through careful consultation with the caseworkers and the use of a specially designed criteria-matching system, the Placement Team will facilitate placements and ensure appropriate transitional plans. The Placement Team also responds when a provider gives notice to terminate a placement, to make every effort to preserve placements and avoid disruptions.

## **4. Kinship Care and ICPC**

The 2001 Legislature passed AB15, a kinship care bill jointly supported by the Welfare Division and DCFS. The Temporary Assistance to Needy Families (TANF) subsidized guardianship program has been operational since October 2002. In an effort to support permanency for children, the legislation allows for any specified relative over the age of 62 who is caring for a relative child and who has legal guardianship to receive TANF assistance up to the amount of the state foster care payment. They receive medical assistance through Medicaid, respite care, childcare, and other services. This program does not require that the child be in the custody or care of a child welfare agency. It is open to any qualifying relative guardian. Other requirements are included to assure the safety of the child and to provide support services to the families. As mentioned in the Foster Care Licensing section previously, relatives who wish to receive a foster care maintenance payment must meet the same licensing requirements as family foster care. During Nevada's current State Fiscal Year (July '06-June'07) kinship assistance has been awarded to 2,861 cases TANF kinship Care families, supporting 4,629 children.

## ***Interstate Compact on the Placement of Children***

The Division provides statewide administration of the Interstate Compact on the Placement of Children (ICPC) Program. Regional child welfare staff in all Division Field Offices as well as Clark County and Washoe County provides direct ICPC services.

Chapter 127.330 of the Nevada Revised Statutes incorporates the text of the Interstate Compact on the Placement of Children. The Compact is a uniform law that has been enacted by all 50 states, the District of Columbia and the U.S. Virgin Islands. It establishes procedures for the interstate placement of children and fixes responsibilities for those involved in placing the child(ren). The Compact Law defines the types of placements covered by the law, the persons, or agencies that must follow compact procedures, and the requirements and the protection offered by the Compact. The intent of ICPC is to ensure protection and services to children who are placed across state lines for foster care, adoption, or institutional care. Each state, including Nevada, may be the sending or receiving state. The Compact applies to four types of situations in which children may be sent from one state to another:

- Placement preliminary to an adoption;
- Placements into foster care, including foster homes, group homes, residential treatment facilities, and institutions;
- Placements with parents and relatives when a parent or relative is not making the placement; or
- Placements of adjudicated delinquents in institutions in other states.

To achieve its goal of ensuring suitable placement environments for children placed interstate, the compact:

- Requires notice and evaluations of the suitability of a placement before it is made;
- Allocates specifically the legal and administrative responsibilities during the time of the interstate placement;
- Provides a basis for enforcement of rights and responsibilities of the sending and receiving parties; and
- Authorizes joint actions of the administrators in all party states to further the effective and efficient operations and services for children in interstate placements to ensure that their safety, well being and permanency needs are being met.

Nevada ICPC collaborates nationally with all other states, the District of Columbia and the U.S. Virgin Islands. Nevada

ICPC's Deputy Compact Administrator serves as the statewide point of contact and liaison with other states' compact administrators and ICPC liaisons; with other federal, state and local agencies (instate and out-of-state); and with national organizations and agencies. The Deputy Compact Administrator serves as a voting member at annual meetings of the Association of Administrators of the Interstate Compact on the Placement of Children. The Deputy Compact Administrator and Alternate provide technical assistance and consultation pertaining to ICPC to Division and Department staff; staff of other federal, state and local agencies (instate and out-of-state); professionals (including attorneys, judges, court staff, physicians, and other service providers); and clients or prospective clients.

With the implementation of P.L. 109-239, The Safe and Timely Interstate Placement of Foster Children's Act of 2006, ICPC home studies must be completed in sixty calendar days from the date the referrals are received in the ICPC Central Office for relative, foster and adoptive home studies. To expedite the home study process the Compact office will fax the electronically submitted referrals from the other states to the field offices for immediate initiation and contact with the proposed caretakers. The transmittals sent from ICPC Central Office will display the date the home studies are due back in this office.

ICPC staff continues to meet regularly with IMS staff in an effort to develop enhancements to the SACWIS system. The requested enhancements included adding new referrals into UNITY windows, sending alerts when youth are within six months of exiting care, recording placement disruptions, expirations of home study approval alerts, due dates for priority home studies (Regulation 7s), standard home studies, and reminders when quarterly supervisory reports are due. This collaborative effort has been an ongoing activity to support the collection of ICPC data as well as provide baseline data for program development and quality assurance. In 2006 several enhancements have been developed and deployed as a result of our collaborative efforts with UNITY, allowing ICPC to enter and track more case specific details. To accommodate the additional statistical reporting required by this law, ICPC continues to work closely with IMS to support the recording of dates when home studies are due, when the home studies are sent to the sending state, the date a fifteen day extension has been requested by Nevada, and whether it has been granted by the sending state. Additionally ICPC will need to keep statistical data when additional information is requested from the sending state and when it was received by Nevada. This will delay the completion of the home study when the information requested is necessary to assess the home of the proposed caretakers.

Additionally, with the implementation of the Safe and Timely Interstate Placement of Foster Children's Act, an instructional memorandum was developed and distributed to all three Regions outlining the new procedures to promote placement of foster children across state lines in a more expeditious manner. In compliance with the changes in Federal law precipitated by the passage of the Adam Walsh Child Protection Act, State-wide policy was developed to instruct the jurisdictions of the necessity to conduct child abuse and neglect registry checks on all household members, eighteen years of age or older, in all states where they have resided over the past five years. The Safe and Timely Interstate Placement of Children's Act of 2006 allows for a \$1,500.00 incentive payment to States completing a home study within thirty calendar days. To qualify for the incentive payments both the sending and receiving state must have matching data as to when a home study referral was received and completed. These dates will also be recorded in the SACWIS system once the appropriate windows have been updated by IMS. Until the SACWIS system has been updated to accommodate the additional statistics, ICPC updates the data base for recording data.

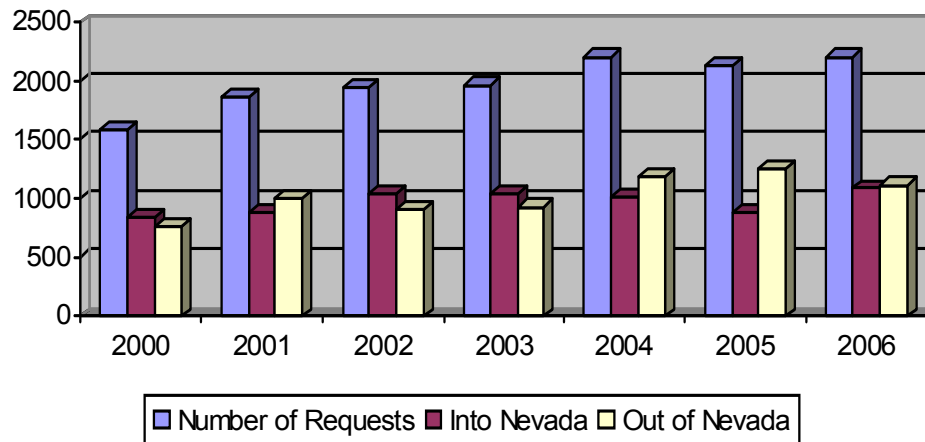
During 2006 the New Compact was finalized and received the consent of Congress to move forward with adopting the new Compact into all fifty states statutes. To date, the new Compact has been adopted in Ohio and introduced into eleven other state legislatures for approval. Nevada elected to introduce the New Compact in the 2009 legislative session. Once thirty-five states have adopted the new Compact into law, Nevada will operate under the new Compact, even if Nevada has not yet adopted. The new Compact allows for a twelve month transition period for the states which have not adopted the new Compact to either enact the new Compact or risk the inability to either send or receive children from other states.

Nevada's rapid and sustained growth has contributed to many children being referred in and out of Nevada for interstate placement. As evidenced in following chart, Nevada anticipates processing approximately 500 new ICPC placement requests per quarter and providing ongoing ICPC Administrative services to an open caseload of over 2,200 children.

**BREAKOUT OF TOTAL ICPC PLACEMENT REQUESTS  
PROCESSED BY FISCAL YEAR**

FISCAL YEAR	RECEIVED INTO NEVADA	SENT OUT OF NEVADA	TOTAL
2000	841	754	1,595
2001	870	990	1,860
2002	1,040	911	1,951
2003	1,043	922	1,965
2004	1,014	1,188	2,202
2005	877	1,251	2,128
2006	1089	1115	2204

**ICPC REQUESTS BY FISCAL YEAR**



**NEVADA INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN  
ADOPTIONS BY FISCAL YEAR  
INCLUDES SPECIFIC, PUBLIC AND PRIVATE AGENCY ADOPTIONS**

FY ADOPTIONS	RECEIVED INTO NV	SENT OUT OF NV	TOTAL ICPC
FY00	45	118	169
FY01	45	107	152
FY02	48	87	135
FY03	106	229	335
FY04	88	252	340
FY05	73	247	320
FY06	95	182	277

***Kinship Care and ICPC***

The 2001 Legislature passed AB15, a kinship care bill jointly supported by the Welfare Division and DCFS. The Temporary Assistance to Needy Families (TANF) subsidized guardianship program has been operational since October 2002. In an effort to support permanency for children, the legislation allows for any specified relative over the age of 62 who is caring for a relative child and who has legal guardianship to receive TANF assistance up to the amount of the state foster care payment. They receive medical assistance through Medicaid, respite care, childcare, and other services. This



program does not require that the child be in the custody or care of a child welfare agency. It is open to any qualifying relative guardian. Other requirements are included to ensure the safety of the child and to provide support services to the families. As mentioned in the Foster Care Licensing section previously, relatives who wish to receive a foster care maintenance payment must meet the same licensing requirements as family foster care. During Nevada's current State Fiscal Year (July '05-June'06) kinship assistance has been awarded to a monthly average of 232 TANF kinship Care families, supporting and average of 376 children.

#### ***Clark County Kinship Care System of Care Grant (PIP 15.2)***

Clark County is in the fourth year of a five-year Caring Communities Demonstration Project Grant awarded in October 2003. The Grant is designed to utilize the Systems of Care principles to increase placements with, and supports for, relatives when children must be removed from the home, and improving the safety, stability, timely permanency and well-being for children in kin care. Kin Care Coordinators are located at each of five community-based Neighborhood Family Service Centers. They recruit, train and sustain a culturally/linguistically diverse network of volunteer kin care mentors, with prior experience as caregivers to provide home-based support to new caregivers and assist mentors to facilitate orientation and support groups for kin caregivers.

During this review period, referrals to the Kinship Connection program have increased considerably. More referrals have been received in the past six months than in the previous year. Increased referrals are attributed to efforts made to engage the kin caregiver at the initial point. Staff assigned to complete diligent searches for a child's relatives has been expanded to two full-time positions; and two part time positions. This has resulted in an increase in the number of children placed with relatives. From April 2006 through March 2007, 1133 relative searches for 1504 children were initiated, resulting in 416 kinship placements.

Nevada Parents Encouraging Parents (PEP) has four trained volunteer Kin Care Mentors who provide peer support to kin caregivers. Four Kin Care Coordinators employed by Nevada PEP link mentors with the caregiver through a Neighborhood Family Service Center closest to the family's residential area. Mentors provide support through telephone contact and home visits with the caregiver. Kinship care support groups are held monthly at four of the five Neighborhood Family Service Centers. Support group meetings for the fifth site are planned in the near future.

Clark County Department of Family Services foster care trainers and Kin Care Coordinators co-train a kinship class for caregivers seeking foster care licensure. This kinship-specific class has been added to the PRIDE training curriculum and is one of four required classes for relatives seeking licensure. The class is offered twice monthly; and from April 2006 through March 2007 1,133, 316 kin caregivers participated in these trainings. In January, 2005 Nevada PEP began offering kinship orientation sessions at Neighborhood Family Service Centers for kin caregivers not seeking licensure.

Ongoing meetings with stakeholders are held on a regular basis. The Citizens Advisory Committee (CAC) meets quarterly and receives regular updates on the Caring Communities Project. The Kin Care Subcommittee of the CAC, meets on a monthly basis and serves as the working committee for the project. The Evaluation Work Group meets monthly to address data collection and the implications. The Implementation Work Group also meets monthly to discuss Kinship Connection activities. These smaller work groups bring ideas and plans they have developed back to the larger groups. All committees and work groups include a diverse group of stakeholders including community agencies, family representation and child welfare staff.

In response to the Kinship Care Needs Assessment, a local charitable foundation donated \$250,000 (@\$25,000 over 10 years) to assist in meeting the needs of children being placed with relatives. Services funded through include, but are not limited to: food, clothing, child care supplies, children's furniture, educational fees, licensed child care, medical care and prescriptions not covered by Medicaid or other medical insurance, and public transportation.

To support Nevada's policies for increased Child and Family Teams (CFT), monthly unit based consultations began in August 2005. These consultations have allowed each Child Protective Service and Permanency Units to meet with a consultant to gain practice skills for CFTs and strength-based documentation. Supervisors as Coaches training has been utilized to assist supervisors in their role as coaches to staff and in receiving hands-on practice in facilitating CFTs. Ongoing consultation is provided for new staff and as support to experienced staff and supervisors.

In March, 2005, Cultural Competency Assessments of CCDFS practices and policies were distributed to DFS staff, leadership and Administration. Clark County DFS utilized the Child Welfare Cultural and Diversity Assessment as provided by the Child Welfare League of America (CWLA). The surveys purpose was to gather information regarding the respondents' perspectives on Clark County's cultural competency. Participants were asked to complete the survey that best matched their role in relation to the Department of Family Services. Respondents were asked to rate each statement on a Likert scale of one to five, with five being "always" and one being "rarely". The surveys were collected in the fall of

2005, analysis conducted in November, and the final results of the survey were posted in December of 2005. As expected, rankings and results were mixed among the various groups responding. In general, all groups surveyed were in agreement about Clark County's respect for culture, diversity and rights of youth and families. The majority of the respondents also gave high rankings to "the agency's quality of service delivery in communicating in the customers' primary language". Results of the survey also highlighted areas in need of continuing focus. These areas are; "DFS will continue to consider cultural factors when planning and delivering programs and services" and, DFS will continue to consider cultural factors such as language, race, ethnicity, customs, family structure, sexual orientation, and tribal/community dynamic when delivering programs and services. The results of this self assessment survey will be utilized to inform the statewide cultural competency work group.

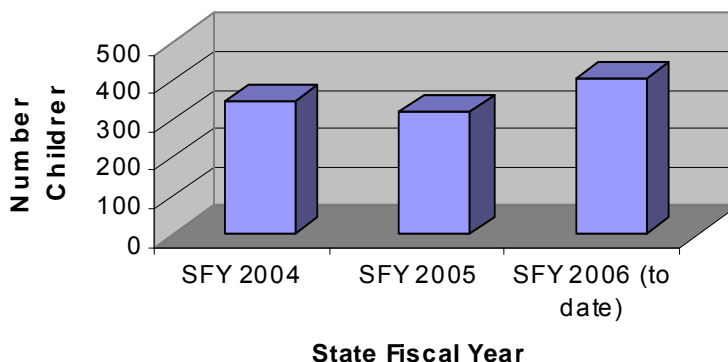
## 5. Guardianship:

During Legislative Session 2003, State Assembly Bill 273 was passed and became effective October 1, 2003. The bill established a procedure in Nevada Revised Statute (NRS) 432, Administration; Nevada Revised Statute 432B, Child Protection; and Nevada Revised Statute 159, Guardianship, that at the time of the annual permanency hearing an abused or neglected child may be permanently placed with a guardian pursuant to guardianship requirements established under NRS159. The provisions of the bill include the following:

- Adoption should still be the primary goal for children who cannot be reunified with their parents, limiting the provisions of this bill to children for whom adoption is not a realistic option. Termination of the Division's custody when a guardian is appointed, but does not result in the termination of parental rights of the parent(s) of the child.
- The Court has the jurisdiction to enforce, modify, or terminate the guardianship until the child reaches the age of 18 years.
- Allows any person having a direct interest in a guardianship so established to move to enforce, modify, or terminate the guardianship.
- Allows the Court to order the Division to file a report and make recommendations in response
- to any motion to enforce, modify, or terminate a guardianship so established.

The number of children exiting care through guardianship is represented as follows:

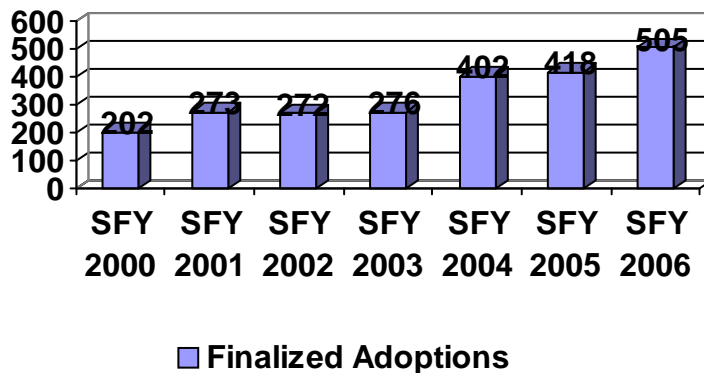
**NUMBER OF CHILDREN EXITING CARE THROUGH GUARDIANSHIP**



## 6. Adoption

In addition to serving foster children in need of adoption services, public child welfare agencies serve children and families involved in relative/step-parent adoptions (when agency involvement is required by the court), private/independent or inter-country adoptions. Public agencies also provide pre and post placement services for children referred through the Interstate Compact on Placement of Children.

Adoption services provided include pre-placement and post-placement counseling to birth parents; case management; legal services to free children for adoption; recruitment, training, home study preparation for pre-adoptive families; adoption subsidy; post legal adoption support; and licensing/administrative oversight of local private child placing agencies.



**FINALIZED ADOPTIONS BY STATE FISCAL YEAR**

The number of children adopted from foster care increased by approximately 20% from the previous year.

To support this effort, agencies contracted with local and out-of-state private providers for needed services: recruitment; home studies for prospective families; post placement supervision; and written background social/medical histories for waiting children. IV-B, Adoption Incentive and other funding sources support these services and activities.

Efforts to identify prospective permanent adoptive families are ongoing. As required by PIP Item 9.5 each Region developed and implemented written recruitment plans designed to reach all segments of the community and to locate placement resources for waiting children. Regional recruitment activities include collaborations with private entities.

#### ***Inter-Country Adoptions***

The SACWIS collects information regarding plans for children in care, the reason the child came into custody, if the child was placed from another county, and whether or not the child was previously adopted. IMS continues to work on modifications to identify youth who enter foster care due to disruption of an inter-country adoption. Using existing data sources, no children adopted internationally whose parental rights have been terminated, were identified as being in the custody of the public agency due to a dissolved adoption.

State and selected County Child Welfare Agencies serve families who adopt internationally. Home studies, post placement, information and referral and other support services are provided. If needed, social services funded by Adoption Incentive, Titles IV-B and XX are available when eligibility requirements are met.

#### ***Inter-jurisdictional Adoptions***

Nevada is a member of and utilizes the services of The Adoption Exchange. Since July 1, 2006 the Exchange has served approximately 234 children, the majority of whom are over the age of 8 years; of minority heritage; and members of sibling groups. Recruitment activities include the Heart Gallery; Adoption Parties; Adoption Profile Parties for interested families; KLAS –TV 8 Wednesday's Child; web/photo listings and features in newspaper articles and the Foster Families Today magazine. The Exchange holds monthly information classes and provides basic facts on private, international and special needs adoption. This activity is designed to provide an immediate response to interested families and to support/retain their interest pending completion of the application and training process.

Nevada is a member of the Interstate Compact on Adoption and Medical Assistance (ICAMA). The state does not provide Medicaid coverage to non Title IV-E children from other states. The State Deputy Compact Administrator does however provide information and referral assistance to families in need of medical and other services for non IV-E children.

#### **AdoptUsKids**

The State utilizes AdoptUsKids to support inter-jurisdictional placement efforts. The local office of the Adoption Exchange serves as Nevada's Recruitment Response Team. The Exchange has received a total of 583 calls: 507 from Clark

County, 35 from Washoe County and 41 for the Rural Region. Fifty-one percent (51%) of the calls were from Spanish speaking callers, of whom 25-45% were undocumented or interested in non-special needs infant placements. The remainder of the callers attended orientation; approximately 50 have completed the home study/licensing process.

#### **Adoption Incentive Payments**

The state received a \$764,000 award for FFY 2005. Funding was allocated to the three Regions of the State based on the number of completed adoptions. Regional spending plans focused on services and activities to support adoptions:

- Purchase of service agreements/contracts for adoption home studies and social histories/summaries to finalize adoptions of foster children;
- Child assessments and travel to facilitate inter-jurisdictional placements;
- General, targeted and child specific recruitment activities and materials;
- Post placement services to prevent disruption/dissolution;
- Regional Adoption Exchange membership fee.

#### **Adoption Subsidies *PIP TRANSFER ITEM 9.6.4***

Action Step	Accountable person	Method of Measurement	Benchmark toward achieving goal	Due Date
9.6 The State will have a standardized process for negotiating adoption subsidies in order to reduce subsidy processing time	Statewide Representative (1)  Rural Representative (1)  Southern Representative (1)  Northern Representative (1)	Case Review Process	9.6.4 Develop a process to measure time to complete subsidy process. Process will be incorporated into the Child and Family Services Plan and reported in the Annual Progress Services Report	June 30 <sup>th</sup> (Annually)

The Program Improvement Plan required the State to develop a standardized process for negotiating adoption subsidy requests, with the goal of reducing the time required to complete the approval process. The adoption subsidy policy and staff training relevant to this item were completed November 2005 and June 2006 respectively. PIP Action Step 9.6.4. "The State will review current practices and develop a process to measure the time to complete the subsidy process." Currently, the State is developing a Quality Improvement process to monitor areas related to adoption subsidies to increase quality and timeliness of practice.

#### **7. Independent Living**

For the Description of Nevada's Independent Living Services - Refer to the attached Independent Living Plan (Appendix B)

## **8. Children Transferred Into Custody of the Juvenile Justice System**

The Division is responsible for the juvenile justice system, statewide. Juvenile Justice Services serves youth ages 12-21, who have been either delinquent in behavior or to access services for mental health treatment. There are three youth centers (Summit View Youth Correctional Center in Las Vegas, Caliente Youth Center in Caliente, Nevada Youth Training Center in Elko), the Youth Parole Bureau, and the Juvenile Justice Programs' Office providing juvenile justice services. The Nevada Youth Parole Bureau has five statewide offices. The following chart indicates the children that were transferred to juvenile custody (probation/incarceration) from child welfare (receiving services or in protective custody). These youth were known to the child welfare system prior to entering the juvenile justice system and these numbers are collected on a monthly report via UNITY.

### **2006 CHILDREN TRANSFERRED FROM CPS TO THE JUVENILE JUSTICE SYSTEM**

<b>AGE</b>	<b>MALE</b>	<b>FEMALE</b>	<b>TOTAL # COMMITTED</b>
13	1	1	2
14	2	0	2
15	3	0	3
16	7	2	9
17	5	0	5
18	8	5	13
<b>TOTAL</b>	<b>26</b>	<b>8</b>	<b>34</b>

## **9. Mental Health**

### ***Mental Health Consortia***

The 2001 Legislature via NRS 433B.333 established a Mental Health consortium in three jurisdictions: Clark County, Washoe County, and the Rural Region (15 counties). The functions of the Mental Health Consortia are to assess the need for behavioral health, mental health and substance abuse services for children in each jurisdiction; to determine how well the current system is meeting those needs, and to develop an annual plan on how the need can be better met. This information is reported to the legislative committee on children and youth regularly.

The consortia estimated that approximately 23,360 children statewide are in need of behavioral health services and that 7,321 of these youth met the criteria for Severe Emotional Disturbance (SED). Of all the children who were screened and met the criteria of SED, more than half were receiving no behavioral health services. The three Mental Health Consortia conduct community-based assessments and update their annual plans.

A review of the consortia annual plans reveals early access and counseling were rated as the highest priority needs in all three jurisdictions and accessibility to mental health services is sometimes a barrier to reunification. All three jurisdictions identified a growing need for bi-cultural and bilingual staff to meet the needs of Asian, Hispanic, and Native American families. Of the children screened only 56.1 percent are receiving mental health services at the level of their need. Although counseling was rated as the most accessible service, it was still rated as accessible for just "some" of the children who are in need. There are concerns with the limited availability of Medicaid providers due to the structure of Medicaid reimbursements, procedures and filing requirements. Medicaid requirements and procedures were seen as a barrier to accessing treatment. The three Mental Health Consortia conduct community-based assessments and update their annual plans.

An important component previously in the continuum of children's mental health services, DCFS's agreements with residential treatment providers, came under sharp criticism for ineffectively serving Nevada's foster care children with serious emotional disturbances (SED). This criticism centered on several factors; children in the child welfare agencies' custody would often be moved to access services rather than having services come to them, in-home or community-based services were not considered or were not available to meet children's needs (existing Medicaid providers not accepting new clients and/or chronic wait lists existing), a tiered payment system of residential treatment provider's commonly forced multiple placement changes to children; these placements changes caused trauma and exacerbated attachment disorders than many children suffer from in the child welfare system. Therefore, the 2005 Nevada State Legislature mandated DCFS to transform children's mental health services by December 31, 2005. This mandate

prompted DCFS to contact Bazelon Center for Mental Health Law to assist with planning for change; convening a national panel of experts to address Nevada's urgency for change; contracting with EP&P Consulting to assist with the restructuring of Medicaid rates; and Nevada was selected to attend the national conference Transforming Mental Health Care for Children and Families Policy Academy in August 2005. Nevada sent representation from DCFS, Medicaid, Nevada PEP, the Legislature, the Division of Mental Health and Developmental Services and the Department of Health and Human Services. This Policy Academy resulted in increased teaming and had a positive impact on advancing the behavioral health redesign. DCFS in partnership with the Department of Health Care Financing and Policy (HCFAP), and with input from the county agencies, mental health providers, family advocates and community providers implemented the Behavioral Health Redesign which took effect January 1, 2006.

### ***Expanding Mental Health Services***

The primary purpose of the Behavioral Health Redesign is to expand the capacity to serve both seriously mentally ill adults and seriously emotionally disturbed children in Nevada. Under the Redesign, treatment providers for DCFS were transitioned over to HCFAP's provider system to standardize rates and enrollment of treatment services/providers. As of May 2006, provider enrollment across all provider types increased.

### ***Enhancing Treatment Service Rates***

As of January 1, 2006, HCFAP assumed responsibility for direct payment of treatment services. A workgroup that included DCFS, HCFAP and residential treatment providers completed its work on rate methodologies and development of a core rate model for treatment homes as well as rates for other treatment services. Additionally, in an effort to assure that rates are sufficient, DCFS and HCFAP will consider a six month review of specific rates to check that providers are receiving acceptable reimbursement. Room and board is a non-Medicaid service. Thus, DCFS custody children are reimbursed through DCFS and non-custody children reimbursed through DHHS. However, to create a seamless billing process, providers' bill for room and board using the same billing process as Medicaid covered services.

### ***Utilization Management***

HCFAP received approval to contract with a single utilization management entity to simplify Medicaid service authorization and to avoid any conflict of interest. First Health Services Corporation was contracted to provide utilization management for all children's mental health services covered by Medicaid. First Health hired Behavioral Health Program Coordinators to train and support providers through learning the authorization process and application of new regulations in clinical practice.

DCFS's Quality Assurance/Quality Improvement unit assisted Clark and Washoe County child welfare agencies with the transition and training in this new utilization management system and the revised Medicaid Regulations. DCFS transferred the value of six positions to the counties to assist in their ability to access treatment services. Two positions were transferred to Washoe County Department of Social Services and four to Clark County Department of Family Services. In addition, HCFAP was approved for an increase in two positions for quality assurance, provider recruitment and ongoing rates review and development.

### ***Creation of the Transforming Children's Mental Health Treatment Services in Nevada Steering Committee:***

The Transforming Children's Mental Health Treatment Services in Nevada Steering Committee (Steering Committee) was appointed and assembled in June 2005. Its purpose was to provide leadership and oversight to the transformation process for children's mental health treatment services, advance the work of the Children and Adolescents Statewide Infrastructure Grant (SIG) project, and to advise on the behavioral health redesign. The initial plan was for the Steering Committee to meet monthly until December 31, 2005 when leadership would transition to the Statewide Consortium. However, in December the Steering Committee voted to continue meeting through 2006 until the implementation of the Statewide Consortium.

### ***Nevada Children's Behavioral Health Consortium***

The Nevada Children's Behavioral Health Consortium (NCBHC) was formed from the Transforming Children's Mental Health Treatment Services Steering Committee. The Steering Committee was assembled to oversee the children's mental health transformation including the mental health redesign. Under the leadership of the Department of Health and Human Services' Director Mike Willden, the Steering Committee morphed into the NCBHC with a broader and more diverse membership and an expanded purpose. The membership of the NCBHC included nearly all the Steering Committee members with added representation from juvenile justice services, education, family court, tribal council, health maintenance organization, health, substance abuse, developmental services, parents of a child with a severe emotional

disturbance, and youth. The purpose of the NCBHC is to provide leadership in developing a statewide system of care for children's behavioral health.

The NCBHC began its work in October 2006 by drafting bylaws and proposing a slate of workgroups. The workgroups are: Bylaws, Collaboration, Finance, Policy and Legislation, and Strategic Planning. At the third meeting of the NCBHC in March 2007 members voted to expand the number of positions to include a provider of substance abuse treatment and judicial representatives from Washoe County and the rural region. The NCBHC also voted to serve as the governance board for the State Infrastructure Grant (SIG). The SIG provides funds and resources for Nevada's System of Care infrastructure development.

At the last meeting of the Consortium in May 2007 members established priorities in order to develop a framework for decision making. The NCBHC is in its early stages of development. The next steps are to establish a common definition and guiding principals of a system of care and to construct work plans. Much of the work will be completed by the workgroups.

Goals identified by the workgroups are:

Collaboration – Lead the efforts to design a professional development process that includes foundational information, workshop-based training, and on-site technical assistance for problem areas.

Finance Workgroup – Conduct a Finance Self-Assessment using the Self-Assessment and Planning Guide: Developing a Comprehensive Financing Plan and develop a statewide behavioral health financing plan.

Policy and Legislation - Identify policies that impact services to all children, youth and their families to determine whether these policies need to be eliminated, altered, or adopted universally throughout Nevada.

Strategic Planning – Develop a comprehensive plan for a system of care building on the work of the regional consortia.

**Mental Health Service needs *PIP TRANSFER ITEM 36.1.1***

Action Step	Accountable person	Method of Measurement	Benchmark toward achieving goal	Due Date
36.1 The state will promote access to appropriate services for children and families to meet their mental health service needs.	Statewide Representative (1)  Rural Representative (1)  Southern Representative (1)  Northern Representative (1)	Meeting Minutes	36.1.2 The state will meet with the Division of Health Care Financing and Policy to develop strategies to recruit new Medicaid providers.	June 30 <sup>th</sup> (Annually)

The Division is currently working with its sister agency, the Department of Health Care Finance and Policy, to re-design children's behavioral health services throughout the state to increase access and availability.

Division of Child and Family Services (DCFS) and the Division of Health Care Financing and Policy (DHCFP) meet at least monthly to develop and monitor strategies to recruit new Medicaid providers. Initial meetings focused on cross training and educating so that staff at both Divisions could clearly understand needs for new Medicaid providers within the behavioral health re-design.

The workgroup set a goal of retaining all existing Medicaid providers (38) and adding 8 new providers in 2006. As of January 1, 2007, all 38 existing Medicaid providers completed the enrollment process and were provided new Medicaid enrollment numbers. Additionally, five new agencies became Behavioral Health Community Networks (BHCN). Currently the First Health Services Corporation website lists 50 Nevada enrolled Medicaid providers.

DCFS and DHCFP recently developed new goals to recruit Medicaid providers. These strategies include:

- Bi-monthly training events to educate prospective providers about the enrollment process;
- Electronic billing options;

- New billing and payment options that may result from changes in the Medicaid State Plan;
- Meeting with large national providers (KidsPeace, KidsLink-Universal Health Services) who might provide a continuum of mental health services, particularly in Clark County; and
- Targeted recruitment of home and community based psycho-social rehabilitative service providers statewide.

### ***Mental Health Services and Substance Abuse Services***

The Division was one of seven national entities awarded a federal Substance Abuse Mental Health Services Administration (SAMHSA) five-year Child and Adolescent, State Infrastructure Grant (SIG) in the amount of \$3,749,380 to enhance the infrastructure and organizational competence for children's mental health services. The grant includes six new state positions, funding for contracts to reduce systemic fragmentation, technical assistance to improve Nevada's behavioral health financing, stipends for increased family involvement, monies to support systems performance evaluation, and the establishment of a state-level mental health consortium.

Alcohol and substance abuse treatment and services are aimed to achieve the mental and physical restoration of alcohol and drug abusers. To be Medicaid reimbursable, while services may be delivered in inpatient or outpatient settings (inpatient substance abuse hospital, general hospital with a substance abuse unit, mental health clinic, or by an individual psychiatrist or psychologist), they must constitute a medical-model service delivery system. All Medicaid policies and requirements (such as prior authorization, etc.) are the same for Nevada Check Up, with the exception of the three areas where Medicaid and Nevada Check Up policies differ as documented in Chapter 3700 of the Medicaid Services Manual. Chapter 400 specifically covers behavioral health services and for other Medicaid services coverage, limitations, and provider responsibilities, the specific Medicaid Services manual needs to be referenced.

The SIG positions include a grant coordinator, a program evaluation specialist, cultural liaison and workforce development coordinator. The first year of the grant was devoted to supporting the Mental Health treatment transformation initiative. SIG staff facilitated various workgroups and coordinated contract services identified to support the redesign. SAMHSA completed the first year on-site review in November and the second year application was approved. The State, in collaboration with SAMHSA, has identified five areas to focus on for the third year with the support of technical assistance: financial assessment, leadership, workforce development, cultural competency and co-occurring disorders.

### ***Early Childhood Services***

Early Childhood Services provides behavioral health services to children ages 0-6 with identified treatment needs and their families. Early Childhood Services partners with Head Start, Child Care Assistance Programs, Child Protective Services and child care centers to provide comprehensive, individualized, family-centered treatment services which support family relationships and enhance children's mental health. Early Childhood Services programs are part of the Neighborhood Care Centers in Southern Nevada.

### ***Division of Mental Health and Developmental Services***

The Division of Mental Health and Developmental Services (MHDS) provides services to SED children and adolescents who are in rural area through the operation of its Rural Clinics satellite offices. Complementing these, the Division Intensive Family Services continues to provide crisis services, case management, and family preservation services in rural Nevada communities. The Division's rural regional administration works closely with MHDS to provide effective children's mental health services. The two state-operated, community-based clinics, Southern Nevada Child and Adolescent Services (SNCAS) in Clark County and Northern Nevada Child and Adolescents Services (NNCAD) in Washoe County provide early childhood services, outpatient and case management services, day treatment programs, residential treatment services, and crisis residential services. In addition, school-aged children and adolescents are linked to providers offering therapeutic foster care, group care, and residential treatment and inpatient hospitalization services.

### ***Substance Abuse Services***

In addition to the substance abuse services described in Sections III and IV, Nevada has a partnership with the Substance Abuse Prevention and Treatment Agency (SAPTA). The Division recently collaborated with SAPTA and received grant funding addressing the issue of juvenile delinquency and substance abuse. The grant was designed to take a comprehensive look at the substance abuse prevention and treatment services for juvenile offenders. The grant includes funding allocations for assessment, prevention, and treatment projects. One of the intents of this initial partnership with SAPTA was to generate more future opportunities for collaboration and funding of ongoing assessment and treatment services in the training centers and at youth parole.

The Division is currently applying for funding under ACF's "Targeted Grants to Increase the Well-Being of and to Improve



the Permanency Outcomes for, Children Affected by Methamphetamine or Other Substance Abuse". The proposed activities target methamphetamine abusers in Clark County and seeks to expand service array and treatment capacity and options for pregnant or parenting women and to expedite access to treatment so as to reduce the time from referral to entry into treatment. The proposal reflects a partnership between DCFS, Nevada's Attorney General's Office, Nevada's substance abuse agency (Substance Abuse Prevention and Treatment Agency), Clark County Department of Family Services, Nevada's Court Improvement Program, and WestCare (a community non-profit agency in Clark County who is the only provider of residential substance abuse treatment services which allow mothers and children to remain together during treatment). The goals and objectives of DCFS's proposal also includes increasing collaboration and integration of Nevada's substance abuse and child welfare agencies.

### **Housing Services**

Focus groups conducted for the CFSR statewide assessment in Washoe, Clark County, Carson City, and Fallon listed housing services as a barrier due to the fact that housing vouchers are limited and the amount cannot meet the needs of the community. The following results were received:

- 1 Forty-four percent of focus group participants feel that there are housing assistance services available, but they are not accessible, while an additional 29 percent see no housing assistance services in the community;
- 2 Seventy-seven percent of participants feel that housing assistance services are of critical importance in the community. Additionally, when housing services, such as flexible funds are available they are typically limited to a one-time use or restricted to once every six-months;
- 3 Utilities assistance services are also seen as available but not accessible (48 percent) but critically important (40 percent) in the community; and
- 4 Twenty-nine percent of participants feel that cash assistance (monies available to assist with rental needs, utilities, groceries or other family needs) is not available in their community, but they are important (57 percent).

### **Child Psychiatry Internship Program *PIP TRANSFER ITEM 23.3.1***

<b>Action Step</b>	<b>Accountable person</b>	<b>Method of Measurement</b>	<b>Benchmark toward achieving goal</b>	<b>Due Date</b>
23.3 The Division of Child and Family Services (DCFS) will participate in collaborative meetings with the University of Nevada, Reno School of Medicine to establish a Child Psychiatry Internship Program that will assist in addressing the shortage of child and adolescent psychiatrists.	Statewide Representative (1)  Rural Representative (1)  Southern Representative (1)  Northern Representative (1)	Meeting Minutes	23.3.1 The State will continue to meet with UNR School of Medicine to establish a Child Psychiatry Internship program in Nevada	June 30 <sup>th</sup> (Annually)

The University of Nevada, Reno (UNR), School of Medicine Child Psychiatry Internship program gained approval by the Accreditation Council for Graduate Medical Education and sent letters of Resident Acceptance to two Interns on Feb. 28, 2006. The two interns began working at Northern Nevada Child & Adolescent Services (the Division's residential/out-treatment facility in Reno, Nevada) on July 1, 2006. These interns spent 2 days per week at Northern Nevada Child & Adolescent Services, a State of Nevada, DCFS sponsored facility. In addition to providing direct services to children, they participated in weekly didactic sessions with a DCFS resident psychiatrist. These classroom forums allowed for presentations about treatment plans, coordinating care with therapeutic foster homes in Rural Nevada, psychopharmacology with State custody children, and treatment planning with DCFS social work staff. The interns also provide services at a Washoe County Juvenile Detention Center, Nevada Early Intervention Services, and other DCFS partner agencies.

The second year of the Child and Adolescent Fellowship builds on the basic knowledge and skills obtained in the first year. The core rotation of this second year is a continuity outpatient clinic at Northern Nevada Child & Adolescent Services (NNCAS), where the Fellows will work increasingly independently in caring for their own panel of outpatients. At

NNCAS, the second year interns will also participate in early childhood intervention, active case management, outpatient family and individual psychotherapy and intensive family-oriented community based treatment homes for children and adolescents.

Other important rotational experiences in the second year will hone the interns' skills to psychiatrically intervene with special needs children within the child welfare system in Nevada. This includes rotations at the Special Children's Clinic (for developmental disorders and mental retardation), Briarwood Treatment Center (a group home for sexual offenders) and Carson-Tahoe Hospital (pediatric consultation-liaison within a general medical hospital.) Didactic seminars for this second year of the internship will concentrate on advanced instruction in the major psychotherapeutic modalities for child and adolescents (individual psychodynamic therapy, play therapy, family therapy, cognitive-behavioral therapy, brief supportive therapy, and parent guidance), in the major developmental theories of child psychiatry, and in ethics and practice management strategies for children in State custody which will prepare the interns for practice within the State of Nevada after residency.

The UNR Child Psychiatry Internship program is fully funded through the end of the 2009/2010 academic year. The State of Nevada, DCFS, and the UNR, School of Medicine continue to discuss and support funding for the internship program beyond the 2009/2010 academic year. The recent Nevada legislative session approved a budget proposal to underwrite the internship program through the end of the next legislative biennium.

## **10. Promising Practices**

### ***Drug Courts (PIP 35.2)***

Often issues that are brought to Family and Juvenile Courts involve substance abuse by parents or children. In Clark County, the District Court-Family Division has established drug courts to aggressively address drug issues. There is the Juvenile Drug Court, which addresses the treatment needs of delinquent children who abuse drugs. The Dependency Drug Court addresses the needs of abusive or neglectful parents whose children are involved with the dependency court.

The Eighth District (Clark County) was the first Court in the nation to establish a juvenile drug court and a child support drug court. Drug courts are also being utilized in the First District (Carson City/Storey), Third District (Churchill/Lyon), Ninth District (Douglas)-Sierra Region; Second District-(Washoe); Fourth District (Elko)-North Central Region with a proposal to develop a drug court in the Sixth District (Humboldt/Lander/Pershing). The drug courts require the frequent oversight of participant(s) by the Judge or Court Master, frequent drug testing and clinical treatment services.

In Clark County, the District Court/Family Division has established the Dependency Drug Court, which addresses the needs of abusive or neglectful parents whose children are involved with the Dependency Court. Utilization of drug courts, which require the frequent oversight of participants of the Judge or Court Master, frequent drug testing and clinical treatment services, has proven very successful in terms of assisting numerous participants who are truly dedicated and committed in reaching their ultimate goal of overcoming drug abuse. Additionally, participants can provide information regarding their status in drug court, in cases where children have been removed from the home, and the court in the dependency case has a much better idea of whether reunification is a viable option for the family.

Washoe County's Family Drug Court seeks to ensure child safety by providing treatment and services to parents with substance abuse problems. The goal is family reunification when appropriate, but alternative permanency placement plans are used as needed. Washoe County Department of Social Services refers 100 percent of the court's cases. The Nevada State Legislature, 2nd Judicial District Court, Washoe Co. Department of Social Services, Foster Grandparents Program, various private foundations help to support a self-pay (sliding scale) program. The court has access to two programs, one of which provides a family housing facility, which includes men, with a target of transitioning families into permanent housing within approximately one year of entering the housing program. Graduated sanctions are used including community service, essays, increased treatment and urine testing, restrictions and civil contempt (up to 25 days in jail).

### ***Family Peace Center Project and Other Visitation Improvement Efforts***

The Family Peace Center Project is continuing in the 2nd Judicial District in Washoe County. With the initial assistance of Court Improvement Project funding, three tracks of visitations are scheduled for people from CPS, and those tracks are full all of the time. Extending hours and scheduling tracks in the evening hours have made it more convenient for families to utilize. The program is now funded by the Washoe County Department of Social Services (approximately \$49,000), and through the Safe Haven Grant that provides supervised visitation to families where domestic violence occurs.

As a result of the success in the 2nd District (Washoe), a similar effort was begun in the 9th Judicial District (Douglas)

through the CASA program called the Visitation Exchange Program.

**Project WIN for Children and Families - Wraparound In Nevada (PIP 23.9)**

The Wraparound process is a strength-based, family centered model used to improve the quality of life for youth and families who have complex needs. The model is not a program or type of service but is intended to be a unified response around a common mission that allows for youth and family participation. The use of wraparound services results in individualized planning through the support of unique community services and natural support systems.

This model was introduced to Nevada in the spring of 2002 in response to the Nevada State Legislature (Assembly Bill 1) and as a support to youth in the child welfare system with complex mental health needs. The initial implementation involved a total of 33 youth with an additional 294 youth who were included in the second phase-in period. Since that time, Nevada has increased its statewide capacity to provide wraparound support and services to an average of 500 SED children per month.

DCFS' nationally recognized "promising practice" program, Wraparound in Nevada (WIN), provides intensive community-based services to SED children who are in the custody of the child welfare system. These behaviorally challenged youth come from families who struggle with complex personal challenges in addition to difficulties keeping their children safe and free from harm. In addition to addressing mental health needs, services support the achievement of permanency for these youth through reunification with their families, guardianship with relatives, adoption or successful emancipation in all three regions statewide. Mental health care for these

youth is essential to the success of achieving permanent placements. The WIN program achieves powerful outcomes in unique ways.

WIN focuses on the strengths of each family member to move them forward to independence and self-sufficiency without life long dependence on mental health professionals. Families become equal participants in their plan of care as they move towards independence. WIN uses common sense interventions to help families overcome barriers to caring for SED children at home. Helping families address basic needs (e.g. housing and transportation) and reestablishing community support from extended families, friends, and the faith community are two primary ways that WIN empowers families to achieve independence and meet the needs of SED children.

- WIN ensures that all community members and professionals work together in a seamless way to streamline services, avoid duplication of services, and communicate clearly with families and children. WIN ensures that relative, guardians, and adoptive parents identify needs and find solutions that insure permanency when a child cannot return home.
- Untreated Serious Emotional Disturbance in children is a major reason for disrupted permanency. The following outcome data exemplifies the point that addressing mental health needs is essential to achieving these permanent placements for youth in the child welfare system.
- 68.5% of the 216 youth discharged from WIN achieved permanent living environment placements.
- 43.1% of the 216 children discharged from WIN were placed back in their family homes.
- 25.4% of the 216 children discharged from WIN were placed with guardians, relatives, and adoptive homes or were established in independent living.

**Section IV. Existing Service Description**

**A. Services Promoting Safe and Stable and Families**

**Title IV-B Subpart 1 Amounts:**

Prevention and Support :	\$1,088,785
Crisis Intervention	\$723,348
Foster Care Maintenance Payments	\$204,636
Administrative & Management	\$224,085
Total 2005	2,240,854

\*The State did not utilize Title IV-B Subpart 1 funds for Adoption Assistance or Child Care.

## **Definitions of Title IV-B Subpart 2**

### **1. Family Preservation Services**

The State provides Family Preservation Services programs which are characterized by high intensity immediately accessible treatment and ancillary services for at-risk children and families. The goals of Family Preservation Services' programs are to reduce the risk of child abuse/neglect and thus eliminate unnecessary out-of-home placement of children and to strengthen the family to better care for the developmental needs of their children. Program staff provides crisis intervention, clinical assessment, and family preservation services to a protective services population in six areas: Washoe County, Clark County, Carson City, Fallon, Elko and Ely. The parents have better supports and resources to deal with stress and crisis within the family.

October 1, 2004 marked the culmination of years of work and planning to integrate child welfare services into a single agency. The full integration and move of over 150 staff and multiple programs from the State to the County was initiated to streamline operations and result in better outcomes for children. Foster care and adoption services are now a part of the same agency as child protective and shelter care services. Located together, duplication, disruptive moves and delays are minimized, and the timely placement of children in safe homes is facilitated in this arrangement.

Clark County Department of Family Services (CCDFS) continues to utilize an array of prevention services to help children at risk of abuse and neglect to remain safely with their families. These services include flexible funding to support families in areas such as rent, utilities, apartment deposit, bus tokens, food vouchers and other basic needs, and contract services with community agencies. Drug court remains another option for families where substance abuse is a contributing factor to child abuse or neglect. CCDFS maintains collaboration with community agencies, such as Safe House and Safe Nest, to provide services to high-risk families of domestic violence. Parent training classes are offered through numerous community agencies, as well as the Clark County Parenting Project.

CCDFS' Caring Communities Project, Systems of Care Initiative and Children's Bureau grant, utilizes Kin Liaisons to engage relative caregivers in the child welfare system. Kin Liaisons provide training, information, support, advocacy and networking opportunities for relative caregivers in order to help them achieve the objectives of improving the safety, permanency and well-being of children placed with kin.

Through a partnership with Nevada Health Centers, a federally qualified multi-site health center, expanded medical and dental services are provided to children in the custody or children who have open child welfare cases, as well as other children in the community in need of these services. Services were initiated at Child Haven, the public shelter, and currently mobile dental services have been expanded through the Miles for Smiles program to include dental screenings, varnishing, education dental examinations and treatment. Medical services for our Child Haven and Foster Care children has also expanded as Nevada Health centers has added a Pediatrician and a medical support team to coordinate EPSDT exams, immunizations follow up medical appointments and sick children appointments, and dental screenings, vanishings and education. The Miles for Smiles bus provides dental exams and treatments. Services are available to clients of the NFSC partner agencies.

### ***Washoe County***

Washoe County Department of Social Services continues to contract with an array of service providers for substance abuse evaluations and testing, and psychological evaluations, testing and services, and independent living services (including before and aftercare case management and hard services). The use of Human Services Support Specialists (para-professionals) promotes family well-being by providing in-home life-skill services while assisting the family in connecting to community services. Washoe County utilizes Title IV B and TANF funds for its Family Preservation and Family Support services (\$70,000 of IVB funds and \$434,000 of TANF funds).

Washoe County Social Services has a full-time Registered Nurse and an Advanced Practitioner of Nursing position trained in forensic evaluations and child death reviews. These nursing services provide Social Workers access for assistance with assessments of neglect; general health and welfare assessment regardless of a child's legal status; and developmental assessments. In addition the Health Department has placed a Public Health Nurse II in the permanency planning program area for a total of 32 hours per week. This position serves on multi-disciplinary teams and supports biological and foster parents in the medical care and education of dependent youth. The Nursing Unit works collaboratively with Social Work staff and community medical professionals and providers in the assessment of child abuse and neglect.

### ***Division Rural Region***

Community providers receiving IVB funds are a primary source for pre-placement services for the Division's Rural Region.

The DCFS Rural Region Intensive Family Services staff, which provides both clinical assessments and home-based family preservation services, is also a significant pre-placement service. State Rural Mental Health Clinics are responsible for providing children's mental health services in the Rural Region. The Rural Region also has four full-time Family Support Workers that are utilized similarly to the Human Services Specialist positions in Washoe County to provide additional needed support to families. The 2005 Legislature allocated 15 positions to enhance the Rural Region's service delivery capability. Two Social Work Supervisors, 11 Social Workers and two Support Staff were funded. Recruitment and retention of licensed social work positions is an ongoing challenge in rural Nevada.

Other services utilized by the Rural Region include services available through community based non-profit agencies to provide substance abuse counseling, domestic violence interventions, truancy, tutoring, parenting and other prevention programs for children.

County welfare programs and/or other community based resources are frequently accessed for temporary housing, vouchers for clothing, food, gas, utilities, transportation and other needed services. Community coalitions exist in many Rural communities in an attempt to increase availability and accessibility through coordinated efforts between public and private agencies.

### ***Promising Practices***

***Family Preservation Services*** - The State has operated Family Preservation Services (FPS) existing in nine sites throughout the state for over 10 years – Las Vegas, Mesquite, Pahrump, Elko, Fallon, Carson City, Hawthorne, Wells and Reno. Services, like other FPS programs, are brief, intensive, home-based and family centered. A longitudinal study of FPS began in 1998 and spanned 4 years of data collection. What has emerged from the longitudinal study is a database that contains information on 488 families and 742 children. Outcomes reflect that over 90 percent of the children remain safely in their homes 12 months after FPS services are terminated. As part of the integration of child welfare services, FPS services in Washoe County are now provided by WCDSS and in CCDFS.

***Washoe County In-Home Support Services*** - The Washoe County Human Services Support Specialist (HSSS) program provides in-home support services. There are two levels of HSSS services. A HSSS II provides services to families, regardless of the children's legal status, at the direction of an assigned social worker. The objective of a HSSS II is to enhance household management skills through budgeting, parenting education, transportation etc., in conjunction with creating household stability by connecting families with community based programs (NSWD, Family Resource Centers, Medicaid, etc.).

The second category is called a Senior HSSS. Although service provision is the same, the primary distinction is that a Senior HSSS is the assigned case manager. The Department involves a social worker at the onset of the case to determine the level of intervention necessary. If the family is considered to be at low to moderate risk and is willing to voluntarily participate in preventative services, a Senior HSSS is assigned. The HSSS program works with families for three to twelve months to ensure successful transition from support and assistance to self-sufficiency.

### ***Clark County after Hours Unit-***

As of February 28, 2007, Clark County has established a mechanism for a 24 hour, seven day a week, child protection response system staffed by caseworkers to respond to hotline calls in Clark County. Currently this system has been implemented and fully staffed for 2 shifts covering the hours of **8:00 a.m. to 12:00 a.m.** The graveyard shift will have the same procedures once fully staffed.

#### **Progress to Date Status:**

- County policy and protocol was developed for a 24 hour, seven day a week child protection response team to respond to Hotline calls (currently a.m. and p.m. shifts operational, graveyard shift in recruitment phase).
- Children's Advocacy Center (CAC) is being analyzed and operational functions changed where needed.
- Obtained TANF/EA funding to help support additional 24/7 intake response plan.
- State requested and received additional budgetary authority to transfer additional funds to Clark County to amend the Clark County Cost Allocation Plan to include TANF/EA as a funding source for investigative case management services.
- Amended the inter-local agreement between DHHS, Division of Welfare and Support Services and Clark County DFS increased TANF funding.
- Clark County presented the intent of the 24/7 response plan and requested funding for staffing to add 3 units of the Emergency Response Team and an additional staff (including 4 CPS investigative units) to reduce

worker caseload size to the Clark County Board of Commissioners and were approved.

- Clark County has developed Memorandums of Understanding with all Clark County law enforcement agencies outlining the protocol for joint responses to reports of child abuse and neglect for the use of the Children's Advocacy Center for forensic interviewing.
- Developed and implemented a policy and protocol for the 24/7 emergency placement process for children who can be placed directly with relatives or a foster family that includes locating available relative and approving temporary placement rather than admitting them to Child Haven or other shelter care facilities.
- A protocol was developed for Clark County Department of Family Services to report to the State, daily, the number of children per cottage (including shelter homes) and to continue recording all placement moves at Child Haven on/off site (cottages, shelter homes, foster care, relative placements and reunification with parents) via UNITY.
- A placement move report is submitted to the DMG monthly summarizing the daily population of Child Haven and all placement moves that occurred within the last 30 days (calendar month).

State facilitates and monitors the increased use of the Children's Advocacy Center and use of sensitive forensic interviewing protocols for children in Clark County through a monthly report submitted to the DMG. The State has also included the emergency response system into the QI instrument to assess compliance and timeliness of response.

Washoe Department of Social Services Adoption Program and the Clark County Child Advocacy Center continue to utilize trained clinical staff to support families' adoption of children with emotional/behavioral needs. This service combined with the development of a "transition" case plan is a promising practice designed to better support and prepare both foster-adoption and stranger adoptions; and to increase the success of the child's placement.

### **Visitation**

1. The Division is dispersing the caseworker visitation funds to the three jurisdictions (Washoe, Clark, and the Rural Region) to fund additional positions to expand caseworker visitation capacity, fund overtime for caseworkers to increase the number of children visited, complete appropriate paperwork in a timely manner and to purchase needed equipment to facilitate caseworker visits.
2. In response to recent federal legislation P.L. ACYF-CB-07-08, the Information Management System (IMS) has developed a monthly report which tracks caseworker visitation as well as visit location based on the federal requirements listed. The new Federal guidelines [http://www.acf.hhs.gov/programs/cb/laws\\_policies/policy/pi/2007/pi0708.htm](http://www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2007/pi0708.htm) were used to determine the monthly visitation and in-placement visitation compliance rates. In particular:
  - Children who have been in custody for a full calendar month during the report period are included in the compliance calculations "Custody Visit Months" and "In-Placement Visit Months" are calculated and displayed.
  - Children who have more than one foster care episode, whether under same Person ID or not, are included only once in the report. They are displayed in the report under the organizational unit that handled the most recent custody during the report period.
  - Children who are placed out of state are included in the population.
  - The report now displays the number of visits by any Nevada worker.
  - The report shows the monthly visitation and in-placement visitation compliance percentage goals.
3. This report has established a baseline. The Division will monitor compliance monthly and has added caseworker visitation to the Decision Makers Group (DMG) agenda monthly to discuss strategies to share the information with the jurisdictions and increase compliance. This monitoring schedule will allow the state to intervene and/or assess whether the state is improving monthly in order to meet the federal compliance rate of 90% by 2011. The caseworker contact with children, parents and caregivers policy has been revised and is located in Appendix G of this document. The anticipated approval month by the DMG for this policy is November 2007. Staff will continue conducting monthly meetings with IMS to increase reporting mechanisms and accurate tracking abilities.

DCFS was informed a program instruction for case worker visitation is being developed by the Children's Bureau, and

once the State receives further clarification, the report can be reformatted if needed to ensure federal compliance.

**Title IV-B Subpart 2 Grantees by Funding Category and Region for Federal Fiscal Year 2006**

Sub-Grantee Name and Region	Family Support	Family Preservation	Time-Limited Family Reunification	Adoption Promotion/Support
Clark				
Bridge Counseling, Las Vegas		X	X	
Clark County Dept. of Family Services - Diligent Search, Las Vegas				X
Nevada Children's Center, Las Vegas				X
Virgin Valley FRC, Mesquite	X	X		
Women's Development Center, Las Vegas	X			
Adoption Exchange, Las Vegas				X
Washoe				
Children's Cabinet, Incline Village	X			
Children's Cabinet of Reno	X	X		
Family Counseling Services, Reno			X	
Sierra Association of Foster Families, Reno	X	X	X	X
STEP 2, Reno		X		
Washoe Co. FRC Coalition, Reno	X	X		
Rural				
FRC of Northeastern Nevada, Elko	X	X	X	
FRIENDS FRC, Fallon	X	X		
Hawthorne FRC, Hawthorne	X	X	X	X
Little People's Head Start, Ely	X			
No to Abuse, Pahrump	X	X	X	
Ron Wood FRC, Carson City	X	X		
Wells FRC, Wells	X	X		

The following information addresses new individuals serviced and their service categories during the past year, Statewide.

	Northern Region (Washoe County)	Rural Region	Clark County
New individuals served	8485	2307	2471
New Families Served	2644	802	502
New Children Served	5424	1485	2064
New Individuals with disabilities	690	135	134
Single Heads of Households	919	423	157

**Non-Supplantation:** Title IV-B Subpart 2 base amount for 2005 was \$1,767,574. The state does not have the Title IV-B subpart 2 base amount for 1992 due to the record retention schedule. State Fiscal Year 1992 data indicates funds for family support and family preservation services was \$955, 455. This data will be used to meet the Supplantation Prohibition

#### **Provision of Services for IV-B funds**

##### **Washoe County**

*Children/Youth Development Services-* Child Care, Child Development Classes / Activities, Mentoring Programs, Teen/Youth Support Group, Tutoring, Day Care Assistance and Playgroups.

*Health Service-* CPR Training, Nutrition Classes, Health Education and Health Screening.

*Information and Referral Services-* Referrals to Outside Agencies, Community Awareness Campaigns and Resource Libraries.

*Life Skills/Development Training-* Budget/Financial Counseling, GED Classes, Life Skills Group, Employment Training, Homemaker Services / Training, Literacy Training, English as Second Language (ESL) Classes, Job Search / Placement Assistance and Parenting Classes / Training.

*Support Services-* Assessment Services, Crisis Intervention, Home Visits, Respite, Case Management, Domestic Violence Services, Individual Counseling, Support Groups, Client Advocacy, and Family Counseling, Relative Searches and Therapy.

*Basic Needs Services -* Child Safety Seats, Transportation Assistance, Clothing, Housing, Utility Assistance, Food, Rental Assistance and Other Basic Needs that include the following:

- Home-based crisis intervention and counseling services for families with children who have been



removed from their homes or who are at imminent risk of removal due to family issues including domestic violence, poverty, substance abuse;

- Home-based homemaker services to prevent removal of children;
- Services to Spanish-speaking families;
- Washoe County's Child Protective Services (CPS) Family Assessment;
- Family counseling/therapy (bilingual, home- or center-based);
- Prevention/education services; and
- Advocacy and assistance for families with children with disabilities
- Families with children having special health care needs;
- Transient/homeless services to families;
- Family visitations;
- Medical and dental care; and substance abuse outpatient and residential treatment for women with one child, including, transitional housing, life skills training, and parenting.
- Statewide Sexual Abuse Summer Camp for children.

During the last RFP process and funding cycle, which ends June 30<sup>th</sup>, 2007, the state was successful in obtaining proposals from additional applicants. This resulted in growth in the number of sub grantee recipients who have been able to expand and enhance their programs through the provision of additional services in this service area.

The Division is currently reviewing proposals for the upcoming three year funding cycle, which will start July 2007. Through a thorough review of available community providers, more applicants submitted proposals to provide IV B services than in any previous funding cycle.

Summary of services provided in the Rural Region (all counties except Washoe and Clark) The following information addresses new individuals serviced and their service categories during the past year.

### **Rural Region**

*Children/Youth Development Services*-Child Development Classes/Activities, Mentor Programs, Teen/Youth Support Group, Playgroup, Tutoring, Child Care, Development Screening, Pre-Kinder Classes and Day Care Assistance

*Health Services*- Nutrition Classes, CPR Education, Health Education and Health Screening.

*Information and Referral Services*- Referrals to Outside Agencies, Community Awareness Campaigns and Resource Libraries

*Life Skills/Development Training*- Budget/Financial Counseling, GED Classes, Life Skills Group, Employment Training, Homemaker Services/Training, Literacy Training, English as Second Language (ESL) Classes, Job Search/Placement Assistance and Parenting Classes/Training.

*Support Services*- Assessment Services, Crisis Intervention, Home Visits, Respite, Case Management, Domestic Violence Services, Individual Counseling, Support Groups, Client Advocacy, Family Counseling and Relative Searches.

*Basic Needs Services*-Child Safety Seats, Transportation Assistance, Clothing, Housing, Utility Assistance, Food, Rental Assistance and Other Basic Needs that include the following:

- Family Assessment Services (formerly CPS Differential Response Services) to families referred to Title IV-B Funded community-based programs by Division;
- Child Protective Services (CPS). FASS services include family preservation services, including family assessment and case management;
- Housing and services for homeless families;
- Marriage and family therapy;
- Basic education;
- Job skill training;
- Dental and medical care;
- Family activity evenings;
- Family visitation; and
- Rural Homemaker Services.
- Rural Region responded to the RFP to expand existing services in three programs, and add one new program in

a rural community where these services were previously lacking.

## **Clark County**

*Children/Youth Development Services-* Child Development Classes/Activities and Teen/Youth Support Group.

*Health Services-* Nutrition Classes and Health Education.

*Information and Referral Services-* Referrals to Outside Agencies, Community Awareness Campaigns and Resource Libraries

*Life Skills/Development Training-* Budget/Financial Counseling, GED Classes, Life Skills Group, Employment Training, Literacy Training, English as Second Language (ESL) Classes, Job Search/Placement Assistance and Parenting Classes/Training.

*Support Services-* Assessment Services, Crisis Intervention, Home Visits, Case Management, Domestic Violence Services, Individual Counseling, Support Groups, Client Advocacy, Family Counseling, Relative Searches and Therapy.

*Basic Needs Services-* Transportation Assistance, Clothing, Housing, Food, Rental Assistance and other Basic Needs that include the following:

- Services to minority families such as ESL classes and translation services;
- Home- and center-based assessment, counseling/treatment services for families with children at risk of removal due to family issues including domestic violence, poverty, substance abuse, etc.;
- Case management services for families with children having behavioral and emotional problems;
- Respite care including recruitment and training of respite care providers and respite reimbursement for low to moderate-income families having one or more children with a disability;
- Family self-sufficiency mentoring programs (for both youth and their families);
- Leadership skills development; after-school and parenting programs (bi-lingual and teen parenting);
- Domestic violence counseling;
- Transitional housing services including case management services, supportive services, and education for women with children;
- Intensive services to families referred by Division/CPS with first contact at the courthouse immediately after the court hearing; and
- Services to locate relatives of children for placement as an alternative to placing the child(ren) in foster care.

As a result of the last RFP process and funding cycle which ends July 2007, the Southern Region has increased services for adoption resources in Clark County, which will also provide statewide training services. The training will address issues specific to the Program Improvement Plan to help improve practice and build State capacity to provide adoption related services. Training will address needs of potential adoptive parents through attendance and completion of the PRIDE (Parent Resources for Information, Development and Education) curriculum. This is designed as a pre service training of foster and adoptive parents. Training for DCFS staff members and mental health care providers will address issues relative to teen adoption. The new service provider will function as an adoption resource and provide support and advocacy services for state and county CPS workers and potential adoptive parents. The Southern Region has also seen an expansion of available Title IV-B Subpart 2 services through increased Adoption Promotion and Adoption Support.

Statewide, Nevada has experienced expansion of Title IV-B Subpart 2 services in seven sub grantee programs and the addition of one new program providing Title IV-B Subpart 2 services to a rural geographical portion of the State. These expansion activities enhance community based service provision being available to Nevada's families and children.

During the past year the sub grantees statewide have provided the above services to 13,263 new individuals, 3,948 new families, 8,973 new children, 959 new individuals with disabilities and 1,499 new single heads of household.

## **B. Estimated Expenditures for Services/Future Funding**

Based upon previous annual expenditures it is anticipated that approximately \$345,710 will be available for each of the

service areas. Services will be provided in the four areas under the Promoting Safe and Stable Families Program: Family Preservation; Family Support; Time-Limited Family Reunification; and Adoption Promotion and Support Services in accordance with Federal expenditure guidelines.

<b>IV-B Funding SFY 2008 through 2010</b>		
<b>Preference</b>		
<b>Clark County</b>	<b>Washoe County</b>	<b>Rural Counties</b>
Family Preservation	Family Counseling	Mental Health Assessments and Treatment
Homemaker Services	Substance Abuse Treatment	In-Home Family Preservation Services
Substance Abuse Assessment and Treatment		
Mental Health Assessments		
Domestic Violence Response		
Home Studies and Social Summaries		

<b>Original Funding and Distribution</b>	<b>Revised Funding and Distribution</b>
Total Award: \$1,382,840	Total Award: \$1,382,840
	DCFS Rural Region = \$153,306
	Award Available: \$1,229,534
<b>Regional Funding</b>	<b>Regional Funding</b>
South - Clark (70%) = \$967,988	South - Clark (70%) = \$860,674
North - Washoe (20%) = \$276,568	North - Washoe (20%) = \$245,907
Rural (10%) = \$138,284	Rural (10%) = \$122,953
<b>Categorical Funding</b>	<b>Categorical Funding</b>
Family Support = \$345,710	Family Support = \$345,710
Family Preservation = \$345,710	Family Preservation = \$345,710
Time Limited Reunification = \$345,710	Time Limited Reunification = \$345,710
Adoption Support = \$345,710	Adoption Support = \$345,710
<b>Revised 06/12/07</b>	

#### **Gaps in Services**

The most notable gaps in services are in the area of Adoption Promotion and Support. The State is challenged with a lack of qualified individuals providing needed adoption support services. The State was successful in sub granting funds to the Adoption Exchange, whose corporate office is located in Colorado and has an office in Las Vegas, who provides training to potential adoptive parents, and social services staff members. Adoption Exchange addresses PIP (Program Improvement Plan) items relating to Permanency through Adoption, Permanent Family Connections for Teens and AdoptCare Network for Mental Health Professionals. They function as an Adoption Resource Support Services provider for Clark County and Northern Nevada.

The Adoption Exchange has been involved with DCFS staff to complete curriculum revisions and establish a schedule for training. They have proceeded with hiring of an adoption resource coordinator, update and maintaining a lending library,

publishing a semiannual newsletter, provision of ongoing support services, marketing/outreach of services available and onsite consultation in Clark County and northern Nevada.

As a result of the CFSR, the State has implemented a Program Improvement Plan (PIP), which addresses several areas of need and identifies specific action steps to address these gaps. Additionally, a statewide service array assessment process is planned. Clark County's service array assessment is underway utilizing the Clark County Citizen's Advisory Council as the steering committee for the process. Several stakeholder meetings have been conducted and several more are planned.

Adoption issues in the State include:

- Early identification;
- Diligent search;
- Assessment of parents and non-custodial parents; and
- Collaboration with other involved agencies and programs
- Addressing these issues will be accomplished in a variety of ways, including utilization of the Adoption Exchange to complete the following activities:
  - o Training Services i.e. adoption curriculum, Family Connections for Teens Curriculum and Network Training; and
  - o Adoption Resource and Support Services including: resource coordinator, steering committees, lending library, web page development, newsletter, onsite consultations, marketing/outreach services and ongoing support services.

Planning will continue to address the need for placement, adoption or other planned permanent arrangements. The Administrative Office of the Courts and the Court Improvement Project (CIP) continue to collaborate to identify barriers to permanency and develop strategies to address and improve permanency issues statewide. State and County child welfare agencies continue to establish planning strategies to reduce child welfare caseloads. Standardized policies and practices have been implemented with regards to adoption of older children. Regional recruitment and training efforts will be improved to enhance identification and retention of potential adoptive parents. The State will continue to address adoptive subsidies, standardized social summaries, foster and adoptive home studies, statewide case planning, and standardized practices for Termination of Parental Rights (TRP) and relinquishments.

Education - reviewers determined that the State had not made diligent efforts to meet the children's educational needs. Efforts to address child educational needs is noted in (Item #21, action steps: 21.1, 21.2, 21.3, 21.4, 21.5 and 21.6) of the PIP.

Specific action steps address the following areas:

- Standardized documentation of educational and medical services received by children
- Standardized policy to address caseworker visits with the child and frequency of visits; and
- Standardized practice guidelines to assure home visits are quality visits.

The PIP addressed development of a Case Management Model of best practices for:

- Assessment;
- Family engagement and collaborative planning;
- Establishment of a statewide case planning process; and
- Review of statutory requirements to inform foster parents about foster children's needs.

Physical Health - reviewers determined that there was clear evidence of health-related needs that were not being addressed by the State Identified areas of concern are as follows:

- Insufficient dentists who will agree to take new patients;
- Dental health crisis in some areas; and
- Doctors refusing Medicaid children due to lack of reimbursement.

The PIP identified the following action steps (Item # 22, action steps: 22.1, 22.2, 22.3, 22.4, and 22.5) to ensure physical health is assessed for children placed in foster care:

- Develop standardized policies for caseworker visits and frequency to ensure child's safety;
- Develop strategies to ensure foster parent retention through the usage of foster parent surveys;
- Review statutory requirements to inform foster parents about foster children's needs; and
- Standardized policies and protocol for documentation of educational and medical services received by foster children.

Mental Health - reviewers determined that geography and availability of services were two of the most commonly cited barriers in mental health services

The PIP has identified the following action steps (Item #23, action steps: 23.1 and 23.2) to address those instances where the mental health of the child were partially or not at all met:

- The State will continue working with Medicaid to redesign children's behavioral health services and increase accessibility and availability; and
- The State will request additional medical professionals for the review process to ensure Nevada meets federal Medicaid standards for medically necessary treatment.

The following action steps (Item #23, action steps: 23.3, 23.4, 23.5, 23.6, 23.7, 23.8, 23.9, 23.10, 23.11 and 23.12) have been identified to address this specific area or are reflected in the combined PIP and plan goals and objectives attached to this report:

- Collaboration with the university to establish a child psychiatry internship program,
- Utilization of psychiatric interns from the university,
- Expand recruitment of mental health professionals,
- Promote access to appropriate services for children and families to meet mental health needs, standardize policy for caseworker visits and frequencies to ensure the child's safety,
- Assure well being and educational needs are being met,
- Revise agreement with Division of Mental Health and Developmental Services to support youth with mental health and developmental disabilities,
- Convert temporary contracts for Wrap Around in Nevada (WIN) to permanent state positions,
- Additional clinical staff to reduce wait lists for outpatient and early childhood mental health services,
- Expand the Division's Higher Level of Care Contract Management Unit to move toward performance based contracts and
- Improve service array through strategic planning to maximize funding and development of a competent workforce trained in evidence based practice.

Another gap exists for substance abusing pregnant and parenting mothers in Clark County and the Rural Region who need more treatment beds that allow them to stay with their children. The current provider reports that existing beds are filled at capacity and that there is a 4-6 month waiting list for these services. A lack of available substance abuse assessment at the child welfare agency and regular collaboration between Clark County Department of Family Services and substance abuse treatment providers contributes to treatment fragmentation.

### **Healthy Marriages/Responsible Fatherhood**

When the opportunity to apply for funding to promote responsible fatherhood that supports healthy marriage activities, responsible parenting and foster economic stability becomes available, the Division will be applying for the applicable areas to provide these types of services. We do not have these initiatives in the State.

### ***Evaluation of Sub-grantees***

The Human Development and Family Studies Department of the University of Nevada, Reno has worked with sub grantees to develop and report on measurable outcome goals. (Appendix E) Each sub grantee has developed two specific outcome measures with technical support from Division that relate directly to the PIP and their individual programs and goals. The sub grantees submit monthly reports on the secure web system that has been developed for entering monthly statistical information and making their monthly requests for reimbursements. The University has developed the Child and Family Services Analysis System (CFSAS) to provide statistical evaluation and analysis to the Division through a web based system that is available 24 hours a day, seven days a week, making Department, Division, State and Federal reporting available on a real time basis. Online reporting continues for fiscal and programmatic statistics and provides the Division with monthly opportunities to review each program individually and follow up with sub grantee staff, when appropriate.

During the past year the Division has successfully implemented annual programmatic and fiscal reviews of all Title IVB/2 sub grantees. This has provided a means of evaluating programs at the community level and dealing with specific sub grantee issues. With the review system in place, it has allowed for the Division to provide technical assistance to sub grantees and based upon review results, provide follow up assistance to assure that community level programs are provided with an environment where they can expand and enhance their services through interaction with Division staff.

**C. Recruitment and Retention of Medicaid Providers** **PIP TRANSFER ITEM 35.1.2**

Action Step	Accountable person	Method of Measurement	Benchmark toward achieving goal	Due Date
35.1 The State will promote access to appropriate services for children and families to meet their physical service needs by coordinating with the Division of Health Care Financing and Policy (DHCFP) to develop strategies to recruit and retain Medicaid providers.	Statewide Representative (1)  Rural Representative (1)  Southern Representative (1)  Northern Representative (1)	CFSP and APSR Reports	35.1.2 Identified strategies will be incorporated into the Child and Family Services Plan and reported in the Annual Progress and Services Report	June 30 <sup>th</sup> (Annually)

Nevada Medicaid's population is segregated into Medicaid Managed Care and Medicaid Fee-for-Service (FFS). This is dependent upon the eligibility category and regions within the state. Under FFS there are several processes and initiatives that have been put into place to develop and retain Medicaid providers. Nevada awarded their fiscal intermediary contract for the Medicaid Management Information System (MMIS) in 2003 to First Health Services Corporation (FHSC).

The following processes are in place to streamline the enrollment process for providers:

- There are contractual standards that FHSC must adhere to for enrollment and processing of new providers. Currently this standard is contractually enforced with a five day turn-around.
- There is a streamlined enrollment process for providers who are located out-of-state and have seen a Medicaid recipient due to an emergency.
- FHSC is contractually obligated to perform provider trainings on billing submission processes. This is to reduce billing errors from providers, and may result in faster reimbursement.
- Electronic billing software is available to providers at no-charge. This allows for faster claim submission and, in turn, quicker reimbursement.
- On a monthly basis, FHSC provides Nevada Medicaid a key indicator report which trends the enrollment numbers of Nevada Medicaid providers.

Additionally, Nevada Medicaid, DCFS, and FHSC have provided monthly training and recruitment workshops for community-based and inpatient mental health services to both children and adults under a combination of mental health rehabilitation, medical/clinical, and institutional authority. These training and recruitment workshops assist providers to offer services in the least restrictive, most normative setting possible within a community environment and/or in the recipient's home. Providers indicate that this service delivery model increases their commitment to remain Medicaid enrolled contractors.

Of course, all services must be documented as medically necessary and appropriate and must be prescribed on an individualized Treatment Plan. Mental health rehabilitation assists individuals to develop, enhance and/or retain psychiatric stability, social integration skills, personal adjustment and/or independent living competencies in order to

experience success and satisfaction in environments of their choice and to function as independently as possible. Interventions occur concurrently with clinical treatment and begin as soon as clinically possible.

In 2003, Nevada Medicaid increased OB/GYN rates and developed a pediatric enhancement rate for providers. This was to assist in retaining current providers. In addition, for inpatient services that must be referred to out-of-state providers, Nevada Medicaid will negotiate service specific rates for these providers.

Under the Medicaid Managed Care environment the Managed Care Companies are responsible for both the retention and recruitment of providers. The following narrative details specific initiatives and policies that are in place.

During the 2001 session of the Nevada Legislature, SB 133 was passed which created three new licensing options specific to dentists. These include a temporary license option, a geographically restricted license option, and a specialty license option. To be eligible for the temporary license option, a dentist must have had a license in another state for at least five years. To be eligible for a geographically restricted license option, a dentist must practice in a non-profit organization or in a county designated as underserved. To be eligible for the specialty license option, the dentist must be a diplomat of a specialty licensing board and must limit practice to the specialty. With the passage of SB 133, Nevada now has a total of six types of dental licensure options. In addition to those identified above, license options also include the restricted license, the unrestricted license, and limited license.

In 2002, Nevada Medicaid committed to an alternative delivery and payment structure for dental services in Las Vegas, the State's dominant population center. Nevada Medicaid implemented managed care delivery through Health Plan of Nevada and NevadaCare. The new University of Nevada Las Vegas (UNLV) School of Dental Medicine was utilized as lead provider and de facto network manager. UNLV operated dental clinics but had only a limited infrastructure to serve 85,000 Medicaid and SCHIP members (e.g. staff, IT, call center). There was a need to conduct a formal Readiness Review in order to achieve a smooth implementation and satisfy CMS requirements. The state considered alternative approaches to implementing its dental improvement strategy.

The program was launched February 2002 and the model achieved partial successes. The availability of specialty care was improved, Medicaid dental care was integrated with the contracted managed care plans, and operational components, such as payments, tracking, and performance reporting, worked well.

The model did not achieve critical success, however. Dental utilization did not increase, service quality was inconsistent, appointment intervals and wait times were not improved, and the number of available dental providers did not increase significantly.

A post implementation dental performance report in August 2003 confirmed that the new dental delivery strategy was not keeping up with Medicaid's needs or meeting targets. Alternative approaches were considered, with the goal of significantly increasing Medicaid dental utilization. It was decided that the Medicaid managed care plans were willing and potentially able to establish larger dental networks based on community practitioners. These new approaches would not have been possible, due to provider availability, had not SB133 passed during the 2001 legislative session.

Plans for expansion began, targeting 2005 as the goal date of implementation. The EQRO was central to the planning and readiness assessment of the next execution of dental delivery, providing oversight of provider credentialing, verifying quality assurance, and assessing the scope and size of the provider networks.

The planning process was easier than the initial conversion due to internal readiness of the managed care plans and experience of state staff. One managed care plan employed a network manager to recruit community practitioners. The other plan recruited from its existing commercial network and directly to additional community practitioners.

Currently, both Medicaid managed care plans reimburse their dental providers at a fee for service rate. The UNLV School of Dental Medicine continues as a contracted network provider for one of the managed care plans. Since July 1, 2005, the number of participating Medicaid dentists in Las Vegas has increased by 192%.

Number of participating dentists:

Clinic Based (Pre-network): 56

Community Based (Post-network): 164

Since July 1, 2005, Medicaid dental utilization in Las Vegas has also increased by 68%. During the initial 3-month period following expansion, the rate of utilization increased by 102%. Recipient satisfaction has increased as well: 89% or surveyed recipients reported receiving routine care within 45 days. 68% rated the ease of making a telephone appointment as "Excellent" or "Very Good." And 71% rated the overall care received from dentist as either "Excellent" or

“Very Good.”

Effective November 1, 2006, the Medicaid managed care plans will be establishing larger dental networks and expanding to urban Washoe County in Northern Nevada to serve the Medicaid and SCHIP populations.

**Methodology to determine Network Adequacy in Managed Care** - The HMO must adequately demonstrate through documentation, and staff interviews and conference calls that their provider Network has the capability to cover the Nevada Medicaid membership. **Twenty-Five (25) Mile Rule** - The HMO must offer every enrolled recipient a PCP or PCS located within a reasonable distance from the enrolled recipient's place of residence, but in any event, the PCP or PCS may not be more than twenty-five (25) miles from the enrolled recipient's place of residence per NAC 695C.160 without the written request of the recipient.

**PCP-To-Recipient Ratios** - The HMO must have at least one (1) full-time equivalent (FTE) primary care provider, considering all lines of business for that provider, for every one thousand five hundred (1,500) enrollees per service area. However, if the PCP practices in conjunction with a health care professional the ratio is increased to one (1) FTE PCP for every one thousand eight hundred (1,800) recipients per service area.

Use the Total Medicaid eligible population = 89,339

Determine a PCP: Membership ratio 1:1500

Required PCP's for 89,339 population  $89,339/1500 = 59.99$

For Clark County a network would need 60 PCP's each one with a capacity of 1500. Similar to the above approach one can use total Medicaid eligible for Washoe County as 15,009.

#### **Physician Specialists**

The HMO must provide access to all types of physician specialists for PCP referrals, and it must employ or contract with specialists, or arrange for access to specialty care outside of the HMO's network, if necessary, in sufficient numbers to ensure specialty services are available in a timely manner. The minimum ratio for across-the-board specialists (i.e. those who are not PCPs) is one (1) specialist per one thousand five hundred recipients per service area (1:1,500).

**Dentist-To-Recipient Ratios** - The HMO must have at least one (1) full-time equivalent (FTE) dentist per one thousand five hundred (1,500) recipients per geographic service area. The HMO's dental provider network must also include at a minimum one (1) pediatric dentist, one (1) dental hygienist, and one (1) oral surgeon. In clinic practice settings where a dentist provides direct supervision of dental residents who have a temporary permit from the State Board of Dentistry in good standing, the HMO may request and DHCFP may authorize the capacity to be increased as follows: one (1) dental resident per one thousand (1,000) recipients per HMO. The dentist shall be immediately available for consultation, supervision, or to take over treatment as needed. Under no circumstances shall a dentist relinquish or be relieved of direct responsibility for all aspects of care of the recipients enrolled with the dentist.

**Review of Twenty-Five (25) Mile Rule for Behavioral Health** - The HMO must offer every enrolled recipient a behavioral health provider located within a reasonable distance from the enrolled recipient's place of residence.

#### Clark County

All Providers - 100 percent of the estimated membership falls within the access standard

# of enrollees = 36,529 enrollees

# of members without access = 0 members (0.0 percent)

Facilities - 99.6 percent of the estimated membership falls within the access standard

# of enrollees = 36,529 enrollees

# of members without access = 139 members (0.4 percent) Example for PCP ratio in Clark County:

#### Washoe County

All Providers - 100 percent of the estimated membership falls within the access standard

# of enrollees = 6,641 enrollees

# of members without access = 0 members (0.0 percent)

Facilities - 100 percent of the estimated membership falls within the access standard



# of enrollees = 6,641 enrollees  
# of members without access = 0 members (0.0 percent)

#### Statewide

All Providers - 100 percent of the estimated membership falls within the access standard  
# of enrollees = 43,171 enrollees  
# of members without access = 0 members (0.0 percent)

Facilities - 99.7 percent of the estimated membership falls within the access standard  
# of enrollees = 43,171 enrollees  
# of members without access = 139 members (0.3 percent)

The Division continues to explore the development of a Statewide Advisory Board that will report directly to the Administrator. The Advisory Board will provide input to the Nevada Promoting Safe and Stable Families Program. Members of the committee represent state and county agencies, and community organizations serving children and families. Currently, several committee and advisory boards provide advice and make recommendations to the Division regarding child welfare programs and services. During the last RFP review, a Title IVB Steering Committee member assisted with the proposal reviews and the grant award process in addition to state and county representatives. The Division's plan is to incorporate members of the IV-B Steering Committee, Mental Health Consortium and Diversity Committee and representatives from other boards and task forces, as identified, into the Statewide Advisory Board, allowing broader representation. In addition to providing input into the CFSP, board members will have the opportunity to participate in other Division initiatives.

#### D. Quality Improvement Framework

The Quality Improvement Office conducts regular reviews of the Clark, Washoe and Rural Regions to establish the strength of child and family services provided by child welfare agencies in in-home and out-of-home child welfare cases. The QI Office conducts Quality Improvement Case Reviews (QICR) every nine months in each region (one review is conducted every three months in a different location on a rotating basis). The QICR is a qualitative review of case documents and UNITY screens that assesses caseworker and supervisory practices in the areas of child and family safety, permanency and well-being. In addition the review examines several compliance areas including documentation, supervisory oversight, case closure, and documentation of Native American heritage. The review is conducted by two member teams including one regional member (usually a supervisor) and one outside representative (from another region, the family programs office, or a community stakeholder). A minimum of 12 cases are reviewed during each review period. A total of 23 performance indicator items are examined with each case in the review. Upon completion of the review, the Quality Improvement Office provides the Regional Agency with a report outlining areas that need improvement that must be addressed in an Agency Improvement Plan (AIP). This report is then reviewed and approved by the Decision Making Group (DMG).

The Agency Improvement Plan must include action steps for the agency as a whole, action steps for supervisors, and action steps for caseworkers to address the areas documented as needing improvement in the case review. These action steps are then approved by the DMG and the steps to achieving compliance are then set in motion. The agency then takes the AIP and assigns necessary tasks at the agency, supervisory and caseworker level to achieve the goals outlined in the plan. The agency reports back to DMG on a monthly basis on the progress on each of the action items.

In the interim nine months between reviews, several other feedback loops are or will soon be in place to provide updated information at the state, agency, supervisor and caseworker level. The Quality Improvement Office is in the process of developing targeted reviews to be conducted monthly using UNITY information and reports. This information will address the 23 indicator items from the QICR and will provide feedback on documentation efforts by caseworkers and supervisors in each region. In addition, Supervisors conduct a minimum of one internal case review of each caseworker supervised and provide the Quality Improvement Office with a Quarterly Supervisory Review report, including action steps for items that have been found needing improvement. This report, in addition to any action steps outlined from the QICR report provide the supervisors with the information they need to implement more stringent monitoring systems for caseworker performance. The Quality Improvement Office has begun to internally monitor these reports and will be providing feedback directly to the supervisors and agencies on the performance indicators in this assessment.

#### E. Decision Making Process

Nineteen (19) community-based providers are currently funded across the State. The Division also funds two additional providers, Ciber and UNR Program Evaluation. The UNR program provides Program Evaluation and maintains the on-line reporting system along with provision of technical assistance to community programs. Ciber is a provider of technical assistance relative to Rural District needs. Statewide, there are 21 providers of Title IVB/2 services and support. Currently, several committee and advisory boards provide advice and make recommendations to the Division regarding child welfare programs and services. During the last RFP review, a Title IVB Steering Committee member assisted with the proposal reviews and the grant award process in addition to state and county representatives.

#### **F. Streamlining Documentation PIP TRANSFER ITEM 19.3.2**

<b>Action Step</b>	<b>Accountable person</b>	<b>Method of Measurement</b>	<b>Benchmark toward achieving goal</b>	<b>Due Date</b>
19.3 Increase time available for social workers contact with child, parents and foster parents by streamlining documentation	Statewide Representative (1)  Rural Representative (1)  Southern Representative (1)  Northern Representative (1)	Strategic Plan Developed	19.3.2 Develop a strategic plan for using wireless technology, i.e., field keyboards, documentation. Users group will review UNITY functionality to determine what changes can be made by collapsing windows or pre populating and remove repetitive functions. Streamlining documentation will be incorporated into the Child and Family Services Plan and reported in the Annual Progress Services Report	June 30 <sup>th</sup> (Annually)

PIP Item 19.3.2 The goal of the item was to utilize a UNITY Users Group for the purpose of improving UNITY functionality (decreasing duplication, collapsing windows, pre-populating windows) and increasing worker availability for caseworker contact and visitation with children, families and foster families. In the past, the State User Group was mainly attended by IT staff. This did not impact change as caseworker input was not routinely provided. This new group includes those people who use UNITY on a frequent, if not daily, basis. Group members include line staff, supervisors and managers from all three regions, UNITY IT staff and DCFS program staff. Additionally, CIP has been invited and is attending. The new Statewide Users Group plans to meet monthly to identify challenges and highlight solutions and recommendations to their regional IT staff and UNITY. Initially, the group will address Intake Screening and Investigation windows.

In addition, the Rural Region is considering using writing pens that will allow the case worker to document contacts with a specialized pen and SmartPaper, download and transform the pen's memory into documents, e-mails, tasks and appointments. The optical character recognition software learns the writers' handwriting and converts the notes into files to use in many popular applications.

## **F. Collaboration with the Courts** **PIP TRANSFER ITEMS 9.2.1 AND 28.3.2**

Goal	Accountable person	Method of Measurement	Benchmark toward achieving goal	Due Date
28.3 The state will collaborate with the Administrative Office of the Courts and the Court Improvement Project to identify barriers to permanency and jointly develop strategies to improve permanency efforts statewide	Statewide Representative (1)  Rural Representative (1)  Southern Representative (1)  Northern Representative (1)	CFSP and APSR Reports	28.3.2 Identified solutions will be incorporated into the Child and Family Services Plan and the Annual Progress and Services Report	Annually June 30th
9.2 The state will collaborate with the Administrative Office of the Courts and the Court Improvement Project to identify barriers to permanency and jointly develop strategies to improve permanency efforts statewide	Statewide Representative (1)  Rural Representative (1)  Southern Representative (1)  Northern Representative (1)	Meeting Minutes	9.2.1 Collaborative meetings with be held to identify barriers and discuss strategies i.e., family involvement in case planning, court review of caseworker visits, role of judges in allowing foster, pre-adoptive parents, and relatives to have an opportunity to be heard in court and notification of hearings. Areas identified as needing training will be addressed in conjunction with the Administrative Office of the courts and the Court Improvement Project. In addition, opportunities to provide training which are mutually beneficial to program and judiciary will be developed with shared financial resources	Annually June 30th

The monthly schedule of meetings between the Administrative Office of the Courts (AOC)/Court Improvement Project (CIP) and DCFS is ongoing. Issues requiring a collaborative approach are discussed and items of mutual concern are identified for strategic planning. Agendized at each CIP meeting is the PIP and the CIP Communication Plan which allows each entity the opportunity to exchange ideas or provide status updates.

Chief Justice Rose retired as Chair of the Court Improvement for the Protection and Permanency for Dependant Children and his position was replaced by Chief Justice William A. Maupin who has indicated a commitment to working to resolving child welfare issues affected by the Courts or vice versa. Justice Nancy M. Saitta , the newly elected Supreme Court Justice has also been asked and accepted to be an active participant and advocate, and as such is attending the National Summit on Judicial Leadership in New York in March. Also attending the Interim Court Improvement Project Coordinator and the Social Services Program Chief III from the Division of Child and Family Services Family Programs Office. Chief Justice Maupin has previously met with the State Bar Association President and recently had a teleconference with various representatives in the legal community throughout the state to discuss the need for adequate and effective representation for children as well as strategies to best address the issue. A conference was held in Ely, NV in March 2007 where Chief Justice Maupin continued his outreach efforts to encourage legal representation.

Additionally, stakeholders will continue to meet and discuss strategies around effective training opportunities. With regard to child advocacy, a new statewide CASA Director has been hired and a full day retreat with board members was completed in April 2007 to lay out a comprehensive strategic plan. A new CASA program has been started in Elko, Nevada called Northeastern Nevada CASA.

Training for 20 volunteers has been completed, and they are ready to begin taking case assignments. The initial draft of the benchbook has been received from Clark County and work on the appendices continues to be done by UNLV Boyd School of Law. Once the appendices is completed, the benchbook is slated to be circulated for review and comment, and finally for review as to inclusion of best practices and policies with our National Collaboratives. Training for the judiciary is underway with the first opportunity slated for the Family Law Conference in Ely. In April 2007 the Nevada District Judges Association had a conference scheduled, and a section devoted to dependency will be addressed is being scheduled. Training efforts have involved collaboration between the Court Improvement Project, Judicial Education and the National Council of Juvenile and Family Court Judges.

The Court Improvement Project has requested continued collaboration and consultation from the Division of Child and Family Services regarding training opportunities to judiciary representatives focused on child welfare issues in order to better understand and improve systemic issues and support each agency's plan. The Division of Child and Family Services and the Court Improvement Project/Administrative Office of the Courts will continue to work collaboratively to address goals and objectives outlined in the Division's Five Year Plan and the Court Improvement Project's Strategic Plan. The following is an outline listing participants in the project, goals, objectives and challenges:

#### Supreme Court Leadership and Support

- Chief Justice A. William Maupin, Chair
- Justice Nancy M. Saitta, Representative at Children's Summit in New York

#### Additional Supreme Court Interest

- Justice Mark Gibbons
- Justice James W. Hardesty
- Justice Michael L. Douglas
- Justice Ron Parraguirre
- Justice Michael Cherry
- Administrative Office of the Courts

#### COLLABORATION

- Between CIP and Federal Representatives through close communication (telephonic, email and site visits) with Region IX Representative; teleconferences facilitated by Administration for Children and Families (ACF) federal representatives and regional representatives with CIP Coordinator and National Collaborative representatives
- Between the Courts and the National Collaborative – Working closely with National Council of Juvenile and Family Court Judges (NCJFCJ) as lead, the ABA Children's Center on the Law and most recently with the National Center for State Courts.
- On local level regarding overlapping CIP issues with multiple AOC Departments Judicial Education on training;
- Staff Attorney on contracts and sub-grants;
- Administration for coordination and support;
- Budget and Finance for grant management accounting;
- Planning & Analysis/Court Services for Statistical Planning, and Specialty Court and Rural Court contact;
- Information Technology for Strategic Planning on Data Sharing, CIP Website Updating and Expansion, Court Management Systems, "Volunteer" (after hours) website development for statewide CASA website, and CIP Coordinator training and support with technology;
- Senior Justices and Judges Program for training and support;
- Facilities and Special Events for facility locations for meetings with videoconferencing
- Statewide with Supreme Court Justices, Judges and Masters – telephonic and personal outreach, connection and early information sharing
- Statewide with Division of Child and Family Services through participation in federal reviews and monthly meetings; with Clark County Department of Family Services through telephonic and personal site visits; and with Washoe County Department of Family Services through telephonic contact; and all three through quarterly CIP meetings

#### STAFFING

- Request made to Legislature in Budget Proposal for full-time Court Improvement Project Coordinator position; Supreme Court felt it important; AOC hired full-time position as of April 2, 2007

Four Top Priorities Identified by CIP and Related Completed Tasks

## DEVELOPMENT OF BENCH BOOK

- Bench Book development – 1<sup>st</sup> draft received from 8<sup>th</sup> Judicial District Family Court. Updated version with appendices worked on by Court and UNLV - Boyd School of Law received on February 20, 2007.
- Appendices received and draft supplied to NCJFCJ for possible expansion.
- Draft proposal for contract with NCJFCJ to complete Bench Book received; meeting held and agreement reached as to deliverable timelines
- Initial work started by NCJFCJ
- Contract finalized and sent to NCJFCJ for signature May 1, 2007

## TRAINING OF JUDGES

- Through contact with collaborative ABA, Judge Richard Fitzgerald presented at Judges Conference in Ely the week of March 14-17, 2007
- Collaborating with NCJFCJ to prepare for Judicial Education trainings. Training held April 26-28, 2007, for Nevada District Judges Association in South Lake Tahoe with track specific to dependency cases. Through collaboration with NCJFCJ, Judge Leonard Edwards made presentation and two break-out sessions for roundtable discussions were held. Information shared around an upcoming training specific to Judges and Masters hearing child welfare cases to be held in late summer 2007
- CIP subcommittee formed to discuss upcoming training including topics, participants, etc., and to collaborate with other resources, i.e., AOC Judicial Education, NCJFCJ, and the Nevada State Bar, to hold training for Judges and Masters in late summer/early fall 2007, simultaneous to training for attorneys, and then bring the two groups together for a short training and roundtable discussion. Bench Book tool to be utilized and provided to participants

## TRAINING OF ATTORNEYS (Including Resource Guidelines)

- Resource Guidelines –deliver copy of 1<sup>st</sup> draft on February 20<sup>th</sup>, then to CIP committee for edits and posting to CIP website (this has temporarily been suspended to allow for focus on specific training)
- DCFS contacted and agreed to collaborate with CIP on training of attorneys who agree to take pro bono cases
- Coordinating training of attorneys targeted for late summer/early fall
- CIP subcommittee formed to discuss upcoming training including topics, participants, etc., and to collaborate with other resources, i.e., AOC Judicial Education, NCJFCJ, ABA Children's Center on the Law, the Nevada State Bar, to hold training simultaneous to training for Judges and Masters and then bring the two groups together for a short training and roundtable discussion

## REPRESENTATION OF CHILDREN

- CIP co-sponsored training on Representation for Children in Carson City on December 8, 2006
- Outreach made by CIP to legal community regarding representation, i.e., Clark County Legal Services, Washoe County Legal Services, Volunteer Attorneys of Rural Nevada (VARN), and Nevada Legal Services regarding needs and collaboration
- Chief Justice Maupin and Interim Court Improvement Project Coordinator made outreach to attorneys at Family Law Attorneys Conference in Ely. Succeeded in obtaining 34 volunteers to handle cases pro bono. Chief Justice reiterated what was contained in his State of Judiciary Address, that this is a stop gap fix and that state and local governments have a responsibility to fund more full-time attorney positions to represent dependent children
- Chief Justice committed to providing training, and specifically for those attorneys who volunteered to take a case (please see Training of Attorneys above)

### Statewide CASA Initiative

- New statewide CASA Director appointed
- New local CASA program started in Elko with training for volunteers completed in January and case appointments started in February 2007. Elko being only the 5<sup>th</sup> of nine judicial districts to implement local CASA program
- Board expansion continuing. Newest board members are an attorney and a CPA
- Full day retreat took place on April 20, 2007. Retreat was facilitated by a professional Management Facilitator pro bono. Strategic and budget planning 75% completed

- Director working with volunteer in the 3<sup>rd</sup> Judicial District regarding a new program
- Judges in 7<sup>th</sup> Judicial District expressed interest in CASA program in that area and CIP Coordinator made contact with possible lead party. Director to continue follow up.
- Next board meeting and Strategic planning completion date targeted for May 31, 2007

#### RURAL BEST PRACTICES COURT INITIATIVE

- Began discussions with NCJFCJ regarding piloting a Rural Best Practices Court and are working together on a proposal
- Outreach made outreach at Ely Judges Conference regarding rural courts interest in participating in the pilot best practices court(s). Confirmed interest from Ely and Lovelock courts and continuing follow up inquiry

#### STRENGTHS

- Support of entire Nevada Supreme Court bench
- Support of entire Administrative Office of the Courts
- Dedication of entire Court Improvement Project Committee
- Support and encouragement from Federal Representatives
- Support, encouragement and direction from Regional Representatives
- Support, encouragement and direction from National Collaboratives
- Monthly collaborative meetings between CIP and DCFS representatives

## **Section V. Evaluation and Technical Assistance**

### ***National Resource Centers for Child Welfare***

Nevada continued to utilize technical assistance from the various NRCCW in order to support the 5-year state plan and completion of the PIP.

The National Resource Center for Child Protective Services provided technical assistance related to refining the Nevada Initial Assessment Process (formerly the Family Risk Assessment Protocol), revising the safety model, and creating a means for employing risk as a basis for opening cases.

The Independent Living specialist received technical assistance from the NRC related to the creation and implementation of the statewide Youth Advisory Board. NRC staff facilitated the first two meetings, one in Reno in January 2007, the other in April 2007 in Las Vegas. The NRC assisted the youth with officer elections. NRC continues to provide TA and direction in appropriate Chafee spending. The NRC also co-hosted a national youth conference in May 2007 held in Minneapolis, Minnesota. (Several Nevada people attended). The National Resource Center for Youth Development provided technical assistance during a statewide Youth Development Conference in order to facilitate a strategic plan, which will include Youth Advisory Boards, and Chafee state spending.

## Section VI. LEGISLATIVE BILLS ENACTED IN 2007

BILL	REQUESTOR	IDENTIFICATION	SUBJECT	MAJOR PROVISIONS
<a href="#">AB147</a>	The Subcommittee to Oversee the Consultant to Study the Health, Safety, Welfare, and Civil and Other Rights of Children in the Care of Certain Governmental Entities or Private Facilities (Interim AB580 Subcommittee)	Congregate care/ shift care	Makes various changes concerning the placement of a child into protective custody.	AB147 prohibits placement of children under the age of 3 years into congregated care facilities unless appropriate foster care is not available, the child requires medical services that cannot be provided at another placement or to avoid separating siblings. On and after January 1, 2009, this prohibition applies to any child under the age of 6 years; defines child care institution as a home or facility that provides day and night shelter to 16 or more children and uses caregivers who work in shifts.
<a href="#">AB261</a>	Interim AB580 Subcommittee with Speaker Buckley	Missing child/ disclosure of information	Makes changes concerning release to certain governmental agencies certain information concerning missing children who are in protective custody.	AB261 authorizes an agency which provides child welfare services to release certain information relating to a missing child who is the subject of an investigation of abuse or neglect and who is in the protective custody of a child welfare services agency or custody of an entity pursuant to the order of a juvenile court; requires an agency which provides child welfare services to release, upon request, certain information relating to a case of abuse or neglect which results in a fatality or near fatality pursuant to the Child Abuse Prevention and Treatment Act (CAPTA); requires the legislative auditor to receive and review certain information concerning any child who has had contact with or who has been in the custody of an agency which provides child welfare services and who suffers a fatality or near fatality.
<a href="#">AB263</a>	Division of Child and Family Services	Child welfare	Makes provisions governing reporting of child abuse and neglect.	AB263 authorizes the Administrator of the Division of Child and Family Services to organize a multidisciplinary team to oversee the child fatality review process for such agencies; requires DCFS to evaluate child welfare services in the State, take corrective action against an agency that fails to comply with federal or state laws, and to take action against an agency that does not take corrective action in a timely manner; requires a child welfare agency that is investigating a report of abuse or neglect of a child to interview the child's siblings.
<a href="#">AB353</a>	Assemblymen Gerhardt, Buckley, Leslie, Conklin, Areberry, Atkinson, Beers, Bobzien, et.al	Restoration of parental rights	Makes changes relating to parental rights; providing for the restoration of parental rights in certain circumstances.	AB353 authorizes a child who has not been adopted and whose natural parent has had his parental rights terminated or has relinquished his parental rights to petition a court for the restoration of parental rights; the legal custodian or legal guardian of such a child may petition for the restoration or parental rights, with consent of the natural parent.
<a href="#">AB507</a>	Interim AB580 Subcommittee	Facilities to require training within 30 days of employment; annual inspection; licensing	Makes various changes to provisions concerning facilities that have custody of children pursuant to the order of a court.	AB507 adds "child care institutions" to facilities licensed by the DCFS Bureau of Services for Child Care regardless of whether there is a county or city licensing agency; ensures that employees of certain facilities that have custody of children receive training within 30 days after employment and annually thereafter; requires DCFS to physically make an annual inspection of facilities where children are placed, both in state and out of state.
<a href="#">AB629</a>	Nevada State Assembly	Wrap-up bill	Makes appropriations for various projects and programs that benefit the residents of this State	AB629 provides for the Independent Consultant to perform random unannounced visits and audit the agencies which provide child welfare services; provides for the Legislative Auditor to employ or contract with a Child Welfare Specialist to audit, inspect, review and survey governmental and private facilities for children; provides for grants to non-profit agencies to provide direct services.
<a href="#">SB356</a>	Senator Horsford and Assemblywoman Kirkpatrick	Imminent danger of serious harm	Makes provisions requiring DCFS to adopt regulations establishing uniform standards for determining whether immediate action is necessary to protect a child.	SB356 requires DCFS to adopt regulations establishing reasonable and uniform standards for determining whether immediate action is necessary to protect a child from injury, abuse or neglect. (NRS 432B.190); requires the Legislative Commission to appoint a subcommittee to conduct a study of issues relating to the placement of children in foster care and methods for reducing the number of children placed in foster care.
<a href="#">SB399</a>	Senators Cegavask, Heck, Townsend, Beers, Hardy, et. al	Recruiting, training, and licensing providers of family foster care	Makes provisions requiring DCFS to coordinate with and assist organizations in recruiting, training providers of family foster care.	SB399 requires DCFS to coordinate with and assist certain nonprofit and community-based organizations in recruiting and training providers of family foster care and each agency which provides child welfare services in recruiting, and training and licensing providers of family foster care. (NRS 432B.180)
<a href="#">SB400</a>	Senators Cegavask, Beers, Hardy and Washington	School Choice for Children in Foster Care	Establishes the Program of School Choice for Children in Foster Care to be administered by the Department of Education	SB400 establishes the Program of School Choice for Children in Foster Care for certain pupils who are in foster care, to be administered by the Department of Education; authorizing the legal guardian or custodian of a child who is in foster care to apply to the Department to participate in the Program.



**Section VII. ICWA**

ICWA activities are summarized in Appendix E.

**Section VIII. CERTIFICATIONS AND ASSURANCES**

There have been no state governmental changes resulting in the need for new signatures on the existing certifications. Copies of the original certifications are included.

CFS-101, Part II Annual Summary of Child and Family Services

## APPENDICES

## **APPENDIX A**

### **CHILD ABUSE PREVENTION AND TREATMENT ACT CHILD PROTECTIVE SERVICES STATE PLAN FFY 2004-2009**

Desired Outcome: The incidence of child abuse and neglect will be reduced and the outcomes for safety, permanency and well-being of children in Nevada will be improved.

The State of Nevada Division of Child and Family Services actively supports the United States Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, and Children's Bureau, child welfare outcomes. The national goals of safety, permanency, and child well being are the foundation for the development of systemic and outcome measures aimed at improving the lives of children who are exposed to child abuse and neglect. The child welfare outcomes required from states pursuant to section 479(a) of the Social Security Act as amended by section 203(a) of the Adoption and Safe Families Act of 1997, include the quantitative data provided by the National Child Abuse and Neglect Data System (NCANDS), Adoption and Foster Care Analysis and Reporting System (AFCARS), and the qualitative information from the Child and Family Service Review (CSFR).

The purposes of safety outcome measures are to assess the effectiveness of an agency's child welfare system in protecting children from abuse or neglect in their own homes and in foster care. This reflects those actions taken by public agencies and their partners to create safety for children who have experienced or are "at-risk" of experiencing abuse, neglect or emotional maltreatment from the action or inaction of their parents or caretakers. An indication that the child protection system may be achieving the objective of child safety is through the quantitative measure of the reduction of the rate or incidence of recurrence of maltreatment. How the incidence rate is reduced is indicative of the qualitative performance measures that are the mechanisms an agency employs to respond to child abuse and neglect.

The State of Nevada supports the child welfare outcome goals through NCANDS and AFCARS data collection by the Unified Nevada Information Technology for Youth (UNITY), a State Automated Child Welfare Information System (SACWIS), and through program performance measures outlined by the CSFR. The following includes the background of the child protection system and organization in Nevada, safety outcomes and indicators, the child protection goals and objectives, and related program activities that form the basis for the Child Abuse Prevention and Treatment Act (CAPTA) State Plan for FFY 2004 – 2009.

#### **BACKGROUND AND ORGANIZATION**

The Nevada Division of Child and Family Services is the agency responsible for planning, coordinating and monitoring child protective services provided throughout the state; coordinating its activities with and assisting the efforts of law enforcement agencies, the courts, and public and private organizations which provide social services for the prevention, identification and treatment of abuse or neglect of children; and involving communities in the improvement of protective services. The Nevada Division of Child and Family Services is responsible for adopting regulations that establish reasonable and uniform standards for protective services provided in the state.

Provision of child protective services in Nevada is a combination of State and County administered agencies. Child Protective Services is part of the child welfare service system (Nevada Revised Statutes (NRS) 432B.044). Counties in which the "population is 100,000 or more shall provide child welfare services for the children in that county and pay the cost of all those services (NRS 432B.325)." Clark County in Southern Nevada and Washoe County in Northern Nevada are the two counties that meet this standard. The Division administers the child welfare program for the remaining fifteen (15) rural counties. The agencies that provide protective services are: State of Nevada Division of Child and Family Services (DCFS), Clark County Department of Family Services (CCDFS), and Washoe County Department of Social Services (WCDSS).

#### **Nevada Citizen Review Panel**

The Nevada Citizen Review Panel was established in 1999 and is maintained by the CAPTA grant. The Citizen Review Panel is a subcommittee of the Children's Justice Act Task Force. The Panel membership increased from one panel to three panels during 2006 to encourage more participation by Nevada citizenry. The panels include the State Citizen Review Panel (it oversees all of the citizen review panels), the Northern Nevada Citizens Advisory Committee, and the Southern Nevada Citizens Advisory Committee. The State panel submits an annual report on the progress that the Child Protective Services agencies are making with respect to protecting children. The panel participates in quality improvement case reviews, review of policy and practice, and makes recommendations for improving the child protection system. The panel produces an annual report that is submitted with the Child and Family Services Annual Progress Report.

### Coordination of Child Protection Statewide

The Division of Child and Family Services, Clark County Department of Family Services and Washoe County Department of Social Services work together in developing and evaluating standardized policies and procedures, investigative practice, including safety and risk assessment, intake, case management and service delivery in child protection that will improve the system. They also work with the Nevada Citizen Review Panel and the Nevada Children's Justice Task Force to improve child protection efforts.

#### SERVICE DESCRIPTION

Description: The CAPTA State Plan adopts the safety outcome measures taken from the Federal Child Welfare Outcomes standard and is found in Section V. Vision, Principles, Goals and Objectives, safety outcomes 1 and 2, objectives and action steps of the comprehensive State Plan.

#### *Specific Accomplishments and Progress Achieved*

In the past fiscal year the state has focused toward meeting each goal and objective in the CFSP including improved outcomes for children and families, and a more comprehensive, coordinated, effective child and family services continuum. During the past fiscal year, the Division made progress on the following goals to improve child safety outcomes for children and families through a more comprehensive and coordinated child protection system:

### **GOAL #1 Safety Outcome 1: Children are first and foremost protected from abuse and neglect (see Goals and Objective Chart, page 9).**

**OBJECTIVE 1.1:** Statewide standards for substantiations are present.

PROGRESS: The collaborative statewide Substantiation Policy was revised and approved in September 2005, to include Domestic Violence and substance abuse as well as improving standards for the determination of findings for neglect, physical abuse, emotional abuse and sexual abuse. Substantiation training was provided in 2005 and in 2006, it was covered in "CPS Investigation – A social-child safety intervention" training provided by Action for Child Protection, Inc., using CAPTA funds. Substantiation guidelines have provided improved decision making for child welfare staff and this should be reflected in statewide quality improvement reviews. Improved substantiation criteria and guidelines will assist case determinations and decision making to provide appropriate services.

This policy is scheduled for review after the completion of new regulations on risk of harm that are required by State Senate Bill 356 that was passed during the 2007 Legislative Session.

#### OBJECTIVE 1.1.1: UPDATE GOALS/OBJECTIVES TO INCORPORATE AREAS NEEDING IMPROVEMENT

This goal and objective were identified in the CSFR as an area needing improvement.

#### OBJECTIVE 1.1.2: EXPLANATION OF REVISIONS TO EXISTING GOALS/OBJECTIVES

There are no revisions to this existing goal/objective.

**OBJECTIVE 1.2:** Statewide policy delineates timeframes for initiating a response including face-to-face contact with alleged child victim within established time frames.

PROGRESS: The Division revised the statewide Intake Policy and it was approved in August 2005. Training was provided in 2006 (see Appendix D, Title IV-E Training Plan). Face-to-face contact was addressed through the policy and training. During this report period, the Statewide Intake Policy was revised to clarify timeframes and response coding to ensure that reports are appropriately initiated. This objective of "timeliness of investigations" is an area that the State will continue to monitor through the Quality Improvement process and continue to refine policy. It is identified as a federal indicator and as an ongoing area in need of improvement. It will continue to be monitored through Supervisor review and targeted agency reviews. The measurement for this objective will be found in the annual Statewide Quality Improvement Report that will be released at the end of the 2007.

#### OBJECTIVE 1.2.1 UPDATE GOALS/OBJECTIVES TO INCORPORATE AREAS NEEDING IMPROVEMENT

This goal and objective were identified in the CSFR as an area needing improvement.

#### OBJECTIVE 1.2.2 EXPLANATION OF REVISIONS TO EXISTING GOALS/OBJECTIVES

There are no revisions to this existing goal/objective.

**OBJECTIVE 1.3:** Statewide policy for the use of ongoing safety and risk assessment is in place.

**PROGRESS:** During the report period, the revised Safety Assessment Policy and Risk Assessment Policy were approved in December 2006 by the Decision Making Group. The Safety Assessment policy was revised to clarify terminology, enhance safety planning and practice, and improve application of the assessment tool(s). The revised assessment tool is being implemented in the UNITY system and becomes effective for Statewide use by December 13, 2007.

- The Nevada Initial Assessment (NIA) Policy and tool, based on the Information Collection Standard used in the Safety Assessment, was initiated within this report period. The NIA is based on the former Family Assessment Protocol. The NIA tool works to strengthen initial evaluation procedures in which safety is the standard for removal. Statewide Training on safety and investigation, incorporating NIA principles, was provided in 2006 (see Appendix D, Title IV-E Training Plan).
- The Risk Assessment Policy was adopted in December 2006 and the new assessment tool is being implemented on December 13, 2007. This tool is taken from the Children's Research Center and training is scheduled to begin this fall. The Family Risk Assessment tool is being used until the training occurs.

This objective was identified as a federal indicator and is an ongoing area in need of improvement. It will continue to be monitored through Supervisor review and targeted agency reviews. The measurement for this objective will be found in the annual Statewide Quality Improvement Report that will be released at the end of the 2007.

**OBJECTIVE 1.3.1 UPDATE OF GOALS/OBJECTIVES TO INCORPORATE AREAS NEEDING IMPROVEMENT**  
This goal and objective were identified in the CSFR as an area needing improvement.

**OBJECTIVE 1.3.2 EXPLANATION OF REVISIONS TO EXISTING GOALS/OBJECTIVES**  
There are no revisions to this existing goal/objective.

**OBJECTIVE 1.4.** A case planning protocol on the use of assessment results and the provision of services to families, relatives and guardians is in place.

**PROGRESS:** During this report period, the Case Planning policy was reviewed and placed on the Policy Revision Schedule that is based the Nevada Administrative Code (NAC). The regulatory changes will impact the policy. Regulatory hearings and workshops will be scheduled for spring of 2008.

This objective was identified as a federal indicator and is an ongoing area in need of improvement. It will continue to be monitored through Supervisor review and targeted agency reviews. The measurement for this objective will be found in the annual Statewide Quality Improvement Report that will be released at the end of the 2007.

**OBJECTIVE 1.4.1 UPDATE OF GOALS/OBJECTIVES TO INCORPORATE AREAS NEEDING IMPROVEMENT**  
This goal and objective were identified in the CSFR as an area needing improvement.

**OBJECTIVE 1.4.2 EXPLANATION OF REVISIONS TO EXISTING GOALS/OBJECTIVES**  
There are no revisions to this existing goal/objective.

## **GOAL 2 - SAFETY OUTCOME 2: Children are safely maintained in their homes whenever possible and appropriate.**

**OBJECTIVE 2.1** Consistent assessment, prevention, intervention and support services will be provided to the family to protect children in the home and prevent their removal.

**PROGRESS:** The Nevada Initial Assessment (NIA) Policy and tool, and the Case Planning Policy were developed to assist with the identification of needs to sustain a child's safety in the home and to determine what is needed to prevent removal, or to what type of intervention is needed, and what types of support services must be provided to prevent a child's removal from the home. The conceptual framework for the Safety and NIA Policy was part of the "CPS Investigation – A social-child safety intervention" training provided by Action for Child Protection, Inc., using CAPTA funds. Training was also provided for "Collaborative Case Management" during this report period (see Appendix D, Title IV-E Training Plan).

This objective was identified as a federal indicator and is an ongoing area in need of improvement. It will continue to be monitored through Supervisor review and targeted agency reviews. The measurement for this objective will be found in the annual Statewide Quality Improvement Report that will be released at the end of the 2007.

**OBJECTIVE 2.1.1: UPDATE GOALS/OBJECTIVES TO INCORPORATE AREAS NEEDING IMPROVEMENT**  
This goal and objective were identified in the CSFR as an area needing improvement.

**OBJECTIVE 2.1.2: EXPLANATION OF REVISIONS TO EXISTING GOALS/OBJECTIVES**  
There are no revisions to this existing goal/objective.

**OBJECTIVE 2.2** Consistent assessment, prevention, intervention and support services will be provided to the foster family and/or relatives to protect children in foster care or alternative placement.

**PROGRESS:** During this report period, the Nevada Initial Assessment (NIA) Policy and tool was developed and the Case Planning Policy was used to assist with the identification of needs to sustain a child's safety in the home and to determine what is needed to prevent removal, or to what type of intervention is needed, and what types of support services must be provided to prevent a child's removal from the home. However, when a child is removed, the identified services are re-assessed in the foster parent home. The Case Planning Guidelines and Collaborative Case Management Policy provide clarification on the assessment process. These policies are scheduled for review and revision on the Policy and Regulation Review Schedule for fall of 2007. The conceptual framework for the Safety and NIA Policy was part of the "CPS Investigation – A social-child safety intervention" training provided by Action for Child Protection, Inc., using CAPTA funds. Training was also provided for "Collaborative Case Management" during this report period (see Appendix D, Title IV-E Training Plan).

This objective was identified as a federal indicator and is an ongoing area in need of improvement. It will continue to be monitored through Supervisor review and targeted agency reviews. The measurement for this objective will be found in the annual Statewide Quality Improvement Report that will be released at the end of the 2007.

**OBJECTIVE 2.2.1: UPDATE GOALS/OBJECTIVES TO INCORPORATE AREAS NEEDING IMPROVEMENT**  
This goal and objective were identified in the CSFR as an area needing improvement.

**OBJECTIVE 2.2.2: EXPLANATION OF REVISIONS TO EXISTING GOALS/OBJECTIVES**  
There are no revisions to this existing goal/objective.

**OBJECTIVE 2.3** Services will be provided to engage families in the process and assess their service needs in order to protect children in the home and prevent removal.

**PROGRESS:** During this report period, training for the Nevada Initial Assessment (NIA) Policy and tool, and the Case Planning Policy and Collaborative Case Management Policy included the referral process for appropriate services funded under the Title IV-B programs (See Section IV for the list of services). The conceptual framework for the Safety and NIA Policy was part of the "CPS Investigation – A social-child safety intervention" training provided by Action for Child Protection, Inc., using CAPTA funds. Training was also provided for "Intake Response and Decision Making Process" and "Collaborative Case Management" during this report period (see Appendix D, Title IV-E Training Plan).

This objective was identified as a federal indicator and is an ongoing area in need of improvement. It will continue to be monitored through Supervisor review and targeted agency reviews. The measurement for this objective will be found in the annual Statewide Quality Improvement Report that will be released at the end of the 2007.

**OBJECTIVE 2.3.1: UPDATE GOALS/OBJECTIVES TO INCORPORATE AREAS NEEDING IMPROVEMENT**  
This goal and objective were identified in the CSFR as an area needing improvement.

**OBJECTIVE 2.3.2: EXPLANATION OF REVISIONS TO EXISTING GOALS/OBJECTIVES**  
There are no revisions to this existing goal/objective.

**OBJECTIVE 2.4:** Children will be protected from risk of harm.

**PROGRESS:** The Risk Assessment Policy and tool was approved in December 2006 and the California Risk Assessment provided by the Children's Research Center will be used to assess risk for child abuse and neglect. This policy and tool will be implemented on December 13, 2007. This new Risk Assessment tool draws on the same domains as the Family

Risk Assessment Protocol, but assigns a numerical value to the response.

This objective was identified as a federal indicator and is an ongoing area in need of improvement. It will continue to be monitored through Supervisor review and targeted agency reviews. The measurement for this objective will be found in the annual Statewide Quality Improvement Report that will be released at the end of the 2007.

**OBJECTIVE 2.4.1.: UPDATE GOALS/OBJECTIVES TO INCORPORATE AREAS NEEDING IMPROVEMENT**  
This goal and objective were identified in the CSFR as an area needing improvement.

**OBJECTIVE 2.4.2: EXPLANATION OF REVISIONS TO EXISTING GOALS/OBJECTIVES**  
There are no revisions to this existing goal/objective.

**OBJECTIVE 2.5:** Client contact and home visitation will ensure that such visits promote the purpose of the case plan and safety of the child.

**PROGRESS:** During this report period, the Caseworker Contact and Client Visitation Policy has been reviewed and is in the process of revision. This policy is on the Regulation and Policy Revision Schedule for continued improvement. Training was provided on "Visitation to Promote Placement Stability and Permanency" that included content on home visit purpose and safety of the child. (See Appendix D, Title IV-E Training Plan). This objective was identified as a federal indicator and is an ongoing area in need of improvement. It will continue to be monitored through Supervisor review and targeted agency reviews. The measurement for this objective will be found in the annual Statewide Quality Improvement Report that will be released at the end of the 2007.

**OBJECTIVE 2.5.1.: UPDATE GOALS/OBJECTIVES TO INCORPORATE AREAS NEEDING IMPROVEMENT**  
This goal and objective were identified in the CSFR as an area needing improvement.

**OBJECTIVE 2.5.2.: EXPLANATION OF REVISIONS TO EXISTING GOALS/OBJECTIVES**  
There are no revisions to this existing goal/objective.

#### SERVICE RESPONSES

*(Describe the steps the State agency will take to expand and strengthen the range of existing services and develop and implement services to improve child outcomes. Explain planned activities, new strategies for improvement, and the method(s) to measure progress in the upcoming fiscal year).*

The State will expand and strengthen the range of existing services (see Section IV) provided during this report period. The state initiated a pilot project in December 2006 for the Differential Response (DR), which consists of an alternative referral system for reports of certain types of child abuse and neglect, at the Clark County Department of Family Services. The Differential Response referral system has expanded the provision of services through partnering and the development of a Memoranda of Understanding, with the Family Resource Centers. The provision of a family assessment for services in lieu of an investigation will expand the number and type of services for families.

In the upcoming year, the pilot will have limited expansion statewide with the Family Resource Centers. The Method of measurement will be the establishment of a baseline data indicator for future comparison of the number of referrals and number of reports and subsequent re-referrals.

CAPTA will support the policy revisions and training of child protective/child welfare services caseworkers on appropriate assessment for child safety and risk - including the Differential Response referral system, case management and referral procedures.

*(Describe the services to be provided in FY 2008, highlighting any changes or additions in services or program design and how the services will achieve program purposes).*

CAPTA will support the policy revisions and training of child protective/child welfare services caseworkers on appropriate assessment and referral for child safety and risk - including the Differential Response referral system, case management and referral procedures. The referral process is a critical component of appropriate service delivery and program design. Staff knowledge and skills must be improved through training to evaluate client needs and to make the proper alignment

with available services and to establish a case plan and management regimen. CAPTA will use funds to support the State Training Plan as this will achieve the program goals, objectives and purpose of training child protective services staff. There are no planned changes to the program.

*(For each service described above, report the populations(s) to be served, the geographic areas where the services will be available, and the estimated number of individuals and/or families to be services).*

- This information may be provided in Part II of the CFS-101 form

### **CAPTA State Plan Goals**

The goals and objectives of CAPTA are found in the section I of the State Plan. These goals are directed at improving the safety, permanency and well-being of children.

#### **CAPTA: SAFETY OUTCOME – DATA**

Description: The safety outcome measures are directed at the reduction of recurrence of child abuse and neglect for those reports of children that have been substantiated including children in foster care. The reduction of the rate of recurrence of maltreatment is an indication that the child protection system may be achieving the objective of child safety. This information is provided by the UNITY-SACWIS computer system. The goal is to provide a baseline for future data comparison that will reflect the recurrence and incidence of child abuse. Refer to Section I, Outcome I. The data for federal Safety Outcome measures for abuse and recurrence have been set up in the Solutions for Online Activity Reporting (SOARS) system. The SOAR system became operational in the spring of 2005.

#### **CAPTA SAFETY OUTCOME – PROGRAM PERFORMANCE**

Description: The CAPTA State Plan adopts the safety outcome measures that are linked to program performance. These measures tell about how well the program is meeting its requirements to provide safety to children. Each measure is taken from the Federal Child Welfare Outcomes standard and is found in **Section I**. Vision, Principles, Goals and Objectives, safety outcomes 1 and 2, objectives and action steps of the comprehensive State Plan.

The CAPTA areas selected for improvement are:

- Sec. 106(a)(1) Improving the intake, assessment, screening and investigation;
- Sec. 106 (a)(3) Improving the case management, including ongoing case monitoring and delivery of services and treatment provided to children and their families;
- Sec. 106 (a)(4) Enhancing the general child protection system by developing, improving, and implementing risk and safety assessment tools and protocols.
- Sec. 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;

CAPTA funds will be used to improve outcomes for the safety and permanency outcomes through the review, evaluation and development of consistent statewide statute/regulation, policy, protocols, and practice for the intake, risk, safety assessment, screening, decision-making, investigation of reports and referral processes for child abuse and neglect. Funds will also be directed towards recruitment and retention of workers and training of supervisors. These safety outcomes, objectives and action steps are found in **Section I** of the Comprehensive Five-Year Child and Family Services State Plan.

#### **CAPTA TRAINING**

Training information is contained in the Training Updates Section of the State Five-Year Plan.



## Description of services and training to be provided under the CAPTA State Grant as per section 106(b)(2)(C) CAPTA

### (i) Services:

The CAPTA Basic State Grant provides indirect services to individuals and families through provision of referrals from child abuse and neglect reports received by child protection agencies to contracted Title IV-B community-based service providers. These referrals are aimed at intervening and preventing the re-occurrence of child abuse and neglect by referring families to a family assessment and services system process. The family assessment and services system provides an opportunity for families to receive services, or other appropriate referrals to local community based service providers.

### (ii) Training:

Training will be provided to support direct line and supervisory personnel on child abuse and neglect in the areas of: intake and investigation, screening, safety and risk assessment, use of instruments, decision making, court processes, concurrent case planning, case management, and other areas as indicated. Training is provided free to child welfare and other participants through collaboration with the Nevada Training Partnership. (PIP 33.3) Training will direct efforts toward the retention and recruitment of workers, including provision of limited stipends.

The CAPTA State Grant will provide support for presenters, travel and per diem and materials expense and will provide support for staff travel and per diem to attend the training. Funds will be used to provide training materials and equipment, such as videos, books, and other materials to assist with training.

### (iii) Training for Individuals Required to Report Suspected Cases of Child Abuse and Neglect:

Mandated reporter training is being added to the web-based training and is available upon request. Training is provided free to child welfare and other participants through collaboration with the Nevada Training Partnership. The CAPTA Basic State Grant will provide support for presenters, travel and per diem and appropriate training materials, such as videos, and will provide support for staff travel and per diem to attend the training.

During the 2007 Legislative Session, State Assembly Bills (A.B.) 261, submitted by the Legislative Subcommittee on Health and Human Services, and 263 submitted by the Nevada Department of Health and Human Services, Division of Child and Family Services, specifically targeted public disclosure of child fatality and near fatality. The key provisions concerning public disclosure of child fatality and near fatality were placed into A.B. 261, and the bill was approved by the Legislature. Governor Jim Gibbons signed the bill into law on May 18, 2007 and these provisions become effective July 1, 2007.

The law amends public disclosure regarding child fatality to require child welfare agencies to provide known information 48 hours after a fatality and to provide other information regarding any history of child abuse or neglect by any member of the household, any services provided to whom and when, and the outcomes of an investigation and other information as requested by a member of the general public. Disclosure of known information regarding a near fatality must occur within 5 business days.

A.B. 261 was reviewed by the Nevada Attorney General's Office and an explanation of substantive changes is contained in the attached letter and copy of the bill (see attachment 3).

A description of the requirement for a criminal background check for prospective foster and adoptive parents and other adult relatives and non-relatives residing in the household (section 106(b)(2)(A)(xxii).

This requirement was addressed during the 2003 legislative session and Nevada Revised Statutes 432B.391 was added to the law authorizing child welfare services or their designee to conduct preliminary Federal Bureau of Investigation name-based checks of background of adult residents of homes where children are placed.

## Activities to be assisted with CAPTA Basic State Grant Funds FFY 08

The following are necessary to carry out the objectives of the grant (Personnel, Operations, and Maintenance):

### *Personnel:*

Through the use of CAPTA State Grant funds, the Division will employ a full-time-Social Services Programs Specialist. The funds requested include salary, fringe benefits and travel. Under the direction of the Division's designated Deputy Administrator, the Social Services Program Specialist will coordinate with the Division's rural

district offices, Washoe and Clark Counties to help insure that policy and practice in child protection are consistent throughout Nevada. The Specialist will participate in planning, coordinating and evaluating child protective services provided throughout the state. The Specialist will also participate in the following activities: 1) review of federal/state legislation, development of federal/state regulations, and agency policies; 2) provision of statewide technical assistance and/or consultation through contract or sub-grant; 3) coordination of training pursuant to CAPTA requirements; 4) serve as the State Liaison Officer with the Office on Child Abuse and Neglect; 5) prepare grant applications and progress reports for the CAPTA Basic State Grant program and other related CAPTA funding; 6) develop, coordinate and monitor CAPTA Projects; 7) serve on agency or other committees that promote the goals of child protective services; and 8) monitor the collection of child abuse data for the National Child Abuse and Neglect Data System (NCANDS).

#### *Operating Expenses*

Communications equipment purchased for the purposes of promoting staff and child safety will be periodically reviewed for continued maintenance and possible upgrade through the use of grant funds. Grant funds will support staff telecommunications related to child protection activities including teleconferencing, video-conferencing, cell phones, and land lines. Grant funds will be used to purchase equipment, such as digital recorders, printers, computers, laptop computer, and necessary hardware, software upgrades, file cabinets and other office equipment and work materials such as journals, subscriptions, books and videos.

#### *Maintenance of Citizen Review Panel and Statewide Child Protective Services Work Groups*

Child Protective Services Citizen Review Panel: Grant funds will be used to support travel and per diem for panel representatives. Funds may also be used for a consultant/facilitator, including travel and per diem and materials, provision of technical assistance and coordination for the panel. Statewide Child Protective Services work groups: Grant funds will be used to support travel and per diem for a representative from Clark and Washoe Counties and the Division of Child and Family Services to participate in child protective services work groups.

#### *Child Welfare Training*

CANS and/or CJA grant funds will be used to support mandatory Statewide Training for child welfare staff through reimbursement of per diem and travel costs for trainers and child welfare staff, as needed. Funds will also be used to improve the child welfare curriculum and to provide educators and trainers to develop and/or present training throughout the state of Nevada through contract and/or sub-grant.

Training for child welfare staff and related disciplines in the use of comprehensive safety assessment instruments and practice, risk assessment, case planning, the handling of child abuse and neglect cases involving domestic violence and substance abuse, case management, investigating children with disabilities and other relevant identified training, will be supported by appropriate grant funds. Grant funds will also support the development of on-going training curriculum for child abuse investigations, materials for mandated reporters, as well as equipment and materials, such as television/VCR, videos, books and other resource materials.

#### *Reports and Correspondences:*

- Citizen Review Panel Report: Attachment to this report
- State Response: Attachment #2 in this report

## Attachment 1

### Overview of the Nevada Citizen Review Panel

#### Federal Requirements

As outlined in Public Law 104-235, Title I, Section 106, the Child Abuse Prevention and Treatment Act (CAPTA) provides for a state grant program for the support and improvement of state child protective services (CPS) systems. This law sets forth a variety of eligibility requirements, including the establishment of citizen review panels. The purpose of the panels is “to provide new opportunities for citizens to play an integral role in ensuring that states are meeting their goals of protecting children from abuse and neglect.”

The citizen review panel system within a given state must meet certain operational requirements and meet a scope of responsibilities within the function of the panel. These are outlined as follows:

#### Scope of Responsibilities

Each citizen review panel is required to review the compliance of State and local CPS agencies in the fulfillment of their responsibilities with respect to the following:

- Work in accordance with the CAPTA State Plan.
- Examine State and local policies and procedures.
- Review specific cases, when appropriate.
- Review other criteria the panel determines important to the protection of children, including the following:

- Review of the extent to which the State CPS system is coordinated with the Title IV-E foster care and adoption assistance programs.
  - Review of child fatalities and near fatalities.

#### State Requirements

As part of the CAPTA requirements, states are required to codify citizen review panels through state law. In Nevada, this was completed with the passage of Assembly Bill (AB) 158 during the 1999 legislative session. The relevant text of AB 158 was incorporated into Nevada Revised Statutes (NRS) under Chapter 432B.396. This law reads as follows:

The Division of Child and Family Services shall:

- Establish a panel comprised of volunteer members to evaluate the extent to which agencies which provide protective services are effectively discharging their responsibilities for the protection of children.
- Adopt regulations to carry out the provisions of subsection 1 which must include, without limitation, the imposition of appropriate restrictions on the disclosure of information obtained by the panel and civil sanctions for the violation of those restrictions.
- During 2001, NRS 432B.396 was amended as a result of AB 248 to establish civil sanctions for violations of confidentiality on the part of citizen review panel members. This amendment includes additional language highlighted in subsection two as follows:
- Establish a panel comprised of volunteer members to evaluate the extent to which agencies which provide protective services are effectively discharging their responsibilities for the protection of children.
- Adopt regulations to carry out the provisions of subsection 1 which must include, without limitation, the imposition of appropriate restrictions on the disclosure of information obtained by the panel and civil sanctions for the violation of those restrictions. The civil sanctions may provide for the imposition in appropriate cases of a civil penalty of not more than \$500. The Division may bring an action to recover any civil penalty imposed and shall deposit any money recovered with the State Treasurer for credit to the State General Fund.

#### Nevada Citizen Review Panel

The State of Nevada Citizen Review Panel (CRP) operates with the following mission:

To ensure the protection and safety of children through an evaluation of the Child Abuse Prevention and Treatment Act State Plan by examining State and local agencies' policies and procedures and specific cases

where appropriate.

Prior to 2004, the Panel consisted of a maximum of 12 members appointed by the Administrator of the Division of Child and Family Services (DCFS), who also serves on the Panel. The group included representation from a variety of State and County agencies, community organizations, and professional backgrounds. Membership categories for the Panel are not federally mandated. However, they were originally based on the membership categories mandated under CAPTA for the Children's Justice Act (CJA) Task Force. The CJA Task Force functions in a complementary manner with the CRP, and therefore the membership was mirrored accordingly.

Recently, both the Panel and DCFS Administration have placed more emphasis on recruiting community members who are not directly affiliated with the child welfare service system, but still have a professional interest in the wellbeing of children. This includes recruitment from sectors including school districts, child care providers, nonprofit advocacy and service organizations, and professional medicine. As a result, Panel members from State and County agencies were asked to begin serving in an advisory capacity to the group. This change was made just prior to the beginning of the case record review process initiated by the Panel, so that members representing other disciplines would be able to provide more objective feedback on cases reviewed at that State and County level.

During 2004, the Panel underwent a major structural change and was reorganized as a subcommittee of the Children's Justice Act (CJA) Task Force. This was done for two primary reasons: 1) To increase the effectiveness of the Panel's work by joining with a larger advisory group whose work is most directly related to that of the Panel; and 2) to meet the requirements of new statewide advisory board restructuring being done by the Division of Child and Family Services (DCFS) in order to reduce the amount of staff time and resources expended on the business completed by such groups. Prior to this restructuring, DCFS had a considerable number of advisory groups and other statewide committees, and it has become necessary to increase efficiency in the area of stakeholder contribution to the work of the Division.

Concurrent with this change, membership on the Panel has decreased as a result of member turnover. Some new members will be recruited to offset this turnover, and the participation of existing CJA Task Force members in the work of the Panel subcommittee will be encouraged in order to draw on the expertise of current members of the Task Force.

The Panel works toward fulfilling the following three primary goals:

- Review the CAPTA State Plan and updates on an annual basis.
- Review at least one policy area from the Governor's assurances.
- Follow up on previous recommendations.

In essence, the Panel's work consists of the review of internal policies and procedures within the CPS system. Each year, the Panel's findings are summarized in an Annual Report submitted to the federal government as part of the CAPTA requirements. Appendix B of this report includes a detailed overview of the State child welfare system, which describes the key components of the system of care reviewed by the Panel. Appendix C of this report includes a list of the current CRP members, along with their respective affiliations and areas of representation.

## **ATTACHMENT 2**

### **DEPARTMENT OF HEALTH & HUMAN SERVICES DIVISION OF CHILD AND FAMILY SERVICES**

**711 East Fifth Street  
Carson City, Nevada 89701-5092  
(775) 684-4400**

May 16, 2007

Mr. Larry Moorehead, Chair  
Nevada Citizen Review Panel  
14245 Chamy Drive  
Reno, Nevada 89511

Re: Report Back to the Nevada Citizen Review Panel on 2006 Recommendations

Dear Mr. Morehead:

Since its inception in 1999, the Nevada Citizen Review Panel has been a great asset to the State of Nevada and the field of child protection and child welfare. The Panel was established in accordance with the Child Abuse Prevention and Treatment Act (CAPTA), as Reauthorized June 25, 2003, and was charged with the functions listed in CAPTA 106(c)(4)(A)(i)-(iii), "to examine the policies, procedures, and practices of State and local agencies and where appropriate, specific cases, evaluate the extent to which State and local child protection system agencies are effectively discharging their child protection responsibilities" in accordance with the [CAPTA] State Plan, child protection standards, and any other criteria that the panel considers important to ensure the protection of children, including "a review of the extent to which the State and local child protective services is coordinated with the foster care and adoption programs established under part E of title IV of the Social Security Act (42 U.S.C. 670 et. Seq.)," and including a review of child fatalities and near fatalities.

The 2006 findings of the Citizen Review Panel's evaluation and recommendations for improving the child protection system include the following:

Recommendation 1: CPS caseworker training needs to include and/or reinforce consistent statewide definitions of the standard elements of child welfare practice.

Recommendation 2: CPS caseworker training needs to improve caseworkers' understanding of the safety and risk assessment tool and statewide consistency in its use.

Recommendation 3: CPS caseworker training needs to reinforce the importance of data entry and case documentation so that the contents of case files are consistent and complete.

Recommendation 4: CPS practices need to incorporate appropriate actions to promote safety, permanency, and well being that are individualized based on the child and family's needs.

Recommendation 5: The Panel believes that an over-sampling of cases should always be done for quarterly scheduled QI case reviews.

Recommendation 6: An existing rural oversight group should be invited to serve as a fourth CRP for Nevada.

The following are responses to these statewide recommendations and include a description of how and whether the State will incorporate them to make measurable progress in improving the State and local child protection system (CAPTA, Sec. 106(c)(6)). The child welfare agencies include the Nevada Division of Child and Family Services (DCFS), Clark County Department of Family Services (CCDFS), and Washoe County Department of Social Services (WCDSS).

*Recommendation 1: CPS caseworker training needs to include and/or reinforce consistent statewide definitions of the standard elements of child welfare practice.*

Discussion: The 2006 report found:

- Citizen Review Panel members participated in the Clark County Department of Family Services Quality Improvement case reviews and observed a lack of uniform definitions and consistency in the use of terms reflected in case documentation. The panel is concerned that different procedures and practices used by child welfare agencies in each of the three jurisdictions of the state lead to inconsistent approaches to CPS investigations. The panel believes that better investigations are conducted when common terms are defined and applied using consistent, statewide approach to enforcing state and Federal responsibilities related to child welfare.
- Additionally, the Panel members observed caseworker confusion between the concepts of *safety* and *risk* and this was apparent in case documentation. Caseworkers need to be trained to consistently use the statewide safety assessment tool which clearly defines both safety and risk factors.
- The Panel believes that there needs to be statewide uniformity in the conceptualization and implementation of child welfare practice definitions.

Response:

This recommendation was originally incorporated by the State during the implementation of the Program Improvement Plan (PIP) that resulted from the Federal Child and Family Service Reviews in 2004. In 2005 and again in 2006 approximately 15 statewide policies and practice guidelines each year were created to assist in standardizing practice in the child welfare field. Definitions are embedded in the applicable policy as a way to reinforce, clarify and bring uniformity to child welfare practices in the state of Nevada. In addition a work group has been created to specifically address various definitions, their uniformity and their compatibility with the Nevada Revised Statutes (NRS) and the Nevada Administrative Code (NAC).

Technical assistance was requested and granted by National Resource Center for Child Protective Services in developing statewide CPS investigation protocol, which has been implemented in all three jurisdictions. On-going collaboration between the jurisdictions and the state DCFS office continue in efforts to clarify and adopt uniform terminology.

*Recommendation 2: CPS caseworker training needs to improve caseworkers' understanding of the safety and risk assessment tool and statewide consistency in its use.*

Discussion: The 2006 report found:

1 The Citizen Review Panel believes that caseworkers need to be trained to consistently use the statewide safety and risk assessment tool (Family Risk Assessment Protocol-FRAP) as appropriate to the case, which clearly defines both safety and risk factors. Panel members noted that the primary problem is under-use of the assessment tool during initial investigations, and under-use during critical transitions for children, such as placement with relatives.

Response:

In consultation with the National Resource Center for Child Protective Services and collaboration with each jurisdiction in Nevada, considerable time has been spent over the past year around modifying and improving the states approach to safety intervention. Research about existing, validated tools that assess safety and risk was done, and as a result, a statistically validated risk assessment instrument was identified for use in Nevada.

The Nevada Initial Assessment (NIA) is a methodical, investigative process for interacting with a family for the purpose of identifying negative factors or conditions that are known to contribute to the likelihood of maltreatment, as well as determine the strengths and/or protective capacities that can help mitigate risk and safety threats. The assessment process results in a conclusion regarding the existence of present or impending danger. The NIA will be used for all investigations or assessments when a report is assigned to staff.

Assessments of safety and risk will be completed, pursuant to Nevada Administrative Code (NAC) 432B.185, and considered as a part of each significant decision made in a child welfare case. Those decisions include provision of child welfare services for the child, from intake through case closure. The policy and practice guidelines for the Nevada Initial Assessment (NIA), Safety Assessment, and the Risk Assessment have been written and tentatively approved by the Decision Making Group (comprised by Administrators from the Nevada Division of Child and Family Services, Clark County Department of Family Services, and Washoe County Department of Social Services).

The new instruments were field tested by a selected group of supervisors and line staff during March 2007 as part of the pilot project to review the revised policies, procedures and instruments in all jurisdictions before statewide implementation.

Supervisors and staff were trained on the pilot project protocol in February 2007 by the Nevada Partnership for Training (University of Nevada, Reno and Las Vegas). The project field tested the tools in all three jurisdictions on a total of 38 randomly selected cases. The results of the pilot were discussed and evaluated on April 16, 2007. The Safety/ Risk Assessment workgroup is beginning the final stage of analyzing the feedback and plans to address any remaining questions about the tools, prior to implementation statewide.

*Recommendation 3: CPS caseworker training needs to reinforce the importance of data entry and case documentation so that the contents of case files are consistent and complete.*

Discussion: During the 2006 reviews:

- Panel members who participated in past reviews continued to find that inconsistent approaches to CPS investigations, lead to inconsistent case documentation and data entry into case files and the state's UNITY system. Several specific problem areas were identified as follows: 1) documentation of supervisory input into cases is lacking. 2) There is a lack of case file documentation regarding the change between assigned case workers. 3) There is no evidence that the safety and risk assessment is being used at critical points in a given case. 4) Specific to the Northern jurisdiction, the use of Human Services Support Specialists (paraprofessionals who provide support in the home) was not well documented when they provide services for a given case. 5) noted that consistent CPS case documentation is necessary statewide. This not only helps to ensure that required steps are taken in investigations, but also helps to ensure that outside reviewers understand the actions that have been taken for quality assurance and case compliance reviews.
- Citizen Review Panel members participated in the Clark County Department of Family Services Quality Improvement case reviews and noted that interviews with caseworkers sometimes showed that additional steps were taken by staff which led directly to positive outcomes for children and families, but were not included in the case documentation.

Response:

This recommendation was originally incorporated by the State during the implementation of the Program Improvement Plan (PIP) that resulted from the Federal Child and Family Service Reviews in 2004. New policies on documentation were developed using the same statewide collaborative process noted above. Supervisory oversight and responsibility (i.e. supervisor signature) were added in policy at key points in the investigation/case review process. The Documentation Protocol training was delivered to 590 CPS caseworkers during the months of August through September 2006.

The Quality Improvement Unit conducts quarterly case reviews for all three jurisdictions. During these reviews documentation in the chart is cross referenced with data in UNITY, the statewide reporting system. Results of the review are then provided to each jurisdiction. As an example, the March 2007 Clark County Reviews resulted in a 21.5% increase in documentation compliance and a 35.7% increase in supervisory oversight that was documented in case files from the previous year.

The Quality Improvement Unit (QI) is working closely with the Information Management Systems (IMS) to assess the feasibility of obtaining caseworker specific data entry and documentation reports which can be forwarded to front line supervisors to address outstanding issues with individual caseworkers who have on-going challenges in this area.

Both UNITY and the Documentation Protocol training will be mandatory beginner level training for all new child welfare caseworkers under the new proposed three tiered training plan. Additionally when caseworker specific UNITY/documentation reports are available, caseworkers who continue to struggle with this policy requirement could be rescheduled at any point during their tenure to attend a refresher training on Documentation Protocol.

Lastly, the proposed Nevada Initial Assessment (NIA) tool will standardize the way CPS investigations are handled and require a Closing/Transfer summary to be completed in the Unity system prior to accepting a transfer or closing of the case command. This change should result in more thorough investigations statewide which clearly document the caseworker's rationale for either transferring or closing the case.

*Recommendation 4: CPS practices need to incorporate appropriate actions to promote safety, permanency, and well being that are individualized based on the child and family's needs.*

Discussion:

The Panel believes that responses to the safety assessment are often “cookie-cutter” approach, with a lack of case specific assessments to address the needs of children and families involved, and a lack of focus on the individualized services they need. This may include making reasonable efforts, identifying and reaching out to non-custodial parents, providing strengths-based outreach and services, and the emphasizing the importance of sibling relationships. On the other hand, caseworkers need to consistently incorporate necessary and appropriate actions required as a part of every case, and on the other hand, they need to individualize solutions for children and families based on their uniquely identified needs.

Response:

This recommendation has been incorporated by the state and has been addressed in several ways. First, three new tools; the Nevada Initial Assessment (NIA), the Safety Assessment and the Risk Assessment have been piloted in all three jurisdictions. Policies and procedures have been written for each tool specifying when and how they are to be used. The NIA is expected to bring uniformity to how investigations are done statewide and the information gathered for the tool should result in more individualized case plans that are tailored to each family’s unique situation. The Risk Assessment is a statistically validated tool that was recommended for use in Nevada by the Federal oversight agency. The NIA/Safety and Risk Assessment workgroup is in the final stage of revising policy and clarifying questions which resulted from the pilot project.

*Recommendation 5: The Panel believes that an over-sampling of cases should always be done for quarterly scheduled QI case reviews.*

Discussion:

The panel understands that over-sampling is currently optional and may or may not be done during QI case reviews. The Panel believes that an over-sampling of cases should always be done to ensure that the allotted reviewers’ time is used fully during quarterly reviews.

The Panel is also concerned that the current QI process is seen more as a retrospective review rather than a corrective tool. The Panel would like to emphasize that QI is intended to be an improvement process through which policy and practice changes are made and implemented.

Response:

This recommendation was incorporated by the state. Currently an over-sampling of 4-6 cases is pulled in preparation for each review. The recent addition of QI staff have enabled the state to step-up their QI efforts in the area of child welfare. More analysis can be done and more targeted reviews of specific caseworker practices will likely occur in the future.

*Recommendation 6: An existing oversight group should be invited to serve as a fourth CRP for Nevada.*

Discussion:

In addition to the new northern and southern CRPs, which are tied into the Child Welfare Citizens Advisory Committees (CACS) for Washoe and Clark County, the Panel believes that an existing rural oversight group should be invited to participate as a fourth CRP through the ongoing expansion of the CRP process in 2007. The existing statewide CRP will continue with its broader focus, while the new regional CRPs will be better positioned to take a deeper look at local issues related to child welfare. Because this is being done in the two largest populations centers in the state, the Panel believes that more localized rural representation should be incorporated as well in order to promote geographic equity in the on-going expansion of Nevada’s CRP process.

Response:

The state is in the process of enlisting an entity in the rural jurisdiction to serve as a CRP.

I would like to take this opportunity to thank the members of the Nevada Citizen Review Panel for their volunteer work to improve the child protection system and look forward to their continued review and recommendations.



Sincerely,

Fernando Serrano, Administrator

Cc: Annette Appell, Citizen Review Panel Member  
Mary Herzik, Citizen Review Panel Member  
Tom Mortin Director, Clark County Department of Family Services  
Michael Capello, Director, Washoe County Department of Social Services  
Barbara Legier, Deputy Administrator

***Attachment 3***

**ATTORNEY GENERAL**

**NEVADA DEPARTMENT OF JUSTICE**

**100 North Carson Street  
Carson City, Nevada 89701-4717**

CATHERINE  
CORTEZ MASTO

Attorney General

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RANDAL R. MUNN

Assistant Attorney  
General

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May 23, 2007

Fernando Serrano, Administrator  
Division of Child and Family Services  
4126 Technology Way, 3<sup>rd</sup> Floor  
Carson City, Nevada 89706

Re: *Administration for Children and Families: Annual Progress and Services Report - CAPTA State Grant - Section B(8)*

Dear Mr. Serrano:

This letter is in response to the Administration for Children and Families (ACF) Annual Progress and Services Report (APSR), CAPTA State Grant Section B(8) in reference to Assembly Bill (AB) 261. The APSR requires an explanation from the State Attorney General as to why AB 261 would or would not affect eligibility pursuant to 42 USC §5106a(b)(1)(B).

It is the belief of the Nevada Attorney General's office that the substantive statutory changes in AB 261 would not affect eligibility under CAPTA. 42 USC §5106a(b)(2)(A)(viii)(VI) provides confidential information shall be made available to "other entities or classes of individuals statutorily authorized by the State to receive such information pursuant to a legitimate State purpose."

AB 261 allows certain information to be disclosed to a federal, state or local government entity, and the public in the following cases: 1) cases involving a missing child who is the subject of an abuse or neglect investigation and in protective custody of the child welfare agency or another agency ordered by the court; and 2) cases involving the fatality or near fatality of a child. The legitimate State purpose for allowing the first disclosures is to assist in locating a missing child when a child is in State custody. The legitimate State purpose for allowing the second disclosures is to allow more transparency and prevent future fatalities or near fatalities. Further, 42 USC §5106a(b)(2)(A)(x) requires States to set forth procedures for public disclosure in cases of child abuse or neglect that result in a child fatality or near fatality.

The substantive changes to AB 261 do not seem to affect how funds provided under CAPTA will be used to support activities that differ from the activities described in the current State application. See, 42 USC §5106a(b)(1)(B)(ii). In fact,

AB 261 evolved out of discussions and litigation concerning the confidentiality of certain information in the possession of child welfare agencies, and the CAPTA requirements for disclosure of that information.

If you have any questions or concerns, please feel free to call me.

Sincerely,

CATHERINE CORTEZ MASTO  
Attorney General

By: \_\_\_\_\_  
Cynthia Pyzel  
Chief Deputy Attorney General  
Health and Human Services Division  
775-684-1136

Enc: AB 261

## Attachment 4

### Assembly Bill No. 261—Committee on Health and Human Services

#### CHAPTER.....

AN ACT relating to children; authorizing an agency which provides child welfare services to release to certain governmental agencies certain information concerning missing children who are in protective custody or with whom the agency has had contact; requiring an agency which provides child welfare services to release, upon request, certain information relating to a case of abuse or neglect which results in a fatality or near fatality; requires the Legislative Auditor to receive and review certain information concerning certain children who suffer a fatality or near fatality; and providing other matters properly relating thereto.

#### Legislative Counsel's Digest:

Existing law makes certain reports and records concerning reports of child abuse or neglect confidential except in certain circumstances and authorizes the release of certain information relating to data and information concerning reports and investigations of abuse and neglect of a child to specific persons. (NRS 432B.280, 432B.290) Section 2 of this bill authorizes an agency which provides child welfare services to release certain information relating to a missing child who is the subject of an investigation of abuse or neglect and who is in the protective custody of the agency which provides child welfare services or who is in the custody of another entity pursuant to the order of a juvenile court to certain governmental agencies that need the information to assist in locating the child and to carry out their duties in protecting children from abuse and neglect. The information that may be released includes the child's name, age, physical description and photograph. The agencies receiving this information may disclose the information to members of the general public upon request.

Section 3 of this bill requires an agency which provides child welfare services to release upon request certain information relating to a case of abuse or neglect of a child which results in a fatality or near fatality. The information that must be released includes the information that the Eighth Judicial District Court held in *In re Clark County*, 05-A510196 (April 4, 2006), may be disclosed in cases of child fatalities or near fatalities pursuant to the Child Abuse Prevention and Treatment Act of 1974, Public Law 93-247.

Sections 8-12 of this bill require the Legislative Auditor to receive and review certain information concerning any child who has had contact with or who has been in the custody of an agency which provides child welfare services and who suffers a fatality or near fatality. The Legislative Auditor is required to release certain information concerning such children upon request.

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THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 432B of NRS is hereby amended by adding thereto the provisions set forth as sections 2 and 3 of this act.

Sec. 2. 1. *For purposes of assisting in locating a missing child who is the subject of an investigation of abuse or neglect and who is in the protective custody of an agency which provides child welfare services or in the custody of another entity pursuant to the order of the juvenile court, an agency which provides child welfare services may provide the following information to a federal, state or local governmental entity, or an agency of such an entity, that needs access to the information to carry out its legal responsibilities to protect children from abuse or neglect:*

- (a) *The name of the child;*
- (b) *The age of the child;*
- (c) *A physical description of the child; and*
- (d) *A photograph of the child.*

2. *Information provided pursuant to subsection 1 is not confidential and may be disclosed to any member of the general public upon request.*

Sec. 3. 1. *Data or information concerning reports and investigations thereof made pursuant to this chapter must be made available pursuant to this section to any member of the general public upon request if the child who is the subject of a report of abuse or neglect suffered a fatality or near fatality. Any such data and information which is known must be made available not later than 48 hours after a fatality and not later than 5 business days after a near fatality. Except as otherwise provided in subsection 2, the data or information which must be disclosed includes, without limitation:*

- (a) *A summary of the report of abuse or neglect and a factual description of the contents of the report;*
- (b) *The date of birth and gender of the child;*
- (c) *The date that the child suffered the fatality or near fatality;*
- (d) *The cause of the fatality or near fatality, if such information has been determined;*
- (e) *Whether the agency which provides child welfare services had any contact with the child or a member of the child's*

family or household before the fatality or near fatality and, if so:

(1) The frequency of any contact or communication with the child or a member of the child's family or household before the fatality or near fatality and the date on which the last contact or communication occurred before the fatality or near fatality;

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(2) Whether the agency which provides child welfare services provided any child welfare services to the child or to a member of the child's family or household before or at the time of the fatality or near fatality;

(3) Whether the agency which provides child welfare services made any referrals for child welfare services for the child or for a member of the child's family or household before or at the time of the fatality or near fatality;

(4) Whether the agency which provides child welfare services took any other actions concerning the welfare of the child before or at the time of the fatality or near fatality; and

(5) A summary of the status of the child's case at the time of the fatality or near fatality, including, without limitation, whether the child's case was closed by the agency which provides child welfare services before the fatality or near fatality and, if so, the reasons that the case was closed; and

(f) Whether the agency which provides child welfare services, in response to the fatality or near fatality:

(1) Has provided or intends to provide child welfare services to the child or to a member of the child's family or household;

(2) Has made or intends to make a referral for child welfare services for the child or for a member of the child's family or household; and

(3) Has taken or intends to take any other action concerning the welfare and safety of the child or any member of the child's family or household.

2. An agency which provides child welfare services shall not disclose the following data or information pursuant to subsection 1:

(a) Except as otherwise provided in subsection 3 of NRS 432B.290, data or information concerning the identity of the person responsible for reporting the abuse or neglect of the child to a public agency;

(b) The name of the child who suffered a near fatality or the name of any member of the family or other person who lives in the household of the child who suffered the fatality or near fatality;

(c) A privileged communication between an attorney and client; and

(d) Information that may undermine a criminal investigation or pending criminal prosecution.

3. The Division of Child and Family Services shall adopt regulations to carry out the provisions of this section.

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4. As used in this section, "near fatality" means an act that places a child in serious or critical condition as verified orally or in writing by a physician, a registered nurse or other licensed provider of health care. Such verification may be given in person or by telephone, mail, electronic mail or facsimile.

Sec. 4. NRS 432B.280 is hereby amended to read as follows:

432B.280 1. ~~[Reports]~~ Except as otherwise provided in sections 2 and 3 of this act, reports made pursuant to this chapter, as well as all records concerning these reports and investigations thereof, are confidential.

2. Any person, law enforcement agency or public agency, institution or facility who willfully releases data or information concerning such reports and investigations, except:

(a) Pursuant to a criminal prosecution relating to the abuse or neglect of a child;

(b) As otherwise authorized pursuant to section 2 or 3 of this act;

(c) As otherwise authorized or required pursuant to NRS 432B.290; or

~~[(e)]~~ (d) As otherwise required pursuant to NRS 432B.513, \_ is guilty of a misdemeanor.

Sec. 5. NRS 432B.290 is hereby amended to read as follows:

432B.290 1. Except as otherwise provided in subsections 2 [, 5 and 6] and 3 and NRS 432B.513, and sections 2 and 3 of this act, data or information concerning reports and investigations thereof made pursuant to this chapter may be made available only to:

(a) A physician, if the physician has before him a child who he has reasonable cause to believe has been abused or neglected;

(b) A person authorized to place a child in protective custody, if the person has before him a child who he has reasonable cause to believe has been abused or neglected and the person requires the information to determine whether to place the child in protective custody;

(c) An agency, including, without limitation, an agency in another jurisdiction, responsible for or authorized to undertake the care, treatment or supervision of:

(1) The child; or

(2) The person responsible for the welfare of the child;

(d) A district attorney or other law enforcement officer who requires the information in connection with an investigation or prosecution of the abuse or neglect of a child;

- (e) A court, for in camera inspection only, unless the court determines that public disclosure of the information is necessary for the determination of an issue before it;
- (f) A person engaged in bona fide research or an audit, but information identifying the subjects of a report must not be made available to him;
- (g) The attorney and the guardian ad litem of the child;
- (h) A grand jury upon its determination that access to these records is necessary in the conduct of its official business;
- (i) A federal, state or local governmental entity, or an agency of such an entity, that needs access to the information to carry out its legal responsibilities to protect children from abuse and neglect;
- (j) A person or an organization that has entered into a written agreement with an agency which provides child welfare services to provide assessments or services and that has been trained to make such assessments or provide such services;
- (k) A team organized pursuant to NRS 432B.350 for the protection of a child;
- (l) A team organized pursuant to NRS 432B.405 to review the death of a child;
- (m) A parent or legal guardian of the child and an attorney of a parent or guardian of the child, if the identity of the person responsible for reporting the ~~alleged~~ abuse or neglect of the child to a public agency is kept confidential;
- (n) The persons who are the subject of a report;
- (o) An agency that is authorized by law to license foster homes or facilities for children or to investigate persons applying for approval to adopt a child, if the agency has before it an application for that license or is investigating an applicant to adopt a child;
- (p) Upon written consent of the parent, any officer of this State or a city or county thereof or Legislator authorized, by the agency or department having jurisdiction or by the Legislature, acting within its jurisdiction, to investigate the activities or programs of an agency which provides child welfare services if:
  - (1) The identity of the person making the report is kept confidential; and
  - (2) The officer, Legislator or a member of his family is not the person alleged to have committed the abuse or neglect;
- (q) The Division of Parole and Probation of the Department of Public Safety for use pursuant to NRS 176.135 in making a presentence investigation and report to the district court or pursuant to NRS 176.151 in making a general investigation and report;

- (r) Any person who is required pursuant to NRS 432B.220 to make a report to an agency which provides child welfare services or to a law enforcement agency;
  - (s) The Rural Advisory Board to Expedite Proceedings for the Placement of Children created pursuant to NRS 432B.602 or a local advisory board to expedite proceedings for the placement of children created pursuant to NRS 432B.604;
  - (t) The panel established pursuant to NRS 432B.396 to evaluate agencies which provide child welfare services; or
  - (u) An employer in accordance with subsection 3 of NRS 432.100.
- ~~2. Except as otherwise provided in subsection 3, data or information concerning reports and investigations thereof made pursuant to this chapter may be made available to any member of the general public if the child who is the subject of a report dies or is critically injured as a result of alleged abuse or neglect, except that the data or information which may be disclosed is limited to:~~
- ~~(a) The fact that a report of abuse or neglect has been made and, if appropriate, a factual description of the contents of the report;~~
  - ~~(b) Whether an investigation has been initiated pursuant to NRS 432B.260, and the result of a completed investigation; and~~
  - ~~(c) Such other information as is authorized for disclosure by a court pursuant to subsection 4.~~
- ~~3. An agency which provides child welfare services shall not disclose data or information pursuant to subsection 2 if the agency determines that the disclosure is not in the best interests of the child or if disclosure of the information would adversely affect any pending investigation concerning a report.~~
- ~~4. Upon petition, a court of competent jurisdiction may authorize the disclosure of additional information to the public pursuant to subsection 2 if good cause is shown by the petitioner for the disclosure of the additional information.~~
- ~~5. An agency investigating a report of the abuse or neglect of a child shall, upon request, provide to a person named in the report as allegedly causing the abuse or neglect of the child:~~
- ~~(a) A copy of:~~
    - ~~(1) Any statement made in writing to an investigator for the agency by the person named in the report as allegedly causing the abuse or neglect of the child; or~~
    - ~~(2) Any recording made by the agency of any statement made orally to an investigator for the agency by the person named in the report as allegedly causing the abuse or neglect of the child; or~~

(b) A written summary of the allegations made against the person who is named in the report as allegedly causing the abuse or neglect of the child. The summary must not identify the person responsible for reporting the alleged abuse or neglect.

~~[6.]~~ 3. An agency which provides child welfare services shall disclose the identity of a person who makes a report or otherwise initiates an investigation pursuant to this chapter if a court, after reviewing the record in camera and determining that there is reason to believe that the person knowingly made a false report, orders the disclosure.

~~[7.]~~ 4. Any person, except for:

(a) The subject of a report;

(b) A district attorney or other law enforcement officer initiating legal proceedings; or

(c) An employee of the Division of Parole and Probation of the Department of Public Safety making a presentence investigation and report to the district court pursuant to NRS 176.135 or making a general investigation and report pursuant to NRS 176.151, who is given access, pursuant to subsection 1 or 2, to information identifying the subjects of a report and who makes this information public is guilty of a misdemeanor.

~~[8.]~~ 5. The Division of Child and Family Services shall adopt regulations to carry out the provisions of this section.

Sec. 6. Chapter 218 of NRS is hereby amended by adding thereto the provisions set forth as sections 7 to 12, inclusive, of this act.

Sec. 7. *As used in sections 7 to 12, inclusive, of this act, unless the context otherwise requires, the words and terms defined in sections 8, 9 and 10 of this act have the meanings ascribed to them in those sections.*

Sec. 8. *"Abuse or neglect of a child" has the meaning ascribed to it in NRS 432B.020.*

Sec. 9. *"Agency which provides child welfare services" has the meaning ascribed to it in NRS 432B.030.*

Sec. 10. *"Near fatality" means an act that places a child in serious or critical condition as verified orally or in writing by a physician, a registered nurse or other licensed provider of health care. Such verification may be given in person or by telephone, mail, electronic mail or facsimile.*

Sec. 11. 1. *Any time that a child who has had contact with, or who has been in the custody of, an agency which provides child welfare services suffers a fatality or a near fatality, the agency which provides child welfare services shall notify the Legislative*

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*Auditor or his designee and shall forward to the Legislative Auditor or his designee as soon as possible any files, notes, information and records which the agency has concerning the child, the manner in which the case was handled, any services that were provided to the child or the family of the child and any other relevant information.*

2. *The Legislative Auditor or his designee shall review the information obtained pursuant to subsection 1 to determine whether the case was handled in a manner which is consistent with state and federal law and to determine whether any measures, procedures or protocols could have assisted in preventing the fatality or near fatality.*

3. *Each agency which provides child welfare services shall:*

(a) *Cooperate fully with the Legislative Auditor or his designee;*

(b) *Provide the Legislative Auditor or his designee with any data, reports or information concerning a report or investigation of the abuse or neglect of a child and the response by the agency; and*

(c) *Allow the Legislative Auditor to inspect, review and copy any records, reports and other documents relevant to his duties pursuant to this section.*

Sec. 12. 1. *Except as otherwise provided in subsections 2 and 3, upon request, the Legislative Auditor or his designee shall provide data and information obtained pursuant to section 11 of this act concerning a child who suffered a fatality or near fatality who had contact with or who was in the custody of an agency which provides child welfare services. The data or information which must be disclosed includes, without limitation:*

(a) *A summary of the report of the abuse or neglect of the child and a factual description of the contents of the report;*

(b) *The date of birth and gender of the child;*

(c) *The date that the child suffered the fatality or near fatality;*

(d) *The cause of the fatality or near fatality, if such information has been determined;*

(e) *Whether the agency which provides child welfare services had any contact with the child or a member of the child's family or household before the fatality or near fatality and, if so:*

(1) *The frequency of any contact or communication with the child or a member of the child's family or household before the fatality or near fatality and the date on which the last contact or communication occurred before the fatality or near fatality;*

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(2) *Whether the agency which provides child welfare services provided any child welfare services to the child or to a member of the child's family or household before or at the time of the fatality or near fatality;*

(3) *Whether the agency which provides child welfare services made any referrals for child welfare services for the child or for a member of the child's family or household before or at the time of the fatality or near fatality;*

- (4) Whether the agency which provides child welfare services took any other actions concerning the welfare of the child before or at the time of the fatality or near fatality; and*
- (5) A summary of the status of the child's case at the time of the fatality or near fatality, including, without limitation, whether the child's case was closed by the agency which provides child welfare services before the fatality or near fatality and, if so, the reasons that the case was closed; and*
- (f) Whether the agency which provides child welfare services, in response to the fatality or near fatality:*
- (1) Has provided or intends to provide child welfare services to the child or to a member of the child's family or household;*
- (2) Has made or intends to make a referral for child welfare services for the child or for a member of the child's family or household; and*
- (3) Has taken or intends to take any other action concerning the welfare and safety of the child or a member of the child's family or household.*
- 2. The Legislative Auditor or his designee shall not disclose information pursuant to subsection 1 unless the person making the request has requested such information from the agency which provides child welfare services and has been denied access to such information or has not received the information in a timely manner.*
- 3. The Legislative Auditor or his designee shall not disclose the following data or information pursuant to subsection 1:*
- (a) Except as otherwise provided in subsection 3 of NRS 432B.290, data or information concerning the identity of the person responsible for reporting the abuse or neglect of the child to a public agency;*
- (b) The name of the child who suffered a near fatality or the name of any member of the family or other person who lives in the household of the child who suffered the fatality or near fatality;*

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- (c) A privileged communication between an attorney and client; or*
- (d) Information that may undermine a criminal investigation or pending criminal prosecution.*
- Sec. 13. This act becomes effective on July 1, 2007.



## **APPENDIX B**

### **CHAFEE FOSTER CARE INDEPENDENT LIVING PROGRAM (CFCIP) PROGRAM DESCRIPTION**

#### Goal and Eligibility

The goal of Nevada's Independent Living (IL) Program is to provide youth making the transition into adulthood with the skills and resources necessary to be independent and productive members of society.

The Division of Child and Family Services is responsible for the oversight of Independent Living Programs in Nevada. The oversight responsibility is assigned to the statewide Independent Living Specialist at the Division Central Office. Nevada is a state-supervised and county-administered program in the two major metropolitan counties, Clark and Washoe. Nevada continues to supervise and administer all child welfare programs in the remaining 15 rural counties, comprising the Rural Region. Nevada plans to continue the implementation of its IL Program by allocating both federal and state funds to the two county-administered programs, the State administered Rural Region, and tribal entities. The State will continue to retain a portion of the federal funds to develop statewide systems and materials to support county and rural implementation efforts, to monitor program development and implementation, to provide technical assistance, and to continue to assess program impact. Nevada and its independent living partners will cooperate with the national evaluations of the effects of independent living programs in achieving the purposes of the Chafee Foster Care Independence Program.

Nevada's Independent Living Program is a set of services available to all foster youth between the ages of 15 until the age of 21. The Division considers all eligible foster youth to include those youth who are in the care and custody of the Division, Washoe County Department of Social Services, or Clark County Department of Family Services. The Division considers foster care to be the legal status of the child. The physical placement of the child does not determine the eligibility for independent living services. Independent living services may continue with the child after permanency has been achieved, depending on the needs of the child. Nevada will also extend independent living services to eligible youth who have relocated to Nevada from another state.

Federal independent living funding is provided to all county and state programs to provide independent living services, expand existing services, and to establish new services to eligible children. Federal funds are combined with existing state funds to provide independent living services to eligible foster youth and former foster youth transitioning to independence. State funds through the Funds to Assist Former Foster Youth Program (FAFFY) are funds dedicated to Nevada foster youth who are transitioning from care and for Nevada youth who have aged out of the Nevada foster care system.

In 2000, the Nevada State Legislature passed legislation creating the Assistance for Former Foster Youth fund by requiring county recorders to collect an "additional fee of \$1 for recording a document, instrument, paper, notice, deed, conveyance, map, chart, survey or any other writing" other than the originally signed marriage certificate. This fund was specifically created to provide the necessary goods and services to Nevada youth who age out of the foster care system. The Legislative Council Bureau, with the concurrence of the Office of the Attorney General, determined that the fund could also be used to assist youth who are currently in the care and custody of the state with their transition to independence. Services are available until the youth reached the age of 21. Goods and services include, but are not limited to, job training, housing assistance, case management, and medical insurance. The legislation directs the State to limit the administrative costs of the fund to 10% or less. During the Child and Family Services Review in February 2004, Nevada was commended for the creation of this fund, and the fund was noted as a promising practice in Nevada.

#### **SCOPE OF SERVICES**

Nevada makes available federal and state funds to support IL services to support existing programs as well as encourage the development of new programs. Nevada will continue to encourage the counties and Rural Region to out-source its programs through private vendors to fully develop the array of services necessary for their region.

Funds for the Independent Living Program are distributed from the state to the counties and to the Rural Region to support independent living program development and activities. In Clark County, Chafee funds are distributed through the Department of Family Services (CCDFS) to Future Stars of America, a non-profit organization. Ansell-Casey Life Skills Assessments and life skills classes are provided by Future Stars of America who partners within the private non-profit and profit sector to compliment their array of independent living services. In addition, state resources from the Assistance to Former Foster Youth Fund are combined with Chafee funds for youth who have left placement. CCDFS sub-contracts with Child Focus, a private non-profit agency for the purpose of providing the funds and services associated with the

## Assistance to Former Foster Youth funds.

In Washoe County, all Chafee and state funds are routed through Washoe County Department of Social Services (WCDSS) to the Children's Cabinet, a private, non-profit organization, to provide independent living services to eligible youth who are in custody and to those youth who have left placement. The Rural Region of DCFS routes both federal and state funds through JOIN (Job Opportunities in Nevada), a WIA (Workforce Investment Act) provider, for all independent living program activities for youth in care, and to those youth who have left placement. The Rural Region routes additional Chafee funds for stipends to youth in care through IV-B Family Resource Centers.

The Division has partnered with the Tribal Stepping Stones Shelter in Fallon, Nevada to receive Chafee and FAFFY funds for Native American Youth. The Stepping Stones Shelter is on the Fallon Paiute-Shoshone Reservation in Fallon, Nevada. Nevada distributes independent living funds, both federal and state funds, to tribal youth through the Fallon Paiute-Shoshone Tribal Stepping Stones Shelter enabling the tribes to develop programming specific to tribal youths needs. Stepping Stones was designated to be the Chafee recipient by the Nevada tribal entities after lengthy consultation and deliberation. (Refer to Attachment, Figure 1, Statewide Programs and Distribution of Funds.)

### **Youth Advisory Board** **PIP TRANSFER ITEM 10.1.3**

Action Step	Accountable person	Method of Measurement	Benchmark toward achieving goal	Due Date
10.1 The State will establish a statewide Youth Advisory Board.	Statewide Representative (1)  Rural Representative (1)  Southern Representative (1)  Northern Representative (1)	Board Established	10.1.3 Establish statewide and local Youth Advisory Board pilot area. Establishment of Youth Advisory Boards with Technical Assistance from the NRC for Youth Development will be incorporated into the Child and Family Services Plan and reported in the Annual Progress and Services Report	June 30 <sup>th</sup> (Annually)

The Division has been working closely with the National Resource Center for Youth Development (NRC) with a goal of developing a Statewide Youth Advisory Board. Initially, the plan was to develop a pilot Youth Advisory Board in each region, however, after consultation with the NRC, it was determined that a Statewide Board would better serve the youth in Nevada. By developing a Statewide Board, participants could go back into their local communities and build local boards. There will be statewide participation from each region and our tribal partners. Some of the youth participating in the development of the Board attended the "Destination Future 2006 National Youth Leadership Conference: Improving the System through Youth Involvement" this past summer. The first Statewide Youth Advisory Board meeting was held on January 5-6, 2007 in Reno, Nevada.

DCFS continues to collaborate with trustees overseeing the Otto Huth scholarship award program. Scholarships are awarded to youth aging out of the foster care system in the state of Nevada. As a result of meetings with the scholarship committee, policy revisions concerning eligibility were made in order to open the scholarship to a greater number of foster youth. It is anticipated that the changes made to existing policy will be made prior to the next award cycle in May 2008.

For Fiscal Year 2007, Nevada's Independent Living sub-grantees and service providers will be provided with additional technical assistance from the University of Nevada, Reno in order to develop online reporting and performance indicators. It is anticipated that additional assistance in this area will provide the State and its sub-grantees specific outcome data for continued program development and enhancement with the goal of providing quality services to improve the quality of life for our youth.

The Division of Child and Family Services released a Request for Proposal for Fiscal Year 2008. The request mapped the requirements for Chafee and the Fund to Assist Former Foster Youth (previously known as AB94 and now recognized as FAFFY or Transition From Foster Care) and required each region and the tribal representative (Stepping Stones) to identify its local plan for providing services.

Each year, Chafee and FAFFY monies were calculated and distributed to each region based upon the total number of youth in care, the number of 17 year olds in care, and the total number of youth receiving Independent Living Services. Clark County received 66% of the funds while Washoe County received 19%, the Rural Region 13% and Stepping Stones

2%.

The Division has contracted with Digital Matrix Software Solutions (DMSS) through the University of Nevada, Reno to facilitate online reporting for statewide grantees and sub-grantees of Chafee, FAFFY and ETV. The system will be tailored to meet each grantee's data needs while at the same time meeting the goals of the National Youth in Transition Database (NYTD). The regions and their respective sub-grantees have participated in focus groups to develop reporting elements including data elements required by federal and state regulation. This statewide system will provide real time data analysis, regionally and statewide, allowing us to study and evaluate services while assessing outcomes for our youth. The system will be developed over this next year with actual use beginning in early 2008.

*1. Help youth make the transition to self-sufficiency*

A statewide team, including tribal partners, developed a new Youth Plan for Independent Living Policy (approved July 18, 2006) to increase planning services for all youth in care and transitioning out of care. The policy requires that all youth age 15 and older have a Youth Plan for Independent Living completed with a Child and Family Team. These plans must be updated at a minimum, every six months and provided to the court for the semi-annual and permanency reviews to assure the youth is receiving appropriate services. These plans will also be updated in preparation of the youth's exit from care with special attention provided to aftercare needs. The regions also provide exit interviews to insure that youth are aware of service availability. These practices will continue over the next year with adjustments to policy and programming done as needed to increase the benefit to youth. The Division sent a copy of the new Youth Plan for Independent Living to all providers caring for youth ages 15 to 18 and encouraged providers to get involved with the planning process.

The Division, in conjunction with its regional and tribal partners, will be formalizing the Statewide Steering Committee. The Committee will provide an avenue for identification of programming needs requiring attention on a statewide and regional level with the goal of strengthening our Independent Living and Aftercare Program. Although not formalized, the Division has been conducting these meetings which have provided an excellent opportunity for sharing struggles and creative programming. Many programming issues are resolved and/or brought to the Division's attention as a result of these meetings.

Pursuant to PIP 10.1.3, the Division has been working with the National Resource Center for Youth Development ("NRC") with a goal of developing a Statewide Youth Advisory Board ("YAB"). Initially, the plan was to develop a regional pilot YAB, however, after consultation with the NRC, it was determined that a statewide board would better serve the youth of Nevada. By developing a statewide board, participants could go back into their local communities and build local boards. There will be statewide participation from each region and our tribal partners. Some of the youth participating in the development of the Board attended the "Destination Future 2006 National Youth Leadership Conference: Improving the System thorough Youth Involvement" this past summer. The inaugural meeting was held January 5-6, 2007 in Reno, Nevada, and the second convening took place in Las Vegas, Nevada April 20-21. At the second meeting, the youth elected board officers and tentatively arranged for a Rural Region meeting convening in Summer 2007. The youth are able to maintain momentum on their goals with videoconferences on a bi-monthly basis in between in-person meetings.

Clark County has a functioning Independent Living Oversight Committee as mandated by state regulation for FAFFY funds but the other two regions are still in the process of assembling their own committees. With the help of the NRC, The State hopes to determine the best way of implementing regional oversight committees and youth advisory boards.

Clark County will include youth in the development of programming, policies and procedures over the next year utilizing their Youth Advisory Board, Independent Living Oversight Committee and internal agency workgroups.

The Rural Region has commenced with the implementation of Independent Living Classes which are youth drive and youth focused. This year's programming will focus on youth responsibility and accountability to foster youth independence. The classes are provided by Job Opportunities in Nevada (JOIN), the Rural Region provider for all Independent Living Services. While staff identified issues related to employment preparation and life skills such as budgeting, youth have expressed an increased desire to improve relationship skills. Former foster youth also talked to youth about their struggles in care and as young adults which encouraged younger youth to talk about their problems, fears and needs. As the program just recently commenced, programming changes will be implemented to meet youth requests over the next year.

*2. Help youth receive the education, training, and services necessary to obtain employment*

The Division is collaborating and participating as an invitee on the Governor's Workforce Investment Board's Youth Council Taskforce to continue community partnerships and increase school-to-work programs. The taskforce meets approximately every six (6) weeks and is currently identifying 2008 programming goals.

Clark County will be building its partnership over the next year with Southern Nevada Workforce Investment Board to increase opportunities for current and former foster youth employment. Clark County has already partnered with the Department of Employment, Training and Rehabilitation for services and will continue to build this partnership. Additionally, Clark County provides financial assistance to youth who require special equipment and/or clothing and uniforms for their employment.

*3. Help youth prepare for and enter post-secondary training and educational institutions*

As part of our newly formed partnership with Digital Matrix Software Solutions, the Division is beginning to evaluate ETV programming. Our initial tasks included the development of an ETV Fact Sheet and ETV Application for Funds. Additionally, coordination with the Nevada University System is critical therefore we will be working with the financial aid offices to ensure youth are accessing all scholarships and federal funding available to them in addition to ETV funds and the Otto Huth Scholarship. This approach will enable us to develop programming while increasing the pool of youth able to access funding.

Washoe County is a Model Court site through the National Council of Juvenile and Family Court Judges. Currently, Washoe County Department of Social Services is collaborating with the Second Judicial District Model Court regarding educational outcomes for all foster youth. The project's goals are to eliminate barriers for foster children and foster parents in accessing the educational system while providing children in foster care the opportunities to achieve the same high-quality academic standards expected of all children in the community.

Clark County provided a "Back to School Fair" for all high school junior and seniors. The Fair prepared youth for their exit from high school. Booths offered information related to post-secondary institutions, apprenticeship programs and vocational training programs, scholarship opportunities, ETV and financial aid. In addition to the Fair, Clark County's vendor for Independent Living Services will continue to provide educational tutoring to youth.

*4. Provide personal and emotional support to youth through mentors and the promotion of interactions with dedicated adults*

Although youth are encouraged to participate in mentoring programs, all regions have indicated that they continue to struggle in maintaining mentor relationships. Regions report that youth are more engaged and willing to participate with adults they have identified for themselves. The Youth Plan for Independent Living Policy supports this concept and places responsibility on the Child and Family Team for supporting youth in the identification of appropriate adult relationships. Over the next year, utilizing the Youth Advisory Board, we will continue to develop strategies for increasing mentor relationships.

Clark County reports that they have had difficulty encouraging youth as the youth have CASAs, attorneys, as well as workers and the youth feel that they do not require additional adult interaction. Clark does have a mentor program through their Independent Living Provider, Child Focus, and with a community provider, Mentor Match, which is a component of Nevada Partnership for Youth. The State will continue to monitor the progress of this program in hopes of replicating in other regions.

In May 2007, the interim Statewide Independent Living Coordinator had the opportunity to attend the Pathways to Adulthood Conference, and participated in a training geared to involving youth in the CFSR process. Nevada plans to incorporate this innovative approach to include the youth voice in the next CFSR, scheduled for 2009.

*5. Provide financial, housing, counseling, employment, education, and other appropriate support and services to former foster care recipients between 18 and 21 years of age*

Statewide public and private partnerships are developed to provide IL services throughout the state. Each region develops a service array unique to their community. Representatives from independent living partners from all regions, including tribal representation and independent living youth, contributed to the development of the statewide CFSP process.

An independent living oversight committee meets monthly in Clark County to review independent living programs within the region. The primary focus of the committee has been addressing the needs of foster youth transitioning from care, and the needs of former foster youth. The committee is chaired by the Director of the Clark County Department of Family Services and is comprised of representatives from public and private stakeholders, including the court, youth, former foster youth, and foster parents.

Through the financial support of the Ritter Charitable Trust, in partnership with the Nevada Community Foundation Task Force on Foster Youth, the “Into the World A Life Book” was developed and distributed to youth exiting foster care in Clark County in 2005. The Ritter Charitable Trust developed and produced the “2006-2007 Into The World: A Life Book.” The book is provided to all youth exiting foster care in Southern Nevada and serves as a resource guide about many topics including: Legal Issues, Staying Connected, Education, Jobs and Job Training, Spiritual Matters, Dating and Relationships. The book is available online at [www.alifebook.org](http://www.alifebook.org). Washoe County and the Rural Region are collaborating and partnering with the Ritter Charitable Trust to develop a similar resource guide for Northern Nevada. It is anticipated that the Northern Nevada version will be distributed in Summer 2007.

All regions utilize Chafee and FAFFY monies to assist youth, ages 16-21, with transitional living needs. At age 16, depending on youth maturity and needs, youth statewide can live in an apartment under an Independent Living Contract.

Clark County will continue to partner with the Center for Independent Living and St Jude's which allows youth to select the type of support and assistance needed in achieving their independence. St Jude's provides a more structured supportive environment while the Center for Independent Living is an environment requiring more personal responsibility.

Washoe County is currently exploring a partnership with the Affordable Housing Council. Affordable Housing Resource Council has expressed interest in studying the feasibility of building a transitional living center with space for supportive services for foster youth in independent living. The Division has provided resource information and has offered future assistance in hopes of creating new programming within our state.

The Rural Region will be building its partnership with the Rural Regional Center to facilitate smoother transitions for youth with developmental disabilities.

The 2005 Nevada State Legislature allowed for the provision of Medicaid services to youth who have aged out. The Division and the regions will continue to work with Medicaid to clarify the population served and develop program publications that are youth friendly.

Percentage of each Fiscal Year program funds used for room and board for youth ages 18-21 and how the funds were used, e.g., for food, deposits, rent/utilities, and emergency assistance.

The Division of Child and Family Services' Family Programs Office (DCFS FPO) obtained Chafee Room and Board Funding information from Washoe County, Clark County and the Rural Region. Clark County and Stepping Stones (Tribal Representative) have not expended any money in this category, citing the Fund to Assist Former Foster Youth as the reason Chafee is not utilized for Room and Board at the same rate as other states. Chafee Room and Board is generally used by former foster youth from another state relocating to Nevada requesting assistance.

**Chafee Funding for Room and Board by Region  
For State Fiscal Year 2007**

Clark County	\$0	0%
Rural Region	\$750.5	3.25%
Washoe County	\$15,000	19%
Stepping Stones	\$0	0%
Statewide Totals	\$15,750.5	3%

**LEGISLATIVE ACTIVITIES IMPACTING YOUTH LEAVING FOSTER CARE**

The 2005 Nevada State Legislature passed AB 580 effectively amending Chapter 422 of the Nevada Revised Statutes (NRS) requiring the Medicaid State Plan to include and serve foster youth who have aged out of the foster care system. The legislation was effective July 1, 2005.

AB35 allows county employees to sign and verify an application for an instruction permit to drive or a driver's license of a person under the age of 18 years who is in the legal custody of the county. This bill also provides that no action may be commenced against the county or an officer or employee of the county for damages caused by the negligence or willful misconduct of a minor driver whose application for a driver's license was signed by an officer or employee of the county while the minor was in the custody of the county. Prior to this legislation, only state employees were provided this protection impacting county employees' ability to consent to youth driver's licenses for those youth in county custody.

## **STATEWIDE TRAINING ACTIVITIES**

In February 2006, the NRCYD hosted another event for Independent Living Specialists in Tulsa Oklahoma. This two day event targeted Chafee budgeting plans for each state, and one child welfare worker was invited to attend.

In April 2006, ten (10) foster youth, ten (10) youth from the juvenile justice system and several staff members (workers, management and administrative) attended the Governor sponsored "Youth Today-Employees Tomorrow: Engaging the New Workforce Conference." The statewide conference provided youth and youth workers with a program that emphasized skills and resources necessary to be successful in school and today's workplace. Administrative and program development staff attended a separate track along with representatives from the Department of Employment, Training and Rehabilitation, JOIN, Vocational Rehabilitation and Job Connect focusing on program development and inter-agency collaboration.

As a result of the conference, several employers in the Las Vegas area have committed to sponsoring youth to attend employment workshops in summer 2006. These workshops are facilitated by the employers in conjunction with the Southern Nevada Workforce Investment Board. Sponsored by the Governor's Youth Council Taskforce, work will continue to statewide to implement new strategies and collaborations with community partners to enhance our school-to-work programs.

Nevada showed statewide support in its attendance of the "Pathways to Adulthood Conference" held in April 2007 in Minneapolis, Minnesota. A DCFS Family Programs Office staff member as well as Clark County and community service provider staff were present and are currently in the process of determining how to incorporate new initiatives into future practice.

## **TRIBAL EFFORTS**

Native foster youth throughout the state are eligible to receive the full scope of independent living services from the region in which they reside. In order to ensure that tribes and Native youth are informed of the services, DCFS meets with tribal representatives through the Indian Child Welfare Steering Committee. These meetings provide a forum for state and tribal representatives to discuss issues relating to child welfare. The meetings are held at various tribal locations and are jointly facilitated by tribal and DCFS representatives.

During these meetings, independent living information and updates are provided to participants. This tribal association, in partnership with the state, determined that the independent living needs of tribal youth would best be met through their tribal shelter, Stepping Stones. Stepping Stones serves Native youth from all of the Nevada tribes. Nevada has encouraged its tribal partners to review its youth who have exited from care to determine if services can be expanded. The tribal entities in Nevada recently designated the Stepping Stones shelter as the appropriate statewide recipient for the Assistance to Former Foster Youth funds.

The Fallon Paiute-Shoshone Tribal Stepping Stones Shelter continues to partner with DCFS and other agencies within the state in order to improve and strengthen its service array for current and former native foster youth. At this time Stepping Stones Shelter is receiving Chafee and FAFFY funds and recently submitted a proposal to receive Assistance to Former Foster Youth money in order to support the infrastructure and service array necessary to provide services to tribal youth. The services provided by Stepping Stones include housing, food, clothing allowance, medical care, information and referral, educational services, Ansell-Casey Life Skills Assessment, life skills training, and job employment skill development.

Representatives from the Stepping Stones Shelter attended a two day training program sponsored by the National Resource Center for Youth Development (NRCYD), 2005 conference, "Youth Development: The Vital Link" workshop at Las Vegas, Nevada.

During the ICWA Symposium held on June 14-15, 2007 the Stepping Stones Program provided information to other statewide tribal representatives regarding IL and aftercare programming.

## **ADMINISTRATIVE SYSTEMS CHALLENGES**

In March 2004, the Division issued an Instructional Memorandum (IM) to the two urban counties, the DCFS Rural Region and Stepping Stones regarding the Assistance to Former Foster Youth fund. The purpose of the IM was to clarify the eligibility criteria for accessing the funds as defined in statute, and that assistance to youth transitioning to independence is an appropriate use of the funds, although the youth may not have reached the age of 18.

The statewide independent living service array in Nevada is in the process of being revised in order to better address transitional living options, medical services, mentoring, and necessary skill development for youth to achieve independence. As part of Nevada's Program Improvement Plan (PIP) there have been several action steps that specifically address improving services and planning efforts for custodial youth that will result in the standardization and development of services for youth. PIP items 7.1 and 7.2 address case planning and the need for diligent search efforts for youth.

A Memorandum of Understanding (MOU) between the Division of Child and Family Services and the Division of Mental Health and Developmental Services (MHDS) to assure transition of youth to adult services is in the process of being developed (PIP Item 10.3). The Statewide Collaboratively Served Youth (CSY) Committee first met in early September 2005 to work on the MOU. The committee has met monthly since that time and identified several issues that needed to be addressed in order to begin the work of writing a comprehensive Memorandum of Understanding (MOU) between DCFS (including Washoe and Clark Counties) and the Division of Mental Health and Developmental Services (DMHDS). These issues include funding, full participation of adult mental health in the development of the MOU, cross-agency training, Clark and Washoe County's involvement as full partners in the MOU, and articulation of respective agency missions.

The CSY Committee recognized the need for members to consult with their agencies regarding "collaborative budget building" in the coming legislative biennium. The result of these consultations will provide direction to each agency's administration for the purpose of insuring funding and seamless delivery systems for children with dual diagnoses.

The CSY Committee has now assigned a workgroup, with representation from all regions and all committee stakeholders, to begin the draft of the MOU. The workgroup met on February 10, 2006 to begin this process. The Transforming

Children's Mental Health Treatment Services in Nevada Steering Committee began monitoring the work of the CSY Committee in October of 2005 and directives have been made at the Departmental level of state government. Nevertheless, complications related to revising budgets for the biennium legislative session mean that the MOU may not be finalized and executed until January 1, 2007.

#### **Salary Comparison**     **PIP TRANSFER ITEM 23.5.2**

<b>Action Step</b>	<b>Accountable person</b>	<b>Method of Measurement</b>	<b>Benchmark toward achieving goal</b>	<b>Due Date</b>
23.5 The State will identify challenges to hiring mental health professionals and strategies to address them	Statewide Representative (1)  Rural Representative (1)  Southern Representative (1)  Northern Representative (1)	CFSP and APSR Reports	23.5.2 Identified strategies will be incorporated into the Child and Family Services Plan and reported in the Annual Progress and Services Report	June 30 <sup>th</sup> (Annually)

The Division of Child and Family Services (DCFS) conducted a salary comparison that was submitted to the State Department of Health and Human Services to identify State challenges in hiring mental health professionals. The survey compared salaries paid to State mental health professionals with those employed by other municipalities, in the private sector, and in 10 other Western States.

The mental health professional salary comparison showed a significant salary disparity between the State and other employers such as the counties and the private sector. The results helped DCFS gain the ability to start new mental health professionals at a higher initial salary for Mental Health Counselors, Clinical Social Workers and Licensed Psychologists. This resulted in the Division filling 13 existing vacant positions during the last six months, reducing existing vacancies from 16 positions in April, 2006 to 3 positions in February, 2007.

During state fiscal year 2007, the DCFS Behavioral Health Management Team initiated a self-assessment process based on lessons learned from the Child and Family Services Review (CFSR). This collaborative assessment process links regional workforce development plans with statewide recruitment efforts. This assessment suggested strategies for recruitment and retention of mental health professionals and these identified strategies were incorporated (by State Infrastructure Grant staff) into a more robust statewide Workforce Development Plan.

The key identified strategies (to be reported in the Annual Progress and Services Report) for the recruitment and retention of mental health professionals include:

1. Expand the IV-E Training Stipend/Forgivable Loan Programs at the University of Nevada, Las Vegas and the University of Nevada, Reno by 8 students (4 in the South, 4 in the North) during the 07/08 academic year. This program offers "forgivable loans" to mental health students during their senior year field practicum experience. If the student accepts the loan and (upon graduation), accepts a State mental health position, the loan is "forgiven" and the student holds no obligation to repay the monies.
2. Sponsor skill-based trainings for a high fidelity mental health wrap around process in the State of Nevada. This 2006-2008 project will utilize the National Institute of Mental Health's 3-year grant to Dr. Eric Bruns, Ph.D. and contracts with Vroon VanDenberg to train State mental health professionals and private providers in current "best practice" standards for child welfare mental health services. The strategy will be monitored for increased numbers of mental health training events and increased capacity to provide supervision for psychiatric caseworkers.
3. Review lessons learned in the Clark County Neighborhood Care Centers in recruiting and retaining a workforce that represents the culture of the community. Develop a statewide plan to recruit bi-lingual and cultural diversity in the workforce to match the population served. Develop a training plan to supplement current DCFS training on cultural competency for staff and Mental Health Consortia members.



Independent living service array continues to be developed and implemented statewide in conjunction with the three jurisdictions and the Tribes in order to address transitional living options; medical services, mentoring, and necessary skill develop for youth to achieve independence.

## **PLANNING NEEDS**

### **1. Statewide Plan**

Statewide planning for independent living was initiated in April 2004. Stakeholders from around the state were invited to participate in the planning process. Participants included representatives from youth, tribes, and independent living providers. The work group focused on improving permanency outcomes for older foster youth and youth likely to remain in care until they age out of the foster care system, however, there continues to be a need for planning and program improvement. With assistance from the National Resource Center for Youth Development (NRCYD), there was a statewide meeting in Fall 2005, in order to further define the direction of the program in order to enhance the infrastructure necessary to improve and sustain Nevada's Independent Living programs. Items addressed included youth eligibility, eligibility of juvenile corrections youth, expanding the scope of programming, statewide and local youth advisory boards, enhanced coordination of services, planning for youth in transition, identification of service strengths and barriers, and comments/concerns regarding existing and future services. Since then, the NRCYD has provided several more in-person trainings as well as technical assistance via telephone and videoconference in order to assist Nevada in assembling the Youth Advisory Board. In June 2007, the NRCYD also provided Ansell-Casey LifeSkills Assessment training to child welfare staff statewide. This training will allow workers to complete the PIP required Transition Plan, as well as train community service providers in administering the Assessment to youth. This training will continue throughout the state in July 2007.

### **2. Youth Development**

Youth and child welfare staff attended the 2006 Casey Family Programs Youth Conference and/or Destination Futures National Youth Leadership Conference. Participants included several members of the Statewide Advisory Board. DCFS encourages youth and staff to attend the Youth-Adult Partnership 2007 conference, sponsored by the NRCYD in Ridgecrest, North Carolina.

Nevada will continue to elicit assistance from the National Resource Center for Youth Development (NRCYD) in order to support activities/practices to assist youth in developing the skills necessary for successful transition to adulthood. In addition, there will be an emphasis on how to create and sustain statewide and local advisory boards to assist youth with advocacy, self-advocacy, leadership development, and program improvement efforts.

### **3. Policy and Procedure**

Nevada has developed, and implemented policies and procedures regarding permanency planning for youth aging out of the system and the adoption of older youth. The challenges presented in independent living planning were also addressed by the development and implementation of new policy on diligent search efforts as well as case management and case planning. In 2006, a statewide team developed a standardized transition plan which are to be individualized and youth driven. The development of these policies and procedures are the result of statewide collaboration required for PIP policy development and strategic state planning to improve services and permanency outcomes for foster youth.

## **Training Needs**

The Division recognizes the need for continuous training and technical assistance as follows:

- Continue to utilize training and technical assistance from the national resource centers for development and implementation of independent living programs statewide;
- Collaborate with foster care training, recruitment, and licensing to develop an independent living training module for foster parents;
- Include independent living foster youth (current and former) to assist in the training of foster parents;
- Provide statewide training to existing foster parents and care providers regarding independent living services and resources;

- Develop training for staff and supervisors regarding the identification of significant connections for youth and how to perform diligent search;
- Train staff and supervisors to ensure that they are knowledgeable about the full array of housing options that best meet the individualized needs of youth.
- Collaborate to enhance the coordination between IDEA and independent living planning; and
- Continue to provide statewide training to all workers, supervisors, independent living partners and stakeholders regarding independent living, and access to services.

**STATEWIDE PROGRAMS AND DISTRIBUTION OF FUNDS (SFY 2007)**

	CLARK COUNTY	WASHOE COUNTY	RURAL REGION	TRIBAL
CHAFEE FUNDS	Future Stars of America	The Children's Cabinet of Washoe County	Job Opportunities in Nevada (JOIN)  Children's Cabinet	Stepping Stones Tribal Shelter
STATE FUNDS FOR FORMER FOSTER YOUTH	Child Focus	The Children's Cabinet of Washoe County	Job Opportunities in Nevada (JOIN)	Stepping Stones Tribal Shelter

**TOTAL YOUTH SERVED 2007 (State Fiscal Year)**

	CLARK COUNTY	WASHOE COUNTY	RURAL REGION OF DCFS	TRIBAL SHELTER	TOTAL
CHAFEE FUNDS	373	47	35	21	476
STATE FUNDS FOR FORMER FOSTER YOUTH	200	110	35	17	362

**Supporting Data of IL Youth and Budget Calculations  
SFY '07 (7-1-06 to 6-30-07)**

	Total Age 17	Total Children in Foster Care	Total 17 Year Olds	Total IL Youth	Average
Stepping Stones	6		2%	2%	2%
Rural	42	9%	13%	11%	11%
Clark	215	71%	66%	70%	69%
Washoe	60	20%	19%	17%	18%
Total	323	100%	100%	100%	100%

Total Children in Foster Care

Total number of foster children in each region divided by the total number of foster children statewide (taken from the Placement Summary).

Rural:  $633 / 6999 = 9\%$

Clark:  $4976 / 6999 = 71\%$

Washoe:  $1390 / 6999 = 20\%$   
100%

Total 17 Year Olds

Total number of 17 year olds in each region divided by the total number of 17 years olds statewide. (The report states the total number statewide is 317. Adding six from the report of the number of youth served by Stepping Stones (6), brings the total to 324.)

Stepping Stones:  $6 / 323 = 2\%$

Rural:  $42 / 323 = 13\%$

Clark:  $215 / 323 = 66\%$

Washoe:  $60 / 323 = 19\%$   
100%

Total IL Youth

Total number of IL youth (ages 16 to 20) by each region divided by the total number of IL youth (ages 16 to 20) statewide. (The report states that the total number statewide is 898. Stepping Stones anticipates serving 20 youth this next year. Including Stepping Stones, the total is 918.)

Stepping Stones:  $20 / 918 = 2\%$

Rural:  $103 / 918 = 11\%$

Clark:  $641 / 918 = 70\%$

Washoe:  $154 / 918 = 17\%$   
100%

**\*This column is the average of the orange, yellow and blue columns.**

## APPENDIX C

### EDUCATION TRAINING VOUCHER PROGRAM (ETV)

#### INTRODUCTION

Federal legislation implemented the Foster Care Independence Act of 1999 (FCIA), also called the John H. Chafee Independence Program. The State of Nevada's funding allows increased support and services to foster youth transitioning from foster care to independent living and former foster youth between the ages of 18 and 21 years of age.

In 2005, DCFS received a total of \$192, 673 in ETV funding, serving a total of 63 youth in Nevada during the time period from July 1, 2005 to June 30, 2006. In 2006, DCFS received a total of \$413, 362 in ETV funding to be distributed to youth by September 30, 2008.

The Division supervises the ETV program and distributes ETV funds to eligible youth through a sub-grant to a community nonprofit organization. During this past year, the Division has worked with its new community partner, The Children's Cabinet, to improve the provision of ETV services to our youth. The Children's Cabinet has designated one staff person to administer the funding allowing youth statewide to have one point of contact. A toll-free number is provided and the application along with program rules is provided on the Children's Cabinet website. Brochures have been distributed statewide to all IL providers and child welfare agencies.

#### State of Nevada ETV Program 2006

##### NUMBER OF YOUTHS SERVED

State of Nevada ETV Program JULY 06-MAY 07	
NUMBER OF YOUTHS SERVED	
Total Number of youths served	68
Aver Age	20
Secondary Educations Being Obtained	
Number of youths attending university	8
Number of youths attending Junior College	5
Number of youths attending community college	31
Number of youths attending vocational school	11

##### Utilization of ETV Funds

Number of youths receiving tuition only	3
Number of youths receiving tuition plus other costs	17

Number of youths not receiving tuition but receiving other costs	21
--	----

#### **GEOGRAPHIC BREAKDOWN 2006**

Number of Youths from Reno area	12
Number of youths from rural area	3
Number of youths from Las Vegas area	53

**\*During the next year, DCFS will be tracking the number of first time recipients that are utilizing ETV funds.**

### **PROGRAM GOALS**

#### *1. Assist youth to make the transition to self-sufficiency.*

Eligible foster youth's educational goals are developed with youth and their Social Worker/IL Advisor in the youth's "Transitional Plan" for independent living. Information of the ETV program is provided at the development of youth transition planning and during the youth's exit interview.

Currently established collaborations with community-based independent living contractors have expanded to include outreach and educational goal planning for foster and former foster youth. Improved tracking and reporting requirements, as well as specific outcome-based procedures are in development during first-year program operation. The Division contractors, community partners, state and county social workers are coordinating and collaborating to provide that services are delivered to the highest number of eligible foster youth and to ensure that youth are encouraged to follow through with postsecondary school application requirements and funding requests. With an increased focus on postsecondary education from all independent living contractors, which includes assistance in planning educational or vocational training, applying for financial aid and additional support, more youth will remain motivated to reach their educational and vocational goals.

#### *2. Assist youth receive education, training, and services necessary to obtain employment.*

Statewide, the Chafee funds support independent living programs, which provide individualized life skills trainings and workshops for foster youth to prepare them for self-sufficiency in the community. IL Advisors assist youth to determine job interests, necessary education or vocational training, job workshops, budgets, practicing informed decision making and other skills necessary for employment. The ETV Program fund removes barriers for foster youth to attend vocational school or trainings to further their employment opportunities.

#### *3. Assist youth prepare for and enter postsecondary training and educational institutions.*

Education achievement determined by the number of youth who leave foster care with a GED or high school diploma has dropped in recent years in Nevada. Approximately 59% of exiting youth receive a GED or high school diploma, as many youth are unable to pass the required state basic skills proficiency tests. Additional tutoring in basic skills such as English or math is necessary for many foster youth, as these youths often become discouraged and do not make the additional effort to obtain their GED or high school diploma after exiting from foster care.

Following state funding initiatives for former foster youth, a database is under development to track characteristics of the foster youth transitioning out of care. This will allow more effective transition planning and increased interventions for all exiting youth and provide a more complete support system for the youth upon exit. Identifying youth, before exiting care, with educational deficiencies and providing services such as tutoring, postsecondary education workshops, GED preparation and testing will better prepare youth to enter and complete postsecondary education and/or training programs.

To qualify for the ETV program, foster youth must be planning to graduate from an accredited high school, must have

graduated from an accredited high school, or must have a GED or certification of high school completion for students who completed the mandatory hours required for high school instruction, but did not pass the high school proficiency exams.

The youth's postsecondary school or vocational/training program must meet the following criteria:

- Must be accredited or pre-accredited and is authorized to operate in that state.
- Admits only students with a high school diploma or equivalent and/or students beyond the age of compulsory school attendance.
- May be a public or nonprofit school or training program that awards a Bachelor's degree.
- May be a public or nonprofit school or training program that offers not less than a two-year program and that provides credit toward a degree, or provides training towards gainful employment.
- May be a vocational program that provides training for gainful employment and has been in existence for at least two years.

Although youth are encouraged to participate in full-time educational programs, the ETV program does not exclude youth who attend less than full-time, as this would limit the number of youth who would benefit from this program. The program provides personal and emotional support to youth through mentors and to encourage and promote interactions with dedicated adults.

Independent Living Services are provided by contracted community partners and focus upon services for foster youth in care, the transitioning youth, and the youth who has aged-out of care. Specialized case management is developed for the youth and allows tracking and outreach. Each program coordinates information and referral for the youth. In addition, state and/or county social workers are available to youth and refer former foster youth to services. The ETV Program builds upon services available with existing programs and youth and their IL Advisors/Social Workers may contact the State Independent Living Specialist by telephone, mail, or electronic mail for continued ongoing information and support. ETV provides financial, housing, counseling, employment, education, and other appropriate support and services to former foster youth between 18 and 21 years of age.

ETV funds may be applied for in conjunction with other funding sources, including the State Fund for Former Foster Youth. The amount of a voucher shall be disregarded for the purposes of determining the recipient's eligibility for, or the amount of, any other federal or federally-supported assistance. Current programs created especially for the former foster youth provide referrals, goods, and services for this population. The ETV Program is an added component of these services. The total amount of educational assistance to a youth under the ETV Program and under other Federal and Federally supported programs shall not exceed the total cost of attendance or \$5000 per year, as defined in section 472 of the Higher Education Act of 1965. The Division shall take appropriate steps to prevent duplication of benefits under this and other federal and federally supported programs. ETV Funds can be used for, but not limited to:

- Tuition and Fees
- Tutoring and Required Tests
- Transportation
- Books and Supplies
- Uniforms, Tools of the Trade
- Computer, Printer, Supplies
- Childcare
- Utilities and Deposits
- Meal Plan, Glasses, Adaptive Software, etc.

Vouchers are available for education and training, including postsecondary education to youth who have aged out of foster care. The youth's state or county ILP Social Worker/IL Advisor shall inform youth of the ETV program and how to apply. The State Independent Living Specialist will inform community service providers and other state agencies, which maybe serving former foster youth of the resources available for the youth. In addition, queries by social service agencies, the foster and adoption community, high schools, vocational schools, colleges and universities concerning the ETV program shall be supplied with information and/or referrals. Youth may also access applications by contacting contracted aftercare service providers, by on-line applications, or contacting the State Independent Living Specialist.

Outreach in development includes coordination with the admission and financial aid staff of Nevada's community colleges and universities and vocational/technical schools. All foster youth exiting care are informed of resources and services available and are encouraged to develop a support network within their community. Foster youth participating in the ETV program on their 21<sup>st</sup> birthday shall remain eligible, until they turn 23 years old, as long as they are enrolled in a postsecondary education or training program and are making satisfactory progress toward completion of that program.

In 2007-2008, the ETV program will be provided technical assistance through the University of Nevada, Reno to streamline the program objectives and outcomes. In addition to this input, the Scope of Work for this program has expanded in order to promote coordination between the subgrantee responsible for administering ETV funding, and other IL services providers. These efforts will result in comprehensive service coordination for the youths utilizing the ETV program.

*Nevada Matching Funds*

Nevada provides additional funding to eligible youth who have aged-out of the State foster care system. Funds may be used in conjunction to ETV funds to provide additional financial supports for the foster youth while a student. A portion of the state fund for the Assistance to Former Foster Youth Program (20%) is the match for the ETV program grant.



## **APPENDIX D**

### **TITLE IV-E TRAINING PLAN**

The State of Nevada received the Child and Family Service Review (CFSR) Summary of Findings Report in June 2004. The Program Improvement Plan (PIP) was approved as of March 2005. The training plan reflects the evolution of a training system that incorporates the CFSR findings into initial, required (PIP training), specialized and advanced staff training. Training offered by the Division of Child and Family Services supports the outcomes of safety, permanency, and well being for children in foster care, by achieving the goals and objectives of the PIP. The plan also addresses ongoing in-service training of new and experienced workers, the Educational Stipend Program, Resource Family training and a Request for Qualifications to award a new training contract.

#### **Federal Requirements Compliance**

Through the Nevada Partnership for Training, which includes the University of Nevada, Reno (UNR) & University of Nevada, Las Vegas (UNLV), Division of Child and Family Services (Division), Washoe County Department of Social Services (WCDSS) and Clark County Department of Family Services (CCDFS), social work education and permanency planning training has been provided to students in preparation for employment with public child welfare agencies; in addition to initial new worker training and ongoing training to staff who promote permanency and provide services and supports. The anticipated outcome is that curriculum development and training will support and enhance standardized, strengths based and solution oriented practice throughout Nevada. Curriculum development, training and field placement programs are intended to comply with the following:

- 45CFR1356.60 (c), which allows these types of programs to support activities "...necessary for the proper and efficient administration of the Title IV-E state plan";
- 45CFR235.62 (A), which permits any such program to "include short term and long term training at educational institutions through grants to institutions or by direct financial assistance to students enrolled in institutions or agency employees or persons preparing for employment with the state or local agency.", and
- 45CFR235.63 (c)(1), which states that "Grants are made for the purpose of developing, expanding, or improving training for personnel employed by the state or local agency or preparing for employment by the State or local agency administering the program. Grants are made for an educational program (curriculum development, classroom instruction, field instruction or any combination of these) that is directly related to the agency's program."

#### **Reference Documents**

*Program Improvement Training Plan*  
*Strategic Planning Process*

Anita Barbee, from the National Resource Center for Child Welfare Training and Evaluation, facilitated strategic planning of the PIP training schedule. Nevada chose to cluster PIP training items into seven courses, resulting in a more streamlined and logical process flow. Adjustments have been made to the original training schedule in State fiscal Year (SFY) 2007, resulting in additional training, for a total of fifteen (15) PIP required courses.

Planning and implementation has been a combined effort of the Policy Teams, the Nevada Partnership for Training, and Web Registration staff. Policy Teams consist of representatives from each of the public child welfare agencies, Family Programs Office, internal and external stakeholders, field experts and representatives from the universities. Todd Holder, from the National Resource Center for Child Protective Services, consulted with the "Risk Assessment," "Safety Assessment" and "Intake Response" policy teams. Rose Wentz and Janyce Fenton, from the National Resource Center for Family Centered Practice and Permanency Planning, provided technical assistance to the "Collaborative Case Planning" policy team. Rose Wentz was particularly helpful in facilitating the integration of concurrent planning into the Case Management Model. Based upon direction from the policy teams, the Universities were able to draft and/or evaluate and modify existing national curriculum to meet Nevada's training needs.

The Training Management Team meets regularly to review progress on curriculum development and revision, training preparation and implementation. The Universities worked in close collaboration with agency representatives to prepare and deliver all training. Members of the University Partnership have been appointed to the statewide Quality Improvement Steering Committee and function as reviewers in the quarterly case reviews. This serves to complete the "feedback loop," and connect future training needs to outcomes measured in the case reviews.

Curriculum for each training module was reviewed and approved by Policy Approval and Review Team (PART) and the Decision Making Group (DMG), prior to delivery. In order to schedule training of approximately 400 child welfare supervisors and staff, a training plan was created starting at the unit level. The plan was rolled up into a regional plan and then into the State Plan.

DCFS contracted with Ridgewood Associates in Tucson, Arizona, to develop a Web-based registration system. This system, found at [www.nvpartnership4training.com](http://www.nvpartnership4training.com), was implemented in the spring of 2005 and allows users to create their own account, see what classes are available, register for these classes online, receive e-mail confirmation of classes for which they have registered, print out their Continuing Education Unit (CEU) certificates for classes they have completed, and print out travel reimbursement forms. To date, over 1500 student accounts have been created, allowing child welfare staff and internal and external stakeholders from across the state to register for training; including the fifteen (15) PIP required courses. During the last year, the Web Registration System has been enhanced by the addition of an on-line evaluation/survey component and a sophisticated multi-media module for on-line training delivery.

#### *Allocation of Resources*

The contracts with the two Nevada public universities each fund; a full-time training coordinator, three additional trainers, and two web registration coordinators, for implementation and delivery of the training program. The university training staff has been oriented to Nevada's child welfare system. The trainers have completed a course called "Training of Trainers," received small group instruction related to curriculum development and use of technology to support training activities. The each university has dedicated training facilities for delivery of training in all three jurisdictions.

#### *Child Welfare Staff Training*

Child welfare staff trainings are provided through the Nevada Partnership for Training. All new child welfare staff members continue to receive initial training, in addition to advanced training and specialty trainings provided on a statewide basis. PIP training has been offered to all child welfare staff and community partners, based upon standardized policies developed in response to PIP benchmarks.

In addition to make-up classes for the original face-to-face PIP trainings, five more PIP courses were developed and delivered between July 2006 and June 2007. These included training on: Documentation Protocols, Implementation of a Differential Response Pilot Program in Clark County; Adoption and Safe Families Act (ASFA) provisions related to reasonable efforts to prevent removal; Nevada Initial Assessment, Risk and Safety Update; and implementation of statewide policy on Kinship Care. Web-based courses continue to be available to all staff, through the UNLV School of Social Work website. These modules were developed by staff from both universities in collaboration with policy teams. Since the modules became available in Spring 2006, Diligent Search training has been accessed by 524 students, Social Summary training has been accessed by 638 students and Independent Living training has been accessed by 536 students.

#### **PIP Training**

From July 2006 through June 2007, the following PIP courses were offered for new workers or those who missed the initial offering:

1 Conducting Risk Assessment (2 days)

Reno (1 class)

Las Vegas (2 classes)

**72 total participants completed**

2 Collaborative Case Management (2 days)

Reno (1 class)

Las Vegas (2 classes)

**70 total participants completed**

3 Intake Response and Decision Making Process (1½ days)

Reno (1 class)

Las Vegas (2 classes)

**53 total participants completed**

4 Visitation to Promote Placement Stability and Permanency (1½ days)

Reno (1 class)

Las Vegas (2 classes)

**62 total participants completed**

5. Permanency Service Delivery (1½ days, which includes a module on Adoption of Older Youth, developed by the Adoption Exchange and Termination of Parental Rights, trained by agency legal counsel)

Reno (1 class)

Las Vegas (2 classes)

**48 total participants completed**

6. Relinquishment and Adoption Subsidy Protocols (½ day)

Elko (1 class)

Reno (1 class)

Las Vegas (2 classes)

**57 total participants completed**

7. Documentation Protocol was offered 19 times;

Las Vegas (10 classes)

Reno (5 classes)

Carson City (2 classes)

Fallon (1 class)

Elko (1 class)

**368 total of participants completed**

Key staff members at Clark County Department of Family Services (CCDFS) were trained in January 2007 on the policy and procedures for implementing a Differential Response Pilot in two Family Resource Centers in Las Vegas.

Kinship Care Training was delivered beginning in January 2007 via the newly acquired evaluation/survey component to the Web Registration System. This allowed for dissemination of policy and practice guidelines in addition to the collection of data from participants on current practice and available resources in each region. Participants were able to log on to the website and complete the training at their own pace. Completion of the training module, as well as the data collected, is compiled and reported via the Web Registration System. All agency identified staff completed the training/survey, including 33 in Las Vegas and 18 in Reno and rural Nevada.

Nevada Initial Assessment, Risk and Safety Update training was provided to supervisors and managers in all three jurisdictions in February 2007, to facilitate field testing of the newly revised policy and instruments. Once field testing was completed, the policy workgroup reconvened to refine and finalize policy and procedures. Upon final DMG approval, the curriculum will be revised, as necessary to reflect the policy, and delivered to all agency identified staff and supervisors.

Training on statewide policy to implement the provisions of the Adoption and Safe Families Act of 1997 (ASFA) related to "Reasonable Efforts to Prevent Removal," was delivered to supervisors and managers in all three regions. Classes were held in Las Vegas, Reno, Carson City and Elko. Supervisors were required to provide training to staff in their individual unit meetings, prior to June 30, 2007, to ensure compliance with the federal law and statewide policy.

### **The Academy**

A committee was formed to develop a system enabling new employees hired during the PIP training cycle to receive basic Academy instruction concurrently. After reviewing the content of the Academy, the committee developed the following table that identifies Academy content areas, the PIP curriculum where some content is covered, and the areas that would need to be supplemented by a Temporary Academy for New Workers. A summer training academy for newly hired workers was given in June 2006, twice in Reno and twice in Las Vegas. This began with a two-day class containing overview information regarding child welfare listed under "Temporary Academy," which was then followed up by attending PIP make-up classes that were given in July and August 2006, for a total of 11 days of training. This gave new workers hired during the PIP Training cycle a foundation on which to build the knowledge and skills contained in the PIP training competencies, so that upon completion of both the Temporary Academy and the PIP make-up series, new workers received training in the areas covered by the former new worker academy.

Foundation Content	PIP Curriculum	Temporary Academy
Mission of child welfare: Values, laws, system	Although this is somewhat covered in all PIP training there is no overview of the purpose of child welfare, the laws, and the system in NV.	X
Teaming	This is introduced in Case Management and reinforced in every PIP training. Includes discussion of teams in conducting assessments, case planning, and visitation.	
Interpersonal skills building: joining, engaging, motivating	These skills (such as strengths-based approaches, questions, and assessment tools) are introduced in Conducting Risk Assessment and Collaborative Case Management, and then reinforced in every other PIP training.	
Effects of Abuse and Neglect on Children	Some of this is reviewed in the Visitation to Promote Placement Stability and Permanency curriculum, as placement affects different developmental stages of children.	X Overview as it relates to assessment and services. Also need to identify behavioral and emotional indicators of abuse and neglect.
Separation and Placement	Grief and loss is discussed in Visitation to Promote Placement Stability and Permanency as relates to child development.	X Additional overview of good placement practice
Foundation Content	PIP Curriculum	Temporary Academy
Risk factors of substance abuse, domestic violence, and mental illness	This is covered in Conducting Risk Assessment and Collaborative Case Management.	X Additional overview, particularly the nature of substance abuse and chronic relapse.
Safety and Risk Assessment	Covered in Conducting Risk Assessment and Intake Response and Decision Making.	
Basic visual and medical identification of abuse and neglect		X
Case Planning, including case plan content and concurrent planning	Covered in Collaborative Case Planning	
Documentation	Will be covered in last PIP training, Aug-Sept.	
Legal Process	Court preparation and testifying, including TPR and Permanency hearings are covered in Permanency Services Delivery.	

Overview of all legal hearings (what are they, when and why) and the purpose of court oversight		X Includes social worker role in court and the need to notify foster parents to attend for the opportunity to be heard.
Culture and Diversity	Although there are cultural exercises and applications in all PIP trainings, there is no foundation overview of culture	X
The role of foster parents	This is covered directly in Visitation to Promote Placement Stability and Permanency, and is especially powerful with a foster parent guest speaker.	
Foundation Content	PIP Curriculum	Temporary Academy
Ethics and Child Welfare (review of NASW ethics)	Although this is the foundation of the practice model and skills in all PIP trainings, there is no explicit discussion of ethics, especially as relate to client relationship, confidentiality, and boundaries.	X Ethics training which has already been developed and implemented as ongoing in-service training.
Worker "Self" skills: time management, field safety, avoiding burnout		X Including safety related to going into houses containing methamphetamine labs

In the weeks immediately following, make-up sessions of all the previously implemented PIP trainings were offered to new workers, as well as, any employees who were unable to attend their previously assigned classes.

A sub-committee of the Training Management Team met to review California's core curriculum for new workers and adapt it to meet Nevada's needs. The resultant curriculum combined the California core curriculum with Nevada's new policy and practice guidelines developed in response to the PIP, and was presented as follows, beginning November 2006:

#### Pre-academy field exercises

Week One (of class): Framework for Child Welfare Practice Child Maltreatment Identification: Neglect, Physical Abuse and Emotional Abuse (including sex abuse) Critical Thinking in Child Welfare Assessment: Safety, Risk and Protective Capacity (including prevention and more on sexual abuse, domestic violence and mental health) field exercises and skill application

Week Two (of class): Human Development, Collaborative Case Planning, Case Management field exercises and skills application

Week Three (of class): Placement and Permanency Court Documentation Self Care

Seventeen new workers from Washoe County and the DCFS Rural Region attended this revised Academy. Clark County Department of Family Services elected to train new workers internally through the use of private contractors, since they had a large influx of new staff.

### **Supervisory Training PIP TRANSFER ITEM 33.2.1**

Goal	Accountable person	Method of Measurement	Benchmark toward achieving goal	Due Date
33.2 The State will develop a Statewide Supervisory training program	Statewide Representative (1)  Rural Representative (1)  Southern Representative (1)  Northern Representative (1)	Training Plan	33.2.1 Training development and delivery process: (A) Collaboration between internal (DCFS) and external (University Partnerships) stakeholders (B) Develop a Training Curriculum (C) Train the Trainers (D) Execute staff and supervisory child welfare training	June 30 <sup>th</sup> (Annually)

Supervisory Learning Labs are based upon the Structured Casework Supervision Demonstration Project, made possible by a federal grant administered through the University of Kentucky, College of Social Work, which includes the following:

- Cultural consensus model, including supervisors and middle management;
- Learning labs developed through a democratic process of decision making and dialogic learning;
- Supervisors determine topics - individualized and needs driven;
- Peer to peer learning;
- Use the knowledge and expertise of participants throughout the process;
- Use actual/real scenarios; and
- Focus on organization culture change through building trust and team-building

It is intended for this to be a model for implementation of continuous, on-going statewide supervisory training that will build solid management skills, enhancing the capacity of supervisors to realize quality performance from caseworkers, develop an effective work team and recruit and retain quality staff.

Two consultants were contracted to conduct assessments/surveys of supervisors and caseworkers in the Rural Region of DCFS to determine specific training needs. The results of this assessment were compiled and meetings held with agency managers and stakeholders to review the results, determine priorities and develop specific curricula for training modules. The consultant led Learning Labs continued to meet monthly through July 2006. Thereafter, Rural Region managers and supervisors continued the process of developing and implementing ongoing internal training based upon needs identified by the supervisors themselves.

Beginning in September 2006, the same consultants implemented Learning Labs in Clark County. Clark County Department of Family Services (CCDFS) established three (3) supervisory workgroups, which began meeting separately in January 2007. The purpose of the January meetings was to discuss the learning lab model, review the results of the survey, and to conduct an interactive assessment of training needs for child welfare supervision. The purpose of the interactive assessment is to identify the topics and training priorities for each supervisory workgroup and for the learning labs. A schedule was determined with meeting dates, locations and proposed topics.

Supervisory workgroups began monthly learning labs in February and continued through March, April, May, and June. The February Learning Lab was a 2-day module, but the following Learning Labs were each one day per month. Each learning lab was led by a contractor and a University of Nevada Las Vegas designated staff trainer/faculty member. Each team (contractor and University partner) remained constant per each group. Topics covered in the monthly labs included:

- CREATING A POSITIVE LEARNING ENVIRONMENT FOR CHILD WELFARE SUPERVISION
- SUPPORTIVE SUPERVISION AND PROFESSIONAL DEVELOPMENT PLANNING
- LEADERSHIP AND THE CRITICAL POINTS OF CHILD WELFARE SUPERVISION
- INTERACTIVE SUPERVISION: COACHING, TUNING IN, AND DEALING WITH TRAUMA
- DEALING WITH TRAUMA, SELF CARE AND
- SUPERVISORY WORK PHASES
- SUPERVISORY LIABILITY ISSUES AND MANAGING CHANGE

By July 31, 2007 each supervisory workgroup will meet to evaluate the Supervisory Learning Labs and to develop a plan for transition. Sometime in August, 2007 a meeting will be held with administrators, managers, university staff, DCFS and CCDFS Supervisors to review the evaluation results, review the final curriculum and to transition the Supervisory Learning Labs. The training team will transition to the University trainers paired with volunteer CCDFS Supervisors.

This same process will be repeated with Washoe County Department of Social Services (WCDSS), beginning in

December 2007 with an interactive assessment to identify training needs. Contractor facilitated labs will continue through June 2008, at which time University partners and the agency will have developed a transition plan for continuation of the learning labs.

### **Advanced and Specialized Staff Training**

Required courses, covering topics such as; the Indian Child Welfare Act (ICWA), and the Inter-Ethnic Placement Act (MEPA/IEPA) are offered statewide on an annual basis. In the past year, a total of seven ICWA classes were held in Reno, Carson City, Elko, Ely, Winnemucca, and Las Vegas. During this same period, a total of ten MEPA/IEPA classes were offered in Las Vegas, Carson City, Elko, Fallon, Ely, Winnemucca and Reno.

UNLV has developed and implemented an evaluation system that identifies strengths, as well as areas in need of improvement to maximize the training experience. Additional advanced training was identified based on the evaluation of PIP training effectiveness, Quality Improvement data, field staff input and other sources. Advanced courses have been developed and have been, or will be, offered to cover Child Protective Services (CPS) investigation, including risk and safety assessment; substance abuse; domestic violence; disabilities, forensic interviewing, child fatality investigation and Ansell Casey Life Skills Assessment.

### **UNITY System**

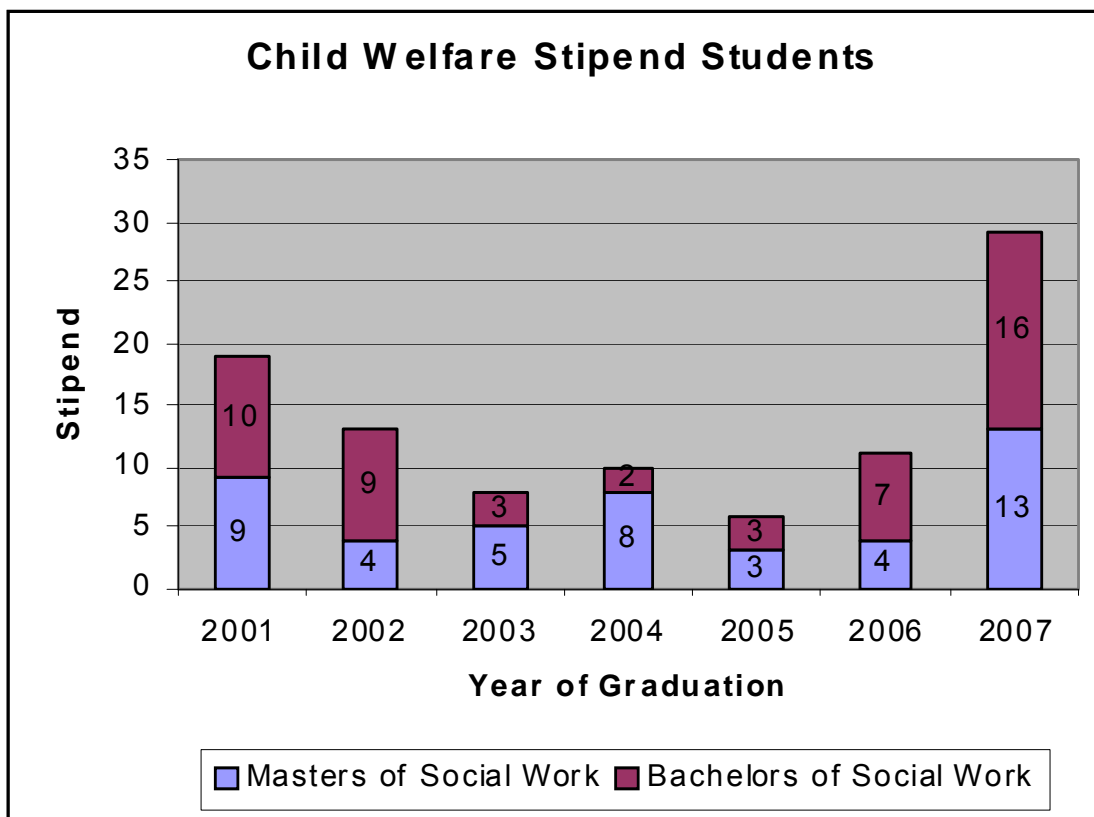
Nevada's Statewide Automated Child Welfare Information System (SACWIS) is referred to as UNITY (Unified Nevada Information Technology for Youth). DCFS Information Management System (IMS) trainers of UNITY have trained the staff of all three public child welfare agencies in Nevada, including basic instruction and Study Halls (enhanced training), as identified in the table below. In addition, more than 130 workers received Adoption and Foster Care Analysis and Reporting System (AFCARS) Refresher Training.

Training modules:

Introduction	Adoptions
Super Course	Juvenile Services
CPS Intake/Investigations	Fiscal Licensing
Substitute Care	Eligibility
	AFCARS Refresher

- Educational Stipend Program
- It is the policy of Nevada's public child welfare agencies to prepare skilled potential child welfare workers and enhance the skills of existing child welfare employees through a comprehensive social work education program. Educational stipends are funded through Title IV-E of the Social Security Act.
- The Division of Child and Family Services (DCFS), Clark County Department of Family Services (CCDFS) and Washoe County Department of Social Services (WCDSS), in partnership with the University of Nevada, Reno (UNR) and the University of Nevada, Las Vegas (UNLV), support education to enhance the skills and competencies of their employees and create a pool of potential child welfare candidates to fill existing and future vacancies in public child welfare agencies.
- The Universities each develop an annual recruitment plan and specific strategies to attract additional students to the field, which enables the universities to meet the vacancy needs of public child welfare agencies. Each university appoints one member to a Selection Committee, which identifies vacancy needs, including determination of "hard to recruit" areas, establishes geographic recruitment priorities and other recruitment needs (i.e. bilingual and/or multi-cultural) applicable to the awarding of stipends.
- The Selection Committees consider all candidates and makes selections based on budgetary restrictions, established priorities and the following selection criteria:
- All Applicants for the educational stipend program must have been accepted into the BSW or MSW School of Social Work program at UNR or UNLV. It is preferable that the stipend recipient works in the child welfare field prior to applying for an educational stipend to pursue an MSW degree.
- For applicants who are preparing for employment with a public child welfare agency, the following criteria will be used in considering the recipients:

- Work history and resume;
- An essay by the applicant describing educational aspirations and career goals as related to employment with a public child welfare agency;
- Two professional letters of reference for BSW stipend applicants;
- Three professional letters of reference for MSW stipend applicants with at least one letter of reference reflecting child welfare experience;
- reference is given to applicants who will commit in writing to work in areas where “hard to recruit” vacancies have been identified.
- Since its inception in 2001, UNLV’s Stipend Program has served 55 students. UNR began awarding stipends in 1996 and has awarded stipends to a total of 50 recipients. This includes 24 BSW and 26 MSW awards. In the fall of 2005, UNR began a distance BSW program with Great Basin Community College in Elko. This program allows students living in the rural areas of the state to take almost all of their college classes at the local community college, plus the introductory social worker classes that prepare them for admission to the School of Social Work. Once they are admitted to the social work major, they are able to complete their bachelor’s degree and social work educational requirements at UNR, using distance technology. This program has greatly enhanced the development of professional social workers who are already living in and committed to working in the rural areas of Nevada, which are traditionally very difficult areas for which to recruit.
- University Training Contract
- The chart below illustrates the total number of BSW and MSW stipends awarded 2001-2007. Overall, a total of 50 BSW and 46 MSW stipends have been awarded.



The implementation of the UNR and UNLV contracts requires very close collaboration between the members of the Nevada Partnership for Training. The UNR and UNLV contract covering State Fiscal Years 2006 and 2007 is



performance based with the following goals and objectives:

Curriculum Development - The universities are working closely with the policy teams to identify appropriate existing curricula, which can be modified to meet Nevada's training needs.

Preparing For Training - Both universities have arranged for consistent classrooms on campus, in Reno and Las Vegas. State Personnel and agency sites are used in Carson City, Fallon and Elko.

Training Evaluation - UNLV conducted an evaluation of the Training Academy, which will be reviewed by the Nevada Partnership for Training. The new contract implements a comprehensive model for assessing the impact of training on the Child and Family Services Review (CFSR) Outcome Measures by using levels of assessment (Level 1: Reaction, Level 2: Learning, Level 3: Worker Performance & Level 4: Training Impact).

The evaluation process includes pre-testing, post-testing and post training satisfaction evaluations. The activities and recommendations are closely linked with quality improvement activities.

Stipend Program – Statewide policy was developed to enhance recruitment of students to the program; building a potential workforce for Clark County, Washoe County and DCFS.

Student Practicum - UNR and UNLV have field practicum programs that provide experience for potential child welfare staff.

Web Registration - Colorado's Child Welfare Training Registration System was enhanced to support Nevada Child Welfare agencies registration needs. Over 1,500 people have created student accounts and used the Nevada Partnership for Training web-based registration system to register for training and print travel claims and Continuing Education Certificates. The system is able to generate registration and attendance reports by agency, region and on a statewide basis.

Training Needs Assessment - the Nevada Partnership for Training and the three public child welfare agencies participated in developing the training plan by using the Statewide Self Assessment, the CFSR findings and other internal information. As a result, the PIP training has been clustered into meaningful courses.

Develop Child Welfare Certificate Programs - UNLV is exploring the creation of three for-credit university certificate programs:

- New licensed social workers-basic core courses, certificate of completion
- New non-licensed staff- basic core courses, certificate of completion
- Experienced masters level social workers Advanced or Leadership series certificate of completion

Develop Credit for Learning Courses—the Nevada Partnership for Training members is exploring the possibility of offering elective university credit for child welfare required courses.

Research—the Nevada Partnership for Training and the public child welfare agencies are collaborating on a research agenda that promotes “best practice.”

### **Three Phase Training Approach**

In anticipation of the end of the current two-year training contract in June 2007, DCFS released a Request for Qualifications (RFQ) to solicit proposals from nationally recognized experts in the field of child welfare training. The goal is to implement a training program which includes development of an outcome-based training system for recruitment and retention of skilled child welfare workers; skill-based curriculum and training developed from best practice models that is outcome driven; development of research activities in support of child welfare agency needs; and, a strong evaluation component, including involvement in the child welfare quality improvement process to assess the effectiveness of the training and transfer of learning and applicability to the workplace.

DCFS wishes to expand its training emphasis from a predominantly knowledge-based curriculum to now include curricula that emphasize the skills needed by child welfare workers, whether the workers are new or have intermediate or advanced skill levels. Selected Qualifiers will work with the DCFS Training Manager and staff, WCDSS, CCDFS, DCFS-Rural Region, universities, representatives of advisory boards, foster parents and other training contractors to develop a plan for worker training over the next two years to include the following components:

- Worker Training Phase 1 – Beginning Skill Core
- Common Core for all new workers

- Specialty Core, based upon area of practice
- Worker Training Phase 2 – Intermediate Skill Core
- Worker Training Phase 3 – Advanced Skill Core
- Trainings required as a result of Nevada’s Program Improvement Plan (PIP)
- Evaluation
- ResearchThe Decision Making Group (DMG), comprised of top level administrators of the three public child welfare agencies, has expressed an intention to utilize a nationally recognized Common Core Curriculum as the basis for development of this plan. A team has been authorized to review and revise this curriculum to reflect Nevada statutes, regulations and policies. Training delivered over the next two years will focus on staff development to improve recruitment and retention of a qualified workforce.
- Training on implementation of new federal requirements with regard to monthly caseworker visits with children in agency custody will be included in the training schedule. Approximately \$2,600,000 per year has been budgeted to provide training to in excess of 500 public child welfare workers.
- Resource Family Training-each of the Resource Family training programs provides the following services:
  - Foster Parent Associations, agency sponsored events, web-based training, resource family orientation and pre-service training to all potential resource families. The training addresses issues related to abuse and neglect, the importance of relationships, the effects of care giving and permanency issues.
  - Resource Families Ongoing Training topics will be identified by the PIP, feedback from the Resource Families and child welfare workers. The ongoing training may be accessed through the University Partnership, agency staff, local foster parent associations, audio conference training and videos/books.
  - For additional information, please refer to Section III, B. 3. Foster Care Licensing, Recruitment, and Training (PIP 9.5)

## **APPENDIX E**

### **ICWA**

The following information summarizes the Division's activities related to ICWA for SFY 2006.

#### **TRIBAL CONSULTATION**

The State of Nevada Division of Child and Family Services consulted with the 27 Nevada federally-recognized tribes and organizations (Section 422(b)(11), Social Security Act, as amended) through the Indian Child Welfare Steering Committee. The Indian Child Welfare Steering Committee invited Tribal Chairs or their designees, to participate on the committee for the purpose of discussing Indian child welfare issues in Nevada that relate to jurisdiction, investigation, and service delivery. Members of the Indian Child Welfare Steering Committee include: representatives from the Intertribal Council of Nevada (ITCN), Nevada Tribes; Bureau of Indian Affairs; Nevada Urban Indians, Inc., Las Vegas Indian Center; Nevada Indian Commission; Nevada Children's Justice Act – Technical Assistance to Local Communities and Indian Tribes Subcommittee; DCFS site offices, Clark County Department of Family Services and Washoe County Department of Social Services; the UNR Partnership for Training, and other interested parties.

The Indian Child Welfare Steering Committee planned the fifth annual symposium for 2007 to address continued collaboration and consultation between State/County and Tribal child welfare agencies. The symposium provides an opportunity to share information about programs and activities between the tribes and the State and counties, and to identify areas that need review for continued compliance with ICWA.

The 2007 symposium was discussed in January 2007 and the first meeting was convened with tribal representatives on February 2007. The symposium was set for June 13 through 14th, 2007. The tribes had identified areas for improvement that included the need for more collaborative efforts by the tribes to develop a protocol for responding to ICWA requests by child welfare agencies within 15 days. Tribes are also finalizing a foster care policy that will work with Nevada child welfare agency's licensing requirements. These two policies were part of the Tribal Update of the Symposium. The symposium also featured the topic, "Meth Crisis," that was aimed at informing participants about working with tribal families and culture. The symposium had a presentation on ICWA in the court systems and was followed by a discussion of items in Inter-Jurisdictional Matrix. The presenter was a Tribal Court Judge, and both he and the State of Nevada Attorney General's Office responded to questions regarding the law and procedures from Tribal and State/County perspectives in Nevada.

The symposium was well attended by the following statewide representatives: Tribal Chairs; designated Tribal Human Services Program Directors and Specialists and staff from more than ½ of the Tribes; Intertribal Council of Nevada; the Bureau of Indian Affairs - Western, Eastern, and Phoenix Regional office; tribal court; Nevada Indian Commission; Washoe Tribal Behavioral Health Center; Washoe Tribe TANF; ITCN Head Start; Fallon Paiute Shoshone Tribe – Children's Justice Act Program; Las Vegas Indian Center and Nevada Urban Indians, Inc. (Urban Indian Programs); the Nevada Division of Child and Family Services, Clark County Department of Family Services, and Washoe County Department of Social Services; Nevada Administration of the Courts and Court Improvement Project. Informational materials for the symposium were provided by Washoe Tribe TANF, Maple Star Foster Parent Recruitment, Children's Cabinet of Reno, Stepping Stones Fallon Tribe Independent Living Program, the Nevada Partnership for Training, and Nevada Suicide Prevention Program. (See ICWA appendix for symposium agenda topics).

The symposium discussion generated a list of areas for the Steering Committee to review with child welfare agencies for the upcoming year.

The following are specific measures taken by the State to improve or maintain compliance with the Indian Child Welfare Act (ICWA):

#### **1. Identification of Indian children by the State Child Welfare service agency**

Identification of Indian children is required by Nevada Revised Statute 432B.397 and Nevada Administrative Code 432B.263, which state as follows:

NRS 432B.397 Inquiry to determine whether child is Indian child; report to court; training regarding requirements of Indian Child Welfare Act.

*"1. The agency which provides child welfare services for a child that is taken into custody pursuant to this chapter shall make all necessary inquiries to determine whether the child is an Indian child. The agency shall report that determination*

to the court.

2. An agency which provides child welfare services pursuant to this chapter shall provide training for its personnel regarding the requirements of the Indian Child Welfare Act.

NAC432B.263 Inquiry to determine whether child is Indian child; recording of information provided; verification of inquiries. (NRS 432B.190, 432B.397)

1. For the purposes of complying with the provisions of NRS 432B.397, the agency which provides child welfare services shall, upon taking a child into protective custody, ask a parent, legal guardian or relative of the child, if available, whether the child is an Indian child.

2. If the parent, legal guardian or relative of the child indicates that the child is or may be an Indian child, the agency shall ask the person to provide the following information:

- (a) The name and location of the tribe to which the child belongs;
- (b) The enrollment number of the child, if the tribe to which the child belongs has assigned such a number;
- (c) Whether the child has resided or been domiciled on a reservation or has been a ward of a tribal court;
- (d) The name, including the maiden name, if any, and the enrollment number of each Indian relative of the child, including, but not limited to, the parents and grandparents of the child;
- (e) The enrollment number of each Indian relative of the child, including, but not limited to, the parents and grandparents of the child, if the tribe to which the relative belongs has assigned such a number; and
- (f) If the child is an Alaskan native, the name of the child's village or regional corporation.

3. The agency shall record, in writing, the information provided by a parent, legal guardian or relative pursuant to this section.

4. The agency shall provide the court with verification that the inquiries set forth in subsections 1 and 2, as applicable, were made for each child for whom a petition has been filed.

5. As used in this section, "Indian child" has the meaning ascribed to it in NRS 432B.067."

The State's UNITY system collects the required information regarding Indian children and DCFS is able to identify Native American Indian Children. DCFS has a special quarterly Detail Report CFS 777 that collects data on the number of children statewide, by region and by individual child welfare agency.

State Assessment of Compliance: Compliance with this requirement to identify Indian children has been met and has been maintained during 2006. The UNITY system continues to provide a quarterly Detail Report CFS 777.

## **2. Notification of Indian parents and Tribes of State proceedings involving Indian children and their right to intervene**

Notification of Indian parents and Tribes of State proceedings and their right to intervene are contained in the Nevada Revised Statutes 432B.425 as follows:

NRS 432B.425 Notification of tribe if proceedings involve Indian child; transfer of proceedings to Indian child's tribe; exercise of jurisdiction by court. *"If proceedings pursuant to this chapter involve the protection of an Indian child, the court shall:*

- 1. Cause the Indian child's tribe to be notified in writing at the beginning of the proceedings in the manner provided in the Indian Child Welfare Act. If the Indian child is eligible for membership in more than one tribe, each tribe must be notified.*
- 2. Transfer the proceedings to the Indian child's tribe in accordance with the Indian Child Welfare Act.*
- 3. If a tribe declines or is unable to exercise jurisdiction, exercise its jurisdiction as provided in the Indian Child Welfare Act."*

Nevada child welfare agencies use a standardized Tribal Notification form that was developed in accordance with ICWA guidelines. The form and protocol are contained in the Nevada Indian Child Welfare Resource Guide, updated in March 2006. The Resource Guide is a tool for use by State and county child welfare staff.

Information regarding ICWA is also contained in the Parent's Guide to Child Protective Services Booklet, revised April 2006, and in a separate ICWA brochure.

State Assessment of Compliance: Compliance with this requirement has been met in 2006 through application of the Nevada Revised Statutes and it continues to be maintained through the court system and training. Training for child welfare staff on the ICWA requirements cover the State laws and was provided on the following dates:

September 26 <sup>th</sup> , 2006	Reno
March 8 <sup>th</sup> , 2007	Reno
March 22 <sup>nd</sup> , 2007	Carson City
March 29 <sup>th</sup> , 2007	Rural Video Conference: Elko, Ely & Winnemucca
April 24 <sup>th</sup> , 2007	Las Vegas (2 separate trainings were given in one day)

## **3. Special placement preferences for Indian children.**

Nevada Revised Statute 432B.455 and .457 allows for special placement preferences for children, including Indian children, as follows.

NRS 432B.455 Determination of appropriate person to take custody of child: Appointment and duties of special master.

*"1. If the court determines that a child must be kept in protective custody pursuant to NRS 432B.480 or must be placed in temporary or permanent custody pursuant to NRS 432B.550, the court may, before placing the child in the temporary or permanent custody of a person, order the appointment of a special master from among the members of the State Bar of Nevada to conduct a hearing to identify the person most qualified and suitable to take custody of the child in consideration of the needs of the child for temporary or permanent placement.*

*2. Not later than 5 calendar days after the hearing, the special master shall prepare and submit to the court his recommendation regarding which person is most qualified and suitable to take custody of the child."*

*(Added to NRS by 1997, 1344)*

NRS 432B.457 Determination of appropriate person to take custody of child: Involvement in and notification of person with special interest in child; testimony by person with special interest in child.

*"1. If the court or a special master appointed pursuant to NRS 432B.455 finds that a person has a special interest in a child, the court or the special master shall:*

*(a) Except for good cause, ensure that the person is involved in and notified of any plan for the temporary or permanent placement of the child and is allowed to offer recommendations regarding the plan; and*

*(b) Allow the person to testify at any hearing held pursuant to this chapter to determine any temporary or permanent placement of the child.*

*2. For the purposes of this section, a person "has a special interest in a child" if:*

*(a) The person is:*

*(1) A parent or other relative of the child;*

- (2) A foster parent or other provider of substitute care for the child;
- (3) A provider of care for the medical or mental health of the child; or
- (4) A teacher or other school official who works directly with the child; and
- (b) The person:
  - (1) Has a personal interest in the well-being of the child; or
- (2) Possesses information that is relevant to the determination of the placement of the child."

State Assessment of Compliance: Compliance with this requirement has been met in 2006 through application of the Nevada Revised Statutes, regulation, and placement policy. Compliance continues to be maintained through placement activities and staff training listed in item 2.

#### **4. Active efforts to prevent the breakup of the Indian family.**

Nevada Revised Statutes 432B.393 requires reasonable efforts to prevent the breakup of families, including Indian families. "Reasonable efforts" are not the same as "active efforts" and defining "active efforts" and related activities has been added to the DCFS policy review/revision list for inclusion in relevant policies.

NRS 432B.393 Preservation and reunification of family of child to prevent or eliminate need for removal from home before placement in foster care and to make safe return to home possible; determining whether reasonable efforts have been made.

*"1. Except as otherwise provided in this section, an agency which provides child welfare services shall make reasonable efforts to preserve and reunify the family of a child:*

- (a) Before the placement of the child in foster care, to prevent or eliminate the need for from his home; and*
- (b) To make it possible for his safe return to his home.*

*2. In determining the reasonable efforts required by subsection 1, the health and safety of the child must be the paramount concern. The agency which provides child welfare services may make reasonable efforts to place the child for adoption or with a legal guardian concurrently with making the reasonable efforts required pursuant to subsection 1. If the court determines that continuation of the reasonable efforts required by subsection 1 is inconsistent with the plan for the permanent placement of the child, the agency which provides child welfare services shall make reasonable efforts to place the child in a timely manner in accordance with that plan and to complete whatever actions are necessary to finalize the permanent placement of the child.*

*3. An agency which provides child welfare services is not required to make the reasonable efforts required by subsection 1 if the court finds that:*

*(a) A parent or other primary caretaker of the child has:*

- (1) Committed, aided or abetted in the commission of, or attempted, conspired or solicited to commit murder or voluntary manslaughter;*
- (2) Caused the abuse or neglect of the child, or of another child of the parent or primary caretaker, which resulted in substantial bodily harm to the abused or neglected child;*
- (3) Caused the abuse or neglect of the child, a sibling of the child or another child in the household, and the abuse or neglect was so extreme or repetitious as to indicate that any plan to return the child to his home would result in an unacceptable risk to the health or welfare of the child; or*
- (4) Abandoned the child for 60 or more days, and the identity of the parent of the child is unknown and cannot be ascertained through reasonable efforts;*

*(b) A parent of the child has, for the previous 6 months, had the ability to contact or communicate with the child and made no more than token efforts to do so;*

*(c) The parental rights of a parent to a sibling of the child have been terminated by a court order upon any basis other than the execution of a voluntary relinquishment of those rights by a natural parent, and the court order is not currently being appealed;*

*(d) The child or a sibling of the child was previously removed from his home, adjudicated to have been abused or neglected, returned to his home and subsequently removed from his home as a result of additional abuse or neglect; or*

*(e) The child is less than 1 year of age, the father of the child is not married to the mother of the child and the father of the child:*

*(1) Has failed within 60 days after learning of the birth of the child, to visit the child, to commence proceedings to establish his paternity of the child or to provide financial support for the child; or*

*(2) Is entitled to seek custody of the child but fails to do so within 60 days after learning that the child was placed in foster care.*

*(f) The child was delivered to a provider of emergency services pursuant to NRS 432B.630.*

*4. Except as otherwise provided in subsection 6, for the purposes of this section, unless the context otherwise requires, "reasonable efforts" have been made if an agency which provides child welfare services to children with legal custody of a child has exercised diligence and care in arranging appropriate and available services for the child, with the health and*

safety of the child as its paramount concerns. The exercise of such diligence and care includes, without limitation, obtaining necessary and appropriate information concerning the child for the purposes of NRS 127.152, 127.410 and 424.038.

5. In determining whether reasonable efforts have been made pursuant to subsection 4, the court shall:

(a) Evaluate the evidence and make findings based on whether a reasonable person would conclude that reasonable efforts were made;

(b) Consider any input from the child;

(c) Consider the efforts made and the evidence presented since the previous finding of the court concerning reasonable efforts;

(d) Consider the diligence and care that the agency is legally authorized and able to exercise;

(e) Recognize and take into consideration the legal obligations of the agency to comply with any applicable laws and regulations;

(f) Base its determination on the circumstances and facts concerning the particular family or plan for the permanent placement of the child at issue;

(g) Consider whether the provisions of subsection 6 are applicable; and

(h) Consider any other matters the court deems relevant.

6. An agency which provides child welfare services may satisfy the requirement of making reasonable efforts pursuant to this section by taking no action concerning a child or making no effort to provide services to a child if it is reasonable, under the circumstances, to do so."

State Assessment of Compliance: Compliance with this requirement has been met in 2006 through application of the Nevada Revised Statutes, regulation, and placement policy. The inclusion and definition of "active efforts" is on the list for upcoming policy revisions for 2007. "Active efforts" is part of the ICWA training curriculum that has been provided to staff listed in item 2.

#### ***5. Use of Tribal courts in child welfare matter, Tribal right to intervene in State proceedings or transfer proceedings to the jurisdiction of the Tribe.***

Nevada Revised Statutes 432B.425 (see citation in item 2 above) allow tribal courts to intervene in State proceedings and allow transfer proceedings to the jurisdiction of the tribe. Adoption statutes that contain information about courts and transfer of proceedings include NRS 127.110 (When petition may be filed; limitation on entry of adoption order), NRS 127.013 (Transfer of Proceedings to Indian tribe), NRS 127.052 (Agency to determine whether child is Indian, notification of child's tribe), and NRS 127.017 (Extent to which court must give full faith and credit to judicial proceedings of Indian tribe).

State Assessment of Compliance: Compliance with this requirement has been met in 2006 through application of the Nevada Revised Statutes, regulation, and adoption and policies. Compliance continues to be maintained through the court system and staff training listed in item 2.

## **APPENDIX F**

### **APSR: DISASTER RESPONSE**

The Division is in the process of finalizing its disaster response plan. Once finalized, and approved by the Decision Making Group (DMG), training and preparedness testing will follow. The following are excerpts from the draft plan, which will be completed by Fall 2007,

**1. Identify, locate and continue availability of services for children under State care or supervision who are displaced or adversely affected by a disaster.**

Each service unit (ICPC, Intake, Family Support Services, CPS, Foster Care, Permanency, Placement Team, Child Care Licensing, Investigations, and Adoption) is developing a continuity plan. The Intake Continuity Plan is summarized below in response to Question # 2 and is similar in form to those for the other service areas.

**2. Respond to new child welfare cases in areas adversely affected by a disaster and provide services in those cases.**

The Intake Continuity Plan will be activated when ordered by the Director or designee in the event of a disaster. In the event of a disaster the following emergency procedures will take place:

The supervisor(s) will:

- ☐ Activate the phone tree (Personnel Notification System) to contact staff and provide information and directions, when staff cannot go to the office or when usual communications cannot be followed;
- ☐ Review referrals and assign highest priority referrals for assessment;
- ☐ Provide paper forms for documenting referrals if UNITY is not accessible;
- ☐ Contact law enforcement when child is in danger and referral cannot be made to a district office;
- ☐ Request additional Intake staff as needed.

The Intake Workers will:

- Report to the assigned worksite unless instructed to report to a temporary alternate site;
- Contact law enforcement when child is deemed to be in danger and a referral cannot be made to a district office;
- Prioritize referrals and respond to highest priority referrals first;
- Document referrals on paper forms if Unity access is not available for input when access has been restored;
- Contact supervisor(s) at regular intervals to report status, discuss issues, and get updates and information related to the disaster.

**3. Remain in communication with caseworkers and other essential child welfare personnel displaced because of a disaster.**

A Leadership Continuity Plan will be activated when ordered by Director or their designee. In the



event of a disaster the following emergency procedures will occur:

- Director or designee provides information and direction to supervisors and/or identified essential staff at impacted site(s);
- Supervisor(s) informs affected staff and provides direction for continuation of essential services/programs;
- Supervisor informs staff about alternative work site as applicable;
- Supervisor(s) maintains contact with displaced staff and provide updates to staff at intervals and notifies staff when Director or designee notifies supervisor(s) about status change.

A Personnel Notification system is being developed to track caseworkers and other essential child welfare personnel who are displaced in the event of a disaster. The first step in this process is to update existing personnel data so that current contact information is available in the event of a disaster. A Personnel Notification system is already in place in the Rural Region of the Division. This system would notify off-site personnel and then provide a mechanism for maintaining contact with the staff person during and after the disaster. Alternative work site arrangements are being explored so that personnel have the capacity to maintain critical functions if their office is impacted by the disaster and they are not able to work there.

#### **4. Preserve essential program records, coordinate services, share information with states.**

The Division's Information Management Systems (IMS) Department has developed a disaster response plan to preserve records for internal and external use during and following a disaster. Attached on the following page is the Division's IMS plan. All staff names have been redacted from this report.

In addition to the IMS plan, the completed Child Welfare Disaster Response plan will be completed and submitted to ACF by September 28, 2007.

## APPENDIX G

### NAME OF POLICY

Caseworker Contact with Children, Parents and Caregivers **DRAFT**

### POLICY STATEMENT

Caseworkers must visit with children/youth, parents and caregivers **every calendar month** in order to assess child safety, ensure well-being of children; provide support; assess, revise and promote timely implementation of case plans for children and families served by the agency. Monthly caseworker visits must focus clearly on case planning and service delivery and be documented in case notes. The exception to the above outlined monthly caseworker visitation is when there is safety plan involving the child which requires more frequent visitation.

### AUTHORITY

NAC 432B.185 Assessments of child safety required.

NAC 432B.405 Provision of services to child in foster care and his parents

45 CFR 1355.20 "Children in foster care or children under the placement and care responsibility of the state agency who are placed away from their parents or guardians" must be visited by their caseworker every 30 days. "This provision does not apply to in-home cases."

### DEFINITIONS

**"Caregiver"** refers to the persons providing foster, adoptive or relative care for a child or person who provides care in a treatment home/facility in which a child is placed.

**"Caseworker"** workers whom the State or local title IV-B/IV-E agency has assigned or contracted case management or visitation responsibilities or caseworkers with full case management responsibilities. Service providers will not be able to fulfill this caseworker visit role.

**"Contact"** refers to a face-to-face contact, a visit to the home or facility, participation in a child and family team meeting, court hearings, telephone or electronic communication, written documents, or other means similarly defined.

**"Face-to-Face"** refers to an in-person interaction between individuals that will allow for the caseworker to observe the child, parents and/or caregivers.

**"Full Disclosure"** means that the birth family, foster/resource family, child welfare and legal system are all informed and share pertinent information regarding the case, family history, case planning and permanency planning options.

**"Monthly"** **A calendar month.**

**"Parent"** refers to the birth parent or legal guardian of a child.

**"Safety Plan"** A time limited, written plan that is put into place upon contact with the family when present and/or impending danger is manifested to ensure immediate protection of a child. The safety plan must be sufficient to manage and control safety threats, based on a high degree of confidence that it can be implemented and sustained.

**"UNITY"** refers to the Statewide Automated Child Welfare Information System (SACWIS), in which all case information is documented.

**"Well-Being"** refers to promoting emotional, physical health and educational child well-being.

## PROCEDURES

Caseworker visits with children, parents and caregivers are one of the most important ways to assess safety, plan for permanency and ensure that all of the child's needs are being met, regardless of placement, i.e., with parent, relative, foster home, treatment homes. Some of the benefits of purposeful caseworker visits with children, parents and caregivers include:

- Identification of child and family strengths and needs
- Parental engagement in the case planning process;
- Timely notification (within 48 hours) to parents, either in writing or verbally of any out of home placement changes and/or decisions to alter parental/child visitation schedule.
- Full disclosure, in which all parties involved understand the importance of sharing pertinent information for the purposes of case planning and permanency options
- Strong parent-worker alliance in order to achieve positive outcomes for children; and
- Placement support

### Minimum visitation requirements:

A face-to-face visit must occur with the child(ren) and caregivers at **least once every calendar monthly.**

- For cases where the child is placed in an out-of-home placement, the visit must take place in the foster home a majority (greater than 50%) of the time.
- The majority (greater than 50%) of visits must take place in the child's residence.
- During all types of visitation, the caseworker must spend at least a portion of each visit alone with the child; and
- During all types of visitation, the caseworker must spend at least a portion of each visit alone with the caregiver/foster parent, if requested,

The purpose of all caseworker contacts is to review child safety, adjustment, well-being and case plan progress.

### Activities

During any type of contact between the caseworker, parents and child, the caseworker must:

- Assess child safety and well-being;
- Review case plan goals, services to parents and children.
- Document case plan progress specifically related to services and goals in case notes.
- Observe the parent and child in order to gather information regarding family functioning.

### Caseworker Contact with Children

The caseworker is a vital constant in the life of a child in the child welfare system, representing stability, dependability and trust. It is the caseworkers' responsibility to ensure the child's continuing safety and to ensure that all of the needs of the child are being met in the family home or out-of-home placement.

In addition to casework activities for visitation, the caseworker must:

- Assess the child's adjustment to the placement;
- Observe the child and gather information from the child and when present, the child's parents, legal guardians or caregivers;
- Visit with the child in a comfortable and age appropriate setting;
- If appropriate, considering the child's age and level of maturity, discuss with the child the status of the current case plan, services involved, and any legal changes in the case; and
- Gather information about the child's educational, medical or dental, mental health needs and case plan progress, or any other pertinent information.
- In the event the child has runaway preventing a visit from occurring, the caseworker must change the placement status in UNITY.

### Caseworker Contact with Emancipating Youth (ages 15 ½ to 18)

In addition to the other activities outlined for caseworker visitation/contact, during the emancipation phase

of a case, it is critical that planning occur in which the caseworker and youth have discussion regarding the following:

- Discussion regarding the youths goals, to include educational, vocational and other goals that require planning efforts.
- Discussion and creation of a transition plan to include referrals for Independent Living services; and
- Discussion regarding positive relationships that the youth has with family and/or friends or the need for the youth to establish healthy relationships with others. This is critical for youth who have not achieved legal permanency and need life-long connections to adults in their life in order to support healthy adult living.

### **Caseworker Contact with Parents**

Quality visits with parents are the foundation for engaging the family in an effective casework relationship. Visits between workers and parents should be focused on safety, strengths and needs of the child and family, case planning, family progress and identification of resources and services the family needs

In order to achieve case plan goals. Visits provide an excellent opportunity for:

- Parent engagement in the case planning process, to include participation in the Child and Family Team;
- Developing and maintaining a good working relationship with the parent;
- Assess changes in parental functioning; and
- Discuss and review the progress of the current case plan, permanency goal, changes in the child's placement, and any legal changes in the case.

Visits should occur at a time and place that is favorable for the parents. In some cases, multiple staff and service providers are involved with families. The case plan may involve parents having face-to-face contacts with other staff or with providers with a contractual relationship to augment worker visits. However, these visits are not a substitute for worker visits with parents. Workers should make concerted efforts to conduct frequent face-to-face visits with both mothers and fathers who are involved in their children's lives, including non-custodial parents. In some cases this may require development of separate plans.

Caseworkers shall notify the parent(s) either orally or in writing of any changes in the visitation schedule with the child. Notification will be documented in the UNITY case notes.

### **Contacts with Caregiver**

Visits between the caseworker and caregiver/relative should be focused on issues such as child's safety; well-being, adjustment, family visitation/contact and case plan goals. Visits provide a venue for caregiver participation in case planning and decision-making, based on the needs of the child and caregiver. The caseworker must collect information from the caregiver such as:

- Discussion of the child strengths and needs;
- Gather information about the child's educational, medical or dental, mental health needs or any other pertinent information;
- Discussion regarding services required to support placement; and
- Discuss and review the progress of the current case plan, permanency goal and any legal changes in the case.
- Discuss support services the caregiver may need such as respite care, assistance accessing services, additional training and or non-residential (wrap) services to the needs of the child(ren).

## **Additional Contact Procedure and Requirements**

### **Parents Right to have Contact with Children in Out-of-Home Placement**

- A. 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. Recommendations to limit or terminate visitation must be presented to the court and supported by any of the following;
- Evidence that the child is at risk of physical or emotional abuse during the visit.
  - The fact that the visitation supervisor is threatened.
  - The parent appears intoxicated. The visit should be stopped that day, but may resume on another day, if safe for the child.
  - Therapist's recommendation to decrease or suspend visitation as it is harmful to the child.
  - The court adopts a permanency plan other than return home and if the family visits continue it would not be in the best interest of the child.
- B. Any significant change in visitation shall be staffed with the caseworker, supervisor, Court and Child and Family Team when necessary. Shared decision making should be employed including meeting with parents and caregivers when visitation plans change.
- C. Termination of face-to-face contact may still allow for other communication such as monitored phone calls or letters. When a parent has demonstrated improved parenting skills and/or decrease in inappropriate behaviors, face-to-face visits may be restarted.
- D. In dependency cases, the court shall be informed of any significant changes in visitation. A court order is required prior to the change in visitation, unless the child's safety is jeopardized.
- E. Visits after the parental rights are terminated or relinquished are done to meet the child's needs. In many cases these types of visits are for goodbye, family information or re-connection to family members.

### **Scheduling Contact**

Caseworkers should regularly schedule visits with children, parents, legal guardians and caregivers in accordance with rules set forth in this policy. However there may be a need to have unscheduled visits with the child, parents or caregivers in order to ensure the safety and well-being of the child. In these instances, the visit will occur in a manner that is consistent with the purpose of the visit and is respectful to the child and the parents or caregiver involved in the visit.

### **Caseworker Back-Up**

On rare occasions it may be necessary to meet the contact requirements with a staff person other than the child's caseworker. After consultation with and approval of the supervisor of the caseworker and supervisor may designate an alternative person to conduct the visit.

### **Documentation of Caseworker Contact with Children and Caregivers**

Documentation of caseworker contact is mandatory to all parties as it provides a concrete method of reporting progress, child's adjustment, case plan progress and any other concerns. Any type of contact or visitation with a child or regarding a child must be documented in UNITY case notes within five working days of said contact (per documentation policy).

Documentation should contain the following information:

- Date of caseworker contact/visit;
- Location of caseworker contact /visit;
- Who participated in the contact/visit;
- Other specific information to demonstrate quality of visits; and
- Purpose of contact;
- Review child's status in services (educational, mental health, physical health, dental health) and any unmet needs, pending or needed referrals.
- Outcome of visit (i.e., follow-up required).

### **CROSS REFERENCE**

Nevada Safety Assessment Policy

Documentation Policy

Case Planning Policy **DRAFT**