



**STATE OF NEVADA  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF CHILD AND FAMILY SERVICES**



**2015-2019  
CHILD AND FAMILY SERVICES PLAN**

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# NEVADA CHILD AND FAMILY SERVICES PLAN SFY 2014-2019

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## Section I. Final Report for the Child and Family Services Plan 2010-2014

Information for this section may be found in the 2014 Nevada APSR document submitted separately.

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## Section II. Child and Family Services Plan 2015-2019

The Child and Family Services Plan (CFSP) is a five year plan that outlines the goals and objectives that the Division of Child and Family Services (DCFS) will carry out in administering programs and services to promote the safety, permanency, and well-being of children and families. It provides the DCFS with the opportunity to implement a system of coordinated, intergraded, culturally relevant, and family-focused services in keeping with the service principles reflected in 45 CFR 1355.25.

A primary purpose of the plan is to facilitate DCFS's integration of the federally funded programs that serve children and families along the child welfare continuum. The following programs are coordinated by the submission of the 2015-2019 CFSP.

- The Stephanie Tubbs Jones Child Welfare Services Program ( title IV-B, subpart 1);
- Promoting Safe and Stable Families Program (PSSF, Title IV-B Subpart 2);
- Monthly Caseworker Visits Funds;
- Chafee Foster Care Independence Program and the Education and Training Voucher Program.
- Adoption Incentive Funds;
- The Child Abuse Prevention and Treatment Act (CAPTA) as it relates to the activities funded by CAPTA in supporting achievement of the goals and objectives of the CFSP.

The plan includes an overview of DCFS's organizational structure and a description of how that structure interacts with the children and families along the entire child welfare continuum. It describes the various services that DCFS provides under each of the federally funded programs, and perhaps most importantly, it outlines the goals, objectives, and measures of progress.

The strategic planning process for DCFS began with a number of facilitated internal meetings of the Decision Making Group (DMG) which is comprised of county-administered child welfare Directors and State Administrators. During these meetings, the DMG discussed the necessary goals that need to be accomplished during, and by the end of the five year period of the plan.

In accordance with the requirements at 45 CFR 1357.15(1) and (m), DCFS collaborated and engaged internal and external Stakeholders in the process of identifying shared goals and objectives in development of the CFSP. Stakeholders were involved in review of the available data, and or in assessing current performance utilizing focus groups and or surveys. Stakeholders represented the following groups.

- Decision Making Group (DMG)
  - CCDFS Department of Family Services
  - WCDSS Department of Social Services
  - DCFS Rural Region
- Children's Justice Act Task Force (CJA)
- Citizen's Review Panel (CRP)
- Court Improvement Project (CIP)
  - Court Improvement Councils (CICs)
- Statewide Quality Improvement Committee (SQIC)
- Nevada Partnership for Training (NPT)
- Foster Parents and Adoptive Parents
- Youth Advisory Board (YAB) and other Youth in Foster Care

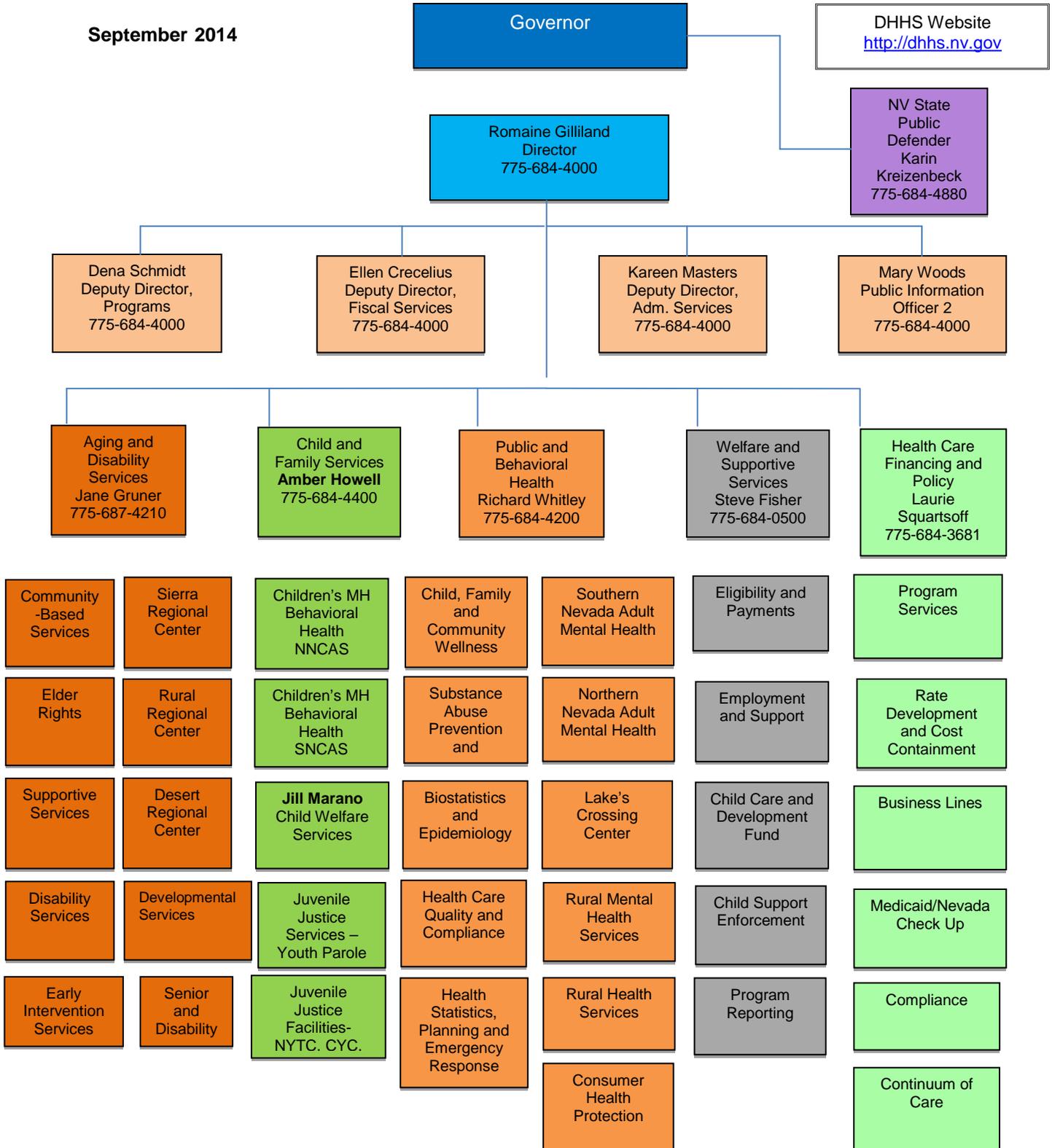
- Independent Living Providers and other Service Providers
- ICWA Steering Committee
- Department of Juvenile Justice
- Community Partners i.e. Education

The SQIC is charged with statewide implementation and enhancement of a continuous quality improvement (CQI) system. One of the functional components of a CQI system includes feedback to Stakeholders and Decision-makers to help guide collaborative efforts that will result in overall improvement of outcomes for children and families. One of Nevada's goals for the 2015-2019 CFSP is to ensure the state will be able to identify the strengths and needs of the child protective service delivery system. Additionally, a corresponding objective is to eliminate gaps in the overall five functional components of CQI which includes feedback to Stakeholders and Decision-makers. Therefore, over the next five years the SQIC will be utilizing such activities as workgroups, sub-committees and work plans to enhance meaningful collaboration to stakeholders and decision-makers. Meaningful collaboration will incorporate such activities as communicating results (trends, comparisons, and findings) in understandable formats for use by agency leadership/top management, courts, tribes, future entities that establish Title IV-E agreements, and other stakeholders to drive improvement in practice and services and promote the shared goals and outcomes of the CFSP.

## A. State Agency Administering Plans

The Division of Child and Family Services (DCFS) is under the umbrella of the Department of Health and Human Services, and is responsible for Children's Mental Health (in Clark and Washoe, the two largest populated counties), Youth Corrections, and Child Welfare Services. Below is an organizational chart for the Department of Health and Human Services.

September 2014



The implementation and administration of the Child and Family Services Plan is the responsibility of DCFS. This includes: 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). Our work encompasses:

*Protection and Permanency for Children:* DCFS creates opportunities and programs that prevent and respond to issues of parental/caregiver maltreatment, mental health, and delinquency. DCFS strives to support permanency within the child's biological or primary and extended family so children may grow and develop within stable environments. DCFS 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. DCFS will collaboratively craft public policies to promote the strength and well-being of families.

*Preservation of Families:* DCFS 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:* DCFS 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:* DCFS 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.

## **Mission**

DCFS, together in genuine partnership with families, communities and county governmental agencies, provide support and services to assist Nevada's children and families in reaching their full human potential.

## **Nevada Initiative Statement for Family Centered Practice**

Child welfare agencies in Nevada believe families are the primary providers for children's needs. The safety and well-being of children is dependent upon the safety and well-being of all family members. Children, youth and families are best served when staff actively listens to them, and invite participation in decision making. We support full implementation of family centered practice by engaging families in child and family teams and offering individualized services to build upon strengths and meet the identified needs of the family.

## **Vision**

DCFS recognizes 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.

## **Guiding Principles**

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.
- Continuous Quality Improvement - 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.

### ***Purpose***

DCFS 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;
- Reunifying children with their families, 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 reunification with the biological or primary family is not possible or appropriate.

### **Decision Making Process**

In Nevada, decisions regarding child welfare policy and practice are made by the Decision Making Group (DMG). DMG is comprised of top level administrators of the three public child welfare agencies, DCFS - Rural Region, Clark County Department of Family Services (CCDFS) and Washoe County Department of Social Services (WCDSS) and the DCFS Administrator and Deputy Administrator. The DMG provides recommendations to the DCFS Administrator regarding CFPSR and PIP activities including the direction for statewide collaborative policy development, training and Continuous Quality Improvement (CQI) activities. The DMG provides guidance to statewide, cross-agency policy teams to respond to any policy refinement needs discovered through the continuous quality assurance and improvement process and policy workgroup activities. This team meets monthly, or more often as needed.

### **B. Child Welfare in Nevada**

Nevada uses a state-administered and county operated structure for the management of child welfare services. The Nevada Division of Child and Family Services, under the umbrella of the Nevada Department of Health and Human Services, provide oversight to child welfare and direct child welfare services. The organizational structure of DCFS and program delivery of child welfare services are influenced by the state size and concentration of county population. NRS

432B.325 states that in counties where population is 100,000 or more, that the county shall provide protective services for children in that county and pay the cost of those services in accordance with standards adopted by the state. In 2001, the state legislature expanded the county's responsibility to include all child welfare services of child protection, foster care and adoption (NRS 432B.030 and NRS 432B.044). Figure 01 provides a map of the state with each county outlined.

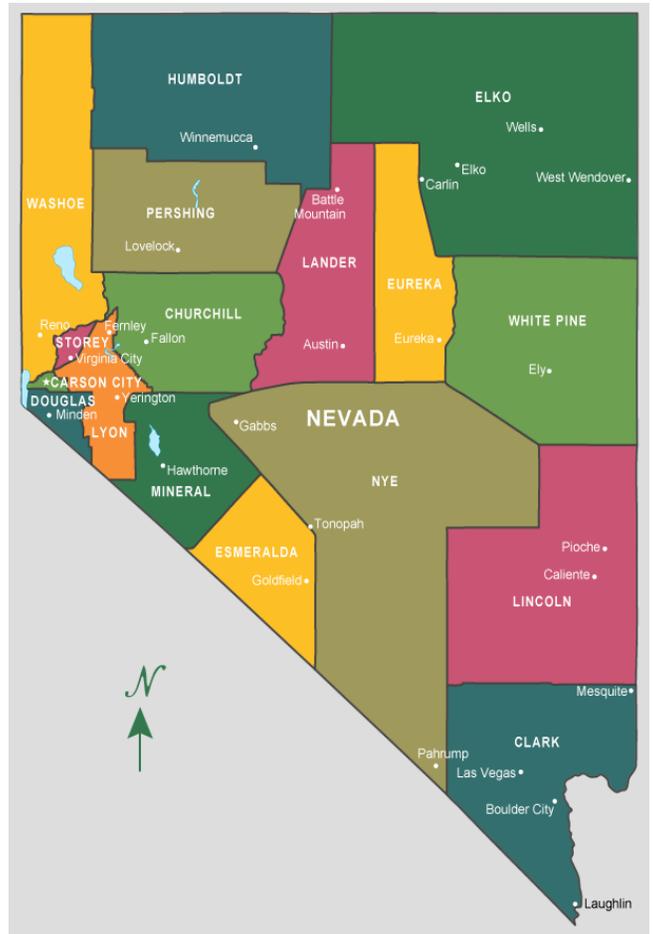
In the 2011 Legislative session Senate Bill (SB) 480 was passed, creating NRS 432B.326. Prior to this legislation the law required DCFS, in counties whose population is less than 100,000 (currently all counties other than Clark and Washoe counties) to provide directly or arrange for the provision of child welfare services, including protective services, foster care services and adoption services. The new legislation requires each of those counties to pay to DCFS an assessment for the provision of child protective services not to exceed the limit of legislative authorization for spending on child protective services by DCFS in each county. Additionally, this legislation allows a county to request an exemption from the assessment by submitting a proposal to the Governor for the county to carry out child protective services for the county. If the Governor approves the proposal, the Interim Finance Committee (IFC) must consider whether to approve the exemption. If the exemption is approved, the county is required to carry out child protective services for the county in accordance with standards adopted by DCFS, and pay for the cost of those services. As of the date of this report no county has requested an exemption, although Douglas County expressed interest in the spring of 2013 in fulfilling this role.

The DCFS Rural Region is separated into four districts, each providing services to multiple counties each. District 1 covers the northern part of the State with its main office based in Elko. This District provides services to Elko, Eureka, Humboldt, Lander, Lincoln and White Pine Counties. District 2 covers the western/central part of the state and is based in Carson City. This District provides services to Carson City, the State’s Capitol, Douglas County, Storey County, and a portion of Lyon County. District 3 covers the eastern/central part of the state and is based out of Fallon. This office provides services to Churchill, Lyon, Pershing and Mineral Counties. District 4 covers the southern rural part of the state and is based out of Pahrump. This office provides services to Esmeralda and Nye Counties. *Figure 1* provides a map of the state with each county outlined. For the most part, growth in Nevada’s rural counties has been fairly stable. Elko has seen substantial growth in the past few years. In addition to federal requirements, DCFS and child welfare agencies are governed by the Nevada Revised Statutes (NRS), Nevada Administrative Code (NAC); and statewide child welfare policy.

**Figure 01: County Map of Nevada**

The Nevada Revised Statutes (NRS) may be found in their entirety at <http://www.leg.state.nv.us/NRS/>. Applicable chapters include:

- NRS 62A-I (Juvenile Justice);
- NRS 63 (State facilities for detention of children);
- NRS 127 (Adoption of Children and Adults);
- NRS 128 (Termination of Parental Rights);
- NRS 424 (Foster Homes for Children);
- NRS 425 (Support to Dependent Children);
- NRS 432 (Public Services for Children);
- NRS 432A (Services and Facilities for Care of Children);
- NRS 432B (Protection of Children from Abuse and Neglect); and
- NRS 433B (Additional Provisions Relating to Children).



The Nevada Administrative Code contains all of the permanent regulations pertaining to child welfare agencies in Nevada. These were adopted under chapter 233B of the Nevada Revised Statutes. The NAC can be found at <http://www.leg.state.nv.us/NAC/>. NAC chapters include:

- NAC 127 (Adoption of Children);
- NAC 423 (Assistance to Former Foster Youth);
- NAC 424 (Foster Homes for Children);
- NAC 432 (Public Services for Children);
- NAC 432A (Services and Facilities for the Care of Children); and
- NAC 432B (Protection of Children from Abuse and Neglect).

The Division of Child and Family Services through its Family Programs Office (FPO) is responsible for ensuring quality child welfare services statewide, including the safety, permanency and well-being of children in care. The FPO is responsible for ensuring that there are statewide collaborative child welfare policies that provide interpretation and procedures for accomplishing the tasks set out in the NRS or NAC. Currently, statewide policies are available on the DCFS website at [http://www.dcf.state.nv.us/DCFS\\_Policies\\_CW.htm](http://www.dcf.state.nv.us/DCFS_Policies_CW.htm)

## Characteristics of Children in Foster Care in Nevada

**Table A: Overview foster Care Information**

	In Care on First Day of FY				Entered Care				Exited Care				In Care on Last Day of FY			
	2010	2011	2012	2013	2010	2011	2012	2013	2010	2011	2012	2013	2010	2011	2012	2013
<b>Total number</b>	4,758	4,749	4,594	4,649	2,881	2,776	3,125	3,385	2,828	2,887	2,960	3,246	4,811	4,638	4,759	4,788
<b>Median length of stay (months)</b>	15.7	14.8	14.0	11.9	N/A	N/A	N/A	N/A	15.5	17.4	17.0	12.9	14.8	13.9	12.1	12.1

Source: Adoption and Foster Care Analysis and Reporting System [AFCARS] Foster Care File

**Table B: Race/Ethnicity of children in Foster Care (%)<sup>1</sup>**

	In Care on First Day of FY				Entered Care				Exited Care				In Care on Last Day of FY			
	2010	2011	2012	2013	2010	2011	2012	2013	2010	2011	2012	2013	2010	2011	2012	2013
<b>American Indian/ Alaska Native</b>	1.0	0.7	0.8	0.9	0.6	0.8	0.8	0.7	1.1	0.7	0.7	0.7	0.7	0.8	0.9	0.9
<b>Asian</b>	0.9	0.7	0.8	1.1	0.8	0.9	1.2	1.1	1.2	0.8	0.8	1.2	0.7	0.8	1.1	1.1
<b>Black</b>	25.1	23.7	23.2	24.7	21.0	22.6	22.3	22.5	23.2	23.5	20.1	24.3	23.8	23.2	24.5	23.4
<b>Native Hawaiian/ Other Pacific Islander</b>	0.9	0.7	0.4	0.8	1.1	0.4	1.2	1.1	1.4	0.7	0.7	1.0	0.7	0.4	0.7	0.8
<b>Hispanic (of any race)</b>	25.1	26.9	25.4	23.8	27.9	25.9	26.0	25.8	24.9	28.5	28.1	25.0	26.8	25.3	24.1	24.4
<b>White</b>	39.4	39.5	41.1	40.7	41.0	41.4	40.4	41.3	40.8	38.4	40.8	39.9	39.5	41.3	40.8	41.7
<b>Two or more races</b>	7.5	7.7	8.3	7.9	7.5	7.9	7.7	7.3	7.2	7.3	8.4	7.7	7.7	8.1	7.8	7.6
<b>Unable to determine</b>	<.1	<.1	<.1	<.1	0.1	0.1	0.3	0.3	0.2	0.1	0.3	0.2	<.1	<.1	<.1	<.1
<b>Missing data</b>	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Source: Adoption and Foster Care Analysis and Reporting System [AFCARS] Foster Care File

<sup>1</sup> All races exclude children of Hispanic origin. The Child Welfare outcomes Report Data site (<http://cwoutcomes.acf.hhs.gov/data/overview>) provides alternative Nevada race/ethnicity breakdowns in which race and ethnicity are treated as two separate categories.

## **Child and Family Services Continuum & Service Description**

### **Child and Family Services Continuum**

Nevada offers a comprehensive service array and continually evaluates the needs of families and children. Prevention and Intervention services include Child abuse and Neglect Prevention Services, Intensive Family Preservation; Case Management Services; Family Assessment Services; Family Coaching; Parent Education; Family Group Conferencing; Family Support Services; Psycho Social Rehabilitation; Behavioral/Health Counseling; Mental Health Assessment Services; and, Pharmacological Management Services. Out of home placement services include Foster Care/Medical; Specialized Foster Care; Family Foster Care; Mother/Infant Foster Care; MR/DD Foster Care; Transitional Living; Emergency Shelter; Respite Care; Adoption Services; and, Group Homes. Reunification and after care services include Intensive Family Reunification; Independent Living; Case Management; Post Adoption Services; Psycho Social Rehabilitation; Behavioral/Health Counseling; Mental Health Assessment Services; and, Pharmacological Management Services. These services are delivered by providers in such a way as to meet the clinical, behavioral and medical treatment needs of children and contracts are outcome oriented. Communities in Nevada provide different types of treatment programs and services for children, adolescents and families involved with the Child Welfare System. The complete range of programs and series is referred to as the continuum of care. Not every community has every type of service or programs on the continuum so the collaboration with, and outreach to a variety of agencies, including through the sub grantee process is critical.

### **Service Coordination**

The State continues to seek out external sources of support to improve the State's service array. The Title IV- B, Sub grant II advisory group meets quarterly to discuss needs and address collaboration whether possible and appropriate. Prior to each funding cycle, representatives from each child welfare agency work with management and the Grants Management Unit specialists to identify funding priorities. These priorities, by region, are incorporated into the Request for Proposals (RFP)/ funding announcement, and are used to evaluate proposals so that funded projects are closely aligned to agency identified service needs and priorities. Scopes of Work and needs assessments have been reviewed each year or more often if requested and appropriate to ensure the activities continue to support the identified needs.

### **Service Description**

#### **Child abuse and Neglect Prevention Services**

The Department of Health and Human Services (DHHS) is the lead agency for the community based child abuse prevention programs in Nevada and is leading the child maltreatment prevention activities in Nevada. The Department of Health and Human Services promotes the health and well-being of Nevadans through the delivery and facilitation of essential services to ensure families are strengthened, public health is protected, and individuals achieve their highest level of self-sufficiency. Among the Divisions, Units, and programs that are part of DHHS and that contribute to the leadership of child maltreatment prevention activities are the Division of Child and Family Services, the Public and Behavioral Health Division, the Welfare and Supportive Services Division, the Early Intervention Part C office, the Division for Aging and Disability Services (Early Intervention Services), and the Grants Management Unit.

The Grants Management Unit (GMU) is an administrative unit within the Department of Health and Human Services Director's Office that manages grants to local, regional, and statewide programs serving Nevadans. The GMU is responsible for the following state and federal initiatives:

The Children's Trust Fund (CTF): The fund contains state and federal monies (CBCAP funds) that are reserved for primary and secondary child maltreatment programs. Most of the CTF funds are awarded through competitive applications.

Family Resource Centers (FRC): There are 22 FRCs in Nevada that provide information, referrals, and case management to at-risk families. FRCs collaborate with local and state agencies and organizations to help individuals and families access needed services and support. Some of the FRCs have continued some programs that were provided with Family to Family Connection (F2F) funds to support families with children birth to four years old. Funding for F2F was eliminated in the 2011 Legislature.

Differential Response (DR): The DR program is a partnership between FRCs and the three child welfare agencies in Nevada: Clark County Department of Family Services, Washoe County Department of Social Services, and the Division of Child and Family Services. Dedicated DR staff in nine FRCs in north, south, and rural communities are first responders to Child Protective Services' screened-in reports of child neglect.

Social Services Block Grant, Title XX programs: Assists persons in achieving or maintaining self-sufficiency and/or prevents or remedies neglect, abuse, or exploitation of children and adults.

Community Services Block Grant: Promotes economic self-sufficiency, family stability, and community revitalization in each of Nevada's 17 counties.

Fund for a Healthy Nevada – Master Tobacco Settlement funds: Grants improve health services and the health and wellbeing for all Nevadans.

Revolving Account for Problem Gambling Treatment and Prevention: Provides funding for problem gambling treatment, prevention, and related services

The GMU works with two separate external policy groups. The Advisory Committee on Problem Gambling (ACPG) oversees the Revolving Account for Problem Gambling, and the Grants Management Advisory Committee (GMAC) provides input to the Director for the other grant funds mentioned above, including the Children's Trust Fund. The Director of the Department of Health and Human Services appoints the following 15 members to the GMAC:

- A superintendent of a county school district
- A director of a local agency providing services for abused or neglected children
- A representative of a community organization involved with children
- A representative of the Department of Juvenile Justice
- A member who possesses knowledge, skill, and experience in providing services to senior citizens
- Two members with knowledge, skill, and experience in finance or business
- A representative of the Nevada Association of Counties
- A representative of a broad-based nonprofit with knowledge, skill, and experience in community partnerships
- Two members with knowledge of services to persons or families who are disadvantaged or at risk
- A representative who possesses knowledge, skill, and experience in the provision of services relating to the cessation of the use of tobacco
- A representative who possesses knowledge, skill, and experience in the provision of services to persons with disabilities
- A representative who possesses knowledge, skill, and experience in the provision of health services to children
- A representative who is a member of the Nevada Commission on Aging

The Director will ensure that, insofar as practicable, the members whom he appoints reflect the ethnic and geographic diversity of Nevada.

The assigned CBCAP Program Specialist will continue to provide direction to the network of statewide child abuse prevention and family strengthening programs by promoting collaborative efforts and soliciting input from the community, including agencies, service providers, parents, and other interested individuals.

The DCFS Family Programs office also has an administrative Grants Management Unit (GMU) that manages the grants related to Title IV-B subpart 2 (Promoting Safe and Stable Families (PSSF) that services local, regional, and statewide programs serving Nevadans.

The primary goals of Title IV-B, Subpart 2 (Promoting Safe and Stable Families (PSSF)) are to prevent the unnecessary separation of children from their families, improve the quality of care and services to children and their families, and ensure permanency for children by reuniting them with their parents, by adoption or by another permanent living arrangement.

#### Family Preservation Services:

Family preservation services programs are characterized by high intensity, immediately accessible treatment and ancillary services for at-risk children and families. These services are designed to help families alleviate crises that might lead to out-of-home placements for children because of abuse, neglect, or parental inability to care for them. They help maintain the safety of children in their own homes, support families preparing to reunify or adopt, and assist families in obtaining other services to meet multiple needs. Within the State, program staff have successfully provided crisis intervention, clinical assessment, and family preservation services to a protective services population in Clark County, Washoe County and certain counties located in the Rural Region. CCDFS will continue to utilize an array of prevention services to help children at risk of abuse and neglect and 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. Intensive case management services will continue to provide parenting classes that incorporate family strengthening techniques to strengthen the family and home to prevent removal. Substance abuse in-home services are offered as well as mental health and substance abuse assessments and treatment in a variety of settings to meet the specific needs of the family. Medical training and rehabilitative support services will allow medically fragile children to remain in their home and prevent removal. Medical wraparound, medical daycare, respite care and home health services continue to be provided to children in CCDFS custody. The goal of these services will include increasing support to caregivers that enables them to meet the medical needs of their children at home or in alternate placement. CCDFS maintains a contract with a non-profit pediatric home health agency to provide intensive medical case management to an average of 45 medically needy/fragile children per month during the last year of this reporting period.

WCDSS family preservation services have included strength-based treatment utilizing pro-social adaptive behavior modification techniques to teach clients to change socially and personally maladaptive behavior; individual and group counseling to assist clients and their children to adopt strategies and behaviors that sustain recovery and maintain daily functioning including conflict resolution; couples and family therapy; supportive and instructive interventions to address life management needs. Case management will continue to be available over the next five years, and is designed to assist families who were involved with or at-risk of becoming involved with child welfare agencies. Assessments to identify strengths and service needs of clients related to life and home management skills will also be available in addition to mental health assessments and services.

Throughout the next five years, Family Resource Centers and rural community providers receiving IV-B funds will continue to be a primary source for pre-placement services for the DCFS Rural Region Intensive Family Services staff, which provide both clinical assessments and home-based family preservation services. Parenting classes are available in-home as well as in group settings and will continue to provide be available to meet this critical need. Case management, including home-maker skill building continues to be available through the rural Family Resource Centers. Mental health and substance abuse assessments are also available. Most of the funded rural providers cover large areas of rural Nevada and often must travel to provide access to services for families to prevent removal.

#### Family Support Services:

Family support services promote the well-being of children and families and ultimately increase the ability of parenting to strengthen and stabilize the family unit. The goal of family support services is to increase the parents' competence and confidence in parenting so children are in a safe and stable environment. These services are voluntary, preventive activities to help families nurture their children. In Nevada, they are often provided by community-based organizations

and are designed to alleviate stress and help parents care for their children's well-being before a crisis occurs. They connect families with available community resources and supportive networks which assist parents with child rearing. Family support activities include respite care for parents and caregivers, early development screening of children to identify their needs, tutoring health education for youth, and a range of center-based activities.

Family support services in CCDFS include an intensive in-home parenting program that addresses parenting and home-maker issues; programs which offer activities and supervision to school-aged children in a safe environment while their parents are at work, which enable parents to achieve and maintain better job performance in knowing that their child is in a safe environment; case management; parenting classes; budgeting classes in both English and Spanish and computer skills classes and developmental screenings. These programs are anticipated to continue over the next five years, as more community providers are solicited.

The Title IV-B funded family support services in WCDSS will continue to include in-home family and individual counseling; mental health and substance abuse assessments; case management and linkage with supportive services; home visits; budgeting classes and goal planning.

Funding for family support services to sub-grantees in the Rural Region include in-home parenting as well as parenting groups; specialized parenting classes for parents of infants; first time parenting classes, mental health and substance abuse assessments and treatment; and home-maker classes. Parenting classes and in-home services for babies and toddlers 0-5 years of age are available in several counties in the Rural Region. In-home services include nutrition, housekeeping and developmentally appropriate parenting for children of all ages.

Additional services utilized by the Rural Region have included 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. Workers are critical to the coordination and delivery of services and while recruitment and retention of licensed social work positions has remained an ongoing challenge in rural Nevada, efforts are being made over to recruit and retain workers.

#### Time-Limited Reunification Services:

These services and activities are provided to children who have been removed from home and placed in a foster home or a child care institution and to their parents or primary caregivers. The goal is to facilitate reunifications safely and appropriately within a timely fashion, but only during the 15-month period that begins on the date that children entered foster care. Services may include: individual, group, and family counseling; inpatient, residential, or outpatient substance abuse treatment services; behavioral health services; assistance to address domestic violence; temporary child care and therapeutic services for families, including crisis nurseries; and transportation to or from any of the services.

Funded programs that provide time-limited reunification services in CCDFS include comprehensive assessments for both mental health and substance abuse issues for individuals and groups as well as individual and family treatment; Safety Team meetings facilitated within 48 hours of referral from the child welfare agency; and in-home parenting training and home maker skills training. Referrals to the Safety Team Decision Making Program (STDM) are made via an online form which is then e-mailed to the STDM distribution list. The program pilot was conducted at the CCDFS Central site for the first two years of the project, a West site was added for the 3rd year and with a new grant cycle, expansion has been made to include an East site. Services continue to be made available in English and Spanish and also include a peer parent advocate program that enhances the quality of visitation for biological parents, thereby, facilitating reunification.

Time-limited reunification services in WCDSS include mental health and substance abuse assessments and treatment; psychiatric evaluations for adults; group counseling for drug and alcohol, sessions on depression, parenting, stress management, family violence, sexual and physical abuse, loss and grief and marital and couple issues; and foster parent mentoring and relationship building with biological parents to facilitate timely reunification.

Time-limited reunification services in the Rural Region also include in-home parenting training as well as group parenting classes; infant parenting classes; first time parenting classes; and mental health and substance abuse assessments and treatment

#### Adoption Promotion and Support Services:

Adoption Promotion and Support services and activities are designed to support and facilitate permanency for children in Nevada's foster care system. Funding for Adoption Promotion and Support Services has allowed sub-grantees in CCDFS to educate the public, community leaders, policy makers and child welfare administrators by providing informative feedback on the foster parent perspective on adoption recruitment issues to better serve the foster parent community's needs and training for mental health professionals to help them understand why treatment strategies must be different for adoptive families. Funding also will continue to support diligent search activities which focus on identifying and locating parents and relatives who might be placement resources for children utilizing multiple resources such as Accurint, Internet sources, telephone books, Department of Motor Vehicles information and diligent search programs in other states.

Title IV-B and Adoption Incentive funding contribute to a large number of social summaries and home studies being completed at CCDFS leading to adoptions being finalized in a timely manner. As a result of this activity, adoption rates have continued to increase significantly over the past five years and that growth is expected to be maintained. Workers continue to work diligently to eliminate the barriers that prevent children from being adopted. Barriers to success have included backlogged pending TPR's; processing legal TPR related documents, backlogged adoption subsidy files, etc. Staff has been hired to address these barriers and it is expected that numbers will increase as these barriers are addressed.

Adoption Promotion and Support Services funding to sub-grantees in WCDSS and the DCFS Rural Region have enhanced their capability to collaborate with agencies to produce "child / family matching" events where children in foster care awaiting adoption were exposed to potential adoptive families; provision of series of training workshops for foster and adoptive parents; awareness promotion of special needs adoptive homes for children 12 years and older and sibling groups and increase interest in special needs adoption, ultimately impacting the number of finalized special needs adoptions. In collaboration with WCDSS, an agency has developed a program to build relationships between biological and foster parents with a goal of improving communication and building positive relationships between biological and foster parents to best facilitate the well-being of the children involved.

The WCDSS Adoption Program and the CCDFS CAC will continue to utilize trained clinical staff to support families' adoption of children with emotional/behavioral needs. This 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.

WCDSS has completed several other tasks to help assist with ensuring adequate services for foster and adoptive youth and children. WCDSS has developed a Memorandum of Understanding (MOU) with Medicaid providers to create an approved network of providers and has authorized payments outside contract to provide needed services (example, additional payment for urgent evaluation), and will continue to refine the voucher process to ensure appropriate services are available as needed by staff. Additionally, caseworkers have access to Children's Cabinet therapeutic and safety services.

#### Independent Living Services (IL)

Nevada continues to deliver the IL program through a state-supervised and county administered program in the two major metropolitan counties, Clark and Washoe. Also, Nevada supervises and administers the IL program in the remaining 15 rural counties. Statewide public and private partnerships are developed to provide IL services throughout the state. Each region develops a service array unique to their community. Please see APPENDIX B: Chafee Foster Care Independent Living Program (CFCIP) & Education Training Voucher Program (ETV) for information related to services for Independent Living.

## Service Decision Making Process for Family Support Services

Funding constraints and provider retention/availability continue to present two of the most serious barriers across the state. However, despite these challenges, ongoing efforts continue to increase the accessibility of services through new initiatives statewide. During both the 2010 and 2013 release of the Title IV B, Subpart 2, Request for Proposals (RFP), each child welfare agency developed a list of priority service needs. These priorities were the first step in the decision process towards services and outcomes. Priority service needs identified include:

- CCDFS: Family preservation services, homemaker services, substance abuse assessment and treatment, mental health assessments, medical case management, domestic violence response, and home studies and social summaries;
- WCDSS: In-home family crisis stabilization services and support services, facilitators to conduct safety team meetings to facilitate timely reunification, updating home studies and social summaries, comprehensive substance abuse and mental health assessments, family counseling and substance abuse treatment, parenting groups: and
- DCFS Rural Region: In-home family crisis stabilization services, in-home mental health assessments and treatment, community based and in and in-home substance abuse assessment and services, community based and in-home parenting training, community based and in-home homemaker classes, and training and classes for potential adoptive families.

Through Title IV B, service providers across the state have been funded to provide family preservation, family support, timely reunification and/or adoption support services. Representatives from WCDSS, CCDFS and Rural child welfare will continue to participate in the Title IV B advisory group established to monitor and address issues related to service provision and access. This advisory group will meet regularly to discuss service needs, barriers to access, and opportunities for improvement. Collaboration with partner agencies, sub grantees and families all assist in deciding the best course of action for family support services.

**Table C: Title IV-B Subpart 2 Grantees by Funding Category and Region for Federal for SFY 2014**

Sub Grantee Name and Region	Family Support	Family Preservation	Time Limited Family Reunification	Adoption Promotion/Support
<b>Clark</b>				
Adoption Exchange, Las Vegas				✓
Boys Town, Las Vegas	✓	✓	✓	✓
Bridge Counseling, Las Vegas		✓	✓	
CCDFS Department of Family Services, Las Vegas	✓		✓	✓
East Valley Family Services, Las Vegas		✓		
Olive Crest, Las Vegas				✓
Virgin Valley FRC, Mesquite	✓	✓		
<b>Washoe</b>				
Tahoe Family Solutions	✓			
Children's Cabinet of Reno	✓	✓		
Family Counseling Services, Reno			✓	✓
STEP 2, Reno	✓		✓	
WCDSS FRC Coalition, Reno	✓	✓		
Youth Law Center			✓	
<b>DCFS Rural Region</b>				
Community Chest	✓		✓	
Family Support Council, Gardnerville		✓		
FRC of Northeastern Nevada, Elko	✓	✓	✓	
FRIENDS FRC, Fallon	✓			
Hawthorne FRC, Hawthorne	✓	✓		
Little People's Head Start, Ely	✓			

Maple Star	✓			
No to Abuse, Pahrump	✓	✓	✓	✓
Ron Wood FRC, Carson City	✓			
Wells FRC, Wells	✓	✓		

**CCDFS:** During this past state fiscal year, 10,279 families, 13,220 individuals, 22,242 children, 2,435 persons with a disability and 6,038 single heads of household were provided the services listed below through the agencies funded in CCDFS in SFY 2014:

- Family Support – Parent Education, Individual and Group Parent Support Groups, In-Home Parenting Programs, Teen/Youth Support Groups, Tutoring, and Job Placement Assistance.
- Family Preservation – Parenting Classes, Home Maker Skills, Respite Care, In-Home Therapy, Family Strengthening and Modeling Techniques such as: Home Safety, Positive Discipline, Cleanliness, Child Development, Nutrition, Budgeting, School Advocacy.
  1. *Basic Needs Services* – Transportation Assistance, Utility Assistance, Clothing, Housing, Food, Rental Assistance and other Basic Needs to prevent removal of children.
- Time-Limited Reunification – Safety Team Decision Making Program, Substance Abuse Assessments, Mental Health Assessments, Home-Based Treatment in English and Spanish, Group Therapy, Individual Therapy, Couples' Therapy, Family Therapy.
- Adoption Support and Services – Home Studies, Social Assessments, Post Placement Services, Home Study Updates, Social Study Updates.

**WCDSS:** 4,319 families, 5,447 individuals, 6,413 children, 390 persons with a disability and 2,090 single heads of households were provided the following services during SFY 2014 through the agencies funded in WCDSS:

- Family Support – Individual and Group Parent Support Groups, In-Home Parenting Programs, Mentoring, Tutoring, Youth/Teen Support Group,
- Family Preservation – Parenting Classes, Youth/Teen Support Group, Home Maker Skills, In-Home Therapy, Family Strengthening and Modeling Techniques such as: Home Safety, Positive Discipline, Cleanliness, Child Development, Nutrition, Budgeting, School Advocacy.
  2. *Basic Needs Services* – Transportation Assistance, Utility Assistance, Clothing, Housing, Food, Rental Assistance and other Basic Needs.
- Time-Limited Reunification – Substance Abuse Assessments, Mental Health Assessments, Home-Based Treatment in English and Spanish, Group Therapy, Individual Therapy, Couples' Therapy, Family Therapy.
- Adoption Support and Services – Recruitment and Training, Home Studies, Social Assessment, Post Placement Services, Home Study Updates, Social Study Updates.

**DCFS Rural Region:** 1,294 families, 1,656 individuals, 2,041 children, 260 persons with a disability and 418 single heads of households were provided the following services during FY 2014 by agencies funded to provide services in rural Nevada:

- Family Support – Individual and Group Parent Support Groups, Parenting Classes for Teen Moms and First Time Moms, In-Home Parenting Programs, Child Development Classes, Substance Abuse Screenings, Mental Health Services, Tutoring, Domestic Violence Services and Job Placement Assistance.
- Family Preservation – Parenting Classes, Youth/Teen Support Group, Home Maker Skills, In-Home Therapy, Family Strengthening and Modeling Techniques such as: Home Safety, Positive Discipline, Cleanliness, Child Development, Nutrition, Budgeting, School Advocacy.
  3. *Basic Needs Services* – Transportation Assistance, Utility Assistance, Clothing, Housing, Food, Rental Assistance and other Basic Needs.

- Time-Limited Reunification - Substance Abuse Assessments, Mental Health Assessments, Home-Based Treatment in English and Spanish, Group Therapy, Individual Therapy, Couples' Therapy, Family Therapy.
- Adoption Support and Services – Recruitment and Training, Foster and Adoption Home Studies.

**Populations at Greatest Risk of Maltreatment:**

The Title IV- B, Sub grant II advisory group meets quarterly and will continue to meet over the next five years. Prior to each funding cycle, representatives from each child welfare agency work with management and the Grants Management Unit specialists to identify funding priorities. These priorities, by region, are incorporated into the Request for Proposals (RFP)/ funding announcement, and are used to evaluate proposals so that funded projects are closely aligned to agency identified service needs and priorities. Scopes of Work and needs assessments have been reviewed each year or more often if requested and appropriate to ensure the activities continue to support the identified needs.

**Services to Populations at greatest risk of maltreatment**

**CCDFS**

In order to serve populations at greatest risk of maltreatment CCDFS is exploring a partnership with Mojave Mental Health Services to implement a program that seeks to provide intervention to families to allow children to safely remain in the home. The Mojave Intensive Support Team (MIST) has successfully served youth in the CCDFS foster care system since October 1, 2012. The MIST program focuses on early intervention for youth newly placed in foster care. MIST goals include facilitating reunification or permanency, and preventing the development of long term mental health problems.

Over the next five years CCDFS will continue to provide the following services to populations at greatest risk of maltreatment.

1. Homemaker services to prevent the removal of the child from the home.
2. Intensive medical case management services for children with special needs.
3. In-home Family Crisis Stabilization Services – initial crisis assessment and crisis counseling to stabilize the home environment. This includes no less than three home visits per week and parent education skills training.
4. Facilitators to conduct safety team meetings that conduct a safety team meeting for all children within 48 hours of removal from their home on an emergency basis, prior to removal for non-emergency placements or for imminent disruptions and when a case is transitioned from child protective services to the permanency unit.
5. Substance abuse assessments and counseling.
6. Peer mentoring and advocacy program services to encourage attachment between parents and their children that have been removed from the home and support for parents involved with the child welfare system.
7. Home studies and initial social summaries for children waiting for adoption to provide a complete child and family history for the purpose of full disclosure and best practice.

CCDFS continues to work with community partners in areas where there are high removal rates, including faith-based organizations to assist these families in crisis. CCDFS also continues to work towards collaborative relationships with these organizations and others to reduce the risk of maltreatment in these areas by providing families with supportive services.

**WCDSS**

In response to a survey distributed to the county's child welfare staff, WCDSS was able to identify child and family priority service needs as well as funds that could be used to support case planning and service delivery. While priorities

may have shifted for WCDSS there is a continued need and plan to provide the following services over the next five years.

- 1) Counseling for adults with a co-occurring disorder.
- 2) Assessments and counseling for youth with substance abuse.
- 3) Group counseling.
- 4) Counseling for domestic violence offenders.
- 5) Strength-based parental capacity evaluations.
- 6) In-home Family Crisis Intervention Services – provide initial crisis assessment, crisis counseling and intensive therapeutic case management.
- 7) Parent-training mentor program to enhance parental confidence and skills in bonding and to help train and mentor parents for supervision with their children.

Additionally, WCDSS implemented ACTION for Child Protections SAFE (Safety Assessment and Family Evaluation) model. SAFE requires workers to assess a child's safety through identification of impending danger threats and safety analysis. Fidelity reviews demonstrate WCDSS' movement towards high fidelity in selecting the appropriate threats. Selection of the impending danger threats is the basis for case plan development. This process ensures children at greatest risk of maltreatment are consistently identified. Safety plan analysis generates safety plan development. If the safety analysis indicates that a parent's protective capacities are diminished, than the worker determines whether an in-home or out-of-home safety plan is required. Safety services are identified and applied where necessary. It is through the identification of impending danger threats, analysis of safety, and the subsequent planning to promote parent protective capacity that targets those children most at risk.

## **DCFS Rural Region**

The populations at greatest risk of maltreatment have not changed for the DCFS Rural Region in recent years. They are families who are familiar with the agency and often have a history of past investigations and assessments of child safety, sometimes for several years. DCFS Rural Region has great hope that the implementation of the new SAFE practice model, which emphasizes the assessment of caregiver protective capacities, impending danger threats and that utilizes motivational interviewing strategies to more effectively engage families in the change process will result in increased parental ownership and involvement in case planning which ultimately will lead to better child welfare outcomes and less recidivism.

DCFS Rural Region is constantly looking for avenues and opportunities to build infrastructure for necessary services in Frontier Rural communities. Access to sexual assault exams, mental health assessments and treatment for adults and especially children, medical exams by qualified doctors who specialize in child abuse, domestic violence and substance abuse services are some of the highest in demand. DCFS Rural Region has and will continue to use IV-B money to contract for necessary services to serve families in need. DCFS is in the process of negotiating with two psychologists who are willing to travel to rural communities and provide necessary psychological and parental capacity evaluations. Through the use of grant funds, DCFS Rural Region has and plans to continue to support the development and/or enhancement of local Sexual Assault Teams (SART) and Multidisciplinary Teams (MDT). MDT training will be ongoing to include, but not be limited to; law enforcement, tribes, attorneys, CASA, court improvement councils and mental health clinicians. In addition, DCFS plans to grow our Specialized Foster Care program which began as a pilot program a year ago in three rural communities.

## **Services for Children under the Age of Five:**

Over the next five years the three child welfare agencies are focused on initiatives that will continue, and it is anticipated these efforts will reduce the length of time that young child under age five are in foster care without a permanent family.

## **CCDFS**

CCDFS has implemented two specialized in-home units that are assigned to cases where the primary victim is under the age of five. This has assisted in promoting permanency for these children. In the later part of FY 2014 CCDFS will be implementing specialized permanency units that will service those primary victims under the age of five. By moving in this direction CCDFS will be able to promote and expedite the permanency of these children.

## **WCDSS**

WCDSS is in the third year of a multi-year research project to promote early reunification through a process of evaluation parent protective capacity and strengthening parental skill through SMART case planning. Staff not involved in the research project (SAFE-FC) must staff cases with supervisors at least quarterly to address barriers to reunification. A special staffing between a management level employee, supervisor, and caseworker is held at 9 months, and every 9 months thereafter, to specifically address barriers to reunification. This staffing is intended to occur far enough ahead of the permanency hearing to promote service delivery to get young children returned to caretakers. WCDSS actively seeks relatives to promote relative guardianship and adoption through diligent search staff. An additional Senior Social Worker assigned as an Adoption Negotiator was hired during this time frame to promote adoption subsidy completion. Staff participates in a multi-disciplinary meeting weekly to promote placement stability and identify necessary services to prevent disruptions including relative placement.

## **DCFS Rural Region**

In 2012, just one year after instituting the SAFE model, DCFS Rural Region began utilizing in-home safety management planning and by May 2013, had safely reduced the number of children who came into care by 19%. By utilizing in-home safety plans, children were safely maintained in their own homes while case plan activities occurred to increase caregiver protective capacities and mitigate safety threats altogether. The approximate number of children under the age of five in foster care in 2012 was 296. Per AFCARS, the average length of stay in foster care from 7/2012 to 4/2013 for this age group was 477 days. During the same period this past year (from 7/1/13 – 4/6/14) the number of children under the age of five is 199, and the average length of stay in care was 478 days. While the length of time in care has not decreased, the number of children under the age of five in care has significantly decreased over the past year. A significant difference in practice now compared to years past is that DCFS Rural Region is now utilizing completion of Conditions For Return as a basis for decision making about the time line to return children safely home, as compared to completion of the case plan, which historically took several months or years before return to home was even considered.

## **Services of Children Adopted from Other Countries**

Over the next five years Adoption Promotion/ Support funds and Adoption Incentive funds will be used to assist children adopted from other countries. This funding is allocated to sub-grantees across the state that provides post-adoption services. They are available for all Adoptive families across the state

Post-adoption services available to children adopted from other counties include but are not limited to:

1. Information and referral.
2. Educational programs (parent training)
3. Support groups
4. Family Preservation
5. Case management
6. Therapeutic intervention/counseling
7. Respite
8. Search registries

## Section III: Goals, Objectives and Methods of Measuring Progress

### PLAN FOR IMPROVEMENT

A key federal requirement of the CFSP requires DCFS to identify several broad goals for progress throughout the child welfare continuum. These goals are expressed in terms of improved outcomes for the safety, permanency, and well-being of children and families, and in terms of a more comprehensive, coordinated, and effective child and family service delivery system, as is required in 45 CFR 1357.15 (h).

Aligned with the plan's goals are the measurable objectives that DCFS, in collaboration with CCDFS and WCDSS, will undertake in order to achieve these goals. The objectives focus on outcomes for children, youth and families or on elements of service delivery that are linked to these outcomes. DCFS's progress in enhancing services and improving outcomes is measured by its progress in implementing and achieving its measurable objectives.

To the extent that a key requirement of DCFS's CFSP goals and objectives are quantifiable and measurable, this section of the report details the data-driven baselines/benchmarks against which DCFS's progress will be measured over the course of the next five years. For some of the proposed objectives/measures DCFS is not able to produce baseline data either because referenced programs/processes/interventions are still too nascent to produce significant data and/or because DCFS is in the process of developing/correcting reporting mechanisms.

### **SAFETY**

#### **Goal 1: Children and Youth will be Safe in out of home care.**

The rationale for Nevada choosing this goal is due to Nevada's inability to meet the national standard for 'abuse in foster care' for several years, as reflected by the following table from the Nevada federal data profile. This was an item negotiated for improvement during the 2009 Child and Family Services Review (CFSR). The negotiated PIP target is 99.68%. There is a need for continued focus on ensuring that children and youth are not abused when placed in foster care settings. Foster care settings include non-relative foster homes, relative foster homes, group homes and residential treatment.

**Table III:1 Safety Indicator 2: Absence of Child Abuse/Neglect in Foster Care**

Federal Performance	National Standard		FY 2010	FY 2011	FY 2012	FY 2013
Safety Indicator 2: Absence of CA/N in Foster Care	99.68%	↑	99.40%	99.59%	99.35%	99.53%

Source: Nevada federal data profile

Green Shading = Meets Standard; Red Shading = Below Standard; Yellow Shading = Above median/below standard

#### Objective 1.1

*Continue to strengthen and reinforce safety practices for children in out of home care to include assessment of children in out-of-home care.*

- **Intervention/strategy 1.1.1**

**Continue full statewide implementation of the Nevada Safety Model. The Nevada Safety Model is known as Safety Intervention Permanency System (SIPS) by Clark County Department of Family services (CCDFS); the Structured Analysis Family Evaluation (SAFE) by the DCFS Rural Region, and Structured Analysis Family Evaluation (SAFE) or (SAFE/FC) by Washoe County Department of Social Services (WCDSS).**

**\*Intervention/strategy rationale:** The state of Nevada has been working towards improving the assessment of safety since the first Program Improvement Plan (PIP) in 2006, and during the second PIP in 2010. Nevada has

historically used ACTION for Child Protection through contractual funds or has received technical assistance from the National Resource Center for Child Protective Services (NRCCPS). Nevada has been working with ACTION for protection for a number of years, and continues working with ACTION on an enhanced safety model.

DCFS Rural Region and WCDSS met and moved forward with implementation of the enhanced safety model beginning in 2010-2011. CCDFS has just recently secured a three-year contract with ACTION to assist CCDFS with implementation of the enhanced safety model. The state of Nevada has a great deal of investment in the implementation of this model, and needs several additional years for complete full statewide implementation.

- Intervention/Strategy 1.1.2**  
**Utilize the Quality Parenting Initiative (QPI) to build supports around foster parents to enhance the safety of children and youth in foster care.**  
\*Intervention/strategy rationale: The Quality Parenting Initiative (QPI) is a new approach to strengthening foster care, including kinship care, using branding and marketing principles. The core premise is that the primary goal of the child welfare system is to ensure that children have effective, loving parenting. There have been major successes reported in several measurable outcomes.

**MEASURES OF PROGRESS PROJECTION TIME TABLE**

**Table III: 2 Measures for Goal 1: Children and Youth will be Safe in out of home care**

<b>Measures/Benchmarks</b>	<b>Benchmark Timetable</b>	<b>Data Baseline</b>	<b>Projected Goal FY 16/17</b>	<b>Goal FY 18/19</b>
Reduce the victimization rate per day of children in foster care. (Source: ACF NV Data Profile)		TBD	Set in SFY 2015 APSR	Set in SFY 2016 APSR
Increase the timeliness of Investigations for out-of-home cases. Source: Case Record Reviews)	Review Policy/Measure during SFY 2015	TBD <sup>2</sup>	Set in SFY 2015 APSR	Set in SFY 2016 APSR
Increase the frequency and quality percentage of caseworker visits with children in out-of-home care. ( Source: Case Record Reviews)		80.6% 2013	85%	Set in SFY 2016 APSR
Develop a UNITY Report for the courts that tracks the number of children on out-of-home care non-judicial safety plans, and once the report is developed provide to the courts quarterly.	SFY 2015			
Out-of- Home Safety Plan discussion will be a standing agenda item for the Community Improvement Council (CIC)	CIC Agenda Agenda =Evidence			

<sup>2</sup> Timeliness of Investigations case review data has been collected over the course of the Nevada Performance Improvement Plan (PIP) and ongoing annually since meeting the negotiated PIP target. However, we would like to review policy and practice before developing a CFSP baseline.

## **Goal 2: Children will be Safe in their own homes.**

The rationale for Nevada choosing this goal is due to the belief that full implementation of the Nevada Safety Model will increase the population of children living in their own homes who may require protective services and or safety planning.

### **Objective 2.1**

*Continue to strengthen and reinforce safety practices for children being served in their own homes.*

- **Intervention/Strategy 2.1.1**

**Continue full statewide implementation of the Nevada Safety Model. The Nevada Safety Model is known as Safety Intervention Permanency System (SIPS) by Clark County Department of Family services (CCDFS); the Structured Analysis Family Evaluation (SAFE) by the DCFS Rural Region and Structured Analysis Family Evaluation (SAFE) or (SAFE/FC) by Washoe County Department of Social Services (WCDSS).**

*\*Intervention/strategy rationale:* As previously mentioned, the state of Nevada has been working towards improving the assessment of safety since the first Program Improvement Plan (PIP) in 2006, and during the second PIP in 2010. Nevada has historically used ACTION for Child Protection through contractual funds or has received technical assistance from the National Resource Center for Child Protective Services (NRCCPS). Nevada has been working with ACTION for protection for a number of years, and continues working with ACTION on an enhanced safety model. The DCFS Rural Region and WCDSS moved forward with implementation of the enhanced safety model beginning in 2010-2011, while CCDFS has just recently secured a three-year contract with ACTION to assist CCDFS with implementation of the enhanced safety model.

### **Objective 2.2**

*Provide consistent assessment, prevention, intervention and support services to families to protect children in their own homes and prevent removal.*

- **Intervention/Strategy 2.2.1**

**Enhance the capacity of Differential Response (DR) to serve children age five and under.**

*\*Intervention/strategy rationale:* DR systems have been established in states as part of an effort to decrease the adversarial nature of child protective investigations, and to increase family engagement in service planning and service delivery. Families served through DR systems are more likely to receive in-home services. Enhancing the capacity of DR in efforts for them to serve more children under the age of five when appropriate provides additional services and supports to young children remaining with their families.

### **Objective 2.3**

*Improve the quality of caseworker contacts with children and parents to ensure that visits promote the purpose of the case plan and safety of the child.*

- **Intervention/Strategy 2.3.1**

**Utilize the Statewide Quality Improvement Committee (SQIC) to continue the monthly monitoring/reporting/examination of caseworker visits with children (frequency and quality). Identify the casual pathways to poor performance using the methods of Continuous Quality Improvement (CQI) and implement interventions to improve statewide performance.**

*\*Intervention/strategy rationale:* Evidence has been published identifying the link between quality caseworker visits with children and positive outcomes for children and families engaged in child welfare systems. Nevada has been gradually improving on caseworker visits but needs to continue this focus over the next five years.

**MEASURES OF PROGRESS PROJECTION TIME TABLE**

**Table III: 3 Measures for Goal 2: Children will be Safe in their own homes**

<b>Measure/Benchmarks</b>	<b>Benchmark Timetable</b>	<b>Data Baseline</b>	<b>Projected Goal FY 16/17</b>	<b>Goal FY 18/19</b>
Reduce the re-report of Abuse and Neglect.( Source: ACF NV Data Profile)		TBD	Set in SFY 2015 APSR	Set in SFY 2016 APSR
The annual number of referrals for children served with DR statewide. (CLEO Reports)		1015	Set in SFY 2015 APSR	Set in SFY 2016 APSR
Develop a report that measures the number of children served age five and under by DR.	Develop Report during FFY 2015 Evidence=Report			
The annual number/percentage of children served statewide by DR age five and under.		TBD	Set in SFY 2015 APSR	Set in SFY 2016 APSR
Increase the timeliness of Investigations for in home cases. (Source: Case Record Reviews)	Review Policy/Measure during SFY 2015	TBD <sup>3</sup>	Set in SFY 2015 APSR	Set in SFY 2016 APSR
Increase the frequency and quality of caseworker visits with children living in their own homes. (Source: Case Record Reviews)		65% 2013	70%	Set in SFY 2016 APSR
Develop a statewide report that provides the number of children being served with in-home services by jurisdiction.	Develop Report during FFY 2015 Evidence=report			
The number/percentage of children being served with in-home services statewide and by jurisdiction		TBD	Set in SFY 2015 APSR	Set in SFY 2016 APSR
Develop a UNITY Report for the courts that track the number of children on in-home non-judicial safety plans and once developed provide to the courts quarterly.	SFY 2015			
Out-of Home Safety Plan discussion will be a standing agenda item for the Community Improvement Council (CIC)	CIC Agenda = Evidence			

<sup>3</sup> Timeliness of Investigations case review data has been collected over the course of the Nevada Performance Improvement Plan (PIP) and ongoing annually since meeting the negotiated PIP target. However, we would like to review policy and practice before developing a CFSP baseline.

## WELL-BEING

### **Goal 3: Children and Youth will have an improved Well-Being.**

The rationale for Nevada choosing this goal is the acknowledgement that Nevada needs to develop a means to better track and monitor this information. Nevada will need to develop reporting mechanisms to determine baselines for monitoring.

#### Objective 3.1

*Ensure educational needs of children and youth are met.*

##### **Intervention/Strategy 3.1.1**

##### **Continue a Statewide Collaborative on Education, Child Welfare, and the Courts.**

\*Intervention/strategy rationale: A collaborative relationship between the Department of Education, Child Welfare and the Courts is needed to strengthen educational success for children and youth in foster care. This collaborative will identify outcomes and measurable objectives that will target improvement and demonstrate progress.

#### Objective 3.2

*Ensure youth who exit care are prepared for adult living.*

##### **Intervention/Strategy 3.2.1**

##### **Request Technical Assistance (TA) for train the trainer (TOT) and caseworker training on transition planning for youth. This TA will be for training on the planning process and development of youth directed transition plans.**

\*Intervention/strategy rationale: Transition planning is a process not an event, and must be developed through a strengths/needs based approach that is directed by the youth. This requires skill in the process and development of the written plan. Statewide training is needed to develop the skill of caseworkers to ensure the planning process occurs before the plan is written, and the written plan is self-directed by the youth based on the youths strengths and needs.

#### Objective 3.3

*Ensure the needs of children and youth with mental or behavioral health issues are met.*

##### **Intervention/Strategy 3.3.1**

##### **Utilize the Quality Parenting Initiative (QPI) to build supports around foster parents to enhance the well-being of children and youth.**

##### \*Intervention/strategy rationale

The Quality Parenting Initiative (QPI) is a new approach to strengthening foster care, including kinship care, using branding and marketing principles. The core premise is that the primary goal of the child welfare system is to ensure that children have effective, loving parenting. There have been major successes reported in several measurable outcomes.

### **MEASURES OF PROGRESS PROJECTION TIME TABLE**

**Table III: 4 Measures for Goal 3: Children and Youth will have improved Well-Being**

<b>Data Measures/Benchmarks</b>	<b>Benchmark Timetable</b>	<b>Data Baseline</b>	<b>Project Goal FY 16/17</b>	<b>Goal FY 18/19</b>
Increase efforts to assess children's educational needs initially and ongoing.		TBD	Set in SFY 2015 APSR	Set in SFY 2016 APSR

(Source: Case Record Reviews)				
Redesign the UNITY educational windows.	Convene a workgroup during FFY 2015 Evidence= established workgroup			
<b>Courts:</b> Increase the proportion of ASFA hearings during which the child's education is addressed. (Source: Court hearing observation TA from NRCLJI)	To start in SFY 2015	TBD	Set in SFY 2015 APSR	Set in SFY 2016 APSR
Educational Collaborative: Reduce the barriers for school enrollment when foster youth have to change from school of origin	Joint letter between school district and child welfare for information sharing during FFY 2015-2016 evidence =letter			
Develop a UNITY Report that will measure youth in foster care who graduate from high school or receive a GED	Develop Report during SFY 2015-2016 Evidence=report	[Data not yet available]		
Develop a UNITY Report that will measure educational moves of children in foster care.	Develop Report during SFY 2015-2016 Evidence=report	[Data not yet available]		
Decrease the educational moves of children/youth in foster care.		TBD	Set in SFY 2016 APSR	Set in SFY 2017 APSR
The percentage/number of youth within 90 days of turning 18 who have Transition Plans.		TBD <sup>4</sup>	Set in SFY 2015 APSR	Set in SFY 2017 APSR
Develop a UNITY Report to measure if children/ youth receive timely EPSTD screenings. (30 days of entry into foster care)	Develop Report during SFY 2015-2016 Evidence=report	[Data not yet available]		
Increase the percentage of children who receive a comprehensive EPSDT assessment within 30 days of entry into foster care.		TBD	Set in SFY 2016 APSR	Set in SFY 2017 APSR
Develop a UNITY Report to measure if children and youth in out-of-home care receive on-going annual medical exams.	Develop Report during FFY 2015-2016 Evidence=report	[Data not yet available]		
Increase the number/percentage of children and youth who have been in out-of-home care for 30 days or more that receive annual medical exams during a calendar year.		TBD	Set in SFY 2016 APSR	Set in SFY 2017 APSR

<sup>4</sup> DCFS cannot report on this measure at this time because the logic of the management report needs modification to ensure accuracy and uniformity of the data. Therefore, once the report is modified and is available the baseline can be determined.

Develop a UNITY Report to measure if children/youth in foster care are receiving on-going annual dental exams.	Develop Report during FFY 2015 Evidence=report	[Data not yet available]		
Increase the percentage of children/youth that are in out-of-home care who receive annual dental exams during a calendar year.		TBD		
Increase the global frequency percentage of caseworker visits with children in out-of-home (UNITY report CFS7D7) <ul style="list-style-type: none"> <li>Federal target is 95% by FY 2015</li> </ul>		87.6% (FY 2013)	Set in FY 2015 APSR	Set in FY 2016 APSR
Increase efforts to assess the needs and services of children, parents and foster parents. (Source: Case Record Reviews)		62.9%	65%	
Increase the engagement in case planning for the child if age appropriate, and the parents. (Source: Case Record Reviews)		56.67%	60%	
Increase the frequency and quality of contacts with parents. (Source: Case Record Reviews)		56.86%	60%	
Reduce the barriers for school enrollment when foster youth have to change from school of origin	Joint letter between school district and child welfare for information sharing during FFY 2015-2016 Evidence =letter			

## CONTINUOUS QUALITY IMPROVEMENT

### Goal 4: The state will be able to identify the strengths and needs of the child protective service delivery system.

The rationale for Nevada choosing this goal is to ensure development of a continuous quality improvement system (CQI) through the enhancement of the following five functional components: administrative structure to oversee effective CQI system functioning; quality data collection; a method for conducting on-going case reviews; a process for the analysis and dissemination of quality data on all performance measures; and, a process for providing feedback to stakeholders.

#### Objective 4.1

Eliminate gaps in the overall five functional components of the continuous quality improvement process.

#### Objective 4.2

Increase the statewide capacity of a dedicated case reviewer pool.

#### Objective 4.3

Re-design the Quality Improvement Case Review (QICR) process.

**Intervention/strategy 4.1.1-4.3.1**

**Utilize the existing established Statewide Quality Improvement Committee (SQIC) to advance practice and improve outcomes for children and families in Nevada. The Committee is charged with prioritizing outcomes and practice standards utilizing sub-committees and or workgroups to accomplish the work of enhancing and developing a statewide CQI system that addresses the gaps in the overall functional components of CQI.**

\*Intervention/strategy rationale: Several states have convened a statewide Quality Improvement Committee in efforts to implement/enhance a statewide CQI system. This process promotes statewide stakeholder collaboration with representative members from all jurisdictions. It provides a forum for stakeholders to discuss data quality as well as data reporting issues, case review findings, federal outcome data, and overall gaps in the functional components of a statewide CQI system. It provides a forum for identification of problems and development and implementation of solutions. The members are responsible to assist in identification and resolution of problems impeding progress towards improved outcomes for children and families.

**Objective 4.4**

Develop and expand the Court Centralized Case Index (CCI)

**Intervention/strategy 4.4.1**

**Explore the feasibility of developing a standardized architecture for combining information from court case management systems (CMSs) with information from UNITY to provide a reporting data warehouse and accompanying tools to facilitate near real-time timeliness reporting. Blend and productionalize information from UNITY and the court CMSs into an integrated dashboard accessible to individual judicial districts across the State.**

\*Intervention/strategy rationale

Maintaining near real-time access to court timeliness measures as well as permanency and placement information will enable the court to ensure they contribute to timely permanency for children in the child welfare system.

**MEASURES OF PROGRESS PROJECTION TIME TABLE**

**Table III: 5 Measures for Goal 4: The state will be able to identify the strengths and needs of the child protective service delivery system.**

<b>Measure/Benchmarks</b>	<b>Benchmark Timetable</b>	<b>Data Baseline</b>	<b>Project Goal FY 16/17</b>	<b>Goal FY 18/19</b>
Monitor/Review and Revise work plans in SQIC that reference the gap analysis in the overall five functional components of CQI.	In FFY 2015 Evidence=revised gap analysis			
Number of dedicated Case Reviewer Staff	In FFY 2015 Evidence – list of dedicated Reviewers	TBD	Set in SFY 2015 APSR	Set in SFY 2016 APSR
Re-design the Case Review Process	In FFY 2015 Evidence=written revised process			
Develop a statewide CQI policy	In FFY 2015 Evidence=written policy			
Develop/Correct/Increase the number of UNITY performance reports	Review Reports in FFY 2015 Evidence=report index			

	updated with date of development/corrected reports			
<b>Courts:</b> Prototype developed and approved for productionizing.	CIP Select Committee approval of prototype			
<b>Courts:</b> Adjust reporting framework	Selection of a preferred framework that will provide user friendly reports.			
<b>Courts:</b> Implement ongoing feed from UNTY/COURT	Data flows into CCI without error			
<b>Courts:</b> Develop additional reports and data sources	All necessary reports developed and approved by judiciary			
<b>Courts:</b> Expand to other judicial districts	Judicial districts who wish to participate are included			
<b>Courts:</b> Provide access to and train on how to use the dashboards.	Judiciary trained			

## PERMANENCY

### Goal 5: Children and youth will achieve timely permanency through stable and supportive placements.

The rationale for Nevada choosing this goal is due to Nevada's inability to meet the national standard for reunification of children in less than 12 months based on an entry cohort, and on ensuring placement stability as reflected by the following table from the Nevada federal data profile.

**Table III:6 Permanency Composite 1 and 4 Components**

<b>Federal Performance (permanency)</b>	<b>National Standard</b>		<b>FY 2010</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
C.1.3 Entry cohort of children who reunify in < 12 months	48.4%	↑	43.5%	34.1%	38.6%	36.3%
<b>Federal Performance (placement stability)</b>			<b>FY 2010</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
C4.1 Two or fewer placement settings for children in foster care less than 12 months	86.0%	↑	82.8%	80.0%	81.5%	81.3%

Source: Nevada federal data profile

Green Shading = Meets Standard; Red Shading = Below Standard; Yellow Shading = Above median/below standard

#### Objective 5.1

*Decrease the placement setting disruptions of children in foster care.*

#### Objective 5.2

*Decrease re-entry to foster care.*

#### Objective 5.3

*Increase Permanency in 12 months for children entering foster care.*

**Intervention/Strategy 5.1.1-5.3.1**

**Continue to explore opportunities to redesign the specialized foster care system in Nevada, through implementation of evidence based or promising practices in the foster care agencies, and enhancing and/or changing the payment structure.**

**\*Intervention/strategy rationale:** The current specialized foster care pilot, while it is being implemented a bit differently in each child welfare agency, has shown success in ensuring appropriate services are provided to children, children have increased placement stability, and children are moving to permanency. Expanding the foster care pilot will allow this program to reach more children with behavioral and emotional challenges that make it difficult to find traditional family foster homes that can meet their needs. Key components of the pilot include implementation of evidence-based or science based practices, increased oversight by the child welfare agency, and evaluation components.

**Objective 5.4 (COURTS)**

Decrease median days to termination of parental rights and adoption.

**Intervention/Strategy 5.4.1**

**Continue the Community Improvement Council process of courts identifying barriers and implementing solutions to decreasing median days to termination of parental rights and adoption. CICs will develop plans and processes to share information and work together. District Attorneys will continue to assist the Deputy Attorney General with case processing, if needed. Information will flow through the CICs.**

**\*Intervention/strategy rationale**

This work group collaborative process is an evidence-based practice that has demonstrated its value throughout Nevada in the CICs. Diverse, collective intelligence improves innovation and problem solving, contributing to systems change, information sharing, and improved practice.

**Objective 5.5 (COURTS)**

Achieve timely permanency for children in the child welfare system.

**Intervention/Strategy 5.5.1**

**Decrease filing time of court reports and decrease travel time for caseworker to attend certain court hearings by utilizing available court resources to electronically submit court reports and allow caseworkers to attend certain, judicially approved court hearings via video-conferencing.**

**\*Intervention strategy rationale**

Decreasing filing time of court reports and decreasing travel time for caseworkers is an efficient use of time and resources in efforts to achieve timely permanency for children in the child welfare system.

**MEASURES OF PROGRESS PROJECTION TIME TABLE**

**Table III: 7 Measures for Goal 5: Children and youth will achieve timely permanency through stable and supportive placements.**

<b>Measure/Benchmark</b>	<b>Benchmark Timetable</b>	<b>Data Baseline</b>	<b>Projected Goal FY 16/17</b>	<b>Goal FY18/19</b>
Increase placement stability of children in foster care. ( Source: ACF NV Data Profile)		TBD	Set in SFY 2015 APSR	Set in SFY 2016 APSR
Reduce the re-entry of children into foster care. Source: (ACF NV Data Profile)		TBD	Set in SFY 2015 APSR	Set in SFY 2016 APSR
Increase the permanency of children within 12 months of removal. ( Source: ACF NV Data Profile)		TBD	Set in SFY 2015 APSR	Set in SFY 2016 APSR

Ensure the most appropriate selection of permanency goals for children and youth in foster care. (source: case reviews)		66.67%	70%	Set in SFY 2016 APSR
<b>Courts:</b> Decrease the median days to termination of parental rights by 10% (Source: UNITY Report)	Decrease the median days to TPR by 5% by FFY 2018	625 Days-	Set in SFY 2015)	Set in SFY 2016

## Implementation Supports:

To promote successful implementation of all the goals and objectives there are additional supports needed to carry out the plan. For all goals and objectives staff support is needed to redesign UNITY windows and develop/correct reporting mechanisms over the next five years. Staff support is needed to increase a dedicated reviewer pool for case reviews, and or commitment of stakeholders. Also, skilled staff is needed that have the skills and abilities to analyze data.

The State does not have a data warehouse; however, CCDFS does have a data warehouse (COGNOS) available to them for management reporting. The use of Chapin Hall for permanency reporting is available statewide but the need for a state data warehouse that becomes the **main** source of information for report generation, analysis and presentation through ad hoc reports, portal and dashboards would benefit the state. While this support is needed there are challenges associated with financing to make this a viable option for the state. Due to financing issues there are no current plans to obtain a data warehouse at this time.

## Staff Training, Technical Assistance and Evaluation

### Staff Training

Training is critical to the development of a skilled child welfare workforce and to achieving outcomes of safety, permanency, and well-being for children entrusted to the care of the public child welfare system. It is also key to worker retention. As evidenced by the specific trainings identified in the Training Plan (**Attachment D**), the trainings offered support the identified goals to ensure that: 1) children will be safe in out of home care; 2) children will be safe in their own homes; 3) children and youth will have improved well-being; 4) the state will be able to identify the strengths and needs of the child protective service delivery system; and, 5) children and youth will achieve timely permanency through stable and supportive placements. Training offered will continue to be evaluated and documented on the Training Plan in terms of its identified goal and related objectives.

Through the collaboration with the Training Management Team (TMT) and use of the Nevada Partnership for Training Reports System (NPTRS), the State will strive to enhance reports to ensure that all new staff receive the required Nevada New Worker Core Training within the required timeframes, or to ensure that an appropriate remediation plan is in place with the child welfare agencies. Throughout the next five years, plans for the training and development of new workers, continuing workers and supervisors include the assurance that the curriculum materials are current and reflect best practice where possible; that statewide policy will be reviewed annually over the next five years and revised as needed or will ensure that policies are developed and implemented as necessary; that the State will develop and/or review existing quantitative reports to ensure that applicable quantitative data from the UNITY system is available for review and analysis over the next five years on a regular basis; and, that the State will continue to ensure that qualitative reports (if applicable) utilizing stakeholder feedback are developed and reviewed annually to ensure training is meeting the goals and objectives and if technical assistance and/or revisions are indicated.

Over the next five years, the State plans to continue the collaboration with the TMT and the use of the NPTRS and will maintain the ongoing contracts with both of the two in-state universities, University of Nevada at Reno (UNR) and the

University of Nevada at Las Vegas (UNLV). One of the contracted activities has been the collaborative development of a training plan with annual updates to address the needs of initial worker training in Nevada and the State. This will continue as new and revised protocols for curriculum development, staffing, training plans, annual training calendars, decision making, and evaluation are developed. Regularly scheduled meetings will continue to ensure continuing progress is made and future plans and needs are addressed.

Throughout the State, new workers will continue to be required to attend the CORE curriculum and, depending on the county, other specific trainings will be required. Nevada will maintain its focus on enhancing the new worker core curriculum and will continue to analyze curriculum to ensure courses keep up with best practices and meet current needs and requirements of workers. It is anticipated that the new revised CORE curriculum which has been piloted in the South, will be presented to the DMG for approval and will then be used statewide. Participant feedback will be collected and it is anticipated that tribal participation will increase through enhanced collaborative efforts over the next five years. The training curriculum for child welfare staff is a competency-based approach designed to reinforce the basic principles of good case practice and to develop specialized knowledge and skills.

Each child welfare agency will offer specialty classes, in-house trainings as well as specific meetings offering caseworker support, based on the unique needs of each demographic. Management in each child welfare agency will continue to send requests for training topics to staff and then locate those experts in the topic areas to provide training. Over the next five years, the State will continue to focus on ensuring training is consistent throughout and State and, when appropriate and feasible, the agencies will collaborate and seek to conduct joint trainings.

#### Plans to Measure Goals

The State continues to recognize the value and need for measurable results in training. The State will continue, over the next five years, to work on a variety of proven tools to measure success including organizational assessment, feedback agents and reports that track results. The goal of assessments will be to use observation, surveys, interviews and reports to assess if there is a significant difference in the productivity and ability of workers before and after the training was performed. The assessment, usually performed by the TMT but also by managers and supervisors will identify areas of accomplishment and necessity and will provide suggestions on how to continually develop the agency.

#### Barriers and Challenges to Goals

Nevada's state-supervised, county administered child welfare services system presents unique challenges and opportunities for developing and delivering training to various professional and paraprofessional child welfare staff and providers throughout the state. An ongoing challenge for Nevada continues to be a shortage of resources and the large rural areas of the state, making rural child welfare and stakeholder participation challenging, not only in trainings but also in subsequent assessment activities. Over the next five years, a strong data and technical support system will become more critical as assessment efforts are increased.

Well-trained and prepared social workers and case workers are one of the biggest assets and important resources necessary for the successful care, placement and well-being of the children and families within the child welfare system. In Nevada, a challenge continues to be the recruitment and retention of social workers, particularly for areas that are remote. Additionally, the service array necessary for ongoing case management is minimal and in many cases, non-existent in some of the rural areas of Nevada. This lack of resources, both in personnel and service providers presents a number of challenges. When instances of abuse and neglect are identified, it is difficult to find the necessary services within the child's community (such as substance abuse treatment, mental health care, parenting classes). Many rural areas also face additional issues such as poverty, substance abuse, unemployment, and lower levels of education. These challenges are particularly concerning because they are also strongly linked to child maltreatment.. The training and preparation for rural workers will be unique and in some cases, different than their urban counterparts. Although such things as cultural competence is important everywhere, the cultural competence in rural communities requires an understanding of general rural culture and the many different racial and ethnic cultures that reside in rural areas. DCFS continues to work hard to enhance and enrich the training and preparation that all workers are receiving, ensuring they receive the tools necessary to perform their job in a safe, professional, and successful manner.

Funding

Consistent with the DCFS federally approved cost allocation plan, training expenses are directly charged to the benefiting program. Title IV-E agencies can claim a Federal Financial Participation (FFP) of 75 percent enhanced rate for the training of social workers and supervisors who work or are going to work in public child welfare agencies and 50 percent for administrative costs for the support staff. Allowable Training activities under Title IV-E included trainings that include the administration of the foster care program: referral to services, preparation for and participation in juridical determinations; placement of the child; development of case plans; case reviews; and case management and supervision. Specific training projects are also funded by the State using other federal funding sources such as Title IV-B and CAPTA.

**Technical Assistance**

Nevada is currently involved in the following Open Technical Assistance Request. Specifically, TA 736-Safety Model Implementation is directly in support of the goals 1.) Children will be Safe in out of home Care and 2.) Children will be Safe in their own homes. Technical Assistance 1082 Education Stability is directly in support of goal 3.) Children and youth will have an improved well-being and TA on Policy and Procedure Peer to Peer is directly in support of goal 4) the State will be able to identify the needs and strengths of the child protective services system. Additionally, Nevada will be requesting TA from the National Resource Center for Youth Development on youth transition planning as an additional support for goal 3). Children will have and improved well-being.

**Table III: 7 Technical Assistance Received for State Fiscal Year 2014**

<p><b>TA736 Safety Model Implementation</b>  <b>Status: In progress</b></p>	
<p>Request/Objective: The Court Improvement Program (CIP), Rural Region DCFS (DCFS), and WCDSS Department of Social Services (WCDSS) request training and technical assistance (T/TA) from the NRCCPS and NRCLJI to educate judges, masters, attorneys, guardians ad litem (GALs), and Court Appointed Special Advocates (CASAs) regarding Nevada's safety model; provide assistance in building internal capacity of safety experts within the DCFS Rural Region; develop a process of Quality Assurance for fidelity of DCFS Intake assessments, NIA assessments, safety plans, documentation and supervisor consultation; and provide assistance with practice implementation of Confirming Safe Environments.</p>	<p>Date Requested: 2/14/2012  Direct Recipients of T/TA: CIP, Rural Region DCFS, and WCDSS</p>
<p><b>TA 1082 Education Stability</b>  <b>Status: In progress</b></p>	
<p>Request/Objective: The Nevada Court Improvement Program (CIP) and the Nevada Division of Child and Family Services (DCFS) are requesting TA from the National Resource Center on Legal and Judicial Issues (NRCLJI) to facilitate implementation of the Fostering Connections Act as well as the Child and Family Services Improvement and Innovation Act. The State's focus is on improving educational outcomes by obtaining educational stability and by improving collaborative interagency system supports for educational achievement of children in its foster care system.</p>	<p>Date Requested: 4/25/13  Direct Recipients of T/TA: The Statewide Collaborative on Education, Child Welfare, and the Courts, chaired by Nevada Supreme Court Justice Nancy Saitta, has been created with four subcommittees and an overarching Policy and Planning Group composed of the original team that attended the National Summit. Subcommittee membership comprises State and local government leaders (Child Welfare, Education, Courts) and community partners/stakeholders in</p>

	education and foster care. The Collaborative and its subcommittees are the target audience for training and technical assistance (T/TA) request.
TA 1289 Targeted Recruitment Utilizing Market Segmentation Status: In progress (work plan approved)	
Request/Objective: Clark County requests T/TA to help build organizational capacity to use Market Segmentation to inform strategic marketing and develop a targeted recruitment and retention work plan for foster and adoptive families. The county would also like consultation on their organizational redesign and program for recruitment and retention (e.g., staffing ratios, organizational structure, staff roles and responsibilities, policy and procedures, cultural assessments).	Date Requested: 1/22/14 Direct Recipients of T/TA: The primary recipient for the T/TA services will be Clark County Department of Family Services (DFS) throughout all stages of the work plan development and implementation. Specific programs and services involved in the development process will include: 1) Resource Development and Retention; 2) Community Partnership and Engagement; and 3) Special Projects Unit with its Diligent Recruitment Project. DFS employees involved in the T/TA consultation process may include administration, supervisors, and staff. T/TA may expand to key community partners identified during work plan development.
Policy and Procedure Peer to Peer Status: Ongoing	
Request/Objective: Research or ideas on how to best coordinate, develop, and implement policies and procedures given Nevada's structure of state oversight/county administered and state administered child welfare agencies.	Date Requested: 2/1/2013 Direct Recipients of the T/TA: DCFS Family Programs Office, DCFS Rural Region Child Welfare Agency, Clark County Department of Family Services, and Washoe County Department of Social Services

## Evaluation

Nevada is not currently involved as a state in any national evaluation or research activities. However, WCDSS continues in the federal Permanency Innovations Initiative (PII) which is a 5-year, \$100 million, multi-site demonstration project designed to improve permanency outcomes among children in foster care who have the most serious barriers to permanency. PII includes six grantees, each with a unique intervention to help a specific subgroup of children leave foster care in fewer than three years. Additionally, the implementation of Nevada's Safety Model (SAFE) is being evaluated through fidelity reviews conducted by Action 4 Child Protection and the National Resource Center for Child Protective Services in both DCFS Rural Region and CCDFS.

Nevada is involved statewide in implementation of a specialized foster care pilot that is being evaluated by the DCFS Program Evaluation Unit for the pilots in WCDSS and DCFS Rural Region. In WCDSS and DCFS Rural Region the pilot is based on the evidence-based foster parent training "Together Facing the Challenge", along with training in other best practices, such as trauma informed care and medication management. The pilot in CCDFS evaluation is being completed by the service provider, and also included elements of trauma informed care and wraparound services.

Currently Nevada is in the process of drafting, and is planning on submitting an application for the Administration of Children and Families Title IV-E Waiver demonstration project. A portion of the project would include a rigorous 3-part evaluation process. If approved, Nevada will be completing a process based, outcomes based, and cost benefit analysis of the Nevada SAFE model.

## Section IV. Safety, Permanency and Well-Being Performance Indicators

### ASSESSMENT OF PERFORMANCE

Each of the performance indicators listed in this section mirrors the 23 items from the Federal Child and Family Services Review Instrument. The overall structure for each performance outcome/indicator includes the legal requirements for each item and to the extent applicable the most recent Federal data profile, previous CFSR data/information, most recent case review data or relevant state data and recent stakeholder survey/focus group data/information.

#### Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect

During the 2009 CFSR Nevada was not in substantial conformity with Safety Outcome 1. The outcome was substantially achieved in 72.4 percent of the cases reviewed. This percentage was less than the 95 percent required for a determination of substantial conformity. In addition to case review findings Nevada did not meet the national standards for the national data indicators pertaining to absence of maltreatment recurrence or absence of maltreatment of children in foster care by foster parents, or facility staff.

The most recent CFSR Data Profile provided by ACF dated April 1, 2014 related to this Safety Outcome/indicator is provided in Table IV.1.

**Table IV.1 Absence of CA/N in foster Care**

Federal Performance	National Standard		FY 2010	FY 2011	FY 2012	FY 2013
Safety Indicator 2: Absence of CA/N in Foster Care	99.68%	↑	99.40%	99.59%	99.35%	99.53%

Source: Nevada federal data profile

Green Shading = Meets Standard; Red Shading = Below Standard; Yellow Shading = Above median/below standard

#### CPS Response Time:

CPS response time in hours is defined as the time between the receipt of a referral alleging maltreatment to the state or local agency face-to-face contact with the alleged victim (when appropriate) or another person who can provide information on the allegation. The most recent Nevada data profile information is provided in Table IV.2. Nevada's CPS Response Time in hours has been decreasing over the last four years indicating improvement in the overall time CPS is responding to a report alleging maltreatment of a child. In comparison to other State response times Nevada ranks #3 in the nation as of the last published 2012 Children's Bureau Child Maltreatment Report.

**Table IV.2 CPS Response Time**

	FFY 2010	FFY 2011	FFY 2012	FFY 2013
Median Time to Investigation in Hours (Child file)	>24 but <48	>24 but <48	>24 but <48	<24
Mean Time to Investigation in Hours (Agency file)	18.4	15.7	17.1	14.1
Average time to Investigation in Hours (Agency file)	13.4	13.2	15.1	12.5

Source: Nevada federal data profile

## ***Item 1: Timeliness of initializing investigations of reports of child maltreatment***

### **Requirements:**

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

When a referral is received by an intake worker alleging possible child maltreatment, a supervisor reviews the information, makes a determination of whether the referral will become a report, and what type of response the report merits. If the referral becomes a report, it is assigned to a CPS caseworker for investigation. Statewide Intake and Response Time Policy 0506 outlines the expected response time for the type of child maltreatment allegation. The timeline begins with the assignment of the referral to an intake worker. The following are child welfare agency response times that are outlined in Intake Policy/table 0506.5.1:

- **Priority 1:** within 3 hours when the identified danger is urgent or of emergency status; there is present danger; and safety factors are identified. This response type requires a face-to-face contact by CPS.
- **Priority 1 Rural:** within 6 hours when the identified danger is urgent or of emergency status; there is present danger; and safety factors are identified. This response type requires a face-to-face contact by CPS. (Rural time includes a distance factor).
- **Priority 2:** within 24 hours with any maltreatment of impending danger; safety factors identified including child fatality. This response type requires a face-to-face contact by CPS or may involve collateral contact by telephone or case review.
- **Priority 3:** within 72 hours when maltreatment is indicated, but no safety factors are identified. This response type requires a face-to-face contact by CPS or may involve collateral contact by telephone or case review. In situations where the initial contact is via telephone call, the agency must make a face to face contact with the alleged child victim within 24 hours following the telephone contact.

Referrals that do not rise to the level of an investigation may be referred to the Differential Response Program. The Differential Response Program has required response timelines in accordance with a Priority Code 3, or 72 hours.

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

### **CFSR 2009:**

During the CFSR in 2009, this item was applicable for 29 (47 percent) of 62 cases. Cases were not applicable when there were no child maltreatment reports during the period under reviews. Item 1 was rated as strength in 25 cases when the investigation was initiated and face-to face contact was made within the timeframes required by State policy. It was rated as an Area Needing Improvement in four cases when the investigation was not initiated within the required timeframes. Of these four cases, one involved a report assigned priority 1, one involved a report assigned priority 2 and two involved reports assigned priority 3. Item 1 was assigned an overall rating of area needing improvement. In 86 percent of the applicable cases, reviewers determined that the agency had initiated an investigation of a maltreatment report in accordance with required timeframes. The required percentage is 90.

The key issues addressed by stakeholder commenting on this item during the onsite CFSR were the availability of hotlines for the reporting of child abuse and neglect, the timeliness of the agencies' responses to accepted reports of abuse and neglect, and coordination between child welfare agencies and law enforcement agencies with regard to

responding to accepted reports of abuse and neglect.

With regard to the availability of hotlines for the reporting of child abuse and neglect, stakeholders expressed the opinion that the hotline is available, or calls are forwarded to on-call responders, 24 hours per day, 7 days per week, in all areas of the State. Some Carson City stakeholders indicated that the hotline sometimes did not accept reports for investigation appropriately, rejecting some reports that should have been referred for investigation.

With regard to the effectiveness with which agencies respond in a timely manner to accepted reports of abuse and neglect, stakeholder expressed the opinion that the agency generally responds in a timely manner.

With regard to the coordination between child welfare agencies and law enforcement agencies, some Washoe County Stakeholders indicated that there is a Memorandum of Understand (MOU) between the child welfare agency and the law enforcement agency dictating protocols for reporting, investigation, substantiation, and removal.

As a result of the 2009 CFSP Nevada and ACF negotiated a Performance Improvement Plan (PIP) that identified nine case review items that would be reviewed over the course of the PIP, and one national indicator. Item 1 was identified as needing improvement in 2009. The target set for item 1 was 80.4%, and over the course of the PIP Nevada met the target for item 1 at 81%.

### Statewide Data:

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) since implementation of the PIP on item 1. In the following Table 1.1 is the most current case review data as it relates to item 1.

<b>Table 1.1 Statewide Quality Improvement Review Data</b>	QICR 2011	QICR 2012	QICR 2013	QICR 2014
Item 1: Timeliness of initiating investigations of reports of child maltreatment.	76.19 (n=32)	81.00 (n=34)	62.50 (n=20)	65.6 (n=21)

Since meeting the PIP target in 2013 there has been a significant decline in this rating during case reviews. It was identified that during 2013 reviews there were a number of cases in the sample that had large and complex families with many children who often were living in different locations. This complexity added an additional logistical burden to the investigator charged with initiating and making face to face contact within NAC expectations. The state would like to take this opportunity to review policy and practice as it relates to item 1 in an attempt to identify the problems around the decrease in the rating.

Data from surveys conducted for the CFSP in Table 1.2 provide information on Timeliness of Investigations. Survey Respondents were provided information on priority response times mandated by policy, and were asked how effective is the child welfare agency in initiating investigations based on priority response times. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 127 responses to the survey.

The effectiveness of the child welfare agency in conducting timely Investigations (on a scale of 1-5 with 5 being Very effective) is presented in Table 1.2. The mean rating of 3.90 indicates that the average sentiment among respondents is that Child Welfare Agencies are usually effective in conducting timely investigations.

Overall, comments indicated that statewide staff have a solid understanding of the response times and policy requirements, and usually meet priority response times. Some of the potential barriers to timely investigations were identified by stakeholders as follows: inadequate staffing levels, high caseloads, distance for the DCFS Rural Region, an ability to locate the family, and inadequate reporter information. Responses during focus groups echoed the survey results in that overall stakeholder sentiment is that child welfare agencies generally respond as required to investigations.

**Table 1.2 Survey Question**

**How Effective overall is the Child Welfare Agency’s timeliness in initiating investigations of child maltreatment?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
2.36% (3)	5.51% (7)	22.83% (29)	38.38% (49)	30.71% (39)	127	3.90	0.74

N=Number of Survey Respondents  
SD=Standard Deviation

**Item 2: Repeat maltreatment**

Requirements:

Nevada statute requires the child welfare agency to determine whether there is reasonable cause to believe any child has been abused or neglected, to determine the immediate and long term risk to the child if he remains in the same environment and sets forth options if a determination is made that the child needs protection but is not in imminent danger from abuse or neglect.

NAC 432B.150 requires that evaluations or investigations are conducted in such a manner as to determine how the child is being affected by the situation and whether the child is: currently safe, at risk of abuse or neglect, or threatened with harm and whether the child and his parents should receive child welfare services or whether the family should be referred to an agency which provides family assessment services. Caseworkers are to consider the circumstances of the entire family and assess the protective needs of all the children in the family during the investigation.

The most recent CFSR Data Profile provided by ACF dated April 1, 2014 provides the most recent Nevada national federal performance data related to Safety Outcome 1 and item 2, and is provided in the following Table 2.1.

**Table 2.1 Safety Indicator 1 Absence of Maltreatment Recurrence**

Federal Performance	National Standard		FY 2010	FY 2011	FY 2012	FY 2013
Safety Indicator 1: Absence of Maltreatment Recurrence	94.6%	↑	94.5%	93.6%	95.1%	96.2%

Source: Nevada Data Profile

Green shading =meets Standard; Red shading =Below Standard; yellow Shading =Above median/below standard

The data element “Absence of Recurrence of maltreatment” is defined as follows: Of all children who were victims of substantiated maltreatment allegation during the first 6 months of the reporting period, what percent were not victims of another substantiated or indicated maltreatment allegation within a 6-months period. The reporting period is the federal year the data was submitted as indicated above.

This data indicates that Nevada is above the national standard, and is ensuring that children who were victims of substantiated maltreatment during the federal reporting year were not re-abused within six months of that initial substantiated report.

CFSR 2009:

During the CFSR in 2009, this item was applicable for 21 (34 percent) of 62 cases. Cases were not applicable for this item if there was no substantiated maltreatment report during the period under review. Item 2 was rated as strength in 17 cases when there was only one substantiated maltreatment report on the family within a 6-month period. Item 2 was rated as an area needing improvement in four cases when there were at least two substantiated maltreatment reports

on the family within a 6-month period. Item 2 was assigned an overall rating of an area needing improvement. In 81 percent of the applicable cases, there was no recurrence of substantiated maltreatment within a 6-month period. The required percentage is 90.

Some Clark County Stakeholders commenting on this item during the onsite 2009 CFSP indicated that maltreatment reports regarding open child welfare cases are referred to Child Protective Services (CPS) for investigation, to the assigned caseworker, and to licensing caseworkers in foster care cases. Some Clark County Stakeholders also indicated that there are cases in which multiple referrals are made but no investigation is conducted or no services are offered to the family to prevent maltreatment.

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 2.2 provide information on Recurrence of Maltreatment. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 134 responses to the survey.

The effectiveness of the child welfare agency in preventing the recurrence of maltreatment (on a scale of 1-5 with 5 being Very effective) is presented in Table 2.2. The mean rating of 3.20 indicates that the average sentiment among respondents is that Child Welfare Agencies are sometimes effective in preventing recurrence of maltreatment.

Overall, comments indicated a variety of reasons why the agency is only sometimes effective in preventing recurrence of maltreatment. Stakeholders indicated that an absence of service array, diminished funding, high caseloads in some areas, lack of staff and staff supports as well as training of caseworkers to appropriately assess the functioning and needs of parents and children contribute to recurrence of maltreatment.

**Table 2.2 Survey Question**

**How Effective overall is the Child Welfare Agency in preventing the recurrence of maltreatment?**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
2.24%	16.42%	46.27%	29.10%	5.97%	134	3.20	0.60
(3)	(22)	62	39	8			

N=Number of Survey Respondents  
SD=Standard Deviation

## **Safety Outcome 2: Children are safely maintained in their homes whenever possible**

During the 2009 CFSR Nevada was not in substantial conformity with Safety outcome 2. The outcome was determined to be substantially achieved in 51.6 percent of the cases reviewed. This percentage was less than the 95 percent required for a determination of substantial conformity.

### ***Item 3: Services to families to protect children in home and prevent removal or re-entry into foster care***

#### **Requirements:**

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

Nevada is operating in accordance with NAC 432B.160 and policy 0508 and 0509 Nevada Initial Assessment (NIA) which establishes 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 the maltreatment, as well as determine the strengths and/or protective capacities that can assist in mitigating risk and safety threats. Pursuant to NAC 432B.150, the assessment process results in a conclusion regarding the existence of present and/or impending danger. Assessments must be made at the appropriate case milestones in accordance with NAC 432B.180. Those decisions include the provision of child welfare services for the child, from intake through case closure. The assessment must be future-oriented rather than based solely on the child's injuries or current condition

Pursuant to NAC 432B.185 the safety assessment is the systematic collection of information about threatening family conditions and current, significant, and clearly observable threats to the safety of a child. The purpose of assessing safety is to determine whether a child is likely to be in present or imminent danger of serious physical or other type of harm that may require a protective intervention. The purpose of developing a safety plan is to ensure the immediate protection of a child while safety threats are being addressed.

Policy 0503 Differential Response procedures outlined in the policy are activated when reports alleging child neglect and a determination has been made that the report does not rise above a priority three, however based on the information provided at Intake, it appears that the family is likely to benefit from early intervention through an assessment of the family for appropriate services.

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

#### **CFSR 2009:**

During the CFSR in 2009, this item was applicable in 41 (66 percent) of 62 cases. Cases were excluded if the children entered foster care prior to the period under review and there were no other children in the home, or if there was no substantiated maltreatment report or identified risk of harm to the children in the home during the period under review. There were 32 cases rated as strengths for this item and 9 cases rated as an area needing improvement. Item 3 was rated an overall rating of area needing improvement. In 78 percent of the applicable cases, reviewers determined that the agency had made concerted efforts to maintain children safety in their own homes. The required percentage is 90.

Stakeholders commenting on this item during the onsite CFSR addressed the effectiveness of the DR program and the belief that the State had improved the ability to prevent foster care placements through the use and coordination of

services to support families. There was some discussion with regards to the issue of children returning home after brief stays in foster indicating that children were either removed from home without the provision of appropriate services or returned home without appropriate support services to prevent re-entry.

**Statewide Data:**

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) since implementation of the PIP on this item. In the following Table 3.1 is the most current case review data as it relates to item 3.

<b>Table 3.1: Statewide Quality Improvement Review Data</b>	QICR 2011	QICR 2012	QICR 2013	QICR 2014
Item 3: Services to Families to protect children in home and prevent removal or re-entry into foster care.	70.45 (n=31)	86.46 (n=38)	91.89 (n=34)	91.4 (n=32)

Since meeting the PIP target in 2012 Nevada continues to show improvement on this item.

Data from surveys conducted for the CFSP in Table 3.2 provide information on Services to Families to protect children. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 132 responses to the survey.

The effectiveness of the child welfare agency in providing services, when appropriate to protect children in their own homes and prevent removal (on a scale of 1-5 with 5 being Very effective) is presented in Table 3.2. The mean rating of 3.25 indicates that the average sentiment among respondents is that child welfare agencies are sometimes effective in providing services when appropriate to protect children in their own homes and prevent removal.

Overall, comments indicated the implementation of the new Nevada Safety Model is having some effect on decision making by caseworkers as it relates to removal of children from their homes. However, many Stakeholders expressed barriers to service provision i.e. availability of services in rural areas, no continuity of services due to staff turnover, a lack of funding for in-home services, and in some areas a lack of community resources.

**Table 3.2 Survey Question**

**How Effective overall is the Child Welfare Agency in providing services, when appropriate, to protect children in their own homes and prevent removal?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
7.58% (10)	11.36% (15)	37.88% (50)	34.85% (46)	8.33% (11)	132	3.25	0.58

N=Number of Survey Respondents  
SD=Standard Deviation

***Item 4: Risk assessment and safety management***

**Requirements:**

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

If an agency assigns the report for investigation, a safety assessment is required to be completed upon the initial face-to-face contact with the alleged child victim pursuant to NAC 432B.185. In addition, NAC 432B.185 requires the development of a safety plan to ensure the immediate protection of a child while safety threats are being addressed. A Safety Assessment is required to be completed at case milestones as outlined in NAC 432B.185. Policies 0508 and 0509 address this information.

### CFSR 2009:

During the 2009 CSFR this item was applicable for all 62 cases. In assessing item 4, reviewers were to determine whether the agency had made, or was making, diligent efforts to address the risk of harm to the children involved in each case. Item 4 rated as strength in 34 cases when reviewers determined that the risk of harm to children was appropriately addressed by the agency through the following: conducting initial and ongoing assessment of risk and safety either in the children's home or in the children's foster home and addressing all safety-related concerns identified through the assessment. Item 4 was assigned an overall rating of area needing improvement. In 55 percent of the cases, reviewers determined that the agency had made diligent efforts to assess and address the risk of harm to the children. The required percentage is 90.

Most stakeholders commenting on this item during the onsite CSFR expressed the opinion that the NIA is completed to assess the safety and risk of children in the home and it identify services needed to prevent placement into foster care. Some stakeholders indicated that risk and safety are assessed initially and periodically at significant milestones during the life of the case. However, some Clark County and Washoe County stakeholders noted that the NIA is not used consistently. Some Carson City and Clark County stakeholders indicated that because of the very high level of risk that is required for children to be removed from their homes; the agency sometimes will leave children in their homes even when there are serious safety concerns.

### Statewide Data:

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) since implementation of the PIP on this item. In the following Table 4.1 is the most current case review data as it relates to item 3.

<b>Table 4.1: Statewide Quality Improvement Review Data</b>	QICR 2011	QICR 2012	QICR 2013	QICR 2014
Item 4: Risk Assessment and Safety Management	48.39 ( n=30)	67.74 (n=42)	74.19 (n=46)	79.0 (n=49)

Since meeting the PIP target in 2012 Nevada continues to show improvement on this item.

Data from surveys conducted for the CFSP in Table 4.2 provide information on Risk Assessment and Safety Management. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 113 responses to the survey.

The effectiveness of the child welfare agency in identifying and assessing safety and impending danger to children and youth in their homes or in foster care (on a scale of 1-5 with 5 being Very effective) is presented in Table 4.2. The mean rating of 3.33 indicates that the average sentiment among respondents is that Child Welfare Agencies are sometimes effective in identifying and assessing safety and impending danger to children and youth in their homes or in foster care.

Overall, comments indicated that there is a great deal of focus on training in this area with implementation of the new Nevada SAFE Model. Stakeholders reported that fidelity reviews are on-going and are demonstrating positive results. Also, Stakeholders indicate that as caseworkers become more familiar with the SAFE model it will improve decision making surrounding safety and impending dangers to children and youth. However, some stakeholders indicated concern that in some areas of the state the lack of experienced workers and open positions lessens the effectiveness of the model.

**Table 4.2 Survey Question**

**How Effective overall is the Child Welfare Agency in identifying and assessing safety and impending dangers to children and youth including those in foster care?**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
4.42%	15.04%	37.17%	30.09%	13.27%	113	3.33	0.50
(5)	(17)	(42)	(34)	(13)			

N=Number of Survey Respondents

SD=Standard Deviation

### **Strengths/Concerns (Safety Outcomes 1 & 2)**

Nevada has strength in CPS response time in hours as reflected by the decrease in hours as represented in the most recent Federal data profile. Generally, current Stakeholder sentiment is that CPS staff have a solid understanding of the response times and policy requirements as it relates to timeliness of investigations, and are usually effective in responding to those investigations per policy timeframes. Nevada has been working for many years with the NRC for Child Protection and Action 4 Protection who have been conducting fidelity reviews.

Absence of Child abuse and Neglect in foster care continues to be a concern as it relates to overall conformity with Safety Outcome 1, and on ensuring children and youth are safe when placed in foster care. Also, there is concern over the most recent decline in the QICR case review ratings data as it relates to timeliness in initiating investigations as reflected in the 2013/2014 case review data. Nevada would like to take this opportunity to review policy/regulation and practice on this item.

Nevada has strength in the ability to ensure that children are not re-abused within six months of a substantiated report of maltreatment as reflected in the achievement of meeting and exceeding the national standard for 'Absence of Recurrence of maltreatment'. Generally, current Stakeholder sentiment is that there are a variety of reasons that cause recurrence of maltreatment in Nevada communities. As Nevada continues to implement the Nevada Safety Model with fidelity there will be better assessment of the needs of families and children by caseworkers. This will contribute to better identification of service needs of families as well as service array needs of communities.

Nevada is showing strength in item 3 during case reviews, and some Stakeholders express that the implementation of the Nevada Safety Model is having some effect on decision making by caseworkers as it relates to removal of children. However, Stakeholders do express some concerns that there are continued barriers to ensuring children are provided appropriate available services indicating a lack of services in some rural areas, no continuity of services due to staff turnover, and in general statewide a lack of funding for in-home services.

Nevada is showing strength in item 4 during case reviews and Stakeholders express that the implementation of the Nevada Safe Model is demonstrating positive results. Fidelity reviews are being conducted and are showing strength in caseworker performance in competence and adherence to the model. There are concerns that in some areas of the state that the lack of experienced workers and staffing issues diminish the effectiveness to the model.

### **Permanency Outcome 1: Children have permanency and stability in their living situations**

**During the 2009 CFSR Nevada was not in substantial conformity with Permanency Outcome 1. The outcome was substantially achieved in 30.0 percent of the cases reviewed. This percentage was less than the 95 percent required for an overall rating of substantial conformity. In addition to case review findings, although Nevada met the national standard for the data indicator pertaining to timeliness and permanency of reunification, the**

State did not meet the national standards for the data indicators pertaining to timeliness of adoption, permanency for children in foster care for extended time periods, or placement stability.

**Item 5: Foster care re-entries**

Requirements:

Nevada statutes and regulations state that one of the key objectives of DCFS is to plan and coordinate the provision of services for the support of families, in order to maintain the integrity of families and ensure that children are not unnecessarily removed from their homes (NRS 432.011(2)(b)). This includes providing counseling, training, involvement of parents in case planning, and other services to families, even if a report of abuse or neglect is received but it is determined that an investigation is not warranted at the time (NRS 432B.393).

Nevada statute also requires an agency which provides child welfare services to make reasonable efforts to preserve and reunify the family of a child before the placement of the child in foster care, to prevent or eliminate the need for removal from the home. Regulations require caseworkers to identify and utilize the family’s strengths and resources (NAC 432B.200), and to provide services designed to strengthen parental capacity to care for the children (NAC 432B.210).

DCFS Policy regarding Case Planning (0204) reiterates these same requirements in greater detail, providing guidance to staff in how to accomplish the goals of the statutory and regulatory framework. Child welfare agencies in Nevada have adopted a practice of maintaining legal custody of the child for up to six months after the child has been physically reunified (trial home visits). This practice is designed to ensure that parents are continuing to utilize the available services outlined above and to provide post-reunification services, including intensive family preservation services, when problems arise.

Performance on Composite 1: Measure relevant to the Permanency of Reunification. There is no national standard for the measure of foster care re-entry. Currently, the national standard with regard to permanency has been established only for the scaled composite scores. The most recent CFSR Data Profile provided by ACF dated April 1, 2014 provides current data for Component B: Permanency of Reunification Measure C1-4: “Re-entries to foster care in less than 12 months.” The component is one measure in the overall Permanency Composite 1: Timeliness and Permanency of Reunification. The national median for this measure is 15.0% and the 25<sup>th</sup> percentile is 9.9%. A lower percentage is preferable in this measure. As shown in Table 5.1 Nevada has exceeded the 25<sup>th</sup> percentile of 9.9% for many years.

**Table 5.1 Permanency Composite 1**

	National Standard		FY2010	FY2011	FY2012	FY2013
<b>Permanency Composite 1: Timeliness and Permanency of Reunification</b>	<b>122.6</b>	↑	134.4	134.3	126.9	131.4
Component A: Timeliness of Reunification						
C1.1 Reunification in less than 12 months for children exiting foster care	75.2%	↑	69.3%	72.2%	66.4%	71.3%
C1.2 Median stay in foster care to reunification (months)	5.4	↓	6.4	5.9	7.2	6.7
C1.3 Entry cohort of children who reunify in < 12 months	48.4%	↑	43.5%	34.1%	38.6%	36.3%
Component B: Permanency of Reunification						
C1.4 Children who exit and re-enter foster care in less than 12 months	9.9%	↓	6.8%	7.3%	8.3%	7.8%

Source: Nevada Data Profile

Green shading =meets Standard; Red shading =Below Standard; yellow Shading =Above median/below standard

CFSR 2009:

During the 2009 CFSR this item was applicable for 13 (32.5 percent) of the 40 foster care cases. Cases were not applicable if the child did not enter foster care during the period under review. Item 5 was rated strength in 12 cases when the child’s entry into foster care during the period under review did not take place within 12 months of discharge

from a prior episode or there was evidence that concerted efforts were made to prevent reentry. Item 5 was assigned an overall rating of strength. The item was rated strength in 92 percent of the applicable cases. The required percentage is 90.

Some State-level and Clark County stakeholder expressed concern that although many children are reunified quickly, the lack of transition services and post-reunification services results in some of the child experiencing reentry into foster care.

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 5.2 provides information on Foster Care re-entries. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 113 responses to the survey.

The effectiveness of the child welfare agency preventing re-entries into foster care (on a scale of 1-5 with 5 being Very effective) is presented in Table 5.2. The mean rating of 3.30 indicates that the average sentiment among respondents is that Child Welfare Agencies are sometimes effective in preventing re-entries of children into foster care.

Overall, comments indicated that most stakeholders were not aware of a lot of children returning to foster care after being reunified with their families. There were some concerns expressed that in those cases stakeholders were aware of where children re-entered foster care the transition was premature, there was a lack of behavioral change by the parents before full reunification, and/or there was a lack of post reunification services.

**Table 5.2 Survey Question**

**How Effective overall is the Child Welfare Agency in preventing re-entries into foster care?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
4.42%	10.62%	41.59%	31.17%	6.19%	113	3.30	0.66
(5)	(12)	(47)	(42)	(7)			

N=Number of Survey Respondents

SD=Standard Deviation

***Item 6: Stability of foster care placement***

**Requirements:**

Nevada Statute and Administrative Code supports the placement stability of children in foster care by requiring child welfare agencies to assess the individual needs of the child, and to place that child in the least restrictive environment that is consistent with the identified needs. Relatives are the first placement option considered for all children placed in out-of-home care. Child welfare agencies are also required to place siblings together when possible. Policy requires that the agency provides the foster care provider with appropriate information about the child’s family, medical, and behavioral history, as well as discussing the child’s plan for permanency, and any needs prior to placement. The purpose of sharing such information is to identify and provide for the most appropriate matched foster home (NRS 424.038(1), NAC 424.465). NAC further requires that information about the child’s situation and needs are to be continually shared by the child welfare agency and the foster care providers in a timely manner; thereby ensuring that the child’s needs are continually addressed with appropriate services. This includes a requirement of the agency to provide a program of respite for the foster providers (NAC 424.810, NAC 424.805). NAC supports placement stability by requiring that a foster care provider provide the child welfare agency with 10 working days’ notice of any request for the removal of the child from that home unless: they have a contrary agreement or if there are immediate and unanticipated safety issues, thus giving the agency time to respond to issues that may have caused the instability (NAC 424.478).

Placement stability is further supported by NRS, NAC and statewide policy by encouraging child welfare agencies to

attain permanency in a timely fashion. State laws and regulations require that the agencies adopt a plan for the permanent placement of the child. This plan is to be monitored by the court at the time the youth is placed in foster care and annually thereafter. The plan for permanent placement or case plan is to include a statement addressing goals and objectives; a description of the home or institution the child is placed; and a description of the safety and appropriateness of the placement, so to ensure proper care and accomplishment of case plan goals; and that a description of the manner in which the agency ensures services are provided to the child and foster parents, which address the needs of the child. The agencies are further required to document all progress towards permanency; and in the event that a termination of parental rights requires the agency to identify and document the obstacles to permanent placement of the child and specific steps to find a stable and permanent home (NRS 432B.553, NAC 432B.400, NAC 432B.2625, Policy 0204).

Other statewide policies require caseworkers to visit children in foster care once every month and directs a portion of this monthly visit by the caseworkers to assess the child’s adjustment to the placement and the stability of the placement; the case workers are to meet with the foster care provider and discuss the service needs of the child or provider, that may support the placement (Policy 0205).

Performance on the individual measure included in Composite 4: Placement stability. There are no national standards for performance on placement stability individually. National standards have been established only for the scaled composite score. Nevada’s performance on Composite 4 is shown in the following Table 6.1. Nevada has not met the national standard for placement stability in several years.

**Table 6.1 Permanency Composite 4**

	National Standard		FY2010	FY2011	FY2012	FY2013
Permanency Composite 4: Placement Stability (no components)	101.5	↑	93.3%	91.4%	90.5%	91.1%
C4.1 Two or fewer placements settings for children in foster care less than 12 months	86.0%	↑	82.8%	80.0%	81.5%	81.3%
C4.2	65.4%	↑	62.0%	61.7%	58.0%	61.0%
C4.3	41.8%	↑	31.45	32.0%	30.6%	29.5%

Source Nevada Data Profile

Green shading =meets Standard; Red shading =Below Standard; yellow Shading =Above median/below standard

CFSR 2009:

All 40 foster care cases were applicable for an assessment of item 6. In assessing this item, reviewers were to determining whether the child experienced multiple placement settings during the period under review and, if so whether the changes in placement settings were necessary to achieve the child’s permanency goal or meet the child’s service needs. Reviewers also assessed the stability of the child’s most recent placement setting. Item 6 was assigned an overall rating of area needing improvement. In 65 percent of the cases, reviewer’s determined that children experienced placement stability. The required percentage is 90.

Stakeholders commenting on this item expressed various opinions:

- The CCDFS placement review team meetings help stabilize placements for children in foster care,
- The Child and Family Team (CFT) process helps stabilize placements for children in foster care,
- Children who need therapeutic foster care placement do not always have stable placements; sometimes they are placed in nontherapeutic foster homes due to a lack of therapeutic foster homes,
- There is a lack of transition planning for children when their placements change contribute to instability because there is insufficient preparation for the new placement; and
- Children sometimes have needs that the foster family is not equipped to address.

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 6.2 provide information on stability of foster care placements. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 168 responses to the survey.

The effectiveness of the child welfare agency in providing placement stability for children and youth in foster (on a scale of 1-5 with 5 being very effective) is presented in Table 6.2. The mean rating of 3.29 indicates that the average sentiment among respondents is that child welfare agencies are sometimes effective in providing stability for foster children in foster care.

Overall, comments indicated that the Quality Parenting Initiative (QPI) and the specialized foster care pilot is a good beginning to stabilization of foster care placements. However, many Stakeholders indicated concerns that there is a lack of adequate foster care placements and not enough recruitment of quality homes in order to ensure appropriate matching. Also, there were some concern noted that some foster parents are not prepared for placements. Responses during focus groups echoed the survey results in that overall stakeholder sentiment is there is a need for additional foster homes, and youth were particularly adamant of the need for quality homes and adequate support and training to foster parents.

**Table 6.2 Survey Question**

**How Effective overall is the Child Welfare Agency providing stable placements for children and youth in foster care?**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
8.93%	9.52%	38.10%	30.92%	12.50%	168	3.29	0.53
(15)	(16)	(64)	(52)	(21)			

N=Number of Survey Respondents  
SD=Standard Deviation

***Item 7: Permanency goal for child***

**Requirements:**

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

The statewide 0204 Case Planning policy, based upon the existing statutory authority and regulations cited has been revised several times over the past several years to ensure steps are provided to guide caseworkers in determining the most appropriate permanency goals for children in foster care. Furthermore, the policy provides an additional Concurrent Planning Guide to help caseworkers identify indicators suggesting the likelihood of early reunification or suggesting the need for concurrent planning.

The 0508/0509 Nevada Initial Assessment (NIA) policies, the policies guide the collection of information used to determine the appropriate case plan goal(s) and the services needed to support achievement. The ASFA policy specifically directs development of an appropriate and comprehensive case plan to address the safe return of the child to the family when a child cannot remain safely in their home during crisis period. Diligent Search Process and Relative Placement Decisions direct the identifying, locating and contacting of relatives regarding their interest in providing a temporary or permanent placement for or adopting a child prior to or when the child is placed in substitute care.

Performance on the individual measures are Included in Composite 3: Permanency for Children in foster care for extended time periods. There are no national standards for performance on these measures individually; National standards were established only for the scaled composite score. The data in Table 7.1 is presented to provide additional information about permanency for children in foster care for extended time periods. Nevada has achieved the

national standard for many years now on achieving permanency for children in foster care for long periods of time.

**Table 7.1 Permanency Composite 3**

	National Standard		FY2010	FY2011	FY2012	FY2013
<b>Permanency Composite 3: Achieving Permanency for Children in Foster care For Long Periods of time</b>	<b>121.7</b>		<b>141.6</b>	<b>144.9</b>	<b>139.7</b>	<b>141.2</b>
Component A: Achieving permanency for Children in Care for Extended Periods of Time						
C3.1 Children *(age 17 during the FY) in foster care 24+ months discharged to permanent home before the end of FY and age 18	<b>29.1%</b>	↑	<b>39.9%</b>	<b>47.1%</b>	<b>45.4%</b>	<b>43.1%</b>
C3.2 Children (age 17 during the FY) with TPR discharged from foster care to a permanent home prior to age 18	<b>98.0%</b>	↑	<b>95.8%</b>	<b>97.2%</b>	<b>95.8%</b>	<b>95.4%</b>
Component B: Children Emancipated Who were in foster care for extended periods of time						
C3.3 Children emancipated age 18 who were in foster care for 3 years or longer	<b>37.5%</b>	↓	<b>37.2%</b>	<b>43.4%</b>	<b>41.9%</b>	<b>38.7%</b>

Source :Nevada Data Profile

Green shading =meets Standard: Red shading =Below Standard; yellow Shading =Above median/below standard

**CFSR 2009:**

During the 2009 CF SR all 40 foster care cases were applicable for an assessment of item 7. In assessing this item, reviewers were to determine whether the agency had established a permanency goal for the child in a timely manner and whether the most current permanency goal was appropriate. Reviewers also were to determine whether the agency had sought TPR in accordance with the requirements of the Adoptions and Safe Families Act (ASFA). Item 7 was rated a strength in 25 cases when reviewers determined that the child’s permanency goal was appropriate, had been established in a timely manner, and if relevant, that the agency had filed for TPR in accordance with the requirements of ASFA. Item 7 was rated as an area needing improvement in 15 cases. Item 7 was assigned an overall rating of area needing improvement. In 62.5 percent of the cases, reviewers determined that the agency had established an appropriate permanency goal for the child in a timely manner and had met ASFA requirements when relevant. The required percentage is 90.

Most Stakeholders commenting on this the item during the onsite 2009 CF SR primarily addressed the issue of concurrent planning. While some Clark County Stakeholders noted that caseworkers follow agency guidelines for concurrent planning, other stakeholders expressed the opinion that many caseworkers tend to establish concurrent goals, but then pursue them sequentially rather than simultaneously.

**Statewide Data:**

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) since implementation of the PIP on this item. In the following Table 7.2 is the most current case review data as it relates to item 7.

<b>Table 7.2: Statewide Quality Improvement Review Data</b>	QICR 2011	QICR 2012	QICR 2013	QICR 2014
Item 7: Permanency goal for child	57.14 ( n=24)	61.90 (n=26)	66.67 (n=28)	71.40 (n=30)

Since meeting the PIP target in 2012 Nevada continues to show improvement on this item.

Statewide Data:

Data from surveys conducted for the CFSP in Table 7.3 provide information on permanency goal for child. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 170 responses to the survey.

The effectiveness of the child welfare agency in selecting the most appropriate permanency goal (on a scale of 1-5 with 5 being very effective) is presented in Table 7.3. The mean rating of 3.55 indicates that the average sentiment among respondents is that Child Welfare Agencies are usually effective in selecting the most appropriate permanency goal for the child/youth.

Overall, comments from Stakeholders indicate the agency has numerous systems supports that provide additional oversight to permanency goal selections, and that the agency generally identifies the goal of reunification appropriately but fails to coordinate the services timely for achievement of that goal. Additionally, concerns were noted that the agency waits too long to change the permanency plan to adoption and file TPR in some cases, but that overall this has improved greatly over previous years. There was some concern that there is an overuse of the goal OPPLA in some cases.

**Table 7.3 Survey Question**

**How Effective overall is the Child Welfare Agency selecting the most appropriate permanency goal for children and youth?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
4.12%	6.47%	37.65%	34.12%	17.65%	170	3.55	0.60
(7)	(11)	(64)	(58)	(30)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Item 8: Reunification, guardianship, or permanent placement with relatives**

Requirements:

NRS 432B.390 specifically mandates that relatives of the child within the fifth degree of consanguinity be given preference for placement, when removal from the parents' home is necessary for the child's safety. NRS 432B.393 requires agencies to make reasonable efforts to prevent a child's removal from the parents' home, or if removal is necessary, reasonable efforts to make their safe return possible. NRS 432B.540 requires that if the agency believes it is necessary to remove the child from the physical custody of his/her parents, it must submit a plan designed to achieve placement of the child in a safe setting as near to the residence of his/her parent as is possible and consistent with the best interests and special needs of the child. NAC 432B.190, 200, 210 and 220 each place emphasis on the ways in which the agency is to engage the family and their natural, informal supports such as extended family, fictive kin, close friends, members of their faith community, teachers, etc. to keep the child safe while committing to the long-term support of the child and family.

In addition, the 0508/0509 Nevada Initial Assessment (NIA) policies guide the collection of information used to determine the appropriate case plan goal(s), identify the strengths (including protective capacity) of the family and the services needed to support achievement of a goal of reunification. The 0501 Adoption and Safe Families Act of 1997 (ASFA): Reasonable Efforts to Maintain Child in Home policy specifically directs that "reasonable efforts" must be made to prevent the removal of children from their homes and, whenever, possible, to reunify children placed in foster care with their families. Reasonable efforts must be determined on a case-by-case basis and the child's health and safety must be of paramount concern. 1001 Diligent Search Process and Placement Decisions policy directs the identifying, locating and contacting of relatives regarding their interest in providing a temporary or permanent placement for or adopting a child prior to or when the child is placed in substitute care.

Performance on the individual measures pertaining to timeliness is included in Composite 1: Timeliness and

permanency of reunification. There is no national standard for these measures individually. Currently, the national standard with regard to permanency has been established only for the scaled composite scores. The most recent CFSP Data Profile provided by ACF dated April 1, 2014 provides current data performance on Composite 1 for Permanency Outcome 1 in Table 8.1. Nevada has exceeded the overall national standard for timelines and permanency of reunification for several years.

**Table 8.1 Permanency Composite 1**

	National Standard		FY2010	FY2011	FY2012	FY2013
<b>Permanency Composite 1: Timeliness and Permanency of Reunification</b>	<b>122.6</b>	↑	<b>134.4</b>	<b>134.3</b>	<b>126.9</b>	<b>131.4</b>
Component A: Timeliness of Reunification						
C1.1 Reunification in less than 12 months for children exiting foster care	<b>75.2%</b>	↑	<b>69.3%</b>	<b>72.2%</b>	<b>66.4%</b>	<b>71.3%</b>
C1.2 Median stay in foster care to reunification (months)	<b>5.4</b>	↓	<b>6.4</b>	<b>5.9</b>	<b>7.2</b>	<b>6.7</b>
C1.3 Entry cohort of children who reunify in < 12 months	<b>48.4%</b>	↑	<b>43.5%</b>	<b>34.1%</b>	<b>38.6%</b>	<b>36.3%</b>
Component B: Permanency of Reunification						
C1.4 Children who exit and re-enter foster care in less than 12 months	<b>9.9%</b>	↓	<b>6.8%</b>	<b>7.3%</b>	<b>8.3%</b>	<b>7.8%</b>

Source Nevada Data Profile

Green shading =meets Standard; Red shading =Below Standard; yellow Shading =Above median/below standard

**CFSP 2009:**

During the 2009 CFSP item 8 was applicable for 21 (52.5 percent) of the 40 foster care cases. In assessing these cases, reviewers were to determine whether the agency had achieved the permanency goals of reunification, guardianship, or permanent placement with relatives in a timely manner or, if the goals had not been achieved, where the agency had made, or was in the process of making, diligent efforts to achieve the goals. Item 8 was rated as Strength in 15 cases when reviewers determined that the goal had been achieved in a timely manner or that the agency had made concerted efforts to achieve the goal in a timely manner. Item 8 was assigned an overall rating of area needing improvement. In 71 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to attain the goals of reunification, permanent placement with relatives, or guardianship in a timely manner. The required percentage is 90.

Most stakeholders commenting on this item during the onsite CFSP expressed the opinion that the child welfare agencies generally support the goal of reunification with services and through maintaining court supervision. However, a few stakeholders noted that the child welfare agencies and/or courts continue reunification efforts for long periods of time without consideration of other permanency options. In addition, some State-level and Clark County stakeholders expressed concern about the high number of children who are returned home after brief stays in foster care without the provision of services.

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 8.2 provide information on timely achievement of reunification, guardianship or permanent placement with relatives. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 153 responses to the survey.

The effectiveness of the child welfare agency in timely achievement of the goals of reunification, guardianship or permanent placement with a relative (on a scale of 1-5 with 5 being Very effective) is presented in Table 8.2. The mean rating of 3.16 indicates that the average sentiment among respondents is that Child Welfare Agencies are sometimes effective in achieving the goals of reunification, guardianship or placement with relatives.

Overall, comments from Stakeholders indicate the agency supports reunification with service provision but the service provision can sometimes be delayed. Permanent placement options are sometime not begun until almost time for the

permanency hearing, and some stakeholders indicated that sometimes not enough work has been done timely to locate relatives who may be considered for adoption or guardianship.

**Table 8.2 Survey Question**

**How Effective overall is the Child Welfare Agency in timely achievement of reunification, guardianship or placement with relatives?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
3.92%	15.69%	41.18%	39.22	0.00%	153	3.16	0.72
(6)	(24)	(63)	(60)	(0)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Item 9: Adoption**

Requirements:

NRS 432B.553 requires agencies which provide child welfare services to adopt a plan for the permanent placement of the child for review by the court. NRS 432B.580 and .590 mandate court review of the progress toward achievement of the permanency goal at a minimum of six month intervals. Further, NRS 432B.590 and NAC 432B.261-.262 presume that termination of parental rights for the purpose of adoption is in the best interest of a child who has been in out-of-home placement. Policy requires 14 months of any 20 consecutive months (a more stringent requirement than the federal 15 out of 22 months). NAC 432B.2625 requires the agency to identify and document the obstacles to placement of the child, specify the steps that will be taken to find an appropriate home for the child in a report to the court if a child has not been placed into an adoptive home within 90 days after the termination of parental rights.

Although there is nothing in policy that repeats these requirements, 0204 Case Planning and 0103 Adoption of Children 12 Years and Older policies are explicit that adoption is the preferred permanency goal when it is determined that a child cannot be reunited with his or her birth family. Legal adoption is preferred because it offers the highest level of physical, legal and emotional safety and security for each child within a family relationship. 1001 Diligent Search Process and Placement Decisions policy directs agencies to begin search activities and identification of family members during the initial contact with the family and requires they be initiated no later than at the time the Safety Plan is completed. Once a non-custodial parent or relative is found, they must be contacted within five working days to discuss interest as a placement option and/or emotional support for the child. 0514 Termination of Parental Rights (TPR) policy requires the agency to make and finalize permanency plans by no later than 12 months after the child’s removal. ASFA requires that adoption proceedings be completed within 24 months of the child’s entry into foster care and requires that permanency-planning decisions involving adoption be made timely, are consistent with state and federal time frames, and consider the best interest of the child.

Performances on the Individual Measures are included in Composite 2: Timeliness of adoptions. The data below are presented to provide additional information about the timeliness of adoptions. There are no national standards for performance on these measures individually. National standards have been established only for the scaled composite score. The State’ performance on Composite 2 is shown in Table 9.1 for Permanency Outcome 1. Nevada has exceeded the national standard for Timeliness of Adoption for several years.

**Table 9.1 Permanency Composite 2: Timeliness of Adoptions**

	National Standard		FY2010	FY2011	FY2012	FY2013
<b>Permanency Composite 2: Timeliness of Adoptions</b>	<b>106.4</b>	↑	<b>108.9</b>	<b>114.5</b>	<b>134.8</b>	<b>145.1</b>
Component A: timeliness of Adoption of Children Discharged from foster care						
C2.1 Adoption in less than 24 month for children exiting to adoptions	<b>36.6%</b>	↑	<b>14.6%</b>	<b>18.1%</b>	<b>25.0%</b>	<b>27.8%</b>
C2.2 Median length of stay to adoption (months)	<b>27.3</b>	↓	<b>36.3</b>	<b>35.4</b>	<b>30.7</b>	<b>29.0</b>
Component B: Adoption for Children meeting ASFA Time-in-						

Care requirements						
C2.3 Children in foster care for 17 or more months (on day 1 of FY) who were adopted by the end of the FY	22.7%	↑	29.5%	37.8%	37.0%	36.7%
C2.4 Children in foster care for 17 or more months (on day 1 of FY) who achieved legal freedom within 6 months of start of FY	10.9%	↑	21.8%	16.0%	18.9%	19.3%
Component C: Adoption of Children who are legally free for Adoption						
C2.5 Legally free children adopted in less than 12 months	53.7%	↑	42.6%	45.3%	62.6%	65.7%

Source Nevada Data Profile

Green shading =meets Standard: Red shading =Below Standard; yellow Shading =Above median/below standard

### CF SR 2009:

During the 2009 CF SR item 9 was applicable for 18 (45 percent) of the 40 foster care cases. In assessing this item, reviewers were to determine whether diligent efforts had been, or were being, made to achieve a finalized adoption in a timely manner. Item 9 was rated as Strength in one case when reviewers determined that the State had made diligent efforts to achieve finalized adoptions in a timely manner. Item 9 was assigned an overall rating of area needing improvement. In 6 percent of the applicable cases, reviewers determined that the agency had made concerted efforts to achieve a finalized adoption in a timely manner. The required percentage is 90.

Most stakeholders commenting on this item during the onsite CF SR expressed the opinion that the child welfare agencies are not effective in finalizing adoptions in a timely manner. Various barriers to adoption were identified that included the following:

- There are delays in completing adoption paperwork, including documentation of criminal histories and home studies
- Despite the fast track of 180 days implement at the Supreme Court, there are delays in finalizing adoption due to TPR appeals.
- Court continuances and docketing concerns delay finalizing TPR and Adoption.
- There are delays in finalizing adoption due to the practice of transferring the case from a permanency caseworker to an adoption caseworker only after TPR has been achieved.

### Statewide Data

**Table 9.2: UNITY CFS732 Report – Adoptions in Less than 24 Months**

	Adoptions with a Custody Date in Unity	Custody to Adoption Average Months	Number Adopted in less than 24 Months	Percent Adopted in less than 24 Months
Adoption in Less than 24 Months <i>April 1, 2011 - April 30, 2013</i>	1,610	36	422	26%
Adoption in Less than 24 Months <i>April 1, 2012 -April 30, 2014</i>	1,505	34	445	30%

Please note that Nevada measures the **average** months to adoption from the date of removal on UNITY report CFS732. In contrast the federal measure depicts the **median** length of stay from the date of the removal. Overall, and in contrast this graph presents higher average months to adoption. Table 9.2 shows the results of UNITY report CFS732 – Adoptions in less than 24 Months. This report is run each May and counts back 24 months from the date run to demonstrate the percentage of children adopted in less than 24 months. The table shows an increase in the percentage of adoptions in less than 24 months compared to the same time one year before. Currently, the percent of children adopted in less than 24 months is 30%. Nevada’s Child and Family Services Review Data Profile for FFY 2012ab indicates Nevada’s current percentage is 27.8%, which is lower than the UNITY CFS732 report.

Data from surveys conducted for the CFSP in Table 9.3 provides information on timely achievement of adoption. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 134 responses to the survey.

The effectiveness of the child welfare agency in timely achievement of the goal of adoption (on a scale of 1-5 with 5 being Very effective) is presented in Table 9.3. The mean rating of 2.99 indicates that the average sentiment among respondents is that Child Welfare Agencies are sometimes effective in achieving the goal of adoption.

Overall, comments from Stakeholders indicate that this process has improved over the last two years but there continues to be delays in timely paperwork i.e. TPR petitions, home studies and social summaries.

**Table 9.3 Survey Question**

**How Effective overall is the Child Welfare Agency in timely achievement of adoptions**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
8.96%	20.15%	38.06%	28.36%	4.48%	134	2.99	0.50
(12)	(27)	(51)	(38)	(6)			

N=Number of Survey Respondents  
SD=Standard Deviation

*Adoption Incentive Grant Funds*

The Fostering Connections to Success and Increasing Adoptions Act of 2008 re-authorized the Adoption Incentive Grant Program through FY 2013. The Federal Adoption Incentive Program expired on September 30, 2013. The proposed new incentive payment structure is pending re-authorization, and would have generally been effective if enacted on October 1, 2013. However, the provisions if enacted that will change the incentive structure and rename the program will potentially not be effective until October 1, 2014.

In the previous authorization under Fostering Connections to Success and Increasing Adoption Act of 2008 the baseline above which incentive payments were made doubled the incentive payment for adoption of children with special needs and older children adoptions. The state was awarded \$2,116,000 for FFY 2013.

Over the next five years the state plans to continue to allocate Adoption Incentive funds for Annual membership dues to the Adoption Exchange Association, as well as a separate sub-grant for the Adoption Exchange to act as the state's Recruitment Response Team (RRT) for the Adopt Us Kids project. Also, the state will continue to use funds for in-state travel expenses for renewal and initial licensing of child placing agencies as well as travel to facilitate out-of-state placements and payment of court fees. Additionally, funds will continue to be used for out of state travel expenses for the central office Adoption Specialist to attend National Adoption Conferences.

Adoption Promotion and Support services and activities are designed to support and facilitate permanency for children in Nevada's foster care system. Each year the state will continue to use funds in the manner listed above, with the remainder sub-granted to the three public child welfare agencies to support adoption activities and services in their local agencies. These activities and services include but are not limited to facilitating inter-jurisdictional placements; including travel for pre-placement transitional visits, post-placement supervision, specialized assessments, respite care, and privatized delivery of therapeutic services not covered by Medicaid. The grant funds will also support specialized recruitment and adoption finalization activities, including National Adoption Day as well as funding contracts for the completion of social summaries and home studies to remove barriers to timely permanency through adoption.

*States Plan for Expenditure of Adoption Incentive funds:*

The DCFS Grants Management Unit (GMU) meets monthly with CCDFS, WCDSS and the DCFS Rural Region Management and Adoption Units across the state to discuss each jurisdictions spending plan for AI to ensure it is obligated and liquidated in accordance with 473 A(e) of the Act.

## ***Item 10: Other Planned Permanent Living Arrangement***

### **Requirements:**

Nevada statute and policy require that a written case plan be developed for children with this permanency goal and that the plan includes programs and services designed to assist older youth to transition out of care. NRS 432B.553 requires a plan for the permanent placement of children. NAC 432B.410 requires child welfare services to ensure that each child in foster care is eligible for services related to independent living has a written plan for his transitional independent living based on the assessment of his skills. Statewide policy 0801 Youth Plan for Independent Living was developed to address the needs of youth who were likely to remain in care until their 18<sup>th</sup> birthday and prepare them for the transition into adulthood. This policy requires agencies which provide child welfare services to establish self-sufficiency goals for youth beginning at age 15, regardless of their level of functioning or independence. The planning process must be youth focused and driven with emphasis on the youth's expressed interests, needs and priorities.

### **CFSR 2009:**

Item 10 was applicable for 7 (17.5 percent) of the 40 foster care cases. In assessing these cases, reviewers were to determine if the agency had made, or was making, diligent efforts to assist children in attaining their goals related to OPPLA. Item 10 was rated as strength in three cases when reviewers determined that the agency had made concerted efforts to ensure a long-term placement for the child and /or to provide the necessary service to prepare the child for independent living. Item 10 was assigned an overall rating of area needing improvement. In 43 percent of the applicable cases, reviewers determined that the goal of OPPLA was being addressed in an appropriate way. The required percentage is 90.

Most stakeholders commenting on this item during the onsite CSFR express the opinion that IL services are provided for children over the age of 15 and include assessment, financial management training, educational counseling and assistance, job training and housing assistance. However, some stakeholders indicated that, although services are available to children up to the age of 21, information regarding these benefits is not provided to children making the transition from foster care to independence consistently.

### **Statewide Data:**

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) since implementation of the PIP on this item. In the following Table 10.1 is the most current case review data as it relates to item 10.

<b>Table 10.1: Statewide Quality Improvement Review Data</b>	QICR 2011	QICR 2012	QICR 2013	QICR 2014
Item 10: Other Planned Permanent Living Arrangement	50.0%	50.0%	67.67%	42.86%
Permanency goal for child	(n=4)	(n=5)	(n=8)	(n=6)

Since meeting the PIP target in 2012 Item 10 indicates some variation in ratings over time. The number of cases that are applicable for this item is small and can present as skewed data. A targeted review would be the best means to identify if this is an area of strength or an area of improvement by increasing the representative sample of the population.

Data from surveys conducted for the CFSP in Table 10.2 provides information on the permanency goal of OPPLA. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 137 responses to the survey.

How effective is the child welfare agency in preparing youth in foster care with the goal of OPPLA to make a successful transition to living as an adult? (on a scale of 1-5 with 5 being very effective) is presented in Table 10.2. The mean rating of 3.09 indicates that the average sentiment among respondents is that Child Welfare Agencies are sometimes effective in preparing youth in foster care with the goal of OPPLA for making a successful transition to living as an adult.

Overall, comments from stakeholders varied on how I.L services helped youth transition from care across the state. In some areas of the state stakeholder's felt the I.L program was doing well but there continues to be concern that this is not consistent across the state. Some Stakeholders identified turnover of I.L workers and high caseloads as issues that contribute to inconsistent services for youth in some areas.

**Table 10.2 Survey Question**

**How Effective overall is the Child Welfare Agency in preparing youth in foster care with the goal of OPPLA for making a successful transition to living as an adult?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
8.03%	21.90%	35.04%	23.36%	11.68%	137	3.09	0.39
(11)	(30)	(48)	(32)	(16)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Permanency Outcome 2: The continuity of family relationships and connections is preserved for children**

**During the 2009 CF SR Nevada was not in substantial conformity with Permanency Outcome 2. The outcome was substantially achieved in 60.0 percent of the cases. This percentage was less than the 95 percent required for substantial conformity.**

***Item 11: Proximity of foster care placement***

Requirements:

NAC 432B.400 requires that placements for children in foster care will be made in the best interest of the child, with particular consideration given to the safest, least restrictive familial environment available. This statute further states that if the child's goal is reunification with his or her family, then particular consideration will be given to a placement that is in close proximity to the home of the parent of the child. If the placement requires that a child be placed in a family foster home or institution for child care that is located a substantial distance from or in a different state than where the family of the child resides, then there must be clear documentation of the reasons why such a placement would be in the child's best interests. In addition, the proximity of the child's school (where he or she is enrolled at the time that he was placed in foster care) may also be a factor in the selection of the placement. Statewide 1003 Kinship Care policy states that whenever possible, children need to be placed with relatives or someone with whom they have a significant and positive connection. The policy emphasizes the importance of seeking and supporting kinship placement, as well the preservation of familial bonds by making clear that our preferred practice is to minimize the impact of separation from parents and the familiar environment, taking into account community, church and schools, as well as family. First preference is given to adult relatives, over non-related care providers, for the placement of children in Nevada.

CF SR 2009:

Item 11 was applicable for 28 (70 percent) of the 40 foster caser cases. Cases were not applicable if TPR was attained prior to the period under review, contact with parents was not considered to be in the child's best interests, and/or parents were deceased or their whereabouts were unknown. In assessing item 11, reviewers were to determine whether the child' most current foster care setting was near the child's parents or close relatives. Item 11 was assigned an overall rating of strength. In 100 percent of the applicable cases, reviewers determined that the agency placed children in locations close to their parents or relatives when appropriate. The required percentage is 90.

A few stakeholders commenting on this item during the onsite CF SR expressed the opinion that the challenges to

placing children in close proximity to their family include limited placement resources, particularly therapeutic placement resources, and limited resources in rural areas.

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 11.1 provides information on the proximity of foster care placements. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 159 responses to the survey.

How effective is the child welfare agency in placing foster children close to their parents and/or in their own communities or counties (on a scale of 1-5 with 5 being very effective) is presented in Table 11.1. The mean rating of 3.49 indicates that the average sentiment among respondents is that Child Welfare Agencies are usually effective in placing children close to home and community.

Overall, comments from stakeholders indicated they felt child welfare agencies do a good job in placing children close to parents and their communities when they are removed and placed in foster care. Many stakeholders commented that barriers to this occurring would be the lack of fosters homes and specifically a need for foster homes in the rural communities.

**Table 11.1 Survey Question**

**How Effective overall is the Child Welfare Agency in placing foster children close to their parents and/or in their own communities or counties?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
8.18%	11/32%	25.16%	33.96%	21.38%	159	3.49	0.54
(11)	(18)	(40)	(54)	(34)			

N=Number of Survey Respondents  
SD=Standard Deviation

***Item 12: Placement with siblings***

**Requirements:**

NRS 432B.580, as well as, the statewide 1001 Diligent Search Process and Placement Decisions policy requires that children be placed together unless there is justification for not doing so based on the best interest of the child. NRS 432B.3905 (Effective January 1, 2008 and January 1, 2009), specifies that a child under the age of 3 (2008) and 6 (2009) can be placed in a child care institution only if being placed with a sibling unit, due to medical services being available only in such an institution, or appropriate foster care is not available at the time of placement in the county in which the child resides.

**CFSR 2009:**

Item 12 was applicable for 27 (67.5 percent) of the 40 foster care cases. Cases were not applicable if the child did not have a sibling in foster care at any time during the period under review. In assessing item 12, reviewers were to determine whether siblings were currently, or had been, placed together and if separated, whether the separation was necessary to meet the service or safety needs of one or more of the children. Item 12 was rated assigned an overall rating of strength. In 100 percent of the applicable cases, reviewers determined that the agency placed siblings together in foster care whenever appropriate. The required percentage is 90.

Some stakeholders commenting on this item during the onsite CFSP noted that the child welfare agencies work diligently to keep siblings placed together. In Clark County stakeholders noted that a targeted recruitment effort to identify foster care provider for sibling groups was successful. A few stakeholders indicated that it can be a challenge to

pace siblings together in foster care due to a lack of sufficient placement resources.

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 12.1 provides information on placement of siblings. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 127 responses to the survey.

How effective is the child welfare agency in placing siblings together in foster children (on a scale of 1-5 with 5 being very effective) is presented in Table 12.1. The mean rating of 3.59 indicates that the average sentiment among respondents is that Child Welfare Agencies are usually effective in placing siblings together in foster care.

Overall, comments from stakeholders indicated that the child welfare agencies do a good job in keeping siblings together. There were some stakeholders that indicated that a barrier to placing siblings together is a lack of placement resources.

**Table 12.1 Survey Question**

**How Effective overall is the Child Welfare Agency in placing foster children close to their parents and/or in their own communities or counties?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
6.30%	6.30%	31.50%	33.86%	22.05%	127	3.59	0.59
(8)	(8)	(40)	(43)	(28)			

N=Number of Survey Respondents  
SD=Standard Deviation

***Item 13: Visiting with parents and siblings in foster care***

**Requirements:**

NRS 423B.550(5)(a) provide that a parent of a child that has been removed from the home retains the right to reasonable visitation with the child unless this right has been restricted by the court. NRS 432B.550(5)(b) was amended by AB 42 in 2005 to create a presumption that it is in the best interest of the child for siblings to be placed together and to require that if siblings are not placed together, there must be report made to the court detailing the agency’s efforts in this area, including a visitation plan for approval by the court. NRS 432B.580(2)(b) covers compliance with the visitation plan. Failure to comply with the plan is punishable by contempt. NAC 432B.400(o) requires that the case plan specifically provide for family visitation, including, without limitation, visiting siblings if the siblings are not residing together. This visitation must be regular and frequent, so as to preserve the family for reunification if possible (NAC 432B.220 (4)).

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

**CFSR 2009:**

Item 13 was applicable for 27 (67.5 percent) of the 40 foster care cases. Cases were not applicable for an assessment of this item if the child had no siblings in foster care and if one of the following conditions was met with regard to the

parents: TPR was established prior to the period under review and parents were no longer involved in the child's life or were deceased, or visitation with a parent was not considered in the best interests of the child. In assessing this item, reviewers were to determine whether the agency had made, or was making, diligent efforts to facilitate visitation between children in foster care and their parents and between children in foster care and their siblings also in foster care, and whether the visits occurred with sufficient frequency to meet the needs of children and families. Item 13 was rated as strength in 16 cases when reviewers determined that the frequency and quality of visitation with parents and siblings met the needs of the children. Item 13 was assigned an overall rating of area needing improvement. In 59 percent of the applicable cases, reviewers determined that the agency made concerted efforts to ensure that visitation was of sufficient frequency to meet the needs of the family. The required percent is 90.

Some stakeholders commenting on this item during the onsite CFSR expressed the opinion that there are challenges to providing children in foster care with sufficient opportunities for visitation with their parents and siblings due in part to a lack of transportation resources, particularly in the Rural Region. However, some Clark County stakeholders noted that the family visitation center in that county increase opportunities for visitation.

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 13.1 provides information on visiting parents and siblings in foster care. Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. The survey question asked about visitation as it relates to mothers, fathers and siblings. There were 154 responses to the survey question concerning the mother, 145 responses to the survey question concerning the father and 138 responses to the survey question concerning the siblings.

How effective is the child welfare agency in ensuring visitation occurs with the mother, father and siblings (on a scale of 1-5 with 5 being very effective) is presented in the following Tables 13.1, 13.2 and 13.3. The mean rating of 3.88 (mother), 3.62 (father) and 3.54 (siblings) indicates that the average sentiment among respondents is that child welfare agencies are usually effective on ensuring visitations occurs with the mother, father and siblings.

Overall, comments from stakeholders indicated that the child welfare agencies regularly conduct visits with parents and siblings. A few stakeholders expressed that challenges around ensuring sufficient opportunities for visitation occur is due to lack of transportation resources, high caseloads and parent incarceration.

**Table 13.1 Survey Question**

**How Effective overall is the Child Welfare Agency on ensuring visitation with the mother?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
3.90%	3.90%	22.08%	40.26%	29.87%	154	3.88	0.75
(6)	(6)	(34)	(62)	(46)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Table 13.2 Survey Question**

**How Effective overall is the Child Welfare Agency on ensuring visitation with the father?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
4.14%	10.34%	27.59%	35.17%	22.76%	145	3.62	0.59
(6)	(15)	(40)	(51)	(33)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Table 13.3 Survey Question**

**How Effective overall is the Child Welfare Agency on ensuring visitation between siblings?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
3.62%	10.34%	26.81%	44.93%	13.77%	138	3.54	0.69
(5)	(15)	(37)	(62)	(19)			

N=Number of Survey Respondents  
SD=Standard Deviation

***Item 14: Preserving connections***

*Requirements:*

NRS 432B.390 requires that priority be given to family members for placement of children who are removed from their birth families unless doing so would not be in the best interest of the child. DCFS policy (1001 Diligent Search, 1003 Kinship Care, and 1004 Structured Analysis Family Analysis) requires workers to complete a diligent search for any possible adult family members. Once located, those identified family members are assessed for appropriateness in much the same manner as regular family foster care providers. Also,, state policy 0504 Indian Child Welfare Act (ICWA) prioritizes the recognition of a child being an Indian child and assures that the child’s tribe be contacted immediately when an Indian child is taken into custody. The Tribe then becomes an active participant in any further proceedings regarding the child.

*CFSR 2009:*

Item 14 was applicable for 38 (95 percent) of the 40 foster care cases. In assessing item 14, reviewers were to determine whether the agency had made, or was making, diligent efforts to preserve the child’s connections to neighborhood, community, heritage, extended family, father, and friend while the child was in foster care. This item is not rated on the basis of visits or contact with parents or siblings in foster care. Item 14 was rated as strength in 29 cases when reviewers determined that the agency made concerted efforts to preserve the child’s connections with extended family members, religious or cultural heritage, schools, community, and friends. Item 14 was rated as an area needing improvement in nine cases. Item 14 was assigned an overall rating of area needing improvement. In 76 percent of the applicable cases, reviewers determined that the agency had made concerted efforts to maintain the child’s connections with extended family, culture, religion, community and school. The required percent is 90.

There were insufficient substantive comments from stakeholders regarding this item during the onsite CFSP.

*Statewide Data:*

Data from surveys conducted for the CFSP in Table 14.1 provides information on preserving connections for children in foster care. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 148 responses to the survey.

How effective is the child welfare agency in preserving connections for children in foster care (on a scale of 1-5 with 5 being very effective) is presented in Table 14.1. The mean rating of 2.99 indicates that the average sentiment among respondents is that Child Welfare Agencies are sometimes effective in preserving connections for children in foster care.

**Table 14.1 Survey Question**

**How Effective overall is the Child Welfare Agency in preserving connections for children in foster care??**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
5.41%	29.05%	32.43%	27.03%	6.08%	148	2.99	0.43
(8)	(43)	(4.8)	(40)	(9)			

N=Number of Survey Respondents  
SD=Standard Deviation

***Item 15: Relative placement***

*Requirements:*

NRS 432B.390 requires that priority be given to family members for placement of children who are removed from their birth families unless doing so would not be in the best interest of the children. DCFS Policy (1001 Diligent Search, 1003 Kinship Care, and 1004 Structured Analysis Family Analysis) requires workers to complete a diligent search for any possible adult family relatives. Once located, those identified family members are assessed for appropriateness in much the same manner as regular family foster care providers.

*CFSR 2009:*

Item 15 was applicable for 36(90 percent) of the 40 foster care cases. Cases were not applicable if relative placement was not an option during the period under review because the child was in an adoptive placement at the start of the time period, or the child entered foster care needing specialized services that could not be provided in a relative placement. In assessing this item reviewers were to determine whether the agency made diligent efforts to locate and assess both maternal and paternal relatives as potential placement resources for children in foster Care. Item 15 was assigned an overall rating of area needing improvement. In 64 percent of applicable cases, reviewers determined that the agency had made diligent efforts to locate and access relatives as potential placement resources. The required percentage is 90.

Although some stakeholders commenting on this item during the onsite CFSP in Clark County and Washoe County indicated that caseworker routinely collect information about relatives, these stakeholders noted that relative searches do not continue consistently throughout the life of the case.

*Statewide Data:*

Data from surveys conducted for the CFSP in Table 15.1 provides information on relative placement. Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 171 responses to the survey.

How effective is the child welfare agency in identifying relative placements (on a scale of 1-5 with 5 being very effective) is presented in Table 15.1. The mean rating of 3.63 indicates that the average sentiment among respondents is that child welfare agencies are usually effective in identifying relatives who could care for children entering foster care and using them as placement resources when appropriate.

Overall, comments from stakeholders indicated that the child welfare agencies regularly search for relatives. However, some stakeholders identified challenges to placing children with relatives due to licensing requirements around relative criminal histories. Also, stakeholders indicated that a barrier to identification in some cases was the parent’s unwillingness to provide relative information.

**Table 15.1 Survey Question**

**How Effective overall is the Child Welfare Agency in preserving connections for children in foster care??**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
1.75%	8.19%	31.58%	42.69	15.79%	171	3.63	0.68
(3)	(14)	(54)	(73)	(27)			

N=Number of Survey Respondents  
SD=Standard Deviation

***Item 16: Relationship of child in care with parents***

*Requirements:*

While the State does not have a specific statute which addresses the parent-child relationship guidelines, there are several statutes which do imply the importance of maintaining such a relationship. NRS 432.390.7C, .393, .397, and .190(k) require the following: That agencies which provide child welfare services to adopt a plan to give preference to relatives of child in care; that efforts toward preservation and reunification of family of a child to prevent or eliminate the need for removal from home before placement in foster care be made and to make a safe return to home possible; a determination of whether reasonable efforts have been made; to conduct inquiry to determine whether a child is an Indian child; and to plan for the permanent placement of a child. NAC 432B.190 provides requirements for case plans and agreements with parents, provides that when a child welfare case is opened, that the caseworker must assume responsibility for planning the child welfare services to be provided whether the child remains in the home or not. Parents must be encouraged to participate in the development of a written agreement for services, which must be for a specified period to engage in the processes for receiving resources.

State Policy 1001 emphasizes the need to preserve the parent-child relationship by requiring diligent search for non-custodial parents when there is a need for a child to be removed from their home and the 0204 Case Planning policy refers to the structured, solution-based process of considering all of the information gathered through the needs assessment process to develop a strength-based case plan while working towards family reunification at the same time, implementing an alternative permanency plan.

*CFSR 2009:*

Item 16 was applicable for 23 (57.5 percent) of the 40 foster care cases. Cases were not applicable if parent rights had been terminated before the period under review and parents were no longer involved with the child, a relationship with the parents was not considered in the child's best interest throughout the period under review, or both parents were deceased. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to support or maintain the bond between children in foster care and their mothers and fathers through efforts other than arranging visitation. Item 16 was rated as strength in nine cases when reviewers determined that the agency had made concerted effort to support and/or strength the bond between parents and children through various activities. Item 16 was assigned an overall rating of area needing improvement. In 39 percent of the applicable cases, reviewers determined that the agency had made concerted efforts to support the parent-child relationships of children in foster care.

The number of stakeholder comments on this item during the onsite CSFR was not sufficient to include.

*Statewide Data:*

Data from surveys conducted for the CFSP in Table 16.2 provide information on relationship of child in care with parent. Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 154 responses to the survey.

How effective is the child welfare agency in supporting the relationship of the child in care with the parents (on a scale of 1-5 with 5 being very effective) is presented in table 16.1. The mean rating of 3.75 indicates that the average sentiment among respondents is that child welfare agencies are usually effective in supporting the relationship of the child in care with his or her parents.

**Table 16.1 Survey Question**

**How Effective overall is the Child Welfare Agency in preserving connections for children in foster care??**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
2.60%	7.14%	24.68%	43.51%	22.08%	154	3.75	0.71
(4)	(11)	(38)	(67)	(34)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Strengths/Concerns (Permanency Outcomes 1 & 2)**

Nevada has shown strength in the Federal data composite component B: Permanency of reunification C1-4 Reentries to Foster Care in 12 months as reflected in the most recent data profile. Most stakeholders were not aware of a lot of children in Nevada being returned to foster care but of those that have returned stakeholders indicated that the concerns are related to premature reunifications, a lack of behavioral change by the parents prior to reunification and or a lack of post reunification services.

Nevada has strength in the recognition that there needs to be a focus on ensuring placement stability with implementation of QPI and expansion of the focus on redesigning specialized foster care system through implementation of the specialized foster care pilot. These initiatives are focused on training and support for foster families. There is concern that Nevada has not met the national standard for the overall Permanency Composite 4: Placement Stability for many years.

Nevada has met the overall national standard for Permanency Composite 3: Achieving Permanency for Children in Foster Care for Long Periods of Time for several years. Also, Nevada is showing strength in this item during case reviews, and stakeholders express that there are numerous system supports in place to provide oversight of permanency goal selection. It was noted that filing of TPR petitions and moving children to adoptions has improved over previous years. However, there was some concern that there may be an over use of the goal OPPLA in some cases.

Nevada has met the overall national standard for Permanency Composite 1: Timeliness and permanency of reunification for several years now. However, the individual components related to this composite C1.1, C1.2 and C1.3 indicate that timely reunification in 12 months is not being achieved. Overall, stakeholder sentiment is that timely location of relatives and timely provision of services delays the timeliness of achievement of these items.

Overall, Nevada has improved in the timeliness of adoptions as represented in the federal data profile and current state data. There continue to be some concerns from stakeholders over delays in some areas as it relates to timely completion of necessary paperwork i.e. TPR petitions, home studies and social summaries.

Nevada is usually effective in placing children close to home and community, keeping siblings together, ensuring visitation occurs between father, mother and siblings, and in placing children with relatives. However, Nevada is only sometimes effective in preserving important connections to neighborhood, community, heritage, extended family, and friends while the child is in foster care.

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

During the 2009 CFSR Nevada was not in substantial conformity with Well-Being Outcome 1. The outcome was determined to be substantially achieved in 29.0 percent of the cases reviewed. This percentage is less than the overall 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 13 (32.5 percent) of the 40 foster care cases and 15 (3 percent) of the 22 in-home services cases.

### ***Item 17: Needs and services of child, parents, and foster parents***

#### **Requirements:**

NRS 432B.190 and .550 requires child welfare agencies to provide services to preserve families, prevent placement of children if possible, and if not possible provide a plan describing those services that would facilitate safe return of the child. NAC 432B.190, .200, and .240 requires agencies to provide case planning and agreements with parents using strengths and resources in planning, and requires the agency to provide a range of services to preserve the family. NAC 432B.400, .405 and .410 requires the agency to provide case planning and services to children in foster care and their parents. NAC 432B.1362, .1364 and .1366 provide provisions for provider agreements of child welfare services and assurances of conducting timely assessments to ensure adequate provision of services.

Several state policies are applicable to this item. Policy 0203 Case Management Practice Model was developed as a principle based framework for frontline practice. Policy 0509 Nevada Initial Assessment was developed to provide better initial assessments, and 0204 Case Planning Policy and 0205 Caseworker Contacts with Children, Parents and Caregivers were developed to clarify case planning and frequency of contacts required with children, parents and caregivers. Policy 0801 Independent Living Policy was developed to ensure youth age 15 and older in foster care receives adequate case planning and services for transition to adulthood and 0503 Differential Response policy was developed to standardized procedures use of family assessment rather than investigations on certain child abuse cases. Finally, policy 1004 Structured Analysis Family Evaluation (SAFE) Assessment covers the assessment of the appropriateness of potential foster families, licensed relatives and adoptive families.

#### **CFSR 2009:**

Item 17 was applicable for all 62 cases. In assessing this item, reviewers were to determine whether the agency had adequately assessed the needs of children, parents and foster parents and provided the services necessary to meet those needs. This item excludes the assessment of child's (but not parents') needs pertaining to education, physical health, and mental health. These areas are addressed in later items. Item 17 was rated as a strength in 15 (37.5 percent) of the 40 foster care cases and 8 (36 percent) of the 22-in-home services cases. Item 17 was rated as a strength in 23 cases when reviewers determined that the needs of children, parents, and foster parents had been adequately assessed and that identified service needs had been met. Item 17 was assigned an overall rating of area needing improvement. In 37 percent of the cases, reviewers determined that the state had adequately assessed and addressed the service needs of children, parents, and foster parents. The required percentage is 90.

A few Washoe County stakeholders commenting on this item during the onsite CFSR express the opinion that services are included in case plans based on the results of needs assessments conducted by caseworkers. Carson City stakeholders expressed difference opinion with regard to whether the needs of foster parents are assessed and met. Some Carson City stakeholders suggest that the child welfare agency conducts an assessment of the needs of foster parents; however, other said that the agency did not do this routinely.

Statewide Data:

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) since implementation of the PIP on this item. In the following Table 17.1 is the most current case review data as it relates to item 17.

<b>Table 17.1: Statewide Quality Improvement Review Data</b>	QICR 2011	QICR 2012	QICR 2013	QICR 2014
Item 10: Identifying Needs and Services to Child, Parent and Foster Parent	41.94% (n=26)	51.61% (n=32)	62.90% (n=39)	59.7% (n=37)

Since meeting the PIP target in 2012 Item 17 has shown some improvement over time.

Data from surveys conducted for the CFSP in Table 17.2 provide information on identifying needs and services to child, parent and foster parents. Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 190 responses to the survey question on child; 71 responses to the survey question on parents; and 171 responses to the survey question on foster parents.

How effective is the child welfare agency in identifying needs and providing services to the child, parent and foster parent (on a scale of 1-5 with 5 being very effective) is presented in the following Tables 17.2, 17.3 and 17.4. The mean rating of 3.64, child, 3.77 parents indicates that the average sentiment among respondents is that the Child Welfare Agencies are usually effective in identifying needs and services for children and parents. The mean rating of 3.23 on foster parents indicates that the average sentiment among respondents is that Child Welfare Agencies are sometimes effective in identifying needs and services to foster parents.

Overall, comments indicated that child and parent needs are regularly met. However, most comments came from foster parents as it related to needs and services to foster parents. Some of the concerns that foster parents indicated were as follows: better communication with the child welfare agencies, consistent quality of caseworkers, respect, representation and additional training. The comment identified most from foster parents was the need for better communication.

**Table 17.2 Survey Question**

**How Effective overall is the Child Welfare Agency in identifying needs and services to the child.?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
2.11% (9)	10.00% (19)	29.47% (56)	38.95% (74)	19.47% (37)	190	3.64	0.62

N=Number of Survey Respondents

SD=Standard Deviation

**Table 17.3 Survey Question**

**How Effective overall is the Child Welfare Agency in identifying needs and services to the parents?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
1.41% (1)	5.63% (4)	25.35% (18)	49.30% (35)	18.31% (13)	71	3.77	0.79

N=Number of Survey Respondents

SD=Standard Deviation

**Table 17.4 Survey Question**

**How Effective overall is the Child Welfare Agency in identifying needs and services to the foster parents?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
5.85%	18.13%	34.50%	30.41%	11.11%	171	3.23	0.48
(10)	(31)	(59)	(52)	(19)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Item 18: Child and family involvement in case planning**

Requirements:

NAC 432B.190-220 encourages the participation of parents in the case planning process and requires engagement of the child’s family in using its own strengths and resources throughout the process for planning services. This is implemented by fully exploring the needs of the child’s family and alternatives to separation of the family, identifying each family member’s strengths and using those strengths in the process of solving problems, developing individualized goals for services and treatment and time-limited steps to accomplish these goals, and by setting target dates for their evaluation and completion. Emphasis is given to promoting the right of a child to be with his family and fully exploring all alternatives to placement of the child outside his home.

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

CFSR 2009:

Item 18 was applicable for 57 (92 percent) of the 62 cases. A case was not applicable if parental rights had been terminated prior to the period under review, parents were not involved with the child in any way, and/or the child was too young or had cognitive delays or other conditions that were barriers to participation in case planning. In assessing this item, reviewers were to determine whether parents and children (when appropriate) had been involved in the case planning process, and if not, whether their involvement was contrary to the child’s best interest. A determination of involvement in case planning required that a parent or child actively participated in identifying the services and goals include in the case plan. Item 18 was rated as a strength in 18 (51 percent) of 35 applicable foster care cases and 7 (32 percent) of the 22 in-home services cases. Item 18 was assigned an overall rating of area needing improvement. In 44 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to involve parent and/or children in the case planning process. The required percentage is 90.

Most stakeholders commenting on this item during the onsite CFSP expressed the opinion that DCFS caseworkers generally are effective in engaging parents and youth in case planning. Several stakeholders indicated that the CFT process facilitates the engagement of families in case planning but that it is not held consistently. In addition, a few stakeholders indicated that older youth generally are not involved in case planning.

### Statewide Data:

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) since implementation of the PIP on this item. In the following Table 18.1 is the most current case review data as it relates to item 10.

<b>Table 18.1: Statewide Quality Improvement Review Data</b>	QICR 2011	QICR 2012	QICR 2013	QICR 2014
Item 18: Child and Family involvement in Case Planning	44.07% (n=26)	61.30% (N=38)	56.67% (n=34)	61.7% (n=37)

Since meeting the PIP target in 2012 Item 18 has shown some improvement.

Data from surveys conducted for the CFSP in Table 18.2 provides information on child and family involvement in Case Planning. Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 166 responses to the survey.

How effective is the child welfare agency on involvement of children and families in case planning (on a scale of 1-5 with 5 being very effective) is presented in Table 18.2. The mean rating of 3.28 indicates that the average sentiment among respondents is that child welfare agencies are sometimes effective in involvement of child and parents in case planning.

### **Table 18.2 Survey Question**

**How Effective overall is the Child Welfare Agency on involvement of children and families in case planning?**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
6.02% (10)	15.06% (25)	34.34% (57)	34.34% (57)	10.24% (17)	166	3.28	0.54

N=Number of Survey Respondents

SD=Standard Deviation

### ***Item 19: Caseworker visits with child***

#### Requirements:

Nevada is operating in accordance with 45 CFR 1355.20 which requires that 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 have contact by their caseworker every calendar month. This provision also applies to in-home cases. Statewide policy 0205 Caseworker Contact with Children, Parents and Caregivers requires a minimum of face-to-face contact with a child must occur at least once a calendar month. For cases where the child is placed in foster care, the contact must take place in the child's residence (50% or more). During all types of contacts, the caseworker must spend at least a portion of each time alone with the child and at least a portion of the time alone with the caregiver/foster parent, if requested. Documentation of the contact must be entered into UNITY within 5 days of the contact. Children placed in out-of-state institutions are subject to have a standardized policy for caseworkers visits with the child that defines the frequency of visits to ensure the child's safety, well-being and educational needs are met. On September 2006, the Federal government created the Child and Family Services Act of 2006. This act required the Caseworker Contact Policy to be revised to include a description of standards for the content and frequency of caseworker visits for children in foster care. The act requires a minimum of one monthly visit between the caseworker and child must focus on case planning and service delivery. The state, in a collaborative effort with the child welfare agencies, revised the current Caseworker Contacts with Children, Parents and Caregivers policy to reflect the Children and Safe Families Act and implemented policy on June 20, 2008.

Since that time and as a result of the Child Improvement and Innovation Act, or P.L 112-34 the federal methodology for measuring the frequency of caseworker visits changed starting with FFY 2012. In January 2012 ACF provided program guidance on the new methodology, and beginning with the submission of data for FFY 2012, Nevada reported caseworker visit data using the new methodology. Per the new methodology provided in program instruction (PI) ACYF-CB-PI-12-01, the new method of measurement for determining caseworker visit compliance is calculated by “taking the number of monthly visits made to children in the reporting population and dividing it by the number of such visits that would occur during the FFY if each such child were visited once per month while in care”. This number is represented as a percentage by multiplying it by 100 and rounded to the nearest whole number. The new monthly caseworker visit frequency compliance will require Nevada to meet the following performance:

- For each of FFY 2012-2014: The total number of visits made by caseworkers on a monthly basis to children in foster care during a fiscal year must not be less than 90 percent of the total number of such visits that would occur if each child were visited every month while in care.
- For FFY 2015 and each FFY thereafter: the total number of visits made by caseworkers on a monthly basis to children in foster care during a fiscal year must not be less than 95% of the total number of such visits that would occur if each child were visited once every months while in care.
- For FFY 2012 and each FFY thereafter: At least 50 percent of the total number of monthly visits made by caseworkers to children in foster care during a fiscal year must occur in the child’s residence.

Currently, Nevada has the capability, within the SACWIS system, to generate a data report that captures caseworker visit data. In Table 19.1 and 19.2 data is captured using the new federal methodology from October 1, 2013 until April 30, 2014. While the data does not provide the entire FFY 2014 it does provide some indication of the data to-date using the new methodology.

#### CFSR 2009:

Item 19 was applicable for all 62 cases. In assessing this item, reviewers were to determine whether the frequency of visits between the caseworkers and children was sufficient to ensure adequate monitoring of the child’s safety and well-being, and whether visits focused on issues pertinent to case planning, service delivery, and goal attainment. Item 19 was rated as a strength in 26 (65 percent) of the 40 foster care cases and 8 (36 percent) of the 22 in-home services cases. The item was rated as strength in 34 cases when reviewers determined that the frequency and quality of visits between the caseworkers and children were sufficient to ensure adequate monitoring of the child’s well-being and promote attainment of case goals. Item 19 was assigned an overall rating of area needing improvement. In 55 percent of the case, reviewers determined that caseworker visits with children were of sufficient frequency and quality. The required percentage is 90.

Stakeholders commenting on this item during the onsite CSFR expressed different opinions regarding the frequency of caseworker visits with children. State-level and Clark County stakeholders suggested that caseworkers visit with children at least once per month in some cases, but less frequently in other cases. Carson City and Washoe County stakeholders indicated that in those sites, caseworkers visit monthly with children.

#### Statewide Data:

##### **Expected compliance regarding case worker visits with children:**

Table 19.1 illustrates that this continues to be an area needing improvement for Nevada. The current statewide federal year to date percentage is 89.68% from October 1, 2013 through April 30, 2014. As mentioned previously, the federal expectation for monthly case worker visits in FY 2014 is a compliance rate of 90%.

**Table 19.1 Caseworker visits with children FY2014 (YTD) –frequency only**

Caseworker visits with children	Compliance	NV Goal	Goal met
Statewide	89.68	90%	No
CCDFS	91.97	90%	Yes
WCDSS	81.57	90%	No
DCFS Rural Region	87.04	90%	No

Source: UNITY Report CFS7D7 October 1, 2013 to April 30, 2014

The expectation is that 90% of applicable children in foster care will have a face to face visit with their caseworker (or other designated worker). As of the time of this report, a partial reporting for FFY 2014 is available. Year to Date data represents visits completed between October 1, 2013 and April 30, 2014.

Nevada also tracks how many of the caseworker visits between the caseworker and the child occurred in the child's place of residence. It is expected that for every monthly case visit, the visit between the child and case worker would have occurred in the child's place of residence at least 50% of the time. Statewide policy dictates that the caseworker must visit each child on their case load at least once per month. Visits must be made face to face and in person, and at least 50% of those monthly visits must occur in the child's place of residence. For the past three reporting years Nevada has met this expectation and as of the most current data available for FY2014, Nevada continues to meet this expectation as illustrated in Table 319.2

**Table 19.2 Caseworker visits in the child's residence**

Visits in Child's Residence	Compliance	NV Goal	Goal met
Statewide	83.53	50%	Yes
CCDFS	93.53	50%	Yes
WCDSS	67.91	50%	Yes
DCFS Rural Region	87.00	50%	Yes

Source: UNITY Report CFS7D7 Oct 01, 2013 to April 30, 2014

***Efforts to Improve Frequency and Quality of Visits between Caseworker and Child:***

As Nevada adopts a model of continuous quality improvement, qualitative case reviews are conducted annually statewide. The nine items that were reviewed as part of the PIP agreement will continue to be evaluated via an in-depth qualitative case review including item 19: caseworker visits with children. This item evaluates not only the frequency of caseworker visits with children but also the quality of those visits. Since 2011 the state has evaluated the quality of visits between children and the caseworker (or other designated worker). A quality visit is one that is sufficient to ensure child safety and promote permanency and child well-being.

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) since implementation of the PIP on this item. In the following Table 19.3 is the most current case review data as it relates to item 19.

Table 19.3 Statewide Quality Improvement Review Data	QICR 2011	QICR 2012	QICR 2013	QICR 2014
Item 19: Caseworker Visits with Child	56.45% (n=35)	75.81% (n=47)	80.65% (n=50)	80.60 (n=50)

Since meeting the PIP target in 2012 Item 19 indicates improvement over previous years.

Data from surveys conducted for the CFSP in Table 19.4 provide information on Caseworker visits with Child. Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 157 responses to the survey.

How effective is the child welfare agency in conducting face-to-face visits as often as needed and required with children and youth in foster care and those who receive services in their own homes? (on a scale of 1-5 with 5 being very effective) is presented in Table 19.4. The mean rating of 3.66 indicates that the average sentiment among respondents is that child welfare agencies are usually effective in conducting face-to-face visits as often as needed and required with children and youth in foster care and those who receive services in their own homes.

Overall, comments from stakeholders indicated that the child welfare caseworkers regularly visit children face-to-face but a challenge was documenting the information timely in the SACWIS system. Also some stakeholders indicated that the quality of visits varies from caseworker to caseworker, and more training could be helpful to caseworkers to enhance the quality of those visits. Additionally a few stakeholders indicated that children placed out of county or out of state posed an additional challenge.

**Table 19.4 Survey Question**

**How Effective overall is the Child Welfare Agency in conducting face-to-face visits as often as needed and required with children and youth in foster care and those who receive services in their own homes?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
2.55%	11.46%	29.94%	29.30	26.75%	157	3.66	0.58
(4)	(18)	(47)	(46)	(42)			

N=Number of Survey Respondents  
SD=Standard Deviation

Over the next five years Nevada will continue to make strides not only in the frequency of caseworker visits with children but also in the quality of those visits

All three child welfare agencies will continue with the following processes, procedures and protocols in efforts to improve the frequency and quality of caseworker visits.

**Clark County Department of Family Services**

- CCDFS Supervisors are required to observe their staff in the field on a quarterly basis. One of the areas they observe is caseworker visits. Then they provide feedback to the employee regarding the quality of those visits. Additionally managers and supervisors have access to data reports that assist in ensuring children are seen monthly. This will assist in ensuring we meet the benchmarks required for caseworker visits with children.
- CCDFS has increased the number of permanency staff; which has resulted in decreased caseloads. This decrease should enable caseworkers to spend more time collecting information during visits. Additionally, supervisors and managers have access to a host of data reports designed to inform them of the frequency of caseworker visits. In addition, CCDFS has developed new policy guidelines designed to improve the quality of data collected during caseworker visits and the continued implementation of the Enhanced Safety Model (SIPS) will also improve the quality of data collection in the areas of child and adult functioning during caseworker visits. Finally, supervisors are required to observe their staff in the field on a quarterly basis and provide feedback to the employee regarding the quality of those visits.

## **Washoe County Department of Social Services**

- In WCDSS, improved data reporting will continue to assist supervisors and managers in monitoring case worker contact. Monthly draft reports are distributed to staff and supervisors each month with timeframes allowing for case note completion. A final report is disseminated and appropriate disciplinary action taken as necessary.
- If needed/required staff will continue to be approved overtime to meet caseworker contact requirements. Small laptops (36) were purchased to provide to units to complete case note documentation in the field. UNITY was installed on the laptops in compliance with security guidelines. Some staff chose to purchase their own tablet and have worked with Information Technology staff to sync their personal device with state and county data.
- WCDSS requested funding through DCFS to promote caseworker visits by approving overtime to allow workers to meet contact requirements. The funding supports worker efforts especially in light of high caseloads due to hiring slowdowns as a result of the weak economy over the past few years. Monthly contact reports are provided to staff and supervisors to track contact and allow for proper documentation. Additionally, eligibility staff produces a separate report regarding Targeted Case Management contact requirements and provide discrepant information to management. Caseworker contact and quality of visits have been a focus over the past several years and feedback over recent review/audit of SAFE-FC case note contacts were provided to staff.

## **Division of Child and Family Services, Rural Region**

- The DCFS Rural Region QA Unit will continue to provide Caseworker Contacts and Effective Documentation training to new caseworkers via video conference to allow all caseworkers access. The QA unit offers the training quarterly. Caseworkers are encouraged to use the Caseworker Visits with Child and Caregivers template while conducting visits to identify all pertinent information required pursuant to the Caseworker Contact with Children, Parents and Caregivers Policy (0205A.6.1).
- Many caseworkers continue to state that their home visits are completed on a monthly basis, but they have difficulty with completing their case notes in a timely manner due to competing responsibilities. A handful of caseworkers have elected to pilot the use of a digital voice recorder, to capture the details of their home visits, which are then transcribed by administrative staff and sent back to the caseworker for entry into UNITY. This option for case note entry is being explored, and depending on its success, will be available to all caseworkers.
- The DCFS Rural Region QA unit has created a simpler format of the UNITY Caseworker visit report to organize the data by district office, supervisor and corresponding unit. This report will greatly enhance the ability of the supervisors to monitor caseworker's visits with children.
- Two years ago in response to recognizing a need to improve the quality of caseworker visits between children and families, the DCFS QA and Training Unit developed an internal training that has been enhanced over the last two years. The training is titled: Caseworker Contacts and Documentation Training. The initial training was mandatory for all staff to attend and is now offered quarterly to all new staff and existing staff identified as needing improvement in this area. Additionally, a quality visit template tool was created where workers are encouraged to use when in the field to structure the visit and ensure all pertinent information is gathered and recorded during these visits. Searching for Heroes - Engaging Families with Emphasis on Non Resident Father Engagement has also been offered and the response has been extremely positive.
- In response to the caseload demands for the caseworkers, DCFS utilized Title IV-B money to purchase the software program Dragon Naturally Speaking. This voice recognition software allows workers to speak into a headset at their desk and the program converts their speech to text directly into our SACWIS system, documenting home visits and Child and Family Team Meetings. Additional Dragon Speak devices will be purchased this year to equip all caseworkers with this technology as it is enabling them to better do their jobs. Additionally, voice recorders were purchased to capture home visit data and are downloaded into the computer and converted from audio files into text. The pilot programs included 45 software units, headsets and recorder that are being used by staff who report that it has enhanced their ability to provide more thorough and timely documentation of case worker visits.
- The 95% Club was also established for caseworker contact compliance to recognize caseworkers who accomplish their monthly home visits. The 95% Club members have been recognized in the monthly DCFS

newsletter beginning FY 2014.

- The “Jeans Day” certificate entitlement program was implemented for all workers who met the required 100% of caseworker visitation with children. Two Jeans Day certificates are given to workers who meet the 95% and 1 is given to those who meet the required 90% in a given month. This no cost incentive program has proven to be so highly effective that it was expanded to include supervisors whose entire unit met the goal. DCFS managers and supervisors review caseworker visit report data from UNITY on a monthly basis and have noticed dramatic increases in the percentages over the two past years.

## ***Item 20: Caseworker visits with parents***

### **Requirements:**

DCFS policy 0205.0 Caseworker Contact with Children, Parents and Caregivers requires that caseworker contacts focus clearly on case planning, service delivery, safety, strengths and needs of the child and family, family progress and identification of resources and services the family needs in order to achieve case plan goals.

### **CFSR 2009:**

Item 20 was applicable for 50 (81 percent) of the 62 cases. Cases were not applicable for this assessment if parental rights had been terminated prior to the period under review and parents were no longer involved in the lives of their children. All cases that were not applicable are foster care cases. Reviewers were to assess whether the caseworker’s face-to-face contact with the child’s mothers and fathers was of sufficient frequency and quality to promote attainment of case goals and ensure the children’s safety and well-being. Item 20 was rated as strength in 50 percent (14 cases) of the 28 applicable foster care cases and 36 percent (8 cases) of the 22 in-home services cases. This item was rated as strength in 22 cases when reviewers determined that visits occurred with sufficient frequency to meet the needs of parents and children and that visits focused on issues pertinent to case planning, service delivery, and goal attainment. Item 20 was assigned an over rating of area needing improvement. In 44 percent of the applicable cases, reviewers determined that the frequency and quality of caseworker visits with parents were sufficient to monitor the safety and well-being of the child or promote attainment of case goals. The required percentage is 90.

There were insufficient substantive comments from stakeholders regarding this item during the onsite CSFR.

### **Statewide Data:**

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) since implementation of the PIP on this item. In the following Table 20.1 is the most current case review data as it relates to item 20.

<b>Table 20.1: Statewide Quality Improvement Review Data</b>	QICR 2011	QICR 2012	QICR 2013	QICR 2014
Item 20: Caseworker Visits with Parents	45.28% (n=24)	50.94 (n=27)	56.86% (n=29)	56.30% (n=27)

Since meeting the PIP target in 2012 Item 20 indicates some improvement over time, but continues to be an area of needed improvement.

Data from surveys conducted for the CFSP in Table 20.2 provide information on Caseworker Visits with Parents (mothers and fathers). Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 90 responses to the survey as it related to caseworker visits with mothers and 80 responses to the survey as it related to caseworker visits with fathers.

How effective is the child welfare agency in conducting face to face visits with parents (mothers and fathers) (on a scale

of 1-5 with 5 being very effective) is presented in Tables 20.2 and 20.3. The mean rating of 3.49 for mothers indicates that the average sentiment among respondents is that child welfare agencies are usually effective in conducting face to face visits with mothers. The mean rating of 3.19 for father indicates that the average sentiment among respondents is that child welfare agencies are sometimes effective in conducting face to face visits with fathers.

**Table 20.2 Survey Question**

**How Effective overall is the Child Welfare Agency in conducting face to face visits with mothers?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
3.33% (3)	13.33% (12)	32.22% (29)	33.33% (30)	17.78% (16)	90	3.49	0.53

N=Number of Survey Respondents  
SD=Standard Deviation

**Table 20.3 Survey Question**

**How Effective overall is the Child Welfare Agency in conducting face to face visits with fathers?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
6.25% (5)	16.25% (13)	41.25% (33)	25.00% (20)	11.25% (9)	80	3.19	0.48

N=Number of Survey Respondents  
SD=Standard Deviation

**Well-Being Outcome 2: Children receive appropriate services to meet their educational needs.**

During the 2009 CFSR Nevada was in substantial conformity with Well-Being outcome 2. The outcome was substantially achieved in 95.1 percent of the cases. This percentage was greater than the 95 percent required for substantial conformity. The outcome was substantially achieved in 97 percent (31 cases) of the 32 applicable foster care cases and 89 percent (8 cases) of the 9 applicable in-home services cases.

**Item 21: Educational needs of child**

Requirements:

NRS 432B requires that in custody cases a report be made in writing by the child welfare agency concerning the child's record in school. Statute further requires that the agency exercise diligence and care in arranging appropriate and available services for the children (NRS 432B.540). The Program of School Choice for Children in Foster Care authorizes the legal guardians or custodians of certain children who are in foster care to apply to the Department of Education to participate in the program which allows such children to choose the school of their choice or remain at the school they were attending prior to being removed from their caretaker (NRS 392.040).

NAC 432B directs agencies to address the educational needs of children in custody. These codes direct agencies to complete a family assessment which is to include the educational needs of the child (NAC 432B.1364). NAC 432B.400 directs that every case plan for child receiving foster care will include the following: A statement indicating the proximity of the school in which the child is enrolled at the time that they were placed in foster care and if it was considered as a

factor in the selection of the placement for foster care; that the case plan include education records, to the extent available, containing the names and addresses of those educational providers; the grade level at which the child performs; and such other educational information concerning the child as the agency determines is necessary. NAC 432B.230 directs the child welfare agencies to establish interagency agreements with related agencies including schools, to ensure that cooperative and mutually facilitative services are provided to children and families.

Policy 0204 Case Planning requires that in custody cases the child’s plan is to be developed in collaboration with the family and other members of the Child and Family Team (CFT), within required timeframes and have required elements including the child’s educational needs. Finally, policy 0205 Caseworker Contact requires that caseworkers visit the child or youth and caregiver at a minimum of once per month and during those visits discussed the educational progress and needs.

**CFSR 2009:**

Item 21 was applicable for 41 (66 percent) of the 62 cases reviewed. Cases were not applicable if either of the following applied: Children were not of school age, or children in the in-home services cases did not have service needs pertaining to education-related issues. In assessing this item, reviewers were to determine whether children’s educational needs were appropriately assessed and whether services were provided to meet those needs. Item 21 was rated as strength in 39 cases when reviewers determined that the child’s educational needs were appropriately assessed and services were provided, if necessary. Item 21 was assigned an overall rating of strength. In 95 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to meet the educational needs of children. The required percentage is 90.

Clark and Washoe county stakeholders commenting on this item during the onsite CFSR noted that children in foster care have an educational liaison who manages educational issues with the school. However, various stakeholders identified several barriers to the agencies’ ability to meet the educational needs of children in foster care i.e. lack of transportation to continue in the same school when removed from the home, graduation rate is low and dropout rate is high, children fall behind in school and tutoring is not provided routinely.

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 21.1 provide information on educational needs of child. Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 173 responses to the survey.

How effective is the child welfare agency in addressing the educational needs of children and youth in foster? (on a scale of 1-5 with 5 being very effective) is presented in Table 21.1. The mean rating of 3.58 indicates that the average sentiment among respondents is that child welfare agencies are usually effective in addressing the educational needs of children and youth in foster care.

Overall, comments from stakeholders indicated that the child welfare agencies in some areas have an educational liaison that helps manage educational issues. However, many stakeholders indicated that more attention needs to be given to children who have IEP’s and that some challenges continue to be with children/youth that disrupt from foster care placements and change schools.

**Table 21.1 Survey Question**

**How Effective overall is the Child Welfare Agency in addressing the educational needs of children and youth in foster care?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
3.47% (6)	11.56% (20)	26.59% (46)	40.46% (70)	17.92% (31)	173	3.58	0.62

N=Number of Survey Respondents  
SD=Standard Deviation

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

During the 2009 CFSR Nevada was not in substantial conformity with Well-Being Outcome 3. The outcome was substantially achieved in 69.5 percent of the applicable cases. This percentage was less than the 95 percent required for substantial conformity. The outcome was substantially achieved in 29 (72.5 percent) of the 40 foster care cases and 12 (63 percent) of the 19 applicable in-home services cases.

#### ***Item 22: Physical Health of child***

##### Requirements:

In keeping with the federal statutory framework, Nevada statutes state that one of the key purposes for DCFS is to plan and coordinate the provision of services for the support of families, including providing counseling, training, or other services to families. NAC 432B.400 further addresses the requirements of the child welfare agency to have a case plan that includes plans for the coordination and provision of services to children and families who need assistance relating to the care, welfare, mental and physical health of children. DCFS Policy 0207 Health Services supports these mandates by outlining processes to ensure that physical, developmental and mental health needs of custodial children are identified and diagnosed through the use of standardized, periodic screenings. The purpose of these screenings is to ensure that all non-custodial children's caregivers are aware of early preventative, diagnostic screening and treatment services available in their service area. The screenings facilitate the identification of physical, emotional or developmental needs and risks as early as possible and to link children to needed diagnostic and treatment services through the use of Nevada's Healthy Kids Program periodicity schedule as set forth by the American Academy of Pediatrics.

Additionally, policy 0502 requires as part of the CAPTA Part-C Requirement for Custodial and Non-Custodial Children, that all children under the age of three, who are involved in a substantiated case of abuse/neglect, must be referred to an "Early Intervention Program," for a developmental assessment pursuant to CAPTA-IDEA Part C. Documentation of the referral results of the referral and needs identified by any screening conducted by an Early Intervention Program must be entered into UNITY within five working days of receipt of the information.

Lastly, section 422(b) (15)(a) of the Social Security Act requires states to develop a plan for the ongoing oversight and coordination of health care services for children in foster care. (See **ATTACHMENT C: Nevada Health Care Oversight and Coordination Plan**).

##### CFSR 2009:

Item 22 was applicable for 51 (82 percent) of 62 cases reviewed. Cases that were not applicable were in-home service cases in which physical health concerns were not an issue. In assessing this item, reviewers were to determine whether children's physical health needs (including dental needs) had been appropriately assessed, and the services designed to meet those needs had been, or were being provided. Item 22 was rated a strength in 34 (85 percent) of 40 foster care cases and 8 (73 percent) of 11 applicable in-home services cases. Item 22 was assigned an overall rating of area needing improvement. In 82 percent of the applicable cases, reviewers determined that the agency was effective in assessing and meeting children's physical health needs. The required percent is 90.

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that medical and dental assessments and services are provided to children appropriately. However, some state-level and Clark County stakeholders indicated that there are delays in the provision of medical and dental services due to the lack of sufficient number of doctors and dentist in the state who will accept Medicaid.

Statewide Data:

Data from surveys conducted for the CFSP in Table 22.1 provide information on Physical Health of child. Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 176 responses to the survey.

How effective is the child welfare agency in identifying and addressing the physical and dental needs of children and youth in foster care (on a scale of 1-5 with 5 being very effective) is presented in Table 22.1. The mean rating of 3.93 indicates that the average sentiment among respondents is that child welfare agencies are usually effective in addressing the physical and dental needs of children and youth in foster care.

Overall, comments from stakeholders indicated that the child welfare agencies address the physical and dental needs of children with the foster parents being great partners on ensuring these needs are met. However, some stakeholders indicated that there continues to be challenges with the limited number of dental providers who will accept Medicaid.

**Table 22.1 Survey Question**

**How Effective overall is the Child Welfare Agency in addressing the physical and dental needs of children and youth in foster care?**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
2.27%	6.82%	19.32%	39.20%	32.39%	176	3.93	0.77
(4)	(12)	(34)	(69)	(57)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Item 23: Mental/behavioral health of child**

Requirements:

In keeping with the federal statutory framework, Nevada statutes state that one of the key purposes for DCFS to plan and coordinate the provision of services for the support of families to maintain the integrity of families and ensure that children are not unnecessarily removed from their home. This includes providing counseling, training, or other services to families, even if a report of abuse or neglect is received, but it is determined that an investigation is not warranted at the time. NRS 432.011 further addresses the coordination and provision of services to children and families who need assistance relating to the care, welfare and mental health of children. The statewide Case Planning Policy is specific in its discussion of the initial child and family assessment relative to needs including mental and behavioral health. In addition, statewide policy 0207 Health Services requires a standardized screening of a child's mental and behavioral health history.

CFSR 2009:

Item 23 was applicable for 47 (76 percent) of the 62 cases reviewed. Cases were not applicable if the child was too young for an assessment of mental health needs or if there were no mental health concerns. In assessing this item, reviewers were to determine whether mental health needs had been appropriately assessed and appropriate services to address those needs had been offered or provided. Item 23 was rated as a strength in 22 (71 percent) of the 31 applicable foster care cases and 9 (56 percent) of the 16 applicable in-home services cases. Item 23 was assigned an overall rating of area needing improvement. In 66 percent of the applicable cases, reviewers determined that the agency had made concerted effort to address the mental health needs of children. The required percentage is 90.

Most stakeholders commenting on this item during the onsite CFSP expressed the opinion that the agency is not consistent in ensuring that children in the child welfare system receive the mental health assessments and services they

need. Some stakeholders expressed the opinion that insufficient services and waiting lists for services exist statewide in the following areas; mental health assessment and treatment, counseling, inpatient and outpatient substance abuse treatment, domestic violence treatment, psychiatric treatment for children , and placements for children who need residential treatment.

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 23.1 provide information on Mental/Behavioral Health of child. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 182 responses to the survey.

How effective is the child welfare agency in identifying, assessing, and addressing the behavioral, emotional and mental health needs of children and youth in foster care (on a scale of 1-5 with 5 being Very effective) is presented in Table 23.1. The mean rating of 3.58 indicates that the average sentiment among respondents is that child welfare agencies are usually effective in identifying, assessing and addressing the behavioral, emotional and mental health needs of children and youth in foster care.

Overall, comments from stakeholders indicated that the child welfare agencies address the Mental/Behavioral Health needs of children. Many stakeholders indicated that the foster parents are great partners in the success of ensuring that these needs are met. Foster parent comments indicated a need for more communication and support around children’s mental health and behavioral issues.

**Table 23.1 Survey Question**

**How Effective overall is the Child Welfare Agency in identifying, assessing, and addressing the behavioral, emotional and mental health needs of children and youth in foster care?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
2.75% (5)	10.44% (19)	26.37% (48)	46.70% (85)	13.74% (25)	182	3.58	0.72

N=Number of Survey Respondents  
SD=Standard Deviation

**Strengths/Concerns (Well-being Outcomes 1, 2 & 3)**

While Nevada has improved on ensuring the needs of children, parents and foster parents are identified and provided this is a continued area of needed improvement. Specifically, foster parents indicated they felt a need for more communication and general support. Also, engagement of parents and children in case planning has improved but continues to be an area of needed improvement.

Additionally, caseworker visits with children (frequency and quality) while improved continues to be an area of needed improvement. Also, caseworker visits with parents (mothers and fathers) while improved continues to be an area of needed improvement. Specifically, engagement of fathers is a continued area of concern.

Child welfare agencies are usually effective on ensuring educational needs are met for foster children; however, some comments from stakeholders identified a need to ensure that children with IEP’s receive additional attention, and there is need to ensure that children are able to remain in their school of origin.

Furthermore, child welfare agencies are usually effective on ensuring physical and dental needs are met for children and youth in foster care; however, some stakeholders indicated that there continues to be challenges with the limited number of dental providers who will accept Medicaid. Also, child welfare agencies are usually effective in addressing

the behavioral/mental health of children and youth in foster care but foster parents indicated that they needed more support with children and youth around behavioral/mental health issues.

## Section V. Systemic Factors

### ASSESSMENT OF PERFORMANCE

Each of the performance indicators listed in this section mirrors the 22 systemic factor items from the Federal Statewide Assessment Instrument. The overall structure for each performance outcome/indicator includes the legal requirements for each item and to the extent applicable the most recent Federal data profile, previous CFPSR data/information, most recent case review data or relevant state data, and recent stakeholder survey/focus group data/information.

#### Systemic Factor A: Statewide Information System

**During the 2009 CFPSR Nevada was not in substantial conformity with the systemic factor of Statewide information system.**

#### ***Item 24: Statewide information system***

##### Requirements:

UNITY follows the SACWIS requirements set forth by Public Law 103-66, which was authorized by Congress in 1993 to help states meet data collection and reporting requirements of the Social Security Act. UNITY, Nevada's automated system is the statewide system for child welfare data collection. All information regarding foster care is entered into UNITY including basic demographics, placements, addresses of placements, tracking of goals and legal status, adoptions, ICPC cases, independent living, and IV-E eligibility. In compliance with federal requirements, UNITY collects the data required to submit AFCARS and NCANDS.

##### CFPSR 2009:

During the 2009 CFPSR item 24 was rated as an area needing improvement. It was reported that although Nevada was operating 'UNITY', a statewide information system that contains the required elements, information from stakeholder interviews indicated that the UNITY system does not reflect the current goal, placement or legal status for every child in foster care. Additionally, during the onsite CFPSR, reviewers determined that in a few cases identified through UNITY as in-home services cases, children were actually in foster care placements. As a result there was concern that the State does not have the ability to identify the goals and legal status for every child in foster care to ensure some children are not identified accurately in UNITY as being in foster care.

Several State-level, Carson City and Clark County stakeholders commenting on this item during the onsite CFPSR expressed the opinion that information on permanency goals, placement and legal status of children, particularly in adoptions cases, is not entered into UNITY accurately or in a timely manner. These stakeholders also noted that because UNITY is so difficult to navigate, it is difficult to correct data that have been entered incorrectly. Despite these concerns, some stakeholders suggested that UNITY can be used to generate reports on the status, demographic characteristics, location, and goals of children in foster care, as well as other types of management reports.

##### Statewide Data:

Data from surveys conducted for the CFSP in Table 24.1 provides information on Statewide Information System. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 193 responses to the survey.

How effective is the state's statewide information system (UNITY) in readily identifying the legal status, demographics, location and goals for the placement or legal status of every child in foster care. (on a scale of 1-5 with 5 being Very

effective) is presented in Table 24.1. The mean rating of 3.74 indicates that the average sentiment among respondents is that state's statewide information system (UNITY) is usually effective in readily identifying the legal status, demographics, location and goals placement or legal status of every child in foster care.

Overall, comments from stakeholders indicated that UNITY has the capacity to track to child level programs, case management, status, demographics, and current location and permanency goals for children in foster care. However, many stakeholders reported the following challenges with the UNITY system: UNITY is slow, not user friendly, difficult to navigate, difficult to use and is often down. Data is not entered timely to provide better reporting; data is not entered consistently which causes validity of the data extracted to be in question. Many data reports are broken or not designed correctly, and it is difficult to get information or data that is needed because it is not in an accessible format within UNITY. Reporting is not effective for management or supervisors to monitor performance.

**Table 24.1 Survey Question**

**How Effective overall is the State's statewide information system (UNITY) in readily identifying the legal status, demographics, location and goals for the placement or legal status of every child in foster care?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
3.11%	4.15%	26.42%	48.70%	17.62%	193	3.74	0.78
(6)	(8)	(51)	(94)	(34)			

N=Number of Survey Respondents  
SD=Standard Deviation

The PIP associated with the 2009 CFSP identified that this systemic factor was to be addressed during the PIP implementation specifically under Primary Strategy (5) of the PIP which focuses on "Expanding Service options and creating flexibility for services to meet the needs of children and families." To meet the parameters under this goal, the state worked on several objectives,

- The first objective was to assess the reporting capacity of UNITY to provide program and case management data, including, but not limited to status, demographics, current location, and permanency goals for children in foster care. This assessment was completed. UNITY has the capacity to provide reports to system users regarding all functions that the system supports. This includes program and case management reports covering services provided to children, their status, demographics, location, and permanency goals. Currently there are over 60 scheduled reports available to the agency and external stakeholders. Many other reports can be run on demand. Additionally, the Information Management Services (IMS) unit with DCFS supports the agency by responding to ad hoc data requests and requests for new, standard reports.

Although the assessment has been completed, DCFS continues to evaluate its usage of data. Program and technical staff continue to review and analyze current UNITY reports with the intent of ensuring their accuracy and usability. IMS continues to develop additional reports and to modify current reports to ensure a thorough monitoring of specific data indicators that track the outcomes of services for children and families. Recently, the agency started a new initiative to help managers and data analysts increase their skills in using data. A highlight of this initiative is training that was provided by the Casey Foundation.

- The second objective under this goal was for IMS to assess the accessibility of the system to staff and external stakeholders (who require access) in all areas of the state. This objective has been met as UNITY is currently available to all agency staff and certain external stakeholders in all areas of the state. A current project to convert UNITY to a web-based application will further improve this accessibility. The web technology will expand the number and types of external entities that can access UNITY and it will set the stage for the future implementation of mobile applications, providing better access to case workers who are performing duties in the field.
- A third objective was for IMS to develop a mechanism for linking the UNITY system with the Quality Improvement Case Review efforts to ensure a continuous quality assurance feedback loop, including methods for monitoring data

consistency. In January 2011 IMS implemented a QICR tool within UNITY. The tool provides Sample Selection, Sample Management, Case Review, and Reporting functionality for case reviewers. Currently, the tool supports the reviews of 9 CFSR items. Within the next year IMS anticipates adding functionality for the remaining 14 items.

A fourth objective was for IMS to assess the quality assurance mechanism for ensuring that information generated from the UNITY system is complete, accurate, and current and includes the locations of all children in care, including those in relative care, unlicensed placements, voluntary placements and unpaid placements. UNITY has many quality assurance mechanisms for helping ensure that data gets entered into UNITY correctly. Features such as drop down lists and radio buttons ensure that only proper values for some data elements are entered. Window and other edits ensure that data entered is consistent with other related data. Window edits also ensure that mandatory data elements are entered. UNITY's missing data functionality generates alerts when certain data elements have not been entered or when certain tasks have not been completed in a timely manner. These features work together to help ensure that the data stored in UNITY is accurate and current. This work continues as IMS adds new features and functionality to UNITY as the practice changes due to new laws and regulations.

As previously mentioned, the state recently implemented a CQI framework. As part of this effort a Data Subcommittee has been formed and given as part of its charge the task of improving Data Quality. IMS has representation on this committee. Initially the committee will be focusing on improving data associated with NCANDS.

- A final objective was for IMS to develop tracking systems for monitoring children in out-of-home care, including those served by Title IV-E agreements with other agencies. UNITY currently has functionality that allows system users to record the placement of children that have been removed from their home and placed in an out-of-home setting regardless of the placing agency. Placement status of children can be viewed on-line and through reports. The ICPC subsystem of UNITY allows the tracking of children that are placed out-of-state. UNITY continues to meet this objective.

Additionally, from March 6-10th, 2006 staff of the Children's Bureau, ACF Region IX, and the office of Information Services (OIS) conducted an Assessment Review of Nevada's AFCARS. The AFCARS data used for the review was from the report period April 1-September 30, 2005. At that time the State of Nevada and ACF entered into an AFCARS improvement plan. Nevada continues to work towards improvement of the AFCARS data. Once ACF and the state agree that the quality of the data is acceptable the AFCARS improvement plan will be considered complete.

As of the beginning of 2014 of the 48 items identified by the AFCARS Improvement Plan (AIP):

- 27 (56%) have been resolved;
- 13 (27%) have been potentially resolved and are currently being reviewed by the Children's Bureau;
- 8 (17%) still require resolution by IMS

## **Strengths/Concerns (Information System)**

UNITY has the capacity to track to the child level all programs, case management, status, demographics, current location and permanency goals of children in foster care. Staff has the ability to search for children online, access reports through UNITY by program, area, jurisdiction and location. Stakeholder comments around UNITY being user-friendly do not speak to its functionality. However, stakeholder comments concerning timely data and valid reporting speaks to functionality as it relates to data quality. For data to be considered quality it must be accurate, complete, timely and consistent in definition and usage across the entire state. This is part of a functioning CQI system, and is being addressed under Item 31 Quality Assurance.

## Systemic Factor B: Case Review System

During the 2009 CFSR Nevada was not in substantial conformity with the systemic factor of Case Review System.

### *Item 25: Written case plan*

#### Requirements:

Nevada Revised Statutes 432B.540, 553 and 580 require the agencies which provide child welfare services to adopt a plan for permanency in accordance with the requirements and timeframes in the Adoption and Safe Families Act of 1997 (ASFA); including periodic review by the Court. Further, the plan must include; a description of the type, safety and appropriateness of the home or institution in which the child could be placed, including, without limitation, a statement that the home or institution would comply with the provisions of NRS 432B.3905, and a plan for ensuring that he or she would receive safe and proper care and a description of his/her needs, a description of the services to be provided to the child and to a parent to facilitate the return of the child to the custody of his parent or to ensure his/her permanent placement and the appropriateness of the services to be provided under the plan.

Nevada Administrative Code 432B.190 requires that each case have a written case plan which identifies barriers to the provision of a safe environment for the child, clarifies responsibilities of the involved persons to address those barriers, and defines the overall goals of the case and the step-by-step proposed actions of all persons to reach the goal within a specified time. Each case plan must be reviewed and signed by the supervisor of the caseworker and updated at least every 6 months. Each case plan must include identifying information, a statement of the goal, objectives and activities of the case, and the time to meet each goal, objective and activity. Case plans must be realistically related to the familial situation, safeguard the child, and help the parents to gain the confidence and capacity to care appropriately for their child, and be sufficiently flexible to allow changes in the situation and the use of the services based on a continuing reevaluation of how the child is being affected. Parents must be encouraged to participate in the development of a written agreement for services and engage in a set of processes for receiving resources.

0204.0 Case Planning Policy, based upon the existing statutory authority and regulations cited requires all cases opened for service to have a written case plan. This plan must be developed through a process of engaging the family, gathering information, evaluating it with the family and eliciting goals and solutions from the family. A Child and Family Team (CFT) is to be convened for decision making about desired outcomes and determining with the family and team what activities should be performed, by whom, how, and when to achieve proposed actions. Case planning is a family centered process that focuses on family strengths and resources to assist the parents in building protective capacity and increasing family functioning.

#### CFSR 2009:

Item 25 was rated and area needing improvement. Although the state provides a process to ensure that each child has a written case plan, information from the Statewide Assessment indicated that, based on data from UNITY, only 53 percent of children had case plans. In addition, during the onsite CFSR, reviewers determined that the agency had made diligent efforts to involve mothers in case planning in 62.5 percent of the applicable cases and father in case planning in 57 percent of the applicable cases.

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that a case plan is developed for each child. Most stakeholders also indicated that the child welfare agencies generally are effective in engaging parents in case planning, primarily through the use of the CFT and, In Washoe County, the Family Solutions Team meetings. However, a few stakeholders reported that the CFT is not held consistently and that parents are not involved in case planning consistently.

Statewide Data:

In the 2014A AFCARS submission, 89% of children in care during the period had a case plan goal established. Additionally, Nevada has continued to conduct QICRs since implementation of the PIP on this item. In the following Table 25.1 is the most current case review data as it relates to CFSR item 18.

	QICR 2011	QICR 2012	QICR 2013	QICR 2014
Item 18: Child and Family involvement in Case Planning	44.07% (n=26)	61.30% (N=38)	56.67% (n=34)	61.7% (n=37)

Since meeting the PIP target in 2012 Item 18 has shown some improvement.

Data from surveys conducted for the CFSP in Table 25/2 provides information on child and family involvement in Case Planning. Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 166 responses to the survey.

How effective is the child welfare agency on involvement of children and families in case planning (on a scale of 1-5 with 5 being very effective) is presented in Table 25.2. The mean rating of 3.28 indicates that the average sentiment among respondents is that child welfare agencies are sometimes effective in involvement of child and parents in case planning.

**Table 25.2 Survey Question**

**How Effective overall is the Child Welfare Agency on involvement of children and families in case planning?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
6.02% (10)	15.06% (25)	34.34% (57)	34.34% (57)	10.24% (17)	166	3.28	0.54

N=Number of Survey Respondents  
SD=Standard Deviation

**Item 26: Periodic reviews**

*Requirements:*

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

<sup>5</sup> Case Review Data is four quarter rolling data.

respect to children in their care and to offer information about the services received by the child and family.

**CFSR 2009:**

Item 26 was rated as strength. Information for the Statewide Assessment and stakeholder interviews indicated that the State provides a process for the periodic review by a court of the status of each child in foster care every 6 months, and often more frequently.

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that periodic hearing are held in court to review the status of children in foster care at least every 6 months and often more frequently. Some stakeholder indicated that although continuances occur, they are rare and usually delay the hearing for not more than 2 weeks. Some stakeholders also indicated that the period review hearing address issues pertaining to progress in achieving case goals.

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 26.1 provide information on Periodic Reviews. Respondents included Stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 74 responses to the survey.

How effective is the child welfare agency in providing a process for the periodic review of the status of each child, no less frequently than once every 6 months by the court (on a scale of 1-5 with 5 being Very effective) is presented in Table 26.1. The mean rating of 4.16 indicates that the average sentiment among respondents is that Child Welfare Agencies are usually effective in providing a process for the periodic review of the status of each child, no less frequently than once every 6 months by the court.

**Table 26.1 Survey Question**

**How Effective overall is the Child Welfare Agency in providing a process for the periodic review of the status of each child, no less frequently than once every 6 months by the court?**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
2.70%	4.05%	2.16	36.49%	44.59%	74	4.16	0.97
(2)	(3)	(9)	(27)	(33)			

N=Number of Survey Respondents  
SD=Standard Deviation

***Item 27: Permanency hearings***

**Requirements:**

Nevada Revised Statute 432B.590 mandates that the court shall hold a hearing concerning the permanent placement of a child no later than 12 months after the initial removal of the child from his home and annually thereafter, or within 30 days a finding that agency which provides child welfare services is not required to make the reasonable efforts toward reunification pursuant to NRS 432B.393.3. In compliance with ASFA, DCFS Policies 0206 Court Hearing Notification and 0514 Termination of Parental Rights (TPR) require agencies to make and finalize permanency plans by no later than 12 months after the child's removal and provide notice by certified mail to all the parties to any of the prior

proceedings and parents and “any persons planning to adopt the child, relatives of the child or providers of foster care who are currently providing care to the child.”

**CFSR 2009:**

Item 27 was rated as strength. Information from the Statewide Assessment and stakeholder interviews indicated that the state provides a process to ensure the each child in foster care has a permanency hearing in court no later than 12 months after child’s removal from home and that permanency hearing are held in a timely manner and address the permanent plan for the child.

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that permanency hearings are held in a timely manner and that these hearing address the permanent plan for the child. Several stakeholders noted that permanency hearings are held as frequently as every 3 months (every 6 months in rural areas) and that permanency issues are addressed at periodic hearings as well as permanency hearings. Some Carson City and Clark County stakeholders expressed concern that permanency hearings are not effective at moving children toward permanency.

**Statewide Data:**

Court data indicated for calendar year 2013 the median days statewide to the 1<sup>st</sup> Permanency Hearing was 358 days.

**Court Performance Measures  
Statewide  
From 01-01-2013 To: 12-31-2013**

Court	Nbr of Children	Median Days to 1st Permanency Hearing	Median Days from 1st to 2nd Permanency Hearing	Median Days from 2nd to 3rd Permanency Hearing	Median Days from 3rd to 4th Permanency Hearing	Median Days from 4th to 5th Permanency Hearing	Median Days for all Subsequent Hearings
TOTAL	5203	358	182	182	182	182	182
1ST/CARSON	65	362	361	367	349	0	0
1ST/STOREY	2	422	273	21	0	0	0
2ND/WASHOE	870	356	182	182	273	343	364
3RD/LYON	54	339	206	245	217	192	189
4TH/ELKO	37	367	343	203	224	376	325
5TH/ESMERALDA	3	554	0	0	0	0	0
5TH/MINERAL	20	358	35	154	332	294	353
5TH/NYE	97	361	182	181	175	182	182
6TH/HUMBOLDT	14	343	427	201	311	377	367
6TH/LANDER	14	351	30	320	35	91	354
6TH/PERSHING	13	364	273	161	154	182	167
7TH/EUREKA	2	480	49	196	14	14	259
7TH/LINCOLN	2	426	150	301	0	0	0

7TH/WHITE PINE	31	373	217	245	97	191	267
8TH/CLARK	3915	359	182	182	182	182	182
9TH/DOUGLAS	12	367	297	315	0	0	0
10TH/CHURCHILL	48	354	168	182	161	182	182

Source: UNITY Report CFS775

Data from surveys conducted for the CFSP in Table 27.1 provide information on Permanency Hearings. Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 68 responses to the survey.

How effective is the child welfare agency in providing a process that ensures each child in foster care under the supervision of the Agency has a Permanency hearing in a qualified court no later than 12 months from the date the child entered foster care (on a scale of 1-5 with 5 being very effective) is presented in Table 27.1. The mean rating of 3.90 indicates that the average sentiment among respondents is that child welfare agencies are usually effective in providing a process that ensures each child in foster care under the supervision of the child welfare agency has a permanency hearing in a qualified court no later than 12 months from the data the child entered foster care..

**Table 27.1 Survey Question**

**How Effective overall is the Child Welfare Agency in providing a process that ensures each child in foster care under the supervision of the Agency has a Permanency hearing in a qualified court no later than 12 months from the date the child entered foster care?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
1.47%	8.82%	20.59%	36.76%	32.35%	68	3.90	0.73
(1)	(6)	(14)	(25)	(22)			

N=Number of Survey Respondents  
SD=Standard Deviation

### ***Item 28: Termination of parental rights***

#### **Requirements:**

NRS 432B.590 mandates that no later than 12 months after the initial removal of the child from his/her home and annually thereafter, a hearing shall be held concerning the permanent placement of the child. At the hearing the court reviews the plan for permanent placement of the child and determines whether the reasonable efforts required have been made. If the child has been placed outside of his home for 14 months of any 20 consecutive months, the best interests of the child must be presumed to be served by the termination of parental rights and documentation of the plan to TPR is included in the permanency plan. The court is required to use its best efforts to ensure that the procedures required in TPR are completed within 6 months from that date. NRS 432B.630 requires action be taken to terminate parental rights on a newborn child who is delivered to a provider of emergency services, absent parent contact with the child welfare agency. The NRS also identifies those circumstances in which the agency is not required to make reasonable efforts for reunification and addresses the issue of compelling reasons when it would not be in the child's best interest to file for TPR. Compelling reasons must be detailed in the case file and reports to the court. Examples of compelling reasons are outlined in the DCFS 0514 Termination of Parental Rights policy.

NRS Chapter 128 details the process of TPR, specifically who files the petitions, procedures for TPR on ICWA cases, notice of hearings (publication), testimony, appointment of attorneys, specific considerations to various circumstances

and restoration of parental rights in certain situations. Pursuant to NRS 128.170, a child (or the legal guardian of the child) who has not been adopted, and whose parental rights have been terminated or relinquished, may petition the Court for restoration of parental rights. The natural parent or parents for whom restoration of parental rights is sought must be fully informed of the legal rights, obligations and consequences of restoration and must consent, in writing, to the petition.

Policy 0514 requires timely permanency planning for children in the care and custody of the child welfare agency., and that planning must therefore begin the day the child enters care. The child welfare agency is required to make and finalize alternate permanency plans no later than 12 months after the child's removal. Policy states that absent compelling reasons not to file a TPR, the petition must be filed within 60 days of the courts determination that reasonable efforts are not required. Acceptable compelling reasons are outlined in the TPR policy. Referral to terminate parental rights is initiated when adoption is identified as the permanency goal for the child and legal grounds for termination exist. Upon referral for TPR, the worker will concurrently seek a court order to initiate efforts to recruit for, and/or identify, an adoptive family for any child(ren) not already placed in a pre-adoptive home.

### CFSR 2009:

Item 28 was rated as an areas needing improvement. Although the state had a process for TPR proceedings in accordance with the provisions of ASFA, information from stakeholder's interviews indicated that TPR petitions are not filed consistently in a timely manner throughout the State. In addition, during the onsite CFSSR, case reviewers determined that ASFA requirements with regard to filing for TPR were met in 84 percent of applicable cases.

### Statewide Data:

Various Stakeholders commenting on this item during the onsite CFSSR identified the following reasons for delays in timely filing of petitions for TPR:

- A backlog in the District Attorney's office resulting in delays in filing for TPR (Clark County Stakeholders)
- A reluctance to file TPR before the court has ordered a goal of adoption and ordered the agency to file for TPR (Carson City Stakeholders)

Despite these concerns most Washoe County stakeholders commenting on this item using the onsite CFSSR expressed the opinion that TPR petitions in that region are filed in a timely manner, and most stakeholders express the opinion that compelling reasons not to file TPR generally are documented in the case file and presented to the court during permanency hearings. Stakeholder's indicated that the extension of reunification efforts when parents are pursuing case plan requirement is considered a compelling reason not to pursue TPR.

### Statewide Data:

Court data indicated for calendar year 2012 the median days to Terminate Parental Rights was 699 days. In the data presented below for calendar year 2013 the median days to Terminate Parental Rights decreased statewide from 699 days to 599 days an improvement over the previous year of 100 days.

**Court Performance Measures  
Statewide  
From 01-01-2013 To: 12-31-2013**

Court	Nbr of Children	Nbr of Parents with Termination	Median Days to Terminate Parental Rights	Nbr of Parents with Relinquishment	Median Days to Relinquishment of Parental Rights	Nbr of Parents with Termination or Relinquishment	Median Days to Termination or Relinquishment of Parental Rights
TOTAL	5203	1805	599	861	629	2666	608
1ST/CARSON	65	7	701	25	624	32	699
1ST/STOREY	2	4	513	0	0	4	513
2ND/WASHOE	870	305	601	207	616	512	605
3RD/LYON	54	16	818	13	434	29	620
4TH/ELKO	37	7	596	12	640	19	640
5TH/ESMERALDA	3	0	0	0	0	0	0
5TH/MINERAL	20	0	0	10	869	10	869
5TH/NYE	97	21	735	28	710	49	735
6TH/HUMBOLDT	14	13	752	0	0	13	752
6TH/LANDER	14	12	963	2	961	14	963
6TH/PERSHING	13	6	574	3	-1556	9	574
7TH/EUREKA	2	0	0	0	0	0	0
7TH/LINCOLN	2	0	0	0	0	0	0
7TH/WHITE PINE	31	6	983	6	856	12	856
8TH/CLARK	3915	1412	593	553	629	1965	600
9TH/DOUGLAS	12	0	0	0	0	0	0
10TH/CHURCHILL	48	18	874	12	722	30	874

Source: UNITY Report CFS775

Data from surveys conducted for the CFSP in Table 28.1 provide information on Termination of Parental Rights. Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 125 responses to the survey.

How effective is the child welfare agency in filing TPR petitions within 15 to 22 months unless compelling reason exist (on a scale of 1-5 with 5 being Very effective) is presented in Table 28.1. The mean rating of 3.39 indicates that the average sentiment among respondents is that child welfare agencies are sometimes effective in filing TPR petitions within 15 to 22 months unless compelling reason exists.

**Table 28.1 Survey Question**

**How Effective overall is the Child Welfare Agency in filing TPR petitions within 15 of 22 months unless compelling reasons exist?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
3.20%	4.80%	44.80%	44.00%	3.20%	125	3.39	0.81
(4)	(6)	(56)	(55)	(4)			

**Item 29: Notice of hearings and reviews to caregivers**

Requirements:

NRS 432B, NAC 432B and statewide policy 0206 Court Notification mandate that proper notification of court hearings and court reviews regarding the status of a child in the custody of a child welfare agency must be provided and is necessary to ensure active involvement and participation of parents, foster parents, guardians, pre-adoptive parents, and relative caregivers in the child’s safety, permanency and well-being. While internal policies and procedures regarding court notification requirements and protocols may differ between child welfare agencies, formal written notification to the aforementioned caregivers must be supplied pursuant to NRS 432B.580(6)(a)(b). Notice of the hearing must be given by registered or certified mail to all parties to any of the prior proceedings, and parents and any persons planning to adopt the child, relatives of the child or providers of foster care who are currently providing care to the child. If a child in protective custody is determined to be of Indian descent, the child welfare agency must notify the tribe in writing at the beginning of the proceedings. If the Indian child is eligible for membership in more than one tribe, each tribe must be notified.

CFSR 2009:

Item 29 was rated as an area needing improvement. Although the state provided a process for foster parents and other caregivers to be notified of reviews and hearings, information from the statewide assessment indicated inconsistencies across the state in the degree to which notice is provided to foster parents.

Some Carson City and Washoe County stakeholders commenting on this item during the onsite CFSR indicated that notice sometimes is received too late to allow the caregiver to attend the hearing. Despite these comments, some stakeholders expressed the opinion that foster parents receive notice of hearings consistently via certified mail from the agency and that they have the opportunity to be heard.

Statewide Data:

Data from surveys conducted for the CFSP in Table 29.1 provides information on Court Notification to Caregivers Respondents included stakeholders from Tribes, the Judicial System, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 73 responses to the survey.

How effective is the child welfare agency on ensuring notification to caregivers for hearings.(on a scale of 1-5 with 5 being very effective) is presented in Table 29.1. The mean rating of 3.89 indicates that the average sentiment among respondents is that the child welfare agency is usually effective on ensuring notification to caregivers for hearings.

Overall, comments from stakeholders indicated that the child welfare agency was usually effective at ensuring notification to caregivers for hearings. However, the comments from foster and adoptive parents indicated some inconsistency as to notification to caregivers. Some foster and adoptive parents indicated they received notice via

certified mail and some indicated the caseworker would call or e-mail them. A few foster and adoptive parents indicated that this was not consistent and or the information was not timely.

Additionally, foster and adoptive parents were asked if they recalled receiving notice of the most recent court proceeding for children in their care and 67.27% of the respondents indicated “yes”; 21.82% of the respondents indicated “no” and 10.91% indicated they were unable to answer.

**Table 29.1 Survey Question**

**How Effective overall is the Child Welfare Agency on ensuring notification to Caregiver for Hearings??**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
4.11%	9.59%	17.81%	30.14%	38.36%	73	3.89	0.78
(3)	(7)	(13)	(22)	(28)			

N=Number of Survey Respondents

SD=Standard Deviation

### **Strengths/Concerns (Case Review System)**

Nevada has strength on ensuring timely periodic reviews and permanency hearings. As previously stated engagement with children and parents on case planning is an area of improvement. While case plans are completed regularly by caseworkers there is a continued concern on consistent engagement of parents/children (when age appropriate) in identifying parental strengths and needs for case planning.

There has been improvement on ensuring filing of Termination of Parental Rights which has resulted in more children becoming adopted. Stakeholders indicated that child welfare agencies are sometimes effective on ensuring termination of parental rights.

Overall, comments from stakeholders indicated that the child welfare agencies were usually effective on ensuring notification to caregivers for judicial hearings. However, there is still concern that this process is not consistent statewide. Some foster parents indicated that they do not recall receiving notices for hearings.

### **Systemic Factor C: Quality Assurance System**

**During the 2009 CFSR Nevada was in substantial conformity with the systemic factor of Quality Assurance (QA) System.**

#### ***Item 30: Standards ensuring quality services***

##### *Requirements:*

Nevada has developed and implemented standards in statute, regulation and policy to ensure that children in foster care are placed in appropriately licensed homes or residential facilities, and that qualified service providers are selected for delivery of necessary services to children and their families.

Existing standards, statute, regulations and statewide policy as found in NRS 432B, NAC 432B, NRS 424 and NAC 424 require the state to ensure protection of children in foster care and monitor the placement of children in foster homes or residential facilities. As a collective these statutes and policies ensure quality service delivery including but not limited to: placement preference, adoption of foster child bill of rights, requirements of visitation with family and siblings, requirements surrounding psychotropic medications, and cultural awareness.

Nevada continues to expand and clarify standards for services provided to our vulnerable children and families. Standards for practice are integrated into state statute, regulation and statewide policy. The 2013 legislative session was particularly active for child welfare in Nevada. In total 18 changes or additions to statute (affecting child welfare) were made in 2013 legislative sessions. These changes included but are not limited to: new or revision of statute impacting delivery of foster care services, independent living programs, background clearances for individuals working with children, convening of multidisciplinary committees to evaluate child welfare in the State

Child care facilities statutes and regulations (NRS 432A, NAC 432A) establish requirements for the protection of children in facilities (educational, shelter care, and residential), and creates standards for child care including the provision of qualified service providers. These regulations include assurances that no child under the age of six is placed in a congregate care facility.

Child safety and well-being is monitored via monthly home visits between the child and the child welfare worker, which also requires the child welfare worker to meet with the child outside the presence of the caregivers. A more robust description of efforts to ensure quality visitation is found in item 19. When a concern regarding a foster home or foster provider is observed, child welfare and foster care licensing work together to monitor the home, investigate the concern and make determination if corrective action or revocation of foster license is appropriate. Collaboration with additional experts or agencies may be included as part of the process.

During the week of April 21, 2014 the Children's Bureau (CB) together with the Division of Child and Family Services (DCFS) completed Nevada's title IV-E Foster Care Eligibility Review. As of this reporting final results are not yet available.

### CFSR 2009:

During the 2009 CF SR item 30 was rated as strength. Information from the statewide assessment stakeholder interviews indicates that the state has standards, protocols, and guidelines in place related to foster home licensing, child visitation, and service contracts.

Most stakeholders commenting on this item during the onsite CF SR expressed the opinion that the safety of children in foster care is protected by standards, protocols, and guidelines for foster home licensing, child visitation, service contracts, and casework practice. Some Clark county stakeholders indicated that new policies recently implemented are designed to improve service quality and the stands of service provision.

## **Item 31: Quality assurance system**

### Requirements:

Nevada Revised Statutes 432B.180(3) requires DCFS to monitor the performance of child welfare agencies through data collection, evaluation of services and the review and approval of agency improvement plans pursuant to NRS 432B.2165. Nevada Administrative Code details the activities required concerning evaluation of services provided by the child welfare agencies and actions upon determination of noncompliance with certain provision.

On August 27, 2012 the Administration for Children and Families (ACF) published Informational Memorandum (IM) ACYF-CB-IM-12-07 to provide information on the establishment and maintenance of State CQI systems. It was discovered during the program improvement plan phase of the second round of the Child and Family Services Review (CF SR) that many State Quality Assurance (QA) systems needed extensive refinements to assess and measure improvements on an ongoing basis specifically with regards to CF SR outcomes and systemic factors. ACF has advised that during the period that ACF considers how to revise the CF SR process States are advised to maintain their QA systems and enhance them through a continuous quality improvement approach.

### CFSR 2009:

Item 21 was rated as strength. Nevada is operating an identifiable QA system based on the CSFR tool and methodology and results in an Agency Improvement Plan (AIP) for each child welfare agency that is monitored by the Decision making Group (DMG) at the state level. Although the state is operating an identifiable QA system, the finding of the 2009 CSFR raises questions regarding the State's QA process. Specifically, the state's ratings for many individual items were considerably higher than the ratings of the Federal 2009 CSFR case review findings. As a result, there is a concern that the state's QICR process may not be effective in identifying the strengths and needs of the service delivery system, and therefore may not result in an accurate evaluation of the effectiveness of program improvement measures.

Various stakeholders commenting on this item during the onsite CSFR reported the following QA activities:

- The State conducts annual reviews in each jurisdiction that are modeled on the Federal CSFR.
- The State-level reviews result in an AIP developed by each child welfare agency that is reviewed monthly by the State-level DMG.
- Supervisory case reviews are conducted at the local level to monitor casework practice
- Management reports from UNITY are reviewed regularly to monitor key case contacts and milestones.

Despite these positive comments, several stakeholders indicated that UNITY and other data reports are not useful in tracking and improving the quality of services. Some state-level stakeholders indicated that the finding of QA activities do not result in changes to the caseworker training curriculum. In addition, some Carson City, Clark County, and Washoe County stakeholders indicated that, although the results of supervisory case reviews and other data are shared with State-level policymakers, no feedback is provided to the localities on how these reviews are used to inform policy or monitor improvement.

### Statewide Data:

Nevada is continuing to work towards a re-designed CQI system. A goal of the 2015-2019 CFSP is specific to Continuous Quality Improvement and is identified as Goal 4). **The state will be able to identify the strengths and needs of the child protective service delivery system.**

To guide those efforts a Statewide Quality Improvement Committee (SQIC) is meeting monthly to address the redesign of a Nevada CQI System. Nevada has conducted the following activities in efforts to work towards re-design of the system.

- Finalized Nevada's CQI framework which incorporates the foundational components, and identified plans, strategies and next steps at working towards an enhanced CQI System. As part of Nevada's framework all three jurisdictions are organizing, enhancing and developing **local Quality Teams**.
- Created a Charter for a Statewide Quality Improvement Committee (SQIC).
- Nevada continues to convene the SQIC monthly with representation from a variety of stakeholders that include each child welfare jurisdiction, Training partners, Bureau of Indian Affairs and the Court Improvement Project.
- Nevada has requested an update to the Case Review Tool (modeled after the CSFR) from Information Management Systems (IMS) that will broaden the scope of the reviews, and allow Nevada to better identify issues related to well-being.
- SQIC continues to regularly monitor casework activities designated as critical to quality child welfare services. Monthly, quarterly and annual progress reports are provided to SQIC and Agency Administration. A standing agenda item is "Caseworker Visits with Children".
- SQIC has created subcommittees focusing upon improving the case review process, and improving accuracy,

and validity of established data reports as it relates to **item 24 Statewide Information System**. Also, a workgroup was created to develop a statewide CQI policy.

- SQIC continues to actively solicit information from our community stakeholders, and this process will be enhanced over the next five years. In the past year surveys have been collected to gather more data regarding community experience and perceptions of child welfare services, as well as focus groups to solicit candid feedback as it relates to the services provided by child welfare. To date data from these resources are still being collected and aggregated.

As part of efforts to implement continuous quality improvement statewide, FPO in collaboration with the three child welfare agencies, continues to conduct qualitative improvement case reviews in each agency at least annually. Interviews with parents, foster parents and other relevant stakeholders are a part of the review process. Case sampling and review methodology remains unchanged from what was negotiated during the PIP implementation period. An expansion to the new CFSR tool is anticipated over the next year as Nevada attempts to expand and enhance the case review system.

Currently, the following 9 items were reviewed and continue to be reviewed but may not be applicable for every case:

- **Item 1:** Timeliness of Investigations
- **Item 3:** Services to Prevent Removal/Re-entry
- **Item 4:** Risk and Safety Assessment
- **Item 7:** Permanency Goal
- **Item 10:** OPPLA
- **Item 17:** Needs and Services to Children, Parents and Foster Parents
- **Item 18:** Child and Family Involvement in Case-planning.
- **Item 19:** Caseworker Visits with Children
- **Item 20:** Caseworker Visits with Parents.

Table 31.1 below illustrates the previous PIP targets and Nevada's performance current to date.

**Table 31.1 QICR 2014 Performance**

Items	Baseline PIP Targets 2011	2014 statewide performance
<b>Item 1</b> Timeliness of investigation	80.4%	65.60%
<b>Item 3</b> Services to prevent removal/re-entry	74.9%	91.40%
<b>Item 4</b> Risk and safety assessment	52.5%	79.00%
<b>Item 7</b> Permanency goal	62.0%	71.40%
<b>Item 10</b> OPPLA-permanency goal	61.3%	42.86%
<b>Item 17</b> Services to child, parents & foster parents	46.0%	59.70%
<b>Item 18</b> Child and family involvement in case planning	48.2%	61.70%
<b>Item 19</b> Case worker visits with children	60.5%	80.60%
<b>Item 20</b> Case worker visits with parents	49.7%	56.30%

Aggregate case review four quarter rolling data completed statewide April 2013 through April 2014.

#### DATA in Quality Assurance

- The DCFS Technology Investment Request (TIR) that was approved during the 2011 Legislative Session will enhance the UNITY system, and was projected to be completed by June 30, 2013 but has been delayed. A

request for assistance with funding for a data warehouse was disallowed by ACF as an operational SACWIS expense.

- In May 2012 DCFS joined membership to Chapin Hall's Center for State Foster Care and Adoption Data. On June 10<sup>th</sup>, 2013 Casey Family Programs provided data training to approximately 40 state staff Casey Family Programs will be returning in the fall of 2014 for additional data training to DCFS staff. Two staff members from DCFS attended the Chapin Hall Advanced Analytics training the last week of June, 2013. The ability to run Nevada permanency reports is one of the main benefits of joining the center.
- During the 2011 Legislative Session SB447 was passed. The purpose of this bill was to implement an annual capped block grant to support child welfare services. DCFS is required to ensure that child welfare agencies carry out corrective actions when the agencies are not in compliance with the law or with statewide plans or policies. As a part of a system of quality assurance and improvement this bill is requiring an agency which provides child welfare services to carry out any identified corrective actions and develop and implement corrective measures to improve performance. Each agency which provides child welfare services is required to submit an improvement plan to DCFS that must cover a period of 2 years that includes specific performance targets for improving the services provided to children in the care of the agency. Each year the agencies will be required to submit data to DCFS demonstrating the progress made toward meeting the specific performance targets. DCFS will administer a program that will award incentive payments to an agency which provides child welfare services based on improved performance targets. Lastly, DCFS is required to prepare and submit a report concerning the improvement plans, and the program for incentive payments to the Governor and the Legislature on or before January 31 of each year.
- As previously indicated the SQIC is addressing through several committee's and workgroups efforts at improving/enhancing many of the functional components of a CQI system. The following is a cross reference of the functional CQI components and the CFSR items that are under review and development:
  1. Administrative Structure- CFSR item 34 Quality Assurance
  2. Quality Data Collection- CFSR item 24 Statewide Information System (improving accuracy and validity of established data reports.)
  3. Case Record Review Data and Process-CFSR item 34 Quality Assurance (the case review process)
  4. Analysis and Dissemination of Quality Data- CFSR item 34 Quality Assurance, item 24 Statewide Information System, item 38 State Engagement and consultation with Stakeholders
  5. Feedback to Stakeholders and Decision-makers and Adjustment of Programs and Process-Item 38 State Engagement and consultation with Stakeholders.

The State provides a link on the DCFS public website that references Nevada Performance Data, Case Review Results from the past three years, and historical information concerning the CFSR 2009 PIP results. This website is under development as Nevada moves forward with a re-design of its CQI system. The current information may be found at the following link <http://www.dcf.state.nv.us/> under the DCFS Index "Continuous Quality Improvement".

## **Strengths/Concerns (Quality Assurance System)**

Nevada has strength in that Nevada has developed and implemented standards in statute, regulation and policy to ensure that children in foster care are placed in appropriately licensed homes or residential facilities, and that qualified service providers are selected for delivery of necessary services to children and their families. Nevada has existing standards, statute, regulations and statewide policy that ensure protection of children in foster care. These statutes and polices ensure quality service delivery.

Nevada is currently in the development of a re-designed Continuous Quality Improvement system, and there are many areas that need development and enhancement over the next five years. There is concern over garnering and

leveraging the needed implementation supports necessary to make the needed and necessary changes throughout Nevada as it relates to full implementation of a CQI system.

## **Systemic Factor D: Staff and Provider Training**

**During the 2009 CFSR Nevada was not in substantial conformity with the systemic fact of Staff and Provider Training.**

### ***Item 32: Initial staff training***

#### Requirements:

NRS 432B.195, 432B.397, and NAC 432B.090 require the state to provide a full staff development and training program which includes a minimum of 40 hours of training related to the principles and practices of child welfare services, including specific training related to the Indian Child Welfare Act (ICWA). The State has used Training Technical Guidelines in lieu of statewide policy to outline training procedures. New policy under review will require all new child welfare staff to complete the Nevada New Worker Common Core within the first 12 months of employment and specifies the competencies and best practices that are provided within the curriculum.

#### CFSR 2009:

During the 2009 CFSR item 32 was rated as an area needing improvement. Although Nevada provided a comprehensive new Worker Core Training program, information for the stakeholder interviews indicates that in some areas of the State, this training is not adequate to provide caseworkers with the skills to support the goals and objectives of the CFSP, including conducting investigations, case-level documentation, and ICWA issues.

Among the questions asked by stakeholders commenting on this item during the onsite CFSR were whether initial training is provided for new caseworkers and new supervisors and whether that training prepares new caseworker for the job.

With regard to whether initial training is provided for new caseworkers, stakeholders expressed the opinion that New Worker Core Training is provided to all new caseworkers on a timely basis. In addition, stakeholders indicated that training attendance is tracked and monitored at the child welfare agency level. Although Washoe County and Clark County stakeholders indicated that caseworkers are assigned to a training unit initially and must complete training prior to receiving a caseload, Carson City stakeholders indicated that caseworkers in the rural region sometimes are assigned cases prior to the completion of training when there is an office with only one caseworker or when the new caseworker is experienced.

With regard to whether initial training prepares new caseworkers for the job, stakeholders expressed different opinions. Some stakeholders expressed the opinion that training prepares caseworkers for the job. However others disagreed and suggested that more training was required in critical areas such as conducting investigations, substantiating, child abuse and neglect allegations, case-level documentation; documentation for the court, the law and court process; and ICWA issues. In addition, some stakeholders indicated that training provided is not of high quality and does not prepare caseworkers to provide services.

Statewide Data:

**Table 32.1: New Workers Completing Nevada New Worker Core Training since January 2009**

New Worker Training	Clark	Washoe	Rural	FPO	Other	Statewide
SFY 2009	24	11	19	5		59
SFY 2010	12	15	14	2		43
SFY 2011	23	10	11	1	4	49
SFY 2012	34	12	15	2	1	64
SFY 2013	57	8	15	3	2	85
SFY 2014	36	13	13	5	16	83
<b>TOTAL</b>	<b>186</b>	<b>69</b>	<b>87</b>	<b>18</b>	<b>23</b>	<b>383</b>

Data from a Caseworker Survey conducted for the CFSP in Table 32/1 provides information on Initial Staff Training. Respondents were caseworkers. Respondents were not required to answer the question. There were 149 responses to the survey.

How effective is Initial Training in preparing new caseworkers for the job (on a scale of 1-5 with 5 being very effective) is presented in Table 32.1. The mean rating of 2.99 indicates that the average sentiment among caseworkers respondents is that Initial Training is sometimes effective in preparing new caseworkers for the job.

Overall, comments from some caseworkers indicated that training provided basic overall preparation on laws, policies and procedures around child welfare, and was useful but focused on what is taught to social workers in social work school. Many caseworkers indicated what was needed was more on the job training, more field training, training that was realistic to the issues and barriers experienced in the field with a real caseload, more side-by-side training (mentoring), and training that focused on the court process.

Additionally, caseworkers were asked if sufficient training/mentoring was provided before a caseworker receives a caseload and 54.89% indicated “no”; 25.54% indicated “yes” and 19.57% indicated “I don’t know”.

**Table 32.1 Survey Question**

**How Effective overall is Initial Training in preparing new caseworker for the job?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
8.22%	21.23%	41.78%	21.23%	7.53%	149	2.99	0.46
(12)	(31)	(61)	(31)	(11)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Item 33: On-going staff training**

Requirements:

State Statute requires employees to be responsible for their basic professional training needs and must complete a minimum of 30 hours continuing education every two years, which is consistent with the licensure requirements for Social Workers (NRS 432B.195, 432B.397, 432B.175, NAC 284.482, 284.498, 424.270, 432A.680 and 432B.090). The

state and local child welfare agencies ensure that child welfare staff receives the specialized training required to be proficient in child welfare practice. While DCFS has one general training policy, new policy is under development based on Statewide Training Technical Guidelines Manual. New policy will require each unit supervisor to develop an individual training plan with their staff which identifies the training needs of the overall unit. The training plan and identified needs are utilized by the manager to develop an overall agency training plan which is submitted to the state on an annual basis. The FPO will then utilize the agency training plans/needs to create the state's annual training plan. Currently DCFS is in the process of implementing significant changes to the state's training system and a specific training plan for SFY 2010 – 2012 (corresponding with the University Training Contracts) is in the process of being developed. Currently, training needs are identified through the Training Management Team, which is made up of the FPO Training Manager and Specialist, Child Welfare Agency representatives and representatives from the University partners.

**CFSR 2009:**

Item 33 was rated as an area needing improvement. Information from the statewide assessment indicated that, although Nevada requires licensed social workers to complete continuing education requirement and maintain licensure, not all caseworkers are licensed social workers. The state does not have minimal ongoing training requirements for caseworkers who are not licensed social workers. In addition, information for the Statewide Assessment and stakeholder interviews indicates that although some ongoing training is available to caseworkers in various parts of the state not all caseworker have the opportunity to access ongoing training.

Most stakeholders comments on this item during the onsite CFSR reported that child welfare agencies do not require ongoing training, although caseworkers who are licensed social workers are required to complete 30 hours of continuing education every two years to maintain their licenses with the licensing board. Some stakeholders indicated that although all Carson City caseworkers are licensed social workers, not all Washoe County or Clark County caseworkers are licensed social workers.

Some stakeholders indicated that specialty training is available to caseworkers but that caseload concerns reduce the ability of caseworkers to access ongoing training opportunities. In addition, Carson City and Clark County stakeholders indicated that caseworker must arrange for and pay for continuing education.

Some stakeholders reported that there is no requirement for supervisory training; but Carson City and Washoe County stakeholders noted that supervisors have organized “paired” teams of supervisors across units to promote continuous learning.

**Statewide Data:**

**Table 33.1: Ongoing Specialty Core Participants in SFY2014\***

<b>CLASS TITLE</b>	<b>CCDFS</b>	<b>WCDSS</b>	<b>RURAL</b>	<b>FPO</b>	<b>CMH</b>	<b>JJC</b>	<b>OTHER</b>	<b>TOTAL</b>
NV Supervisor Mod 1	8	1	4				1	14
NV Supervisor Mod 2	8	1	4					13
NV Supervisor Mod 3	6	1	5				1	13
NV Supervisor Mod 4	7	2	9					18
NV Supervisor Mod 5	6	1	4					11
NV Supervisor Mod 6	15							15
Searching for Heroes: Engaging Families								0
Addictions 101	18			1			3	22
Addictions 201	18		1	1	1		5	26
Addictions 202	8		1		1		14	24

Addictions 203		24	5		1		29	<b>59</b>
Child Sexual Abuse 101	22			2			5	<b>29</b>
Child Sexual Abuse 201								<b>0</b>
Child Sexual Abuse 202								<b>0</b>
Domestic Violence 101	54		5	3			6	<b>68</b>
Domestic Violence 201								<b>0</b>
Domestic Violence 202								<b>0</b>
Child Mental Health - Trauma & Neurodevelopment	35	5	6	2	1		29	<b>78</b>
Child Mental Health - Recognizing the Signs & Symptoms of Child/Adolescent Mental Health Issues	2						8	<b>10</b>
Child Mental Health - Working with and Caring for Children with Trauma and Mental Health Issues	22	5	3	1			37	<b>68</b>
Mental Health 101								
Mental Health 201								
Mental Health 202								
Domestic Minor Sex Trafficking	4						7	<b>11</b>
Lesbian, Gay, Bisexual, Transgender, & Questioning/Queer (LGBTQ) Youth & Child Welfare	5	13	2	2	3	1	23	<b>49</b>
Caring for LGBTQ Youth in Care - A Curriculum for Foster Parents		5			1		3	<b>9</b>
Spirit of Motivational Interviewing	10	36	38	1	5	3	85	<b>178</b>
Motivational Interviewing Skills Practice	2	25	35	1	5		48	<b>116</b>
What to Do? Making Ethical Decisions	59	95	17	5	1		25	<b>202</b>
Youth Development: The Vital Link	4	1	4	3	1		18	<b>31</b>
<b>TOTAL</b>	<b>313</b>	<b>215</b>	<b>143</b>	<b>22</b>	<b>20</b>	<b>4</b>	<b>347</b>	<b>1064</b>

\*Data ending May, 2013 Source: NPT Web Registration System Report July 1, 2012 – May 1

Data from a caseworker survey conducted for the CFSP in Table 32.2 provides information on on-going staff training. Respondents were caseworkers. Respondents were not required to answer the question. There were 179 responses to the survey.

How effective is the child welfare agency in providing and ensuring completion of adequate on-going training for caseworkers that addresses the skills and knowledge base needed to carry out their duties?(on a scale of 1-5 with 5

being very effective) is presented in Table 33.2. The mean rating of 3.34 indicates that the average sentiment among caseworker respondents is that on-going training is sometimes effective in addressing the skills and knowledge base needed to carry out their duties.

Overall, comments from caseworkers indicated on-going trainings are offered and informative but caseworkers commented on a variety of challenges around ongoing trainings i.e. time to attend, scheduling conflicts, case load size, notice of trainings, tracking of trainings, and location of trainings for the rural region caseworkers. Also, caseworkers identified needs for ongoing training i.e. refresher trainings, more training options, on-going training specific to program areas such as investigations or adoption, and more hands on training.

**Table 33.2 Survey Question**

**How Effective overall is on-going Training in addressing the skills and knowledge base needed to carry out your duties?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
5.59%	10.06%	39.66%	34.08%	10.61%	179	3.34	0.58
(10)	(18)	(71)	(61)	(19)			

N=Number of Survey Respondents  
SD=Standard Deviation

***Item 34: Foster and adoptive parent training***

*Requirements:*

Unlike the Nevada Partnership for Training, foster and adoptive parent training is a child welfare agency run activity in Nevada. Since the first Nevada CFSR in 2004, the agencies have been responsible for their own foster, adoptive, and kinship parent training programs. Beginning in July 2005, each child welfare agency began using the Parent Resources for Information, Development and Education (PRIDE) Pre-Service Curriculum for all initial Foster/Adoptive Parent training. However, in 2009 CCDFS began the implementation of the Partnering for Safety and Permanency–Model Approach to Partnerships in Parenting (PS-MAPP) curriculum, while WCDSS and the DCFS-Rural Region still use the PRIDE curriculum. Both trainings are facilitated by agency workers and former foster/adoptive parents and both are provided in both English and Spanish. PRIDE training is covered over 27 hours, whereas PS-MAPP varies depending on the module, but is generally 30 hours.

CCDFS, WCDSS and the DCFS Rural Region are implementing the Quality Parenting Initiative (QPI); which is one of Nevada’s approaches to strengthening foster care, including kinship care, using branding and marketing principles. It is a process designed to develop new strategies and practices that help to effectively engage the community to ensure that children have effective, loving parenting, and that the child welfare agency is recruiting high quality foster parents.

Legislation was enacted in 2007 which required DCFS to coordinate with and assist each agency which provides child welfare services in recruiting, training and licensing providers of family foster care. This includes non-profit or community-based organizations as well as public child welfare providers. The requirements for training vary, based on the type of placement. Family foster care providers, including kinship and adoptive homes, are required at minimum to receive 8 hours of initial training and 4 hours annually thereafter (NRS 424.020 & .017; NAC 127.485; and NAC 424.270). Treatment Foster Care (NAC 424.670 & .675) requires 40 hours of initial training and 20 hours annually. Group homes require initial training on specific topics within 30 days, and 30 hours annually (NRS 424.0365; NRS 432B.175 & .195; and NAC 424.670).

*CFSR 2009:*

During the 2009 CFSR Item 34 was rated as Strength. Information from the Statewide Assessment and stakeholder interviews indicated that state licensing regulations require both initial and ongoing training for foster parents, relative caregivers, adoptive parents, and staff of child care facilities and that training must be complete prior to the placement

of a child in the home.

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that there is a requirement for initial and ongoing training for foster parents, adoptive parents, and staff of child care facilities. Several stakeholders indicated that the agency provides initial training and foster parent associations provide ongoing training statewide. Some state-level stakeholders indicated that training is provided for foster parents and caseworkers to attend jointly. Some Carson City stakeholders noted that the PRIDE training is complete and prepares foster parents for the challenges of parenting children in foster care. Some Clark County stakeholders noted that in that county a new training protocol, PS-MAPP was being implemented. Some Carson City stakeholders noted that in rural areas the agency offers flexible and condensed training to facilitate the completion of training where transportation is limited

**Statewide Data:**

For the SFY 2014 approximately 1,772 individuals participated statewide in PRIDE, PS-MAPP and other advanced trainings for foster and adoptive families.

Data from surveys conducted for the CFSP in Table 34.1 provide information on foster parent trainings. Respondents included stakeholders from Tribes, the Judicial System, Foster Parents, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 208 responses to the survey.

How effective is the child welfare agency in providing foster parent training (on a scale of 1-5 with 5 being very effective) is presented in Table 34.1. The mean rating of 3.59 indicates that the average sentiment among respondents is that the child welfare agency is usually effective in providing foster parent training.

Overall, comments from stakeholders indicated that training is very important for foster parents. Some foster parents indicated that the QPI website is offering more training online which is helpful. However, many foster parents indicated some challenges around foster parent trainings i.e. access to childcare, advanced trainings typically only on weekdays during regular business hours, and better communication about training being offered.

Additionally, foster and adoptive parents were asked in thinking about all the training they had had in the last year, had training adequately prepared them in caring for the needs of foster children or youth placed in their care. Foster and adoptive parents indicated that 54.72% felt adequately prepared and 32.08% felt somewhat adequately prepared while 7.55% indicated they felt somewhat inadequately prepared and 1.89% felt very inadequately prepared.

**Table 34.1 Survey Question**

**How Effective overall is the Child Welfare Agency on providing Foster Parent Trainings?**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
2.88%	10.58%	31.25%	35.10%	20.19%	208	3.59	0.58
(6)	(22)	(65)	(73)	(42)			

N=Number of Survey Respondents  
SD=Standard Deviation

## Strengths/Concerns (Staff Training)

Nevada has strength in its focus of enhancing the new worker core curriculum, and Nevada continues to analyze curriculum to ensure courses keep up with best practices and meet current needs and requirements of workers. It is anticipated that the new revised core curriculum which has been piloted in the South, will be presented to the Nevada Decision Making Group for approval and will then be used statewide. Participant feedback will be collected and it is anticipated that tribal participation will increase through enhanced collaborative efforts over the next five years. The training curriculum for child welfare staff is a competency-based approach designed to reinforce the basic principles of good case practice and to develop specialized knowledge and skills.

Currently, caseworkers indicate the new worker core curriculum and on-going training is sometimes effective in preparing caseworkers to do their jobs. Caseworkers indicated that training is useful and provides basic overall preparation on laws, policies and procedures. However, there were comments that indicated there needed to be more on the job training and more field training. Caseworkers indicated that more mentoring was needed before they received a caseload.

Nevada has strength in that foster parent training is provided in all three child welfare agencies and initial and on-going training is seen as usually being effective. Foster parent's indicated that the QPI website is offering more training online which is helpful. However, many foster parents indicated some challenges around foster parent trainings i.e. access to childcare, advanced trainings typically only on weekdays during regular business hours, and better communication about training being offered.

## Systemic Factor E: Service Array and Resource Development

During the 2009 CFSR Nevada was not in substantial conformity with the systemic factor of Service Array and Resource Development.

### ***Item 35: Array of services***

#### Requirements:

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

#### CFSR 2009:

During the 2009 CFSR Item 35 was rated as strength. Although concerns were identified during the onsite CFSR about the accessibility of services (as indicated in item 36) and about caseworker practice with regard to assessing and meeting the service needs of children and families (as indicated in item 17), information in the Statewide Assessment and stakeholder interviews indicates that Nevada has an adequate array of key services in the state to meet the needs of children and families and has embarked upon an extensive service array assessment.

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that there is an adequate array of services available to address the needs of children and families that included prevention, placement, reunification, adoption, mental health, and treatment services. Some Washoe County stakeholders noted that the county has conducted a service array assessment to identify effective services (such as in-home family preservation services, drug court, and Project Wraparound) and to identify opportunities to develop additional services.

Statewide Data:

Data from surveys conducted for the CFSP in Table 35.1 provide information on service array. Respondents included stakeholders from Tribes, the Judicial System, Foster Parents, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 242 responses to the survey.

How effective is the child welfare agency's array of services in meeting the needs of children and families. (on a scale of 1-5 with 5 being very effective) is presented in Table 35.1. The mean rating of 3.43 indicates that the average sentiment among respondents is that the child welfare agency's array of services is sometimes effective in meeting the needs of children and families.

Overall, comments from stakeholders indicated that this depends on the area of the state. Some communities have more resources than others. Typically the metropolitan areas have more services while the Rural Region areas of the state have fewer services. Many stakeholders indicated that statewide there is a need for more in-home (family preservation) services and some indicated a need for more mental health services and post adopt services.

**Table 35.1 Survey Question**

**How effective is the child Welfare Agency's array of services in meeting the needs of children and families?**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
1.65%	11.57%	43.39%	28.51%	14.88%	242	3.43	0.56
(4)	(28)	(105)	(69)	(36)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Item 36: Service accessibility**

Requirements:

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

CFSR 2009:

During the 2009 CSFR Item 36 was rated as an Area Needing Improvement. Information from the Statewide Assessment and stakeholder interviews indicated that many key services are not accessible to families and children in all areas due to gaps in services and in transportation resources in some parts of the state, especially in rural areas. Key services noted to be insufficient to meet needs were in-home services, substance abuse treatment, mental health treatment, domestic violence treatment, foster homes, post-adoption services, and substance abuse services.

Most stakeholders commenting on this item during the onsite CSFR expressed the opinion that the state generally does not have the capacity to provide services to meet the needs of children and families throughout the state. In addition, many stakeholders raised concerns about the lack of service providers willing to accept Medicaid and the general lack of transportation resources to assist children and families in accessing services, particularly in the Rural Region. In addition, various stakeholders identified the following services as insufficient to meet the needs of the children and families served by child welfare agencies:

- Residential treatment for children
- Post-adoption support services
- Health services

- Mental health assessment and treatment services, including psychiatric services for children
- In-patient and out-patient substance abuse treatment services
- Placement prevention and in-home family support services
- Domestic violence services
- Foster homes
- Housing

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 36.1 provide information on Service Accessibility. Respondents included stakeholders from Tribes, the Judicial System, Foster Parents, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 254 responses to the survey.

How effectively are services made accessible to families and children (on a scale of 1-5 with 5 being very effective) is presented in Table 36.1 The mean rating of 3.44 indicates that the average sentiment among respondents is that the child welfare agency is sometimes effective in making services accessible to families and children.

Overall, comments were very similar to item 35 in that this depends on the area of the state. Some communities have more resources than others. Typically the metropolitan areas have more services while the Rural Region areas of the state have fewer services.

**Table 36.1 Survey Question**

**How effectively does the Child Welfare Agency make services accessible to families and children>**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
1.97%	11.42%	42.91%	27.95%	15.75%	254	3.44	0.55
(5)	(29)	(109)	(71)	(40)			

N=Number of Survey Respondents

SD=Standard Deviation

Additionally, stakeholders were asked what services were currently in short supplies across the state and stakeholders identified the following:

- Child Care and Transportation
- Mental Health Services for adults and children that accept Medicaid
- Housing
- Substance Abuse services for Adults
- Bilingual services
- Dental Providers that accept Medicaid
- Psychiatric Services
- Post-Adoption Services
- (In-home Services
- Medicaid Providers
- Domestic Violence

### **Item 37: Individualizing services**

#### **Requirements:**

NRS 432.011 states that DCFS is to ensure that a sufficient range of services are available to provide care and treatment to children and families in the least restrictive setting appropriate to their needs.

#### **CFSR 2009:**

During the CSFR in 2009 Item 37 is rated as an Area Needing Improvement. Although Nevada has the assessment and planning tools to identify individualized service needs to meet the unique needs of children and families, information from the Statewide Assessment and stakeholder interviews indicates that the state does not have the capacity to provide these services consistently to all or most families statewide due to the lack of accessibility of many of the key services in some parts of the State.

Most stakeholders commenting on this item during the onsite CSFR expressed the opinion that the state's three child welfare agencies generally have the assessment and planning tools to individualize service plans to meet the unique needs of families. These stakeholders noted that families participate in the design of service plans through the CFT and that these service plans are individualized. Some Carson City and Washoe County stakeholders noted that individualization of services is enhanced in those areas due to the use of Spanish-speaking service providers, but there are not enough Spanish-speaking service providers to meet the needs of the population. In addition, some Washoe County stakeholders noted that in that county, individualization of services is enhanced by the use of flexible funding.

However, some Clark County stakeholders indicated that budgetary restrictions result in case plans that are built based on the services available rather than the needs of the family. A few Clark and Washoe County stakeholders indicated that, although service plans can be tailored to meet the needs of families, case plans reflect similar sets of services provided to all families.

#### **Statewide Data:**

Data from surveys conducted for the CFSP in Table 37.1 provide information on individualizing services. Respondents included stakeholders from Tribes, the Judicial System, Foster Parents, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 201 responses to the survey.

How effectively is the child welfare agency in contracting with service providers in order to provide the most appropriate services to families and children (on a scale of 1-5 with 5 being very effective) is presented in Table 37.1. The mean rating of 3.36 indicates that the average sentiment among respondents is that the child welfare agency is sometimes effective in contracting with service providers in order to provide the most appropriate services to families and children.

Overall, comments from stakeholders indicate that limited resources make it a challenge for the agencies to individualize services. The ability to assess the families for the needed services exists but the challenge is having the service available to ensure individualization.

**Table 37.1 Survey Question**

**How effective is the Child Welfare Agency in contracting with service provides in order to provide the most appropriate services to families and children.**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
1.99%	10.95%	44.28%	34.33%	8.46%	201	3.36	0.64
(4)	(22)	(89)	(69)	(17)			

N=Number of Survey Respondents  
SD=Standard Deviation

## Strengths/Concerns (Service Array)

The state and child welfare agencies contract with a variety of service providers across the state but gaps in service providers exist in some areas of the state. Stakeholders commenting on service array, service accessibility and individualizing services for children and families indicated that child welfare agencies are sometimes effective with this systematic factor.

Some communities have more resources than others, and typically the metropolitan areas have more services than the Rural Region. This makes it challenging for families and children to access services in certain areas of the state and additionally makes it a challenge to individualize services when services are not available.

## Systemic Factor F: Agency Responsiveness to the Community

**During the 2009 CFSR Nevada was not in substantial conformity with the systemic factor of Agency Responsiveness to the Community.**

### ***Item 38: State engagement in consultation with stakeholders***

#### Requirements:

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

#### CFSR 2009:

Item 38 was rated Strength. Information from the Statewide Assessment and stakeholder interviews indicates that the State engages in ongoing consultation with key stakeholders in the development of the goals and objectives of the CFSP.

Some stakeholders commenting on this item during the onsite CFSP noted that they participate in the development of the CFSP through consortia, committees, and community boards and that DCFS policy-making is a transparent process. Various stakeholders identified the following key stakeholder groups that are represented in the DCFS planning process: CIP, CASA and the court, CRP, CJS, foster parents, Tribes, caseworkers, local agencies, community service providers, and educational institutions.

#### Statewide Data:

DCFS continues to actively engage and collaborate with external stakeholders through partnering and participation in workgroups, focus groups, meetings, public presentations, and surveys for purposes related to achieving State Plan goals and objectives. External stakeholders provide information about program functioning, policy and practice, protocol development, share resources and information that are used in program development and planning. These activities are part of the monitoring process established by the Family Programs Office to monitor specific child welfare programs. Each program area identifies activities and stakeholders as part of its plan and provides reports and data about how the objectives are achieved relative to the overarching State Plan and federal child welfare outcome

indicators.

In accordance with the requirements at 45 CFR 1357.15(1) and (m), DCFS collaborated and engaged internal and external Stakeholders in the process of identifying shared goals and objectives in development of the 2015-2019 CFSP. Stakeholders were involved in review of the available data, and or in assessing current performance utilizing focus groups and or surveys. A compilation of this information was used to interpret the progress made by Nevada child welfare programs over the past five years. These, in consultation with the child welfare agencies, external stakeholders and surveys of program participants provided the information needed to write this plan.

**Process:** Through a collaborative process individuals or groups participated in answering core questions related to 45 individual performance indicator items.

**Surveys:** Several surveys were developed to access progress in the Outcomes of Safety, Permanency, Well-Being as well as the Systemic Factors. Several separate surveys with similar questions and themes were developed to access the largest range of respondents.

**Stakeholder Presentations & Focus Groups:** Stakeholders, including internal stakeholders – state staff and administration, and external stakeholders – members of the child welfare agencies and individuals and groups that contribute to the child welfare system in Nevada were identified to participate in group presentations and child welfare agency surveys. Also, stakeholders were invited to participate in the process through a variety of mediums, including the before mentioned surveys, focus groups, existing stakeholder meetings, review of previous federal performance data, and previous 2009 CFSP results. Table 38.1 shows the groups that participated and provided feedback directly through their regular meeting formats, focus groups or surveys. Stakeholders will continue to be involved over the next five years via an identified communication plan developed by the SQIC.

**Table 38.1: Stakeholders**

Stakeholders
Decision Making Group (DMG)
CCDFS Department of Family Services
WCDSS Department of Social Services
DCFS Rural Region
Children’s Justice Act Task Force (CJA)
Citizen’s Review Panel (CRP)
Court Improvement Project (CIP)
Court Improvement Councils (CICs)
Statewide Quality Improvement Committee (SQIC)
Nevada Partnership for Training (NPT)
Foster Parents and Adoptive Parents
Youth Advisory Board (YAB) and other Youth in Foster Care
Independent Living Providers and other Service Providers
ICWA Steering Committee
Department of Juvenile Justice
Community Partners i.e. Education

**Consultation and Collaboration with Tribes:**

The State of Nevada has 25 tribal entities that include federally recognized tribes, bands and colonies. These include Battle Mountain Band Council, Carson Colony Community Council, Dresslerville Community Council, Duck Valley Shoshone-Paiute Tribe, Duckwater Shoshone Tribe, Elko Band Council, Ely Shoshone Tribe, Fallon Paiute Shoshone Tribe, Ft. McDermitt Paiute-Shoshone Tribe, The Confederated Tribes of the Goshute Reservation, Las Vegas Paiute Tribe, Lovelock Paiute Tribe, Moapa Band of Paiutes, Pyramid Lake Paiute Tribe, Reno-Sparks Indian Colony, South

Fork Band Council, Stewart Community Council, Summit Lake Paiute Tribe, Te-Moak Tribe of Western Shoshone, Walker River Paiute Tribe, Washoe Tribe of Nevada and California, Wells Band Council, Winnemucca Colony Council, Yerington Paiute Tribe, and the Yomba Shoshone Tribe. The Bureau of Indian Affairs (BIA) has social workers that work in partnership with the State regarding issues with Nevada Tribes.

DCFS will be collaborating and consulting with the Tribal social services and Tribal leaders to expand partnerships, implement guidelines of communication, consultations and sharing of available resources to allow for the provision of constructive feedback between the agency and Tribes. As in the past reporting years, DCFS will continue to gather input, collaborate and consult with the tribes through quarterly meetings with the Inter-Tribal Council of Nevada (ITCN) Executive Board meeting with Tribal Leaders and quarterly meetings with the Department of Health and Human Services Tribal Liaison Committee. DCFS has a Nevada Indian Child Welfare Liaison position that provides technical assistance to the practice level of the statewide child welfare system including, case consultation, and training on ICWA. The position also facilitates bi-monthly meetings with the Statewide CJA Task Force Indian Child Welfare Committee (CJA ICW Committee). CJA ICW is the forum for discussion and recommendation for improving the child welfare system involving Indian children/families with regard to policies, procedures, practice interface and relating to this special group. The CJA ICW membership is comprised of all child welfare agencies in Nevada, Nevada Tribes, BIA and statewide stakeholders. It will allow for the provision of constructive feedback between the agency and Tribes regarding programs, policies, procedures and practice that may be incorporated into the State Plan. At the CJA ICW meeting on January 23, 2014, March 27, 2014 and May 29, 2014, discussion occurred with the membership to address the needs of tribes and input regarding the CFSP. DCFS will use this forum in the FY 2015 – 2019 reporting period along with the ITCN Executive Board Meetings and the ITCN Annual Conferences, wherein Tribal leaders and social workers participate. This will allow opportunities to address issues such as instituting formal consultations with tribes and identifying areas of training needs of tribes.

The Nevada Revised Statutes has embodied the provisions of the Federal Indian Child Welfare Act in several subsections of the State law. ICWA policy was developed and approved in December of 2013 by DCFS, CCDFS and WCDSS. This policy is available on the DCFS website. This policy includes the following components:

- Identification of American Indian children by state child welfare agencies and courts as they enter each states child welfare system;
- Notification of Indian parents and tribes of state proceedings involving Indian children and their right to intervene;
- Placement preferences of Indian children in foster care, pre-adoptive, and adoptive homes;
- Active efforts to prevent the breakup of the Indian family when parties seek to place a child in foster care or for adoption;
- Tribal right to intervene in state proceedings, or transfer proceedings to the jurisdiction of a tribe.

The specific measures DCFS uses to comply with the Indian Child Welfare Act are through case compliance/quality assurance review and training. In the rural regions of the state, DCFS will accomplish this through specific case reviews with the DCFS' Permanency Roundtable. The key outcome of the roundtable consultations is to provide permanency action plan for each child within the DCFS's legal custody. Training regarding Nevada's ICWA policy and procedure will be provided to the DCFS staff in each District Office. DCFS will also offer training to social service personnel of CCDFS and WCDSS. For new State and County Social Workers the mandates of ICWA are included in the mandatory Nevada CORE Training. The Nevada Children's Justice Act Task Force has published the "[Indian Child Welfare Resource Guide for Nevada](#)" that was jointly developed and finalized in 2003 by the members of the Indian Child Welfare Steering Committee. This publication was designed to assist State and county child welfare agencies on the law and contacts within Nevada Tribes. The publication is a resource guide and is available on DCFS' website. This Guide is in the processing of being updated.

The establishment of the Memorandum of Understanding will allow for greater collaboration between the state, tribe, and counties for better provision of services on and off the tribal communities in Nevada, and the reduction of trauma to American Indian children by placing them within their own communities. DCFS has executed a Memorandum of Understanding (MOU) and protocols for the social workers to implement the placement of children onto tribal land with the Yerington Paiute Tribe in 2012, which still remains in effect. A series of meetings with Tribal leadership and DCFS have occurred to establish the Memorandum of Understanding with Pyramid Lake Paiute Tribe, Fallon Paiute Tribe, the Te-Moak Band of Western Shoshone and its Councils of Battle Mountain, Elko, Wells, and South Fork and with the

Confederated Tribes of the Goshute Reservation. The Te-Moak Band of Western Shoshone was provided with the MOU template and there has been no further contact. The Attorney General representing DCFS approved the MOU for the Fallon Paiute Shoshone Tribe which was forward to the Tribe in 2012 and is still with the Tribe. MOUs with Pyramid Lake Paiute Tribe and The Confederated Tribes of the Goshute Reservation are in the negotiation process with the Attorney General of Nevada. In the 2015 – 2019 CSFP the DCFS will be presenting the MOU agreement for collaboration with the remaining Tribes that do not have MOUs in place.

In the FY 2015 – 2019 reporting period DCFS will be establishing and implementing tribal consultation specific to child welfare to create an open and meaningful consultation process between DCFS and Nevada Tribes. This will facilitate better communication and collaboration between the entities for the issues that impact Nevada's Native children to resolve the issues for the benefit of the children. DCFS will be in communication the leadership or their designee to work together to develop and establish the process.

DCFS will make the FY 2015 – 2019 Child and Family Services Plan and the Annual Progress and Services available for public review and inspection through the State's website. Additionally, APSRs are on the website. DCFS will notify Nevada Tribes through email and the meetings of ICW Committee, ITCN annual conference, ITCN Executive Board and the Department of Health and Human Services Tribal Liaison Committee. There are no Nevada Indian Tribes that have an approved CFSP. At present there is one tribe in Nevada, the Washoe Tribe of Nevada and California, in the process of applying for IV-B funding and are requesting consultation with DCFS. In the upcoming year DCFS will be implementing a consultation process.

### ***Item 39: Agency annual reports pursuant to CFSP***

#### **Requirements:**

The state is in compliance with the requirements to submit a Five Year CFSP as well as the activities, accomplishments and future initiatives which are submitted annually in the APSR in accordance with the title IV-B, subparts 1 and 2 and Section 477 of Title IV-E of the Social Security Act, CAPTA, and Federal regulations at 45 CFR Part 1357. Nevada has remained in compliance each year with these requirements and has received approval on all plans and reports since the requirement was established in 2005. The initial CFSP was implemented in 2005 and was then revised on February 28, 2007 to include ten new action steps and 73 benchmarks targeted at improving child welfare practice and systemic issues within the state. These action steps and benchmarks were incorporated into the PIP with a 90 day completion date remaining under the PIP period. The PIP items that required more than 90 days to formally complete were embedded into the CFSP and then reported in the APSR.

#### **CFSR 2009:**

Item 39 was rated as Strength. The state develops the APSR based on ongoing consultation with key stakeholders through consortia, advisory boards, committees, workgroups, and community boards.

Stakeholders commenting on this item during the onsite CSFR expressed different opinions regarding the state's effectiveness in engaging in annual consultation in developing the APSR. Most stakeholders noted that they participate in the development of the APSR through standing consortia, committees, and community boards and that DCFS policy-making is a transparent process. However, some stakeholders indicated that DCFS does not solicit input into the development of the APSR.

#### **Statewide Data:**

Through the development of a CQI system this item has been identified for development and enhancement through the work of the SQIC. Since the last CSFR, changes have occurred to ensure that stakeholders are involved in the annual reporting of the CFSP. Most of the development of the APSR is through standing consortia, committee, and community boards. The DCFS website has been expanded to facilitate the dissemination of the APSR and CFSP plans, and reports for feedback from external stakeholders. This change contributes to the transparency of program administration and allows for public examination and input. The GMU has replaced the single Title IV-B Coordinator position and has

consolidated all child welfare grants, domestic violence, and fee based programs into one fiscal unit that oversees and monitors programs and completes fiscal reports. The GMU has established an online web-based reporting system managed by the University of Nevada, Reno. Information about programs and services, public comments and surveys are available to the public.

DCFS continues to collaborate with and include stakeholders from the community as well as other agencies at every level of the child welfare service delivery continuum, ranging from planning for allocation of funding to case level decision making to changes in policy, practice and reporting requirements. This collaboration and consultation with other agencies and entities expands partnerships and the sharing of available resources. It also allows for the provision of constructive feedback to the agency about programs, policies, procedures and practice that may be incorporated into the State Plan. DCFS representation includes, but is not limited to, educational/research institutions and agencies related to drug and alcohol, health, mental health, education, domestic violence, and juvenile courts, representing various counties. Examples of statewide consultation and coordination with stakeholders in implementing the provisions of the CFSP include (but are not limited to) the following committees or organizations:

- CIP - Court Improvement Project
- CJA - Children's Justice Act Task Force
- Clark County Department of Family Services
- Clark County Foster and Adoptive Parent Association
- CRP - Citizens Review Panels
- Executive Committee to Review the Death of Children
- ICWA Steering Committee
- Inter-Tribal Council of Nevada
- Nevada Division of Child and Family Services – Rural Region
- Nevada Partnership for Training
- SAPTA (Substance Abuse Prevention and Treatment Act)
- Sierra Association of Foster Families
- Washoe County Department of Social Services
- Youth Advisory Board

#### ***Item 40: Coordination of CFSP services with other federal programs***

##### **Requirements:**

The state is in compliance with the requirements to submit the CFSP, as well as the activities, accomplishments and future initiatives which are submitted annually in the APSR in accordance with the title IV-B, subparts 1 and 2 and Section 477 of Title IV-E of the Social Security Act, CAPTA, and Federal regulations at 45 CFR Part 1357. Nevada has remained in compliance each year with these requirements and has received approval on all plans and reports since the requirement was established in 2005. The initial CFSP was implemented in 2005 and was then revised on February 28, 2007 to include ten new action steps and 73 benchmarks targeted at improving child welfare practice and systemic issues within the state. These action steps and benchmarks were incorporated into the PIP with a 90 day completion date remaining under the PIP period. The PIP items that required more than 90 days to formally complete were embedded into the CFSP and then reported in the APSR.

##### **CFSR 2009:**

Item 40 was rated as an Area Needing Improvement. Information from the Statewide Assessment and stakeholder interviews indicates that there are concerns at the state level regarding information sharing and coordination of services among state departments operating Federal or Federally-assisted programs serving the same populations, including programs operated by the Tribes.

Most stakeholders commenting on this item during the onsite CSFR expressed the opinion that the state generally is effective in coordinating child welfare services with services supported by other Federal programs. Some state-level, Carson City, and Washoe County stakeholders noted that DCFS and the local child welfare agencies work with the following programs: Medicaid, juvenile justice, behavioral health, mental health, Tribal programs, and education. However, other State-level and Clark County stakeholders indicated that services are not coordinated with services provided by other programs, including Tribal programs that serve the same population.

### Statewide Data:

Collaboration occurs with Federal Programs involved with Medicaid, Juvenile Justice, Mental Health, Child Support Enforcement, Tribal Programs and Education. The DCFS has many contracts with agencies that are funded with federal funding. Since the last CFSR, there is an ongoing collaboration with the Executive Team to Review Child Death Differential Response, the Regional Partnership Grant, the Children's Behavioral Health Consortium, the Youth Advisory Boards, the Citizen's Review Panel (North and South), the Children's Justice Act (CJA) Task Force, and the Court Improvement Project (CIP).

There are current Memorandum of Understandings (MOU) between various agencies and DCFS. The Division of Mental Health (MHDS) and the DCFS have an MOU concerning coordination and provision of services to children and families. Also there is a current MOU between the Federal Nevada Rural Housing Authority and DCFS for targeting youth who have left foster care and lack available housing. Additionally and as previously stated DCFS has executed a MOU and protocols for the social workers to implement the placement of children onto tribal land with the Yerington Paiute Tribe in 2012, which still remains in effect. A series of meetings with Tribal leadership and DCFS have occurred to establish a Memorandum of Understanding with Pyramid Lake Paiute Tribe, Fallon Paiute Tribe, the Te-Moak Band of Western Shoshone and its Councils of Battle Mountain, Elko, Wells, and South Fork and with the Confederated Tribes of the Goshute Reservation. The Te-Moak Band of Western Shoshone was provided with the MOU template and there has been no further contact. The Attorney General representing DCFS approved the MOU for the Fallon Paiute Shoshone Tribe which was forward to the Tribe in 2012 and is still with the Tribe. MOUs with Pyramid Lake Paiute Tribe and The Confederated Tribes of the Goshute Reservation are in the negotiation process with the Attorney General of Nevada. Over the next five year the DCFS will be presenting the MOU agreement for collaboration with the remaining Tribes that do not have MOUs in place.

### **Strengths/Concerns (Agency Responsiveness to the Community)**

DCFS has strength in that it continuously and actively engages and collaborates with external stakeholders through a variety of means. DCFS includes stakeholders from the community as well as other agencies at every level of the child welfare delivery continuum. Partnerships are expanded through these means and feedback from stakeholders is provided about programs, policies, procedures and practice that may be incorporated into the state plan. Also, DCFS engages in MOUs with Agencies in efforts to expand partnerships.

There is concern that while DCFS does collaborate with internal/external stakeholders there is a need to provide more structure around this process and develop a communication plan that ensures external Stakeholders are knowledgeable about state performance data. Understanding state child welfare performance data provides foundational information that ensures their participation in identifying shared goals and objectives.

### **Systemic Factor G: Foster and Adoptive Home Licensing, Approval and Recruitment**

During the 2009 CFSR Nevada was in substantial conformity with this systemic factor.

#### ***Item 41: Standards for foster homes and institutions***

##### Requirements:

For foster and adoptive homes, Nevada statutes in **NRS Chapter 424 – Foster Homes for Children** provide a framework for licensing, license renewal, inspections of foster homes and background investigations for foster care providers and adult residents. Under NRS 424, the child welfare agencies have the responsibility for licensing foster homes;,- therefore, the DCFS Rural Region, CCDFS and WCDSS have the responsibility for licensing foster homes within their jurisdiction. This responsibility also includes monitoring and providing technical assistance to foster homes. The purpose of licensing is to reduce the risk of harm to children in care. The licensing process determines whether the

applicant can provide suitable care for children. To ensure that an acceptable level of care is maintained, licenses are renewed at a minimum of every two years per NRS 424, and, a foster home visit/inspection must occur at least annually. Furthermore, FBI checks are conducted on all applicants and household residents 18 years of age and older prior to licensure and every five years thereafter.

Family foster homes fall under Nevada Administrative Code (NAC) 424 regulations. The regulations incorporate definitions, general provisions, licensing and organizational requirements, requirements for criminal background checks and child abuse and neglect checks. Also, regulations incorporate qualifications and training of personnel and adult residents, requirements for initial training and ongoing annual training, specifications for facilities, grounds and furnishings, and operation of foster homes, including requirements for supervision, care, treatment and discipline of foster children. NAC 424 foster home licensing regulations also specify standards for accessibility, facility space, immunization records, health and sanitation, food preparation, nutrition, disaster planning, fire safety, monthly fire drill records, staff/child ratios, safety factors regarding water features and required safety equipment, and transportation of children.

In 2011, a statewide NAC 424 Workgroup comprised of various representatives from across the state; DCFS, CCDFS, WCDSS, foster care agencies and foster homes was convened to address updating the regulations based upon recent federal and state laws, revisions to Nevada child welfare policies, updated procedures, best practice and removal of antiquated language that supported the use of administrative approvals and/or waivers. After a lengthy process this workgroup submitted the completed revisions to the regulations to the Legislative Council Bureau (LCB). As of May of 2014 the regulations are awaiting final approval for the LCB. It is expected that the regulations will be codified and enacted within the next couple of months.

During the 2013 Legislative Session, Assembly Bill (AB) 348 was passed which was enacted on October 1, 2013. AB 348 made significant changes to NRS 424 Foster Homes for Children; changes regarding requirements for foster care agencies doing business in Nevada and other areas that were directly impacted, and required changes to NAC 424. The NAC 424 Workgroup has reconvened to address the areas impacted by the new law and to conduct a 10 year review of the regulations.

### CFSR 2009:

Item 41 was rated as Strength. Information from the Statewide Assessment and stakeholder interviews indicated that the state has standards for foster family homes and child care institutions that are monitored regularly through licensing procedures that have been established in each of the State's three child welfare agencies.

Most stakeholders commenting on this item during the onsite CFSP expressed the opinion that the standards are in place for foster family homes and child care institutions include background checks, home studies, safety checks, licensing, and oversight by caseworkers and licensing staff. Most stakeholders also noted that licenses for foster homes and institutions are renewed annually.

### Statewide Data:

Data from surveys conducted for the CFSP in Table 41.1 provides information on Standards for Foster Homes and Institutions. Respondents included Stakeholders from Tribes, the Judicial System, Foster Parents, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 143 responses to the survey.

How effective is the state in implementing licensing or approval standards that ensure the safety and health of children in foster care or foster family homes and child care institutions (on a scale of 1-5 with 5 being very effective) is presented in Table 41.1. The mean rating of 3.73 indicates that the average sentiment among respondents is that the state is usually effective in implementing licensing or approval standards that ensure the safety and health of children in foster care or foster family homes and child care institutions.

### **Table 41.1 Survey Question**

**How effective is the State in implementing licensing or approval standards that ensure the safety and health of**

**children in foster care for foster family homes and child care institutions?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
2.80%	5.59%	27.97%	43.36%	20.28%	143	3.73	0.70
(4)	(8)	(40)	(62)	(29)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Item 42: Standards applied equally**

Requirements:

DCFS is responsible for the receipt and distribution of all federal IV-E or IV-B funds in the State of Nevada. It is a statutory duty of DCFS to administer any money granted by the Federal government under title IV-E or IV-B. NRS 432A regulates and licenses all Child Care Institutions before they can receive IV-E funds. Child Care Institutions follow 432A child care regulations which protect the health and safety of the children. 432A regulations require every employee to receive criminal background checks and a Child Abuse and Neglect check (CANS). Institutions also have to follow the ratio between caregiver and children in order to ensure supervision is adequately being met.

The state monitors compliance with foster care licensing regulations and requirements and verifies compliance by family foster homes on an annual basis. Compliance is verified by a process of annual visits as part of the license renewal process, and the prompt investigation of any complaints or concerns relating to the operation of family foster homes. Complaints that involve the health or safety of a child are investigated immediately. All other complaints must be investigated within 10 working days. Family foster homes that do not comply with initial licensing requirements as verified by annual inspections and license renewals will not receive IV-E or IV-B funds. In March 2011, ACF conducted a Title IV-E Review in Nevada, and the final report was provided in 2012. Nevada is currently awaiting the results from the Title IV-E Review that was conducted by ACF in April 2014. Washoe, Clark and the DCFS Rural Region are working collaboratively with the DCFS Program Office to make changes to the foster home regulations to ensure they are up to date with current law and in line with Federal Title IV-E requirements.

CFSR 2009:

During the 2009 CFSR Item 42 was rated as Strength. Although the state did not provide analysis or evaluation in the Statewide Assessment, information from the Statewide Assessment and stakeholder interviews indicated that the State's standards for foster family homes and child care institutions are applied equally to all entities receiving title IV-B or IV-E funds, including licensed relative foster family homes. In addition, the title IV-E Eligibility Review held in June 2008 found that cases reviewed were in compliance with all licensing requirements

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that standards for foster homes and child care institutions are applied to all licensed placements throughout the state. Stakeholders noted that relative caregivers who choose to become licensed foster parents must meet the same standards as nonrelative foster families; however, relative caregivers may complete an abbreviated training program and may receive a waiver of a non-safety requirement such as the square footage requirement. In addition, some stakeholders noted that prior to the placement of any child in the home of a relative; caseworkers must conduct an emergency criminal background check and home safety inspection. Some stakeholders indicated that children are never placed nonrelative, non-licensed homes.

Statewide Data:

Over the past five periods from 2010 to 2014 Nevada has made significant improvements in the number of total foster homes licensed. Over this five year period there has been an increase in foster care licenses by 18.6%, from 2,692 in 2010 to 3,193 in 2014

**Table 42.1: Increase in Total Foster Care Licenses**

<b>Increase in Total Foster Care Licenses</b>	April 2010	April 2011	April 2012	April 2013	April 2014
Total number of licensed foster homes	2692	2751	2832	3208	3193

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.Also, In Table 42.2 during the same time frame the average number of days to license Foster Group homes has decreased 21% from 91 days in 2010 to 72 days in 2014.

**Table 42.2: Average Number of Days Required to License Foster and Group Homes**

<b>Average Number of Days Required to License Foster Group Homes</b>						
Year	Number of Facilities	% Increase/Decrease	Average Days to License	% Increase/Decrease	Number of Waivers	% Increase/Decrease
2010*	435	-27.01%	91	2.25%	148	-32.73%
2011*	313	-28.05%	82	-9.89%	102	-31.08%
2012**	176	-43.77%	73	-10.98%	77	-24.51%
2013**	360	104.55%	86	17.81%	70	-9.09%
2014**	177	-50.83%	72	-16.28%	39	-44.29%

\*2012 APSR  
 \*\*Unity Report CFS711 May 1 to April 30

Data from surveys conducted for the CFSP in Table 42.3 provide information on re-licensing and re-inspections of foster homes and facilities in order to ensure continued conformity with licensing standards. Respondents included stakeholders from Tribes, the Judicial System, Foster Parents, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 162 responses to the survey.

How effective and timely are child welfare agencies in completing re-licensing and re-inspection of foster homes and facilities in order to ensure continued conformity with licensing standards (on a scale of 1-5 with 5 being very effective) is presented in Table 42.3. The mean rating of 3.73 indicates that the average sentiment among respondents is that the child welfare agencies are very effective in completing re-licensing and re-inspection of foster homes and facilities in order to ensure continued conformity with licensing standards.

**Table 42.3 Survey Question**

**How effective and timely are child welfare agencies in completing re-licensing and re-inspection of foster homes and facilities in order to ensure continued conformity with licensing standards?**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
1.23%	6.17%	18.52%	31.48%	42.59%	162	4.08	0.88
(2)	(10)	(30)	(51)	(69)			

N=Number of Survey Respondents

SD=Standard Deviation

***Item 43: Requirements for criminal background checks***

**Requirements:**

NRS 424.031 states that the licensing authority shall obtain background and personal history for each applicant applying for a foster care license and all prospective employees of that applicant and residents of the foster home who are age 18 years of age or older in order to determine whether the person investigated has been arrested for or convicted of any crime. NRS 424.039 states that the licensing authority is authorized to conduct preliminary Federal Bureau of Investigations name-based background checks or adult residents of foster homes in which a child will be placed in an emergency situation. The person investigated is to supply fingerprints for further investigation. NAC 424.680 deals with criminal history verification for anyone employed as staff or a director of a group treatment home or anyone applying to be a foster parent. Nevada law requires child welfare agencies to insure that criminal history investigations are conducted pursuant to requirements under NAC 424 and NAC 127 and will notify and request separate waivers as warranted due to information obtained through updated criminal background investigations or substantiated allegations of abuse or neglect pursuant to NRS 432B. In addition, the state has approved policy 0515.0 Child Abuse and Neglect (CANS) and NCID Requirements for Prospective Foster and Adoptive Parents in response to the Adam Walsh Act of 2006 and sets forth procedures for conducting and responding to CANS checks; conducting and establishing statewide standards for authorizing placement of children with caregivers who have undergone an NCID and CANS check. No applicant is issued a license until the criminal background checks have been completed although children may be placed in relative homes prior to the results of the FBI background check being received by the agency.

Furthermore, In the 2011 legislative session AB 536 was enacted. This legislation revises provisions relating to background checks of certain persons who work with children in all three areas of the Division, to include Juvenile Justice and Children’s Mental Health.

**AB 536** (effective date 7/1/2011)

- Foster parent/licensee, residents ages 18 and older\* and/or employees of a foster home are required to have a complete background check every 5 years after initial licensure/approval.
- Foster parents/licensees must maintain all records surrounding background checks of caregivers, residents and employees for the entire period of time they are associated with the foster home. Records to include, but not limited to: Copy of authorization for release of background records, copy of fingerprint cards, proof that they were submitted to the appropriate authority, approval letter from the licensing authority and any other documentation which may arise out of the background check process.

\* Per AB 350: Prior foster youth, age 18 to 21 who are “under the jurisdiction of the court,” are exempt from such background checks.

In the 2013 legislative session AB 217 was enacted. This legislation requires certain juvenile justice agencies to require background checks for employees.

**AB 217** (effective date 7/1/2013)

This legislation requires juvenile justice agencies in counties whose population is over 700,000, and any child welfare agency, to obtain a background investigation of applicants for employment with, and employees of, such agencies,

which also pertains to mental health professionals employed by these agencies. This bill also requires that background investigations are performed at least once every five years after initial investigations of employees.

During the week of April 21, 2014 the Children’s Bureau (CB) together with the Division of Child and Family Services (DCFS) completed Nevada’s title IV-E Foster Care Eligibility Review. As of this reporting final results are not yet available.

**CFSR 2009:**

During the 2009 CSFR Item 43 was rated as Strength. Although the state did not provide analysis or evaluation in the Statewide Assessment, information from the Statewide Assessment and stakeholder interviews indicates that the state completes criminal background records checks for adults in foster homes, relative caregivers, and staff of child care institutions before placing children in a home. In addition, the title IV-E Eligibility Review held in June 2008 found that criminal background clearances were completed for all licensed foster homes

Most stakeholders commenting on this item during the onsite CSFR expressed the opinion that criminal background checks, child abuse and neglect registry checks, and fingerprinting are conducted routinely for all adults in foster homes, relative caregivers, and staff of child care institutions.

**Statewide Data:**

Data from surveys conducted for the CFSP in Table 43.1 provides information on Criminal Background Checks. Respondents included stakeholders from Tribes, the Judicial System, Foster Parents, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 163 responses to the survey.

How effective is the process of criminal background checks on prospective foster and adoptive parents before licensing them or approving them to care for children (on a scale of 1-5 with 5 being very effective) is presented in Table 43.1. The mean rating of 4.47 indicates that the average sentiment among respondents is that the process is very effective in ensuring criminal background checks are performed on prospective foster and adoptive parents before licensing them or approving them to care for children.

Overall, comments from stakeholders indicated that staff are knowledgeable about this requirement and complete criminal background record checks for adults in foster homes, relative caregivers and staff of child care institutions before placement.

**Table 43.1 Survey Question**

**How effective is the process of criminal background checks on prospective foster and adoptive parents before licensing them or approving them to care for children?**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
1.23%	0.61%	7.98%	30.67%	59.51%	163	4.47	1.27
(20)	(1)	(13)	(50)	(97)			

N=Number of Survey Respondents  
SD=Standard Deviation

## **Item 44: Diligent recruitment of foster and adoptive homes**

### **Requirements:**

The Multi-Ethnic Placement Act of 1994 (P.L 103-382) was amended in 1997 by the Removal of Barriers to Interethnic Adoption (P.L 104-188) which requires diligent recruitment of Foster and Adoptive Homes. This act established a new Title IV-E state plan requirement that prohibits states or private agencies that receive federal funds from delaying placement on the basis of race, color, or national origin of the child or the foster or adoptive parent. NRS 127.010 – NRS 127.1895 governs the adoption of children. NRS 424.010-424.220 governs the licensing of foster homes.

### **CFSR 2009:**

During the 2009 CFSP Item 44 was rated an Area Needing Improvement. Information from the Statewide Assessment indicates that, although one local jurisdiction continuously assesses the demographic data of its resource families, the State does not have a process for the diligent recruitment of potential foster and adoptive families that reflects the ethnic and racial diversity of children for whom foster and adoptive homes are needed.

Most stakeholders commenting on this item and at the state level during the onsite CFSP expressed the opinion that there is no recruitment strategy or recruitment planning at the State level and that any recruitment efforts are initiated by local child welfare agencies. For example, Clark County stakeholders indicated that there was a significant and successful effort to increase the number of foster care placements in that county. In addition, some stakeholders indicated that child welfare agencies hold recruitment events using media outlets and campaigns. However, none of the efforts focus on the diligent recruitment of a diverse pool of foster and adoptive homes that reflect the demographic characteristics of children in foster care.

### **Statewide Data:**

Data from surveys conducted for the CFSP in Table 44.1 provides information on Diligent Recruitment of Foster and adoptive homes. Respondents included Stakeholders from Tribes, the Judicial System, Foster Parents, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 213 responses to the survey.

How effective is the process of diligent recruitment of foster and adoptive homes (on a scale of 1-5 with 5 being very effective) is presented in Table 44.1. The mean rating of 3.18 indicates that the average sentiment among respondents is that the State is sometimes effective in the diligent recruitment of foster and adoptive homes

Overall, comments from stakeholders indicated that recruitment is done at the local level and is on-going but foster parents continue to be limited and retention is difficult. Specifically when foster parents were asked “how can the child welfare agency improve retention of foster parents?” many foster parents responded to provide more respite, support, respect and training.

**Table 44.1 Survey Question**

### **How effective is the State in diligent Recruitment of Foster and Adoptive homes?**

<b>Not Effective</b>	<b>Rarely Effective</b>	<b>Sometimes Effective</b>	<b>Usually Effective</b>	<b>Very Effective</b>	<b>N</b>	<b>Mean</b>	<b>SD</b>
7.98%	14.08%	42.25%	23.00%	12.68%	213	3.18	0.48
(17)	(30)	(90)	(49)	(27)			

N=Number of Survey Respondents  
SD=Standard Deviation

## ***Item 45: State use of cross-jurisdictional resources for permanent placements***

### **Requirements:**

The state follows the federal requirements in accordance with P.L. 109-239, P.L. 109-248, 42 U.S.C. 670-679(b), the statutory requirements captured in NRS 127.330, NRS 432B.435, NRS 424.033 and the regulatory requirements in NAC 127.235. In addition to federal and state laws, the state's Interstate Compact for the Placement of Children (ICPC) Central Office also has a Structured Analysis Family Evaluation (SAFE) policy which serves as the primary means of evaluating and assessing the appropriateness of potential family foster care and licensed relative and adoptive families. ICPC Central Office has also developed and implemented an internal policy related to the processing of referrals in and out-of-state, including timelines, responsibilities and operating procedures to further ensure that children are placed in safe and suitable homes in a timely manner.

Furthermore, all three child welfare agencies use a variety of resources to ensure timely cross-jurisdictional adoptive placements that include but are not limited to adoptions exchanges, photo listings and, AdoptUSKids. Additionally, In SFY 2014, Nevada was one of only six states nationwide to pilot a new web-based electronic information exchange for processing ICPC cases and streamlining placement of children across state lines. The National Electronic Interstate Compact Enterprise (NEICE) project is a 17-month pilot, administered by the American Public Human Services Association and the Association of Administrators for the Interstate Compact for the Placement of Children, and supported by Administration for Children and Families (ACF), Administration on Children, Youth and Families (ACYF), the Children's Bureau (CB).

The NEICE system will serve and benefit children, families, public, and tribal child welfare agencies and multidisciplinary groups (medical, legal, judicial) that work to facilitate foster care and adoptive interstate placements nationwide. The ultimate goal is to decrease the length of time it takes for children to be placed safely across state lines and reduce administrative costs. Implementation of the NEICE system is scheduled for early summer of 2014, with states piloting the system through February 2015.

### **CFSR 2009:**

During the 2009 CFSR Item 45 was rated as Strength. The state uses a variety of cross-jurisdictional resources to facilitate timely adoptive and permanent placements for waiting children, including national media, adoption exchanges, photo listings, and the Interstate Compact on the Placement of Children (ICPC). This item also was rated as Strength in Nevada's 2004 CFSR.

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that the state's three child welfare agencies use adoption exchanges, photo listings, and AdoptUsKids to facilitate timely adoptive placements for waiting children. Some stakeholders indicated that the state has instituted and adheres to strict timelines and procedures for response to ICPC requests from other states, including the electronic transmission of information. A few stakeholders noted that there are delays from other states in responding to ICPC requests from Nevada.

### **Statewide Data:**

In SFY 2010 Nevada received and processed a total of 801 complete incoming referrals, with a monthly average of 67. In comparison, in SFY 2014 (through April) Nevada received and processed a total of 617 complete incoming referrals with a monthly average of 62. This represents a decrease over the last five years of complete incoming referrals of 23% (with data from 2014 collected through the end of April).

In SFY 2010 Nevada received and processed a total of 1213 outgoing referrals with a monthly average of 101. In comparison, in SFY 2014 (through April) Nevada received and processed a total of 966 complete outgoing referrals with a monthly average of 101. This represents a decrease over the last five years of complete outgoing referrals of 20% (with data from 2014 collected through the end of April).

While incoming and outgoing referrals fluctuate, and can often be traced to the impact of economic and seasonal factors, it does appear as if over the last five years, referrals have been decreasing for children who are placed into out

of state placements. Nevada has always experienced a greater number of outgoing cases than incoming. Over the last five years, the difference has been approximately 38%. Nevada sends and receives the most number of referrals from California, followed by Oregon and Utah.

Home studies are an important part of ensuring safe placement of children and also a requirement before any child can be placed into a home out of state. As might be expected, the overall outgoing approved home studies over the last five years have been approximately 31% higher than the approved incoming home studies. The overall home studies performed for this reporting period has decreased as well, commensurate with the referral numbers.

Data from surveys conducted for the CFSP in Table 45.1 provide information on the child welfare agencies use of families for placement when they live in other states. Respondents included Stakeholders from Tribes, the Judicial System, Foster Parents, Child Advocates, Caseworkers, Management and other Community Partners i.e. Education. Respondents were not required to answer the question. There were 161 responses to the survey.

How effective are the child welfare agencies in seeking out and using families for placement when they live in other state jurisdictions (on a scale of 1-5 with 5 being very effective) is presented in Table 45.1. The mean rating of 3.60 indicates that the average sentiment among respondents is that the state is usually effective in the seeking out and using families for placement when they live in other states.

**Table 45.1 Survey Question**

**How effective is the Child Welfare Agencies in seeking out and using families for placement when they live in other states?**

Not Effective	Rarely Effective	Sometimes Effective	Usually Effective	Very Effective	N	Mean	SD
3.73%	6.83%	32.30%	40.37%	16.77%	161	3.60	0.65
(6)	(11)	(52)	(65)	(27)			

N=Number of Survey Respondents  
SD=Standard Deviation

**Strengths/Concerns (Foster and Adoptive Parent Licensing, Recruitment and Retention)**

Nevada has strength in that NRS Chapter 424 provides a framework for licensing, license renewal, inspections of foster homes and background investigations for foster care providers and adult residents. Standards are in place for foster family homes and child care institutions including background checks, home studies, safety checks and oversight by caseworkers and licensing staff. Most stakeholders indicated that the child welfare agencies are usually effective in implementation of licensing standards.

Furthermore, stakeholders indicated that child welfare agencies are very effective on ensuring criminal background checks of foster and adoptive parents. The state is usually effective and has strength in the use of cross-jurisdictional resources for permanent placements. All three child welfare agencies use a variety of resources to ensure timely cross-jurisdictional adoptive placements that include but are not limited to Adoptions exchanges, photo listings and, AdoptUSKids.

Additionally, as previously mentioned, in SFY 2014, Nevada was one of only six states nationwide to pilot the NEICE project, a new web-based electronic information exchange for processing ICPC cases and streamlining placement of children across state lines. This 17-month pilot, administered by the American Public Human Services Association and the Association of Administrators for ICPC, and supported by ACF and the Children’s Bureau will serve and benefit children, families, public, and tribal child welfare agencies and multidisciplinary groups (medical, legal, judicial) that work to facilitate foster care and adoptive interstate placements nationwide. The ultimate goal is to decrease the length of time it takes for children to be placed safely across state lines and reduce administrative costs.

There is concern on the available number of foster homes statewide and the recruitment and retention activities that ensure homes are available. Most stakeholders indicated that child welfare agencies are only sometimes effective in the diligent recruitment of homes. During focus groups with youth the youth indicated that having quality foster homes was one of their major concerns.

## Section VI: Legislative Activities

During the 2013 Legislative Session there were several bills introduced that impacted child welfare in Nevada. The following table is a list of the Bills that passed in the last session that have affected child welfare.

**Table VI:1 Legislative Bills enacted in 2013**

Bill	ID	Subject
<u>AB 67</u>	Crime of Sex Trafficking	Establishes the crime of sex trafficking of child or adults and includes other related provisions.
<u>AB 154</u>	Child Death Review Teams	Authorizes a multidisciplinary team to review the death of a child and to use data collected concerning the death of a child for research and prevention purposes in certain circumstances; consolidates the administrative teams that review the report and recommendations of a multidisciplinary team appointed to review the death of a child and the Executive Committee to Review the Death of Children; and other related matters.
<u>AB 155</u>	Reports of Abuse and Neglect	Revises provisions governing persons who are required to report the abuse or neglect of a child; revises provisions governing the punishment for the failure of a person to report the abuse or neglect of a child; revises provisions governing investigations of reports concerning the possible abuse or neglect of a child; revises provisions relating to the abandonment of a newborn child to a provider of emergency services; requires the Legislative Committee on Health Care to review certain provisions governing a person who provides a service related to health care; provides a penalty for certain violations; and other related matters.
<u>AB 156</u>	Sealing of Records	Revising provisions governing the sealing of certain records; prohibits a person from petitioning the court to seal records relating to certain offenses related to driving, operating or controlling a vehicle or vessel while under the influence of intoxicating liquor or a controlled substance; and, authorizes such a person to petition for the sealing of all records relating to an arrest if the prosecuting attorney declines to prosecute the charges.
<u>AB 174</u>	Abuse or Neglect of a Child	Revises provisions governing the procedure following a hearing to determine whether a child should remain in protective custody pending further action by the court; and other related matters.
<u>AB 348</u>	Quality Assurance Standards for Licensed Foster Care Providers	Requires a foster care agency to create and maintain reports on its programs and services; allows a foster care agency to encourage and assist a potential foster home to apply for a license; requires a contract between a foster care agency and a provider of foster care with which the foster care agency places a child; requires a foster care agency to provide certain services to each foster home in which the foster care agency places children; provides for the operation of independent living foster homes; allows a licensing authority to suspend or revoke the license of a provider of foster care in certain circumstances; and provides other related matters.
<u>AB 393</u>	Bill of Rights for Siblings in Foster Care	Expands the rights of children placed in foster care with respect to their siblings; and provides other related matters regarding visitation and contact with siblings and children placed in foster care.
<u>AB 421</u>	Provisions Governing	Revises provisions relating to assisted reproduction; revises provisions relating to gestational carrier arrangements; and provides for other related matters.

	Parentage	
<u>SB 31</u>	Sharing of Information Regarding Children Under the Care of Certain Agencies	Provides for the sharing of information regarding certain children among child welfare agencies, schools, courts, probation departments and treatment providers. Revises provisions governing the release of certain information maintained by agencies which provide child welfare services.
<u>SB 38</u>	Central Repository for Nevada Criminal Records Checks	Authorizes the dissemination of certain information concerning the criminal history of prospective and current employees and volunteers who work in positions involving children, elderly persons or persons with disabilities; and provides for other related matters.
<u>SB 97</u>	Hearings Concerning Children who are Removed from their Homes.	Revises the information that must be included in a petition alleging that a child is in need of protection; revises provisions relating to the semiannual review of the placement of a child by the court and the annual hearing concerning the permanent placement of a child; and provides other matters properly relating thereto.
<u>SB 98</u>	Services to Preserve and Reunify the Family of a Child	Revises provisions governing certain reasonable efforts made by an agency which provides child welfare services to preserve and reunify the family of a child.
<u>SB 99</u>	Identity Theft of Children and Youth in the Child Welfare System	Requires an agency which provides child welfare services to obtain and examine the credit report for certain children in its custody; requires the agency to report each potential instance of identity theft or other crime to the Attorney General and make a diligent effort to resolve any inaccuracy in the report; and provides for other related matters concerning the protection children and youth in the child welfare system from identify theft.
<u>SB 141</u>	Databases of Criminal History	Revises provisions governing the dissemination of records of criminal history. Requires an agency of criminal justice to disseminate records of criminal history to court appointed special advocate programs in certain smaller counties under certain circumstances; and provides for other related matters.
<u>SB 176</u>	Investigations of Reports of Abuse or Neglect of a Child	Revises various provisions concerning investigations of reports of abuse or neglect of a child. Requires an agency which provides child welfare services to determine whether certain reports concerning the possible abuse or neglect of a child are substantiated or unsubstantiated; sets forth that if such an agency substantiates a report alleging the person responsible for a child's welfare has abused or neglected the child, the agency must notify that person in writing of its intent to place the person's name in the Statewide Central Registry for the Collection of Information Concerning the Abuse or Neglect of a Child, and that the person may administratively appeal the substantiation of the report; requires the findings of fact in certain adjudicatory hearings to be included as part of the disposition of the case in the report required to be made to the Central Registry; and provides for other related matters.
<u>SB258</u>	Task Force on Prevention of Sexual Abuse of Children	Creates the Task Force on the Prevention of Sexual Abuse of Children within the Division of Child and Family Services of the Department of Health and Human Services; requires the Task Force to perform certain duties; provides for the expiration of the Task Force; and provides for other related matters.
<u>SB 314</u>	Rights of Parents Regarding Education and Upbringing	Provides that the right of parents to make choices regarding the upbringing, education and care of their children is a fundamental right. Under this bill, in implementing a statute, local ordinance or regulation, the State or any agency, instrumentality or political subdivision of the State is prohibited from violating this right without demonstrating a compelling governmental interest that as applied to the child involved is of the highest order.
<u>SB 344</u>	Education for Children Residing in Certain Facilities	Revises provisions relating to the education of certain children who are patients or residents of certain hospitals or facilities. Authorizes certain hospitals and facilities to request reimbursement, under certain circumstances, for providing educational

		services to children in their care; authorizing the Department of Education, the county school districts, charter schools and the Health Division of the Department of Health and Human Services to enter into a cooperative agreement for the provision educational services to children at certain hospitals and facilities; and providing other related matters.
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## APPENDICES

## APPENDIX A: Glossary of Acronyms

AAICPC	Association of Administrators of the Interstate Compact on the Placement of Children
AB	Assembly Bill
AFCARS	Adoption Foster Care Analysis and Reporting System
AI	Adoption Incentive
AIP	Agency Improvement Plan
APHSA	American Public Human Services Association
APPLA	Another Planned Permanent Living Arrangement
APSR	Annual Progress & Service Report
ASFA	Adoption and Safe Families Act
ASPR	Annual Services Progress Report
ATC	Adolescent Treatment Center
BADA	Bureau of Alcohol and Drug Abuse
CADRE	Citizen's Alliance for Disability Rights and Education
CANS	Child Abuse and Neglect
CAPTA	Child Abuse Prevention and Treatment Act
CASA	Court Appointed Special Advocate
CBCAP	Community Based Child Abuse Prevention
CCDFS	Clark County Department of Family Services
CCFAPA	Clark County Foster and Adoptive Parent Association
CFCIP	Chafee Foster Care Independence Program
CFSP	Child and Family Service Plan
CFSR	Child and Family Services Review
CFT	Child and Family Team
CHINS	Child in Need of Supervision
CIP	Court Improvement Project
CJA – TALCIT	Children's Justice Act Technical Assistance to Local Communities and Indian Tribes
CJA	Children's Justice Act
CMHBG	Community Mental Health Block Grant
CMHS	Community Mental Health Services
CPS	Child Protective Services
CQI	Continuous Quality Improvement
CRB	Children's Resources Bureau
CRP	Citizen Review Panel
CRT	Community Resource Teams
CSY	Collaboratively Served Youth
CTF	Children's Trust Fund
CWAF	Child Welfare Action Form
CWS	Child Welfare System
CYF	Children Youth and Families Interim Legislative Committee
DAWN	Data Warehouse of Nevada
DCFS	Division of Child and Family Services
DCFS-RURAL	Division of Child and Family Services Rural Region
DHHS	Department of Health and Human Services
DHR	Department of Human Resources
DMG	Decision Making Group
DOE	Department of Education
DRS	Differential Response System
DWTC	Desert Willow Treatment Center
EBP	Evidence Based Programs
EIP	Evidence Informed Programs
ETV	Educational Training Voucher
F2F	Family to Family Connection
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
FVPSA	Family Violence Prevention and Services Act
GMU	Grants Management Unit
HCFAP	Health Care Finance and Policy
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
IV-B/2	Title IV-B, Subpart 2
IV-E	Title IV-E
JJ Commission	Juvenile Justice Commission
JJWSG	Juvenile Justice Work Study Group
KIN	Kinship in Nevada Project
MDT	Multi-Disciplinary Team
MEPA/IEPA	Multi-Ethnic Placement Act/Inter-Ethnic Placement Act
MH	Mental Health
MHBG	Mental Health Block Grant
MHDS	Mental Health and Developmental Services
MHPAC	Mental Health Planning and Advisory Council
NAC	Nevada Administrative Code
NACo	The National Association of Counties
NCANDS	National Child Abuse and Neglect Data System
NCANS	Nevada Child Abuse and Neglect System
NCC	Neighborhood Care Center
NCCMT	Neighborhood Care Center Management Team
NCFAS	North Carolina Family Assessment Survey
NCWRCOI	National Child Welfare Resource Center for Organizational Improvement
NEATS	Nevada Employee Action and Timekeeping System
NEBS	Nevada Executive Budget
NITC	Nevada Inter-Tribal Council
NNCAS	Northern Nevada Child and Adolescent Services
NPT	Nevada Partnership for Training
NRC	National Resource Center
NRS	Nevada Revised Statutes
NVCC	Nevada Children's Center
NWD	Nevada Welfare Division
NYTC	Nevada Youth Training Center
NYTD	National Youth in Transition Database
ODES	Online Data Entry System
OJJDP	Office of Juvenile Justice and Delinquency Prevention
PART	Policy Approval and Review Team
PEP	Parents Encouraging Parents
PINS	Person in Need of Supervision
PIP	Program Improvement Plan
PRIDE	Parent Resources for Information Development and Education
QA	Quality Assurance
QI	Quality Improvement
QICR	Quality Improvement Case Review
QSR	Quality Supervisory Review

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
SAPTA	Substance Abuse Prevention and Treatment Act
SB	Senate Bill
SED	Severe Emotional Disturbance
SGB	Statewide Governing Board
SIG	State Infrastructure Grant
SMT	System Management Team
SNCAS	Southern Nevada Child and Adolescent Services
SOAR	Systems Online Activity Reporting
SOC	System of Care Principles
SQIC	Statewide Quality Improvement Committee
SWA	Statewide Assessment
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
UNLV	University of Nevada, Las Vegas
UNR	University of Nevada, Reno
VOCA	Victims of Crime Act
WCDSS	Washoe County Department of Social Services
WIN	Wrap-Around In Nevada

## **APPENDIX B: Chafee Foster Care Independent Living Program (CFCIP) & Education Training Voucher Program (ETV)**

### ***Agency Administering CFCIP***

Nevada's Division of Child and Family Services is the agency responsible for administration and oversight of Independent Living (IL) Programs in Nevada. The oversight responsibility is assigned to the statewide Manager and IL Specialist in the Family Programs 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, which are managed by the DCFS - 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 DCFS - Rural Region, and tribal entities. The state will continue to retain a portion of the federal funds to develop statewide policy, systems and materials to support county and rural implementation efforts as well as monitor program development and implementation.

Nevada and its IL partners will cooperate in any national evaluations of the effects of IL programs in achieving the purposes of the Chafee Foster Care Independence Program.

### ***Description and Program Design and Delivery***

**Describe how the state designed, intends to deliver, and strengthen programs to achieve the purposes of the CFCIP over the next five years. Describe how the state has involved youth/young adults in the development of the plan for CFCIP.**

Over the next five years Nevada intends to continue to deliver the IL program through a state-supervised and county administered program in the two major metropolitan counties, Clark and Washoe. Also, Nevada will continue to supervise and administer the IL program in the remaining 15 rural counties. Statewide public and private partnerships are developed to provide IL services throughout the state. Each region develops a service array unique to their community. Moving forward, data and engaging youth in decision making about the type of programming they receive will guide the work of the IL programs.

In order to strengthen the program the state will develop and enhance data reporting mechanisms that will help guide staff in making changes to the program to make sure that youth in the program are prepared to exit care. This data will also change the way services are delivered. As the child welfare agencies learn more about the youth's and young people's outcomes the child welfare agencies will be better equipped to strengthen the program and make the changes necessary to create services that are tailored to the youth's needs and help improve outcomes. Staff of the IL program has learned that classroom style learning isn't the most effective at reaching youth. To increase youth involvement in the IL classes, service providers have started asking the youth to plan what topics they want to learn about next. This allows for the youth to be in charge of their learning and guides staff on what topics to cover. Nevada will also be focusing more on the youth's educational goals, developing relationships with the school districts, colleges and universities, and working with youth from 15-17 to help them achieve educational success so that they may exit care with a high school diploma and continue on to post-secondary education.

Involving the youth in the planning process will help strengthen IL in Nevada as it is recognized that the youth are the best resource to inform the child welfare agencies about what is and is not working. Youth input has helped Nevada develop the state plan for 2015-2019, and Nevada will continue to request their involvement in the future. When asked during stakeholder meetings, youth and young adults who participated were candid and did not hold back on what changes they felt the child welfare agencies should make. Youth involved in stakeholder meetings were able to identify that there are training and foster home recruitment needs that need to be addressed over the next five years, specifically that both IL staff and foster parents need to have more training on working with this population. They further stated that Nevada needs to recruit more foster homes for teenagers, believing that families who are specifically licensed to house teens will help to reduce placement disruptions.

**Describe how the state is both informing stakeholders, tribes, and courts; and involving them in the analysis of the results of the NYTD data collection and how it is using these data and any other available data in conjunction with youth and other stakeholders to improve service delivery. Provide information of the state's plan to continue to collect high-quality data through NYTD over the next five years.**

The state has always shared NYTD findings with stakeholders involved in the IL program, including our Tribal IL Provider, and will expand this to include more of Nevada's stakeholders and the courts. Nevada has created a successful process when surveying youth in the NYTD cohorts. The statewide IL specialist monitors the program and sends out weekly updated reports to the agencies and staff directly working with the identified youth. Guidance, support and training on the best ways to survey the youth is provided by the statewide IL Specialist. There is discussion on any issues encountered in monthly statewide IL conference calls, which has helped with compliance since the implementation of the program in 2010. Currently the state is developing reporting mechanisms for all areas of the IL program, including NYTD in that development process. Nevada would like to duplicate the National Resource Center for Child Welfare Data and Technology (NRCCWDT) NYTD snapshot and incorporate Nevada data to identify outcomes for young people by child welfare agency.

Over the next five years, Nevada will continue to collect high-quality data using the NYTD surveys and portal. Nevada strives to continue to be compliant with all the upcoming submissions and will continue to engage young adults in timely survey submission. Updates have been made to the NYTD survey that is hosted on the FosterClub website where all of the questions require a response to prevent blank response errors. This has contributed to a lower error rate and has prevented Nevada from having to re-survey youth to ensure high-quality data is being collected.

### ***Serving Youth Across the State***

Nevada has ensured that all areas of the state are being served by the program. As previously mentioned, the CFCIP program 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, which are managed by the DCFS - Rural Region. Nevada also provides CFCIP funding to tribal entities through Stepping Stones, our Tribal IL Service Provider. Programs are tailored to meet the needs of the youth in each area.

Funds for the IL Program are distributed from the state to the counties, the DCFS - Rural Region, and designated tribal program to support IL program development and activities. In CCDFS, Chafee funds are distributed through the CCDFS to Specialized Alternatives for Families and Youth (SAFY), a non-profit organization. In WCDSS, all Chafee and state funds are routed through WCDSS to the Children's Cabinet, a private, non-profit organization, to provide IL services to eligible youth who are in custody and to those youth who have left placement. The Rural Region routes both federal and state funds through Family Resource Centers (FRC) for all IL program activities for youth in care, and to those youth who have left placement. Nevada distributes IL 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 youth's needs. Stepping Stones was designated to be the Chafee recipient by the Nevada tribal entities after lengthy consultation and deliberation.

A reporting mechanism for NYTD data is being developed and Nevada monitors how services are being provided by having the service providers enter the services into our statewide SACWIS system called UNITY. Services are also monitored with another online reporting tool called ODES. Both systems allow for us to generate reports on the number of youth served, the types of services given and the amount of funding that was provided. Nevada will continue to use our reporting systems and adjusting them as needed to fit our needs for CFCIP.

### ***Serving Youth of Various Ages and States of Achieving Independence***

Nevada serves youth at all various stages of achieving independence as we start working with them from the age of 15 and continue to work with them up until the age of 21 and even 23 if the young person is enrolled into the ETV program. Nevada does not have any state statutory and/or administrative barriers that impede the state's ability to serve a broad range of youth. The most significant barriers to providing IL services in Nevada are staffing—hiring, training, and maintaining staff to serve the number of youth who qualify for services; youth engagement; and availability of services statewide.

Finding workers who want to live in the rural areas of the state is difficult, as is finding qualified staff that will stay in Nevada. Continuously having to train new staff is time consuming, and the turnover rate doesn't help youth with feeling supported. Nevada continues to consider innovative ways to staff the IL program statewide and provide more support through funding and training to all the areas to help with staffing difficulties.

Youth engagement is another barrier to serving youth and young adults achieve independence. Getting their "buy in" into the program and services is difficult as youth may feel that what is being said to them isn't important or useful to their lives at the moment. At times youth lack of commitment to achieving stability adds to this barrier. In addition to this, youth often lack the skill and self-confidence to advocate and speak up around assistance for their needs. Having motivating positive adults (workers) in their lives is a way to help increase youth engagement.

Lastly, the availability of services throughout the state causes barriers to serve IL aged youth. The biggest challenge the DCFS Rural Region faces when it comes to serving youth is geography. The area served by the Rural Region is so large and spread across Nevada; it is often difficult to provide youth access to services that are not available in their hometowns. Because of this, youth sometime have to travel hours to get services they need. The region has utilized methods such as Skype to provide services to rural youth in an effort to overcome this geographical barrier. Additionally, housing options for youth who are aging out of the foster care system are sparse, difficult to locate and often offer less than ideal living conditions.

***Please describe how your agency has served the following:***

**Youth under age 16:** Youth are assigned an Independent Living Worker at the age of 15. The IL worker will assist the youth with completing the Casey Life Skills Assessment and developing a Youth Plan for Independent Living. The youth will direct the plan and will begin to identify the skills needed to eventually attain self-sufficiency. The IL worker will provide case management services and referrals. They will also expose the youth to activities and events within the community and the state that will enhance their self-sufficiency skills while also encouraging them to become a voice for all youth in foster care through advocacy and participation in awareness and support activities.

**Youth ages 16 – 18:** If not already assigned, an IL worker will be assigned as soon as the youth is referred for services and eligibility has been verified. The process is then the same as above in that the youth will direct the completion of their Youth Plan for Independent Living and have an annual reassessment of the Casey Life Skills Assessment and will continue to identify the skills needed to eventually attain self-sufficiency. The IL worker will provide case management services and referrals. They will also expose the youth to activities and events within the community and the state that will enhance their self-sufficiency skills while also encouraging them to become a voice for all youth in foster care through advocacy and participation in awareness and support activities. Depending on the region, a youth may be assigned a specific community IL worker that will help co-case manage and will provide extra support, assistance, and education to the youth as they begin their transition to adulthood.

Yearly credit reports from all three credit bureaus are run by DCFS for all youth in foster care ages 16 and older. The credit reports are discussed with the youth and any inaccuracies are repaired prior to the youth leaving care. Any reports of fraud are investigated by the Nevada Attorney General's Office. If the youth can demonstrate the ability to comply with an Independent Living Plan, they have the option of entering an Independent Living Agreement at age 17, where they live outside a foster home in an approved location and receive their foster care payment directly. Youth must discuss long term planning and complete a Transitional Living Plan within 90 days of their 18<sup>th</sup> birthday. The IL worker will begin to have conversations with the youth about his/her plans at the age of 18 and will provide the youth with information about options for financial support to continue their education.

**Youth ages 18 – 20 in foster care:** Youth generally "age-out" on their 18<sup>th</sup> birthday; however, some youth choose to voluntarily remain in foster care until they complete their secondary education, i.e., High School Diploma or GED. During this time, the youth will continue to receive case management services by their Social Worker to include; monthly home-visits, case planning, and Child and Family Team meetings (CFT's).

Nevada opted to offer former foster youth the option of entering into the Court Jurisdiction program and receive continued case management and not to extend foster care until the age of 21.

**Former foster youth ages 18 – 20:** For youth who have chosen to exit foster care completely and continue to participate in the IL program, the IL staff will provide the youth with information about the local program and will arrange an introduction to the staff of the program. For youth who have chosen to participate in the Court Jurisdiction program the IL worker will transfer the youth to another IL worker who specializes in working with youth participating in this program, in most regions this worker is a contracted IL service provider serving our aged out population. The youth will receive ongoing case management, financial support, medical insurance, IL Classes and work towards some type of

education or employment goal. They will continue to be assessed through the Casey Life Skills Assessment and their goals may be updated as they are achieved. This worker will be available to the youth for questions and support in achieving their goals, will make referrals to appropriate community resources as needed and will have monthly meetings with the youth. The IL worker will have periodic conversations with the youth about his/her plans for the age of 21 when services will cease.

**Youth who after attaining 16 years of age have left foster care for kinship guardianship or adoption:** The IL worker, prior to ending his or her assignment to the youth, will provide the youth and the care provider with information about educational financial assistance available to them after adoption or guardianship. Youth who leave foster care for kinship guardianship or adoption after the age of 16 will have the ability to access Chafee/FAFFY funds, ETV funds, and case management through IL Service Providers.

The statewide IL Specialist will provide this same information to anyone inquiring from within the state of Nevada or to youth and care providers who have moved to Nevada from another state.

**Identify any assessments or other tools your agency used to determine which youth were likely to remain in foster care and/or to evaluate young peoples' stages of development and how these assessments informed the provision of services.**

Nevada's focus is not on child characteristics that identify a child at risk of staying in long-term care but instead assesses a parent's protective capacity in relation to impending danger threats identified. Through purposeful and careful analysis of the child's vulnerability to diminished caregiver protection, services are planned to support the caregiver in their skill development. Agency staff are trained in Trauma Informed Care and provides resources and in-home services to parents and caregivers to support children remaining in their home or returning after a removal.

The Casey Life Skills Assessment (CLSA) is the primary assessment tool utilized with IL youth it seeks to assess the behaviors and competencies of youth to determine what is needed to help them achieve self-sufficiency. The CLSA assesses the following areas; maintaining healthy relationships, work and study habits, planning and goal-setting, using community resources, daily living activities, budgeting and paying bills, computer literacy, and permanent connections to caring adults. The youth take the assessment for the first time at age 15 and are then reassessed yearly. IL case workers expose youth to activities and events within the community and state that will enhance their self-sufficiency skills. They are also referred to IL skills classes.

**Room and Board:** DCFS certifies that no more than 30 percent of their allotment of Federal funds will be expended for room and board for youth who left foster care because they attained 18 years of age but have not yet attained 21 years of age. Nevada defines "Room and Board" as funds that can be used to cover rent deposits, rent, utilities and other household start-up items. All regions utilize Chafee and FAFFY monies to assist young adults, ages 18-21, with transitional living needs and room and board. For youth opting into the Court Jurisdiction Program, this provides them with an additional financial resource to help them with room and board and cost of living expenses.

Nevada did not choose to extend Title IV-E foster care assistance to youth ages 18-21.

### ***Collaboration with Other Private and Public Agencies***

**Discuss how your agency has involved the public and private sectors in helping adolescents in foster care achieve independence? Please include information on any campaigns to raise awareness on the needs of youth/young adults in foster care.**

- Nevada has a new Quality Parenting Initiative (QPI) website, which brings together stakeholders to increase collaboration between DCFS, CCDCFS, WCDSS, foster parents, birth families, the courts, community entities. The QPI website provides access to trainings specific to the needs of staff, foster parents, and birth families.
- CCDFS is developing a contract with Project WE to implement Classroom Without Walls (CWW); which is a career, education, wellness and lifestyle skills development building block platform. The interactive learning model provides young adults with an educational, career and life skills exploration experience. Project WE CWW is designed to inspire participants to craft a vision for a positive transition to adulthood, discover non-traditional career opportunities, make healthy life decisions and acquire new skills through impactful, real time learning platforms. The learning model focuses on bringing the real world of career exploration and life experiences to the education arena. These experiences utilize unique hands-on programs and services that encourage and inspire students to explore their interests, and provide an opportunity to connect the dots between school and career. Project CWW is

supported by a three year incremental learning experience, which increases and reinforces students' acquisition of skills essential to ensure they are college ready, career ready and life ready.

- CCDFS manages the DREAMR (Determined, Responsible, Empowered, Adolescents Mentoring Relationships) Project which involves the following community agencies in delivering services to reduce teen pregnancies and increase relational competency: SAFY, Olive Crest, the Clark County Health Department, Big Brothers Big Sisters of Southern Nevada, UNLV.
- Sierra Association of Foster Families provides tutoring.
- Truckee Meadows Community College employs a Foster Care Liaison and provides annual foster youth college fairs.
- A WCDSS Senior Social Worker taped a recruitment video specifically for IL youth.
- WCDSS refers all IL youth to the Children's Cabinet, Inc. for co-case management services to wrap services around the youth related to education outcomes, employment learning opportunities, supportive resources, and direct services such as rent, furniture, and daily living needs.
- WCDSS staff and young people participate as part of the leadership in the You-N-I initiative (a community initiative for homeless and runaway youth and aging-out foster youth).
- Reno Rodeo Foundation provides job shadowing and job coaching programs.
- Eddy House and the Nevada Youth Empowerment Project both in Reno provide programming, residential services, and employment to aged-out foster youth.
- Carson City has Ventana Sierra which provides programming, residential services, and employment to aged-out foster youth.
- The DCFS Rural Region depends on its communities to aid IL youth, primarily through the Family Resource Centers and county social services agencies.
- Youth have fundraisers and community events geared towards awareness and to provide communities the opportunity to step up and help their youth in care with donations of items for move out kits or duffel bags with essentials.
- Youth and young people involved with the Statewide Youth Advisory Board have the opportunity to speak to legislatures about the needs of the youth/young adults in foster care. They have testified and passed bills on Foster Children and Youth and Sibling Bills of Rights and help raise awareness.

**Discuss efforts made to coordinate the state's CFCIP with other federal and state programs for youth (i.e. abstinence programs, local housing programs, transitional living for youth in JJ, programs for disabled youth, school-to-work programs and at-risk of homelessness programs).**

CCDFS received the Youth At Risk of Homelessness (YARH) planning grant in an effort to implement a Model Intervention Planning project in Clark County designed to reduce homelessness among youth. This project is a partnership between DFS, Clark County Department of Juvenile Justice, Clark County Social Service Department, and the Southern Nevada Regional Planning Coalition. Phase I of the project will include an in-depth planning process and analyses of present risk for homelessness among youth in child welfare and juvenile justice. Phase II will lay the groundwork for implementing and testing intervention strategies for youth.

DCFS utilizes local programs available for youth when appropriate for youth. DCFS collaborates with these programs by participating in their service provision as well as including their team in DCFS service provision, i.e., Child and Family Team meetings when appropriate. DCFS has an MOU with the Nevada Rural Housing Authority for youth who exit care and have difficulty locating housing.

WCDSS has participated in Project One, an effort to pull all court proceedings under one judicial officer. In relation, WCDSS participated in a local consortium to assess the needs of youth served by both agencies and developed a "Cross-over Youth" practice model. The You'N-I Initiative is a community initiative for homeless and runaway youth and aging out foster youth. The goal of You'N-I is to develop a resource of organizations, agencies and institutions that provide direct and indirect services to this population of young adults. The goal is to help youth and young adults ages 12-24, find out what their needs are and try to find, create and match them to community resources in the area.

## ***Medicaid Coverage***

Nevada Revised Statute 422.2717 requires the Medicaid State Plan to include and serve foster youth who have aged out of the foster care system. In 2014 Nevada extended the Medicaid eligibility allowing children in the state or county foster care who after reaching the age of 18 continue to receive Medicaid assistance until the age of 26. And for young adults who after reaching the age of 18 in another state moved to and reside in Nevada, they may apply for the Aged Out Medicaid Program and be eligible until the age of 21. The Aging-Out of Foster Care Medicaid Program has been in effect since 2005. Eligibility rules were simplified to include the following: one page application for Medicaid assistance; provide verification of aging out in any U.S. state or territory; be a citizen or qualified alien; provide verification showing age; meet Nevada resident requirements; and, fully cooperate with the annual case eligibility re-determination.

**Discuss how the child welfare agency collaborated with governmental or other community entities to promote a safe transition to independence by reducing the risk that youth and young adults in the child welfare system will be victims of human trafficking.**

Training across the state has been offered concerning victims of human and sex trafficking. The Attorney General's Office has hosted a "Solutions Summit" which brought together statewide leaders in law enforcement, child welfare, juvenile parole and probation, education, and the treatment community to identify strategies to address human trafficking. Additionally, the Attorney General's office is presenting a four session training in conjunction with Asylee Refugee Migrant Assistance Network (ARMAN) as it relates to community awareness in efforts to stop placing blame on the victim, why communities place blame on the victim, focusing on the predator, and building compassion for youth.

The Nevada Partnership for Training hosted a program called Domestic Minor Sex Trafficking that was piloted in Las Vegas several months ago and presented by a local therapist who works extensively with this population. Four trainings will be offered in the fall, two in Reno and two in Las Vegas. Domestic minor sex trafficking (DMST) is a violent and horrific crime. Many DMST victims are youth that come in contact with the child welfare system and/or runaways with a history of physical and sexual abuse in the home or the extended family. This training begins by discussing the terms, language and laws that define DMST, and then explores the vulnerabilities that put child welfare youth at risk for becoming victims. Additionally, the indicators of DMST victimization are reviewed along with the tactics that traffickers/pimps use to recruit their victims.

In 2014 a new Missing Child Policy was developed for DCFS Rural Region and guides staff on how to handle situations when children and youth are missing or have runaway. WCDSS and CCDFS both have sections in their policy manuals on missing and runaway children..

## ***Eligibility for Benefits and Services***

Nevada's IL Program includes classes, services and funds available to all foster youth between the ages of 15 until the age of 21 or 23 if enrolled in the ETV program. DCFS considers all eligible foster youth to include those youth who are in the care and custody of the DCFS Rural Region, WCDSS, CCDFS, or tribal youth. IL services may continue with the child after permanency has been achieved, depending on the needs of the child. Nevada will also extend IL services to eligible youth who are living out of state and those youth who have relocated to Nevada from another state. The requirements for Chafee and the Fund to Assist Former Foster Youth recognized as NAC 432 FAFFY or Transition from Foster Care requires each region and the tribal representative (currently Stepping Stones) to identify its local plan for providing services. Each year, Chafee and FAFFY monies are allocated to each region based upon the total number of youth in care, the number of 15-17 year olds in care, and the total number of youth receiving IL Services.

## ***Cooperation in National Evaluations***

The Division of Child and Family Services will cooperate in any national evaluations of the effects of the programs in achieving the purposes of CFCIP.

## **EDUCATION AND TRAINING VOUCHER PROGRAM (ETV)**

**Describe the methods that will be used to:**

- **Operate the ETV program efficiently:** ETV has a standard of policy and procedures which both ETV Program Coordinator and case managers are guided by to ensure program consistency and efficiency with each student awarded. ETV policy and procedures are continually adjusted with ETV improvements and/or updates. ETV policy and procedures are always available and reviewed yearly during onsite reviews.
  
- **Ensure that the total amount of educational assistance to a youth under this and any other program does not exceed the total cost of attendance (as defined in section 472 of the Higher Education Act of 1965. 345 in this document <http://www.nrcyd.ou.edu/publication-db/documents/higher-education-act-1965.pdf>):** ETV will continue to receive a copy of Financial Aid Award Letters from each student which provides total cost of attendance per student. ETV will continue the practice of tracking the appropriate release of information between the youth and school of attendance, FAFFY providers, Court Jurisdiction provider, and/or possible Chafee providers.
- **Avoid duplication of benefits under this and any other federal or federally assisted benefit program (see sections 477(b)(3)(J) and (i)(5) of the Act):** The Children's Cabinet administers Nevada's ETV program, and they receive a copy of the student's Financial Aid Award Letter from each student which provides Pell grant and other scholarship information if applicable. ETV's continued standard procedure is for students to sign and complete the Academic and Financial Aid Release naming school of attendance. Students are to sign and complete The Children's Cabinet release of confidentiality with their state or county Faffy/Chafee provider. ETV will continue standard procedure of receiving copy of Court Jurisdiction budget to prevent duplication of services.
- **Use data to improve and strengthen the ETV program:** The Children's Cabinet will create an ETV survey asking students questions to determine why students drop out, and possibly identify struggles previously non disclosed. Research shows wrap around services are a "best practice", so the Children's Cabinet wants to ensure implementation of best practices, so are considering funding 2 case managers to further assist students with basic needs. Few ETV students have expressed mental health issues and have disclosed a causal effect with trouble in school. Northern Nevada Mental Health and The Children's Cabinet have developed a new collaboration to increase guided access to needed mental health services for youth. Over the next 5 years The Children's Cabinet Mental Health program plans to expand the mental health services throughout the state with the collaboration of Nevada's Division of Public and Behavioral Health.
- **Use data to increase program implementation:** With emerging trends and federal legislation moving towards defining "youth" as an individual through the age of 24 and beyond, ETV will research other states providing Chafee services past the age of 23. ETV will develop and implement an electronic application process through the Children's Cabinet website to increase accessibility. A concern that to be aware of is the potential increase in applications to process along with an increase of students needing to be served. The direct deposit option was offered during the spring of 2014 and there will be an official roll out with Fall 2014 awarded students.
- **Use data to establish goals and outcomes of the ETV program and how those goals will be measured:** ETV's immediate goal is to always strive to improve retention rates of students. With earning a bachelor's degree currently taking an average of six years to complete, ETV students are discharged at age 23; hence, ETV is unable to capture accurate possible graduation rates. Therefore, The Children's Cabinet five year goal for ETV is to develop a process to follow up with youth at 24 and 25 years of age to identify accurate graduation rates. Information will be obtained via multiple means, such as contact with students through Facebook, twitter, and email etc.
- **Provide an unduplicated number of ETVs awarded each school year (July 1 to June 30):** The Children's Cabinet currently maintains their own ETV spreadsheet in addition to the ODES system to gather basic demographic information while maintaining client funds so to not exceed the yearly allotment. ETV enters all student spending in the ODES reporting system and is working with DCFS and their IT department to establish a specific "County of Origin" tab. This tab will identify the proportion of Clark, Rural, Washoe and/or Native American students served. ETV currently provides the Annual Reporting of Education and Training Vouchers Awarded and will continue to provide the Annual Reporting of Education and Training Vouchers Awarded on a yearly basis.

## **CONSULTATION WITH TRIBES**

Nevada distributes IL 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 youth's needs. Stepping Stones was designated to be the Chafee recipient by the Nevada tribal entities after lengthy consultation and deliberation. DCFS has consulted and educated the tribes about the IL program and what is available to Indian youth via presentation at the Indian Child Welfare Act meeting. Stepping Stones also coordinates outreach efforts with Nevada's 26 Tribes. Tribal youth are eligible for IL services if they meet all the same requirements as non-Tribal youth in the state: they must be 15-21 years old and in the custody of a Nevada Tribe.

### ***CFCIP Program Improvement Efforts***

Involving youth in the CFCIP and related agency efforts will be a major focus for Nevada over the next five years. Youth have been invited to participate as members in committees with the Court Improvement Project, The Children's Mental Health Consortium Workgroup 4 meetings, as panelists at a Board of Education conference, guests at the First Lady's Children's Mental Health Summit, as panelists at the annual Statewide IL Conference and as important stakeholders in stakeholder meetings. It is also important for youth to be involved as co-trainers for workers and foster parents. In 2013 and 2014 Nevada youth served as trainers in Positive Youth Development (PYD) Training and in LGBTQ Training. Over the next five years Nevada would like to continue to involve youth in participation in these events and expand on the trainings where youth can be co-facilitators. These young adults are getting noticed in the community as those who have attended an event with the young people are impressed by their maturity, participation, questions and input. The DCFS IL Specialist has also noted an increase in more requests for youth attendance at other events, which indicates an overall understanding and importance in involving youth and young people in child welfare system planning.

At the youth stakeholder meeting, youth vocalized that they wanted to be recognized as experts on how the foster care system works, and how it can and should be improved. The youth were clear that their input, thoughts, suggestions and comments have value. As a state Nevada will focus on making sure young people feel like their input is important and that the state is hearing their voice. Over the next five years and beyond Nevada's young adults will be included in the assessment, improvement and evaluation of CFCIP services and outcomes. A foster youth survey has been developed to make sure that youth in care have the ability to express their thoughts about their foster care experiences to the DCFS FPO Office. The IL Specialist will also focus on developing a pre-placement form that foster families and foster youth complete prior to the youth being placed in their homes to ensure that it will be a good match. This will decrease placement disruptions and allow youth and families to be better matched. Additionally, foster family recruitment is necessary for ensuring youth achieve permanency and remain in stable placements.

### ***CFCIP Training***

A goal of the CFSP is that youth will have an improved well-being, and an objective for this item is to ensure that youth who exit care are prepared for adult living. An important component of this is transitional planning for youth. Transition planning is a process not an event, and must be developed through a strength/needs based approach that is directed by the youth. This requires skill in the process and development of the written plan. The state plans to request technical assistance from the National Resource Center for Youth Development (NRCYD) for training on Youth Transition Planning as part of the objectives for the CFSP.

## ATTACHMENTS

### TARGETED PLANS within the CFSP

Please find the following targeted plans as discreet attachments of the CFSP.

- Attachment A: Foster and Adoptive Parent Diligent Recruitment Plan
- Attachment B: Health Care Oversight and Coordination Plan
- Attachment C: Disaster Plan
- Attachment D: Training Plan

**ATTACHMENT A: Disaster Plan**

**ATTACHMENT B: Foster and Adoptive Parent Recruitment Plan**

**ATTACHMENT C: Heath Care Oversight and Coordination Plan**

## ATTACHMENT D: Training Plan

## **ATTACHMENT E: Assurances and Certification**

**ATTACHMENT F: Financial Information**