



STATE OF NEVADA

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

2021 ANNUAL PROGRESS SERVICES REPORT

Kathryn Roose
Deputy Administrator

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INTRODUCTION

Child and Family Services Plan¹

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

Child and Family Services Review Program Improvement Plan

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

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

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

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

Annual Progress and Services Report (APSR)

The APSR provides an annual update on the progress made by the state towards its goals and objectives in the CFSP and outlines the planned activities for the upcoming fiscal year² It also integrates the activities and progress on the CFSR PIP. The APSR allows Nevada to assess the strengths of its child welfare system and the areas needing improvement on an on-going basis.

Agency Administering the Plan

The Division of Child and Family Services is responsible for the development of the Child and Family Services Plan and administering the Title IV-B and Title IV-E programs under the plan. The DCFS provides a wide range of services for children, youth, and families in Nevada. In addition to child welfare services, the DCFS also manages Juvenile Justice programs and Children's Mental and Behavioral Health Services.

¹ ACYF-CB-PI-20-02 APSR Program Instruction February 4, 2020

² The APSR 2021 is submitted in June 2020. The 2021 APSR covers the activities completed during the period since the submission of the 2020-2024 CFSP and addresses planned activities for FY 2021.

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

- Community Services: Oversees case management and direct services to youth in the rural child welfare, juvenile justice, and children's mental health systems.
- Administrative Services: Oversees the Division's Fiscal Services, Information Technology Services, and Grants Management Unit.
- Residential Services: Oversees both juvenile justice correctional facilities and children's mental health treatment facilities.
- Quality and Oversight: Oversees the Division's teams focused on systems improvement and quality assurance including the Children's Mental Health Planning and Evaluation Unit, the Juvenile Justice Programs Office, Systems Advocate and the Child Welfare Family Programs Office (FPO). The FPO is responsible for 1) oversight of child welfare services in Nevada; 2) compliance with federal and state requirements; and 3) quality improvement of child welfare practice.

Child Welfare Services Administrative Structure

Nevada is one of two states with a hybrid child welfare administrative structure.³ In the two largest urban counties child welfare services are state-administered and county operated. The remaining 15 rural counties are state-administered, and state operated. In SFY 2019, the state received 37,613 child protective Services referrals and conducted 15,429 child protective services investigations. There was an average of 4,749 youth in foster care.⁴ The 17 counties are divided into three regions as outlined below.

- The Northern Region encompasses Washoe County and includes the major cities of Reno and Sparks. It has a population of 465,735 residents making it the second most populous county in the state. Child Welfare Services are delivered by Washoe County Human Services Agency (WCHSA). The region conducted 1,873 child protective services investigations with an average of 837 children in foster care.⁵
- The Southern Region encompasses Clark County and includes the major cities of Las Vegas, Henderson, North Las Vegas, Boulder City and Mesquite. It has a population of 2,231,647 residents making it the most populous county in the state. Child Welfare services are delivered by Clark County Department of Family Services (CCDFS). The region conducted 9,637 child protective services investigations with an average of 3,292 in foster care.
- The Rural Region encompasses the remaining 15 counties and includes the major cities of Carson City, Fernley, Fallon, Elko, and Pahrump. The 15 rural counties combined has a population of 337,010 residents. Child Welfare services are delivered by offices operated by DCFS. The region conducted 900 CPS investigations with an average of 416 children in foster care.

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³ State Vs. County Child Welfare Administration, Child Welfare Information Gateway
<https://www.childwelfare.gov/pubs/factsheets/services/>

⁴ DCFS Data Book. CPS Investigations and Foster Care End of Month, February 29, 2020

⁵ All data in Child Welfare Services Administrative Structure is from DCFS Data Book as of February 29, 2020

Reshaping Child Welfare in Nevada

In November 2018, the Administration for Children and Families Children's Bureau issued a call to action to the child welfare field to implement primary prevention strategies.⁶ This paradigm shift to focus on prevention is meant to strengthen families before maltreatment has occurred and prevent the unnecessary removal of children from their homes. Common problems such as limited or loss of income or lack of housing, when left unattended, can escalate to crisis and lead to formal child welfare involvement.

According to Kids Count 2018⁷, Nevada ranks 47th nationally in terms of child well-being based on 16 indicators representing four areas of well-being: Economic (43rd), Education (49th), Health (43rd), and Family and Community (42nd). These rankings reflect the risk of families becoming involved with the child welfare system with the following factors contributing:

- 19% of children (127,000) lived in poverty in 2016.
- 30% of children (201,000) had parents who lacked secure employment in 2016.
- 34% of children (233,000) lived in households with a high house cost burden in 2016.
- 12% of children (77,000) lived in high-poverty areas in 2012 - 2016.

Nevada has spent the last year working in partnership with key stakeholders to develop a plan to make changes to the current system and working with families sooner through upfront prevention efforts. These efforts are reflected in the APSR.

Impact of National Health Emergency

Six weeks after the Program Instruction for the APSR was received by the state, the President of the United States declared a National Emergency in response to the global infectious disease pandemic designated by the World Health Organization (WHO) as COVID-19.

On March 17th of 2020, Nevada Governor Steve Sisolak ordered a statewide closure of all casinos and non-essential businesses such as restaurants, bars, movie theaters and gyms to help contain the virus. Additionally, schools were closed. These were unprecedented steps that not only Nevada, but all of the United States were also initiating. This was a rapidly evolving emergency that had never been faced.

All state, county and local jurisdiction agencies were dramatically impacted. Employees were transitioned to working remotely from home so that the continuity of government services could continue which presented numerous technological challenges. Additionally, all schools closed placing employees in the uncommon position of working, supervising and home schooling their children. The nationwide shortages of vital resources such as personal protective equipment (PPE) compromised the safety and security of not just child welfare workers, but the numerous children and families served daily. This impacted the operations of child welfare services throughout the state.

Additionally, the closure of all non-essential businesses placed enormous strains on the state's economy. Vacant Family Programs Office positions responsible for completing the APSR and PIP activities were frozen. The Nevada Partnership for Training (NPT), the state's training partners at the University of Nevada, Reno, and the University of Nevada, Las Vegas were also understaffed and subject to a hiring freeze. Attention and resources redirected towards the COVID-19 crisis, reduced capacity to provide support to CFSP and PIP activities. This resulted in

⁶ Information Memorandum [ACYF-CB-IM-18-05](https://www.acf.hhs.gov/cb/resource/im1805). Retrieved from: <https://www.acf.hhs.gov/cb/resource/im1805>

⁷ Annie E. Casey Foundation. 2018 Kids Count Data Book. Retrieved from: <http://www.aecf.org/resources/2018-kids-count-data-book>

negotiating with the federal Children's Bureau a one quarter extension to completing the PIP. Activities impacted by the COVID-19 crisis are explained throughout the report.

COLLABORATION

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

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

PIP COLLABORATIVE IMPLEMENTATION TEAMS

PIP collaborative implementation teams were formed to oversee and implement the PIP activities. The teams were initially formed to identify practice themes that were identified as areas of concern during the 2018 CFSR. The teams are now responsible for overseeing the strategies and implementing the key activities of the PIP. Teams are comprised of representatives from the Court Improvement Program, state, and county child welfare practice experts, juvenile justice, UNITY, Nevada Partnership for Training, and legal advocates. The teams initially received guidance and technical assistance from the Capacity Building Center for States (CBCS) and Region IX of the Children's Bureau. As a result of the COVID-19 crisis, the CBCS expanded its role to include development and implementation activities to support the state in the timely completion of PIP activities. The PIP teams interface and provide feedback loops with other stakeholder groups as listed below.

PIP Teams

The four PIP teams are overseen by the PIP Core Team which includes membership from Court Improvement Project (CIP) and all three children welfare agencies. Teams are assembled across four cross cutting performance themes and specific practice areas:

Team 1 Conducting Quality Safety and Risk Assessments

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

Team 2 Engaging Families

- Effective family engagement

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

Team 3 Achieving Timely Permanency

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

Team 4 Continuous Quality Improvement (CQI)

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

Decision Making Group

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

Assistant Director Group

The Assistant Director Group (ADG) is comprised of the Child Welfare Assistant Directors, the DCFS Deputy Administrators, and the DCFS Family Programs Office Social Services Chiefs. This group serves as the first level of review and approval on statewide child welfare. This group reviews policy recommendations resulting from CFSP, PIP, and continuous quality assurance activities. This group makes recommendations on statewide policies, programming, and planning activities to the DMG.

Statewide Quality Improvement Committee (SQIC)

The SQIC's purpose is to promote positive outcomes for Nevada's children through continuous oversight and analysis of state and federally identified performance measures and data relevant to continuous quality improvement. The charter and membership of SQIC is currently being reconstituted, with the assistance of Capacity Building Center for States (CBCS), under the work of PIP Team 4 which is charged with strengthening the statewide quality assurance system.

Nevada Life Youth Advisory Board

Consultation and Collaboration with youth and adult leaders occur through the facilitation of the statewide Youth Advisory Board (YAB). Nevada's Independent Living Program Specialist (ILPS) facilitates the statewide youth advisory board, Nevada LIFE (Leaders in Future Excellence). The development of the CFSP and PIP were presented to the YAB for feedback. Refer to the Chafee section further information regarding YAB's contributions.

Quality Parenting Initiative (QPI)

The Quality Parenting Initiative was developed statewide to ensure that every child removed from their home due to abandonment, abuse, or neglect is cared for by a foster family who provides skilled, nurturing parenting while helping the child maintain connections with their family. This collaborative engages foster care providers through monthly meetings in each local jurisdiction.

Additionally, Nevada conducts surveys and focus groups with foster parents to consult with them on service array, training and strengths, and needs of the foster care system.

Advisory Committee

An Advisory Committee was assembled of internal and external stakeholders i.e., peer parent advocates, birth parents, CASA, aged out Foster Youth, Providers, CJA Task Force, and foster parents to identify and make recommendations on some of the areas identified as needing improvement from the CFSR. This committee also served as advisor to the Child and Family Services Plan (CFSP). This committee did not meet during this reporting period due to key staffing shortages. Over the next year, the state will evaluate how to better engage families including leveraging parent mentoring programs and System of Care activities that exist at the local and state level.

Indian Child Welfare Committee

The Indian Child Welfare (ICW) committee is co-chaired bi-monthly by the Executive Director from Inter-Tribal County of Nevada (ITCN) and the DCFS Indian Child Welfare Specialist. These meetings are offered in-person and through phone conferencing to allow participation from the 27 federally recognized tribes, bands, and councils, in Nevada. Meetings provide a venue to address training, policy, and practice issues and for obtaining feedback from the tribal communities. Additionally, the DCFS tribal liaison participates in quarterly Nevada Department of Health and Human Services (DHHS) meetings to discuss service and policy issues between tribal leaders and the state.

Workforce Innovation Team

The Training Management Team (TMT) is being transitioned into the Workforce Innovation Team (WIT). The WIT is comprised of the DCFS-FPO, the child welfare regions, University of Nevada, Las Vegas (UNLV), and the University of Nevada, Reno (UNR) who work collaboratively to manage and improve the child welfare training delivery system. The meeting occurs twice per month. The DCFS FPO Chief responsible for overseeing the work of the WIT, is also the CFSP/PIP Coordinator who provides a feedback loop on matters related to the quality improvement case reviews QICR, CFSP, and PIP activities. Additionally, WIT members participate on PIP Collaborative Implementation teams.

This collaborative team is charged with guiding and implementing the Coach NV model adopted from the Atlantic Coast Child Welfare Implementation model. Coordination between the child welfare regions and the Nevada Partnership for Training is supported by the Capacity Building Center for States Integrated Capacity Building Plan. The purpose of this intensive project is to implement the coaching model in the three regions of the state.

Children's Justice Act Task Force

The Children's Justice Act Task Force (CJA) is a multi-disciplinary team charged with developing, establishing, and operating programs designed to improve the assessment, investigation, and prosecution of suspected child abuse and neglect. Multiple members of CJA also - active members in PIP development teams (CORE team, Team 1, Team 3) and CIP. The CJA Chair is a member of the judiciary that leads workgroups for CIP.

CONSULTATION AND COORDINATION WITH THE COURT IMPROVEMENT PROGRAM

The Court Improvement Program (CIP) Select Committee Meeting meets quarterly and through this meeting, the Nevada court systems partner with the Division of Child and Family Services (DCFS) on a variety of fronts that focus many of its efforts on implementing the CFSP, APSR, and CFSR. Three CIP members participate in the PIP CORE Team. This membership helps align

child welfare agencies with the courts in efforts to develop, implement, and monitor child welfare performance and improve outcomes. A special project of the CIP is the development of a legal representation study which includes performance measures and a survey created to be completed by the local judicial districts using the Court Improvement Councils (CIC). Additionally, DCFS has established a formal system to subgrant IV-E funds to entities providing legal representation.

Court Improvement Councils

All 11 Judicial Districts have collaborative Court Improvement Councils which develop annual action plans to improve the handling of the judicial handling of child welfare cases. The CICs meet regularly in their communities and at an annual Summit. During the 2019 CIC Summit, the CICs members received PIP required trauma informed training. They also updated their local action plans.

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

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

Nevada has contracted with the University of Maryland School of Social Work Institution for Innovation and Implementation to support the development of a Title IV-E Prevention Program Plan in Nevada in response to the Family First Prevention Services Act (FFPSA). The FFPSA plan activities supported year 1 PIP strategies and activities. DCFS held structured planning meetings with all five of the state divisions under the Department of Health and Human Services (DHHS) which include: DCFS, Aging and Disabilities Services (ADSD), Health Care Financing and Policy (Medicaid), Department of Public and Behavioral Health (DPBH), and Department of Welfare and Supportive Services (DWSS). Additional planning meetings were held with programs within those divisions including Community Based Child Abuse Prevention (DCFS), children's mental health (DCFS), System of Care (DCFS), Mobile Response (DCFS), home visiting, maternal health, and rural children's mental health (DPBH). The purpose of these collaborative meetings was to educate sister agencies on the FFPSA as well as to identify and leverage other DHHS Divisions' programs and resources aimed at increasing child welfare prevention services.

As part of the FFPSA implementation planning, Nevada completed a multi-pronged needs assessment to determine the existing service array that could be used for FFPSA prevention services and the capacity for expansion of current service providers and services provided. The needs assessment included a provider survey, which was introduced with two 1-hour live webinars to allow for questions and comments from community and state providers. Nevada received a total of 51 surveys (38 from community-based and state service providers, and 13 from congregate care providers). Additionally, a virtual "town hall" was held with specialized and advanced foster care providers to answer questions about IV-E eligibility and Qualified Residential Treatment Providers (QRTP) status and readiness.

State Team Planning Meeting

Members of DCFS and CIP attended the Children's Bureau State Planning Meeting in Washington, D.C on March 12-13, 2020. The goal was to identify the state's vision as well as three areas of alignment to include: primary prevention efforts; prevent removal; achieve permanency; and improve the foster care experience. The vision that was identified by the team was to reduce or prevent removal of children by transforming and rebranding the public's

perception of child welfare to a provider of services and resources for families with needs; to educate stakeholders and families regarding preventative resources and engage families in a compassionate and collaborative environment.

The team identified three potential goals in improving primary prevention to include: educating the community regarding the resources available in each Judicial Districts; create a core team to unify statewide strategic efforts possibly made up of CIP and the CICs; and rebranding child welfare services to preventative services.

UPDATE TO ASSESSMENT ON CURRENT PERFORMANCE IN IMPROVING OUTCOMES

Nevada entered a Program Improvement Plan (PIP) on November 1, 2019. On May 8, 2020, the Children's Bureau approved a Revised Measurement Plan for a one quarter extension for case reviews due to the national COVID-19 emergency. Therefore, state rating summary data reflects only two quarters of reviews instead of three quarters; the Q3 review was rescheduled to Q4. It was premature to analyze the impact of the PIP on each performance item due to the following:

- The sample size was significantly smaller because it did not include the region with the largest sample
- The first case review occurred prior to the implementation of the PIP
- The second case review occurred two weeks following the first quarter of the PIP
- The third case review did not occur due to the COVID-19 crisis.

The Children's Bureau provided guidance that allowed the state to reference the PIP when reporting on current performance. **Appendix A** Nevada PIP Q2 Progress Report provides progress on strategies and activities. For each safety, permanency, and well-being outcome and systemic factor, reference is made to the relevant PIP goal as outlined below. Items 1, 2, 3, 4, 5, 6, 12, 13, 14, and 15 are being monitored by the PIP. For those items requiring additional detail or were not included in PIP activities, the narrative is provided.

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

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

PIP Progress Report: This outcome is tied to Nevada's PIP Goal 1. See Appendix A Nevada PIP Q2 Progress Report.

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

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

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

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

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

Table 1: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item1: Timeliness of Initial Investigations of Reports of Child Maltreatment	58.3%			85.7%			68.9%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	58.33% n=21	41.67% n=15	n=44	85.7% n=18	4.3% N=3		

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The federal performance expectation for Safety Outcome 1 is 95%. Item 1 Timeliness of Initiating Investigations of Reports of Child Maltreatment is the only performance indicator for this outcome. Nevada received an area needing improvement rating as only 58.3% of the cases rated a strength in the 2018 CFSR. PIP Goal 1 is addressing this item. Only three quarters of case reviews would have been completed during this reporting period. However, due to COVID, only two were completed and a new measurement plan was approved. Based on only two quarters of case reviews and a significantly reduced sample size the state's percentage of cases that received a strength was 85.7%.

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

PIP Progress Report: This outcome is tied to Nevada's PIP Goal 1. See Appendix A Nevada PIP Q2 Progress Report.

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

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

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

Performance Item 2 is being addressed by the following PIP key activities:

- 1.1.2 requires updating of the Nevada Initial Assessment which helps identifies risk and safety threats and resources needs to prevent removal and staff training to clarify policy expectations.
- 1.2.1 and 1.2.2 support practice changes to ensure fidelity to the model as well as developing a pool of statewide experts who provide peer to peer coaching and field mentorship on the model.

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Table 2: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 2: Services to Families to Protect Children in Home and Prevent Removal or Re-Entry Into Foster Care	71.88%			61.54%			82.0%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	71.88% n=23	28.13% n=9	n=48	61.54% n=16	38.46% n=10	n=16	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for Item 2 Services to Families to Protect Children in Home and Prevent Removal or Re-Entry into Foster Care is 90%. Nevada received an area needing improvement rating as only 71.88% of the cases rated a strength in the 2018 CFSR. PIP Goal 1 is addressing this item. Only three quarters of case reviews would have been completed during this reporting period. However, due to COVID, only two were completed and a new measurement plan was approved. Based on only two quarters of case reviews and a significantly reduced sample size the state's percentage of cases that received a strength was 61.54%.

Item 3: Risk Assessment and Safety Management

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

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

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

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Table 3: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 3: Risk Assessment and Safety Management	46.25%			45.24%			53.4%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	46.25% n=37	53.75% n=43	n=0	45.24% n=19	54.76% n=23	n=0	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for Item 3 Risk and Safety Assessment and Management is 90%. Nevada received an area needing improvement rating as only 46.25% of the cases rated a strength in the 2018 CFSR. Only three quarters of case reviews would have been completed during this reporting period. However, due to COVID, only two were completed and a new measurement plan was approved. Based on only two quarters of case reviews and a significantly reduced sample size the state's percentage of cases that received a strength was 45.24%.

Table 3a: Recurrence of Maltreatment

National Performance	Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
				Lower CI*	RSP	Upper CI*
9.5%	NCANDS FY 16-17	↓	7.6%	8.8%	9.7%	10.7%
9.5%	NCANDS FY 17-18	↓	6.8%	7.9%	8.7%	9.97%

Nevada Child and Family Services Review (CFSR 3) Data Profile February 2020.

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

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

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

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

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

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Table 3b: Maltreatment in Care

National Performance	Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
				Lower CI*	RSP	Upper CI*
9.67%	AFCARS 16AB, FY 16	↓	8.18	9.14	10.85	12.85
	AFCARS 17AB, FY 17	↓	4.44	4.88	6.13	7.71

Nevada Child and Family Services Review (CFSR 3) Data Profile February 2020.

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

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

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

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

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

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

PIP Progress Report: This outcome is tied to all items in Nevada's PIP Goals 2 and 3. See Appendix A Nevada PIP Q2 Progress Report.

Item 4: Stability of Foster Care Placement

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. The policy requires that the agency provide the foster care provider with appropriate information about the child's family, medical, and behavioral history, as well as discuss the child's plan for permanency, and any needs prior to placement. The purpose of sharing such information is to identify and provide for the most appropriate matched foster home (NRS 424.038(1), NAC 424.465).

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

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Table 4: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 4 Stability of Foster Care Placement	72.73%			62.07%			80.4%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	72.73% n=40	27.27% n=15	n=0	62.07% n=18	37.93% n=11	n=0	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for Item 4 Stability of Foster Care Placement is 90%. Nevada received an area needing improvement rating as only 72.73% of the cases rated a strength in the 2018 CFSR. Only three quarters of case reviews would have been completed during this reporting period. However, due to COVID, only two were completed and a new measurement plan was approved. Based on only two quarters of case reviews and a significantly reduced sample size the state's percentage of cases that received a strength was 62.07%.

Table 4a: Placement Stability

National Performance	Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
				Lower CI*	RSP	Upper CI
4.44 moves per 1,000 days in care	AFCARS 18A - 18B	↓	5.32	5.53	5.77	6.02
	AFCARS 19A - 19	↓	5.52	5.75	5.99	6.24

Nevada Child and Family Services Review (CFSR 3) Data Profile February 2020.

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

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

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

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

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

Item 5: Permanency Goal for Child

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

The statewide 0204 Case Planning Policy, the 0508/0509 Nevada Initial Assessment (NIA) Policies, and Concurrent Planning Guide are under revision as a result of PIP key activities 3.2.1 and 3.3.3. These policies provide the foundation for the development of permanency planning.

Table 5: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP item
Item 5 Permanency Goal for Child	41.82%			68.97%			50.3%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	41.82% n=23	58.18% n=32	n=0	68.97% n=20	31.03% n=9	n=0	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for Item 5 Permanency Goal of Child is 90%. Nevada's received an area needing improvement for this item with a 41.82% statewide rating for the CFSR review in 2018. Only three quarters of case reviews would have been completed during this reporting period. However, due to COVID, only two were completed and a new measurement plan was approved. Based on only two quarters of case reviews and a significantly reduced sample size the current rating is 68.97%.

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

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

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

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

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

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

Statewide policies, 0204 Case Planning and 0103 Adoption of Children Age 12 and Over, indicate that adoption is the preferred permanency goal when it is determined that a child cannot be reunited with his or her birth family. The 1001 Diligent Search Process and Notice policy directs agencies to begin search activities and identification of family members during the initial contact with the family and requires that they are initiated no later than at the time the Safety Plan is completed. Statewide policy 0514.0 Termination of Parental Rights (TPR), in compliance with ASFA, requires that adoption proceedings be completed within 24 months of the child's entry into foster care.

Nevada attended the Adoption Call to Action (ACA) Summits held in Washington DC in August 2019 and January 2020. The ACA team was formed in October 2019. The team consists of members from the three Child Welfare Agencies, the Adoption Exchange, and the Family Programs Office. The Family Programs Office Adoption Specialist who leads the ACA meetings is a participant on the CIP. The team meets monthly for 90 minutes. ACA Team meetings are used to review adoption programming, address statewide needs, and progress with the goal of reducing the number of Nevada children and youth waiting to be adopted by identifying and eliminating barriers to achieving permanency.

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

- Monthly updates from Adoption Exchange on Wendy's Wonderful Kids (WWK) Recruiters. All NV jurisdictions are using the WWK recruiters to help increase statewide adoptions and several success stories have come from finding family members. This ongoing contact strengthens the partnership between the State and the Adoption Exchange.
- (FPO) participate on both PIP Team 3 and the ACA Team as well as other ACA Team members from other jurisdictions. Consistency between the statewide PIP and specialized teams such as ACA allow for unity in successful strategies and program outcomes and ensure communication throughout the state.
- Jurisdictions are coming together to discuss overall adoption topics such as subsidy, child welfare worker safety in the field, resources, contacts, documentation, etc. This was not done formally in the past.
- New Statewide Adoption policies are being drafted and written from workgroups that have been established from the ACA Team.

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

- 3.1.3 increases the use of mediation to achieve timely permanency through training to the child welfare workforce
- 3.2.1 and 3.2.1A address concurrent planning

- 3.2.2 and 3.2.2A develops protocols and practice guide to improve the understanding of KinGAP as an alternate permanency plan
- 3.3.3 improves diligent search of relative caregivers
- 3.4.1 initiates practice changes to streamline and expedite the termination of parental rights (TPR) process; thereby reducing the time to permanency in adoption cases

Table 6: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 6: Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement	18.18%			41.38%			24.8%
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	18.18% n=10	81.82% n=45	n=0	41.38% n=12	58.62% n=17	n=0	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for Item 6 Achieving Reunification, Guardianship, Adoption, and OPPLA is 90%. Nevada received an area needing improvement is only 18.18% of the cases rated a strength in the 2018 CFSR. Only three quarters of case reviews would have been completed during this reporting period. However, due to COVID, only two were completed and a new measurement plan was approved. Based on only two quarters of case reviews and a significantly reduced sample size the state's percentage of cases that received a strength was 41.38%.

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Table 6a: Permanency for Children in Foster Care

National Performance		Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
					Lower CI*	RSP	Upper CI
12 months for children entering foster care	42.7%	AFCARS 16A-16B	↑	48.5%	45.8%	47.6%	49.4%
		AFCARS 17A-19B	↑	44.6%	42.1%	43.9%	45.6%
12 months for children in care 12-23 months	45.9%	AFCARS 18A -18B	↑	46.4%	40.4%	43.0%	45.5%
		AFCARS 19A-19-B	↑	46%	40.2%	42.7%	45.1%
12 months for children in care 24 months or more	31.8%	AFCARS 18A & 18B	↑	47.1%	34.5%	36.6%	38.7%
		AFCARS 19-A19-B	↑	50.1%	36.9%	39%	41.1%
Re-entry to foster care	8.1%	AFCARS 16B-19A	↓	6.8%	6.1%	7.4%	9.0%
		AFCARS 17A-19B	↓	5.6	5.1%	6.3%	7.8%

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

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

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

Nevada Child and Family Services Review (CFSR 3) Data Profile February 2020. *CI = Confidence Interval

Three quarters of data were not available due to COVID as one review had to be postponed.

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

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

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

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

PIP Progress Report: Permanency Outcome 2 is not included in Nevada's PIP, however, Goals 2 and 3 do support improvement in these areas. Analysis of data will be discussed as part of the PIP Core team's SQIC (See COLLABORATION) role following case reviews. - See Appendix A Nevada PIP Q2 Progress Report.

Item 7: Placement with Siblings

NRS 432B.580, NR432B.390 as well as the statewide 1001 Diligent Search Process and Placement Decisions policy, requires that children be placed together unless there is justification for not doing so based on the best interest of the child. NRS 432B.3905 specifies that a child under the age of 6 may not be placed in a child care institution unless appropriate foster care is not available in the child's home county and reasonable efforts are made to place the child's

siblings are in the same location, or if placement in a child care institution is required for the child to access medical services or to avoid separating siblings. NRS 432B.550 creates a presumption that it is in the best interest of the child for siblings to be placed together and 432B.580 (2) (b) requires that, if siblings are not placed together, there must be a report made to the court detailing the agency's efforts in this area, including a visitation plan for approval by the court. NRS.432.525 – NRS.432.530 established a Sibling Bill of Rights. The state continues to be committed to ensuring siblings are placed together.

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

Table 7: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
	87.5%			84.21%			N/A
Item 7: Placement with Siblings	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	87.5% n=35	12.5% n=5	0% n=15	84.21% n=16	15.79% n=3	0% n=10	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for Item 7 Placement with Siblings is 90%. Nevada received an area needing improvement rating as only 87.5% of the cases rated a strength in the 2018 CFSR. Based on only two quarters of case reviews and a significantly reduced sample size the state's percentage of cases that received a strength was 84.21%.

Item 8: Visiting with Parents and Sibling in Foster Care

NRS 423B.550(3)(a) provides that a parent of a child that has been removed from the home retains the right to reasonable visitation with the child unless this right has been restricted by the court. The NAC 432B.400(o) requires that the case plan specifically provides for family visitation, including, without limitation, visiting siblings if the siblings are not residing together. NAC432B.220 requires an arrangement of regular and frequent visits with his parents and siblings for a child who is placed outside of his home.

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

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

Table 8: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
	67.5%			78.95%			N/A
Item 8: Visiting with Parents and Sibling in Foster Care	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	67.5% n=27	32.5% n=13	n=15	78.95% n=15	21.05% n=4	n=10	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for Item 8 Visiting with Parents and Siblings in Foster Care is 90%. Nevada received an area needing improvement rating as only 67.5% of the cases rated a strength in the 2018 CFSR. Based on only two quarters of case reviews and a significantly reduced sample size the state's percentage of cases that received a strength was 78.95%.

Item 9: Preserving Connections

NRS 432B.390 requires that priority be given to family members for placement of children who are removed from their birth families unless doing so would not be in the best interest of the child. DCFS policy 1001 Diligent Search and 1003 Kinship Care requires workers to complete a diligent search for any possible adult family members. Once located, those identified family members are assessed for appropriateness in much the same manner as regular family foster care providers. NRS432B.560 grants a reasonable right of visitation to grandparents. NRS432.525-535 establishes a bill of rights for foster children that includes reasonable participation in extracurricular, cultural, and personal enrichment activities that are consistent with the age and developmental level of the child and to attend religious services of his or her choice. Statewide policy 0213 Visitation Policy supports efforts to maintain the continuity of family relationships and preserve connections for children. This policy is being reviewed under PIP activity 2.1.6 and helps to strengthen this item even though it is not a PIP requirement.

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

Nevada's Just in Time web-based training which is part of the Quality Parenting Initiative program in Nevada for foster parents includes training on fostering and nurturing cultural and family connections.

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Table 9: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
	74.55%			78.57%			N/A
Performance Item Rating	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
Item 9: Preserving Connections	74.55% n=41	25.45% n=14	n=0	78.57 n=22	21.43% n=6	n=1	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for item 9 'Preserving Connections' is 90%. Nevada received an area needing improvement rating as only 74.55% of the cases rated a strength in the 2018 CFSR. Based on only two quarters of case reviews and a significantly reduced sample size the state's percentage of cases that received a strength was 78.55%.

Item 10: Relative Placement

NRS 432B.390 and NRS432B.480 require that priority be given to family members for placement of children who are removed from their birth families unless doing so would not be in the best interest of the children. NRS432B.550 requires placement preference with a relative within the fifth degree of consanguinity or fictive kin who is suitable and able to provide proper care and guidance. NRS432B.510 requires relative notification when parents are unable to be found.

Although this item is not being addressed directly in the PIP, several key activities in Goal 3 are improving diligent search processes and the use of KinGap.

Table 10: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
	52.73%			68.97%			N/A
Item 10: Relative Placement	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	52.73% n=29	47.27% n=26	n=0	68.97% n=20	31.08% n=9	n=0	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for item 10 'Relative Placement' is 90%. Nevada received an area needing improvement rating as only 52.73% of the cases rated a strength in the 2018 CFSR. Based on only two quarters of case reviews and a significantly reduced sample size the state's percentage of cases that received a strength was 68.97%.

Item 11: Relationship of child in care with parents

NRS 432.525-535 established a bill of rights for foster children that includes maintaining contact with parents and family; and the right to reasonable participation in extracurricular, cultural, religious, and personal enrichment activities that are consistent with the age and developmental level of the child. The Foster Child Bill of Rights and the Foster Youth Bill of Rights are maintained on the DCFS website. Statewide policy 1011 Reasonable and Prudent Parent Standard /

Normalcy provides guidance to support normalcy for children through the Reasonable and Prudent Parent Standard in foster care by ensuring the status of being in foster care does not limit their ability to experience and participate in community, school, family or social activities.

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

Table 11: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 11: Relationship of child in care with parents	62.07%			70.59%			N/A
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	62.07% n=18	37.93% n=11	n=26	70.59% n=12	29.41 n=5	n=12	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for item 11 "Relationship of Child in Care with Parents" is 90%. Nevada received an area needing improvement rating as only 62.07% of the cases rated a strength in the 2018 CFSR. Based on only two quarters of case reviews and a significantly reduced sample size the state's percentage of cases that received a strength was 70.9%.

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

PIP Progress Report: This outcome is tied to Nevada's PIP Goal 2. See Appendix A Nevada PIP Q2 Progress Report.

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

Policies 0508 and 0509 Nevada Initial Assessment and 0211 Protective Capacity Family Assessment guide initial assessments of parents and children. NRS 432B.300 and 432B.393 require child welfare agencies to provide services to preserve families, prevent the placement of children if possible, and, if not possible, provide a plan describing those services that would facilitate the safe return of the child. NAC 432B.190, .200, .210, and .240 requires agencies to provide case planning and agreements with parents using strengths and resources in planning and requires the agency to provide a range of services to preserve the family. NAC 432B.400, .405, and .410 require the agency to provide case planning and services to children in foster care and their parents. 502 CAPTA IDEA Part policy requires a referral for the developmental screening of children under age three. Policy 0801 Independent Living Policy was developed to ensure that youth age 14 and older in foster care receive adequate case planning and services for transition to adulthood. Finally, policy 1004 Training, Assessment and Licensing of Foster, Relative, and Adoptive Homes covers the assessment of the appropriateness of potential foster families, licensed relatives, and adoptive families.

Performance Item 12 is being addressed by the following PIP key activities:

- 2.1.1 and 2.2.5 require Motivational Interviewing for all staff and on-going of transfer of learning through supervision

- 2.1.3 and 2.1.4 support the development and delivery of trauma informed communication
- 2.1.6, 2.1.7, 2.2.2, 2.2.3, 2.2.4 and 2.2.5 which strengthen workers skills family engagement and quality of contacts including conducting adequate needs assessments

Table 12: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 12: Identifying Needs and Services to Child, Parent and Foster Parent	37.5			38.1%			44.4%
	S	ANI	NA	S	ANI	NA	44.4%
	37.5% n=30	62.5% n=59	n=0	38.1% n=16	61.8% n=26	n=0	
Item 12 A Needs Assessment and Services to Children							<i>Intentionally left blank.</i>
	58.75% n=47	41.25% n=33	n=0	64.29% n=27	35.71% n=15	n=0	
Item 12 B Needs Assessment and Services to Parents							
	41.07% n=23	58.93% n=33	n=24	27.27% n=9	72.73% n=24	n=9	
Item 12 C Needs Assessment and Services to Foster Parents							
	73.08% n=38	26.92% n=14	n=28	67.86% n=19	32.14% n=9	n=14	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for item 12 and subparts A, B, C “Needs Assessment and Services to Children” is 90%. Nevada received an area needing improvement rating as only 37.5% (overall Item 12) of the cases rated a strength in the 2018 CFSR. Only three quarters of case reviews would have been completed during this reporting period. However, due to COVID, only two were completed and a new measurement plan was approved. Based on only two quarters of case reviews and a significantly reduced sample size the state’s percentage of cases that received a strength was 38.1%.

Item 13: Child and family involvement in case planning

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

The 0204 Case Planning policy provides the basis for a link that ties the findings of the child and family assessments to the 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. The policy requires a working partnership between the case manager and the family. The family is to be assisted in identifying its strengths, needs, culture, supports, and current resources that will affect its ability to achieve and maintain child safety, child permanency, and child and family well-being through

an individualized case plan. In the event a parent is not available or refuses to participate in case planning, the case plan team (foster parents, extended relatives, other providers, and child, if appropriate) must still be formed and a plan developed. In all cases, every effort must be made and continue to be made to involve parents and children (if age appropriate) in the case planning process.

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

Table 13: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 13: Child and family involvement in case planning	48%			31.43%			55.4%
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	48% n=36	52% n=39	n=5	31.43% n=11	68.57% n=24	n=7	

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

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for item 13 “Child and Family involvement in Case Planning Relationship of Child in Care with Parents” is 90%. Nevada received an area needing improvement rating as only 48% of the cases rated a strength in the 2018 CFSR. Only three quarters of case reviews would have been completed during this reporting period. However, due to COVID, only two were completed and a new measurement plan was approved. Based on only two quarters of case reviews and a significantly reduced sample size the state’s percentage of cases that received a strength was 31.43%.

Item 14: Caseworker visits with child

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

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

Refer to [Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits](#).

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Table 14: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 14: Caseworker visits with child	55%			69.05%			62.1%
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	5% n=44	45% n=36	n=0	69.05% n=29	30.95% n=13	n=0	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for item 14 “Caseworker Visits with Child” is 90%. Nevada received an area needing improvement rating as only 55% of the cases rated a strength in the 2018 CFSR. Only three quarters of case reviews would have been completed during this reporting period. However, due to COVID, only two were completed and a new measurement plan was approved. Based on only two quarters of case reviews and a significantly reduced sample size the state’s percentage of cases that received a strength was 69.05%.

Item 15: Caseworker visits with parents

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

Performance Item 15 is being addressed by PIP Activities:

- 2.2.2, 2.2.3, 2.2.4 and 2.2.5 focus on quality assurance of case worker contacts through report development and use of data to strengthen quality and frequency.
- 2.1.7 through partnership, the child welfare agencies are developing a statewide newsletter to inform staff of CFSR findings and best practices. This is a deliverable over the upcoming year.

Table 15: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 15: Caseworkers Visits with Parents	46.3%			32.35%			55%
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	46.3% n=25	53.7% n=29	n=26	32.35% n=11	67.65% n=23	n=8	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for item 15 “Caseworker Visits with Parents” is 90%. Nevada received an area needing improvement rating as only 46.3% of the cases rated a strength in the 2018 CFSR. Only three quarters of case reviews would have been completed during this reporting period. However, due to COVID, only two were completed and a new measurement plan was approved. Based on only two quarters of case reviews and a significantly reduced sample size the state’s percentage of cases that received a strength was 32.35%.

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

PIP Progress Report: This outcome is indirectly tied to Nevada's PIP Goal 2 as it addresses contact with families and engagement. Nevada is not on a PIP for Well-being Outcome 2 or Item 16. See Appendix A Nevada PIP Q2 Progress Report.

Item 16: Educational Needs

NRS 388E Education of Children in Foster Care and NA 388E The Program of School Choice for Children in Foster Cares authorizes the legal guardians or custodians of certain children who are in foster care to apply to the Department of Education to participate in the program which allows such children to choose the school of their choice or remain at the school they were attending prior to being removed from their caretaker NRS 432B.540 requires educational reports be provided to the court. NRS 432B.580 requires a copy of an academic plan or any other education records for the child per NRS 388E. NRS 43B.462 establishes an educational decision maker for all children in foster care. The Decision Maker shall meet with the child, address disciplinary issues, ensures the child receives a free and appropriate education has access to special programs; and if the child is over 14 participates in transition planning. The decision maker can serve as a surrogate parent for children on an IEP. NRS 432.535 establishes a bill of rights related to education and vocational training for foster children.

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

Table 16: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 16: Educational Needs of the Child	72.31%			69.23%			N/A
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	72.31% n=47	27.69% n=18	n=15	69.23% n=18	30.77% n=8	n=16	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for item 16 "Educational Needs of the Child" is 90%. Nevada received an area needing improvement rating as only 72.31% of the cases rated a strength in the 2018 CFSR. Based on only two quarters of case reviews and a significantly reduced sample size the state's percentage of cases that received a strength was 69.23%.

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

PIP Progress Report: This outcome is indirectly tied to Nevada's PIP Goal 2 as it addresses contact with families and engagement. Nevada is not on a PIP for Well-being Outcome 2 or Item 17 or 18. See Appendix A Nevada PIP Q2 Progress Report.

Item 17: Physical Health of the Child

Statewide Policy 0207 Health Services supports these mandates by outlining processes to ensure that physical, developmental, and mental health needs of custodial children are identified and

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

Additionally, statewide policy 0502 requires, as part of the CAPTA Part-C Requirement for Custodial and Non-Custodial Children, that all children under the age of three, for a developmental assessment where there is a diagnosed physical or mental condition that has a high probability of resulting in a delay. Lastly, section 422(b) (15) (a) of the Social Security Act requires states to develop a plan for the ongoing oversight and coordination of health care services for children in foster care.

Nevada is not on a PIP for Item 17.

Table 17: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 17: Physical Health of the Child	51.52%			64.52%			N/A
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	51.52% n=34	48.48% n=32	n=14	64.52% n=20	35.48% n=11	n=11	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for item 17 “Physical Health of the Child” is 90%. Nevada received an area needing improvement rating as only 51.52% of the cases rated a strength in the 2018 CFSR. Based on only two quarters of case reviews and a significantly reduced sample size the state’s percentage of cases that received a strength was 64.52%.

Item 18: Mental Health of the Child

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

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

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

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

Nevada is not on a PIP for Item 18.

Table 18: CFSR/Statewide Quality Improvement Review Data

Performance Item	NV CFSR 2018			NV CQI			2022 PIP Goal
Item 18: Mental/Behavioral Health of the Child	66.66%			45.45%			N/A
	S	ANI	NA	S	ANI	NA	<i>Intentionally left blank.</i>
	N=37	39.34% n=24	n=19	n=19	54.55% n=12	n=20	

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

Nevada CFSR 2018= State Rating Summary

Nevada CQI = State Rating Summary which includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR. **Three quarters of data were not available due to COVID as one review had to be postponed.**

The overall federal performance expectation for item 18 “Mental/Behavioral Health of the Child” is 90%. Nevada received an area needing improvement rating as only 66.6% of the cases rated a strength in the 2018 CFSR. Based on only two quarters of case reviews and a significantly reduced sample size the state’s percentage of cases that received a strength was 54.55%.

SYSTEMIC FACTOR A: STATEWIDE INFORMATION SYSTEM

PIP Progress Report: This Systemic Factor is tied to Nevada’s PIP key activities in Goal 4 (Key Activities 4.3.1, 4.3.4, and 4.3.5) **Strategy 3:** *Ensure the accuracy of Permanency Case Plan Goal Data in UNITY for children in out-of-home placement by developing policy and conducting reviews (spot checks) to ensure accuracy of the permanency goals. This Strategy focuses on the Practice Theme of strengthening data collection, tracking, sharing and analysis.* See Appendix A Nevada PIP Q2 Progress Report.

Item 19: Statewide Information System

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

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

Information in the statewide assessment showed that Nevada's information system can identify the status, demographics, location, and goals of every child who is or within the last preceding 12 months was in foster care. AFCARS error reports are disseminated to each child welfare agency that flags issues with placement locations and permanency goals. Through PIP development root cause analysis, it was determined that current policy does not reflect when case plans should be updated in UNITY. PIP Team 4 conducted surveys of direct service staff and supervisor which were analyzed and resulted in policy recommendations to support the activities of PIP Team 3. These recommendations include when to establish permanency goals and enter and/or update the information in UNITY. Review of the recommendations and policy revisions occur in Q3.

Item 19 was rated as an ANI due to user error or oversight and no validation of data accuracy. These issues are addressed through Nevada's PIP Goal 4: Improve Statewide Child Welfare Outcomes by developing and strengthening the Statewide Quality Assurance System, specifically through Key Activities 4.3.1, 4.3.4, and 4.3.5. To support data quality improvement, IT and data staff are embedded in PIP Teams 4 to support communication and feedback loops.

SYSTEMIC FACTOR B: CASE REVIEW SYSTEM

PIP Progress report: This Systemic Factor is tied to Nevada's PIP Goal 3. See Appendix A Nevada PIP Q2 Progress Report.

Item 20: Written Case Plan

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

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

Item 20 was rated as an ANI during the 2018 CFSR. The statewide assessment showed that the state does not develop timely initial case plans because of conflicting timelines within the state's safety model. Additionally, case plans are not routinely developed jointly with parents and diligent search for parents is not consistently conducted.

Performance Item 20 is being addressed by PIP Activity 3.2.1 due in Q3 by revising 0204 "Case Planning" policy.

Item 21: Periodic Reviews

Although Nevada statute allows for administrative reviews, Nevada currently only uses judicial reviews. 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 respect to children in their care and to offer information about the services received by the child and family.

This item was rated as a strength during the 2018 CFSR. Information in the statewide assessment showed that Nevada ensures that periodic review hearings are held no less frequently than every 6 months. Jurisdictions closely track the timeliness of periodic review hearings. Stakeholders said that strong scheduling protocols contribute to the jurisdictions' adherence to the 6-month deadlines. Nevada is continuing to ensure this item is a strength through strong partnership with the Court Improvement Program on PIP activities and various initiatives.

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

Item 22: Permanency Hearings

NRS 432.590 and NRS 432.393. NRS 432B.590 mandates a permanency hearing be held no later than 12 months from a child's initial removal. When reasonable efforts are not required, pursuant to NRS 432.393, a permanency hearing must occur within 30 days of the judicial finding. Statewide policy 0206 Court Hearing Notification outlines agency requirements for providing and ensuring notification of court hearings to parents and relevant parties. This is being reviewed as part of PIP activities. Statewide policy 0514 Termination of Parental Rights (TPR) requires 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."

Item 22 was rated as a strength during the 2018 CFSR. Information in the statewide assessment showed that permanency hearings are occurring timely in almost all cases. Stakeholders

confirmed that initial permanency hearings occur no less frequently than 12 months from the date children enter foster care and no less frequently than every 12 months thereafter.

Nevada is continuing to ensure this item is a strength through strong partnership with the Court Improvement Program on various initiatives. Although not on a PIP for this item, PIP Goal 3 supports and strengthens permanency hearings.

Item 23: Termination of Parental Rights

NRS 432B.590 mandates 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 six months from that date. The NRS also identifies those circumstances in which the agency is not required to make reasonable efforts for reunification and addresses the issue of compelling reasons when it would not be in the child's best interest to file for TPR. If the court determines it is in the best interest of the child to terminate parental rights the court will ensure that the procedures required by NRS Chapter 128 Termination of Parental Rights are completed within 6 months after the court has made a determination.

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

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

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

PIP Activities that support Termination of Parental Rights include: PIP 3.2.1, 3.2.3, 3.1.2, 3.4.1, and 3.1.3.

Item 24: Notice of Hearings and Reviews to Caregivers

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

Notice of annual and semi-annual court hearings to the aforementioned caregivers, must be supplied pursuant to NRS 432B.580(6)(a)(b) 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.

This item was rated as an ANI in the 2018 CFSR. The statewide assessment indicated that the state did consistently provide notice to caregivers of hearings, failure of notices arriving timely, limited time for court hearings, high caseloads for caseworkers, and the practices of some caseworkers discouraging caregiver attendance were identified as challenges.

PIP Team 3 is addressing this through PIP 3.2.3 which is developing a template for caregivers to share child information with court. This Q5 deliverable is under development and ahead of schedule. Additionally, a related policy (not a PIP requirement) has been drafted and pending approval.

SYSTEMIC FACTOR C: QUALITY ASSURANCE SYSTEM

Item 25: Quality Assurance System

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

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

Item 25 is being addressed by CFSP Goal 4 and PIP Activities 1.1.3, 1.2.3, 1.2.4, 2.2.3, 2.2.4, 3.4.1, 4.1.1, 4.1.2, 4.1.3, 4.1.4, 4.2.1, 4.3.4, and 4.4.1. In the upcoming year, the state will be conducting a Continuous Quality Improvement (CQI) Self-Assessment developed with the Capacity Building Center for States (CBCS). It was determined that program improvement measures were not linked to the case review results and that relevant reports of the case review results are not utilized to implement improvement measures.

The requirements for this systemic factor and the state's QA/CQI system are described under the [Quality Assurance System](#).

SYSTEMIC FACTOR D: STAFF AND PROVIDER TRAINING

Item 26: Initial Staff Training

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

Preservice training is accomplished through the Title IV-E funded Nevada Partnership for Training (NPT). Pre-service training is provided statewide by University of Nevada, Las Vegas (UNLV) and the University of Nevada, Reno (UNR) which also partner with the child welfare jurisdictions to

deliver specific content along with coordinating on-the-job-training. This partnered approach to facilitate the training of new case managers allows for the integration of theory, jurisdictional agency policy, practical information, skill demonstration, and simulated skill practice. Content is delivered in a modular format along the trajectory of the life of a family through the system, and trainees complete pre and post-tests at each module, along with satisfaction surveys. In addition, efforts have been made to provide a standardized assessment and feedback structure for written assignments and simulation experiences.

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

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

Item 27: On- Going Staff Training

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

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

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

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

trainings related to child welfare and most mandatory trainings pertain to personnel concerns. Supervisor training is generic and there is no ongoing supervisor training requirement. Coach NV, CFSP Goal 3 addressing healthy workforce, is being implemented statewide to enhance supervisory skills to support workforce development and to reduce staff turnover.

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

PIP Key Activities 2.1.2, 2.14, 2.1.5, 3.1.1, 3.2.1 A, 3.2.3 (A).

Item 28: Foster Parent and Adoptive Training

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

Nevada Administrative Code (NAC) 424.270 states an applicant for a license for a foster home must have at least eight hours of training in foster parenting provided or approved by the agency that provides child welfare services. If the home has a pool, hot tub or Jacuzzi or other free-standing body of water or sauna, the applicants must also complete training in CPR and pool safety before licensure. Annually each foster parent must complete a minimum of four hours of advanced training in foster parenting provided or approved by the agency that provides child welfare services.

NAC 424.712 requires specialized foster homes or a foster care agency to have a minimum of 40 hours pre-service training and 20 hours advanced training annually. Nevada Revised Statutes (NRS) 424.0365 also requires that anyone who “operates a family foster home, a specialized foster home, an independent living foster home or a group foster home shall ensure that each employee who comes into direct contact with children in the home receive training within 90 days after employment and annual thereafter. Such training must include, without limitation, instruction concerning: (a) controlling the behavior children; (b) policies and procedures concerning the use of force and restraint on children; (c) the rights of children in the home; (d) suicide awareness and prevention; (e) the administration of medication to children; (f) applicable state and federal constitution and statutory rights of children in the home; (g) policies and procedures concerning other matters affecting the health, welfare, safety and civil and other rights of children in the home; and (h) working with lesbian, gay , bisexual, transgender and questioning children such other matters as are required by the licensing authority or pursuant to regulations of the Division. NRS 432A.177 requires childcare facilities staff to receive the same training, but within 30 days of employment.

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

- **Initial Foster and Adoptive Parent Training**

Nevada child welfare agencies utilize a single process for licensing both foster and adoptive homes. This process includes meeting the same requirements for pre-service and ongoing training, background checks, home study process and home inspection requirements. A potential adoptive home is considered a foster home until the actual adoption of the child finalizes through the court legal process.

Each region utilizes pre-service training curriculums that exceeds the minimum 8-hour state regulation requirement, providing a minimum of 24 hours of training. In addition, to the basic competencies required by all foster caregivers, the northern and southern regions offer specialized training sessions for pre-adoptive parents and relative caregivers.

Specialized Foster Care (SFC)

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

Foster Care Agencies: Contracted Foster Homes

Foster care agencies have the same minimum training requirements as Specialized Foster Care, however, the foster care agencies are responsible for providing and ensuring their contracted foster homes have met the training requirements outlined in NAC 244.712 and NRS 424.0365. They are required to submit the curriculum to the licensing authority for approval (NAC 244.212 (5)). Each member of the direct care staff foster care agency must complete training before providing supervision or direct care of a child or beginning any other responsibilities related to the supervision or direct care of children.

- **Ongoing Foster Parent Training**

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

As part of the QPI program, a statewide monthly meeting is held to address statewide activities and each region has a collaborative QPI committee to address on-going training needs of foster parents. Each region also has a QPI newsletter informing foster parents of new trainings available through Just-In-Time. In addition to web-based training, in-person advanced trainings are also offered throughout the year. Some in-person trainings are videotaped and then posted to the Just-In-Time website. Just-In-Time provides a post-test, upon passing the post-test the foster caregiver is emailed a certificate of training.

Within all three jurisdictions, the child welfare agency licensing workers annually collect all proof documentation from the foster/adoptive licensees for the ongoing/advanced trainings they have attended during the past year. This information is maintained in the licensee's hard case file.

Child Care Institutions

Requirements for training are identified within NRS 432A.177 and NAC 432A.323, .326. Completion of training requirements are monitored through the State of Nevada Division of Public and Behavioral Health (DPBH) / Child Care Licensing (CCL). All employee hired by a childcare institution must sign up as members on the Nevada Registry. This registry tracks the initial training hours required within 90 days of employment, identifies approved advanced trainings and provides a schedule of upcoming, available trainings www.nevadaregistry.org. The DPBH CCL inspects these facilities in-person, twice a year (semiannual / annual), at which time CCL monitors trainings for all direct caregivers employed by the childcare institution who provide care to children. According to the CCL Chief, 100% receive initial training within 90 days of employment; during the most recent bi-annual inspection of Nevada childcare institutions, 100% of staff were up to date in their ongoing training requirements.

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

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

SYSTEMIC FACTOR E: SERVICE ARRAY AND RESOURCE DEVELOPMENT

Item 29: Array of Services

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

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

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

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

This item is address by PIP activities 4.5.1, 4.5.1, 4.5.3, 4.5.5, and 4.5.6, which address the service array continuum, are in process and are deliverables in the upcoming year.

Item 30: Individualizing Services

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

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

Improvements to this item are supported by the activities outlined in the [Collaboration](#), [Goal 1A](#) and [Item 29](#) sections.

SYSTEMIC FACTOR F: AGENCY RESPONSIVENESS TO THE COMMUNITY

Item 31: State Engagement in Consultation with Stakeholders

NRS 432.0305 and NRS 432B require the DCFS to observe and study the changing nature and extent of the need for child welfare services and to cooperate with the Federal government in adopting and completing state plans that will assist the DCFS in providing services for children and families. This is accomplished through coordination and collaboration with other public and private agencies and entities in developing the five-year Child and Family Services Plan and

ongoing annual updates required by Title IV-B. The DCFS collaborates with a variety of entities in this process. Some key examples include:

- The Systems Advocate assists constituents regarding complaints and concerns regarding the programs the Division oversees. This advocate also serves as the Public Information Office, public record request officer and hearing officer.
- The Quality Parenting Initiative was developed statewide to ensure that every child removed from their home due to abandonment, abuse, or neglect is cared for by a foster family who provides skilled, nurturing parenting while helping the child maintain connections with their family. This collaborative holds monthly meetings in each local jurisdiction and includes foster parents from each area.
- The Legislative Committee on Child Welfare and Juvenile Justice is an ongoing statutory committee of the Nevada Legislature whose authority and duties are set forth in Nevada Revised Statutes 218E.700 through 218E.730. The Committee meets between the biennial sessions of the Legislature and consists of three members from the Senate and three members from the Assembly, appointed by the Legislative Commission. The chair and vice chair are selected by the Legislative Commission from among the Committee membership. The Committee reviews and evaluates issues relating to the provision of child welfare services and juvenile justice in the state and recommends legislation concerning child welfare and juvenile justice to the Legislature.
- The Nevada Victim Services Collaborative is to continuously improve access and delivery of services throughout Nevada for all victims and survivors through strategic planning, communication, and resource sharing among the state agencies that fund victim services. This is a place where victims, advocates and state agencies collaborate for victims of crime.
- System of Care is a family driven and youth guided program to serve children who have serious emotional disturbance while also providing support and services to their families. Currently the focus is on expansion of services to the rural counties.

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

This item continues to be supported by activities outline in the Collaboration, Goal1A, Item 29 and PIP Item 3.2.3.

Item 32: Coordination of CFSP Services with other Federal Programs

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

The State of Nevada has a system in place to coordinate services under the CFSP with services or benefits by other federal or federally assisted programs serving the same population group. The Department of Health and Human Services (DHHS)/Division of Child and Family Services (DCFS) relies on close relationships with a wide range of partners and interdependencies to coordinate services and benefits to the same population group. The following Divisions under the umbrella of the DHHS receive federal funding in which active coordination efforts are on-going:

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

DHHS recently formed the Maternal and Child Health collaborative to discuss activities impacting maternal and child health population across the department and strengthen communication and program development between DHHS sister agencies. Additionally, there are many other partnerships with other departments, agencies and or entities who receive federal funding.

This item was determined to be strength in the 2018 CFSR. The statewide assessment showed the state collaborates with numerous state, county and tribal agencies. This item is supported by activities outlined in [Collaboration](#), [Goal1A](#), [Item 29](#) and PIP Items 4.5.1, 4.5.2, 4.5.3, 4.5.5 and 4.5.6.

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

Item 33: Standards Applied Equally

NAC 424-Foster Homes for Children regulations serve as the overarching standards for foster homes. NAC 424.250 specifies staffing ratios in specialized foster homes, family and group foster homes. Statewide policy 1605 Use of Waivers – Foster Care and Adoption outlines procedures for requesting a wavier for certain foster care licensure and/or adoption standards as well as identifies the fiscal ramifications of using a waiver, which can affect IV-E eligibility or non-eligibility for reimbursement of funding through the federal government.

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

The State of Nevada previously reported work on NAC 424 to bring Nevada into compliance with the National Model Licensing Standards by October 2019; however, it was realized through work with the Children's Bureau, Nevada could submit with their Title IV-E Plan, Family First Prevention Services Act: Deviation from Model Licensing Standards and Waivers for Foster Family Homes outlining where Nevada's standards deviate from the National Model Licensing Standards. Nevada submitted the standards to the Children's Bureau on September 4, 2019 and was provided approval of this submission on September 25, 2019. The changes to NAC 424 are in the process of being updated through the Legislative Commission.

This item was rated an ANI as the state was not systematically tracking the specific reasons for using waivers of licensing standards for foster homes, especially for non-relative foster homes licensed using a waiver. Issuing a waiver to license a foster home in Nevada is now a broader

process that requires multiple levels of oversight, through the local child welfare's management and administration as well as through DCFS Administration. From July 1, 2019-May 19, 2020 there have been 48 waivers statewide: 11 non-relative, 37 relatives, 7 for safety related, and 41 non-safety related. As a result of the new statewide policy 1605 Use of Waivers – Foster Care and Adoption waivers are being tracked.

The CFSP outlines a goal of using a statewide quarterly workgroup to review and ensure the statewide policy is being properly implemented and determine if there are consistent criteria for use of non-safety related waivers. The workgroup will establish a DCFS FPO statewide tracking system to easily identify the number and types of waivers approved, reporting of circumstance resolving the need for a waiver and updating regulations as required by law and/or practice changes.

Item 34: Requirements for Criminal Background Checks

NRS 424 outlines the requirements for criminal background checks for anyone employed as staff or a director of a group treatment home or anyone applying to be a foster parent. Statewide policy 0515.0 Child Abuse and Neglect (CANS) and NCID Requirements for Prospective Foster and Adoptive Parents in response to the Adam Walsh Act of 2006 sets forth procedures for conducting and responding to CANS checks; conducting and establishing statewide standards for authorizing placement of children with caregivers who have undergone an NCID and CANS check. No foster home or adoption applicant is issued a foster home license until all criminal background checks have been completed.

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

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

Item 35: Diligent Recruitment of Foster and Adoptive Homes

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

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

The statewide Quality Parenting Initiative program strives at making sure every child living in foster care is cared for by a caregiver (foster, relative, fictive, and/or adoptive) who provides skilled

nurturing parenting while helping the child maintain connections to his or her family www.qpinevada.org/. As part of the QPI program, each region has a collaborative QPI committee with foster caregivers and child welfare staff that addresses the training needs of foster parents as well as recruitment and retention of foster homes.

Nevada formed a A Call to Action team as a result of a state team planning meeting in October 2019. The team consists of membership from the regions, the Adoption Exchange, and the Family Programs Office. The team meets monthly for 90 minutes. The ACA Team reviews adoption programming and addresses statewide needs with the goal of reducing the number of Nevada children and youth waiting to be adopted by identifying and eliminating barriers to achieving permanency.

Item 35 was rated an ANI as information in the statewide assessment showed a lack of consistency in the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state who need homes across the state. The state lacks demographic data on the state's resource families. Over the next year, the state will issue an Instructional Memorandum informing the regions of the statutory requirement to develop recruitment plans and data collection.

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

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

The State follows the federal requirements in accordance with P.L. 109-239, P.L. 109-248, 42 U.S.C. 670-679(b), the statutory requirements captured in NRS 127.330, 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 Safety Assessment and Family Evaluation (SAFE) policy, which serves as the primary means of evaluating and assessing the appropriateness of potential family foster care and licensed relative and adoptive families.

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

Table 36a Incoming and Outgoing Referrals SFY 2020 YTD

Total Statewide Annual Incoming Referrals SFY 20 YTD	Total Statewide Annual Outgoing Referrals SFY 20 YTD	Total Statewide Approved Incoming Home Studies SFY 20 YTD	Total Statewide Approved Outgoing Home Studies SFY 20 YTD
638	1,038	365	721

Table 36a provides placement numbers, both incoming and outgoing, which have remained consistent over the years. The numbers reflect incoming and outgoing referrals as well as home studies for the year to date and are taken from the NEICE system SFY 2020 YTD which includes July 1, 2019 through April 30, 2020. More than one study may be conducted for the same case.

Table 36b Incoming Referrals Approved SFY 2020 YTD

Total Statewide Incoming Home Study Referrals SFY 20 YTD	Total Number of Incoming Home Studies Completed in 60 Days	Statewide Completion percentage in 60 Days
365	160	43.8%

Table 36b illustrates that during SFY 2020, from July 1, 2019 until April 30, 2020, there were a total of 365 Home Study Request from other states, and 160 of these Home Studies were completed within 60 days. The percentage is based on 160 studies completed within 60 days out of 437 total incoming home study referrals for the period of July 1, 2019—April 30, 2020. Data is taken from NEICE system.

Table 36c Total Children Processed SFY 2020 YTD

Total Statewide Incoming Children Processed SFY 19 YTD	Total Statewide Outgoing Children Processed SFY 19 YTD	Total Children Processed SFY 19 YTD
638	1,038	1676

Table 36c illustrates that during SFY 2020 YTD the total number of children processed. Data is taken from NEICE system for SFY 2020 YTD includes July 1, 2019 through April 30, 2020.

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

- On March 3rd, 4th and 5th of 2020, ICPC training was conducted in the southern region. In this three-day training, state ICPC staff met with Clark County ICPC staff to discuss current methods and how to improve outcomes. ICPC staff also met with County workers who complete ICPC requests. We discussed the process, updated forms and answered questions about the ICPC process.
- Nevada ICPC continues to track requested home studies both in state and out-of-state to achieve a higher rate of completion within the 60-day time frame. By using the NEICE tracking system and contact with jurisdictions, Nevada ICPC continues to monitor the Safe and Timely Notifications and remains vigilant in requesting updates, preliminary and final reports to meet the federal time frame for home studies. As noted above, Nevada's compliance with the 60-day time frame has decreased since last fiscal year. In March 2020, Nevada's Governor issued a stay home order which had statewide staff working from home to limit the spread of COVID-19. Nevada staff were working from home with limited access to files and not able to meet with prospective providers.
- In efforts to ensure safe and permanent placements are achieved, Nevada ICPC has implemented an internal tracking system to request quarterly reports to ensure the safety and well-being of the children placed out of state.
- The state has collaborated with the regions to assess cross-jurisdictional needs within the state. They all indicated they have a good working relationship with each other and were not in need of a third party to facilitate the intrastate movement of children. To assist with coordination and communication, NV ICPC update the resource list of contacts for intrastate placements and disseminated it to each region.

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

REVISIONS TO GOALS, OBJECTIVES, AND INTERVENTIONS

Nevada entered a Program Improvement Plan (PIP) on November 1, 2019. On May 8, 2020, the Children's Bureau approved a Revised Measurement Plan for a one quarter extension for case

reviews due to the national COVID-19 emergency. The state will keep the Children's Bureau apprised of any impact the national emergency may have on achievement of the goals.

Appendix A Nevada PIP Q2 Progress Report supports achievement to benchmarks for the goals listed below in addition to narrative provided under "Summary of Progress towards Benchmarks" and "Feedback Loop." Activities identified in state planning meetings have been incorporated into this APSR report.

The state did not have any AFCARS, NYTD or IV-E program improvement plan during this reporting period. The state did not have any discretionary grants awarded by the Children's Bureau during this reporting period.

UPDATE ON PROGRESS MADE TO IMPROVE OUTCOMES

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

Measures of Progress

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

Maltreatment in Care and Recurrence of Maltreatment

National Performance		Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
					Lower CI	RSP	Upper CI
Maltreatment in care (victimizations per 100,000 days in care)	9.67%	AFCARS 17AB, FY17	↑	4.44%	4.88%	6.3%	7.71%
Recurrence of Maltreatment	9.5%	17B-18A FY17-18	=	6.8%	7.9%	8.7%	9.7%

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

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

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

Nevada Child and Family Services Review (CFSR 3) Data Profile February 2020.

Objective 1 Conduct safety related activities

Benchmarks

- A statewide committee with representation from all three child welfare agencies in collaboration with FPO identified strategies during the PIP development process to improve the capacity of supervisors to effectively coach staff in their practice of the SAFE/SIPS Practice Model and improve Safety Outcomes. Key activity areas will address the following:
 - Policies will be reviewed (PIP 1.1.2).
 - Training will be provided (PIP 1.1.1, 1.1.2).
 - Data reports will be developed and utilized by supervisors (PIP 1.1.3, 1.2.3, 1.2.4).
 - CQI activities will ensure supervisors receive increased support to enhance their abilities (PIP 1.1.3, 1.2.1, 1.2.2, 1.2.3, 1.2.4, 1.2.5).

- A statewide committee with representation from all three child welfare agencies in collaboration with FPO will work with statewide Information Services (IS) to determine CCWIS changes that will permit accurate reporting of response timeliness. A CCWIS work request and business requirements will be completed. The outcome of this CCWIS system change will result in a streamlined approach to recording response time. FPO will monitor the work request and business requirements progress.

Summary of Progress towards Benchmarks

PIP Goal 1 was prioritized for completion by Q6 as these activities support the improvement of child safety outcomes. Activities focused on reviewing and revising policies, strengthening training for supervisors, and using reports to monitor fidelity to the SAFE/SIPS model. The state asserts that deliverables for Q1 and Q2 were completed at the time of APSR submission.

Feedback Loop

A statewide committee with representation from all three child welfare agencies in collaboration with FPO provide oversight and provide a feedback loop for all of PIP Goal 1 activities. This statewide committee developed a tool that will be used to measure proficiency in the SAFE/SIPS model. The tool was piloted and is being revised based on feedback from the pilot. Additionally, they reviewed and revised policies that were then reviewed and approved by leadership teams. Data reports are being developed to measure safety practices to be used by supervisor and managers to improve safety outcomes.

Implementation and Program Supports

Currently no needed supports have been identified. There are no research, evaluation, or management information systems in support of this objective.

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

Measures of Progress

There is no quantitative measurement data for this goal.

Objective 1 Begin efforts for prevention planning

Benchmarks

- Utilize TA assistance and collaboration from statewide child welfare agencies to develop a Title IV-E Prevention Program Plan to create a prevention system in Nevada.
- Define “child who is a candidate for foster care” and “imminent risk” (PIP 4.5.2).
- Take inventory of services and select services for inclusion in plan (PIP 4.5.2).
- Design rigorous evaluation strategies to ensure fidelity to evidence-based models.
- Determine congregate care approach.
- Provide analysis of cross-agency funding for FFPSA services in Nevada and efficient ways of financing them, incorporating federal funding maximization, including Medicaid.
- Conduct policy and regulatory analysis to determine any needed changes to align with service and funding approach.
- Conduct policy and regulatory analysis to support implementation congregate care approach
- Submit final Title IV-E Prevention Program Plan to HHS in 2020.

Summary of Progress towards Benchmarks

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

The definition of candidacy was finalized through a statewide collaboration and thorough review of historical data to determine the populations that would be best served by the prevention services offered through FFPSA.

Numerous meetings were held with sister agencies to develop an inventory of services and select services for inclusion in the plan.

A survey was designed and launched to: a) scan all community-based providers in Nevada serving children and families to identify evidence-based and promising models, trauma informed and continuous quality improvement practices and assess interest/capacity to expand; and b) scan NV congregate care providers to determine conformity with FFPSA QRTP requirements. QRTP requirements and oversight policy and QRTP child treatment requirements are in development. Additionally, an inventory was compiled of existing programs in Nevada and cross-walked with Children's Bureau (CB) Clearinghouse's ratings of promising, supported, well-supported programs.

The state has finalized a list of 14 models that will be included in the FFPSA plan to be eligible for IV-E reimbursement. The financial impact of the COVID-19 impacted the state's decision-making, steering the group towards models that are already being implemented in the state, thus saving costs on implementing new models.

Feedback Loop

Recurring workgroup meetings and ad hoc meetings have been used to obtain input and feedback from parent advocacy organizations, DCFS children's mental health staff, sister agencies representing home visiting and substance use treatment services, and foster care agencies stakeholders in the development of the prevention plan. Additionally, surveys were conducted, and webinars were held which are described in the [Collaboration](#) section. There are no research, evaluation, or management information systems in support of this objective.

Recurring FFPSA focused meetings included:

- Project Management/Technical Assistance Team meetings held weekly. The purpose of this team was for the University of Maryland team to provide expert consultation and technical support, project management, work plan development, fiscal analysis, policy and regulatory analysis and FFPSA plan review for the DCFS FPO staff leading the FFPSA planning.
- Leadership Team meetings held twice monthly. The purpose of the Leadership Team is to prepare Nevada to implement the Family First Prevention Services Act (FFPSA) to include both submission of the state's FFPSA Title IV-E Prevention Services Plan, finalize any changes to congregate care programs and type and determine statewide budget impact and feasibility. The Leadership Team will receive recommendations from the existing Prevention and Placement Workgroups on fiscal, IT, child welfare workforce, community and residential provider readiness and capacity. The Leadership Team is also charged with developing and implementing a FFPSA Communication Plan to include outreach to the judicial system, family organizations, partnering agencies, i.e. Medicaid and legislatures.
- Prevention Workgroup meetings held twice monthly. The primary purpose of the Prevention Workgroup is to make recommendations to the FFPSA Leadership Team on the services and related components that should be included in the state's FFPSA Title IV-E Prevention Services Plan. Specifically, it will make recommendations related to: a) the priority populations to receive Title IV-E prevention services; b) operational definitions for "candidate for foster care" and "imminent risk"; c) prevention services that meet the needs of the priority populations; d) budget requirements related to provision of prevention services; and e) prevention services that could be provided by other, non-IV-E funding,

including Medicaid. In making its recommendations, the workgroup will consider feasibility and capacity needs for implementation.

- Placement Workgroup meetings held twice monthly. The primary purpose of the Placement Workgroup is to make recommendations to the Leadership Team on changes needed in the provision of congregate care to comply with FFPSA.

Implementation and Program Supports

Nevada is extending the contract with the University of Maryland to provide ongoing support while Nevada's FFPSA Prevention Services Plan is being reviewed by the Children's Bureau, to outline an implementation plan for the state, and to assist with implementation and establishment of data collection systems.

Nevada will develop a statewide plan to spend the Family First Transition Act funding to build the foundation for prevention services and to support the continued development of an effective continuum of placement options, to include Qualified Residential Treatment Programs as outlined in FFPSA.

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

Measures of Progress Performance Ratings and Goals

CFSR indicator Baseline Percentages ⁸		2020 Target CFSR Performance Item Ratings ⁹	2020 CQI CFSR Performance Item Ratings ¹⁰	2022 PIP Goal ¹¹	2024 CFSP Goal
Item 4	72.7%	76%	62.07%	80.4%	86%
Item 5	41.8%	46%	68.97%	50.3%	56%
Item 6	18.2%	21.5%	41.38%	24.8%	27%
Item 7	87.5%	89%	84.21%		90%
Item 8	67.5%	69%	78.95%		77%
Item 9	74.6%	76%	78.57%		84%
Item 10	52.7%	54%	68.97%		62%
Item 11	62.1%	64%	70.59%		72%
Item 12	37.5%	42%	38.1%	44.4%	51%
Item 13	48.0%	51.7%	31.43%	55.4%	57%
Item 14	55.0%	58.55%	69.05%	62.1%	63.5%
Item 15	46.3%	50.65%	32.35%	55.0%	57%*
Item 16	72.3%	75%	69.23%		83%
Item 17	51.5%	54%	64.52%		62%
Item 18	60.7%	63%	45.45%		71%

*The CFSP 2020-2024 erroneously indicated 27%.

⁸ Nevada Child and Family Services Review Round 3 – Program Improvement Plan, Part Two: CFSR PIP Measurement Plan.

⁹ The Nevada DCFS Child and Family Services Plan 2020-2024.

¹⁰ State Rating Summary Nevada CQI Report Created February 12, 2020. This report includes Clark County CFSR PIP Monitored QTR 1, DCFS RR CFSR PIP Monitored 2020 QTR 2. The Clark County CFSR PIP QTR 3 (April 2020) review did not occur due to COVID-19 crisis; it has been rescheduled for August 2020. On May 8, 2020, the Children's Bureau approved a Revised Measurement Plan for a one quarter extension.

¹¹ See footnote State Rating Summary.

CFSR Data Profile

Risk Standardized Performance	Nevada's Baseline Performance (RSP)	Nevada's Performance (RSP)	National Performance
Permanency in 12 months (entries)	44.7% 16B17A	43.9% 17A17B	42.7%
Permanency in 12 months (12-23 months)	42.8% 18B19A	42.7% 19A19B	45.9%
Permanency in 12 months (24 + months)	39.2% 18B19A	39.0% 19A19B	31.8%
Re-entry to foster care	7.4% 16B17A	6.3% 17A17B	8.1%
Placement stability (moves/1,000 days in care)	5.64% 18B19A	5.99 19A19B	4.44%

Children's Bureau Nevada CFSR 3 Data Profile February 2020.

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

Benchmarks

- The state will review the organizational needs for targeted grant funding streams. State DCFS Grant Management Unit (GMU) to explore and/or maintain electronic notifications for funding opportunity announcements annually.
- The state will create an implementation and budget plan for extending foster care until the age of 21 years old.
- The state to determine the following:
 - Programmatic priorities to guide decision making in increasing efforts in exploring additional funding streams, including discretionary grant programs to expand on normalcy for youth/children (NRS 432B.174), service array for families, extend foster care to the age of 21 years old, and relationships by improving community events and functions to improve Well-Being and Permanency outcomes. The best interest of the child will remain at the center of grant planning while working with complex factors in enhancing funding streams.
 - The resources and support the organization currently has in place.
 - The additional support needed to apply and support grant writing to access additional funding sources.
 - Effective planning and preparation on how the funding will be disseminated, the gaps in coverage that the grant will not cover in services and needs, and the expertise and stakeholders needed to strengthen collaborative efforts in obtaining the grant.
 - Timeline and process for carrying out the extended foster care program and an analysis of the fiscal impact (Fiscal Plan).
- The state to:
 - Complete an analysis of the implementation and impact of the extended foster care program that allows a child who is over 18 years of age to voluntarily remain under the jurisdiction of a court.
 - Submit a report to the Legislative Committee on Child Welfare and Juvenile Justice that includes a report concerning the status of the plan and recommendations for legislation necessary to improve the implementation of the program to extend foster care.

- Submit Child Welfare and Budget BDR Request based off implementation plan for the 2021 legislation session.
- Amend the state plan, when federal criteria are met for foster care and adoption assistance, to extend foster care until a child reaches the age of 21 years old.

Summary of Progress towards Benchmarks

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

Feedback Loop

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

Implementation and Program Supports

The DCFS will utilize Social Change Partners LLC which has extensive experience in convening and facilitating public and nonprofit agencies serving transition-age foster and probation youth, community stakeholders and youth themselves, and facilitating collaboration in planning and policy implementation. The state will not be able to determine its implementation support needs until the conclusion of the 2021 Nevada Legislative Session. There are no research, evaluation, or management information systems in support of this objective.

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

Benchmarks

- Selected Leadership with each Child Welfare Agencies and DCFS will attend the Annual Community Improvement Council (CIC) Summit with the courts and other dependency stakeholders to learn trauma-focused communication and engagement techniques (PIP 3.1.1).
- CIP/NCJFCJ to administer pre and post-test to determine knowledge gained from the training of court/dependency stakeholders and child welfare staff who are members of the CIC. This training is supported by Goal 3 of the PIP and the Healthy Workforce of the CFSP (PIP 3.1.1, 2.1.3).
- Convene a new statewide Achieving Timely Permanency Workgroup, to include Clark, Washoe and Rural Region representatives from DA/DAG, judges, child welfare designated staff, data team members, and any other needed stakeholders to collaboratively support the Nevada child welfare system through the efforts required to improve timely permanency outcomes for children through reunification, guardianship, and adoption (PIP 3.1.2).

- Each child welfare agency leadership will work in collaboration with the Court Improvement Director (CIP) to assist in expanding the Juvenile Dependency Mediation Program (JDMP) across the life of the case, pre and post-petition (PIP 3.1.3).
- DCFS to convene a statewide Policy Workgroup to update the statewide 0208 Policy for Social Summary and condense the adoption template to improve efficiency toward achieving adoption.
- The Workgroup develops a protocol or policy to establish a specific timeline for when a child transfers from a permanency worker to an adoption worker to achieve permanency through adoption (PIP 3.4.1).
- DCFS-FPO leadership and each child welfare agency will partner with CIP, Vivek Sankaran (U of MI), 8th JD, CCDFS, LACSN, and Boyd School of Law to assist in designing a multidisciplinary legal assistance project to provide preventive legal and social work advocacy to families who are at risk or have had children placed in foster care. Implementation to be initially staged in Clark County (Possible name: Clark County Family Advocacy Center).
- DCFS-FPO leadership and each child welfare agency will partner with CIP and Children's Commission to assist in developing a database of resources by location throughout the state.
- Child Welfare Agencies and DCFS will continue to participate in the Community Improvement Councils to implement their hearing quality-focused action plans.
- Each child welfare agency CQI Unit will develop a formal feedback process and disseminate a CFSR Newsletter for caseworkers, supervisors, and managers regarding the most recent CFSR findings for items 12, 13, 14, 15, 16, 17 and 18 (PIP 2.1.7).
- Each child welfare agency's leadership will issue an instructional memorandum to highlight the importance of using CFSR data and feedback to improve practice and identify staff who are resources for discussing and understanding CFSR feedback discussing the importance of understanding and valuing CFSR feedback (PIP 2.1.7).
 - Leadership (managers and supervisors) will support the transfer of learning process by conducting a 1:1 supervision meeting at the rate of bi-monthly at a minimum (PIP 2.1.7).
 - Quarterly meetings will be held starting in Q3 (after the dissemination of CFSR Newsletter) among supervisors and managers, who will assess barriers to improved performance and strengths. CQI staff with each jurisdiction and FPO CQI staff will provide technical assistance as needed (PIP 2.1.7).

Summary of Progress towards Benchmarks

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

State efforts have focused on the completion of year 1 PIP deliverables including updating KinGap and Concurrent Planning policies. The social summary will be assessed for revision by the Adoption Call to Action Team and the statewide Adoption Specialist.

The statewide PIP Team 3 Achieving Timely Permanency Workgroup has been convening since November 2019. As a result of the COVID-19 crisis, the Capacity Building Center for States (CBCS) developed a plan to provide intensive project support to support the state's effort to complete PIP deliverables timely.

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

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

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

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

Through partnership, the child welfare agencies are developing a statewide newsletter to inform staff of CFSR findings and best practices. This is a deliverable over the upcoming year.

Feedback Loop

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

Implementation and Program Supports

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

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

Benchmarks

- Each child welfare agency will participate in a statewide policy workgroup lead by the DCFS FPO Foster Care Specialist to update the statewide 1001 Diligent Search Policy, 1010 KinGap Policy, the 204 Case Planning Policy, and the statewide 0208 Social Summary Process Policy. The social summary template will be condensed to improve efficiency toward achieving adoption. Participants in the workgroup must include a representative from AOC/CIP to enhance the concurrent planning with adoption and KinGap statewide to reflect the most current best practices. The diligent search procedures will reflect concerted efforts necessary to ensure that immediate and extended family members, and fictive kin are identified, located, informed, and evaluated in a timely manner (PIP 3.2.1, 3.2.2, 3.3.1, 3.3.2).
- Each child welfare agency to assist AOC/CIP develop a form to be distributed by both the court and the child welfare agencies staff to gather information about potential relatives or fictive kin (PIP 3.3.1).
- The Achieving Timely Permanency Workgroup with technical assistance as needed to conduct a timeline analysis for the TPR and adoption process by collecting and requisite new, as well as, existing data from the past Focus Groups, APSR, Statewide Assessment, and manual judicial tracking information to assess the barriers to TPR and adoption,

explore opportunities for improvement, and determine recommendations for practice changes. DCFS leadership to work in collaboration with the workgroup to determine the impact of practice changes to their agency and ability to implement practice modifications (PIP 3.4.1).

- Each child welfare agency in collaboration with the courts and other dependency stakeholders will develop concurrent planning “Scripts” to also be used by the judiciary and attorneys to help families better understand the importance of concurrent planning for their child(ren)’s well-being and how the parent can provide beneficial input when concurrent planning occurs for the child(ren) to achieve permanency within required timelines (PIP 3.3.2).
- DCFS FPO will begin analyzing the Caseworker Contact and Visitation Policy to ensure the statewide policy is updated and work in collaboration with each jurisdiction if the policies need updating (PIP 2.1.6).
- Each child welfare agency will begin analyzing their Caseworker Contact and Visitation Policy to ensure they both align with the statewide policy and determine if both policies are accessible to all child welfare staff, foster parents, courts, parents, and families involved in the case to enhance stakeholder knowledge (PIP 2.1.6).
- Each jurisdiction will provide their agency’s Caseworker Contact and Visitation Policy to the state DCFS Foster Care Manager/Specialist. DCFS FPO will create a link (by jurisdiction/statewide) to the QPI Website specific to the foster care providers jurisdiction (PIP 2.1.6).

Summary of Progress towards Benchmarks

State efforts have focused on the completion of year 1 PIP deliverables to include updating KinGap and Concurrent Planning policies. The social summary will be assessed for revision by the Adoption Call to Action Team and the statewide Adoption Specialist. Diligent search activities are scheduled to be addressed during Q4 of the PIP. CIP is a participant in the PIP teams working on PIP 3.2.1, 3.2.2, 3.3.1, 3.3.2 deliverables as well as members of the PIP Core team.

The statewide Achieving Timely Permanency Workgroup has been convening since November 2019. As a result of the COVID-19 crisis, the Capacity Building Center for States has developed a plan to provide intensive project support PIP deliverables.

The “scripts” (bench cards) will be worked on in SFY2021 (PIP 3.3.2).

The statewide policy is current, ADA accessible, and available on the DCFS Website. Clark and Washoe Child Welfare Agencies both reviewed their internal policies and provided a written submission of their analysis. Over the next PIP quarters, the agencies will update their Caseworker Contact and Visitation Policies and submit them to the state DCFS Foster Care Manager/Specialist.

Feedback Loop

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

Implementation and Program Supports

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

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

Measures of Progress

There are no quantitative measures, however, qualitative measures include:

- Implement a supervisory coaching model in Nevada.
- Development of a Workforce Innovation Team to support a healthy workforce.
- Implement a satisfaction survey.

The state continues to work collaboratively with CBCS to implement, evaluate and measure the impact of this model on the workforce. The pandemic impacted the delivery and method of training and ongoing mentor support to management that received the training. **Objective 1** Utilize Technical Assistance from CBCS to Implement Coaching Model

Benchmarks

- Identify the Nevada team for Atlantic Coast Child Welfare Implementation Center (ACCWIC) coaching project and coaching curriculum modifications.
- Define/clarify Nevada team, Center for States team roles and responsibilities for coaching project.
- Identify Nevada Practice components to integrate in ACCWIC coaching curriculum.
- Schedule planning calls for review of the modified coaching curriculum.
- Establish a coaching training schedule and identify coaching champions participants for pilot coaching training and subsequent coaching training.
- Identify trainers for pilot coaching training and subsequent trainings.
- Review and finalize the integrated ACCWIC coaching curriculum.
- Identify coaching tools to include evaluation tool/survey for coaching training and coaching documentation tools for use by coaches.
- Develop fidelity tool (Identify coaching behaviors for data on quality of coaching, adherence to coaching practice, and context in which coaching occurs).
- Collect and review data from the training evaluation tool to improve subsequent coaching training, as needed.
- Identify who will coach coaching champions.
- Create a community of practice for coaching champions (observations, on-site individual coaching sessions, group coaching sessions, monthly coaching calls, quarterly learning collaborative, etc.).
- Implement a coaching community of practice for coaching champions to support coaching champions and build sustainability.
- Create communication that allows for the sharing of challenges and barriers related to coaching to continually address/resolve barriers.
- Conduct subsequent coaching trainings.
- Evaluation of the Coaching Model will continue into the years 2022-2024.

Summary of Progress towards Benchmarks

Nevada made major strides toward the implementation of the ACCWIC coaching model utilizing technical assistance provided by the Capacity Building Center for States.¹² The Nevada Core Steering Team's ("CoachNV Core Team") mission is to "develop and retain a transformed workforce through implementation of a coaching model that creates, promotes and maintains statewide consistency of a strength-based practice and improves outcomes for children and families." The state and regional partners met regularly to develop a joint implementation plan

¹² CBCS' Semi-annual Report January 2020 State of Nevada Coaching Implementation Project.

that included the development of training, evaluation measures, messaging, regional readiness as well as stakeholder buy-in and development of regional implementation champions.

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

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

The state piloted the new curriculum with leadership in the southern region. Since that time, training has commenced for supervisors, managers, and leadership statewide. The entire statewide management workforce has not been trained as planned due to COVID-19 and orders to shelter in place. This training was designed to be in-person which includes role-playing in a group setting, however, the training was recently provided virtually.

As the ACCWIC model does not have a standard fidelity instrument, members of the CoachNV Core Team developed a fidelity monitoring tool for the coaching model and methodology around the use of the tool. In addition, a logic model exercise was used to develop a set of outcomes. This resulted in a survey assessment that was delivered agency-wide to measure the impact of the coaching model.

Each region has identified coaching champions and is working with its university partner to provide ongoing coaching support to cohorts that have completed CoachNV Training. In Spring 2020, a CoachNV community of practice was initiated which includes group coaching sessions, individual coaching sessions, and monthly coaching calls to support sustainability.

Feedback Loop

A communication subcommittee was formed to support consistent statewide communication and messaging. The communication subcommittee will provide monthly updates at WIT (formally known as TMT) and quarterly updates during the Coach NV Core Team Meeting. Subcommittee minutes will be shared with the CoachNV Core Team and DMG.

The fidelity tool will be used to assess how CoachNV has been implemented. The results will provide ongoing data on how coaching is being implemented and impacting the workforce. The data will be used to inform changes to the curriculum and feedback to the trainers throughout the implementation process. The CQI process includes ensuring fidelity, performance improvement evaluations, measurement through surveys and focus groups and communication back to coaches and coachees.

Implementation and Program Supports

Nevada continues to receive support and technical assistance from the CBCS. Specific services are outlined in the Center for States Integrated Capacity Building Plan. Due to the financial impact of COVID-19 and the reduction in trainers, CBCS is extending services beyond consultation and technical assistance through the provision of training and mentoring. As part of this technical assistance, the state is requesting assistance in reviewing the measures of progress for this goal.

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

Benchmark

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

Summary of Progress towards Benchmarks

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

Feedback Loop

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

Implementation and Program Supports

Nevada continues to receive support and technical assistance from the CBCS for the coaching model. There are no research, evaluation, or management information systems in support of this objective.

Objective 3 Increase Participation in Family Engagement Training

Benchmark

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

Summary of Progress towards Benchmarks

The Instructional Memorandum for PIP Activity 2.1.1 has been issued to all jurisdictions. PIP Activity 2.2.3 requires the development of trauma-informed Communication training specific to family engagement using AOC/CIP dependency stakeholder training and trauma-informed communication techniques. This is a Q5 deliverable and under development.

Feedback Loop

A PIP 2.1.2 statewide workgroup is responsible for overseeing this objective and serving as a feedback loop to the PIP Core Team.

Implementation and Program Supports

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

Goal 4: Improve Statewide Child Welfare Outcomes By Developing And Strengthening The Statewide Quality Assurance System To Ensure The System Can Identify And Respond To The Strengths And Needs Of The Child Welfare System In An Efficient And Effective Manner

Measures of Progress

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

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

Benchmarks

- Request membership from executive leadership, for Assessment and Implementation teams.
- Convene Assessment team, to conduct the assessment.
- Develop the CQI Assessment/Implementation team Charter and Communication Plan

Summary of Progress towards Benchmarks

PIP Team 4 is responsible for the CQI Self-Assessment and is in the first phase of completing the assessment. The Charter and Communication has been completed.

Feedback Loop

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

Implementation and Program Supports

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

Objective 2 Continue to conduct case review process

Benchmarks

- Continue to conduct case reviews as outlined in the measurement plan and with collaboration from all child welfare agencies as described in MOU Q1.

Summary of Progress towards Benchmarks

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

Feedback Loop

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

Implementation and Program Supports

PIP Team 4 is receiving technical assistance from the CBCS.

Objective 3: Identify data entry standards re: permanency goals in UNITY items included in PIP Activities Q1

Benchmarks

- Develop a uniformly agreed-upon data dictionary to includes standards of performance regarding the definitions of permanency goals, how to update them in UNITY and which case events would prompt such an update.
- Write or revise the existing policy to inform practice(Q4)
- All child welfare agencies will ensure staff receive these expectations(Q4)
- Develop/Conduct CQI activities to ensure permanency goals in UNITY are accurate and timely (Q2-Q8)

Summary of Progress towards Benchmarks

Data input standards related to timely entry and accuracy of permanency goals in UNITY are being addressed through policy on PIP Team 3 by updating the case planning policy for PIP 3.3.1.

The state collected data on entered permanency goals to determine if permanency goals matched the permanency goals in court orders.

Feedback Loop

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

Implementation and Program Supports

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

Objective 4: Improve and sustain the case review process items included in PIP Activities Q4.

Benchmarks

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

Summary of Progress towards Benchmarks

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

Feedback Loop

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

Implementation and Program Supports

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

QUALITY ASSURANCE SYSTEM

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

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

Foundational Administrative Structure

State and region level CQI staff have utilized the Capacity Building Center for States on-line CQI Academy to improve the capacity of CQI staff to understand the CQI process, how to evaluate outcomes, and the importance of feedback to inform policy, training and program adjustments. The state CQI Team utilizes reviewers from the regions designated CQI units to form a pool of reviewers for the quarterly state CQI reviews.

As part of CFSP [Goal 4](#) and PIP Goal 4, The state will be conducting a Continuous Quality Improvement (CQI) Self-Assessment developed with the Capacity Building Center for States (CBCS) to identify how it can strengthen its CQI/QA System.

Quality Data Collection

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

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

Case record review data and process

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

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

As a result of the COVID-19 national health emergency, a statewide collaborative effort is underway to devise a system to provide and conduct standardized virtual training, communication and remote case reviews. This includes incorporating guidance from the state and federal government that might impact individual performance items or systemic factors.

Analysis and Dissemination of Quality Data

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

The state is enhancing existing data reports as well as developing new reports as part of PIP Activities in Goals 1,2, and 3. The CBCS is providing guidance on how to use the reports to improve practice.

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

PIP collaborative implementation teams oversee and implement the PIP activities. The teams are responsible for overseeing the strategies and implementing the key activities of the PIP Agency leadership and CIP are regularly advised on the progress of PIP activities and guide collaborative efforts. The creation and distribution of a newsletter to improve practice in the field will be issued that will include CFSR findings and jurisdiction-specific results. Managers and supervisors will use the newsletter as follows:

- Agency managers will conduct 1:1 meetings with supervisors at least bi-monthly, as defined in this IM as every two months.
- Leadership (managers and supervisors) will meet quarterly to assess strengths and any barriers to improved performance.
- Supervisors, during 1:1 supervision with line staff, will discuss CFSR information, discuss individual performance and provide assistance toward improvement.

CQI Team members will serve as subject matter experts on the CFSR to the field.

The Training Management Team is being transformed into the Workforce Innovation Team identified in CFSP Goal Three Healthy Work Force. It is envisioned that the WIT will serve as an important part of the CQI process. Results of CQI Case Reviews will be shared with the WIT to help inform needed adjustments to training and policy.

Additional Quality Assurance Responses

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

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

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

Nevada uses the federal OSRI and well as the Online Monitoring System (OMS) as part of its ongoing CQI/QA process.

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

UPDATE ON SERVICE DESCRIPTION

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

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

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

- Information and referral
- Educational programs (parent training)
- Support groups
- Family Preservations
- Case management
- Therapeutic interventions/counseling
- Search registries
- Respite

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

The following programs and services are used to address the needs of children under age five receiving in-home services, children in foster care and children receiving reunification services:

- As part of FFPSA, zero to five is a priority population and there is a concerted and collaborative effort to expand early intervention services throughout the state.
- The regions are using evidenced-based early childhood programs such as Parent-Child Interaction Therapy offered through DCFS Mental Health Services and promising practices such as Positively Kids Wrap Program offered through contract providers.
- The Northern Region implemented a Safe Babies Court in collaboration with the Second Judicial Court and a contracted technical assistance provider, Zero to Three. The Safe

Babies Court approach provides intensive case management and service provision with increased court oversight to families with a child under the age of three.

- Regions are also using various approaches to improve the quality and frequency of visitation to promote reunification. The regions have had to make significant adjustments to these efforts as a result of the COVID-19 crisis. The QPI statewide program continues to strengthen foster parents and child welfare staffs' understanding and skills in promoting family reunification and permanency. The Early, Periodic Screening, Diagnostic, and Treatment exam is the first line to assess for developmental milestones by a pediatric medical provider. From these exams, children are referred for further developmental assessment. All children under the age of 36 months are given a CAPTA-IDEA referral for Early Intervention Services. The Ages and Stages Questionnaire (ASQ) is used to determine what referrals and services are needed. Children over the age of 36 months who have been assessed to show developmental delays or have suspected developmental delays are referred to the public school district's Child Find Program for assessment and for services.
- All regions utilized multidisciplinary staffings or team meetings to regularly review children under the age of five in foster care. These meetings focused on barriers to permanency, placement stability, and services to address solutions to support timely permanency.
- All child welfare agencies participate in the statewide collaborative Perinatal Health Network which continues to develop strategic approaches to provide outreach, identification and treatment for postpartum women using evidenced based interventions (See [CAPTA State Plan and Update](#) for more details). This collaborative supports families with substance misuse disorders and substance exposed infants.
- An initiative is being developed by the Clinical Program of the Rural to assess visitation between children age five (5) and under in care and their parents/siblings. The goal is to clearly identify and assess parent/child interaction upon entry into care and create a more targeted visitation plan and enrich parent/child contact.

Efforts to Track and Prevent Child Maltreatment Deaths

Data from the National Center for the Review and Prevention of Child Death's database is used by the Executive Committee to Review the Death of Children to complete an annual report which is disseminated statewide to stakeholders and posted on the DCFS website. Data is entered by the regional CDR teams and our partner through the coroner's office ensures the data is accurate. Nevada continues to explore how to obtain information from Vital Statistics timely and how to best use the data in its reporting to NCANDS regarding child fatalities as a result of child abuse or neglect.

Child fatalities, as a result of child maltreatment, are captured in and reported to NCANDS through the State of Nevada Comprehensive Child Welfare Information System (CCWIS). Child welfare agency staff use a variety of sources to capture and record this data which includes information from child death review teams, law enforcement reports and medical examiners or coroner's reports. Fatalities identified in the information system as maltreatment deaths are reported in the Child File. Deaths not included in the Child File, for which substantiated maltreatment was a contributing factor, are included in the Agency file as an unduplicated count. Reported fatalities can include deaths that occurred in prior periods, for which the determination was completed in the next reporting period. The total number of NCANDS reported fatalities has increased 5.3 percent since the last reporting period (19 in FFY 2018 and 20 in FFY 2019).

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

- Data is gathered using a canned report (CFS742 Child Fatality Report)
- A manual review is then completed by data and field staff.

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

Nevada continues to make efforts to reduce the number of preventable child fatalities and near fatalities through prevention campaigns, training, and other initiatives. For example, one initiative includes partnering and collaborating with the state Fetal and Infant Mortality Review (FIMR) team regarding overlapping campaigns, such as promoting safe sleep. Prevention campaigns funded during FY2020, centered around safe sleep and suicide prevention, as these causes are consistently identified to be in the top three causes of child fatalities in Nevada.

In FY2021, Nevada will create an outline using existing steps taken to track child maltreatment deaths. The purpose of the outline is to create the framework for completing a comprehensive statewide plan in FY2021 to better track and reduce such deaths in Nevada. During FY2021 it is also anticipated that a prevention campaign focused on drownings and near-drownings will be developed and disseminated throughout the state.

Nevada's child fatality review process includes local multi-disciplinary teams reviewing all deaths of children, ages 0-17 years of age, within their own communities, and making recommendations to the Executive Committee to Review the Death of Children. During FY 2020, the Executive Committee to Review the Death of Children was assessed to ensure the team was operating as efficiently and effectively as it should. Upon review, it was concluded that the committee needed to be restructured, and new team members were selected. The reconstruction focuses the committee towards identifying the overall themes and trends of child fatality in Nevada. This reconstruction further ensures that future prevention efforts will be appropriate, effective, evidenced-based, and will assist with the decrease in the number of child maltreatment fatalities. The newly selected Executive Committee will hold their first meeting on May 20, 2020 wherein the purpose of the committee will be reviewed per statute along with roles and responsibilities.

Goals for fiscal year 2021 are to seek technical assistance from the National Center for Fatality Review and Prevention on Nevada's practices and to develop and implement a comprehensive statewide plan to prevent child maltreatment fatalities.

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

DCFS has continued to operate family preservation, family support services, family reunification services and adoption promotion services in all seventeen counties in Nevada. All of these services have contributed to the safety, permanency and well-being of children and their families. Each agency is required to use the same measurement tools and track the same short, intermediate, and long-term outcomes. Quarterly programmatic reports were submitted to DCFS

providing an accurate representation of both needs and services provided. The DCFS Grants Management Unit (GMU) ensured that services funded through the MaryLee Allen Promoting Safe and Stable Families program are being provided statewide. Below is a sampling of the services provided to children and families in Nevada during SFY20:

- Adoption recognition and recruitment events
- Assistance to address domestic violence
- Consultation and counseling services to include individual and family therapy and evaluations to help families and children working towards adoption in making a commitment
- Crisis nurseries
- Foster/Adoptive home studies
- Individual, group and family counseling
- Inpatient, residential, or outpatient substance abuse treatment services
- Life book supplies for adopted children
- Materials, equipment and supplies for training
- Mental health services
- National adoption conference attendance for adoptive families
- Picture gallery matching event, child specific ads, and video filming of available children
- Pre-service and in-service training for foster/adoptive families
- Promotional materials for informational meetings
- Recruitment through matching events, radio, television, newspapers; journals, mass mailings; adoption calendars and outdoor billboards
- Respite and childcare
- Temporary childcare and therapeutic services for families
- Transportation
- Visitation centers

Within the past year, DCFS has provided training to potential subrecipients regarding the enactment of FPPSA and has incorporated FPPSA criteria in competitive funding processes for the Promoting Safe and Stable Families program. The SFY20 Request for Applications process was finalized in June 2019 in collaboration with the GMU and FPO. The following chart provides the breakdown of the funding allocation from the Promoting Safe and Stable Families FFY19 award.

PSSF Program Category	Total Funding	Total Funding Percentage	Projected Service Number
Family Preservation	\$628,901	23%	3,401 Individuals 1,653 Families
Family Support	\$655,394	24%	11,428 Individuals 4,938 Families
Family Reunification	\$597,599	22%	1,377 Individuals 1,043 Families
Adoption Promotion and Support	\$804,754*	20%	1,548 Individuals 880 Families
Total	\$2,686,648		
	Total Funding by Geographic Region		

Clark County	\$1,764,747
Washoe County	\$668,096
Rural Region	\$253,805
Total	\$2,686,648

*A total of \$804,754 was awarded with the addition of \$250,000 from the FY18.

The following chart provides a list of agencies statewide being funded to support family preservation, family support, family reunification and adoption promotion/support for SFY 2020.

Subrecipient	Description of Services	PSSF Program Category	Geographic Region
Adoption Exchange, The	Intensive recruitment services utilizing an evidence based, child focused recruitment model to achieve permanence for adoption and other permanent living arrangements in Washoe County and the Rural Region.	Adoption Promotion and Support	Washoe County Rural Region
Baby's Bounty	Provide 600 baby bundles with essential baby items to low income families with newborns. Educate parents about the dangers of bed sharing, basic baby care, shaken baby syndrome and child abuse prevention.	Family Support	Clark County
Bridge Counseling	Family reunification services help families who are seeking to address the conditions that led to the removal of a child and/or are at-risk. Provides multiple services to meet case plan needs, child safety and family reunification goals.	Family Reunification	Clark County
Cappalappa Family Resource Center	Provides case management, resource referrals, child assessments for early intervention, car seat safety classes, Safe Sitters, shaken baby syndrome, child development, and household budgeting.	Family Support	Clark County

Clark County Department of Family Services	Partners with nationally backed local agencies to provide a comprehensive community collaborative approach of targeted services designed to provide safe and stable families for all youth in Clark County care.	Family Preservation Family Support Family Reunification Adoption Promotion and Support	Clark County
Chicanos Por La Causa	Parent education and support services to targeted populations and historically non-traditional program participants including minorities, kin caregivers and non-custodial parents.	Family Preservation	Clark County
Children's Cabinet	Offers case management and family counseling to help stabilize and strengthen families in crisis. Project Safe Place offers immediate assistance to youth in crisis and provides them with a safe environment while case managers and therapists work with the youth and their families to address their individual needs.	Family Preservation Family Support	Washoe County
Consolidated Agencies of Human Services	Offers family case management, parenting classes, and counseling.	Family Preservation Family Support Family Reunification	Rural Region
Domestic Violence Resource Center (DVRC)	Children's program promotes the safety and well-being of children and families who receive services in DVRC's residential programs. This program enhances child development by utilizing age appropriate activities to promote nonviolent conflict resolution.	Family Support	Washoe County

Family Support Center	Provides substance abuse and mental health counseling to parents, parenting skill coaching, wellness, support groups, therapy, family mentoring and monitored visitations.	Family Preservation Family Support Family Reunification	Rural Region
Family Support Council of Douglas County	Provides co-parenting classes, supervised visitation to DCFS families and case management.	Family Preservation Family Support	Rural Region
HELP of Southern Nevada	Services for individuals and families demonstrating a need for additional support to improve parenting, safety, and family cohesiveness to help prevent the need for out-of-home placement.	Family Preservation Family Support Family Reunification	Clark County
Lyon County Human Services	Provides intensive case management focused on building strengths, reducing risk factors, increasing protective factors, achieving educational engagement/success, and accomplishing goals set by the family. The program provides free parenting classes to increase parental competencies to preserve families. Case managers provide families regular home-visits, parenting information, and a connection to resources.	Family Support	Rural Region
Nevada Outreach Organization	Provide in-home assessment, crisis intervention, referrals to education and programs.	Family Preservation Family Support Family Reunification	Rural Region

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Nevada Urban Indians	Provides substance abuse and mental health counselling and family parenting classes using an evidence-based curriculum “Strengthening families”. Activities are family centered and individualized aimed at keeping families together and preventing the removal of children. The program is open to all and provides culturally sensitive services to Natives.	Family Support	Washoe County
Olive Crest	Expedite adoption process through the completion of the adoption home study assessment and social summaries which are required to be updated before children can be adopted.	Family Preservation Adoption Promotion and Support	Clark County
Ridge House, Inc.	Services include substance use, mental health, and family parenting services to prevent removal of a child from the home or to assist family in their reunification plan.	Family Support	Washoe County
Ron Wood	Provides evidence-based parenting classes, family assessments for risk factors, needs assessments, coordination of services, and case management. Individualized resources, intensive therapeutic case management, in-home support services, home safety, cleanliness, nutrition, budgeting, and parenting education as well as outpatient and mental health screening.	Family Preservation Family Support	Rural Region

Safe Embrace	Provide family support services to residential and community clients, increasing and enhancing parent confidence and competence in their abilities through evidence-based curriculum. Specialized case management services provided to the family unit. parent and child.	Family Support	Washoe County
Safe Nest	Provides individual counseling, support groups, case management, crisis intervention, CPS screening, and community referrals to families experiencing domestic violence to strengthen family stability and safety while working to end the generational cycle of abuse.	Family Support	Clark County
St Jude's Ranch for Children	The family support program works with families to help keep their children from entering the foster care system. The specialist staff work individually with parents in their home to teach new skills and abilities to maintain a healthy, safe and stable home environment.	Family Support	Clark County
Step 2	Provides reunification services to women living at STEP's Lighthouse of the Sierra, who are actively attempting to reunify with their children or have been reunified. They provide trauma informed, evidence-based substance abuse treatment concurrently with parenting, life skills and supportive resources, as well as case management to support sustainable safe and sober family reunification.	Family Support Family Reunification	Washoe County

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

Service Decision Making Process for Family Support Services

A competitive request of the application process was utilized in June 2019 to award funds to community-based subrecipients. Applications were accepted to provide services in all geographic areas of the state. DCFS believes that the most effective services are in the communities where families live, where they are easily accessible, and culturally responsive. Proposals had to describe community needs and address services to be provided to meet these needs.

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

A total of 34 applications were received from agencies statewide proposing services specific to the PSSF categories: family preservation, family support, family reunification and adoption promotion and support. Of the 34 applications, 24 were received specific to family support services with 22 applications ultimately being funded for SFY20.

SFY 2021 Process

The DCFS GMU, in the process of establishing the MaryLee Allen Promoting Safe and Stable Families grant distribution for SFY21, released a Notice of Funding Opportunity (NOFO) in April 2020. The NOFO is for competitive applications and implements a funding process that combines application review with grant allocation. Funding preference will be given to applicants proposing to provide services based on the FFPSA criteria. All applicants must demonstrate how they will ensure ongoing collaboration with their local child welfare agency in all aspects of the service provision.

The following chart provides the breakdown of the proposed funding allocations from the Promoting Safe and Stable Families FFY20 award based on the Notice of Funding Opportunity that was released in April 2020 for SFY21 with the performance period of July 1, 2020 through June 30, 2021. The final funding allocation may be slightly different based on the applications received however the 20% funding percentage will be met for all 4 PSSF program categories.

PSSF Program Category	Approximate Minimum of Awards Statewide	Approximate Minimum Percentage
Family Preservation	\$443,320	20%
Family Support	\$443,320	20%
Family Reunification	\$443,320	20%
Adoption Promotion and Support	\$443,320	20%
Program category to be determined	\$221,658	
Total	\$1,994,938	
	Approximate Total of Awards	
Clark County	\$1,396,456	
Washoe County	\$398,988	
Rural Region	\$199,494	
Total	\$1,994,938	

Populations at Greatest Risk of Maltreatment

Priority populations have been identified through extensive partnerships with community stakeholders and sister agencies. For the last three years, the state has partnered with the Division of Public and Behavioral Health to lead a statewide initiative to implement the Comprehensive Addiction and Recovery Act (CARA) plans of care. The initiative has evolved into a statewide collaborative Perinatal Health Network which continues to develop strategic

approaches to provide outreach, identification and treatment for postpartum women using evidenced-based interventions. Nevada continues to identify CSEC as a priority population. SB293 provided funding for a CSEC Coordinator to develop recommendations for placement options and needed treatment services to be presented at the 2021 Legislative session. As reported for NCANDS, Nevada is currently unable to capture or report data for CARA and CSEC populations. Identifications of enhancements to CCWIS have been made to assist the state in providing data in the future.

As a result of a statewide FFPSA collaborative workgroup, statewide data were reviewed resulting in the identification of the following priority populations:

- Children ranging zero to five years of age
- Parents with substance use disorder
- Parent with mental health factors
- Youth with behavioral health factors including at risk of placement disruption
- Domestic violence/intimate partner violence

Services to support these populations will be prioritized in Nevada's Family First Prevention Services Act Prevention Plan.

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

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SFY 2019								
Statewide - Impending Danger Threats by Age Group								
	Age 0 -5		Age 6 - 10		Age 11 - 15		Age 16+	
Impending Danger Threat Description	n	%	n	%	n	%	n	%
7. One or both parents/caregivers cannot control their behavior.	1237	69.0	495	62.2	307	51.4	55	30.1
13. One or both parents/caregivers lack parenting knowledge, skills, and motivation which affect child safety.	1214	67.7	496	62.3	329	55.1	86	47.0
8. Family does not have resources to meet basic needs.	726	40.5	262	32.9	162	27.1	41	22.4
6. One or both parents/caregivers emotional stability, developmental status or cognitive deficiency seriously impairs their ability to care for the child(ren).	520	29.0	221	27.8	130	21.8	40	21.9
5. A parent or caregiver is violent and no adult in the home is protective of the child(ren).	395	22.0	183	23.0	112	18.8	24	13.1
9. No adult in the home will perform parental duties and responsibilities.	309	17.2	120	15.1	113	18.9	57	31.1

SFY 2020								
Statewide - Impending Danger Threats by Age Group								
	Age 0 -5		Age 6 - 10		Age 11 - 15		Age 16+	
Impending Danger Threat Description	n	%	n	%	n	%	n	%
13. One or both parents/caregivers lack parenting knowledge, skills, and motivation which affect child safety.	1277	71.3	538	67.6	409	68.5	122	66.7
7. One or both parents/caregivers cannot control their behavior.	1259	70.3	537	67.5	373	62.5	88	48.1
8. Family does not have resources to meet basic needs.	628	35.0	188	23.6	161	27.0	41	22.4
6. One or both parents/caregivers emotional stability, developmental status or cognitive deficiency seriously impairs their ability to care for the child(ren).	525	29.3	214	26.9	140	23.5	39	21.3
5. A parent or caregiver is violent and no adult in the home is protective of the child(ren).	440	24.6	226	28.4	107	17.9	32	17.5
9. No adult in the home will perform parental duties and responsibilities.	260	14.5	111	13.9	135	22.6	54	29.5

Kinship Navigator Funding (Title IV-B, subpart 2)

Dr. Mark S. Preston of Preston Management and Organizational Consulting was recently contracted by the State of Nevada, Division of Family Services to perform the evaluation of Foster Kinship's navigator program. Dr. Preston is an independent research consultant who works with non-profit and governmental human service agencies for the purpose of strengthening the practice effectiveness and well-being of both front-line and management staff.

The Kinship Navigator program has connected the Nevada's 211 which now has a mobile app. Additionally, virtual support groups are being held for residents living outside of Clark County.

The Kinship Navigator Program can be accessed the Nevada 211 which has a mobile app. Provides support with guardianship, kinship licensing, applications for financial assistance, and access to support groups, caregiver education classes, and events. Anyone parenting a relative's child in Nevada.

MONTHLY CASEWORKER VISIT FORMULA GRANTS AND STANDARDS FOR CASEWORKER VISITS

During the past year, the regions have used the Monthly Caseworker Visit grant to fund a variety of strategies to improve the frequency and quality of caseworker visits including:

- Funding caseworker overtime expenses to allow for the completion and documentation of visits overtime when caseloads are high, and time does not permit them to be seen in a 40-hour workweek.
- Development of a 30-minute learning boost (PowerPoint/webinar) titled Elements of a Quality Monthly Caseworker Visit. The learning boost will address caseworker visit pitfalls, barriers and emphasize, the components of what a quality contact and documentation of that contact should contain.
- Visiting children in out of state residential treatment centers that are not covered under the Interstate Compact for Placement of Children (ICPC).
- Use of data compliance reports and findings from fidelity case reviews.
- Purchasing laptops with access to VPN enables caseworkers to enter caseworker visit documentation timelier.
- Use of caseworker templates created to ensure quality visits occur by capturing all required visit elements (medical, mental health, school, adjustment to placement, interview child and caregiver separate from each other, etc.) both subsequently result in more thorough documentation of monthly caseworker visits.
- Funding part-time staff to perform visits and documentation necessary to complete Social Summaries. This aspect of the grant funding provides for the dual purpose of meeting the requirement to be able to move forward in the adoption process, as well as allowing for quality time to be spent with the youth while gathering information and complete documentation for the youth's future needs.

All regions continue to experience staff turnover and high caseloads which impact the ability to achieve compliance with the performance measure. It is not yet known how the frequency and quality of visits may have been impacted by the shut-down ordered by the Governor on March 17 due to the COVID-19 national health emergency; and agency's abilities to timely operationalize the guidance to conduct visits virtually.

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Compliance of Monthly Caseworker Visits with Children

Reporting Period	Compliance Rate	Performance Goal
FFY 2019	93.57%	95%
FFY 2020 YTD (10/1/2019 through 4/30/2020)	91.80%	95%

Source: UNITY RPT7D7

Compliance of Monthly Caseworker Visits with Children in their Residence

Reporting Period	Compliance Rate	Performance Goal
FFY 2019	91.55%	50%
FFY 2020 YTD (10/1/2019 through 4/30/2020)	90.79%	50%

Source: UNITY RPT7D7

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

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

ADDITIONAL SERVICES INFORMATION

Adoption and Legal Guardianship Incentive Payments

The State of Nevada awarded Adoption Incentive funds to various grantees to assist with inter-jurisdictional placements, diligent search for relatives, recruitment of adoptive and foster parents, professional development and post-adoption services. The grantees include the Adoption Exchange, Nevada Outreach Training Organization, University of South Florida, Community Chest and contractors. Each of these grantees provide a variety of services to adoptive families and adoptees. The Adoption Exchange state's Recruitment Response Team (RRT) funds Adopt Us Kids projects including Wendy's Wonderful Kids (WWK). WWK employs contract recruiters to assist in locating adoptive parents and permanent connections for youth; a strategy identified in the state's Adoption Call to Action Plan. The state also uses the grant money to pay for a statewide membership to the Adoption Exchange. The Nevada Outreach Training Organization concentrates on recruiting Spanish speaking foster parents and assists with adoptive parent applications. The University of South Florida provides web-based training through the Quality Parenting Initiative and Just in Time training to foster parents, relative caregivers and birth parents. Community Chest assists potential relative adoptive families complete home studies for ICPC. The Nevada Public Health Foundation focuses on providing assistance and resources to those families that live in rural areas by completing a diligent search for relatives and fictive kin and completing social summaries/home studies.

Adoption Incentive (AI) funds are also awarded to Nevada's three public child welfare agencies to assist with inter-jurisdictional placements, a diligent search for relatives, recruitment of adoptive and foster parents, professional development and post-adoption services. Each agency provides privatized therapeutic services that are not covered by Medicaid. The grant funds continue to support specialized recruitment and adoption finalization activities, including National Adoption Day. Some examples of AI funding use during SFY 2020 include utilizing the services of a private

investigator to ensure all family ties and relationships were explored for children awaiting adoption, supporting the Have a Heart Washoe marketing campaign and website; and paying for staff and activities to support the timely filing of TPR's.

Adoption Savings

Adoption savings realized is not available to reinvest in the current state fiscal year or any subsequent year. A statutory change is needed to enable the DCFS to access and spend adoption savings funds. Efforts were made by DCFS during Nevada's 2019 Legislative Session to allow Nevada to not revert the savings back to the General Fund. Bill Draft Request #19A4092104 was submitted during the 80th Regular Session of Nevada's Legislature (2019). While the BDR was submitted, the Governor's Finance Office postponed the consideration of any legislative change until the next biennial Agency Request budget submission. Currently, adoptions savings are being reported through the CB-496 using the Children's Bureau Method with Actual Amounts (See Attachment E).

DCFS has prepared a Bill Draft Request for the 2021 Legislative Session. The issue was presented to the Nevada Committee on Child Welfare and Juvenile Justice during the 2020-2021 interim, and there appears to be legislative support for the forthcoming Bill Draft Request.

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

In FY2020, Chafee funding was used to provide an additional case management position to assist with Independent Living (IL) service delivery in the 15 rural counties of the state. In addition, IL services were enhanced through the expansion of a promising practice model, Youth Villages' LifeSet, to reduce caseloads and allow more hands-on interaction with the youth. The Youth Villages' LifeSet model is on track to increase its provision of intensive IL case management services in Clark County through FY2021.

A statewide policy group was created and facilitated by the Family Program's Office to develop an amended policy, reflecting data and standards for accuracy of permanency goals, youth engagement and statewide uniformity amongst jurisdictions. The group was comprised of representatives from all child welfare agencies, the court improvement council and the Nevada Partnership for Training (NPT). In preparation of FY2021, the CFSR PIP Team 3 Achieving Timely Permanency, will conduct focus groups and/or surveys among foster parents, youth and judicial stakeholders. The information garnered from these groups and/or surveys will be used to enhance the feedback process, implement strategies and increase opportunities to improve performance.

Due to the unprecedented circumstances presented during the COVID-19 pandemic, caseworker positions were altered to address the basic needs of IL youth. Chafee funds were reallocated for immediate use to prevent homelessness, hunger and assist with any disruption to educational learning and/or loss of employment. The Children's Bureau strongly encouraged all states to use available Chafee funding to meet the needs of IL youth resulting from the pandemic. Nevada has prepared a subaward to be offered to community providers who will administer the funds statewide for the COVID-19 Related Independent Living Needs Program for FY2020-2021. The funds will provide monetary assistance to identified youth who:

- Lost income due to a reduction in work hours or company lay-off.
- Struggle to pay for basic needs to include, but not limited to food, housing, healthcare, utilities, childcare and transportation.
- Cannot attend secondary education or vocational training for 2020/2021 due to a decrease in available funding.

- Cannot purchase educational tools required by secondary educational institutes and/or vocational training schools.
- Cannot purchase appropriate work attire and/or personal protective to maintain his/her safety in the workplace

IL workers have adapted to the suggested COVID-19 state guidelines by embracing a telework environment and have continued serving IL youth through video, telephone, email, social media, and text. Face-to-face contacts have been made when necessary to distribute bus passes, pre-paid credit cards, vouchers, food and personal hygiene items. Efforts have been made to provide continuing education and support through workshops over the Zoom platform. The focus of these workshops has included banking, housing, sex ed (pregnancy, infections), and mental health during social distancing.

Nevada continues to assess the state's ability to extend foster care up to the age of 21. The state's commitment to IL youths' successful transition to adulthood is evidenced by Assembly Bill (AB) 150, requiring child welfare agencies to establish a workgroup focused on improving the outcomes of IL youth aged 18 and older. The Bill was passed through the Senate on June 3, 2019 and signed by the Governor on June 7, 2019. A contractor was chosen in FY2020 to assist with the workgroup, and an AB150 planning meeting ensued with representatives of the child welfare agencies in attendance. On May 13, 2020, the AB150 primary working group will hold its first meeting during which additional workgroups will be established to tackle the task at hand. This process will continue through FY2021.

The state continues to make data available through monthly meetings facilitated by the Family Programs' Office such as, the statewide Youth Advisory and the statewide IL Meeting. Upon completion of each cohort, the NYTD data snapshot is made available via the DCFS's website and to all stakeholders. The Family Programs' Office is consistently seeking ways to enhance communication amongst all child welfare agencies and community partners to improve timely and accurate NYTD survey responses.

Following the approval of the CSFP 2020-2024, Nevada's tribal IL provider elected to return previously awarded Chafee funding to be used for services to tribal youth. As a result, Nevada is diligently working to establish a subaward for FY2021 with an existing IL provider who, with the assistance of additional funding, has the capacity to serve the IL tribal youth and has offices located nearly throughout the State of Nevada. The IL Specialist will collaborate and coordinate with the ICWA liaison to inform tribes of the Chafee program and to facilitate access to Chafee benefits and services.

Survey responses are used to identify any gaps in IL service delivery. During FY2020, one issue that became apparent as a result of the NYTD surveys was that Medicaid applications for youth 18 years and older were routinely denied benefits. The state was able to identify the source of the barrier. The Family Programs' Office collaborated with the Department of Welfare & Supportive Services (DWSS) to resolve the issue.

In coordination with the Nevada Housing Division (NHD), which is partially funded by the U.S. Department of Housing and Urban Develop (HUD), the state refers IL youth to the Housing Division for their multiple programs. NHD offers a housing locator in response to Nevada Statute, NRS 319.143, which requires NHD to create and maintain a state-wide low-income housing database. The Nevada Housing Division provides a comprehensive on-line locator list of affordable housing options at <http://nvhousingsearch.org/> or by calling 1-877-428-8844. NHD also offer emergency solutions through grants such as rapid rehousing and homeless prevention,

weatherization assistance for child welfare families who have a need in this area, as well as multiple homebuyer programs for child welfare families who qualify.

The Family Programs' Office, through the IL Social Services Program Specialist, continues to research how the housing vouchers can be more accessible to the IL youth population, by establishing contacts within HUD to discuss barriers to implement this housing program within Nevada. During FY2021, the Family Programs' Office will collaborate with local HUD offices located in the Northern and Southern parts of Nevada to identify the barriers to issuing housing vouchers to IL youth. The state will work with the local HUD offices to devise a mechanism by which to issue housing vouchers to IL youth. Currently, the state offers oversight to all youth on an Independent Living Agreement (ILA), which can be extended to include the housing voucher.

IL caseworkers provide workshops to IL youth regarding sexual education, employment, financial information, and mental health to facilitate the youth's ability to learn and apply the skills. Furthermore, our IL caseworkers provide appropriate accommodations to disabled youth, thus allowing them to fully participate and prepare them for adulthood. During FY2021, the Family Programs' Office will work with the State of Nevada's Aging and Disability Services Division to create an IL caseworker toolkit focused on what steps to take, and which resources are available, for youth who may be eligible for Social Security Insurance (SSI) and IL services.

IL youth receive education from many community partners including state and county sexual health education programs, HUD and SSA programs for youth with disabilities and/or homeless youth, juvenile justice partnerships to coordinate criminal and truancy prevention, SAPTA prevention of drug and alcohol abuse programming, JOIN - Workforce Investment Act programs available to foster youth, work-study programs through the community and university, involvement with the local court system to insure that criminal behavior is addressed and youth with criminal convictions receive coordination of services to reduce recidivism.

These partnerships include the Ron Wood Family Resource Center for daily case management, workshops, and a food pantry; the Children's Cabinet of Northern Nevada for oversight of the ETV statewide program; and Step-Up of Clark County for one-on-one direct services, and daily case management. Child welfare agencies will coordinate with the Community Foundation of Western Nevada during the latter half of FY2021 to identify and support IL youth applying for scholarships for orphans of the state and IL youth released unto themselves.

EDUCATION AND TRAINING VOUCHERS (ETV) PROGRAM (SECTION 477 (I) OF THE ACT)

The Education and Training Vouchers Program (ETV) understands the cost of attendance can vary depending on the student's full-time or part-time status and/or where the student is receiving instruction. The Program individually assesses all applicants to ensure that funds are based on their unmet financial need as calculated by their educational institution. The child welfare agencies utilize one service provider, The Children's Cabinet, to administer ETV. The Children's Cabinet manages the ongoing communication with youth around budgets and financial needs.

Through the ETV application process, the youth is to provide a financial aid award letter from their school, which The Children's Cabinet reviews, to ensure the youth is not receiving a combination of federal educational assistance and vouchers. The review is also to determine that award totals do not exceed the actual cost of attendance. The Children's Cabinet requests all documentation to avoid any duplication of funds to any youth awarded, such as requesting copies of the Post 18 agreement budget form and filed Court order from county/state agency. If the youth aged out from another state, but currently resides in Nevada, The Children's Cabinet contacts the youths aged out state's ETV program to ensure no duplication of funds. The Children's Cabinet reviews

the total amount of educational assistance provided to a student under this and any other program to certify expenses are eligible and the award does not go beyond the total cost of attendance, which cannot exceed the max \$5,000. This secondary control ensures there is no accidental or inadvertent duplication of federal or federally assisted benefits.

The Children's Cabinet continues to provide a single point of contact for ETV applications. They monitor ETV data while reaching out to prior ETV recipients to determine if they are eligible for additional ETV services in accordance with the Families First Prevention Services Act (FFPSA). The role of the Children's Cabinet is to be the primary connection for current ETV recipients, as they manage the eligibility requirements and maintain compliance with the ETV program.

The Children's Cabinet collaborates with child welfare agencies, the higher education institutions located throughout Nevada, and regularly attends all statewide IL meetings, including policy workgroups. The collaboration allows Nevada to comprehensively track the long-term educational achievements of foster youth. In addition, the Children's Cabinet successfully created a fillable ETV application that is now accessible on The Children's Cabinet website and the Division of Child and Family Services website.

Due to the unforeseen COVID-19 pandemic, the Children's Cabinet implemented additional changes that adhere to social distancing and recommended guidelines set forth by the state and CDC. The Children's Cabinet's focus is to help youth maintain a sense of calm through these trying times and, in an attempt, to foresee potential obstacles. The Children's Cabinet staff responded to the pandemic by reaching out to all students regarding their immediate needs, such as loss of employment, transitioning to distance learning, and other financial hardships.

The total number of Education and Training Vouchers (ETV) awarded from July 1, 2018 through June 30, 2019 was 81 with the number of new students receiving vouchers totaled 41. (See Attachment D).

The total number of Education and Training Vouchers (ETV) awarded from July 1, 2019 through June 30, 2020 was estimated to be 85 with 81 youth being served as of March 31, 2020. The number of new students receiving vouchers totaled 50. (See Attachment F).

CHAFEE TRAINING

The IL Social Services Program Specialist (ILSSPS) provided IL introduction training to all jurisdictions from September 2019 through January 2020. The purpose of the training was to educate IL caseworkers and IL supervisors on the foundation for the Independent Living Plan (ILP), and to establish a baseline service standard across all jurisdictions. The training curriculum included, but was not limited to, Chafee and FAFFY funding, the availability of additional financial assistance streams depending upon the youth's age and eligibility, and the use of general funds to support Normalcy for Foster Youth. The IL introduction training was the basis for a curriculum currently under development at the University of Nevada, Las Vegas (UNLV). Due to the COVID-19 pandemic, resources were shifted to prioritize online training for caseworker preservice training and PIP training requirements. As a result, the finalization of the IL introduction training has been delayed to the summer of 2020.

Motivational Interviewing (MI) training for statewide IL contracted providers and community stakeholders has been identified as a primary strategy to improve Positive Youth Development (PYD). Providing this training will be a priority over the next year.

CONSULTATION WITH TRIBES (SECTION 477(B)(3)(G) OF THE ACT)

Following the approval of the CSFP 2020-2024, Nevada's tribal IL provider elected to return previously awarded Chafee funding to be used for services to tribal youth. As a result, Nevada is diligently working to establish a subaward for FY2021 with an existing IL provider who, with the assistance of additional funding, has the capacity to serve the IL tribal youth and has offices located nearly throughout the State of Nevada. The IL Specialist will collaborate and coordinate with the ICWA liaison to inform tribes of the Chafee program and to facilitate access to Chafee benefits and services.

CONSULTATION AND COLLABORATION WITH TRIBES

The State of Nevada has 27 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, Fort McDermitt Paiute-Shoshone Tribe, The Confederated Tribes of the Goshute Reservation, Las Vegas Paiute Tribe, Lovelock Paiute Tribe, Moapa Band of Paiutes, Pyramid Lake Paiute Tribe, Reno-Sparks Indian Colony, South Fork Band Council, Stewart Community Council, Summit Lake Paiute Tribe, Te-Moak Tribe of Western Shoshone, Timbisha Shoshone Tribe, Walker River Paiute Tribe, Washoe Tribe of Nevada and California, Wells Band Council, Winnemucca Colony Council, Woodfords Community Council, Yerington Paiute Tribe, and the Yomba Shoshone Tribe. The Bureau of Indian Affairs (BIA) has social workers who work in partnership with the state regarding issues with Nevada Tribes.

To gather input from the Nevada tribes, the Division of Child and Family Services (DCFS) tribal liaison conducted bi-monthly Indian Child Welfare (ICW) Committee meetings. The meetings are open to all tribal entities. The DCFS tribal liaison co-hosts the ICW Meetings with a local BIA representative. A toll-free call in telephone number is always provided for those who cannot attend in person. To encourage statewide participation, notification is done by a listserv email which includes the agenda and minutes from the prior meeting. The committee membership includes representatives from Nevada Tribes, Inter-Tribal Council of Nevada (ITCN), Nevada Indian Commission, Court Improvement Project (CIP), Bureau of Indian Affairs (Eastern and Western Nevada Agencies), State of Nevada Attorney General's Office, Washoe County Department of Social Services, Clark County Department of Family Services, Nevada Legal Services, Department of Health and Human Services, Nevada Early Intervention Services, The National Council of Judicial and Family Court Judges, and Division of Child and Family Services. Memorandums of Understanding (MOUs) between the state and NV tribes are an ongoing agenda item to address the importance of cross jurisdictional foster home placements.

The purpose of the committee is to provide an opportunity for consultation and collaboration between state, tribal and county entities. This collaboration provides a forum for discussion and recommendations between state, tribal and county entities for improving the child welfare system. This forum is where policies, procedure and practice interface or relate to Indian children and families and confer on topics of interest to the tribes. Speakers may be added to the agenda to address ongoing Indian child welfare issues. CJA ICW Committee meetings were held in 2019 on January 16, May 30, July 19, and November 21st. The ICW meetings scheduled in March and September 2019, were cancelled with the committee's consent.

Several topics discussed at the ICW meetings:

- Status of Memorandums of Understanding between NV Tribes and DCFS

- On-going trainings surrounding Indian Child Welfare (ICW) and Indian Child Welfare Act (ICWA)
- Continuing work by the Division of Child and Family Services (DCFS) on a tribal consultation process
- The importance of Tribal Stakeholder Representation
- Resources and referrals for assistance with community and ICW needs
- Commercial Sexual Exploitation of Children (CSEC) and strategies NV is implementing to meet the needs of this population

In addition to the ICW meetings, the DCFS tribal liaison continues to gather input, collaborate, and coordinate with the tribes through individual consultations and other ongoing state and/or tribal meetings. Individual consultation focus on developing and updating MOU's to ensure culturally appropriate cross-jurisdictional placements and to ensure adherence to ICWA. In addition to the ICW, the DCFS Tribal liaison participates in tribal consultations through the Department of Health and Human Services and Executive Board Meetings at the Inter-Tribal Council of Nevada. Tribal leaders are invited to both meetings to discuss issues within Indian Country in the state and state tribal liaisons in attendance are required to give updates within their divisions. Individual tribal elections take place at different times of the year, so leadership may continuously change. The DCFS tribal liaison will continue to travel and meet with new and existing tribal leaders regarding the MOU process.

Tribal input and feedback are always encouraged and noted as well as sharing of available resources to allow for the provision of constructive feedback between the state agency and the tribes. Barriers to the coordination include continuous turnover in staff on both the tribal and state side, changes in tribal leadership, tribal council, and tribal social workers. DCFS tribal liaison requests continuous updates in tribal staff contacts through the Inter-Tribal Council of Nevada (ITCN), local Bureau of Indian Affairs (BIA) agencies, and the Nevada Indian Commission (NIC). NV Tribes are required to notify these tribal agencies whenever there is a change in positions.

Over the next year, the DCFS tribal liaison will continue to collaborate and share with tribes the implementation of the CFSP/APSR in the following ways:

- Meeting and consulting with other state agency tribal liaisons on a monthly basis
- Attend quarterly Tribal Consultation Meetings and giving updates on DCFS services per request
- Attend quarterly NV Indian Commission (NIC) meetings to stay updated on tribal community issues across the state
- Attend and participate in NV Indian Education Association meetings to address the importance of early childhood welfare topics and issues amongst the state
- Meet with other state agency tribal liaisons monthly to discuss current needs of NV Tribes
- Participate in a quarterly National ICW Manager's calls with other ICWA specialists in other states where ideas from each state are discussed and shared regarding ICWA;
- Attend monthly Tribal Health Director's Meetings at ITCN and give updates regarding DCFS-ICW issues involving the tribes
- Monitor and update the ICWA page on the DCFS website which is made accessible to all NV Tribes via internet
- Provide training opportunities from various sources through the NVICWA listserv and announcements at meetings
- Share contact information between the tribes and DCFS per request
- Travel to NV Tribes to attend cultural events and/or ICW trainings

The NV ICWA Policy 0504 was updated and approved in the Fall of 2019. DCFS tribal liaison and Senior Deputy Attorney General developed an ICWA training specific to state/county social workers and traveled to DCFS Rural offices in Carson, Fallon, and Pahrump to educate the child welfare workers on the importance of ICWA.

DCFS works on developing and implementing MOUs with NV Tribes for the culturally appropriate placement of children across jurisdictions along with the protocol to implement the MOU for both tribal and state social workers to collaborate and coordinate the placement of foster children into tribal licensed foster homes located on tribal land. The establishment of the MOU between the NV tribes and DCFS allows for greater collaboration between the state, tribe, and counties for better provision of services on and off the tribal communities in NV, and the reduction of trauma to Indian children by placing them within their own culturally appropriate communities. MOU's with DCFS are used for cross-jurisdictional foster home placements. The MOU is created through state and tribal consultations in face-to-face meetings or via phone consultations between the DCFS tribal liaison and tribal social services. A complete draft is then presented to the tribal council before being submitted to the state's Attorney General's Office for review. The MOU gives specifics to who is responsible for providing the child welfare services and protections for tribal children. Tribal and state social workers work together with tribal liaison's assistance to collaborate, gather and share the best resources for tribal children. DCFS ensures that active efforts are adhered to by attempting to keep sibling groups together; engaging the age-appropriate child, parents, extended family and tribal agencies in case planning and Child and Family Team Meetings; identifying appropriate services and helping parents to obtain such services; monitoring progress and participation services; conducting diligent searches for the child's extended family members; supporting regular visitation with parents, siblings and extended family including providing transportation for such visits; and providing post-reunification services through monitoring. DCFS has a current MOU with the following NV Tribes: Fort McDermitt Paiute Shoshone, Yomba Shoshone Tribe, Moapa Band Council, Yerington Paiute Tribe, and Elko Band Council. DCFS also has a current MOU pertaining to a specific tribal family and the Washoe Tribe of Nevada and California as well as an MOU with the Carson Colony which both falls under the Washoe Tribe of Nevada and California.

A barrier identified in working on the DCFS MOUs has been the high turnover in ICW workers both on the state and tribal side as well as tribal elections that occur at different times of the year and for different terms. These tribal elections determine who newly elected tribal members are to include the Tribal Chairman / Chairwoman. Due to new leadership and procedures, there have been limited meetings with the ITCN Executive Board and change of tribal liaisons at the DHHS Tribal Consultation Meetings throughout 2019, which reflects as a barrier to coordination and collaboration with NV Tribes.

DCFS continues to provide training and work with tribal, state, and county workers to ensure active efforts are taken to prevent the breakup of the Indian family when a child may be placed in foster care or for adoption. For new state and county social workers, the mandates of ICWA are included in the mandatory Nevada Academy Training. The Nevada Partnership for Training offers an online ICWA training that is open to all jurisdictions. DCFS will partner with tribal stakeholders in a tribal conference hosted by Inter-tribal Council of Nevada (ITCN) in 2020. The hope is to continue and support positive relationships between NV tribes and state and county workers for the benefit of tribal children and families.

The "Indian Child Welfare Resource Guide for Nevada" was designed to assist state and county child welfare agencies on the law and tribal contacts within NV Tribes. DCFS tribal liaison continues to update Resource Guide and make it accessible to Tribes via the DCFS website.

In 2019, DCFS made the CFSP and APSR available for public review and inspection through the NV state website. Furthermore, the SFY 2019 APSR will be made available for public review and inspection through the state's website and through the listserv as well as exchanged with the Washoe Tribe upon approval from ACF.

Nevada state ICWA policy 0504, 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. In foster care or pre-adoptive placement, a preference shall be given in the absence of good cause to the contrary, to a placement in the following order: a member of the child's extended family; a foster home licensed, approved, or specified by the child's Tribe; an Indian foster home licensed or approved by an authorized non-Indian licensing authority; and, an institution for children approved by or operated by an Indian organization, which has a program suitable to meet the child's needs. The order of placement preference for Indian children regarding a member of the child's extended family; other members of the child's Tribe; another Indian family. If a different order of placement preference is ordered by the Tribe, the court or agency affecting the placement shall follow the order of preference established by the Tribe, so long as the placement is the least resistive setting appropriate to the particular needs of the child.

When it is determined that a child is Indian, and the child welfare agency is involved with the family, the local child welfare agency follows the mandates of the Indian Child Welfare Act (ICWA), which includes notification to the tribe in accordance with the ICWA, 25 U.S.C. 1915, as Indian and Alaska Natives extended families and Indian foster homes were available. If no Indian families are available; NRS 432B390, was followed. ICWA 25 U.S.C. 1919, authorizes states to enter into agreements with Indian tribes, with respect to the care, custody of Indian children and concurrent jurisdiction. A child welfare worker shall continue sending notices to Tribes for every child custody proceeding throughout the life of the case. When a Tribe intervenes, the Tribes is entitled to receive service of all motions and legal documents from that point forward. The Tribe or parents can at any point in a case request transfer of jurisdiction to Tribal court. Upon request from the Tribe or either of the parents; the court may transfer the case, unless the court finds good cause not to transfer. Nevada child welfare workers consult their supervisor, DCFS tribal liaison, and agency legal counsel for further assistance.

There are no tribes in Nevada that have a Title IV-E agreement. However, the Washoe Tribe of Nevada and California has been approved for Title IV-B, Subpart 1 of the Social Security Act, and has applied for the Tribal / Federal IV-E agreement, but after learning that the allocated funds would not be as high as they hoped, Washoe Tribe decided to not pursue the Tribal / Federal IV-E agreement. DCFS tribal liaison will continue to share opportunities with NV Tribes to receive funding to include Title IV-E and Title IV-B opportunities. It is up to individual tribes whether they wish to apply or not for any funding sources. It is up to individual tribes to also participate in the MOU process with DCFS. DCFS tribal liaison will continue to educate on MOUs and inform tribes of the importance of recognizing sovereign nations and having written agreements in place so agencies can work together for the best interest of Indian children.

During FY 2020, DCFS monitored compliance with ICWA through case compliance/quality assurance review and training and through individual continuous quality improvement case reviews with the Deputy Attorney General who represents DCFS. During Child and Family Service Reviews (CFSR) in 2019, DCFS Rural Region randomly pulled 46 child cases to review. Out of the 46 cases, 3 cases were identified as Indian children. Item 9 is the only item on the CQI tool that relates to Indian Child Welfare (ICW) in foster care cases by inquiring about preserving connections for Indian children. The 2 Indian child cases reviewed reported "Strengths" in all areas of Item 9. Reports are available for review on the DCFS website and per request.

During FY 2020, DCFS continued to strive for compliance with ICWA by following the guidelines set out by the BIA in 1979 and the new ICWA Final Rule updated in 2016. DCFS ensured that state welfare workers had knowledge in ICWA through mandatory trainings and with the assistance of DCFS tribal liaison as a resource. DCFS tribal liaison provided technical assistance to state, tribal and county and private agency social workers. DCFS tribal liaison coordinated and provided training on ICWA; fostered state/tribal relationships; facilitated the ICW Committee Meetings; and disseminated current information regarding regulations and federal laws that may impact Indian children and families in Nevada. DCFS tribal liaison participated in case reviews and case consultations, assisting state and tribal partners in the identification of appropriate actions in regard to the ICWA. DCFS tribal liaison continues to be a key participant in meetings and building relationships with Nevada Tribes.

CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA) STATE PLAN REQUIREMENTS AND UPDATE

Nevada submitted a CAPTA State Plan in SFY 2011; it remains in effect.

SUBSTANTIVE CHANGES

The Nevada Legislature meets biennially, and no new legislation has been passed.

On January 7, 2019, the President signed the Victims of Child Abuse Act Reauthorization Act of 2018 (P.L. 115-424) that included an amendment to CAPTA which expands the scope of assurance related to legal immunity for good faith reports of child abuse and neglect. Nevada Revised Statute (NRS) 432B.160 has been in effect for many years and meets the requirements of the Victims of Child Abuse Act Reauthorization Act of 2018 providing provision for civil or criminal liability to every person who in good faith makes a report of child abuse and neglect. The Governor's Assurance Statement of compliance was submitted to the Children's Bureau in 2019.

ELECTED PROGRAM AREAS FY 2021

In accordance with section 106(b)(1)(A) of CAPTA, the state plan must specify which of the following program areas described in section 106(a) it will address with the grant funds in order to improve the child protective services system of the state. Nevada has elected to address the following program areas:

- Section 106(a)(1) the intake, assessment, screening, and investigation of reports of child abuse and neglect
- Section 106(a)(3) case management, including ongoing case monitoring, and delivery of services and treatment provided to children and their families
- Section 106(a)(4) enhancing the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols, including the use of differential response
- Section 106(a)(5) developing and updating systems of technology that support the program and track reports of child abuse and neglect from intake through final disposition and allow interstate and intrastate information exchange
- Section 106(a)(7) improving the skills, qualifications, and availability of individuals providing services to children and families, and the supervisors of such individuals, through the child protection system, including improvements in the recruitment and retention of caseworkers; and
- Section 106(a)(11) developing and enhancing the capacity of community-based programs to integrate shared leadership strategies between parents and professionals to prevent and treat child abuse and neglect at the neighborhood level.

- Section 106(a)(13) supporting and enhancing interagency collaboration among public health agencies, agencies in the child protective system and agencies carrying out private community-based programs
 - a. To provide child abuse and neglect prevention and treatment services (including linkages with education systems), and the use of differential response
 - b. To address the health needs, including mental health needs, of children identified as victims of child abuse or neglect, including supporting prompt, comprehensive health and developmental evaluations for children who are the subject of substantiated child maltreatment reports

DESCRIPTION OF ACTIVITIES, SERVICES, AND TRAINING FUNDED UNDER THE CAPTA STATE GRANT

For the reporting period, CAPTA funds were used alone or in combination with other funds in support of the state's approved CAPTA plan. Funds were used to support CPS programming, including CARA and JVT program development activities.

During the 2019 legislative session, SB 293 appropriated state funds for DCFS to hire a contract CSEC Coordinator to develop an infrastructure plan for Commercially Sexually Exploited Youth. The purpose of the plan is to identify the placement and treatment needs of CSEC. Three workgroups were formed to develop recommendations for the plan, including an Oversight Stakeholders group, Residential Services, and a trauma-informed workgroup focused on the mental health and substance abuse treatment needs of CSEC. Youth survivors have also been given the opportunity to provide input based on their personal experiences. Workgroups have been meeting since December and represent state and county child welfare and juvenile justice agencies, providers, and legal advocates. SB293 requires the plan to be submitted by October of 2020. The CSEC Model Coordinated Response Protocol is being utilized by the CSEC coordinator and stakeholder groups as a foundation for building their recommendations.

Differential response has been regionalized to meet the needs of the communities. The Statewide Intake and Response Time Policy 0506 provides guidance on screening criteria for circumstances that are appropriate for differential response. In the southern region, community partners assess and serve families with allegations of educational neglect. The northern and rural regions assess and serve differential response cases within the agency. Additionally, the rural region refers families to Community Based Serve Providers.¹³

The following policies were under review:

- The Intake Assessment and Priority Response Times Policy has been updated and has revisions that include instruction for completing an Intake Assessment when there is a CARA Plan of Care or when there is a CSEC victim.
- The Nevada Initial Assessment Policy is under review to provide clarification for child welfare workers when conducting investigations of child abuse and neglect.
- The Institutional Abuse and Neglect Investigations Policy is currently under final review to provide clarification for child welfare workers when conducting investigations of child abuse and neglect in institutional settings.

¹³ Community Based Service Provider (CBSP): A public or private nonprofit (including a church or religious entity) that provides community-based services accessible to individuals and families in specific geographic areas of a community. The staff of a CBSP identifies the natural supports of each person/family and uses a strengths-based approach in meeting human, educational, environmental, and/or public safety needs. This includes providing assessment and services described in NAC 432B.013 and AB151 from the 80th legislative session 2019.

- The Central Registry Searches for Employment and Child Safety Purposes Policy has been completed standardizing the process for responding to Central Registry requests statewide.

Positions funded to support the CAPTA program include:

- A Social Services Program Specialist III who serves as the State Liaison Officer and participated in the planning, coordination, evaluation and policy development statewide; and who participates in multiple monthly meetings for CARA, held by the Division of Public and Behavioral Health, to make recommendations and support the implementation of CARA Plans of Care and other supporting materials. Although these positions are not funded by CAPTA funds, The Division of Public and Behavioral Health (DPBH) has designated public health positions to support collaborative CARA activities.
- A Grants Management Unit specialist to monitor and manage CAPTA funds, sub-grants and required grant reporting; and
- An Administrative Assistant to respond to Central Registry requests statewide.

UPDATE ON PROVISIONS RELATING TO SUBSTANCE-EXPOSED NEWBORNS AND INFANT PLANS OF SAFE CARE

DCFS continues to be a central participant of the Nevada Association of Health and Territorial Health (ASTHO) and Opioid Use Disorder, Maternal Outcomes, and Neonatal Abstinence Syndrome Initiative (OMNI) which has been underway since November of 2018. An action plan was developed to begin the work of the Initiative and has guided efforts over the past year. In 2019, Nevada developed and defined the Nevada Perinatal Core Team that will guide the Initiative of which DCFS represents child welfare. Since November 2019, the Nevada Perinatal Core Team has worked to incorporate feedback from work groups and stakeholders into an updated action plan. This included revising the vision, expanding guiding principles, and defining the goals, priorities, and strategies for 2020 and beyond. There are over 100 stakeholders who make recommendation to the Nevada Perinatal Core Team which has oversight of the action plan. These stakeholders include child welfare representatives, hospitals, medical professionals, non-profit community, and substance use treatment providers in its three current work groups:

- Reproductive Health Network
- CARA Plan of Care
- Provider Education and Practice Standards

**CARA Plan of Care was used in lieu of Infant Plan of Safe Care to avoid confusion with other documents used in child welfare in Nevada.*

Summary of Major CARA Related Activities

- Facilitated connection and partnership building between DBPH Substance Abuse Prevention and Treatment Act (SAPTA) block grant grantees and providers.
- Participated in technical assistance activities provided by the ASTHO officials to the Opioid Use Disorder, Maternal Outcomes, and Neonatal Abstinence Syndrome Initiative OMNI Learning Community.
- Included CARA implementation in the Nevada ASTHO-OMNI Action Plan which is a statewide strategic approach that incorporates best-practice outreach, identification, engagement, management and care for Nevada's pregnant and postpartum/parenting women with substance use disorders and their infants with prenatal substance exposure so that health safety, and recovery outcomes for this vulnerable population improve. The ASTHO-OMNI Action Plan has been revised to include strategies to support implementation of CARA Plans of Care. Strategies include:
 - Extend Medicaid coverage of services needed by families with CARA Plans of Care.

- Identification of a universal screening tool for identifying women who are using substances during pregnancy.
- Development of a definition of “affected by” to provide guidance to medical providers in creating CARA Plans of Care.
- All educational material and guidance are being piloted so that recommendations can be made to the Core Team for modifications.
- Open Beds is an information systems program that will be piloted to collect and strengthen monitoring of CARA Plans of Care and coordinate services with substance abuse treatment providers.
- CCWIS enhancements are in progress.

Lessons Learned

The decision by the Department of Health and Human Services’ Director to require CARA Plans of Care to be codified in regulation was pivotal in supporting implementation. This was a recognition that CARA was first and foremost a public health issue that needed to address not only infants identified at birth but also to identify pregnant women with substance use disorders to enhance prenatal services, post-partum services and beyond. Additionally, collaboration with the DBPH and medical and substance use treatment providers has been key to identifying a process that works for providers while at the same time meeting the requirements of CARA. The development of a Perinatal Substance Use Treatment Network and Women’s Coordinator position and the use of a national consultant reflects the need for dedicated positions to support implementation for such a wide-reaching initiative that crosses multiple agencies and programs.

Medical providers have faced challenges when determining whether CARA Plan of Care would be appropriate in circumstances unrelated to opiate use (e.g. exposure to other substances such as marijuana or tobacco). It has been important to provide guidance in identifying infants who have been affected by substance use or withdrawal symptoms resulting from prenatal drug exposure or a Fetal Alcohol Spectrum Disorder (FASD). Further education continues to be needed to develop mutual understanding of participants roles, i.e., healthcare providers, child welfare, substance abuse treatment providers.

PLANS FOR USE OF CAPTA STATE GRANT FUNDING

To support the development, implementation and monitoring of CARA Plans of Care for substance-exposed infants Nevada, funding may be used to support collaboration at the state and community levels by allowing local child welfare agencies to participate in the activities of DPBH and Nevada Perinatal Health Network that are related to CARA and special projects.

STATE LIAISON OFFICER

Beverly Mason
 Social Services Program Specialist III
 Nevada Division of Child and Family Services
 4126 Technology Way
 Carson City, NV 89706

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STATISTICAL AND SUPPORTING INFORMATION

CAPTA ANNUAL STATE DATA REPORT ITEMS

Information on Child Protective Service Workforce

In March 2018, a new Child Welfare Learning Management System (LMS) was implemented through a partnership with the University of Nevada, Las Vegas (UNLV), and the University of Nevada, Reno (UNR). The LMS is not being used to its full capacity and the Workforce Innovation Team is developing a plan to improve the utilization of the system. The plan includes: statewide, development of profile requirements for all new staff; consistent, statewide messaging and expectations for the existing workforce to complete and update their profile information; and compliance reports created by the universities to aid in managing this effort.

Northern Region: Washoe County Human Services Agency

Information on the education, qualifications, and training requirements established by the state for child protective service professionals, including requirements for entry and advancement in the profession, including advancement to supervisory positions.

All caseworker positions require a Bachelor or Master of Social Work or related degree. To advance to a caseworker supervisor, the person must also have four years of full-time experience performing professional case management in a human services field. A master's degree from an accredited college or university in social work, sociology, psychology, criminal justice, or a closely related field may substitute for one year of experience.

Data on the education, qualifications, and training of such personnel.

Of the 55 intake and assessment workers who entered data in the LMS, 83% held a bachelor's degree and 15% held a master's degree. Of these, 58% were social work degrees. Caseworkers are required to complete Academy and additional foundational training, as outlined in the statewide Training Policy, within the first year of employment. Supervisors are also required to complete the supervisor curriculum offered through the Nevada Partnership for Training within one year of entering a supervisory position. All caseworker and supervisory staff are required to complete 30 continuing education units every two years. Suicide Prevention, CSEC, Bridges Out of Poverty, Ethics, and Mandatory Reporting are required courses with staff having the ability to select other training that is relevant to their professional development.

Demographic information of the child protective service personnel

Fifty-five (55) intake and assessment workers completed data in the LMS. Of those 88% are female, 5% male, and 7% declined to answer. Sixty-eight percent are Caucasian, 17% are Hispanic/Latino, 2% African American, 2% Mixed/Dual Background, and 10% declined to answer. The workforce age demographics identify 28% are 20-30, 34% are 31-40, 33% are 41-50, and 5% are age 51-60.

Information on caseload or workload requirements for such personnel, including requirements for average number and maximum number of cases per child protective service worker and Supervisor (section 106(d)(10) of CAPTA).

WCHSA provides for a reduced caseload for caseworker trainees while they are in the training unit. Once the case worker trainee has completed pre-service training, the caseload is increased based on workers skills and ability to manage the caseload. The agency does not have a maximum caseload size. WCHSA has implemented a caseload weighting tool for assessment staff that allows for targeted assignment based on the complexity of the case and the staff person's experience level and the weight complexity of their current workload. This helps ensure a more equitable distribution of cases throughout the units.

The actual average number of open cases for assessment caseworkers from July 2019 through March 2020 was 26 with 7 new cases assigned per month. There was a sharp decline in child abuse/neglect reports at the onset of the COVID-19 Pandemic stay at home order. Due to this, the number of new cases assigned fell to an average of 4 in the month of April. Because of the decrease in intake reports, staff had more time to close cases. Therefore, the number of ongoing cases fell to an average of 17 open cases for the month of April. It is expected that once the stay at home order is lifted the number of children visible in the community will increase, as will the number of child abuse/neglect reports.

Child Advocacy Center (CAC) Assessment Unit specializes in sexual/physical abuse reports. The average number of open cases for the CAC Assessment Unit from July 2019 through March 2020 was 34 with 6 new cases assigned per month. That number fell to 22 open cases and 2 assigned cases in the month of April 2020 due to the COVID-19 pandemic stay at home order.

Rural Region: Division of Child and Family Services

Information on the education, qualifications, and training requirements established by the state for child protective service professionals, including requirements for entry and advancement in the profession, including advancement to supervisory positions.

There are two classifications of CPS caseworkers: a licensed social worker or a Casework Management Specialist. The Casework Management Specialist (CMS) positions that carry out CPS duties must have a bachelor's degree from an accredited college or university in early childhood education, special education, human growth and development, criminal justice, psychology, counseling, social work or closely related social/human services-related field.

Data on the education, qualifications, and training of such personnel.

Of the 30 intake and assessment workers who entered data in the LMS, 65% held a bachelor's degree and 35% held a master's degree. Of these, 92% were social work degrees.

Caseworkers are required to complete Academy and additional foundational training, as outlined in the statewide Training Policy, within the first year of employment. Supervisors are also required to complete the supervisor curriculum offered through the Nevada Partnership for Training within one year of entering a supervisory position. All caseworker and supervisory staff are required to complete 30 continuing education units every two years.

In the first year, training targets the following topics: LGBTQ, Commercial Sexual Exploitation of Children (CSEC), the Vulnerability of Youth in Child Welfare, Indian Child Welfare Act (ICWA), substance use disorders, childhood trauma and child welfare, mental health conditions, father engagement, and domestic violence.

In addition, all supervisors are required to complete several distinctly different trainings including general supervisor training, a six-module curriculum supervision, motivational Interviewing for supervisors, and newly implemented this year, CoachNV a model designed to build Coaching competency skills.

Demographic information of the child protective service personnel.

Thirty intake and assessment workers completed data in the LMS. Of those 68% are female, 18% male, and 14% declined to answer. Sixty-seven percent are Caucasian, 13% are Hispanic/Latino, 4% African American, 28% Mixed/Dual Background, 4% Asian, 4% American Indian/Alaskan Native and 0% declined to answer. The workforce age demographics identify 28% are 20-30, 37% are 31-40, 11% are 41-50, and 32% are age 51-60.

Information on caseload or workload requirements for such personnel, including requirements for average number and maximum number of cases per child protective service worker and supervisor (section 106(d)(10) of CAPTA).

The average number of CPS assessments a CPS caseworker carries ranges between 17-26. There are no caps on caseloads for DCFS. CPS supervisors do not normally carry a caseload, although when CPS positions are vacant supervisors may carry a caseload until new staff are hired and trained, this is in addition to their other supervisory job requirements. CPS supervisors supervise 4-5 CPS workers at any given time. The average combined caseload of their staff is approximately 80 cases.

Southern Region: Clark County Department of Family Services

Information on the education, qualifications, and training requirements established by the state for child protective service professionals, including requirements for entry and advancement in the profession, including advancement to supervisory positions.

Caseworkers in both investigative and intake roles must have the following credentials: Bachelor's Degree in Social Work, Criminal Justice, Psychology, Human or Social Services, Sociology, Education or Special Education, Public or Business Administration, Behavioral Science, Counseling, Early Childhood, Health Science, Child Development, Nursing, Communications, Marketing or a related field. All caseworkers regardless of assignment must complete the pre-service academy, which is a 10 week in-person course that is a combination of classroom, on the job, shadow and field exercises. As part of on-going employee development, all caseworkers are provided with additional training in the areas as outlined in the state Training Policy 1402 effective April 2019.

Individuals selected for supervisory positions must have the following credentials: Bachelor's Degree in Social Work, Criminal Justice, Psychology, Human or Social Services, Sociology, Education or Special Education, Public or Business Administration, Behavioral Science, Counseling, Early Childhood, Health Science, Child Development, Nursing, Communications, Marketing or a related field and four (4) years of full-time professional level experience providing protective casework/counseling services, assessments or treatment services or performing administrative, organizational analysis or budgetary experience in a child welfare, social service, juvenile justice and/or residential setting; Two (2) years of which were lead or supervisory in one or more elements of a comprehensive child welfare, social service, juvenile justice and/or residential system. Possession of an advanced degree in a related field may be substituted for one of the years of experience outlined above. In addition to the above educational and professional experience, each supervisor must complete Clark County Supervisory Training Series (Supervisory Boot Camp) which is a professional development series for all supervisors county-wide in a blended learning environment and is facilitated by Clark County's Organizational Development Center. Supervisors also must complete Supervisory Core training, which is a series of advanced supervisory courses that are specific to Child Welfare Supervisors and are offered in cooperation with Nevada Partnership for Training.

Data on the education, qualifications, and training of such personnel.

Of the 246 intake and assessment workers who entered data in the LMS, 201 updated their profiles in the LMS. 64% held a bachelor's degree and 24% held a master's degree. Of these, 9% held social work degrees. Caseworkers are required to complete Academy and additional foundational training, as outlined in the statewide Training Policy, within the first year of employment. Supervisors are also required to complete the supervisor curriculum offered through the Nevada Partnership for Training within one year of entering a supervisory position. All caseworker and supervisory staff are required to complete 30 continuing education units every two years. Nevada Partnership for Training within one year of entering a supervisory position. All caseworker and supervisory staff are required to complete 30 continuing education units every

two years. Suicide Prevention, CSEC, Bridges Out of Poverty, Ethics, and Mandatory Reporting are required courses with staff having the ability to select other training that is relevant to their professional development.

Demographic information of the child protective service personnel.

Of the 246 intake and assessment workers, 201 workers updated their profile data in the LMS. Of those 82% are female, 7% male, and 10% declined to answer. Thirty (30) percent are Caucasian, 21% are Hispanic/Latino, 31% African American, 2% Mixed/Dual Background, 6% did not answer and 4% declined to answer. The workforce age demographics identify 12% are 20-30, 33% are 31-40, 23% are 41-50, 10% are age 51-60 and 21% did not provide an age. Of the respondents, 68% speak English, 12% speak Spanish, 1% speak Tagalog, 1% speak German; 16% did not respond.

Information on caseload or workload requirements for such personnel, including requirements for average number and the maximum number of cases per child protective service worker and Supervisor (section 106(d)(10) of CAPTA).

The average number of CPS assessments a CPS caseworker carries ranges between 10-15. There are no caps on caseloads for CCDFS. CPS supervisors do not normally carry a caseload, under special limited circumstances supervisors may carry cases in addition to their other supervisory job requirements. CPS supervisors supervise 5-6 CPS workers at any given time.

Juvenile Justice Transfers

The table below includes the number of children that were transferred to state juvenile custody (committed to a juvenile correctional facility or youth parole) from child welfare (receiving services or in protective custody). These youths were known to the child welfare system prior to entering the juvenile justice system and these numbers are collected on a monthly basis via UNITY.

Juvenile Justice Transfers SFY 2020 YTD (7/1/2019 through 5/19/2020)			
Age	Male	Female	Total # Committed
16	2	2	4
17	5	0	5
18	0	1	1
19	2	0	2
Total	9	3	12

Source UNITY Report CFS748*

Youth may be under reported on this report (CFS748) since state-level juvenile justice implemented a new database, Tyler Supervision in SFY2019. Also, there were no transfers listed from Washoe or Rural Counties; all of these transfers were from Clark County.

INTER-COUNTRY ADOPTIONS

There are no documented instances where a child adopted from another country disrupted. An informational memorandum will be developed and distributed to the regions including how to document them in UNITY to ensure the regions are aware of this requirement. The projected completion date for this policy is January 2021.

MONTHLY CASEWORKER VISIT DATA

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

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FINANCIAL INFORMATION

Refer to Attachment G for CFS-101 Parts I, II and III.

The following outlines why Nevada had unspent funds in title IV-B, Subparts 1 and 2, Chafee and ETV. (The numbers correspond to the CFS-101 specific line items which is Attachment G.

Requirement: Payment Limitation: Title IV-B, Subpart 1: The CFSP submission must include information on the amount of **FY 2005** title IV-B, subpart 1 funds that the state expended for child care, foster care maintenance, and adoption assistance payments for comparison purposes.

Nevada did not use Title IV-B, Subpart 1 funds for child care, foster care maintenance, or adoption assistance payments in 2005. Lines 7, 8, 15 of the CFS-101, Part II, also report that no Title IV-B, Subpart 1 funds were used or plan to be used for these purposes under the timeline included for the CFSP.

Title IV-B, Subpart 1 Funds (6.):

The Title IV-B, Subpart 1 funds were not fully expended due to a delay in implementing the Wendy's Wonderful Kids Adoption Program, a child-focused, evidence-based recruitment model, through a subaward to Adoption Exchange to stabilize the lives of children and youth waiting in foster care and to help them achieve permanency by implementing intensive, family-finding recruitment services. This new program has been implemented and is now operational.

Requirement: Payment Limitation: Title IV-B, Subpart 2: Provide the **FY 2018 state and local share expenditure amounts** for the purposes of title IV-B, subpart 2 for comparison with the **state's 1992 base year amount**, as required to meet the non-supplantation requirements

Award 1801NVFPSS Title IV-B, Subpart 2

- Fed share \$2,252,467.35
- State share \$750,822.45

We maintain grant files for 6 years, and do not have records back to 1992.

Title IV-B, Subpart 2 Funds (7):

The Title IV-B, Subpart 2 funds were not fully expended due to awarded agencies not fully expending their funding. Several agencies were given a 3-month no-cost extension to complete their projects however some did not fully expend their subaward amount. Due to the no-cost extension, the funding was allocated to these agencies and could not be re-distributed before the performance period ended. In light of this issue, DCFS' Grants Management Unit has revised their policy and will review each no-cost extension request more thoroughly and will only approve requests on a case-by-case basis. In addition, the Grants Management Unit has also implemented a past performance assessment as part of the annual Notice of Funding

Opportunity. Applicants for funding are rated on their past performance with the Grants Management Unit including if an agency fully expended their prior subaward. Also, as part of the Notice of Funding Opportunity process, the Grants Management Unit will re-award any unexpended funding from the prior year.

Chafee Funds (9):

The Chafee funds were not fully expended due to awarded agencies not fully expending their funding. Several agencies were given a 3-month no-cost extension to complete their projects however some did not fully expend their subaward amount. Due to the no-cost extension, the funding was allocated to these agencies and could not be re-distributed before the performance period ended. In light of this issue, DCFS' Grants Management Unit has revised their policy and will review each no-cost extension request more thoroughly and will only approve requests on a case-by-case basis. In addition, the Grants Management Unit has also implemented a past performance assessment as part of the annual Notice of Funding Opportunity. Applicants for funding are rated on their past performance with the Grants Management Unit including if an agency fully expended their prior subaward. Also, as part of the Notice of Funding Opportunity process, the Grants Management Unit will re-award any unexpended funding from the prior year.

Chafee Funds (9a):

DCFS utilizes the Chafee funding to provide services to foster youth. Room and board are not provided through the Chafee funding.

ETV funds (10):

The ETV funds were not fully expended due to the awarded agency not fully expending their funding as well as there were no administrative expenses to allocate to the award. DCFS created a budget for the ETV funding that included a 5% administrative cap for administrative expenses and the other 95% of the award was awarded to an agency to provide services statewide. The funding was allocated to the administrative cap and could not be re-distributed before the performance period ended. There ended up being no administrative expenses. In light of this issue, DCFS' Grants Management Unit has revised their policy and has become awarding the full 100% of the ETV award to the agency or agencies that are awarded during the Notice of Funding Opportunity.

ACRONYMS

AAP	American Academy of Pediatrics
AB	Assembly Bill
ACA	Adoption Call to Action
ACCWIC	Atlantic Coast Child Welfare Implementation Center
ACF	Administration for Children and Families

ACYF	Administration on Children, Youth and Families
ADA	American Disabilities Act
ADG	Assistant Director Group
ADSD	Aging and Disability Services Division
AFCARS	Adoption Foster Care Analysis and Reporting System
AI	Adoption Incentive
ANI	Area Needing Improvement
AOC	Administrative Office of the Court
APD	Advanced Planning Document
APSR	Annual Progress & Service Report
ASFA	Adoption and Safe Families Act
ASQ	Ages and Stages Questionnaire
ASTHO	Association of Health and Territorial Health
BDR	Bill Draft Request
BIA	Bureau of Indian Affairs
CAC	Child Advocacy Center
CAHS	Consolidated Agencies of Human Services
CANS	Child Abuse and Neglect Screening
CAPTA	Child Abuse Prevention and Treatment Act
CARA	Comprehensive Addictions and Recovery Act
CASA	Court Appointed Special Advocate
CB	Children's Bureau
CBCS	Capacity Building Center for States
CBCAP	Community Based Child Abuse Prevention
CCDFS	Clark County Department of Family Services
CCL	Child Care Licensing
CCSD	Clark County School District
CCWIS	Comprehensive Child Welfare Information System
CDC	Centers for Disease Control
CDR	Child Death Review
CFR	Code of Federal Regulations
CFSP	Child and Family Service Plan
CFSR	Child and Family Services Review
CIC	Court Improvement Council
CIC	Community Improvement Council
CIP	Court Improvement Project
CJA	Children's Justice Act
CMS	Case Management Specialist
COVID-19	Corona Virus Disease 2019
CPR	Cardiopulmonary Resuscitation
CPS	Child Protective Services
CQI	Continuous Quality Improvement

CSEC	Commercially Sexually Exploitation of Children
DA	District Attorney
DAG	District Attorney General
DCFS	Division of Child and Family Services
DCFS RR	Division of Child and Family Services Rural Region
DHCFP	Department of Health Care Financing and Policy
DHHS	Department of Health and Human Services
DHR	Department of Human Resources
DMG	Decision Making Group
DPBH	Department of Public and Behavioral Health
DR	Differential Response
DVRC	Domestic Violence Resource Center
DWSS	Department of Welfare and Supportive Services
EPSDTS	Early and Periodic Screening, Diagnostic and Treatment
ETV	Educational Training Voucher
FAFFY	Financial Assistance to Former Foster Youth
FASD	Fetal Alcohol Syndrome Disorder
FFPSA	Families First Prevention Services Act
FFY	Federal Fiscal Year
FIMR	Fetal and Infant Mortality Review
FPO	Family Programs Office
FRC	Family Resource Center
FY	Fiscal Year
GMU	Grants Management Unit
HHS	Health and Human Services
HR	Human Resources
HUD	Department of Housing and Urban Development
ICPC	Interstate Compact on the Placement of Children
ICTN	Inter-Tribal County of Nevada
ICWA	Indian Child Welfare Act
IDEA	Individuals with Disabilities Education Act
IEP	Individualized Education Plan
IL	Independent Living
ILA	Independent Living Agreement
ILP	Independent Living Program
ILPS	Independent Living Program Specialist
ILSSPS	Independent Living Social Services Program Specialist
IM	Instructional Memorandum
IS	Information Services
IT	Information Technology
ITCN	Inter-Tribal Council of Nevada
IV-B/2	Title IV-B, Subpart 2

IV-E	Title IV-E
JD	Judicial District
JDMP	Juvenile Dependency Mediation Program
JOIN	Job Opportunities In Nevada
JVTA	Juvenile Victims of Trafficking Act
KinGAP	Kinship Guardian Assistance Program
LACSN	Legal Aid of Southern Nevada
LGTBQ	Lesbian, Gay, Bisexual, Transgender and Questioning
LMS	Learning Management System
LSW	Licensed Social Worker
MI	Motivational Interviewing
MOU	Memorandum of Understanding
NAC	Nevada Administrative Code
NCANDS	National Child Abuse and Neglect Data System
NCID	National Criminal Investigative Database
NCJFCJ	National Council of Juvenile and Family Court Judges
NEICE	National Electronic Interstate Compact Enterprise
NHD	Nevada Housing Division
NIA	Nevada Initial Assessment
NIC	Nevada Indian Commission
NITC	Nevada Inter-Tribal Council
NOFO	Notice of Funding Opportunity
NOTO	Nevada Outreach and Training Organization
NPT	Nevada Partnership for Training
NRIT	Nevada Rapid Indicator Tool
NRS	Nevada Revised Statutes
NV LIFE	Nevada Life Nevada's Youth Advisory Board Leaders in Future Excellence
NYTD	National Youth in Transition Database
OMNI	Neonatal Abstinence Syndrome Initiative
OMS	Online Monitoring System
OPPLA	Other Planned Permanent Living Arrangement
OSR	Onsite Review
PIP	Program Improvement Plan
PPE	Personal Protective Equipment
PYD	Positive Youth Development
PSSF	Promoting Safe and Stable Families
QA	Quality Assurance
QICR	Quality Improvement Case Review
QPI	Quality Parenting Initiative
QRTP	Qualified Residential Treatment Providers
RR	Rural Region
RRT	Recruitment Response Team

RSP	Risk Standardized Performance
SACWIS	Statewide Automated Child Welfare Information System
SAFE	Safety Assessment and Family Evaluation
SAMHSA	Substance Abuse Mental Health Services Administration
SAPTA	Substance Abuse Prevention and Treatment Act
SB	Senate Bill
SFC	Specialized Foster Care
SFY	State Fiscal Year
SQIC	Statewide Quality Improvement Committee
SSI	Supplemental Security Income
SFY	State Fiscal Year
TA	Technical Assistance
TMT	Training Management Team
TPR	Termination of Parental Rights
U of MI	University of Michigan
UNITY	Unified Nevada Information Technology for Youth
UNLV	University of Nevada, Las Vegas
UNR	University of Nevada, Reno
VOCA	Victims of Crime Assistance
WCHSA	Washoe County Human Services Agency
WHO	World Health Organization
WIT	Workforce Innovation Team
WWK	Wendy's Wonderful Kids
YAB	Youth Advisory Board
YTD	Year to Date

ATTACHMENTS

Attachment A	Foster and Adoptive Parent Diligent Recruitment Plan
Attachment B	Health Care Oversight and Coordination Plan
Attachment C	Disaster Plan
Attachment D	Training Plan
Attachment E	Adoption Savings Methodology
Attachment F	Education Training Vouchers
Attachment G	CFS 101
Attachment H	DCFS PIP Reporting with Measurement Plan Renegotiation Progress Report Q1 and Q2 submitted June 1, 2020
Attachment I	Citizen's Review Panel Report
Attachment J	DCFS Response to the CRP