



STATE OF NEVADA

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



2019 ANNUAL PROGRESS SERVICES REPORT

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SECTION I: INTRODUCTION

Nevada Demographics

Geography, Climate, and Population

Nevada, also known as The Silver State, is in the Western, Mountain West and Southwestern region of the United States of America which became the 36th state of the union on October 31, 1864. In 1864, to hasten its admission to the union, Nevada's entire state constitution was sent to Washington, D.C., by telegram making it the largest and costliest transmission ever by telegraph. Nevada was the first state to ratify the 15th Amendment to the U.S. Constitution, on March 1, 1869. Nevada is made up of an area of 110,567 square miles, making it the 7th largest state geographically and one the most densely populated states. The land areas of Nevada make up 109,806 square miles with 761 square miles, or 0.69% of the state is covered by water. Nevada is the driest state in the United States with the average rainfall being about 7 inches annually. The State of Nevada has desert and semiarid climate regions. Snowfall is occasional in the hilly area of the state and there is scarce precipitation in most parts of the state

Nevada is home to the Hoover Dam which is the largest public works project in the history of the United States, and Lake Mead, which is the largest reservoir in the country. Nevada is about 490 miles long and 320 miles wide. There are 2,167 mountain peaks in Nevada with the highest point being Boundary Peak, part of White Mountains, that sits at 13,147 feet above the sea level. Major lakes in Nevada are Pyramid Lake, Lake Mead, Lake Mojave, Lake Tahoe, which is the third deepest lake in the United States, and Walker Lake. Major rivers in Nevada are the Colorado River, Columbia River, Humboldt River and Truckee River. The Nevada landscape is represented by sandy deserts, rugged snow-covered mountains, and grassy valleys. Located almost entirely within the Great Basin, Nevada can be divided into three main land regions; the Columbia Plateau, the Sierra Nevada, and the Basin and Range Region. Nevada has more than 44,000 acres of man-made reservoirs, over 2,000 miles of streams, and 23 designated wilderness areas. Currently, 87% of the land is owned by the federal government.

Nevada was made famous by the 1859 discovery of the Comstock Lode, the richest known U.S. silver deposit. Nevada is the largest gold-producing state in the nation. It is fourth in the world behind China, Australia, and Russia. Nevada is the gambling and entertainment capital of the United States and is only one of seven states that does not have a state lottery. The capital, Carson City, is one of only two United States capitals that borders another state.

The United States Census Bureau estimated that the population of Nevada was 2,700,551 for the 2010 United States Census.¹ Based on The United States Census Bureau July 1, 2017 estimates, the Nevada population was projected to be 2,998,039 for 2017² (an increase of 9.0% from the 2010 U.S. Census). According to the Kids Count Data Center, a project of the Annie E Casey Foundation, in 2016, the number of children within the State of Nevada is 784,484³ which is 23% of the total population. Based on the July 1, 2017 estimate from the NV State Demographer⁴ most of Nevada's population is in southern Nevada with Clark County at an estimated population of 2,229,609 or 73.8%. Washoe County is the next largest populated county, located in northern Nevada, with a population of 451,986 or 14.9%. The remaining population of 340,060 or 11.3% is spread across the 15 rural counties. Based on the September 30, 2016 Estimate from the NV State Demographer⁴ Nevada's population has a varied racial background that has changed considerably from 2010 to 2018. Estimate reports for 2018, show that most of the population is White not of Hispanic Origin 1,544,402, (51.1%); African Americans not of Hispanic Origin, 263,094, (8.7%); American Indian, Eskimo, or Aleut not of Hispanic Origin, 34,843 (1.2%); and, Asian or Pacific Islander not of Hispanic Origin, 286,483, (9.4%). Hispanic Origin of any race population is currently 884,081, (29.25%) which is the fastest growing population group in Nevada. Based on the October 2019 estimate from the

¹ US Census Bureau (2010). www.census.gov/quickfacts/table/PST045216/32 retrieved March 26, 2018

² US Census Bureau (2010). www.census.gov/quickfacts/table/PST045216/32 retrieved March 26, 2018

³ <http://datacenter.kidscount.org/data/tables/9109-child-population-19-and-under?loc=30&loct=2#detailed/2/any/false/870,573,869,36,868/any/18103> retrieved March 26, 2018

⁴ https://tax.nv.gov/Publications/Population_Statistics_and_Reports/ retrieved March 26, 2018

NV State Demographer, expected population in Nevada in 2019 is 3,055,076 which shows a slight increase from previous years.

Nevada Population Growth: 2010 - 2018

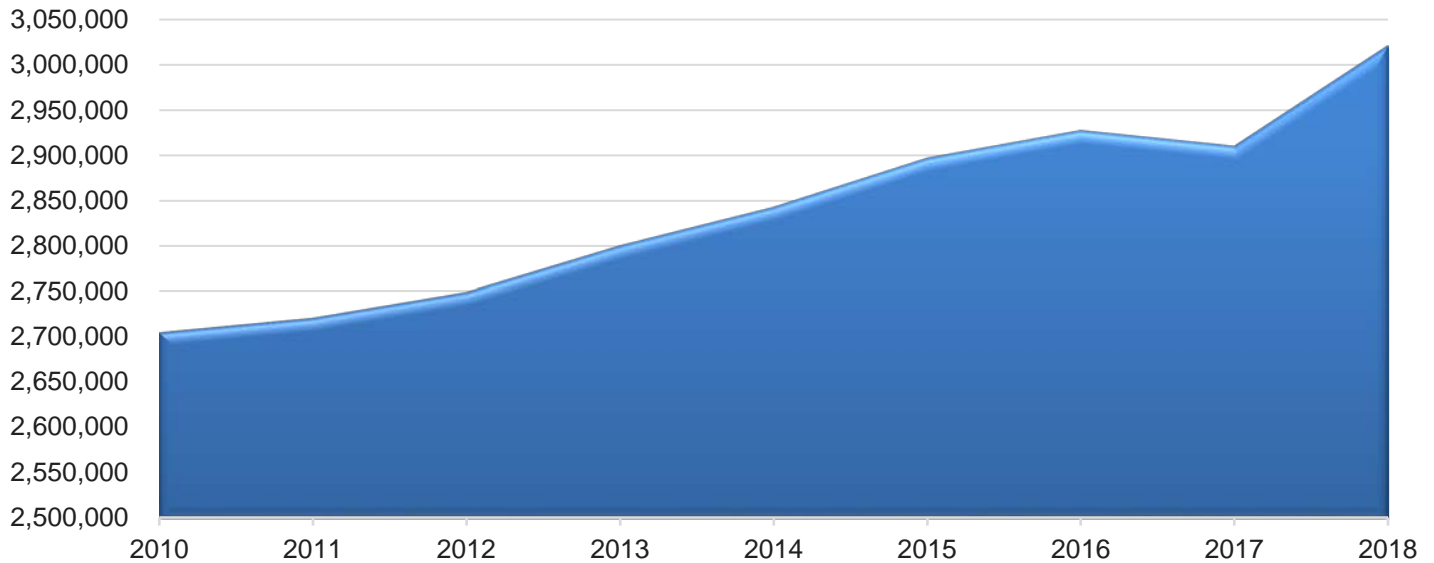


Figure 1.1 Nevada Population 2010 to 2018 (*based on October 2017 projections from Nevada Demographer)

Economy and Trends

The following information is from the Nevada Department of Employment, Training and Rehabilitation (DETR) press release of March 6, 2018.

Nevada is working toward the sixth continuous year with growth rates above the nation, while seeing an unchanged unemployment rate. These are certainly positive indicators for our state as we begin 2018. This is the 66th straight month with annual employment growth in Nevada higher than the US, reflecting continued strength in the job market in the state. At 4.9 percent, Nevada's unemployment rate remained unchanged since August of last year. Over the year, employment grew by 37,700 or 2.8 percent.

The largest employment gains occur in construction, trade/transportation/utilities, professional/business services, healthcare and leisure/hospitality. Las Vegas and Reno-Sparks are the two areas that will see the biggest boom. With increased employment opportunities, the Silver State's jobless rate is projected to hover around 4.9 percent, a decrease from 2016's average through October of 6 percent. The top three drivers of Nevada employment will be diversification among the various industries, state population growth and increasing visitor counts. ([Banning, 2017](#))

The following information is from the Nevada Department of Employment, Training and Rehabilitation (DETR), Economy in Brief, February 2017, Economic Summary.

In the years preceding the economic downturn, Nevada led the country in private sector employment growth. The Silver State had the highest employment growth rate in the country in 2005 (6.4 percent). Conversely, during the recession, Nevada was the most affected state in terms of private sector employment growth. In fact, Nevada's employment growth was the lowest in the nation in 2009 (-10.1 percent) and 2010 (-2.8 percent). Nevada has

gradually regained lost ground over the past five years. Nevada's job growth is third strongest in the country, the unemployment rate has been cut in half, and Nevada has the second fastest growing population in the nation.

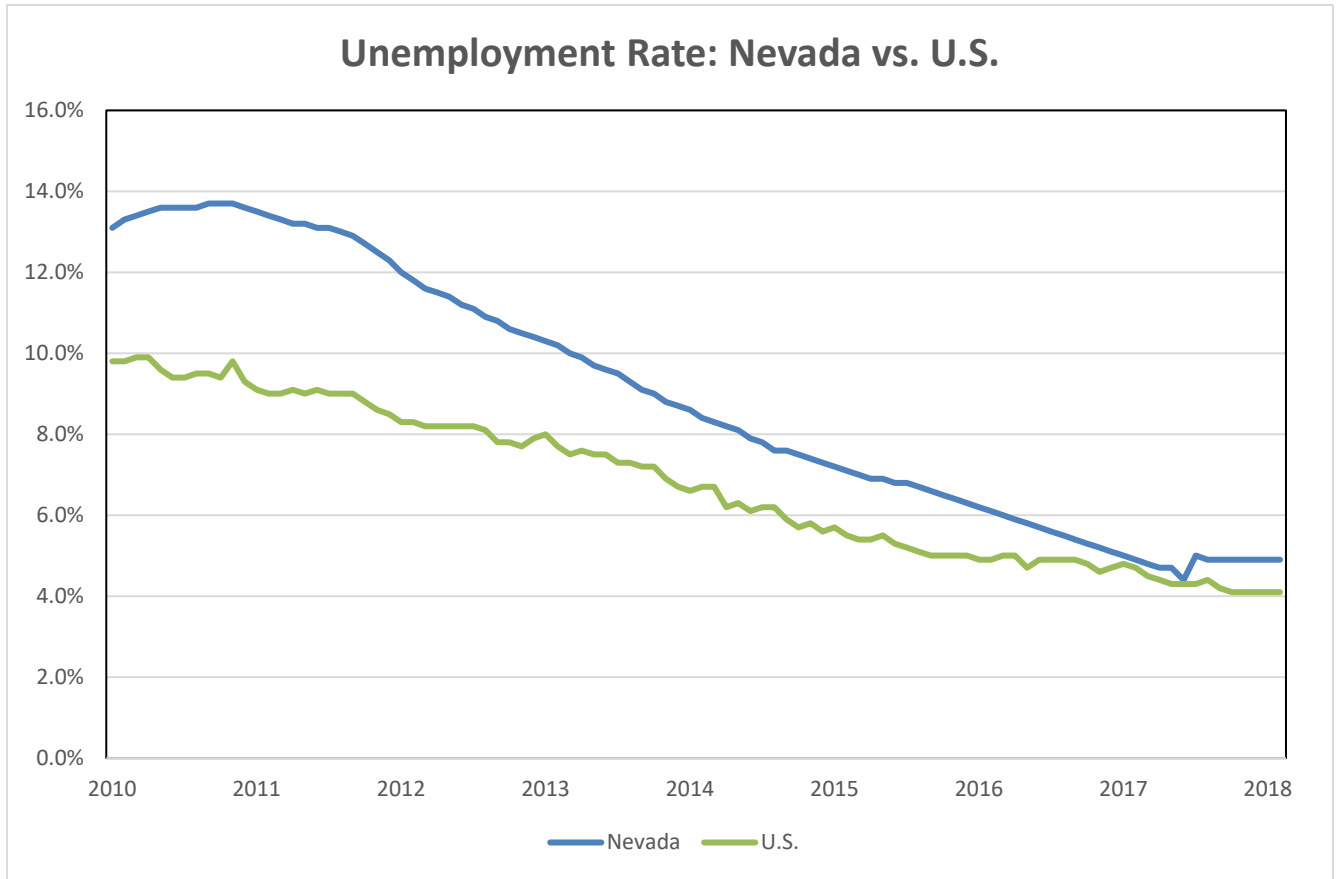


Figure 1.2 Comparison of Nevada and U.S. monthly unemployment rates (Jan 2010 to Feb 2018)

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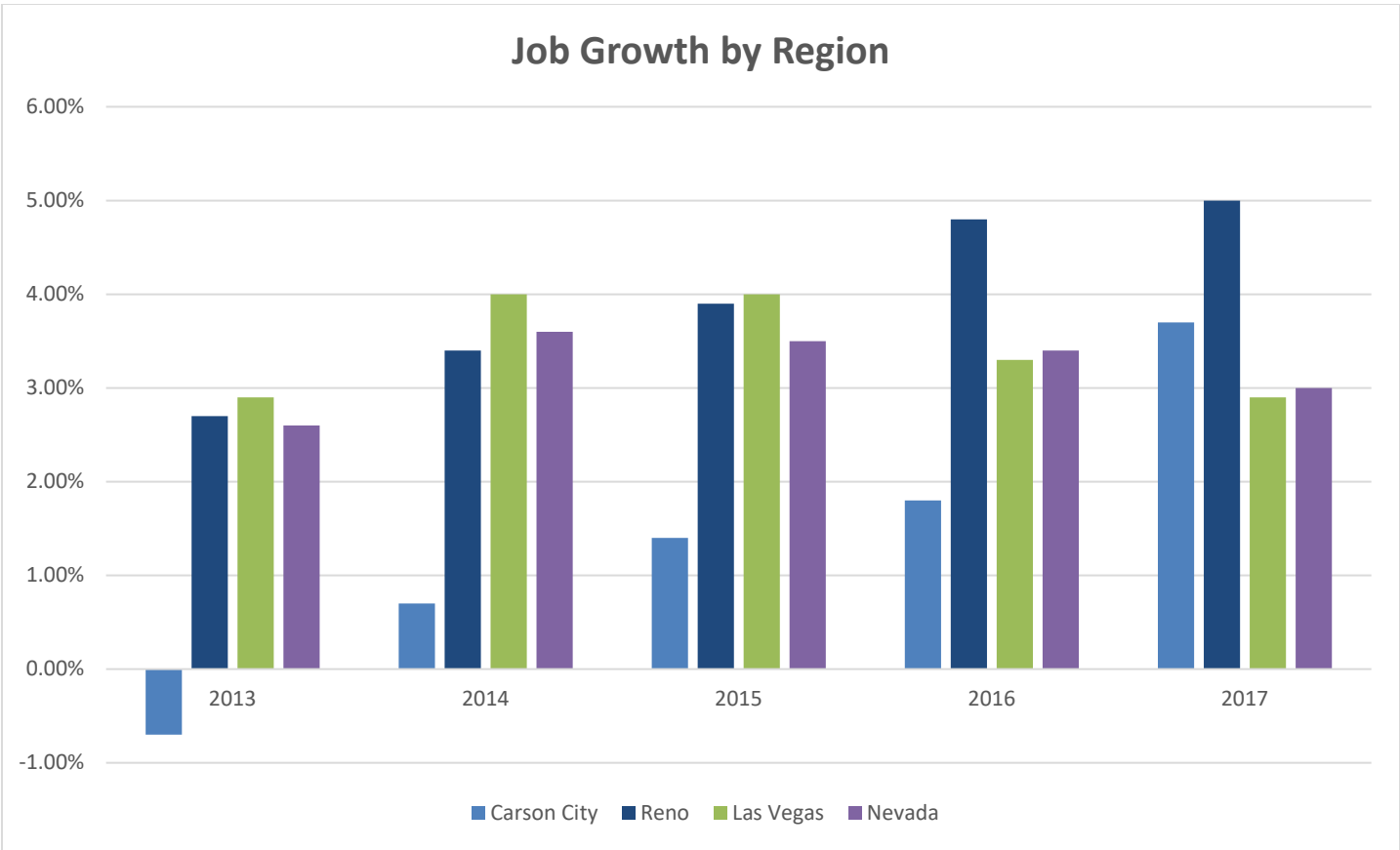


Figure 1.3 Job growth by Nevada metropolitan area (Jan 2013 to Dec 2017)

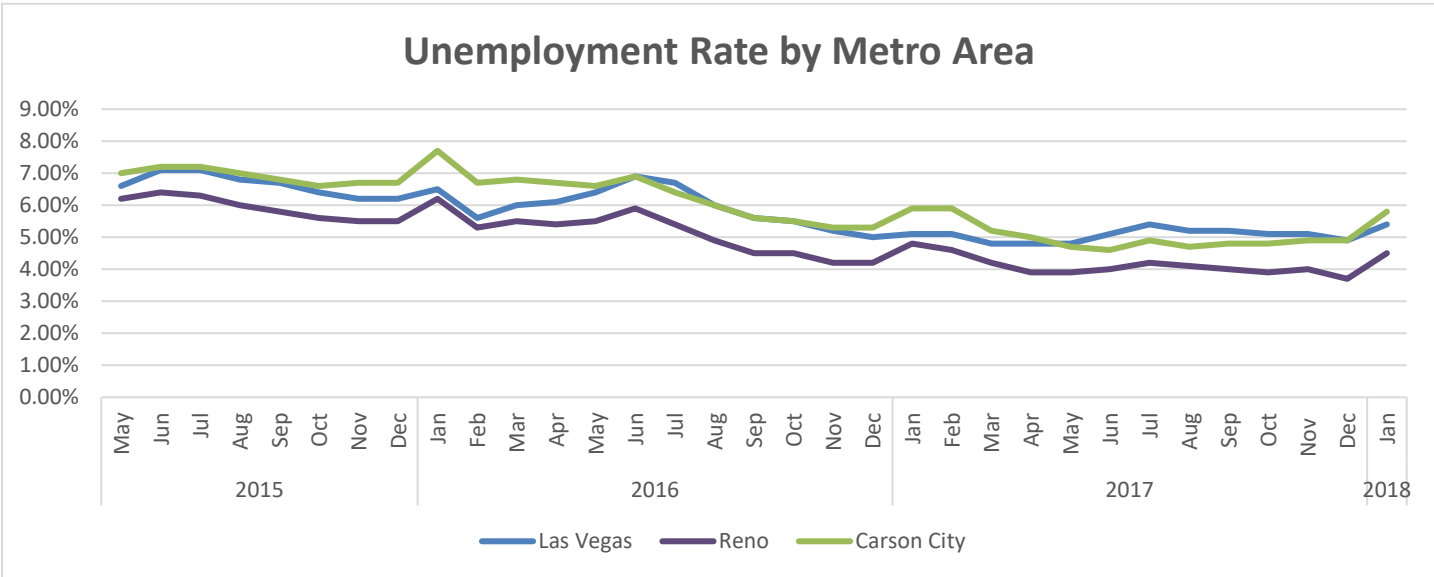


Figure 1.4 Unemployment rate by Nevada metropolitan area (Jan 2015 to Jan 2018)

Welfare Indicators

The following information is extracted from the Nevada Department of Health and Human Services, Division of Welfare and Supportive Services https://dwss.nv.gov/Home/Features/Budget_CaseloadStats-New_SF18/

The Temporary Assistance for Needy Families (TANF) program provides time-limited cash assistance to low-income families with children so they can be cared for in their own home. TANF also seeks to reduce dependency by promoting job preparation, reducing out-of-wedlock pregnancies, and encouraging the formation and maintenance of two-parent families. As an economic indicator, TANF reveals information on the relative well-being of Nevada's low-income families. The number of recipients in the program is strongly influenced by the ups and downs of the business cycle. In 2017, there was an average of 24,537 individuals receiving assistance through the TANF program.

The Supplemental Nutrition Assistance Program (SNAP), formerly known as "food stamps" provides the means to increase food purchasing power to raise the nutritional level among low-income households and is the first line of defense against hunger for thousands of Nevadans. In 2017, there was an average of 440,484 Nevadans that participated in the SNAP program.

Medicaid is a joint federal and state program that provides free or low-cost medical benefits to millions of Nevadans including low-income families and children, pregnant women, the elderly, or people with disabilities. In the year 2017, there was an average of 637,780 individuals that participated in and received assistance from the Medicaid program.

TANF Grant Recipients

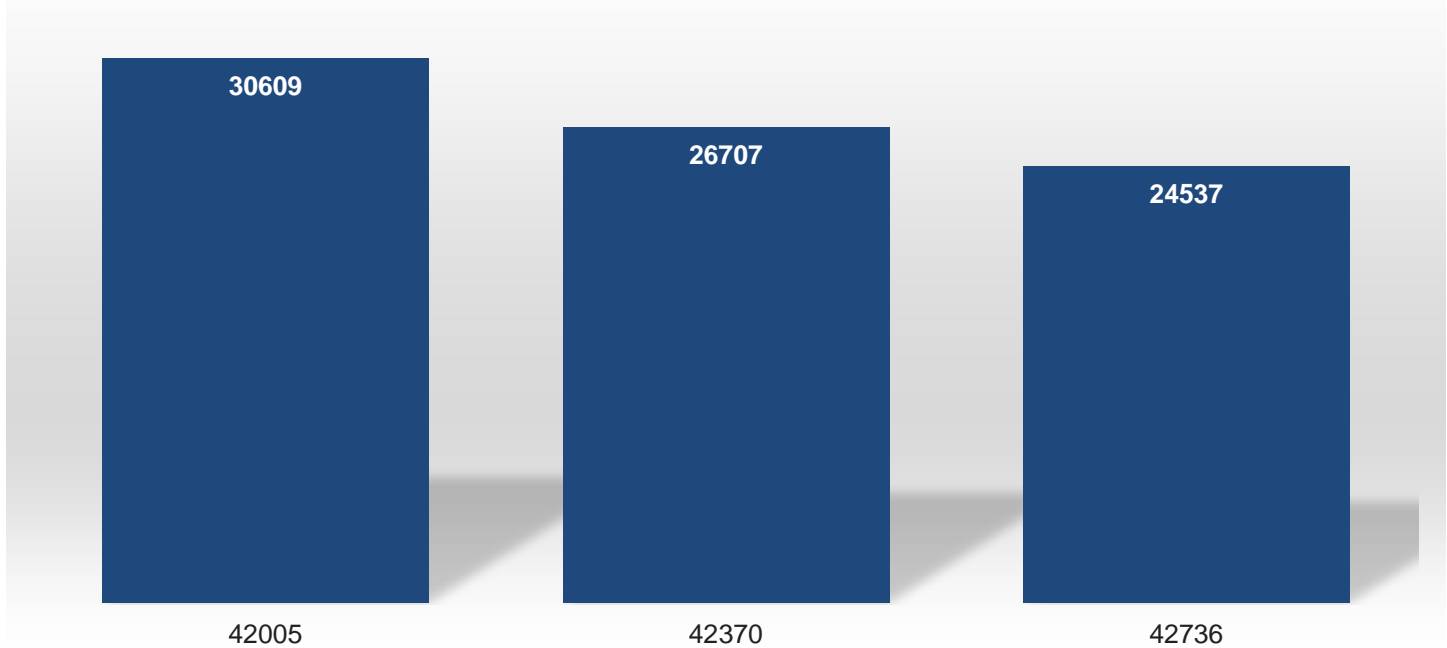


Figure 1.5 Nevada TANF grant recipients each January from January 2015 through December 2017.

SNAP Participants

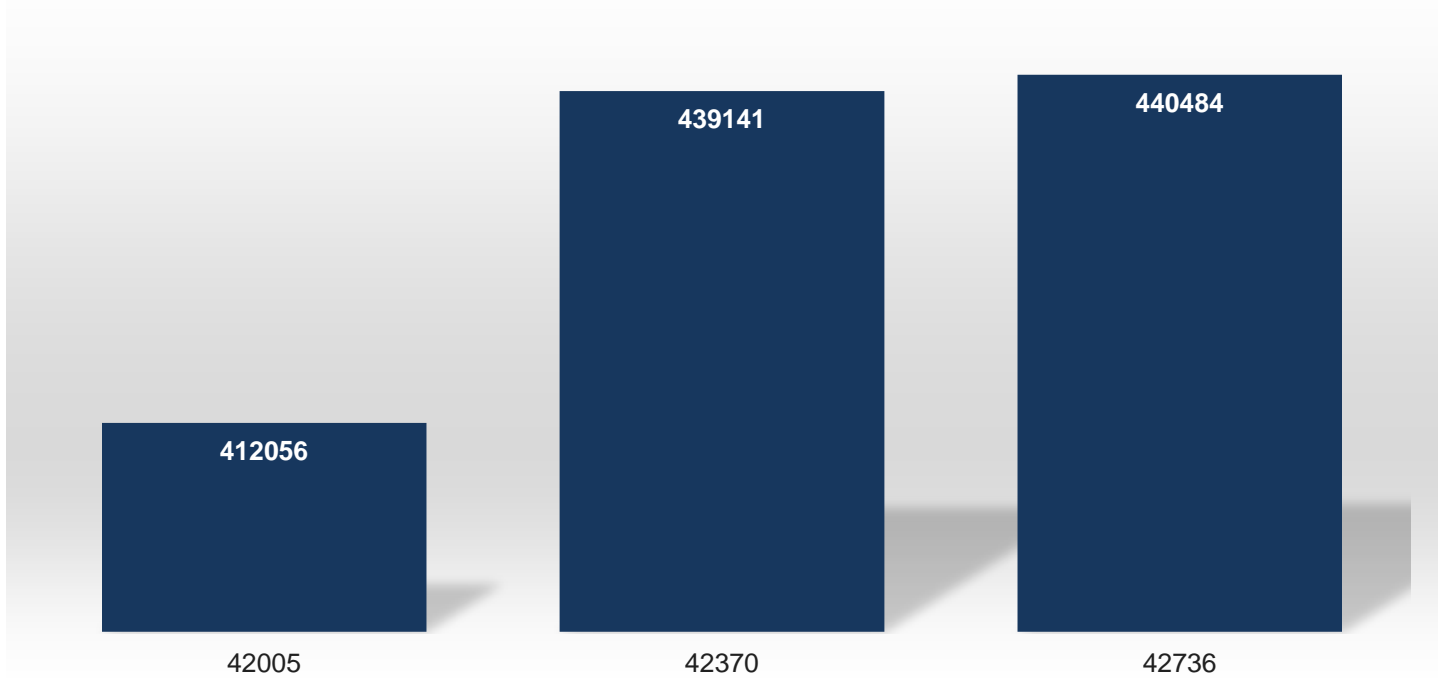


Figure 1.6 Nevada SNAP participants each January from January 2015 through December 2017.

Child Welfare Administrative Structure

Nevada uses a state-administered and county-operated structure for the management of child welfare services, except in the rural counties of the state, where the Nevada Division of Child and Family Services operates child welfare services. The Nevada Division of Child and Family Services, under the umbrella of the Nevada Department of Health and Human Services, provides oversight to child welfare and direct child welfare services.

State Agency Administering Plans

The Division of Child and Family Services (DCFS) is responsible for Children's Mental Health (in Clark and Washoe, the two largest populated counties), Juvenile Justice Services, and Child Welfare Services. As such, the implementation and administration of the Child and Family Services Plan is the responsibility of DCFS. This includes: Title IV-E, Title IV-B, Subpart I (Child Welfare Services) and Subpart 2 (Promoting Safe and Stable Families), Child Abuse and Treatment Act (CAPTA), and the Chafee Foster Care Independence Program (CFCIP).

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

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

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

operated juvenile facilities.

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

Mission

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

Nevada Initiative Statement for Family Centered Practice

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

Vision

DCFS recognizes that Nevada's families are our future and that families thrive when they:

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

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Guiding Principles

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

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

Purpose

DCFS is responsible for accomplishing the following purposes:



Protecting and promoting the welfare and safety of all children, including individuals with disabilities; homeless, dependent or neglected children;

Preventing or remedying, or assisting in the solving of problems that may result in the neglect, abuse, exploitation, or delinquency of children;

Preventing the unnecessary separation of children from their families by identifying family problems and assisting families in resolving their problems, thereby preventing the breakup of the family where the prevention of child removal is desirable and possible;

Restoring families, reunifying children with their parents, who have been removed and may be safely returned, through the provision of services to the child and the family;

Assuring adequate care of children away from their homes in cases where the child cannot be returned home or cannot be placed for adoption; and

Placing children in suitable adoptive homes in cases where restoration to the biological or primary family is not possible or appropriate.

Figure 1.7 County Map of Nevada

Child Welfare Agencies

The organizational structure of DCFS and program delivery of child welfare services are influenced by the state size and concentration of county population. NRS 432B.325 states that in counties where the population is 100,000 or more, that the county shall provide protective services for children in that county and pay the cost of those services in accordance with standards adopted by the state. In 2001, the state legislature expanded the county's responsibility to include all child welfare services of child protection, foster care and adoption (NRS 432B.030 and NRS 432B.044). Figure 1.2 provides a map of the state with each county outlined.

In the 2011 Legislative Session NRS 432B.325 and NRS 432B.326 were passed. Prior to this legislation the law required DCFS, in counties whose population is less than 100,000 (currently all counties other than Clark and Washoe counties) to provide directly or arrange for the provision of child welfare services, including protective services, foster care services and adoption services. The new legislation requires each of those counties to pay DCFS an assessment for the provision of child protective services not to exceed the limit of legislative authorization for spending on child protective services by DCFS in each county. Furthermore, this legislation allows a county to request an exemption from the assessment by submitting a proposal to the Governor for the county to carry out child protective services for the county. If the Governor approves the proposal, the Interim Finance Committee (IFC) must consider whether to approve the exemption. If the exemption is approved, the county is required to carry out child protective services for the county in accordance with standards adopted by DCFS and must pay for the cost of those services. As of the date of this report no county has requested an exemption.

Agency Regional Coverage

The Clark County Department of Family Services (CCDFS), located in Las Vegas, provides child welfare services to all children and families in Clark County, in the southernmost part of the State. Washoe County Human Services Agency (WCHSA) located in Reno, Nevada, provides child welfare services directly to all children and families located in Washoe County, in the northwestern part of the State. DCFS provides child welfare services to the remaining 15 counties in the state through its Rural Region offices.

The DCFS Rural Region is separated into four districts, each providing services to multiple counties. District 1 covers the northern part of the State with its primary office based in Elko. This District provides services to Elko, Eureka, Humboldt, and Lander Counties. District 2 covers the western/central part of the state and is based in Carson City. This District provides services to Carson City, the State's Capitol, Douglas County, and Storey County. District 3 covers the eastern/central part of the state and is based out of Fallon. This office provides services to Churchill, Lyon, Pershing and Mineral counties. District 4 covers the southern rural part of the state and is based out of Pahrump. This office provides services to Esmeralda, Nye, Lincoln and White Pine counties. According to the State Demographer, over the next 20 years, Carson City, Elko, Douglas, Churchill and Nye counties will show modest growth. The rural counties of Eureka, White Pine, Humboldt, Pershing, Esmeralda and Lander will experience a decrease in population.

STAFF and WORK LOAD:

There are approximately 567 child welfare positions in Intake, Investigations, In-home/Out-of-home Case Management, Adoption, and Licensing with 22 vacancies statewide. Additionally, statewide there are approximately 120 Supervisory/Management child welfare positions filled and 5 vacancies.

Clark County Department of Family Services: For State Fiscal Year (SFY) 2018 CCDFS reports that their agency has approximately 482 child welfare positions in Intake, Investigations, In-home/Out-of-home Case Management, Adoption, and Licensing filled. Additionally, there are approximately 81 Supervisory/Management positions filled with 1 vacancy. CCDFS reports the following caseload ratios: Investigations 1:17, Advanced Investigations 1:5 (specialize in 5 and under, ERT and sex abuse) and Permanency Case Management 1:13. Supervisor ratios to staff are 1:5 in Investigations, and 1:5 in Permanency Case Management. Staff separations during this reporting period included 4 retirements, 9 dismissals, and 28 voluntary resignations. There were approximately 35 promotions/laterals.

Washoe County Human Services Agency: For SFY 2018 WCHSA reports that their agency has approximately 83 child welfare positions in Intake, Investigations, In-home/Out-of-home Case Management, Adoption, and Licensing filled with 7 vacancies. Additionally, there are approximately 21 Supervisory/Management positions filled with 3 vacancies. WCHSA reports the following caseload ratios: Assessment 1:10, CAC Assessment 1:8 (specialize in sexual/physical abuse reports) and In-home/ Out-of-home Case Management 1:28. Supervisor ratios to staff are 1:6. Staff separations during this reporting period included 1 retirement, 1 dismissals, and 5 voluntary resignations. There were 16 promotions during this period.

DCFS Rural Region: For SFY 2018 the DCFS Rural Region reports their agency has approximately 52 child welfare positions in Intake, Investigations, In-home/Out-of-home Case Management, Adoption, and Licensing filled with 14 vacancies. Additionally, there are approximately 18 Supervisory/Management positions filled with 1 vacancy. The DCFS Rural Region reports caseload ratios: Investigations 1:12, In-home/Out-of-home Case Management 1:20. Case Managers in smaller satellite offices who carry a combined caseload (Investigations and out-of-home cases) and have a 1:24 caseload. Supervisor ratio to staff are as follows: Four have 1:6 ration; five have 1:5 ratio; six have 1:4 ration, and one supervisor has a 1:2 ration. Staff separations during the reporting included 0 retirements, 0 dismissal, and 11 resignations. There were 2 promotions during this period.

* For further information concerning Nevada’s Child Protective Services Workforce see Appendix D

Children in Out of Home Care in Nevada

Table 1.1 Children in Out of Home Care: SFY 2015 – SFY 2018 (2018 represents July 2017 – April 2018)

	SFY 2015	SFY 2016	SFY 2017	SFY 2018*
Region	Mean	Mean	Mean	Mean
Clark	3,388	3,297	3,194	3329
Washoe	951	954	888	917
Rural	406	436	363	395
Statewide	4,745	4,687	4,442	4,641

Source: CLEO Report/Child Welfare Caseload Statistics

*Year to Date (YTD)

Table 1.1 illustrates the monthly average number of children in out-of-home care by region for the previous three State Fiscal Years (July 1 – June 30) and the State Fiscal Year to date for 2018 (July 1, 2017 – April 30, 2018). Statewide, the average decreased by 1.22% for State Fiscal Year 2016 and decreased 5.23% for State Fiscal Year 2017. The Year to date data for SFY 2018 is showing slight change from SFY 2015.

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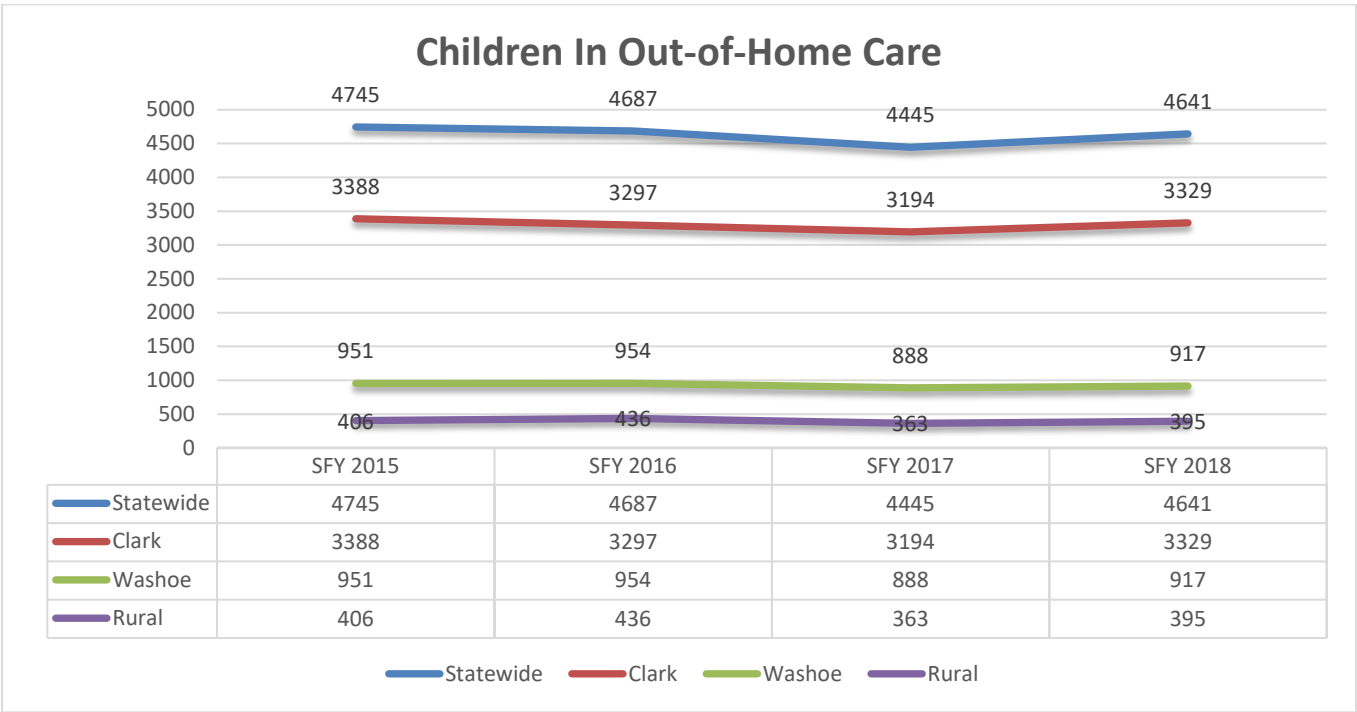


Figure 1.8 Children in Out-of-Home Care by Region: SFY 2015 – SFY 2018 (2018 represents July 2017 – April 2018)

Figure 1.8 presents the number of children in out-of-home care for periods based on the State Fiscal Year, including through April of 2018. Overall Statewide, and since SFY 2015 children in care has a slight downward trend with not much difference in SFY 2015 and SFY 2018 YTD.

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Legislative Activities

Nevada's Legislature meets every biennium. The following are a list of Bills in Table 1.2 that were introduced during the 79th regular session in February 2017. Nevada will enter its' 80th regular session in February 2019.

Table 1.2 Legislative Bills introduced in the 2017 Legislative Session

Bill	Requestor/Committee	Subject
SB2	Senator Manendo	Revises provisions relating to the surrender of a newborn child to a provider of emergency services
AB228	Assemblyman Pickard	Revises provisions governing termination of parental rights
AB305	Legislative Committee on Health Care (NRS 439B.200)	Requires a public school to post posters containing a telephone number for a child abuse hotline, instructions on accessing DCFS website and how to call 911
AB99	Assemblyman Araujo	Revises provisions governing services for children in foster care and other out-of-home settings. LGBTQ Bill
AB236	Assembly Committee on Health and Human Services	Revises provisions governing the protection and safety of children. Authorizing child welfare agency to obtain educational records for youth who are in the custody of the child welfare agency.
SB237	Senator Harris	Revises provisions relating to children. Requires court to consider if in-home safety planning was considered by the child welfare agency.
AB459	Assemblyman Frierson	Revises provisions governing the protection of children. Authorizes the court to order certain blood and genetic testing concerning a child in need of protection.
SB287	Senator Gansert-Joint Requester: Assemblywoman Benitez-Thompson	Revises provisions relating to the protection of children. Requiring school employees/volunteers to report abuse/neglect and child welfare agency to investigate such a report and forward substantiated finding to CANS. Revises provisions concerning background check on certain educational personnel and volunteers.
SB510	Office of Finance in the Office of the Governor	Revises provisions governing the eligibility of children for the Kinship Guardianship Assistance Program
SB305	Senator Ratti	Makes certain changes relating to the protection of children.
SB274	Senator Ratti	Revises provisions relating to the protection of children.
SB480	Senate Committee on Health and Human Services	Revises provisions relating to the protection of children. Aligns state statute with CARA federal requirements.
SB169	Senator Harris	Imposes criminal penalties on employees of certain agencies who engage in sexual conduct with children or young adults under the agencies' care, custody or control.
AB491	Assembly Committee on Education	Revises provisions governing the education of children in foster care. Aligns state statute with ESSA federal requirements.
SB257	Senator Farley Joint Requester: Senator Cannizzaro	Revises provisions relating to the welfare of children.
SB432	Senate Committee on Judiciary	Revises provisions relating to termination of parental rights

Section II: Goals, Objectives and Methods of Measuring Progress

PLAN FOR IMPROVEMENT

The Nevada 2015-2019 CFSP required DCFS to identify several broad goals for progress throughout the child welfare continuum. These goals are expressed in terms of improved outcomes for the safety, permanence, and well-being of children and families, and in terms of a more comprehensive, coordinated, and effective child and family service delivery system, as is required in 45 CFR 1357.15 (h).

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

To the extent that a key requirement of DCFS's CFSP goals and objectives are quantifiable and measurable, this section of the report details the data-driven baselines/benchmarks against which DCFS's progress will be measured over the course of the next three years. For some of the proposed objectives/measures DCFS is not able to produce baseline data either because referenced programs/processes/interventions are still too nascent to produce significant data and/or because DCFS is in the process of developing/correcting reporting mechanisms. This APSR will report progress that has occurred over the course of SFY 2018.

Additionally, Nevada completed the Child and Family Services Review (CFSR) Statewide Assessment on February 1st, 2018, and information as it relates to current performance is cited from the Nevada Statewide Assessment.

SAFETY

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

The rationale for Nevada choosing this goal was due to Nevada's inability to meet the national performance for 'abuse in foster care' for several years. However, Nevada did meet the negotiated target in the Round 2 Child and Family Services Review Performance Improvement Plan (PIP) during the non-overlapping period ending 03/31/2014. Additionally, the FY 2015 data indicates Nevada's performance is statistically no different than national performance.

The CFSR Round 3 Data Profile was recently provided on 10/16/2017 by the Children's Bureau of the Administration for Children and Families (ACF) using a new revised federal measurement methodology.

Table 2.1

CFSR Round 3 Statewide Data Indicators provided by the Children's Bureau on 10/16/2017

Federal Performance Measure	National ⁵ Performance	Data Source	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
					Lower CI ⁶	RSP	Upper CI
Maltreatment in foster care	9.68	NCANDS FY 2013	↓	8.40	9.52	11.18	13.13
Maltreatment in foster care	9.68	NCANDS FY 2014	↓	8.79	9.91	11.68	13.76
Maltreatment in foster care	9.68	NCANDS FY 2015	↓	6.34	7.03	8.52	10.33

*Green Shading = State's performance (using RSP interval) is statistically better than National Performance;
 Grey Shading = State's performance (using RSP interval) is statistically no different than national performance;
 Red Shading = State's performance (using RSP interval) is statistically worse than national performance.*

Table 2.1 illustrates the most recent data. Nevada's data shows a negative trend compared to the national performance of 9.68. Specifically, in FY 2014 the data reflects that Nevada is performing statistically worse than national performance.

⁵ National Performance = victimizations per 100,000 days in care

⁶ Confidence Interval

While the number of days for children in care decreased for the FY 2014 as compared to FY 2013 the number of victimizations/100,000 days did not decrease proportionately, creating an increase in the percentage over the national performance.

NCANDS data for FY 2016 has not been validated and is needed for the calculation of the NCANDS FY 2015.

OBJECTIVE 1.1

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

Intervention/strategy 1.1.1

Continue full statewide implementation of the Nevada Safety Model. The Nevada Safety Model is known as Safety Intervention Permanency System (SIPS) by CCDFS; the Safety Assessment and Family Evaluation (SAFE) by the DCFS Rural Region, and Safety Assessment and Family Evaluation (SAFE) or (SAFE/FC) by WCHSA.

**Intervention/strategy rationale:* The State of Nevada has been working towards improving the assessment of safety since the first Program Improvement Plan (PIP) in 2006, and during the second PIP in 2010. Nevada has historically used ACTION for Child Protection through contractual funds or has received technical assistance from the National Resource Center for Child Protective Services (NRCCPS). Nevada has been working with ACTION for Child Protection for several years and continues working with ACTION on an enhanced safety model. The DCFS Rural Region and WCHSA met and moved forward with implementation of the enhanced safety model beginning in 2010-2011. CCDFS secured a three-year contract with ACTION to assist CCDFS with implementation of the enhanced safety model. The State of Nevada has a great deal of investment in the implementation of this model and needs additional years for complete full statewide implementation.

Intervention/Strategy 1.1.2

Utilize the Quality Parenting Initiative (QPI) to build supports around foster parents to enhance the safety of children and youth in foster care.

**Intervention/strategy rationale:* The Quality Parenting Initiative (QPI) is an innovative approach to strengthening foster care, including kinship care, and using branding and marketing principles. It is a process designed to help a site develop new strategies and practices, rather than imposing upon it a predetermined set of "best practices." The core premise is that the primary goal of the child welfare system is to ensure that children have effective, loving parenting. The best way to achieve this goal is to enable the child's own parents to care for him or her. If that isn't possible, the system must ensure that the foster or relative family caring for the child provide the living, committed, skilled care that the child needs, while working effectively with the system to reach the child's long-term goals.

QPI recognizes that the traditional foster care "brand" has a negative connotation and that this deters families from participating. QPI is an effort to rebrand foster care, not simply by changing a logo or an advertisement, but by changing the core elements underlying the brand. When these changes are accomplished, QPI sites are better able to develop communication materials and to design recruitment training and retention systems for foster parents.

MEASURES OF PROGRESS PROJECTION TIME TABLE

Table 2.2

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

Measures/Benchmarks	Benchmark Timetable	Data Baseline	Projected Goal FY 16/17	Goal FY 18/19
Reduce the victimization rate per day of children in foster care. Source: ACF NV Data Profile	9.68 National Standard <i>(Reduction is positive)</i>	11.18 (RSP)- FY 2013	9.68 FY 2015 (most recent met at 8.52)	9.68
Increase the timeliness of Investigations for out-of-home cases. Source: Case Record Reviews	Review Policy during SFY 2018	70%	80% Not Met CY 2017 68.42%	90%
Increase the frequency and quality percentage of caseworker visits with children in out-of-home care. Source: Case Record Reviews	90%	58%	68% Not Met CY 2017 61.54%	78%
Develop a UNITY Report for the courts that tracks the number of children on out-of-home care non-judicial safety plans, and once the report is developed provide it to the courts quarterly.	SFY 2017 Evidence=report	TBD ⁷	TBD	TBD
Out-of-Home Safety Plan discussion will be a standing agenda item for the Community Improvement Council (CIC)	CIC Agenda Agenda =Evidence	NA	NA	<i>Completed and ongoing</i>

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

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

OBJECTIVE 2.1

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

Intervention/Strategy 2.1.1

Continue full statewide implementation of the Nevada Safety Model. The Nevada Safety Model is known as Safety Intervention Permanency System (SIPS) by CCDFS; the Safety Assessment Family Evaluation (SAFE) by the DCFS Rural Region and Safety Assessment Family Evaluation (SAFE) or (SAFE/FC) by WCHSA.

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

⁷ TBD -To be determined

OBJECTIVE 2.2

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

Intervention/Strategy 2.2.1

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

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

OBJECTIVE 2.3

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

Intervention/Strategy 2.3.1

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

*Intervention/strategy rationale: Evidence has been published identifying the link between quality caseworker visits with children and positive outcomes for children and families engaged in child welfare systems. Nevada has improved on caseworker visits but needs to continue this focus over the course of the 2015-2019 CFSP.

MEASURES OF PROGRESS PROJECTION TIME TABLE

Table 2.3

Measures for Goal 2: Children will be Safe in their own homes

Measure/Benchmarks	Benchmark Timetable	Data Baseline	Projected Goal FY 16/17	Goal FY 18/19
Reduce the Recurrence of Maltreatment Source: NV Data Profile	9.5 National Performance <i>(Reduction is positive)</i>	FY 12-13 9.4	9.5 or less MET FY 15-16 8.5% Most recent data	9.5 or less
Develop a report that measures the number of children served age five and under by DR.	Develop Report during FFY 2017 Evidence=Report	NA	NA	NA
The annual number/percentage of children served statewide by DR age five and under.	[Data not yet available]	[Data not yet available]	[Data not yet available]	[Data not yet available]
Increase the timeliness of Investigations for in home cases. Source: Case Record Reviews	90%	80%	85%	90%
Increase the frequency and quality of caseworker visits with children living in their own homes. Source: Case Record Reviews	90%	50%	80% Met CY 2017 85.71%	70%
Develop a statewide report that provides the number of children being served with in-home services by jurisdiction.	Develop Report during SFY 2017 Evidence=report	NA	Develop Report SFY 2017 On-going IT WR	TBD
The number/percentage of children being served with in-home services statewide and by jurisdiction		TBD	TBD	TBD

Develop a UNITY Report for the courts that track the number of children on in-home non-judicial safety plans and once developed provide to the courts quarterly.	Develop Report during SFY 2017 Evidence=Report	TBD ⁸	Develop Report SFY 2017 On-going IT WR	TBD
Out-of- Home Safety Plan discussion will be a standing agenda item for the Community Improvement Council (CIC)	CIC Agenda = Evidence	NA	NA	Completed-ongoing

CHILD and FAMILY WELL-BEING

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

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

OBJECTIVE 3.1

Ensure educational needs of children and youth are met.

Intervention/Strategy 3.1.1

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

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

OBJECTIVE 3.2

Ensure youth who exit care are prepared for adult living.

Intervention/Strategy 3.2.1

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

***NOTE:** The federal grant for the National Resource Center for Youth Development (NRCYD) ended on September 30, 2014. The Child Welfare Capacity Building Center for States is now responsible for TA. Nevada has recently been working with the Capacity Building Center for States; however, this was not targeted for TA as a result of the Capacity Building Center for States Assessment conducted in April 2016 and approved by the Children's Bureau in June 2016.*

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

OBJECTIVE 3.3

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

Intervention/Strategy 3.3.1

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

**Intervention/strategy rationale*

⁸ TBD-To be determined

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

MEASURES OF PROGRESS PROJECTION TIME TABLE

Table 2.4

Measures for Goal 3: Children and Youth will have improved Well-Being

Data Measures/Benchmarks	Benchmark Timetable	Data Baseline	Project Goal FY 16/17	Goal FY 18/19
Increase efforts to assess children’s educational needs initially and ongoing. Source: Case Record Reviews	90%	76%	78%	Set in SFY 2017 and reported in 2018/19 APSR
Redesign the UNITY educational windows.	Convene a workgroup during FFY 2017 Evidence= established workgroup	TBD	TBD On-	TBD
Courts: Increase the proportion of ASFA hearings during which the child’s education is addressed. (Source: Court hearing observation TA from NRCLJI)	<i>DELETED⁹</i>	<i>DELETED</i>	<i>DELETED</i>	<i>DELETED</i>
Educational Collaborative: Reduce the barriers for school enrollment when foster youth have to change from school of origin.	Joint letter between school district and child welfare for information sharing during FFY 2015-2016 evidence =letter	NA	NA	<i>Completed</i> FFY 2015-2016 evidence =letter
Develop a UNITY Report that will measure youth in foster care who graduate from high school or receive a GED	Develop Report during SFY 2017 Evidence=report	TBD	TBD <i>In IT Development</i>	TBD
Develop a UNITY Report that will measure educational moves of children in foster care.	Develop Report during SFY 2017 Evidence=report	TBD	TBD <i>In IT Development</i>	TBD
Decrease the educational moves of children/youth in foster care.	[Data not yet available]	[Data not yet available]	[Data not yet available]	Set in SFY 2018APSR
The percentage/number of youth within 90 days of turning 18 who have Transition Plans.	Report modification required SFY 2017	Data not yet available]	Data not yet available]	Set in SFY 2018 APSR
Develop a UNITY Report to measure if children/ youth receive timely EPSTD screenings. (30 days of entry into foster care)	Develop Report during SFY 2017 Evidence=report	TBD	TBD <i>In IT Development</i>	TBD
Increase the percentage of children who receive a comprehensive EPSDT assessment within 30 days of entry into foster care.	[Data not yet available]	[Data not yet available]	[Data not yet available]	TBD
Develop a UNITY Report to measure if children and youth in out-of-home care receive on-going annual medical exams.	Develop Report during SFY 2017 Evidence=report	[Data not yet available]	[Data not yet available]	TBD

⁹ Court hearing observations have been discontinued due to lack of funding and this measure has been deleted.

Increase the number/percentage of children and youth who have been in out-of-home care for 30 days or more that receive annual medical exams during a calendar year.	[Data not yet available]	[Data not yet available]	[Data not yet available]	TBD
Develop a UNITY Report to measure if children/youth in foster care are receiving on-going annual dental exams.	Develop Report during SFY 2017	[Data not yet available]	[Data not yet available]	TBD
Increase the percentage of children/youth that are in out-of-home care who receive annual dental exams during a calendar year.	[Data not yet available]	[Data not yet available]	[Data not yet available]	TBD
Increase the global frequency percentage of caseworker visits with children in out-of-home (UNITY report CFS7D7) <ul style="list-style-type: none"> Federal target is 95% by FY 2015 	95%	93.62% (FY 2015)	95% Met FY 2016 Not Met FY 2017	95%
Increase efforts to assess the needs and services of children, parents and foster parents. Source: Case Record Reviews	90%	50%	52% Not Met CY 2017 40%	55%
Increase the engagement in case planning for the child if age appropriate, and the parents. Source: Case Record Reviews	90%	42%	44% Met CY 2017 at 47%	50%
Increase the frequency and quality of contacts with parents. Source: Case Record Reviews	90%	44%	46% Not met CY 2017 at 42%	50%
Reduce the barriers for school enrollment when foster youth have to change from school of origin	Joint letter between school district and child welfare for information sharing during FFY 2015-2016 Evidence =letter	NA	NA	Completed

CONTINUOUS QUALITY IMPROVEMENT

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

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

OBJECTIVE 4.1

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

OBJECTIVE 4.2

Increase the statewide capacity of a dedicated case reviewer pool.

OBJECTIVE 4.3

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

Intervention/strategy 4.1.1-4.3.1

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

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

OBJECTIVE 4.4

Develop and expand the Court Centralized Case Index (CCI)

Intervention/strategy 4.4.1

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

*Intervention/strategy rationale

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

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MEASURES OF PROGRESS PROJECTION TIME TABLE

Table 2.5

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

Measure/Benchmarks	Benchmark Timetable	Data Baseline	Project Goal FY 16/17	Goal FY 18/19
Monitor/Review and Revise work plans in SQIC that reference the gap analysis in the overall five functional components of CQI.	In FFY 2017 Evidence= revised gap analysis TA Provided by Capacity Building Center for States	NA	Delete TA Capacity Center for States discontinued	
Number of dedicated Case Reviewer Staff	In FFY 2015 Evidence – list of dedicated Reviewers	Current List =38 (16 are from CCDFS)	6/2016 46 have CF SR Training Certificates 6/2017 82 have CF SR Certificates	Goal -50-60 Goal exceeded in 2017 Complete
Re-design the Case Review Process	In FFY 2017 Evidence=written revised process	NA	Completed for CF SR 2018	Completed for CF SR 2018
Develop a statewide CQI policy	In FFY 2017 Evidence=written policy	NA	Complete in SFY2018-2019	TBD
Develop/Correct/Increase the number of UNITY performance reports	Review Reports in FFY 2017 Evidence=report index updated with date of development/corrected reports	NA	On-going IT Request FFY 2017-2018	NA
Courts: Prototype developed and approved for production.	CIP Select Committee approval of prototype.	NA	NA	COMPLETE: CIP approved prototype July 18, 2014
Courts: Adjust reporting framework	Selection of a preferred framework that will provide user friendly reports.	NA	NA	COMPLETE: Framework Selected in SFY 2015
Courts: Implement ongoing feed from UNITY/COURT	Data flows into CCI without error. To be completed in SFY 2017	NA	Data from pilot court flows into CCI waiting UNITY COMPLETE April 2018 UNITY flows into CCI pilot server COMPLETE April 2017	COMPLETE April 2017 and 2018
Courts: Develop additional reports and data sources	All necessary reports developed and approved by judiciary.	NA	To be completed in SFY 2018/19	Server Code to generate reporting dimensions

Courts: Expand to other judicial districts	Judicial Districts who wish to participate are included.	NA	10 th JD is Rural Pilot	
Courts: Provide training on how to use the dashboards.	Judiciary trained.	NA	Complete	Complete

PERMANENCY

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

The rationale for Nevada choosing this goal was due to Nevada’s inability to meet the national performance for reunification of children in less than 12 months based on an entry cohort, and on ensuring placement stability in the previous Permanency Composite Measures. The most recent data reflects that Nevada has met the new national performance as reflected by the following table from the CF SR Round 3 Data Profile provided to Nevada on 10/16/2017. However, placement stability continues to be an *area needing improvement* in Table 2.6. The number of moves has been increasing in relationship to the number of days children are in care.

Table 2.6 CF SR Round 3 Statewide Data Indicators provided by ACF on 10/16/2017

Federal Performance (Permanency)	National Standard	Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
					Lower CI	RSP	Upper CI
Permanency in 12 months for children entering foster care	42.1%	AFCARS 14A & 14B	↑	47.0%	44.3%	46.1%	47.9%
Permanency in 12 months for children in care 12-24 months	45.9%	AFCARS 16A & 16B	↑	53.2%	47.1%	49.6%	52.2%
Permanency in 12 months for children in care 24 months or more	31.8%	AFCARS 16A & 16B	↑	48.8%	35.8%	37.9%	40.1%
Placement Stability	4.44 moves ¹⁰	AFCARS 16A & 16B	↓	7.00	7.37	7.65	7.94

Green Shading = State’s performance (using RSP interval) is statistically better than National Performance;
 Grey Shading= State’s performance (using RSP interval) is statistically no different than national performance;
 Red Shading = State’s performance (using RSP interval) is statistically worse than national performance.

OBJECTIVE 5.1

Decrease the placement setting disruptions of children in foster care.

OBJECTIVE 5.2

Decrease re-entry to foster care.

OBJECTIVE 5.3

Increase Permanency in 12 months for children entering foster care.

Intervention/Strategy 5.1.1-5.3.1 Continue to explore opportunities to redesign the Advanced Foster Care system in Nevada, through implementation of evidence-based or promising practices in the foster care agencies and enhancing and/or changing the payment structure.

¹⁰ Moves per 1,000 Days

*Intervention/strategy rationale: In each child welfare agency, the current Advanced Foster Care pilot has shown success in ensuring that children are receiving appropriate services, have increased placement stability, and are moving to permanency. Expanding the foster care pilot will allow this program to reach more children with behavioral and emotional challenges that make it difficult to find traditional family foster homes that can meet their needs. Key components of the pilot include implementation of evidence-based or science-based practices, increased oversight by the child welfare agency, and evaluation components. Funding for this program was approved during the 2015 legislative session and the child welfare agencies are all in the process of expanding the pilot to full implementation.

OBJECTIVE 5.4 (COURTS)

Decrease median days to termination of parental rights and adoption.

Intervention/Strategy 5.4.1 Continue the Community Improvement Council process of courts identifying barriers and implementing solutions to decreasing median days to termination of parental rights and adoption. CICs will develop plans and processes to share information and work together. District Attorneys will continue to assist the Deputy Attorney General with case processing, if needed. Information will flow through the CICs.

*Intervention/strategy rationale

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

OBJECTIVE 5.5 (COURTS)

Achieve timely permanency for children in the child welfare system.

Intervention/Strategy 5.5.1

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

*Intervention strategy rationale

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

MEASURES OF PROGRESS PROJECTION TIME TABLE

Table 2.7

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

Measure/Benchmark	Benchmark Timetable	Data Baseline	Projected Goal FY 16/17	Goal FY18/19
Increase placement stability of children in foster care. (Source: ACF NV Data Profile)	4.44 moves	6.57	4.44 Not Met FY 16B/17A At 6.43	4.44
Reduce the re-entry of children into foster care. Source: (ACF NV Data Profile)	8.4% <i>(Reduction is positive)</i>	7.4%	Met 6.9% FY 14B/15A (most recent date)	TBD
Increase the permanency of children within 12 months of removal. (Source: ACF NV Data Profile)	42.1%	42.5%	MET NP 14B/15A 45.7% (most recent data)	TBD
Ensure the most appropriate selection of permanency goals for children and youth in foster care. (Source: case reviews)	90%	45% (2016)	50% Met CY 2017 at 50%	60%
Courts: Decrease the median days to termination of parental rights by 5% (Source: UNITY Report)	Decrease the median days to TPR by 5% by FFY 2018	625 median days	Met-610 median days in CY 2016 and 600 days in CY 2017	Goal = 594

Feedback Loops:

Feedback Loops permit an ongoing, bi-directional information exchange across all levels of the agency, which in turn facilitates the change process. Nevada's 2015-2019 CFSP was developed with input and recommendations provided by key statewide stakeholder groups during regularly scheduled meetings. Concerns and input from these on-going discussions were integrated into the goals, objectives, and annual updates to the CFSP. The goals and objectives of the 2015-2019 CFSP have not changed as those goals have remained the same. Many of the measurable goals require data reporting for monitoring purposes and to this date continue as goals and objectives of the current CFSP.

To engage in productive feedback loops the DCFS shares data with agency staff, consumers and external stakeholders. The Division of Child and Family Services shares data with consumers and external stakeholders during the regular course of meetings, and data is posted on the DCFS website. This sharing of data with consumers and stakeholders has created much dialogue about improvements. Additionally, The DCFS continues to consult with partners; tribes; the legal and judicial community; and other stakeholders concerning progress around the goals, objectives and interventions of the 2015-2019 CFSP. These feedback loops are accomplished through a variety of means and venues i.e. through utilization of workgroups, focus groups, meetings, public presentations and surveys. Survey results are noted here in the APSR throughout various systemic items related to the CFSP and CFSR.

Also, existing internal groups statewide discuss the on-going monitoring and progress of the CFSP goals. These groups meet on various dates and throughout the state at various locations. Some group meetings are conducted via conference calling for statewide participation. Additionally, external stakeholders provide information about program functioning, policy and practice, protocol development, share resources and information that are used in program development and planning. Recently, focus groups were conducted with a variety of external stakeholders to gather input and information as part of the 2018 Statewide Assessment.

Feedback from consultation and collaboration include stakeholders from the community as well as other agencies at every level of the child welfare service delivery continuum, ranging from planning for allocation of funding to case level decision making to changes in policy, practice and reporting requirements. This collaboration, consultation and feedback with other agencies and entities expands partnerships and the sharing of available resources. It also allows for the provision of constructive feedback to the agency about programs, policies, procedures and practice that may be incorporated into the State Plan. DCFS representation includes, but is not limited to, educational/research institutions and agencies related to drug and alcohol, health, mental health, education, domestic violence, and juvenile courts, representing various counties. Statewide consultation and coordination with stakeholders in implementing the provisions of the CFSP include (but are not limited to) the following committees, organizations or entities.

Decision Making Group (DMG)-The DMG is comprised of the DCFS Administrator, DCFS Deputy Administrator and the County Child Welfare Agency Directors. The DMG is a collaboration in which all Child Welfare Agencies meet to consult and collaborate around statewide child welfare issues. Issues related to the CFSP/CFSR and APSR discussed during the monthly/bi-monthly meeting.

Assistant Directors Meeting (ADM)-The ADM is comprised of the Child Welfare Assistant Directors and the DCFS Deputy Director. This collaborative meets and consults on statewide child welfare issues relating to policy and practice. Additionally, issues related to the CFSR/CFSR and APSR are discussed during the monthly meetings.

Statewide Quality Improvement Committee (SQIC)- This committee meets monthly to discuss all things related to the CFSR, CFSP, APSR, NCANDS, AFCARS, and NYTD. Membership includes County/State and CIP representation.

Collaboration with the Court Improvement Program-

The 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.

Nevada Continuous Quality Improvement Reviews (Foster Parent, Child, Providers and Parent Consultation)

Annually, Nevada conducts statewide case reviews that mirror the Child and Family Services Reviews and as part of these reviews Foster Parents, Children, Providers and Parents are interviewed and consulted with about individual cases. An array of questions for feedback are asked to provide an opportunity for these stakeholders relative to the functioning of the child welfare system and contribute information relative to the goals and objectives of the CFSP. Focus groups were recently conducted in October 2017 with biological parents and they were consulted on a variety of questions relative to service array, case planning and needs related to the child welfare system.

Nevada Partnership for Training (NPT) - The Nevada Partnership for Training (NPT), a bi-university partnership, in collaboration with DCFS-FPO, the Rural Region, Clark County, Washoe County, University of Nevada, Las Vegas (UNLV) and the University of Nevada, Reno (UNR), collaboratively work together to improve the child welfare training delivery system. The meeting occurs bi-weekly and the Training Manager is also the CFPSR/CFPSR Coordinator so there is regular discussion on all matters related to the CFPSR/CFPSR and CFSP.

Children's Justice Act Indian Child Welfare Committee- (CJA ICW)-The State of Nevada has 27 tribal entities that include federally recognized tribes, bands and colonies.

Youth – Consultation and Collaboration with youth and adult leaders occurs through 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). Additionally, the ILPS facilitates a monthly I.L call with Statewide I.L Providers across the State. Discussions related to the CFPSR/CFSP and APSR are shared with stakeholders.

Quality Parenting Initiative (QPI) Engagement of Foster Care Providers-This collaborative holds monthly meetings in each local jurisdiction and includes foster parents from each area.

Child Fatality- The Child Death Review (CDR) process consists of the Executive Committee to Review the Death of Children whose members represent administrators of the child welfare agencies, and agencies responsible for vital statistics, public health, mental health and public safety and local child death review multidisciplinary teams. This statewide committee consult and collaborate on public education and prevention of child fatalities.

Nevada Coalition to Prevent the Commercial Sexual Exploitation of Children (CSEC) – This collaborative has many internal/external stakeholders meeting monthly/quarterly that includes consumers, service providers, foster care providers, juvenile judges and other public and private child and family serving agencies mobilize around issues related to (CSEC).

Legislative Committee on Child Welfare and Juvenile Justice Task Force to study Juvenile Justice issues - 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.

Nevada Interagency Council on Homelessness – This Collaborative has many internal/external stakeholders that focus on Homelessness.

Nevada System of Care Provider Meetings- The Nevada system of Care consist of a broad array of both behavioral health and support services. These services include both home and community-based treatment, as well as out of home treatment services that are provided when necessary. Meetings are held monthly to consult and collaborate with providers to ensure providers are supported.

Implementation Supports:

Implementation supports have not changed since the last report in the SFY 2018 APSR. During future TA provided by the Capacity Building Center for States it is anticipated that specific implementation supports will continue to be identified. Currently, there continues to be a need for additional supports needed to carry out the plan to promote successful implementation of all the goals and objectives. For all goals and objectives staff support is needed to redesign UNITY windows and to develop/correct reporting mechanisms over the next two years of the 2015-2019 CFSP. There continues to be a need for staff that have the skills and abilities to analyze data.

The State does not have a data warehouse; however, CCDFS does have a data warehouse (COGNOS) available to them for management reporting. The State continues to use Chapin Hall and UNITY for permanency related reports, so there is some reporting capability. However, the need for a state data warehouse that can be the main source of information for report generation, analysis, presentation through management reports, and dashboards would benefit the state. The state has currently purchased COGNOS for reporting. There continues to be discussions around the new federal regulations related to the Comprehensive Child Welfare Information System (CCWIS) requirements.

Program Support:

Training and Technical Assistance

Technical Assistance as it relates to the CFSP goals of Safety have been provided by the contractor Action for Child Protection (ACTION) for several years. Additionally, ACTION is currently under contract for planned TA for the upcoming SFY 2019 with CCDFS and the DCFS Rural Region to continue those services as it relates to implementation of the Nevada Safety Model known as Safety Intervention Permanency System (SIPS) in Clark County and the Safety Assessment Family Evaluation (SAFE) in the DCFS Rural Region. Nevada's Safety Model requires TA around motivational Interview Training.

State child welfare training through the University of Nevada, Reno and Las Vegas, is provided as Pre-Service and On-going training to all counties and this training supports the goals of the CFSP. The DCFS Family Programs Office (FPO) staff provide technical assistance on all program related matters as it relates to CPS, Foster Care, Independent Living, Adoptions and Licensing. Additionally, as it relates to the Interstate Compact on the Placement of Children (ICPC) matters, the Deputy Compact Administrator provides training to the counties on an as needed basis. The ICWA Specialist conducts consultation with the tribes and provides statewide technical assistance on all matter related to ICWA. All TA provided is relative to operation of state programs and has impact on the achievement of the CFSP goals and objectives.

Specifically, the CPS Specialist has provided TA statewide as it relates to the Differential Response Program as a result of consultation with the Capacity Building Center for States. The Differential Response program was historically operated by various statewide Family Resource Centers under the supervision of the Nevada Department of Health and Human Services/ Grants Management Unit until 2016. In 2016 the Differential Response Program was transferred to DCFS for program management and oversight. Technical Assistance was requested from the Capacity Building Center for States to assist in the identification of gaps in data, policies, procedures, and assessment tools. With consultation from the Capacity Building Center for States, Nevada evaluated its Differential Response program. The following documents were produced as a result: *2016 Interviews with Program Staff: Nevada Differential Response Program*; *Differential Response Difficulty in Nevada: A Root Cause Analysis*; and *Key Dimensions of Organizational Capacity*. These results were provided through various venues to include: DR providers, child welfare staff and the child welfare administrators of both county agencies and DCFS. The DCFS CPS Specialist met and provided information and technical assistance multiple times with child welfare administrators to discuss DR programming and the future of DR programming in Nevada.

The Independent Living Program Specialist (ILPS) provides TA to the counties through regular e-mail and phone contact on matters relative to Independent Living policy and practice issues. Additionally, The ILPS conducts monthly TA calls with the DCFS Rural Region Independent Living Providers and conducts a statewide monthly call with the counties and Statewide I.L Providers including the ETV Provider. TA is closely aligned with the CFSP goal of ensuring youth transition to adulthood successfully. Plans for TA related to the Families First Prevention Services Act (FFPSA) is planned around changes related to the Independent Living Program and ETV. Additionally, TA is planned over the SFY 2019 for improvement of performance related to youth's successful transition from foster care.

The DCFS FPO continues to provide training and technical assistance as it relates to the 2018 Nevada CFSR Reviews. CFSR training has been provided by the Social Services Chief to over 50 State/County Staff this reporting period and TA is planned to continue with the counties over the next SFY 2019 as it relates to Nevada's Performance Improvement Plan (PIP). Quality Assurance Specialist have provided and continue to provide TA related to UNITY reports and monitoring of programs. Specifically, the UNITY Report related to caseworker visits with children is monitored and TA is provided statewide to improve performance in this area. This TA is closely aligned with CFSP measures.

All Program Office Specialist are involved in providing TA on issues related to permanency through the Permanency Round Tables (PRTs). This TA is closely aligned with CFSP measures related to permanency and will continue into SFY 2019. The Adoption Specialist provides TA related to Adoptions through ongoing consultations and annual reviews which will continue into SFY 2019.

Lastly, the ICWA Specialist has provided TA by collaboratively consulting with in-state federally recognized tribes on ICWA, creating MOUs between DCFS and tribal entities and hosting Indian Child Welfare meetings discussing matters relative to safety, permanency and well-being of Native American youth. This TA is aligned with CFSP measures and will continue into SFY 2019.

Technical Assistance and Capacity Building Needs

The Capacity Building Center for States completed Nevada's State Assessment for Technical Assistance (TA) in the spring of 2016. The following needs were identified at that time for TA implementation on July 1, 2016. Additionally, the activities were approved by the Children's Bureau.

1. Support for the Implementation of Continuous Quality Improvement System.
 - (a) Identify the best practices in a comprehensive CQI system.
 - (b) Form teams to guide the change process, facilitate communication, and perform tasks.

2. Support Expansion of Differential Response.
 - (a) Clarify needs, problems, and/or outcomes that need to be addressed.
3. Support the Development and Implementation of a Comprehensive Training, Coaching, Mentoring System.
 - (a) Identify, research, and select from possible solutions.

Two of the projects stalled due to commitments around the 2017 Legislative session and buy in from the jurisdictions. The State along with the State/Agency Executive Management and representatives from the Capacity Center for States met to review the status of the TA in May of 2017. A decision was made to discontinue #1. "Support for the Implementation of Continuous Quality Improvement" due to lack of resources including IT resources to conduct a comprehensive assessment.

There was Executive Management agreement for the continued support for #2 "Support Expansion of Differential Response" and #3 "Support the Development and Implementation of a Comprehensive Training, Coaching, Mentoring System. Currently, the amended Capacity Center for States Work Plan is under review for approval with a new projected implementation date of July 1, 2018.

Evaluation

Nevada is not currently involved as a state in any national evaluation or research activities. Nevada continues the Advanced Foster Care program that is being evaluated by DCFS. The program is based on the evidence-based foster parent training program, 'Together Facing the Challenge', along with training in other best practices such as trauma informed care and medication management.

Additionally, CCDFS continues with a Title IV-E waiver demonstration project. The Title IV-E waiver is providing CCDFS an opportunity to use federal funds more flexibly to test innovative approaches to child welfare service delivery and financing and includes a rigorous evaluation process.

Child Welfare Waiver Demonstration Activities

CFSP Goal 2: Children will be safe in their own homes; Objective 2.1

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

Intervention strategy 2.1.1 *Continue full statewide implementation of the Nevada Safety Model. The Nevada Safety Model is known and Safety Intervention Permanency System (SIPS) by Clark County Department of Family Services (CCDFS)*

In July of 2015, Clark County Nevada implemented the Title IV-E waiver demonstration project, to reduce the historical model of out of home stays for children with the provision of safety intervention services to manage identified safety threats and keep children safe at home. Using the Safety Intervention and Permanency System's (SIPS) six family assessments, child welfare workers identify safety threats and determine when it is safe to implement an in-home safety plan. The waiver demonstration project allows Clark County to use flexible IV-E dollars to purchase in-home safety services from contracted community providers. As a systematic intervention, the practice model is connected by six assessments which result in decisions that move families through the intervention process: 1) Intake Assessment (IA) is the decision making method concerned with screening reports of threats to child safety and identifying agency response time; 2) The Nevada Initial Assessment (NIA) identifies unsafe children and determines if families are in need of continuing services; the NIA includes 3) the Safety Assessment (SA) and 4) the Safety Plan Determination (SPD) which assess how to achieve the least intrusive and most effective means for protecting children by "ruling in" or "ruling out" in-home safety management; 5) the Protective Capacity Family Assessment (PCFA) occurs after a family is transferred to ongoing services and is a structured interactive assessment process that builds partnerships with caregivers in order to identify and seek agreement regarding what needs to change to protect and meet their children's needs; and, 6) the Protective Capacity Progress Assessment (PCPA) is the final assessment and is documented every 90 days following implementation of the case plan to measure progress related to what must change as identified in the case plan and evaluates the continuing approach to safety management.

The focus for the waiver is families where *Impending Danger* is identified which can be immediately ameliorated through a *Systematic Safety Intervention Process* via the use of in-home safety services. There are two specific target populations that are receiving safety management services. The first are families and children where impending danger is identified via the Nevada Initial Assessment (NIA) and where the Safety Plan Determination (SPD) justifies the use of an in-home safety

plan. The second are children who are currently in out-of-home care, however, following reassessment of safety, the child(ren)'s family meet the Conditions for Return (CFR) and the Safety Plan Determination justifies the use of an in-home safety plan. The goal of the IV-E waiver demonstration is to decrease the number of children in foster care, increase the number of children served in home with intact families and decrease the length of stay, in out-of-home care.

Title IV-E Wavier Update for SFY 2018:

- To date the program has served 568 families and 1,594 children.
- Out of 1,594 children served, 1,415 remain successfully reunified in-home with their caregivers.
- Out of 568 families served 385 have closed their cases with CCDFS.

PROGRAM AREAS

Section III. SAFETY

Trends in Child Safety

Referrals

Referrals are all intake calls received across the state to each child welfare agency concerning potential abuse or neglect of a child. These include referrals that are screened in and those that are screened out. Screened out referrals are defined as follows: information only (IO), where the referral does not meet the criteria for child abuse and/or neglect, and where the reported information does not indicate that a child is unsafe or has been or is being abused; and/or, information and referral (IR), where the reported information indicates that there is no child abuse or neglect occurring but that there is a request or need for services. Statewide from SFY 2015 to SFY 2017 there has been a 26% increase in IO Referrals. Information for SFY 2018 is through April 30, 2018 but is trending towards no significant change over SFY 2017.

Screened-in referrals are those that indicate that there is an immediate or impending safety threat or issue involving child abuse or neglect. This referral is coded as a report and is sent to a supervisor for assessment and assignment for Investigation or Differential Response (DR). Statewide from SFY 2015 to SFY 2017 there has been a 4.4% increase in Investigations while dispositions have decreased 25.4% for the same time for DR referrals.

Statewide CPS Referrals Received by Disposition

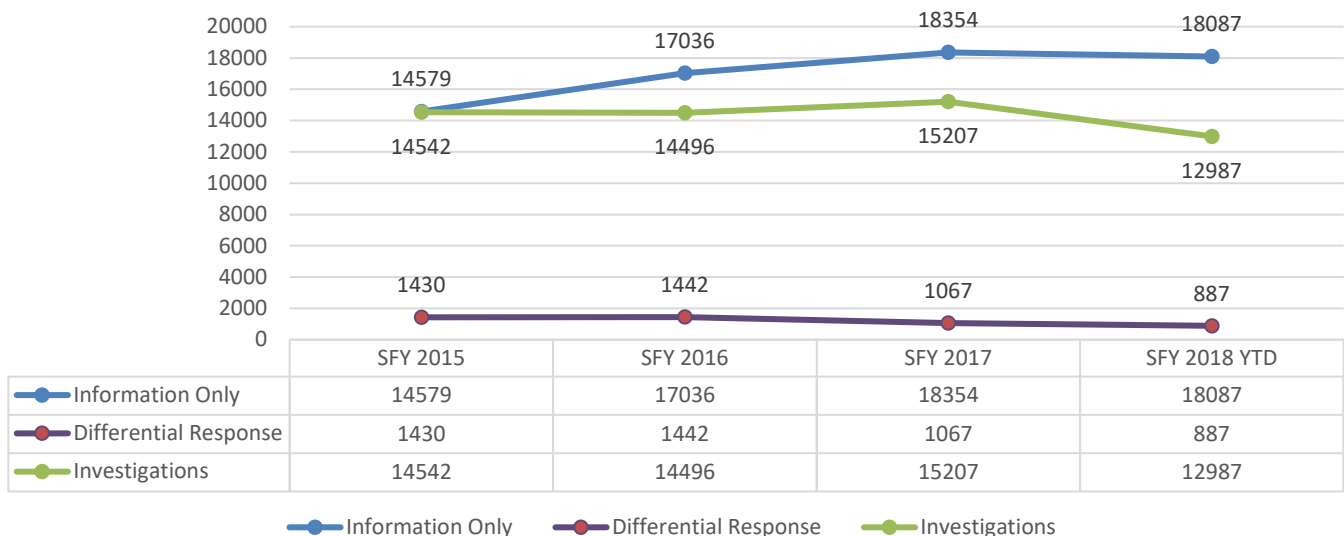


Figure 3.1 Processing of new referrals received for the period of SFY 2015 through April 30, 2018.

Differential Response

The Differential Response (DR) program is part of Nevada's CPS system, and, during SFY 2017, nine Family Resource Centers (FRCs) were funded to hire staff to be first responders to CPS screened-in reports of child neglect. The DR program is a public-private partnership involving state and county child welfare agencies and the community-based Family Resource Centers.

Reports screened in for a DR assessment are assigned to the local FRCs where the DR staff are responsible for initiating contact with the families, conducting family assessments, providing ongoing services as needed, and determining when the case should be closed. If an FRC receives a referral it considers inappropriate for a DR assessment, it returns the case to the county/state child welfare agency for a traditional investigation. In SFY 2016-17 the administration of the DR Program moved from the DHHS Director's office to the DCFS Family Programs Office (FPO). The DCFS is in the process of modifying the Statewide Differential Response Program. **(Please see APPENDIX B for further details).**

Nevada Differential Response (DR) Program Report through 3/31/18

Table 3.1 Statewide Differential Response (DR) Program Total Number of Families Served	<u>Years 2/28/2007-3/31/2018</u>
Number of Families Referred to DR by CPS	12,211
Number of Cases returned to CPS	613
Number of cases closed	11,332

Report through 3/31/2018

Current Status by Program – SFY18 thru Q3: July 1, 2017 – March 31, 2018

Program	DR Case Managers FTE Positions	Number of cases carried forward from FY17 to FY18	Number of cases referred to DR from CPS	Number of cases returned to CPS	Number of cases closed	Number of open DR cases as of 02/28/18
Las Vegas – South Hope Link FRC	2	9	56	21	23	22
Las Vegas – East East Valley Family Services FRC	2	7	23	2	26	2
Las Vegas – Central East Valley Family Services FRC	2	4	39	10	29	7
Las Vegas – North Olive Crest FRC	2	19	85	4	63	38
Las Vegas – West Boys & Girls Club of So. NV FRC	2	0	79	0	33	30
Total Clark	10	39	282	37	174	99

Washoe FRC	2	23	73	7	64	24
Washoe Children's Cabinet*	3	19	103	1	91	28
Total Washoe	5	42	176	8	155	52
Lyon, Pershing, Mineral, Churchill Lyon Co. Human Services FRC	4	44	168	12	154	41
Carson City/ Douglas/ Elko - Ron Wood FRC***	4	11	155	11	127	29
Pahrump/S. Nye East Valley Family Services FRC	1	0	22	0	3	14
Total Rural	9	55	345	23	284	84
Total State	24	136	803	68	613	235

*Children's Cabinet is funded by WCHSA to provide DR services. While they are not being funded by FRC state funding, they are participating in the training and other DR activities and their data is incorporated into the evaluation information. **DR Program under FRIENDS FRC in Churchill County closed September 2015. Lyon County assumed responsibility for Churchill County DR services Jan. 2016. ***Elko FRC combined with Ron Wood FCR, effective 7/1/2017.

Note: SFY 2018 started on July 1, 2017, and SFY 2018 Quarter 3 ended on March 31, 2018

When a report is screened in, it is either assigned for Investigation or Differential Response (DR) by a child welfare agency per policy 0506 Intake and Priority Response. The investigation process is outlined in the 0508 and 0509 Nevada Initial Assessment (NIA) policies. The NIA policy includes the process for interaction with a family for assessing factors or conditions that are known to contribute to the likelihood of child abuse or neglect. The following are the number of statewide investigations.

Investigations

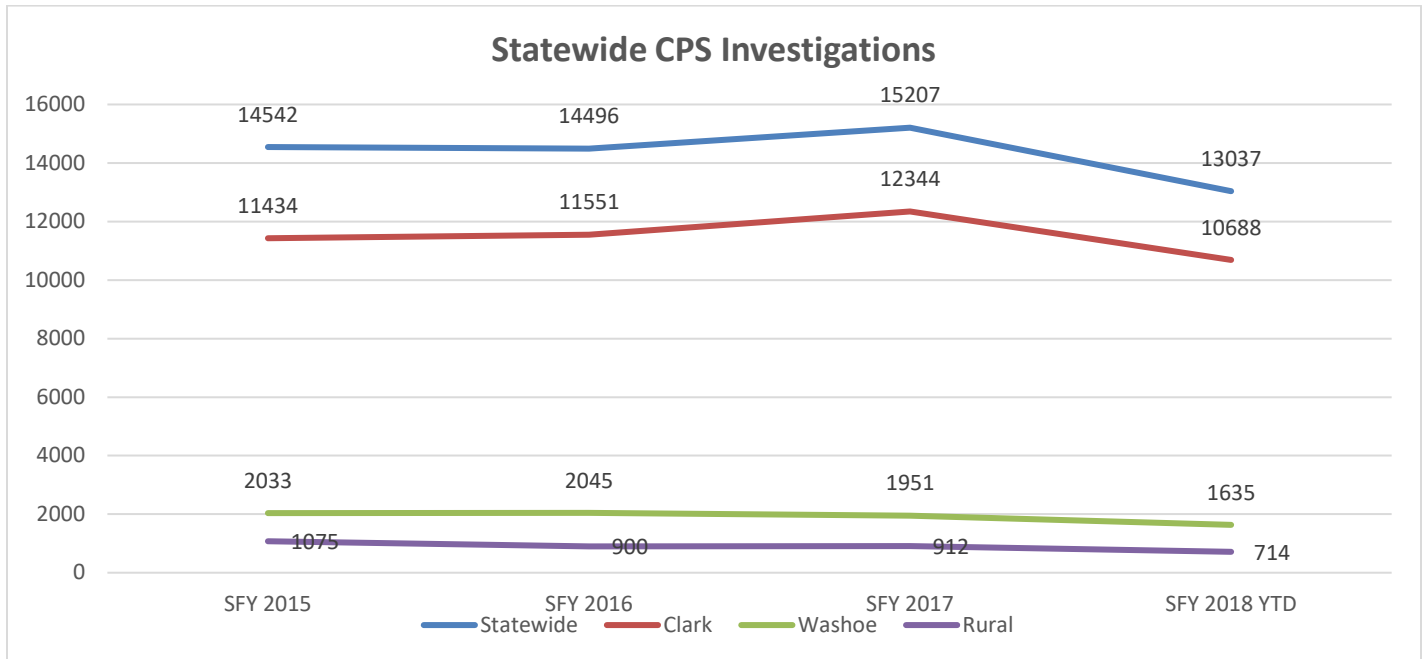


Figure 3.2 Number of investigations SFY 2015 through April 30, 2018 YTD for all three Child Welfare Agencies and Statewide.

Figure 3.2 illustrates the number of investigations Statewide and for each Child Welfare Agency. From SFY 2015 to SFY 2017 Investigations increased by 5%. Statewide SFY 2018 YTD is indicating no significant change through April 30, 2018.

Child Fatality

Nevada makes every effort to reduce the number of preventable child fatalities and near fatalities through prevention messaging, training and other initiatives. 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 Team to Review the Death of Children.

The Executive Committee is comprised of members from each Regional Multidisciplinary Child Death Review Teams as well as other stakeholders from vital statistics, public health, mental health and public safety. The Executive Committee meets quarterly, and reviews reports and recommendations from local multidisciplinary teams and determines the action to be taken or if a prevention initiative is already in place. The Executive Committee makes the funding decisions about the recommended actions for prevention and awareness initiatives, oversees training initiatives, oversees training and development of the MDT's, compiles and distributes a statewide annual child death report, and adopts statewide protocol. Initiatives have included:

- Crisis Call Center-Text4Life
- Nevada Coalition for Suicide Prevention-Reducing Access to Lethal Means
- Upstream Strategies for Injury Prevention
- Social Emotional Learning in Nye County Schools for Upstream Suicide Prevention

- Safe Sleep

Public disclosures concerning a fatality or near fatality of a child who is the subject of a report of abuse or neglect are posted on Nevada's Health and Human Services – DCFS website at the initial 48-hour notice and after appropriate updates in compliance with CAPTA and NRS 432B.175. The public disclosures are submitted from the child welfare agencies and include the following information:

- The cause and circumstance regarding the child fatality or near fatality
- The age and gender of the child
- Previous reports of child abuse or neglect that are pertinent to the abuse or neglect that led to the child fatality or near fatality
- Previous investigations pertinent to the abuse or neglect that led to the child fatality or near fatality and results of investigations
- The services and actions provided by the child welfare agency on behalf of the child that are pertinent to the abuse or neglect that led to the child fatality or near fatality.

Any instance of a child suffering from a fatality or near-fatality, where an investigation is conducted, and there had been prior contact with household members, or the child was in the custody of a child welfare agency, is subjected to an internal case review by the child welfare agency and DCFS. In incidences where a child welfare agency had prior contact with the household members or the child was in the custody of a child welfare agency a review is also completed by the State of Nevada Legislative Council Bureau. Trends regarding practice methods, policies and systemic issues are tracked by DCFS.

Data Collection

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. The Committee had used data from the Nevada State Vital Statistics for the annual report; however, due to delays in obtaining this data and given that data received from the National Center for the Review and Prevention of Child's Death was accurate when compared to Vital Statistics' data, the decision was made to rely solely on the National Center for the Review and Prevention of Child's Death data for purposes of annual reporting. 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 SAWCIS system, UNITY. 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. The number of NCANDS reported fatalities remained the same since the last reporting period from 20 in FFY 2016 to 20 in FFY 2017.

Steps to track and prevent child maltreatment deaths

Nevada maintains detailed step by step procedures describing exactly how to get the data reported.

- Some data is gathered using a canned report (CFS742 Child Fatality Report) and a manual review 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 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 deceased you 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.

Child Welfare Agency Progress towards SAFETY goals identified in the CFSP

STATEWIDE PROGRESS

Progress on implementation of The Nevada Safety Model known as Safety Intervention Permanency System (SIPS) by Clark County Department of Family Services (CCDFS); the Safety Assessment and Family Evaluation (SAFE) by the DCFS Rural Region, and Safety Assessment and Family Evaluation (SAFE) or (SAFE/FC) by Washoe County Human Services Agency (WCHSA) in support of Goal 1: Children will be safe in out of home care and Goal 2: Children will be safe in their own homes.

The full implementation of the Nevada Safety Model has been on-going for several years throughout the state with full implementation in WCHSA in SFY 2016. The DCFS Rural Region has implemented the front end of the model but continues during this reporting period with implementation of the back end of the model. Initially, CCDFS was last to begin implementation of the Safety Model and have continued with various on-going activities during this reporting period moving towards full implementation. ACTION resumed working with CCDFS May 7, 2018 to assist with building the internal infrastructure needed for sustainability of the model within CCDFS.

Clark County Department of Family Services -Implementation of SIPS is an on-going process that involves various entities. CCDFS participated with a statewide committee to develop continuity between the jurisdictions as it relates to the SACWIS system, UNITY. This collaborative effort was convened to develop windows for UNITY to capture the documentation required for the State of Nevada's safety practice model. Towards this aim, there were monthly teleconference go-to meetings that included CCDFS, DCFS Rural Region and WCHSA. The documentation for the areas of the safety model that were addressed included the following: Protective Capacity Family Assessment (PCFA), Protective Capacity Progress Assessment (PCPA), the Case Plan and the initial and ongoing tools for Confirming Safe Environments (CSE) and a new assessment tool, New Caregiver Assessment (NCA). This committee met from July 2017 through January 2018. A statewide committee was also convened to work on statewide policy for the Protective Capacity Family Assessment and the Protective Capacity Progress Assessment. To date this group has been meeting since January 2018. It is anticipated that this committee will be concluded by July 2018.

During the month of July 2017, the process was initiated to review the NIA intervention Manual to make revisions that will enhance practice in the field. Confirming Safe Environments Refresher trainings and debriefs were held to solicit feedback on that remained regarding utilizing the tools. Also, CSE policy and procedures were developed and solidified. The Foster Family Assessment (FFA) is a tool that Licensing Specialists use to assess prospective foster parents. Meetings were held to make recommendations for the use of the tool with foster parents and the licensing renewal process.

The SIPS Intake Fidelity Review was conducted August 28, 2017 through August 31, 2017. In August 2017, SIPS Permanency Fidelity Review meetings were held to introduce the process to Managers and CCDFS Leadership Team. A plan was developed to begin the process. The purposes of the fidelity reviews for SIPS Permanency practice included the following: to learn how the implementation of SIPS has influenced Specialists' approach to delivering services to caregivers and children; to identify practice themes associated with Specialists' performance for conducting SIPS intervention components; and to determine strengths, implementation issues, barriers, and continuing areas of need for further implementation activities. The Permanency Fidelity Reviews were held in each geographic region and began with South September 2017 and concluded with Specialized in February 2018.

In October 2017, Nevada Initial Assessment (NIA) policies and procedures review groups began meeting to make recommendations for modifications. This continued until April 2018. Managers and Supervisors partnered in geographic regions to train NIA Specialists on the policies and procedures. Training began April 2018 and ended May 2018 with all NIA areas being trained.

Safe@Home provides Safety Managers trained by CCDFS for families where an in-home safety plan can be created based on an analysis of whether an in-home or out-of-home safety plan can be implemented. There were trainings provided in

August 2017, September 2017 and December 2017 to allow agencies that contract with CCDFS to increase the number of Safety Managers for their respective agencies to serve more CCDFS families with in-home safety plans.

In December 2017, part one of the three-part Nevada Initial Assessment (NIA) practicum was initiated with NIA Managers, Supervisors, the Training Team and others within CCDFS that were identified that would benefit from this practicum. The NIA practicum provided a unique opportunity to support and reinforce competency building among participants and provided beneficial information regarding the status of NIA fidelity knowledge and performance.

Module 1 was initiated in December 2017 and consisted of an examination that was intended to examine the knowledge fidelity of NIA that exists among participants. After the examinations were scored, participants were provided with information regarding their knowledge level to locate areas of strength and where improvements were needed.

Module 2 was completed in January 2018. The purpose of Module 2 was to provide opportunities for NIA Supervisors self-reflection regarding the intervention model and supervisory competency. The module included a self-assessment of supervisory knowledge, skills, qualities and values compared to characteristics of effective supervisors. Supervisors and their teams completed surveys. This provided an avenue to contemplate the meaning of feedback from others concerning participants' own perception of their knowledge, skill, qualities and values.

Module 3 began January 2018 and concluded March 2018. This module was designed so that cohorts from different geographic regions would complete a case analysis of a case with an in-home safety plan and an out-of-home safety plan. A standardized evaluation instrument, *Judging Sufficiency of Nevada Initial Assessment* was used for each case analysis. This module provided information about the participants' ability to evaluate and give direction concerning the quality and effectiveness of a completed NIA. Additionally, it continued the process of feedback to participants to raise their self-awareness concerning potential areas for growth and development. The module also yielded general information about NIA fidelity and areas that may continue to need attention in terms of training and consultation.

Washoe County Human Services Agency- WCHSA staff continued during this reporting period to focus on activities associated with sustainability through building internal SAFE model expertise, stabilizing caseloads, transferring coaching and training responsibilities to internal purveyors, developing the training unit's capacity to support the onboarding of new staff, and ensuring WCHSA's Quality Assurance (QA) Unit was installing feedback loops to support the needs of staff and supervisors to ensure compliance to the model's fidelity expectations. The continued roll-out and efforts towards building capacity to sustain the SAFE Model continue to support the CFSP goals of ensuring children are safe in out-of-home care and ensuring children are safe in their own homes. These activities include the following:

Continuous Quality Improvement

Throughout this reporting period, WCHSA's Continuous Quality Improvement (CQI) unit was fully staffed. This unit is composed of a Coordinator, two Case Compliance Reviewers, a Program Specialist, a Management Analyst and an Office Support Specialist. The unit's focus over the last reporting period has been on conducting fidelity reviews that consistently measure staff performance; providing feedback to the supervisors and staff through review of individual/unit results and in-person consultations; and providing feedback to management via management reports and in-person consultations. The unit is in the process of a complete review and revision of the policies and procedures and has revised several policy sections to align with current practices. Additionally, WCHSA continued to participate and support the SAFE/SIPS model's installation and fidelity statewide through its participation in DCFS facilitated workgroups and requests for information to support Clark County's SIPS installation.

During this reporting period, WCHSA two training units (Assessment and Permanency) were moved under the supervision of the Continuous Quality Improvement Coordinator, which will result in better coordination and focus of training efforts in the Agency. Newly hired staff will routinely learn all aspects of the SAFE/SIPS model and move between the two supervisors in the Training Unit to learn the front and back end processes under the one training umbrella. The Senior Social Worker trainers are assigned a reduced caseload allowing them to focus on teaching concepts, modeling behavior, coaching, and providing feedback to new trainees. Additionally, staff with performance issues related to skill and knowledge may be temporarily reassigned to the Training Unit for precision feedback. The trainers are also responsible for ongoing Agency wide staff training. Over the last year, specific refresher trainings and coaching was provided by Training Unit staff based upon developmental needs of units, as identified through CFSR and fidelity reviews. These trainings included Child Contact trainings and Safety Management.

Crisis Stabilization Response Safety and Services Intervention Team

During the last reporting period, WCHSA developed an immediate crisis response team to respond to the existence of present danger faced by local families. Child welfare assessment workers team with Agency clinicians when responding to reports to help stabilize the situation and ideally provide services that enable the child to remain safely in their home. The

goal is to provide immediate, short-term, family-focused services designed to assist child victims and their families in crisis by improving parenting and family functioning while keeping children safe. Specific services may include: clinical intervention and wrap-around support services targeting behavior management; crisis management; safety planning; social connection; and resource support. These services build upon the conviction that many child victims can be safely protected and treated within their own homes, as opposed to being removed, when parents are provided with services and support that empowers them to make the necessary behavioral changes that negatively impact the lives of child victims. This infusion of services and resources at the time of the initial response of abuse and neglect is a critical step in effectively addressing child victim needs while at the same time decreasing the risk of additional trauma associated with removing a child from their home. This team was fully staffed and in place as of September 1, 2017 and initially worked with the Swing Shift staff, as this is when most of the removals were occurring. WCHSA is currently in the process of changing the job duties of all remaining clinicians within the Children's Services Division allowing these services to be expanded to all shifts, including days, evenings and weekend coverage.

Placement Resource Team

The Placement Resource Team has been fully staffed and in place since September 1, 2017. This unit is composed of an assessment caseworker and a diligent search worker.

When a child is going to be removed from their home, the WCHSA Placement Resource Team assessment caseworker completes a genogram, as part of the initial family assessment, to identify relatives and fictive kin. As relatives and fictive kin are identified staff conducts an immediate diligent search to locate them and determine if they can become a placement or provide support to the child. When a relative or fictive kin agrees to take placement of a child in an emergency the caseworker conducts an immediate home visit to assess the physical safety of the home. Placement resources are thoroughly vetted to ensure they understand the need for placement and can continue to care for the child, including, potentially long term. Additionally, checks with local law enforcement, child abuse databases, and criminal history are conducted to help ensure the child's safety in the placement home.

This thorough vetting process helps to prepare and support the relative and/or fictive kin in meeting the needs of the child victim. The placement resource team helps with placement stability by not only finding appropriate relatives and/or fictive kin, but more importantly, supporting and assisting relative and/or fictive kin in identifying and mitigating potential barriers and challenges to successful placement, ultimately creating a more stable foundation for the child victim, even in emergency situations.

Placement Support Team (former known as Foster Care Stability)-

This group is composed of management, supervisors and clinical staff. This team discusses children who are having trouble in their placement and are at risk of disruption. During the last reporting period, this group changed its name from Foster Care Stability to the Placement Support Team. Caseworkers were encouraged to discuss children early in the placement process to discuss possible services needed before the child's needs and behaviors become so intense that the placement is at risk. WCHSA also reorganized its clinical providers during the last reporting period, allowing them to receive referrals from the Placement Support Team to provide intensive in-home services to help stabilize children in their placements. Clinical services can also be accessed by caseworkers to provide therapeutic, crisis, and treatment services for children, foster parents and families regardless of them receiving services from the Placement Support Team. The Agency also hired two specialized case managers to focus on parent engagement and Bridges-Out-of-Poverty concepts. These case managers can provide tangible services to families, including assistance with transportation and coaching with foster parents and parents to encourage positive co-parenting and to improve these relationships. There has been some initial success with these efforts, specifically in supporting the parent and foster parent during neutral caregiving situations such as visits. WCHSA have initially found that these efforts have helped to improve the relationship and reduce stress for the child, parent and foster parent; thereby, stabilizing placements for children. Additionally, WCHSA has also worked with foster parents who are struggling by connecting them to mentor foster parents with similar interests to provide informal supports outside of the WCHSA.

DCFS Rural Region- The Division of Child and Family Services (DCFS) Rural Region implemented the front end of the SAFE practice model four years ago. During this reporting period DCFS has focused on implementing the back of the system, which consists of the Protective Capacity Family Assessment (PCFA) and the Protective Capacity Progress Assessment (PCPA). The SAFE implementation team, in conjunction with ACTION for Child Protection, developed a strategic plan October 2018. The four main components of the plan are; Practice Focused Supervisor Consultation; Caseworker Competency and Proficiency; Court Compatibility and Delivery of Treatment Services. Goals within each of those four components were then developed along with a plan for technical assistance from ACTION to assist in achieving those goals. Supervisors have been identified as the key component to the long-term success of the new model and there

for much of the Technical Assistance (TA) has focused on practicum sessions with supervisors and staff around the coaching and consultation activities. Through this process a need for Change Focused Intervention Training was identified and as result that training was provided to staff. The DCFS Rural Region Quality Assurance (QA) unit has been continuously conducting internal reviews of the PCFA/PCPA process over the past several months. This has been accomplished by observing supervisor /caseworker consultation sessions and then providing feedback to supervisors and management. In addition to review of PCFA/PCPA written assessments. DCFS Rural Region QA also provides support to supervisors and staff by conducting internal reviews for sufficiency of contacts with children in out of home care as well as their families, safety plan management, and timeliness of Safe Model assessments such as the PDA, NIA, and Case Plans. These processes help ensure children are safe both in-home and in out-of-home placements by continually monitoring the safety practices in place.

Progress on how the Quality Parenting Initiative (QPI) implementation is supporting Goal 1: Children and Youth will be Safe in out of home care for your agency.

Clark County Department of Family Services-The Foster Parent Champion program (FPC) is a caregiver support program designed to ensure that caregivers receive all the support they need from CCDFS to ensure the safety of children in out of home care. This program continues to evolve and identify/refine ways to support and retain new and existing caregivers (regular, relative (licensed and unlicensed), fictive kin, and ICPC foster parents) to provide quality care to children placed in their homes. A couple of methods utilized is for the FPC team to make calls to each family who has a child placed with them within 3 business days. For relatives the FPC will also do a 30 day follow up call. Placement stability and caregiver support is one of the program main objectives. Support calls for 2017/2018 increased to 3200. These numbers reflect calls placed to caregivers and calls from caregivers.

Washoe County Human Services Agency- WCHSA continues to work on advancing the principles of the Quality Parenting Initiative (QPI) in its daily work. The emphasis during the past reporting period continued to remain on relationship development between birth parents, foster parents and Agency staff. The strength of these relationships has a strong impact on the stability of a child's placement, a parent's ability to successfully work a case plan and focus on reunification with their child and ultimately increases the timeliness to permanency. A considerable number of case managers and supervisors attended the national QPI conference, which focused on relationship strategies and the impacts to reunification rates and child well-being.

During the reporting period, WCHSA encouraged foster parents to engage with biological parents early on in the case using the Fostering Relationships Through Visitation (FRTV) model. This visitation model engages foster parents as mentors to birth parents during in-office visitation in order to provide continuity to children as well as provide support to birth parents. The Agency also opened the Family Engagement Center (FEC) in November 2017. This center provides a safe, family friendly environment where parents do not just visit with their children, but care for them as they would at home. The center has a kitchen space stocked with food items that can be prepared by the family. Additionally, parents are encouraged to bring their own food to prepare meals with their children. There are play spaces and areas where the family can play a game or watch TV together. FEC staff have been trained in the FRTV model and provide hands on visit facilitation to help mentor foster parents on the FRTV model and to encourage parents to follow their child's lead during visits.

WCHSA continues to work with several committees to ensure that QPI is a foundational component of Agency wide case management practice and has been integrated in the work of all front-line staff. The emphasis on biological and foster parent relationship building and mentoring is a core concept in promoting healthy relationships between biological parents and their children in order to nurture safe visitation in a more inviting, less sterile environment. WCHSA have found that when there are positive relationships between the foster parent and parents, foster parents are also more willing to become part of the safety plan when the children are being returned to their home. Staff worked with foster parents who were serving as safety plan providers to help them clearly understand their role in the safety plan and encouraged them to communicate through the QPI network and support groups. The Agency continued to emphasize information sharing with foster parents including participation in Family Team Meetings and court processes. This continues to be a focused area for continued improvement.

There has been a focus on QPI concepts around increasing parental involvement with children and including concepts derived from Bridges-Out-of-Poverty. WCHSA hired a full-time Placement Support worker whose main focus is encouraging and supporting parental involvement and a Bridges-Out-of-Poverty worker whose focus is on ensuring Bridges concepts are instituted within the Agency. These workers are able to work on individual cases to encourage foster parent mentoring of parents. Additionally, the Bridges-Out-of-Poverty worker is involved with policy workgroups to ensure that these concepts are integrated into Agency policies and procedures. WCHSA Parental Involvement worker is also working with community

mentors to connect volunteers with foster parents, children and parents. WCHSA believe these mentoring activities also support recruitment efforts as volunteers may initially start out by mentoring or helping a parent or foster parent and decide to foster or adopt themselves.

DCFS Rural Region- DCFS Rural Region is in the infancy of exploring ways to standardize the process of building connections between birth and foster families to provide continuity of relationships, to help meet the full spectrum of a child's ongoing needs, and to improve the families' likelihood of reunification. One method of doing this is through the use of an "Icebreaker" meeting, an initiative developed and supported by the Annie E. Casey Foundation. Icebreakers can play a crucial role in building the critical connection between birth parents and foster parents who are caring for a child. The goal of the meeting is to build a relationship between the birth and foster parents to support the child. At the icebreaker, a new caregiver learns about the child's habits and needs, whether the new caregiver is a family member, family friend, foster parents or institutional custodian; the parent has an opportunity to meet and talk to the person caring for his/her child and a child see's his parents and caregivers focusing on his/her comfort, needs and best interests. While the icebreaker idea seems simple, it represents a large shift from past practice and will become a new initiative that will be rolled over the course of a few years. DCFS will need to determine how children will be involved in Icebreakers, infuse Icebreaker knowledge into agency and create material and forms to support Icebreakers. creating an infrastructure to support Icebreakers, will include, working in collaboration with foster parents to; develop a detailed implementation plan; written Icebreaker policy and procedure; data collection and a tracking strategy.

Through QPI there are several activities that DCFS Rural Region will be supporting for the betterment of foster children. One activity is to build a best interest "transition" processes for children moving from their own homes to foster care or to other foster homes, to relatives, or back to their biological families.

The Normalcy initiative is another project that DCFS is implementing. QPI assists with balancing the goals of normalcy and safety for the youth by supporting and promoting the "Prudent Parenting" initiative which better enables foster youth to participate in normal life experiences while in foster care. Training in Reasonable and Prudent Parenting has been initiated by DCFS Rural Region licensing staff for foster parents and child welfare staff.

Report on how Differential Response (DR) supports the state in ensuring children will be safe in their own homes.

The State of Nevada is in the process of modifying the Differential Response program. After working with the Capacity Building Center for States and conducting reviews of the Differential Response program across the state, the child welfare agencies concluded that the program would be revised to meet the needs of the child welfare agencies and the communities in which the agencies operate. Regional planning is outlined below with modifications occurring as early as July 2018 and throughout the upcoming State fiscal year.

- Division of Child and Family Services-Rural Region (DCFS)
The DCFS will be moving DR from a program that responds to screened-in CPS reports to a program that serves families in the context of a more traditional prevention model. DR will serve families brought to DCFS' attention through CPS intake that do not meet criteria for a screened-in maltreatment report, but do meet criteria, yet to be established, that indicates the family is at risk for future involvement with the CPS system and needs assessment and services to reduce the likelihood of future involvement with the public child welfare system. Additionally, DCFS also envisions criteria development of a referral process for families to receive voluntary services following CPS case closure.
- Clark County Department of Family Services (CCDFS)
The CCDFS plans on modifying its Differential Response program to a Community Collaborative Program designed to serve as a neighborhood-based family support system. CCDFS is applying for HHS-ACF grant 93.670 funding for community collaboration. If awarded CCDFS plans to use this funding in partnership with current DR grant funding to create a community site. The CCDFS, in partnership with the Community Collaborative Program, will conduct an initial assessment of a report that has been received through its intake hotline. Based on the assessment, the CCDFS will either continue to work with the family or request the Community Collaborative to continue to work with the family based on the families' needs. The CCDFS may also refer families to the Community Collaborative Program after receiving referrals with no maltreatment identified; in addition, to referring families throughout the assessment process if the Community Collaborative can best meet the service needs of the family.
- Washoe County Human Services Agency (WCHSA)

WCHSA is establishing an agency-based Differential Response Program. The agency will serve screened-in maltreatment reports and utilize internal staff to conduct the assessment and provide services to the family. WCHSA will continue to use the existing tools and the case planning process and will consider alternative assessment processes.

PLANNED ACTIVITIES FOR UP-COMING SFY 2019

Clark County Department of Family Services-CCDFS continued to work with ACTION to provide support to staff with the implementation of the model from July 2017 through March 2018. As previously stated ACTION resumed working with CCDFS May 7, 2018 to assist with building the internal infrastructure needed for sustainability of the model within CCDFS. Coaching, counseling, fidelity reviews and training will continue being facilitated by ACTION. Opportunities will be developed to support staff and reinforce the concepts associated with the Department's safety model, SIPS. New goals for QPI will be established for the integration of QPI principles with case management, youth, birth parents and caregivers. Next year's goals will be established at an event to be held on May 31, 2018. This group will include youth, caregivers, case managers and workgroup members.

Washoe County Human Services Agency-WCHSA has specific plans for activities in support of the SAFE/SIPS model post full implementation. During this reporting period, WCHSA has again reached out to the Children's Bureau to request the formal PII evaluation and cost study results of our Pilot Project. Once received, the results will be reviewed, analyzed, and Agency practice adjustments considered where indicated. Additionally, dissemination activities will be planned specific to staff and stakeholders to include DCFS and CCDFS. WCHSA plans to continue internal staff capacity and competency building efforts such as supervisory peer review groups (Assessment and Permanency specific), training for supervisors in how to effectively coach front line staff, ongoing support to the Nevada Training Partnership North, and continued work with DCFS and CCDFS toward a unified model approach such as SACWIS development, forms, and assessment processes.

WCHSA is working to enhance their relationship with the Nevada Training Partnership North to ensure sustainability of the SAFE/SIPS model and staff competencies. This collaboration is meant to ensure staff is continually up to date on their knowledge in SAFE/SIPS.

QPI - The success of the Department's recent collaboration with the University of Nevada's Athletic Department is reflected in the increased response from the community concerning interest for mentoring, fostering and adopting. WCHSA intends to continue these outreach events in collaboration with the University. WCHSA is excited to continue to expand QPI related knowledge and skill development for staff and resource families to expedite adoptions. Adoption Incentive (AI) funds will continue to support post-adoption service needs, as well as ensuring children in out-of-state permanent placements receive necessary supportive services related to non-Medicaid covered expenses, education needs, and any other identified need. A focus has been made on the teen population and recruiting for foster homes willing to take teens. Additionally, WCHSA is working with teens in our community to discuss different ways they can help (transport, activities, tutoring, etc.). WCHSA will be working with our partners in Juvenile Justice (JJ) over the next review cycle to instill QPI concepts into their practices. There is a current focus on engaging fathers from the JJ system. Additionally, the Family Engagement Center (FEC) opened in November 2017 and most visits that were formerly occurring the child welfare office have been moved to the FEC location, providing a more family friendly environment for parenting time. While the interior of the FEC is complete, WCHSA are still in the process of completing an interactive garden, which will allow families to engage in an outdoor environment with activities to enrich their experience. Efforts to promote the Fostering Relationships Through Visitation model, which focuses on positive co-parenting relationships and foster parent mentoring of parents will continue over the next review cycle. This is a significant philosophical shift for foster parents and staff and continued work to educate and promote FRTV concepts will continue into the next reporting cycle. WCHSA will be hosting the statewide QPI conference in July 2018 with DCFS and CCDFS where the focus will be on FRTV and other QPI concepts. Additionally, QPI concepts will be formally incorporated into WCHSA policies and procedures, which are in the process of being revised. WCHSA will continue participating with the statewide Differential Response Workgroup to refine eligibility criteria. Additionally, increased training needs have been identified for DR staff and will be addressed in the upcoming year.

DCFS Rural Region performance in new report screening decisions negatively impacted the "Risk and Safety Assessment and Management" score and rated as an *Area Needing Improvement* in 71% of the cases reviewed in the most recent Rural Region Case Review (August of 2017) (Safety Outcome 1-Item 3). In addition, a recent (April 2018) DCFS Family Programs Office audit of report dispositions to the Agency's Differential Response program for the nine-month period between July 1,

2017 through the end of March of 2018, identified 36 moderate to high risk cases referred to Differential Response that should have been screened for an investigation, exposing children to a service that was not appropriate for the level of risk according to information gathered at intake.

DCFS is the only child welfare agency in the state without a designated Intake unit.

DCFS submitted a Concept Paper to the Department of Health and Human Services Director for consideration of additional positions to create an Intake unit in the next legislative session which begins in January 2019.

The addition of Intake staff and a supervisor dedicated to receiving and screening reports at intake will improve in the timely, consistent and accurate screening of referrals, which will serve to enhance child safety, Rural Region Child Welfare's primary task.

Quality Parenting Initiative (QPI)

DCFS in collaboration with the two other state child welfare agencies will be hosting a statewide QPI conference in Reno, Nevada, on July 9 and 10, 2018. Because the conference will be held in Nevada our goal is to quadruple the attendance of staff and foster parents that have been able to attend out of state QPI conferences. Workshop with panel discussions will include, but not be limited to; Transitions, Bridging the Gap Between Foster and Birth Parents; Placement Stability-Preservation vs. Disruption of Placements; The Impact of Disruption: The Youth Perspective; Visitation; Statewide Recruitment and The First 48 hours. The QPI conference will provide opportunities for networking and collaboration between DCFS and foster parents statewide.

Foster Parent Resource Guide

A well-informed caregiver is better able to meet the needs of the child in their care and is better prepared to handle challenges specific to that child. Because of that, resource guides for foster parents throughout the Rural Region have been developed and are updated regularly and maintained on the QPI website. These resource guides provide foster parents with supports needed for a successful placement. Collaboration with other agencies, both public and private, is also paramount to the support of our foster homes in the Rural Region and occurs on an on-going basis.

Differential Response

The State's work consulting with the Capacity Building Center for States in collaboration with our federal partners has led the Rural Region Child Welfare Program to the conclusion that DCFS Rural Region can no longer send screened in maltreatment reports to Differential Response. As a result, the Differential Response Program requires significant "re-tooling". The DCFS Rural Region continues to see DR as a vital service to our communities. The DCFS Rural Region will be moving DR from a program that responds to screened in CPS reports to a program that serves families in the context of a more traditional prevention model. DR will serve families brought to the agency's attention through CPS intake that do not meet criteria for a screened in maltreatment report, but do meet criteria, yet to be established, that indicates the family is at risk for future involvement with the CPS system and can benefit from assessment and services to reduce the likelihood of future involvement with the public child welfare system.

During the month of May and early June 2018, a work group formed by Rural Region District Office Managers and Supervisors will meet to establish referral criteria used to identify families that do not meet criteria for a screened in CPS report, but, are determined to be at risk of future involvement in the CPS system, and, to be viable candidates for a prevention program. Once these criteria are established by the work group, Rural Region Division leadership will host a meeting with Rural Region DR leadership and review and finalize these referral criteria. Effective July 1, 2018, DCFS will stop sending screened in CPS cases (PR3DR) to DR and send cases that meet the new referral criteria for prevention services.

During the month of August, likely mid-month (after the Division's 2018 CFSR review) the DCFS Rural Region will reconvene a work group, likely the same group that worked on referral criteria, and look at prevention models that are aligned with the requirements of the Families First legislation passed by Congress in February of this year. During the month of September Rural Region Division Leadership will host a meeting with Rural Region DR leadership and review model options and finalize our prevention model choice. From October through December, the DCFS Rural Region will obtain training for Rural Region DR leadership and workforce in our prevention model. In January of 2019 the DCFS Rural Region will roll out our new prevention model.

ASSESSMENT OF PERFORMANCE in SAFETY

Each of the three performance outcomes listed in this section mirrors the Federal Statewide Assessment Instrument. The overall structure for each performance outcome/indicator includes, if available, the legal requirements for each item, the most recent federal data profile, the most recent statewide case review data, relevant state generated data, and the most recent stakeholder survey/focus group data.

The CFSR Round 3 Statewide Data Profile was provided by the Administration for Children and Families (ACF) on 10/16/2017.

Table 3.2
CFSR Round 3 Statewide Data Indicators provided by ACF on 10/16/2017

Federal Performance Measure	National ¹¹ Performance	Data Source	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
					Lower CI ¹²	RSP	Upper CI
Maltreatment in foster care	9.68	NCANDS FY 2013	↓	8.40	9.52	11.18	13.13
Maltreatment in foster care	9.68	NCANDS FY 2014	↓	8.79	9.91	11.68	13.76
Maltreatment in foster care	9.68	NCANDS FY 2015	↓	6.34	7.03	8.52	10.33

Green Shading = State's performance (using RSP interval) is statistically better than National Performance;
 Grey Shading = State's performance (using RSP interval) is statistically no different than national performance;
 Red Shading = State's performance (using RSP interval) is statistically worse than national performance.

Table 3.2 illustrates the most recent data from FY 2015. Nevada's data indicates the state's performance at 8.52% is statistically no different than national performance.

CPS Response Time:

CPS response time in hours is defined as the time between receipt of a referral alleging maltreatment and the state or local agency face-to-face contact with the alleged victim (Child Maltreatment 2017, chapter 2, page 9).

The most recent *Child Maltreatment Report* data published in 2018 for Nevada CPS Average Response Time is provided in Table 3.3. Nevada's CPS Response Time in hours for FFY 2016 increased to an average time of 19 hours.

Table 3.3
Nevada CPS Average Response Time in hours (2012-2016)

	FFY 2012	FFY 2013	FFY 2014	FFY 2015	FFY 2016
Average time to Investigation in Hours	15	13	16	17	19

Source: Child Maltreatment Report (published, 2018)

¹¹ National Performance = victimizations per 100,000 days in care

¹² Confidence Interval

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

Requirements

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. NAC requires a process be established when receiving a referral and determining if that referral constitutes a report of abuse or neglect.

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

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

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

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.

Statewide Data

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) as part of Continuous Quality Improvement (CQI). Table 3.4 provides case review data for 2017.

Table 3.4
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 1: Timeliness of initiating investigations of reports of child maltreatment.	70%			79%			79%					
Performance Item Rating	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	21	9	36	34	9	32	37	10	36			

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

In 2015 Nevada began using the Online Management System (OMS) developed by JBS for the Children’s Bureau and for States conducting CQI Reviews. Also, the current Intake Policy 0506 Statewide Intake and Response Times is currently under revision.

The overall federal performance expectation for Safety Outcome 1 is 95%. Item 1 ‘the timeliness of investigations’ is the only performance indicator for this item. Nevada’s rating for this item was 79% statewide for CY 2017; therefore, this is an area needing improvement.

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

Item 2: Services to families to protect children in home and prevent removal or re-entry into foster care

Requirements

Pursuant to NRS 432B.340, when an agency which provides child welfare services determines that a child needs protection, but is not in imminent danger from abuse or neglect, the agency may offer the parents a plan for services and inform the parents that the agency has no legal authority to compel the family to accept the plan or file a petition pursuant to NRS 432B.490 and if the child is 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

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

It is the responsibility of the agency 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 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.

Statewide Data

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) on this item. In the following table (Table 3.5) is the most current case review data as it relates to item 2.

**Table 3.5
Statewide Quality Improvement Review Data**

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 2: Services to Families to protect children in home and Prevent removal or re-entry into foster care.	74%			59%			66%					
Performance Item Rating	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	20	7	39	23	16	36	27	14	42			

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

The overall federal performance expectation for item 2 ‘Services to Family to Protect Children in the Home and Prevent Removal or Re-Entry into Foster Care’ is 90%. Nevada’s rating for this item was 66%% statewide for CY 2017; therefore, this is an area needing improvement.

Item 3: Risk Assessment and Safety Management

Requirements

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

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

Statewide Data

The CFSR Round 3 Statewide Data (SFY 2016) Indicators workbook is the most recent data provided by the Administration for Children and Families (ACF) using the new federal measurement methodology. Using this data Nevada met the national standard for “Recurrence of Maltreatment” FY 2012 as shown in Table 3.6. Additionally, Table 3.6A shows that Nevada continues to meet this Performance for FY 2013 and 2014.

**Table 3.6
CFSR Round 3 Statewide Data Indicators provided by ACF on**

10762a Performance (SAFETY)	National Performance	Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
					Lower CI	RSP	Upper CI
Recurrence of Maltreatment	9.5%	NCANDS FY 14A & 14B	↓	6.8%	7.9%	8.8%	9.7%

Green Shading = State’s performance (using RSP interval) is statistically better than National Performance;
 Grey Shading= State’s performance (using RSP interval) is statistically no different than national performance;
 Red Shading = State’s performance (using RSP interval) is statistically worse than national performance.

Table 3.7 Percent of Children without Recurrent Abuse or Neglect in Home Settings

Region	SFY 2015	SFY 2016	SFY 2017	SFY 2018 YTD
Clark	97.81%	98.14%	97.76%	98.74%
Washoe	98.45%	99.07%	99.01%	99.03%
Rural	99.45%	99.03%	99.14%	100.00%
Statewide	98.03%	98.37%	98.07%	98.89%

Data Source: UNITY Report CFS7L8 (*Note: SFY 2017 YTD includes nine months of data: July 1, 2017 – April 30, 2018)

Table 3.7 illustrates the effectiveness of child protective services in reducing the risk of harm for children who have been maltreated. For children with a substantiated report of abuse and/or neglect, it reflects the percentage of children who did not have a substantiated report in the six months following a substantiated report during each year for the period of SFY 2015 through 2018 YTD.

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) on this item. In the following table (Table 3.8) is the most current case review data for item 3.

Table 3.8
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 3: Risk Assessment and Safety Management	50%			45%			35%					
Performance Item Rating	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	33	33	0	34	41	0	29	54	0			

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

The overall federal performance expectation for item 3 ‘Risk and Safety Assessment and Management’ is 90%. Nevada’s rating for this item was 35% statewide for CY 2017; therefore, this is an area needing improvement.

Strengths/Concerns (Safety Outcomes 1 & 2)

The overall federal performance expectation for Safety Outcome 1 and 2 is 95%. Individual items are considered a strength if rated at 90%. Safety Outcome 1 is rated 79% and Safety outcome 2 is rated 35%; therefore, Safety Outcomes 1 and 2 are areas needing improvement. In Safety Outcome 1 the most common issue contributing to the rating is all victims are not seen timely. For 2017 only 10 Cases out of 47 were rated and ANI. For Safety Outcome 2 there are multiple reasons attributing to the rating. This includes but is not limited to adequate safety service provision or safety planning being conducted, and or not conducting adequate ongoing assessment. Additionally, this includes some issues with inappropriate screen-out of reports.

Nevada does have strength in the ability to ensure that children do not experience a recurrence of maltreatment within a 12-month period of a substantiated report of maltreatment as reflected in the achievement of meeting the national performance for ‘Absence of Recurrence of Maltreatment’.

Section IV. PERMANENCY

Trends in Permanency

Table 4.1
CFSR Round 3 Statewide Data Indicators provided by ACF on 10/16/2017

Federal Performance (Permanency)	National Standard	Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
					Lower CI	RSP	Upper CI
Permanency in 12 months for children entering foster care	42.1%	AFCARS 14A & 14B	↑	47.0%	44.3%	46.1%	47.9%
Permanency in 12 months for children in care 12-24 months	45.9%	AFCARS 16A & 16B	↑	53.2%	47.1%	49.6%	52.2%
Permanency in 12 months for children in care 24 months or more	31.8%	AFCARS 16A & 16B	↑	48.8%	35.8%	37.9%	40.1%
Placement Stability	4.44 moves ¹³	AFCARS 16A & 16B	↓	7.00	7.37	7.65	7.94

Green Shading = State's performance (using RSP interval) is statistically better than National Performance;
 Grey Shading = State's performance (using RSP interval) is statistically no different than national performance;
 Red Shading = State's performance (using RSP interval) is statistically worse than national performance.

Table 4.1 illustrates Nevada Performance on all new Permanency Measures. As shown below Nevada is meeting standards on all measures except Placement Stability.

Child Welfare Agency Progress towards PERMANENCY goals identified in the CFSP

STATEWIDE PROGRESS

Progress on Advanced Foster Care implementation as it relates to a 1. Decrease in placement disruptions; 2. Decrease in re-entry of children into foster care and 3. Progress on how children in the Advanced Foster Care Program are achieving permanency in 12 months.

Statewide the Advanced Foster Care Program (AFCP) assists foster children with serious emotional and behavioral problems. The program trains, mentors, and coaches foster parents in evidence-based strategies to support the children in their home who are experiencing mental health issues. The program's goal is to enable the children in the homes served by the program to experience a stable life and grow up in a healthy and safe environment. The Advanced Foster Care Program statewide in all jurisdictions of the state continue local activities that focus on decreasing placement disruptions, decreasing re-entry into foster care and ensuring children are achieving permanency.

Clark County Department of Family Services-The first AFC cohort completed training May 2017. CCDFS are currently on the 5th training cohort, having trained approximately 29 families (some are in the current training, not yet completed).

Given attrition, CCDFS currently have 25 families in AFC, serving 34 AFC-eligible children, as well as siblings of some of the AFC-eligible children.

AFC has significantly decreased placement disruption due to the weekly support of CCDFS clinical staff providing weekly in-home parent coaching, crisis intervention, and overall assistance with the child's team to ensure care coordination and

¹³ Moves per 1,000 Days

appropriate support wraps are in place for each child. AFC also provides an after-hours call line weekdays up to 10pm and on weekends and holidays to assist caregivers with parent coaching over the phone if they are struggling or need to consult about a situation with a child's behavior.

Also, CCDFS have had approximately 5 children who went to a bio or fictive kin that failed, and CCDFS were able to accept those children back into the AFC home they had been in; There were at least 2 sibling groups.

- In addition, Family Focused Treatment Association (FFTA) is a national organization for Foster Care providers and the local NV chapter is very active. Participants must join as members. They meet monthly with an open section of their meeting and closed section for voting, to discuss challenges providing services to higher –level-of-care foster children. Issues range from Medicaid reimbursements, recruitment of new caregivers, managing administration costs and demands effectively, to improvement of communication with the parent government agencies of CCDFS and DCFS. They have been particularly active with since the implementation of SB107 regarding Specialized Foster Care, which requires a number of standardized assessment and outcome measurement forms, benchmarks for care, and how to work more cooperatively amongst each other with some standardized policies such Placement Preservation and as how to handle families who want to transfer agency to agency (including to CCDFS' AFC program).
- CCDFS sponsors a monthly Agency Roundtable meeting for any and all (no membership required) agency representatives to discuss their concerns, challenges, and solutions together, with CCDFS present. Assistant Directors and various program managers attend this meeting to collaborate, problem-solve, and assist with issues such as Medicaid reimbursement clarification.

Washoe County Human Services Agency-WCHSA made significant changes to the scope of work and contract utilized for providers of behavioral, mental health, and substance abuse treatment services through WCHSA's referral voucher program. Changes were made to provider contracts to require providers to become familiar with the SAFE/SIPS model, specifically a focus on caregiver enhanced and diminished protective capacities; Stages of Change; and change focused casework. The ultimate goal was to have providers report back to WCHSA using the SAFE/SIPS model language to improve communication and ensure the provider and case worker were speaking about a parent's progress toward case plan goals in the same terms. These providers were educated about the changes at trainings offered multiple times over the last year. The training curriculum included information about: the new referral process and utilization of providers; WCHSA's use of the SAFE/SIPS process and assessment of child safety (Present vs. Impending Danger); a review of Caregiver Protective Capacities and Client Stages of Change; and the new reporting format required of providers that incorporated information about Caregiver Protective capacities when working with adults.

With the implementation of the new scope of work, contract, and revised training curriculum, by the end of SFY18 WCHSA will begin quality assurance activities by conducting surveys with WCHSA's caseworkers and the staff of contracted providers.

WCHSA's Transformational Foster Care Program (TFCP)

A stable, enhanced rate for placement.

Over the last year, WCHSA continued to provide a higher, all-inclusive reimbursement rate to the two levels of placement providers. Children with mild to moderate behavioral/mental health needs were placed in "Enhanced" foster homes that were reimbursed at the daily rate of \$40 per child. Children with moderate to severe behavioral/mental health needs were placed with Specialized Foster Care Plus (SFC+) Providers and continued to be reimbursed at the daily rate of \$115 per child. These placement providers were prohibited to bill for any Basic Skills Training (BST). Additionally, per the contract for SFC+ providers, they were required to provide FA-11As/PARs to WCHSA for review, prior to submitting to Medicaid.

Training to enhance caregiver skills.

All staff hired for the TFCP were fully trained in their respective duties (i.e., coaching, data collection etc.). WCHSA thoroughly implemented the Together Facing the Challenge (TFTC) model through key activities. WCHSA staff provided coaching to the foster parents of children placed in the TFCP on a weekly basis. These coaches were then supervised monthly/quarterly on the TFTC coaching process. At least every three months, WCHSA provided the three-day, seven session TFTC training curriculum to both enhanced foster parents and SFC+ foster parents/caregivers. Those who were

previously trained in TFTC within the last year were provided with "TFTC Refresher" training. Additionally, WCHSA participated in phone consultation with Duke-TFTC as part of the path to pursue TFTC Certification. As part of certification, WCHSA also scheduled and coordinated foster parent focus groups with Duke-TFTC. Monthly statewide phone consultation calls occurred to receive general consultation and training. Calls were also scheduled as needed to review TFTC fidelity forms submitted by WCHSA to Duke-TFTC for review and feedback. In addition to training in TFTC, Trauma Informed Care trainings were also provided on a quarterly and as needed basis.

In addition to TFTC activities, key WCHSA staff were trained in UNITY enhancements related to windows pertaining to Specialized Foster Care.

Over SFY 2018 WCHSA continued to collect data requirements per NRS 424.041-043. As part of this process, WCHSA switched from the Child Behavior Checklist data element to using the Child and Adolescent Needs and Strengths (CANS) assessment tool every six months. As such, key staff were either certified or recertified in CANS.

Processes to ensure program integrity

WCHSA held a weekly, interdisciplinary team meeting (Triage and Placement Review Team) to review/approve all children identified for placement in WCHSA's TFCP. This team was also used for implementation planning and reviews to address process in need of development and/or revision. In example, a standardized referral form and a quality assurance review tool were developed; both the evergreen contracts for Enhanced and SFC+ providers were revised to reflect TFCP program requirements; a TFTC audit tool was developed to conduct paper audits and interview program participants; and additional trainings (i.e. on coaching and supervision; focus on the 17 skills and techniques etc.) and the development of a process to conduct on-going permanency reviews of children placed in the TFCP.

In addition to the activities that took place internally within WCHSA, staff worked with Duke-TFTC on developing a sustainability plan reflective of on-going TFTC activities post certification (to cover a two-year period).

Quality Assurance

Per NRS 424.041-043 WCHSA has been providing a response to the initial Letter of Intent every six months by reporting on key data, specifically providers' usage of Basic Skills Training as well as the number of Specialized Foster Care providers. WCHSA piloted a quality assurance review process of the fidelity forms used to conduct TFTC coaching sessions with the foster parents and the supervision of coaches regarding the completion of the in-home coaching forms (i.e. a paper audit of the in-home coaching form and supervisor form). By the end of SFY18, WCHSA will be conducting a review of children enrolled in the TFC Program to review placement stability and permanency along with other key outcomes.

Finally, WCHSA piloted the use of a TFCP staff person to provide care coordination and permanency support to children in Enhanced placements.

DCFS Rural Region- The Advanced Foster Care Program (AFCP) assists foster children in Nevada's Rural Region (15 rural counties) who experience serious emotional and behavioral problems. The program trains, mentors, and coaches foster parents in evidence-based strategies to support the children in their home who are experiencing mental health issues. The program's goal is to enable the children in the homes served by the program to experience a stable life, grow up in a healthy and safe environment, and achieve permanency.

The program is overseen by a Clinical Program Manager, who is based in Carson City. In addition, the program employs four Mental Health Counselor II (Coach) positions to cover the Rural Region. One is based in each of the four DCFS District Offices (Carson City, Fallon, Elko, and Pahrump). The program also has an Administrative Assistant.

During the report period, the AFCP reached a peak of 21 homes and 24 children in care at one time. These numbers have decreased to 15 homes and 21 children in care as of this writing. More homes and children are expected to join the program in the next few months. Currently, six of the homes are in the Pahrump and Amargosa Valley area, two are in the Fallon and Fernley area, two in Dayton, one in Yerington, three in Ely, and one in Winnemucca.

In addition, during the reporting period, the program has provided training on trauma informed care ("Caring for Children Who Have Experienced Trauma") to 72 total participants. This eight-module, two-day training was presented by program staff. Trainings were held in Winnemucca, Yerington, Ely, and Las Vegas (mostly participants from Nye County).

During the reporting period, program staff has also trained 13 AFCP parents in Together Facing the Challenge (TFTC), which is an evidenced based parenting program developed out of Duke University. TFTC is a 14-hour, 7 module training available only to AFCP homes. The curriculum includes modules on social learning theory, foster parents setting expectations with foster children, tracking behavior, power struggles, effective consequences, cultural sensitivity, and effective communication. TFTC training was held in Pahrump, Winnemucca, Yerington, and Dayton.

Finally, each program Coach meets with the AFC home parents once a week for about two hours. The goal of this weekly meeting is to support, mentor, and teach the foster parent(s) so that they can effectively implement the TFTC program and trauma informed concepts into their daily parenting work with their advanced foster children. In addition, the coaching

methodology is designed to support the parent(s) in ways that help them problem solve and, ultimately, retain their foster child in a stable placement.

The AFCP is small and completing its second full year. During the reporting period (data available from July 1, 2017 through March 1, 2018), the program served 33 children in 18 different homes, in 8 different towns. 5,116 days of care were provided. Annualized to 12 months, those days of care are projected to be 6,821.

The following data and anecdotes that tell the story of the AFCP's success through its second year of operation.

1. Decrease in placement disruptions: Generally, children in the program have experienced multiple placements in their foster care career. One child who has been in the AFCP for 22 months had 24 documented placements in 10 years before her most current placement. While not all children in the program have had that number of previous placements, most have had multiple foster placements, and some have even had one or more failed adoption placements. Despite that, most children in the program are maintaining placement. Since the AFCP began in 2016, there have been 38 children in the program. Those 38 children have experienced 25 moves from the AFCP home to another placement.
 - a. Ten of those moves or 44% resulted in permanency (i.e. adoption or aging out).
 - b. One of 25 or 4% stepped down from AFCP to regular foster care because of improvement in her clinical situation presentation.
 - c. Six of the 25 moves or 24% moved from one AFCP home to another ACFP home to keep the child in care by better matching the needs of the child with an appropriate home.
 - d. Seven of the 25 moves or 28% were placed in a higher level of care, such as a group home or residential treatment.

In addition, in looking at data available through March 1, 2018, the average AFCP child was in placement for 201 days. Factoring out those that were only in the program for a few days or weeks, the average is 259 days. As mentioned, the AFCP model is based on the TFTC evidence-based parenting program and on helping parents learn to identify and implement creative and helpful interventions (i.e. appropriate consequences, behavioral contracts, behavior tracking, etc.) to help each child in care to maintain placement. These strategies are part of a larger trauma informed approach that considers the profound emotional and sometimes physical trauma that the children in care have experienced.

2. Decrease in re-entry of children into foster care: Two children have left the program for a higher level of care and then returned to the foster or AFCP since the program began in 2016. The two children are brothers that have had difficulty maintaining placement. These two brothers have been in a new AFCP placement for about four weeks and are doing well, so far.

The program Coaches routinely assist the AFCP parent navigate difficult behavior of their special needs foster child. The AFCP works very closely with the child's caseworker, Wraparound in Nevada (WIN) worker, mental health therapist, and other members of the child's team to coordinate care and to ensure that the AFCP child's services are coordinated, relevant, and helpful.

3. Progress on how children in Specialized Foster Care are achieving permanency in 12 months: Nineteen children have left the program since its inception in July of 2016. Of those 19, ten have been adopted or are in process, one aged out and is on her own, and one stepped down from AFCP to regular foster care. This last child stayed with the same family and is being considered for adoption. This means that the total children leaving the program that have achieved permanency is 12 of 19 or 63%.

ASSESSMENT OF PERFORMANCE in PERMANENCY

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

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

Item 4: Stability of foster care placement

Requirements

Nevada Statute and Administrative Code supports the placement stability of children in foster care by requiring child welfare agencies to assess the individual needs of the child, and to place that child in the least restrictive environment that is consistent with the identified needs. Relatives are the first placement option considered for all children placed in out-of-home care. Child welfare agencies are also required to place siblings together when possible. Policy requires that the agency 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. This includes a requirement of the agency to provide a program of respite for the foster providers (NAC 424.810, NAC 424.805). NAC supports placement stability by requiring that a foster care provider provide the child welfare agency with 10 working days' notice of any request for the removal of the child from that home unless they have a contrary agreement, or if there are immediate and unanticipated safety issues, thus giving the agency time to respond to issues that may have caused the instability (NAC 424.478).

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

Other statewide policies require caseworkers to visit children in foster care once every month and direct a portion of this monthly visit by the caseworkers to assess the child's adjustment to the placement and the stability of the placement. The case workers are also to meet with the foster care provider and discuss the service needs of the child or provider in an effort to support the placement (Policy 0205).

Table 4.2

CFSR Round 3 Statewide Data Indicators provided by ACF on 10/16/2017

Federal Performance (Permanency)	National Standard	Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
					Lower CI ¹⁴	RSP	Upper CI
Placement Stability	4.44 moves ¹⁵	AFCARS 16A & 16B	↓	7.00	7.37	7.65	7.94

Green Shading = State’s performance (using RSP interval) is statistically better than National Performance;
 Grey Shading= State’s performance (using RSP interval) is statistically no different than national performance;
 Red Shading = State’s performance (using RSP interval) is statistically worse than national performance.

Table 4.2 illustrates Nevada Performance on Placement Stability using the new Federal methodology. Nevada is not meeting the national performance on this measure.

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children’s Bureau and extended to states for use with their own CQI systems conducting case reviews. Nevada has not been able to collect case review data on this item in the past.

Table 4.3

Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 4 Stability of Foster Care Placement	80%			45%			65%					
Performance Item Rating	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	32	8	0	21	26	0	34	18	0			

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

The overall federal performance expectation for item 4 ‘Stability of Foster Care Placement’ is 90%. Nevada’s rating for this item was 65% statewide for CY 2017; therefore, this is an area needing improvement.

Item 5: Permanency goal for child

Requirements

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

The 0508/0509 Nevada Initial Assessment (NIA) policies guide the collection of information used to determine the

¹⁴ CI=Confidence Interval

¹⁵ Moves per 1,000 Days

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

Statewide Data

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) since implementation of the PIP on this item. In the following table (Table 4.4) is the most current case review data as it relates to item 5.

**Table 4.4
Statewide Quality Improvement Review Data**

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 5: Permanency goal for child	43%			45%			50%					
Performance Item Rating	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	17	23	0	21	26	0	21	26	0			

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

The overall federal performance expectation for item 5 ‘Permanency goal of Child’ is 90%. Nevada’s rating for this item was 50% statewide for CY 2017; therefore, this is an area needing improvement.

Item 6: Achieving reunification, guardianship, adoption, or other planned permanent living arrangement.

Requirements

NRS 432B.390 specifically mandates that relatives of the child within the fifth degree of consanguinity be given preference for placement, when removal from the parents’ home is necessary for the child’s safety. NRS 432B.393 requires agencies to make reasonable efforts to prevent a child’s removal from the parents’ home, or, if removal is necessary, reasonable efforts to make their safe return possible. NRS 432B.540 requires that if the agency believes it 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 each place emphasis on the ways in which the agency is to engage the family and their natural, informal supports such as extended family, fictive kin, close friends, members of their faith community, teachers, etc. to keep the child safe while committing to the long-term support of the child and family.

Guardianship

Nevada Revised Statute 432B.466 – 468 requires agencies to make reasonable efforts to find a more permanent placement for a child, and explain why the appointment of a guardian, rather than the adoption of the child or the return of the child to a parent, is in the best interests of the child, when this is the permanency goal. NRS also provides the powers, duties and limitations of a guardian. Furthermore, 0204 Case Planning Policy requires that child welfare staff are following the proper steps to determine appropriate permanency goals. The new quality improvement case review process explicitly states that child welfare agencies should be considering the time it takes for a child to achieve permanency and that for the goal of guardianship, achievement should be made within 18 months.

On June 29, 2016 Nevada submitted amendments to its title IV-E plan to implement a Guardianship Assistance Program (GAP). Additionally, the state submitted its formal request to the Children’s Bureau Regional Office (RO) on July 13, 2016. Following a review by ACF, including additional revisions, the state submitted an approvable amended plan to operate the title IV-E GAP on February 17, 2017. Nevada’s title IV-E plan amendment to operate the GAP was approved, effective January 1, 2017.

Allowable administrative costs for the title IV-E GAP can be claimed pursuant to an amended and approved public assistance cost allocation plan (PACAP) or a pending PACAP in some situations (45 CFR 95.515). Nevada submitted an amended PACAP to the Regional Cost Allocation Services to include the GAP in July 2016. The amended PACAP was subsequently approved on February 3, 2017 with an effective date of July 1, 2016. Therefore, Nevada is able to claim allowable costs associated with the title IV- GAP that began on January 1, 2017.

Table 4.5
CFSR Round 3 Statewide Data Indicators provided by ACF on 10/16/2017

Federal Performance (Permanency)	National Performance	Data Sources	Direction of Strength	Observed Performance	Risk Standardized Performance (RSP)		
					Lower CI ¹⁶	RSP	Upper CI
Permanency in 12 months for children entering foster care	42.1%	AFCARS 14A & 14B	↑	47.0%	44.3%	46.1%	47.9%
Permanency in 12 months for children in care 12-24 months	45.9%	AFCARS 16A & 16B	↑	53.2%	47.1%	49.6%	52.2%
Permanency in 12 months for children in care 24 months or more	31.8%	AFCARS 16A & 16B	↑	48.8%	35.8%	37.9%	40.1%

Green Shading = State's performance (using RSP interval) is statistically better than National Performance;
 Grey Shading = State's performance (using RSP interval) is statistically no different than national performance;
 Red Shading = State's performance (using RSP interval) is statistically worse than national performance.

Table 4.5 illustrates performance on three federal permanency measures. Based on the most recent data Nevada is meeting the national performance on these measures.

Other Planned Permanent Living Arrangement

Requirements

Nevada statute and policy require that a written case plan be developed for children with this permanency goal and that the plan include programs and services designed to assist older youth in transitioning out of care. NRS 432B.553 requires a plan for the permanent placement of children. NAC 432B.410 requires child welfare services to ensure that each child in foster care 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 Plan for Independent Living 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, regardless of their level of functioning or independence. The planning process must be youth focused and driven with emphasis on the youth's expressed interests, needs and priorities.

¹⁶ CI=Confidence Interval

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children’s Bureau and extended to states for use with their own CQI systems for case reviews.

Table 4.6

Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 6: Achieving Reunification, guardianship, Adoption, or Other Planned Permanent Living Arrangement	48%			49%			44%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	19	21	0	23	24	0	34	18	0			

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

The overall federal performance expectation for item 5 ‘Achieving Reunification, Guardianship, Adoption, and OPPLA’ goal of Child’ is 90%. Nevada’s rating for this item was 44% statewide for CY 2017; therefore, this is an area needing improvement.

Adoption

Requirements

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

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

Statewide Data

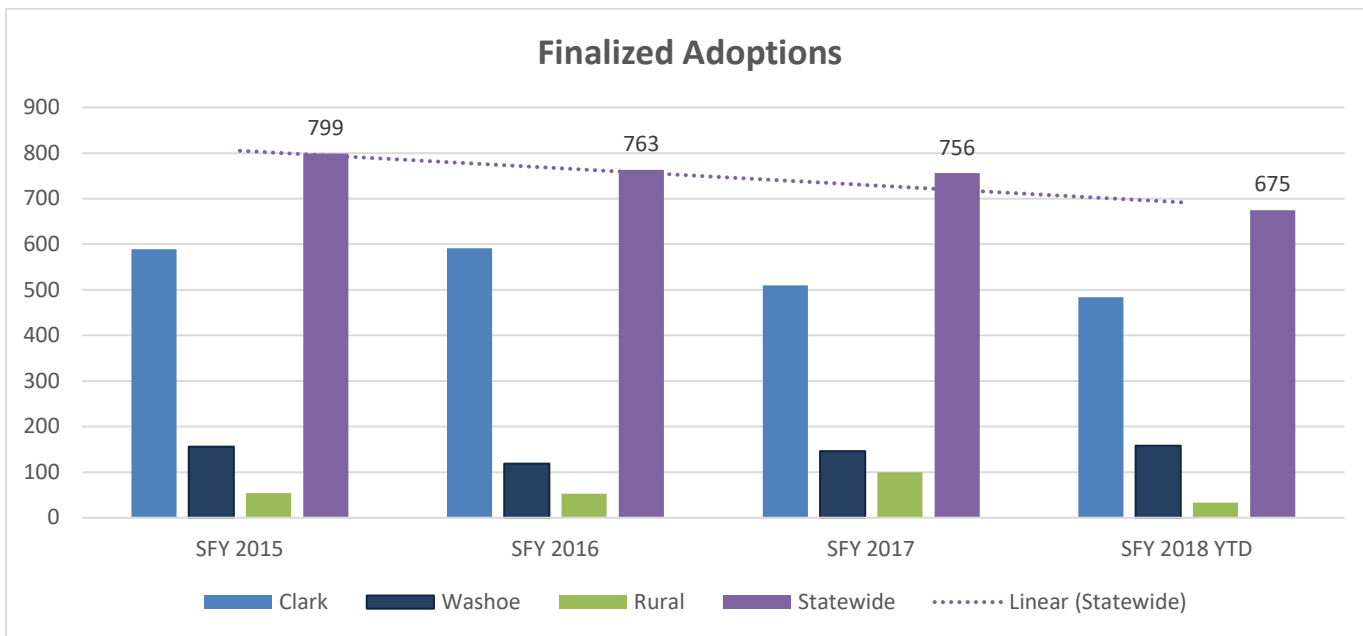


Figure 4.1 Finalized Adoptions by Region: 2015 – 2018 YTD (July 1, 2017 – May 31, 2018). Source: CFS794

Figure 4.1 illustrates a 5.47% decrease statewide in finalized Adoptions from SFY 2015 to SFY 2017. The information for SFY 2018 includes data through 5/31/2018 with 675 Adoptions finalized to date.

Table 4.7

Adoptions in Less than 24 Months

	Adoptions with a Custody Date in Unity	Custody to Adoption Average Months	Number Adopted in less than 24 Months	Percent Adopted in less than 24 Months
Adoption in Less than 24 Months April 1, 2013 - April 30, 2015	1,547	32	514	33%
Adoption in Less than 24 Months April 1, 2014 - April 30, 2016	1,577	31	537	34%
Adoption in Less than 24 Months April 1, 2015 - April 30, 2017	1,570	31	531	34%
Adoption in Less than 24 Months April 1, 2016 - April 30, 2018	1517	31	519	34%

Source: UNITY CFS 732

Table 4.7 illustrates that the percent adopted in less than 24 months has not significantly changed, with 34% of children being adopted in less than 24 months in the two most recent periods of review. Please note that Nevada measures the **average** months to adoption from the date of removal on UNITY report CFS732.

Adoption in Nevada

The overall goal of Nevada’s adoption program is to continue to provide safe and permanent homes for children whose birth parents cannot care for them. Nevada adoption services continues to provide: pre- and post-placement counseling to birth parents; preparation for children being placed in adoptive homes; case management; legal service to free children for

adoption; recruitment; training; home study preparation for pre-adoptive families; adoption subsidy; Medicaid and post legal adoption support. The State ensures the safe adoptive placement of children across state lines per ICPC. Also, the State continues to be responsible for the licensing and administrative oversight of private non-profit child placing agencies in the state. DCFS currently licenses seven private adoption agencies, one of which has full Hague accreditation.

Inter-Country Adoptions: The State of Nevada had no children who were adopted from another country that entered state custody in FY 2017 as a result of a placement disruption.

Services of Children Adopted from Other Countries

Nevada offers a variety of adoption and post-adoption support services to families who have adopted children from other countries. 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 provided include but are not limited to:

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

Adoption and Legal Guardianship Incentive Payments

The State of Nevada has awarded Adoption Incentive funds out to various grantees. 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 utilized their grant funds to act as the state's Recruitment Response Team (RRT) for Adopt Us Kids projects. The state also uses the grant money to pay for a state-wide membership to the Adoption Exchange. The Nevada Outreach Training Organization concentrates on recruiting Spanish speaking foster parents and assists with adoptive parent applications. 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 diligent search for relatives and fictive kin and completing social summaries/home studies.

States Plan for Expenditure of Adoption Incentive funds

Adoption Incentive funds are also awarded to Nevada's three public child welfare agencies to assist with interjurisdictional placements, 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.

Clark County Department of Family Services-In SFY2018 the dollar amount funded by the Adoption Incentive Grant was cut by approximately 46%. With the funds available, CCDFS funded 9 positions, covered the supervision costs, training, legal costs and other services associated with Termination of Parental Rights, Public Information and File management. CCDFS did not encounter challenges associated with expending the funds, nor are there any changes to how funds will be spent next year.

Washoe County Human Services Agency- Approximately 78% of AI funds were utilized in a contractual capacity, forming partnerships with agencies that provided the above media and marketing services as well as project management, technical assistance and consultation. These services supported an initiative to increase foster and pre-adoptive parent resources, including training, through improved recruitment and retention activities. Other contractual partnerships exist to provide critical social summaries and/or home studies for homes that have been identified for children who have a plan of adoption or concurrent plan of adoption.

During this reporting period, WCHSA provided a balanced approach to pre and post adoption services and activities, recognizing that time, energy and funding must be devoted to recruitment, retention and finalization efforts, as well as stabilization, support and training activities for workers, parents and the communities that support these families. Recruitment and awareness efforts began by building on the continued success and relationship with the University of Nevada, Reno athletic marketing department, through their sponsorship of the "Have a Heart" campaign. WCHSA utilized AI funds for marketing and media efforts, featuring the opportunity for fostering, mentoring, and/or volunteering in community-based advertisement.

DCFS Rural Region-The availability of funding through the Adoption Incentive Grant has allowed the DCFS Rural Region to implement numerous projects, all of which directly assist in more timely permanency for children. DCFS has implemented and continues to fund Family Finding Assistance by utilizing the services of a private investigator to ensure that all familial ties/relationships are sought out for children that are awaiting adoption. Contractors are used for file mining for relative/fictive kin placement resources, completing and updating Social Summaries for children, assembling TPR packets for the Attorney General's office, preparing Full Disclosure documentation for pre-adoptive parents prior to subsidy negotiation among other tasks. AI funds independent contractors trained in the Structured Analysis Family Evaluation (SAFE) Home Study Model are used to assist in the timely completion of Home studies needed for foster care and adoptive placements. These contractors are critical to safe and timely placement of children to ensure permanency in the rural region. Contractors currently complete 90% of SAFE home study requests required for all adoptive placements for Interstate Compact for Placement of Children (ICPC) cases when children from other states are placed with relatives in rural Nevada. The number of ICPC and Intra-State home study requests continue to increase and without Home study contractors, timeliness to permanency would negatively affect children in the DCFS rural region. Adoption Incentive (AI) funding has also been used for Adoption awareness and preparation materials, airing of Non-Commercial Announcements (NCSA's) on rural radio stations to encourage foster and pre-adoptive placement resources; the post placement supervision fees by private agencies in other states, Airfare/Ground Transportation/Per Diem/Lodging for agency staff travel to accompany children to out-of-state placements and to bring prospective adoptive families to Nevada during the adoption transition

process. Incentive funds are used to continue our Adoption Exchange Membership and for AdoptUs Kids Recruitment; our CWLA membership and PRIDE pre-service Adoptive/Foster Parent Training materials.

Planned Activities for SFY 2019:

As previously stated Adoption Incentive funds are awarded to Nevada's three public child welfare agencies. The Statewide plans for the expenditure of these funds vary across the state depending on the needs of the Agency. There has been a reduction in Adoption Incentive funds and planned use of the funds will continue to be those activities already reported.

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

Item 7: Placement with siblings

Requirements

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

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children's Bureau and extended to states for use with their own CQI systems for case reviews.

Table 4.8
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 7: Placement with Siblings	86%			91%			97%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	24	4	12	29	3	15	36	1	15			

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

The overall federal performance expectation for item 7 'Placement with Siblings' is 90%. Nevada's rating for this item was 97% statewide for CY 2017; therefore, this is an area of strength.

Item 8: Visiting with parents and siblings in foster care

Requirements

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

Statewide policy on case planning requires that a plan for frequent and purposeful visitation with parents and siblings, for the purpose of family preservation, be included in the case planning documentation. Visitation between children and parents, and children and separately placed siblings, must be regular, frequent, and purposeful 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.

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children's Bureau and extended to states for use with their own CQI systems for case reviews.

Table 4.9

Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 8 Visiting with Parents and Siblings in Foster Care	64%			70%			76%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	21	12	7	26	11	10	28	9	15			

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

The overall federal performance expectation for item 8 "Visiting with Parents and Siblings in Foster Care" is 90%. Nevada's rating for this item was 76% statewide for CY 2017; therefore, this is an area needing improvement.

Item 9: Preserving connections

Requirements

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

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children's Bureau and

extended to states for use with their own CQI systems for case reviews.

Table 4.10
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 9 Preserving Connections	83%			83%			73%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	33	7	0	39	8	0	38	14	0			

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

The overall federal performance expectation for item 9 'Preserving Connections' is 90%. Nevada's rating for this item was 73% statewide for CY 2017; therefore, this is an area needing improvement.

Item 10: Relative placement

Requirements

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

Statewide Data

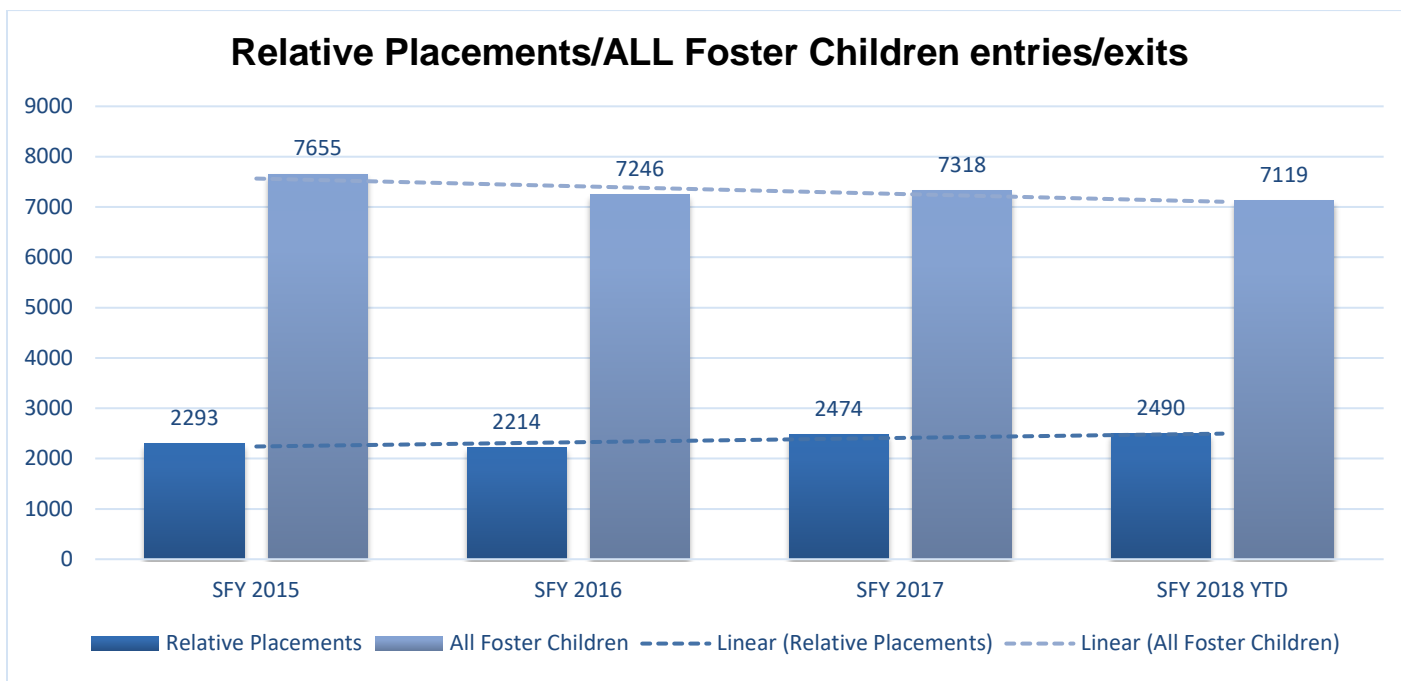


Figure 4.2: Total Relative Placements of ALL foster children entering and exiting care. SFY2015 – SFY2018 YTD (July 1, 2017 – May 31, 2018). Source: CFS723

Figure 4.2 shows a slight decline in the overall foster child/youth population entering and exiting care for Nevada from SFY 2015 through SFY 2018. For the same period, the number of foster children placed with relatives increased each year.

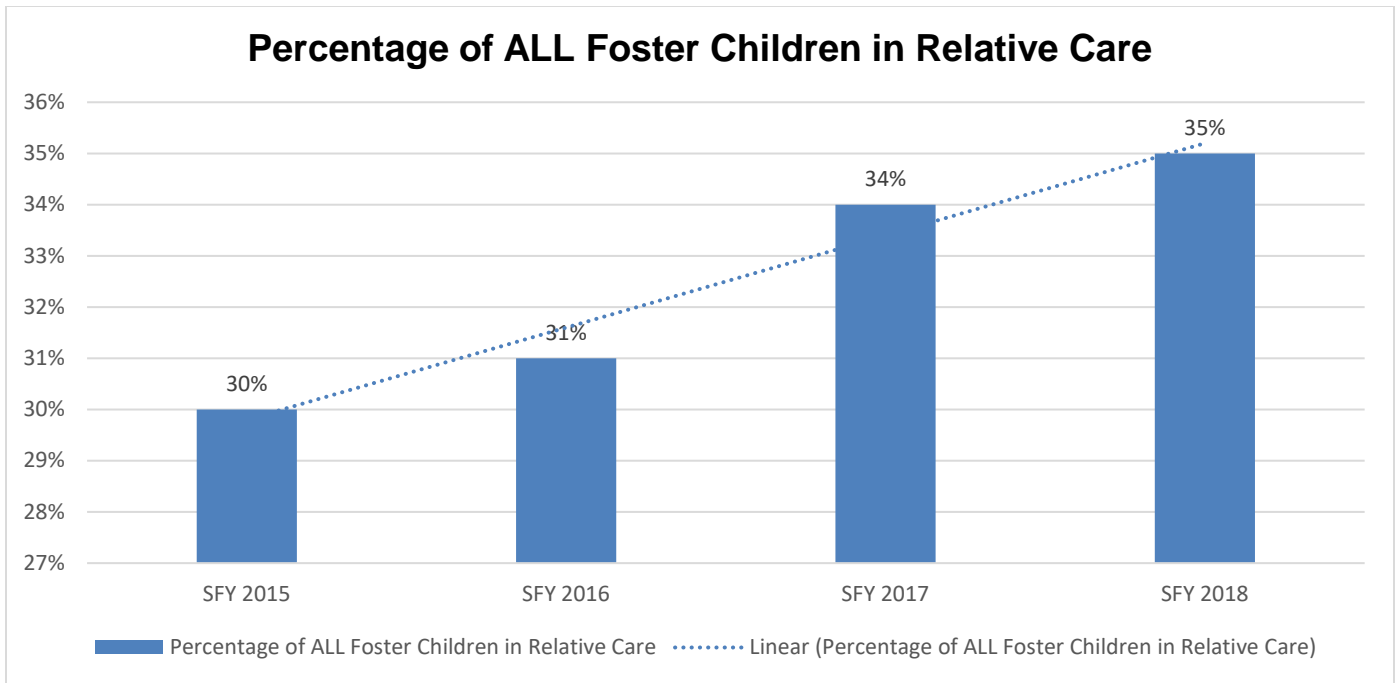


Figure 4.3: Total percentage of foster children with relative placements SFY2015 – SFY2018 YTD (July 1, 2017 – May 31, 2018). Source: CFS 723

Figure 4.3 provides the percentage of foster children living with relatives for SFY 2015 through SFY 2018 YTD. Since SFY 2015 there is a downward trend in this population, with a decrease of 7% from SFY 2015 to SFY 2018. From SFY 2015 to SFY 2018 there has been a 5% increase in relative placements.

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children’s Bureau and extended to states for use with their own CQI systems for case reviews.

Table 4.11
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
Item 10 Relative Placement	69%			53%			62%					
Performance Item Ratings	25	11	4	25	22	0	31	22	2			

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

The overall federal performance expectation for item 10 ‘Relative Placement’ is 90%. Nevada’s rating for this item was 62% statewide for CY 2017; therefore, this is an area needing improvement.

Item 11: Relationship of child in care with parents

Requirements

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

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

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children's Bureau and extended to states for use with their own CQI systems for case reviews.

Table 4.12

Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFR2018		
Item 11 Relationship of Child in Care with Parents	61%			79%			73%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	19	12	9	23	6	18	22	8	22			

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

The overall federal performance expectation for item 11 "Relationship of Child in Care with Parents" is 90%. Nevada's rating for this item was 73% statewide for CY 2017; therefore, this is an area needing improvement.

Strengths/Concerns (Permanency Outcomes 1 & 2)

Nevada is showing strength in the new Federal Data Measures as it relates to Permanency except for Placement Stability. Nevada continues to have strength in the recognition that there needs to be a focus on ensuring placement stability with implementation of QPI and expansion of the focus on redesigning an advanced foster care system through implementation of Advanced Foster Care. These continued initiatives are focused on training and support for foster families. There continues to be concern that Nevada has not met the national performance for Placement Stability for many years. This can be attributed to many issues but not having sufficient foster homes and quality data has contributed to some issues as it relates to placement stability.

For Permanency Outcome 1 there are a variety of issues contributing to a negative performance in this area. Delays by the Agency, and delays by the courts is a contributing factor to this item. Overall, Nevada has improved in the timeliness of adoptions as represented by current state data. However, overall the number of finalized adoptions is decreasing.

Permanency Outcome 2 continues to show strength for placing siblings together and preserving connections for children in foster care.

Section V. CHILD and FAMILY WELL-BEING

Trends in Child and Family Well-Being

Table 5.1
Well-Being Measures-Case Reviews CY 2017

	Performance item Ratings			Outcome Ratings			
	S	ANI	NA	SA	PA	NACH	NA
Well-Being Outcome 1: Families have enhanced capacity to provide for their children’s needs.				35% N=29	34% N=28	31% N=26	N=0
<i>Item 12 Services to child, parents & foster parents</i>	40% N=33	60% N=50	N=0				
<i>Item 12A Needs Assessment and Services to Children</i>	67% N=57	33% N=27	N=0				
<i>Item 12B Needs Assessment and Services to Parents</i>	42% N=27	58% N=37	N=19				
<i>Item 12C Needs Assessment and Services to Foster Parents</i>	74% N=34	26% N=12	N=37				
<i>Item 13 Child and Family Involvement in Case Planning</i>	47% N=38	53% N=43	N=2				
<i>Item 14 Case worker visits with children</i>	55% N=46	45% N=37	N=0				
<i>Item 15 Case worker visits with parents</i>	42% N=27	58% N=37	N=19				
Well-Being Outcome 2: Children receive appropriate services to meet their educational needs.				72% N=44	8% N=5	20% N=12	N=22
<i>Item 16 Education</i>	72% N=44	28% N=17	N=22				
Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.				51% N=40	14% N=11	35% N=27	N=5
<i>Item 17 Physical Health of Child</i>	59% N=38	41% N=26	N=19				

Item 18 Mental/Behavioral Health of Child	59%	41%				
	N=38	N=26	N=20			

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

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children’s Bureau and extended to states for use with their own CQI systems for case reviews. The Child Well-Being measures are embedded in the OSRI. Results from the reviews indicate that Nevada has some work to do towards achieving a better performance for children that are in foster care. However, ensuring that children in foster care receive appropriate services to meet their educational needs remains an area where Nevada does excel over other outcomes.

Child Welfare Agency Progress towards CHILD AND FAMILY WELL-BEING goals identified in the CFSP

STATEWIDE PROGRESS

Progress as it relates to the Statewide Collaborative on Education, Child Welfare and the Courts:

Ensuring that the educational needs of children and youth are met is an objective of the 2015-2019 CFSP. Additionally, the intervention to ensure this objective is met is conducted through a collaborative relationship between the Department of Education, Child Welfare and the Courts in an effort to strengthen educational success for children and youth in foster care. Children that have disruptive placements and move from school to school do not have good outcomes in educational well-being.

The Educational Collaborative among Nevada’s Department of Education (NDE), Clark County Department of Family Services (CCDFS) and School District (CCSD), Division of Child and Family Services (DCFS), Washoe County Human Services Agency (WCHSA) and School District (WCSD), and the courts (the Nevada Education, Child Welfare and the Courts Collaborative) created a statewide committee with the express mission to improve school placement stability and continuity of instruction, specifically reducing the number of school moves and ensuring that if a move is necessary that the transition is eased by making certain that the child’s records are readily available to the new school and that the new school is aware that the child is in foster care. This requires information be shared among the child welfare agency, the school district, and the court.

The Educational Collaborative included Every Student Succeeds Act (ESSA) in Nevada Revised Statutes via Assembly Bill 491. The statewide Educational Collaborative with technical assistance from ABA’s Center on Children and the Law worked collaboratively for over a year on developing the bill draft for this initiative to modify the Nevada Revised Statutes to comply with ESSA and define foster care, school of origin, and immediate enrollment similar to other federal definitions in either Fostering Connections or McKinney-Vento. The resultant bill, AB491, was signed into law. The Collaborative held an educational webinar for school districts and child welfare staff on MOUs between child welfare and school districts concerning best interest decision-making processes and forms, and sample local transportation procedures, and implementing ESSA and AB491. A basic factsheet on ESSA and AB491 was distributed to participants. To help ensure effective implementation of ESSA and the accompanying Nevada bill, AB491, DCFS and NDE sent a joint Letter on Nevada Assembly Bill 491 drafted with the help of the Collaborative. This letter continues academic and social/emotional support for students in foster care, supports that are directly related to both ESSA and AB491 requirements. This letter further demonstrates the partnering relationship among NDE, DCFS, and the courts, and their commitment to the law and continued efforts to safeguard educational stability for students in foster care.

This Statewide Collaborative is also responsible for a pilot project to ensure that foster children are identified quickly by the school district and afforded appropriate services. The WCHSA and the WCSD initiated a Pilot Electronic Information sharing project in which placement date, location and type into the school district’s case management system, Infinite Campus (IC), populate from UNITY (Nevada’s SACWIS). To date the UNITY tab has been created in IC and the bugs are being worked out. At this time WCHSA counselors can view this tab to identify new foster children within the student population. This information has been electronically pushed from UNITY to IC twice per week. They have accomplished a 24-hour automatic update. Updated addresses and custody changes are manually added by school staff and/or the WCHSA Foster Care Liaison.

This means, among other things, that schools will have updated information about foster children, including the fact that these students are in foster care as soon as the information is entered into UNITY and is pushed into Infinite Campus nightly. CIP is exploring pulling Infinite Campus data into its Centralized Case Index, as well.

First data runs comparing foster care students to the rest of the student population were pulled and shared with WCDSS and the Washoe County Commission. These data demonstrate that foster care students are:

- o more likely to be suspended,
- o more likely to move schools,
- o more likely to fail the criterion referenced tests and the high school proficiency tests, and
- o less likely to be on pace to graduate high school than the general population of Washoe County students.

The WCHSA wants to turn these statistics around for children under their care. It received a two-year grant and is nearing the end of the second year of providing educational case management and mentoring support to transition-age foster youth in the “Achievements Unlocked” (AU) program. The effectiveness and efficacy of this intervention is being assessed by the National Council of Juvenile and Family Court Judges (NCJFCJ). The program is using experienced high school counselors to provide educational supports for each foster youth to help guide and motivate them. Data is driving advocacy-related decision making for the students and is being used to measure intervention outcomes.

WCHSA and WCSD have shifted the educational trajectory of students in foster care. Only 50% of foster youth in the U.S. graduate by the age of 18. However, 70% of AU students graduated from high school. “Achievements Unlocked” provides advocacy, tutoring, mentoring, and case management to high school aged foster youth. The National Council of Juvenile and Family Court Judges has completed a two-year process and impact assessment of this project. The results demonstrate that the multi-disciplinary model works. There was a 70% reduction in school moves, 63% of the AU students were on track to graduate compared to only 58% of the control group. AU students attempted and completed more courses and therefore earned more credits, experienced fewer disciplinary actions, and had significantly fewer unexcused absences than the control group.

These data provide definitive information from the second largest county in the state that was only supposition previously. This pilot can be expanded statewide as Infinite Campus has become the case management system (CMS) for the NDE and all the school districts throughout the state.

Information concerning WCSD students who have become foster children is now being pushed twice per week into IC to alert the school district to provide appropriate services and to immediately enroll a child in a new school if the school of origin is not deemed in the child’s best interests. AB491 was fully implemented by December 10, 2017 to comply with ESSA. Infinite Campus in Washoe been modified to create and accept data directly from UNITY. “Achievements Unlocked” has been in place for nearly two years. Funding sustainability is being sought via public education efforts. A two-page public relations piece was developed for distribution at the Nevada Legislature. CCDFS’s Educational Liaison has participated in all Statewide Collaborative Conference monthly calls and also in a subgroup of the Statewide Collaborative. CCDFS also continued to report on CCDFS shared efforts with the Clark County School District (CCSD) including an MOU signed into effect in March 2017. The CCDFS/CCSD partnership and MOU has been discussed as a model in Nevada for joint efforts between child welfare agencies and local education agencies as required and recommended in the ESSA.

The subgroup of the Statewide Collaborative was newly created this year and is focused on creating recommended state practices to implement ESSA requirements. The subgroup is comprised of directors, coordinators, and liaisons from child welfare and school districts in both Clark and Washoe Counties. The two items the subgroup have decided to work on are creating model forms to assist in deciding whether students should stay in their Schools of Origin or attend a new school upon being placed in care or moving foster care placements (called “Best Interest Determination” mandates by ESSA requirements and creating a new Academic Plan mandated by NRS 388.155. As part of its School Stability Policy, CCDFS has created model forms for the Best Interest Determination. CCDFS shared forms with the Statewide Collaborative. The Statewide Collaborative is considering using the forms as the state model.

1. Report Progress of any Agency involvement in the Statewide Collaborative on Education, Child Welfare, and the Courts.
(If applicable)

1. Final revisions and passage of Every Student Succeeds Act (ESSA) and BDR/Bill (AB491) with additional technical assistance from Kristin Kelly, ABA Center on Children and the Law.
2. Ongoing implementation of ESSA to include:
 - a. Statewide Policy on Educational Stability and Best Interest Decision Making per Fostering Connections and ESSA

- b. Collaboration with the Nevada Department of Education and WCSD to conduct a statewide webinar regarding best practices, strategies and lessons learned in the implementation of AB 491 in Washoe County.
 - c. Finalize protocol for shared responsibility of transportation procedures and financial commitment.
 - d. Review of revised MOU between WCSD and WCHSA as it addresses implementation of ESSA guidelines, as a model for other counties to follow
 - e. Collaboration with the Nevada Department of Education, and DCFS to develop and issue a joint letter summarizing the law and outlining the expectations of local child welfare and education agencies.
3. WCHSA has been accepted to the National Association for the Education of Homeless Children and Youth (NAEHCY) annual conference to present on our collaboration with WCSD and how WCHSA are implementing ESSA on a local level.

WCHSA continued to hold quarterly Education Advisory Subcommittee meetings (through the 2nd Judicial Senior Model Court) during this reporting period focused on collaboration for individual educational advocacy, training, policy development, and data sharing. Staff representing the local school district, community college, foster parent association, community service provider (The Children’s Cabinet, Inc.), WCHSA and Dependency Court all participate in this Subcommittee.

The Walter S. Johnson Foundation Career Readiness Project (CCRP) was rebranded as “Achievements Unlocked” (AU) to help promote the program and move toward sustainability. The evaluation conducted by the National Counsel of Juvenile and Family Court Judges (NCJFCJ) found that students who participated in the study attempted and completed more courses, experienced fewer disciplinary actions, had significantly less unexcused absences and were more on track to graduate: improving their college and career readiness by 25% by the end of the second year. At the end of the Project’s second year youth participants stated they received the most encouragement to continue education past high school from their educational advocates and social workers. The majority (85%) stated they were glad they were involved in the program and that grades were important to them. The project also helped move participating students towards graduation. At the onset of the Project, 39% of treatment youth were on track to graduate on time. At the end of the second year, 61% were on track to graduate and 70% of seniors who participated graduated, which is 10% above the graduation rate of all high school foster youth served by WCHSA. A grant application was submitted to sustain this work going forward. This project was completed prior to the reporting period, but due to its success, has been continued.

The three main objectives of Achievements Unlocked are to:

- 1) Improve Educational Stability;
- 2) Improve College and Career Readiness; and
- 3) Improve Educational Outcomes.

Participating youth are assigned an educational advocate and tutor, in addition to having an ongoing case manager to focus on their permanency and well-being and an independent living case manager. This multi-disciplinary team model helps to address academic and vocational barriers, and to promote plans to achieve future aspirations. Two educational advocates, both former high school guidance counselors, have been hired for the program. The educational advocates provided assistance to youth to ensure they are on track to graduate, are enrolled in appropriate classes and are receiving the necessary support services from the school district. The youth are also paired with a tutor that provides weekly services in the home, to reduce barriers such as transportation and supervision.

WCHSA completed efforts to transmit data electronically between WCSA and WCSD. The Agency also implemented policies and procedures to ensure the school district is notified when a child comes into care or changes placements. The Agency continues to have access to the District’s database, Infinite Campus. This has helped streamline access to educational information for children.

DCFS Rural Region recently finalized a Memorandum of Understanding (MOU) with each of the Local Education Agencies (LEA) that serve children in foster care across the state to help ensure the educational stability and success of children in the foster care system and comport with all federal and state laws governing its provisions. These MOU’s will assist Rural Region Child Welfare and the LEA’s ensure that children in foster care placements are provided the necessary services to support their ongoing educational stability as required in Federal and State Education and Child Welfare Laws.

Initiatives to ensure youth who exit care are prepared for adult living:

The DCFS Family Programs Office conducts a monthly statewide Independent Living (IL) conference call to all jurisdictions of the state. A variety of issues concerning IL youth are discussed and shared statewide including policy and practice

issues. Each jurisdiction works towards the successful preparation of youth to exit care. Across the State I.L. Case Managers meet with youth prior to the youth turning 18 and complete transition plans for their on-going needs. It was decided that the scope of CCDFS's Educational Liaison's work for 2017-2018 would be to procure educational interventions to children in care, specifically focused on increasing the graduation rates and preparing for college and career readiness of our children in secondary school.

Over this reporting period CCDFS has been involved in several initiatives to provide support to youths exiting care to help prepare them for independent living. One initiative is working in partnership with UNLV's School of Social Work, Clark County Social Services' Step-Up Program, and other community stakeholders to begin identifying some of the challenges foster youth wanting to attend college face and challenges for foster youth, caregivers, and case workers in knowing what it will take to qualify for college. CCDFS are organizing an event for middle school age foster youth to share information about what it will take to go to college as well as resources that are available to them to support them in their goals. Our Educational Liaison and Manager over the Independent Living Units have been working with the above partners to identify those students who seem to be college bound and bringing DFS and CCSD resources to the event.

A second initiative CCDFS have spearheaded is bringing together CCSD, CCDFS, and community stakeholder agencies to discuss educational interventions services for youths to help remove barriers to graduation and help provide college and career readiness. CCDFS initiated meetings between CCDFS, CCSD, Legal Aid Center's Children's Attorney Project/Special Education Program, Step Up, and CASA to discuss the possibility of providing all secondary students with educational mentors and identifying educational supports for children who are struggling on typical campuses. CCDFS set up meetings where CCSD's Safe School Professionals (Mental Health Social Workers), Educational Mentorship Program, and Alternative/Adult Education Departments present to the stakeholders above for better understand of what supports CCSD can offer our children.

CCDFS are also investigating Washoe County's Educational Mentorship Program that has increased their graduation rates and school success dramatically. CCDFS are hoping to bring such a program to Clark County and allocate resources/partnerships to support this cause. CCDFS are meeting with community resources to obtain such support in upcoming months.

Besides the initiatives above, CCDFS are in the process of implementing new and updating several Policies and Procedures (P&Ps) involving the education of youths in foster care. CCDFS are in the process of finalizing our School Stability and Educational Passport P&Ps. CCDFS believe these P&Ps will provide much support for our children educationally. The School Stability P&P will help ensure both legal compliance and best practices to keep children in their School of Origins unless it is not in their best interest to do so. As an agency, CCDFS will maintain educational stability while a permanency plan is worked out for our children. CCDFS will also be providing caregivers with an Educational Passport when a child is placed in their home. The Passport will contain school records, a guide for understanding school records, and an educational intervention sheet that identifies any potential school issues and gives advice on how to address them.

The DCFS Rural Region continues to be involved with community partner agencies, including Rural Counseling and Supportive Services, and Rural Regional Centers to participate in the development of plans and for coordinating services of minor children, as well as to develop transition plans to adult services for those children reaching the age of majority who will need a supported living arrangement as an adult.

ASSESSMENT OF PERFORMANCE in CHILD AND FAMILY WELL-BEING

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

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

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

Requirements

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

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

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children's Bureau and extended to states for use with their own CQI systems for case reviews.

Table 5.2
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 12 Identifying Needs and Services to Child, Parent and Foster Parent	50%			44%			40%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	33	33	0	33	42	0	33	50	0			

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

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 12 A Needs Assessment and Services to Children	75%			76%			67%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	50	16	0	57	18	0	57	27	0			

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

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 12 B Needs Assessment and Services to Parents	55%			47%			42%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	33	27	6	28	32	15	27	37	19			

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

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 12 C Needs Assessment and Services to Foster Parents	74%			73%			74%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	28	10	28	32	12	31	34	12	37			

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

The overall federal performance expectation for item 12 and subparts A, B, C “Needs Assessment and Services to Children” is 90%. Nevada’s rating for this item was 40% (overall item 12) statewide for CY 2017; therefore, this is an area needing improvement.

Item 13: Child and family involvement in case planning

Requirements

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

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

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children’s Bureau and extended to states for use with their own CQI systems for case reviews.

Table 5.3
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 13 Child and Family involvement in Case Planning	42%			47%			47%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	28	38	0	34	38	3	38	43	2			

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

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’s rating for this item was 47% statewide for CY 2016; therefore, this is an area needing improvement.

Item 14: Caseworker visits with child

Requirements

In accordance with 45 CFR 1355.20, and NRS 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 (or other responsible party) 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).

Statewide Data

Nevada has two methods for the evaluation of progress toward this item. The first measurement is a compliance report extracted from UNITY that counts the number of visit months expected during a period under review, and then determines the number of visit months during the period under review in which at least one qualifying visit occurred. This data report provides administration with an evaluation of compliance toward a projected goal, however questions regarding the quality of visits cannot be answered by this report alone, and the data report only captures case worker visits with foster children. To evaluate the quality of visits between caseworkers and children, including those children served in their homes, Nevada conducts case reviews throughout the State. A randomized stratified sample of 65 cases across all child welfare agencies is reviewed annually.

Nevada has the capability, within the SACWIS to generate a data report that collects caseworker visit data. This data and State performance is calculated using the methodology as outlined in Program Instruction (PI) ACYF-CB-PI-12-01. States are instructed to measure caseworker visit compliance by “taking the number of monthly visits made to children in the reporting population and dividing that number by the number of such visits that would occur during the FFY if each such child were visited once per month while in care.” This value is represented as a percentage.

Table 5.4-Promoting Safe and Stable Families (PSSF) Data

Compliance of Monthly Case Worker Visits with Children FFY 2017 (October 01, 2016 to September 30, 2017)

(PSSF): Case Worker Visit with Children monthly (FFY2017)	Compliance Rate	NV Goal	Goal Met
Statewide	94%	95 %	No
CCDFS	94%	95 %	No
WCHSA	93%	95.0%	No
DCFS Rural Region	93%	95 %	o

Source: UNITY CFS 7D7

Table 5.4 presents the results for the State’s compliance with the monthly case worker visit requirement for Federal Fiscal Year 2017 (October 01, 2016 to September 30, 2017). The federal standard was **NOT** met statewide in FFY 2017 at 95%.

Table 5.4A-Promoting Safe and Stable Families (PSSF) Data

(PSSF) Case Worker Visit with Children in the residence (FFY2017)	Compliance Rate	NV Goal	Goal Met
Statewide	90%	50%	Yes

Table 5.4(A) presents the results for the State’s compliance with visits with children in the residence. The federal standard **WAS** met statewide in FFY 2017 at 90%.

Table 5.5- Promoting Safe and Stable Families (PSSF) Data

Compliance of Monthly Case Worker Visits with Children FFY 2018 (October 1, 2017 to May 31, 2018 YTD)

(PSSF) Case Worker Visit with Children	Compliance Rate	NV Goal	Goal Met
Statewide	94%	95 %	No
CCDFS	94%	95 %	No
WCHSA	94%	95 %	No
DCFS Rural Region	94%	95 %	No

Source: UNITY CFS 7D7

Table 5.5 illustrates the State’s compliance with this expectation during FFY 2018 for YTD. Please note that as of this reporting only 8 months of data for FFY18 is available (October 1, 2017 to May 31, 2018)

To gain a more comprehensive understanding of the quality of case worker visits with children, both in foster care and in their family homes, Nevada continues to conduct case reviews of a sample of cases representing each child welfare agency and accounting for the unique case mix across the State. Unlike the data reports generated from SACWIS, QICR results include an evaluation of quality in addition to one of frequency. To evaluate the quality and frequency of caseworker visits with children reviewers are instructed to consider if the quality and frequency of face-to-face visits were sufficient to promote child safety, permanency, and the achievement of case plan goals. If it is the judgment of the reviewers that even though the case worker visited with the child at least once per calendar month, and the child needed more frequent visits from the caseworker, but the caseworker did not visit more frequently, this item must be rated as an “area needing improvement”.

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children’s Bureau and extended to states for use with their own CQI systems for case reviews.

Table 5.6
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 14 Caseworker Visits with Child	58%			64%			55%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	38	28	0	48	27	0	46	37	0			

The overall federal performance expectation for item 14 “Caseworker Visits with Child” is 90%. Nevada’s rating for this item was 55% statewide for CY 2017; therefore, this is an area needing improvement.

Statewide Efforts to Improve Caseworker Visits with Children

Caseworker Visits with Children is a standing agenda Item for the Statewide Quality Improvement Committee. The DCFS Family Programs Office provides the child welfare agencies monthly data on caseworker visits with children to improve performance. Additionally, the DCFS Family Programs Office is working with DCFS IT to provide exception reporting that can inform the child welfare agencies which children have not been seen.

Clark County Department of Family Services continues to track frequency of case worker contact through data dashboards and in-house data reporting. The CQI team supports regular synchronization of UNITY data to various reports, report cards and management dashboards. During the past reporting period the CQI team has also developed additional data reports to capture instances of “missed visits” so that supervisors and managers can more quickly determine when workers are not completing caseworker monthly visits and therefore provide prompt direction. Likewise, the report menu also includes reports to indicate when there a lag of greater than 35 days between home visits and child contacts.

The PCFA and PCPA are completely implemented throughout the department. These tools help to focus caseworker contact onto those activities that are more likely to promote engagement, assessment of child safety, provide an environment that is conducive to case planning and encourage family participation in services. Supervisory oversight requirements associated with SIPS combined with CCDFS policy; which requires supervisors to observe their staff in the field on a quarterly basis and provide monthly one on one consultation. This schedule of regular supervisory review and oversight of worker visits should work to improve frequency and quality of caseworker visits.

Monthly supervision meetings between permanency staff and their supervisors. Supervisors continue to provide monthly supervision with permanency workers, or 7 and 21 days with investigators. During these supervision sessions, workers and supervisors describe the quality of the contact and are able to receive feedback, advice or coaching regarding how to improve contact and visits with children and parents if needed.

The Washoe County Human Services Agency is performing the following activities for improvement.

1. WCHSA management has focused attention on caseworker frequency and quality of visits through analysis of reports including a UNITY report created by WCHSA documenting child/worker visits and a department eligibility report analyzing allowable activities. This report was created to determine specific months with missing child contacts and provided the Agency a more efficient tool to ensure visits were occurring and being documented appropriately per caseworker. The Agency also assessed the quality of visits as captured in case notes through fidelity reviews in all program areas.
2. Staff are assigned to visit youth in out-of-state facilities on a monthly basis to ensure clinical plans are meeting the needs of the youth, to maintain the Agency’s connection to the youth, and to ensure children remain safe in their placements. Youth placed in out-of-state facilities are co-assigned a child welfare caseworker and clinical care manager ensuring continuity of services to the youth.
3. Caseloads remained high during the first half of the reporting period but have recently decreased. Title IV-B funding continued to offset costs associated with staff overtime to visit youth after hours or for documenting child contacts.
4. CQI staff continues to participate in a statewide workgroup to update the policy concerning child visits to ensure staff are assessing the child’s well-being and ensuring proper services are in place on a regular basis. This statewide policy is currently pending approval at the state level.
5. A fleet of vehicles is available to staff as well as mileage reimbursement to ensure child contacts can be made.

6. Performance Improvement Plans are implemented for staff who do not meet the child contact requirements.
7. Unit funds are available for staff to purchase meals or activities to promote child centered, age appropriate visits between the caseworker and child.
8. The Agency developed mandatory training to staff on the frequency and quality of child contacts. A specific focus of that training included conducting quality assessments during child contacts that address the safety, permanency and well-being of the child each month.

The DCFS Rural Region monitors the data associated with both in and out of state monthly visits closely. Incentives are awarded to staff who reach 95-100% compliance each month. DCFS has utilized funds from the IVB Caseworker Visit grant to hire a contractor to ensure monthly visits are occurring in rural offices where the DCFS Rural Region had a 50% vacancy rate in casework staff over the past year. Additionally, over the past year DCFS has hired contractors to perform quality monthly caseworker visits when children in care are placed at an out of state residential treatment center.

The quality of caseworker visits continues to be an area the DCFS Rural Region strives to improve in. Recently, through a QPI foster parent survey, DCFS received feedback from foster parents that indicated they did not understand the purpose of the monthly caseworker visit. As a result, a collaboration between the agency and a foster parent was created to develop a, *Maximize Monthly Visits* “cheat sheet” for foster parents and staff. It prompts the foster parent to be prepared to discuss topics the caseworker will be asking about. For example, How the child is adjusting to placement, educational, medical, mental health needs and services updates, upcoming child appointments. It also provides prompts for questions foster parents may want to ask the caseworker, some of which include; Do you have any additional expectations from our family? Has any additional information surfaced about the child’s history that may assist us in parenting the child? Are there any concerns about the care the child(ren) are receiving in our home? If yes, how can DCFS address those concerns? What resources are available to the foster family? Are there any changes to the visitation schedule, Child and Family Team meeting dates or court hearing schedule? How involved is the biological family and where are the child’s siblings? Are there any plans to move the child(ren)? Training of foster parents and child welfare staff around the Maximizing Monthly Visit tool is currently occurring.

Item 15: Caseworker visits with parents

Requirements

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

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children’s Bureau and extended to states for use with their own CQI systems for case reviews.

Table 5.7
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFR2018		
Item 15 Caseworker Visits with Parents	44%			38%			42%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	27	34	5	23	37	15	27	37	19			

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

The overall federal performance expectation for item 15 “Caseworker Visits with Child” is 90%. Nevada’s rating for this item was 42% statewide for CY 2017; therefore, this is an area needing improvement.

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

Item 16: Educational needs of child

Requirements

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

NAC 432B directs agencies to address the educational needs of children in custody. These codes direct agencies to complete a family assessment which is to include the educational needs of the child (NAC 432B.1364). NAC 432B.400 directs that every case plan for a child receiving foster care will include the following: A statement indicating the proximity of the school in which the child is enrolled at the time that they were placed in foster care and if it was considered as a factor in the selection of the placement for foster care; that the case plan include education records, to the extent available, containing the names and addresses of those educational providers; the grade level at which the child performs; and such other educational information concerning the child as the agency determines necessary. NAC 432B.230 directs the child welfare agencies to establish interagency agreements with related agencies including schools, to ensure that cooperative and mutually facilitative services are provided to children and families.

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

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children's Bureau and extended to states for use with their own CQI systems for case reviews.

Table 5.8
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 16 Educational Needs of Child	76%			84%			72%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	34	11	21	46	9	20	44	17	22			

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

The overall federal performance expectation for item 16 'Educational Needs of Child is 90%. Nevada's rating for this item was 72% statewide for CY 2017; therefore, this is an area needing improvement.

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

Item 17: Physical Health of child

Requirements

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

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

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

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children’s Bureau and extended to states for use with their own CQI systems for case reviews.

Table 5.9
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 17 Physical Health of Child	75%			77%			59%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	38	13	15	44	13	18	38	26	19			

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

The overall federal performance expectation for item 17 “Physical Health of Child” is 90%. Nevada’s rating for this item was 77% statewide for CY 2016; therefore, this is an area needing improvement.

Item 18: Mental/behavioral health of child

Requirements

In keeping with the federal statutory framework, Nevada statutes state that one of the key purposes for DCFS to plan and coordinate the provision of services for the support of families to maintain the integrity of families and ensure that children are not unnecessarily removed from their home. This includes providing counseling, training, or other services to families, even if a report of abuse or neglect is received, but it is determined that an investigation is not warranted at the time. NRS

432.011 further addresses the coordination and provision of services to children and families who need assistance relating to the care, welfare and mental health of children.

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 0209.0 - 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 psychiatric care.

Statewide Data

In 2015 Nevada began using the new Online Management System (OMS) developed by JBS for the Children’s Bureau and extended to states for use with their own CQI systems for case reviews.

Table 5.10
Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017			CFSR 2018		
Item 18 Mental/Behavioral Health of Child	71%			71%			59%					
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA	S	ANI	NA
	35	14	17	36	15	24	38	26	20			

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

The overall federal performance expectation for item 18 “Mental/Behavioral Health of Child” is 90%. Nevada’s rating for this item was 71% statewide for CY 2016; therefore, this is an area needing improvement.

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

For Well-Being Outcome 1 Assessment and Provision of Services continues to be an area of needed improvement. Specifically, engagement of father’s in identification and provision of services. Identifying social and emotional needs of children is difficult for workers to critically think about other than those needs that are educational or medical in nature. Caseworker visits with children (quality) continues to be an area of needed improvement. While frequency of caseworker visits was met at 95% for FFY 2016 Nevada continues to struggle with maintaining caseworker visits at a 95% frequency. Caseworker visits with parents (mothers and fathers), while improved, continues to be an area of needed improvement and this is attributed to not consistently engaging mothers and specifically fathers.

For Well-being Outcome 2 and 3 there is a lack of adequate Assessment and Provision of Services.

Nevada has been able to collect case review information on all Well-being Outcomes 1,2 and 3 during CY 2015 as presented here during the reporting period, and all Outcomes based on Case Review data are an area needing improvement.

Section VI. SYSTEMIC FACTORS

ASSESSMENT OF PERFORMANCE

Each of the performance indicators listed in this section mirrors the 18 systemic factor items from the Federal Statewide Assessment Instrument. The overall structure for each performance outcome/indicator includes the legal requirements for each item and to the extent applicable, the most recent Federal data profile, previous CFSR data/information, most recent case review data or relevant state data, and, if available, the most recent stakeholder survey/focus group data/information.

Systemic Factor A: Statewide Information System

Item 19: Statewide information system

Requirements

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

Statewide Data

On March 6-10th, 2006 staff of the Children's Bureau, ACF Region IX, and the office of Information Services (OIS) conducted an Assessment Review of Nevada's AFCARS. The AFCARS data used for the review was from the report period April 1-September 30, 2005. At that time the State of Nevada and ACF entered an AFCARS improvement plan. Nevada continues to work with the Children's Bureau on the AFCARS improvement plan.

Additionally, in September 2015 the Children's Bureau conducted a monitoring review of Nevada's SACWIS system, named the Unified Nevada Information Technology for Youth (UNITY). This was not a comprehensive SACWIS compliance review, but the review did focus on improvements to the system, including the upgrade of UNITY to a .NET software framework (UNITY 2) and subsequent enhancements to UNITY in .NET (UNITY 3). The focus was on technical issues regarding financial processing and tracking of income received by the state for children in foster care. The review categories included strengths, critical issues, concerns and technical assistance. It was recommended that Nevada include strategies to address any issues identified in reporting through the Advance Planning Document (APD) Updates. Please refer to the Nevada Site Visit Report Summary-September 2015 for details of this review.

As of May 2018, Nevada continues to work with ACF on issues related to the 2006 AFCARS improvement plan. Specifically, there are some data items in AFCARS which can be improved through AFCARS extract code changes, and many of those extract codes are in development and or are being reviewed. A data quality plan was requested by ACF at that time, and Nevada is working on an AFCARS Data Quality Plan.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 40.

How well is the statewide information system functioning statewide to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care?

Please provide relevant quantitative/qualitative data or information that show the statewide information system requirements are being met statewide.

State Response:

Nevada has determined this item to be a strength. During the 2009 CFSR, the Statewide Information System did not function at a minimal standard to readily identify the status, demographic characteristics, location, and goals for the placement of every child who is or was in foster care. As a result, DCFS took measures to identify gaps to improve the Statewide Information System functioning, and for this item the system is functioning statewide that ensures identification of the status, demographic characteristics, location and goals for placement of every child whom has been in care for the preceding 12 months.

The Statewide Information System known as the Unified Nevada Information Technology for Youth (UNITY) was slow, was not user friendly, was difficult to use and was often down. The Program Improvement Plan (PIP) in 2009 identified that this systemic factor was to be addressed during the PIP implementation specifically under Primary Strategy (5) of the PIP which focuses on "Expanding Service options and creating flexibility for services to meet the needs of children and families."

Since that time, UNITY was converted to a web-based application to improve accessibility. The web technology expanded the number and types of external entities that can access UNITY, which set the stage for future implementation of mobile applications and is better accessible to case workers performing duties in the field. UNITY 2.0 has been fully implemented to improve navigation and enhance data entry capabilities to improve user experience, promote timely, accurate, and complete data entry. Information Management Services (IMS) provides frequent updates to UNITY. In 2015, updates were provided January, February, March, August, and December. In 2016, updates were provided March, May, July, August, and October. In 2017, updates were completed January, February, April, June, September, and October. UNITY has a guide on "how to use UNITY," and a manual that includes step by step instructions explaining how to complete various tasks in UNITY. UNITY is now able to prompt the user to enter child demographic information and to update and/or validate expired data elements such as custody status, placement location, and/or permanency goals.

UNITY has many quality assurance mechanisms to ensure that data elements for item 19 are entered in UNITY correctly. Features such as drop-down lists and radio buttons ensure that only proper values for some data elements are entered. Window and other edits ensure that data entered is consistent with other related data. Window edits also ensure that mandatory data elements are entered. UNITY's missing data functionality generates alerts when certain data elements have not been entered or when certain tasks have not been completed in a timely manner. UNITY has the capacity to provide reports to system users regarding all functions that the system supports. The state collects and sends out regular error reports for AFCARS, NCANDS, and NYTD. AFCARS and NCANDS error reports are sent out monthly and NYTD error reports are distributed as needed during the data clean up phase prior to submission. Reports can be developed at the child or case level for program and case management that cover services provided to children, their status, demographics, location, and permanency goals. IMS supports the agency by responding to ad hoc data requests and requests for new, standard reports. Staff can search for children online and access reports through UNITY by program, area, jurisdiction, and location.

While the system has improved over time as it relates to navigation there are still issues with the quality of the data due to data not being entered correctly or timely to provide better reporting. Additionally, data is not being entered consistently which causes validity of the data extracted to be in question. While progress is being made there continues to be reports that are broken or not designed correctly and this is addressed in item 25 'Quality Assurance'.

1.) Is the system functioning statewide to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is in foster care?

The system does rely on data input by staff and continued oversight by administration, to provide adequate data, and can identify the status, demographic characteristics, location, and goals for the placement of every child who is or was in foster care. On December 1, 2017, Family Programs Office (FPO) extracted an AFCARS report to validate that UNITY can readily identify status, demographic characteristics, location, and goals. The population for review included all children who had 15 to 17 months of out-of-home placement and had an active out-of-home placement for any amount of time in the federal fiscal year of (FFY) 2017. The total number of children who fit the criteria amounted to 561 (410 in Clark, 96 in Washoe, and 55 in Rural Counties). The timeframes ensured the collection of data would be specific to FFY 2017. To maintain a

95% confidence level and a margin of error of 5%, 229 youth were sampled for review. Stratification was applied based on the jurisdiction proportions above to ensure adequate representation for each (167 for Clark; 39 for Washoe; and, 23 for Rural) with a parameter of greater than or equal to 456 days and less than or equal to 517 days in out-of-home care. Each child was subsequently assigned a random number in Excel and each list was re-sorted in ascending order. The lowest numbers were chosen for the sample based on the stratification outlined above.

Overall, 191 children out of 229 children in foster care were identified as Hispanic or Non-Hispanic (**Table 19.1**). Upon intake the 38 remaining children were either very young, severely disabled, no person was available to identify the child's race, or the parent, relative, or Guardian was unwilling to identify the child's race. This sample size was for children in care from 15-17 months and the data suggest the Hispanic or non-Hispanic data element was never updated through the life of the case. All 229 children were identified as American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, or White (**Table 19.1**). All placements, goals, and legal status were identified for all 229 children (**Table 19.1**).

Table 19.1

Jurisdiction	# Children	Hispanic or Non-Hispanic	Other Race	Placement	Goals	Legal Status
Statewide	229	94% (38)	100%	100%	100%	100%
Rural	23	95% (5)	100%	100%	100%	100%
Washoe	39	92% (5)	100%	100%	100%	100%
Clark	167	94% (28)	100%	100%	100%	100%

IMS was presented with the data outcome of the Hispanic or non-Hispanic population and identified that if person's ethnicity is unknown at the time of person record creation in UNITY, staff may select 'declined to answer.' For AFCARS and NCANDS reporting, "declined to answer" is mapped to the value of "unable to determine." IMS reports the state consistently has between 18 – 23% of person records reported to NCANDS with an "unable to determine" ethnicity. The state has identified 'unable to determine' values may not only be connected to those very young, severely disabled, or no person was available to identify the child's race, but lack of record update when the facts become available. Modifications to UNITY can be considered for UNITY 3.0 to improve the data outcome of Hispanic or Non-Hispanic population.

AFCARS error reports flags issues with permanency goals and placement locations. These errors are monitored through the state and among the child welfare agencies. IMS reports 11 of 6103 (0.18%) of placement location fields are incorrect. It is difficult to estimate the percentage of incorrect fields, unless it is gathered through a qualitative case review process. Supervisors can rely on the data to show location of children in foster care if data entry continues by staff. The placement location data reflects what is entered into the system by users or auto populated by a service authorization created by the user. Service Authorizations prompt payments to a foster parent, which auto populates the foster parents address in the location directory. To ensure the address is accurate, the [NAC 424.475](#) requires a foster parent to notify a licensing authority representative before moving from one home to another, the state contacts the foster parent yearly, and the state requires a relicensing process every two years.

IMS reports 9 out of 6103 (0.15%) percentage of state (in foster care or not) fields are incorrect or blank. The only way to determine a percentage of incorrect status fields would be by doing a comparison of paper files and the electronic case record in a qualitative case review process. IMS reports 673 of 6103 (11.03%) of permanency goals are incorrect or blank. The problems with blank case plan goal fields are due to lack of timely supervisor approval of case plans. For instance, AFCARS only picks up the goals from supervisor-approved case plans. The data is entered into the system but won't be reported to AFCARS without the supervisor approval. An accurate percentage of incorrect goal fields could probably only be determined by the qualitative case review process. IMS also reports 7 of 6103 (0.11%) of demographic data fields are incorrect or blank.

Systemic Factor B: Case Review System

Item 20: Written case plan

Requirements:

In accordance with the requirements of the Adoption and Safe Family Act of 1997 (ASFA) 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 that identifies barriers to the provision of a safe environment for the child, clarifies responsibilities of the case participants involved to help overcome those barriers and defines the goals of the case, including step-by-step actions each participant must take in a designated timeframe covered by the 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 within a period of time, 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 safe guard the child. Case plans should help the parents improve their protective and caregiving abilities while being flexible to allow for changes in circumstances or the situation of the family or service availability based upon an on-going evaluation of the best interest of 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.

Statewide policy 0204 "Case Planning" requires that all cases open for on-going services must have a written case plan and that the plan must be developed in cooperation with family and children (when appropriate). This is accomplished by convening a child and family team (CFT) to make decisions regarding the desired outcomes, and then selecting goals, actions and timelines aimed to bring about the desired outcomes. Case planning is a family-centered process that identifies family strengths and resources to assist the family or other caregivers in enhancing protective capacity and improving overall family functioning. Protective Capacity Progress Assessments (PCPA) and Protective Capacity Family Assessments (PCFA) has been introduced in WCHSA since 2014. The PCFA provides the framework from which the parent case plan and service agreement is drafted by meetings with the family. The PCPA monitors case plan progress and requires ongoing meetings with the family. The PCFA and PCPA has been fully implemented. is intended to be fully implemented by SFY 2018.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 43.

How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child's parent(s) and includes the required provisions?

Please provide relevant quantitative/qualitative data or information that shows each child has a written case plan as required that is developed jointly with the child's parent(s) that includes the required provisions.

State Response:

Nevada has determined this item to be an Area Needing Improvement. Written case plans are completed with required provisions, however, not created jointly with the child's parents as the safety model is designed. Nevada adopted revised statutes 432B.540, 553, and 580, in accordance with the requirements of the Adoption and Safe Family Act of 1997 (ASFA), 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. Included is the 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 within Nevada have a written case plan that identifies barriers to the provision of a safe environment for the child, clarifies responsibilities of the case participants involved to help overcome those barriers, and defines the goals of the case. This includes step-by step actions each participant must take in a designated timeframe covered by the 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, including who is responsible for each action item. Case plans must be case specific and related to each family’s individual situation, resources and capacities, as well as safe guard the child. Case plans should assist the parents in improving their protective and caregiving abilities while being flexible to allow for changes in circumstances or the family situation. Service availability is considered based upon an on-going evaluation of the best interest of 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. Case planning is a family-centered process that identifies family strengths and resources to assist the family or other caregivers in enhancing protective capacity and improving overall family functioning.

Statewide policy 0204 “Case Planning” requires that all cases open for on-going services must have a written case plan and that the plan must be developed in cooperation with family, children (when appropriate), and any natural supports named by the family. The Child Welfare Agencies hold Child and Family Team (CFT), Protective Capacity Progress Assessment (PCPA), and Protective Capacity Family Assessments (PCFA) meetings to make decisions regarding the desired outcomes, goals, actions, and timelines. The PCFA provides the framework from which the parent case plan and service agreement is drafted. The PCPA monitors case plan progress and requires ongoing meetings with the family.

Statewide Data

Nevada has continued to conduct Quality Improvement Case Reviews (QICR) regarding the child and parent’s involvement in case planning, which is related to item 13. Item 13 determines the frequency and quality of child(ren) and family engagement in case planning. For Item 20, only the frequency and quality of the parent’s engagement is assessed. For FFY 2017, the mothers were engaged 64% and the fathers were engaged 49% of the time (**Table 20.1**).

Table 20.1 Statewide Quality Improvement Review Data

Performance Item	QICR 2015			QICR 2016			QICR 2017		
Item 13 Child and Family involvement in Case Planning- Mother	66%			63%			64%		
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA
	40	20	6	35	21	16	38	21	22

Performance Item	QICR 2015			QICR 2016			QICR 2017		
Item 13 Child and Family involvement in Case Planning- Father	56%			48%			49%		
Performance Item Ratings	S	ANI	NA	S	ANI	NA	S	ANI	NA
	20	16	30	19	20	33	20	21	40

UNITY Sampling

The same data sample was used as described in Item 19 for Item 20. Written case plans are completed statewide 100% of the time and written case plans accurately reflected case plan goals 90% of the time statewide in UNITY at the time of the data draw (**Table 20.2**). The state continues to provide AFCARS error reports to each child welfare agency to ensure written case plans are being entered in the UNITY system.

Table 20.2 Statewide Written Case Plan Data

FFY 2017	Number of Cases	Written Case Plan	Accuracy
CCDFS	167	100%	92%
WCHSA	39	100%	95%
DCFS Rural Region	23	100%	70%
Statewide	229	100%	90%

Stakeholder Interview Information

Focus groups were conducted statewide in June of 2016 and October 2017. In June 2016, stakeholders included caseworkers and youth individually with each county separately. In October 2017, stakeholders included 3 biological parents and supervisors participated in one meeting statewide. Stakeholder questions targeted both Item 13 and Item 20.

June 2016

- **Washoe County Human Services Agency case workers** expressed concern that the case planning process, particularly the initial case plan, did not have the level of parental involvement that they believed it should, which they attributed primarily to two barriers. The first barrier was the timing of completion of the initial case plan: 45 days from placement in Out of Home Care (state policy) the case plan must be completed—this does not fit with what the current SAFE model requires in way of case planning. They further indicated that the timeframe within which the case is transferred from Investigation to Permanency (1-2 weeks) only leaves the case worker approximately one month to complete the initial case plan. The SAFE model requires multiple meetings with parents, as well as input with other stakeholders in the case—it is simply unreasonable to expect that all that the model requires workers to do in the way of case planning can be done with fidelity to the model. The second barrier was related to the fact that the agency is in a period of transition from facilitator-generated team meetings to case-worker generated team meetings. So, the case worker now has a dual role to organize, facilitate, and record team meetings, which are case planning meetings. Workers expressed that this change to multiple demands does compromise their ability to give the level of focus they would like to give to parents' and children's involvement in the case planning/team meeting process. The consensus of the Washoe caseworker group was that the issues discussed above lead to an initial case plan that is less than highly case and child specific. However, the consensus of the group was that in the long run they do effectively engage children, as developmentally appropriate, and parents in the ongoing case planning process. The concerns expressed relate primarily to the initial case plan.
- **Clark County Department of Family Services case workers** indicated that they believed that their implementation of the team meeting process helped ensure that parents had a significant voice in the case planning process. However, some caseworkers understood that the new practice model was parent-centered, and the process did not encourage participation of children or provide guidance concerning the participation of children. Additionally, caseworkers expressed concern about restrictions imposed on modifying case plans when new problems emerged or were identified after the initial case plan; these restrictions are related to their court processes associated with concerns identified in the original petition.
- **DCFS Rural Region case workers** indicated that they were including children, as developmentally appropriate, making provisions to have team meetings outside of school hours, and involving parents in the case planning process on a consistent basis. One of the regional offices spoke to a process that included involving both the Investigation and Permanency worker at the onset of the case. This involved the initial child and family team meetings with the parents, prior to case transfer. They believed this process of including both workers at the onset of the case made for more consistent involvement by parents.
- **A state-wide focus group of foster youth** indicated that they were not involved in the case planning process, that case plans were essentially 'generic' and handed to them. Some youth indicated that the frequency of changes in case workers negatively impacted their involvement in the case planning process to the point that some youth reported refraining from engaging in a relationship with their case worker, anticipating that they would not be around long.

October 2017

- **Biological Parents** indicated there was no initial case plan meeting prior to receiving a typed-up case plan for any of the parents and denied it was a collaborative approach. Each parent reported they received a finished product and requested to sign the written case plan.
- **Supervisors** statewide reported the PCFA process requires engagement with the family and is helpful. Though the timeframes are difficult to meet because workload is high, impacting the quality of work. The design of a Nevada Initial Assessment (NIA) does not include the evaluation of a non-custodial parent; therefore, the workers are having to focus on evaluating who is in the child's residence. Another concern is the caseworkers are taking the mother's word that the father is not involved. The supervisors agree that more diligent efforts are needed to find and engage non-offending parents in services. There is push back from caseworkers on engaging clients that are in prison and engaging both parents. Supervisors find it challenging to teach caseworkers the value of reaching out to all parents/family members.

Item 21: Periodic reviews

Requirement

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.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 43.

How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?

Please provide relevant quantitative/qualitative data or information that show a periodic review occurs as required for each child no less frequently than once every 6 months, either by a court or by administrative review.

State Response:

Nevada has determined this item to be a Strength. Statewide for Nevada because qualitative and quantitative data supports periodic reviews are occurring no less frequently than once every 6 months. For FFY 2017, the same data collection and methodology was followed as described in Item 19. NRS 432B.580 mandates the court to conduct a hearing at least semiannually and within 90 days after a request by a party to any of the prior hearings. The court may also enter an order directing that the placement be reviewed by a panel of at least three persons appointed by the judge (NRS 432B.585). The contents of the hearing must include evaluations and assessments of progress in carrying out the case plan goals for the child in care (NAC 432B.420) and address ASFA requirements on reasonable efforts. DCFS Policy 0206, Court Hearing Notification, further ensures that foster parents and other care providers are afforded the right to be heard in review hearings with respect to children in their care and to offer information about the services received by the child and family.

Sampling Methodology

Item 19 section provides details on sampling methodology, including the sampling process.

Data Collection:

- **Periodic:** For each of the cases, State QA specialists examine UNITY (SACWIS) screens indicating hearing occurrence (date of hearing) by hearing type (periodic or permanency), ensuring hearing occurrence within timelines. The specialist will conduct further validating with review of case notes if needed (e.g., multiple dates of hearing entry close in occurrence). If case notes cannot clear up uncertainty, the Child Welfare Agency QA contact is asked to clear up any inconsistency. For a case to be compliant with periodic review requirements, a formula was entered to allow a date range in which the periodic hearings can occur by the end of the respective six-month period. A review of the child must occur every six months from the time of removal. The date of removal is the date the child was taken into protective custody and placed in an out-of-home care placement. It is typical practice for jurisdictions to hold a periodic hearing once every six months with the permanency hearing being counted as a review of the child for the next periodic hearing. In other words, a periodic hearing is held, then a permanency hearing, then a periodic hearing again. If a periodic hearing did not occur and no other review of the child was held, either by a court or by administrative review, then noncompliance was captured.

Statewide Data

In SFY 2017, there was an increase of 7% from SFY 2016 for hearings being held at least once every 6 months. For FFY 2017, court hearings were held at least every 6 months 100% of the time. The data is consistent with June 2016 and October 2017 Stakeholder findings as well.

Table 21.1

	SAMPLING DATA					
	Periodic Reviews Frequency = 6 Months % Strength			Case Count		
	SFY 2016	SFY 2017	FFY 2017	SFY 2016	SFY 2017	FFY 2017
CCDFS	85%	96%	100%	20	69	162
WCHSA	100%	95%	100%	10	40	33
DCFS Rural Region	90%	100%	100%	10	40	19
Statewide	90%	97%	100%	40	149	214

Stakeholder Interview Information

Focus groups were conducted statewide in June 2016 and October 2017. Participants varied with each group from Judges, District Attorneys, CASA, Court Improvement Program (CIP), along with Defense and Child Attorneys.

- During both statewide focus groups, the participants were confident that their scheduling system ensured periodic reviews more than the standard. There was a consensus the courts often schedule periodic reviews more frequently than every six months, and, as often as every three months to help ensure movement of cases statewide.

Item 22: Permanency hearings

Requirements

Nevada Revised Statute 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. In compliance with ASFA, DCFS Policies 0206 Court Hearing Notification and 0514 Termination of Parental Rights (TPR) require agencies to make and finalize permanency plans by no later than 12 months after the child's removal and provide notice by certified mail to all the parties to any of the prior proceedings and parents and "any persons planning to adopt the child, relatives of the child or providers of foster care who are currently providing care to the child."

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 48.

How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter?

Please provide relevant quantitative/qualitative data or information that show a permanency hearing as required for each child in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.

State Response:

Nevada has determined this item to be a Strength. The qualitative and quantitative data supports permanency reviews are occurring no later than 12 months. 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. In compliance with ASFA, DCFS Policies 0206 Court Hearing Notification and 0514 Termination of Parental Rights (TPR) require agencies to make and finalize permanency plans by no later than 12 months after the child's removal and provide notice by certified mail to all the parties to any of the prior proceedings and parents and "any persons planning to adopt the child, relatives of the child or providers of foster care who are currently providing care to the child."

Sampling Methodology

Item 19 section provides details on sampling methodology, including the sampling process.

Data Collection:

• **Permanency hearings:** Item 21 section provides details on the data collection, under Sampling Methodology and Data Collection. In addition, permanency hearings are to occur no later than 12 months from the date of removal and no less frequently than every 12 months thereafter. If a permanency hearing did not occur and no other review of the child was held, either by a court or by administrative review, then noncompliance was captured. Only court hearings due in the FFY 2017 were captured in the analysis.

Statewide Data

Overall, in SFY 2017, there was an increase of 5% from SFY 2016 to SFY 2017 for court hearings being held at least every 12 months. For FFY 2017 this figure increased to 100% of the time. This is consistent with the June 2016 and October 2017 stakeholder findings.

Table 22.1

SAMPLING DATA						
	Permanency Reviews Frequency = 12 Months			Case Count		
	SFY 2016	SFY 2017	% Strength	SFY 2016	SFY 2017	FFY 2017
CCDFS	90%	97%	100%	20	67	144
WCHSA	100%	95%	100%	10	40	35
DCFS Rural Region	80%	90%	100%	10	40	15
Statewide	90%	95%	100%	40	147	194

- SFY 2017 CCDFS had two cases that did not require a 12-month Review during SFY 2017

Stakeholder Interview Information

Focus groups were conducted statewide in June 2016 and October 2017. Participants varied with each group from Judges, District Attorneys, CASA, CIP, and Defense and Child Attorneys. Participants were held separately with each Child Welfare Agency. Statewide there was confidence the court’s scheduling system ensured that they had annual reviews as required by the standard statewide.

Item 23: Termination of parental rights

Requirements

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

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

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

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada’s 2018 Statewide Assessment starting on pg. 48.

How well is the case review system functioning statewide to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

Please provide relevant quantitative/qualitative data or information showing that filing of TPR proceedings occurs in accordance with the law.

State Response:

Nevada has determined this item to be an Area Needing Improvement and a systemic issue statewide. Termination of Parental Rights are not occurring within the 15-month federal timeframe. NRS 432B.590 mandates that no later than 12 months after the initial removal of the child from his/her home and annually thereafter, a hearing shall be held concerning the permanent placement of the child. At the hearing the court reviews the plan for permanent placement of the child and determines whether the reasonable efforts required have been made. If the child has been placed outside of his home for 14 months of any 20 consecutive months, the best interests of the child must be presumed to be served by the termination of parental rights and documentation of the plan to TPR is included in the permanency plan. The court is required to use its best efforts to ensure that the procedures required in TPR are completed within six months from that date. NRS 432B.630 requires action be taken to terminate parental rights on a newborn child who is delivered to a provider of emergency services, absent parent contact with the child welfare agency. The NRS also identifies those circumstances in which the agency is not required to make reasonable efforts for reunification and addresses the issue of compelling reasons when it would not be in the child's best interest to file for TPR. Compelling reasons must be detailed in the case file and reports to the court. Examples of compelling reasons are outlined in the DCFS 0514 Termination of Parental Rights policy.

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

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

Sampling Methodology

Item 19 section provides details on sampling methodology, including the sampling process. The Child Welfare Agency is given a spreadsheet with the identified sample children for the quarter. They are required to enter the TPR file date in an identified field of this spreadsheet; or, the child welfare agency referenced the UNITY screen and/or verifies with the caseworker allowable exception entry by the end of the 15th month in care. The state QA specialist reviewed the claimed exception to verify that it is an allowable exception to the requirement/compelling reason not to file a TPR petition, and, that it was entered by the end of the 15th month the child was removed. The date of removal is the date the child was taken into protective custody and placed in an out-of-home care placement. A formula determined compliance by ensuring the TPR file date occurred by the end of the 15th month from removal. The formula also ensured that an allowable compelling reason was acknowledged in the file by the end of the 15th month and a QA Specialist validated that the consent/relinquishment was received by the end of the 15th month if the exception was selected. Percentages of compliance are calculated by each agency and aggregated statewide with 15 months being calculated from the date of the first judicial finding of abuse or neglect or 60 days after the child is removed from the home, whichever is earlier.

Statewide Data

For FFY 2017, Statewide 73% of cases had filed TPR timely or had compelling reasons for not filing TPR per ASFA timeframes. The data suggest that the low percentage may be related to the late signing of consent and relinquishments by the parents. In 2009, two common barriers identified a backlog in the District Attorney's Office resulting in delays in filing for TPR (Clark County Stakeholders) and the reluctance to file TPR before the court has ordered a goal of adoption and ordered the agency to file for TPR (Carson City Stakeholders). The Child Welfare Agencies continue to work with the stakeholders to improve compliance. The Court Improvement Program Director receives a statewide report at least semiannually to review TPR data with judiciary stakeholders.

Table 23.1

	TPR Filing Compliance % Strength			Case Count		
	SFY 2016	SFY 2017	FFY 2017	SFY 2016	SFY 2017	FFY 2017
CCDFS	60%	43%	74%	20	69	167
WCHSA	80%	60%	80%	10	40	39
DCFS Rural Region	30%	55%	48%	10	40	23
Statewide	58%	51%	73%	40	149	229

Stakeholder Interview Information

Focus groups were conducted statewide in June 2016 and October 2017. In June 2016 participants included Judiciary, Foster Parents, and Caseworkers. In October 2017 participants included Judiciary, Caseworkers, and Supervisors.

- **June 2016 and October 2017 Judiciary Statewide** identified similar concerns to why a TPR petition is not filed in a timely manner. The primary reason identified during both focus groups was a workforce resource at the Attorney General's Office/ District Attorney's office depending on the jurisdiction;
- **June 2016 and October 2017 Caseworkers Statewide** indicated that they believed that a lack of resources at the Attorney General's Office/ District Attorney's office offices was the main reason for delays in timely filing.
- **October 2017 Supervisors Statewide** identified delays at the Attorney General's Office/District Attorney's office after submitted packets by the agency, delays due to changes in permanency goals, delays due to ICWA cases being continued, and compassion by the judges for parents working their case plans.
- **June 2016 Foster Parents Statewide** indicated they were aware of prosecutorial delays with filing, but also believed the courts were too lenient with parents. Adoptive parents in the group cited children ending up being TPR'd three and five years into care, and after multiple episodes of foster care.
 - Despite the Foster Parent group citing inappropriate delays, they (particularly the very long-term foster/adopt parents) also noted that TPR's occurred more frequently and quicker than in years past.
 - The Foster Parent groups across the state agreed that often delays are often related to the indecisiveness by the child welfare agency.
 - Two of the Foster Parent groups also indicated that a mother giving birth to another child while she already has a child in protective custody, causes further TPR delays for the child in care.

In October 2017, Judicial Stakeholders reported workforce concern at the Attorney General's Office/ District Attorney's office. In June 2016, Caseworkers in all three jurisdictions indicated that they believed that a lack of resources at the Attorney General's Office/District Attorney's office (depending on the jurisdiction) was the main reason for delays in timely filing. In Washoe County they believed that there seemed to be longer delays for cases where there was a dual plan. The Foster Parent Focus group felt the courts were too lenient with parents. The Judiciary Focus Group indicated that not filing a TPR in a timely manner was an issue of workforce resources at the District Attorney's office as well as difficulty locating parents, lack of prospective adoptive parents, compassion for the parents, backlog, and lack of services available to parents.

Item 24: Notice of hearings and reviews to caregivers

Requirements

NRS 432B, NAC 432B, and statewide policy 0206 Court Notification mandate that proper notification of court hearings and court reviews regarding the status of a child in the custody of a child welfare agency must be provided and is necessary to ensure active involvement and participation of caregivers (pre-adoptive, foster parents, relative, fictive-kin, etc.) in the child's safety, permanency and well-being. While internal policies and procedures regarding court notification requirements and protocols may differ between child welfare agencies, formal written notification, for Annual and Semi Annual Court Hearings to the aforementioned caregivers, must be supplied pursuant to NRS 432B.580(6)(a)(b): Notice of the hearing must be given by registered or certified mail to all parties to any of the prior proceedings, and parents and any persons planning to adopt the child, relatives of the child or providers of foster care who are currently providing care to the child. For some hearings, court notifications may be sent pursuant to Nevada Rules of Civil Procedure: Rule 5 (a, b.). 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. Child welfare agencies are provided the option of documenting notice to caregivers in Nevada's SACWIS (UNITY). Court Notice is the responsibility of caseworkers, designated agency staff, or a judicial automotive system depending on the jurisdiction.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 52.

How well is the case review system functioning statewide to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?

Please provide relevant quantitative/qualitative data or information that show foster parents, pre-adoptive parents, and relative caregivers of children in foster care (1) are receiving notification of any review or hearing held with respect to the child and (2) have a right to be heard in any review or hearing held with respect to the child.

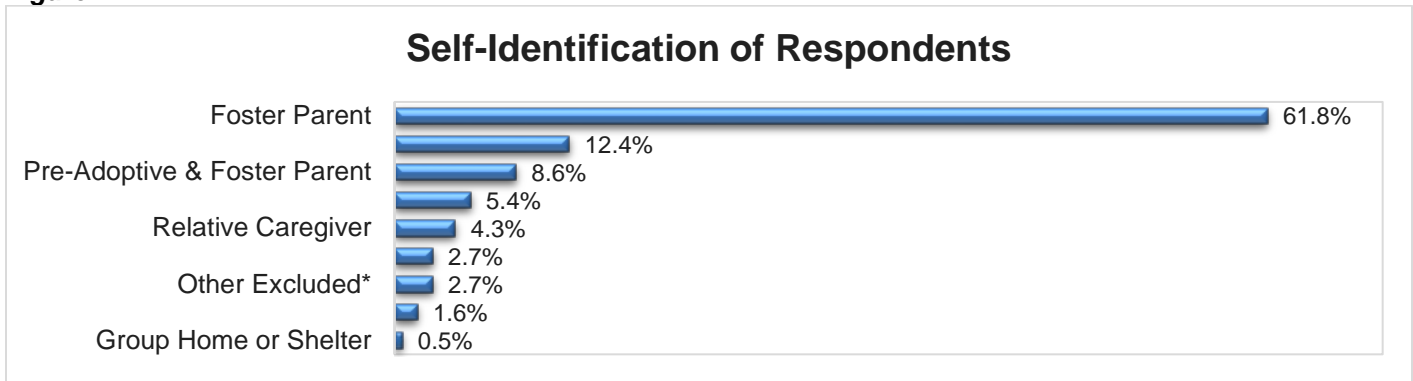
State Response:

Nevada has determined this item to be an Area Needing Improvement. Caregivers are not receiving court hearing notices, right to be heard, and right to attend a court hearing consistently statewide. NRS 432B, NAC 432B, and statewide policy 0206 Court Notification mandate that proper notification of court hearings and court reviews regarding the status of a child in the custody of a child welfare agency 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. While internal policies and procedures regarding court notification requirements and protocols may differ between child welfare agencies, formal written notification, for annual and semi-annual court hearings to the aforementioned caregivers, must be supplied pursuant to NRS 432B.580(6)(a)(b): Notice of the hearing must be given by registered or certified mail to all parties to any of the prior proceedings, and parents and any persons planning to adopt the child, relatives of the child or providers of foster care who are currently providing care to the child. For some hearings, court notifications may be sent pursuant to Nevada Rules of Civil Procedure: Rule 5 (a, b.). 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. Child welfare agencies are provided the option of documenting notice to caregivers in Nevada's SACWIS (UNITY). Court Notice is the responsibility of caseworkers, designated agency staff, or a judicial automotive system depending on the Child Welfare Agency.

Statewide Data

Statewide Data (SFY 2017) was collected from surveys. Information was gathered from 186 caregivers via an online questionnaire and sent to all the statewide caregivers who had an email address. The respondents included foster parents, pre-adoptive parents, adoptive parents, relative caregivers, fictive kin, and out-of-state caregivers.

Figure 24.1



Note: Other Excluded included former foster parents and biological parents of children who are currently in placement, who were disqualified from completing the survey.

Figure 24.1 illustrates of the 186 respondents 2.7% were disqualified because they were either a biological parent or former foster parent (prior to SFY 2017). 58% typically worked with Clark County, 17% Rural Region, and 27% Washoe. Most respondents (89%) had at least 1-10 placements in SFY2017, and 80% identified providing foster care in their home (includes regular, permanent, and/or emergency placements).

Overall, 40% of respondents reported that they received court notifications all the time, 35% reported sometimes, and 22% did not receive any court notifications (remainder was N/A). Most caregivers are receiving notices, and the process varies depending on the caseworker and jurisdiction. The response for timeliness and accuracy of court notifications is inconsistent. A stakeholder reported “Mail notification sometimes arrives after the court date,” “I have to ask my caseworker for the information,” and “I was recently told the day before a court hearing and I also received a document addressed to another foster parent.” However, 64% of respondents either agree or strongly agree that they received notices in time to attend the court hearing and 71% reported that the notices had the correct information (child’s name, court date, location, etc.). Caregivers received a re-notice 44% of the time when the court hearing date and time changes or the court hearing is vacated, which is an area needing improvement.

Figure 24.2

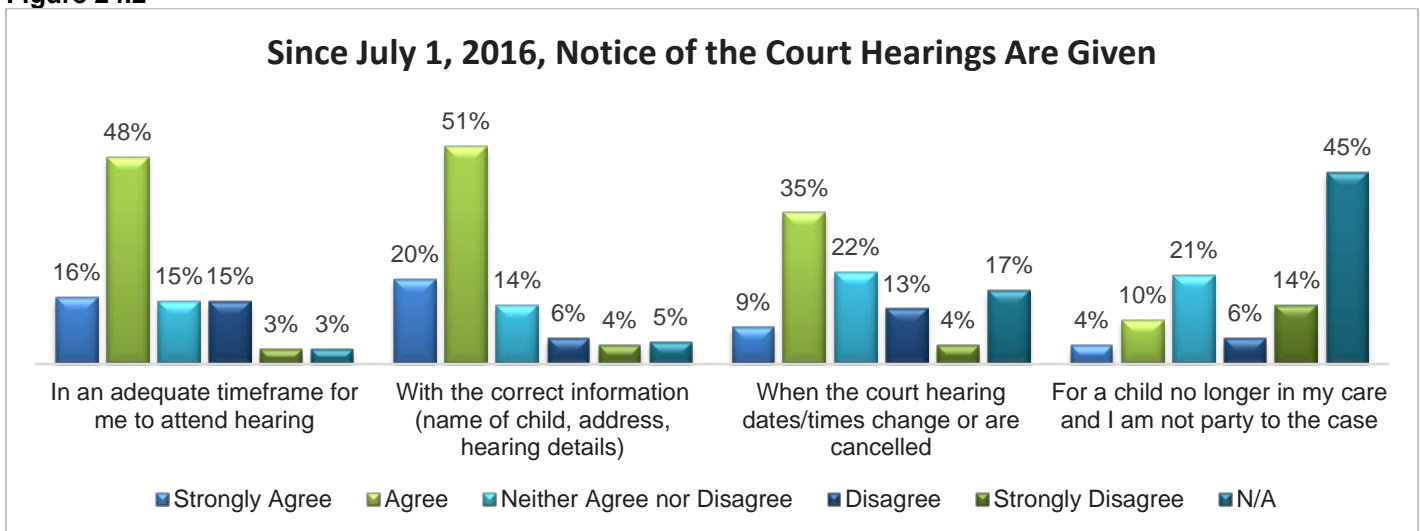


Figure 24.2 illustrates that only 14% indicated that they had received a court notice for children that have transitioned out of their home, which is a 10% decrease from SFY 2016.

Figure 24.3

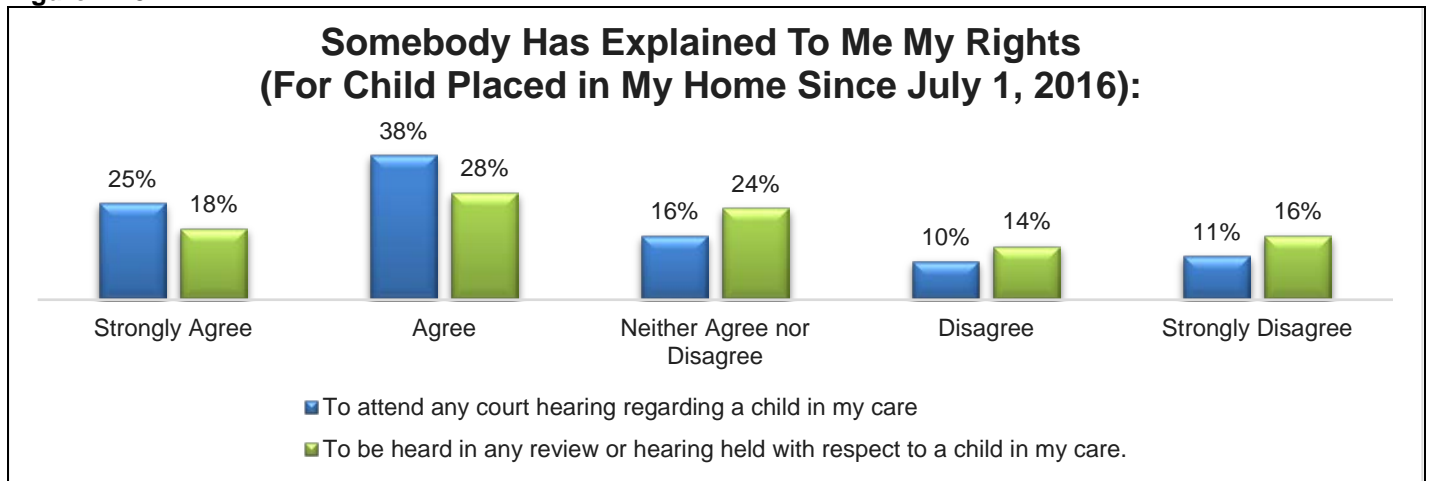


Figure 24.3 Caregivers were asked if they were advised of their right to be heard in any review or hearing and the right to attend any court hearing, on a scale of 1-5 with 5 being Strongly Agree.

Sixty-three percent of respondents either strongly agreed or agreed that somebody explained their rights to attend any court hearing regarding a child in their care and 46% either strongly agreed or agreed that they were explained their rights to be heard in any review or hearing held with respect to a child in their care

Based on the results from SFY 2016, the DCFS Family Programs Office (FPO) collaborated with each jurisdiction and judicial stakeholders to develop a new Court Notification Policy that better reflects the current state and federal standards. In addition, the policy requires that caregivers be given notice of their right to attend and their right to be heard in semi-annual- (Periodic) and annual (Permanency) hearing. The Court Notification policy became effective 01/30/2017 and was published to the DCFS website on 02/13/2017. Since publication there was a request from one of the counties to amend the policy for clarification before an internal policy can be developed, and this request is currently under review by FPO. Each jurisdiction is working towards implementing the new policy, which is anticipated to positively impact SFY 2018 for this Item 24.

Stakeholder Interview Information

In June 2016 and October 2017 Statewide Focus Groups were held and separated by Judiciary Members, Caseworkers, and Caregivers. Supervisors were included in the October 2017 Focus Groups. The focus group covered several systemic factors including Court Notifications. The questions were to determine how well the case review system is functioning to ensure caregivers are given notice of, and have a right to be heard in, any review or hearing held with respect to a child. Overall Statewide, Nevada is not consistently notifying caregivers of court hearings, their right to be heard, and their right to attend. Other areas of concerns were identified:

October 2017 Focus Groups

- **Caseworkers:** Most caseworkers felt they were informing the caregivers/foster parents of their right to attend and be heard, however, the method varied. There were times they did not encourage caregivers/ foster parents due to safety concerns, however, there were other methods of teleconferencing and written caregiver reports available.
- **Foster Parents:** In two jurisdictions the foster parents reported they were consistently receiving notifications. They were attending and encouraged to attend as well as speak. Judges also were open and encouraging foster parents to speak. In the other jurisdiction, the reports were mixed. Some were receiving notices and others reported a lack in consistency. Attendance varied, as some foster parents were encouraged to attend and speak, and others were not.
- **Judiciary:** In two jurisdictions it was reported caregivers/foster parents were being provided notices. In the other jurisdiction, it was reported notifications are given when the caregivers/foster parents are aligned with the agency. Caregivers attending court varied statewide and depended on many variables; case circumstances, notification by

the agency, culture of the court, distance, etc. In court report there is information on how parents, foster parents etc. were notified. A new policy was implemented to ensure caregivers/foster parents are informed of their right to attend. They recognized foster parents/caregivers are considered interested parties and can participate in hearing as they want to. There has been tension where foster parents/caregivers are being told to speak about children only- not appropriate for them to speak about how parents are doing. A master reported inviting comments on how children are doing in home, if they try to say disparaging things about parents or agency will say this is not appropriate for court and will invite them to set up meeting.

- **Supervisors:** Identified an internal process for tracking notifications and feel notices are being sent to foster parents/caregivers.

Systemic Factor C: Quality Assurance System

Item 25: Quality Assurance System

Requirements

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

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 55.

How well is the quality assurance system functioning statewide to ensure that it is (1) operating in the jurisdictions where the services included in the CFSP are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures?

Please provide relevant quantitative/qualitative data or information showing that the specified quality assurance requirements are occurring statewide.

State Response:

Nevada has determined this item to be an area needing improvement for Nevada. A goal of the 2015-2019 CFSP is specific to Continuous Quality Improvement (CQI) and is identified as Goal 4: The state will be able to identify the strengths and needs of the child protective service delivery system. The rationale for Nevada choosing this goal was to ensure development of a continuous quality improvement system through the enhancement of five functional components: administrative structure to oversee effective CQI system functioning; quality data collection; a method for conducting on-going case review; a process for the analysis and dissemination of quality data on all performance measures and, a process for providing feedback to stakeholders. Nevada continues to work towards a CQI process and has built upon and improved the functional component related to conducting on-going case reviews but has not eliminated all gaps in the functional components of CQI. Nevada has not yet created a statewide CQI system that is uniform, driven by quality data, that assesses, evaluates and informs policy and practice improvements.

Nevada convened a Statewide Quality Improvement Committee (SQIC) in efforts to implement/enhance a statewide CQI system but further work must be conducted to eliminate gaps in the overall system. In recognition of this Nevada did request technical assistance (TA) from the Capacity Center for States and support for the implementation of a CQI system was identified as a potential area for capacity building. Nevada was approved for three TA capacity building projects with CQI being one of those projects. However, due to competing priorities, staff turnover and lack of IT resources Nevada could not continue to move forward with the TA. Nevada has continued working with the Capacity Center for States on the following two capacity building projects: 1. Differential Response Support and 2. Supporting the development and implementation of a comprehensive training system by implementation of a supervisory coaching model.

Nevada has improved its Case Review Process which mimics the federal Child and Family Services Review (CFSR) case review process and has collaborated with Clark County Department of Family Services (CCDFS) and Washoe County Human Services Agency (WCHSA) to increase a qualified Reviewer/QA pool. Prior to 2015 Nevada was only reviewing nine items from the Round 2 Onsite Review Instrument (OSRI). In 2015 when the Children's Bureau provided State's access to use the online instrument for state CQI purposes Nevada began using the federal Onsite Review Instrument (OSRI). This is progress for the State of Nevada even though all gaps in the overall CQI system has not been eliminated.

In CY 2015, 2016 and 2017, Nevada has conducted case reviews using the new OSRI developed by JBS International for the Children's Bureau. Most recently Nevada case reviews were conducted between April 2017 and September 2017. A total of 83 cases were reviewed from all jurisdictions using all 18 items of the CFSR instrument.

1. The state's quality assurance system operates in jurisdictions where services described in the Child and Family Services Plan are provided.

The Department of Health and Human Services/Division of Child and Family Services/ (DCFS) Family Programs Office QA/CQI system operates in all jurisdictions of the state. The QA case review system operates out of the Family Programs Office (FPO) while the much broader CQI system involves the Division's leadership, IT Department and Child Welfare Agencies. Nevada uses a state-administered and county-operated structure for the management of child welfare services, except in the rural counties of the state, where DCFS operates child welfare services. DCFS under the umbrella of the Nevada Department of Health and Human Services, provides oversight to child welfare and direct child welfare services.

Each Child Welfare Agency has dedicated staff for local CQI activities, but the CQI system is not consistent or uniform across the state. The Statewide Quality Improvement Committee (SQIC) meets monthly to review and discuss statewide data, trends in available data, new initiatives, court improvement activities and child welfare training activities. While the SQIC meets and discusses statewide quality improvement efforts, data and reports, the committee has not yet become an effective mechanism to create program improvement or practice change across the state. This would involve building capacity around program improvement planning, development and implementation. Building capacity would involve having staff resources that have the knowledge, skills and abilities to independently conduct integral strategic planning efforts, and an organizational culture that supports performance improvement.

2. The state's quality assurance system utilizes standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety.

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 evaluation of services provided by the child welfare agencies and actions upon determination of noncompliance with certain provisions.

Practice and service standards from intake to permanency are defined through federal law, state law, and DCFS policy. These standards are compiled in the Division's policy manual, available at <http://dcfs.nv.gov/Policies/CW/>. The Division's process and outcome measures are based on federal requirements (such as the federal CFSR data indicators) and state policy. In addition, through the quality assurance case review system DCFS can document and track performance for safety, permanency, and well-being of children through the 18 CFSR measures. This method allows a standardized review and data is available by each jurisdiction.

DCFS has practice and procedure standards across the span of child welfare services, adoption, foster care, licensing, eligibility, and provider payment services as defined in federal and state law. As stated above DCFS has a statewide policy manual to direct and guide staff in meeting the requirements of law and providing for the best interest of children and families. This is one mechanism to provide standards for quality services for safety, permanency, and well-being. While statewide policy does exist, there could be improvement in consistent policy development, approval, implementation and review of policies.

For grant and contract services, program expectations and reporting requirements are outlined in the final agreements with the grantee or contractor. The DHHS/DCFS Grants Management Unit evaluates reports received from grantees and utilizes a standard process to analyze the effectiveness of the program as they relate to safety, permanency and well-being.

3. The state identifies strengths and needs of the service delivery system.

As stated above a goal of the 2015-2019 CFSP is specific to Continuous Quality Improvement (CQI) and is identified as Goal 4: The state will be able to identify the strengths and needs of the child protective service delivery system. The rationale for Nevada choosing this goal was to ensure development of a continuous quality improvement system through the enhancement of five functional components: administrative structure to oversee effective CQI system functioning; quality data collection; a method for conducting on-going case review; a process for the analysis and dissemination of quality data on all performance measures and, a process for providing feedback to stakeholder. Nevada continues to work towards a CQI process and has built upon and improved the functional component related to conducting on-going case reviews but has not eliminated all gaps in the functional components of CQI.

Through collaboration with the child welfare agencies DCFS can gather case review data to identify strengths and needs of children and families. The results of the case reviews are posted on the DCFS website. However, it is unclear if grant/contract services and the much broader collaborative efforts with other programs i.e. Medicaid can collectively identify, analyze and meet the needs of the service delivery system.

4. The state's quality assurance system provides relevant reports.

As previous stated Nevada has conducted case reviews using the Online Management System (OMS) developed by JBS International for the Children's Bureau since CY 2015. An Exit Report utilizing a power point presentation is presented to each Child Welfare Agency with an emphasis on local results and recommendations after each review. The Child and Family Services Plan (CFSP), Annual Progress Services Report (APSR), Citizen's Review Panel Report, Child Fatality Report, performance data, case review results from the past five years, historical information concerning previous CFSP/ PIP results and an annual Statewide Case Review Report are posted at:

<http://dcfs.nv.gov/Tips/Reports/Annual/>

Additionally, The Nevada DCFS IT has developed a 'Data Book' which is updated quarterly and is posted on the DCFS website at:

<http://dcfs.nv.gov/uploadedFiles/dcfsnvgov/content/Home/features/DataBookOct2017.pdf>

While there are many reports that generate performance information i.e. counts of investigations, counts of removals, counts of child protective referrals, counts of adoptions, counts of children in foster care etc., there are very few statewide reports that measure outcomes for performance reporting. Nevada uses the CFSP data profile generated annually by the Children's Bureau to measure federal performance measures. Currently, the state is unable to internally generate those specific measures. Additionally, the DCFS Family Program Office (Child Welfare) must rely on the IT Department that serves other Divisions. There is no specific Data and Reporting Unit specific just to child welfare.

There is a listing of SACWIS (UNITY) Reports that can be generated for child welfare. If any specific report other than those listed are needed a helpdesk ticket must be submitted to Information Management for an ad hoc report to be completed. The current report listing is not updated or maintained with any regularity. Some descriptions of reports are absent, and the actual measurement is sometimes unknown. Many reports are not used with any regularity because they are not useful or are outdated. Some reports don't measure what is needed and is incorrect. Reports associated with the CFSP have been on a wait list with a work request number for many years i.e. Independent Living reports. To satisfactory monitor a program area when an agency is in a position of oversight reports specific to monitoring performance are needed. The IT department has indicated they have a capacity/resource issue related to workload.

Nevada Case Reviews are inclusive of qualitative and quantitative data that result in local exit reporting and annual statewide reporting. In CY 2017 Nevada reviewed 83 cases Statewide.

Table 25.1 illustrates Nevada’s case review performance data from 2017.

QICR 2017 Performance –Outcome Target =95% and Performance Item Target =90%

Outcomes/Items	Performance Item Ratings			Outcome Ratings			
	S	ANI	NA	SA	PA	NACH	NA
Safety Outcome 1: Children are first and foremost protected from abuse and neglect.				79% N=37	0% N=0	21% N=10	N=36
Item 1 Timeliness of investigation	79% N=37	21% N=10	N=36				
Safety Outcome 2: Children are safety maintained in their home whenever possible and appropriate.				35% N=29	22% N=18	43% N=36	N=0
Item 2 Services to prevent removal/re-entry	66% N=27	34% N=14	N=42				
Item 3 Risk and safety assessment	35% N=29	65% N=54	N=0				
Permanency Outcome 1: Children have permanency and stability in their living situations				13% N=7	75% N=39	12% N=6	N=0
Item 4 Stability of Placement	65% N=34	35% N=18	N=0				
Item 5 Permanency Goal	50% N=21	50% N=26	N=0				
Item 6 Achieving Reunification, Guardianship, Adoption or OPPLA	44% N=23	56% N=29	N=0				
Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.				71% N=37	29% N=15	0% N=0	N=0

Item 7 Placement with Siblings	97% N=36	3% N=1	N=15				
Item 8 Visit with Parents and Sibling in Foster Care	76% N=28	24% N=9	N=15				
Item 9 Preserving Connections	73% N=38	27% N=14	N=0				
Item 10 Relative Placement	62% N=31	38% N=22	N=2				
Item 11 Relationship of Child in Care with Parents	73% N=22	27% N=8	=22				
Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs.				35% N=29	34% N=28	31% N=26	N=0
Item 12 Services to child, parents & foster parents	40% N=33	60% N=50	N=0				
Item 12A Needs Assessment and Services to Children	67% N=57	33% N=27	N=0				
Item 12B Needs Assessment and Services to Parents	42% N=27	58% N=37	N=19				
Item 12C Needs Assessment and Services to Foster Parents	74% N=34	26% N=12	N=37				
Item 13 Child and Family Involvement in Case Planning	47% N=38	53% N=43	N=2				
Item 14 Case worker visits with children	55% N=46	45% N=37	N=0				
Item 15 Case worker visits with parents	42% N=27	58% N=37	N=19				
Well-Being Outcome 2: Children receive appropriate				72% N=44	8% N=5	20% N=12	N=22

services to meet their educational needs.							
Item 16 Child and family involvement in case planning	72% N=44	28% N=17	N=22				
Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.				51% N=40	14% N=11	35% N=27	N=5
Item 17 Physical Health of Child	59% N=38	41% N=26	N=19				
Item 18 Mental/Behavioral Health of Child	59% N=38	41% N=26	N=20				

NOTE: for Performance Rating: S=*Strength*; ANI=*Area Needing Improvement*; NA=*Not Applicable*.

NOTE: for Outcome Rating: SA=*Substantially Achieved*; PA=*Partially Achieved*; NACH=*Not Achieved*; A=*Not Applicable*.

5. The state’s quality assurance system evaluates implemented program improvement measures.

State law requires DCFS to ensure that child welfare agencies carry out corrective actions when the agencies are not in compliance with the law or with statewide plans or policies. Each agency that provides child welfare services is required to submit an agency improvement plan to DCFS that must cover a period of two years that includes specific performance targets for improving the services provided to children in the care of the agency. Each year the agencies are required to submit data to DCFS demonstrating the progress made toward meeting the specific performance targets. Also, DCFS is administering a program that awards incentive payments to an agency that provides child welfare services based on improved performance targets. DCFS prepares and submits a report concerning the improvement plans, and the program for incentive payments to the Governor and Legislature on or before January 31 of each year.

However, this process is not linked to the Nevada Case Reviews and Child Welfare Agencies identify areas of performance improvement that each Child Welfare Agency would like to focus on over the two-year period. While DCFS QA provides feedback to stakeholders and leadership on case reviews and identifies the programmatic changes needed to improve services the results are not used to develop improvement plans based on the standards of the state’s case reviews. Since case review samples are small for case reviews there is still hesitation that case review results are significant enough to identify and target areas needing improvement.

The current Agency Improvement Plans (AIPs) for each Child Welfare Agency are listed as follows:

Clark County Department of Family Services
Performance on 2017-2018 AIP

The Clark County Department of Family Services (CCDFS) identified the following 2017-2018 AIP performance targets in the outcome domains of safety, permanency and well-being:

SAFETY

- Increase in the number of children served in home with intact families and improve information collection and assessment of child functioning, parent disciplinary practices and general parenting: this will be assessed through review of data reports, NICRP Safe@Home evaluation reports, and fidelity review assessments.

PERMANENCY

- Increase the number of children placed with compatible caregivers whose strengths match the children's needs.
- Partner with faith-based and business leaders to work toward eliminating service array gaps within the community.

WELL-BEING

- Implement an AFC program that incorporates the Together Facing the Challenge service model and innovative strategies and approaches to parenting children with increased behavioral and mental health needs.
- Work with Clark County School District (CCSD) to establish MOU's and policies to ensure that CCSD and DFS are properly sharing data pursuant to federal law and establish a school of origin transportation program for children in care.

CCDFS reported continued implementation of the Safe@Home Title IV-E Waiver Program to address safety concerns for families who receive in-home services. As of November 30, 2017, the Safe@Home program had served 492 families and 1,385 children in their homes via safety management services. Evaluation of the model's success has included working in cooperation with ACTION 4 Child Protection to complete an agency-wide assessment of fidelity to the intervention model and conducting analyses of performance and demographic data to determine how successful the model has been. An analysis has demonstrated that removal rates may be significantly reduced through the implementation of this program. In this analysis Safe@Home children showed a 9.3% removal rate, compared to a 23% removal rate for the comparison group.

CCDFS has demonstrated the successful implementation of a matching program for targeted recruitment and retention with the stated goal of improving permanency results. This effort has included the use and ongoing enhancement of the PRIME system to help facilitate the identification of potential placements, a system-wide assessment, and collaboration with nationally-recognized recruitment experts to develop and implement recruitment strategies. CCDFS has also strengthened its family and community engagements to improve permanency by fostering greater support networks for at-risk families. Safe Families for Children (SFFC), which has been used across the nation since 2003, has been introduced in Clark County with the goal of preventing children from entering the foster care system. CCDFS recently partnered with over 100 churches to introduce the *Wait No More* campaign, and it is expected that this program will have a similar impact.

CCDFS implemented the Advance Foster Care program to ensure that children who require higher level care are placed with foster parents who have adequate training. The "Together Facing the Challenge" model is being used for this program, and there are currently 20 AFC foster homes.

CCDFS also implemented strategies and services to improve educational outcomes for children in care by partnering with the CCSD to obtain educational information. An online portal allows 82 CCDFS supervisors and managers to obtain educational records of foster children. The ability to review educational records and increased communication with CCSD will help CCDFS staff in their efforts to improve educational stability and outcomes for youth in the custody of the agency.

Washoe County Human Services Agency Performance on 2017-2018 AIP

Washoe County Human Services Agency (WCHSA) identified the following 2017-2018 AIP performance targets in the outcome domains of safety, permanency and well-being:

SAFETY: Assess safety decision making.

- Reduce the number of child removals through utilization of a Crisis Stabilization Response Safety and Services intervention Team.

PERMANENCY: Increase permanency for children.

- Implement a Placement Services and Support Team to perform immediate diligent searches for potential relatives and fictive kin during an active removal of a child from their home due to present danger to avoid placement in congregate care and/or a traditional family foster home.

WELL-BEING: Improve the educational outcomes of foster youth.

- Analyze the effectiveness of application for the Interstate Compact on the Placement of children (ICPC) to maintain family connections.
- Pilot the Crossroads Program to care providers with an open child welfare investigation or case.

In 2017 WCHSA fully implemented the use of a Crisis Stabilization Response Safety and Services Intervention Team. The goal of the team is to provide immediate, short-term, family-focused services designed to assist child victims and their families in crisis. The team provides services and resources at the time of the initial response to help decrease the risk of

additional trauma and to help decrease the number of child removals. A comparison of SFY16 and SFY17, when the team was implemented, showed a decrease in removals of 16%.

WCHSA also implemented a Placement Services and Support Team to perform immediate diligent search on potential relatives and fictive kin during an active removal of a child from his or her home. The primary goal of this team is to avoid placement in congregate care or in traditional foster care. An analysis has shown a decrease in the use of congregate care following the implementation of this team.

WCHSA is conducting an ongoing analysis of data related to outcomes related to the Interstate Compact on the Placement of Children to improve efficiency and identify service gaps.

The agency is also piloting the Crossroads Program to help provide essential services and better serve issues related to substance abuse, trauma, mental health, basic care needs, and housing needs. Since 2015, Crossroads has assisted 221 females.

Division of Child and Family Services Performance on 2017-2018 AIP

The Division of Child and Family Services (DCFS) identified the following performance targets in the outcome domains of safety, permanency and well-being:

SAFETY/PERMANENCY/WELL-BEING

- Ensure that permanency goals are current and updated in UNITY.
- Increase the timely filing of Termination of Parental Rights (TPR).
- Decrease the time to adoption.
- Increase the frequency and quality of parental engagement in case planning.

In summary, DCFS reported an improved performance with an overall decrease in time to file TPR Petitions, some improvement for Timeliness to Permanence through Adoption or Guardianship, and an increase in performance as it relates to quality case planning with parents.

The goal for Timely Filing of TPR Petitions met the performance target of 60% for the sample reviewed. For Timeliness to Permanence through Adoption or Guardianship, the goal of 26 months for Adopt by Relative was exceeded with a result of 24.94, and the goal of 35 months for Adopt by Unrelated was relatively close at 36.83 (baseline at 53.32). Adoption by Foster Parent, however, had a goal of 24 months, and the end results were at 37.72. Maintaining current Permanency Goals in all cases is still an area needing improvement, although two regions came within 2% of the Performance Target.

For the goal of Parent Engagement in Quality Case Planning, the first performance goal of “Parents are involved in development of their case plan goals” was met (target: 90%; and, actual performance: 93%). The second performance goal of “Case plan goals are directly related to reasons for removal and/or safety threats” was not met (target: 95%; and, actual performance: 90%).

Systemic Factor D: Staff and Provider Training

Item 26: Initial Staff Training

Requirements

NRS 432B.195, 432B.397, and NAC 432B.090 require the state to provide a full staff development and training program which includes a minimum of 40 hours of training related to the principles and practices of child welfare services, including specific training related to the Indian Child Welfare Act (ICWA). In the 2017 Legislative Session Assembly Bill (AB) 99 was passed, which will require that all child welfare staff who come into direct contact with children receive training within 90 days of employment and annually thereafter concerning working with lesbian, gay, bisexual, transgender and questioning children (LGBTQ). In SFY 2018 policy will be written to address the increasing mandatory training requirements of child welfare staff.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 63.

How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the CFSP that includes the basic skills and knowledge required for their positions?

Staff, for purposes of assessing this item, includes all contracted/non-contracted staff who have case management responsibilities in the areas of child protection services, family preservation and support services, foster care services, adoption services, and independent living services pursuant to the state's CFSP.

Please provide relevant quantitative/qualitative data or information that show:

- staff receive training pursuant to the established curriculum and time frames for the provision of initial training; and
- how well the initial training addresses basic skills and knowledge needed by staff to carry out their duties.

State Response:

Nevada has determined this item to be an area needing improvement due to an inability to track initial training over time for newly hired child welfare staff. In the past, the State has not had an effective mechanism to track and monitor new hires and the completion of pre-service and or on-going training; however, with expansion of the contracts with the University of Nevada, Reno and the University of Nevada, Las Vegas (Nevada Training Partnership) in March 2017 a new Child Welfare Learning Management System (LMS) will be implemented in the Spring 2018.

After implementation DCFS will be able to track training in a more efficient way over the next few years. DCFS and the Nevada Training Partnership are implementing a system called Saba. Saba is a dynamic LMS which incorporates features such as blended learning and is a cloud-based platform that will enable Nevada to develop reports in real-time. These reports will help Nevada determine the accuracy of both initial and ongoing training needs for the child welfare workforce.

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). In the 2017 Legislative Session Assembly Bill (AB) 99 was passed, which requires that all child welfare staff who come into direct contact with children receive training within 90 days of employment and annually thereafter concerning working with lesbian, gay, bisexual, transgender and questioning children (LGBTQ). As of July 1, 2017, 242 workers statewide have been trained in the LGBTQ Curriculum. In SFY 2018/19 a policy will be written to address the increasing mandatory training requirements of child welfare staff.

Initial Pre-Service Training for Nevada Child Welfare Workers and Differential Response (DR) Child Welfare Staff are provided under a Title IV-E Partnership with the University of Nevada, Las Vegas (UNLV) in the South and with the University of Nevada, Reno (UNR) in the North. The DR staff currently receive the same initial pre-service training as other statewide child welfare staff. However, currently and as noted above the tracking to ensure on-going monitoring of initial training for DR Staff does not exist. The State must rely on self-report from the agencies.

As of July 1, 2017, statewide, 86 new child welfare staff were hired, and 100% received Pre-Service Academy Training per local report. Clark County Department of Family Services staff receive training prior to receiving a caseload. In Washoe County Human Services Agency and in the DCFS Rural Region workers are assigned a limited case load while in training, with supervisory oversight. DCFS is only able to see the number of these staff in the current system and is not able to break this information down by their role within the child welfare agencies. Self-reporting is the only way to obtain this information. As stated above when the new LMS goes live DCFS will be able to report the data going forward as it relates to new hires and initial training for all child welfare staff.

UNLV						
Week	Topic/Hours	Number of Participants	Office	Total Hours of Missed Time	% Time Missed	Total Number of Hours of Training
1	Basic Skills/24 hours	32	CCDFS	0 hours	-	768 hours
	Basic Documentation/8 hours	32	CCDFS	0 hours	-	256 hours
	Human Development/8 hours	32	CCDFS	0 hours	-	256 hours
2	Intake/16 hours	32	CCDFS	0 hours	-	512 hours
3-4	NIA Part 1: Intro, PDA, PDA & CSE/12 hours	32	CCDFS	0 hours	-	384 hours
4	NIA Part 2: Info Collection & Interviewing/8 hours	31	CCDFS	0 hours	-	248 hours
5	NIA Part 3: Judging Sufficiency/8 hours	31	CCDFS	0 hours	-	248 hours
5-6	NIA Part 4: SPD & CFR/20 hours	31	CCDFS	0 hours	-	620 hours
6	Family Systems/8 hours	31	CCDFS	0 hours	-	248 hours
7	Motivational Interviewing/16 hours	30	CCDFS	0 hours	-	480 hours
8	Placement, Grief & Loss/8 hours	30	CCDFS	0 hours	-	240 hours
8-9	PCFA/44 hours	30	CCDFS	8 hours		1,312 hours
10	Visitation, & CSE/16 hours	30	CCDFS	0 hours	-	480 hours
	Permanency Values/8 hours	29	CCDFS	0 hours	-	232 hours
11	PCPA/16 hours	30	CCDFS	0 hours	-	480 hours
12	Adoption & Case Closure/4 hours	30	CCDFS	0 hours	-	120 hours
	Ethics/4 hours	30	CCDFS	0 hours	-	120 hours
13	Case & Time Management/4 hours	30	CCDFS	0 hours	-	120 hours



The Academy at UNLV (PRE-SERVICE TRAINING)

The Nevada Safety Model has led to the development of an entirely new Nevada Child Welfare Training Academy which was initially piloted in January 2014 by the Nevada Partnership for Training (NPT) trainers at the University of Nevada, Las Vegas (UNLV) and the Clark County Department of Family Services (CCDFS). The Academy at UNLV begins with the initial

call to the Hotline regarding a child abuse or neglect incident and follows that family throughout the life of the case. Each week both NPT trainers at UNLV and CCDFS trainers share the training week. Each week presents a specific topic or process within the case and while NPT trainers present the necessary curriculum for the topic, the CCDFS trainers present the agency specific information at the same time, thus being more relevant to the actual skills and duties the new worker will be implementing. The CCDFS does not require new workers to have a degree in social work. This joint Academy was created to be conducted over a 10-week period which included both classroom, field observations, computer labs and on the job training with mentors from the CCDFS. However, due to the need for larger new hire groups, the Academy has been increased to 14 weeks.

Attendance Discussion:

The total number of attendance hours for the 2017 winter cohort is 7,004 (7,012 total hours possible less the 8 hours missed). Of the 32 people that started the Academy, 30 completed it. Two participants stopped attending; one at week four and one at week seven. No other CCDFS staff attended the training beyond these 32.

Table 26.1: Academy Attendance – winter 2017 cohort

OJT Activities Discussion:

A crucial component in the pedagogy of the Academy experience is on-the-job training activities which allow participants the opportunity to take the values, knowledge, and skills taught in the classroom and observe as well as practice job tasks out in the field under the supervision of a seasoned case worker. Currently CCDFS's internal training team serves as coaches for participants' field experiences. The coaches coordinate the activities that trainees participate in and then debrief with them their experiences at the end of the day with an emphasis on transfer of learning, strengths, and future skill development. UNLV-NPT collects OJT satisfaction data and shares this with the CCDFS internal training team for QA/QI purposes.

As of July 1, 2017, CCDFS has hired 36 new child welfare workers who were required to attend the Academy at UNLV.

Evaluation of Child Welfare Training Academy

Summary of Post Test Results

Pretests and posttests were given to participants (See **Table X**).

Mean pretest scores ranged from 38% (NIA Part 4 – SPD & CFR) to 77% (Basic Documentation). The mean pretest score across all modules was 60%.

Mean posttest scores ranged from 66% (PCPA) to 92% (Motivational Interviewing). The mean posttest score across all modules was 80%.

The percentage of participants who passed the posttests with at least 75% correct ranged from 47% (PCPA) to 100% (Intake Assessment).

Table 26.2: Pre/Post Test Results – Winter 2017 Nevada Child Welfare Training Academy

Week	Topic	Pretest scores				Posttest scores				Passed posttest with at least 75%	
		N	Mean	Range	SD	N	Mean	Range	SD	#	%
1	Basic Skills	32	55%	31-88%	14.2	32	80%	56-100%	11.4	23	72%
	Basic Documentation	32	77%	43-100%	14.7	32	88%	57-100%	11.4	26	81%
2	Intake Assessment	32	62%	42-83%	10.4	32	86%	73-91%	5.9	32	100%
3-4	NIA Part 1 – PDA, PDP & CSE	32	72%	0-100%	20.9	32	85%	63-100%	14.6	26	81%
4	NIA Part 2 – Info Collection	31	64%	25-88%	16.9	31	84%	50-100%	17.7	27	87%
5	NIA Part 3 – Judging Sufficiency	30	73%	25-100%	19.7	31	75%	50-100%	14.9	23	74%
5-6	NIA Part 4 – SPD & CFR	31	38%	13-63%	15.6	31	78%	38-100%	17.0	26	84%
6	Family Systems	31	61%	25-88%	14.6	31	79%	63-100%	14.4	24	77%
7	Motivational Interviewing	30	72%	33-100%	17.1	30	92%	44-100%	11.7	28	93%
8-9	PCFA	29	49%	9-82%	16.7	29	69%	55-91%	10.6	8	28%
10	Visitation & CSE	30	72%	50-100%	14.7	30	80%	50-100%	9.4	28	93%
	Perm Values	28	49%	20-100%	18.8	28	78%	20-100%	18.8	22	79%
11	PCPA	29	54%	22-78%	15.0	30	66%	33-89%	16.4	14	47%
12	Adoption & Case Closure	28	65%	33-100%	20.6	29	81%	17-100%	18.4	21	72%
	Ethics	29	54%	17-100%	19.8	29	75%	50-100%	14.9	17	59%
13	Time & Case Mgmt.	29	42%	0-75%	19.8	30	80%	25-100%	21.8	25	83%

Satisfaction Surveys

Satisfaction surveys are distributed to participants at the end of each module so that they can self-report their abilities across the trainings learning objectives, increase in understanding, instructor effectiveness, curriculum effectiveness, and overall perception of the training. The means for level of understanding, curriculum effectiveness, and overall evaluation are provided for both cohorts (**Tables 26.3**).

Table 26.3: Satisfaction Survey Results: Level of Understanding - Academy

Week	Topic	Winter 2017 (N = 32)		
		Level of understanding of topic prior to the training?	Level of understanding now?	Net Gain
1	Basic Skills	3.33	4.38	1.05

	Basic Documentation	3.32	4.16	0.84
	Human Development	3.50	4.39	0.89
2	Intake Assessment	2.19	4.03	1.84
3-4	NIA Part 1 - Intro, PDA, PDP, & CSE	2.30	3.79	1.49
4	NIA Part 2 - Info. Collection & Interviewing Families	2.83	4.07	1.24
5	NIA Part 3 - Judging Sufficiency & Assessing Impending Danger	2.57	3.82	1.25
5-6	NIA Part 4 - SPD & CFR	2.19	3.85	1.66
6	Family Systems	2.93	4.07	1.14
7	Motivational Interviewing	2.41	3.93	1.52
8	Placement, Grief & Loss	3.35	4.35	1.00
8-9	PCFA	1.81	3.62	1.81
10	Visitation & CSE	2.63	4.19	1.56
	Permanency Values	3.00	4.04	1.04
11	PCPA	2.27	3.73	1.46
12	Adoption & Case Closure	2.48	3.96	1.48
13	Case & Time Management	3.58	4.46	0.88

1 = None 3 = Moderate 5 = High Benchmark = 4.00+

The UNLV NPT training team is using a benchmark of “4” as the target for trainees understanding of content at the end of the training. Seven of the topics did not meet that target; NIA Part 1 (M=3.79), NIA Part 3 (M=3.82), NIA Part 4 (M=3.85), Motivational Interviewing (M=3.93), PCFA (M=3.62), and PCPA (3.73) and Adoption (M=3.96). These findings seem to be an anomaly; the last time the training was delivered was in spring 2017, with the same trainers, and all means were above “4”. Additionally, we have satisfaction data through week 9 of the current spring Academy and only one mean is below 4, which is for NIA Part 3. Will monitor and compare when the spring Academy is complete.

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Curriculum Effectiveness:

Table 26.4: Satisfaction Survey Results: Curriculum Effectiveness – Academy – winter 2017

Week	Topic	How well did the learning activities address different participant learning styles?	How responsive was the curriculum to the diverse make-up of the training group?	How effective was the balance between presentation and group involvement?	How effective were the in-room learning aids (i.e., videos, posters, etc.)?	How effective were the take-away materials (i.e. handouts, etc.)	Total Mean
1	Basic Skills	4.10	4.41	4.31	4.24	4.34	4.28
	Basic Documentation	4.32	4.45	4.61	4.38	4.35	4.42
	Human Development	4.69	4.57	4.83	4.66	4.59	4.67
2	Intake Assessment	4.00	4.28	4.34	4.34	4.28	4.25
3-4	NIA Part 1 - Intro, PDA, PDP, & CSE	4.30	4.30	4.27	4.21	4.30	4.28
4	NIA Part 2 - Info. Collection & Interviewing Families	4.59	4.59	4.69	4.68	4.52	4.61
5	NIA Part 3 - Judging Sufficiency & Assessing Impending Danger	4.37	4.33	4.37	4.33	4.30	4.34
5-6	NIA Part 4 - SPD & CFR	4.19	4.23	4.33	4.19	4.15	4.22
6	Family Systems	4.38	4.41	4.38	4.55	4.24	4.39
7	Motivational Interviewing	4.32	4.34	4.48	4.41	4.41	4.39
8	Placement, Grief & Loss	4.68	4.72	4.68	4.72	4.56	4.67
8-9	PCFA	4.28	4.32	4.32	4.20	4.36	4.30
10	Visitation & CSE	4.56	4.52	4.48	4.60	4.40	4.51
	Permanency Values	4.61	4.50	4.61	4.48	4.65	4.57
11	PCPA	4.21	4.17	4.42	4.33	4.17	4.26
12	Adoption & Case Closure	4.29	4.43	4.32	4.38	4.28	4.34
13	Case & Time Management	4.50	4.58	4.38	4.77	4.54	4.55
1 = Not Effective 3 = Somewhat Effective 5 = Very Effective							Benchmark Target = 4.00

Using a benchmark of “4” for trainees’ impressions of each module’s curriculum effectiveness, all modules met this benchmark. Highest scores for overall curriculum effectiveness were shared between Placement, Grief & Loss (M=4.67) and Human Development (M=4.71). Lowest scores were for NIA Part 4 (M=4.22) and Intake Assessment (M=4.25).

Overall:

Table 26.5: Satisfaction Survey Results: Overall – Academy – (Winter 2016 & Spring 2016)

Week	Topic	What is your overall evaluation of the workshop?
1	Basic Skills	4.41
	Basic Documentation	4.48
	Human Development	4.83
2	Intake Assessment	4.37
3-4	NIA Part 1 - Intro, PDA, PDP, & CSE	4.26
4	NIA Part 2 - Info. Collection & Interviewing Families	4.59

5	NIA Part 3 - Judging Sufficiency & Assessing Impending Danger	4.35
5-6	NIA Part 4 - SPD & CFR	4.23
6	Family Systems	4.31
7	Motivational Interviewing	4.38
8	Placement, Grief & Loss	4.64
8-9	PCFA	3.96
10	Visitation & CSE	4.60
	Permanency Values	4.54
11	PCPA	4.08
12	Adoption & Case Closure	4.48
13	Case & Time Management	4.65

1 = Poor 3 = Good 5 = Excellent Benchmark = 4.00 +

Overall, training satisfaction was high. All but one of the modules met the benchmark of “4”; PCFA (M=3.96).



University of Nevada, Reno

The Academy at UNR (PRE-SERVICE TRAINING)

The NPT Trainers at the University of Nevada, Reno launched their version of the Nevada Child Welfare Training Academy in October 2014. The WCHSA has 2 levels of workers: Case Managers who have a bachelor’s degree in an area other than social work and social workers who are licensed in the State of Nevada. DCFS Rural Region has only been able to hire social workers who are licensed due to their requirements. Most new workers have been required to not only have a degree in social work, but also to be a licensed social worker. As of April 2018 DCFS, can now hire individuals with similar degrees. Both the WCHSA and the DCFS Rural Region Case Managers must attend the UNR training and it continues with the original 10-week model (5-week classroom and 5 weeks of On the Job (OJT) where the NPT trainers do a week of classroom training and then the new workers return to their agencies for a week of mentoring and OJT training on their agency-specific procedures. This curriculum is also built on the SAFE Model and based on the life of the case.

Attendance Discussion:

The total number of attendance hours for the winter 2017 cohort is 2,377 (2,751 total hours possible less the 374 hours missed). 9 participants completed all 5 modules. Two participants finished up Academy from the last cohort. The remaining participants started the cohort late, ended their employ before completion, or were not required to attend all modules (WIN, DR, etc.). Further detail is provided in **Table X** below.

Table 26.6: Academy Attendance – winter 2017 cohort

UNR						
Week	Number of Participants in Attendance	Office		Total Hours of Missed Time	% Time Missed	Total Number of Hours of Training
One	15	WCHSA	4	41.25	9%	408.75
		DCFS-Rural	8			
		DCFS-FPO	0			
		WIN	0			
		DR	0			
		Other	3			
Two	18	WCHSA	7	52.5	10%	487.5
		DCFS-Rural	8			
		DCFS-FPO	0			
		WIN	0			
		DR	0			
		Other	3			
Three	15	WCHSA	7	45	8%	517.5
		DCFS-Rural	6			
		DCFS-FPO	0			
		WIN	0			
		DR	1			
		Other	2			
Four	20	WCHSA	8	133.2	22%	466.8
		DCFS-Rural	5			
		DCFS-FPO	0			
		WIN	0			
		DR	0			
		Other	7			
Five	20	WCHSA	7	102.40	17%	497.6
		DCFS-Rural	5			
		DCFS-FPO	0			
		WIN	0			
		DR	0			
		Other	8			

As of July 1, 2017, the Academy at UNR has trained 38 new child welfare workers.

Nevada Child Welfare Training Academy – Scholars (PRE-SERVICE STIPEND PROGRAM)

There was one full delivery of Nevada’s Child Welfare Training Academy from September 2016 through May 2017 for the IV-E Child Welfare Scholars Cohort being reported. This was the first Academy cohort for Scholars. The Scholars attended 2 days of Academy training per month during Fall ’16, 5 days in January ’17, and 2 days per month during Spring ’17. The Scholars graduated with their Academy requirement completed.

Attendance Discussion:

The total number of attendance hours for the Scholars cohort is 1,398.5 (1,477.5 total hours possible less the 79 hours missed). Of the 10 people that started the Academy, 9 completed it. One participant stopped attending after Week 2 because she decided to go to Graduate school before completing her commitment. Missed time was made up by attendance at the standard Academy roll out with hours reported with that roll out. Further detail is provided in **Table 26.7** below.

Table 26.7: Academy Scholars Attendance – September 2016 thru May 2017

UNR					
Week	Number of Participants in Attendance	CEU’s	Total Hours of Missed Time	% Time Missed	Total Number of Hours of Training
One	10	30	0	0%	300
Two	10	30	0	0%	300
Three	9	37.5	30 (made up)	8%	307.5
Four	9	30	49 (made up)	18%	221
Five	9	30	0	0%	270

OJT Activities Discussion:

Scholars’ participants complete the OJT activities associated with Academy as well as additional activities to ensure that they meet the CSWE Competencies as part of their Field experience.

Caseworker Surveys for Initial Training (completed in May 2017)

Statewide surveys were completed to assess the effectiveness of Initial Training. A web link was sent to each jurisdiction for staff to participate in the survey and the target population were Caseworkers who provided direct case management to clients and Supervisors who provided direct case management oversight of Caseworkers. One hundred and fifteen respondents participated: 54% were Caseworkers (N=62); 29% Supervisors (N=33); and, 17% (N=20) were disqualified. It should be noted that three supervisors did not continue past the first question. Blanks that resulted from skipped questions were omitted for determining the percentage results below. Thirty five percent were in the Rural Region, 38% in Clark

County, and 27% in Washoe County. Seventy percent of Supervisors and 53% of Caseworkers had at least 3 years or more of experience.

Seventy-nine percent of Caseworker respondents who completed initial child welfare training within the last year (N=24) indicated that the training was sometimes effective, usually effective, or very effective for providing the skills and knowledge necessary to be a caseworker. Eighty-eight percent of Caseworker respondents indicated that they had not missed any components of Initial Training and 77% reported they received Indian Child Welfare Act (ICWA) training. Those that missed some training cited the following reasons; illness, court hearing, caseload responsibilities, timing related to relocation activities, and death in the family. Statewide, 46% of Caseworker respondents did not receive a caseload while they were attending Initial Training. The caseload assigned to the 54% of respondents who did have a caseload during initial training varied immensely. It ranged from 1-30+ cases with 69% of the assigned caseloads ranging between 2-10 cases. Caseworkers who received a caseload, were asked to provide the immediate level of supervision they received. Approximately 81% indicated that they received daily or weekly oversight from a supervisor, 8% Bi-weekly, 3% monthly, 2% quarterly, and 5% other; which described scheduling conflicts that impacted set supervision times. A series of questions were asked to determine if the Supervisor's oversight was of quality. An average of 75% of Caseworkers indicated their supervisor provided clear concise directives, incorporated the workers knowledge and experience in each supervisory exchange, provided an appropriate level of supervision based on the level of function of a child welfare worker, provided recommendations for service intervention and the caseworker received validation.

Of Caseworkers who were employed in the last two years, 96% indicated that they were provided orientation to their new position and the agency. Caseworkers cited caseload size and responsibilities as the leading barrier to attending and acquiring knowledge, during Initial Training. All the caseworkers received direct supervision upon being provided a caseload, however, the level of supervision varied as aforementioned. The employee vacancies and clients' need impacted caseload assignment early in training. Supervisors received Initial Training upon hire, however, there is not an additional, required Supervisory Training upon accepting a supervisor position. Supervisors commented they would like to see Initial Training related to Child Welfare Supervision. Caseworkers were asked to identify barriers or gaps experienced in learning the knowledge and skills to perform duties and the responses include: not knowing one's position during the Academy; lack of formal training on court report writing and social summaries; lack of supervision upon receiving a caseload; being assigned a caseload during training; Supervisors' lack of patience with new workers; and, the training material lacked overview of the Statewide Child Welfare Software Systems. Strengths cited included the adequacy of the training to learn rules, policy, and procedures, supportive management, training included adequate child welfare fundamentals, and training was identified as comprehensive with competent, easygoing trainers.

Focus Groups October 2017

A statewide focus group was conducted in October 2017 with Caseworkers from all jurisdictions concerning initial training. Caseworkers from the DCFS Rural Region and Washoe County Human Services Agency indicated that the training provided by the University of Reno (UNR) was a crash course in everything. Caseworkers from the south who had attended training from the University of Las Vegas (UNLV) indicated the training could use some revision and seemed highly focused on how to perform the SAFETY model and not practical skills for the various job tasks. Most caseworkers indicated that most of what they learn comes from experience and from other peers and colleagues. Training is described as too broad for all the various program areas and no practical training on how to complete more specific task i.e. the Interstate Compact for the Placement of Children (ICPC), social summaries or the court process. Additionally, some caseworkers indicated that not all supervisors were helpful to teach new workers. Caseworkers from WCHSA were complementary of the Washoe mentoring process of one week in Academy and then one-week shadowing trainers and workers in various units.

Additionally, a statewide focus group was conducted in October 2017 with Supervisors from all jurisdictions concerning initial Supervisory Training. Supervisors in the south reported receiving a two-day training upon initial hire "Marsha Salas Training" which was reported to be six modules of how to supervise and work with people, but was considered generic and not geared toward the unit or department that one worked in. Supervisors indicated that one must really figure out how to do the job on the job while learning from other supervisors. Some supervisors in the north reported that they have not received any initial Supervisory Training except for training concerning the SAFETY model provided by Action for Protection. Many Supervisors indicated that they had received Action for Protection's "Consultative Supervision" training.

Item 27: On-going Staff Training

Requirements:

State statute requires employees to be responsible for their basic professional training needs and must complete a minimum of 30 hours continuing education every two years, which is consistent with the licensure requirements for Social Workers (NRS 432B.195, 432B.397, 432B.175, NAC 284.482, 284.498, 424.270, 432A.680 and 432B.090). The state and local child welfare agencies are required to ensure that child welfare staff receive the Advanced training required to be proficient in child welfare practice. In the 2017 Legislative Session Assembly Bill (AB) 99 was passed that will require training for all child welfare staff who come into direct contact with children to receive training within 90 days of employment and annually thereafter concerning working with lesbian, gay, bisexual, transgender and questioning children (LGBTQ).

The State of Nevada Administrative Code 432B.090 provides general requirements for all staff engaged in child welfare services to obtain 30 hours biennially of training related to those child welfare services. The DCFS Rural Region has required in the past for all their child welfare workers to be licensed by the Board of Examiners for Social Workers which requires Licensed Social Workers and Licensed Associate Social Workers to have 30 hours of approved Continuing Education credit every two years, of which, two hours must relate to ethics in the practice of social work and 10 hours must be in the field of practice of the licensee. As of April 2018 the DCFS Rural Region can now hire an individual with a related degree and this does not require licensure. Licensed Clinical Social Workers and Licensed Independent Social Workers must complete at least 36 continuing education hours every two years, of which three hours must relate to ethics in the practice of social work and 12 must be in the field of practice of the licensee. Therefore, the agency requires that a copy of the current Social Work license be in an employee's personnel file, thus verifying that this requirement is being met. If the training is not completed and the Agency is notified by the Social Work Board that the license has lapsed the Social Worker is not allowed to continue case management work. They are not allowed to conduct direct practice with children and families.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 74.

How well is the staff and provider training system functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?

Staff, for purposes of assessing this item, includes all contracted/non-contracted staff who have case management responsibilities in the areas of child protection services, family preservation and support services, foster care services, adoption services, and independent living services pursuant to the state's CFSP.

Staff, for purposes of assessing this item, also include direct supervisors of all contracted/non-contracted staff who have case management responsibilities in the areas of child protection services, family preservation and support services, foster care services, adoption services, and independent living services pursuant to the state's CFSP.

Please provide relevant quantitative/qualitative data or information that show:

- that staff receive training pursuant to the established annual/bi-annual hour/continuing education requirement and time frames for the provision of ongoing training; and
- how well the ongoing training addresses skills and knowledge needed by staff to carry out their duties with regard to the services included in the CFSP.

State Response:

Nevada has determined that this item is an area needing improvement. Nevada does not have the ability to track on-going trainings statewide for children welfare staff. On-going Training or In-Service Training in Nevada is called "Specialty Training" and while delivered by UNLV in the South and UNR in the North it varies across the state. There is no set specific

on-going Supervisor Training, but Supervisors can take any Specialty Trainings offered by either University. The State of Nevada Administrative Code (NAC) 432B.090 provides general requirements for all staff engaged in child welfare services to obtain 30 hours biennially of training related to those child welfare services. However, the state is unable to track if this is occurring and relies on self-reports from the Child Welfare Agencies.

In the Spring of 2018 Nevada will be implementing a new and innovative Learning Management System (LMS) called Saba. Saba will allow Nevada to track statewide trainings in a more efficient way. Additionally, Nevada is working with the Capacity Center for States who are assisting in identification of a supervisory coaching model that will address supervisory training needs across the state. In the 2017 Legislative Session, Assembly Bill (AB) 99 was passed which now requires training for all child welfare staff who come into direct contact with children to receive training within 90 days of employment and annually thereafter concerning working with lesbian, gay, bisexual, transgender and questioning children (LGBTQ).

The DCFS Rural Region requires all their child welfare workers to be licensed by the Board of Examiners for Social Workers which requires Licensed Social Workers and Licensed Associate Social Workers to have 30 hours of approved continuing education credit every two years, of which, two hours must relate to ethics in the practice of social work and 10 hours must be in the field of practice of the licensee. Licensed Clinical Social Workers and Licensed Independent Social Workers must complete at least 36 continuing education hours every two years, of which three hours must relate to ethics in the practice of social work and 12 must be in the field of practice of the licensee. Therefore, the agency requires that a copy of the current Social Work license be in an employee's personnel file, thus verifying that this requirement is being met. If the training is not completed and the agency is notified by the Social Work Board that the license has lapsed the Social Worker is not allowed to continue case management work. They are not allowed to conduct direct practice with children and families.

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

Online On-going Training

Currently, the Nevada Partnership for Training (NPT) offers 3 online courses on-going and they are listed as follows:

- Indian Child Welfare Act Training (ICWA)
- Child Welfare Ethics and Liability
- Mandated Reporting

The University of Nevada, Reno (UNR) is responsible for the instruction of the online trainings Child Welfare Ethics and Liability and Mandated Reporting. As of July 1, 2017, 38 workers have completed the Child Welfare Ethics and Liability training and 188 workers have completed the Mandated Reporter training. The University of Nevada, Las Vegas (UNLV) is responsible for the instruction of the online Indian Child Welfare Act Training (ICWA) and as of July 1, 2017, 32 workers have been trained.



Specialty Training (IN-SERVICE Training provided by UNLV)

Motivational Interviewing Specialty Core

Table 27.1

UNLV				
Training	Delivery Dates	Number of Participants in Attendance	Agency	Total Attendance Hours

Intermediate Motivational Interviewing	3/28/2017	6	CCDFS - 6	36 hours
	6/29/2017	5	CCDFS – 3 DHCFP – 1 DCFS – Mental Health - 1	30 hours
The Spirit and Skills of Motivational Interviewing – Permanency Focus	4/24-25/2017	15	CCDFS – 5 DCFS – Mental Health – 5 DCFS Rural – 4 DCFS Central Office - 1	180 hours
The Spirit and Skills of Motivational Interviewing – NIA Focus	5/31-6/1/2017	4	CCDFS – 3 DHCFP - 1	48 hours

Motivational Interviewing – Attendance Discussion

Per CCDFS request, UNLV-NPT delivers a motivational interviewing training each month to reinforce this cornerstone of practice that is part of Nevada’s safety model protocol. Three different types of training were offered which is reflected in the table above, of which accounted for 294 hours of attendance.

Table 27.2

New Supervisor Training: UNLV-NPT delivered five of the six Supervisor Training modules from January 1, 2017 to July 1, 2017. Each module is two days of instruction and modules are delivered sequentially each month.

UNLV					
Module	Date	Number of Participants in Attendance	Office	Total Amount of Missed Time	Total Number of Hours of Training
Six	1/11-12/2017	5	CCDFS	-	55 hours
One	3/6-7/2017	14	CCDFS	-	154 hours
Two	4/5-6/2017	9	CCDFS	-	99 hours
Three	5/23-24/2017	8	CCDFS	16.5 hours	71.5 hours
Four	6/13-14/2017	9	CCDFS	5.5 hours	93.5 hours

Supervisor Training Series – Attendance Discussion

The number of trainees per module ranged from 5 to 14. The NPT calculates each module at an average of 11 hours of attendance per participant, therefore the total attendance for this reporting period is 473 hours.

Evaluation of Supervisor Training

Summary of Pre-and Post-Test Results

Currently there are no pre-and post-tests devised for the Supervisor Training Core Series. However, UNLV has incorporated action planning and journaling as a part of the training tools and transfer of learning materials to promote the continuance of training information learned into practice. Additionally, the managers of the supervisors are emailed a summary of the training module immediately after the training with a request that they follow up on their supervisor’s training action plan.



Table 27.3
Specialty Training (IN-SERVICE Training provided by UNR)
Addictions Series

UNR					
Training	Delivery Dates	CEU's	Number of Participants in Attendance	Agency	Total Attendance Hours
Addictions 101	4/20/2017	6	5	WCHSA – 1 DCFS - 1 Other - 3	30 hours
Addictions 201	4/25/2017	6	8	WCHSA – 4 DCFS - 0 Other - 4	48 hours
Addictions 202	6/23/2017	6	15	WCHSA – 7 DCFS - 3 Other - 5	90 hours
Addictions 203	2/24/2017	6	5	WCHSA – 2 DCFS - 1 Other - 2	30 hours

Addictions – Attendance Discussion

33 participants completed 198 hours of training on Addictions in this reporting period in four different courses reflected in the table above.

Table 27.4
Ethics Series

UNR					
Training	Delivery Dates	CEU's	Number of Participants in Attendance	Agency	Total Attendance Hours

Social Work Ethics in the Digital Age	5/9/2017 AM WCHSA	3	20	WCHSA – 20 DCFS - 0 Other - 0	60 hours
	5/9/2017 PM WCHSA	3	16	WCHSA – 16	48
	5/12/2017 AM WCHSA	3	17	WCHSA – 17	51
	5/12/2017 PM WCHSA	3	23	WCHSA – 23	69

Ethics – Attendance Discussion

76 participants completed 228 hours of training on Ethics in this reporting period as reflected in the table above. This course was developed by request of Washoe County and delivered on site for the convenience of their staff.

Table 27.5

Family Engagement Series

UNR					
Training	Delivery Dates	CEU's	Number of Participants in Attendance	Agency	Total Attendance Hours
Engaging Fathers: The Hero Search	5/16/2017	6	6	WCHSA – 3 DCFS - 3 Other - 0	36 hours

Engaging Fathers – Attendance Discussion

6 participants completed 36 hours of training on Family Engagement in this reporting period reflected in the table above.

Table 27.6

LGBTQ Series

UNR					
Training	Delivery Dates	CEU's	Number of Participants in Attendance	Agency	Total Attendance Hours
Working with LGBTQ Youth in	2/22/2017		8	WCHSA – 3	48 hours

Care		6		DCFS - 4 Other - 1	
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LGBTQ Youth – Attendance Discussion

8 participants completed 48 hours of training on Working with LGBTQ Youth in Care in this reporting period as reflected in the table above.

Table 27.7

Mental Health Series

UNR					
Training	Delivery Dates	CEU's	Number of Participants in Attendance	Agency	Total Attendance Hours
Mental Health 202	1/27/2017	6	15	WCHSA – 4 DCFS - 5 Other - 6	90 hours

Mental Health – Attendance Discussion

15 participants completed 90 hours of training on Mental Health in this reporting period reflected in the table above.

Table 27.8

Motivational Interviewing Series

UNR					
Training	Delivery Dates	CEU's	Number of Participants in Attendance	Agency	Total Attendance Hours
The Spirit and Skills of Motivational Interviewing	1/31/2017 & 2/1/2017 (Academy Imbedded)	12	19 (16 counted in Academy) + 3 Additional	WCHSA – 0 DCFS - 3 Other - 0	36 hours
Intermediate Motivational Interviewing	4/4/2017- Pahrump	6	12	WCHSA – 0 DCFS - 12 Other -	72 hours
	4/24/2017 - Elko	6	11	WCHSA – 0 DCFS - 11 Other - 0	66 hours

Motivational Interviewing – Attendance Discussion

The Spirit and Skills of Motivational Interviewing was delivered as part of Academy. 16 participants were Academy participants and their attendance was counted in the Academy Week 2 discussion. Three additional participants joined with attendance recorded above. A total of 19 participants received this training. Intermediate Motivational Interviewing was delivered twice in the DCFS-Rural Region for a total of 23 participants and 138 hours.

Table 27.9

PCFA & PCPA Series

UNR					
Training	Delivery Dates	CEU's	Number of Participants in Attendance	Agency	Total Attendance Hours
PCFA Basics	1/24/2017-1/26/2017	12	20	DCFS - 20	240 hours
	2/28/2017 – 3/2/2017 Pahrump	12	3	DCFS - 3	36 hours
	3/28/2017-3/30/2017 Elko	12	15	DCFS - 15	180 hours
PCPA	2/21/2017	7	14	DCFS - 14	98 hours
	3/14/2017	7	7	DCFS – 7	49 hours
	4/5/2017 Pahrump	7	10	DCFS – 1	70 hours
	4/24/2017 Elko	7	11	DCFS – 11	77 hours

PCFA & PCPA – Attendance Discussion

38 DCFS-Rural participants completed 456 hours of training on PCFA Basics. 33 DCFS-Rural participants completed 294 hours of training on PCPA. A total of 750 hours of training was completed with DCFS-Rural workers on PCFA/PCPA as reflected in the table above.

Table 27.10

SAFE Practice – An Overview of the Life of a Case

UNR					
Training	Delivery Dates	CEU's	Number of Participants in Attendance	Agency	Total Attendance Hours
SMO	6/19/2017-		10	WCHSA – 0	211.25 hours

	6/23/2017	26		DCFS - 0 Other - 10	
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SAFE Practice – An Overview of the Life of a Case – Attendance Discussion

10 participants completed 211.25 hours of training on SAFE Practice in this reporting period as reflected in the table above.

Table 27.11

Sexual Abuse Series

UNR					
Training	Delivery Dates	CEU's	Number of Participants in Attendance	Agency	Total Attendance Hours
Child Sexual Development	5/2/2017	6	7	WCHSA – 3 DCFS - 4 Other - 0	42 hours

Child Sexual Development – Attendance Discussion

7 participants completed 428 hours of training on Child Sexual Development in this reporting period as reflected in the table above.

Table 27.12

Trauma Series

UNR					
Training	Delivery Dates	CEU's	Number of Participants in Attendance	Agency	Total Attendance Hours
Trauma Training Toolkit	6/6/2017-6/7/2017	11.75	6	WCHSA – 6 DCFS – 0 Other – 0	70.5 hours

Trauma Series – Attendance Discussion

6 participants completed 70.5 hours of training on Trauma in this reporting period as reflected in the table above.

Caseworker Surveys for On-going Training (completed in May 2017)

Statewide surveys were completed to assess the effectiveness of on-going staff training. A web link was sent to each jurisdiction for staff to participate in the survey and the target population were Caseworkers who provided direct case management to clients and Supervisors who provided direct case management oversight of Caseworkers. One hundred and fifteen respondents participated: 54% were Caseworkers (N=62); 29% Supervisors (N=33); and, 17% (N=20) were disqualified. It should be noted that three supervisors did not continue past the first question. Blanks that resulted from

skipped questions were omitted for determining the percentage results below. Thirty five percent were in the Rural Region, 38% in Clark County, and 27% in Washoe County. Seventy percent of Supervisors and 53% of Caseworkers had at least 3 years or more of experience.

Fifty-three percent of Caseworker respondents indicated that they had been with the agency for more than two years (N=33). Of these respondents who had been with the agency for more than two years, 89% cited they received 30 hours of bi-annual (every two years) Ongoing Training, as it relates to child welfare services in accordance with requirements specified in Nevada Revised Statutes. Statewide, 58% of Caseworker respondents reported they participated in Ongoing Training via Nevada Partnership Training, 8% via Washoe County, 22% via Clark County, and 12% via the Rural Region. The Caseworkers were asked how effective Ongoing Training was to address the skills and knowledge base needed to carry out duties, on a scale of 1-5, with 5 being Very Effective. Ninety-two percent indicated that Ongoing Training was sometimes effective, usually effective, or very effective. Caseworkers commented they had a difficult time getting away from work to attend training, already completed training to maintain their social work license, or were never informed of upcoming trainings. Twenty-two percent of Caseworkers reported their supervisors declined their request for training. Reasons cited for declining the request included cost, lack of coverage, a court hearing, or the fact that the training was not considered mandatory. The weaknesses, barriers, and gaps cited by the Caseworkers were the lack of supervisors with previous experience, increase in overtime to attend training, poor communication, misunderstanding of what trainings were required, high turnover, lack of training when transitioned into a new position, lack of readily available training, the practice continues to evolve and change, timing of training, caseload size, lack of advance notices for training, "the biggest barrier has been the gap between learning information and the delayed implementation of new models," supervisors being unavailable for consultations, supervisors lacked the ability to provide direct clear instructions to a new caseworker, supervisors' inconsistent interpretation of a Nevada Initial Assessment, difficulty in retaining massive amounts of information, lack of trauma training and more frequent training, lack of policy training, inadequate SAFE module training, "inconsistent application of new ISPS modality from how investigations are initiated, all the way through the documentation of said investigations", lack of time management skills and prioritizing training, lack of shadowing, lack of interactive learning and hands on, and dedicated intake workers for the offices who pull caseworkers to do intake, which will allow more time to attend training. The Strengths included: "the training is extremely helpful," the training unit/Nevada Partnership trainers were "knowledgeable and competent," there is a great deal of peer to peer learning, supportive coworkers, good presentations by training instructors, and good managers.

Supervisor Surveys for Training (completed in May 2017)

Supervisor training in Nevada varies statewide and no specific on-going supervisory trainings exist. Supervisors may take any "Specialty Training" offered by the Universities as on-going training. In May 2017, statewide surveys were conducted to determine the effectiveness of supervisor training. Eighty-three percent of the supervisor respondents indicated that they did receive training that provided them with the necessary skills and knowledge to do their job. Supervisors were asked if training was adequate to provide the necessary oversight/supervision required for a child welfare employee, on a scale of 1-5 with 5 being Strongly Agree. Seven percent of respondents indicated that the question was not applicable, and 59% either agreed or strongly agreed that training was adequate. Eighty-six percent received the Marsha Salus Supervisory Training and one Supervisor commented that the Marsha Salus Training "was excellent and provided me skills that I was not able to accrue despite years of supervision experience." Other Supervisors commented there was more training offered to supervisors implementing the SAFE model than those who were not implementing the model. Training was identified as "systematic implementation of policy or new practice" and provided updates on the changes in the Child Welfare system. When Supervisors were asked to comment on recommendations for training for Child Welfare Supervisors they stated the following: continuation of Marsha Salus Training, training that is more specific to Child Welfare Supervision, a supervisor training plan prior to being assigned a unit, reports that allow each jurisdiction the ability to track an employee's work and interpret case compliance, more supervisor group trainings to share experiences and knowledge, more team building activities, a supervisor mentoring program, and trainings offered more often. Supervisors were asked to provide information about how they assessed the Caseworkers to better understand training for Caseworkers. Thirteen percent reported that they only used the employee appraisal and development report (employee evaluation form) to assess a worker for their training needs, while 20% report a manager and/or the agency determine what type of training caseworker's needs. Most supervisors, 67%, used a combination of approaches that included manager input, caseworker job performance, employee evaluation forms, and 1:1 feedback. Some Supervisors commented that they had routine staffing or 1:1 to help with identifying caseworkers' needs. When requested to identify the frequency they met with the Caseworkers, 10% reported daily, 20% weekly, 33% monthly, 20% quarterly, and 17% yearly.

Focus Groups October 2017

A statewide focus group was conducted in October 2017 with Caseworkers from all jurisdictions concerning on-going training. Caseworkers were asked what they were required to do in terms of training on a yearly basis and all indicated that there are only a few mandatory on-going trainings for staff related to child welfare, and most stated mandatory staff training related to personnel issues. Also, most indicated if a caseworker had a social work license there was an expectation training was completed to maintain the license. Caseworkers did indicate that different trainings are offered but that they were not mandatory, and caseworkers indicated that they had to keep track of their own trainings. Additionally, some caseworkers did advise that there was new legislation that caseworkers are now mandated to take training for LGBTQ children in foster care. Some indicated at their agency they were mandated to take motivational interviewing every two years. Many participants stated that those caseworkers who complete the optional training do it for either CEUs or when they have time because work load is a barrier to attending optional trainings. Caseworkers were asked has the training prepared them to do their jobs and some experienced workers felt like they'll never know enough information because the system is often changing. It was further reported that on-going trainings offered seemed to be redundant and it was often difficult to find on-going trainings.

Additionally, a statewide focus group was conducted in October 2017 with Supervisors from all jurisdictions concerning on-going training. All Supervisors indicated there were no on-going training requirements specific for begin a supervisor unless you have a social work license.

Item 28: Foster and adoptive parent training

Requirements:

State statutes, regulations and state policy provide for DCFS, in consultation with the other Nevada child welfare agencies, to regulate the standards for family foster homes, advanced foster homes, independent living foster homes and group foster homes to ensure the training of persons who provide the direct care of children Besides the foster parents initial training requirements, Nevada Revised Statutes (NRS) 424.0365 also requires that anyone who "operates a family foster home, an Advanced 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 30 days after employment and annual thereafter. Such training must include, without limitation, instruction concerning: (a) controlling the behavior of 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) such other matters as are required by the licensing authority or pursuant to regulations of the Division.

Additionally, NRS 432A.177 requires a licensee of a child care facility to ensure training of employees who have direct contact with children and to ensure the facility staff receive training within 30 days after employment and annually thereafter. Such training must include instruction concerning: (a) controlling the behavior of children; (b) policies and procedures concerning the use of force and restraint on children; (c) the rights of children in the facility;(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) such other matters as are required by the licensing authority or pursuant to regulations of the Division.

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. Training programs for adoptive parents of a child with special needs require the adoptive parent to complete a training program regarding the care of children with special needs or a training program designed to address the individual need of a specific child. 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. Advanced Foster homes are required to have a minimum of 40 hours pre-service training and 20 hours advanced training annually.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 84.

How well is the staff and provider training system functioning to ensure that training is occurring statewide for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities (that care for children receiving foster care or adoption assistance under title IV-E) that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children?

Please provide relevant quantitative/qualitative data or information with respect to the above-referenced current and prospective caregivers and staff of state licensed or approved facilities, that care for children receiving foster care or adoption assistance under title IV-E, that show:

- that they receive training pursuant to the established annual/bi-annual hourly/continuing education requirement and time frames for the provision of initial and ongoing training.
- how well the initial and ongoing training addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.

State Response:

Nevada has determined this item to be an area needing improvement due to Nevada's child welfare agencies lacking a current system to track data regarding the ongoing/advanced training that Nevada's foster and adoptive parents receive annually. The foster home's licensing worker annually ensures that foster caregivers are attending the required ongoing training. The foster caregiver is required to provide proof documents that demonstrate to the licensing worker that the caregiver attended this training. Whenever possible, the licensing worker attempts to obtain any training certificates of completion. When certificates are not provided through the training, the licensing worker will request other documentation that shows attendance, i.e. receipts, syllabus, or other documents provided at the training. The licensing worker would document the caregiver's ongoing/advanced training in the foster parent case file. Currently, to attempt to determine whether foster/adoptive caregivers are receiving advanced training that directly supports the needs of the child population in their foster homes or to meet an individual child's special needs, it would require a hard file, case review, including a direct hand count and documenting the topic and/or content area of the caregiver's advanced training. Currently, Nevada does not have the personnel resources to accomplish this level of review.

Qualitative data has not been collected from the Child Care Institutions.

Plan: DCFS Family Program Office recently began meeting with all three child welfare agencies' foster parent training units, to identify potential short and long-term solutions to identify what specific advanced trainings foster/adoptive parents receive on an annual basis. This information will be tracked to determine if foster/adoptive parents have gaps in training or may benefit from specific trainings, along with the ability for future reporting within the APSR and other reports.

DCFS will continue to work directly with Department of Public and Behavioral Health Child Care Licensing to better capture data needed to assure IV-E compliance.

- 2. Relevant quantitative/qualitative data or information with respect to the above-referenced current and prospective caregivers and staff of state licensed or approved facilities, that care for children receiving foster care or adoption assistance under title IV-E**

Statewide Data (FFY 2018)

The three child welfare agencies ensure all licensed foster, adoptive, and relative homes receive pre-service and ongoing training. Pre-service training is tracked through Nevada SACWIS reports.

- The Clark County Department of Family Services (CCDFS) has provided initial training for **502** foster home licensures (61.7% foster/adoptive, and 38.3% relative) for FFY 2017.
 - The Division of Child and Family Services (DCFS) Rural Region has provided initial training to **75** foster home licensures (64.0% foster/adoptive, and 36.0% relative) for FFY 2017.
 - The Washoe County Human Services Agency (WCHSA) has provided initial training to **141** foster home licensures (63.8% foster/adoptive and 36.2% relative) for FFY 2017.
- 11/29/17- NV SACWIS specialty report: above data; also, 100% of newly licensed foster homes completed pre-service training prior to receiving licensure.*

Staff of state licensed or approved child care institutions providing residential care for children in the custody of a child welfare agency receive licensure and training certification through the Nevada Division of Public and Behavioral Health (DPBH) Child Care Licensing. Currently, there are four child care institutions in the Nevada.

2. Nevada’s foster care training system ensures that foster/adoptive caregivers receive pre-service training that addresses the skills and knowledge based needed for them to carry out the duties with regard to caring for foster and adopted children.

- **Training pursuant to the established annual/bi-annual hourly/continuing education requirement and time frames for the provision of initial and ongoing training**

Nevada Training Practices:

Nevada Revised Statutes (NRS) Chapter 424-**Foster Homes for Children**, Nevada Administrative Code (NAC) Chapter 424-**Foster Homes for Children** also known as the Nevada Foster Care Licensing Regulations and statewide child welfare policies, provide the basis for Nevada’s child welfare agencies training requirements for foster parent licensure of family foster homes, foster/adoptive homes, advanced foster homes, specialized foster homes, independent living foster homes and group foster homes. Besides the foster parents basic training requirements, 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 of 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; (h) working with lesbian, gay, bisexual, transgender and questioning children, and (i) such other matters as are required by the licensing authority or pursuant to regulations of the Division. In addition, foster parents are required to receive training in the Reasonable and Prudent Parent Standard to ensure that children in the foster care system are able to experience normalcy within their daily lives in regard to extracurricular, cultural, social and enrichment activities.

Required Minimum Training: Nevada Administrative Code (NAC) 424.270 states an applicant for a license for a foster home must have at least eight (8) 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. Training programs for adoptive parents of a child with special needs require the adoptive parent to complete a training program regarding the care of children with special needs or a training program designed to address the individual need of a specific child. **Annually each foster parent must complete a minimum of four (4) hours of advanced training in foster parenting provided or approved by the agency that provides child welfare services. Specialized foster homes are required to have a minimum of 40 hours pre-service training and 20 hours advanced training annually.**

FOSTER/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. Many pre-adoptive foster homes have the specific child names identified on their foster home license, therefore eliminating solicitation by the child welfare agency to take additional child placements, as would be a common foster care practice.

Family Foster Home Training – Currently, each jurisdiction utilizes a different foster/adoptive parent pre-service training. CCDFS currently uses the TIPPS/MAP Pre-Service Training but is planning to develop a more comprehensive pre-service training. WCHSA currently uses the Trauma Informed Pre-Service (TIPS) and the DCFS Rural Region currently uses PRIDE. The current jurisdictions' pre-service trainings cover similar topic areas. These three pre-service trainings vary in number of training hours required for completion; they range from 24 to 30-hour total. Recently, in the 2017 Nevada Legislative Session, AB 99 was enacted. This new law requires child welfare agencies to provide training to all foster parents regarding working with LGBTQ youth in the foster care system. There is currently a group of statewide LGBTQ trainers meeting to identify and develop core competencies, a possible basic curriculum and determine how to best implement this LGBTQ training information into each jurisdiction's pre-service and ongoing trainings. This would help to ensure that foster parent training, regarding working with LGBTQ youth, would be consistent throughout the state. Furthermore, each child welfare jurisdiction is currently looking to either update their pre-service training to be more comprehensive or possibly develop a comprehensive pre-service training that meets all the training requirements within NRS 424 / NAC 424. It is hoped that the necessary steps can be made and a new pre-service implemented sometime in late CY 2018.

When kinship/relative foster caregivers seek licensure, and depending on their individual circumstances and needs, they may opt to receive a condensed pre-service training, which meets the basic training requirements within NAC 424.

Specialized Foster Care Program – Nevada has implemented a legislatively approved and funded, Specialized Foster Care Program (SFCP) within all three Nevada child welfare agencies. One of the components within this new SFCP, is an advance foster care home capacity, where the child welfare agency identifies certain family foster homes that are capable and willing to manage children with higher behavioral needs. This new program requires these family foster parents to participate in advanced training in Together Facing the Challenge, which is an evidenced-based foster care treatment model, Trauma Informed Care and Medication Management and Administration. These three advanced trainings provide the foundation for this new program. Along with providing the advanced trainings, each child welfare agency has a designated unit that provides specialized staff that deliver ongoing, direct support services to these foster parents. The services include 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. These staff also collect outcome measures to determine the success and wellbeing of the higher-need children placed in these homes.

Foster Care Agencies: Contracted Foster Home Training – Foster care agency's contracted foster homes have significantly higher training requirements per NAC 424, these requirements go beyond the training requirements for family foster homes. The foster care agencies, per their contract with the child welfare agency, must provide all required training to their contracted foster caregivers. Not only must these foster caregivers receive the same training as family foster homes, but they must also receive the additional training requirements identified in NAC 424.712 through 424.718. Foster care agencies must provide to the licensing authority, within their jurisdiction's child welfare agency, all required proof documentation for initial licensure of the foster caregivers they intend to contract with as foster homes. Although foster care agencies can provide all the initial services required for licensure, only the licensing authority is able to provide the foster care license for their contracted foster homes. All three child welfare agencies utilize their own staff on an ongoing basis to do the required evaluation and follow-up to ensure that each of their contracted foster care agencies is in fact complying with all Nevada laws regarding foster care licensing standards and the care of foster children.

Ongoing Foster Parent Training – Both the WCHSA and the CCDFS, being in urban areas of Nevada, can provide numerous community advanced foster care training through various experts and/or their own staff in topics of interest and need for foster caregivers. There have been ongoing opportunities, during the past year, for foster parents to attend and participate in advanced trainings. In addition, both the WCHSA and the CCDFS frequently video tape these trainings and post these to the QPI Nevada Just in Time website, so foster caregivers can access these video training during hours that are more opportune for their busy schedules and/or to refresh their knowledge. The DCFS Rural Region does provide opportunities for advanced training in rural Nevada, usually by DCFS staff or contractors. However, it is hard to find expert presenters that are willing to travel the distances required across Nevada. There have been various advanced trainings that have occurred in Elko, Fallon, Carson, Pahrump, etc., but even with these, there remains the barrier of significant travel to and from the various rural towns in Nevada for DCFS foster caregivers. Since the inception of the QPI Nevada Just in Time website, rural foster caregivers now have an additional opportunity to watch high-quality, advanced foster parent trainings from their computer. The Nevada QPI provides a post-test to ensure that caregivers have truly watched and understood the training, upon passing the post-test the foster caregiver is emailed a certificate of training completion.

Table 28.1

Statewide FFY 2017 – QPI Live Webinars / Just in Time Video Training Certificates

Qtr. 1 Oct thru Dec 2016	1293
Qtr. 2 Jan thru Mar 2017	2313
Qtr. 3 Apr thru Jun 2017	2520
Qtr. 4 Jul thru Sept 2017	2133
Total	8259

Other than the required annual trainings, foster parents have been able to self-determine what trainings they have an interest in attending. There has not been a systematic method to track and determine if individual foster parents are taking training that addresses the specific skill and knowledge needed to provide the best care for the particular population of children currently placed in their foster home.

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 hard case file and is not currently tracked within a systematic approach.

Child Care Institutions – NRS 432A.0245 - Definition: “Child care institution” means a facility which provides care and shelter during the day and night and provides developmental guidance to 16 or more children who do not routinely return to the homes of their parents or guardians.

Currently there are four (4) institutions in Nevada that meet this definition. Requirements for training are identified within NRS 432A / NAC 432A. Completion of training requirements are monitored through the *State of Nevada Division of Public and Behavioral Health (DPBH) / Child Care Licensing (CCL)*. Training requirements include:

Table 28.2

<p style="text-align: center;"><u>Child Care Initial Required Trainings (for all facility types) per NAC432A.323:</u></p> <p style="text-align: center;">INITIAL TRAININGS HOURS: THESE REQUIRED TRAININGS ARE DUE 90 DAYS WITHIN HIRE FOR PERSONS WORKING WITHIN A LICENSED FACILITY</p>	<p style="text-align: center;"><u>Additional INSTITUTIONAL REQUIRED TRAININGS per NRS432A.177:</u></p> <p style="text-align: center;">PERSONS WORKING WITHIN A LICENSED FACILITY MUST HAVE WITHIN 90 DAYS OF HIRE AND, ANNUALLY, THEREAFTER:</p>	<p style="text-align: center;">ANNUAL TRAINING Requires 24 HOURS per NAC432A.326</p>
<ul style="list-style-type: none"> • CPR/First aid • 3 hour of child development • Obesity and wellness training • Signs and symptoms of illness • Blood borne pathogens • Recognizing child abuse • Reporting child abuse • SIDS (for employees working with children 12 or younger) 	<ul style="list-style-type: none"> • Controlling the behavior of children; • Policies and procedures concerning the use of force and restraint on children; • The rights of children in the facility; • Suicide awareness and prevention; • The administration of medication to children; • Applicable state and federal constitutional and statutory rights of children in the facility; 	<ul style="list-style-type: none"> • 24 hours of Training within early child hood education HOURS OF TRAINING WITHIN EARLY CHILD HOOD EDUCATION • Of the annual 24 hours, Obesity and Wellness Training must be included OF THE ANNUAL 24 HOURS, OBESITY AND WELLNESS TRAINING MUST BE INCLUDED • All Trainings must be NV Registry approved ALL TRAININGS MUST BE NV REGISTRY APPROVED

	<ul style="list-style-type: none"> • Policies and procedures concerning other matters affecting the health, welfare, safety and civil and other rights of children in the facility • Working with lesbian, gay, bisexual, transgender and questioning children 	
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All employee hired by a child care 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 child care 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 child care institutions, 100% of staff were up-to-date in their ongoing training requirements.

- **Advanced training requirements address the ongoing skills and knowledge base needed for child care staff to carry out their duties with regard to foster and adopted children.**

Stakeholder Interview Information

In October 2017, a statewide focus group was conducted, which included CCDFS, WCHSA and DCFS Rural Region foster/adoptive caregivers regarding this item. This group was comprised of 15 foster caregivers from across the state.

Pre-Service Training: When asked about the initial foster parent training they received, only CCDFS foster parents had most recently attended, within the past few years, pre-service training and were able to remember and express their experience and thoughts about it. The rest of the foster caregivers in the group had many years of experience and no longer could recall the full impact from their foster parent pre-service trainings. The following are statements made by the CCDFS foster caregivers:

- Foster kinship training program lasted 5 to 6 weeks and classes were once a week. I learned about what to expect from my caseworker and children. I gained a lot from the experience.
- The training lacked information on how to build and maintain foster parent and caseworker relationship. I did not learn on what services to ask or expect to be provided by the worker.
- The foster parent training lasted 10 weeks. The training was very necessary. I gained a lot of knowledge during the training.
- Success and failure of the training depends on the trainer. If the trainer is encouraging and involved more foster parents would remain in the program but if the trainer was discouraging and not too involved the foster parents would quit the training.
- My trainer encouraged foster parents to stay connected. The connections I made in training were very helpful because I meet people who understand what I was feeling and what I was going through.
- I learned about traumatized kids and how to connect with them. The training provided scenarios of what could happen and how to handle such situations.
- The training classes helped me understand that the kids want to connect with the foster family but feel guilty about their biological parents and that is why the shy away from building relationship with the foster family. The exercises provided in training helped with understanding the mindset of the children.

Annual Ongoing/Advanced Training: The following information was elicited from the foster caregiver focus group:

-
- QPI training was a positive, time appropriate, variety, can select what wants, etc. In comparison to last few years the ongoing training is improving.

- 30 hours for therapeutic home and could complete such training in person online or with outside agencies.
- Clark had 12 hours of ongoing training mandatory (CPR, Car seat, trauma, normalcy, emergency preparedness).
- Barriers:
 - Different diagnosis and medication training
 - Retention? If not receive enough training or support.
 - Child Care for in person training, which is why they prefer QPI.
 - DCFS Rural Region and Clark did not have enough support or respite to attend in person like Washoe.
 - The path and process need to be more defined.

Caregiver Surveys (from the 2017 APSR)

The most recent Statewide survey included questions with respect to items 24, 27 and 28. Item 24 section provides details regarding the methodology and demographics of the survey. Of the 186 respondents 2.7% were disqualified because they were either a biological parent or former foster parent (prior to SFY 2017). Fifty eight percent typically worked with Clark County, 17% Rural Region, and 27% Washoe. Most respondents (89%) had at least 1-10 placements in SFY 2017, and 80% identified providing foster care in their home (includes regular, permanent, and/or emergency placements).

The chart below presents the most recent **Caregiver Feedback** on how well **Foster Care Training** prepared them for fostering by providing the knowledge and skills necessary to carry out duties regarding foster and/or adopted children. The responses for the questions were based on a scale from 1-4 with 4 being “didn’t learn anything.” Logic was added to disqualify those respondents whose responses were not applicable and those who had not yet taken training. There were 157 respondents who answered the question “How Effective was Training in Providing Skills and Knowledge?”

- Thirty seven percent of respondents indicated that they acquired a lot of knowledge that they needed to do their job, while 25% of respondents indicated that they acquired a lot of skills to do their job.
- Over 30% of respondents indicated that they learned some knew things (33% for knowledge and 37% for skills).
- About 20% of respondents indicated that they learned few things (19% for knowledge and 24% for skills).
- About 5% indicated that they did not learn anything for both categories. The chart provides a comparison of the responses regarding knowledge and skills learned through training. Based on results, it appears that there may be a need for a greater emphasis on skills training going forward.

Figure 28.1

Foster Parent Training

Since July 1, 2016, How Effective Was Training In Providing Skills and Knowledge?



Foster Parent Training Survey - Comments

Caregivers were asked how the child welfare agency can improve Foster Care Training and the results include:

- offering training that held teleconferences for rural areas,
- training to include attachment and education,
- information on what to expect when working with birth families,
- updated material for training,
- more available training at different times during the day,
- information on what training is available,
- foster parent mentoring,
- CPR and Car Seat safety training,
- initial orientation to resource facilities and the child welfare offices,
- list of deadlines for children,
- how to address challenging behaviors,
- more organization,
- education on child development stages/milestones,
- training about drug-exposed infants,
- specific protocols available for emergencies,
- updated information when policies about foster parents change,
- trauma training,
- training on child welfare legal process, and
- making foster parents feel appreciated.

Overall, based upon responses to other questions within the survey: 69% of Caregivers feel very well trained to adequately carry out duties, 25% somewhat trained, 3% not at all trained, and 3% felt the question was not applicable to them.

Systemic Factor E: Service Array and Resource Development

Item 29: Array of services

Requirements:

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.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 92.

How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the CFSP?

- Services that assess the strengths and needs of children and families and determine other service needs;
- Services that address the needs of families in addition to individual children in order to create a safe home environment;
- Services that enable children to remain safely with their parents when reasonable; and
- Services that help children in foster and adoptive placements achieve permanency.

Please provide relevant quantitative/qualitative data or information that show:

- The state has all the above-referenced services in each political jurisdiction covered by the CFSP;

- Any gaps in the above-referenced array of services in terms of accessibility of such services across all political jurisdictions covered by the CFSP.

State Response:

Nevada has determined this item to be an Area Needing Improvement (ANI) due to service gaps identified, especially in substance abuse, behavioral and mental health service delivery. In addition, there is an inability to create sufficient safety management services in the DCFS rural region due to insufficient safety plans when clients do not have enough natural supports.

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

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

The Division of Child and Family Services (DCFS) is responsible for the CFSR/PIP, the CFSP/APSR, and Title IV-B. The Office of Community Partnerships and Grant (OCPG) in the Director's Office is responsible for the Children's Trust Fund (CTF) and the Community-Based Child Abuse Prevention (CBCAP) funds, also known as CAPTA Title II. Both are under the Department of Health and Human Services (DHHS). Staff from the Division and the OCPG will continue to meet to plan coordination and collaboration activities among the CTF grantees, Family Resource Centers (FRCs) and Title IV-B grantees. These programs provide families with access, information and resources, classes designed to strengthen and support families, and offers opportunities for assistance available within the communities where they live. The CBCAP Lead will continue to attend the DCFS Statewide Quality Improvement Committee meetings whenever possible. This ongoing partnership has as its focus the integration of resources and services in the spectrum of child welfare.

A Request for Applications (RFA) was released in January 2017. The review process was undertaken by the OCPG and its oversight committee, GMAC. As of mid-June, the Director of the Department of Health and Human Services has approved all recommended agencies receive funding. There is a total of twelve (12) agencies that were approved to receive CTF/CBCAP funds for FY18 and FY19. Of these, eleven (11) are parent education in focus and one (1) is to fund Prevent Child Abuse NV (PCA NV) Chapter Support. PCA NV is the coordinating entity behind the national Pinwheels for Prevention awareness events that take place during April, Child Abuse Prevention Month. The agencies that are now funded for the next biennium will be required to meet several conditions that will improve the delivery of community-based child abuse and neglect prevention programs and activities.

The Nevada Children's Behavioral Health Consortium and other key stakeholders provided leadership for DCFS Children's Behavioral Health successful SAMHSA System of Care Implementation Grant application in 2014. The award was funded in 2015 and SOC Implementation Workgroups began building a network of community-based services and supports that support more children and families to function better in their home, school, and community. Critical attributes that inform Nevada's SOC are: **comprehensive** – a full array and timely access to services that families, children, and youth need; **integrated** – the elimination of service delivery silos; and **coordinated** – agencies working together to ensure services are seamless.

DCFS Grants Management Unit

The DCFS is responsible for administration of the CFSP, and as such has a Grants Management Unit (GMU) responsible for management of most of the grants that fund the statewide service array system i.e. CAPTA Title I, Title IV-B Sub Part 1 and 2, CFCIP and ETV.

A critical part of service array includes the goals of Promoting Safe and Stable Families (PSSF), which are services to prevent the unnecessary separation of children from their families; to improve the quality of care and services to children

and their families; and to ensure permanency for children by reuniting them with their parents, by adoption or by another permanent living arrangement. The program components of PSSF include Family Preservation; Family Support; Time-Limited Family Reunification; and, Adoption Promotion and Support. These four areas are intended to provide coordinated services for children and families across the continuum of care from prevention to treatment through aftercare. Ninety percent of Nevada's PSSF funds are allocated to agencies providing these services and while ten percent of these funds are allowed for administrative costs.

The passage of Public Law 115-123, the Family First Prevention Services Act (FFPSA) revised the definition of "Family Support Services" and this became effective 2/9/2018. Additionally, FFPSA revised and renamed the definition of "Family Reunification Services" formally "time-limited family reunification services" became effective 10/1/2018. Nevada is currently in a three-year funding cycle which ends June 30, 2019. Currently, The DCFS Grants Management Unit is providing technical assistance to grant subrecipients as it relates to these changes. DCFS continues to fund sub-recipients under the previous PSSF categories of Family Preservation; Family Support Services; Time-Limited Family Reunification; and Adoption Promotion and Support through June 30, 2019. DCFS will fully incorporate the changes in PSSF service definitions during the upcoming PSSF Request for Application (RFA) process in the Spring 2019. DCFS will provide training to potential subrecipients regarding the enactment of FFPSA prior to the RFA release to ensure understanding of the changes in PSSF service definitions. The RFA will revise the definition of family support services to include community-based services to support and retain foster families so they can provide quality family-based settings for children in foster care. The RFA will also revise the definition of family reunification services to include removing the previous time limit for providing reunification services to the family of a child in foster care and allows reunification services to be provided for a period of up to 15 months once the child is returned home. DCFS anticipates an enhancement of the services being provided with the use of funds and service array because of the revised statutory definitions in relation to the services that may be provided under the PSSF categories: Family Preservation, Family Support Services, Family Reunifications Services and Adoption Promotion and Support.

The following chart provides a list of Agencies Statewide being funded to support Family Preservation, Family Support, Time-limited Reunification Services and Adoption Promotion/ Support for SFY 2019.

Table 29.1

Applications Agency	FP	FS	TLR	APS
CLARK COUNTY REGION (70%)				
Adoption Exchange, The				<input checked="" type="checkbox"/>
Boys Town Nevada		<input checked="" type="checkbox"/>		
Bridge Counseling Associates			<input checked="" type="checkbox"/>	
Cappalappa Family Resource Center		<input checked="" type="checkbox"/>		
Chicanos Por La Causa, Nevada		<input checked="" type="checkbox"/>		
Clark County Department of Family Services	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
Eagle Quest		<input checked="" type="checkbox"/>		
East Valley Family Services	<input checked="" type="checkbox"/>			
Olive Crest				<input checked="" type="checkbox"/>
S.A.F.E. House		<input checked="" type="checkbox"/>		
Safe Nest: Temp. Asst. to End Domestic Violence.		<input checked="" type="checkbox"/>		
Southern Nevada Children First		<input checked="" type="checkbox"/>		
St. Jude's Ranch for Children		<input checked="" type="checkbox"/>		
WestCare Nevada	<input checked="" type="checkbox"/>			
WASHOE COUNTY REGION (20%)				
Children's Cabinet	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Committee to Aid Abused Women	<input checked="" type="checkbox"/>			
Family Counseling Services of Northern Nevada			<input checked="" type="checkbox"/>	
Nevada Urban Indians		<input checked="" type="checkbox"/>		

Ridge House		<input checked="" type="checkbox"/>		
Step 2		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Tahoe Family Solutions		<input checked="" type="checkbox"/>		
Washoe County Dept. of Soc. Serv.				<input checked="" type="checkbox"/>
Washoe County School District		<input checked="" type="checkbox"/>		
RURAL REGION (10%)				
Adoption Exchange, The				<input checked="" type="checkbox"/>
Consolidated Agencies of Human Services (CAHS)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Family Support Council of Douglas County	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Lyon County Human Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Nevada Outreach Training Organization	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Ron Wood Family Resource Center	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Sixth Judicial District Court	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Wells Family Resource Center	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		

Other Service Related Activities:

Child Family Mental Health		<input checked="" type="checkbox"/>		
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Title IV-B PSSF Categories and FFY 2019 Planned Percentages	
Family Preservation (FP)	20%
Family Support (FS)	20%
Time-Limited family reunification	20%
Adoption Promotion and Support	20%

Gaps in Services

Nevada Children’s Mental Health Needs Assessment Final report in October 2016 analyzed gaps in services of children with mental health needs in Nevada. The report describes the current child population in need of mental health services using area specific data and the problems associated with untreated mental illness.

In addition, there was a 2016 Statewide Community Needs Assessment that was conducted by the Grants Management Advisory Committee by the Department of Health and Human Services, Office of Community Partnerships and Grants. Specific need and issues include: mental health access, housing, homelessness, emergency services, education and employment. Health/Mental Health care was the top need identified in the 2014 Needs Assessment. Two years later in 2016, it continues to be the top need however seems to be improving slightly.

**Service Array: Continuum of Services-
Clark County**

Services	Service Providers	Gaps in Service
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	<ol style="list-style-type: none"> 1. ABC Therapy 2. Bilingual Behavioral Services 3. Bridge Counseling 4. Choices Group 5. Community Counseling Center 6. Hope Counseling 7. LRS Systems LTD 8. SafeNest 9. Westcare 10. Gary Lenkeit 	<ol style="list-style-type: none"> 1. Mental Health Treatment Services for Parents (waiting lists or do not treat without ability to pay) 2. Sex Offender Treatment for Parents (waiting lists or do not treat without ability to pay) 3. Waiting lists for Substance Abuse Treatment Programs 4. Not enough Substance Abuse Treatment for Adolescents 5. Few providers for individual Non-Offending Parent Treatment 6. Lack of services for Developmentally Delayed adults and children and long waiting lists for services that do exist 7. Very limited FAS testing
<p>Assessment Services</p>	<ol style="list-style-type: none"> 11. Northwest Therapy Psych Services 12. Red Rock Psychological Health 13. Evergreen Counseling 14. Las Vegas Indian Center 15. New Beginnings 16. Options 17. Safe Nest 18. Thomas Kinsora Neuropsychologist 19. Vitality Unlimited 20. Healthy Minds Mental Health Services 	
<p>Safety Services</p>	<ol style="list-style-type: none"> 1. Eagle Quest 2. Southwest Integrated Children's Services 3. Youth Advocate Programs 4. SAFY 5. Shining Star 6. CPLC 	<ol style="list-style-type: none"> 1. Post case closure support services not available

In-Home Services	1. Corona Furniture assistance	1. Waiting lists for in home preservation services
	2. Positively Kids Medical wraparound	2. Long Term Housing Programs are not often available to serve our clients
	3. SNHD Public Health Nursing	3. Job seeking and job training programs for our parents are very limited
	4. Boys and Girls Clubs	4. Limited transportation services for families
	5. East Valley Family Services	5. Post case closure support services not available
	6. Hopelink	
	7. Seigel Suites Housing assistance	
	8. Olive Crest	
Out-of-Home Services	1. Positively Kids medical and dental services	1. Waiting lists for EPSDTS for out of home children
	2. SNHD – HIV/AIDS and STI Prev. Training	2. Lack of transportation for foster children for appointments and events
	3. Africa Sanchez – Guardianship assistance	
	4. ELM Educational Consulting	
	5. Positively Kids Nursing services	
	6. Hutchinson & Steffen - Guardianship asst.	
	7. Shining Star Community Services	
	8. CCSD Educational Services	

There continues to be a gap in services available to families for behavioral and mental health service delivery. In the 2016 Nevada Children’s Mental Health Needs Assessment, it was estimated that there were about 118,900 youth in Clark County every year in need of mental health services but in Nevada only 29% of those will receive services, meaning that only 34,490 children will receive the help they need.

Service Array: Continuum of Services

Washoe County

Services	Service Providers	Gaps in Service
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Assessment Services	<ol style="list-style-type: none"> 1. Differential Response Unit - Children's Cabinet and Sparks FRC 2. Core Dynamics- Carter-Hargrove Inc. @ Kid's Kottage 3. Voucher services via 38 contracted providers of behavioral/mental health outpatient services 4. Washoe County Human Service Agency (WCHSA) Educational Liaison 	<ol style="list-style-type: none"> 1. DR referral criteria and staff training not fully aligned with current safety model. Limited referral capacity. 2. Process to assess MH needs of all children coming into care which the clinical re-org will be addressing (partially) 3. Qualified FAS evaluation providers; SAFE model trained providers 4. Access to child psychiatry and timeliness of reports.
Safety Services	<ol style="list-style-type: none"> 1. WCHSA Human Service Support Specialist (HSSS) 2. Children's Cabinet Case Managers 3. WCHSA's Crisis Response Team 4. WCHSA's Medical Unit 5. Referrals to Washoe County Health Department 6. WCHSA Clinicians 7. WCHSA case managers 	<ol style="list-style-type: none"> 1. After-hours and on the weekends, there is a real gap in service 2. Limited availability of providers for safety services that are not relatives or family members 3. Private, community providers trained in Family Preservation Services 4. WCHSA Clinicians that can assist with safety services 5. Assessment caseworkers and permanency caseworkers having time to provide safety services 6. Emergency housing 7. Affordable child care (evening/24 hour)
In-Home Services	<ol style="list-style-type: none"> 1. WCHSA Clinicians Voucher services 2 contracted providers 2. WCHSA' Clinicians assigned for the provision of short-term clinical services 3. 	<ol style="list-style-type: none"> 1. Only two available to support in home services through WCHSA
Out-of-Home Services	<ol style="list-style-type: none"> 1. WCHSA's Mental Health Counselors 2. Crisis Response Team with WCHSA 	<ol style="list-style-type: none"> 1. Temporary housing; specifically, for women and children 2. Affordable housing

3. Voucher services via 38 contracted providers of behavioral/mental health outpatient services
4. WCHSA's Transformational Foster Care Support staff
5. Dedicated community-based visitation center

There continues to be a gap in services available to families for behavioral and mental health service delivery. In the 2016 Nevada Children's Mental Health Needs Assessment, it was estimated that there were about 21,795 youth in Washoe County every year in need of mental health services but only 6,320 children will receive the help they need.

Service Array: Continuum of Services

DCFS Rural Region

Services	Service Providers	Gaps in Service
Assessment Services	1. Family Support Center-Winnemucca	1. Mental and behavioral assessments are lacking in remote regions in rural Nevada
	2. Nevada Outreach Training Org.-Pahrump	2. Substance abuse assessments are lacking in remote regions rural Nevada
	3. Consolidated Agencies of Human Services-Hawthorne	
	4. Lyon County Family Services	
	5. New Frontier-Fallon & Elko	
	6. Professional contracted service providers: Forensic Medical Consultation and Evaluation, Complex Parental Capacity Assessment, Psychological Testing and Assessment, Substance Abuse Evaluation, Neuropsychological Evaluation, Psychosexual Assessment, Mental Health Assessment, Mental Health Counseling, Fetal Alcohol	

Syndrome (FAS) (Clinic
(children only)

7. In-house Clinical Services Screenings

Safety Services

1. Nevada Outreach Training Org.-Pahrump
2. Family Support Center-Winnemucca
3. Lyon County Family Services

1. Safety Services are lacking in remote regions of rural Nevada

In-Home Services

1. Family Support Center-Winnemucca
2. Wells FRC
3. Nevada Outreach Training Org.-Pahrump
4. Ron Wood Family Resource Center-Carson
5. Family Support Council of Douglas County
6. Lyon County Family Services
7. Consolidated Agencies of Human Services-Hawthorne

1. Substance abuse monitoring is lacking in remote regions of rural Nevada

Out-of-Home Services

1. Family Support Center-Winnemucca
2. Nevada Outreach Training Org.-Pahrump
3. Ron Wood Family Resource Center-Carson
4. Family Support Council of Douglas County
5. Lyon County Family Services
6. Consolidated Agencies of Human Services-Hawthorne

1. Substance abuse treatment is lacking in remote regions of rural Nevada

There continues to be a gap in services available to families for behavioral and mental health service delivery. In the 2016 Nevada Children’s Mental Health Needs Assessment, it was estimated that there were about 11,200 youth in the rural counties every year in need of mental health services but only 3,244 children will receive the help they need.

2016 Nevada Children’s Mental Health Needs Assessment			
Statewide top barriers to mental health services			
Provider Responses		Patient Responses	
Barrier	Rank	Barrier	Rank
Cost	1	Lack of Knowledge	1
Lack of knowledge of resources	2	Lack of insurance coverage	2
Lack of transportation	3	Stigma	3
Lack of insurance coverage	3	Fear	4
Lack of available providers	4	Cost	5
Long wait lists	4	Perception that treatment wouldn’t help	6
Fear	5	Took too much time to get services	6

While the gaps analysis was completed in 2015 and report finalized in 2016, it is still reflective of the ongoing gaps in the System of Care. A final Systems of Care grant report will be completed in 2019.

Statewide Data (SFY 2016/2017)

The DCFS FPO conducted an analysis of data from Nevada’s SACWIS (UNITY) to help identify the most common needs and concerns for families who receive services. The data reviewed was for the timeframe of the 2017 federal fiscal year and included 3,204 substantiated cases of maltreatment (2,465 in Clark; 457 in Washoe; and, 272 in the Rural Jurisdiction). Data regarding types of substantiated maltreatment and the stress factors associated with referred families have been analyzed. Maltreatment types and Family Stress Factors each include items that are rolled up under larger categories. For example, Neglectful Treatment below in Figure 29.1 includes 13 unique maltreatment descriptions (e.g. Inadequate Food, Inadequate Supervision). Where appropriate, underlying details will also be presented. The results of our study provided insights regarding gaps in services offered and possible opportunities for preventive initiatives.

Figure 29.1

Maltreatment by Type Recorded: Statewide FFY17

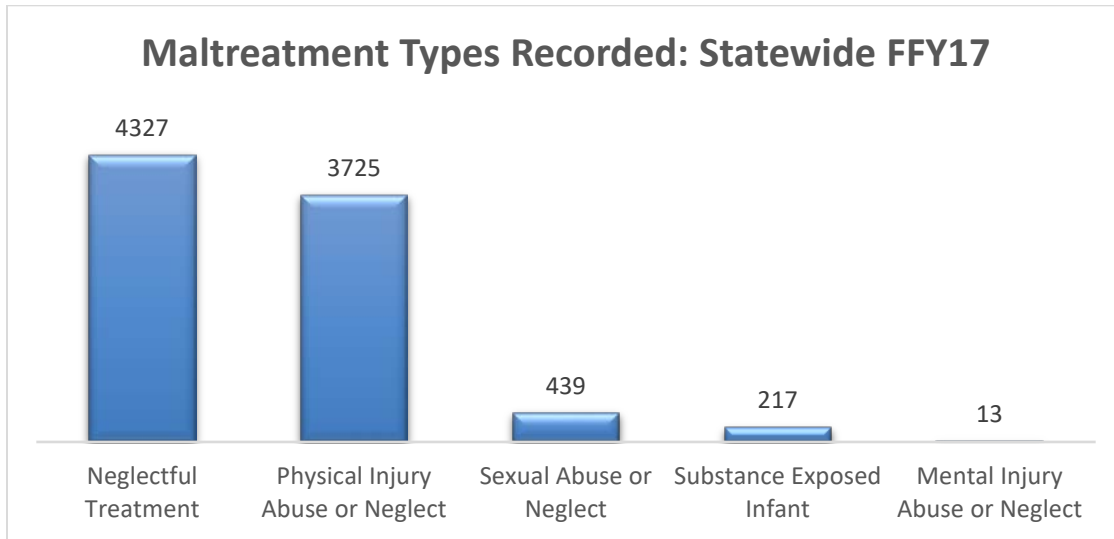


Figure 29.1 presents the recorded counts of maltreatment for Nevada during the federal fiscal year of 2017 (Oct 1, 2016 – Sep 30, 2017). The two most frequent maltreatment types for the year were Neglectful Treatment (49.6% of all maltreatments) and Physical Injury, Abuse or Neglect (42.7% of all maltreatments).

Figure 29.2 Most Frequent Neglectful Maltreatments Recorded by Category (Top 6): Statewide FF7

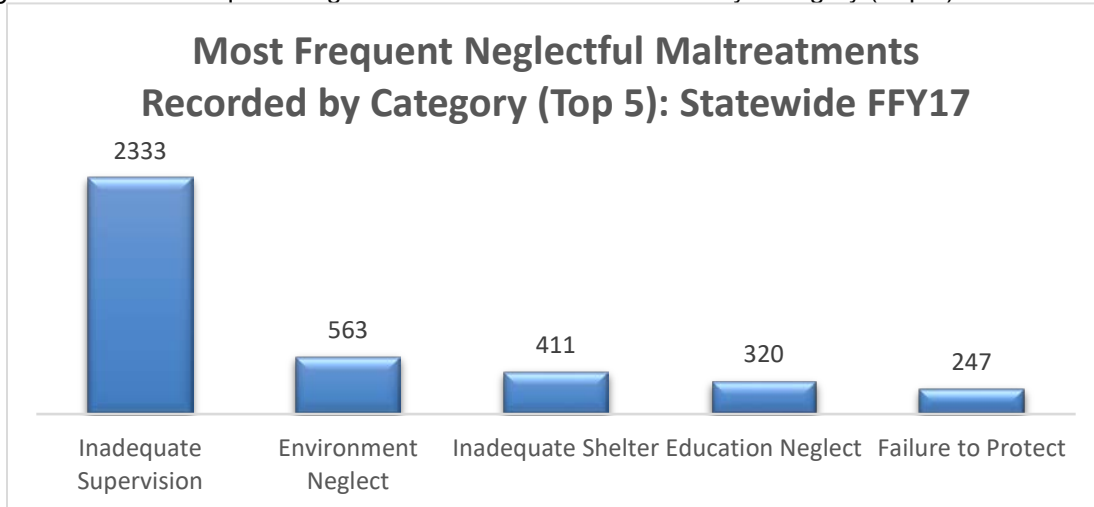


Figure 29.2 shows the five most common neglectful maltreatments recorded during the federal fiscal year of 2017 (Oct 1, 2016 – Sep 30, 2017) (from Figure 29.11). Inadequate Supervision accounted for 53.9% of all Neglectful Maltreatments for the period in review, and Environment Neglect made up 13.0% of all Neglectful Maltreatments recorded. It is important to

note that Inadequate Shelter accounted for 9.5% of all neglectful maltreatments that were recorded, which supports the concern regarding housing that was corroborated in a recent focus group.

Figure 29.3 Family Stress Factors Recorded: Statewide FFY17

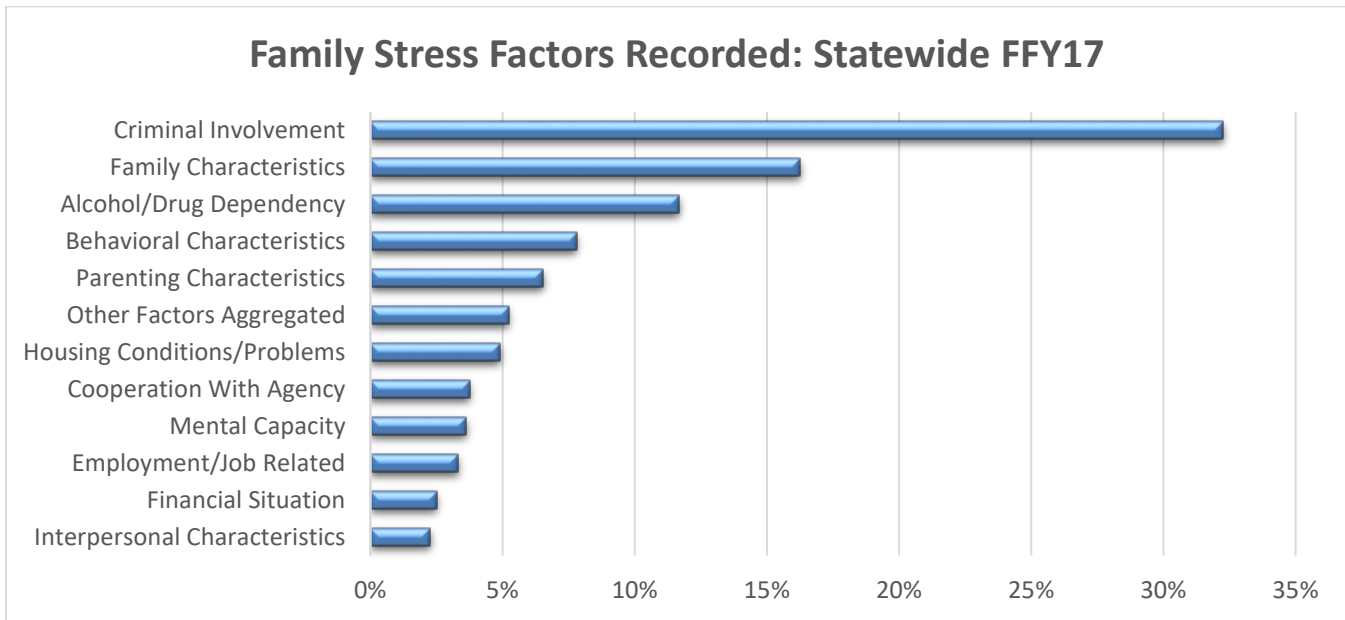
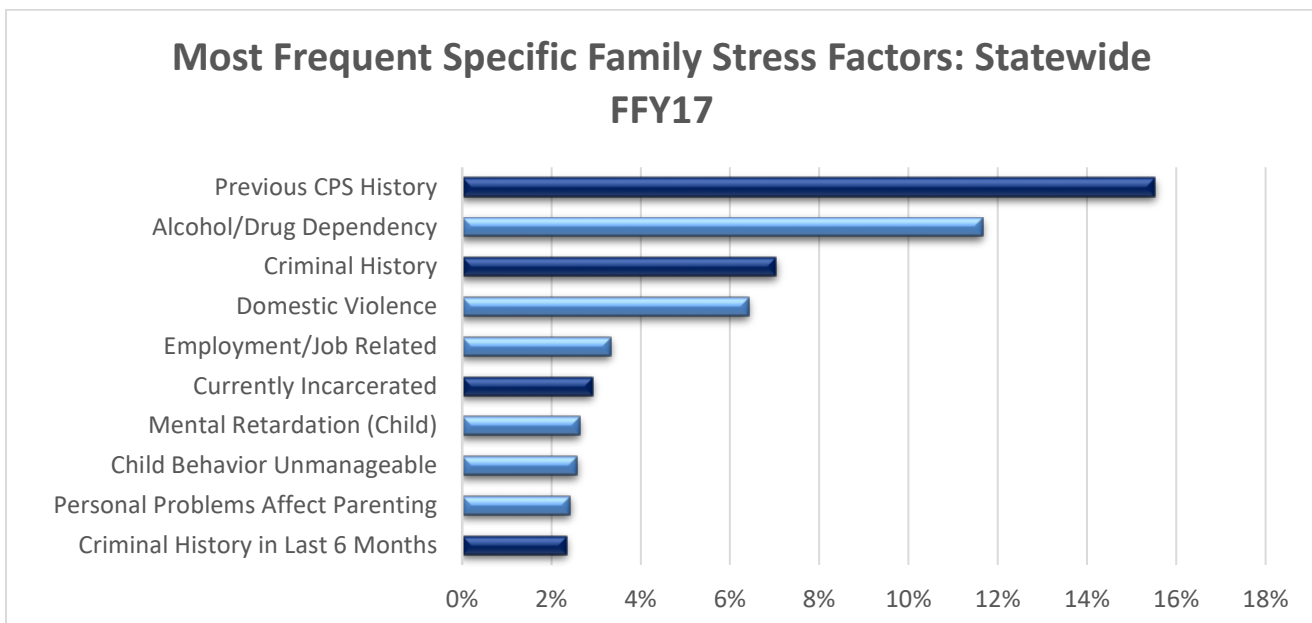


Figure 29.3 shows the Family Stress Factors that were recorded for the federal fiscal year of 2017 (Oct 1, 2016 – Sep 30, 2017). Criminal Involvement accounted for 32.3% of all factors recorded, followed by Family Characteristics at 16.2% of factors, and Alcohol/Drug Dependency at 11.7% of factors recorded. Many of the Stress Factors listed have various sub-factors rolled up under the broader category. For example, Criminal Involvement includes items such as Previous CPS History, Criminal History, Currently Incarcerated, and Criminal History within the last 6 months.

Figure 29.4 Most Frequent Specific Family Stress Factors: Statewide FFY17



*Note: Items in dark blue are included in the category of Criminal Involvement seen in Figure 29.3.

Figure 29.4 illustrates the top ten specific stress factors as percentages of all stress factors identified (excludes broad categories in favor of the underlying sub-factors, where there is more than one available). Previous CPS History was the

most frequently identified factor, at 15.5% of all factors identified. Alcohol and Drug Dependency was the next most frequent at 11.7%, followed by Criminal History at 7.0% and Domestic Violence at 6.4%.

Mental Health issues appear to be an important factor for Nevada families that have substantiated maltreatment. A relationship between criminal behavior and a higher rate of mental health issues has been shown to exist. A 2006 U.S. Department of Justice study demonstrated the correlation between mental health problems and being in jail or a prison inmate. According to the report, an estimated 60% of jail inmates, 49% of State prisoners, and 40% of Federal prisoners have mental health disorders as defined in the DSM-IV, while only about 10.6% of the general population met criteria for a mental health disorder (Glaze & James, 2006)¹⁷. Criminal behavior is Nevada's most frequently sighted broad category Stress Factor (see Figure 29.3). Given that criminal behavior and mental health problems frequently occur together, it is reasonable to assert that a significant proportion of Nevada at-risk families could benefit from mental health services and support. Additionally, several of the most common sub-factors related directly or indirectly to mental health issues, including Domestic Violence, Mental Retardation, Child Behavior, and Personal Problems Affecting Parents. Results from a recent focus group highlighted the concern that our families have with respect to mental health issues (please see details below).

Alcohol and/or Drug Dependency appears as the third most commonly cited Stress Factor in Figure 29.4 and as the second most commonly cited factor in Figure 29.3. This category showed up in both because it does not have sub-factors. This Stress Factor accounted for 11.7% of all factors recorded. A recent focus group also provided feedback about this stressor (please see details below).

Stakeholder Interview Information

Focus groups were conducted in June 2016 and October 2017 statewide with caseworkers, the judiciary, foster parents, and youth concerning this item. Statewide and broadly the most needed service gaps are: 1. Mental Health Assessments and Services for parents and children 2. Substance Abuse Treatment for parents and 3. Housing 4. Gambling addiction 5. Domestic violence 6. Child Care.

All participants in all groups saw service array as a significant deficiency in general:

- In Washoe County and the DCFS Rural Region: Services related to assessment of needs are difficult to access for both parents and children and there is no universal comprehensive mental health assessment applied to children entering out of home care;
- In Clark County, the workforce expressed concern with the quality of services for both assessment and intervention associated with a mandated provider.
- In general, for all jurisdictions
 - The more advanced the service, the greater lack of availability, and/or longer the waiting list (6-8 month wait for a neuro psych evaluation or a parental capacities evaluation);
 - Not uncommon to have to wait two months for a child to have a comprehensive mental health assessment;
 - Lack of reunification and adoption support services;
 - Substance abuse evaluations for parents are quite accessible.
 - CCDFS: Services for non-offending fathers were lacking;
 - Due to restrictions in case planning (addressed above) parents, CCDFS, are unable at times to get needed services; and,
 - The process of Medicaid approvals causes significant delays or results in inappropriate denials that impact service delivery.

¹⁷ Glaze, L. E., & James, D. J. (2006). Bureau of Justice Statistics Special Report: Mental Health Problems of Prison and Jail Inmates. Washington D.C.: U.S. Department of Justice Office of Justice Programs.

- Services available to treat/deal with identified needs:
 - Judiciary groups referred to the lack of services and lack of timeliness with applying available services, which has reached a crisis level;
 - All groups agreed that long wait lists for even the most basic of services is the norm and that the more sophisticated the service, the longer the wait list; this applies to children and parents needing behavioral health services, substance abuse services, and speech therapy or tutoring for children.

- While there are some safety related services, provider availability is very limited, so the need is much higher than the availability. The resources needed for safety-related services to keep children in their homes is insufficient.

- Barriers to acquiring services:
 - Lack of Medicaid providers or unreasonable waiting lists for a Medicaid provider (3-6 months).
 - Insufficient Advanced Service providers (particularly for DCFS Rural Region and Washoe County). While CCDFS has more providers, they are not accessible due to the current contract limitations with other providers.
 - Stakeholders felt caseworkers were not proactive in accessing services for children in advance and in some case the child(ren) require a higher level of care causing an unnecessary disruption in the child's current placement.
 - The geographical location is a barrier—lack of in-home services because the driving distances for foster parents is an unreasonable burden.
 - Not enough physicians to provide mental health services, appointments are months out.
 - Cost/Funding

- Strengths:
 - There are accessible services and availability of services for children ranging 0-3 years of age or children 14 years and older (Independent living age group). The Tribal services for the WCHSA has expanded, creating better access to services
 - Services for speech were easily obtained.

- Independent Living
 - College funding is helpful from Independent Living program.
 - Independent Living services have been helpful with clothing, family, financial assistance, sports and assistance with resumes and helping to look for jobs, and interviewing skills.
 - Independent Living workshops were helpful regarding budgeting and banking needs.

Populations at Greatest Risk of Maltreatment in need of Services

Statewide all three child welfare agencies continue to report that populations at the greatest risk of maltreatment are those families who are familiar with the agencies many living in poverty, those that experience homelessness, and have histories with law enforcement, incarceration, substance abuse, mental health and domestic violence. Additionally, the use of opioids, heroin, and methamphetamine seems prevalent among many of these populations. Commercially Sexually Exploited Children (CSEC), and children with behavioral and emotional problems are populations of children at greatest risk of maltreatment. All three child welfare agencies use Present Danger Assessment (PDA), the Nevada Initial Assessment (NIA) to determine present and impending danger when making decisions on which populations are at risk of maltreatment. Additionally, the Protective Capacity Family Assessment (PCFA) and the Protective Capacity Progress Assessment (PCPA) are used to identify what services needs are for these families.

CCDFS is using the “Nevada Rapid Indicator Tool” to screen youth at risk of commercial sexual exploitation. Because treating and preventing sexual exploitation is a multidisciplinary process, referrals from community partners and stakeholders are also encouraged. CCDFS Workers are now being trained to be more aware of certain behaviors youth may exhibit including: habitual running away, substance use, having an older or controlling significant other. Additionally, children with behavioral and emotional problems are being identified sooner for Specialized Foster Care.

In order to provide relevant and needed services to youth who have been commercially sexually trafficked, CCDFS in cooperation with the Southern Nevada Child Advocacy Center (SNCAC) ensures a forensic interview is completed. From this forensic interview the department is able to assess the trauma the child has experienced and is better able to refer for the most appropriate services.

In addition to refer for trauma focused treatment, CCDFS and SNCAC collaborate to create individualized safety planning for each youth depending upon the circumstances and safety threats posed in each case scenario. These safety plans often include various departmental teams including permanency, investigations and placement teams.

When youth arrive in Clark County from other jurisdictions, typically from other States, SNCAC also completes the investigation and screening for CSEC and coordinates with the jurisdiction of origin to ensure safety, and planning for the youth. In SFY19 CCDFS plans to continue to expand services that are available to this target population by expanding the scope of therapeutic services offered via SNCAC including sexual education and trauma-focused cognitive behavioral therapy. Additionally, CCDFS hopes to help identify local entities able to provide substance abuse treatment to teen-aged youth. For children that have behavioral and emotional problems CCDFS continues to work toward the goal of expanding the Advanced Foster Care (AFC) program to 60 AFC beds.

The DCFS Rural Region serves 15 rural counties which is divided into 10 Judicial Districts. Half of the Judicial Districts have implemented Family Treatment Court programs (specific to substance misuse). Because many rural areas are service deficient, the Division’s Clinical Program staff provide a wide array of direct services to families to include, but are not limited to; Mental Health Assessments, Parental Capacity Assessments, Trauma Screenings, placement disruption services and in-home family based programs like Brief Solution Focused Therapy, in addition to evidenced based interventions such as Parent Child Interactional Therapy (PCIT), Parent Management Training (PMT), as well as specific psychoeducation on a variety of topics.

DCFS Rural Region has identified the need for contracted in-home safety management services. Families in rural Nevada, often lack appropriate natural supports sufficient for DCFS to be able to safely maintain a child(ren) in the home while working to mitigate safety threats. This results in placement outside the home and/or community, more often than would need to occur if the appropriate number of natural supports existed to develop a robust in-home safety plan. The DCFS Rural Region have identified a funding source and are in negotiation with an agency to initiate a safety management services pilot project. This will serve to enhance our ability to safely serve children in their homes in the context of an in-home safety plan.

DCFS Rural Region has recently identified a funding source that will allow the DCFS Rural Region to increase Placement Prevention funds accessible to staff to assist families with basic needs like housing, disconnect notices and car repairs, which enable families to continue to work and provide for themselves.

The DCFS Rural Region Clinical Program is gearing up to develop adoption specific services, never before provided to rural adoptive families. Services provided will be specific to placement preservation, pre-adoption and post adoption counseling. Evidence based interventions will continue to include, but not be limited to; Parent Child Interactional Therapy (PCIT), Parent Management Training (PMT), in addition to counseling addressing transition/integration issues.

DCFS is in the process of finalizing a contract with Rehabilitating & Empowering Disadvantaged Youth (R.E.D.Y.) who will provide mentoring and other supports to the identified population in Humboldt and Lander counties. The R.E.D.Y mentoring program provides the youth and their family with a professional mentor to assist with the stabilization of academic, interpersonal, legal and familial issues. R.E.D.Y mentors work within the community, schools and home environments to assist the youth (and family) in achieving stabilization while modeling the skills necessary for a successful future. Youth are paired with a mentor who best compliments the youth’s needs. Each youth will have an individualized service plan that will determine appropriate goals based on existing strengths and needs, measure of outcomes, frequency of direct contact and group activities, and overall progress. The focus of mentoring services may include but are not limited to: social skills development, academic intervention, to address all barriers to academic success, wake up/truancy reduction program and academic advocacy as a liaison between school faculty and parents.

DCFS has contracted with Child Family Mental Health, LLC to provide evidence-based training/techniques to improve the outcomes for children and families in the target population, to include: Trauma-Focused Cognitive Behavioral Therapy training (TF-CBT) to rural providers, clinicians, social workers, and Intensive Family Services staff and community stakeholders, this training will assist in the resolution of a broad array of emotional and behavioral difficulties associated with single, multiple and complex trauma experienced by children and adolescents; Provide research-based Substance Abuse Cognitive Behavioral Therapy training (SA-CBT) to rural providers, clinicians, social workers, and Intensive Family Services staff and community stakeholders, to assist parents with substance use disorders identify and change harmful thought patterns; formulate coping strategies and skills to incorporate into everyday life; Provide Cognitive Behavioral Therapy (CBT) training for Depression to rural providers, clinicians, social workers, and Intensive Family Services staff and community stakeholders, to assist parents with depression to change patterns of behavior, that come from an unhelpful, dysfunctional thought process and the maladaptive behaviors that accompany those thoughts; and learn more adaptive skills that raise mood and increase their ability to parent their children.

Services for Children under the Age of Five

Statewide children under the age of five (5) are to be referred to Nevada Early Intervention Services and/or Northern Nevada Adolescent and Child Services and Child Find to receive screening for developmental issues in order to identify any developmental needs. Additionally, CCDFS refers children to Healthy Minds and Positively Kids. This includes children that are removed or remain in their own homes. Services offered through the Clinical Program include: Parent-Child Interaction Therapy, Clinical Consultation, Parent Management Therapy, Coping CAT and Taking Action. These services provide in-home family services to parents and children, as well as placement resources to address emotional, behavioral, and attachment issues in a more timely and effective manner. Clinical consultation provides psychoeducation to both placement resources and to parents regarding the developmental needs of children, effective interventions, and understanding and managing children with attachment concerns. Consultation involves the development of plans that increase contact between parents and children to allow for the development and maintenance of attachment between parents and children. Additional clinical resources are available to assess the needs of children and family, in this age range, to assess for parenting capabilities, developmental needs of the child, attachment, and behavioral/parenting intervention strategies (i.e. Child Behavior Checklist, Parent Child Relationship Inventory, Attachment Inventory, and Advanced assessments/intervention such as DC-03, Parent Child Interaction Therapy, Parent Management Therapy, Taking Action and Coping Cat).

Additionally, statewide services may include Intensive Family Services (in-home therapeutic support); psychoeducation to parents and/or placement resource, and Parent child intervention Therapy (PCIT). The Advanced Foster Care Program offers a Trauma informed care services.

Specifically, each jurisdiction has undertaken the following activities to reduce the length of time that young children under age five are in foster care without a permanent family.

Clark County Department of Family Services- In SFY 2018, 223 children, which is approximately 46% of children served via SAFE@HOME were under the age of 5 years. It is expected that another 159 children under the age of 5 years will be served by SAFE@HOME during the remainder of 2018. The core tenet of the SAFE@HOME program is to provide **in-home safety services** for children at risk of removal from their homes, and/or children who would otherwise remain in out of home placements without in home safety services. These safety services are provided to mitigate safety threats while the parents continue to work toward improving their protective capacities, while their children are in the home. In some cases, children have returned to their parent months sooner than if safety services/safety providers had not been in place. CCDFS continues to staff a specific unit dedicated to working with the 5 and under population. This unit is considered highly specialized and specifically trained to understand the threats, vulnerabilities and challenges younger children face. This unit tends to carry a lower-case load to focus more attention to safety and permanency services for this population. These units work closely with local stakeholders including Early Child Services, Nevada Early Intervention Services and Child Find to complete initial assessments of toddlers and infants and link them with needed services quickly including locating the most appropriate placements who can better meet their needs and ultimately help achieve permanency faster.

As part of the Title IV-E waiver demonstration project for CCDFS, Safety Managers are trained for families where an in-home safety plan can be created based on the Safety Plan Determination. These families may be recently reunified following an out of home placement spell or have children who are at risk of removal due to safety threats in the home. These safety services and safety managers can maintain children in their homes via a qualified and trained safety manger providing intensive and targeted safety services in the home, as well as monitoring the safety plan. To accomplish these goals, CCDFS partnered with 6 provider agencies to recruit and train 45 safety managers to provide in-home safety services, and

to implement and monitor a comprehensive safety plan. For the fiscal year 2018 YTD (March 2018), Safe@Home served 476 children of which 223 are 5 years of age or under. As stated previously, CCDFS projects to serve an additional 159 children this year.

In addition to dedicated investigative and permanency units for children under 5 years old, CCDFS has also begun to see how KinGAP is helping to achieve permanency faster for younger children. Although, not typically considered as a permanency plan for children under 5 years old, there are special case circumstances when kinship/guardianship may be considered. One such example is when a young child is placed with their siblings in a relative placement and that relative placement, intent on maintaining familial bonds, opts to pursue guardianship rather than adoption. In 2017 in Clark County approximately 20% of children exiting care through via the KinGAP program were children aged 5 years and younger. In 2017 in Clark County, 7 children under the age of 5 exited care via a KinGAP agreement. As expected the vast majority of those 7 children (6 out of 7) were part of a larger sibling group and were able to remain with their siblings in a guardianship agreement. These children exited care sooner than if the agency had pursued adoption, as lengthy TPR trials, and recruitments were not required to achieve permanency.

During SFY2018 CCDFS began using Permanency Round Tables to brainstorm potential solutions to finding permanency for younger children. Permanency Round Tables are comprised of a diverse group of child welfare representatives who seek to find new and permanent solutions to placing children who have remained in foster care for an extended period of time and or may have been considered difficult to place. It is expected that these PRT meetings will continue to include our younger population as needed.

Throughout the reporting period, CCDFS continues to convene weekly Child Haven meetings, at which children aged 5 years and younger, who have been placed at Child Haven for a minimum of 3 days, are discussed. At these meetings supervisors and management staff the cases, and strategize methods to locate placements (relative, or non-relative foster) thereby reducing time spent in congregate care. While there have been expected seasonal fluctuations in population, the overall trend of younger children experiencing stays at Child Haven has been decreasing.

In SFY2018 CCDFS collaborated with Annie E. Casey Foundation to evaluate areas of practice and processes that could be revamped to promote efficiency across several areas of practices, specifically engaging relative placements, licensing, locating and matching appropriate care providers and providing support to resource families to limit placement disruptions and ultimately reduce the length of stay in care. As of this writing a complete report of findings and recommendations is not available from Annie E. Casey.

Washoe County Human Services Agency-There were 569 children under the age of five spent at least one day in care in SFY18. WCHSA projects that 542 children under the age of five will spend at least one day in care in SFY19. Of those 126 children, were placed home on an in-home safety plan at some point during SFY18. In addition to the children placed in foster care, 70 children under the age of five were opened for services with the WCHSA without legal involvement during SFY18 but were never removed from their homes; and 99 children under the age of five were opened for services without legal involvement during SFY18 but were placed outside of their home with a relative.

WCHSA continued to expend considerable efforts in SFY18 implementing SAFE/SIPS, which emphasizes identification of child needs and individualized age appropriate service plan activities for all children who are receiving services, including children placed in foster care, children placed home with parents and children being served on non-legal cases who are placed outside of their home. The SAFE/SIPS model includes a description of child functioning in the Nevada Initial Assessment (NIA), which must be robust and specific to each child to meet fidelity requirements. Once impending danger has been identified, the assigned worker meets with the parent through a series of planned meetings to review the information discovered through the SAFE/SIPS process and develop with the parent an appropriate case plan and service agreements. Case plans are designed to facilitate parental behavioral changes necessary for reunification or case closure and must be reviewed every 90 days. Additionally, child specific needs and services, including the provision of developmental assessments/services, are addressed in the Child Well-being section of the parent's case plan. In instances where a CAPTA referral was not made (due to no substantiation of child abuse and neglect), case workers may submit a referral to NEIS for a developmental assessment for a child, ages 0-2 years, whenever there is a possibility of a developmental delay. Children who qualify under the NEIS program will receive developmental services, sometimes in the home, to address identified concerns. Additionally, if there are developmental concerns for children

When children are placed outside of their homes, WCHSA also encourages a meeting between the substitute care provider and parent within the first few parent/child visits to allow the parent to meet the caregiver and provide the caregiver with specific information about their child such as bedtime routines or favorite activities, educational/development concerns, etc.

This meeting is facilitated by either the foster parent or Agency staff trained in the Fostering Relationships Through Visitation (FRTV) model, which was based upon the ABC (Attachment Bio-behavioral Catch-up) methodology. WCHSA opened the Family Engagement Center (FEC) in November 2017. The FEC is a child and parent/caregiver friendly location where visitation can occur in a homelike setting allowing families to engage in normal activities, such as making meals together, naptimes, homework, etc. During facilitated visits the foster parent or staff person helps to initiate developmentally appropriate play and other activities to support and increase the parent child bond. Parents, foster parents and relative placements are also questioned about the developmental progress of all children in the home during monthly case worker contacts and referrals for services through NEIS or the Child Find Project may be made at that time.

Caseworkers are required to meet with the substitute care provider, within 24 hours of the child's placement in emergency situations or 72 hours if the placement change was planned, to review the child's identified, including developmental needs and services available to the substitute care provider to meet those needs. Additionally, a Family Solutions Team meeting is conducted within days of the child's placement into foster care to discuss reasons for removal and possible placement with relatives/fictive kin or the possibility of returning the child on an in-home safety plan. These processes are meant to keep parents engaged with their children, which has been shown to decrease the amount of time children spend in foster care. Additionally, conducting early FST meetings results in more relatives/fictive kin being identified earlier in the case. This can help provide families with their own supports, which can reduce future abuse and neglect and provide alternate familial placement options if reunification is not possible.

WCHSA continues to focus on the following:

- Appropriate transitions for all children;
- Appropriate transitions for children under the age of five, with continued access to the Dr. Charles Zenah's educational webcasts and QPI education;
- Co-parenting between the birth parent and foster parent;
- Fostering Relationships through Visitation (FRTV);
- Early Family Solution Teams (FST);
- Information sharing between foster parents, parents and workers;
- Partnerships between the Agency and caregivers;
- Frequent quality visits where caregivers and birth parents can share child specific information and develop a positive relationship, utilizing "Follow the Lead," a part of the "Fostering Relationships through Visitation" model;
- Intensive reviews of children in congregate care with a specific focus on placing children under age five with relatives or in family foster care; and
- Working with substitute care providers to ensure compliance with statutory or administrative code regulations.

The number of relative foster homes continued to grow from SFY11 to SFY17 in WCHSA benefitting children under the age of five. In 2011, there were 138 relative foster care providers, which grew to 162 relative foster care providers in SFY17. Over the last reporting period, significant efforts have been made to finalize adoptions and guardianships for children in care by implementing focused efforts on finalizing termination of parental rights on a large backlog of cases. The current number of relative foster care providers currently sits at 120, which reflects a decrease from last fiscal year. However, WCHSA believe this drop is due to the significant amount of cases where TPR was finalized during the last reporting period thereby freeing these children for adoption and subsequent case closure. In SFY17 there were 137 finalized adoptions. The number of adoptions for SFY18 is at 126, putting us in line to surpass the 2017 number.

Finally, the average length of stay in foster care dropped from 35 months in SFY11 to 18 months in SFY18.

Over SFY 2018 WCHSA has continued/maintained the decreased usage of congregate care for children of all ages. While WCHSA continues to contract with a provider that conducts screenings and assessments of children that are placed in congregate care, WCHSA has increased its utilization of internal clinical staff to conduct the initial assessments of children entering foster care, specifically children who are placed directly into foster homes. Clinicians conduct comprehensive assessments on children utilizing the CASII, CANS which is incorporated into the Children's Uniform Mental Health Assessment (CUMHA). The CANS assessment is currently completed on all children who are placed in enhanced foster homes and SFC+ foster homes and has a component to assess the developmental needs of all children. When developmental needs are identified the case, worker makes appropriate referrals to services to NEIS (children ages 0-2) or the Child Find Project (children ages 3-5).

Additionally, WCHSA continues to collaborate with community outpatient service providers through a voucher payment system to ensure children and adults are appropriately assessed and receive individualized, treatment services to meet their behavioral/mental health/substance abuse treatment needs. The services are community-based with providers selected to meet the needs of dependent children with special needs/issues including: trauma, attachment, transitioning, sexualized behavioral issues and specialized treatments through the University of Nevada, Reno for children with significant behavioral issues and/or those that have been diagnosed on Autism Spectrum Disorder. Developmental services, such as PSR or BST may also be provided through contracted providers for children who do not qualify based on their age for developmental services through NEIS or the Child Find Project and/or children and families that have issues with insurance. Staff continually train providers on Trauma Informed Care practices and require a trauma lens for service provision. Additional trainings/information has been incorporated to reflect the SAFE/SIPS model utilized by WCHSA by focusing on Caregiver Protective Capacities as well as the client's stages of change.

DCFS Rural Region-The DCFS Division's Clinical Program has implemented the process of running monthly reports from the SACWIS system to compile data related to the identification of children placed in custody each month; the age of the child and the placement location/type of placement of the child. These reports are then used to generate a list of children who have entered care during the month that are five (5) and under. These children are then staffed, at least quarterly, through Placement Review Team (PRT) meetings that occur two (2) times per month in each District Office. The intent of staffing at PRT is to discuss case status, stability of the placement and to discuss goals and barriers to reaching permanency timelier, as well as to identify appropriate placement options and support to children in placement (and placement resource). A goal of PRT is to minimize and/or decrease the number of placements children under the age of five (5) experience. This will assist in ensuring that the child's developmental needs are being met, lead to a discussion of barriers to reunification and/or permanency issues in order to establish permanency for timely for this population. Additional clinical resources are also available to assess the needs of children and family in this age range to assess for parenting capabilities, developmental needs of the child, attachment and behavioral/parenting intervention strategies.

Children are staffed for placement in conjunction with the licensing team for best placement matches, as well as with Adoption Recruiter to identify potential adoptive homes who are willing to accept placement for children along the spectrum of the case (i.e. legal risk placement). Through PRT intervention and services are also identified for the child, the family and the placement resource. Intervention and services could include: Intensive Family Services (in-home family counseling); psychoeducation to parents and/or placement resource (topic dependent); assessment (behavior, emotional, trauma needs); specific services (i.e. Parent Child Interaction Therapy (PCIT)). Additionally, the DCFS Rural Region will have implemented a process in which when infants (children under the age of one (1), enter care, attempts are made to coordinate collaboration between child welfare staff, licensing, adoption recruitment and clinical program to locate a foster home that has been identified as a potential long term and/or legal risk placement to minimize the number of placements that child may experience, and to provide as stable of an attachment figure as possible.

Every child who is taken in to custody under the age of five (5) is referred for the completion of a Trauma Screening. At the time of the screening, staff is assessing for trauma related symptoms, developmental issues, areas of support and/or additional training for a placement resource and is recommending a referral to Early Intervention Services for assessment. Clinical Program Referrals (for areas of Intensive Family Services, Direct Parent Services, Clinical Resource Services) are reviewed with attention to the age of the child in the case. Referrals for more complex assessments (i.e. psychological evaluations and/or parental capacity evaluations) are assigned at an earlier stage in the case for children under the age of five (5) as case decisions need to occur timelier.

Currently services are provided through the Clinical Program in response to crisis for placement preservation, pre-adoption and post adoption supportive services that include in-home family-based programs (i.e. counseling, specific intervention such as PCIT, PMT, transition and integration issues) as well as specific psychoeducation. Additional screening materials have been purchased by the Division to be implemented by the Clinical Program staff as appropriate for children five (5) and under. Screenings are available to assess the needs and/or status of children, parents or placement resource(s).

To ensure the DCFS Rural Region provides developmentally appropriate services to this population the Trauma Screening Referral process is frequently reviewed with adjustments made to make referrals more streamlined. Monthly reports are generated and reviewed by Clinical Program staff to ensure that referrals are consistent with information related to removals. There is ongoing training of implementation to Clinical Program staff for completion of Trauma Screening referrals, to include assessment of any early intervention, developmental and/or other needs of the child, as well as to identify any supportive services the placement resource may require. If issues are identified, referrals to appropriate services are recommended and/or psychoeducation is provided to parents and/or placement resources of developmental stages, developmentally

appropriate parenting and effective parenting strategies for child developmental stage. Regularly scheduled PRT (Placement Review Team) meetings have been coordinated for each District office that occur two (2) times per month. Each child is staffed at least quarterly. The participants on each team includes the District Office Manager for each office, Clinical Program Manager for the Rural Region, Licensing worker assigned to the District, Social Work Supervisors, Case Managers, Family Support Worker and other Clinical Program staff. Children are staffed to discuss placement issues, as well as any issues present at the time of custody with either the child and/or parent to support case planning activities and placement.

Ongoing training is also provided to Clinical Program staff, and is opened to providers in the community, for evidenced based targeted interventions for young children and families. These include Parent Child Interaction Therapy (PCIT), Parent Management Training (PMT) and DC-03 (diagnostic clarification and assessment for children five and under). Additional screening and psychometric instruments have been procured by the DCFS Division to use in further assessment of and for children in care, specifically under the age of five (5) and their parents to identify areas of intervention more efficiently and timely. These instruments include: Child Behavior Checklist (for children five and under); Adverse Childhood Experience Scale (ACES); Behavioral and Emotional Rating Scale (BERS-2); Behavior Rating Inventory (BRIEF-P) (for ages 2.5 and up); Child Abuse Potential Inventory (CAPI); Parenting Stress Index (PSI); Children's Aggression Scale (CAS); Children's Problems Checklist (CPC); Child Sexual Behavior Inventory (CSBI); Developmental Assessment of Young Children -2 (DAYC-2); Developmental History Checklist for Children (DHC); Eyberg Child Behavior Inventory (ECBI); Nevada Early Childhood Services Eligibility Tool (NECSET); Preschool and Early Childhood Functional Assessment Scale (PECFAS); Trauma Symptom Screening; Trauma Symptom Checklist for Young Children (TSCYC); Early Childhood Service

Item 30: Individualizing services

Requirements:

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

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 105.

How well is the service array and resource development system functioning statewide to ensure that the services in item 29 can be individualized to meet the unique needs of children and families served by the agency?

Please provide relevant quantitative/qualitative data or information that show whether the services in item 29 are individualized to meet the unique needs of children and families served by the agency.

- Services that are developmentally and/or culturally appropriate (including linguistically competent), responsive to disability and special needs, or accessed through flexible funding are examples of how the unique needs of children and families are met by the agency.

State Response:

Nevada has determined this item to be an Area Needing Improvement (ANI) due to service gaps and lack of resources identified in Item 29, Service Array. Nevada uses the Nevada Initial Assessment (NIA) and Protective Capacity Family Assessment (PCFA) to identify individual services and provide those services in some cases the lack of resources makes it difficult to individualize services in all cases. Gaps in behavioral and mental health service delivery, substance abuse treatment services and an inability to create sufficient safety management services in the DCFS Rural Region poste a barrier to individualized service needs for families.

In addition, the Nevada Community Action Network is comprised of 12 Community Action Agencies that provide a range of social services to Nevada's low-income population. Each agency receives Community Services Block Grant (CSBG) funds in addition to funds from other public and private entities. The network provides services based on client income and need. Eligible clients cannot have income greater than 125% of the federal poverty level and need is determined by initial

placement on 12 scales of well-being. These 12 scales collectively are known as the Nevada Primary Assessment process. These scales in alphabetical order are:

- Early Childhood Education
- Education-Adults/Youth (Over 18)
- Energy and Utilities
- Employment
- Food and Nutrition
- Household Budgeting
- Housing
- Health Insurance-Children/Adults
- Human Services
- Primary Healthcare
- Transportation

The approach to individualizing services is multi-pronged, including collaboration with both internal and external stakeholders, as well as funding through federal and state sources. Collaboration continues to be essential when ensuring services for families and children meet individual and specific needs. An example of a relationship includes the Regional Partnership Grant project, which is in the second five-year term. Partnering with the Clark County 8th Judicial Court (with a very active judicial involvement), CCDFS has been able to fund a project that not only identifies specific mothers and fathers with substance abuse issues, but through comprehensive analysis, therapy, and case management is able to address very specific and individual needs of each family member.

Title IV-B Subpart II is a significant funding source for our sub grantees. Through collaboration with sub grantees as well as partner agencies, DCFS's Grants Management Unit (GMU) continues to evaluate services and service needs. This has been accomplished through required annual on-site reviews of funded providers as well as meetings to discuss the specific and individual needs of each sub grantee and the population they serve.

Through the use of the online data collection system, which allows sub grantees to track client utilization and outcome measures, the DCFS GMU is able to view trends across agencies as well as those areas that are not currently successful. This system can provide program evaluation protocols which include measurable outcomes under the Title IV-B Subpart II grant award. Each sub grantee is required to submit monthly programmatic reports to this system, which maintains the online data reporting system. This serves to expand upon the state and federal accountability requirements.

Current sub grantees under the Title IV-B Subpart II grant award provide services throughout Nevada, including all three regions (Clark County, Washoe County, and Rural Region). These monthly programmatic reports provide DCFS with an accurate representation of both need and services being provided. The DCFS Grants Management Unit (GMU) in turn reviews monthly programmatic reports to ensure that services are being provided statewide and needs are being addressed by the sub grantees. Sub grantees providing services statewide are also grouped by not only the region in which they are serving but also within the four categories of Title IV-B Subpart II as mentioned above in Item 29. It is through this process that we can ensure that services may be individualized to meet the unique needs of children and families within the State of Nevada. The goal for this year continues to be an evaluation of services and needs with a focus on the service areas that are most challenging.

Item 29 provided a breakdown of the services within the four categories of Title IV-B Subpart II. Of significance within the provision of individualized services is that, within our Title IV-B Subpart II sub grantees, there were many self-reports of disabilities which required and received successful services. Service hours were dedicated within the four services areas

of Title IV-B Subpart II, providing an array of group and individual services. Through our continued contact and work with our partner agencies as well as our sub grantee, planning for the coming year is continual to ensure funding and resources are maximized.

There was a 2016 Statewide Community Needs Assessment that was conducted by the Grants Management Advisory Committee by the Department of Health and Human Services, Office of Community Partnerships and Grants. Specific need and issues include: mental health access, housing, homelessness, emergency services, education and employment. Health/Mental Health care was the top need identified in the 2014 Needs Assessment. Two years later in 2016, it continues to be the top need however seems to be improving slightly.

Stakeholder Interview Information

Focus groups were conducted in June 2016 and October 2017 statewide with caseworkers, the judiciary, foster parents, and youth concerning this item. Statewide and broadly the most needed service gaps are: 1. Mental Health Assessments and Services for parents and children 2. Substance Abuse Treatment for parents and 3. Housing 4. Gambling addiction 5. Domestic violence 6. Child Care.

- Services can be individualized; however, it is more challenging for those with special needs or speaking another language other than English. There are few Spanish speaking counselors and limited evaluators. Not all court services have interpretive services for all languages. Some local agencies are using Language Link for other languages.
- Examples for lack of services for special needs:
 - Judiciary spoke to a deaf parent who was unable to access substance abuse treatment due to his or her disability
 - Foster parent spoke about having a 12-year-old, developmentally delayed child that is now receiving advanced day care which he will need when he turns 13, but, no providers/programs are available to him once he turns 13

The State and child welfare agencies continue to contract with a variety of service providers across the state but gaps in service providers continue to exist in many areas of the state.

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

Systemic Factor F: Agency Responsiveness to the Community

Item 31: State Engagement in Consultation with Stakeholders

Requirements:

NRS 432.0305 and NRS 432B require the DCFS to observe and study the changing nature and extent of the need for child welfare services and to cooperate with the Federal government in adopting and completing state plans 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.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 108.

State Response:

Nevada has determined this item to be an area of strength. In accordance with the requirements at 45 CFR 1357.15(1) and (m), DCFS continues to collaborate and engage internal and external Stakeholders in monitoring the identified shared goals and objectives of the 2015-2019 Child and Family Services Plan (CFSP). Stakeholders continue to be involved in the review of available data, and/or in assessing current performance, utilizing participation in workgroups, focus groups, meetings, public presentations and surveys for purposes related to achieving the CFSR goals and objectives.

Nevada Revised Statute (NRS) 432.0305 and NRS 432B require the Division to observe and study the changing nature and extent of the need for child welfare services and to cooperate with the Federal government in adopting and completing state plans which will assist DCFS to provide services for children and families. This is accomplished through the coordination and collaboration with other public and private agencies and entities in developing the CFSP and ongoing annual updates required by Title IV-B. The Division collaborates with a variety of entities in this process. Annually, each child welfare agency provides input into the Annual Progress Services Report (APSR).

Nevada's 2015-2019 CFSR was developed with input and recommendations provided by key statewide stakeholder groups during their regularly scheduled meetings. Concerns and input from these on-going discussions were integrated into the goals, objectives, and annual updates to the CFSP. The goals and objectives of the 2015-2019 CFSP have not changed as those goals have remained the same. Many of the measurable goals require data reporting for monitoring purposes and to this date continue as goals and objectives of the current CFSP.

These existing internal groups statewide discuss the on-going monitoring and progress of the CFSP goals. These groups meet on various dates and throughout the state at various locations. Some group meetings are conducted via conference calling. Additionally, external stakeholders provide information about program functioning, policy and practice, protocol development, share resources and information that are used in program development and planning. Recently, focus groups were conducted with a variety of external stakeholders to gather input and information as part of the 2018 Statewide Assessment.

Consultation and Collaboration with community stakeholders:

Consultation and collaboration include stakeholders from the community as well as other agencies at every level of the child welfare service delivery continuum, ranging from planning for allocation of funding to case level decision making to changes in policy, practice and reporting requirements. This collaboration and consultation with other agencies and entities expands partnerships and the sharing of available resources. It also allows for the provision of constructive feedback to the agency about programs, policies, procedures and practice that may be incorporated into the State Plan. DCFS representation includes, but is not limited to, educational/research institutions and agencies related to drug and alcohol, health, mental health, education, domestic violence, and juvenile courts, representing various counties. Statewide consultation and coordination with stakeholders in implementing the provisions of the CFSP include (but are not limited to) the following committees, organizations or entities.

Decision Making Group (DMG)-The DMG is comprised of the DCFS Administrator, DCFS Deputy Administrator and the County Child Welfare Agency Directors. The DMG is a collaboration in which all Child Welfare Agencies meet to consult and collaborate around statewide child welfare issues. Issues related to the CFSP/CFSR and APSR discussed during the monthly/bi-monthly meeting.

Assistant Directors Meeting (ADM)-The ADM is comprised of the Child Welfare Assistant Directors and the DCFS Deputy Director. This collaborative meets and consults on statewide child welfare issues relating to policy and practice. Additionally, issues related to the CFSR/CFSR and APSR are discussed during the monthly meetings.

Consultation and Collaboration with Tribes

Children's Justice Act Indian Child Welfare Committee- (CJA ICW)-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) conducted bi-monthly Statewide Children's Justice Act Task Force Indian Child Welfare (CJA ICW) Committee meetings. The CJA ICW Committee is a multidisciplinary advisory committee of the Children's Justice Act Task Force. 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 Human Services Agency, 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. Meetings are held bi-monthly and are co-chaired by the ITCN Executive Director and the DCFS Indian Child Welfare Act (ICWA) Tribal Liaison at the Western BIA office. 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 DCFS tribal liaison keeps an updated matrix on the Memorandum of Understanding (MOU) status between Nevada Tribes and DCFS. The MOU matrix is a list of Nevada tribal entities and documents meetings, letters/email correspondence, and ongoing face-to-face contacts between DCFS Tribal Liaison and Nevada Tribes. The matrix is updated and shared through the DCFS Tribal Liaison to members of the CJA ICW Committee.

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. CJA ICW Committee meetings were held on August 16, 2017, October 25, 2017, December 20, 2017, February 28, 2018, and April 25, 2018.

Several topics discussed at the 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
-

The DCFS tribal liaison continues to gather input, collaborate, and consult with the tribes through individual consultations and ongoing state and / or tribal meetings. Tribal input and feedback is 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 would include: continuous changes 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. DCFS tribal liaison will continue to share and include NV tribes on the implementation and assessment of CFSP / APSR.

The DCFS tribal liaison outlined the tribal initiatives for 2019:

- Meeting and consulting with other state agency tribal liaisons;
- Reviewing and revising the NV ICWA Policy 0504;
- Attending quarterly Tribal Consultation Meetings and giving updates on ICW per request;
- Attending NV Indian Commission (NIC) meetings to stay updated on tribal community issues across the state;
- Attending and participating in NV Indian Education Association meetings to address the importance of early childhood welfare topics and issues;
- Meeting with other State Agency tribal liaisons to discuss current needs of NV Tribes;
- Participating in The National ICW Manager's calls with other ICWA specialists in other states where ideas from each state are discussed and shared regarding ICWA;
- Attending monthly Tribal Health Director's Meetings at ITCN and giving updates regarding ICW issues involving the tribes;
- Monitoring and updating the ICWA page on the DCFS website which is made accessible to tribes;
- Providing training opportunities from various sources through the NVICWA listserv and announcements at meetings; and,
- Sharing of contact information between the tribes and DCFS;
- Traveling to NV Tribes to attend cultural events and/or ICW trainings

The DCFS tribal liaison attended the 36th annual National Indian Child Welfare Association Conference titled, "Protecting Our Children" in Anchorage, Alaska April 15-18, 2018. The liaison was invited to travel to Las Vegas, Nevada, on January 11-12, 2018, to participate in a community event sponsored by the Clark County Department of Family Services and the Las Vegas Paiute Tribe. The event was well attended by community and tribal members who may be interested in becoming a foster / adoptive parent. On March 22-23, 2018, the DCFS tribal liaison presented at the annual NV Indian Education conference at the University of NV, Reno. Topics included "Developmental Milestones in Early Childhood Education" and "NV ICWA / MOUs between DCFS and NV Tribes".

The DCFS tribal liaison gathers input, collaborates, and consults with the tribes through Statewide Children's Justice Act (CJA) Task Force Indian Child Welfare Committee open meetings held every other month with assistance from the Inter-Tribal Council of Nevada and the Western and Eastern Bureau of Indian Affairs (BIA) Nevada Agencies. The CJA ICW Committee is comprised of all child welfare agencies in Nevada, Nevada Tribes, BIA, Legal Counsel, and statewide stakeholders. DCFS tribal liaison also attends quarterly meetings held at both the state and tribal level. This includes 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.

The DCFS tribal liaison scheduled consultations with Tribal Chairman and representatives from Tribal Social Services. The liaison met with the following NV Tribal entities to discuss the process and the purpose of the MOU: Battle Mountain Band Council, Confederated Tribes of Goshute, Elko Band Council, Fallon Paiute Shoshone Tribe, Fort McDermitt Paiute Shoshone Tribe, Las Vegas Paiute Tribe, Lovelock Paiute Tribe, Moapa Band of Paiutes, Pyramid Lake Paiute Tribe, Reno-Sparks Indian Colony, Te-Moak Tribe of Western Shoshone, Walker River Paiute Tribe, Washoe Tribe of Nevada and California, Yerington Paiute Tribe, and the Yomba Shoshone Tribe. Overall consensus from the NV Tribes was for the liaison to continue meeting face-to-face with each tribe on an ongoing basis and working closely with tribal social workers. 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.

DCFS has a MOU 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 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. Active efforts are not part of the NV statute, however, 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, Yerington Paiute Tribe, and Elko Band Council. DCFS also has a current MOU with the Washoe Tribe of California and Nevada to include the following bands: Woodfords, Dresslerville, Carson Colony, and Stewart. DCFS is working to finalize MOU drafts with the following NV Tribes: Reno-Sparks Indian Colony and Pyramid Lake Paiute Tribe.

DCFS continues to provide training and to work with tribal and state 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. Available on the DCFS website, it shows the ICWA policy and documents for identifying Indian children and Notice of Court Proceedings. DCFS reviewed the new State Guidelines for Courts issued by the BIA in February 2015, Nevada's ICWA State Policy 0504, Nevada Revised Statutes (NRS) and training to determine if revision of Policy, NRS and training is necessary. The Inter-Tribal Council of Nevada holds an annual convention each year in which DCFS has been invited back to participate. Due to budget constraints, ITCN elected not to have an annual convention FY 2017 and is unsure if they will be having an annual convention FY 2018. ITCN will inform DCFS of their budget audit results and the future possibility of annual conventions. DCFS tribal liaison will explore

other means of funding and collaborating with NV Tribes to see if future trainings and workshops can be put together to benefit both tribal and state social workers. Once funding is secure, DCFS will attempt to host a NV ICWA event to include education on ICWA and other culturally appropriate child welfare topics. The hope is to have an annual event to replace the ITCN conventions and invite participants from NV Tribes as well as State and County agencies.

Active efforts are shown by the Nevada child welfare worker's attempts to assist in both arranging for the best fitting culturally competent services and helping families engage in those culturally competent services that are unique to their needs. Per NV State ICWA Policy 0504, child welfare workers inquire about possible Indian family members, fictive kin, tribal community members, and / or tribal foster care placement options by filing out the Ancestry Chart with the assistance of DCFS tribal liaison. NV child welfare workers inquire about the applicability of ICWA immediately upon a child being taken into state custody. All efforts are documented.

The "Indian Child Welfare Resource Guide for Nevada" was initially developed and finalized in 2003 by the members of the Indian Child Welfare Steering Committee. This publication was designed to assist state and county child welfare agencies on the law and contacts tribal contacts within NV Tribes. DCFS tribal liaison continues to update Resource Guide and make it accessible to Tribes via the DCFS website.

In SFY 2018, DCFS made the CFSP and APSR available for public review and inspection through the NV state website and provided them through the listserv. Additionally, each year the APSR is exchanged with the Washoe Tribe of Nevada and California. The Washoe Tribe of Nevada and California is the only tribal entity in Nevada that completes an APSR. 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. DCFS collaborated with NV Tribes through quarterly meetings with Inter-Tribal Council of Nevada (ITCN) Executive Board Meetings. These meetings include NV Tribal Leaders, the Department of Health and Human Services (DHHS), Tribal Liaison Committee and Statewide CJA Task Force Indian Child Welfare (ICW). Notifications of the meetings are provided through a listserv. The agenda and attachments are also sent via a listserv for the CJA ICW Meetings. A barrier identified in working on the DCFS MOUs has been the high turnover in ICW workers both on the state and tribal side. There have been limited meetings with the ITCN Executive Board and lack of proper tribal participants at the DHHS Tribal Consultation Meetings in 2017, which reflects as a barrier to coordination and collaboration with NV Tribes.

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 effecting 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 432B.390, 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 2018, 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 2017, DCFS Rural Region randomly pulled 46 child cases to review. Out of the 46 cases, 2 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 preserving connections for Indian children. The 2 Indian child cases reviewed reported “Strengths” in all areas of Item 9. DCFS will work on a more detailed targeted review of ICWA practices in Nevada for reporting purposes in the future. Reports are available for review on the DCFS website and per request.

During FY 2018, 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 published June 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/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 regarding ICWA. DCFS liaison was and continues to be a key participant in meetings and building relationships with Nevada Tribes.

Youth – Consultation and Collaboration with youth and adult leaders occurs through 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). Nevada LIFE is the democratically elected self-governing board composed of youth in care, and those who have aged out of care. Members in this statewide group are composed of participants in one of six regional youth advisory boards, and report regional issues identified in their local boards for statewide consideration as either program/policy or legislative recommendations. In Nevada’s 2017 Legislative session, several youth-driven initiatives were addressed legislatively, including increased protections for self-identified LGBTQ+ youth in care, development of a grievance procedure and earmarked general funds to ensure all youth in care have access to normalcy activities. To implement effective policy that remains true to the original legislative intent, developmentally-appropriate youth are recruited for ongoing participation on implementation workgroups to provide their input to state and county actors to ensure that youth voice and the needs of youth in care are adequately addressed by child welfare agencies. As a response to foster youth concerns in meeting about a lack of access to information and a lack of consistent information-sharing between child welfare agencies and youth in care, Nevada LIFE’s social media page has been modified to serve a dual purpose of connecting current and former-foster youth to others in their community for the purposes of fostering connections, and as an informational clearinghouse. As moderator, the ILPS can share in real-time information, resources and benefits applicable to all Nevada’s current and former foster youth without tasking frontline staff. Nevada LIFE meeting agendas and information is posted for all followers to view and access, and meetings are open to all members via call-in to a toll-free number. Nevada LIFE’s social media page is used to solicit youth feedback on items such as the Statewide Assessment, solicit focus group participants, and targeted satisfaction surveys for quality assurance activities such as the CFSR. Anonymized results are shared with Nevada’s child welfare agencies to identify areas of strength and areas for programmatic improvement based on the information provided by Nevada’s current and former foster youth.

Quality Parenting Initiative (QPI) Engagement of Foster Care Providers- 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. CCDFS has a foster parent Champion (FPC) Team that support newly licensed, unlicensed or experienced caregivers. The team is made up of caregivers who are responsive to other caregivers providing support Monday through Friday from 9am to 7pm taking calls. 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.

Child Fatality- The Child Death Review (CDR) process consists of the Executive Committee to Review the Death of Children whose members represent administrators of the child welfare agencies, and agencies responsible for vital statistics, public health, mental health and public safety and local child death review multidisciplinary teams. This statewide committee consult and collaborate on public education and prevention of child fatalities.

Differential Response (DR) Steering Committee- This collaborative meets quarterly and includes many providers from the community that provide services to families involved with the Nevada CPS system. DR is an early intervention and child abuse prevention program; it is a partnership between the Nevada Child Protective Services Agencies and Family Resource Centers (FRC) to respond to screened-in Priority 3 child abuse/neglect cases. Families are linked to services in their communities.

Nevada Coalition to Prevent the Commercial Sexual Exploitation of Children (CSEC) – This collaborative has many internal/external stakeholders meeting monthly/quarterly that includes consumers, service providers, foster care providers, juvenile judges and other public and private child and family serving agencies mobilize around issues related to (CSEC). On May 31, 2016, Governor Brian Sandoval signed Executive Order 2016-14 creating the Nevada Coalition to Prevent the Commercial Sexual Exploitation of Children (Coalition) in response to a growing awareness of the need to identify and serve these child victims. Nevada was ranked 11th in the nation in 2016 for the number of human trafficking cases reported to the National Human Trafficking Hotline. The Executive Order directs the Coalition to mobilize resources to provide a coordinated response to stopping commercial sexual exploitation of children, aiding its victims, and bringing perpetrators of this crime to justice; and support the implementation of Public Law (PL) 113-183, the Preventing Sex Trafficking and Strengthening Families Act of 2014. It requires the development of a statewide strategic plan and annual reports outlining the Coalition's progress which meets quarterly.

Legislative Committee on Child Welfare and Juvenile Justice Task Force to study Juvenile Justice issues - 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. (Assembly Bill 202, Chapter 483, Statutes of Nevada 2013)

Nevada Interagency Council on Homelessness – This Collaborative has many internal/external stakeholders that focus on Homelessness. The Nevada's Interagency Council on Homelessness was established via Executive Order 2013-20 to coordinate and focus the State's efforts to effectively address the challenge of homelessness in the State of Nevada. The Council provides the opportunity for Nevada to engage in an integrated approach regarding the issue of homelessness and promote interagency cooperation. The Council works to increase the awareness of homeless issues among state and local government agencies and local organizations that provide services to people who are homeless.

Nevada uses guiding principles shared with the Dedicating Opportunities to End Homelessness (DOEH) initiative, a joint effort between the U.S. Department of Housing and Urban Development (HUD) and the United States Interagency Council on Homelessness (USICH). These guiding principles include:

- Coordinating Across Partners
- Community-led Action
- Data-driven Achievable Strategies and Goals
- Making Commitments and Measuring Results
- Leveraging Existing and Untapped Resources
- Removing Barriers
- Targeting

Task Force on the Prevention of Sexual Abuse of Children - The Nevada Task Force on the Prevention of the Sexual Abuse of Children was established through the passage of Senate Bill 258, now codified into NRS 432B.700-730. The Task Force, created within the Division of Child and Family Services consisted of members representing the Nevada Legislature; Attorney General's Office; Department of Education; Division of Child and Family Services; representatives from agencies and organizations involved in the prevention, investigation, prosecution and/or treatment of cases of child abuse in Nevada; and, appointed members of the Nevada public with an interest in the prevention of child sexual abuse.

The Task Force was charged with studying and identifying strategies, goals and The Task Force was charged with studying and identifying strategies, goals and recommendations for preventing child sexual abuse. The Task Force recommendations are based on what was learned through research and testimony and have been grouped into two main categories: Primary and Secondary/Tertiary Prevention. The recommendations born out of these two emergent categories serve to move Nevada closer to achieving the following goals: 1) Improved education of lawmakers and the public; 2) Prevention of occurrence and reoccurrence of abuse; and, 3) Provision of crucial support to victims and their families.

Nevada Partnership for Training (NPT) - The Nevada Partnership for Training (NPT), a bi-university partnership, in collaboration with DCFS-FPO, the Rural Region, Clark County, Washoe County, University of Nevada, Las Vegas (UNLV) and the University of Nevada, Reno (UNR), collaboratively work together to improve the child welfare training delivery system. The Training Management Team (TMT) is composed of internal and external members who meet monthly to consult

and collaborate concerning issues related to child welfare training. Information concerning the CFSP/APSR and the CFSR are topics during these meetings.

Nevada System of Care Provider Meetings- The Nevada system of Care consist of a broad array of both behavioral health and support services. These services include both home and community-based treatment, as well as out of home treatment services that are provided when necessary. Meetings are held monthly to consult and collaborate with providers to ensure providers are supported.

Nevada Coalition of Suicide Prevention - The Nevada Coalition for Suicide Prevention is dedicated to partnering and collaborating with local and state individuals and organizations for the development and implementation of evidence-based suicide prevention, intervention, and post prevention strategies and programs in the State of Nevada. Started in 2005, bimonthly meetings are held with community partners and are open to the public. These can be teleconferenced throughout the state, so all jurisdictions are involved.

Systems Advocate Unit - The Systems Advocate Unit serves a vital public purpose by responding to requests for information on issues including, but not limited to, Child Protective Services (CPS) investigations, service array, reunification and permanency, Interstate Compact on the Placement of Children (ICPC) issues, provider concerns, foster care licensing and adoption. The Systems Advocate Unit also informs families of their rights, resolves complaints involving anything that effects the safety and well-being of children in Nevada. The Systems Advocate Unit does not disclose the identity and other personal information of persons who have filed a complaint without their permission. All information and documents shared by stakeholders are kept confidential.

Furthermore, the Systems Advocate performs the duties of the agency Hearing Officer and has the responsibility to make available a fair hearing process to:

- Social service licensing applicants/recipients/group/family foster homes and child placing agencies who disagree with the agency's decision to not reissue or to revoke a license;
- Adoptive parents who feel their adopted child/children should have met the special needs criteria of the Title IV-E Adoption Subsidy funding program;
- An individual who feels a finding of substantiated child neglect and/or abuse is not consistent with the requirements of the law.

The Systems Advocate is also the key point of contact between DCFS, the Department of Health and Human Services and the Nevada State Legislature.

Nevada Continuous Quality Improvement Reviews (Foster Parent, Child, Providers and Parent Consultation)

Annually, Nevada conducts statewide case reviews that mirror the Child and Family Services Reviews and as part of these reviews Foster Parents, Children, Providers and Parents are interviewed and consulted with about individual cases. An array of questions are asked to provide an opportunity for these stakeholders to provide information relative to the functioning of the child welfare system and contribute information relative to the goals and objectives of the CFSP. Focus groups were recently conducted in October 2017 with biological parents and they were consulted on a variety of questions relative to service array, case planning and needs related to the child welfare system.

Collaboration with the Court Improvement Program-

The Nevada Court Improvement Program (CIP) is a state and federally funded initiative designed to develop and implement data-driven, evidence-based, and outcome-focused best practices that advance meaningful and ongoing collaboration between court, child welfare agency, and other stakeholders to achieve safety, permanency, and well-being for children and families involved with the child welfare system in a fair and timely manner. Nevada CIP projects encompass a myriad of activities at the state and local level with the primary purpose to assess and improve court processes related to child abuse and neglect, and to ensure improved safety, permanence, and well-being for children. CIP funding has also been used to develop broad-based systemic reform of courts and court processes related to dependency cases.

Collaborating on the Child and Family Services Plan (CFSP), Child and Family Services Review (CFSR), and Child Safety, Permanency and Well-Being

The Nevada court system has partnered with the Division of Child and Family Services (DCFS) on a variety of fronts the last year focusing many of its efforts on implementing the CFSP and the upcoming CFSR. The courts assisted in the implementation of various data exchange projects to ensure that the judiciary, the Community Improvement Councils (CICs), and child welfare all have access to significant and accurate data.

Agency representatives regularly attend and contribute to all 11 judicial district CIC meetings as well as the CIC Annual Summit. In several instances the agency CIC member provides regular data updates to the court concerning permanency issues, child safety decision-making, and adequacy of foster family population. The CICs all include their child welfare partners as they develop their annual, action-plans to resolve local dependency issues. The DCFS Quality Improvement Social Services Chief presented a session on the CFSR at the 2017 CIC Summit. The CIP Coordinator is an active member of the DCFS Indian Child Welfare Committee, the Statewide Quality Improvement Committee.

Since Nevada does not have a unified court system, or a statewide court case management system, CIP worked with the Unified Nevada Information Technology for Youth (UNITY, the Nevada SACWIS or State Automated Child Welfare Information System) manager to pull the court timeliness statistics quarterly by county for each of the judicial districts (CFS 775 report). At this point, four of the five timeliness measures are available because, although UNITY does have a screen into which to enter the TPR petition filing date, only one county enters this data element consistently. This deficit is being addressed by the Centralized Case Index (CCI) which will draw data from court case management systems.

Baseline data reports were first distributed to the 11 Judicial Districts in 2012 during the Community Improvement Council (CIC) Summit where the CICs were taught to read and understand them. During each subsequent CIC annual Summit district by district comparative analyses of current and previous years' data are shared with the CIC teams. The statewide data are also provided to each CIC quarterly in the form of the CFS 775 report from UNITY.

Additionally, CIP and DCFS have worked together to promote Nevada's participation in the University of North Carolina – Chapel Hill's *Fostering Court Improvement Data Project* in which AFCARS and NCANDS data are used to create a platform of shared data that the courts and child welfare agencies can collaboratively use to make informed decisions, manage operations, monitor performance and make systemic changes to improve outcomes for children and families.

Agency Data Sharing Projects:

CIP has been working with all three child welfare agencies to ensure that accurate and timely information is shared among the courts and the agencies. In 2010, CIP began assessing data exchange feasibility in Washoe County, followed by a similar assessment in Clark County in 2011. Electronic data exchange possibilities were identified in both judicial districts. In 2012, CIP obtained a \$45,000 technical assistance grant from the National Center for State Courts (NCSC) to implement the Court Event Notification project in Clark County. NRS Chapter 432B mandates that proper notification of court hearings and court reviews regarding the status of a child in custody of a child welfare agency must be provided and that it is necessary to ensure active involvement and participation of parents, foster parents, guardians, pre-adoptive parents, and relative caregivers in the child's safety, permanency, and well-being. However, there has been no direct entry of court hearing dates into UNITY. Because entry of this information has been manual following email, fax, or paper notification from the courts, it can be delayed, particularly in the case of change of hearing dates; resulting in the potential for improper notification. CIP embarked on the Court Event Notification project in Clark using the National Information Exchange Model (NIEM), the Global Reference Architecture (GRA) and Extensible Markup Language (XML).

At the lead judge's request, the 8th Judicial District Court's IT Manager has been actively involved and supportive of this project, immediately allocating resources to proceed. To facilitate an electronic link between the systems, the UNITY case number has been entered into Odyssey, the court's case management system, since October 7, 2013. The 8th JD now has the ability to export real-time data from Odyssey per the specifications. Using the format defined within the NIEM-based Court Event Notification IEPD, the District Court developed a process to extract and transmit added, modified or deleted court events to the DCFS. It has made the transformation to the NIEM, has completed testing and is ready to begin exchanging messages with UNITY. DCFS began software development in September 2014 to consume these messages. It was decided to enable integration using a UNITY web service which ran into a few glitches requiring a modification of how the exception messages are written. DCFS has created this report and is ready to receive the data feed from Clark County. Clark can now begin implementing the data feed.

Centralized Case Index

As described above, with assistance from DCFS, CIP has been providing court performance measure data to the courts quarterly. However, several judicial officers questioned whether this information could be made available in near real-time to help them manage caseloads and thereby achieve additional key timeliness milestones and improve outcomes for children. To this end, CIP undertook several technical proofs of concept (POC) initiatives. Two POCs were designed to prove that:

- Case and case party information from the child welfare agency (e.g., removal date, permanency goals, placement information) and information provided by the family court (e.g., assigned judicial personnel, hearing dates, petition filing dates, adoption dates) can be combined into a single data store and provide a consolidated view of case information;
- Timeliness reports can be generated on-demand through a browser-based system and presented to the user in an easily understandable format.

The second POC created a Centralized Case Index (CCI) which allows authorized users to view this consolidated information and generate a set of standardized reports. In 2014, this demonstration capability was implemented using Microsoft Reporting Services. The user can use configurable parameters to refine the report. The user may generate a more detailed report listing the cases contained in that particular grouping simply by clicking on a vertical bar.

Since the POCs successfully accomplished both of these objectives, over the past year the CIP has been productionalizing these capabilities through the implementation of data exchanges with both the DCFS and the Second Judicial District (2nd JD). To date, the CCI has imported eight years of DCFS case data into the CCI system. These data include: UNITY case, court hearings, case parties, case petition, placement history, provider service, and removal information.

Work has also begun on software to consume case data from the Second Judicial District Court Case Management System, Contexte. These data will include hearing, filing and case party information and will include the UNITY case number so the court information can be cross-referenced with DCFS information.

A CCI front-end has been built at <https://www.nevadacipdashboard.org/> and work is ongoing to provide the judiciary with aggregate data reports into which they may drill down to obtain case specific information helping them manage their caseloads and improve timeliness. The intention is to provide a continuous feedback loop to the courts and CICs on their progress and to help them determine where they may wish to focus additional efforts. Judges and other key partners are already anticipating how the CCI could be expanded to include juvenile justice data (Project One) and education data to help inform and continually improve the quality of other programs and outcomes for children.

Discussions concerning pulling some of their pertinent data into the CCI are also being held with such additional agencies as the Nevada Department of Education (NDE), the Washoe County School District, and the Jan Evans Juvenile Justice Center. In the meantime, the UNITY CFS 775 report has been revised to include the proportion of each measure that meets the statutory requirements. The report has also been redesigned to provide the entire history of first permanency hearing timeliness; and calculates recent history (2 years) to allow courts to see progress being made without being encumbered by historical data not impacted by their improvements.

Child and Family Services Review (CFSR)

Nevada CIP has been actively involved in the CFSP and APSR for many years. The CIP Coordinator attended the Federal briefing in Seattle, Washington on the upcoming Child and Family Services Review as an invited member of the Nevada Team. With this enhanced understanding of the systemic factors and what has replaced the composites, and the use of the newly established portal; CIP has been able to help the courts and CICs better understand the 2018 CFSR process in Nevada.

CIP is an active and charter member of the Statewide Quality Improvement Committee (SQIC) which meets monthly to discuss all that is relevant to both the CFSR and the CFSP. 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.

CIP is also part of the team reviewing all the CFSR Case Review reports from the jurisdictions. CIP participates in on-going review of the resultant data and discussion concerning how improvement can be made in those items leading up to Nevada's Round 3 CFSR in 2018. The CIP Coordinator was trained to assist with quality improvement case file reviews in Nevada and has been certified to conduct case file reviews on the CFSR On-Line Monitoring System. CIP has participated in the Rural Region Reviews.

The 11 judicially convened Community Improvement Councils (CICs) will be involved in focus groups relating to continuous monitoring of the systemic factors. As a matter of fact, the CICs have initiated supporting several of the outcomes and systemic factors as a result of their action planning around timeliness, child safety, and hearing quality. All the courts have focused on implementing child safety decision making (Safety Outcome 2, Item 3). Most courts are asking about placement with relatives and maintaining relationships, if there has not been placement, with siblings (Permanency Outcome 2, Items 7, 8, and 10). As result of the 2015, 2016, and 2017 CIC Summits training on enhancing hearing quality, the courts are making inquiries concerning appropriate permanency goals (Permanency Outcome 1, Item 5).

Regarding the Case Review System systemic factor Item 22, a column for the proportion of permanency hearings meeting the mandatory time requirement has been added to the Court Performance Measure report sent to the courts quarterly. A

review of court timeliness data shows that for all children who were in foster care between 2012 and 2017, the median days to permanency hearing were within the 12-month requirement. The proportion of permanency hearings conducted timely improved from 67% in 2012 to 83.5% in 1st quarter 2018. Additionally, time to permanency and termination of parental rights has been trending downward (19% and 21% decrease, respectively) since 2011, and the proportion of permanency hearings meeting statutory requirement upward (25% increase) through 1st quarter of 2018.

Concerning Item 21 (Periodic Review Hearings), many courts have created hearing scheduling forms to ensure that they are holding all their hearings ASFA timely. Most courts are scheduling their review hearings earlier than 6 months after learning at a CIC Summit that it is best practice and helps improve likelihood of reunification. Many are scheduling review hearings for 3, 5, 6, and 9 months.

In terms of Item 23 (Termination of Parental Rights), CIP has been informing the courts quarterly of their timeliness using the same Court Performance Measure report and during the annual CIC Summit trend data are presented for the courts to inform development of their annual court improvement action plans. A review of these data reveals that since 2011 through 2017 the time to TPR has been reduced by 22% statewide from 764 to 600 median days. Several of the CICs are digging into their data to better understand the underlying factors driving the trends.

Several courts have included in their CIC action plans activities to assist with Item 35 (Foster and Adoptive Parent Licensing, Recruitment, and Retention). The 4th Judicial District (JD) celebrated National Adoption Month by engaging the entire community of Elko to highlight the need for adoptive and foster homes. They intend to contact school district about using robo call to invite potential foster parents to open house. With DCFS, the 5th and 7th JDs successfully pulled the communities together to recruit additional foster families, especially in remote areas. The 7th JD included in their quality hearing action plan increasing court involvement in foster care recruitment. The 8th JD's judges participate in foster family trainings. The 9th and 10th JDs joined forces with DCFS and CASA in local recruitment events.

The Children's Commission

On August 12, 2016, Nevada Supreme Court created the Nevada Children's Commission naming the Chief Justice as chair and appointing 30 members. Following extensive research, the Chief Justice convened the first organizational meeting of the Children's Commission on September 18, 2017. During the February 9, 2018 meeting, staffing, structure, funding, bylaws and strategic planning were discussed. Casey Family Program representatives worked with the Commission to develop a strategic plan during the May 4, 2018 meeting.

The Statewide Juvenile Dependency Mediation Program

Since the inception of that first Juvenile Dependency Mediation pilot in Nevada, over 700 dependency mediations have been conducted with an overall agreement rate of 78%. As part of the CIP continual quality improvement efforts and to ensure fidelity of implementation, the National Council of Juvenile and Family Court Judges (NCJFCJ) was contracted to design the stakeholder surveys and conduct process and satisfaction assessments for the JDMP. NCJFCJ also conducted an impact assessment of the 2nd JD's program because it has been in place long enough for cases to have closed. These multiple studies conducted by the NCJFCJ on the mediation pilot projects and the statewide JDMP have found that mediation significantly improves outcomes for children. Mediated cases are more likely to result in the children safely reunifying with their families:

- Eighty-eight percent (88%) of mediated dependency cases (not TPR) resulted in reunification as compared to only 50% of cases not mediated; and,
- Mediation resulted in increased engagement by fathers. Fathers who participated in mediation are more likely to attend court hearings and work their case plans (72%) as compared to the control group (only 50%).

There is a general perception among both parents and stakeholders, particularly child welfare staff, that mediation is a helpful approach to move the case forward. It is successful in increasing cooperation among parties and in engaging parents. Parents felt that they were listened to, their opinions were respected, and that they were part of the decision-making process. The stakeholders, especially the caseworkers, found mediation to be an effective means to increase parental engagement and provide an alternative to litigation while not increasing their workload.

Satisfaction surveys completed by all participants at the end of each mediation show that:

- 98% to 100% of the professional stakeholders (attorneys, social workers, CASA/GAL, etc.) valued the process, and felt that they had been treated with respect and that their input had been valued;
- All (100%) the children, parents and foster or adoptive parents felt fairly treated;
- 99% said they had a chance to voice their opinions; and,

- 95% felt they contributed to the solution.

Feedback from the confidential surveys collected at the end of each mediation session continues to be very positive often referring to the open and relaxed environment mediation offers. Stakeholders across the state are actively supportive of the mediation process as evidenced by this child welfare supervisor's statement, "*This program is very helpful. Saves time and resources.*"

The statewide Juvenile Dependency Mediation Program was launched in July 2016 with a full panel of mediators who were specifically trained and certified in dependency mediation. Another 40-hour dependency mediation training was conducted in April 2018 enlarging the panel of mediators to accommodate the increased demand. A highly skilled Administrator manages the Program and guides the mediators. She conducts monthly mediator trainings, schedules mediations as they are received via court order or direct referral from Child Welfare, co-mediate with mediators on particularly difficult mediations, and assists judicial districts in creating their internal processes. All JDMP mediations throughout the state follow the facilitative model.

Item 32: Coordination of CFSP services with other Federal Programs

Requirements:

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.

Collaboration occurs with Federal and State Programs involved with Medicaid, Juvenile Justice, Mental Health, Child Support Enforcement, Tribal Programs, Department of Health and Education which includes Head Start. Additionally, DCFS is involved with many state agencies, community providers including Law Enforcement as it relates to the Governor's Task Force for Commercially Sexually Exploited Children (CSEC). The DCFS has many contracts with agencies that are funded with federal funding. Since the last CFSR, there is an ongoing collaboration with the Executive Team to Review the Death of Children, Differential Response, the Regional Partnership Grant, the Children's Behavioral Health Consortium, the Youth Advisory Boards, the Citizen's Review Panel (North and South), the Children's Justice Act (CJA) Task Force, and the Court Improvement Project (CIP).

There are current Memorandum of Understandings (MOU) between various agencies and the DCFS. The Division of Mental Health (MHDS) and the DCFS have an MOU concerning coordination and provision of services to children and families. Also, there is a current MOU between the Federal Nevada Rural Housing Authority and the DCFS for targeting youth who have left foster care and lack available housing. Additionally, and as previously stated, the DCFS has executed a MOU and protocols for the social workers to implement the placement of children onto tribal land with the Yerington Paiute Tribe in 2012, which remains in effect. A series of meetings with Tribal leadership and the DCFS have occurred and continue to occur to establish a Memorandum of Understanding with the Tribes. The DCFS has executed a Memorandum of Understanding (MOU) and protocol for the social worker to implement the placement of children onto tribal land with the Elko Band Council, Fort McDermitt and Paiute-Shoshone Tribe. The DCFS is in the initial process of finalizing MOUs with Fort McDermitt Paiute-Shoshone Tribe, Yomba Shoshone Tribe, and the Washoe Tribe of Nevada and California for specific children to be placed on tribal lands and in accordance with ICWA placement preference, ICWA 25 U.S.C. §§ 1915 and NRS 432B.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 113.

How well is the agency responsiveness to the community system functioning statewide to ensure that the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population?

Please provide relevant quantitative/qualitative data or information that show the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population.

State Response: Nevada has determined this item to be a strength. The State of Nevada has a functioning 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
- 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.

Additionally, there are many other partnerships with other Departments, Agencies and or entities who receive federal funding and specific examples of those partnerships include the following:

Court Advocacy

The DHHS/DCFS coordinates with the U.S. Department of Health and Human Services/Children's Bureau and the Administrative Office of the Court (AOC). Federal funding received by the AOC for the CIP encompasses a myriad of activities at the state and local level with the primary purpose to assess and improve court processes related to child abuse and neglect and to ensure improved safety, permanence, and well-being for children. Nevada's Court Improvement Program emphasizes and supports children's right to protection from abuse and neglect. This partnership and coordination enable the court and child welfare agencies involved in the child welfare system to develop systemic, statewide changes to significantly improve the handling of child welfare cases while ensuring compliance with state and federal laws regarding child dependency and child welfare matters.

Foster Care Placement

The DHHS/DCFS coordinates placement services with the U.S Department of the Interior/Bureau of Indian Affairs (BIA) and other tribal entities in Nevada. The Bureau of Indian Affairs (BIA) has social workers who work in partnership with the State regarding issues with Nevada Tribes. A representative from the BIA participates in bi-monthly statewide meetings with DCFS for coordination of services.

Advocacy Assistance

The U.S. Department of Justice (DOJ) has supported Court Appointed Special Advocates CASA advocacy since 1985 through its Office of Juvenile Justice and Delinquency Prevention (OJJDP). A CASA worker is a resource for all children placed out of home with a referral from the DCFS services worker, and approval by the courts, in all jurisdictions. Through this collaboration the statewide CASA program serves children and youth in foster care.

Child Support Assistance

The U.S. Office of Child Support Enforcement Program (OCSE) was established in 1975 as Title IV, Part D of the Social Security Act. The program is a federal, state and local intergovernmental collaboration functioning in Nevada. The program goals are to ensure children have the financial and medical support of both their parents; to foster responsible behavior towards children; and to emphasize children need to have both parents involved in their lives. DCFS coordinates services child welfare workers assist families through the paternity and child support process by referral to the child support office to secure needed funds for children. All three of the jurisdictions have various child support offices throughout their areas to assist clients close to home.

Financial Assistance

Through collaboration with the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Family Assistance the Nevada Department of Health and Human Services/Division of Welfare and Supportive

Services Assistance administers The Temporary Assistance for Needy Families (TANF). TANF is designed to provide Temporary Assistance for Needy Families to care for dependent children in their own homes or in the homes of relative care-givers. provides cash payments for children only. This is a cash payment provided to meet an out of home child's basic needs such as food, clothing, shelter, transportation, and other supportive services. Additionally, this is offered to relatives caring for relative children and without a time limit on how long this money can be collected to support their relative children. Kinship Care is TANF monies that are provided when relative caregivers meet the eligibility requirements. DCFS informs relatives of the Kinship Care program, requirements, and assist in the application process. Kinship Care payments are provided to relatives that meet the criteria of being over the age of 62 years, be a non-parent, non-needy relative caregiver, be caring for and residing with a child who is related by blood, adoption or marriage for at least six (6) months, file for and obtain Nevada court approval of legal guardianship, comply with court-imposed requirements, along with the relative must have any combined income below 275% federal poverty level. The children must meet the eligibility requirements for TANF. DCFS coordinates with the federal Social Security Administration regarding benefits for a child under the placement and care of DCFS in all jurisdictions who may benefit from the Social Security Act (SSA) or Supplementary Security Income (SSI).

Educational Support

In the Legislative Act of AB-491, the State of Nevada has partnered and collaborates with the Department of Education and local education agencies to keep foster youth, or children placed out of home, in the same school district from which they were removed. Memorandums of Understanding between Local Education Agencies and the child welfare agencies by which the Local Education Agencies pay half of the cost of transportation and the child welfare agency pays half of the transportation costs out of Title IV-E funds or another funding source. This allows children placed out of their home to remain in the same school district and retain those important connections.

Additionally, in collaboration with the Department of Education, referrals are provided to Nevada Early Intervention Services (NEIS) to provide services to children from birth to age 3 for a free evaluation and services if the family qualifies. To ease transportation issues for families, these services are provided to the child in their day time natural environment. For children over the age of three years, referrals are made to the school district of residence to provide Early On services to those that qualify for services.

Housing Assistance

In coordination with Nevada Housing Division (NHD), which is partially funded by the U.S. Department of Housing and Urban Develop (HUD), DCFS informs clients of child welfare to the Housing Division for their multiple programs. NHD, a division of the Department for Business and Industry, was created by the Nevada Legislature in 1975 when it was recognized a shortage of safe decent, and sanitary housing existed throughout the State for persons and families of low- and moderate income. NHD offers a housing locator in response to Nevada Statute, NRS 319.143, which requires the Division 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. They also offer emergency solutions through grants such as rapid rehousing and homeless prevention, weatherization assistance for child welfare families who have need in this area, as well as multiple homebuyer programs for child welfare families who qualify.

Medical Assistance

The State of Nevada Health and Human Services/ Division of Health Care Financing and Policy coordinates with the U.S. Department of Health and Human Services as it relates to provision of Medicaid for Children and Families served by child welfare. DCFS coordinates eligibility with the Nevada Division of Public and Behavioral Health (DPBH). This allows the Division of Child and Family Services to administrator a federally approved acute care Medicaid system for children placed in an out of home placed under the legal care and custody of the DCFS. This ensures that all foster children secure their initial medicals, dentals, and vision care as well as ongoing and needed medical care. Under this title XIX umbrella of Medicaid there are many additional services provided to not only foster children but also to the parents as well to ensure their health care and mental health needs are being met. Parents can maintain their Medicaid for six months after removal provided the goal of removed children remains reunification. The parents provide their case service plan to their Medicaid worker so there is coordination of services for the parents. These are some of the services offered through the DPBH:

- o Adolescent Health -Personal Responsibility Education Program
- o Adult Viral Hepatitis Prevention and Control
- o Child and Youth with Special Health Care Needs
- o Comprehensive Cancer
- o Diabetes
- o Early Hearing Detection and Intervention
- o Heart and Stroke Prevention and Control
- o HIV/AIDS Prevention and Surveillance Program

- o Mammography
- o School Health
- o Vaccine for Children Program
- o Women's Health Connection and
- o Worksite Wellness

Mental Health

The Mobile Crisis Response Team (MCRT) funded in part by Medicaid, was created to provide crisis intervention and support to Nevada families dealing with a behavioral or mental health crisis. MCRT supports youth and families of youth under the age of 18 showing signs of behavioral or mental health issues that pose a threat to the child's stability within their home, school or community, including but not limited to:

- o Anger
- o Self-Injury
- o School Problems
- o Suicidal or homicidal thoughts or behavior
- o Extreme parent/child conflict
- o Peer conflict such as bullying
- o Seeing or hearing things
- o Depression/Anxiety

Adoption Resources

The State of Nevada partners with Adoption Exchange which is an affiliate of AdoptUSKids, which is made possible by a grant from the Children's Bureau. The Nevada Office of The Adoption Exchange is dedicated to helping waiting Nevada children. Additionally, they offer assistance to adoptive families by providing resource information, referrals, support, advocacy, and education. The Adoption Exchange is in all three of Nevada's jurisdiction's.

Daycare Assistance to Foster Families and Relative Caregivers

DCFS partners with the Division of Welfare and Supportive Services as the designated lead agency to administer the Child Care and Development Fund (CCDF). The State Office of Early Care and Education is an umbrella agency for programs funded through the federal Child Care Development Block Grants. This provides daycare assistance for foster parents and relative caregivers with children placed with them provided they are working out of the home. To ease the application process for the caregivers, the main requirement is a letter from DCFS placing the child(ren) in the home at initial enrollment. The Department of Agriculture also provides a Child Food Program (CACFP) to assist in meeting the nutritional needs of child welfare families in daycare and school programs.

Domestic Violence Support

Funded under the federal Violence Against Women Act (VAWA) Nevada receives two different types of grants to assist in domestic violence matters, the Prosecutors Violence Against Women Formula Grant Program (STOP) and the Sexual Assault Services Provider Program (SASP). STOP will provide funds to Indian Tribal governments, units of local government, and nonprofit, nongovernmental victim services programs, including those of faith-based and community organizations. This grant requires that activities meet specific federal and state objectives, generally summarized as furthering the development and implementation of effective, victim-centered initiatives and responses, and advocacy programs. These are designed to increase the effectiveness and efficiency for the delivery of services for VAWA-eligible crimes. STOP does require that services to similarly situated male victims in need be provided for under this program. SASP is authorized under the Violence Against Women Act and is the primary funding stream dedicated to the provision of direct intervention and related assistance for victims of sexual assault. The purpose of the SASP Formula Program is to assist states and territories in providing "intervention, advocacy, accompaniment, support services, and related assistance for adult, youth, and child victims of sexual assault, family and household members of such victims, and those collaterally affected by the victimization, except for the perpetrator of such victimization." All three jurisdictions receive this funding with DCFS workers referring to DV services as needed.

Independent Living Support

The DCFS coordinates with the Department of Health and Family Services/the Children's Bureau as it relates to utilization of federal Chafee (CFCIP) funds in Nevada for Independent Living Foster Youth. The required match to CFCIP funds is paid in Nevada out of our Fund to Assist Former Foster Youth (FAFFY) funds. These are state funds collected from marriage licenses. The state of Nevada sub-grants out of CFCIP to provide independent living services and services to aged-out foster youth:

- Clark County Department of Family Services (who subcontracts to an organization called Step Up to serve youth in Clark County).
- Washoe County Human Services Agency (who subcontracts to the Children's Cabinet)
 - o Children's Cabinet – Provides the ETV program on behalf of the entire state of NV
 - o Children's Cabinet – To provide contracted case management and IL services for youth 16+ with an APPLA-permanency plan in the jurisdiction of Washoe County, and IL service provision to all dual-adjudicated youth in the juvenile justice system.
- Fallon Paiute Shoshone Tribe – Provides IL services on behalf of every ICWA designated youth in any federally recognized tribe in Nevada.
- Ron Wood Family Resource Center – Provides IL services for DCFS-Rural in the following counties: Carson City, Douglas, Churchill, Lyon, Lander, Pershing, Humboldt, Elko, Eureka.
- Nevada Outreach and Training Organization – Provides IL services for DCFS-Rural in the following counties: Pahrump, Nye, Esmeralda, Lincoln and White Pine.

Nutritional Assistance

The Nevada Department of Health and Human Services/Division of Public and Behavioral Health coordinates funding through grants for the supplemental nutrition program that services income eligible pregnant, postpartum and breastfeeding women, infants, and children (WIC) up to age five who are at nutritional risk. WIC is available throughout the State. WIC also provides nutritional education, breastfeeding support, community referrals, and health screenings including immunizations. WIC is available to families with in home services as well as for foster children in their foster home placement.

In another addition to the partnership with the Department of Education as well as the Department of Agriculture, all foster youth, or youth placed out of home meet the federal requirements of free breakfast (SBP) and lunches (NSLP) while in school, and free food programming in the summer months (SFSP) school is not in session. The National School Lunch Program provides nutritious lunches and the opportunity to practice skills learned in classroom nutrition education, as well as free School Breakfast Programs to promote active learning and after school snacks to support nutritional needs.

Food commodity programs, funded by the Department of Agriculture, are provided to the State of Nevada to assist DCFS child welfare clients with nutritional needs. This information is provided by DCFS to child welfare clients and families to meet their nutritional needs. By law, the United States Department of Agriculture's Food and Nutrition Service acquires agricultural commodities through price support programs, surplus removal, and direct purchases from domestic markets. These commodities are distributed through the USDA, Food Distribution Program to improve the nutritional status of children and adults and to assist and strengthen the American Agricultural market. In Nevada, the Food Distribution Program (FDP) is administered by the Department of Agriculture, Food and Nutrition Division. The Nevada FDP provides administrative support, storage and transportation for the distribution of commodity foods to recipient agencies and programs. The Nevada FDP administers the commodity assistance programs according to USDA regulations and state policies with recipients meeting state and federal guidelines.

- The Emergency Food Assistance Program (TEFAP) provides non-profit distribution sites with commodities for distribution to low-income families. Recipients must meet state and federal guidelines.
- Food Distribution Program on Indian Reservation (FDPIR) provides commodity foods to low-income and elderly households and is an alternative to the Food Stamp Program due if a household does not have transportation or easy access to food stores.
- The purpose of the Nevada Supplemental Nutrition Assistance Program (SNAP) is to provide the means to increase food purchasing power to raise the nutritional level among low-income households. The program is often the first line of defense against hunger for many Nevada families.
- The purpose of the Farmers Market Promotion Program (FMPP) is to increase domestic consumption of, and access to, locally and regionally produced agricultural products, and to develop new market opportunities for farm and ranch operations serving local markets by developing, improving, expanding, and providing outreach, training, and technical assistance to, or assisting in the development, improvement, and expansion of, domestic farmers markets, roadside stands, community-supported agriculture programs, agritourism activities, and other direct producer-to-consumer market opportunities of which DCFS can purchase with their SNAP benefits.
- SNAP benefits are available to income eligible DCFS families that meet the federal and state requirements to assist in meeting the family's nutritional needs.

Parenting Education

In coordination with the U.S. Department of Health and Human Services Nevada receives the Community Based Child Abuse Prevention (CBCAP) funds which are utilized to provide parenting education to families that would benefit from this

education. Parenting education is provided by a variety of organizations throughout the state to meet the needs of the parents.

- o Advocates to End Domestic Violence
- o Nevada Institute for Children’s Research and Policy
- o Boys and Girls Club of Truckee Meadows
- o Boys Town Nevada
- o The Children’s Cabinet, Inc.
- o East Valley Family Services
- o Family Resource Centers of Northeastern Nevada
- o Family to Family Connection -ISD9
- o The Rape Crisis Center – Child Assault Prevention
- o Ron Wood Family Resource Center
- o The Salvations Army Clark County
- o Saint Rose Dominican Hospital
- o Washoe County School District Family Resource Center

Transition to Stability and Self-Sufficiency

Additionally, coordination of the Community Services Block Grant (CSBG) with the U.S. Department of Health and Human Services allows Nevada to provide of range of social services to Nevada’s low-income population throughout each jurisdiction. Programs, services, and basic needs are met for each family that income qualifies. Services range from car seats, pack n plays, mentoring, clothing, backpacks for school age children, and Angel Tree Christmas gifts for Children. Clients are informed of and provided referrals to the Nevada Community Action Network as needed.

General Information

Nevada 211 – The Fund for Healthy Nevada provided funds, in 2017, for administrative resources and to develop a strategic plan which includes activities to diversify funding. Nevada 211 is available in all jurisdictions and provides information and connects citizens to recourses’ they may need for their families.

In summary, the Nevada Department of Health and Human Services/Division of Child and Family Services partners to ensure that the state’s services under the CFSP are coordinated with services and benefits of other federal or federally-assisted program serving the same population.

Juvenile Justice

Nevada continues to have an on-going collaborative partnership with Juvenile Justice Services in efforts to serve cross-over youth. Cross-over youth are under the jurisdiction of the dependency (child welfare) system, placed in out-of-home care, and who come to the attention of the juvenile justice system. Juvenile Justice Staff must ensure these youth receive the same services and benefits. Positive strides have been taken with respect to the SACWIS system and the regulations set forth by AFCARS and the NYTD Independent Living Programs for all dually served youth.

Table 6.14

Juvenile Justice Transfers

AGE	MALE	FEMALE	Total #Committed
14	4	2	6
15	7	1	8
16	5	4	9
17	4	5	9
18	8	6	14
TOTAL	28	18	46

Source: UNITY Report CFS748 SFY 2017 (7/1/2017 to 5/31/2018)

Table 6.14 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.

Systemic Factor G: Foster and Adoptive Home Licensing, Approval and Recruitment

Item 33: Standards applied equally

Requirements:

Requirements:

The Division of Child and Family Services monitors compliance with rural foster home licensing regulations of foster homes through, at minimum, the annual licensing home inspection. In addition, compliance may be verified statewide through a variety of other means; single agency audits, federal reviews, state CFSR reviews and through the child welfare agency caseworker's monthly foster home visits, home inspections, license renewal and investigations of complaints or concerns relating to the operation of foster homes. Complaints that involve the health or safety of a child are investigated immediately. All other complaints are investigated within 10 working days.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 119.

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds?

Please provide relevant quantitative/qualitative data or information that show the state's standards are applied equally to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds.

State Response:

Nevada has determined this item to be an area needing improvement. Nevada's child welfare agencies are not systematically tracking the specific reasons for using waivers of licensing standards for foster homes, especially for non-relative foster homes licensed through the use of a waiver. Currently, issuing a waiver to license a foster home in Nevada is a process that requires multiple levels of oversight, both through management and administration. For a waiver to be issued, it requires the initial approval through the licensing worker's supervisor, who then moves it up the chain of command to the child welfare agency's director, who then submits it for final approval or denial by the DCFS Administrator. At any level within the chain of command, the waiver can be denied, which would stop the process. This process does ensure that many eyes see and agree with the use of the waiver, prior to it being ultimately approved or denied by the DCFS Administrator. Until recently, tracking the reasons for licensing waivers had not been determined necessary. During the most recent APSR finalization, DCFS was unable to answer the Children's Bureau's questions concerning the specific reason for the waivers; DCFS has only recently initiated a new process for tracking waivers. Nevada will be unable to provide specific reasons for waivers until enough time has passed to capture enough needed data.

PLAN: After the recent APSR final submission, the DCFS Family Programs Office (FPO) has requested that all future waiver requests approved by the DCFS Administrator be copied and forwarded to FPO specifically for tracking waiver exceptions for internal data purposes and certain external reporting.

Applying Standards Equally:

The Division of Child and Family Services is responsible for the receipt and distribution of federal IV-E or IV-B funds in the State of Nevada. It is a statutory duty of the DCFS to administer monies granted by the Federal government under title IV-E or IV-B.

The Division of Child and Family Services monitors compliance with rural foster home licensing regulations of foster homes through, at minimum, the annual licensing home inspection. In addition, compliance may be verified statewide through a variety of other means; single agency audits, federal reviews, state CFSR reviews and through the child welfare agency caseworker's monthly foster home visits, home inspections, license renewal and investigations of complaints or concerns relating to the operation of foster homes. Complaints that involve the health or safety of a child are investigated immediately. All other complaints are investigated within 10 working days.

The most recent Nevada Title IV-E Foster Care Eligibility Review was conducted by ACF in April 2017. The Children's Bureau reviewed 80 foster care cases. Of those cases, two had ineligible findings; one for child being placed in a non-licensed placement for which the state claimed one (1) day of maintenance costs and the other for a waiver of licensing requirements by a non-relative provider. The report did not identify the reason for the waiver. No other concerns were identified in the IV-E Foster Care Eligibility Report for these 80 cases regarding foster care placements.

At the end of June 2017, DCFS submitted the recently adopted NAC 424 revised regulations to the Nevada Legislative Counsel Bureau (LCB) for submission to the Legislative Commission for approval. On September 21, 2017, the Legislative Commission approved the NAC 424 Regulations. The changes that were made to NAC 424 responded to Federal and State laws enacted since these regulations were last revised and to update any outdated regulations through deletions and/or updating language to support current practices. The LCB is still in process of codifying these enacted revisions and once this is accomplished, LCB will post the updated regulation to the Nevada Administrative Code website. Until this is accomplished, a "NAC 424 Working Document" is posted on the DCFS website to allow those governed by these revised regulations to have access to the enacted revisions.

In July 2017, DCFS initiated a new NAC 424 Regulations workgroup to address recent Nevada legislation, enacted in the 2017 Legislative Session, which requires regulations to be developed to ensure that the rights and needs of LGBTQ custody youth are being addressed and met. This workgroup is currently working to draft the required language to address the needs of this population of youth within the foster care system.

All three child welfare agencies can use waivers. However, all waivers must receive prior approval of the DCFS Administrator to be valid, regardless of jurisdiction. Waivers are used to waive foster care licensing standards within NAC 424 – Foster Homes for Children. In the past year, there have been a small percentage of foster homes that have been licensed using a waiver of licensing standards. Prior to providing waiver approval, the child welfare agency's administration will consider whether the use of a waiver supports the safety, wellbeing and best interests of the child. Over the past few years, Nevada's child welfare agencies have significantly reduced their use of waivers; now, waivers are primarily being used for relative foster homes to waive non-safety licensing standards. The jurisdictions understand that a waiver for a non-relative foster home disqualifies a home for federal reimbursement through IV-E maintenance costs. Additionally, all jurisdictions are aware that only relative non-safety waivers are IV-E eligible and can receive federal reimbursement.

Waivers are determined on an individual basis due to the specific circumstance being waived as to whether it is considered a non-safety waiver or not. Currently, Nevada does not have a specific list or process for what can be waived as a non-safety waiver.

Nevada "Child Care Institutions" (defined: congregate care/institutional-like settings that provide residential care for 16 or more children; are licensed through the Nevada Division of Public and Behavioral Health (DPBH)) to provide emergency shelter care or other residential care for children within Nevada's child welfare custody. These facilities are not group foster homes, which are regulated and licensed through the child welfare agencies. The very few Nevada child care Institutions are regulated and monitored for compliance through the Nevada Division of Public and Behavioral Health's; Health Care Quality and Compliance Unit; Child Care Licensing, in accordance with Nevada Revised Statutes (NRS) and Nevada Administrative Codes (NAC), CHAPTER 432A - SERVICES AND FACILITIES FOR CARE OF CHILDREN, which only govern child care facilities and not foster homes.

These statutes and regulations for child care facilities are utilized in inspections and investigations conducted on licensed child care institutions to ensure equitability and consistency statewide. Inspections are done prior to licensure and then twice a year (semi-annual and annual) for each facility according to their unique licensing year.

DCFS ensures through DPBH that any Nevada child care institution that receives IV-E funding for the care of a foster child has a current, valid Child Care License issued through DPBH. DPBH ensures through the actual licensing process that all Child Care licenses and renewals meet the requirements identified within NRS 432A and NAC 432A.

Child Care Institution employees must meet the same criminal background and CANS clearances as foster caregivers. If a facility is identified as not being in compliance with NRS/NAC 432A after its initial licensing, the facility license can be reduced to provisional, be suspended and/or be revoked, depending on the specific circumstances of noncompliance by the facility.

Statewide Data (FFY 2017):

SACWIS Licensing Waiver Report

Statewide licensing data obtained through the Nevada SACWIS for Oct. 1, 2016 – Sept. 30, 2017 indicates that 8.5% out of 717 foster homes were approved statewide with a waiver of licensing standards. Of the 61 waivers for this review period, 45 were for relative foster homes. Nevada’s data reporting system is currently unable to collect information on the specific types of licensing standard exception for the approved waivers for non-relative foster homes.

- CCDFS had a total of 53 waivers for FFY17, including 13 (24.5%) non-relative and 40 (75.5%) relative homes.
- WCHSA had a total of 7 waivers for FFY17, including 2 (28.6%) non-relative and 5 (71.4%) relative homes.
- Rural Region had a total of 1 waiver for FFY17, which was for a non-relative home.

Nevada Division of Public and Behavioral Health (DPBH) Child Care Institution - Licensing Waiver Report

There are four (4) child care institutions throughout Nevada used by child welfare agencies to provide temporary housing either for shelter care or treatment care for children within the foster care system. These institutions are licensed through a completely different entity, the State of Nevada Division of Public and Behavioral Health (DPBH) Child Care Licensing, which is an agency separate from Nevada’s child welfare agencies. DPBH licenses and oversees child care, which includes these four child care institutions. DPBH provided data for the time, Oct 1, 2016 to Sept. 30, 2017 for these four institutions. 100% of these institutions were issued standard licenses with no exceptions or waivers.

Item 34: Requirements for criminal background checks

Requirements

NRS 424.031 states that the licensing authority shall obtain background and personal history for each applicant applying for a foster care license and all prospective employees of that applicant and residents of the foster home who are age 18 years of age or older, other than a resident (age 18 up to age 21) who remains under the jurisdiction of a court pursuant to NRS 432B.594, in order to determine whether the person investigated has been arrested for or convicted of any crime. Full fingerprint criminal background checks must also occur at least every 5 years after the initial investigation. NRS 424.039 states that the licensing authority is authorized to conduct preliminary Federal Bureau of Investigations name-based background checks on adult residents of foster homes in which a child will be placed in an emergency. The person investigated is to supply fingerprints for further investigation.

NAC 424.680 deals with criminal history verification for anyone employed as staff or a director of a group treatment home or anyone applying to be a foster parent. Nevada law requires child welfare agencies to ensure that criminal history investigations are conducted pursuant to requirements under NAC 424 and NAC 127. In addition, the state has approved policy 0515.0 Child Abuse and Neglect (CANS) and NCID Requirements for Prospective Foster and Adoptive Parents in response to the Adam Walsh Act of 2006 and sets forth procedures for conducting and responding to CANS checks; conducting and establishing statewide standards for authorizing placement of children with caregivers who have undergone an NCID and CANS check. No foster home or adoption applicant is issued a foster home license until all criminal background checks have been completed.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 122.

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that the state complies with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements, and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children?

Please provide relevant quantitative/qualitative data or information that show the state is complying with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children.

State Response:

Nevada has determined this item to be a strength. Nevada complies with federal and state law regarding criminal and CANS background checks for all licensed and/or unlicensed foster caregivers.

Criminal Background Checks Requirements:

Nevada child welfare agencies utilize a single process for licensing both foster and adoptive homes. In our SACWIS, pre-adoptive homes are tracked as foster homes.

NRS 424.031 states that the licensing authority shall obtain background and personal history for each applicant applying for a foster care license and all prospective employees of that applicant and residents of the foster home who are age 18 years of age or older, other than a resident (age 18 up to age 21) who remains under the jurisdiction of a court pursuant to NRS 432B.594, to determine whether the person investigated has been arrested for or convicted of any crime. Full fingerprint criminal background checks must also occur at least every 5 years after the initial investigation. NRS 424.039 states that the licensing authority is authorized to conduct preliminary Federal Bureau of Investigations name-based background checks on adult residents of foster homes in which a child will be placed in an emergency. The person investigated is to supply fingerprints for further investigation. NAC 424.680 deals with criminal history verification for anyone employed as staff or a director of a group treatment home or anyone applying to be a foster parent. Nevada law requires child welfare agencies to ensure that criminal history investigations are conducted pursuant to requirements under NAC 424 and NAC 127. In addition, the state has approved policy 0515.0 Child Abuse and Neglect (CANS) and NCID Requirements for Prospective Foster and Adoptive Parents in response to the Adam Walsh Act of 2006 and sets forth procedures for conducting and responding to CANS checks; conducting and establishing statewide standards for authorizing placement of children with caregivers who have undergone an NCID and CANS check. No foster home or adoption applicant is issued a foster home license until all criminal background checks have been completed.

Statewide Data (FFY 2017):

- In April 2017, ACF conducted a statewide Title IV-E eligibility review of Nevada's foster care system. ACF reviewed 80 foster care cases. Of these 80 cases there were no error findings regarding foster caregiver criminal background checks.
- DCFS compliance reviews were conducted based upon the quarterly review of criminal background check results being entered into the SACWIS system prior to the date of licensure. Quarters were divided to maintain 12 months of data for this report (Quarter 1 starts Oct. 1, 2016, and Quarter 4 ends Sept. 30, 2017). The process for foster and adoptive home licensure have a single process, therefore statistic for each category cannot be broken out separately, pre-adoptive homes are tracked as foster homes.

Table 34.1

Percentage in compliance and count of reviews: Oct. 1, 2016 – Sept. 30, 2017.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Annual
Clark	100% (N=8)	100% (N=8)	90%* (N=10)	100% (N=9)	97% (N=35)
Washoe	100% (N=4)	100% (N=4)	100% (N=5)	100% (N=5)	100% (N=18)
Rural	100% (N=4)	100% (N=4)	100% (N=5)	100% (N=5)	100% (N=18)
Statewide	100% (N=16)	100% (N=16)	95% (N=20)	100% (N=19)	99% (N=71)

Note: Sampling methodology provided below.

* License effective on 4/1/17; background check cleared on 4/19/17

Foster Home Case/Safety Plans: Nevada does not utilize safety or case plans to address safety concerns identified in foster homes. When an applicant for a foster license is determined to have safety issues in their home that would place a child at risk, Nevada’s child welfare agencies will not issue a license for that home. When a safety concern is identified after a home is licensed to provide foster care, the licensing authority will address this directly with the foster/adoptive caregiver to determine a solution and provide them an opportunity in a time limited, corrective action plan to resolve the issue(s). If a child’s safety is at eminent risk, the child will be removed until such time that the child safety is assured.

Sampling and Data Collection for Systemic Factor #34: requirements for criminal background checks

General Sampling Parameters: On a quarterly basis, 10% of newly licensed foster homes licensed during the quarter under review will be reviewed for compliance with the requirement for criminal background checks as part of the foster home licensing process. Note: due to variations in the number of newly licensed foster homes per quarter, the number of new homes reviewed will vary from quarter to quarter. No fewer than 10 and no greater than 20 newly licensed foster homes per quarter will be reviewed. The ratio of cases reviewed will be 50% Clark County, 25% Washoe County, and 25% DCFS Rural Region. This ratio was chosen as it reflects the same ratio of QICR cases reviewed annually in the state’s QICR review process.

Sampling Timetable: Data was collected from UNITY for the period of Oct. 1, 2016 to Sept. 30, 2017 to provide four equal periods for comparison for this review. The first quarter included Oct 1, 2016 through Dec. 31, 2016; quarter 2 included Jan. 1, 2017 through March 30, 2017; quarter 3 included Apr. 1, 2017 through June 30, 2017; and, quarter 4 included July 1, 2017 through Sept. 30, 2017.

Sampling Process: Data was pulled from UNITY for the period under review outlined above for each jurisdiction. Random numbers were applied to the results and these were ranked according to randomization. The final step was to select a 10% state wide sample, with 50% of that sample represented by Clark County, 25% represented by Washoe County, and 25% represented by DCFS Rural Region. Statewide annual and quarterly figures for newly licensed foster homes were reported.

Data Collection: The following aggregate data elements were collected from the three jurisdictions for each newly licensed home identified in the sample:

- Date the completed foster home application was received by the licensing agency
- Date the criminal records check was submitted
- Date the agency received back clearance results
- Effective date of the license

Compliance with the standard in this instance will be date of agency receipt of clearing occurring prior to or on the same day as the effective date of the license. Percentage (and number) of cases compliant with the standard will be reported by jurisdiction and statewide, reporting quarterly and annual totals. This data will be reported quarterly and annually, by jurisdiction and statewide.

Item 35: Diligent recruitment of foster and adoptive homes

Requirements:

The Multi-Ethnic Placement Act of 1994 (P.L. 103-382) was amended in 1997 by the Removal of Barriers to Interethnic Adoption (P.L. 104-188) which requires diligent recruitment of Foster and Adoptive Homes. This act established a new Title IV-E state plan requirement that prohibits states or private agencies that receive federal funds from delaying placement on the basis of race, color, or national origin of the child or the foster or adoptive parent. NRS 127.010-NRS 127.1895 governs the adoption of children. NRS 424.010-424.220 governs the licensing of foster homes.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 124.

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that 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 for whom foster and adoptive homes are needed is occurring statewide?

Please provide relevant quantitative/qualitative data or information that show the state's process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide.

State Response:

Nevada has determined this to be an area needing improvement based upon a lack of consistency between the jurisdictions in assessing the demographic data of its resource families or quantifiable data which in which to determine that this is consistently occurring with all jurisdictions. There is AFCARS data (Table 6.15) that indicates the current statewide breakdown and the following table is by jurisdiction.

How do you know the whether the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide?

The State lacks a process or overarching diligent recruitment plan that would reflect the ethnic and racial diversity of its foster and adoptive homes to compare with the diversity of children in care per jurisdiction. The data that is available through AFCARS in the table below is the closest reflection of the diversity of Nevada recruitment efforts for the current foster adoptive homes that are licensed and the children in care statewide. Currently each jurisdiction has an individual plan for their respective area and all function independently without measurable outcomes and doesn't utilize the AFCARS data which impacts the ability to analyze population changes and analyze trends.

PLAN: There is a scheduled bimonthly meeting with all jurisdictions to develop a statewide plan for Diligent Recruitment of Foster and Adoptive Homes with measurable goals. These goals would provide data on the effectiveness of each strategy and the ability to adjust its targeted goals, population changes and analyze trends.

Statewide Data:

Table 35.1

**Foster Population Racial and Ethnic Makeup
October 1, 2016 – September 30, 2017**

Statewide	American Indian	Asian	Black	NHPI	White	Unknown	Hispanic (Yes)	Hispanic (NO)	Hispanic (UNK)
Children	1.8% 106	1.2% 71	28.8% 1,718	1.2% 71	61.6% 3,682	5.4% 325	24.0% 1,434	61.1% 3,652	14.9% 887
Foster Parents	1.0% 66	3.2% 212	22.6% 1,505	1.5% 99	67.0% 4,466	4.8% 319	18.7% 1,247	73.2% 4,883	8.1% 537

Note: methodology for race classification for this study was based on the Deterministic Fractional Assignment model as defined in the 2001 Bridge Report from the Office of Management and Budget¹⁸.

Table 35.2

**Foster Population Racial and Ethnic Makeup by Jurisdiction
October 1, 2016 – September 30, 2017**

Clark County	American Indian	Asian	Black	NHPI	White	Unknown	Hispanic (Yes)	Hispanic (NO)	Hispanic (UNK)
Children	1.1% 60	2.0% 113	40.5% 2249	1.6% 87	60.3% 3350	8.3% 459	25.0% 1388	57.7% 3202	17.4% 964
Foster Parents	0.8% 47	4.6% 285	29.3% 1803	2.3% 142	62.8% 3864	3.0% 186	21.2% 1305	74.3% 4572	4.5% 275
Washoe County	American Indian	Asian	Black	NHPI	White	Unknown	Hispanic (Yes)	Hispanic (NO)	Hispanic (UNK)
Children	4.9% 70	1.0% 15	14.0% 200	2.2% 31	86.0% 1230	9.5% 136	24.5% 351	63.9% 914	11.5% 165
Foster Parents	1.4% 23	2.3% 38	7.7% 129	1.6% 26	78.0% 1307	13.5% 227	20.6% 345	60.9% 1021	18.5% 310
Rural Counties	American Indian	Asian	Black	NHPI	White	Unknown	Hispanic (Yes)	Hispanic (NO)	Hispanic (UNK)
Children	7.3% 48	0.9% 6	7.6% 50	1.2% 8	87.5% 574	10.4% 68	13.0% 85	72.9% 478	14.2% 93
Foster Parents	2.6% 21	0.4% 3	0.9% 7	0.4% 3	90.2% 730	6.9% 56	8.2% 66	81.5% 659	10.4% 84

Explanation for methodology: For individuals who reported more than one race, the all-inclusive method was used, which means that the counts provided are counts of self-reported racial identities. This approach helped to ensure that no race was underrepresented in the proportion calculations, represented here as percentage values. Explanation for not summing to 100%:

¹⁸ Adapted from Hill Collins, P., & Solomos, J. (2010). The SAGE Handbook of Race and Ethnic Studies. SAGE Publications. 81-83.

While the percentage values do sum to 100% for the category of ethnicity, this value may not add up to 100% at the single decimal level due to the effect of rounding.

Over SFY 2018, Nevada will provide this breakdown jurisdictional data as a basis for continuing assessment in their diligent recruitment efforts.

Can you provide context that helps us understand the scope and/or limitations of the referenced data and/or information in terms of how well the federal requirement functions statewide (e.g. timeframes, geographic representation, size of study, data collection process, relevance of data to assess functioning of requirement)?

Racial and ethnic information is both collected from AFCARS and through responses by the three child welfare agencies; Clark County Department of Family Services (CCDFS), Washoe County Human Services Agency (WCHSA), Division of Child and Family Services (DCFS).

The CCDFS has the largest and most diverse population, being the largest urban area in Nevada. They use a market segmentation approach within diverse community locations, which are reflective of the children in child welfare custody. Through a prior CCDFS recruitment grant, analysis was done by Annie E. Casey Foundation that identified the market segmentation approach as a strategy that is effective in meeting the racial and ethnic needs of CCDFS child demographics as well as targeted populations, i.e. teens, sibling groups, medically fragile and minority homes.

The WCHSA targets recruitment within the same local neighborhoods/communities where children originally came into child welfare custody. Additionally, the WCHSA targets specific schools, community organizations, and local religious entities, along with Spanish language radio advertising and distribution of Spanish-language brochures and posters to assist with their recruitment efforts to meet the racial and ethnic needs of the children. WCHSA provides a child specific recruiter to work with the child or children's caseworker to develop strategies for both stability and permanency. These strategies can include but are not limited to: Northern Nevada Adoption List to alert adoptive families when children enter into recruitment, a dedicated adoption hotline and email address, placement on AdoptUSKids, the Forgotten Initiative and the county website.

In the DCFS Rural Region, diligent recruitment is often based upon targeting the specific zip codes and schools where children have been removed. The DCFS Rural Region also contracts with a representative of The Forgotten Initiative Nevada (TFI) to make personal contact with many churches within the Rural Region. Efforts are also made by the DCFS to engage other religious entities and ethnic communities within the Rural Region.

What are the barriers that specifically affect the state's ability to ensure that the diligent recruitment of foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide?

There is a lack of cohesive statewide recruitment strategy and/or data sharing outreach to the jurisdictions from the state level. Currently, each jurisdiction has developed their own separate recruitment plan, frequently basing it on targeting, or mapping out, zip codes. Additionally, there is a lack of actual data collection to determine which recruitment goals and strategies are being successful and which are not, making it difficult to provide accurate analysis of effective strategies being employed within each individual jurisdiction's recruitment plan.

Additional comments heard from stakeholders that while recruitment does occur ongoing at the local level, but retention efforts are still lacking and problematic, many stakeholders cited high caseloads of the caseworkers, feeling intimidated by all the requirements to become licensed, and struggles with understanding and supporting child reunification efforts.

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

Requirements:

The State follows the federal requirements in accordance with P.L. 109-239, P.L. 109-248, 42 U.S.C. 670-679(b), the statutory requirements captured in NRS 127.330, NRS 432B.435, NRS 424.033 and the regulatory requirements in NAC 127.235. In addition to federal and state laws, the State's Interstate Compact for the Placement of Children (ICPC) Central Office also has a 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.

Per ACYF-CB-PI-18-01 issued March 5, 2018 (page 5), Nevada is providing information on this item from Nevada's 2018 Statewide Assessment starting on pg. 127.

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

Please provide relevant quantitative/qualitative data or information that show the state's process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide.

Please include quantitative data that specify what percentage of all home studies received from another state to facilitate a permanent foster or adoptive care placement is completed within 60 days.

State Response:

Nevada has determined this item to be a strength. Nevada has continued to utilize cross jurisdictional resources to find and facilitate permanency for children statewide. Adoption Exchange in conjunction with AdoptUSKids to provide recruitment, matching services, information, education and training for adoptive and permanent placements for Nevada's children. The state specifically contracts with Adoption Exchange for the following services to increase the quality and efficiency of responses to inquiries by potential families:

- Provides general adoption information and child specific inquiries from prospective families and post adoptive resources within Nevada.
- Monthly webinars for pre-adoptive families
- Reverse matching
- Create narratives and post profiles on the Children's Gallery, Nevada Heart Gallery, Wednesday's Child

In Nevada, all jurisdictions utilize these services to find permanency for children in waiting for a forever home. The data below indicates that ICPC continues to be utilized from a variety sources seeking permanency for children. Additional permanency is utilized through stabilization with advanced foster care and use of residential facilities when required to help the children reach the necessary behavioral outcomes to reach placement in permanency.

The table below provides placement numbers, both incoming and outgoing, which have remained consistent over the years. The below numbers reflect incoming and outgoing and are taken from the NEICE system. More than one study may be conducted for the same case.

Table 36.1

Total Statewide Annual Incoming Referrals	Total Statewide Annual Outgoing Referrals
474	1624

The tables below show the breakdown by month the number of incoming and outgoing ICPC requests from October 1, 2016 to September 30, 2017 by case, home study request and total children served.

Table 36.2

Total Sending Cases - Oct 1, 2016 to Sep 30, 2017				Total Receiving Cases - Oct 1, 2016 to Sep 30, 2017			
Case type	Month	2016	2017	Case type	Month	2016	2017
Sending	October	85		Receiving	October	44	
Sending	November	70		Receiving	November	42	
Sending	December	78		Receiving	December	50	
Sending	January		69	Receiving	January		45
Sending	February		63	Receiving	February		59
Sending	March		106	Receiving	March		68
Sending	April		63	Receiving	April		50
Sending	May		81	Receiving	May		50
Sending	June		76	Receiving	June		53
Sending	July		86	Receiving	July		58
Sending	August		88	Receiving	August		53
Sending	September		65	Receiving	September		42

Table 36.3

Sending Total Home Studies - Oct 1, 2016 to Sep 30, 2017		
Month	2016	2017
October	117	
November	98	
December	109	
January		104
February		90
March		142
April		86
May		118

Table 36.4

Receiving Total Home Studies - Oct 1, 2016 to Sep 30, 2017		
Month	2016	2017
October	59	
November	60	
December	72	
January		64
February		89
March		93
April		67
May		76

June		102
July		125
August		114
September		93

June		76
July		79
August		82
September		65

Table 36.5

Sending Total Children Processed - Oct 1, 2016 to Sep 30, 2017		
Month	2016	2017
October	109	
November	90	
December	101	
January		93
February		84
March		134
April		86
May		114
June		95
July		117
August		111
September		90

Table 36.6

Receiving Total Children Processed - Oct 1, 2016 to Sep 30, 2017		
Month	2016	2017
October	58	
November	58	
December	71	
January		63
February		89
March		93
April		67
May		76
June		75
July		79
August		82
September		64

- a. What percentage of all home studies received from another state to facilitate a permanent foster or adoptive care placement are completed within 60 days?

Table 36.7

Total Statewide Incoming Home Study Referrals SFY 17 YTD	Total Number of Incoming Home Studies Completed in 60 Days	Statewide Completion percentage in 60 Days*
585	234	48.8%*

During SFY 2017 from July 1, 2016 until June 2, 2017 there were a total of 585 Home Study Request unique cases from other states, and 234 of these Home Studies were completed within 60 days. In order to determine an accurate percentage value for Statewide Completion Percentage in 60 Days, all cases that had 60 days or less as of the data retrieval date of June 2, 2017 were excluded as were cases that were withdrawn or returned to the sending state due to a lack of information (sending states have a time limit for sending additionally requested information). The percentage figure below is based on 206 studies completed within 60 days out of 422 total incoming home study referrals for the adjusted period.

Further breakdown of the data by type as indicated below shows that the highest number of requests are for Regulation 2 home study requests which is also the lowest percentage meeting the 60-day time frame.

Table 36.8

Regulation Type	Case Count
REG 1 – Intact Family Relocation	11
REG 12 - Private Adoption	10
REG 2 – Home Study Request	447
REG 4 – Residential Placement	64
REG 7 – Priority Placement	25
Grand Total	557

Table 36.9

Regulation Type	Case Count
REG 1 – Intact Family Relocation	4
REG 12 - Private Adoption	10
REG 2 – Home Study Request	168
REG 4 – Residential Placement	61
REG 7 – Priority Placement	10
Grand Total	253

Table 36.10

Percentage in Compliance

Regulation Type	Percentage
REG 1 – Intact Family Relocation	36.4%
REG 12 - Private Adoption	100.0%
REG 2 – Home Study Request	37.6%
REG 4 – Residential Placement	95.3%
REG 7 – Priority Placement	40.0%
Grand Total	45.4%

b. What do the current statewide information or data indicate about whether the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children?

Nevada as many states struggles with staffing issues which can impact the ability to complete home studies in the time required by the Safe and Timely Home Act. As the DCFS-Rural Region builds their budget for the next legislative cycle they will continue to request additional licensing positions. CCDFS and WCHSA have dedicated workers completing these requests as quickly as possible and the rural counties utilize their licensing worker or contractors. Many of the home studies not completed within the 60-day time are due to the same reasons foster home licensing is delayed; lack of cooperation/compliance by the prospective caregivers and processing of criminal background checks. All current requests for home studies are requiring the relative or parental placement to complete initial paperwork, have their fingerprinting completed within a specified time frame or the request is denied in order to combat delays that won't allow them to meet the 60-day completion.

1. How do you know whether the referenced data and information are accurate and of good quality?

In August 2014, Nevada was selected as one of six states to pilot the National Electronic Interstate Compact Enterprise (NEICE) project. This is a web-based electronic information exchange for processing ICPC cases and streamlining placement of children across state lines with a goal of decreasing the length of time it takes for children to be placed safely across state lines and reducing administrative costs. This system serves and benefits children, families, public and tribal child welfare agencies and multidisciplinary groups (medical, legal, judicial) that work to facilitate foster care and adoptive

interstate placements nationwide. The pilot was successful and now more than 16 States have begun to utilize the system. Nevada has utilized this system for over three years and since the inclusion of data into the system is maintained by 3 ICPC specialists the data is accurate and of good quality. Additional data was sought from the AFCARS report

2. What are the barriers that specifically effect the state’s ability to ensure the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children to occur statewide?

The DCFS Family Programs Office ICPC unit continues to develop and revise tools, policies and trainings to ensure that all Child Welfare agencies are kept up to date on all requirements. Recognizing that staff turnover often results in critical knowledge of ICPC processes being lost, the ICPC team has provided trainings and in-services as needed to meet the need of the jurisdictions. ICPC staff has participated in CIP calls, all staffs, and Division meetings with jurisdictions to answer questions, review policies and enhance understanding of the ICPC process on a yearly basis.

Intra-State requests while a formalized process with DCFS, CCDFS and WCHSA cooperatively extend reasonable courtesy services to children and families residing in their jurisdictional boundaries. This encourages continual comprehensive case management and is to be re-evaluated every six months. Currently each jurisdiction maintains supervisory oversight of the case through their local worker and ensures that communication is maintained. There is no formalized data collection on the number of Intra-State requests occur annually.

APPENDICES

APPENDIX A: Glossary of Acronyms

AAICPC	Association of Administrators of the Interstate Compact on the Placement of Children
AB	Assembly Bill
AFCARS	Adoption Foster Care Analysis and Reporting System
AI	Adoption Incentive
AIP	Agency Improvement Plan
APHS	American Public Human Services Association
APPLA	Another Planned Permanent Living Arrangement
APSR	Annual Progress & Service Report
ASFA	Adoption and Safe Families Act
ASPR	Annual Services Progress Report
ATC	Adolescent Treatment Center
CANS	Child Abuse and Neglect
CAPTA	Child Abuse Prevention and Treatment Act
CASA	Court Appointed Special Advocate
CBCAP	Community Based Child Abuse Prevention
CCDFS	Clark County Department of Family Services
CCFAPA	Clark County Foster and Adoptive Parent Association
CFCIP	Chafee Foster Care Independence Program
CFSP	Child and Family Service Plan
CFSR	Child and Family Services Review
CFT	Child and Family Team
CIP	Court Improvement Project
CJ	Court Jurisdiction
CJA	Children's Justice Act
CPS	Child Protective Services
CQI	Continuous Quality Improvement
CRP	Citizen Review Panel
CSEC	Commercially Sexually Exploited Children
CTF	Children's Trust Fund
CWS	Child Welfare System
DCFS	Division of Child and Family Services
DCFS-RURAL	Division of Child and Family Services Rural Region
DHHS	Department of Health and Human Services
DHR	Department of Human Resources
DMG	Decision Making Group
DOE	Department of Education
DRS	Differential Response System
EBP	Evidence Based Programs
EIP	Evidence Informed Programs
ETV	Educational Training Voucher
FAFFY	Financial Assistance to Former Foster Youth
FAYYT	Foster and Adopted Youth Together
FCAAN	Foster Care and Adoption Association of Nevada
FPO	Family Programs Office
FRC	Family Resource Center
GMU	Grants Management Unit
HCFAP	Health Care Finance and Policy
ICAMA	Interstate Compact on Adoption and Medical Assistance
ICJ	Interstate Compact for Juveniles
ICPC	Interstate Compact on the Placement of Children
ICWA	Indian Child Welfare Act
IFS	Intensive Family Services
IL	Independent Living

ILA	Independent Living Agreement
ILP	Independent Living Program
ILPS	Independent Living Program Specialist
ILTP	Independent Living Transitional Plan
IMS	Information Management System
IV-B/2	Title IV-B, Subpart 2
IV-E	Title IV-E
JJ Commission	Juvenile Justice Commission
MDT	Multi-Disciplinary Team
MEPA/IEPA	Multi-Ethnic Placement Act/Inter-Ethnic Placement Act
MH	Mental Health
NAC	Nevada Administrative Code
NACo	The National Association of Counties
NCANDS	National Child Abuse and Neglect Data System
NEATS	Nevada Employee Action and Timekeeping System
NEBS	Nevada Executive Budget
NITC	Nevada Inter-Tribal Council
NO	Nevada Outreach
NPT	Nevada Partnership for Training
NRS	Nevada Revised Statutes
NV LIFE	Nevada Life Nevada's Youth Advisory Board
NWD	Nevada Welfare Division
NYEP	Nevada Youth Empowerment Project
NYTC	Nevada Youth Training Center
NYTD	National Youth in Transition Database
ODES	Online Data Entry System
PCFA	Protective Capacity Family Assessment
PCPA	Protective Capacity Progress Assessment
PEP	Parents Encouraging Parents
PIP	Program Improvement Plan
PRIDE	Parent Resources for Information Development and Education
QA	Quality Assurance
QI	Quality Improvement
QICR	Quality Improvement Case Review
RWFRC	Ron Wood Family Resource Center
SACWIS	Statewide Automated Child Welfare Information System
SAFE	Safety Assessment and Family Evaluation
SAFF	Sierra Association of Foster Families
SAMHSA	Substance Abuse Mental Health Services Administration
SAPTA	Substance Abuse Prevention and Treatment Act
SB	Senate Bill
SED	Severe Emotional Disturbance
SOC	System of Care Principles
SOGIE	Sexual Orientation/Gender Identity or Expression
SQIC	Statewide Quality Improvement Committee
SWA	Statewide Assessment
SFY	State Fiscal Year
TANF	Temporary Assistance to Needy Families
TPR	Termination of Parental Rights
UNITY	Unified Nevada Information Technology for Youth
UNLV	University of Nevada, Las Vegas
UNR	University of Nevada, Reno
VOCA	Victims of Crime Act
WCHSA	Washoe County Human Services Agency
WIN	Wrap-Around In Nevada
YAB	Youth Advisory Board

APPENDIX B: CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA) PLAN REPORT

In FY 2011, Nevada submitted a CAPTA state plan that will remain in effect as long as the State continues to participate in the CAPTA State Program grant. Section 108(e) of CAPTA requires annual reporting on the use of the grant via the APSR.

SUBSTANTIVE CHANGES

The Nevada Legislature meets biennially in odd years from February through May. It did not meet in 2018, therefore there have been no substantive changes as a result of the enactment of new or revised statutes.

SELECTED PROGRAM AREAS FY 2019

The selected programs areas are:

- 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)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; and
 - 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.

ACTIVITIES AND USE OF FUNDS FOR 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.

The following trainings were provided using CAPTA funds:

- The DCFS Rural Region received three two-day training sessions for supervisors on Change Focused Intervention coaching strategies and a skill practicum on Protective Capacity Family Assessment.
- Four-day Forensic Interview Training for 76 professionals representing 18 different law enforcement, tribes and child welfare agencies from 13 counties
- Three-day Forensic Interview Training for 30 Clark County professionals including 3 from a rural Child Advocacy Center

Court Improvement Program

- Mediation Toolkit
- 8 Hour Domestic Violence Training for Mediators
- Mediation training was provided to dependency court mediators statewide

As part of the effort to address services for child victims of sex trafficking, funds were used for a survey and assessment of the service array to determine gaps and make recommendations for additional services. In addition, development of a Model Coordinated Response Protocol Toolkit and Prevention Guide were supported.

Positions funded to support the CAPTA program include:

- A policy consultant to assist with meeting the requirements of the CARA Program Improvement Plan;
- Policy and research staff to develop a statewide CSEC Strategic Plan, Model Coordinated Response Protocol Toolkit and Prevention Guide;
- A Social Services Program Specialist III who serves as the SLO and participated in the planning, coordination, evaluation and policy development statewide;
- 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.

DIFFERENTIAL RESPONSE

The State of Nevada is in the process of modifying the Differential Response program. After working with the Capacity Building Center for States and conducting reviews of the Differential Response program across the state, the child welfare agencies concluded that the program would be revised to meet the needs of the child welfare agencies and the communities in which the agencies operate. Regional planning is outlined below with modifications occurring as early as July 2018 and throughout the upcoming State fiscal year.

- Division of Child and Family Services-Rural Region (DCFS)
The DCFS will be moving DR from a program that responds to screened-in CPS reports to a program that serves families in the context of a more traditional prevention model. DR will serve families brought to DCFS' attention through CPS intake that do not meet criteria for a screened-in maltreatment report, but do meet criteria, yet to be established, that indicates the family is at risk for future involvement with the CPS system and is in need of assessment and services to reduce the likelihood of future involvement with the public child welfare system. Additionally, DCFS also envisions criteria development of a referral process for families to receive voluntary services following CPS case closure.
- Clark County Department of Family Services (CCDFS)
The CCDFS plans on modifying its Differential Response program to a Community Collaborative Program designed to serve as a neighborhood-based family support system. Clark County is applying for HHS-ACF grant 93.670 funding for community collaboration. If awarded Clark County plans to use this funding in partnership with current DR grant funding to create a community site. The CCDFS, in partnership with the Community Collaborative Program, will conduct an initial assessment of a report that has been received through its intake hotline. Based on the assessment, the CCDFS will either continue to work with the family or request the Community Collaborative to continue to work with the family based on the families' needs. The CCDFS may also refer families to the Community Collaborative Program after receiving referrals with no maltreatment identified; in addition, to referring families throughout the assessment process if the Community Collaborative can best meet the service needs of the family.
- Washoe County Human Services Agency (WCHSA)
WCHSA is establishing an agency-based Differential Response Program. The agency will serve screened-in maltreatment reports and utilize internal staff to conduct the assessment and provide services to the family. Washoe County Human Services Agency will continue to use the existing tools and the case planning process and will consider alternative assessment processes.

DCFS will continue to work and provide guidance to county and Rural child welfare as they are implementing modified Differential Response programs. DCFS will be reviewing the current DR statewide policy and make the necessary changes to incorporate the program changes within the policy or dependent on the program model that is chosen to develop an overarching statewide policy outlining the requirements of the Differential Response Program which could include: information regarding initial face to face contacts, contact with other parties, engagement with children in the assessment process, release of information.

UPDATE ON ACTIVITIES TO ADDRESS CHILD SEX TRAFFICKING PROVISIONS

Governor Sandoval formally established the Nevada Coalition to Prevent the Commercial Sexual Exploitation of Children (the Coalition) via Executive Order 2016-14 to prepare a comprehensive Statewide Strategic Plan to include the development of a Model Coordinated Response Protocol (MCRP) and Prevention Guide. It seeks to foster collaboration and coordination among agencies to improve the capacity to identify CSEC and provide safety and services for them and their families. The Chair and Co-Chair of the Coalition appointed representatives from Juvenile Services, the Court Improvement Project, judges representing dependency, juvenile and rural courts, Office of the Attorney General, State Assembly and Senate, State and federal law enforcement agencies, county District Attorney's and Public Defender's Offices, local child welfare agencies, Nevada Trucking Association, a nonprofit legal aid center, Department of Education, an Indian tribe, community-based organizations that provide services to child sex trafficking victims, System of Higher Education, mental health service providers, and CSEC survivors.

A statewide collaborative Missing and Exploited policy was developed to address the identification, screening, assessment and reporting requirements. The policy is in the process of revision with input from CSEC Coalition members from the training, identification and screening and care coordination subcommittees. The State issued an Instructional Memorandum requiring 6 hours of awareness training to all child welfare agencies. The Nevada Training Partnership has provided and continues to provide awareness training on the Commercial Sexual Exploitation of Children and the vulnerability of youth in Child Welfare. Currently, statewide the Nevada Training Partnership has trained approximately 840 child welfare workforce staff. **(ATTACHMENT H)**

The Coalition and subcommittees continue to meet with the goal of completion in October 2018. The State continues to work on the Juvenile Victim's Trafficking Act Program Improvement Plan through collaboration with the Coalition. The Coalition subcommittees each are working on sections of the MCRP. A legal subcommittee was formed in December 2017. The subcommittee is charged with reviewing state statutes in relationship to the CAPTA JVTA requirements. On November 8, 2017, Region IX approved the PIP included below.

The State does not elect to apply the optional sex trafficking portion of the definition of "child abuse and neglect" and "sexual abuse" to persons who are over age 18 but have not yet attained age 24.

**Nevada DCFS JVTA Program Improvement Plan
Approved November 8, 2017**

Governor's Assurance #1

Provisions and procedures requiring identification and assessment of all reports involving children known or suspected to be victims of sex trafficking (as defined in section 103(10) of the Trafficking Victims Protection Act of 2000 (TVPA) (22 U.S.C. 7102)); (section 106(b)(2)(B)(xxiv) of CAPTA)

Action Steps	Responsible Parties	Start Date	Target Completion Date	Measure of Success
DCFS to submit current state statute to Children's Bureau.	DCFS	8/07/17	9/22/17	Children's Bureau to determine if the statute is in CAPTA compliance.
Draft Bill language written.	DCFS	1/30/18	3/31/18	Copy of Bill Draft provided to Children's Bureau.
Bill introduced.	DCFS	2/01/19	3/30/19	Children's Bureau provided copy of Bill.
Review and revise existing statewide Missing and Exploited Children policy for children currently served by child welfare agencies.	DCFS Coalition	1/15/18	8/30/18	Copy of the Revised Missing and Exploited Child Policy to the Children's Bureau.
Review and revise existing statewide Intake Policy to ensure referrals of sexually exploited children are appropriately screened in accordance with current Nevada statute.	DCFS CCDFS WCHSA	1/15/18	8/30/18	Copy of the Revised Intake Policy to the Children's Bureau.
Statute passes through Legislature and signed by Governor for July 1, 2019 effective date.	DCFS Coalition	2/01/19	6/01/19	Copy of Enrolled Bill provided to Children's Bureau.
Child Welfare Policy Workgroup reconvenes to make needed revisions as a result of statute revisions.	DCFS CCDFS WCHSA	2/01/19	08/30/19	Revised Policies reflecting statute revisions provided to Children's Bureau.

Governor's Assurance #2

Provisions and procedures for training CPS workers about identifying, assessing, and providing comprehensive services to children who are sex trafficking victims, including efforts to coordinate with State law enforcement, juvenile justice, and social service agencies such as runaway and homeless youth shelters to serve this population; (section 106(b)(2)(B)(xxv) of CAPTA

Action Steps	Responsible Party	Start Date	Target Completion Date	Measure of Success
Coordinate with law enforcement, juvenile justice, and community service agencies through the formation of the NV Coalition to Prevent the Sexual Exploitation of Children to develop a coordinated response protocol.	DCFS Court Improvement	10/15/15	11/1/17	Annual report to the Governor on the Coordinated Response Protocol provided to the Children's Bureau Coordinated Response Protocol completed and provided to the Children's Bureau.
Provide awareness training to child welfare staff regarding the identification, assessment and service provision needs for children currently served by child welfare agencies.	DCFS CCDFS WCHSA	10/12/16	6/01/18	Copy of training agendas to the Children's Bureau

Child Welfare Policy Workgroups revise existing and create new needed policies for identifying, assessing and providing comprehensive services to CSEC.	DCFS	11/30/17	8/30/18	Revised and new policies provided to Children's Bureau
Training plan and curriculum developed based upon statute revision.	DCFS CCDFS WCHSA NTP	8/30/18	6/30/19	Copy of the training plan and curriculum provided to the Children's Bureau.
Governor's Assurance submitted to Governor for June 2019 APSR.	DCFS	6/01/19	6/30/19	Copy of Governor's Assurance submitted with 2019 APSR.

Coalition-Nevada Coalition to Prevent the Commercial Sexual Exploitation of Children
DCFS-Division of Child and Family Services
CCDFS-Clark County Department of Family Services
WCHSA-Washoe County Human Services Agency
NTP-Nevada Training Partnership

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

The DCFS continues to collaborate with the Division of Public and Behavioral Health (DPBH). Through partnership, a Statewide Infant Plan of Safe Care (IPSC) Steering Committee was developed. The Steering Committee is comprised of the Department of Health and Human Services, DPBH, Substance Abuse Prevention and Treatment Agency (agency charged with implementing the recommendations from the Governor's Summit), Maternal, Child and Adolescent Health Section of Division of Public and Behavioral Health and DCFS. Additionally, a Child Welfare Policy Workgroup which includes representatives of the Division of Public and Behavioral Health has been working to address the policy, practice, data collection and training needs of stakeholders providing services to the infant and their family/caregivers.

The Infant Plan of Safe Care policy has been revised as a result of the collaboration with DPBH. DCFS and DPBH has developed a format for the Infant Plan of Safe Care that can be used by hospitals, health care providers and child welfare agencies. The form will be piloted statewide this year to inform and identify implementation issues. DCFS and DPBH have provided training to healthcare providers on CARA and the mandated reporting requirements.

The DPBH has drafted regulations that require hospitals to complete Plans of Safe care prior to discharge. It is anticipated regulations will be in place by June of 2019. Due to the decision by the Nevada Department of Health and Human Services to write regulations requiring medical facilities to develop plans of care upon discharge, the DCFS requested the PIP completion date be extended to June 2019. On May 25, 2018, Region IX approved extension of the PIP not to exceed June 2019.

The Consolidated Appropriations Act of 2018 signed into law on March 23, 2018 increased Nevada's CAPTA funding to an additional 849,798.00. This funding is specific to improving the response to families and infants affected by substance use disorders. The allocation of these funds is targeted for the following activities: modifications to UNITY to collect required data for prevalence and services; development of training curriculum for workforce and community partners including web-based delivery; and the development of a monitoring system. Prevention activities will include, but not limited to, PSAs and creation and dissemination of technical bulletins to hospitals and information materials for parents. Additionally, funding will also support the purchase of a contractor to assist with ongoing development, implementation and coordination with the Nevada Division of Public and Behavioral Health and community level service providers. Lastly, Nevada plans to support the development and implementation of the Families First Prevention Services Act as it relates to this population.

**Nevada DCFS CARA Program Improvement Plan
Approved November 8, 2017**

<p>Governor's Assurance #1 <i>Policies and procedures (including appropriate referrals to child protection service systems and for other appropriate services) to address the needs of infants born with and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, including a requirement that health care providers involved in the delivery or care of such infants notify the child protective services system of the occurrence of such condition of such infants, except that such notification shall not be construed to –</i> <i>(I) establish a definition under Federal law of what constitutes child abuse or neglect; or</i> <i>(II) require prosecution for any illegal action.</i></p>				
Action Steps	Responsible Parties	Start Date	Target Completion Date	Measure of Success
Submit Bill Draft to 2017 Legislative Session	DCFS	12/15/16	Completed	Bill Draft Sponsored
SB480 Approved and Signed by Governor	Governor	3/27/17	Completed and effective 7/01/17	Copy of Bill to Children's Bureau submitted 8/14/17
<p>Governor's Assurance #2 <i>The development of a plan of safe care for the infant born and identified as being affected by substance abuse or withdrawal symptoms, or a Fetal Alcohol Spectrum Disorder to ensure the safety and well-being of such infant following release from the care of healthcare providers, including through –</i> <i>(I) addressing the health and substance use disorder treatment needs of the infant and affected family or caregiver; and</i> <i>(II) the development and implementation by the State of monitoring systems regarding the implementation of such plans to determine whether and in what manner local entities are providing, in accordance with State requirements, referrals to and delivery of appropriate services for the infant and affected family or caregiver.</i></p>				
Action Steps	Responsible Parties	Start Date	Target Completion Date	Measure of Success
Statewide Collaborative Workgroup with members identified from public health, child welfare, Medicaid Substance Abuse and to review CARA requirements and identify partners and begin planning.	DCFS DPBH	12/28/16	10/15/17	List of members and meeting dates/agendas provided to Children's Bureau
Statewide Child Welfare Workgroup identified, and work begins on P&P's and practice guidelines.	DCFS CCDFS WCHSA	12/28/16	10/15/17	List of members and meeting dates/agendas provided to Children's Bureau
First Option – If hospitals agree to do Infant Plan of Safe Care (IPOSC): Child Welfare Workgroup meets to draft policy for IPOSC <i>with hospitals completing Plan of Safe Care.</i>	DCFS CCDFS WCHSA DPBH	1/15/17	4/01/18	Draft Policy provided to Children's Bureau
Multiple meetings with hospitals and hospital associations to determine willingness and feasibility of hospitals completing plans of safe Care.	DPBH DCFS Hospital Assoc.	6/22/17	4/01/18	Documentation of Meetings provided to Children's Bureau
Second Option – If hospitals do not agree to do IPOSC: Child Welfare Workgroup meets to draft policy providing guidance an Infant Plan of Safe Care Policy <i>with a Plan of Safe Care Provider completing the Plan of Safe Care.</i>	DCFS CCDFS WCHSA	1/15/17	4/01/18	Draft Policy provided to Children's Bureau
IPOSC Policy and Practice Guidelines	DMG	11/28/17	5/14/18	Finalized Policy and Practice

approved by DMG.				Guidelines provided to Children's Bureau
Service array evaluated, and existing service providers identified. DPBH provides information to hospitals, healthcare providers and child welfare agencies.	DPBH DCFS	1/15/17	5/14/18	Provide different modalities DPBH uses to share information.
Workgroup identifies and finalizes components of an IPOSC.	DPBH DCFS	6/22/17	5/14/18	Plan of Safe Care components provided to Children's Bureau
Workgroup develops plan for development of monitoring systems.	DPBH DCFS	6/22/17	5/14/18	Plan provided to Children's Bureau
Governor's Assurance submitted to Governor for June 2018 APSR.	DCFS	5/15/18	6/30/18	Governor's Assurance submitted with APSR

Department of Public and Behavioral Health (DPBH) is the umbrella agency for Substance Abuse Prevention and Treatment Agency as well as Maternal, Child and Adolescent Health services

DCFS-Division of Child and Family Services

CCDFS-Clark County Department of Family Services

WCHSA-Washoe County Human Services Agency

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APPENDIX C: Chafee Foster Care Independent Living Program (CFCIP) & Education Training Voucher Program (ETV)

Nevada's Division of Child and Family Services shares operational and administrative responsibilities with two of Nevada's largest counties having populations over 100,000. In the case of the Independent Living Program (ILP), policy implementation and programmatic oversight remains with DCFS FPO as the responsibility of the statewide Independent Living Program Coordinator and direct report, the Independent Living Program Specialist (ILPS). In SFY 2019, the ILPS will continue with a collaborative review and update of the statewide Independent Living (IL) program guide through ongoing monthly stakeholder meetings from all jurisdictions to better facilitate training and technical assistance, and to ensure compliance with updates to pertinent federal and state law and regulation. During SFY2018, the ILPS began revising the statewide ILP training materials. The revised ILP training makes conforming changes based on various recent federal and state legislative initiatives, includes extra resources for caseworkers and IL workers looking to develop their practice, and has been delivered to three jurisdictions in ILP thus far via remote teleconference in small-group format to facilitate an informal, discursive, question-and-answer approach. Washoe County Human Services Agency (WCHSA) contracts with the Children's Cabinet to provide selected IL services to foster youth. Clark County Department of Family Services (CCDFS) contracts with Clark County Social Services Step Up program in a similar fashion of service provision. Step Up receives sub-granted funds from CCDFS for the provision of IL services for youth who have attained 18 years of age but works closely with CCDFS and the ILPS to provide input and share information to ensure a smooth transition between IL service providers. DCFS Rural Region (DCFS RR)-, contracts with two agencies to provide IL services: the Ron Wood Family Resource Center (RWFRC) in the northeastern portions of the state, and Nevada Outreach and Training Organization (NOTO) in the southeastern region of the state. In each case, contracted service providers are private, non-profit organizations. Nevada's 27 unique tribal entities have elected to pursue IL services through the Fallon Paiute-Shoshone's Stepping Stones program as a single point of contact, ensuring both efficient service delivery, and that all foster youth of Indian descent are able to access IL services that can be individualized to reflect the cultural needs of the youth and Tribe.

As reported in last year's APSR, role transitions at Stepping Stones and with the ILPS positions during SFY 2016-2017 highlighted a need for increased awareness of IL services among Nevada's Tribes, and a desire to increase referrals for foster youth of Indian descent to participate. While the mutual intent of Stepping Stones and the ILPS was to work collaboratively to inform tribes of IL service array, streamline the referral process, and strategize methods to increase referral numbers, emergent priorities at both organizations delayed implementation of this plan until SFY 2019. As a result of ongoing discussion between Nevada's ICWA Program Specialist, the ILPS and Stepping Stones, ILP outreach efforts in SFY 2019 will represent a collaboration at various Tribal and Inter-Tribal Council meetings in Nevada to ensure that all federal, state and agencies are well-recognized statewide for their respective scopes of jurisdiction in Tribal ILP matters. The anticipated outcome is an increased state awareness of the various IL services that can be delivered in a culturally-appropriate manner via Stepping Stones, and hopefully a subsequent positive correlation in ILP referrals received by Stepping Stones in SFY 2019.

Nevada's ILP receives funding from a combination of federal CFCIP & ETV funds and by state funds such as Nevada's Financial Assistance to Former Foster Youth (FAFFY)

All foster youth are eligible to participate in the ILP from the age of 14 years and older with the option to voluntarily extend full legal custody until graduation from High School, and to voluntarily participate to age 21 in Nevada's state-funded Court Jurisdiction (CJ) program. Participants in ETV are able for service eligibility until age 23, and youth who age-out of care while residents of Nevada are eligible to participate in Medicaid until age 26. Youth who attained age 18 in another state who have moved to Nevada and are under age 21 are referred to their jurisdictional child welfare agency to receive CFCIP services. ILP in Nevada represents a collaborative effort between federal, state, and local governments in contract agreements with several private, non-profit organizations and less formal partnership agreements with local service providers as mutually beneficial.

CFCIP Eight Program Purposes:

1. Help youth transition to self-sufficiency by providing services:

ILP continues to utilize the Casey Life Skills Assessment to create a baseline snapshot of youth strengths, skills and areas where improvement is needed to develop progress goals tailored to meet the needs of each youth. In addition to the annual reassessment, the IL staff completes the Independent Living Transitional Plan (ILTP) for all youth assigned to ILP on an at least an annual basis, and more frequently as needed to address the needs of youth. WCHSA has elected to revisit this assessment every six months to ensure it is accurate and facilitates two transition meetings prior to a youth's 18th birthday with his or her multidisciplinary team for the same reason.

Foster youth who are age 17 or older and able to comply with supervision requirements have the opportunity to be placed on an Independent Living Agreement (ILA) and reside in a non-licensed/non-foster-care home. The youth's team completes an ILA and if approved, the youth is afforded the opportunity to live independently while remaining in the legal custody of child welfare prior to reaching the age of majority. They are supported by their primary caseworker, IL worker, Mentors, and Children's Attorney. The youth receives the equivalency of a foster care payment directly while in compliance with an approved ILA in a similar fashion to CJ. Youth are eligible to remain under the jurisdiction of the court after age 18 if they are continually enrolled and engaged in completing their education, are working at least 20 hours a week, are enrolled in either post-secondary education or a vocational program or are otherwise completing activities designed to achieve independence that is appropriate for the youth's developmental needs. The terms of both ILAs and CJ agreements can be individualized to meet a youth's unique circumstances to ensure success and offer reasonable accommodations, if required.

ILP participants are provided a life book with information that may be helpful as they transition into adulthood independently (items required to furnish a home, how to pay one's taxes, applicable landlord and tenant law, etc.). All youth are provided an age-out letter that provides all the information required to access services for which they may be eligible as former foster youth. While youth are encouraged to also include this information in their life books, the age-out letter provides the advantage of all the required eligibility information to access benefits being available on one sheet to ensure timely access to necessary services.

Continuing in the theme of PYD, CCDFS has included their regional YAB, Foster and Adopted Youth Together (FAAYT) in the development of internal procedures for completing the Casey Assessment and the ILTP, which include ground rules that will allow the youth to facilitate his or her own ILTP meetings with general adult guidance. Further, FAAYT developed an internal satisfaction survey to monitor meeting outcomes and identify areas for improvement, which may be submitted anonymously. Each ILP participant in Clark County and their caregiver receives the Youth IL Introductory Packet, which outlines all of the services and supports CCDFS' ILP provides to youth. It includes the Foster Care Bill of Rights and information regarding CFCIP-funded ILP programs.

In addition to partnering with Step Up to provide IL case management, assessment and IL services related to education, self-sufficiency, job readiness, personal and mental health care, and community services, CCDFS has continued to offer the thinkLaw curriculum to all youth in Nevada who are ILP-eligible and able to attend. This program focuses on Critical Thinking Skills and their application in everyday decisions and challenges. The lessons are provided to youth, with ILP providing 20% of the facilitation and the remaining 80% of discussion is facilitated by the youth, to discuss actual court cases and significant issues decided upon in these cases. In Washoe County, 33 youth attained the age of 18 in SFY 2018. Of these, 17 youth chose to participate in the Court Jurisdiction program and elected to receive ongoing oversight by the court. On July 1, 2017 all youth, ages 16 and older with a permanency plan of Another Permanent Planned Living Arrangement (APPLA) began receiving all case management and independent living services through a contracted provider. Previously these youth were case managed by Agency staff with independent living services being provided by the same contracted provider. Youth between the ages of 14 and 16 and youth whose permanency goal was other than APPLA continued to receive case management and independent living services from Agency staff. Youth ages 17 and older continued case management with an Agency worker and received independent living services from the same contracted provider. Youth who have aged out of foster care at 18 continue to receive services from a community provider. In DCFS's jurisdiction, the Ron Wood Family Resource Center (RWFRC) provides contracted IL services for all youth over age 14 in the following counties: Carson; Churchill; Douglas; Elko; Eureka; Humboldt; Lander; Lyon; Mineral and Pershing counties. Youth are provided individualized case management, workshops, funding to address completing secondary and post-secondary education, services to obtain and maintain employment, training in daily living skills, understanding money management and budgeting and supporting healthy life styles to support self-sufficiency. SFY 2018 will encompass more youth lead and youth driven workshops and events to support self-reliance and teach independence.

Nevada Outreach and Training Organization (NOTO) provides IL services for the same foster care population in the following counties: Esmeralda, Nye, Lincoln and White Pine. In SFY 2018, NOTO performed over 12 life skills sessions that focused on the building self-sufficiency by addressing the barriers that in-care and transitioning foster youth face. Each session addressed a variety of topics such as communication, daily living, work and study skills, social relationships, healthy and safe relationships, housing and money management, future planning, realistic goals and other basic life skills such as hygiene and manners. Each session included the collaboration of local businesses and organizations to have guest speakers who specialized in the focused category to directly interact with and educate youth. Those specialists included: banking specialist; career coaches; high school principals; college representation; JobCorp; mechanics; leasing agents; a mental health specialist; family physicians, and others.

Independent Living Classes are also designed to improve cognitive skills, self-esteem, motivation and improve social capital. Those skills were also addressed by maintaining the garden, which helped youth foster responsibility, increased exercise, encouraged healthier eating habits, improve team-building skills and created a therapeutic tool to help them improve their mental health by reducing stress and depression. Youth were also involved in our local Youth Advisory Board where they created an annual Duffle Bag Drive for Foster Care Awareness Month to improve the foster care experience for other transitioning youth. Youth were also provided additional information and opportunities to improve self-esteem and self-sufficiency by participating in programs such as the FosterClub All-Star Internship, one NOTO youth was successfully chosen and completed the internship.

NOTO also created a Mentorship Program youth modeled on the Casey Family Programs' Permanency Pact which matched up transitioning out-of-care youth with committed adults to provide guidance, encouragement and specific supports to a young person with a goal of establishing a kin-like relationship. The agency's goal is to provide young adults with the influence of a caring adult to mentor them as they face a variety of challenges and reduce risky behaviors while focusing on academics and career goals. The agency provided one (1) mentorship training to 18 individuals who signed up as mentors.

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

In SFY 2018, Nevada LIFE voted to join the national group Foster Youth in Action, a youth-led national organization that provides foster youth a forum to participate in national policy-driver discussions after a presentation by their Executive Director. Foster Youth in Action further supports local Youth Advisory Boards (YABs) and their adult facilitators with services for recruitment, training, and capacity-building, of which the ILPS and several regional boards have made use of three times in SFY 2017 during the revitalization of regional YABs as well as Nevada LIFE. Through a generous grant from the Walter S. Johnson foundation, the ILP was able to send a group of five regional YAB participants to Leaders 4 Change, an annual national conference hosted by FYA that brings together national FYI members to unite and discuss issues impacting current and former foster youth. Attendees presented a legislative and policy update in addition to background on Nevada's ILP, Nevada LIFE and our regional YABs, and initiatives Nevada LIFE would like to address in SFY 2018 and future years. Feedback received from participants and their adult chaperones (two from CCDFS, two from WCHSA, one from Stepping Stones) was that the opportunity was a great chance to represent Nevada on the national stage, and to meet and make friends with other members of national and statewide YABs while developing networking, presentation and interpersonal skills that will improve their professional soft skills.

In SFY 2019, the ILPS will begin a joint working arrangement with her lateral in Nevada's Division of Welfare and Supportive Services to explore potential for crossover opportunities to develop two concurrent training and employment opportunities for former-foster and other transitional aged youth. The arrangement seeks to increase assistance to IL and other transitional aged youth in the fields of job searching, resume and interview skill development to increase job placement rates among this cohort.

In Clark County, the agency has used partnerships between the Partnership with Clark County School District (CCSD) has resulted in a number of program improvements to their educational and employment services in SFY 2018, discussed in turn below:

CCSD/Adult Education

CCDFS IL has partnered with CCSD on improving the educational outcomes for youth in care. IL Staff met with Adult Education personnel to review outcomes and learn more about options available for youth. IL Staff received training from Adult Education regarding enrollment, requirements, and how special education is provided for youth with Individualized Education Plans. IL advocated for youth who desired to enter this program in situations where they were significantly credit deficient upon entering foster care and desired to catch up on credits and graduate from high school. IL advocated for youth within their teams when needed to ensure that this educational option was available for these youth.

CCSD/Infinite Campus Access

CCDFS has access to CCSD educational records and meets monthly with staff from CCSD on issues related to children and youth in Foster Care. IL Supervisor accesses reports for youth and IL staff, including progress reports, report cards, behavioral detail reports, transcripts, credit summary, health information and Individualized Education Plans in efforts to assist youth improve their educational outcomes. School meetings were held when needed to advocate for youth and access services and share information with CCSD to support the youth in reaching their academic goals.

Partnership with Operation Independence

ILP partnered with a local non-profit Olive Crest to offer Operation Independence which is a Workforce Investment Act grant-supporting job readiness program featuring the placement of youth in worksites throughout the community. Youth have been referred to Operation Independence and assigned a Job Coach who meets with the youth monthly. The youth are

provided with individualized career options, shadowing experiences and job readiness training to obtain employment. IL Staff have met with Olive Crest and communicated frequently to ensure that the referral process is a smooth one for foster youth. This has assisted in improving outcomes for youth throughout the process of interviewing and having documentation ready for this program.

Other Partnerships for Education and Employment Assistance

- Training for CCDFS and Foster Parents
- CCDFS IL provided information about educational supports to further assist youth in their educational goals.
- ILP partnered with Legal Aid Center of Southern Nevada to ensure Educational Advocates and Attorneys were provided to youth.
- ILP promoted and encouraged youth to obtain tutoring from their teachers in high school on a consistent basis when needed.
- ILP obtained and tracked 504s and IEPs and provided further information on accommodations that can assist youth in their education.
- ILP has requested access to the GPA to ensure that youth are on track for college. This access was granted and will be implemented in fall of 2018.

In SFY 2019, the CCDFS IL program will continue to:

- Focus on assisting youth with employment preparation to include specific focus on obtaining and maintain employment as well as vocational training.
- Work with local resources including Trade Unions, Military Recruiters, and Federal programs, such as Job Corps.

At WCHSA, The Walter S. Johnson Foundation funded a two-year College and Career Readiness Project (CCRP), which ended prior to the reporting period. During its second year, the program was rebranded as “Achievements Unlocked” (AU) to help promote the program and move toward sustainability. The three main objectives of Achievements Unlocked are to:

- 1) Improve educational stability;
- 2) Improve college and career readiness, and
- 3) Improve educational outcomes.

Participating youth were assigned an educational advocate and tutor in addition to their existing CFT. This multi-disciplinary team model helped to address academic and vocational barriers and to promote plans to achieve future aspirations. Two educational advocates, both former high school guidance counselors, were hired for the project. The educational advocates aided youth to ensure they were on track to graduate, were enrolled in appropriate classes, and were receiving the necessary support services from the school district. The youth were also paired with a tutor that provided weekly services in the home, to reduce barriers such as transportation and supervision.

The final evaluation conducted by the National Counsel of Juvenile and Family Court Judges (NCJFCJ) found that students who participated earned more credits; experienced fewer disciplinary actions; had significantly less unexcused absences; and were more on track to graduate, which correlated in improving their college and career readiness by 25% by the end of the second year. At the end of the Project’s second year students who participated in the project stated they received the most encouragement to continue education past high school from their educational advocates and social workers. The majority (85%) indicated they were glad they were involved in the program and that grades were important to them. The project also helped move participating students towards graduation. At the onset of the project, 39% of treatment youth were on track to graduate on time. At the end of the second year, 61% were on track to graduate and 70% of seniors who participated graduated, which is 10% above the graduation rate of all high school foster youth served by WCHSA. Although the project ended prior to the reporting period, the Agency has been able to continue providing services to youth in foster care and has submitted a grant application to sustain this work going forward.

In addition to the above-mentioned services, WCHSA maintains partnerships with several local community-based agencies providing job readiness and skills training. Each community program is structured differently, allowing case managers to match the program to an individual youth’s needs. WCHSA also maintains a partnership with Vocational Rehabilitation Services and referrals can be made to this program while a youth is still in school. This provides an opportunity for a dual track of transitional education and vocational skill development. Many transitional-aged IL youth are also referred to a job readiness and paid job-training program through The Children’s Cabinet’s Face Forward program.

WCHSA continues to employ a full-time educational liaison who works closely with the Washoe County School District (WCSD) to help improve educational outcomes for youth including minimizing school moves, arranging for tutoring when needed, and assisting caseworkers in navigating special education and general education graduation requirements. The liaison serves on a statewide sub-committee of the Court Improvement Project specific to education. Further, the liaison facilitates local quarterly education sub-committee meetings that include Community College, Foster Parent Association,

and key WCSD staff. During this reporting period, WCHSA entered into an agreement with WCSD to provide transportation to minimize school disruption based on foster care placements/moves.

WCHSA continues to be engaged in the Statewide Collaborative on Education, Child Welfare and the Courts. This group is part of ongoing evaluation of all sections of the Roadmap for Educational Success for Foster Children as they represent current legislative activities and the stages of progress within the committee. In SFY 2019, WCHSA will continue to pursue grant opportunities to fund the AU program, will collaborate with the ILPS to pursue other employment programs, and will continue to evaluate for opportunities for further collaboration with WCSD.

In DCFS Rural, youth served by RWFRC are engaged in ongoing monthly workshops, summer weekly workshops, individualized case management, and regional and statewide YAB meetings to further their educational and employment opportunities as discussed below.

Child and Family Team Meetings and Individualized Case Management:

IL youth are supported through referrals from DCFS and joint CFT Meetings are arranged as soon as possible after a youth turns 14 years of age to ensure the development of a nurturing relationship between the IL worker and the IL youth. IL youth are supported by their IL worker in their choice of continuation toward education, employment preparation (such as skilled tradeships or the military), or both goals concurrently. IL youth participate in goal setting to address individual education and employment options available and desired and will address barriers to success that may prevent youth from reaching these goals (such as credit deficiency) to develop attainable goals to achievement. IL youth receiving ongoing support and coaching as they move through and revise their ILP's educational/employment goals over the life of their time with the ILP to assist youth in seamless services.

IL youth supported by NOTO in SFY 2018 received similar supports to their Northeastern Nevadan counterparts. Each completed Casey Assessments annually which identified the specific educational, training, and any other skills that required development and any individual barriers to successfully obtain employment. NOTO provided one-on-one services with youth which assisted them with the creation of resumes and identified potential employers. NOTO provided training and mock interviews as a team and individually to improve their interview skills. Agency took appropriate career building youth to the DMV to obtain state ID cards, and other required licenses to obtain employment. NOTO provided transportation to pick up and complete job applications with youth and provided transportation to job interviews. NOTO continued to assist youth in their job searches until they reached their goal of finding employment. NOTO worked cooperatively with other agencies to help youth find employment and job training such as the Nye Communities Coalition and their Youth Werks/Safe Schools Program and JobCorps. NOTO also identified various organizations youth could volunteer at to gain job experience as necessary. Additionally, NOTO assisted youth in obtaining proper interviewing/work clothing and assisted them in paying for hygiene products and haircuts. In SFY 2018, NOTO assisted 15 youth in successfully finding employment and provided continuous training open to every youth in the ILP statewide.

In SFY 2019, NOTO will continue to provide the standardized one-on-one assessment, case planning and IL services that are customary to all IL clients served. NOTO will continue to work cooperatively with other agencies to help youth find employment and job training such as the Nye Communities Coalition and their Youth Werks/Safe Schools Program, JAG and JobCorps. NOTO will continue to identify various organizations youth can volunteer at to gain job experience as necessary and will continue to assist youth in obtaining proper interviewing/work clothing and assist them in paying for hygiene products and haircuts as needed. NOTO plans on helping any youth with career goals to find employment or volunteer opportunities with a goal of at least 15 or more youth annually.

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

In addition to the ETV program, the Otto Huth trust scholarship and the Foster Care to Success post-secondary scholarships are advertised on DCFS's IL webpage, continuing from SFY 2017. Beginning in SFY 2018 with the rebranding of Nevada LIFE's social media page, the ILPS has been sharing these opportunities with all voluntary subscribers, which include current and former foster youth, CWA staff, ILP staff, foster parents, and community organizations that serve the IL population. This effort has allowed the ILP to quickly share reliable information to those who may benefit and has provided the dual benefit of allowing current/former foster youth a forum for discussion of their experiences of ETV, All-Stars, JobCorps and scholarships as a means of engaging other foster youth who may be less receptive from an adult messenger. Educational opportunities are further cross-promoted on DCFS's social media page, in addition to the DCFS IL webpage. In SFY 2019, the Nevada LIFE's Board will be enlisted to continue to improve and develop the capacity of this medium to reach more youth.

The Otto Huth scholarship selection committee is moving towards an online application process. In SFY 2019, collaboration with CSA Scholars to continue to revise and refine the online application process. will continue. In SFY 2018, Nevada's partnership with FosterClub has afforded two youth the ability to participate in the Foster Youth All-Stars program, a several-week leadership training course in Seaside, Oregon. Foster Youth All-Stars are expected to return to their communities of origin to share their respective experiences in a train-the-trainer capacity. Due to a lack of infrastructure at the Nevada LIFE level, former participants used the social media account as a means of sharing their All-Stars experiences as a means of encouraging new applicants. In SFY 2019, collaboration with FosterClub to revise the All-Stars experience to hopefully offer more opportunities for youth to participate and build their capacities over time. All IL workers assist youth in applying for appropriate scholarship opportunities. In upcoming years, goal of the program is to work collaboratively with other public and private agencies to hopefully develop additional scholarship opportunities for foster youth.

CCDFS ILP has continued to enhance its partnership with Clark County School District (CCSD) for this year. CCDFS ILP is working with CCSD on improving outcomes for all foster youth and increasing graduation rates. Whereas, 44 youth graduated from high school in 2017 from CCDFS ILP and CCSS Step Up, over 110 youth are scheduled to graduate in 2018, a 40% increase in the graduation rate. CCDFS recognized CCSD educators and administrators as well as foster parents in achieving this significant increase in graduates in 2018. CCDFS IL partnered with CASA to plan the 2018 Graduation Party and invited members of FAAYT to speak at the Graduation Party in June 2018. Each youth will receive a graduation stipend and other graduation gifts. Further, the CCDFS ILP has ensured access for foster youth to the National JAG program. CCDFS ILP continues to meet monthly with CCSD to address issues related to foster youth and education.

CCDFS has provided Financial Aid Workshops for foster youth, focusing on areas of preparation and planning for secondary education and/or training or trades. Topics have included FAFSA, ETV, scholarships and grants available to foster youth, with IL workers assisting youth with applications. CCDFS ILP partnered with foster agencies to accommodate youth by providing financial aid workshops near their placement locations. Flash drives were provided to youth to maintain their FAFSA and other financial aid information, as well as the Power Point training presentation given during the workshop. Workshops will vary depending on the time of year and youth requests. ILP provided individualized assistance with essays and this was an interactive learning experience for youth. An evaluation was provided to youth at the end of the workshops. In SFY 2019, CCDFS ILP will continue to expand educational workshops and seek resources offered to youth with a focus on high school diploma attainment, with involvement with UNLV, CSN and other higher education options for youth as well as out of state college tours. The program will continue with the Foster Scholars Program to support youth transition and attendance at UNLV and continue to partner with the Clark County School District/CCDFS Educational Liaison to assist and advocate when youth need school support and help to obtain credit retrieval.

WCHSA maintains a partnership with the local community college. In addition to traditional education, the community college provides a variety of skill certificates. Those options are outlined for youth and a contact person is available to help them navigate that system. There are is also a team of community college experts available to ensure the needs of foster youth attending this college are met. A financial aid liaison assists youth with barriers when applying for financial assistance. A faculty mentor is available to meet with youth individually to help them navigate class selection and provide assistance in being a successful student. A link to special education and/or disability services is available. Additionally, two on-campus summits are held each year that provide exposure to the campus and various programs that youth may find helpful during their college journey and are open to all ILP participants statewide. WCHSA employs a full-time case manager that participates on the team. The team helps to provide wraparound services to youth ensuring the most success possible when they enter a post-secondary institution. The WCHSA educational liaison supports caseworker efforts to help youth achieve education success. The educational liaison is available for consultation on credit recovery and services to meet graduation requirements helping students to have more opportunity to apply to post-secondary institutions.

DCFS-Rural Region youth served by RWFRC are engaged in: HSE preparation; secondary educational preparation for HS Diploma; Accuplacer preparation for entrance into college; college selection assistance; tutoring; study habit awareness and time management skills training; budgeting for school; FAFSA and other financial aid applications and associated individualized needs. In SFY 2018, youth participated in the educational summit in Washoe County, and one was selected for a national leadership opportunity from FosterClub. In NOTO, the IL worker meets with youth to discuss and help them prepare for post-secondary training and educational institutions immediately upon referral. NOTO helped youth establish educational goals and monitored their educational progress and goals once per quarter with youth in 9th, 10th and 11th grade to ensure that they were staying on track for achievement. NOTO met monthly with youth in 12th grade to create college and other post-secondary goals and monitored their progress more frequently to address barriers to achievement timelier. NOTO continued to identify and assist youth struggling in school to source tutors, summer school programs and provide youth with any assistance in the enrollment process and funding needed to keep on track with their educational goals.

NOTO encouraged graduation and normalcy concurrently by providing youth with many different opportunities and incentives to keep them engaged in school by covering the cost of many high school sports, clubs, dances, and other school activities. High school seniors were provided senior packages which includes their cap/gown, tassel, senior apparel and other graduation items. They were also provided a senior yearbook and a class ring. Youth were also awarded a graduation incentive, and a laptop, printer and carrying case for the successful completion of high school. This incentive kept youth driven to graduate, and all seven seniors graduated on time. NOTO assisted youth in any college/post-secondary training placement tests, and any other enrollment duties by: providing transportation; helping youth navigate college websites; schedule appointments; meet with academic advisors, financial aid staff and other counselors as needed. NOTO continued to attend any enrollment/advisor meetings with youth and assist them in the creation of their college plans when invited by youth as a matter of course. NOTO continued to monitor youth as they moved throughout their post-secondary and educational institution meetings with them quarterly and required youth to submit their grades each quarter to ensure program compliance with CJ (if participating). In SFY 2019, DCFS Rural Region IL Workers will work collaboratively with the ILPS and caseworkers to develop standardized data measures to measure program performance in this area in a reliable way.

4. Provide personal and emotional support to youth aging out of foster care through mentors and the promotion of interactions with dedicated adults:

Nevada's statewide policy directs caseworkers and IL workers to assist youth in seeking adult mentors that they will be able to rely on upon age-out as a matter of course. Beginning at referral and continuing until age-out, the annual revision of the ILTP includes a discussion of whom are the dedicated and supportive adults in the youth's life. This continues for youth involved in either baseline, or follow-up NYTD survey cohorts, which are completed by youth with their IL workers. Local and statewide YABs feature adult facilitators who mentor youth in recruitment, organization and capacity-building activities that allow them to self-advocate in social and workplace settings. As these activities require interactions with outside adults in many spheres, an unintended benefit has been increased connections to adults who have worked with youth mentoring them later in either a personal or professional capacity.

In Clark County, consultation with former foster youth ensured that the spirit of youth in FAAYT remained its focus. Subsequently, FAAYT has increased in its focus on youth driven activities and meetings. FAAYT location has moved from CCDFS to CCSS Step Up in efforts to engage with youth ages 18-21. This has been successful in that young adults are more interested in attending FAAYT in a youth friendly location.

CCDFS ILP and Step Up attended a presentation by Open Table, a mentoring faith-based organization who would like to provide mentoring services to foster youth. Training would commence prior to implementing this program. CCDFS ILP is collaborating with Big Brothers Big Sisters of Southern Nevada regarding a back to school event promoting post-secondary information to youth entering high school. Mentorship and referrals were discussed. Also, in SFY 2018, CCDFS ILP redefined the role of the IL Worker as Youth Advocate, in ensuring the youth's voice is heard by their team, educational partners, and care providers regarding case planning and permanency discussion. IL Worker as Youth Advocate will assist the youth in resolving conflicts and identifying solutions through their own self-advocacy. The grievance process was discussed with youth and case managers to ensure that youth have a means to express grievances as it pertains to the Foster Care Bill of Rights, and there is a means to provide the youth with a resolution, monitored by a third party so that grievance data is tracked. In SFY 2019, CCDFS ILP will continue to:

- Work with community partners to establish improved means to provide youth with emotional support, and
- Work with Quality Parenting Initiative (QPI) to develop improve and targeted enhanced relationships with foster parents who may be interested in mentoring/fostering teens with an increased focus on youth success.

At WCHSA, throughout the life of the case, youth are encouraged to identify emotional supports in their life and encouraged to engage those people in their permanency planning. Information concerning identifying emotional supports is documented on the youth's written IL Case Plan, which is formally updated every six months. Opportunities are available to promote interactions with dedicated adults. Youth are also encouraged to seek the support of teachers, coaches, foster care providers, and appropriate family members to support them through their foster care journey. Additionally, the Quality Parenting Initiative seeks to encourage foster care providers to offer support and assistance to youth placed in their home after they discharge and into adulthood.

In DCFS Rural Region, the RWFCRC employs peer mentoring programs to utilize older IL youth to connect and mentor younger IL youth in a manner that is monitored by their IL worker in a semi-structured way. Mentorships serve to reinforce through a peer-to-peer mentorship various ILP topics covered in the following typically-observed areas: physical and mental health management; parenting as a transitional aged youth; sex trafficking risk prevention and education; sex education with a focus on STI and pregnancy prevention, how to have healthy and respectful intimate relationships, and how to exit a

toxic relationship or DV situation; and innovative life skills such as cooking, budgeting, banking, tax preparation and other needs as the younger youth requests.

In response to an identified area of improvement related to facilitating permanent connections, in SFY 2018 NOTO created and implemented a Mentorship Program for youth modeled closely after the Casey Family Programs' Permanency Pact. This program which matched up transitioning out-of-care youth with committed adults to provide guidance, encouragement and specific supports to a young person with a goal of establishing a lifelong, kin-like relationship around specific areas a mentor is willing to provide a dedicated commitment to offering to the youth. The agency's goal is to provide young adults with the influence of a caring adult to mentor them as they face a variety of challenges and reduce risky behaviors while focusing on academics and career goals. NOTO provided one (1) mentorship training to 18 individuals who signed up as mentors in SFY 2018.

In SFY 2019, NOTO will hold a mentorship training every three (3) months where they will identify new mentors and reconvene with current mentors to evaluate progress and resolve any issues. In SFY 2019, DCFS Rural Region will continue the phased rollout of this Mentorship Program in all other jurisdictions and will work to develop data tracking metrics as a CQI measure to evaluate programmatic efficacy. The DCFS Rural Region and ILPS will work collaboratively with Mentors, Nevada LIFE, and other interested current or former foster youth to develop a program satisfaction survey for participants.

5. Provide financial, housing, counseling, employment, education, and other appropriate support and services to former foster care recipients between 18 and 21 years of age to complement their own efforts to achieve self-sufficiency and to assure that program participants recognize and accept their personal responsibility for preparing for and then making the transition into adulthood:

During SFY 2018, housing services and supports remained the most frequently requested and accessed service among ILP participants aged 18 and 21 per data obtained because of the NYTD survey and a self-report survey completed by youth online as part of Nevada's Statewide Assessment. Taken together, these factors have the combined impact of limiting the amount of available housing units open to these youth with their available income, a problem that is compounded in the event of a personal or professional crisis, or during the mandatory application processing time for SSI age 18 redetermination of benefit cases.

There are three distinct Housing Authorities that represent Nevada in a jurisdictional pattern mimicking that of the child welfare landscape, however, during SFY 2018 the waitlists for these programmatic supports were often closed. While DHHS has provided data on this cohort to the Committee to Study Issues Regarding Affordable Housing formed by Legislature in the interim during SFY 2018, neither the ILP nor the Nevada LIFE Board has been approached for input or comment at this time. During SFY 2019, the ILP will begin to advocate for increased affordable housing options for transitional aged youth as the area most needing to be addressed.

In Clark County, ILP youth aged 18-21 are served exclusively by Step Up. Step Up is primarily a homeless prevention and independent living program for youth who have "aged-out" of foster care. The goal is for these young adults to achieve economic self-sufficiency as they make the transition from foster care into adulthood. Step Up assists young adults to attain economic self-sufficiency by providing them with resources and services including (but not limited to) comprehensive case management, housing assistance, employment assistance, educational assistance, transportation assistance, and other services such as referrals and one-on-one guidance to navigate the transition from foster care.

The Step-Up Drop-In Center opened September of 2015 and completed merging all remaining "aged-out" former foster youth from DFS to CCSS in Fall of 2016. Step Up maintains a "No Wrong Door" young adult friendly drop-in center that was designed with former foster Transition Age Youth specific needs in mind. The program also includes various on-site resources such as education/school supplies, hygiene supplies, baby/infant supplies for those who are parenting, resource books, a courtesy snack pantry, as well as a computer lab and WIFI.

Program Data and Statistics

Step Up in Clark County serves about 300 young adults a month, with enrollment decreasing in the fall/winter and increasing again in the spring/summer. Recent data for 2018 reflected:

- 84.5% of young adults are stably housing (defined as in the same housing 3 months or longer)
- 57.5% have completed high school (1.8% of these completed their high school equivalency)
- 14.4% of young adults are now attending college
- Remaining young adults are attending high school/high school equivalency (25%) and/or attending trade/vocational school (10.3%)
- 54.5% of young adults are employed
- 98.1% have active Medicaid health insurance

Recent demographics data for 2018 reflected:

Gender: 59% female, 40% male, 1% other (refused, gender non-confirming, etc.)

Race: 49% Caucasian/White, 32% Black or African American, 3% Asian, 3% American Indian or Alaska Native, 11% Multiple Races, 2% Native Hawaiian or Other Pacific Islander

Hispanic Ethnicity: 29% Hispanic/Latino, 71% Non-Hispanic/Latino

In addition to the above services and partnerships, Step Up partners with the College of Southern Nevada's CSN Foundation to provide \$600 in textbook assistance and specialized assistance for aged-out foster youth navigating college enrollment. Step Up further collaborates with other Clark County providers in the areas of Employment, Housing and Specialized Services.

In SFY 2019, CCDFS ILP will continue to:

- Continue to work in partnership with CCSS Step Up to ensure that youth who transition out of foster care make a seamless transition to the Step-Up program.
- Focus on developing an enhanced framework for ILP services with a focus on healthy mindsets and skillsets for youth and supporting a healthy and productive life for young people.

In Washoe County, the CJ program continues to be a resource for youth between the ages of 18 through 21. This program provides youth with ongoing case management, financial assistance, and supportive services as long as they remain engaged in a plan to achieve self-sufficiency. This could include attendance at a post-secondary institution, enrollment in vocational training, employment for at least 20 hours a week, or involvement in program designed to remove barriers to employment. Within the youth's case plan, goals are developed around money management, housing stability, high school/post-secondary/vocational education, and health/well-being, including mental health, etc. Youth enrolled in this program are assigned a community case manager that contacts the youth at least monthly as well as an Agency case manager that reviews goal planning and assists in removing barriers to success for youth. During the reporting period, 32 youth turned 18 years old. Of those youth, 25 opted into the Court Jurisdiction program.

Housing continues to be a challenge in the community. The Agency continues to have access to 16 beds in supportive transitional living opportunities for youth. However, these beds are also available to paroled youth, so the former foster youth population does not always have access to this resource. Additionally, WCHSA contracts with a community provider, supported by FAFFY funds, to provide housing deposits, first month's rental assistance, and move-in kits that include housing supplies. Any other costs beyond basic needs assistance are also provided by WCHSA.

At RWFRC in DCFS Rural Region, youth receive monetary assistance in a responsible and accountable manner. IL youth are required to attend appointments with IL worker, communicate needs, and make a budget. IL workers assess needs and work with youth in budgeting and pre-planning for additional and unexpected needs. IL workers understand many issues are unforeseen, particularly among the transitional aged youth population, and working with the IL youth on their personal and emotional issues constitute an opportunity for learning and becoming self-sufficient. IL youth are expected to make mistakes and work out solutions as a necessary life skill and are provided an opportunity to have the forum to do this with ready support. IL youth are expected to have emergent issues that need immediate attention, and IL workers respond timely to use these opportunities as growth in the IL youths' life.

In SFY 2018, NOTO assisted all transitioning out of care youth ages 18-21 find affordable, appropriate and safe housing by assisting them in locating available rentals, roommates or dorm living. NOTO helped youth contact property management companies and use the internet and websites such as Craigslist and Zillow along with social media outlets like Facebook. NOTO assisted youth in completing rental applications and lease agreements. NOTO assisted youth by providing transportation to different properties and other rental appointments. NOTO also assisted youth in the costs associated with moving into their own place by providing them financial support with 1st month rent, cleaning deposits and other required deposits as needed. NOTO also assisted youth financially by buying any necessary housing needs such as pots/pans, beds, dressers, hygiene items etc. Each transitional youth was provided a bed, dresser and nightstand. NOTO provided one-on-one employment support services with youth which assisted them with the creation of resumes and identified potential employers. NOTO provided training and mock interviews as a team and individually to improve their interview skills.

NOTO also took appropriate career building youth to the DMV to obtain state ID cards, and other required licenses to obtain employment. NOTO provided transportation to pick up and complete job applications with youth and provided transportation to job interviews. NOTO continued to assist youth in their job searches until they reached their goal of finding employment. NOTO worked cooperatively with other agencies to help youth find employment and job training such as the Nye Communities Coalition and their Youth Werks/Safe Schools Program and JobCorps. NOTO also identified various organizations youth could volunteer at to gain job experience as necessary. Additionally, NOTO assisted youth in obtaining proper interviewing/work clothing and assisted them in paying for hygiene products and haircuts. NOTO referred transitioning youth to counseling services such as therapy with Serenity Behavioral Health and Aspire Therapeutic Solutions and other agencies where they could find counseling BST/PSR and other medical/counseling needs. Agency also provided youth support with applying for adult SSI as needed and assisted them until the SSI was approved. Agency supported youth

in any other appropriate matter needed both financially and through mentoring while they work through transitioning out of court jurisdiction.

6. Make available vouchers for education and training including postsecondary education, to youth who have aged out of foster care.

As previously stated, the Children's Cabinet has contracted to be the statewide single point of contact for administration of Nevada's ETV program, continuing from SFY 2017. All jurisdictions have been and are expected to continue ongoing staff training so that IL workers are aware of the eligibility requirements and referral process. Regional partners and youth of appropriate age are routinely surveyed. For additional discussion and performance measures for ETV statewide in all jurisdictions, please see [page 211](#).

7. Provide services to youth who after attaining 16 years of age, have left foster care for kinship guardianship or adoption.

The ILPS serves as the initial point of contact for former foster youth age 16 and over, and interjurisdictional IL workers seeking to access services for clients and former clients who may be moving to the state of Nevada. The ILPS maintains DCFS's IL portion of its website, and acts as the information clearinghouse and referral source for former foster youth over 16 to access the full range of services to which they are entitled in the appropriate jurisdiction. Statewide, while there may be a difference in the referral process for youth older than 16 who have gone into kinship guardianship or adoption, there is no difference in service provision. All are entitled to the same range of services and case management as their system-involved peers, up to and including participation on YABs and access to CFCIP and normalcy funds.

CCDFS has developed an informal process to serve these youth, whether from Clark County or youth who have transitioned from care through ICPC but have been placed in Clark County. These youth all eligible to receive all services and funding as all other CCDFS ILP youth. They are provided IL case management, referral to community partners and IL providers, Chafee financial assistance, and any other available services. These youth are also eligible to participate in our Foster and Adoptive Youth Together (FAAYT) youth advisory board and activities. IL continues to support youth who have entered in guardianship and adoption. The Policies and Procedures are being developed to address this specific population. In SFY 2019, the CCDFS Policy and Procedure unit, in conjunction with CCDFS ILP will complete the policies and procedures related to this population. The CCDFS ILP will continue to recruit new FAAYT members and work with caseworkers, CASA and adoption to ensure that youth who are at the age of 16 and over are provided with information about FAAYT. FAAYT will host additional recruitment events and seminars throughout the year to recruit new members.

In Washoe during SFY 2018 three children over the age of 16 years had a finalized guardianship under the KinGap program and anticipates two more KinGap guardianships will finalize prior to July 1, 2018. Two children over the age of 16 years had a finalized adoption. Service referrals may be made to an Adoption Support Specialist for children after a finalized adoption or KinGap guardianship, who is authorized to meet with families closed to the Agency through adoption or KinGap guardianship to assess the needs of the family and provided supportive services when necessary. Often service needs are met through community-based referrals; however, the worker may assist with financial-assistance to meet the needs of the family and to promote stabilization of the youth. Additionally, youth may contact their formal child welfare social worker for needed referrals and/or services. Access to Chafee funding and Education and Training Vouchers (ETV) are available to this population upon request and identification of need.

In DCFS Rural Region, youth that have attained 16 years of age eligible for CFCIP funding and ongoing IL services. DCFS-Rural Region identifies these youth and refers them to the program as with any other IL youth. IL workers engage and provide seamless services to these youth individually and in a group setting. These youth are invited to and participate in all workshops and YAB activities.

8. Ensure children who are likely to remain in foster care until 18 years of age have regular, on-going opportunities to engage in age or developmentally-appropriate activities as defined in section 475(11) of the Act.

ILP policy and procedure routinely emphasizes the importance of participation in age- and developmentally-appropriate activities as defined in s. 475(11) of the Act, addressed through the normalcy policy and informed by the reasonable and prudent parent standard. The purpose of the normalcy policy is to provide guidance to caseworkers in considering opportunities for children in foster care to participate in normal childhood experiences, including sleepovers, participation in athletic events, obtaining driver's licenses, opening bank accounts, etc. CFCIP funds are encouraged to be used by jurisdictions to support initiatives such as: graduation incentives, ROTC event funds, attendance at prom or other formal occasions, styling services for priority interviews, participation in sporting events, etc. The recent passing of SB 257 established a separate revenue stream out of Nevada's general state fund that is specifically to be used to fund normalcy activities for foster youth.

There have been numerous diverse opportunities provided to Nevada's foster youth statewide to engage them in age and developmentally-appropriate activities with their peers. CFCIP funding has been used for a variety of requests including: attending dances/prom; purchasing yearbooks, class rings and letterman jackets; and funding graduation expenses. In addition, CFCIP funding supports youth obtaining health cards, ID cards, defensive driving classes, and transportation to events and classes. CCDFS ILP has been able to support youth in their creative social endeavors including karate, art classes, BMX biking, DJ classes, and many other youth-driven interests. In Washoe and Nevada's Rural Region counties, normalcy is being addressed as part of QPI training initiatives, and IL youth are frequently engaged in panel discussions with participants to explain the important role normalcy activities play in their lives.

Nevada's most recent legislative session included the passage of Assembly Bill 99, which protected the rights of foster youth to act and represent themselves according to their preferred sexual orientation and/or gender identity/expression. Additionally, this legislation requires foster parents and foster care providers to treat a child as having the gender identity in which the child identifies and requires child welfare agencies to establish protocols for placement and a process for filing and resolving grievances related to the provisions of the law. Pre-workgroup in SFY 2018, input was solicited from Nevada's current/former foster youth and Nevada LIFE regarding the current grievance procedure. The feedback obtained was that the existing process was satisfactory, however, there was a lack of knowledge among IL youth regarding how to access the grievance procedure in their jurisdiction, what activities warrant a grievance, and how the procedure will occur. In SFY 2019, work will continue with all jurisdictions under the guidance of the YAB and other interested stakeholder youth to develop a youth-appropriate informational pamphlet to disseminate this information throughout the IL and foster parent networks, but also the family court, child attorney and CASA networks.

In Clark County, there are a variety of community providers involved as to ensure gender appropriate and developmentally appropriate options. For example, Operation Independence offers different levels for programming based on a young person's abilities. CCDFS ILP has continued the conversation with the LGBTQ Center in Las Vegas to identify services and resources, and referral processes for programming offered in the Center. CCDFS ILP has partnered with the Center to provide sex education classes to foster youth. These classes will occur quarterly.

CCDFS ILP has offered areas of specialization to IL staff, specifically in the areas of CSEC, youth with disabilities, and ICWA. An IL FSS staff has been designated as the IL ICWA liaison. The ICWA IL staff is assigned ICWA cases from the permanency ICWA unit. Discussion of ICWA outreach has included meeting with the permanency ICWA unit and discussing the possibility of IL Agreements and Host Homes with tribes in efforts to connect the youth with their community and partner to offer further opportunities for youth. In SFY 2019, CCDFS ILP will reach out to tribes to participate in training and provide information to tribes on the ILP as well as opportunities for transitional housing opportunities for youth, specifically host homes and IL Agreements. The program will continue to partner with the LGBTQ Center to provide services and support for ILP youth in an individualized way.

WCHSA participated in a Statewide workgroup to develop policies and training to implement the requirements of AB99 during the last reporting period. Training for staff is available through the Nevada Training Partnership and training curriculum for foster parents is in the final stages. The regulations for childcare and foster care are in the process of being finalized to comply with the new law. DCFS=Rural Region, provider RWFRC describes their approach as one in which LGBTQ activities are interwoven within the fabric of their IL service delivery. LGBTQ IL youth are encouraged to self-determine their education, career choices and lifestyle as any other IL youth – in a manner that is respectful to themselves and others. IL youth rally around one another through caring support, participation in LGBTQ events and community service projects open to any IL youth that self-identifies as LGBTQ or an ally. NOTO collaborates with QVolution to ensure that LGBTQ youth have the social support, recreation, and development needs of any LGBTQ youth ages 13 to 24, regardless of care status. NOTO ensures that LGBTQ youth have the financial support to participate in their youth group activities of choice such as youth prom inclusive for LGBTQ youth. NOTO also partners with the local high school's LGBTQ club and hosts a meeting every quarter.

Please describe your Agency's efforts to coordinate services with any Federal or State Programs for Youth (especially transitional living programs, abstinence programs, local housing programs, and programs for disabled youth, school-to-work programs offered by high schools or local workforce agencies over the last year?

During SFY 2018 public comment was provided to the Social Security Administration as part of a recent administrative rulemaking session regarding how to better assist former foster and other transitional aged youth who have been adjudicated disabled. As previously stated, beginning stages of a joint working agreement between DCFS and DWSS to improve employment outcomes for transitional aged youth has started. With the assistance and at the direction of Nevada LIFE, the ILPS signed a petition on behalf of Nevada's Foster Youth appealing to Congress to close the voluntary coverage option for aged-out foster youth who are relocating to a different state. Upon appreciating the importance of the issue, Nevada LIFE and other regional boards encouraged other current and former foster youth to also sign the petition in their

authority as stakeholders. During SFY 2019, research for additional sources of healthy relationship and domestic violence prevention service providers as a result of information gathered as part of the Statewide Assessment and will continue as will research for school to work opportunities. Regionally, two of CCDFS's partners (Operation Independence, the WIA programs), are federally funded programs designed to provide supports to transitional aged youth. Further, Clark County ILP has worked closely with St. Jude's Independent Living Program and Crossings (a supportive housing program), Graduate House (a transitional living program), Busy Bee (a transitional living for persons with disabilities), Seeds2Succeed (a transitional living program), Southern Nevada Children First (a transitional living program).

WCHSA developed working relationships with the Learn and Earn program through the Northern Nevada Literacy Council, funded through the Department of Employment Training and Rehabilitation. Referrals are also made to Vocational Rehabilitation services to help disabled youth, as well as to school work programs offered by the Children's Cabinet (Face Forward and OSY). The Northern Nevada community only has two operating transitional living programs Nevada Youth Empowerment Program (NYEP) and the Children's Cabinet, called the Cottage of Change, provide supportive living for youth over the age of 18. For youth with disabilities that are aging out of foster care the Agency partners with local providers to ensure continuity of services. WCHSA has a cooperative relationship with Northern Nevada Adult Mental Health and the Sierra Regional Center to provide services and supported housing to youth with disabilities aging out of foster care. All youth in foster care are asked about their sexual health and relationships, and abstinence education is addressed with youth in their ILPs. Planned Parenthood provides a yearly educational class about the options for birth control and partner safety. Parenting is also addressed on the ILPs of all pregnant and parenting youth. WCHSA has a working relationship with a local pregnancy support program that offers housing and parenting education. Referrals are made to this program for any of our pregnant or parenting youth.

Youth in DCFS-Rural custody served by RWFRC receive education from many community partners including: state and county sexual health programs; HUD and SSA programs for youth with disabilities and/or homeless youth; juvenile justice partnerships to coordinate crime 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; the local court system to ensure that criminal behavior is addressed and youth with criminal convictions receive coordination of services to reduce recidivism. At NOTO, IL worked closely with Transitional Living Programs such as Olive Crest, Step Up in Clark County, Seeds 2 Succeed and Graduate House to assist youth in finding safe and stable housing. These programs provide transitional living assistance to youth which help them budget their month stipends, get them to their medical appointments and other commitments like school and work.

NOTO also works closely with the Nye Communities Coalition which provided school-to-work programs such as Safe Schools and Youth Werks. These programs provide job placement opportunities, with onsite training to provide youth experience in their career fields of interest. NOTO collaborated with Jobs for America's Graduates (JAG) through the high school to speak directly to youth and to provide them with volunteer and training opportunities, and the opportunity for enrollment with the program in the high school. NOTO coordinated with First Choice Pregnancy Center, who educated the youth on the benefits of abstinence and the dangers of unprotected and unsafe sex. NOTO also worked with WIC (Women, Infants & Children) to discuss healthy habits, abstinence, and safe sex.

Agency efforts to coordinate services with programs to prevent youth homelessness and adolescent pregnancy. Address efforts if applicable to support sites utilizing Family Unification Program (FUP) vouchers for youth or efforts to support HUD's family Self-Sufficiency Program.

As discussed previously, in SFY 2019 it is the programmatic intent of IL to continue to expand the use and awareness of FUP vouchers for youth and HUD's family Self-Sufficiency Program statewide. In SFY 2018, CCDFS ILP attended the first annual Homeless Youth Summit in November 2017. CCDFS ILP committed to send a representative to be a part of the Continuum of Care on an ongoing monthly basis to collaborate with community partners with the goal of eliminating youth homelessness in Southern Nevada. Also, in SFY 2018:

- ILP contacted Minnesota Host Homes, obtained information about their program and shared this information with Foster Parent Recruitment team for possible utilization.
- ILP discussed Transitional Housing options with Mark Kroner in 2018 via conference call.
- ILP discussed need for Transitional Housing with internal grant writers. A Needs Assessment was completed for transitional housing and provided to improve outcomes for youth housing.
- ILP continues to partner with existing resources, Olive Crest and Graduate House, and remains in close communication to ensure the transition process is youth friendly and goals attainable.

In Northern Nevada, WCHSA continues to maintain a supportive relationship with The EDDY House, a program that supports homeless youth by providing collaboration and sharing of resources to support their program goals. WCHSA and the EDDY House continue ongoing discussions to address ways to best meet the needs of these youth. Additionally, WCHSA participates with NYEP as they seek guidance on how to grow their program and develop more housing options for youth. DCFS-Rural Region youth served by RWFRC receive presentations from DHHS to educate youth and case

management is provided to determine eligibility for programs such as Family Unification Program and Nevada Rural Housing Programs. NOTO has reached out to the provider of housing and the Family Unification Program provider to verify the use of vouchers in the upcoming HUD cycle. The Pahrump Family Resource Center is the coordinated entry provider for HUD housing programs in Nye County and Nevada Rural Housing Authority will coordinate with NOTO to provide vouchers to former foster youth through the Family Unification Program.

Description of Program Design and Delivery

The ILP continues to experience a status quo situation as it relates to data collection for CQI purposes and programmatic development, and the implementation of various ILP initiatives requiring IMS assistance since the Statewide Assessment. CCDFS ILP has continued to maintain 8-10 full-time and 2 part-time positions to manage and provide support services to youth in foster care in SFY 2018. There were over 600 youth ages 14 to 18 in the custody of CCDFS served throughout the year. The CCDFS ILP staff continues to provide quality case management, educational opportunities, and activities to support self-sufficiency and healthy transition to adulthood.

CCDFS ILP has continued to revise its case management program to ensure ILTPs are completed for all youth and the meetings and development of plans are youth driven and youth centered, and that youth contact requirements are met each month with ILP staff. In addition, CCDFS ILP utilizes an Introduction Packet, which is provided to all youth entering the IL program, to ensure that youth receive appropriate community referrals and services. CCDFS ILP has participated in youth education, reviewing transcripts and referring to tutoring, as appropriate. CCDFS ILP has ensured that youth have legal documents including Driver's License, ID card, Social Security cards, Medicaid cards, Birth Certificates and any other pertinent documents. Clark County ILP staff provide youth with a copy of their credit report on an annual basis and continue to participate in the NYTD-National Youth in Transition Survey.

Positive Youth Development Training and Outcomes

ILP participated in Positive Youth Development training in August 2018. The training involved motivational interviewing concepts and understanding youth development and needs. Youth driven ideas were discussed regarding Chafee requests and funding, youth centered meetings, and outreach to other areas within Child Welfare promoting Positive Youth Development concepts. Since this training, all of these areas have been developed. The Chafee policy was revised to include youth driven activities. For example, a form was created for youth to request their own Chafee funds and budget their funds for the fiscal year. Youth choice and incentive rewards were built into the updated policy revision. Youth Centered Ground Rules for the ILTP meeting were developed, focusing on youth driven concepts.
FAAYT

CCDFS ILP consulted with former foster youth regarding FAAYT and youth driven processes. Gaining a further understanding of the CCDFS ILP, FAAYT was revitalized to ensure youth lead the meetings, while CCDFS ILP provides support as needed and acts to access resource for youth as needed. Incentive reward cards were re-initiated to emphasize to the youth that their time and contributions are valuable. Viewing youth as resources and contributors, youth are provided with a \$25.00 gift card for each FAAYT attendance, and an additional \$10.00 gift card per each youth they recruit to attend a FAAYT meeting.

Incentive Reward cards continue to be provided upon graduation from IL Classes, thinkLaw program, attendance at Focus Groups and testifying when invited to do so. Youth are engaged with and reminded that their time is valuable, and their work is significant on behalf of policy and procedures that can further improve outcomes for youth in foster care and during their transition to Step-Up and adulthood. CCDFS ILP has updated the CCDFS ILP Power Point Presentation for training purposes, to reflect Positive Youth Development concepts, ILP changes implemented and community partnerships established during this past year. Outreach has been initiated and completed with new CDFS employees in the Academy, 14 out of 28 permanency units, Eagle Quest foster parents and there are further scheduled presentations and outreach to other areas within DFS and community partners. This outreach provides an opportunity to gain feedback from CCDFS and foster parents while providing information and education about ILP and the youth voice.

WCHSA participated in multi-community-based meetings and planning activities to address the needs of IL youth to include addressing employment opportunities, affordable housing, and mentoring. Case management and independent living service related duties for youth ages 16 and older with a permanency plan of APPLA, and youth who have opted in to CJ is contracted out to a community provider. WCHSA provided enhanced training in the SAFE/SIPS model and policy training related to child wellbeing during SFY 2018 to strengthen their skills and ability to provide better services to these youth. The CQI Unit completed a review of these cases in January 2018 and provided specific recommendations to improve provision of services and will continue to monitor on an ongoing basis.

As an Agency, DCFS provided individual case management and funding assistance to IL youth from 14-18 as soon as they were eligible and referred from the caseworker to RWFRC. After hiring additional IL workers, the agency has been able to provide consistent and necessary services to IL youth across Nevada, as well as form more effective partnerships with the supervising caseworker. IL youth in care engaged at an earlier age offers ease of identified services and funding to support IL youth more effectively, and IL youth in outlying areas are receiving services in a more cohesive manner. Continuity and better communication has resulted in a timelier service delivery to IL youth. Workshops and individualized case management are available at closer range providing ease of access to IL youth. NOTO has focused on community support through our creation of our Mentorship Program, which has already improved the quality of life for several of our aged-out youth. NOTO has ensured that each purpose of the CFCIP is addressed with youth individually and with clients.

Involving youth/young adults

Nevada continues to contract with FosterClub to host the electronic submission of NYTD surveys for the state. This process permits youth-driven data entry directly into UNITY. This partnership permits IL youth to enter their survey responses directly into UNITY with access to the internet, or to complete the survey manually and submit later with the assistance of their IL worker if they are in a secure placement without internet access. The Nevada LIFE social media account allows all jurisdictions and local YABs to share information and awareness on issues including CFCIP, CFSR and NYTD with youth-driven content. Although the revitalization of the statewide YAB has limited progress on items such as the grievance procedure for youth in care, development of survey and outcome measures for various program elements, and creation of a revised Nevada LIFE online board meeting space, the feedback from the face to face statewide meeting in October 2017 was primarily positive. Youth stated that they felt informed and included in programmatic decisions and outcome measures such as the CFSR, however, they acknowledged that lack of an easy to navigate, confidential means of video discussion was a barrier to this. In SFY 2019, whether a means to such communication could be obtained will be explored.

CCDFS continues to focus on the goals of the CFCIP and CFSR through stakeholder groups and community engagement processes. Clark County ILP staff received specific training for CFSR this year. Additionally, due to the requirements and nature of NYTD, youth are routinely engaged, as their feedback to support completion of the surveys integral to the completion rate in Nevada, and Clark County in particular. Youth satisfaction surveys were developed with feedback from youth to rate program satisfaction. Youth are involved in CSFRs and due to revitalization of FAAYT, youth eagerly attended CFSR focus groups in June 2018. The incentive reward cards are provided to youth for focus groups and other events involving youth input into policy, procedure and legislative changes, to honor youth as the contributors and resources in changing youth outcomes they are.

IL Committee:

The IL Committee was revitalized, and the Oversight Committee agreed upon the following changes which have been implemented in SFY 2018:

- The IL Committee is held quarterly, per request of community providers, and at various community partner agencies. Eagle Quest hosted the April IL Committee meeting, SAFY has volunteered for June's IL Committee meeting and Olive Crest will host the September IL Committee meeting.
- The IL Committee is posted on the CCDFS IL web page and posted in public areas to notify the public of dates, times, locations, the agenda and minutes.
- Former Foster youth on the Oversight committee recommended holding FAAYT at same time and place as IL committee. Youth can speak on behalf of FAAYT when this is on the agenda. Youth have voiced a desire to speak in public about their experiences in foster care and their ideas for improvement. This will provide the youth with an opportunity to speak publicly at every quarterly IL Committee meeting and hear what community providers are working on together to improve outcomes for youth.

WCHSA encourages youth participation in the Foster Youth Advisory board, WAYCUP, and Nevada LIFE. When a case is selected for CFSR review all youth/young adults involved in the case are given the opportunity to participate in the interview process. Youth are asked about their experiences in care, services they received, needs that were addressed as well as those that were not addressed. Youth feedback is shared with both case managers as well as Agency leadership to ensure their voices are heard and issues they may have experienced in care are continually addressed and improved.

Annual focus groups are conducted with all participants of the child welfare system, including IL youth. Youth are invited to participate and share their feedback about their experiences and needs. This feedback is used to ensure appropriate services are in place to meet youth's needs. Youth are educated about NYTD data collection and the benefit of the data to the youth individually, as well as to the Agency and foster youth in general. WCHSA has been successful in maintaining contact with this youth cohort due to the high number of youth engaged in after-care services. This level of engagement has allowed the Agency to continue to solicit feedback from the youth as workers maintain relationships with them once they have aged out.

DCFS Rural IL workers engage and connect with IL youth to assess needs and build relationships to provide effective services. IL workers facilitate goal setting to address individual education and employment options for IL youth while keeping continuous communication and providing services as discussed. At RWFRC, a larger IL workforce coupled with increased frequency of youth engagement through increased contacts has ensured IL youth work cohesively with IL staff to improve programming, influence changes to meet changing needs, and improve IL youth success. Harmonious relationships with IL staff encourage IL youth to maintain communication and complete all necessary reporting including NYTD. IL workers routinely communicate program, policy and legislative updates to youth with the expectation that if they wish to influence change, they participate on a YAB to do so as a means of self-advocacy.

NOTO encourages youth to participate in all agency efforts and activities available through YAB and the Independent Living Program. NOTO collaborated with youth to create our “Duffle Bag Drive” that benefits in-care youth and transitional youth. The drive is to help Pahrump’s Youth Advisory Board, a group of current and former foster youth, raise awareness of real issues facing children and youth in foster care, such as children being placed into foster care without a suitcase, or basic necessities. We also have created “Move Out” kits to help youth aging out of care with the first apartment needs like dishes and pots and pans. NOTO uses social media to encourage youth in IL to keep up to date with CFCIP, CFSR, NYTD and other related agency efforts. NOTO also works with DCFS to have IL youth attend Foster Parent Training sessions to guest speak to potential foster families on the issues foster children face in care.

Collaboration with Other Private and Public Agencies On a statewide level, the Nevada LIFE social media account and board both raise awareness of youth-identified needs through information sharing and through personal outreach efforts at local and community events. During SFY 2018 the statewide YAB participated in three foster care outreach events and shared information about issues facing youth in care via community meetings and the sharing of social media postings. In SFY 2019, Nevada LIFE will continue to engage in collaborative outreach opportunities with foster care recruitment to raise awareness of permanency needs pending budget availability. The majority of collaborative efforts have been organized at the jurisdictional level to meet the needs of the youth in an individual community according to the specific resources and community supports available.

For example, in Clark County the aforementioned programs such as Shining Star, Operation Independence, and SAFY are a result of public and private partnerships to help increase youth self-sufficiency. Additionally, CCDFS has a strong collaboration with the CCSS Step-Up program, which provides state and county funded programming and services to transitioning youth.

CCDFS ILP has met with the following community partners in SFY 2018 to learn about their programs, inform them of ILP changes and updates, and collaborate on how CCDFS ILP can best support community partners and work together to achieve better outcomes for youth in the areas of housing, education, career and well-being needs:

- Graduate House
- Mission High School
- Nevada Partners
- Olive Crest
- Eagle Quest of Nevada
- St. Jude’s Ranch for Children
- Bamboo Sunrise
- Seeds2Succeed
- Three Square
- The Center
- The Embracing Project
- Mission High School
- Project 150
- Nevada Partnership for Homeless Youth
- Legal Aid Center of Southern Nevada
- Desert Rose High School
- Big Brothers Big Sisters of Southern Nevada
- 2-1-1 and Financial Guidance Center
- CCSD Juvenile Court Schools
- RTC (Regional Transportation Center).

WCHSA continues to work closely and share information with a variety of public and private agencies, including the Washoe County School District (WCSD) and Washoe County Department of Juvenile Services. Opportunities exist to raise awareness with our public partners through public forums to discuss homelessness and mental health service delivery for youth in foster care. During SFY 2018, the Foster Parent Support Group meetings were transitioned back to the foster

parents. This group has taken control of the monthly support group dinners and has provided some ongoing trainings and smaller support groups to help newer foster parents. Meetings were moved from the Boys and Girls club to the Family Engagement Center. Although the Boys and Girls Club no longer provides the space for these meetings they continue to assist us for foster parent Christmas activities and mixers that are held throughout the year.

Also, during SFY 2018, WCHSA invited partners, and staff from the WCSD to learn about ways they could collaborate with WCHSA to serve youth in foster care aged 13-18. WCHSA held an event and met with staff and various parent-teacher organizations to discuss mentoring opportunities and issues that foster youth face. A list of individuals was compiled who are willing to help foster youth in ways other than fostering, such as mentoring or providing transportation. The agency has gone back to that list on several occasions to enlist the help of these individuals to provide transportation and other forms of support to youth in foster care. In SFY 2019, WCHSA hopes to continue building resources through exploration of the iFoster program. This program provides employment training to children who are in foster care or have aged out of foster care. Currently, the Agency is working on finding a local nonprofit partner to house the employment training program.

Crossroads:

The Crossroads program provides a tiered housing-first approach that targets homeless clients with high levels of service utilization within Washoe County. The intent of the program is to identify, intervene and stabilize traditionally high complexity homeless clients, through cooperation with various community partners. Our success has grown allowing us to reduce incarceration by expanding services to young offenders, many of whom have aged out of foster care, and anyone else who suffers from mental health and/or substance abuse that otherwise has negative impact on our community. The goal is to offer an alternative to homelessness and incarceration by offering the tools necessary for all community members, including children who have aged out of foster care, to be successful citizens while remaining drug and alcohol free.

RWFRC during SFY 2018, public and private sector partnerships were utilized in paid and unpaid work experiences, field trips, community service projects, Foster Care Awareness Month, State of Nevada Legislature - Children's Week, LGBTQ training and awareness, and the Court Improvement Project for the Supreme Court's Foster Youth Panel to educate our supreme court justices as to the inadequacies in the foster care system. NOTO worked closely with both public and private sectors to ensure that our youth in foster care achieved independence by having a monthly guest speaker from different agencies such as banking specialist, JAG, Property Manager, Mechanics, Youth WERKS, Small Business Development Center to name a few. Our agency attended the Nevada LIFE annual conference to discuss and raise awareness on human trafficking and how it directly effects foster youth. NOTO created a Duffle Bag Drive for foster youth, not only raising awareness on the needs of youth/young adults in foster care, but also provided them with brand new duffle bags filled with necessities by obtaining business/community sponsorships. Both agencies source donations and additional assistance from private business donors as a matter of course.

Human Trafficking

On a statewide level and on May 31, 2016, Governor Brian Sandoval signed Executive Order 2016-14 creating the Nevada Coalition to Prevent the Commercial Sexual Exploitation of Children (Coalition) in response to a growing awareness of the need to identify and serve these child victims.

Mission: To combat commercial sexual exploitation of children in Nevada with a trauma-informed and victim-centered approach.

Upon establishing the Nevada Coalition to Prevent the Commercial Sexual Exploitation of Children (Coalition), Governor Sandoval directed the Coalition to prepare a comprehensive statewide strategic plan and recommendations on how to address the sex trafficking provisions of PL 113-183, including, but not limited to, the following:

- Aligning efforts by promoting strategic and coordinated services for victims at the State, county, local and tribal levels.
- Improving understanding by expanding and coordinating child sex trafficking-related research, data, and evaluations to support evidence-based victim services.
- Expanding access to services by providing outreach, training, and technical assistance to increase victim identification and expand the availability of services.
- Improving outcomes by promoting effective, culturally-appropriate, trauma-informed services that improve the short- and long-term health, safety, and well-being of child victims.
- Developing public awareness campaigns to better inform communities across Nevada about the commercial sexual exploitation of children.

Additionally, on a statewide level, the Nevada training partnership offers trainings to educate child welfare staff on how to identify sex trafficking and the available resources in their respective communities. State of Nevada has a Commercially Sexually Exploited Children Commission with multiple subcommittees that are in the process of developing a statewide protocol, policies and procedures for child welfare agencies CCDFS also has had direct involvement with every CSEC coalition subcommittee, including:

WCHSA is the lead in a local taskforce which includes: law enforcement; treatment providers; community advocacy groups, and front-line staff. This taskforce exists to review protocols related to identification and referral to services for victims and is useful in staffing youth of concern to identify treatment options and create a support network for high risk or confirmed trafficking victims. WCHSA is an active participant in Commercially Sexually Exploited Children's Commission and is working on the creation of a statewide model protocol that will include data collection standards and screening and assessment tools. WCHSA has completed training and installation of the Nevada Rapid Indicator Tool to screen potential victims of trafficking. This tool is completed for all children, ages 10 and older that encounter the child welfare system. When youth are identified as being high risk, or confirmed a victim of sex trafficking, service referrals are put into place to assist.

Rurally, NOTO collaborated with the director of Las Vegas Congo Justice, the SEEDS of Hope Organization and FosterClub by providing youth with information on human trafficking and the real dangers foster youth face. The Independent Living Program also worked with No to Abuse to provide education regarding the dangers of human trafficking and recognizing the signs of persons being trafficked. In addition, No to Abuse has provided education regarding domestic violence issues many youth face.

NYTD Describe how your agency, over the last SFY 2017, has informed partners, tribes, courts and other stakeholders about NYTD data and involved them in the analysis of the results of the NYTD data collection. Describe how your agency has used these data and any other available data in consultation with youth and other stakeholders to improve service delivery in the last year.

Whenever available, all NYTD data is publicized on DCFS's website and the Nevada LIFE social media page. NYTD data is shared with the statewide IL network on the next monthly workgroup call for review, discussion, CQI discussions, and other questions (which may follow in subsequent months after internal CWA review). The NYTD data is further shared to Nevada LIFE for discussion, review, comments on its perceived accuracy by ILP participants and dissemination in its original form to regional YABs for a similar process locally. As the CQI process is limited due to data collection issues previously discussed, there has been limited ability to use NYTD data for statewide program improvement or improvements to service delivery.

In Clark County, the NYTD data continues to be integrated into the CCDFS ILP and other efforts within the child welfare agency to utilize the data obtained for system and service improvements. CCDFS ILP has worked diligently to follow up on the needs of these youth and has offered resources and services as indicated. WCHSA has ongoing discussions with those youth about the purpose of NYTD and the desire to collect data from them in 2-year increments. Most youth continue to receive on-going service provision either through FAFFY or court jurisdiction; therefore, their whereabouts are known to us. Once a child turns 21, we have less contact with youth. NOTO has informed partners, tribes, courts and other stakeholder groups and community engagement by routinely attending and discussing with other regional IL Programs and at the statewide level in meetings such as the CIP, and FAAYT, where youth voice is integral. NOTO continues to work on our partnerships, relationships and communication between DCFS caseworkers, foster parents and other contracted service providers to ensure that the IL service is effective. NOTO communicates with stakeholders about the IL program, and the services and funding that are available to youth.

NYTD Data Collection

In SFY 2018, the ILP reviewed follow up cohort survey data to determine that NYTD completion requirements expected a different response than blanks and was able to resolve this issue independently by contacting youth to determine their accurate employment status. In SFY 2019, the ILPS will work with FosterClub to resolve this issue via internal survey coding to improve data collection and ease of use for survey participants. As a result of discussions with the IL network during statewide workgroup, it was identified that a potential barrier to location exists between the baseline and first follow-up cohort. Through collaborative discussion it was learned that those youth who elect to age out of care and not participate in CJ may not necessarily present for additional services beyond ETV, and as such, may lose contact with program. In SFY 2019, the ILPS will provide all baseline cohort lists of survey participants to those organizations that will be expected to conduct follow-up surveys so that youth may be accurately identified and introduced to their survey organization prior to age-out. The use of the Nevada LIFE social media and board meetings has provided an additional means to increase youth participation and data collection during SFY 2018 and will be expanded during SFY 2019. Youth are made aware that NYTD data is geared to CFCIP funding, and that their participation helps to ensure a full range of benefits to those foster

youth who are younger than them. Upon learning this, youth engagement in NYTD and sharing the importance of NYTD completion among foster youth increased as measured by participation in message-sharing activities because of attendance at Nevada LIFE board meetings.

CCDFS ILP has identified specific IL staff to complete NYTD surveys and conduct diligent searches to locate aged out and recently relocated youth to complete surveys. IL unit will continue to use various methods in locating youth such as: Facebook; phone; email; contacting family members; diligent search; contacting CAP attorneys, CASA and friends; and sending certified letters. IL has created a spreadsheet that documents all efforts and dates for tracking purposes.

Further Goals for SFY 2019:

- Further partner with foster parents and provide resources for training and consultation so that youth and foster parents are supported as youth learn independent living skills.
- Resume building and career interest tests available to all youth
- Continue to build existing community partnerships and develop new community partnerships
- Increase number of youth involved with employment.
- Increase number of youth who have a long-term mentor
- Increase partnerships with community mentoring agencies
- Define efforts and track outcomes to obtain and maintain long term adult connections and emotional permanence
- Increase percentage of youth who obtain post-secondary options
- Continue to outreach to the community partners.
- Increase technology access for youth (phones/computers) for educational purposes
- Continue to build Partnership between DJJS, CCSS, CCDFS
- Continue to ensure youth presence and voice in the process of changing policy and procedure
- Ensure global system awareness of NYTD.

Similarly, in Washoe when the WCHSA is not able to find youth for completion of the NYTD data, the Agency employs designated diligent search staff to search for youth to collect data. Due to the existence of extensive after care services for aged out youth in the community, coupled with successful efforts to engage these providers with NYTD data collection the Agency has had robust participation in NYTD. In addition, the Agency has worked diligently to foster positive ongoing relationships with this cohort and has been able to solicit their feedback on an ongoing basis.

RWFRC further utilized good communication to achieve similar results in SFY 2018. Data collection has improved with frequent communication and follow through to survey completion by all stakeholders. IL workers engage youth and communicate the importance of the NYTD data collection and the impact this data will have to improve programming for future foster youth. IL workers keep continuous contact with youth that are surveyed to ensure consistent and accurate data. NOTO has adopted an approach that is a hybrid of that of CCDFS and WCHSA and has identified specific IL staff to complete NYTD surveys and conduct diligent searches to locate youth to complete surveys. NOTO will continue to use various methods in locating youth such as; Facebook, phone, email, phone, contacting family members, diligent search, CAP attorneys, CASA, friends and certified letters, and documents all efforts and dates of contact.

Training in support of the goals and objectives of the CFCIP to help foster parents, relative guardians, adoptive parents, workers in group homes, and case managers understand and address the issues confronting adolescents preparing for independent living.

As previously discussed, ongoing outreach efforts as part of the QPI and ILP initiatives to promote normalcy understand and appreciate both the issues confronting adolescents preparing for independent living, and those who are preparing for independent living with the additional layer of identifying as LGBTQ.

The Nevada Partnership for Training (NPT) offers a course titled, Working with Lesbian, Gay, Bisexual, Transgender and Questioning/Queer (LGBTQ) Youth & Child Welfare. This training has been held in various rural locations including Reno, Las Vegas, Elko and Pahrump in SFY 2018. The purpose of this training is to provide an overview of issues faced by LGBTQ youth in out-of-home care and LGBTQ related to cultural competence. Additionally, participants will identify the unique issues and challenges facing LGBTQ youth in out-of-home care, and their parents, other caregivers and service providers and settings. Participants will learn how to assist child welfare workers and service providers in addressing these issues with children and youth, their parents, other caregivers and colleagues. Foster parents, adoptive parents, workers in group homes, IL staff, IL service providers, and staff are all encouraged to attend this LGBTQ course.

Through IV-B/IV-E programming, DCFS-Rural Region foster parent training focus includes - P.R.I.D.E. – Parent Resources for Information, Development and Education is the model practice adopted for training and supporting adoptive, foster parents and kinship families. This competency-based curriculum trains and supports families in five categories: Protecting and nurturing children, meeting children’s developmental needs and addressing developmental delays, supporting children’s relationships with their birth families, connecting children to safe, nurturing relationships intended to last a lifetime

and working as a member of a professional team. Trained professionals deliver training in all areas. SAFE home studies insure living arrangements are ample, appropriate and provide a safe and healthy environment for IL youth. NOTO collaborates with DCFS every quarter by attending their scheduled foster parent training to discuss our policies and practices so that new foster parents are aware of the independent living program and how our program is used in conjunction with state social workers and the services that Independent Living Program can provide to the eligible teens placed with them and the resources available to them in our communities to address the needs and unique issues confronting LGBTQ youth.

Annual Reporting of Education and Training Vouchers (ETV) Awarded in Nevada

	Total ETVs Awarded	Number of New ETVs
Final Number: 2016-2017 School Year (July 1, 2016 to June 30, 2017)	2016-2017 School Year* July 1, 2016 – June 30, 2017 = 76 Total Served	2016 – 2017 School Year* July 1, 2016 – June 30, 2017 = Total New Students 28
2017-2018 School Year* (July 1, 2017 to June 30, 2018)	2017-2018 School Year* July 1, 2017 – May 16, 2018 = 67 Total Served *Estimate 72	2017 – 2018 School Year* July 1, 2017 – May 16, 2018 = Total New Students 38

*(Identify the number of youth (unduplicated count) who received ETV awards. An estimate may be provided of the total for the 2017-2018 school year.)

- Specific accomplishments and progress to establish, expand, or strengthen Nevada’s postsecondary educational assistance program to achieve the purpose of the ETV program based on the plan outlined in the 2015-2019 CFSP.
 1. The ETV Program continues to provide and award parole youth, ETV has awarded 4 parole youth this current year (17/18).
 2. The Children’s Cabinet continues to collaborate with WCHSA and the Truckee Meadows Community College (TMCC). This year’s Foster Youth Summits were held in October of 2017 and April of 2018. This summit is a staple to introduce High School (HS) seniors and other first-time college students to the campus of TMCC, explain the overall process of financial aid, accuplacer test scoring, orientations, the TMCC “to do” list, and to introduce the students to the people at TMCC who there are to help, while providing needed support to ongoing students. ETV is also in collaboration with CCDFS Independent Living in Las Vegas. ETV stays in communication with all Step-Up workers regarding mutual clients.
 3. The Children’s Cabinet continues to utilize the “TMCC Foster Youth Consent Form”. This enables sharing of information regarding foster care status, college enrollment, financial aid and academic standing to better serve any/all Foster youth as a team. TMCC is the primary holder of the release which remains valid until youth turns 23 years of age unless revoked in writing. This collaboration includes a TMCC staff mentor (Precious Hall, Ph.D.). By utilizing this mentor, the youth receive early registration, 1 on 1 college support services from what classes to choose to financial aid status and another adult to provide encouragement along the educational path. A continued side goals is to expand the sharing of information throughout the higher education system within the State of Nevada.
 4. ETV continues to track the appropriate release of information and funds between the youth and school of attendance, FAFFY providers, Court Jurisdiction provider, and/or possible Chafee providers to avoid duplication of benefits under this and any other federal or federally assisted benefit program.
 5. The ETV Program continues outreach at the state and local youth advisory boards and/or councils.
 6. The ETV Program will continue outreach at the state youth conferences as invited.
 7. The Children’s Cabinet and Northern Nevada Mental health is continuing their collaboration to increase guided access to needed mental health services for youth.

8. The ETV Program continues to accept applications throughout the current school year to ensure any/all eligible youth may be served. ETV recently requested, March 21st State of Nevada Review with Jennie Bear, assistance in development and implementation of an electronic application process.
9. ETV applications may be found online in both the State website <http://dcfs.nv.gov/Programs/CWS/IL/ETV/> and The Children's Cabinet website <http://www.childrencabinet.org/family-youth/youth-programs/foster-youth-support>
10. ETV offers direct deposit for monthly stipends and/or allowable reimbursements.
11. ETV continues to survey their clients anonymously to ensure program accountability.
12. ETV is currently working on developing a survey that allows our students to speak out about why students drop out that will possibly help us identify struggles previously non-disclosed.
13. ETV is currently working on developing a data collection spread sheet that will allow us to easily track (Name, Age, Credits Taken, Credits Earned, GPA, Jurisdiction, and if student is CJ/AB350/or FAFFY Only) we've been working with our ODES system and client files to gather this data.
14. ETV is currently working on developing a process where we can follow up with youth at age 24 and 25 to identify accurate graduation rates.
15. ETV has a great success story this year; one of our youth will be graduating with her bachelor's degree in Business Management at San Diego University. Client to ETV: "I graduate next weekend which is super exciting! I'll be starting a full-time job as an executive team lead for Target in July! Thank you for all of your help the past few years, I really appreciate it. ETV has really helped me a lot and I'm very thankful :)"

APPENDIX D: Child Welfare Protective Services Workforce

There are approximately 567 child welfare positions in Intake, Investigations, In-home/Out-of-home Case Management, Adoption, and Licensing with 22 vacancies statewide. Additionally, statewide there are approximately 120 Supervisory/Management child welfare positions filled and 5 vacancies.

CCDFS Child Welfare Protective Services Workforce:

For State Fiscal Year (SFY) 2018 CCDFS reports that their agency has approximately 482 child welfare positions in Intake, Investigations, In-home/Out-of-home Case Management, Adoption, and Licensing filled. Additionally, there are approximately 81 Supervisory/Management positions filled with 1 vacancy. CCDFS reports the following caseload ratios: Investigations 1:17, Advanced Investigations 1:5 (specialize in 5 and under, ERT and sex abuse) and Permanency Case Management 1:13. Supervisor ratios to staff are 1:5 in Investigations, and 1:5 in Permanency Case Management. Staff separations during this reporting period included 4 retirements, 9 dismissals, and 28 voluntary resignations. There were approximately 35 promotions/laterals.

Additional CCDFS Workforce Information:

- **How staff are recruited and selected:**

CCDFS Staff are recruited through the CCDFS Human Resources website at www.accessclarkcountynv.gov. CCDFS Staff are recruited through the CCDFS Central Human Resources Department. Their information can be viewed at www.clarkcountynv.gov

- **Degrees and certifications required for your agency child welfare workers and professionals responsible for the management of cases and child welfare staff:**

Agency child welfare workers and professionals responsible for the management of cases are required to possess a 4-year college degree.

EDUCATION AND QUALIFICATIONS: Family Services Specialist I - Bachelor's Degree in one of the following areas: 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.

Family Services Specialist II - In addition to the above: Two (2) 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.

Family Services Supervisor- Bachelor's Degree in one of the following areas: 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.

- **Demographic information on current staff and recent hires.**

On May 11, 2018 CCDFS surveyed 166 staff from varying levels to collect basic demographic data about education and experience. The following are the results of this survey.

Degree	Count of Respondents
Bachelor of Social Work	16
Title IV-E Supported BSW	0
Bachelor in Another Field	77
Master of Social Work	13
Title IV-E Supported MSW	0
Master in Another Field	36
Other Degree	3
Doctoral Degree (all disciplines)	2
Some College	7
Associates Degree	6
High School Diploma	

Child Welfare Experience

Total Years of Experience	Count of Respondents	Total Years of Experience	Count of Respondents
Less than 1	4	8	5
1	2	9	4
2	3	10	19
3	7	11-15	35
4	5	16-20	37
5	3	21-24	13
6	10	25-30	12
7	3	30+	3

Race/Ethnicity

Race/Ethnicity	Respondents
African American/Black	31
Asian	6
Caucasian/White	104
Native American/Pacific Islander/Native Alaskan/Native Hawaiian	7
Multi-Racial	2
Not listed Here/Other	2
Prefer not to Answer	5
Not Listed here	4

Training provided to new child welfare workers to ensure competencies identified:

NRS 432B.195, NRS 432B.397, and NAC 432B.090 requires the child welfare agency 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, course of training related to the provisions of the Indian Child Welfare Act (ICWA), and instruction concerning the applicable state and federal constitutional and statutory rights of a person who is responsible for a child's welfare, subject of an investigation of alleged abuse or neglect of a child, or a party to a proceeding concerning the alleged abuse or neglect of a child.

Salaries

Salaries for CCDFS Family Services Specialist, Senior Family Services Specialist and Family Services Supervisors range from 48,568-94,785.60

- **Caseload size depending on the child welfare program (i.e. intake, reunification)** Investigations: 17 cases per Investigator, 5 per Advanced Investigations and 13 cases per Permanency Specialist.
- **How ongoing training is selected and provided to ensure the competencies of caseworker, supervisors, managers and administrators:**
Executive Management selects trainings that will increase staff's knowledge of safety, permanency and well-being.
- **How skill development of new and experienced staff is measured;**
Skill development of new staff is assessed throughout their attendance in the Child Welfare Training Academy through the use of post-tests and fidelity assessments. New staff is also issued a performance evaluation at the conclusion of their probationary or qualifying period. Skill development and performance of existing staff is also measured annually through performance evaluations.

WCHSA Child Welfare Protective Services Workforce:

For SFY 2018 WCHSA reports that their agency has approximately 83 child welfare positions in Intake, Investigations, In-home/Out-of-home Case Management, Adoption, and Licensing filled with 7 vacancies. Additionally, there are approximately 21 Supervisory/Management positions filled with 3 vacancies. WCHSA reports the following caseload ratios: Assessment 1:10, CAC Assessment 1:8 (specialize in sexual/physical abuse reports) and In-home/ Out-of-home Case Management 1:28. Supervisor ratios to staff are 1:6. Staff separations during this reporting period included 1 retirement, 1 dismissals, and 5 voluntary resignations. There were 16 promotions during this period.

Additional WCHSA Workforce Information:

- **How staff are recruited and selected:**
Staff are recruited through local and statewide outreach efforts through the Human Resources Department. Selection includes a two-part process: 1) candidates watch a video clip of a parent/child interaction and document a case note and review a case scenario and write a letter to the department director. Candidates who successfully pass this process are invited to an interview. Prior to the interview, candidates are encouraged to watch a video clip on a Day in the Life of a Social Worker filmed in Maricopa County, AZ. Candidates then are interviewed with a behavior-based approach and include a self-assessment. Finally, reference checks are completed as part of the hiring process. Additionally, interns through the local University are screened and interviewed prior to being offered an internship. Interns are generally offered employment through the stipend program.
- **Degrees and certifications required for your agency child welfare workers and professionals responsible for the management of cases and child welfare staff**
All case management staff are required to have a bachelor's degree, Social Work preferred or related to Social Work. The minimum degree for Social Workers and Case Workers is a Bachelor's degree in Social Work or a related field. 100% of staff performing case management have one of these degrees. Once hired by the WCHSA, training

includes an established Academy training and extensive internal training through the Training Unit. All new staff are assigned to the Training Unit for a period averaging 6 months. In the Training Unit workers attend internal trainings as well as carry caseloads with the supervision of senior social workers. Hiring preference is given to graduating interns and bilingual candidates.

- Bachelor of Social Work (BSW): 124
- Title IV-E supported BSW: 67 IV-E supported BSW Workers
- Master of Social Work (MSW): 23
- Title IV-E supported MSW: 21
- Other Degree: 18
- **Years of child welfare experience or other related experience working with children and families.**
Unavailable
- **Demographic information on current staff and recent hires.**
- **Race/Ethnicity**
Asian/Pacific Islander - 3
Hispanic/Latino – 18
White/Not Hispanic Origin – 96
American Indian/Alaskan - 0
Black/Not Hispanic Origin – 6
Prefer not to disclose- 02

- **Salaries:**
Range for Case Manager is \$50,752.00 – 70,553.60 annually, Social Worker is \$50,752.0 – 78,249.60 annually, Sr. Social Worker is \$65,936.00 – \$85,737.60, and Social Services Supervisor is \$70,033.60 – \$91,000.00.

- **Position Types:** Case Worker I and II, Social Worker I, II, III, Sr. Social Worker, and Social Services Supervisor

- **Training provided to new child welfare workers to ensure competencies identified:**
NRS 432B.195, NRS 432B.397, and NAC 432B.090 requires the child welfare agency 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, course of training related to the provisions of the Indian Child Welfare Act (ICWA), and instruction concerning the applicable state and federal constitutional and statutory rights of a person who is responsible for a child's welfare, subject of an investigation of alleged abuse or neglect of a child, or a party to a proceeding concerning the alleged abuse or neglect of a child. All newly hired staff must attend at a minimum the 10-week Core Competency training through the NPT. All newly hired staff are assigned to an advanced training unit for generally six months and are assigned to one of three Senior Social Workers trainers.

Caseload size depending on the child welfare program (i.e. intake, reunification)

1:10 Assessment, CAC Assessment 1:8 and 1:28 Permanency

- Information related to tracking staff turnover and vacancy rates.
 - Retirements; **1**
 - Dismissals: **1**
 - Lateral or promotional moves: **16**
 - Voluntary resignation: **5**
- Supervisor-to-Worker Ratios: 1:6

DCFS Rural Region Child Welfare Protection Workforce:

For SFY 2018 the DCFS Rural Region reports their agency has approximately 52 child welfare positions in Intake, Investigations, In-home/Out-of-home Case Management, Adoption, and Licensing filled with 14 vacancies. Additionally, there are approximately 18 Supervisory/Management positions filled with 1 vacancy. The DCFS Rural Region reports caseload ratios: Investigations 1:12, In-home/Out-of-home Case Management 1:20. Case Managers in smaller satellite offices who carry a combined caseload (Investigations and out-of-home cases) and have a 1:24 caseload.

Supervisor ratio to staff are as follows: Four have 1:6 ration; five have 1:5 ratio; six have 1:4 ratio, and one supervisor has a 1:2 ration. Staff separations during the reporting included 0 retirements, 0 dismissal, and 11 resignations. There were 2 promotions during this period.

Additional DCFS Rural Region Child Welfare Protection Workforce Information:

- **How staff are recruited and selected:**

Staff are recruited on the State of Nevada Personnel website on an ongoing basis and social work positions are posted nationally at all Universities with a Social Work Program, on Craig's List and regionally at the University of Nevada-Reno and Las Vegas Campuses. Staff is selected through an interview process, verification of references and ability to obtain and maintain Nevada Social Work Licensure

- **Degrees and certifications required for your agency child welfare workers and professionals responsible for the management of cases and child welfare staff:**

In spring of 2018 the State of Nevada created new class specifications for DCFS, the Casework Management Specialist series. The positions in this series may be licensed social workers, or have a Bachelor's degree from an accredited university in early childhood education, special education, human growth and development, criminal justice, psychology, counseling or closely related social/human services related field. DCFS is currently in the process of hiring seven (7) positions in this class. The training requirements for these staff will mirror the training requirements DCFS have for licensed social worker, clinical social worker, Independent social worker or associate in social work.

- **Demographic information on current staff and recent hires. For example:**

- Educational Degrees, such as the number of child welfare workers with a:

- Bachelor of Social Work (BSW): **61**
- Title IV-E supported BSW 19
- Master of Social Work (MSW):16
- Title IV-E supported MSW; or 4
- Other Degree: **0**

- **Years of child welfare experience or other related experience working with children and families**

- Twenty-eight (28) have between 1-5 years of experience, fifteen (15) have between 6-10 years of experience, twenty-two (22) have between 11-20 years of experience, and four (4) have over 20 years of experience.

Race/Ethnicity

Unavailable

Salaries:

Depending on experience the entry pay range begins at step four as follows: Social Worker 1's -\$48,337.20 to \$62,807.04; Social Worker 2's -\$52,742.88 to \$68,674.32; Social Worker 3's -\$55,039.68 to \$71,806.32; Social Work Supervisors -\$60,092.64 to \$78,613.20; Social Service Managers -\$65,751.12 to \$86,109.12

Position Types:

Intake, CPS/Assessment, Permanency/Ongoing, Independent Living, ICPC, Adoption, Quality Assurance and Training; Foster Care Licensing, Quality Assurance Supervisor, Social Work Supervisors, Social Service Manager III, Social Services Manager V.

- **Training provided to new child welfare workers to ensure competencies identified:**

NRS 432B.195,NRS 432B.397, and NAC 432B.090 requires the child welfare agency 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, course of training related to the provisions of the Indian Child Welfare Act (ICWA), and instruction concerning the applicable state and federal constitutional and statutory rights of a person

who is responsible for a child's welfare, subject of an investigation of alleged abuse or neglect of a child, or a party to a proceeding concerning the alleged abuse or neglect of a child.

Nevada Partnership for Training (NPT) Academy curriculum, a 10-week course that consists of five weeks of in-class instruction, complete with pre-reading assignments and homework with alternating weeks (5) of on-the-job training. Child Welfare supervisors must attend the Nevada New Worker CORE Orientation and are in communication with Nevada Partnership staff to discuss new workers' understanding of concepts and proficiency of translating concepts to fieldwork

- **Caseload size depending on the child welfare program (i.e. intake, reunification)**

Investigators have a 1:12 caseload ratio; Out-of-home workers have a 1:20 caseload ratio; and workers in smaller satellite offices who carry a combined caseload (investigations and out-of-home casework) have a 1:25 caseload ratio. There are no caps on caseloads for DCFS. The average number of cases is between twenty-two (20) and twenty-four (24) although some caseloads in frontier offices can routinely be higher, due to an increased need and/or vacancy. Although Caseworkers may have a specific area of concentration, they are generalist, and as such perform all necessary child welfare functions such as; Emergency On-Call Response, Assessments (formerly CPS investigations) and Ongoing (formerly Substitute Care). Supervisors do not normally carry a caseload, although currently several are carrying a caseload, in addition to all their other supervisory requirements, until new staff can be hired and trained.

- **Information related to tracking staff turnover and vacancy rates.**

- Retirements: 0
- Dismissals/Transfer: 0
- Lateral or promotional moves: 2
- Voluntary resignation; 11

- **Supervisor-to-Worker Ratios:**

Four (4) supervisors have a 1:6 ratio; five (5) supervisors have a 1:5 ratio; six (6) supervisors have a 1:4 ratio; and one (1) supervisor has a 1:3 ratio

ATTACHMENTS

ATTACHMENT A: Citizens Review Panel Report

ATTACHMENT B: DCFS Response to Citizens Review Panel Report

ATTACHMENT C: Foster and Adoptive Parent Diligent Recruitment Plan

ATTACHMENT D: Health Care Oversight and Coordination Plan

ATTACHMENT E: Disaster Plan

ATTACHMENT F: Training Plan

ATTACHMENT G: Financial Information

ATTACHMENT H: Child Welfare Workforce Awareness Training for (CSEC).