



North Carolina Dept. of Health & Human Services  
Division of Social Services  
Child Welfare Services Section

Child and Family Services Plan  
Fiscal Years  
2015-2019

June 2014

## Executive Summary

The submission of this Child and Family Services Plan for FFY 2015-2019 is required of all state agencies that administer or supervise the Title IV-B, subparts 1 and 2, and Title IV-E of the Social Security Act and provides an accounting of the programs and services delivered in North Carolina (NC). The contents of this plan are dictated by the U.S. Department of Health and Human Services, Administration on Children, Youth and Families, Program Instruction ACYF-CB-PI-14-03. The North Carolina Department of Health and Human Services (DHHS) has determined that to be successful in full filling its vision that all North Carolinians enjoy optimal health and well-being that the following values are infused into every aspect of our work:

- Customer Focused
- Anticipatory
- Collaborative
- Transparent
- Results Based

Incorporated into this vision statement is our mission statement that our work with families in NC will be conducted in collaboration with its partners, in a manner that protects health and safety while providing essential human services.

DHHS has implemented 5 service goals that align with the service principles found in federal regulations at 45 CFR 1355.25. The Division of Social Services (NCDSS) under the umbrella agency of DHHS adheres to these service goals and has them in all aspects of its child-serving, Child Welfare Services Program. These service goals are:

1. Manage resources to provide effective and efficient delivery of services to North Carolinians
2. Expand awareness, understanding and use of information to enhance the health and safety of North Carolinians
3. Provide outreach, support and services to individuals and families identified as being at risk of compromised health and safety to eliminate or reduce those risks
4. Provide services and supports to individuals and families experiencing health and safety needs to assist them in living successfully in the community
5. Provide services and protection to individuals and families experiencing serious health and safety needs that are not, at least temporarily, able to assist themselves with the goals of helping them to return to independent, community living.

These service goals undergirds our strategic planning efforts to strengthen NC's Child Welfare System administered through NCDSS, while supporting and integrating all of the programs that serve the children and families of NC into a seamless child welfare continuum. These include: the IV-B, subparts 1 (Stephanie Tubbs Jones Child Welfare Services Program) and subparts 2 (Promoting Safe and Stable Families Program) of the Act; monthly case worker Visits funds; and the CFCIP and ETV programs for older and/or former foster care youth; adoption incentive funds, and training funded through IV-B and IV-E. The comprehensive consolidation of these service plans will assist NC in its efforts to integrate the full array of child welfare services, from prevention and protection through permanency (45 CFR 1357.15(a)).

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## I. General Information

North Carolina's FFY 2015-2019 Child and Family Services Plan (CFSP) integrates the Child and Family Services Review (CFSR) and builds upon the FFY 2010-2014 CFSP and subsequent APSR's. This CFSP is posted on NCDSS website at <http://www.ncdhhs.gov/dss/stats/cw.htm>.

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### A. State Agency Administering the Programs

The North Carolina Department of Health and Human Services (NCDHHS) is the designated single state agency with authority to prepare and submit the Child and Family Services Plan (CFSP) and is the sole state agency responsible for administering or supervising the administration of the CFSP for the Child Welfare Services Program within the State. Therefore, in accordance with *45 CFR 1356.60(b)(2)*, activities will be cost allocated based on the benefiting program concept. Training Activity costs will be shared under Title IV-E and other federal and local resources as part of the NCDSS Comprehensive Child Welfare Training Plan. These sources of funding in combination with state appropriations cover the expenses of the entire comprehensive child welfare training program.

North Carolina is a state supervised county administered child welfare system as identified by N.C. G. S. § 7B-302. This law specifically identifies that County Directors of Social Services are responsible for the provision of protective services for all children who are abused, neglected or dependent. This CFSP is focused on Reaching for Excellence and Accountability in Practice (REAP) which is North Carolina's framework for Continuous Quality Improvement (CQI), moving forward.

### B. Vision Statement

The vision for DHHS is noted in the Executive Summary; additionally, NCDSS vision includes family centered practice principles and the provision of services that promote security and safety for all. The values underlying a family-centered practice approach include: providing services with respect to the individual's family, kin, friend, and community networks, acknowledging families as experts in their own situations, promoting families generating their own solutions and participating in planning and decision making, focusing on strengths, promoting both family empowerment and family/service provider accountability, respecting diversity, engaging and partnering with community, local, and informal supports using the principles of partnerships as a guideline for service provision:

- Everyone desires respect
- Everyone needs to be heard

- Everyone has strengths
- Judgments can wait
- Partners share power
- Partnership is a process

NCDSS renews its commitment to this vision of family-centered practice while elevating well-being into all of our conversations with children/youth, their families, and the communities that we engage.

### 1. Collaboration

NCDSS has formally adopted the Reaching for Excellence and Accountability in Practice (REAP) model as its framework for engaging families and communities in the meaningful planning and execution of its child welfare services. Not all counties in North Carolina have “adopted” REAP; however, the philosophy that accompanies REAP around collaboration has been and will continue to be a cornerstone in our Child Welfare system. In collaboration with our county and community partners, we share accountability for reaching core achievements (outcomes) for children, youth and families. We have adopted a CQI approach to child welfare that is data-driven, results-oriented, and tailored to the specific strengths and needs of each community.

The utilization of REAP has permitted, and encouraged, on-going collaboration with our state and local level stakeholders; university partners, county departments of social services, Administrative Office of the Court (AOC), Public Health, Public Instruction (education), System of Care (mental health and substance abuse), state and federally recognized Tribes, child advocates and family partners. As a result, these stakeholders are involved in the development of this CFSP and the ongoing assessment of progress. The table below highlights some stakeholder engagement activities, the manner in which engagement will continue and the role that each agency has played in the development of the FFY 2015-2019 CFSP as it relates to the review of data, the assessment of agency strengths and the selection of goals and objectives. This Table represents a mixture of agencies and structures for Stakeholder Engagement Summary:

Agency	Engagement Activity ~ Year begun	On-Going Engagement	CFSP Development ~ Review of Data	CFSP Development ~ Assess Agency Strengths	CFSP Development ~ Selection of goals and objectives
*DMH/DD/SA	Member CCPT State Advisory Board ~ 2013	-Strategic Planning -Data Analysis -T/TA -REAP ~ Learning Community	-CCPT end of year survey - CFSP Joint Planning	Focus groups on CFT meeting	-participation in focus groups
*Court Improvement Project	Advisory Committee ~ 1994	-Advisory Committee meet twice a year - Interagency Collaborative Meetings	-Sharing of data from JWISE -Participant in CFSR and IV-E review -Drafting and review of PIP	-CFSP Joint planning -Feedback survey	-Through participation in Advisory Boards and Committees

*Community Child Protection Team	CCPT Advisory Board ~ 2013	-Quarterly meetings	-End of year survey report	-CFSP Joint planning -Feedback survey	-Through participation in Advisory Boards and reporting requirements
UNC	Contracts for training, data analysis, facilitation	On-going through contract monitoring	-Instrumental in providing summary and longitudinal data from the child welfare data systems -REAP data dashboard -Joint planning	-analysis of data made available -comparison of NC data to National Standards	-formulate goals and objectives in line with currently available data
NCSU	Contracts for training and community engagement education	On-going through contract monitoring	-end of year survey report for the CCPT -Joint planning	-feedback survey -training logs -focus group qualitative information	-CCPT advisory board strategic planning -Contracts
Center for Child and Family Health (CCFH) (Project Broadcast)	Development of Project Broadcast ~ trauma informed child welfare practice	Contract for training and data analysis	Internal data collection around referrals for Trauma informed care	-feedback survey -training -focus groups/learning communities	-Contract based upon data collected and the formulation of goals.
NCACDSS	Monthly through committee meetings and webinar	On-going through monthly meetings	Data presentation at monthly meeting	Feedback from monthly meeting	Feedback from monthly meeting.
Early intervention	The referral of all children identified as in need of a developmental assessment	Continuance of mandated referrals	Monthly report showing the number of referrals made	-Monthly report -Joint planning	Joint Planning
Parent	Member of the CCPT Advisory Board	Support for ongoing membership	Participation in the CCPT end of year survey report	-Joint planning	-Joint planning

- Additional information provided in remaining sections.

In FFY2015-2019, NCDSS will work with a group of stakeholders identified during the Joint Planning meeting, to design a method to provide meaningful and on-going updates regarding program outcomes. The development of a timeframe will be dependent upon the collaborative capacity of stakeholders.

Collaborative efforts with the Eastern Band of the Cherokee Indian are described in detail in section V (p. 75).

## II. Assessment of Performance

The Children’s Bureau has recognized that North Carolina has successfully implemented an overarching culture of CQI using REAP as our CQI framework. REAP has supplemented and expanded our assessment of our performance on the Child and Family Outcomes and the Systemic Factors that drive compliance with national performance expectations. Statewide implementation of REAP will ensure that CQI processes will be consistently applied across the state. NCDSS has made a commitment to expand REAP to the remaining 83 counties and has submitted an expansion request to the North Carolina Department of Health and Human Services.

*See Section III p. 39 for more information on the statewide implementation of REAP as it relates to our Plan for Improvement. This section will provide more information on the goals and objectives of REAP and how we are measuring progress, and the Training and Technical Assistance that is needed to sustain implementation.*

The structures of our state REAP team is currently under construction as we look to realign our resources. As noted we do have a REAP coordinator that facilitates implementation at the county level. In addition, we have a full-time dedicated coordinator who is leading NCDSS’ efforts to develop a model of implementation at the state level that is being carried out in a true partnership with state and county leaders, university partners and private agencies.

As no additional funds have been allocated for the implementation of REAP, we are modifying the way we traditionally work to be CQI focused. This will provide NCDSS with the necessary resources to build capacity to support and sustain the operation of a state and local comprehensive CQI approach to its child welfare continuum.

NCDSS is striving to implement a model whereby all child welfare staffs use a CQI model in their daily work design. To increase state capacity to practice using a CQI paradigm, a series of trainings, developed in partnership with University of North Carolina at Chapel Hill (UNC-CH), are being offered. Titled “Becoming an Achievement Focused Agency,” or BAF, this training will strengthen NCDSS’ capacity for practicing with a CQI lens. This work is being championed by our local support staffs that have pioneered the use of data to improve outcomes at the local level.

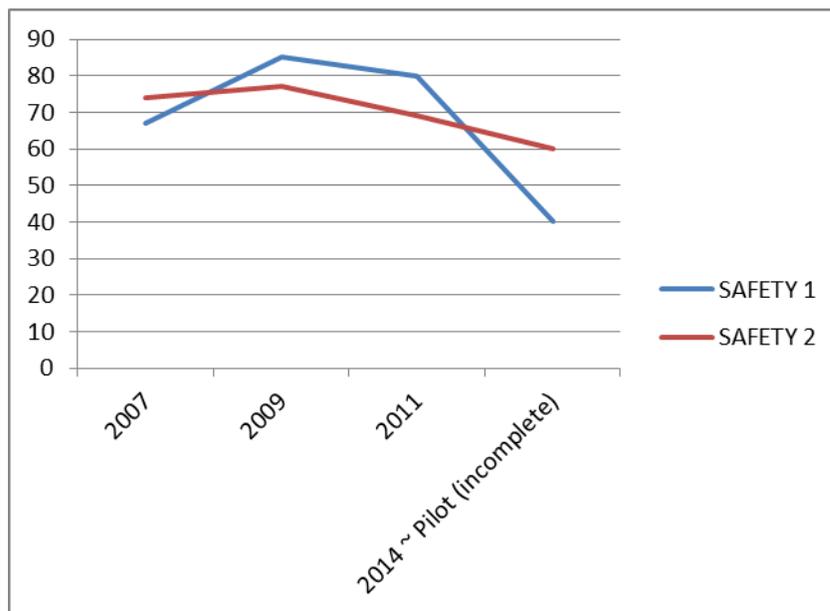
An effort is underway to enhance the quality and reliability of statewide child welfare data collection. A strategic effort of REAP has been the development of a REAP Data Performance workgroup facilitated by UNC-CH, that is comprised of state, county and university partners. This workgroup reviews the REAP Achievements and data elements that are being gathered and continuously makes adjustments as needs are presented. This group has agreed to undertake the quality data collection as a future endeavor.

### A. Child and Family Outcomes

Outcomes for children and their families are defined according to safety, permanency and well-being. Safety is further delineated according to the protection of children from abuse and neglect while being safely maintained in their own homes. To determine if NC is keeping its children safe, the Child and Family Services Review (CFSR) provide a snapshot of the experiences of our children. The last federal CFSR for NC was in 2007 with NC being released from the resulting Program Improvement Plan FFY 2009-2010.

NCDSS continued to monitor child outcomes through the use of the On Site Review Instrument (OSRI). Once the federal CFSR process was suspended, NCDSS chose to monitor child outcomes through continued use of the OSRI until SFY 2011-2012 at which time REAP was implemented in 9 pilot counties. The REAP pilot counties compared outcomes defined in the CFSR with the available NC data and determined that for NC to improve outcomes, that a deeper look at safety, permanency and well-being was necessary. As a result, core achievements, or outcomes, were identified that are specific to NC. These achievements are reflected on the NC Child Welfare Achievements Data Dashboard, located on the Management Assistance website (<http://ssw.unc.edu/ma/>). For the REAP pilot counties, contact regarding outcomes has been and continues to be an on-going conversation. For non-REAP counties, contact includes on-site technical assistance, county peer review of cases, child fatality reviews, and CCPT reviews of systemic concerns that impact outcomes. Performance on these outcomes will be highlighted individually.

### 1. State Performance on Safety Outcomes 1 & 2



Case record review data and State Information system

When looking at NC's performance on Safety Outcomes, performance peaked in 2009 and has seen a decline since. REAP has given NC a new lens through which to view data. Focusing on the story behind the decline in performance is more advantageous for efforts at improvement. Anecdotally, we can surmise that in 2009 NC was closing out its Program Improvement Plan. With the assistance of the Atlantic Coast Child Welfare Implementation Center (ACCWIC), REAP implementation began in earnest and our focus was shifted to NC specific achievements and CQI system development.

We can also surmise that with the start of the REAP pilot case reviews infused with CQI that we are not in a place to have valid data on safety outcomes. Below are the results of the training Quality Case Review (QCR) and the Pilot QCR. The training

QCR involved state QCR staff conducting an in-depth training with the county reviewers on OSRI. The intent is to clarify what the individual items are looking for and to increase inter-rater reliability.

Safety Outcome 1	Pilot QCR	Training Review
Item 1: Timeliness of initiating reports		
# cases reviewed	10	17
# strengths	5	11
# ANI	1	2
# Not applicable	4	9
% achieved	50%	
Item 2: Repeat maltreatment		
# cases reviewed	10	17
# strengths	5	7
# ANI	1	5
# Not applicable	4	6
% achieved	50%	
Outcome Safety 1		
# cases reviewed	10	17
# substantially achieved	4	8
# partially achieved	2	3
# Not applicable	4	1
% substantially achieved	40%	48%

\*Results obtained using the ACYF/CB OSRI

Safety Outcome 2	Pilot QCR	Training Review
Item 3: Services to protect children in their home/prevent removal		
# cases reviewed	10	17
# strengths	5	4
# ANI	3	8
# Not applicable	2	5
% achieved	50%	
Item 4: Risk and safety assessments		
# cases reviewed	10	17
# strengths	6	8
# ANI	4	9
# Not applicable	0	0
% achieved	60%	
Outcome Safety 2		
# cases reviewed	10	17
# substantially achieved	6	8
# partially achieved	1	0
# not achieved.	3	9
% substantially achieved	60%	48%

\*Results obtained using the ACYF/CB OSRI

Quote from a Stakeholder:

*"We are aware that it will take some time for the data to show improvement...we start where we are and focus our resources where they can be the most effective, for instance absent fathers we're hunting them down but there is no data element to show this."*

(Joint Planning March 19, 2014)

- Strengths and Concerns related to safety outcomes

Using our REAP lens to view our data we have to recognize that NCDSS and county departments of social services have strengths that can be further elevated into practice. Such as the work with Project Broadcast: Project Broadcast has raised awareness of trauma informed practice and the impact that trauma has on children and their families and in collaboration with our partners in mental health, a 4 question trauma screening tool was developed for use by pilot counties and results have been illuminating.

*Quote from a Stakeholder:*

*“This was an Ah Ha moment and scared workers into using the tool [Project Broadcast] so that they don’t miss anything”  
(Joint Planning March 17, 2014)*

The reality of limited resources has led other REAP pilot counties into looking at creative solutions to complex issues. A county Director has committed his agency to the implementation of REAP and has begun to restructure to have more workers trained to “think CQI.” This shift has fostered within NC a more unified approach to serving families across county lines. Collaborative work between the NC Child Treatment Program and Benchmarks supporting trauma informed work supports the relationship between child serving agencies; for example, being able to use reunification money to help pay for a parent mental health assessment.

*Quote shared from NCTSN by a Stakeholder in the context of limited resources:*

*“We have learned to steal shamelessly and share relentlessly”  
(unknown date, 2013-2014)*

Because NCDSS is taking the time to look through our REAP lens at the story our data is telling us, we recognize that we are not able to avoid looking those factors that need improvement. With the implementation of REAP, the focus has shifted from what we are doing wrong to how can we do this better. For instance we know that we can do better at engaging the Department of Public Instruction around the well-being needs of children in foster care (Fostering Connections/Educational Stability).

Through our partnership with the Administrative Office of the Court and our efforts at sharing data, it has come to light that an increase in the number of cases are coming to court with lengthy histories of un-resolved maltreatment issues. Taking a step back and looking through our REAP lens we can hypothesize that our work around an In-Home Services Child Welfare Practice model may be positively correlated to these cases.

*Quote from a Stakeholder:*

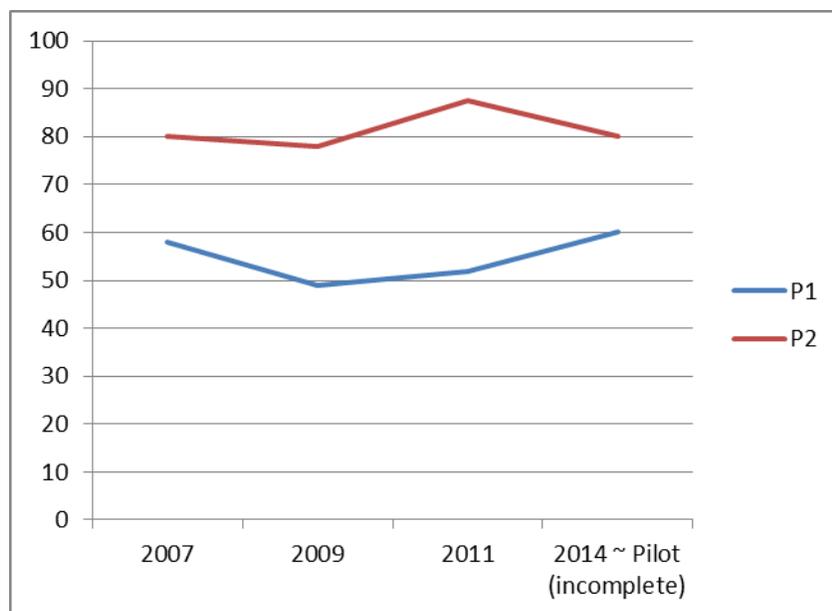
*“We need them [DJJDP/Courts] to realize that by circumventing our process and “giving” us custody creates barriers to that child achieving permanence”*  
(April 9, 2014, NC Association County Directors of Social Services)

Unfortunately, NCDSS does not have an automated case management system, a fact that has been espoused for some time. This lack of a technologically modern case management system has been cited as a factor for not achieving safety, permanency and well-being outcomes. Cross system data sharing (sharing with AOC and the Department of Public Safety) is subject to confidentiality barriers and the lack of real time data are just two examples that are credited with compromised safety, slow movement to permanency and difficulties for youth transitioning out of foster care.

The REAP steering committee has identified this as a concern that is shared across the spectrum of the child welfare continuum, at the state and the county. Capacity and funding is a barrier to sustaining NC’s REAP efforts.

In FFY 2015-2019, NC’s response to ensuring that children and their families have safety in their lives will evolve around the expansion efforts for REAP/CQI, becoming a more trauma informed child welfare system and developing strategies to build capacity around the use of data and improved technology.

## 2. State Performance with Permanency Outcomes



Case record review data and State Information system

Children are considered to have achieved permanency if they have stability in their living situation that preserves their family relationships and connections. Looking at the data that is currently available, it is encouraging to see improvement in regards to stability. However, after some improvement, we are able to see recent decline.

*Refer to Section II, P.26 for more information on the QCR Pilot*

In March 2014, NCDSS and REAP pilot counties agreed to begin a pilot to validate the results of a county CFSR using the federal tool. This QCR pilot has provided outcomes measures for the 5 counties that are participating. The caveat to all of our pilot data is just that, it is pilot data with a process that has not yet been validated. Below are the results of the training QCR and the Pilot QCR.

<b>Permanency Outcome 1</b>	<b>Pilot QCR</b>	<b>Training Review</b>
<b>Item 5: Foster care re-entries</b>		
# cases reviewed	5	9
# strengths	3	4
# ANI	0	0
# Not applicable	2	5
% achieved	60%	
<b>Item 6: Placement stability</b>		
# cases reviewed	5	9
# strengths	4	9
# ANI	1	0
# Not Applicable	0	0
% achieved	80%	
<b>Item 7: Permanent plan</b>		
# cases reviewed	5	9
# strengths	4	4
# ANI	1	5
# Not Applicable	0	0
% achieved	80%	
<b>Item 8: Reunification/guardianship/custody w/ relatives</b>		
# cases reviewed	5	9
# strengths	3	3
# ANI	0	3
# Not Applicable	2	3
% achieved	60%	
<b>Item 9: Adoption</b>		
# cases reviewed	2	9
# strengths	1	0
# ANI	1	3
# Not applicable	0	6
% achieved	50%	
<b>Item 10: Another permanent planned living arrangement (APPLA)</b>		
# cases reviewed	0	9
# strengths	0	0
# ANI	0	0
# Not Applicable	0	9

% achieved	0%	
Permanency Outcome 1		
# cases reviewed	5	9
# substantially achieved	3	2
# Partially Achieved	2	7
# Not Achieved.	0	0
% substantially achieved	60%	22%

Results obtained using the ACYF/CB OSRI

<b>Permanency Outcome 2</b>	<b>Pilot QCR</b>	<b>Training Review</b>
Item 11: Proximity of placement		
# cases reviewed	5	9
# strengths	4	5
# ANI	0	0
# Not Applicable	0	3
% achieved	80%	
Item 12: Placement with siblings		
# cases reviewed	5	9
# strengths	2	6
# ANI	1	1
# Not applicable	2	2
% achieved	40%	
Item 13: Visiting w/ parents/siblings		
# cases reviewed	5	9
# strengths	3	1
# ANI	1	4
# Not applicable	1	4
% achieved	60%	
Item 14: Preserving connections		
# cases reviewed	5	9
# strengths	4	4
# ANI	1	4
# Not Applicable	0	1
% achieved	80%	
Item 15: Relative placement		
# cases reviewed	5	9
# strengths	5	3
# ANI	0	5
# Not Applicable	0	1
% achieved	100%	
Item 16: Relationship of child in care with parents		
# cases reviewed	5	9
# strengths	2	0
# ANI	2	5
# Not Applicable	1	4
% achieved	40%	
Permanency Outcome 2		
# cases reviewed	5	9

# substantially achieved	4	2
# Partially Achieved	1	6
# Not Achieved.	0	0
% substantially achieved	80%	22%

Results obtained using the ACYF/CB OSRI

Outside of county departments of social services practice, the influence of NC AOC is readily recognized as having an impact on permanency for children. As a result of the connection between NCDSS and AOC, collaboration has become a priority.

*Quote from a Stakeholder:*

*“Our challenge is that our data systems [AOC] do not talk statewide or even within our own system...we know that this can impact permanency because of continuances”  
(Joint Planning March 18, 2014)*

- Strengths and Concerns surrounding permanency outcomes

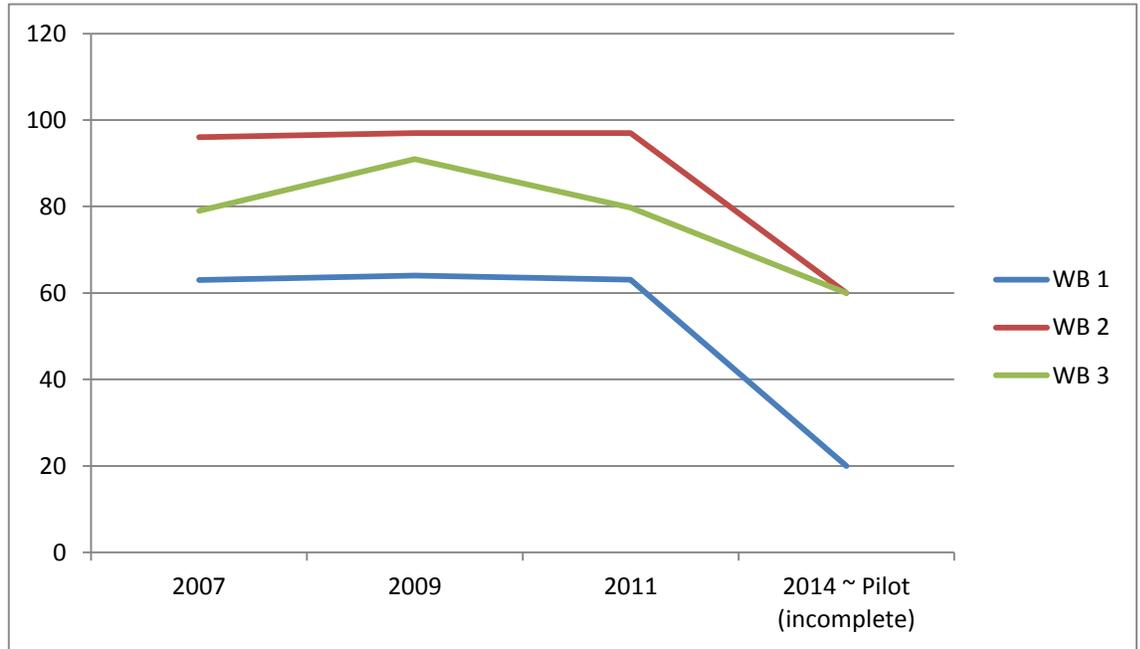
NCDSS staff continues to work collaboratively with CIP staff as a member of the CIP Advisory Committee. This committee provides a forum for ongoing, meaningful collaboration between courts, child welfare, tribes and other stakeholders by convening meetings to discuss court improvement activities. This is a group of high-level stakeholders that meet twice a year to receive program updates, make recommendations and suggestions on CIP funding. NCDSS continues participation in the Interagency Collaborative Meetings. This continues to be a forum that aids in the dissemination of information, planning of cross-agency trainings and collective problem solving for immediate improvement. In addition, improve educational stability for the foster children of North Carolina by implementing activities in the Fostering Connections Act, in conjunction with NCDSS.

There are other systems that play a role in achieving permanency outcomes for children; however, our work with AOC is where NCDSS is focusing its attention. Data from our AFCARS file lends support for focusing on this connection.

In FFY 2015-2019, NCDSS will focus its resources on

- ✓ Making recommendations on CIP fund use and CIP initiatives
- ✓ Improve procedural protections for parties
- ✓ Improve understanding of impact of the courts at the state and district levels
- ✓ Share data pertinent to child welfare issues
- ✓ Increased participation in enhancing existing cross-system efforts to address educational stability and continuity issues; signed MOA between agencies and organizations

### 3. State Performance on Well-Being Outcomes



Well-being outcomes are defined as the ability of families to provide for their children’s educational, physical and emotional/behavioral health needs and that the provision of the services to meet these needs are adequate. Efforts have been made to quantify and measure well-being; however, NCDSS believes that the 3 well-being outcomes currently measured do not capture well-being thoroughly. Below are the results of the QCR training review and the Pilot QCR.

Well-being Outcome 1	Pilot QCR	Training Review
Item 17: Needs and services of children/parents/foster parents		
# cases reviewed	10	17
# strengths	3	7
# ANI	7	10
# Not applicable	0	0
% substantially achieved	30%	
Item 18: Case planning/management		
# cases reviewed	10	17
# strengths	1	7
# ANI	8	8
# Not Applicable	1	2
% achieved	10%	
Item 19: Worker contacts w/ children		
# cases reviewed	10	17
# strengths	6	10

# ANI	4	7
# Not Applicable	0	0
% achieved	60%	
Item 20: Worker contacts w/ parents		
# cases reviewed	10	17
# strengths	1	4
# ANI	8	9
# Not applicable	1	4
% achieved	10%	
Outcome Well-Being 1		
# cases reviewed	10	17
# substantially achieved	2	7
# Partially Achieved	4	4
# Not Achieved	4	6
% substantially achieved	20%	41%

Results obtained using the ACYF/CB OSRI

NCDSS has hypothesized that the decline in achieving well-being outcomes for children is related to the economic plunge that occurred in NC. Many child serving programs and services had had to reduce services and are not yet able to recover from those losses.

*Quote from a Stakeholder:*

*“To achieve well-being we all need to work together...our data systems do not allow us to communicate, this is a huge problem.”*  
(Joint Planning March 18, 2014)

Well-being Outcome 2	Pilot QCR	Training Review
Item 21: Education		
# cases reviewed	10	17
# strengths	6	9
# ANI	2	3
# Not applicable	2	5
% achieved	60%	
Outcome Well-Being 2		
# cases reviewed	10	17
# substantially achieved	6	9
# Partially Achieved	1	0
# Not Achieved	1	3
# Not applicable	2	5
% substantially achieved	60%	53%

Results obtained using the ACYF/CB OSRI

Well-being Outcome 3	Pilot QCR	Training Review
Item 22: Physical health		
# cases reviewed	10	17
# strengths	7	11
# ANI	3	4
# Not Applicable	0	2
% achieved	70%	
Item 23: Mental health		
# cases reviewed	10	17
# strengths	5	10
# ANI	2	2
# Not applicable	3	5
% achieved	50%	
Outcome Well-Being 3		
# cases reviewed	10	17
# substantially achieved	6	12
# Partially Achieved	3	1
# Not Achieved.	1	3
% substantially achieved	60%	71%

Results obtained using the ACYF/CB OSRI

- Strengths and Concerns regarding well-being

NCDSS in conjunction with its partners have made considerable progress on identifying how to measure well-being. This work is not yet complete; however, this is a testament to the strength of our collaboration and commitment to improving outcomes. Of concern for NCDSS is that we are not yet able to measure well-being at a time when results indicate that outcomes are not where they should be.

In FFY 2015-2019,

- ✓ Efforts will be made to engage NC Department of Public Instruction (NCDPI) in Project Broadcast.
- ✓ The work of DMH/DD/SA System of Care expansion grant, has brought multiple systems to the table including NCDPI. NCDSS staff has seized this opportunity to build relationships and connections.

## B. Systemic Factors

During the implementation of REAP, NCDSS has been able to dissect our statewide information system, our case review system (written case plans; periodic reviews; permanency hearings, filing petitions for Termination of Parental Rights; and notice of hearings and reviews to caregivers), our quality assurance system, staff and provider training, service array and resource development, responsiveness to the community and

foster and adoptive parent licensing, recruitment and retention. This dissection has given NC a new perspective on where we need to improve.

## 1. Information System

North Carolina does not operate a Statewide Automated Child Welfare Information System (SACWIS); however, functioning information systems are maintained that ensures NCDSS is in compliance with the State's policy and practice, and federal reporting requirements such as the Adoption and Foster Care Analysis and Reporting System (**AFCARS**), National Youth and Transition Database (**NYTD**), National Child Abuse and Data Set (**NCANDS**) to fulfil the Child and Family Services Review (**CFSR**) process. CFSRs Round 1 (2001) and Round 2 (2007) determined that NCDSS was in substantial conformity with this systemic factor. This allows NCDSS to say with certainty that NC can readily identify for every child in foster care their status, demographic characteristics, location, and permanency goal.

See Section III,  
P.39 for more  
on REAP

Stakeholder feedback is a hallmark feature of our REAP system, and our stakeholders have been vocal around our information system. Some of the issues stakeholders have raised are:

- ✓ A new version of the REAP Data Dashboard is needed not just for the REAP pilot counties but for all of our counties.
- ✓ An “automated case management system” arises from counties out of frustration. Counties have begun purchasing their own automated case management systems; however, they still do not talk to each other. Some counties have indicated that they are willing to cost share because they see the importance of having one;
- ✓ Data training needs to include a component on analysis;
- ✓ A “Data Passport” is needed for foster children so that all of their data: medical, mental health, education, child welfare can be accessed through one portal;
- ✓ Our partners in mental/behavioral health recognize the need to bridge the silos between our systems.
- ✓ Children’s Home Society in NC has identified that sharing of data is a need across the state.

- Strengths and Concerns of the Information System

The concerns over our Information System frequently cloud the strengths that are inherent in the system that we do have. NC has been able to provide the required NCANCDs and AFCARS data and have consistently met standards (2007, CFSR Final Report). NCDSS has made some progress resolving previously raised concerns over data quality as noted in our AFCARS Assessment Review Improvement Plan beginning October 1, 2007.

NC continues to work towards a single statewide identifier. Although we have made considerable progress, this project has experienced delays due to staffing shortages, but has put in place a process to merge multiple IDs within a single county. To date, we have merged 24,901 IDs. While not all of these are in the AFCARS population, some of them most likely are, or may be included in the population in future submissions. Having eliminated certain conditions that were preventing the merger of some IDs, we are continuing periodic automated merges with the goal of eliminating multiple IDs within counties. County staff may also merge ID's when multiples are identified rather than wait for the next automated merge.

Merging ID's "across-county" to have a single statewide identifier for each child would require extensive modification of the core processes of our legacy systems. The current plan is still to move Child Welfare data collection systems into the statewide eligibility and case management system known as NCFAST. The NCFAST system is based on having a single statewide unique identifier and therefore once we begin utilizing this system, we will simultaneously begin using a single statewide ID for each child in the AFCARS population. A series of issues have caused delays with the modules of NCFAST that were to be implemented prior to the Child Welfare modules. These delays have pushed back the original implementation dates and we do not, at this time, have a firm planned date to begin moving Child Welfare into NCFAST. In the absence of an alternative plan, coupled with a severe, prolonged lack of fiscal and human resources, it is not feasible from a business perspective undertake the extensive and risky modifications to our current legacy systems

Encouraging is the work that is being done with our CQI framework of REAP. Counties are being trained on the use and analysis of data through the REAP Data Dashboard which derives its data from the available legacy systems that house our NCANDS and AFCARS data. In addition to NCDSS staffs, UNC-CH is able to provide some technical assistance on working with data. NCDSS is beginning discussion with UNC-CH staff to create a State REAP Data Dashboard that is relevant to oversight and monitoring of NCANDS and AFCARS data and the relationship to achieving outcomes for children.

Our Performance Management Section, like others is resource deficient; however, NCDSS is encouraged that relief may soon be a reality. Through our work with merging county SIS ID's, the limitations of our aging legacy systems have become all the more apparent.

The impact that these aging legacy systems has on our data shows up in the disparity seen in our adoption file as a result in the lag time before the finalized adoption is reported in the system.

In FFY 2015-2019, Shared goals for NCDSS and its stakeholders are

- To enhance feedback loops, such as user friendly databases that can interface with each other.
- NCDSS will continue to provide support and resources to keep communication open; however, once NCFAST is on-line for child welfare, the intent is that on-line collaboration will happen.
- An oversight and monitoring data dashboard will be developed for AFCARS and NCANDS data

## 2. Case Review System

NC's Child Welfare System frequently works in tandem with the court system around meeting outcomes for children. The collaboration with the court system also plays a crucial role in meeting the eligibility requirements of several funding sources that are essential to meeting the needs of children and their families. Specifically the case review system provides information on:

- **Case Review Plan**  
County departments of social services captures information regarding the case plan via the form [DSS-5240](#) ~ Out of Home Family Services Agreement, the Family Services Agreement Review ~ [DSS-5241](#), and the [DSS-5094](#) ~ Child Placement and Payment Report. The purpose of these forms (DSS-5094 & 5241) is to collect information on all children who are in the legal custody of a county department of social services or who are in foster care as a result of a voluntary placement agreement; to track expenditures made by county departments of social services for foster care assistance payments and to generate reimbursement of state and/or federal funds; to collect information on children who are placed in NC through the Interstate Compact for the Placement of Children (ICPC); and to provide case management information about children in the system and provide a mechanism for updating information about each child.

The DSS-5240 and the DSS-5241, in addition to the basic demographics of the child and family, guides the social worker and the family through collecting and documenting the plan for each child, the signatures of those who helped write the plan and who is responsible for identified objectives. Required documentation includes discussion of the following items: if the placement is the least restrictive, most family-like, closeness to home community and child's school and if the services needed for the child can be met in the placement. Documentation includes the court-ordered visitation/contact plan for the child (with parent, caretaker, siblings, placement provider and other family members or friends) including frequency, supervision, etc. and the date of the court order authorizing visitation (N.C.G.S. § 7B-905). The DSS-5240 also provides guidance on documenting when the child's permanency plan is not reunification; including what the barriers are, and efforts made to overcome the barrier.

*Data regarding caseworker visits with children can be found in Section VII. page 100*

With the implementation of NCFAST, NCDSS anticipates that aggregate data on the Case Review Plan that is currently unavailable will be accessible. Although the DSS-5094 collects data elements related to a plan for each child; and the most appropriate least restrictive placement, this information does not exist in a useable aggregate form at this time. Through our QCR using the OSRI we can look at data elements that would inform if parents/children were participating in the development of case plans.

- **Periodic Reviews**

Periodic case reviews are referred to as a Permanency Planning Action Team. While these teams are needed to review agency decisions, they are also responsible for ensuring that every foster care case moves quickly toward a permanent resolution. Permanency Planning Action Teams are open, non-adversarial forums for focusing on casework practice and planning. They are the embodiment of System of Care Principles, where agencies and families collaborate.

The Permanency Planning Action Team process allows each party involved to have input into service needs of the child and family; to document progress of the parents in improving the conditions that led to foster care placement (safety and compliance); to develop the most appropriate permanent plan with a target date; and to ensure that permanency is achieved for every child. The Action Team process also ensures that the plan that is developed will be followed regardless of changes in social work staff. In addition, parties with disagreements can address them prior to court hearings, helping each to understand the position of the others, and thus providing the opportunity for informed negotiation.

With the implementation of NCFAST, NCDSS again, anticipates that aggregate data on Periodic Case Reviews that is currently unavailable will be accessible. Although the DSS-5094 collects data elements related to a plan for each child by tracking the most recent and next date for agency and/or court review, outside of the AFCARS report and manual compilations this data is not available in aggregate form.

- **Permanency Hearings**

NC's most recent AFCARS (context and outcomes data: <http://cwoutcomes.acf.hhs.gov/cwoutcomes/downloadOutcomesData.do?rnd=-668741750>) provides some insight into state compliance with this requirement through Composite 1: timeliness and Permanency of Reunification and Composite 2: timeliness of Adoptions.

In regards to timeliness and permanency of reunification, this table reveals that NC is struggling to consistently and timely achieve permanence for children.

Composite 1: Timeliness and Permanency of Reunification	2010	2011	2012	2013
Composite Score	119.8	123.0	120.1	112.3
C1.1: Of all children discharged from foster care to reunification during the year who had been in care for 8 days or longer, what percentage were reunified in less than 12 months from the date of the latest removal from home? (Includes trial home visit adjustment)	57.7%	60.3%	58.1%	59.6%

Source: <http://cwoutcomes.acf.hhs.gov/cwoutcomes/downloadOutcomesData.do?rnd=-668741750>

Periodic review by the court is required at the following intervals:

- Within 60 days of the child coming into agency custody or placement responsibility;
- Within 90 days of the first agency team review, but no more than 150 days of the child coming into agency custody or placement responsibility; and
- Every six months thereafter.

These requirements inform practice compliance with the timeliness of Adoptions. However, the following information shows that this is an area that NC is not consistent.

Composite 2: Timeliness of Adoptions	2010	2011	2012	2013
Composite Score	123.9	122.8	136.3	133.4
C2.1: Of all children discharged from foster care to a finalized adoption during the year, who had been in care for 8 days or longer, what percentage were discharged in less than 24 months from the date of the latest removal from home?	36.2%	33.7%	39.3%	38.3%

Source: <http://cwoutcomes.acf.hhs.gov/cwoutcomes/downloadOutcomesData.do?rnd=-668741750>

- Termination of Parental Rights
  - As with any other juvenile court action, this particular action is initiated by the filing of a motion or petition for Termination of Parental Rights (TPR) of the parent or parents whose consents have not been obtained. TPR is governed by the following statutes:
    - N.C.G.S. § 7B-1100; N.C.G.S. § 7B-1101; N.C.G.S. § 7B-1101.1; N.C.G.S. § 7B-1102; N.C.G.S. § 7B-1103; N.C.G.S. § 7B-1104; N.C.G.S. § 7B-1105; N.C.G.S. § 7B-1106; N.C.G.S. § 7B-1106.1; N.C.G.S. § 7B-1107; N.C.G.S. § 7B-1108; N.C.G.S. § 7B-1109; N.C.G.S. § 7B-1110; N.C.G.S. § 7B-1111; N.C.G.S. § 7B-1112.

The Notice of Motion Seeking Termination of Parental Rights (form AOC-J-210) is used when a TPR action is filed by motion. If a TPR is filed by petition, then the Summons in Proceeding for Termination of Parental Rights (form

AOC-J-208) must be used and termination petitions are filed with the Clerk of Court.

NCDSS has identified that for a TPR action to occur there are several separate points to consider, of which the first requirement for terminating the parental rights is a finding by clear, cogent and convincing evidence that one or more of 9 conditions exist. Prescribed in statute are the process and procedures for the filing of a TRP.

1. Petition ~ the petition must contain information that is specified in N.C.G.S. § 7B-1104, including the facts that are considered sufficient to warrant a determination that one or more of the grounds for terminating parental rights exists.
2. Preliminary Hearing ~ in cases of unknown parents  
If the identity and whereabouts of the parent are not ascertained, notice of a hearing to terminate parental rights shall be served upon the unknown parent by publication, as set forth in N.C.G.S. § 7B-1105.
3. Summons ~ The summons shall notify the parent (respondent) to file written answer to the petition within thirty (30) days after service of summons and petition. N.C.G.S. § 7B-1106 outlines the parties that should be recipients of the TPR summons.
4. TPR Hearing ~ respondent parent to file written answer to the petition or written response to the motion within thirty (30) days after service of the summons and petition or notice and motion, or within the time period established for a defendant's reply by N.C.G.S. § 1A-1,
  - The adjudicatory hearing on termination shall be held no later than ninety (90) days following the filing of the petition or motion unless the court has entered a continuance for up to ninety (90) days for good cause. Continuances beyond ninety (90) days shall only be granted in extraordinary circumstances for the proper administration of justice.
  - At this stage, the petitioner does not have the burden of proof; the court hears all evidence and makes a discretionary determination of best interest.
5. Appeals ~ N.C.G.S. § 7B-1001 sets forth the provisions for an appeal of an adjudication or order of disposition by any person who has been a party to a termination of parental rights proceeding. The appeal is made to the North Carolina Court of Appeals.
6. Post –TPR Reviews ~ Per N.C.G.S. § 7B-909 reviews are required following termination of parental rights in order to ensure that every reasonable effort is being made to finalize a permanent plan for the child who has been placed in the custody of a county agency or licensed child-placing agency. Placement reviews shall be held no later than six (6)

months from the date of the termination of parental rights. Subsequent reviews shall be held every six (6) months until the juvenile is placed for adoption and a final decree of adoption is entered.

The information below shows up that practice measures regarding the timeliness of adoptions can shed light onto how well our case review system is functioning.

Composite 2: Timeliness of Adoptions				
	2010	2011	2012	2013
<b>Composite Score</b>	123.9	122.8	136.3	133.4
<b>C2.5: Of all children who became legally free for adoption in the 12-month period prior to the year shown (i.e., there was a parental rights termination date reported to AFCARS for both mother and father), what percentage were discharged from foster care to a finalized adoption in less than 12 months from the date of becoming legally free?</b>	64.6%	59.6%	70.2%	68.2%

Source: <http://cwoutcomes.acf.hhs.gov/cwoutcomes/downloadOutcomesData.do?rnd=-668741750>

- Notice of Hearings  
Child welfare policy and practice is to provide notice to all parties to a case and to update that information when necessary with the clerk of court that is responsible for sending out notices. At this time, NCDSS does not have a method or mechanism in place to track if invitations are being sent or what the language in the notice reflects. One of the challenges facing NC is the unavailability of one coordinated case management system. NCDSS is working with its partners at AOC through the Interagency Coordinating Council, to implement a protocol that would allow certain types of information to be shared.

#### A. Strengths and Concerns of the Case Review System

The concern over our legacy Information System continues to plague NCDSS in its ability to have recent, relevant data easily available. NC has been able to provide the required NCANCDS and AFCARS data and have consistently met standards (2007, CFSR Final Report); however, the strength of The Interagency Coordinating Council will continue to make efforts in overcoming the barriers to data availability.

In FFY 2015-2019, Shared goals for NCDSS and its stakeholders are

- To enhance feedback loops, such as user friendly databases that can interface with each other, specifically with JWISE.
- NCDSS will continue to provide support and resources to keep communication open; however, once NCFASST is on-line for child welfare, the intent is that on-line collaboration will happen.
- An oversight and monitoring data dashboard will be developed for AFCARS and NCANDS data.

### 3. Quality Assurance System / Quality Case Review

Early in the process of implementing REAP, NCDSS discerned that the REAP philosophies and strategies are in line with those for a functioning CQI system. Upon the suspension of the federal CFRS, NCDSS took this opportunity to infuse REAP into the Quality Assurance System / Quality Case Review (QCR).

- QCR Pilot Counties**
- Craven
  - Pitt
  - Hoke
  - Mecklenburg
  - Scotland

NC's QCR involves an approach that focuses on training and building county capacity to conduct their own QCRs with confidence that they have reviewed their own records with fidelity and reliability to the case review tool. The intent is that this process will allow NCDSS to obtain a larger, more practice predictive sample of cases and performance in a Quality Assurance role. As a county administered system, it is important to keep in focus that the information obtained from case reviews is state level data and performance; however, being able to drill down to county case level results is still necessary. The ability to provide county/case level feedback is important feedback for the state, county, and the worker, to have.

NCDSS and counties have noted that the process of building a QCR system requires in-depth training and discussion into the individual items on the tools and the intent behind the questions. Joint review of case reviews conducted independently, and then followed by a joint review of the completed tool is insightful and informative. Five REAP counties are participating in a pilot case review process spanning 3 months, ending in June 2014. It is important to note that the QCR continues to mirror the current federal OSRI. NCDSS has also begun to review foster home licensing records for those that the state/county licenses to ensure standards are being met. Limited data is available for this as the REAP infused QCR pilot has not yet concluded. Conducting interviews with relevant parties to the case remains a priority during the QCR.

The QCR continues to be evaluative of NC's performance regarding written case plans for every child developed jointly with the child's parents. Although there is no data element that captures this, the case record review assess' this evaluation of outcomes; safety, permanency and well-being. Data elements are available to provide insight into how timely children are having their status in foster care reviewed. Our information systems in conjunction with case reviews also helps with the oversight of timely filing for Termination of Parental Rights (TPR) and if parties to a case have received Notice of Hearing. The chart below shows that NC has seen improvement on this item.

REAP data dashboard indicator provides the annual % of TPR's that are finalized timely	Year
<b>2010</b>	64.6%
<b>2011</b>	59.6
<b>2012</b>	70.2%
<b>2013</b>	87.0%
<b>* Non-validated Preliminary outcomes for 2013-2014</b>	* Preliminary QCR Pilot Review results from 30 cases reveals that for Permanency Outcome 1, 80% substantially achieved this outcome.

The QCR Pilot involves a process by which state reviewers provide to QCR pilot counties, a list of cases to be reviewed using a simple random selection process. Case records are provided to NCDSS within 30 days, and counties are encouraged to use a case structure format to expedite the review of the case file. Once completed, the QCR Pilot will have reviewed a little over 30 cases.

### Example:

During a county self-assessment/readiness assessment surveys revealed that climate and culture within the agency is an impediment to achieving outcomes for children. This theme is carried through this agency's performance on QCRs. During the training and capacity building process with this county, it was again identified that the climate and culture, (lack of trust, lack of communication, not understanding data) impeded outcomes for children and families. As a participant in the QCR pilot, the review showed that practice issues such as lack of supervision, lack of contact and documentation remained a pervasive barrier to achieving outcomes for children. Although this is not practice that can continue, the consistency of the findings tell the story that "REAP" works. This county can now focus some of their limited resources on resolving some of their culture and climate challenges instead of trying to fix something that may not have an impact on the achievement of outcomes.

For FFY 2015-2019, NCDSS intends to:

- Evaluate the success of the QCR Pilot approach to reviewing case records.
- Expand REAP, and provide additional QCR training and technical assistance.
- Validating county QCR processes
- NCDSS will monitor practice activities with county Achievement plans to verify that programmatic and systemic issues identified are being addressed.

The mechanism for oversight of county achievement plans is still under development.

The value of this work has not gone unnoticed by our counties and child advocate partners. NCDSS has been receiving requests from REAP and non-REAP counties for training and technical assistance (T/TA) on how to implement a REAP framework into their practice. Requests have included requests for on-site case review activity. Moving forward, NCDSS envisions that this pilot will continue to evolve and become the foundation for our QA case review system.

- Strengths and Concerns of the Quality Assurance System / Quality Case Review

The strengths of this REAP QCR pilot are that the process is grounded in implementation science. With 5 counties having volunteered for this pilot and additional counties requesting to be a part of this work, NCDSS believes that this is an endorsement of this process and recognition that a quality review can yield achievable programmatic changes that have the support of the local child welfare community continuum. In this current resource limited environment, this is a less adversarial approach to monitoring and oversight of the local achievement of outcomes for children, targeted technical assistance can be provided to ameliorate barriers.

NCDSS recognizes that there are concerns regarding the pilot QCR. Primarily, concerns are centered on technology. Exploration of this concern involves the NC Office of Information Technology Services (NCITS). NCDSS has engaged a project manager to explore the implementation of a secure file transfer process that will allow counties to submit case files electronically while still complying with all privacy and security federal and state regulations. An analysis of the QCR process is on-going; however, NCDSS is invested in continuing this process while recognizing that adjustments may be made along the way.

#### A. CQI/Quality Assurance System

Realignment of current staff is taking place to continue to develop and expand our QA System. The construction of the REAP pilot QCR has built in a QA process. As resources are obtained, and the intentional expansion of REAP occurs, the elements of a QA system will be fleshed out. The basic premise of our REAP framework is a 4 step process that incorporates the functional components of a QA/CQI system.



#### 1. Foundational Administrative Structure to REAP

NCDSS has incorporated into our Multiple Response System (MRS) a culture of CQI. Through our understanding of implementation science, the expansion of REAP has been, and continues to be intentional with a sustainability plan in development. The

expansion of REAP is guided by a steering committee comprised of county and state, stakeholders; and is limited by fiduciary constraints. Currently, a REAP Coordinator facilitates implementation at the local level and the CFSR Coordinator is leading NCDSS efforts to develop a model of implementation at the state level that is being carried out in a true partnership with county leaders, university partners and private agencies. This partnership includes the development and delivery of a data training curriculum and the operationalization of these activities.

a. Action steps:

- Sustainability planning, which is on-going, has made recommendations for additional resources that has been received by executive leadership and put forth for funding consideration. In the absence of additional resources, NCDSS is modifying the way in which county DSSs are supported to be more CQI focused with the training to do this described in the training plan.
- Improve NCDSS readiness to fully implement a culture of CQI. A readiness assessment was completed that has generated discussion around action steps such as: climate/leadership and communication. At future meetings, staff will help to operationalize some of the selected action steps, and will articulate specific tasks, timeframes, and responsible parties to complete the Action Plan. There may also need to be further prioritization of action steps to decide which will be addressed in the coming year and which may need to be addressed in a later year.

## 2. Quality Data Collection

An effort is underway to enhance the quality and reliability of NC's statewide child welfare data collection. One strategic effort of REAP has been the development of a REAP data workgroup that is comprised of state, county and university partners. This workgroup reviews the data elements that are being gathered for the REAP Statewide Data Dashboard, and continuously makes adjustments as needs are presented. This group has agreed to undertake the issue of data quality as a future endeavor.

In addition to the REAP Statewide Data Dashboard, NCDSS has available other sources of data that allows for a review of statewide performance overtime. The Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina (<http://ssw.unc.edu/ma/>) can provide longitudinal / summary information on the experiences of children involved in the child welfare system, and aggregate information on the child and family outcome measures. The Index of State Automation Reports and Program Statistics, also known as XPTR reports (<http://www.ncdhhs.gov/dss/stats/reports.htm>), provide a listing of preset reports that provides of variety of information, such as: foster care management report, children eligible for foster care assistance under Title IV-E, present living arrangement of all children who are in the custody or placement authority of the state, barriers to plan achievement, just to name a few.

Currently, county workers are routinely responsible for entering and updating all case related data into one or more of the state legacy systems. These state legacy systems are maintained by Division of Information Resource Management (DIRM) and are continuously accessible and updated nightly. Some data collection occurs when NCDSS staffs conduct T/TA consultations, and QCRs. Monitoring and oversight is a routine function of T/TA consultations. This often involves a discussion with a county on the quality of the data entered into the state data system, the review of statewide and county specific data reports, and a discussion of variances when identified.

A barrier to quality data collection is visible during the systemic factor discussion of our information system. As noted in that section, technology is an issue that NCDSS is addressing through NCFAST as well as the exploration of other systems. A component of REAP expansion is training for staff on the collection and analysis of statewide child welfare data; this is expanded upon in the state training plan.

As our staffs are becoming proficient with the use and analysis of data, oversight and monitoring activities will quickly call attention to practice areas. For instance the timeliness of initiating an accepted report of child abuse, neglect of dependency has variance across 7 years.

Outcome/Item	2007	2009	2011	2013	2014*Pilot (incomplete)
<b>Item 1: Timeliness of initiating reports of child maltreatment</b>	81%	92%	76%	82%	82%

Case record review data and State Information system

Strategies to address variance such as this are discussed in Section III. (p. 39) Plan for Improvement.

- a. Action Steps:
  - Generate a state level data dashboard as previously described that includes a training component to develop critical thinking skills and data analysis.
  - Map the inter-connectedness of OSRI items and data sources.

### 3. Case Record Review Data and Process/ Oversight and Monitoring

NC has chosen to continue the use of the federal OSRI tool and maintains its current practice of using interviews with key informants. The OSRI captures all federal required elements for case-level data, provides context, addresses agency performance, and reflects key systemic contributors to child welfare outcomes.

The issue of inter-rater reliability is being addressed through:

- Training and technical assistance on the local application of the OSRI tool to their own case records. This effort is still in a pilot phase; however, the preliminary reports are that this is a successful method to make accurate and consistent the collection of child welfare data. This will be followed by a peer review of completed OSRIs.

Once this training is complete and counties can demonstrate fidelity to the OSRI tool, NCDSS will function as a second level review of their findings from their use of the tool. As the process develops, a training document is being created to help make key connections between data and outcomes for internal and external staffs. This training will occur on an ongoing basis and be delivered by our NCDSS QCR staffs. This process is being operationalized into a written manual and a pre-recorded webinar in partnership with UNC-CH.

With the current restructuring and realigning (under REAP) of our resources to enhance the collection of statewide data for QA case reviews on an annual basis, our Performance Management Section is currently exploring a statewide data pull process that will cover children served by the IV-E-B agency in home and out of home.

The QCR Pilot began April 1, 2014 and concluded June 30, 2014. Throughout this pilot NCDSS and county participants met frequently to discuss process. From these discussions NCDSS has crafted a preliminary framework for moving into a statewide expansion of a REAP as a CQI infused oversight and monitoring system. This is a living framework that we anticipate will modify itself over time. NCDSS will need to build capacity for staff to conduct data analysis and be able to make linkages between data and practice. Although this action plan for NC's Oversight and Monitoring system is presented in a linear format, it is not intended to be a linear process. Undergirding this process is the assumed requirement that on-going training in data analysis, QA processes, and child and family outcomes will take place and that only upon completion of state sanctioned training will individuals participate in the QA/QCR process.

The CFSR/CQI coordinator will be responsible for the maintenance of a state level data dashboard, written procedures for the collection and compilation of the data elements and subsequent dissemination.

- NC Division Data Dashboard.  
This dashboard will similarly mirror the REAP data dashboard that has been created for use at the county level. All the elements of the Division Dashboard have not yet been identified. A workgroup of NCDSS staff and university partners will begin working on this in the fall of 2014. The dashboard at a minimum will include a data element and the corresponding national standard, NC's most recent performance and the relevant county performance. Sources of data include:
  - AFCARS
  - NCANDS

- Client Services Data Warehouse  
(<https://csdwportal.dhhs.state.nc.us/csdwlogin/>)
- UNC Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in NC (<http://ssw.unc.edu/ma/>)
- State Automation Reports Program Statistics (aka XTND, <http://www.ncdhhs.gov/dss/stats/reports.htm>)
- NYTD

This dashboard will be prepared continuously and be disseminated to consultants monthly for analysis, oversight and monitoring.

a. NC’s Quality Assurance Oversight and Monitoring Plan/ Post QCR Pilot

- Data Analysis ~ The vision for this oversight and monitoring system is that when significant changes in performance are noted on the County and/or Division Data Dashboard by NCDSS staff, or upon county request, technical assistance will be initiated that is targeted towards the performance indicator. If TA indicates a need for further exploration a TA request will be initiated to conduct a System and Practice Process QA.

- System and Practice ‘Process’ QA ~ the form of this QA is quantitative; or did the required activity take place. The purpose of this is to remove subjectivity and interpretation and to shine light on what basic elements of child welfare practice or the child serving system that may be having an impact on outcomes for children and families. For example:

Was 5-day notice sent to reporter?	Yes		No		NA	
NA=Anonymous or Notice Waived						
Was notification sent to the following?						
District Attorney?	Yes		No		NA	
Law Enforcement?	Yes		No		NA	
Was the assessment completed within the required time frames?	Yes		No			

The System and Practice Process QA, case selection and sample size will be negotiated between county and NCDSS staff. Indicators of success will be established. When success is not indicated, TA and additional Process QA activities may take place before closing out the TA.

- Quality Case Review for Child and Family Outcomes  
This level of oversight and monitoring is multi-faceted. NCDSS recognizes that not all counties are at the same level of readiness to implement REAP as a CQI framework. For those that are (REAP Pilot Counties), the application of the OSRI is delivered by county staff that have received the training. The role of NCDSS will be to review those completed OSRIs. If it is determined that the county is not maintaining fidelity to the OSRI the option of additional T/TA, a System and Practice Process QA or a state led review will be considered. The vision is that this is an on-going process where a county move between stages as their circumstances dictates.

For those counties who are not in a position to have their OSRIs receive QA, T/TA will be arranged. During this time a System and Practice 'Process' QA will be conducted to determine a baseline for practice. Once this process elevates a county to being ready to conduct their own OSRI's, NCDSS will provide QA.

b. Action Step:

- Develop internal/external capacity to pull the data for the State Data Dashboard
- Internal capacity development to analyze the data
- Develop a System and Practice 'Process' QA
- Revise BAF training to be NCDSS specific
- Establish a process to pull cases statewide versus county specific
- Explore options for an electronic file transfer process

4. Analysis and Dissemination

In addition to our partnership with UNC-CH, the analysis of quantitative data will be supplemented by the analysis of qualitative data by the Child Welfare Outcomes Council. The role of the Council has expanded to include the review of county REAP Achievement Plans to identify and address systemic issues. In addition, NCDSS has partnered with mental health through a System of Care Expansion Grant, Project Broadcast and REAP efforts to explore opportunities and obstacles to the exchange of data between child serving agencies.

Exploration for consolidating the functions of the state collaborative with CCPT, CFPT and others to support the engagement of the child welfare community and breach silos, has begun.

a. Action Step:

- Enhance the scope and capacity of the Child Welfare Outcome Council to include a quarterly review of state level data and to prepare a report that identifies policy and practice areas to target or request resources.
- The quarterly report will be shared across the child serving system, to include NCDSS staff, county staff and stakeholders.

5. Feedback and Adjustment

The use of Dear County Director Letters will continue to be a vehicle through which the state communicates with county staff. NCDSS has also created a child welfare listserv that local line staff can subscribe to receive information on policy and practice updates. Internally the Council continues to evolve and will continue its newsletter to provide staff feedback and other information as needed.

To increase sustainability for REAP enhance capacity for NCDSS to improve the process by which feedback is processed, the CCPT Advisory Board and the Council will receive and review fatality reports, case review reports, Achievement Plans to ensure that feedback is incorporated into processes to make practice and procedure changes through a CQI lens.

- a. Action Step:
  - Discuss with stakeholders, staff and county partners a method by which comments can be made on the quarterly reports from the Child Welfare Outcome Council.
- Strengths and Concerns related to Case Record Review Data and Process.

The strength of our REAP infused QCR is the flexibility it provides to take a new look at the data and uncover the rationale for a particular finding. The REAP framework supports the concepts of training and technical assistance. A legitimate concern is that this process has not yet had an opportunity to be validated. NCDSS believes that connecting outcomes to observable data elements is key step towards targeting the real need.

- *NCDSSs training system is in Section X, p114*
- *BAF Training plan improvement, see Section III, p. 50*

In FFY 2015-2019, NCDSS will see the expansion of REAP/CQI and the growth of NCDSS as it changes the culture of its workforce to be data informed.

#### 4. Staff Training

NCDSS remains successful with meeting this systemic factor. During the 2001 and 2007 CFSRs, NCDSS was found to be in substantial conformity in that a well-established, comprehensive, competency-based, pre-service training program is in place.

As REAP implementation has progressed so has specialized training. A series of trainings, Becoming Achievement Focused (BAF), have been delivered to all of the REAP pilot counties and to certain NCDSS staff involved with REAP efforts.

- Strengths and Concerns of this training is that it is being adjusted to meet the specific needs of NCDSS staff as REAP is moves statewide. More detailed information regarding the plan for improving BAF training and delivery see Section III. Plan for Improvement. Concerns regarding the training for staffs on REAP is that connections to some areas of the child welfare continuum are harder to make. Sustainability is also a concern as not only is there a need for human resources, quality technology must be made available to utilize the skills learned.

## 5. Service Array

NCDSS recognizes that the provision of Child Welfare Services does not exist in a vacuum with one agency to meet all needs. In 2001 NCDSS was found to be in substantial conformity for this systemic factor; however, in 2007 this item was not met. The retrospective application of REAP principles to this factor indicates that although Child Welfare Reform through our Multiple Response System (MRS) began implementation in 2001, we may have missed the underlying reason services were not being made available or accessible to meet the needs of children and their families involved in our child welfare system across the state. Service array deficits are attributable to a decline in financial resources for the delivery of services. The economy plays a role in rural availability of services as many providers are not able to sustain practice in remote areas. It can be stated with some confidence that the service array deficits in 2007 are still having an impact on the achievement of child and family outcomes:

- Substance abuse treatment services;
- Domestic Violence and
- Mental health services.

The implementation of REAP has focused our attention on using data to help drive the direction we turn in regard to the service insufficiencies for our children and families, allowing for services to be tailored to the individual needs of the child. Service Array and resource development is on-going at the state and county. The implementation of Project Broadcast is just one way those services are tailored; children and their parents receive an individualized screening for trauma that drives the individual service plan. Based upon data from our information system, case reviews, CCPT reports, partnering with SOCXP, a cross systems Child Well-Being Task Force, we have learned that the issues facing families in child welfare are also present for those other systems that co-serve our population. At this time there is no mechanism that would allow us to capture any data around the number of children whose needs have gone unmet by the lack of availability of services.

### a. Action Step:

- Continue to expand Project Broadcast Trauma Informed Practice so that child specific services are individualized based on the needs of the child and family.
  - Continue to explore braided funding with other child and family serving systems and communities to leverage local resource sharing.
- Strengths and concerns of our work around service array are that there is a concerted effort to bridge the system barriers that duplicate services to families. Decision makers within leadership have been engaged and brought to the table. Concerns validate the current lack of resources not just for NCDSS but for all child serving systems.

Quality Assurance activities (p. 26) and Collaborative efforts (p. 38)

Provides a framework that ensures we are Responsive to our Community.

## 6. Agency Responsiveness to the Community

NCDSS is excited to report that we continue to buttress our relationships and responsiveness to our community partners through on-going work in collaboration as described above in the description of our Quality Assurance process and in the section detailing our statewide collaborative efforts on page 38. Through our implementation of REAP the importance of community involvement in our Child welfare system has become even more apparent. As described in our Plan for Improvement (section III p. 38), the event of engaging community partners in an on-going assessment of the needs and challenges that face our families yield tremendous results.

### Quote from a Stakeholder:

*"It wasn't until we started tracking and collecting information on the tool [Project Broadcast] that we realized how many kids we were jointly serving."  
(Joint Planning March 17, 2014)*

- Strengths and concerns for our work around responsive to the community are inter-related as our efforts around the implementation of REAP will enhance state and county assessment of the needs of our communities and highlight those areas where improvement is needed.
  - a. Action Step
    - Therefore, we will continue to foster and build capacity for our counties to implement data driven and outcome focused services.

FFY 2015-2019, REAP/CQI will continue to expand and influence program and practice changes by being data driven and outcome focused.

The plan for foster and adoptive licensing, recruitment and retention is described in more detail in section X( p.106)

## 7. Foster and Adoptive Licensing, Recruitment and Retention

The assessment of NCDSS performance as it relates to foster and adoption licensing, recruitment and retention is an area of performance that has recently become a strategy of our REAP quality assurance efforts. NCDSS recognizes that efforts around licensing, recruiting and the retention of foster and adoptive families are crucial.

As a result of our recent conversations around REAP a trend has emerged. Over the past few years the placement of children into privately licensed foster homes has increased. Looking back to SFY 2009, 52% of children in foster care were placed in publicly licensed homes, 48% were placed in privately licensed homes. SFY 2010 and 2011 the placement rate was almost 50% to each. In 2012, for the first time the rate of placement for

privately licensed homes (51.4%) exceeded those publicly licensed (48%). This trend has continued in 2013 publicly licensed homes were utilized for placement 54% of the time and publicly licensed homes 46% of the time. The data for 2014 suggest that this pattern will continue. Using data such as this, will inform the direction that NCDSS will take while considering where to concentrate our efforts.

*A side effect of REAP is that counties are thinking outside the box on how to resolve placement stability outcomes. A wish for the future verbalized by counties is for a child upon entry into care comes with a list of pre-approved services.*

- Strengths and concerns evolve around having recognized through REAP implementation the importance of using data and community collaboration, a strong public/private partnership has been established. Supporting this partnership is the development by NCDSS' of a data system that allows a more analytical approach to looking at evaluations and improvement strategies. Feedback from these partners is that the ability to submit documentation items electronically has resulted in greater efficiency. However, there is still room for improvement.

#### **Two Examples:**

Providing mental health services locally is optimal for the children and families that DSS serves. Two counties realized that they did not have the capacity alone to provide these services; as a result, these two counties figured out how to jointly fund a new position to provide these services to their families.

A second county has worked with their Mental Health providers to promote a joint understanding of each agency role. This has forced policy and practice change in all disciplines. Now a mental health provider has been co-located in the DSS agency and standing bi-monthly meetings occur.

A quote from our state level Mental Health partner:

*"The challenges are larger than anyone agency can fix; it will take all of us working together and taking down the silos", (Walt Caison, NC DMHDDSA, March 17, 2014).*

FFY 2015-2019, NCDSS will focus on the recruitment of foster parents specifically willing to work with incarcerated parents, substance abusing parents and/or parents who are currently in treatment for domestic violence and identify the supports needed to promote placement stability.

a. Action Step

- Include in the state level data dashboard elements that will help inform form and function of our Foster and Adoptive Licensing, Recruitment and Retention plans.
- Enhance the ability of foster and adoptive families to care for children in a nurturing, supportive way. To recruit, license and retain foster and adoptive parents that will maintain safe placements for children, foster parents receive 30 hours of pre-service training prior to licensure followed by 10 hours annually. NCDSS work with Project Broadcast is will result in a training curriculum that includes trauma informed skill building.

In FFY2015-2019, NCDSS will focus on the recruitment of foster parents specifically willing to work with incarcerated parents, substance abusing parents and / or parents who are currently in treatment for domestic violence and identify the supports needed to promote placement stability.

### III. Plan for Improvement

NCDSSs Vision:

*That all North Carolinians will enjoy optimal health and well-being.*

For this to be, NCDSS will focus on the safety, permanency and well-being of the children and families involved in the Child Welfare System.

Looking forward for this FFY 2015-2019 CFSP, NCDSS will focus its efforts and resources around the implementation of REAP as our CQI framework. We believe that this implementation will have a positive effect on the performance of the state in meeting outcomes for children and families involved in our Child welfare system. As we plan NC's five year path, we will outline our goal, objectives, measures of progress, training and technical assistance options, and what supports are needed for full implementation of REAP statewide.

#### A. Goal ~ REAP Expansion

The NCDSS service goal provides a roadmap for the direction that the child welfare system must follow. We are given license to adopt and adjust these goals as determined by the families that are being served. To do this we must look for the signs that we are managing our resources to be effective, providing outreach and support to those who are at-risk and when those at-risk families are identified, to provide services that will allow them to remain in their own communities, and for those who need protective services that those needs are met with the intension of helping families preserve their relationships in their own communities.

REAP statewide expansion has been identified as the overarching goal to support the improvement of outcomes for children and their families in NC. The expansion of REAP is supported by NCDSS leadership, county leadership and stakeholders. The umbrella of REAP touches all aspects of our child welfare system: safety, permanency and well-being, in coordination with the systemic factors that influence practice.

The formation of the REAP Steering committee has put in to place a mechanism to foster on-going feedback loops. The Steering Committee is dedicated to guiding the expansion of REAP and has established workgroups to delve into implementation strategies, these workgroups explore data performance, communication, training, CQI and readiness. Ultimately, the work of the Steering Committee is to ensure that the flow of information goes from state to county and back again.

- A strategy for improving outcomes has been the establishment of quarterly learning communities which ensures that REAP counties have an opportunity to share lessons learned, learn new strategies and provide peer support. Learning Communities are day long events that cover topic of interest to REAP counties. Previous topics have included strategies to increase community engagement where the CCPT State Advisory Board chair participated in a panel. Data analysis training, CFSR, and developing Achievement Plans are among some of the topics offered. With each Learning Community a morning session offers to all participants and topic of choice from the REAP counties. Afternoon sessions are 20 minutes sessions

that affords participants to attend 3 different sessions. At the end of the Learning Community, participants are encouraged to complete a survey to inform NCDSS and the REAP Steering Committee of the effectiveness of the Learning Community.

These efforts to expand REAP into an established, well-functioning CQI system and its impact on outcomes is outlined below.

1. Safety

When we look at where NC has been in regards to safety, we continue to see that NC continues to fall below the current national standard. As our CQI framework, REAP forces the examination of critical practice issues that impact safety such as whether our prevention efforts are reducing the annual rate of child maltreatment or the annual rate of child victimization / repeat victimization. It is this examination that promotes efforts at identifying why our performance on safety has been below the national standard and where we need to focus our resources.

Based upon the federal measure for this outcome: the Absence of Recurrence of Maltreatment and the Absence of Maltreatment in Foster Care it may be too soon to determine if the implementation of REAP has had an impact on these outcomes. The chart below shows NC’s performance on combined Safety Outcomes as compared to the national standard. The REAP data dashboard captures this information for all 100 counties.

Safety Outcomes 1	National Standard 94.6 %
2007	92.61%
2009	93.22%
2011	92.84%
2013	93.85%
REAP County	93.73%

Duncan, D.F., Kum, H.C., Flair, K.A., Stewart, C.J., Vaughn, J., Bauer, R, and Reese, J. (2014). Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina (v3.1). Retrieved [May,15, 2014], from University of North Carolina at Chapel Hill Jordan Institute for Families website. URL: <http://ssw.unc.edu/ma/>

Safety Outcomes 2	National Standard 99.68 %
2007	99.77%
2009	99.85%
2011	99.74%
2013	99.75%
REAP County	99.75%

Duncan, D.F., Kum, H.C., Flair, K.A., Stewart, C.J., Vaughn, J., Bauer, R, and Reese, J. (2014). Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina (v3.1). Retrieved [May,15, 2014], from University of North Carolina at Chapel Hill Jordan Institute for Families website. URL: <http://ssw.unc.edu/ma/>

However, in discussion with our stakeholders and during our joint planning session, suggestions were received to guide the plan to improve NC’s performance related to Safety. Based upon these suggestions, NCDSS will work toward the goal of

implementing REAP statewide and to provide support for fully exploring the story behind the data for this outcome. Through TA to REAP Counties from NCDSS staff, the factors that affect Safety Outcomes at the local level are explored, a determination if additional information is needed is made, additional data is collected, and then the results are analyzed with stakeholders and if a conclusion can be made a plan is put into place to address improving Safety Outcomes for their community. NCDSS is committed to helping counties improve safety for children in their communities. One effort is the on-line TA Gateway (more information on this effort is presented later in this document) that offers a streamlined method to request assistance and obtain guidance.

Essential to this goal is the use of an automated case management system. NC FAST has been identified as the solution to our need to have an automated case management system; however, progress has not kept paced with the needs of our counties.

*Quote from a Stakeholder in regard to an automated case management system:*

*“We need the data now...We can’t wait on the State”*  
(Joint Planning March 18, 2014)

## 2. Permanency

When considering how our goal, the implementation of REAP/ CQI impacts a child’s permanency, one factor to consider is: *do children have stability in their living situations?* In Round 2 of the CFSR, North Carolina did not meet the national standard of 86%.

Prior to the implementation of REAP the statewide performance indicator shows that statewide children with 2 placements or less Achieved Permanency	After the implementation of REAP, improvement is seen regarding the statewide performance indicator shows that statewide children with 2 placements or less Achieved Permanency
2007 ~ 68.22% of the time	2011 ~ 69.57% of the time
2009 ~ 69.07% of the time	2012 ~ 69.75% of the time

([http://sasweb.unc.edu/cgiin/broker?\\_service=default&county=North+Carolina&entry=8&label=&format=html&program=cwweb.ncfsrnet2.sas&meas=4&year=20074&Type=L](http://sasweb.unc.edu/cgiin/broker?_service=default&county=North+Carolina&entry=8&label=&format=html&program=cwweb.ncfsrnet2.sas&meas=4&year=20074&Type=L))

The implementation of REAP as our CQI framework will help to answer the question: *Is the implementation of REAP the reason there has been a 1.53% change in placement stability from 2007 to 2012?* Anecdotal information may be available to answer this question; however, understanding the principles of CQI shows that grounding practice changes in verifiable data maximizes the use of resources. Impacting our systems ability to ensure children have permanency in their living situations are other child serving systems. More information will be provided in the objectives listed in this section.

*Quote from a Stakeholder in regard to achieving permanence:*

*“By being outcome driven we are able to find placements for those kids that on one would want”*

(Joint Planning March 18, 2014)

<http://www.ncrapidresource.org/>

### 3. Well-Being

Much harder to grasp is the quantification of well-being. The implementation of REAP is giving North Carolina a method to begin documenting the strategies and activities that allows for a structured review of well-being. REAP is elevating the concept of well-being into cross-system community conversations. Efforts to begin this conceptual quantification will continue to take place in concert with stakeholders. Systemic factor improvement related to well-being is dependent upon the array of service providers collaborating with NCDSS around this issue. From page 16 the data regarding well-being shows that NC is on target for having the issue of well-being is a priority.

In 2007, North Carolina was noted to have strengths (96%) in addressing the educational needs of children as well as their physical needs. The implementation of REAP as a conceptual system reform, has given North Carolina the ability to be more intentional and strategic in how well-being is defined and measured. Additional information on the strategies being used will be provided in the objectives section.

*Quote from a Stakeholder about well-being:*

*“We need to see kids as a holistic unit and not just a set of allegations”*

(Joint Planning March 18, 2014)

## **B. Objectives/Strategies to address Safety, Permanency and Well-Being Outcomes as a component of our goal of REAP Expansion.**

Available data has determined that NCDSS should make well-being a priority. In addition, revisiting the data on our performance with permanency outcomes has confirmed that this is an outcome we need to continue to focus on as presented in the data in Section II Assessment of Performance. NCDSS has identified 3 objectives to address well-being and permanency with an eye remaining on safety: Monitoring and oversight through Monthly Caseworker Visit Monitoring, expansion of Trauma Informed Practice, and the exploration of a child welfare practice model for In-Home Services.

1. Objective: Monitoring and oversight through Monthly Caseworker Visit Monitoring Intervention. Strategies to be implemented with a CQI lens:

*To learn more about Monthly Caseworker Visits see Section VII. p.100)*

- Training for counties to examine their internal processes to ensure data is documented correctly.
- Technical Assistance to address quality data entry issues.
- Exploration through data and technical assistance to uncover the reason the rate of child maltreatment in foster care continues to vary.
- Clarify the role for monitoring and oversight by the State.

One strategy for increasing oversight and monitoring to address safety and permanency outcomes has been the development of a foster care documentation tool that tracks concerns over time and is an intervention that is expected to impact the systemic factors that influence practice: the improvement of our information system, improvement of our case review system, and training of staff.

The documentation tool prompts foster parents and workers to discuss placement situations most relevant to safety, permanency and well-being, and then to plan together the appropriate follow-up for any concerns that are identified. The revamped process for documenting structured quality contacts combined with the increased frequency of contacts has produced improvements. The percentage of children who had 2 or fewer placement moves in number of placements experienced by children in foster care has increased during that period from 87.55% in 2007 to 91.3% in 2013 and for children in foster care less than 12 months from 68.22% in 2007 to 76.1% for children in care between 12 and 24 months. Therefore, increasing and expanding the capacity of caseworkers to respond and reach more children in need of services, in a more targeted and meaningful way, improves outcomes. The use of data is essential to making informed decisions about policy, practice and resources. Without the development of analytical skills to interpret data, the use of data is ineffective. To determine where NC needs to be in relation to performance standards, it is first necessary to determine what our current performance means and where resources are needed to move performance.

## 2. Objective: *Expansion of Trauma Informed Practice ~ Project Broadcast*

Project Broadcast is an initiative that began in October 2011 and is funded by ACYF. Project Broadcast is designed to improve safety, permanency, and well-being outcomes of children involved in child welfare system through improving their access to trauma and evidence-informed practices and services.

Key partners include the Center for Child and Family Health (National Child Traumatic Stress Network site), the University of North Carolina at Chapel Hill and 9 county social services agencies (Buncombe, Craven, Cumberland, Hoke, Pender, Pitt, Scotland, Union, and Wilson).

As the project concluded its planning year, several readiness assessment tools were developed and administered to determine the pilot counties' readiness to begin trauma-informed work. In total, 373 assessments were completed by child welfare professionals, 263 by foster/adoptive/kinship/therapeutic parents, and 807 by professionals in other child serving systems. Two Learning Collaborative

administered by the North Carolina Child Treatment Program (NC CTP) commenced during SFY 12-13 to increase the number of mental health clinicians who can provide trauma-informed evidence-based treatment. There were 52 clinicians who participated in a Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) Learning Collaborative and 34 clinicians participated in a Parent-Child Interaction Therapy (PCIT) Learning Collaborative.

It is funded through September 2014. The time remaining on this grant will allow NCDSS to:

- focus on the development of a plan to bring trauma-informed practice to all county departments of social services after September 2014
- Embed trauma informed information into other statewide training curricula and TA
- Align policy and practice with trauma-informed concepts
- Develop a sustainability plan

The work being done through Project Broadcast has the potential to influence all of the systemic factors that are at play in our child welfare system. Specifically, the effect will be felt in our training system and will be visible as NCDSS increases effort to be responsive to the community.

*Data:  
It's all about  
using a  
flashlight to  
see practice  
not a hammer  
to shape it*

3. Objective: *Exploration of a Child Welfare Services Practice Model*

In cases where concerns about child abuse and neglect are present, safe solutions can often be found within families and communities so that children can remain in their homes while their families are offered supports and services that engage, involve, support and strengthen them (“National Resource Center for In-Home Services”, 2010). Data, as well as, anecdotal evidence indicate that the best Child Welfare and In-Home services are grounded in family-centered and culturally competent principles. Additionally, In-Home Services should be effective in reducing maltreatment; improving caretaking and coping skills; enhancing family resiliency; supporting healthy and nurturing relationships; and promoting children’s physical, mental, emotional, and educational well-being. The goals for this exploration are to:

- Gather, review, and consider current, successful Child Welfare In-Home Services practice models
- Provide recommendations to NCDSS as to which model should be selected
- Guide the implementation process for the chosen model

NCDSS believes that the next step in the transformation of its child welfare system is to implement a practice model throughout the child welfare continuum. Over the last year, the workgroup has closely examined three practice models in particular— Solution Based Casework, Safety Organized Practice, and Signs of Safety. The exploration of these models has included direct conversations and presentations

from the model developers themselves. It also includes not only investigating what the models have to offer but how they fit within North Carolina's existing systems. The model developers remain in communication with NCDSS so as to provide ongoing support throughout the decision-making process.

NCDSS in conjunction with county partners have communicated to senior leadership that this work is larger than can be accomplished within this workgroup.

*Quote from a Stakeholder:*

*"Teasing out priorities is a challenge for the Division (NCDSS)...we need help to guide the process for further action."*

(Joint Planning March 18, 2014)

of needed resources has been sent to the NC Department of Health and Human Services Secretary.

### **C. Measures of Progress**

To help identify progress on the goal and objectives identified, two strategies are employed: North Carolina Education Stability Task Force and the Foster Care Oversight and Coordination Plan (FC-HOCP). In 2011, The Education Stability Task Force and NCDSS partnered with the NC Department of Public Instruction (NCDPI) and the NC Administrative Office of the Courts (NCAOC) to make recommendations to help establish educational stability for foster youth which recommended a task force be formed to address the systemic issues related to educational stability of NC's foster youth. This strategy has resulted in a pilot to test the efficacy of a bench card for judges to use during child welfare hearings that will help guide decision making. Indicators are that this bench card is having a positive impact on the educational stability of children in the foster care system. This work has not yet completed. Our university partners will continue to explore funding to further the evaluation of this work on educational stability of foster youth within the state.

The FC-HOCP is another strategy to identify goal progress. This FC-HOCP is an effort between the North Carolina Division of Medical Assistance (DMA) to steadily increase the enrollment of foster children into the Community Care of North Carolina (CCNC) medical home networks, to ensure optimal physical, oral, developmental, behavioral, emotional, cognitive, educational/vocational, and social functioning across the foster care population. This partnership has led local county departments of social services, medical providers and the CCNC network to voluntarily begin a second level review of antipsychotic prescriptions. The current protocol is to look at any foster child receiving more than 5 prescriptions filled of an antipsychotic medication, as well as, any foster child under the age of 4 receiving a prescription of an antipsychotic medication.

These strategies will help to inform the goals and objectives that are refined in this section to clearly layout how North Carolina will work to achieve them.

### 1. Goal ~ REAP/CQI Expansion

North Carolina has identified one driving goal to launch improvement in NC's child welfare system; the implementation of REAP as a CQI framework in all 100 counties, is the goal for FFY 2015-2019. This goal is multi-faceted and touches every aspect of our child welfare system and continuum. The functional component for an administrative structure to oversee effective CQI system function is seen within the infrastructure and processes for REAP, which are still early in development; however, North Carolina intends to utilize REAP and expand its capacity to serve as the functioning CQI system to meet the national standard that all states must have an established CQI system. The plan for moving REAP forward statewide involves the recognition that this is the means by which NCDSS will have oversight and monitoring of county performance in the services and programs under the umbrella of child welfare. North Carolina aggressively seeks to implement REAP into all of its counties over the next 5 years. With 17 counties currently functioning at varying levels, there are 83 more to be initiated. A REAP expansion plan is pending approval from our NC Department of Health and Human Services that includes the addition of state level positions and fiscal resources. Once approval and resources are obtained NCDSS will bring approximately 20 counties per year into REAP status. A side note is this is that there are counties who have indicated they are going to embark upon REAP activities without waiting for NCDSS.

To determine the measurement of improvement as it relates to safety, permanency and well-being, there are key components needed to ensure REAP is implemented with fidelity to the CQI model. Before we can begin to measure performance on outcomes, NCDSS must first be sure that the correct "tools for the job" are being used and that the right data indicators are being assessed.

- a. Quality Data Collection and Information Case Management system as a functional component of CQI. Our current data collection tools do not support good CQI practice, leading to inconsistencies and missed key decision points.

- Action Step: Expand the capacity of NCDSS to collect quality data.

A CQI system is based on data that informs practice in a meaningful manner. The REAP data dashboard maintained by UNC-CH is one of the tools that NCDSS uses to help determine the quality of data collected. In collaboration with AOC and their data system, JWISE, data will be shared under an MOU to look at issues related to court performance impact on outcomes. In partnership with NCDSS and county DSSs will on an on-going basis, strategize on additional data elements that need to be collected in an effort to gain a larger picture of outcomes.

Dissemination of quality data will take place at the state and local level, to ensure partners are informed and engaged. NCDSS manages this through the delivery of County Director of Social Services Letters, Administrative letters and a series of listservs that target multiple levels of the child welfare system.

- Challenge: additional resources will be needed to explore data collection alternatives. The development critical thinking skill of staffs to analyze, interpret and communicate data is also a challenge.
- b. Training of State and County leaders in the REAP/CQI model facilitates the ability to develop skills in the analysis and dissemination of quality data as a functional component of a CQI system.
  - Action Step: Training as a tool will deliver three components known as Becoming Achievement Focused (BAF) to state and the 83 remaining counties. In addition to formalized training offered the on-going provision of TA will be expanded through the use of the TA Gateway.
  - Challenge: additional resources will be needed to deliver the training; through in-house resources and/or out-sourced contracts. The development of analytical skills for individuals is also a challenge as not all individuals are at the same place in their learning continuum.
- c. Capacity for on-going Case Review of a functional component of REAP.
  - Action Step: additional staff and resources will be needed to retrieve a statistically significant sample in order to ensure that these reviews reflect actual practice. NCDSS in partnership with REAP counties will outline and conduct a pilot on a revised process for county led delivery of the OSRI and QA by NCDSS staffs. As lessons are learned and processes adjusted, REAP Counties will a part of the evaluation of the success of the pilot. Success will be seen when it is determined that the county has completed the OSRI with fidelity and reliability.
  - Challenge: In addition to child welfare staff and resources, NCDSS recognizes that sections outside of child welfare influence this action step. There is also a fiscal note attached to this effort for counties.
- d. Administrative Structure of a functional component of CQI.
  - Action Step: to provide oversight and a measurement of performance for 100 county Achievement Plans, the necessity for additional resources or realignment of current resources will be highlighted. In partnership with the REAP Steering committee and NCDSS will operationalize the steps to the REAP process and develop a plan for updating the written document. As the REAP process is operationalized, NCDSS will actively search for relevant non-NCDSS agencies to take part in REAP with NCDSS.
  - Challenge: to address the oversight and monitoring of county Achievement Plans in an efficient manner will require the NCDSS to have multiple staff skilled in desktop productivity tools which are

integrated with communications. Inherent in this process is the need for financial resources.

2. Objectives Measures of Performance

North Carolina has identified 3 objectives that will move the implementation of REAP forward and improve outcomes for children and families involved in the child welfare system.

a. Monthly Caseworker Visits

NCDSS has chosen this as an objective as the incidence of maltreatment in foster care and the number of placement disruptions remains a concern. To measure county performance a monthly foster care visit documentation tool was implemented in 2008, and is a comprehensive assessment of safety in the living environment and contains the following elements: changes in household membership, safety and supervision practices used in home, family’s level of stress, cultural and ethnic considerations.

Outcome Measures National	Standard	FFY 2007	FFY 2012	FFY 2013
Absence of Maltreatment in Foster Care	99.68%	99.79%	99.55	NA
Two or fewer placement settings for children in care less than 12 months	National Median 83.3%	87.55%	91.6%	91.3%
Two or fewer placement settings for children in care 12 to 24 months	59.9%	68.22%	76.2%	76.1%

Year	Target: 100% - 99.68% Absence of Maltreatment in Foster Care
2015	99.68%
2016	99.90% Achieved
2017	99.0% Maintained
2018	100% Achieved
2019	100% Maintained

This clearly outlines NCDSS’ state’s role in supervising county child welfare programs from identifying issues through the use of data and the means by which technical assistance is provided.

More information is available in Section VII. P. 100.

b. Project Broadcast Expansion

More on Project Broadcast see Section VII. p.100

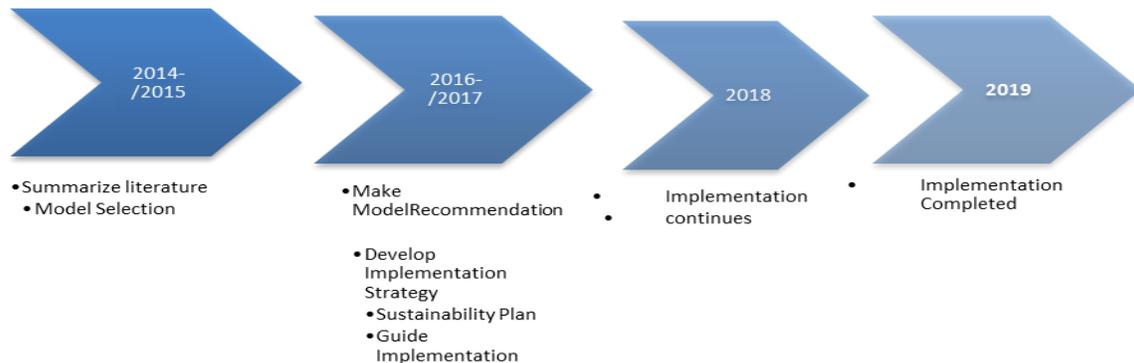
Ultimately, the measure of progress and performance milestones for Project Broadcast is that the implementation of trauma informed practice in all 100 counties will be complete by 2019.

To accomplish this: A sustainability plan will need to be conceptualized as a key step toward aligning policy to reflect Trauma Informed Practice. An interim target would be to have a written implementation plan within 24 months. This will need to be completed before this practice can be imbedded into our statewide training curricula.

Quote from a Stakeholder when asked what NC was doing to address trauma:  
*“In partnership with DSS we have trained 1300 local DSS staff, clinicians, schools, Guardian Ad Litem, law enforcement and the General Assembly. We were given money to keep doing this...that says a lot”*  
(Joint Planning March 17, 2014)

c. Child Welfare In-Home Services Practice Model

North Carolina has long recognized the value of children being raised with their families. Even in cases where concerns about child abuse and neglect are present, safe solutions can often be found within *families and communities* so that children can remain in their homes while their families are offered services that engage, involve, support and strengthen them (“National Resource Center for In-Home Services”, 2010). Data, as well as, anecdotal evidence indicate that the best Child Welfare In-Home Services Practice Models are grounded in family-centered and culturally competent principles. Additionally, In-Home Services can be effective in reducing maltreatment when protective factors are recognized and strengthened; improving caretaking and coping skills; enhancing family resiliency; supporting healthy and nurturing relationships; and promoting children’s physical, mental, emotional, and educational well-being. North Carolina is dedicating resources to identify a practice model that will easily coalesce into the continuum of our child welfare system.



## D. Staff Training, Technical Assistance and Evaluation

### 1. Training

The NC Statewide Training Partnership is constantly updating and expanding to successfully meet the training needs of the state’s child welfare workforce. Through the Training Partnership, NC is able to offer state and counties, small and large, rural and urban, the same quality training experiences to keep them abreast of issues in the ever-changing field of child welfare policies and practices. Core competencies in child welfare practice are offered through a variety of mediums.

*Quote from a Stakeholder:*

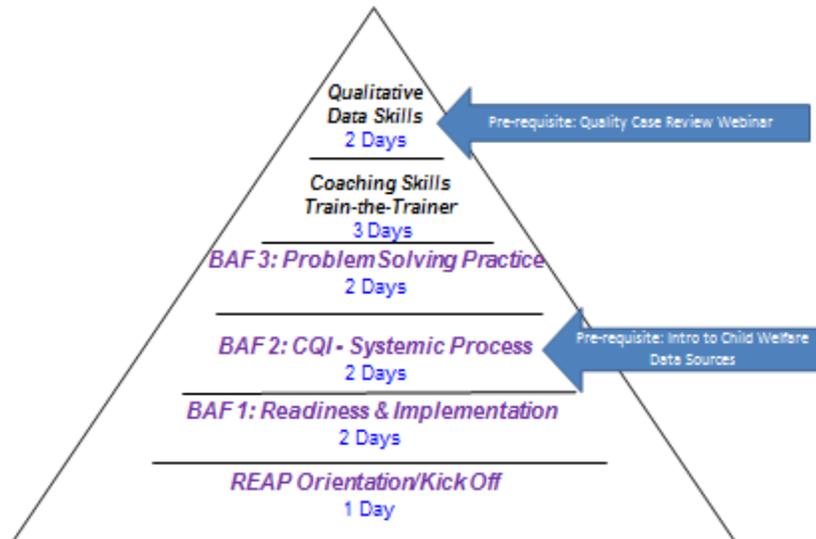
*“Education and training are all good but without an automated case management system, even with your best workers...you won’t know if you are meeting true outcomes”*

(NC Association of County Directors of Social Services, April 9, 2014)



Statewide as its goal  
 of REAP at  
 designed the

### Training for REAP Core Leadership Teams in *Becoming Achievement Focused (BAF)*



1

- BAF I: Readiness and Implementation: The training will review core areas of readiness, including agency culture, staff attitudes and capacity, resources, and community partnerships. Teams will then identify strategies for increasing their readiness and overcoming potential barriers. This course was developed by the Family and Children’s Resource Program, part of the Jordan Institute for Families, UNC-CH School of Social Work.
- Introduction to Child Welfare Data Sources: This blended training builds the capacity of staff to effectively access and use the major child welfare data sources for North Carolina. The course includes a 90-minute live online session to ensure participants are able to log on to all of the sites, followed by a one-day classroom training that introduces participants in more detail to the NC DSS Management Assistance Site, the Client Services Data Warehouse, and XPTR reports. This course will include instructions on navigating the sites and hands-on activities to find and utilize various reports.
- BAF II: Child Welfare CQI Cycle: This two-day classroom training builds the capacity of staff to effectively use outcomes data to improve agency performance. Participants will learn how to access and use data from the NC DSS Management Assistance Site and Data Warehouse, and they will practice a four-step CQI process for child welfare using relevant data. This course will include hands-on activities and lessons learned from REAP implementation efforts. Participants will need to bring a laptop with wireless capacity.
- BAF III: Coaching: Coaching is a structured process in which a coach uses specific strategies to help learners improve their performance on the job and to contribute to improved agency practice and outcomes. “Coaching in Child Welfare.” (Summer 2012). Child Welfare Matters. NROI. <http://muskie.usm.maine.edu/helpkids/rcpdfs/cwmatters12.pdf>
- Using Qualitative Data: This one-day classroom training provides practice in data analysis and presentation to assist child welfare staff with Continuous Quality Improvement (CQI) efforts. Participants will identify barriers and solutions for using their own community’s data in completing the four-step CQI process for child welfare. Participants will practice how to use data to answer specific questions, design data collection tools and effectively select and share data with different types of audiences. A pre-requisite to this training is participation in a webinar on Quality Case Reviews.

*Quote from a Stakeholder:*

*“The training system needs to involve supervisors more in the training process; how to prepare workers for training and how to support them when they return”*

(Joint Planning March 19, 2014)

The BAF training series plays a pivotal role in supporting not only our goal to implement REAP statewide but the objectives that we have outlined for monthly caseworker visits, statewide implementation of Project Broadcast and the identification and implementation of a Child Welfare In-Home Services Practice Model. This supportive role can be described as it:

- Supports implementation of evidence-based practices
- Supports implementation of outcomes-focused child welfare practice
- Supports skill development associated with MRS. Family-centered practice and a solution-focused approach to child welfare

*Quote from a Stakeholder regarding worker retention:*

*“If workers don’t feel like they are doing something they won’t stay...we could get more out of workforce as [treated like] first responders”  
(Joint Planning March 18, 2014)*

## 2. Technical Assistance

NCDSS Provides a wide range of Technical Assistance (TA) to county child welfare agencies that cover informational topics to intensive on-site program improvement activities. The execution of a web-based gateway to provide TA (TA Gateway aka TAG) has allowed NCDSS to begin tracking trends and patterns around policy and practice issues rather than rely on anecdotal information. Usage of the TAG has been limited to the 17 REAP pilot counties; however, having recognized the benefit of this tool, NCDSS will continue to expand access to the TAG to non-REAP counties and grow the capacity of state staff to work within the TAG.

TA Gateway

<https://nccwta.org/>

The TAG offers counties the option to search a knowledge base, similar to an FAQ, to locate an answer to a policy, programmatic or rapid response question. Should the knowledge base not provide the information needed, counties are able to submit a ticket for TA. To use the knowledge base it is not necessary to create a user account; however, to submit a ticket a user account is required. County users are restricted to line supervisors and above. When submitting a ticket, the user is required to identify the exact nature of the question, what outcome and what performance measure the question is related to. Once entered, the ticket can be prioritized based on the nature of the request, categorized based on the information presented in the request and assigned to a NCDSS manager. All of the contact between NCDSS and the user is documented within the on-line ticket that allows others to be brought in for collaboration. The functionality of the TAG allows NCDSS to create and run reports that will help identify what are some frequent topics for TA, how often a county is using the TAG, or if there is a geographical area that is struggling with a particular issue.

The TAG allows NCDSS to track and evaluate its own performance in responding to county request for TA. Some of the elements that can be assessed are: the

timeliness of response and completion of a request for assistance; the count of tickets submitted by type, priority and NCDSS staff. The ability to tailor reports is built into the system. This provides NCDSS with another snapshot of what the needs of the counties are in a tangible way, eliminating anecdotal justification.

The OSRI is a tool that gives a great deal of information about a specific case and a county's ability to achieve positive outcomes for children and families. Its depth is also one of its potential challenges to its use as the complexities of information on the tool are numerous. The OSRI use in a traditional case review process only allows for a small number of cases to be reviewed rather than a larger sample to show a broader trend analysis across a larger sample of cases. Another form of TA that NCDSS can provide is referred to as Process QA. This is a look at the required performance standards that guide practice to give counties an indication of what their performance is on the basic required activities in practice. The tools developed assess activities during the CPS assessment process, In-Home Services, Foster Care and Adoption and are currently being used; they are based on concretely measurable outcomes. These relate to measurable practice expectations which can give us a good picture of the counties practice across a broad sample and let us know where a more in depth look or a tool to study a specific area and/or deploy resources to assist a county in improving their practice as needed.

### *3. Evaluation and Research related to training and technical assistance.*

The training system in North Carolina has included a structure for evaluation (evaluative) component where participants are provided with an opportunity to provide feedback for all events. However, NCDSS recognizes the need to go beyond this first participant satisfaction and focus on Transfer of Learning and evaluation.

The NC Statewide Training Partnership evaluates the effectiveness of training provided on an ongoing basis through Participant Satisfaction Surveys given to participants at the end of each training event. Recently these evaluations have become electronic and participants can access them immediately upon the completion of each training event. The training evaluation forms are housed on the ncswLearn.org training registration website. Feedback for each course as well as each trainer is accessible to the staff development training administrator, the staff development training manager, and the trainers at the end of each course. A regular ongoing review of training participant satisfaction surveys is made by training management in order to identify early any issues that might need to be addressed in the curriculum, state policy confusion, or problems with the individual trainers. At the end of the calendar year, these electronic forms are compiled for an overall report of participant satisfaction with the training and trainers. The results are shared with the training team, the NCDSS management team, the counties through webinar or publication, and any contract training staff.

The main purpose of the e-PSF is to enable training system administrators and training providers to collect and analyze information from training participants to facilitate decisions to improve various aspects of the training program. These reports are part of a comprehensive plan for evaluating the North Carolina Child Welfare Training Program. The findings, along with those from past PSF reports, indicate that from the point of view of people who attend training, the Child Welfare Services Staff Development Team management and staff, training vendors, and contract trainers continue to deliver high quality training. The ultimate purpose of these evaluations and the training itself is to ensure that through the Child Welfare Services program's CQI process, courses are added, deleted or revised to best prepare child welfare staffs with the knowledge and skills necessary to help families and children achieve safety, permanence, and well-being.

This in part has given NCDSS and UNC the opportunity to evaluate and map the region of the state in regards to what geographical area is accessing training and aids in the calendaring of training.

In addition to providing feedback regarding the performance of the trainers this provides a glimpse into areas of policy and practice that need augmentation. The TAG includes the ability to manage performance of state staff and monitor the accuracy of information provided. As the capacity of the TAG expands, the usability of this report feature will increase.

In support of REAP, the Steering Committee has formed a data performance workgroup that evaluates ensures continuity with the objectives for the collection of data.

## **E. Implementation Supports**

1. To be successful in achieving our identified goals to implement REAP statewide and our objectives; NCDSS has identified the following as needs:
  - a. State-wide consultation and monitoring of county practice.

In addition to the review of case files, consultation and monitoring of county practice includes helping local agencies to identify where their strengths and challenges are through the use of data. To be successful the following is needed:

    - Updated Technology Resources and Hardware  
NCDSS continues to promote NC FAST as the solution for an automated case management solution. However, NCDSS acknowledges that NCFast may not be the only solution and alternative solutions are being explored.
    - A mechanism for sharing data/information across child serving systems. NCDSS is working in concert with our child serving partners, such as AOC, DJJDP and Mental Health to explore process to share data across systems and the MOUs that would need to be established to allow this to occur.

- Restructuring of our Child Welfare Section staff to align with a fully functioning CQI model that includes a case review component. Strategies include: the inclusion of the Child Welfare Outcomes Council on reviewing county Achievement Plans, Case/Fatality Review summaries to make recommendations for state and local programmatic/systemic changes; drafting the Annual Child and Family Services Report; and involving our state level partners in this feedback (CCPT, Mental Health, DPI, DPH etc.).
- Contract negotiations to increase the availability of training as evidence through the number of trainer days needed (estimated 24 days).

2. Sustainability for REAP implementation

To hold ourselves accountable, NCDSS internally and in partnership with Departmental Leadership, child advocates, and county departments of social services will make a commitment to the improvement of our child welfare system through REAP as our CQI framework. This commitment will involve at a minimum fiscal requests to address, staffing, training, data systems and equipment.

## IV. Services

The vision for the delivery of services is that through these services safe and nurturing communities will promote resiliency for all North Carolina families.

### A. Child and Family Services Continuum

As the state's child welfare agency, NCDSS is responsible for the supervision and administration/monitoring of social services programs in all 100 county social services agencies. Monitoring or administration is accomplished by developing policy, and providing supervision, guidance, training and consultation regarding services for abused, neglected, and/or dependent children and their families across a continuum of services from: Family support, family preservation and time-limited reunification, and adoption promotion and support services. These services are discussed throughout this plan as each section addresses one or more aspect of NC's child welfare services continuum.

The prevention and intervention portion of NC's services continuum begins with the discussion of NC's Family Support, Respite and Children's Trust Fund (CTF) services, the Network of Public and Private Family Strengthening funders, and the efforts of Prevent Child abuse North Carolina (P. 58). The spectrum of NC's publicly funded child and family services continues with the identification of services to families who have been identified as having a maltreatment occurrence. In Section III. Plan for Improvement, NCDSS readily recognizes that well-being is an outcome that needs improvement. The objectives to address well-being or "treatment services" include a plan to expand Project Broadcast, our trauma informed practice effort; and, the exploration of a Child Welfare Practice Model for an In-Home Services framework redesign (page 49).

The continuum of services that encompasses foster care service is also addressed in our Plan for Improvement (Section III.). NCDSS defines foster care as "temporary substitute care provided to a child who must be separated from their parent or caretakers". To ensure that these services are being provided within defined practice and outcome measures, NCDSS has outlined a plan to continue partnership with our public and private child-placing agencies, university partners and other stakeholder to pilot and evaluate the monthly foster care visit documentation tool (Section VII. Page 100) and provide support for the Permanency Innovation Initiative Fund (Section X. Page 111). Much has been written regarding Project Broadcast which plays a role in the quality of services provided to children who have been traumatized and are in foster care. The expansion and sustainment of Project Broadcast has been identified as an objective to address safety, permanency and well-being. More detail can be found in Section III. Page 39. Project Broadcast is also a key player within the continuum of foster care as both Intensive Family Preservation Services (IFPS) and Time Limited Family Services (TLRS) are provided to children and families in cases of documented child abuse, neglect and dependency. IFPS is provided to families in which the child is "at imminent risk of removal from the home". TLRS is provided to families in which the child is about to be reunited with their family and is therefore at risk of return to foster care. The goal is to prevent unnecessary placement of children away from their families by restoring families in crisis to an acceptable level of functioning delivered within a System of Care framework. These services are designed to meet the following objectives: 1)

stabilize the crisis which put the family at imminent risk; 2) keep the child, family, and community safe by defusing the potential for violence (physical, sexual, emotional/verbal abuse); 3) help families develop the skills, competencies and resources they need to handle future crisis situations more effectively.

Post Adoption Support services utilizes the Request for Applications (RFA) approach to strengthen its post adoption support services by incrementally intensifying requirements such as evidence-based trauma-focused programs and screening and functional assessments. Through the RFA process, NCDSS has brought together public and private agency adoption professionals and family support professionals to implement a state initiative to improve the performance of the adoption system through greater collaboration among public and private adoption agencies and family support programs. These services include begin with offering information and referral/case management services, Adoption Assistance Payments and vendor payments, Medicaid, and services provided for under CFCIP (Section VI. Page 77).

However, Family Support and Respite services are described in detail here through the work of the state and local child abuse and neglect prevention network. Currently the network is comprised of:

- 36 direct service grantees serving 53 counties and the Qualla Boundary through the provision of Family Support, Respite, and Community Response program services. Direct service grantees provide primary, secondary and tertiary child maltreatment prevention services through the combination of CBCAP, Promoting Safe and Stable Families (PSSF/IVB-2), and North Carolina Children’s Trust Funding.
- A network of public and private Family Strengthening funders.
- Prevent Child Abuse North Carolina (PCANC) and the Prevention Network.
- North Carolina Child Fatality Prevention System - 100 Community Child Protection Teams.

#### 1. Family Support, Respite, and Children’s Trust Fund Direct Service

The Child Welfare continuum includes Family Support, Respite, and Children’s Trust Fund services.

**These services are designed to strengthen and support families to prevent child abuse and neglect that are accessible, effective, and culturally appropriate and build upon existing strengths that:**

- Offer early, comprehensive educational and resource assistance to families.
- Promote the development of parenting skills.
- Increase family stability by improving and maintaining support systems for families and their children, especially for families with children with disabilities.
- Provide referrals to early health and developmental services.
- Demonstrate a commitment to meaningful involvement of caregivers in program planning, implementation, improvement, and system change efforts.
- Demonstrate a local network through their involvement with local boards,

advisory councils, and work groups that focus on increasing protective factors in families and reducing risk factors that contribute to child neglect and abuse.

- Ultimately result in communities that value and support self-sufficient and nurturing families

## 2. Network of Public and Private Family Strengthening Funders

North Carolina maintains a collaborative network of public and private funders and supporters who engage in broad systems-level work. The purpose is to enhance fiscal and implementation support to programs delivering evidence-based and evidence-informed programming to improve outcomes for children and families.

### Shared values include:

- Investing in evidence-based programs is not only a wise, but also ethical investment.
- Collaboratively supporting specific evidence-based programs will yield greater impact for funders and for communities.
- Scaffolding is vital to the successful implementation of evidence-based programs.
- Creating efficiencies and eliminating duplication of services.

## 3. Prevent Child Abuse North Carolina and the Prevention Network

To promote and implement the shared values of the network of public and private funders, NCDSS contracts with PCANC to help direct and support the networks of coordinated child abuse prevention resources and activities to strengthen families.

### The three primary goals of the partnership with PCANC are to:

- Increase successful replication of evidence-based programs and practices to prevent child maltreatment and strengthen families.
- Influence social norms that strengthen families and promote healthy child development.
- Advocate for effective policies that best support healthy families and positive child outcomes.

## 4. The North Carolina Child Fatality Prevention System, established under Article 14 of the Juvenile Code, North Carolina General Statute 7B-1400-1414 shall:

- Develop a community approach to the prevention of child abuse and neglect.
- Understand and report the causes of child deaths.
- Identify gaps in services to children and families.
- Make and carryout recommendations for changes to laws, rules, and policies to prevent future child deaths, especially those from abuse and neglect.

The North Carolina Child Fatality Prevention System contains four components:

- North Carolina Child Fatality Task Force
- State Child Fatality Prevention Team (State Team)
- Community Child Protection Team (CCPT)
- Local Child Fatality Prevention Team (CFPT)

CCPTs are interdisciplinary groups of community representatives inclusive of mandated representatives. Located in all 100 counties, the CCPTs meet to promote a community-wide approach to the problem of child abuse and neglect. Each CCPT reviews active child welfare cases, fatalities, and other cases brought to the team for review. The purpose of the CCPT case reviews include identifying gaps and deficiencies with the child protection system, increase public awareness of child protection in the community, advocate for system changes and improvements, assist the county director in protection of living children and develop strategies to ameliorate child abuse and promote child well-being at a local and state level. Responding to previous recommendation, a CCPT Advisory Board was formed. The mission of this Advisory Board is to guide the strengthening of local teams through training and technical assistance.

In FFY 2015-2019, the CCPT state level advisory board will engage in strategic planning with technical assistance from the National Resource Center, and will continue efforts to mirror the composition of local teams and has already started identifying potential members.

Note: The description of IV-B, sub-part 2 funded activities is summarized below according to their geographic availability, eligibility and how services are provided statewide.

IV-B, sub-part 2 Service	Eligibility (types of families)	Funding Availability (geographic)	Services Provided (geographic)
<b>Family Support</b>	Those children and families that have been identified as having had maltreatment occur; eligibility varies across programs.	Competitive RFA*	Those community based agencies that applied and were awarded funding.
<b>Family Preservation Services</b>	Children, who have been identified as abused, neglected or who are dependent.	Funding Allocation to all 100 county DSS	Statewide through County DSS or Private regionally based agency
<b>Time-limited Reunification Services</b>	Children who are in foster care and are about to be re-unified with their families.	Funding Allocation to all 100 county DSS	Statewide through County DSS or Private regionally based agency
<b>Adoption Support Services</b>	Those children who have been adopted through/from the state child welfare system.	Funding Allocation to all 100 county DSS	Statewide through County DSS or Private regionally based agency
<b>Post Adoption Services</b>	Those children who have been adopted through/from the state child welfare system.	Competitive RFA*	Those community based agencies that applied and were awarded funding.

- RFA ~ Request for Application that is competitive. RFA's are announced through listserve to all county DSS and community based agencies. The RFA is also posted in the NCDSS and NCDHHS website (<http://www.ncdhhs.gov/dss/pubnotice/> ).
- Counties and Community Based Agencies are not required to apply for RFA as some communities have established programs that meet the needs of their community.

## B. Service Coordination

During 2012-2013, NCDSS continued collaborations and partnerships with several existing agency committees and workgroups to strengthen and inform its prevention work. NCDSS staff members had memberships, affiliations, and/or participated in planning committees and workgroups to inform and integrate prevention within the following disciplines/communities:

- State Collaborative for Children, Youth, and Families
- Strengthening Families State Advisory Committee
- Incredible Years State Advisory Committee
- Circle of Parents State Advisory Committee
- National Alliance for Children's Trust and Prevention Funds
- Prevent Child Abuse North Carolina's Prevention Leadership Team
- Prevent Child Abuse North Carolina's Reframing Community
- Young Mom's Connect Statewide Coordinating Committee
- North Carolina Domestic Violence Commission
- Abuser Treatment Program Subcommittee of the Domestic Violence Commission
- Domestic Violence and Sexual Assault Roundtable
- North Carolina Fatherhood Development Advisory Council
- Early Childhood Advisory Council
- North Carolina Interagency Coordinating Council
- Early Learning Collaborative
- North Carolina Lifespan Respite Project Advisory Team
- North Carolina Division of Public Health (DPH) in the implementation of the MIECHV initiative.
- NC Council on Developmental Disabilities
- Governor's Crime Commission on Child Abuse and Neglect
- Educational Stability Task Force
- Essentials for Childhood Development
- Court Improvement Project Advisory

NCDSS values working together in partnership, public and private, with families and other disciplines to achieve common goals. NCDSS is in a unique position of leadership for directing, leading, and evaluating the network of public-private partnerships.

In FFY 201-20195, NCDSS will continue its collaborations and partnerships with these several existing agency committees and workgroups to strengthen and inform its prevention work.

1. Prevent Child Abuse North Carolina (PCANC)  
NCDSS will continue to serve as a member of PCANC's Prevention Leadership Team. The team is comprised of administrators, direct service practitioners and county and state government personnel, educators, medical professionals and others with a sincere desire to improve and increase the services available to professionals in the

state. The main areas of focus for this team are to provide assistance and guidance in topics and area of focus for the Prevention Network Regional Meetings and webinars and to help PCANC shape the scope of future member benefits.

2. Early Intervention Programs through IDEA, Part C

The North Carolina Interagency Coordinating Council (ICC) brings policy makers, service providers, and parents together. It serves young children with disabilities and developmental delays, and their families. Its members work to ensure that the supports and services offered to families are in line with their needs. The council advises and assists in making policy related to early intervention services, assists with evaluation of services, supports interagency agreements, identifies services that are right for infants, toddlers and preschoolers, and supports and guides local Interagency Coordinating Councils.

*Quote from a Stakeholder:*

*“Our goal is to build capacity where we can. Staff [Public Health] are taking it upon themselves to be creative and talking to their counterparts at DSS...we can’t do this alone.”*  
(Joint Planning March 18, 2014)

The ICC is the required advisory board for the Early Intervention program in the Division of Public Health (DPH). The ICC meets on a quarterly basis. These meetings are open to the public. The Governor appoints members for two-year terms, and has requirements for attendance at the meetings. NCDSS became an active member of the ICC in July 2011.

3. North Carolina Early Childhood Advisory Council (ECAC)

The ECAC is charged with leading the state in creating and sustaining a shared vision for young children and a comprehensive, integrated system of high quality early care and education, family strengthening, and health services that support ready children, families, and communities.

**NCDSS continues as an appointee member of the NC ECAC and through participation, helps shapes the following major goals:**

- Develop an integrated, comprehensive 3-year strategic plan for high-quality health, family strengthening, and early care and education services that support ready children, families, and communities.
- Strengthen awareness and commitment among families, business, and policymakers to ensure that all young children in North Carolina are healthy, learning, and thriving.
- Strengthen the quality of programs and expand opportunities for young children and their families to participate in high-quality programs.
- Strengthen coordination and collaboration across service sectors to promote high-quality, efficient services for young children and their families.
- Support the implementation of an integrated data system that meets the individual and collective needs and capacities of state-funded programs serving young children birth to age five.

North Carolina was one of nine states receiving a Race to the Top-Early Learning Challenge Grant (RTT-ELC). The ECAC, as the lead agency for this grant, provides an important mechanism for achieving many of the goals outlined above. It is important to note that in late 2012, the ECAC administrative home was moved to DPH.

The Governor’s office and staff to the ECAC worked with the NC Institute of Medicine (NCIOM) Task Force on the Mental Health, Social, and Emotional Needs of Young Children and Their Families to assure that the task force recommendations complement and support ECAC and Early Learning Challenge activities related to social and emotional development. The full report for this Task Force is available at: <http://www.nciom.org/publications/?early-childhood>. The NCIOM Task Force on the Mental Health, Social, and Emotional Needs of Young Children and Their Families has been disseminating their findings through a series of meetings through North Carolina Area Health Education Centers (AHE). The ECAC will meet regularly over the next year to oversee all of these activities.

#### 4. Project LAUNCH

Project NC LAUNCH is an initiative of Department of Public Health (DPH). Project NC LAUNCH, first funded in 2009 with North Carolina being one of 12 states to make up the second cohort of grantees from SAMHSA, is now in its final year of implementation. Alamance County continues as the “pilot” community to test NC LAUNCH initiatives.

The mission of Project NC LAUNCH is to implement a state and local collaborative effort where key partners interact with children and families along multiple, integrated service points to promote environments for children ages zero to eight that support each child and family’s physical, emotional, cognitive, and behavioral health. Its vision is all children ages zero to eight and their families are supported holistically, such that they build resilience, enter school ready to achieve, and continue on pathways to success in life.

**Project NC LAUNCH’s goals will be met by implementing or enhancing evidence-based and promising programs in the following five domains:**

- Developmental Assessments: training for primary care physicians to conduct socio-emotional screenings.
- Integration of Behavioral Health into Primary Care: early establishment of medical home.
- Home Visiting Programs: expansion of Parent’s as Teachers as well as implementation of Triple P (Positive Parenting Program).
- Mental Health Consultation: mental health professionals provide referrals, training, consultation and other services to pediatric practices, childcare centers, and schools.
- Family Strengthening & Parenting Skills Training: Incredible Years: parent, as well as Triple P at all five levels.

Child well-being is key to ensuring children are safe and meeting their developmental milestones and supporting strong social emotional development.

In FFY 2015-2019, NCDSS will support the DPH by serving on the Project NC LAUNCH statewide advisory council. This advisory council, while formed with memorandums of agreements, has not been actively engaged. However, as the project is entering its final year of funding, the advisory council will be re-engaged to determine replication of successful strategies. NCDSS will help activate this advisory council through local and state level supports.

5. North Carolina Fatherhood Development Advisory Council (NCFDAC)

North Carolina is committed to continuing its endeavors to strategically and systematically improve practice related to the engagement of parents and non-residential parents, with an emphasis on the unique needs of fathers, and to prioritize opportunities for parent leadership. The well-being of children and their families remains an outcome that NCDSS and county social services agencies continue to prioritize with support from federal and statewide child advocates.

The NCFDAC is comprised of universities, community based programs, fathers, and other governmental agencies that includes county social services agencies. NCFDAC has endorsed several systemic and programmatic changes related to sustaining statewide leadership, the development of technical support and training, and the implementation of fatherhood and non-residential parent engagement policies and activities.

In recognition of the multi-faceted approach needed to systemically and programmatically address the issue of father/non-residential parent engagement, NCDSS has taken a broad but intentional approach to networking with others, such as: PCANC, NCFDAC, Department of Defense (DoD), North Carolina National Guard (NCNG), Duke and North Carolina State (NCSU) Universities, and other community agencies.

Currently, NCFDAC has adopted a shared Mission, Vision, and Purpose around some and some targeted goals. The NCFDAC emphasizes promoting the well-being of children and their families through the promotion of public education regarding the importance of an engaged father and through securing funding for fatherhood research and evidence informed/based practices.

6. NC State Collaborative for Children, Youth and Families

The North Carolina Collaborative for Children, Youth and Families is a forum for collaboration, advocacy and action among families, public and private child, youth and family serving agencies and community partners to improve outcomes for all children, youth and families in the state. The Collaborative is co-chaired by a family partner. Several of North Carolina's child-serving agencies such as the Department of Public Instruction, Department of Public Safety (Juvenile Justice), Division of Public

*The Collaborative serves as a NCDSS stakeholder body for the Child and Family Services Plan.*

Health, and the Division of Mental Health are participating members of the Collaborative. Meetings occur twice per month and include opportunities for sharing information and problem solving. The Collaborative is not mandated by statute and participation is voluntary. The following subcommittees and partnerships meet to discuss and advance areas that relate to families and children: Youth in Transition; Training and Technical Assistance; Family Agency Collaborative Training Team; Adolescents Substance Abuse Services and School Based Behavioral and Mental Health. <http://www.nccollaborative.org/>

#### 7. Maternal, Infant and Early Childhood Home Visiting (MIECHV)

Based on findings from the comprehensive needs assessment, the NC Home Visitation (NCHV) program will implement a continuum of evidence-based home visitation services for families with children ages 0-8 that will support each child's physical, emotional, cognitive and behavioral well-being, and will provide children the resilience they need to enter school ready to achieve and on their way to success in life. Outcomes will be achieved by implementing or enhancing evidence-based home visitation (EBHV) programs, replicated with model fidelity, that fill gaps to meet the needs of these families living in high risk communities in the state. The NCHV program builds on an existing public-private initiative to increase EBHV programs across the state. DPH will implement a two-pronged approach to sustain and expand EBHV programs in North Carolina:

- Expand the state's existing EBHV infrastructure.
- Implement new EBHV initiatives in communities where children are at greatest risk for poor outcomes.

DPH expanded state-level infrastructure needed to effectively support EBHV programs by hiring a program consultant which will focus on the development of infrastructure for Health Families America.

North Carolina has engaged in a three year strategic planning process aimed at expanding EBHV programs in the state. One finding from this process was communities most in need of EBHV initiatives were frequently those least ready to implement these initiatives with fidelity. NCDSS has been engaged with other state agencies and stakeholder groups to ensure coordination on this DPH funded project. The group has specifically discussed the 2010-2014 North Carolina Child Abuse Prevention and Treatment Act (CAPTA) State Plan; the 2009-2010 NC Head Start Needs Assessment, the 2010 five-year needs assessment for Title V and the 100 county needs assessments. Several points of coordination between these needs assessments have been identified including the requirement for local interagency protocols/agreements as identified in both the CAPTA and Head Start assessments.

DPH received a two-year MIECHV Infrastructure Development Grant to support a triage/referral system and develop capacity within local communities to implement EBHVPs. DPH entered into a data sharing MOU with NCDSS for child maltreatment data related to children enrolled in MIECHV.

In 2014-2015, NCDSS will continue to partner with the DPH in the implementation of the MIECHV, administered by DPH.

#### 8. North Carolina Lifespan Respite Project

North Carolina's Lifespan Respite project is being led by the North Carolina Division of Aging and Adult Services (DAAS), in collaboration with the North Carolina Respite Care Coalition, the Division of Medical Assistance (DMA), and other key partners. DAAS is a sister division to the CBCAP Lead Agency within DHHS. The project seeks to enhance and expand the quality and availability of lifespan respite services for all age groups via consumer and provider education and informational activities, volunteer and provider training, and resource development.

NCDSS is a member the North Carolina Lifespan Respite Project Advisory Team. NCDSS and the North Carolina Lifespan Respite Project have identified the following strategies for increasing collaboration.

In FFY 2015-2019:

- Through a Lifespan Respite grant from the DAAS, the NC Respite Care Coalition provides vouchers to reimburse lifespan family and informal caregivers toward the cost of obtaining respite care. NCDSS hopes to engage the DAAS, the Lifespan Respite Project Advisory Team, and the North Carolina Respite Care Coalition about an opportunity to pool CBCAP and Lifespan Respite Funding to implement statewide voucher-based respite services in a collaborative manner.
- Continue to explore ways in which to broaden the awareness of respite services across the lifespan continuum. Identifying established family and caregiver resource information centers, such as the North Carolina Respite Care Coalition's NCcareLINK, to ensure that information shared regarding access to respite services include, but are not limited to, respite care offered to parents in crisis, adults and children with special needs, and the elderly.

#### 9. Implementation of Essentials for Childhood: Safe, Stable, Nurturing Relationships and Environments

As stated in the previous Systemic Change section, NCDSS is a key stakeholder and partner in the implementation of Essentials for Childhood: Safe, Stable, Nurturing Relationships and Environments task force. NCDSS serves on the Leadership Action and Collective Impact teams as well as the grant steering committee. NCDSS participates with the Division of Public Health and other key stakeholders in monthly technical assistance calls with the Centers for Disease Control (CDC) and attends grantee meetings at the CDC.

In FFY 2015-2019, NCDSS will also continue to serve in a leadership role for this initiative.

### C. Inventory and Description of Services

The services that the state provides under each category in Title IV-B subpart 2 have been listed above in the continuum of child and family services (Section A), and service coordination (Section B). These services are provided statewide to all eligible families. The success indicator for these services is that there is a decrease in the annual rate of reports of child maltreatment and the annual rate of child victimization decreases. Sources of data to help determine this success are the US Census data, the Central Registry, UNC Management Assistance and contract monitoring.

#### 1. Needs Assessment

The Community Child Protection Team (CCPT) is an interdisciplinary group of community representatives. Local teams identify gaps and deficiencies with the child protection system, increase public awareness of child protection in the community, advocate for system changes and improvements, assist the county director in protection of living children and develop strategies to ameliorate child abuse and promote child well-being at a local and state level. Currently, the CCPTs serve as the primary vehicle by which NCDSS assesses unmet needs and current array of community-based child abuse and neglect prevention program and activities.

CCPTs requested continued assistance around the following issues:

- Funding for local teams to provide outreach, education and awareness activities in communities.
- Training on motivating and engaging team members.
- NCDSS to provide a training curriculum for new members.
- Training on the Intensive Review process and planning for other case reviews.
- Training on engaging the community/collaboration.

To supplement information gathered through the CCPT structure, NCDSS also continues to collect and aggregate annual statewide child maltreatment data to identify regional and county level needs.

To help communities identify those unmet family and community needs, the activities supported within Title IV-B, subpart 2, Family Support Program Services provides a look into the needs of NC's children and families by telling us:

1. Number of Individuals Served through Community-Based Programs: This activity will produce output measure related to the number of individual served.

2. Percent of participants indicating an increase in strengths in the “Child’s Developmental Status” category on the Family Support Outcome Scale: Contractors are required to administer the NC Carolina Family Support Outcome Scale at pre and post program intervals

3. Percent of participants indicating an increase in the “Parent-Child Interactions/Parent Child Relationships” category on the Family Support Outcome Scale: Contractors are required to administer the NC Carolina Family Support Outcome Scale at pre and post program intervals.

Activities supported within Title IV-B, subpart 2, for Foster Care and Adoption Promotion and Support identifies the needs of NC’s children and families in that:

1. Foster Care Services ~ these services provide the necessary supports to parents who are working to alleviate the conditions that have rendered them unable to care for their children. During this time these services ensure that a child’s well-being needs are being met so that when families are reunified they are stronger.
2. Services and resources (NC LINKS) for teens and young adults 13 to 21 who have lived or are now living in foster care system are intended to facilitate successful transition to self- sufficiency.
3. ETV ~ a variety of support services to eligible student recipients of the Postsecondary Education Support Scholarships (NC Reach), based on eligibility. All services are intended to assist the student’s successful completion of their academic program. Grants, Educational Training Vouchers (ETV), provided to students who were in foster care on or after the age of 17, or who were adopted on or after age 16, or were placed in a relative guardianship on or after their 16th birthday to attend postsecondary educational or vocational training programs
4. Adoption ~ these services benefit children in the foster care system and the families who adopt them through services provided by county departments of Social Services and through partnership between public and private agencies that include recruitment, assessment and selection of adoptive homes; casework services to adoptive families to support and sustain the placement and facilitate the finalization of the adoption. After the adoption has been completed, agencies receive payments for placements exceeding an established baseline. The Special Children Adoption Fund has significantly increased the placement of special need children into permanent homes.

As noted in the section discussing service array and the CCPT end of year survey, NCDSS is aware that continued work around the service availability is an ongoing challenge even though NC has expended more than 20% of its IV-B, subpart 2 funds on these service areas (see page 121 for details on actual IV-B 2 expenditures). Not only is this assessment of the gaps in services showing up in our work with our communities, child and family outcomes support this, specifically as we look at results derived from our REAP QCR Pilot: safety outcome 2 as 60% substantially achieved; the relationship of children in care with the parents (permanency outcome 2: item 16) as 40% substantially achieved; and well-being outcomes not being achieved (outcome 1: 20%, outcome 2: 60%, outcome 3: 60%).

## D. Service Decision Making

In February 2013, NCDSS released a Request for Application (RFA) for Family Support Program Services that combine CBCAP and IVB-2 funds for the provision of primary and secondary child maltreatment prevention activities to begin July 1, 2013. This RFA was issued for three year grant period (SFY 2014, 2015, 2016). The RFA focused on funding community-based programs using evidenced-based or promising practice program models which include qualitative and quantitative evaluation plans that have proven outcomes in increasing protective factors for the prevention of child abuse. The intent of the RFA was to support community-based programs to provide outreach, support and services to individuals and families identified as being at-risk of compromised health and safety to eliminate or reduce those risks by promoting protective factors that strengthen and support families. Grants were awarded throughout the state.

### 1. Family Support Services

North Carolina Family Support Program Services applicants are required to meet all of the following requirements to be eligible for funding:

- Provide services based on the Principles of Family Support Practice.
- Demonstrate a commitment to meaningful parent engagement and leadership opportunities.
- Demonstrate collaborative relationships with community partners in the prevention of child abuse and neglect.
- Implement Primary and/or Secondary prevention services.
- Serve target populations most at risk of child abuse or neglect.
- Recruit children and families to participate voluntarily.
- Promote one or more of the five protective factors linked to lower incidence of child abuse and neglect.
- Provide a service or implement a program that demonstrates an acceptable level of evidence-based or evidence informed practice.
- Use outcome accountability and evaluation tools that demonstrate positive outcomes for children and families.

**Eighty percent (80%) of available funds were granted to 22 agencies implementing one or more of the following programs:**

- Incredible Years Pre-School BASIC Parent Program for parents of children 3-6
- Incredible Years School-Age BASIC Parent Program for parents of children 6-12
- Strengthening Families Program for parents of children 6-11
- Circle of Parents

**Twenty percent (20%) of available funds were granted to 6 agencies implementing evidence-based, evidence-informed family support models and activities not listed in the 80% category above. These programs are implementing:**

- Darkness to Light, Stewards of Children
- In-Home SafeCare, Parent Child Interaction Therapy, and Motivational

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#### Interviewing

- Nurturing Parenting and Circle of Parents
  - Parenting Wisely and 24-7 Dad,
  - Parents as Teachers
  - Strengthening Families Program, 10-14
- 

The Family Support programs will participate in a Peer Review in 2014-2015. These Family Support sites are entering their second year of funding.

## 2. Respite Program Services

Criteria for the nine (9) currently funded Respite Program Services was established by the Respite Program Services Request for Proposals (RFA) issued for one-year grant period beginning July 1, 2012. These 9 Respite Program Services grantees will be renewed for a third year of funding during 2014-2015. Currently, all 9 Respite Program Services grantee are supported through IVB-2 funding.

Respite Program Services applicants are required to meet all of the following requirements to be eligible for funding:

- Provide services based on the Principles of Family Support Practice.
- Demonstrate a commitment to meaningful parent engagement and leadership opportunities.
- Demonstrate collaborative relationships with community partners in the prevention of child abuse and neglect.
- Implement Secondary or tertiary prevention services.
- Serve target populations most at risk of child abuse or neglect.
- Recruit children and families to participate voluntarily.
- Promote one or more of the five protective factors linked to lower incidence of child abuse and neglect.
- Use outcome accountability and evaluation tools that demonstrate positive outcomes for children and families.

The Respite programs will participate in a Peer Review in 2014-2015.

In FFY 2015-2019, NCDSS expects to issue additional Respite Program Services RFA for three-year funding cycles of respite care for SFY 2016, 2017, and 2018.

## 3. Children's Trust Fund

Community Response programs are intended to fill a gap in the continuum of child maltreatment prevention programming by reaching out to families who have been reported to county social services agencies, Child Protection Services, but whose cases have been screened out at intake, closed with a decision of services recommended, or closed with a decision of no services needed, after an initial assessment. These services are voluntary and applicants may not charge fees for services. The

Community Response programming will support cross-agency collaborative, community-based initiatives to provide outreach, support, and services to individuals and families identified as being at-risk of compromised health and safety to eliminate or reduce those risks by promoting protective factors that strengthen and support families through community response programming.

During 2014-2015, grantees will continue their service provision to families and measure short and intermediate outcomes. Ultimately, the long term goal that the program hopes to accomplish is to prevent future child maltreatment and child victimization of those served.

Applicants were also encouraged to discuss involvement with their local Community Child Protection Team (CCPT), which is charged with identifying gaps and deficiencies with the child protection system, increase public awareness of child protection in the community, advocate for system changes and improvements, and develop strategies to ameliorate child abuse and promote child well-being at a local and state level.

## **E. Populations at Greatest Risk of Maltreatment**

Family Support Program Services are mandated that all community-based family support programs use a decision-making process reflective of the racial and socio-economic diversity of the community to be served. Local planning and governance begin at the family level where the family members are a part of the local board, committees, workgroups, etc. This model ensures programs are being developed that are meaningful and needed in the community. Family and consumer feedback regarding the quality of services, customer service and impact of services can help identify specific and creative solutions for gaps and unmet needs within the system.

Additionally, Family Support agencies were encouraged to offer evidence-based, promising and/or emerging/evidence-informed program services that serve one or more of the following population(s):

- Families with/or children with special needs.
- Families with/or children in the foster care or homeless system.
- Families with/or children who have witnessed and/or are affected by domestic violence and/or substance abuse.
- Families with current or past involvement in the child welfare system.
- Unmarried fathers or expectant fathers at risk of becoming involved with the state's support system.
- Custodial and/or noncustodial fathers.
- Low-income, never married fathers.
- Separated couples with children.
- Unwed couples with children and/or interested in parenthood.

A variety of outreach activities are provided by Family Support Program Services, Children's Trust Fund, and Respite programs to meet the unique needs of children, parents and families. These activities included, but were not limited to the following:

#### Support Groups, targeted to:

- Fathers
- Teen Parents
- First time parents
- Parents of children with developmental delays or special needs
- Parents with special needs
- Native Americans
- Latinos
- Victims of domestic violence
- Perpetrators of domestic violence
- Grandparent/relative caregivers
- Separated parents and single parents

#### Parenting Classes, targeted to:

- Fathers
- Teen Parents
- Native Americans
- Hispanic/Latino population
- Victims of domestic violence
- Grandparents/relative caregivers
- Parents of children with developmental delays or special needs

#### Home Visiting Programs, targeted to:

- First time parents
- Native Americans
- Hispanic/Latino population
- Families of children with developmental delays or special needs
- Families experiencing domestic violence or substance abuse

#### Respite Programming, targeted to:

- Pregnant youth and adolescent mothers
- Single mothers
- Homeless youth and families
- Children with mental health disorders
- Children with developmental delays, chronic health problems, or special needs
- Children affected by domestic violence and/or substance abuse
- Families living in public housing communities
- Grandparents/relative caregivers
- Court involved youth
- Non-English speaking youth
- Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex (LGBTQQI) youth

#### 1. Fathers

Promoting fathers' active and nurturing engagement in the lives of their children remains a federal priority and a critical issue for NCDSS, county social services

agencies, and communities in North Carolina. As a result of the federal Child and Family Services Review of 2007, North Carolina identified the need for systemic improvements in engagement of fathers/non-residential parents.

- *Strong Fathers*

The dual problems of domestic violence and child maltreatment are intensified by issues of poverty, unemployment and race. The specific problems of fathers and non-parental custodian males (i.e. boyfriends) with a history of intimate partner violence and child maltreatment must be addressed systemically through a coordinated response by the major systems impacting the problem: public welfare, criminal justice, health, faith, social and services, and education. These goals reflected empathy and caring for their children. So far, the findings indicate that the Strong Fathers program has been successful in achieving its intended outcomes.

- Children with Special Needs

In 2014-2015, NCDSS will continue to utilize CAPTA funding to contract with Family Support Network of North Carolina (FSN), which is part of the University of North Carolina at Chapel Hill School of Medicine. Family Support Network subcontracts with regional FSN programs to provide education, training, and support services to all families who care for children who are medically fragile or have special needs, including children who are substance exposed, HIV positive or developmentally delayed. Research supports the concept that education and support of these vulnerable families helps to reduce the likelihood of abuse or neglect of their children.

The three goals of FSN are: (1) to provide education and training to foster, adoptive, birth and kinship families who are caring for medically fragile or special needs children in order to improve their knowledge about the conditions that are effecting the children and how to care for them; (2) to reduce isolation and improve family functioning through social support programs, including facilitating and leading support groups; (3) to enhance collaboration among local family support programs and service providers, including county social services agencies, Family Resource Centers, county foster parent associations, and neonatal intensive care units.

- Families At-Risk of Homelessness/Unaccompanied Homeless Youth

In North Carolina, unaccompanied homeless youth may meet the statutory definition of a dependent juvenile G.S. §7B-101 (9) which is a *juvenile in need of assistance or placement because the juvenile has no parent, guardian, or custodian responsible for the juvenile's care or supervision or who parent, guardian, or custodian is unable to provide for the care of supervision and lacks an appropriate alternative child care arrangement*. A county department of social services may petition the court to place an unaccompanied homeless youth in foster care based upon his or her dependency status. If such youth is placed into foster care then they become eligible for foster care services including those related to North Carolina's Chafee Program, LINKS, if the youth is age 13 or older.

NCDSS will continue to coordinate with the State Coordinator of the North Carolina Homeless Education Program <http://center.serve.org/hepnc/index.php> to ensure compliance with the McKinney-Vento Homeless Act. In addition, NCDSS is an active member of the North Carolina Collaborative for Youth in Transition (NCCYT). The NCCYT is a network of representatives from public and private agencies that promote successful transitions to adulthood for youth in our communities. The aim is to inform and influence the systems affecting transitioning youth by advocating for improved services and outcomes. Goals include: (1) Share and disseminate information; (2) Promote collaboration; and (3) Advocate for improved services and improved outcomes in all areas of life for transitioning youth.

- Fathers

NCDSS continued the contractual services for Strong Fathers in 2013-2014. However, the Family Violence Prevention and Services Act state grant designee is in the process of being changed from DHHS to the North Carolina Department of Administration, Council for Women (NCCFW). NCCFW is negotiating a contract for a renewal of the Strong Fathers scope of work in 2014-2015.

- State Child Access and Visitation Program

NCDSS will continue to provide Access and Visitation grant funded services to the North Carolina Administrative Office of the Courts in 2014-2015.

**The expected outcome will be:**

40% of non-custodial parents served will have increased access and visitation with their child.

- Targeted Populations in Funding Announcements

NCDSS' RFA required agencies to demonstrate that they intend to target one or more of the following population(s) if they are providing secondary or tertiary (respite only) prevention programming:

**Target Population:**

- Families and children living in poverty
- Parents/caregivers abusing substances
- Young parents and/or parents of young children (0-5) (ALL family members will be referred for appropriate services, if a need arises, including those children beyond the targeted age range of 0-5 years).
- Single parents
- Families experiencing domestic violence
- Parents/caregivers and/or children with disabilities or mental illness
- Fathers, non-custodial parents, and parent companions
- Former adult victims of child abuse and neglect
- Unaccompanied homeless youth and families experiencing homelessness

- 
- Tribal populations
  - Military families
- 

Continued funding and the issuance of an RFA for Respite Program Services in 2014-2015, new and renewal contracts will also depend upon grantees ability to address the above targeted populations.

In FFY 2015-2019 North Carolina will continue exploration of the use of the Strengthening Families Protective Factor Framework and trauma informed practice when working with children aged 0-5 in foster care. The belief is that in partnership with early care and education professionals, North Carolina will continue to deliver developmentally appropriate services.

#### **F. Services to reduce the time to permanency for Children under the Age of Five who are in foster care.**

Children under the age of 5 who are in foster care continue to be a population that face service needs that traditionally, North Carolina has not developed a targeted service system. Although the continuum of services in the child welfare system does touch children 0-5 and their families, a targeted service structure may improve their outcomes. However, our adoption exchange (NCKids) does provide a targeted look at children in this population for those who are eligible for adoption. Project Broadcast as a trauma focused initiative targets the trauma that children in the foster care system have experienced in this age range. For more information on how trauma informed practice through Project Broadcast may reduce the time to permanency.

Partnership with our early care and education partners will continue to address the developmental needs of children between the ages of 0-5. At any point along the continuum of child welfare services that a child is identified with a developmental need, a referral is made to Early Intervention Services through the Department of Public Health. To address developmentally appropriate services, state sanctioned training provides the knowledge and skills for workers to recognize the need for developmentally appropriate services. Although this particular component is not tracked on the REAP data dashboard or the Child Welfare Staffing survey, NCDSS has begun planning for revisions to these two mechanisms for collecting data.

#### **G. Services for Children Adopted from Other Countries**

Once a child who has been adopted internationally is brought to the United States, the adoption is then completed accordance applicable laws of the state of North Carolina. A final decree of adoption of then issued for the state and county where the child resides. Once issued the child becomes a legal resident of North Carolina and is therefore eligible for all the supports and services available to all of North Carolina's children.

## V. Consultation and Coordination with Tribes

North Carolina is home to one federally recognized tribe, the Eastern Band of the Cherokee Indians (EBCI). In June 2012, NCDSS received a notice from EBCI that they are preparing to plan a comprehensive social services agency and to administer Titles IV-B and IV-E. NCDSS has enthusiastically supported the planning efforts and have provided many hours of Technical Assistance. The Director of Eastern Band of Cherokee Indians Human Services is J. T. Garrett and he can be contacted at 43 John Crowe Hill Rd., P.O. Box 666, Cherokee, NC 28719, or (828) 554-6180, [jgarrett@nc-chokeee.com](mailto:jgarrett@nc-chokeee.com) (<http://www.cherokee-hmd.com/about-hmd.html>).

For the development of the 2015-2019 CFSP plan, NCDSS has participated in the on-going development for the Consolidation of Human Service Programs and Functions for the EBCI, including their Joint Planning meeting with ACYF CB, Region IV. Tribal representative Barbara Jones received an invitation to attend NCDSS joint planning in March, 2014. The recommendations listed below were developed in concert with the consultant team working with EBCI, Cansler Collaborative Resources. The proposed transfer date is flexible but flexibility is necessary as this is a complex process.

The level of inclusion and participation by the Tribe in on-going planning and evaluation of NC's CFSP is yet to be determined. This extends to conversations around Indian Child Welfare Act (ICWA) and CFCIP programs. As they begin to design their Human Services Programs, their capacity to participate in NCDSS activities around the CFSP, ICWA and CFCIP will become apparent. Communication is essential and should be a priority between the NCDSS and EBCI. NCDSS and ECBI have committed to the sharing and exchange of information to include participation in Tribal planning sessions, the assessment of policy and program outcomes. The estimated date for ECBI to assume responsibility for child welfare services is October, 2015.

Moving forward, and as an outcome of these consultations, NCDSS will continue to participate in these planning sessions and will continue to offer technical assistance. Listed below are the initial recommendations for the consolidation of the human service programs within the Tribe. The Human Services Consolidation Work Plan for EBCI will provide the detailed guidance essential to the successful implementation of these recommendations regarding child welfare services.

- Use boundary geography as the jurisdictional authority for the decisions concerning child and adult welfare responsibilities.
- Establish protocols for the transfer to the Tribe as appropriate, in those cases that involving enrolled members who reside off the boundary.

Until the ECBI application has been approved, NCDSS will continue to provide child welfare services to the Tribe. As the provider of child welfare services, county departments of Social Services will remain responsible for overall activities involved in ensuring the protection of children, the operation of a case review system, foster care services, and adoption services. Therefore, the same policies and procedures as

described for the provision of child welfare services across NC apply to NCDSSs work with the Tribe.

Compliance with Indian Child Welfare Act (ICWA) in regards to the notification of parents and tribes of child welfare proceedings, their right to intervene, placement preferences, and efforts to prevent the breakup of the family is grounded in child welfare practice across the state.

The transfer of the Child Welfare responsibility from the five surrounding counties will take place once the infrastructure is in place within the Tribe. Child Protective Services and Child Welfare will be the first priority in the Tribe's assumption of County DSS functions. These services are slated to fall under the Heart to Heart Child Advocacy Center. NCDSS has provided consultation to the Program Manager Brandi Cooper. She can be reached at P.O. Box 532 Cherokee, NC 28719, (828) 554-6310 or [brancoop@nc-choerokee.com](mailto:brancoop@nc-choerokee.com). NC's 2015-2019 CFSP will be shared with J.T. Garret and Brandi Cooper via email.

North Carolina is also home to seven state recognized tribes and four tribal organizations. State tribes are not covered under the Indian Child Welfare Act (ICWA), but G.S. § 143B-139.5A (<http://www.ncleg.net/gascripts/statutes/statutelookup.pl?statute=143b-139.5A>) entitled *An Act to Require Collaboration between the Division of Social Services, the Commission on Indian Affairs, and the NC Directors of Social Services Association on Indian Child Welfare Issues* states that state-recognized tribes merit similar considerations as federally-recognized tribes. Among other points, G.S. § 143B-139.5A also states that these agencies should collaborate to develop a process to assist in identifying American Indian children.

NCDSS continues its collaborative work with the North Carolina Commission of Indian Affairs through active participation on the North Carolina Commission of Indian Affairs' Standing Committee on Indian Child Welfare. It is through this work that the 2015-2019 CFSP/ APSRs will be exchanged. Other committee members include the state tribal leaders, a director of a local county department of social services that borders the tribal lands of the Eastern Band of Cherokee Indians, and state tribal advocates. This committee has proven beneficial in identifying the issues and concerns of all stakeholders interested in the placement of American Indian children.

NCDSS retains an open request to receive technical assistance from the National Resource Center for Tribes (NRC4Tribes). Sustained interest in tribal gatherings, facilitated by the NRC4Tribes, has not happened, primarily with tribal leadership. The Commission of Indian Affairs Standing Committee on Child Welfare remains committed to holding a gathering sometime before the fall of 2014. Participation in this gathering could have far reaching effects on issues facing Native American Indians.

## VI. Chaffee Foster Care Independence Program (CFCIP)

NCDSS is the agency responsible for administering the CFCIP, and the Education and Training Voucher Program (ETV), referred to as NC LINKS. LINKS is not an acronym; instead it is a word that captures the purpose of the Chaffee Act and the intent of NCDSS to build a network of relevant outcome based services with youth so that they will have ongoing connections with family, friends, mentors and other resources to facilitate their transition to adulthood (<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-10/man/CSs1201c7.pdf>).

### A. Agency Administering CFCIP

As a county administered child welfare system, NCDSS provides oversight and monitoring to the 100 county departments of social services that provide CFCIP/LINKS direct services. NCDSS provides technical assistance and consultation in addition allocating CFCIP funds to operate and deliver CFCIP services. NCDSS also manages a statewide CFCIP fund to reimburse counties for direct youth services. As REAP is infused into the continuum of child welfare the continuity of oversight and monitoring activities by NCDSS have benefited. The REAP data dashboard of child welfare achievements provides 4 data points:

Example:

REAP Data Dashboard ~ Transitions from Foster Care to Adulthood	National Standard / NCDSS Performance
<ul style="list-style-type: none"> <li>• % of youth aging out of care who are covered by Medicaid in their first 12 months after turning 18</li> </ul>	NA / 73.5%
<ul style="list-style-type: none"> <li>• Annual % of youth who remain in care after turning 18</li> </ul>	NA / 49.4%
<ul style="list-style-type: none"> <li>• Annual % of youth who sign a CARS agreement when turning 18</li> </ul>	NA / 25.6%
<ul style="list-style-type: none"> <li>• % of youth eligible who pursue post-secondary education with NC Reach and ETV</li> </ul>	NA / NA

NCDSS monitors local county DSSs delivery of LINKS services according to the NCDHHS/NCDSS Sub-recipient Monitoring Plan which includes compliance with the Federal Office of Management and Budget Circular A-133. The NCDHHS/NCDSS Sub-recipient Monitoring Plan may be accessed at <http://www.ncdhhs.gov/dss/Monitoring/index.htm>. Specific monitoring activities include:

- Review expenditures of allocated LINKS funds in comparison with the agency LINKS Plan for Services, assuring that basic services are offered to all eligible children and youth in agency custody/placement authority.
- Determine that expenditures for transitional housing (rent, rent deposits, or payment for room and board arrangements) were not made for any youth under the age of 18 or for any young adult who was not in custody on his or her 18th birthday.
- Review documentation in case files of youth and young adults participating in the program. Determine if the assessment and documentation of need justify

expenditures from allocated LINKS funds. The assessment should be summarized in the case plan. For youth between the age of 16 and 18 the assessment and plan should also be referenced in the court report.

- Assure that the plan documents the youth or young adult's specific agreement to accept part of the direct responsibility for successful completion of the plan.
- Verify age of all children and youth for whom program funds are being used.
- Verify that costs charged to LINKS funds were specifically directed at assisting the youth to gain the skills and resources needed to become self-monitoring and self-sufficient.
- Verify that beneficiaries are/were in foster care after their 13th and before their 21<sup>st</sup> birthday.
- Determine if any young adults in the county are receiving LINKS Transitional Housing Assistance. If so, determine whether or not the person receiving housing assistance was in DSS custody on their 18th birthday.
- Determine whether or not the county has sought reimbursement from LINKS Special Funds on behalf of any youth or young adult.
- Review documentation in the service record of the youth or young adult to verify eligibility for the Special Funds.
- Review fiscal records to determine that the county paid for the expenditure(s) prior to claiming reimbursement through the State LINKS coordinator.

Exception: Funds reimbursed for the purpose of NYTD Survey incentive to youth do not have to be advanced by the county prior to claiming reimbursement through the State LINKS Coordinator.

## **B. Description of Program Design and Delivery**

1. The delivery of NC LINKS/CFCIP is grounded in its mission: to provide relevant, youth-driven, outcome-based services and resources to youth and young adults who are or were in foster care as teens so that they can increase their capacity to become successful, independent adults. NC LINKS/CFCIP is flexible in its design as counties are able to deliver services based upon resources within a best practice framework.

In FFY 2015-2019, NC LINKS will help those youth and young adults exiting the foster care system achieve all of the 7 positive outcomes:

**Positive Outcomes for Youth Exiting the Foster Care System**

1. All youth leaving the foster care system shall have sufficient economic resources to meet their daily needs.
2. All youth leaving the foster care system shall have a safe and stable place to live.
3. All youth leaving the foster care system shall attain academic or vocational/educational goals that are in keeping with the youth’s abilities and interests.
4. All youth leaving the foster care system shall have a sense of connectedness to persons and community. This means that every youth, upon exiting foster care, should have a personal support network of at least 5 responsible adults who will remain supportive of the young adult over time.
5. All youth leaving the foster care system shall avoid illegal/high risk behaviors.
6. All youth leaving the foster care system shall postpone parenthood until financially established and emotionally mature.
7. All youth leaving the foster care system shall have access to physical and mental health services, as well as a means to pay for those services.

All LINKS programs and services will be delivered in accordance with NC LINKS policy at <http://info.dhhs.state.nc.us/olm/manuals/dss/csm-10/man/CSs1201c7-03.htm#TopOfPage>:

More specifically,

**Outcome #1. Youth Has Sufficient Economic Resources to Meet their Daily Needs**

- |   |   |
|---|---|
| <p><b>In FFY 2015-2019, NCDSS will assure that counties incorporate the following elements in their LINKS programming and services:</b></p> | <ul style="list-style-type: none"> <li>• Job readiness skills;</li> <li>• Conflict resolution skills;</li> <li>• Vocational interest testing;</li> <li>• Volunteer work for younger and older youth in their fields of interest;</li> <li>• Competency-based training for the work environment, e.g. money and time management, credit management, conflict management, personal conduct in a work environment, tax preparation, etc.;</li> <li>• Experiences preparing for employment while in custody, such as part-time employment, participation in school-to-work programs, job sharing or apprenticeships, and job coaching;</li> <li>• Part-time or full-time employment for youth 16 and older;</li> <li>• Youth responsibility for saving own money and paying part of their personal expenses;</li> <li>• Driver’s education and driver’s license before discharge;</li> <li>• Vocational Rehabilitation testing and training, when appropriate;</li> <li>• Transitional education and training resources such as Job Corps, Americorps, college or vocational training, military options, WIA/JobLinks, etc.;</li> </ul> |
|---|---|

	<ul style="list-style-type: none"> <li>• Referrals to public assistance, e.g. TANF, Food and Nutrition, Work First, public housing, etc.;</li> <li>• Referral for vocational and post-secondary school assistance and</li> <li>• Contractual Agreements for Residential Services</li> </ul>
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**Outcome #2. Youth Has a Safe and Stable Place to Live**

<p><b>To reduce the risk and actual experience of homelessness for young people who have discharged from the system, FFY 2015-2019, NCDSS will assure that the following elements are incorporated in LINKS programming and services:</b></p>	<ul style="list-style-type: none"> <li>• Learning about housing/utility costs for various types of housing in the intended home community;</li> <li>• Learning to evaluate safety; using police and crime statistics, news reports, etc. as resources to learn about the location of safe neighborhoods;</li> <li>• Learning to enhance personal safety in the home including basic knowledge about home repair and avoiding common hazards;</li> <li>• Learning to avoid danger and to defuse volatile interpersonal situations;</li> <li>• Learning basic non-lethal self-protection techniques;</li> <li>• Having a stable place to live upon discharge, with a primary and backup discharge plan to minimize the likelihood of homelessness resulting from a disrupted plan;</li> <li>• Having trusted friends who can offer temporary sanctuary, if needed;</li> <li>• Making concerted efforts toward permanence for every youth prior to discharge, including learning about adult adoption procedures; and</li> <li>• Offering information about Contractual Agreements for Residential Services.</li> </ul>
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**Outcome # 3 Youth Attain their Academic and Vocational Goals**

<p><b>In FFY 2015-2019, NCDSS will continue to assist young people in achieving their educational goals by assuring LINKS services and programming contain the following elements:</b></p>	<ul style="list-style-type: none"> <li>• Proactive remedial academic assistance for youth who are not achieving grade level: educational testing, tutoring, computer-based learning, vocational interest/ability testing, tutoring based on academic deficits etc.;</li> <li>• Early exposure to a variety of academic/vocational schools and possible means to attend those schools;</li> <li>• Positive reinforcement for achievement of steps toward personal academic and/or vocational goals- recognition, rewards, privileges, etc.;</li> <li>• Developing strong working relationships between the DSS and the public school to establish in-school mentors and advocates for participating youth; and</li> <li>• Provide information about the NC ETV (<a href="http://www.statevoucher.org">www.statevoucher.org</a>) and NC Reach Postsecondary Scholarship (<a href="http://www.ncreach.org">www.ncreach.org</a>) programs.</li> </ul>
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Outcome # 4	Youth Has Connections to a Positive Personal Support System
<p>In FFY 2015-2019, NCDSS will assure LINKS services and programming includes the following elements:</p>	<ul style="list-style-type: none"> <li>• Helping all youth to seek out lifetime connections and permanence while in care and beyond; providing information on adult adoptions to youth and adults that are in family-like relationships;</li> <li>• Build on the youth’s existing support system;</li> <li>• Build tribal connections for American Indian youth;</li> <li>• Assure cultural connections as appropriate to individual self-identity;</li> <li>• Provide opportunities to meet responsible caring adults, e.g. through volunteerism, faith communities, athletics, clubs, etc.;</li> <li>• Re-explore birth family, former foster families, etc. as potential support resources;</li> <li>• Involve youth in activities that build healthy life-long interests; and</li> <li>• Build relationships between youth and the business community- e.g. mechanics, plumbers, electricians; potential employers, and other business professionals</li> </ul>

Outcome # 5	Youth Avoid Illegal/High Risk Behaviors
<p>In FFY 2015-2019, NCDSS will assure that the following elements are included in NC LINKS programming and services to help youth overcome these barriers:</p>	<ul style="list-style-type: none"> <li>• Building peer community within the LINKS program that expects, rewards and supports pro-social, positive behaviors;</li> <li>• Creating open discussions about handling pressures regarding drug and alcohol use;</li> <li>• Providing education and exposure to realities of drug/alcohol abuse- involve volunteers from former LINKS participants or other young adults who were involved in illegal/high risk activities and have learned the negative effects of that experience;</li> <li>• Increasing awareness on part of staff, family, caregivers, etc. and providing education regarding signs of gang involvement, drug and/or alcohol abuse, etc.;</li> <li>• Assuring early intervention/timely treatment for substance or alcohol abuse problems;</li> <li>• Providing specific preventive health education re: AIDS, hepatitis, the impact of STDs and other health risks; and</li> <li>• Helping youth to become connected with family members, mentors and other caring adults who care about what goes on with the individual youth from day to day and who are regularly engaged with the youth. Visits with family members are protected and are never denied as a form of “punishment” for the youth or the family.</li> </ul>

Outcome # 6	Youth Postpone Parenthood
<p>In FFY 2015-2019, NC DSS will continue evaluating three pilot sites of their implementation of the adapted evidenced based curriculum "Making Proud Choices" for youth in foster care.</p>	<p>Additionally, to address this outcome goal, NCDSS will assure that LINKS programming and services include the following elements:</p> <ul style="list-style-type: none"> <li>• Open, gender-specific group, mixed group and/or individual discussions about intimate and friendship relationships and respect for personal boundaries;</li> <li>• Sex and abstinence education;</li> <li>• Education about impact of parenthood on income, education, vocational plans;</li> <li>• Adoption presented as a caring option, perhaps involving persons who have adopted infants or who have relinquished their child to talk to the group or individuals;</li> <li>• Responsible parenthood instruction for boys and girls- babysitting instruction, supervised and unsupervised opportunities to be around small children in a caregiving role;</li> <li>• Pregnancy prevention posters and audio-visuals; and</li> <li>• Coordination of LINKS program with NC Adolescent Parenting Program and NC Adolescent Pregnancy Prevention Programs.</li> <li>• Pilot Sites are Buncombe, Wake and Wilson Counties</li> <li>• Making Proud Choices desired results: youth in care to report increased self-esteem, problem solving skills, and making choices that result in reduction of pregnancy, parenting and sexually transmitted infections</li> </ul>

Outcome # 7	Youth Have Access to Physical , Dental and Mental Health Services
<p>FFY 2015-2019, coordinate with the NC Division of Medical Assistance to track enrollment data and use the information to inform LINKS service planning and improve outcomes.</p>	<p>NCDSS will also assure the following elements are incorporated in LINKS services and programming:</p> <ul style="list-style-type: none"> <li>• Exploring availability of health insurance through the family, employment or school;</li> <li>• Establishing NC Medicaid/NC Health Choice eligibility;</li> <li>• Visiting free/low cost services through Mental Health Clinic, Public Health, free clinics, etc.;</li> <li>• Providing information and instruction on self-care- medication information, health maintenance, when to worry; what to do if seriously ill; avoiding contagion, etc.;</li> <li>• Referrals to trauma informed and evidenced based mental health services;</li> <li>• Providing resource materials and referrals, including internet web sites specific to youth's identified needs and concerns.</li> </ul>

## 2. Youth and Young Adults involvement in the development of the CFCIP.

In March 2014, Strong Able Youth Speaking Out (SAYSO) members completed a three question survey about the benefits and challenges of being in foster care and changes needed. Their results were presented by three SAYSO members to the NC

General Assembly's Foster Care Omnibus Committee and NCDSS. At NCDSS's 2014 Joint Planning session, the Executive Director of Independent Living Resources (ILR), Inc. /SAYSO shared their reflections from the past five years on services to older youths as well as recommendations for moving forward over the next five years. Information shared represented the views of SAYSO members and staff from both SAYSO and ILR.

In April 2014, NCDSS engaged staff from county LINKS programs, SAYSO and Foster Care to Success, Inc., who administers the NCDSS's postsecondary scholarship programs, as well as a young adult representative who is acting as the SAYSO DHHS Liaison to gain input and recommendations to the plan. While the plan address all seven LINK outcome area, LINKS program staff, SAYSO members/staff and LINKS community partners have highlighted three service areas to focus on as a state. These areas were perceived to be the most challenging to address in the last five years yet deemed most critical to helping youth achieve a successful transition to adulthood.

For FFY 2015-2019, NCDSS, SAYSO and ILR will prioritize the following issues:

- Employment (continue and expand the youth summer intern program),
- Housing and
- Education

NCDSS acknowledges that there are some inherent challenges to involving youth / young adults as their schedules are often at odds with traditional working hours. Therefore, the involvement of SAYSO is essential.

3. Stakeholder meaningful engagement and involvement in the evaluation of NYTD data to inform the improvement of service delivery and improved outcomes.

While North Carolina is an active participant in the NYTD data collection process, limited analysis of the data has been conducted. NYTD only provides information on whether certain services are provided but does not give information about the quality of the service. This is a limitation of the federal NYTD program, and the limited capacity of NCDSS's Performance Management, we have not been able to utilize existing data sets to draw any analyses. NCDSS has shared the NYTD Data Snapshots offered through the federal NYTD portal with LINKS staff and SAYSO via conference calls and the LINKS listserv. NCDSS has a contract/data agreement with the University of North Carolina Chapel Hill (UNC-CH) that allows their evaluation team access to the NCDSS information system; including those containing the NYTD data. UNC-CH plans to use the NYTD data to help inform NCDSS's REAP/ CQI framework activities, and the pregnancy prevention initiative.

In FFY2015-2019, NCDSS will continue to work with UNC-CH and explore opportunities to conduct analysis of the NYTD data in conjunction with existing social services data to improve services and outcomes for older youths transitioning out of care. Information sharing will be expanded to other partners such as NC Child, State and Federal Tribes, Administrative Offices of the Courts (AOC) and the Department of Public Instruction (DPI).

#### 4. Efforts to continue high-quality NYTD data.

County department of social services staff will continue track and code independent living services individual youths via the NCDHHS Services Information System (SIS). Counties will be responsible for engaging eligible youths to participate in the NYTD Youth Outcome Survey. Currently, NCDSS only collects survey data on required youths but will explore expanding the survey to other youths when capacity and resources allow.

NC LINKS will also coordinate NYTD data collection results with evaluation efforts conducted by UNC-CH on behalf of NCDSS Child Welfare Services, to explore ways to improve and target services for subgroups of the youth and young adults transitioning out of the system.

In FFY2015-2019, NCDSS will continue to participate in the federal NYTD data collection effort as required by law.

### C. Serving Youth Across the state

Each of North Carolina's 100 counties is required to make available relevant, outcome-directed services to teens in care ages 16-20 and to young adults who aged out of foster care. Services include but are not limited to:

- Independent Living Assessment
- Academic support, secondary school (such as tutoring, facilitation of school based activities, etc.)
- Academic support, post-secondary school
- Career preparation
- Employment/vocational training
- Budget, financing
- Housing and home management
- Health education and risk reduction
- Family support/marriage education
- Mentoring/personal support
- Supervised Independent Living
- Financial assistance

Each county department of social services will submit an annual LINKS county plan for oversight and monitoring to NCDSS that outlines how it intends to provide required and/or optional LINKS services to its eligible youths. NCDSS recently developed a query to allow counties access to their reported services information as they've reported in NYTD. To date, county variances have not been analyzed; however, as NC moves forward with statewide implementation of REAP, this information may be available for future analysis.

In FFY2015-2019, NCDSS will offer county specific information related to services so that the data may be included in the revised REAP achievement data dashboards as well as in the development of their LINKS county plans. This information will assist counties in developing and evaluating targeted services and programs for older youth transitioning out of the system.

#### **D. Serving Youth of Various Ages and States of Achieving Independence and the barriers**

1. In some instances, counties are unable to provide LINKS services to all youth and young adults who meet the eligibility criteria and must prioritize the use of their resources. Following are guidelines for prioritizing LINKS services for FFY2015-2019:

##### **REQUIRED SERVICES**

- **Counties must offer and provide appropriate services to youth and young adults ages 16-21 that are in DSS custody or voluntarily under DSS placement authority and to young adults who aged out of agency custody at age 18 and who are not yet 21. Outreach efforts are required for young adults who aged out of care and who are not yet 21 to determine their current situations, their interest in continued services, and their need for resources through the LINKS.**
- **Eligible youth and young adults in foster care or on Contractual Agreements for Residential Services / Voluntary Placement Agreement (CARS/VPA) agreements ages 16-21 must be offered skills training, counseling, education and other appropriate support and services to assist their transition to self-sufficiency. Agencies have the responsibility for teaching skills necessary for teens to become self-sufficient and for providing opportunities to use those skills within a supportive environment.**
- **Young adults who “aged out” of foster care (were in foster care on their eighteenth birthday) must be offered any needed assistance for which they are eligible. LINKS Housing Funds are available to reimburse counties for the cost of rent, rent deposits or room and board arrangements for young adults who aged out of care. In addition, other LINKS funds are available to help with non-housing expenses, such as utilities and furniture.**
- **Young adults who age out of NC foster care or were adopted from NC foster care as teenagers are eligible for Education/Training Vouchers and NC Reach Scholarships to defray the costs of attendance at post-secondary education or vocational training institutions.**

**OPTIONAL SERVICES**

- North Carolina’s policy designates all youth in foster care as being “at risk of remaining in care until they are 18,” thus making the eligibility pool for LINKS services very broad. Some counties may choose to provide general services to all youth in care ages 13 through 15, while others may want to target higher risk youth.
- Services are strongly recommended for youth in foster care between the ages of 13 and 15 and for young adults between the ages of 18 and 21 who did not age out of custody, but were in foster care on or after their 13<sup>th</sup> birthday and are now requesting services.
- Services are recommended for youth who were in foster care on or after their 13<sup>th</sup> birthday, have been discharged for any reason, and who are now between the ages of 13 and 18.

2. Description of how NCDSS is serving: (1) youth under age 16; (2) youth ages 16 to 18; (3) youth ages 18 through 20 in foster care; (4) former foster youth ages 18 through 20; and (4) youth who, after attaining 16 years of age, have left foster care for kinship guardianship or adoption.

Current and Former Foster Youth	Ages 13-15
<p>In FFY 2015-2019, NCDSS will ensure the following activities and services are delivered</p>	<ul style="list-style-type: none"> <li>• An individualized life skills assessment designed for younger adolescents and completed by the youth and caregiver. The assessment identifies strengths and needs for life skills training and the need for other learning opportunities;</li> <li>• With the youth, developing written service agreements specifying the responsibilities of the agency and youth to accomplish immediate and intermediate goals that lead toward successful transitions to adulthood as well as implementation of services identified as needed by the youth and agency to achieve the goals;</li> <li>• Life skills training based on training needs determined by the written assessment;</li> <li>• Agency or contracted services that are provided to help youth to overcome barriers that are interfering with achievement of educational or vocational goals, self-sufficiency, relationships with family and significant others, etc.;</li> <li>• Specific activities to develop and strengthen the youth's personal support system;</li> <li>• For more mature youth 13 through 15, participation in the agency's LINKS activities for older youth;</li> <li>• Opportunities to learn about resources available in the community, such as public transportation, health resources, resources for educational/vocational training, military service options, recreational organizations, participation in school activities, and volunteer opportunities;</li> <li>• Opportunities to volunteer in a working environment in order to learn about possible vocational interests, to build a resume, and to give back to the community;</li> </ul>

	<ul style="list-style-type: none"> <li>• Role playing potentially stressful activities, such as testifying in court or being interviewed for a job;</li> <li>• Participating in local, state, and/or national trainings and conferences relevant to LINKS services to younger youth.</li> </ul>
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<b>Current and Former Foster Youth</b>	<b>Ages 16-18</b>
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<b>In Federal Fiscal Years 2015 to 2019, NCDSS will ensure the following activities and services are delivered</b>	<ul style="list-style-type: none"> <li>• An individualized assessment by the youth and caregiver that identifies strengths and needs in self-sufficiency skills as well as other areas relevant to adult functioning;</li> <li>• With the youth, and in conjunction with case service agreements, developing written individual transitional plans spelling out the responsibility of the agency and youth to accomplish a successful transition to self-sufficiency;</li> <li>• Skill development activities that are as close to real life as possible; i.e., hands-on activities combined with or instead of classroom lecture, interesting activities that lend themselves to a variety of learning, etc.</li> <li>• Services directly related to educational and/or vocational needs such as tutoring to assist youth to achieve grade level, learning about and visiting educational/training institutions, paying for placement tests, providing transportation to and from classes, tools, work clothing or equipment necessary to vocational training, etc.;</li> <li>• Assistance with locating and maintaining employment;</li> <li>• Formal counseling and informal personal support to help the youth handle the losses connected with being in foster care, grief, anger and other difficult emotions;</li> <li>• Development and nurture of a personal support network with family, friends, and other caring adults; exploration of relationships while still in agency custody to determine realistically their opportunities for involvement after discharge, etc.;</li> <li>• Helping youth to attend meetings such as Strong Able Youth Speaking Out (SAYSO) (<a href="http://www.saysoinc.org/">http://www.saysoinc.org/</a>), training, state and national youth conferences, or other youth events that help youth to build competence and self-confidence;</li> <li>• Coordinating services with other counties or state services to provide experiences for youth in custody to meet with other youth in foster care;</li> <li>• Helping the youth to purchase goods or services needed to help him or her to become self-sufficient.</li> </ul>
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<b>Former Foster Youth</b>	<b>Ages 18-20</b>
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<b>In FFY 2015-2019, NCDSS will ensure the following activities and services are delivered</b>	<ul style="list-style-type: none"> <li>• Diligent, persistent, and ongoing efforts to locate and contact aged out young adults whose whereabouts are unknown to determine their current status and to offer access to needed resources.</li> <li>• An assessment of the young adult's current situation, barriers that they are experiencing, efforts they have made to overcome those barriers, and plans and strategies for agency assistance if requested.</li> <li>• Engagement of the young adult in planning, determination of what responsibility the young adult will handle, and choice of services that will supplement his or her own efforts.</li> </ul>
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	<ul style="list-style-type: none"> <li>• Informing the young adult of the availability of Education/Training Vouchers for vocational and/or educational training to enhance employment opportunities.</li> <li>• Reimbursement to the counties through LINKS Funds for assistance with completion of high school or GED, job training, utilities, furniture, uniforms, equipment, or other items or services that are needed to facilitate achieving self-sufficiency</li> <li>• Assistance in strengthening a personal support network that will continue to be available through adulthood.</li> <li>• Access to existing county LINKS program services.</li> <li>• LINKS housing assistance for young adults who aged out of care and need assistance with rent, rent deposits, or room and board arrangements.</li> <li>• Offer Contractual Agreements for Residential Services for youth who voluntarily remain or return to DSS placement authority and want to continue or pursue secondary, post-secondary and/or vocational education and/or training.</li> </ul>
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Former Foster Youth	Youth Who Exit Care at Age 16 Due to Adoption or Guardianship
<b>In Federal Fiscal Years 2015 to 2019, NCDSS will ensure the following activities and services are delivered</b>	<ul style="list-style-type: none"> <li>• Make available all LINKS services as described above except LINKS housing funds.</li> <li>• Provide information about the Education Training/Voucher Program and NC Reach</li> <li>• Provide information about LINKS service eligibility in planning meetings, as well as, at statewide and regional SAYSO meetings.</li> </ul>

3. Tools used to evaluate and inform the likelihood that youth will remain in foster care.

In North Carolina, two assessment tools are recommended as options for local county department of social services LINKS staff to utilize with their youth.

- The Casey Life Skills Assessment (formerly known as the Ansell-Casey Life Skills Assessment), is the most widely used as it is free of charge at [www.caseylifeskills.org](http://www.caseylifeskills.org), and is available in Spanish.
- The Daniel Memorial Assessment is recommended but is not widely used as it is costly and beyond the reach of many counties.

Local county department of social services may even opt to utilize other assessment tools outside of those recommended by the state. Regardless of which tool is utilized, life skills assessments for youth 13-18 must involve both the youth and a person who knows the youth’s skills and abilities first-hand, such as a family member or caregiver. The purpose of the assessment is to determine the youth’s strengths and skill areas as well as the need for additional training or life experiences. This enables the social worker to engage youth in teaching and program leadership as well as learning opportunities. Proper use of the tools provides a “roadmap” for identifying skills and resources youth need to achieve

their goals.

#### 4. Statutory / Administrative Barriers

While North Carolina policy allows for a broad range of youth to be served through LINKS, some age groups are optional and therefore counties may opt out of providing services due to capacity and resources limitations. NCDSS maintains a statewide fund to reimburse counties for specific youth expenses to help encourage counties to serve a broader range of youth than if they had to rely solely on their base allocation from LINKS or county funds.

### **E. Program requirements specific to youth ages 18 through 20:**

1. Certification in Attachment C that no more than 30 percent of federal CFCIP allotment will be expended for room and board for youth who left foster care after the age of 18 years of age but have not yet attained 21 years of age.

For FFY 2015-2019 “room and board” is defined as:

*In North Carolina, “room and board”, commonly referred to as “Housing Funds”, are only available to young adults who aged out of foster care at 18 but are not yet 21 years of age. Up to \$1500 per individual per year is available to help with transitional housing costs, which are defined as:*

- Rent or rent deposits,
- Room and board arrangements that include meals as a part of a rental agreement.
- Utility costs are not included in this fund, but those types of costs may be paid from LINKS Transitional Funds.

Funding is intended to help youth get moved into a permanent home, neither to prolong unnecessary dependency nor to pay for continued residential treatment.

For FFY 2015-2019 Eligibility to be considered a youth who “ages out” of foster care: *The young adult must have been in DSS custody on his or her 18th birthday and must have been living in a licensed foster care facility or with a relative that was not the removal home or in other court-approved placement. Youth who are in secure facilities specifically designed for correctional purposes on their 18th birthdays are specifically excluded from receiving transitional housing assistance but are eligible for other LINKS funds and services. Youth who are under the age of 18 and young adults who did not age out of foster care are not eligible for Housing Funds, and no other LINKS funds can be used to procure housing for them.*

2. Extension of title IV-E foster care assistance to young people ages 18 – 21.

North Carolina does not extend IV-E foster care to youth beyond age 18. However, the state offers a voluntary program, Contractual Agreements for Residential

Services (CARS) that is authorized by **N.C.G.S. § 108A-48** for youth who wish to remain in their placement past their 18<sup>th</sup> birthday while they continue or pursue additional educational and/or vocational training. This is a state-county funded program and is expected to continue through the 2015-2019 planning period.

3. If title IV-E foster care assistance to young people over age 18, was extended ~  
North Carolina does not offer an extended title IV-E foster care program. See section 2 above.

## F. Collaboration with Other Private and Public Agencies

North Carolina has partnered with several initiatives involving the public and private sectors over the last reporting period to assist youth to successfully transition to adulthood and will continue through FFY 2015-2019:

Public Private Partnership	Description
<p><b><u>United Way of the Greater Triangle Matched Savings Program</u></b></p>	<p>The mission of the Matched Savings Program is for young people to improve financial behaviors and understand the importance of saving and earning money. The goal of the program is to help 25 foster care youth save towards a desired goal in the Durham, Wake, Johnston, and Orange county areas. The United Way is implementing this program in partnership with NCDSS, Durham, Wake, Johnston and Orange County DSS's, Strong and Able Youth Speaking Out (SAYSO), and other experts from the community.</p>
<p><b><u>Forsyth Youth in Transition Initiative</u></b> <a href="http://www.youtube.com/watch?v=kEvSINNhZfQ">www.youtube.com/watch?v=kEvSINNhZfQ</a></p>	<p>The Youth in Transition Community Initiative of Forsyth County is a comprehensive community plan to improve the outcomes of foster youth. A governing committee representing diverse Forsyth County individuals and organizations, and a Youth Leadership Board, comprised of previous and current youth in foster care, have worked together to research existing programs, identify service gaps, and bring together beneficial services to meet the needs of these youth in our community. The Jim Casey Youth Opportunities Initiative has partnered with this community initiative to improve the outcomes.</p>
<p><b><u>Fostering Bright Futures Fellowship (FBFF)</u></b></p>	<p>Goodwill Industries of Northwest North Carolina is the program's lead agency, utilizing their experience and existing resources to implement supportive programs such as Youth Opportunities Coaches, mentoring programs, housing support and financial literacy training.</p> <p>This program is a public-private partnership that addresses the need for a comprehensive support structure to assist foster youths in making the transition from the Wake County Foster Care System to independent young adulthood.</p>

**Johnson C. Smith University's Phasing Up to New Possibilities Program**

The objective of the FBFF program is to eliminate the barriers that would typically derail those graduates from meeting educational and life goals. By providing financial, academic, and social support, the FBFF program helps these youths learn the skills they need to live as independent adults and get the education needed to secure gainful and meaningful employment.

The program is made possible by a partnership of

- Fostering Bright Futures
- Collaborative Advisory Board,
- Wake Technical Community College,
- Wake Technical Community College Foundation
- Wake County Human Services Bridge to Independence.

In Federal Fiscal Year 2012, Johnson C. Smith University (JCSU) revealed a new program called Phasing Up to New Possibilities. In partnership with Mecklenburg County Department of Social Services, Big Brothers/Big Sisters Program, Central Piedmont Community College, and other community organizations and agencies focused on helping youth consider post-secondary education options, JCSU committed to easing the transition for youth phasing out of foster care by supporting their unique needs and challenges as they rise from the stereotypes and labels placed upon them and enter a new phase upward. One component of the program is called the Guardian Scholars Program, which serves youth ages 16 to 22 who will or have aged out of foster care. The goal is to affect retention and graduation rates of former foster youth by providing year round housing and other basic needs; financial aid; academic advising, career counseling and supplemental support; personal guidance and counseling; opportunities for student and community engagement and leadership; and planned transitions. NCDSS is in partnership with this effort as it provides consultation and technical assistance regarding available resources to support foster youth accessing post-secondary education.

1. Efforts to coordinate and continue the state's CFCIP with "other federal and state programs for youth (especially transitional living programs funded under Part B of the Juvenile Justice and Delinquency Prevention Act of 1974,) abstinence programs, local housing programs, programs for disabled youth (especially sheltered workshops), and school-to-work programs offered by high schools or local workforce agencies" in accordance with section 477(b)(3)(F) of the Act.

In FFY 2015-2019, NCDSS will maintain its partnership with the North Carolina Collaborative on Youth in Transition whose members include representatives from the Administrative Office of Courts; North Carolina Department of Commerce Workforce Investment Act; SAYSO; North Carolina Department of Public Instruction; North Carolina Division of Mental Health, Substance Abuse and Developmental Disabilities; North Carolina Division of Juvenile Justice; and community based shelters and youth serving agencies.

The goals of the collaborative are to share and disseminate information; promote collaboration and advocate for improved services and outcomes in all areas of life for transitioning youth.

2. Additionally, states should discuss how the state's CFCIP coordinates with the state Medicaid agency to implement the provisions in the Patient Protection and Affordable Care Act (ACA)(P.L. 111-148).

In FFY 2014, NCDSS conducted several monthly LINK UP conference calls with county LINKS staff to inform them of the new legislation regarding provisions of the Affordable Care Act (ACA) as it pertains to aged out foster youths. In addition to the county LINKS staffs, representatives from the states foster youth advocacy organization and SAYSO participated on these calls. Information regarding the provisions of the new legislation as well as North Carolina's process to implement the new provision was discussed. On January 6, 2014, the North Carolina Division of Medical Assistance issued formal policy and guidance to county departments of social services ([http://info.dhhs.state.nc.us/olm/manuals/dma/fcm/adm/MA\\_AL14-13.pdf](http://info.dhhs.state.nc.us/olm/manuals/dma/fcm/adm/MA_AL14-13.pdf)). This policy was disseminated to county LINKS staff via the LINKS listserv as well.

NCDSS will continue to hold monthly conference calls with county LINKS staff and community partners to address any issues or barriers with eligible aged out foster youth enrolling in this Medicaid. SAYSO will continue to reach out youths through statewide events and provide information on their website [www.saysoinc.org](http://www.saysoinc.org) about the ACA.

3. Collaboration with governmental and other community entities to promote a safe transition to independence by reducing the risk that youth and young adults in the child welfare system will be victims of human trafficking.

Recently, the efforts of NCDSS to address the trafficking of children have focused on preventing the trafficking of youth involved in the child welfare system; specifically, youth currently in foster care or youth beginning the transition to independence. In partnership with the Salvation Army, NCDSS has promoted human trafficking awareness amongst state child welfare staff and youth advocates.

During Federal Fiscal Year 2014, NCDSS provided training on human trafficking and prevention to county LINKS staff and child welfare workers via a web conference. NCDSS has collaborated with SAYSO to provide information on human trafficking to the organization's leadership and to young people in substitute care throughout the state of North Carolina. These efforts have included a presentation on human trafficking to SAYSO's leadership team and the development of informational materials now posted to SAYSO's website. The information provided on the website is messaged for youth, as well as child welfare workers and resource parents, to build their awareness about what human trafficking is and learn how to prevent young people from becoming the targets of traffickers [[http://www.saysoinc.org/do\\_you\\_know/the\\_national\\_human\\_trafficking\\_resource\\_center\\_info/](http://www.saysoinc.org/do_you_know/the_national_human_trafficking_resource_center_info/)].

In FFY 2015-2019, NCDSS intends to continue engaging SAYSO on human trafficking and will make presentation to its youth board. NCDSS will work with SAYSO to provide the training and support needed for their youth board members to become peer educators on human trafficking prevention. Additionally, NCDSS recognizes the opportunity for partnership with other governmental and non-governmental organizations. These potential partnerships will be explored for the purposes of raising public awareness and training various human service professionals, school personnel, law enforcement, and community organizations how to recognize and respond to child trafficking and how to reduce the risk to children involved in the child welfare system. NCDSS plans to build these partnerships with the goal of achieving a coordinated public awareness campaign to begin January 2015 for National Slavery and Human Trafficking Prevention Month.

## **G. Determining Eligibility for Benefits and Services**

In North Carolina, all youth who are now 13 or older and are not yet 21 and who are or were in DSS foster care after the age of 13 are eligible for LINKS services, with two exceptions. Youth are not eligible for LINKS funds if:

- they have personal reserves of more than \$10,000, or
- they are undocumented residents or illegal aliens.

For the purposes of this policy, being in "foster care" means that the child was removed from the home and is receiving 24 hour substitute care, and the DSS has placement and care responsibility. Non-paid relative care is included in this definition if the child is not living in the removal home. Youth who, as teenagers, have been discharged from foster care and were reunified, placed with relatives, adopted, married, or emancipated remain eligible for LINKS services until their 21<sup>st</sup> birthday.

Note: Detention facilities, forestry camps, training schools, and any other facility operated primarily for the detention of children who have been determined to be delinquent are not considered foster care placements.

Eligibility for LINKS services and funds requires that the youth be an active participant in his or her planning, including sharing in the responsibility for designing and implementing their transitional plan. Youth involvement in case planning must be documented in the case record and reflected on the case plan.

Eligibility for LINKS services is intentionally broad, in order to permit agencies to serve youth and young adults who need the services and who are willing to do their part in resolving problems. Eligibility for LINKS funds continue regardless of residence and access is coordinated between the county/state of residence with the North Carolina County who has or had legal custody of the young person.

## H. Cooperation in National Evaluations

In In FFY 2015-2019, NCDSS will cooperate in any national evaluations of the effects of the programs in achieving the purposes of CFCIP.

## I. Education and Training Vouchers (ETV) Program

Since 2003, NCDSS has contracted with Orphan Foundation of America, DBA Foster Care to Success (FC2S,) to administer the North Carolina Education and Training Voucher Program (NC ETV). NC ETV makes available vouchers for youth who were in care at age 17 and youth who were adopted out of care or placed in a relative guardianship on or after their 16<sup>th</sup> birthday to attend appropriately accredited postsecondary institutions of higher learning or access vocational training. As the program enters its 11<sup>th</sup> year, FC2S continues to have the expertise and commitment to address the needs of program participants throughout the state and effectively administer the NC ETV Program.

### 1. North Carolina Education and Training Voucher Program

Approximately 700 students apply for the North Carolina Education and Training Voucher Program each year and over 300 students receive funding. FC2S will provide administrative services to the North Carolina Education Training Voucher Program (NC ETV).

	Total ETVs Awarded	Number of New ETVs
<b>Final Number: 2012-2013 School Year (July 1, 2012 to June 30, 2013)</b>	323	146
<b>2013-2014 School Year* (July 1, 2013 to June 30, 2014)</b>	306	146

As of March 31, 2014 approximately \$814,596.87 were expended for ETVs. Average funding for ETV students is \$2662.08. In this capacity, in In FFY 2015-2019, FC2S will:

- a. Process applications for NC Education Training Vouchers.
- b. Verify the eligibility of participants based on the following criteria:
  - The applicant must have been in foster care on or after his/her 17th birthday or have been adopted from foster care on or after his/her 16th birthday (the date of the finalization of the adoption) or have entered a kinship guardianship placement from foster care on or after his/her 16th birthday. FC2S will follow up with applicant regarding this specific criterion once NCDSS has made the initial determination of the applicant's foster care status.
  - The applicant must be 18, 19, or 20 years of age to enter the ETV program unless given specific exception due to completing secondary school and entering postsecondary school prior to age 18. Young adults who were participating in the program on their 21st birthday may remain eligible until their 23rd birthday, so long as they are making satisfactory progress in school.
  - The applicant must be a registered and participating student in a qualifying postsecondary institution of higher learning or vocational training school or be accepted for enrollment for the next term. A student may attend full or half time and still qualify for assistance.
  - The applicant must be a U.S. citizen or qualifying alien and a legal resident of the State of North Carolina.
  - The applicant may not have more than \$10,000 in personal reserves.
  - Applicants will be selected on a first-come, first served basis from among the eligible pool of applicants.
  - Applicants from North Carolina who go to school out-of-state are eligible on the same basis as youth who attend in-state schools.
- c. Verify that postsecondary educational and vocational institutions meet the following qualifying standards:
  - Admit as regular students only persons with a high school diploma or equivalent attendance.
  - Are eligible to accept Pell Grant awards on behalf of their students.
  - Are accredited or pre-accredited and authorized to operate in the state where they are located.
  - Award bachelor's degrees, two-year associates degrees, or one-year state or nationally recognized certificates.
  - Vocational schools must have been operating for at least two years and offer certificates or diplomas that are state or nationally recognized by an organization such as the Accrediting Commission of Career Schools & Colleges of Technology (ACCSC) which will ensure that their diplomas/certificates are professionally recognized.
  - Refer eligible applicants to the NC Reach Program for additional funding and comprehensive supportive services as needed.
  - Issue vouchers in accordance with the following guidelines:

- Verify that students have completed and submitted the Free Application for Federal Student Aid (FAFSA).
  - Once a student has been qualified as eligible, the FC2S will review the student's financial aid form and budget to determine financial need and disbursement plan/schedule for each semester.
  - Full-time students shall not exceed the lesser of \$5,000 per year or the total cost of attendance as defined in section 472 of the Higher Education Act.
  - Part-time students shall not receive more than \$2,500 or the cost of attendance.
  - ETV funds shall not supplant or duplicate other federal funding designated for the same purposes. FC2S will coordinate with state and county independent living service providers and other agencies to ensure that funds aren't supplanted or duplicated.
  - Returning students must reapply annually for NC ETV and submit an official transcript each semester they receive NC ETV funding.
- d. Award ETV funds in accordance with the NC ETV plan and the Higher Education Act:
- Tuition and school fees
  - Room and board expenses
  - Books
  - Rental or purchase of required equipment, materials, supplies such as a computer, adaptive software, tools etc.
  - Licensed child care
  - Transportation necessary to attend school
  - Replace or reduce student loans
- e. Monitor and support student progress and ensure the following:
- Students comply with program participation requirements to maintain funding.
  - Enroll students in the Academic Success Program who have a semester GPA of <2.0, fail or withdraw from one or more classes. This program probation intervention permits FC2S to provide intensive assistance and guidance to students so they can improve their academic skills, boost their self-confidence, and raise their Grade Point Average (GPA) to prevent academic suspension.
  - Funding may continue during the probationary semester if the student participates in FC2S's Academic Success Program. No grant shall be awarded to a student who earns less than a 2.0 GPA two consecutive semesters or consistently withdraws from courses without reason.
  - Students dismissed from an institution for lack of progress, who enroll in a different school will may be lose ETV funding until they complete a semester/term with a 2.0/C in all coursework to demonstrate satisfactory progress toward achieving a degree or certificate.
- f. Outreach to the community to build awareness of the NC ETV Program and identified qualified applicants. This will include, but is not limited to, providing NC ETV Program Information to current and former foster youth, county departments of social services, youth serving organizations and service providers, colleges, high schools, and other entities that are connected to youth.

- g. Ensure that the NC ETV program information link on the [www.fc2programs.org](http://www.fc2programs.org) website is accessible and operational 24 hours and 7 days a week to the general public.
- h. Ensure that the independent living coordinator administration portal at <https://adm.fc2sprograms.org/login> is accessible and operational 24 hours and 7 days a week to NC DSS.
- i. Issue any scholarship recipient tax reports as required by federal or state law.

## 2. Foster Care to Success (FC2S)

Additionally Foster Care to Success shall:

- Track the number of students assisted by the ETV program on a monthly basis.
- Track the number of students who are retained by the NC ETV program on a monthly basis (65% retention rate).
- Track the number of students who, when placed in the Academic Success Program (probation), earn a 2.0 GPA the following semester.
- Track the percentage of recipients graduating or successfully completing their academic or vocational program.
- Demonstrate that at least 85% participating in an annual satisfaction survey are satisfied with the NC ETV Program.
- Demonstrate that at least 45% of students participating in the Academic Success Program will increase their GPA by the end of the semester.

NCDSS determines an applicant's initial eligibility for ETV through a website maintained by FC2S where students submit applications (<http://www.fc2sprograms.org/north-carolina/>). FC2S provides NCDSS a monthly and end of year report that identifies the student and expenses.

### a. Consultation with Tribes

NCDSS has engaged the Eastern Band of Cherokee Indian (EBCI), the only federally recognized tribe in North Carolina, in discussion regarding their potential to operate a tribal welfare program. NCDSS Child Welfare Services staff, including the Chief of Child Welfare Services, met with tribal representatives in Cherokee, NC to discuss these plans. The tribe is still in the planning stages and is not pursuing at this time to administer, supervise or oversee the CFCIP or an ETV program with respect to eligible Indian children.

Currently, North Carolina Indian children have full access to LINKS programming and services if they are or were in the custody of a local county department of social services on or after their 13th birthday, are documented, and do not have more than \$10,000 in reserves. This is the eligibility standard for all LINKS youth in North Carolina. Likewise, youth who were in the custody of a county department of social services and exited care on or after their 16th or 17th birthdays due to relative

guardianship or adoption; aged out of care at age 18; or were in agency custody anytime on or after their 17th birthday are eligible for the NC ETV program. All Chafee and ETV services may be accessed through any of the county departments of social services and NCDSS.

b. CFCIP Program Improvement Efforts; Plan to continuously engage youth

In In FFY 2015-2016, NCDSS intends to renew its contract with Independent Living Resources, Inc./SAYSO to provide opportunities for SAYSO members to attend, participate and provide recommendations at county and state level planning meetings as well as participate in ongoing quality assurance or continuous quality improvement efforts of the state. Additionally, NCDSS will engage the SAYSO Youth Board of Directors to provide the perspective of foster youth in policy development, review and revisions. As part of the contract agreement, a part-time youth/young adult position, SAYSO DHHS Liaison, will be funded that to provide direct advocacy, as well as, support and feedback on policy and legislation impacting programs and services that effect older youth transitioning out of foster care. This position will continue to participate on monthly LINK UP conference calls to provide an ongoing voice for youth in LINKS services.

In addition to the above efforts, North Carolina will continue to encourage directors of county child welfare agencies to conduct focus groups with youth in care to as per the Dear County Director Letter issued on August 1, 2011 <http://www.ncdhhs.gov/dss/dcdl/famsupchildwelfare/CWS-17-11.pdf>. This input will be summarized and submitted to NCDSS to incorporate in the statewide CFSR process.

c. CFCIP Training

NCDSS intends to maintain its contract with Independent Living Resources, Inc. (ILR) who provides transitional living education and services to North Carolina's foster youth and administers North Carolina's foster youth advisory board known as Strong and Able Youth Speaking Out (SAYSO). ILR also provides NCDSS' only training to foster parents that are specific to serving older youth called *Helping Youths Reach Self-Sufficiency*. SAYSO will continue to provide the state's youth events and workshops specific to helping older youth and young adults transitioning out of the foster care system. Participants register for these training events through NCDSS training website [www.ncswlearn.org](http://www.ncswlearn.org). These events and workshops will focus on the seven LINKS outcomes.

In In FFY 2015-2019, NCDSS intends to maintain its contract with Independent Living Resources, Inc. (ILR) to provide:

- Helping Youth Reach Self-Sufficiency
- LINKS 101
- Real World Event Instructional Event

NCDSS contracts with the University of North Carolina at Chapel Hill School of Social Work to publish a newsletter to county staff, foster parents, and service providers called "Fostering Perspectives" [www.fosteringperspectives.org/](http://www.fosteringperspectives.org/). Representatives from SAYSO and ILR are on the Fostering Perspectives Advisory Board and often contribute articles on youth in transition needs.

In In FFY 2015-2019, NCDSS intends to maintain its contract with the University of North Carolina at Chapel Hill School of Social Work to issue the "Fostering Perspectives" newsletter.

## VII. Monthly Caseworker Visits Formula Grants and Standards for Caseworker Visits

NCDSS has anticipated the requirement that the total number of caseworker visits must not be less than 95% of the total visits that would be made if each child were visited once per person, and that at least 50% of those visits must be the child residence. Currently, our effort is aimed at the reduction in the number of incidences of maltreatment in foster care and the number of placement disruptions.

NCDSS is currently tracking these outcomes:

Outcome Measures National	Standard	FFY 2007	FFY 2012	FFY 2013
Absence of Maltreatment in Foster Care	99.68%	99.79%	99.55	NA
Two or fewer placement settings for children in care less than 12 months	National Median 83.3%	87.55%	91.6%	91.3%
Two or fewer placement settings for children in care 12 to 24 months	59.9%	68.22%	76.2%	76.1%

In partnership with our public and private child-placing agencies, university partners, and other stakeholders, NCDSS developed, piloted and evaluated a monthly foster care visit documentation tool. The tool is a comprehensive assessment of safety in the living environment and contains the following elements:

- Changes in household membership,
- Safety and supervision practices used in home,
- Family's level of stress,
- Cultural and
- Ethnic considerations.

The tool began use in 2008, and continues to be used by foster care workers monthly during their required face-to-face contacts with children in foster care to ensure that safety, permanency and well-being issues are addressed in a manner that assists the caseworker and foster parents with comprehensive information to guide decision making.

The tool has provided a method for counties to evaluate and to follow-up on concerns over time and is intended to serve as a guide to best practice. NCDSS is able to use this information in concert with the REAP data dashboard to maintain oversight of placement stability.

Example:

REAP Data Dashboard ~ Foster Care	National Standard / NCDSS performance
<ul style="list-style-type: none"> <li>Annual % of children in foster care who have not been maltreated by a foster parent</li> </ul>	<p><b>99.68% / 99.72%</b></p>
<ul style="list-style-type: none"> <li>Annual % of foster youth in care for 12 months or less who have 2 or fewer placements</li> </ul>	<p><b>86% / 88.01%</b></p>
<ul style="list-style-type: none"> <li>Annual % of foster youth in care for 12 months but less than 24 months who have 2 or fewer placements</li> </ul>	<p><b>65.4% / 69.94%</b></p>
<ul style="list-style-type: none"> <li>Annual % of foster youth in care for more than 24 months who have 2 or fewer placements</li> </ul>	<p><b>41.8% / 38.97%</b></p>

**A. Standard for content and frequency of caseworker visits**

Per NC policy, children in foster care are required to be seen by their Social Worker at least monthly. These visits must be made in person by a DSS Social Worker. Social Workers should complete the Monthly Foster Care Contact Form during these visits and documentation should reflect an on-going assessment of needs and services provided to meet identified needs.

**B. FFY 2015-2019 use of Monthly Caseworker Grant**

The Monthly Caseworker Visit Funds are allocated to each county department of social services based on the number of children the departments had in foster care. Primarily, counties use it for personnel activities and salaries for child welfare staff to ensure that quantity and quality of visits are conducted monthly.

North Carolina is using an ACYF-approved sampling methodology to collect data on monthly caseworker visits and it has been revised to incorporate recent amendments. This data is compiled from county staff entries into state databases for ongoing evaluation.

Monitoring and oversight of county performance with entering monthly caseworker visits into the state database occurs regularly as state reports are readily available, the re-design of these state reports made them more user-friendly. Counties who are not meeting the monthly caseworker visit benchmark are contacted for state initiated technical assistance to identify barriers and develop strategies for resolution prior to deadlines.

When technical assistance is delivered to counties the following are activities that may take place:

- Suggestions to identify problem areas;
- Instruction on how to download data and management reports;
- Application of the data to gain insight into practice and system issues;
- Instruction on how the various data systems relate to each other;
- Conducting webinars with high and low performing counties for a county peer-to-peer exchange of ideas in an effort to improve performance.

Peer-to-peer technical assistance has led low performing counties to visit high performing counties to observe their successful strategies.

## VIII. Adoption Incentive

The Federal Adoption Incentive Fund supports NCDSS' Adoption Promotion Program and has increased the number of foster care children achieving permanency through adoption. The Fund has been used to reimburse States for exceeding expected adoption goals. This fund provides counties with limited resources; however, counties may partner with licensed child placing agencies to recruit, train, and support families through the adoption process.

### A. Activities expected to be provided

Adoption Promotion involves a hierarchy of funding (TANF, IV-B2 and Federal Incentive) that can be used to enhance and expand adoption resources for foster children to achieve permanency. Licensed child placing agencies and county departments of social services are compensated for providing adoption services that culminate in the finalization of adoptions.

Funds may be used for:

- Provision or purchase of adoption services,
- Adoption recruitment,
- Adoption training, and
- Post placement supportive services
- Facilitation of legal process in the issuance of a decree of adoption

County departments of social services are eligible for Adoption Promotion payments after exceeding a pre-determined baseline and spending or encumbering of previously received funds. (The baseline is determined by looking at adoption statistics over a four year period, discarding the highest total and averaging the remaining three years). Child placing agencies are no longer required to exceed a pre-determined baseline before receiving Adoption Promotion funds; however, they must adhere to licensure standards.

Historically Adoption Promotion funds are exhausted annually before all agencies are compensated for services provided. The availability of funding over the years has been impacted by reimbursement rates to agencies and necessitated private agencies entering into agreements with counties for compensation of services in the event Adoption Promotion funds are not available. Counties have sought guidance on allowable uses of this Adoption Promotion fund and continue to seek ways to enhance and expand services to move children to permanency in a timely manner.

The plan for FFY 2015-2019: to incorporate REAP into all aspects of the child welfare continuum. REAP counties have identified a set of core achievements (outcomes) to be monitored on a monthly basis on their data dashboards. REAP and the data dashboard has made available an additional data point to help predict the volume, geographical location and frequency adoptions. As a NCDSS oversight tool, the data dashboard provides valuable feedback on practice.

Example:

REAP Data Dashboard ~ Adoption	National Standard / NCDSS performance
Annual % of children who left foster care through adoption in the last 12 months who were adopted within 24 months of their last entry into foster care.	36.6% / 37.25%

Although, NCDSS does not collect data past the exhaustion of the annual allocation, data is not available on the number of eligible children for which agencies did not receive compensations.

SFY	Number of Children Department of Social Services	receiving Adoption Licensed Child Placing Agencies	Promotion Services Total
2010	149	173	322
2011	202	215	417
2012	295	160	455
2013	157	185	342

The total amount is paid to an agency when the agency provides all adoption services to facilitate the adoption. When joint planning leads to the issuance of a *Decree of Adoption* the reimbursement will be shared between the agencies. Reimbursements are paid proportionately to the percentage of adoption services provided that leads to the issuance of a *Decree of Adoption*.

Current Reimbursement Rates for	Adoption Promotion
Children age 0-12 or Sibling group of 2	\$7,200 / per child
Children age 13-18 or Sibling group of 3 or more	\$12,000 / per child

## B. FFY 2015-2019 Plan for timely expenditure

NCDSS will continue to provide these Adoption Promotion/Incentive benefits and to work with the North Carolina General Assembly to extend the eligibility age limit from 18 – 19; eliminating another barrier to the adoption of older children. For more information see page 106 under Foster and Adoptive Parent Diligent Recruitment Plan.

## **IX. Child Welfare Demonstration Activities**

Not applicable to North Carolina.

## X. Targeted Plans

Listed in this section are the four targeted plans that states are required to submit. They are the *Foster and Adoptive Parent Diligent Recruitment Plan; Health Care Oversight and Coordination Plan; Disaster Plan; and Training Plan.*

### A. Foster and Adoptive Parent Diligent Recruitment Plan

1. Characteristics of children for who foster and adoptive homes are needed.

NCDSS has identified the current characteristics of those children who are in need of foster and adoptive homes.

Child Characteristic	Children in Foster Care	Children waiting for Adoption	Note
<b>2012 Census Data for total # children under 18</b>	*	*	2,286,528
<b>Number of children in Foster Care or awaiting Adoption</b>	8197 (first day FY 2013)	284 (as of 4/14/14 registered on NC Kids)	For children registered on NC Kids, they are either actively registered (currently recruiting through the website) or on legal risk status (internal matching only)
<b>Age</b>			
• Ages 0-6	2589	58	Children registered through NC Kids who are in need of adoptive homes in North Carolina are older children (ages 6-18), with the highest age of children in need of adoptive placement as 13 years old.
• Ages 6-12	1357	110	
• Ages 13-18	952	110	
<b>Gender</b>			
• Male	2533	149	At this time in NC, there are a significantly higher number of male children in need of adoptive placement registered through NC Kids.
• Female	2368	118	
<b>Race</b>			
• Asian	568 (2.92%)	3	According to the 2012 census, 71.9% of the NC population is White, 22% is Black, and 8.7% is Hispanic/Latino. Of those children in need of Adoptive placement, a disproportionate number of those children are Black. *Data not available at this time
• Black	1495 (30.50%)	<b>903</b>	
• Native Hawaiian/Pacific Islander	*	39	
• White	2695 (54.99%)	835	
• Hispanic	418 (8.53%)	152	

- [http://cwoutcomes.acf.hhs.gov/data/tables/gen\\_population?years\[\]=2009&years\[\]=2010&years\[\]=2011&years\[\]=2012&viz=table&states\[\]=34&state=34&region](http://cwoutcomes.acf.hhs.gov/data/tables/gen_population?years[]=2009&years[]=2010&years[]=2011&years[]=2012&viz=table&states[]=34&state=34&region)
- Duncan, D.F., Kum, H.C., Flair, K.A., Stewart, C.J., Vaughn, J., Bauer, R., and Reese, J. (2014). Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina (v3.1). Retrieved [8/1/2014], from University of North Carolina at Chapel Hill Jordan Institute for Families website. URL: <http://ssw.unc.edu/ma/>

NC is one of the states awarded a grant to study and disseminate trauma informed practices to children in the NC child welfare system. The name of the grant is known as Project Broadcast.

*Quote from a Stakeholder:*

*“Through this training [trauma] we have gained insight into why some foster parents stay longer than others and are happier...the impact that this has on placement stability and adoptions ”*

(Joint Planning March 18, 2014)

Understanding the characteristics of the children that our system is serving will support the recruitment of foster parents that are able to sustain placements and advance outcomes for children.

Through the implementation of Trauma Informed practice (Project Broadcast) 1,344 children have been screened for possible exposure to traumatic events and for functional impairments often associated with trauma.

- **66%** of the children screened were thought to be exposed to physical, sexual, emotional maltreatment and/or neglect.
- **23%** of the children were thought to have an incarcerated primary caregiver or had witnessed the arrest of a primary caregiver.
- **38%** of the children were thought to be exposed to drug or substance abuse or its related activities.
- **41%** were thought to have been exposed to domestic violence.

These numbers gives us insight into the types of foster and adoptive parents we need to recruit statewide to have an effect on placement stability. While shared parenting is highly promoted during general recruitment activities, we may wish to recruit parents specifically willing to work with incarcerated parents, substance abusing parents and/or parents who are currently in treatment for domestic violence.

Children who are in foster care do better when they have placement stability and stability can be correlated with informed and trained foster parents.

Permanency Outcome I	Children have permanency and stability in their living situation.
<b>2007 Federal CFSR % Achieved</b>	58%
<b>2009 Federal CFSR PIP close out</b>	46%
<b>SFY 2010 – 2011</b>	51.8%
<b>2014 REAP QCR Pilot</b>	60%
• Pilot not based on statistically valid data.	

FFY 2015-2019, NCDSS will focus on the recruitment of foster parents specifically willing to work with incarcerated parents, substance abusing parents and/or parents who are currently in treatment for domestic violence and identify the supports needed to promote placement stability.

## 2. Adoption Recruitment

### a. NC Kids

NC Kids is North Carolina's effort to connect children waiting for permanency through adoption with families by:

- Featuring waiting children on the NC Kids website (<http://www.ncdhhs.gov/dss/adopt/about.htm>) and the national Adopt US Kids website.
- Maintaining a central database of children available for adoption and families who are interested in adopting.
- Offering matching services for waiting children with pre-approved families registered with NC Kids.
- Adoption Support services
- Community Outreach

Community Outreach strategies involves each of our 100 Counties recruiting foster and adoptive homes for their specific children in foster care. While the overall recruitment efforts vary, each county is able to target their specific community in a way that best serves their community. NCDSS supports those recruitment efforts through a variety of ways that reach out to the NC community as a whole. These include:

- NC Kids website, hotline, and email address
- Dissemination of recruitment supplies through NC Kids, specifically "You Don't have to be Perfect to be a Perfect Parent" booklet, NC Kids pens, balloons, and magnets
- Rotation of the traveling NC Heart Gallery. The last gallery was in rotation for 2011-2012, and a 2014-2015 gallery is currently being created.
- NC Kids maintains a list serv for adoption professionals in the state that is used to disseminate information about upcoming recruitment events, updates about available resources, and any other appropriate information that can be shared to assist in diligent recruitment efforts on the local level or statewide.
- A Best Practice Recruitment Guide to Partnering with Resource Families entitled "Treat Them Like Gold." ([http://www.ncdhhs.gov/dss/publications/docs/Partnering\\_with\\_Resource\\_Families.pdf](http://www.ncdhhs.gov/dss/publications/docs/Partnering_with_Resource_Families.pdf)).
- Online orientation for prospective foster and adoptive parents (<http://ncswlearn.org/foster>).
- Online video "Foster Hope, Foster Love, Foster Families." In this video, licensed foster parents discuss their reasons for becoming foster parents and the challenges and rewards of providing foster care. Jimmy Wayne, a country music star who spent time in foster care in North Carolina, narrates the video. (<http://www.youtube.com/watch?v=X6UGSkwFvYM&feature=youtu.be>).

- NCDHHS in collaboration with the NC Commission of Indian Affairs are on schedule to produce a video and market strategies for the recruitment of American Indian foster parents throughout the state, the video will reflect the need of both for tribes represented in the state; 8 tribes and 4 tribal organizations. The video is scheduled to be released by May 2015.

b. Dissemination of information on how to become a foster or adoptive parent or about specific children.

Efforts will center on:

- NC Kids website, hotline, and email address
- Dissemination of recruitment supplies through NC Kids, specifically “You Don’t have to be Perfect to be a Perfect Parent” booklet, NC Kids pens, balloons, and magnets that includes the location and contact information for agencies
- Rotation of the NC Heart Gallery. The last gallery was in rotation for 2011-2012, and a 2014-2015 gallery is currently being created.
- In September 2014, the North Carolina Division of Social Services will be participating in a Wait No More adoptive parent recruitment event through Focus on the Family. This is a large faith based recruitment effort that will target the entire state of North Carolina.
- A Best Practice Recruitment Guide to Partnering with Resource Families entitled “Treat Them Like Gold.”
- Online orientation for prospective foster and adoptive parents (<http://ncswlearn.org/foster>).
- Online video “Foster Hope, Foster Love, Foster Families.” In this video, licensed foster parents discuss their reasons for becoming foster parents and the challenges and rewards of providing foster care. Jimmy Wayne, a county music star who spent time in foster care in North Carolina, narrates the video. (<http://www.youtube.com/watch?v=X6UGSkwFvYM&feature=youtu.be>)
- The American Indian foster parent recruitment video is scheduled to be release by May 2015 and will be viewed at the Spring Gatherings sponsored by the NC Commission of Indian Affairs as well as posted on multiple websites for viewing by the general public. Announcement of the release will be shared with all county Department of Social Services, private child placing agencies and other applicable human service agencies that can assist in the recruitment of American Indian foster parents.

c. Non-Discriminatory Fee Structures

In NC, there is no fee to become a foster or adoptive parent through the NC Child Welfare System or a County Department of Social Services. In regards to non-agency adoptions, public child welfare agencies must adhere to N.C. GS §48-3-304 and N.C. GS §48-2-504 regarding fee structures for Pre-placement Assessments and Reports to the Court on the Proposed Adoption. NC Child Welfare Policy states that an agency may charge or accept a reasonable fee or other compensation from

prospective adoptive parents. In assessing a fee or charge, the agency may take into account the income of adoptive parents and may use a sliding scale related to income in order to provide services to persons of all incomes.

[N.C. GS §48-3-304](#) reads:

- (a) An agency that prepares a pre-placement assessment may charge a reasonable fee for doing so, even if the individual being assessed requests that it not be completed. No fee may be charged except pursuant to a written agreement which must be signed by the individual to be charged prior to the beginning of the assessment. The fee agreement may not be based on the outcome of the assessment or any adoption.
- (b) An assessment fee is subject to review by the court pursuant to G.S. 48-2-602 and G.S. 48-2-603 if the person who is assessed files a petition to adopt.
- (c) The Department shall set the maximum fees, based on the individual's ability to pay and other factors, which may be charged by county departments of social services. The Department shall require waiver of fees for those unable to pay. Fees collected under this section shall be applied to the costs of preparing pre-placement assessments and shall be used by the county department of social services to supplement and not to supplant appropriated funds. (1995, c. 457, s. 2.)

[N.C. GS §48-2-504](#) reads: (a) An agency that prepares a report to the court may charge the petitioner a reasonable fee for preparing and writing the report. No fee may be charged except pursuant to a written fee agreement which must be signed by the parties to be charged prior to the beginning of the preparation. The fee agreement may not be based on the outcome of the report or the adoption proceeding.

(b) A fee for a report is subject to review by the court pursuant to G.S. 48-2-602 and G.S. 48-2-603.

(c) The Department shall set the maximum fees, based on ability to pay and other factors, which may be charged by county departments of social services. The Department shall require waiver of fees for those unable to pay. Fees collected under this section shall be applied to the costs of preparing and writing reports and shall be used by the county department of social services to supplement and not to supplant appropriated funds. (1995, c. 457, s. 2.)

[10A NCAC 70H.0113 Fees](#) (Administrative Rule) reads:

(a) County departments of social services may charge reasonable fees for the preparation of a preplacement assessment or report to the court in accordance with G.S. 48-3-304(a) and G.S. 48-2-504(a). No fee shall be charged except pursuant to a written fee agreement which must be signed by the parties to be charged prior to the beginning of the preparation. The fee agreement shall not be based on the outcome of the report or the adoption proceeding.

(b) Maximum fees for the preparation of the reports shall not exceed:

- (1) One thousand five hundred dollars (\$1500) for the pre-placement assessment and report to the court; and
- (2) Two hundred dollars (\$200.00) for report to the court only.

(c) No fee shall be charged when one or more of the following circumstances exists:

- (1) The head of household for the prospective adoptive family is an AFDC or SSI recipient;
  - (2) The family unit's income is below the State's Established Income (or 150% of the 1992 Federal Poverty Level); or
  - (3) The family has identified an adoptee who is in the custody and placement responsibility of the Department of Social Services, and provided that the adoptive family continues to pursue the adoption of the identified child.
- (d) Fees for the above reports may be reduced or waived if it can be documented in the case record that the prospective adoptive family cannot pay the required fee. Unless reduced or waived, the entire fee shall be paid in accordance with local policy.

d. Procedures for a timely search for adoptive placement

All children in North Carolina, who have a permanency goal of adoption, must be registered with the NC Kids Adoption Exchange within 30 days of becoming legally free for adoption. Upon receipt of a complete registration packet, children are registered and visible on the NC Kids and Adopt US Kids website within a maximum of 14 calendar days; often within seven calendar days. Inquiries by prospective adoptive parents are reviewed on a daily basis and forwarded on to the appropriate county/private agency social worker within one to two business days. NC Kids and Adopt US Kids do not have a mechanism to limit adoptive inquiries or referrals to families of a specific race or ethnicity. All families who may be a match for the child are forwarded to the local DSS social worker for review and consideration. In addition, MEPA is addressed during the four day adoption training provided by the Division of Social Services. In addition, individual DSS's and agencies complete their own additional child specific recruitment by seeking adoptive placement through their own licensed foster homes and approved adoptive homes, reaching out to neighboring counties and agencies, and recruiting within their own community for appropriate adoptive placement.

FFY 2015-2019, NCDSS will continue to focus on increasing the participation of local county departments of Social Services to register all eligible children on the adoption exchange and on the recruitment of families for NC children waiting for adoption.

3. Permanency Innovation Initiative Fund

The intent of this special provision is to establish a demonstration project to deliver Family Finding services, Child Specific Adoption Recruitment services, and permanency-focused training services to evaluate if an investment of state funds would yield positive permanency outcomes (by both reducing the number of youth who age out of foster care and the number of youth in foster care) and cost savings.

The three goals of the Permanency Innovation Initiative Fund are:

- To improve outcomes for children living in foster care through reunification with parents, providing placement or guardianship with other relatives, or adoption
- To improve engagement with biological relatives of children in or at risk of entering foster care
- To reduce the costs associated with maintaining children in foster care

These goals support the following strategies:

- Family Finding Services, which uses intensive biological family engagement services to discover and engage biological relatives of children living in public foster care to provide permanent emotional and relational support, including adoption, legal guardianship, or legal custody.
- Child Specific Adoption Recruitment Services, which is a program that follows the Wendy's Wonderful Kids (WWK) Model as developed by The Dave Thomas Foundation for Adoption and works with children in public foster care to develop and execute adoption recruitment plans tailored to the needs of the individual child.
- Permanency Training Services, which are services delivered by Children's Home Society of North Carolina to assess the readiness of county departments of social services to implement the permanency strategies under subdivisions (1) and (2) of this subsection and provide training services to support the delivery of the services.

Moving forward the Permanency Innovation Initiative Fund has identified 6 goals for the upcoming year.

- Tier 3 Family Finding Services will be provided to 192 nine to seventeen year-old youth from July 1, 2014 – June 30, 2015. These youth will be residing in foster care who are male or female, school-aged sibling groups (who may have a younger sibling), either legally free or have an adoption, guardianship, custody or reunification case goal, whose extended maternal and paternal family has not been extensively explored or has not been extensively explored in the past 24 months or more and who can reside in a single family home. Children with a reunification case goal can be referred on or after January 1, 2015 but shall not exceed more than 20% of all cases served from July 1, 2015 – June 30, 2015. The 192 youth will be referred from 84 counties including: Alexander, Anson, Avery, Beaufort, Bertie, Brunswick, Buncombe, Burke, Cabarrus, Caldwell, Carteret, Caswell, Catawaba, Chatham, Chowan, Cleveland, Columbus, Craven, Cumberland, Currituck, Dare, Davidson, Davie, Duplin, Durham, Edgecombe, Forsyth, Franklin, Gaston, Gates, Granville, Guilford, Harnett, Haywood, Henderson, Hertford, Hoke, Hyde, Iredell, Jackson, Johnston, Jones, Lee, Lenoir, Lincoln, Madison, Martin, McDowell, Mecklenburg, Mitchell, Moore, Nash, New Hanover, Onslow, Orange, Pasquotank, Pender, Perquimans, Person, Pitt, Polk, Randolph, Richmond, Robeson, Rockingham, Rowan, Rutherford, Sampson, Scotland, Stanly, Stokes, Surry, Transylvania, Tyrell, Union, Vance, Wake,

Warren, Washington, Wayne, Wilkes, Wilson, Yadkin, Yancey. Cases referred for services will be reviewed, accepted and opened as they are received from the counties listed above. All referrals must be received by March 1, 2015 unless there is a continuation of funding. If there is not a continuation of funding all cases will be closed by June 30, 2015 and transitioned to the referring agency.

- Child Specific Recruitment Services will be provided to 36 nine to seventeen year-old youth from July 1, 2014 – June 30, 2015. These youth will be residing in foster care who are male or female, school-aged sibling groups (who may have a younger member), legally free or have an adoption case goal and TPR has been court ordered and/or filed with court (children who are not legally free will not exceed 20% of all accepted referrals), prepared for the adoption/recruitment process, who have been identified as having special-needs, two or more years in foster care and who can reside in a single family home. The 36 youth will be referred from 44 counties including Alamance, Alexander, Alleghany, Ashe, Beaufort, Bertie, Burke, Cabarrus, Caldwell, Catawba, Chatham, Chowan, Cleveland, Craven, Currituck, Dare, Davidson, Forsyth, Gaston, Gates, Greene, Guilford, Hertford, Hyde, Jones, Lenoir, Lincoln, Martin, Mecklenburg, Pasquotank, Perquimans, Pitt, Polk, Randolph, Rockingham, Rutherford, Stanly, Tyrell, Union, Washington, Watauga, Wayne, Wilkes, Wilson. Cases referred for services will be reviewed, accepted and opened as they are received from the counties listed above. All referrals must be received by March 1, 2015 unless there is a continuation of funding. If there is not a continuation of funding all cases will be closed by June 30, 2015 and transitioned to the referring agency.
- Permanency Training services will target; 1) DSS agencies, court system and community partners to support the delivery of Family Finding and Child Specific Recruitment services through training and/or coaching and consultation in counties where CHS is providing these services through June 30, 2015, 2) Caregivers and potential caregivers to promote permanency and safe, healthy relationships.
- Permanency Training services will be available to all 100 counties, with an emphasis on counties receiving Family Finding and Child Specific Recruitment services through June 30, 2015.
- Permanency Training services will deliver a total of 250 hours of training and coaching or consultation to child welfare agencies and partners.
- Permanency Training services will deliver 200 hours of Family Education and Support to families and caregivers receiving Family Finding and Child Specific Recruitment Services.

## **B. Health Care Oversight and Coordination Plan**

The Health Care Oversight and Coordination Plan recommendations are prepared by the North Carolina Pediatric Society and co-authored by Dana Hagele, M.D. & Leslie Starsonneck, M.S.W. and contributors Allan Chrisman, M.D., DFAACAP & Susan Cohen, M.S.W., and is in appendix 1.

### C. Disaster Plan

This Disaster Plan is applied to all Disaster Case Management stakeholders at the local, state and federal levels, while operating within the State of North Carolina after a disaster. The base plan provides general operating guidance and is supported by more specific Annexes. The complete plan is attached in appendix 2.

### D. North Carolina's Training Plan *(See Appendix 3A, 3B, 3C and 3D)*

NCDSS is the umbrella agency for the NC Statewide Training Partnership, which consists of county, state, and university partners. NC's training system is competency based, and as such, county child welfare staff is provided training that addresses the specific knowledge and skills needed to complete their daily job tasks. Training is provided at different levels of depth, appealing to the needs of inexperienced and experienced child welfare staff with 100, 200 (Tier I and Tier II) and 300 series training. Each level of training is geared toward a particular target audience, and serves as a foundation for the next series of training.

Based on the belief that standardized, competency-based foundational and advanced practice training must be provided to all children's services staff, the NCDSS vision continues to be that of a training system guaranteeing competency-based, job-relevant, accessible, affordable, consistent, timely, and thorough training for child welfare workers. The goal is to enhance the knowledge and skills of our workers to maintain a competent child welfare workforce committed to ensuring safe, permanent, nurturing families for children at risk of abuse, neglect, or dependency.

The objectives of the NC Statewide Training Partnership remain to:

- Engage families and youth in the learning system
- Enhance professional development of social workers
- Enhance professional development of supervisors
- Support leadership development among administration and management staff
- Expand training and support to enhance skills of foster parents
- Enhance professional development of trainers
- Incorporate technology and e-learning into the learning system
- Insure evaluation is an integral component of the learning system
- Integrate training, practice, and policy
- Increase understanding of and expand access to the learning system

NCDSS is a child-serving agency within the umbrella agency of the Department of Health and Human Services (DHHS). Therefore, in accordance with 45 CFR 1356.60(b) (2), all training activities will be cost allocated based on the benefiting program concept **(See Appendix 3D)**. Training activity costs will be shared under Title IV-E and other federal and local resources as part of the NCDSS Comprehensive Child Welfare Training Plan. These sources of funding in combination with state appropriations cover the expenses of the entire comprehensive child welfare training program. Training activity costs include performance based contracts with universities to develop curricula and deliver training, as

well as operational expenses to support the delivery of training across the entire state; specifically to operate 4 regional training centers.

NCDSS continues to make numerous training events accessible online through its partnership with the Family and Children’s Resource Program, part of the Jordan Institute for Families at the UNC-Chapel Hill School of Social Work. These online training opportunities can also be found at: <https://www.ncswLearn.org>.

NCDSS also continues to collaborate with the Center for Family and Community Engagement (CFACE) based at North Carolina State University. Through this collaboration, short-term training is provided to child welfare staff, foster youth and community partners that supports family-centered practice and cultural competency.

The NC Statewide Training Partnership is constantly updating and expanding to successfully meet the training needs of the state’s child welfare workers. Through the Training Partnership, NC is able to offer counties, small and large, rural and urban, the same quality training experiences to keep them abreast of issues in the ever-changing field of child welfare policies and practices. The North Carolina Division of Social Services is proud of its accomplishments and will build upon these in the future. A well-trained worker is better able to support the families with which they work to more successful outcomes in safety, permanency, and well-being.

### 1. Webinars

In a continuing effort to broaden training opportunities using the Internet, the NCDSS sponsors webinars (online seminars) for child welfare professionals. Webinars enable NCDSS to communicate a variety of important messages about policy and practice to a significant portion of its target audience including direct service social workers, supervisors, managers, and agency directors from county DSS and licensed private child-placing agencies.

*Initial Required State Training for Child Welfare workers.*

*Compliance with training requirements is a function of the local county department of Social Services.*

*Training registration, attendance and completion can be accessed through the online training portal: [www.ncswlearn.org](http://www.ncswlearn.org)*

The format of these online learning events is modeled on past successful webinars and included presenters selected for their experience, expertise, and perspective. Presenters use evidence-based practice information to give participants tools they could immediately use in their work with families. For each event, handouts (including presenter slides) are developed as appropriate and made available to participants through NCDSSs online learning portal, [www.ncswlearn.org](http://www.ncswlearn.org). For some webinars, follow-up documents are prepared and emailed to registered participants after the event. These documents contained answers to key questions brought up in the webinar and provided additional resources. Each webinar lasts 90 minutes and was delivered using Adobe Connect Pro software. This learning platform allows presenters to speak to participants and each other, display PowerPoint slides, and use interactive features such as chat and polling questions.

## 2. Training Provided to New Child Welfare Social Workers

North Carolina General Statute § 131D-10.6A (b) established the requirement that minimum training standards for child welfare social workers and supervisors needed to be put in place. It applies to all staff hired after January 1, 1988.

The specific guidelines state, “the Division of Social Services shall establish minimum training requirements for child welfare services staff. The minimum training requirements established by NCDSS are as follows:

- Child welfare services workers shall complete a minimum of 72 hours pre-service training before assuming direct client contact responsibilities. In completing this requirement, NCDSS shall ensure that each child welfare worker receives training on family centered practices and State and federal law regarding the basic rights of individuals relevant to the provision of child welfare services, including the right to privacy, freedom from duress and coercion to induce cooperation, and the right to parent.
- Child protective services workers shall complete a minimum of 18 hours of additional training that NCDSS determines is necessary to adequately meet training needs.
- Foster care and adoption workers shall complete a minimum of 39 hours of additional training that NCDSS determines is necessary to adequately meet training needs.
- Child welfare services supervisors shall complete a minimum of 72 hours of pre-service training before assuming supervisory responsibilities and a minimum of 54 hours of additional training that NCDSS determines is necessary to adequately meet training needs.
- Child welfare services staff shall complete 24 hours of continuing education annually. In completing this requirement, NCDSS shall provide each child welfare services staff member with annual update information on family centered practices and State and federal law regarding the basic rights of individuals relevant to the provision of child welfare services, including the right to privacy, freedom from duress and coercion to induce cooperation, and the right to parent.”

In response to the statute, NCDSS developed a Pre-Service Curriculum for new workers and supervisors. Following is the course description.

<https://www.ncswlearn.org/help/pdf/childrenguidelines.pdf>

CHILD WELFARE TRAINING IN NORTH CAROLINA	
<b>Pre-Service Curriculum for New Workers and Supervisors Blended Learning (Classroom &amp; Online) Course (100 Series)</b>	Child Welfare in North Carolina is a four-week competency based pre-service curriculum that is designed to provide social workers and supervisors with an overview of the child welfare

system. Participants will attend 11 classroom days of training and the equivalent of one classroom day completed online. The training days are broken down as:

- Week 1 – four classroom training days
- Week 2 – self-paced online component (4-6-hours) plus three classroom training days
- Week 3 – Experiential Learning Week at their own agency, continue online self-paced and live online components and transfer of learning activities
- Week 4 – four classroom training days

### Online Components

One of the online components of this course is self-paced and should take no more than six hours to complete. Since Week Two involves only three classroom days, participants are encouraged to begin working on the self-paced online component during the other two days they are in the agency that week. While online participants will learn the history of child welfare, federal and state laws which guide our practice, the structure of the child welfare system, information about worker safety, the role of the community in CPS, and the purpose and importance of case documentation. Participants will be expected to complete workbook entries and respond to discussion forum questions during the self-paced online component of the course. The deadline for completion of self-paced online portion of the training will be the day before returning to the class for Week 4.

The second online component is a live online experience which will occur during Week 3: Experiential Learning Week. During the live online session participants will learn how to locate policy and practice information on NCDSSs website, and where to locate other pertinent child welfare practice resources.

### Week 1. Foundations of Child Welfare

Week 1 will provide participants with an overview of the mission, vision, and values of child welfare. Participants will be provided with an opportunity to evaluate their own value system and examine how one's own values impacts work with families. Topics discussed include: Family Centered

	<p>Practice, North Carolina General Statutes related to child welfare, Multiple Response System strategies, System of Care principles, and indicators and risk factors to assist with the identification of child abuse, neglect and dependency. The week will conclude with a discussion regarding cultural awareness and interviewing strategies that build rapport with families. Participants will also be introduced to the content and process of the online portion of the course.</p>
<p><b>Week 2. Family Assessment</b></p>	<p>Week 2 begins with the family assessment and change process that addresses the day to day casework provided from Intake through Adoptions. Strategies for conducting and documenting functional assessments, safety and risk assessments, and family strengths and needs assessments are addressed. During this week, participants are provided the opportunity, through case examples, to apply information learned in the assessment process to make structured CPS assessment case decisions, including an initial case plan. Participants begin the self-paced online component of this course while in their agency on Monday and Tuesday of this week.</p>
<p><b>Week 3. Experiential Learning</b></p>	<p>Social workers and supervisors will return to their agencies and participate in activities to assist in the transfer of learning. Participants will be required to shadow other staff, observe interviews in different program areas, review agency records and participate in other activities. Participants are required to complete six out of ten transfer of learning activities, while they are in their agency during this week. Also during this week, participants continue to work on the self-paced online portion of this course and participate in the live online session.</p>
<p><b>Week. 4 Family Change Process</b></p>	<p>Week 4 begins the change process for families. Participants will discover how the Structured Decision Making tools are connected with family case planning. The function of CPS In-Home Services is discussed as well as the philosophy and principles that underlie case planning with families. Participants will be provided with</p>

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information regarding concurrent planning, objective writing, and completion of Family Services Agreements. Case examples introduced in week two will be utilized to provide participants with the opportunity to apply knowledge. Other information addressed this week includes the placement process, the adoption process, and case closure.

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Open to: This course is open to child welfare social workers and supervisors employed in a NC County Department of Social Services, individuals or agencies contracting with a county DSS to provide child welfare services, and individuals completing a child welfare internship. Child welfare services are defined as CPS Intake, CPS Assessments, CPS Occasional On-Call, CPS In-Home Services, and Child Placement including Independent Living (LINKS), Foster Care Licensing, or Adoptions. (This does not include staff from private foster care/adoption agencies or private residential care agencies.)

The Child Welfare Education Collaborative Program noted above, funded by NCDSS through a contract with the UNC-CH School of Social Work, provides training for IV-E supported MSWs and BSWs that meets all the requirements of the General Statute enabling graduates to immediately enter the workforce without delay. Additional child welfare training is provided by NCDSS.

NCDSS in its commitment to infuse the REAP framework throughout our continuum has incorporated the 4 step CQI cycle into our training system. The NC Statewide Training Partnership evaluates the effectiveness of training provided on an ongoing basis through Participant Satisfaction Surveys given to participants at the end of each training event. Recently, these evaluations have become electronic and participants can access them immediately upon the completion of each training event. The training evaluation forms are housed on the [ncswLearn.org](http://ncswLearn.org) training registration website. Feedback for each course as well as each trainer is accessible to the staff development training administrator, the staff development training manager, and the trainers at the end of each course. A regular ongoing review of training participant satisfaction surveys is made by training management in order to identify early any issues that might need to be addressed in the curriculum, state policy confusion, or problems with the individual trainers. At the end of the calendar year, these electronic forms are compiled for an overall report of participant satisfaction with the training and trainers. The results are shared with the training team, the NCDSS management team, the counties through webinar or publication, and any contract training staff.

The annual training report for counties provides county DSS supervisors and training managers' easy access to detailed training information for each worker in their agency. This information can be used to create regular training reports so that you can ensure staff is accessing the required training for their job positions.

The main purpose of the e-PSF is to enable training system administrators and training providers to collect and analyze information from training participants to facilitate decisions to improve various aspects of the training program. These reports are part of a comprehensive plan for evaluating the North Carolina Child Welfare Training Program. The findings, along with those from past PSF reports, indicate that from the point of view of people who attend training, the Child Welfare Services Staff Development Team management and staff, training vendors, and contract trainers continue to deliver high quality training. The ultimate purpose of these evaluations and the training itself is to ensure that through the Child Welfare Services program's CQI process, courses are added, deleted or revised to best prepare child welfare staffs with the knowledge and skills necessary to help families and children achieve safety, permanence, and well-being.

The complete training plan is located in appendix 3.

#### **Staff Development Plan for next 5 years 2015-2019:**

- Workforce development related to supporting and enhancing supervisors' skills
- Improving service planning training with families to improve overall outcomes and help reduce the number of children entering foster care
- Implementing TIPS MAPP statewide allowing for better preparation of foster parents and addressing issues of fidelity to the training model which will improve the assessment and selection of foster parents and
- Developing a foster parent section on ncswelearn where foster parents can register for selected courses, attend online trainings, and enter annual required training hours. The goal in the next 5 years is to develop a robust area of ncswelearn for foster parent information, training, and development.
- Incorporating trauma knowledge and best practices into our current training courses where appropriate increasing worker understanding of the effects of trauma on children and families and how to refer for appropriate treatment services.
- Incorporating protective factors into our training courses as a way to strengthen families in prevention, protection, and intervention
- Increasing youth and family voice in training curricula through video and contracts with family training partners as possible
- Increasing the number of webinar training events and online training events to make training increasingly more accessible as appropriate for the topic
- Increasing training opportunities for TIPS-MAPP training for Spanish speaking foster parents applicants across the state
- Increasing the number of counties that send workers to required and ongoing training events to increase worker knowledge and skills to affect all child welfare outcomes.

## XI. Financial Information

The State meets the specific percentages for Title IVB subpart 1 & 2 funds on the actual delivery of family preservation, community-based family support, time-limited family reunification and adoption promotion and support services. *(Please see CFS-101 attached to this report for specific information on expenditures.)*

### A. Payment Limitation Title IV-B, Subpart 1

Non-Federal funds expended for child care, foster care maintenance payments and adoption assistance payments in FY 2005 was \$16,803,473

### B. Payment Limitation Title IV-B Subpart 1

The amount of non-Federal funds North Carolina expended for foster care maintenance payments and applied as match for the title IV-B, subpart 1 program in FY 2005 was \$530,218.

### C. Payment Limitation Title IV-B Subpart 2

States are required to spend a significant portion of their title IV-B, subpart 2 PSSF grant for each of the four service categories of PSSF: family preservation, community-based family support, time-limited reunification, and adoption promotion and support services. For each service category that does not approximate 20 percent of the grant total, the State must provide a rationale for the disproportion.

IV-B Subpart 2 (PSSF)	Estimated Expenditures
Family Preservation Services	28% (\$2,828,965)
Family Support Services	26% (\$2,624,353)
Adoption Promotion and Support Services	25.9% (\$2,605,742)

- Time-Limited Family Reunification Services ~

Time-Limited Family Reunification Services are estimated for FFY 2015 to be 12.03% (TLR estimated expenditure \$1,208,713 of the IV-B 2 total \$10,044,744) of the grant total. While this service category falls below the 20 percent target, it reflects the best estimate for future spending based on actual spending in prior years.

North Carolina proposes this allocation for Time-Limited Reunification Services as the 11 provider regions during SFY 2012-2013, did not meet their obligated capacity. From the county offices for child welfare, it was strongly reported that foster care workers often take the initiative up front to connect families with the needed resources to reunify and continue to support them after reunification and often times another Time Limited Family Reunification service provider is not necessary weeks or months after a foster care worker has been assisting the family. Therefore, in SFY 2013-2014, the Time-Limited Reunification funds were allocated directly to the 100 county departments of social services rather than to the 11 provider regions. North Carolina will submit a

request to amend the CFS-101 should expenditure data show a need for an adjustment to the allocation.

As with all four service categories, North Carolina will submit a request to amend the CFS-101 should a change in service needs warrant an adjustment to allocations.

**D. Payment Limitation Title IV-B Subpart 2**

States must provide the FY 2012 State and local share expenditure amounts for the purposes of title IV-B, subpart 2 for comparison with the State's 1992 base year amount, as required to meet the non-supplantation requirements in section 432(a)(7)(A) of the Act.

FY 2012 actual expenditure is \$10,289,018 as compared to North Carolina's 1992 base year amount is \$921,532.