



2015-2019 FINAL REPORT

CHILD AND FAMILY SERVICES PROGRAM



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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Approved report will be posted at

<http://www.healthandwelfare.idaho.gov/Children/AbuseNeglect/tabid/74/Default.aspx>

(1) GENERAL INFORMATION

The 2015-2019 Final Report includes planned activities required to receive federal allotments authorized under title IV-B, subparts 1 and 2, section 106 of the Child Abuse and Prevention Treatment Act (CAPTA), Chafee Foster Care Program, and the Educational Training Voucher (ETV) Program. It also provides an update on the progress made toward accomplishing the goals and objectives of the 2015-2019 Child and Family Services Plan (CFSP).

Responsible State Agency

The Idaho Department of Health and Welfare (IDHW) is the state agency responsible for over 30 health, welfare, and human services programs throughout Idaho. The Department's mission is to actively promote and protect the health and safety of Idahoans.

Publicly Funded Child and Family Services Continuum

The Division of Family and Community Services (FACS) is responsible for child protection, adoptions and foster care, interstate compact on the placement of children (ICPC), Indian child welfare, services for persons with developmental disabilities, resource development and eligibility, navigation services, and early intervention/screening for infants and toddlers. The Child and Family Services (CFS) program provides child protection, adoption, foster care, ICPC, and Indian child welfare services in close collaboration with other FACS Division programs. CFS services reflect the IDHW's family-centered philosophy which affirms the belief that families should be treated with respect, involved in decision making and, when safe, are the best place for children to grow and develop. The CFS program focuses on the entire family unit and builds on family strengths while supporting and empowering families to be self-reliant and self-determining.

The CFS program is responsible for administering state Title IV-E programs. As part of its Title IV-E responsibility, CFS administers the funds and services of the Independent Living (IL) Program under the Chafee Foster Care Independence Act of 1999 (P.L. 106-169) and the Educational Training Voucher program. CFS also administers the Social Services Block Grant (SSBG), Title IV-B parts 1 and 2 of the Social Security Act, and the CAPTA basic grant programs. The CFS program is responsible for annual reporting on the CFSP.

Collaboration

The Child and Family Services (CFS) program convened Annual Stakeholder Meetings including youth, parents, resource parents, Guardian Ad Litem (GAL), tribes, court representatives, child welfare staff including social workers, supervisors, chiefs, specialist, and managers, Casey Family Programs, university partners, and law enforcement in FFYs 2015 and 2016. Meeting participants reviewed and assessed progress made on the goals and opportunities to partner with CFS in achievement of 2015-2019 Child and Family Services Plan (CFSP) goals.

In FFY 2016, Idaho's CFS program was evaluated through the Child and Family Services Review (CFSR) Round 3. In collaboration with the Children's Bureau, CFS presented the results of the review to internal and external partners and stakeholders who attended the CFSR Program Improvement Plan (PIP) kickoff meeting in February 2017 including 75 internal and external partners and stakeholders including regional child welfare staff and leadership, youth representatives, parents, resource parents, tribal social services representatives, GAL, Court Improvement Project (CIP) coordinator, judges, Casey Family Program, and agency contractors. Attendees identified root causes for performance and identified strengths Idaho could leverage to address areas for improvement. After the meeting, partners and stakeholders were organized into local PIP teams and a statewide leadership PIP team. The statewide leadership PIP team gathered every two weeks to consider recommendations made by the regional teams and to analyze additional statewide data. Through this process, CFSR PIP goals, objectives, and key activities were developed.

CFS continued CFSR PIP planning efforts in FFYs 2017 and 2018. In collaboration with the Children's Bureau, CFS refined drafts of the CFSR PIP designed to address the major areas found in need of improvement. The Children's Bureau approved Idaho's CFSR PIP in March 2019 (Appendix F).

This 2015-2019 Final Report was informed by the results of CFSR Round 3, partner and stakeholder feedback received during multiple meetings during the PIP development process, and state conducted Case Record Reviews (CRRs). Additional efforts to engage partners and stakeholders in the CFSP and APSR included:

- Regular meetings with other Idaho Department of Health and Welfare (IDHW) programs such as Behavioral Health, Public Health, Medicaid, Navigation/Kincare, and the Infant Toddler Program
- Ongoing collaboration with Casey Family Programs, Citizen Review Panels, the Idaho Foster Youth Advisory Board (IFYAB), Court Improvement Project (CIP), the Governor's Task Force on Children at Risk (CARTF), and the Idaho Indian Child Welfare Advisory Council (ICWAC)
- Internal groups such as Child Welfare Program Operations and Child Welfare Subcommittee meetings
- Contacts with resource parents, birth parents, foster youth, and families
- IDHW partner and stakeholder meetings including the Child Welfare Executive Steering Committee, Families First Visioning Council, and the YES Project

Partner and stakeholder feedback was incorporated into the implementation of ongoing strategies as well as decisions related to continued use of specific strategies. The CFS program has experienced challenges in its reliance on informal processes related to partner and stakeholder engagement. The

agency's continued commitment to engaging partners and stakeholders has been incorporated into the 2020-2024 CFSP (Goal 3) to maximize the benefits of engagement processes through clarified and formalized feedback loops.

Idaho Updates

In evaluating the conclusions and recommendations of the Child and Family Services Review (CFSR) Program Improvement Plan (PIP) teams, two evaluations completed by the Idaho Legislature's Office of Performance Evaluation (OPE) in FFYs 2017 and 2018, and internal and external partner and stakeholder feedback, the Division of Family and Community Services (FACS) determined organizational infrastructure needed to be built to support the successful integration of goals and to into practice. In May 2018, the Idaho Department of Health and Welfare (IDHW) began the Child Welfare Transformation (CWT) Initiative (Appendix G) to shift the Child and Family Services (CFS) program to customer centric problem solving, workflow designed solutions, operations driven leadership, and data-driven accountability. The CWT is a three-year plan with action goals designed to support the implementation of goals found in the Child and Family Services Plan (CFSP) as well as the CFSR PIP. Organizational re-design, streamlined field-based processes, new automation, improved court and community engagement, and increased visibility of performance are being used to create sustainable change.

As part of the CWT, each child welfare process (i.e. safety assessment, concurrent planning, permanency planning, case management, and foster care recruitment, licensing, and support) is being re-designed. FACS developed the Bureau of Operational Design which includes a Business Process Design Team and a Training and Development Team. These teams work alongside contractors to support the development, implementation, and support of re-engineered child welfare processes and training.

Assessment of Performance

Please see the 2020-2024 Child and Family Services Plan (CFSP): Assessment of Current Performance in Improving Outcomes.

Data Dictionary

The 2015-2019 Final Report utilizes the following dates:

Calendar Year (CY) – the standard 12-month period beginning January 1 and ending December 31 of the specified year (i.e. CY 2018 = January 1, 2018 – December 31, 2018).

Federal Fiscal Year (FFY) – the 12-month period ending September 30 of the specified year and beginning October 1 of the previous year (i.e. FFY 2018 = October 1, 2017 – September 30, 2018).

State Fiscal Year (SFY) – the 12-month period ending June 30 of the specified year and beginning July 1 of the previous year (i.e. SFY 2018 = July 1, 2017 – June 30, 2018).

The following reviews and their findings are referenced within this report:

Case Record Review (CRR) – these state-conducted reviews occur on an ongoing basis and utilize the CFSR Onsite Review Instrument (OSRI). State performance for each OSRI item in FFY 2018 and FFY 2017 is based on CRR results from reviews conducted during the noted FFY. The CRR sample size for FFY 2018 was 79; the sample size for SFY 2017 was 68. Sample sizes include the total number of foster care and in-home cases reviewed.

Child and Family Services Review (CFSR) Round 3 Data Profile – A report of Idaho’s performance on each of the CFSR statewide data indicators, assessment against national performance, and the result of data quality checks completed by the Children’s Bureau including AFCARS and NCANDS data. State data profiles were previously compared to National Standards but were revised by the Children’s Bureau with updated calculations based on a new syntax.

Federal Child and Family Services Review (CFSR) Round 3 – The CFSR included a sample size of 68 cases. The case reviews were conducted between April 1, 2016 and September 30, 2016 and utilized the OSRI. State performance for each OSRI item in FFY 2016 is based on the results of the CFSR Round 3.

In addition to the Child and Family Services Plan (CFSP), Idaho’s Child and Family Services (CFS) program is actively involved in several other plans designed to improve child welfare outcomes. These plans are referenced within this report:

- Child and Family Services Review Program Improvement Plan (CFSR PIP)
- Child Welfare Transformation (CWT) Plan
- Idaho Court Improvement Plan, 2019 Update (2019 CIP)
- Comprehensive Addiction and Recovery Act Program Improvement Plan (CARA PIP)

(2) UPDATE ON ASSESSMENT OF PERFORMANCE, IMPROVEMENT PLAN, AND PROGRESS

The plan for improvement is based on the analysis of child welfare outcomes measured through federal conducted Child and Family Services Reviews (CFSR) and state conducted Case Record Reviews (CRRs), program performance on other federal requirements for the Child and Family Services Plan (CFSP), and findings in the Annual Progress and Services Report (APSR). The National and Idaho Performance data included in this section comes from the Idaho CFSR Round 3 Data Profile completed January 2019 by the Children's Bureau.

Goal 1 (1): Children will only be placed in foster care when they are unsafe, and a sufficient safety plan cannot be managed in the home

Through an examination of quantitative and qualitative data obtained from Case Record Reviews (CRRs), interviews with families, and feedback collected from partners and stakeholders, it was determined the most important factor in a case was the initial safety assessment and whether the assessment clearly identified the safety issues for the children. When safety issues were not clearly defined, it resulted in an increase in time to reunification, an increase in foster care re-entries, and a significant number of children being adopted within 24 months. The Child and Family Services (CFS) program found children were being placed in foster care for risk-related issues as opposed to safety threats. Often "impossible to complete case plans" were developed with parents focusing on risk or quality of life issues unrelated to the safety of the children. Parents, who were unable to change their life circumstances enough to have their children returned to them, ran up against Adoption and Safe Families Act (ASFA) and statutory timelines. As a result, termination of parental rights would occur due to parents' inability to comply with case plan tasks unrelated to establishing a safe home for their children.

This data supported the fact that in many areas of the state, social workers had not been consistently applying the safety model previously in place. This forced CFS to look critically at the safety model. In 2013, CFS worked with the National Resource Center on Child Protection to enhance safety practice in Idaho and ensure workers are conducting comprehensive safety assessments. The new safety model continues to be a significant undertaking in terms of critical thinking and training to staff, as well as CFS's partner agencies and the courts. Social workers are challenged to articulate the family conditions which are keeping the child safe or are contributing to the safety threats to the child. Case plans should be tied directly to the identified safety threats to focus families on precisely what needs to change to maintain the child's safety in the home without CFS intervention. Ultimately, children should only be placed in foster care when there are no other safe options, and children placed in

foster care should return to their homes as soon as a sufficient safety plan can be maintained in the home.

To ensure the enhanced safety practice model is fully implemented throughout the state, CFS will refine the comprehensive safety assessment (CSA) process. A business design contract was developed to support the re-engineering and re-implementation of the process statewide resulting in increased timely, accurate, and consistent safety decisions. Safety assessment re-processing will include a statewide consultation and staffing process which follows, and further reinforces, the enhanced comprehensive safety model. Accurate identification of safety concerns will enhance social workers' abilities to develop appropriate safety and services plans and identify related services thereby supporting a family's ability to maintain their children safety in the home or have their children in foster care return home sooner.

Data Outcome Goals

Increase percentage of Adoptions in less than 24 months beginning in 2018

National Performance: 42.7%

Idaho Performance: 16A-16B 40.7% (CFSR 3 Data Profile)

Increase Risk and Safety Management (Item 3) CRR performance to 92% Strengths by 2018

Baseline: CY 2013 85%

Idaho Performance: FFY 2018 73.4%

Decrease and maintain re-entries below the federal outcome standard by 2019

National Performance: 8.1%

Idaho Performance: 16A16B 7.3% (CFSR 3 Data Profile)

Objective 1 (1.1) –By 2019, CFS will consistently conduct comprehensive safety assessment with fidelity to the enhanced safety practice model.

Measures:

Not determined as part of the 2015-2019 CFSP.

Baselines:

Not determined as part of the 2015-2019 CFSP.

Strategy 1 (1.1.1): During 2015-2019, continue training workers on the enhanced safety practice model.

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Initial statewide training on the enhanced safety model was completed in FFY 2014 with follow-up consultation by a child welfare policy program specialist. The New Worker Child Welfare Academy safety assessment curriculum was revised and implemented to include information on the enhanced safety model of practice. Facilitation of the revised curriculum was done in tandem with embedded trainers and child welfare policy program specialists to ensure consistency in application of the practice concepts. In response to a CFS social worker feedback, a coaching model and case consultation process was created to further embed the enhanced safety model and New Worker Child Welfare Academy safety assessment curriculum was further revised to provide skills-based support using blended learning in FFY 2017.

Despite these efforts, the CFS program continued to struggle with the full statewide implementation of the enhanced safety model. Strategy 1 was revised in the 2019 APSR to target the refinement and re-implementation of the safety assessment process. A contract for professional business design services with Change in Innovation (C!A) was finalized in October 2018 to support this project. C!A convened a Safety Process Redesign Team whose recommendations were approved by FACS leadership in January of 2019. Implementation of the refined process began in April 2019 in Region 3 followed by Regions 4, 5, 6, and 7 in May 2019. Implementation in Regions 1 and 2 is scheduled to begin in June 2019. Implementation includes a period of post implementation support by the Bureau of Operational Design focused on problem resolution, remedial training, and training corrections and enhancements. The redesign included the identification of baselines and measures. Performance is monitored by field program managers, chiefs of social work, as well as supervisors and social workers through the review of daily reports including the number of structured consultations completed and the number of days to CSA completion. This data is/will be visible for all levels of staff to promote timely, accurate, and consistent safety decisions and assessment.

CFS has not been successful in meeting the Data Outcome Goal for this Strategy and full implementation of comprehensive safety assessment throughout the life of a case has continued to be a challenge. The 2020-2024 CFSP: Assessment of Current Performance in Improving Outcomes outlines the areas of concern related to comprehensive safety assessment practice. Due to the ongoing challenges, Strategy 1

is being revised and incorporated into Idaho's 2020-2024 CFSP (1.1). The implementation of the re-engineered safety assessment process is also included in the CFSR PIP (1.1 and 1.2) and CWT Plan (2).

Strategy 2 (1.1.2): By end of 2015, implement new safety assessment tool in the SACWIS system (iCARE).

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Strategy 1.1.2 was reported as completed in the 2016 APSR. Implementation of the iCARE Comprehensive Safety Assessment (CSA) and Re-assessment of Safety occurred in December 2015. Prior to implementation, extensive collaboration between the iCARE business team, system developers, child welfare policy program specialists, and numerous regional child welfare staff occurred to design and test the tool. In March 2015, additional enhancements to the tool were implemented as the result of user feedback and system monitoring.

Strategy 3 (1.1.3): By end of 2019, develop and implement a statewide consultation and staffing format to support supervisors on the new enhanced safety practice.

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As reflected in the 2020-2024 CFSP: Assessment of Current Performance in Improving Outcomes, safety-assessment practice goals have not yet been met. Accurate and comprehensive safety assessment is crucial to child welfare practice throughout the life of a case, not only during the initial safety assessment period. For this reason, implementation of a structured case consultation process (CFSR PIP 1.2) is being incorporated into Idaho's re-design of safety practices as well as the re-design of concurrent planning practices (CFSR PIP 1.1 and 1.2.; CWT Plan 2 and 3).

Implementation of the refined safety assessment process began in April 2019 in Region 3 followed by Regions 4, 5, 6, and 7 in May 2019. Implementation in Regions 1 and 2 is scheduled to begin in June 2019. The re-designed concurrent planning process will be implemented in FFY 2020. Implementation of both processes includes a period of post implementation support by the Bureau of Operational Design focused on problem resolution, remedial training, and training corrections and enhancements. Increased access to performance measurement data will provide additional support to supervisors. A competency-based training system to address the initial and ongoing learning and support needs of CFS supervisors will also be developed (CFSR PIP 3.2).

Implementation of case consultations within the re-designed safety assessment and concurrent planning processes in Regions 2, 3, and 5 are included in the CFSR PIP (1.1

and 1.2) as data indicated they were the lowest performing in areas of safety and concurrent planning. 2015-2019 CFSP 1.1.3 is being continued into the 2020-2024 CFSP (1.1) to ensure the statewide implementation of the case consultation process by capturing the roll out in the remaining Regions 1, 4, 6, and 7.

Objective 2 (1.2) – By 2019, there will be an increase in safety service resources to support in-home safety plans.

Measure: Safety service resources will increase in each hub over established baseline.

Baseline: To be determined.

Strategy 1 (1.2.1): Research and create contract-based resources for safety-related in-home services to support in-home safety plans to begin in 2017.

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A pilot program between the CFS program's Region 3 field office and Casey Family Programs was initiated in FFY 2017 for Casey Family Programs to provide in-home case management and targeted services to a limited number of Region 3 's in-home cases. Monitoring of the pilot has indicated Casey was able to manage only a small number of cases given current staff resources. Given the limited ability for in-home cases to be managed through this partnership, the pilot program was re-focused in FFY 2019 to reducing the number of children placed in residential care. The re-focusing was successful in reducing residential care placements. As reflected in the 2020-2024 CFSP: Assessment of Current Performance in Improving Outcomes, CFS continues to require improvement in the provision of in-home safety-related services which is being addressed in the 2020-2024 CFSP (1.1 and 2), CFSR PIP (1.1 and 1.2), and CWT Plan (2).

Objective 3 (1.3) – By 2019, case plans are directly related to safety issues and focused on enhancing parenting capacities.

Measure: During CRRs, the needs identified in the comprehensive safety assessment and the Child and Adolescent Needs and Strengths (CANS) Assessment are matched to the services identified in the case plan in 90% of cases.

Baseline: Not identified for the 2015-2019 CFSP.

Strategy 1 (1.3.1): By 2019, assure case planning training is modified per the safety practice model and the CANS.

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Strategy 1.3.1 was ended without completion as reflected in the 2019 APSR. The CFS program partnered with the Praed Foundation to provide CANS administration training to child welfare social workers. CFS determined the program will no longer be administering the CANS but will partner with community agencies to provide the assessment.

Feedback Loops - CFS recognizes the importance of internal and external partner and stakeholder feedback and ongoing collaboration to achieve CFSP Goal 1. It is paramount the program, other programs, and community partners such as tribes, courts, and law enforcement be included in the continued implementation and monitoring of progress. To this end, partner and stakeholder feedback loops are purposefully embedded within each intervention. This includes making available case-level qualitative data and reports for safety and permanency outcomes for all CFS staff and external partners (CFSR PIP 3.1.4; CWT Plan 6 and 7). A CFS-Court Data Team (CFSR PIP 3.1.7; CWT Plan 6) will meet quarterly to evaluate and analyze data and data trends to identify problems and good practices across the state and inform decisions and process design within CFS and as appropriate in the courts.

Regional chiefs of social work participate in local bi-monthly Multi-Disciplinary Team (MDT) meetings with a variety of partners and stakeholders including court partners, law enforcement, members of the Children's Advocacy Centers, prosecutors, victim witness coordinators, juvenile and adult probation representatives, and school district officials. Topics such as removal of children from their homes is discussed and information provided by CFS regarding child welfare practices based on the enhanced safety model.

Implementation Supports - Revisions to Goal 1 made during the 2015-2019 CFSP were related to adjustments necessary to achieve the successful re-implementation of a refined safety assessment process and address workload capacity issues. In FFY 2018, technology improvements, including individual laptops for CFS safety assessment social workers, allowed for increased mobility. To successfully develop case plans directly related to a family's safety issues, the safety issues must first be accurately identified. The accurate identification of safety issues and subsequent development of case plans directly related to safety issues is being addressed in FFY 2019 and FFY 2020 through the statewide implementation of a re-designed safety assessment (CFSR PIP 1.1; CWT Plan 2), concurrent planning (CFSR PIP 1.1; CWT 3), and case management processes (CWT Plan 9). Training and field support through the Bureau of Operational Design and CIA is being provided as part of implementation. To further support the implementation of revised safety assessment and concurrent planning processes including structured case consultation (2020-2024 CFSP 1.1; CFSR PIP 1.2), CFS is partnering with the Judicial Education Department to provide a shared learning experience including CFS staff, courts, and legal partners (CFSR PIP 1.3) in FFY 2020.

Goal 2 (2): The agency will have a functional, sustainable and inclusive feedback loop for a Continuous Quality Improvement (CQI) System which values stakeholder and family engagement

As part of the process for developing the 2015-2019 Child and Family Services Plan (CFSP) and subsequent Annual Progress and Services Reports (APSRs), the need to formalize the collaboration between Child and Family Services (CFS) and internal and external partners such as staff, tribes, policymakers, courts, law enforcement, children, youth, and families was identified.

The intent of these collaborations is to establish the shared responsibility for the safety, permanency, and well-being of children between CFS and other partners who can help achieve positive outcomes for families in Idaho. The collaborations also provide an opportunity to evaluate the child welfare system, identify areas needing improvement, and build on promising practices designed to address local and statewide needs.

Data Outcomes Goals:

Sustained improvement at or above 78.7% on the goal for Family Involvement in Case Planning (Item 13) from the results of CRRs

Baseline: CY 2013 91%

Update: FFY 2018 73.2%

Objective 1 (2.1): By the end of 2018, an assessment will be completed of all stakeholders and their relationships. Regular communication channels will be assessed. A structure for comprehensive communication will be proposed.

Measure: Stakeholder feedback component of the CQI program is established and meets the needs of the agency and stakeholders as assessed by feedback.

Baseline: Feedback received from stakeholders at the Annual Statewide Stakeholder meeting in 2015 highlighted the need for local stakeholder groups that meet regularly to inform the larger annual stakeholder meeting.

Strategy 1 (2.1.1): Develop standard procedures for collecting, summarizing, documenting and posting feedback. This needs to be done in a timely progression so ideas from any level in the system can make their way into forums where policy, practice, rule and operational changes are considered and formalized. Use of the internet to communicate information will be prioritized.

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During the Child and Family Services Review (CFSR) Round 3, it was determined CFS does not have a functioning CQI system in place. An assessment of Idaho's CQI system was completed with technical assistance from the Capacity Building Center for States (CBC) in FFY 2018. In FFY 2019, CFS began the evaluation, definition, streamlining, documentation, and re-implementation of child welfare processes beginning with safety (CFSR PIP 1.1; CWT Plan 2), concurrent planning (CFSR PIP 1.1; CWT Plan 3), case management (CWT Plan 7), and permanency (CWT Plan 4 and 14). The development of Idaho's Comprehensive Child Welfare Information System (CCWIS) has begun to further support the redesigned processes (CWT Plan 5, 12, and 16). As each process is re-implemented, CQI measures are being incorporated using corresponding data measures. Performance metrics will be defined and gathered through the CCWIS enabling timely visibility of data (CWT Plan 7, 15, and 18). Data and performance outcomes will be made available to CFS social workers, supervisors, leadership, and external partners and stakeholders (CFSR PIP 3.1.4). Corresponding internal and external feedback loops will be formalized. Received feedback will be incorporated into process, communication, and automation changes.

Strategy 2.1.1 of the 2015-2019 CFSP is being ended without completion as currently written. The 2020-2024 CFSP: Assessment of Current Performance in Improving Outcomes identifies CFS's need to improve the formalized engagement of partners and stakeholder. Improved engagement practices will lead to the receipt of additional feedback for the purpose of CFS program planning and development and is included in the 2020-2024 CFSP (3) and the 2019 CIP (Data-Project 1; CFSR PIP III and CFSP Project 4).

Strategy 2 (2.1.2): By the end of 2018, as outlined in the CBC work plan, a standard for stakeholder engagement and feedback will be formalized and implemented. Stakeholders will be periodically asked to provide self-report feedback on the amount and quality of engagement they experience.

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In FFY 2018, the CFS program partnered with the CBC for an assessment of the state's CQI system; however, this did not result in the development of a work plan. Strategy 2.1.2 was ended without completion in the 2019 APSR. CQI and stakeholder engagement continue to be a priority for CFS and plans for continued improvement are reflected in the 2020-2024 CFSP (3), CFSR PIP (1.1, 1.3, 3.1, and 3.2), and the CWT Plan (6, 7, 13, and 17).

Feedback Loops - It is important that community partners including the tribes, courts, law enforcement and others, be included in the continued implementation and monitoring of progress. Significant feedback from the leadership team was sought to brainstorm ideas to strengthen stakeholder involvement in the development of the 2015-2019 CFSP and subsequent APSRs. Their feedback is reflected in the interventions outlined in this plan.

Implementation Supports – An assessment of the implementation supports needed to operationalize the CQI measures for each re-designed CFS process will be conducted in advance of the implementation of each process (CFSR PIP 1.1). CCWIS development will support CQI measures including the gathering and reporting of data (CWT Plan 5, 7, 12, 15, 16, and 18). Further implementation support will be provided through the FACS Training and Development Team and business design contractor. No implementation support barriers have been identified at this time.

Goal 3 (3): Idaho will have a child welfare system that is trauma-informed

Work on Goal 3 began with activities funded through the Title IV-E waiver approved by the Children's Bureau in October 2013. Trauma-informed waiver services were targeted at children, youth, and their families and included Family Group Decision Making (FGDM) meetings, trauma assessment and treatment, and the evidence-based Nurturing Parenting Program. In April 2016, the Child and Family Services (CFS) program decided to terminate the IV-E waiver agreement. While under the waiver, CFS struggled to function within the limits imposed by the capped allocation of funds. The financial constraints resulted in the program not being able to take advantage of increased flexibility in using IV-E dollars for services that were previously not IV-E eligible. As reported in the 2019 Annual Progress and Services Report (APSR), CFS ended implementation of the Child and Adolescent Needs and Strengths (CANS) tool due to workforce capacity issues but continues to partner with public and private programs to ensure the children with whom CFS are working can receive CANS assessments. CFS continues to fund FGDM services across the state and support trauma-informed parenting services.

Generic counseling services are available for children in foster care, but not the types of trauma-informed assessment and services that are needed. Without access to these specialized services, many resource parents, workers, and birth parents have developed an over-reliance on psychotropic medications to reduce problem behaviors rather than less intrusive interpersonal management of symptoms.

In FFY 2018, the Child Welfare Trauma Informed Organizational Assessment was sent out to all child welfare social workers and supervisors. Survey responses indicated Idaho's child welfare workforce had needs related to secondary trauma in the workforce.

Data Outcomes Goals:

Idaho will continue to improve stability of placements for children in care by decreasing the number of moves per 1,000 days in care from 3.57 to 3.45 by 2019.

Baseline: National Performance - 4.44 moves
2014 Idaho Performance - 3.57 moves

Update: Idaho Performance – 5.02 moves (Idaho CFSR 3 Data Profile)

Using trauma-informed assessments and interventions, Idaho will decrease the number of children placed in residential care to 8% by 2019.

Baseline: 2014 8.3% of children were placed in residential care
2015 9.9% of children were placed in residential care

Update: 2018 6.9% of children were placed in residential care

As Idaho strives to have a child welfare system that is trauma-informed, the reoccurrence of maltreatment while in foster care will decrease from 3.58 victimizations per 100,000 days in care to 3.0 by 2019.

Baseline: National Performance - 9.67 victimizations
FFY 2014 Idaho Performance - 3.57 victimizations (Idaho CFSR 3 Data Profile)

Update: FFY 2016 Idaho Performance – 6.32 victimizations

Objective 1 (3.1) – By 2019, CFS will reduce negative symptoms of secondary trauma.

Measure: CFS staff self-report negative impacts of secondary trauma symptoms will be reduced.

Baseline: Survey data from October 2017 indicated 48% of workers experience Moderate to High Direct Secondary Traumatic Stress

Strategy 1 (3.1.1): By 2018, CFS will develop guidance for supporting staff through critical incidents.

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The Child Welfare Trauma Informed Organizational Assessment was sent out to all child welfare staff in October 2017. The 81% response rate demonstrated staff engagement and

proportional representation of staff by region. The survey found that about half of respondents agreed that the program has provided adequate support to minimize secondary traumatic stress. Staff said the program's strongest secondary traumatic stress (STS) responses were in resilience-building. Its weakest responses were in building STS-informed policies and in monitoring for STS impact. A discussion with a supervisor around STS was the intervention most strongly related to a positive STS rating.

The Idaho Department of Health and Welfare (IDHW) supports child welfare staff in addressing secondary traumatic stress through initial and on-going training. From July 2017 through April 2019, 90 child welfare staff completed the "Self-Care/Worker Safety Child Welfare Academy" course. In this course, participants develop further understanding of STS and the impacts, as well as how to manage symptoms of STS. Participants prepare a self-care plan to address their own health and safety in mitigating the impacts of STS. During this same period, 58 staff completed the "Ethics of Being A Stress Resistant Child Welfare Practitioner". This course is designed to help child welfare practitioners build understanding of the ethical requirements to become stress-resistant in order to mitigate the negative impact of STS. An additional 14 participants completed the in-service program "CFS Training-Keeping the Bounce-Resiliency in Child Welfare." This course is designed to enhance child welfare practice by promoting the use of self-care strategies and continued development of child welfare practice skills to become a more trauma-informed practitioner.

Strategy 2 (3.1.2): Beginning in 2016, reduce reliance on psychotropic medication to manage dysregulated behavior of children in foster care.

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Data on the use of psychotropic medication for Idaho's children in foster care is compiled by our partners in IDHW's Division of Medicaid and Magellan Health Services. CY 2015 data for all children in foster care indicated 19.3% received psychotropic medication. By CY 2018, use had dropped to 17.5%. For the general Medicaid child population in Idaho, approximately 9% receive psychotropic medications. Please see the update below (3.1.3) for ongoing efforts provided by CFS to help reduce the reliance on psychotropic medication to manage dysregulated behavior of children in foster care.

Strategy 3 (3.1.3): Continue plan for monitoring the use of psychotropic medications with youth in foster care.

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State statute requires CFS to include psychotropic medication information in court reports. This information includes whether a child has been prescribed psychotropic medications, and information on each medication including the dosage and prescriber. This provides additional

awareness and oversight of the use of psychotropic medication children and youth in foster care.

In FFY 2017, CFS developed a training curriculum designed to improve the understanding of resource parents and child welfare staff about the use of psychotropic medication with children in foster care. The training was completed statewide in FFY 2018 and included information about trauma-informed systems of care, how to actively engage and support youth in their treatment planning, being part of a child and family's treatment team, IDHW standard and guidance around the use of psychotropic medications, and how medications may be one part of a comprehensive treatment plan that first includes other therapies that address specific behavioral/emotional disorders. The training was co-facilitated with a child psychiatrist who spoke about the guiding principles and psychiatrist's perspective on the use of psychotropic medications in children and youth. Updates as to practice enhancements and identified next steps being taken to reduce the overuse of psychotropic medications with children and youth in foster care were provided to Idaho's Citizen Review Panel on two separate occasions.

CFS continues to work closely with our partners in the Idaho Department of Health and Welfare (IDHW) Division of Medicaid and Optum (Idaho's mental health managed care contractor) on the use of psychotropic medication with children in foster care. We continue to assess identified needs, as well as enhance resources and supports for our resource families, youth, birth parents, and staff. CFS is partnering with the Division of Medicaid to update Idaho's Psychotropic Medications for Behavioral & Emotional Disorders: A Guide for Parents and Family Members, Resource Families, Youth and Social Workers. The intent of the guide is to increase awareness and understanding of psychotropic or psychiatric medications that may be prescribed to help a child or youth with behavioral or emotional problems. The guide was specifically written for youth in foster care, their parents and family members, resource parents, and caseworkers.

When psychiatric consultations or second opinions are needed, CFS social workers utilize local psychiatrists as resources. In addition, CFS continues to explore additional resources.

Strategy 4 (3.1.4): By 2019, the state will have the internal and external capacity for trauma-informed assessment and case planning.

Measure: CFS social workers are able to complete the CANS tool, using it in conjunction with the safety assessment to inform case planning; increase the level/number of trauma-informed treatment services; increase placement stability; reduce re-entry; increase timely reunification; decrease utilization of congregate care; and increase the number of youth aging out of foster care with a permanent placement or plan.

Baseline: Not determined as part of the 2015-2019 CFSP.

Intervention 1: In 2015, continue training CFS staff, families and resource families about the impacts of trauma across the lifespan.

Intervention 2: By 2019, implement CANS assessment tool.

Intervention 3: By 2019, develop method to help assess physical and emotional safety and well-being of resource families to improve stability and inform placement moves.

Intervention 4: By 2019, develop community capacity of trauma-informed treatment services.

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Strategy 3.1.4 was completed and ended in the 2019 APSR.

Intervention 1 - Completed. CFS continues to provide child welfare social workers with in-service training regarding trauma-informed practice and interventions and research trauma-informed training. Trauma-based training was provided to resource parents at the annual resource parent conference in FFY 2017. Information about the impacts of trauma and trauma-informed practices were integrated into multiple sections of New Worker Child Welfare Academy as well as pre-services PRIDE training for resource families.

Intervention 2 - Ended. The initial statewide implementation of the CANS tool started in October 2015. Through the implementation process, CFS encountered significant challenges. These challenges include the disconnect between the CANS ratings and the day-to-day work of CFS staff, including utilizing the CANS ratings to inform service planning. Additionally, CFS encountered significant challenges with some of our CANS coaches and the recertification process. One of the primary roles of the champions is to provide ongoing support and to assist in overseeing the reliable use of the CANS tool. Prior to moving to the next phase of implementation, CFS worked to ensure supports were in place to address the identified barriers. CFS worked closely with the developer of the tool, as well as his leadership team for additional analysis and supports. A state lead implementation workgroup was developed comprised of staff at all levels of the CFS program representing all areas of the state. This workgroup started meeting in the fall of 2017. The primary roles of this workgroup were to make recommendations and make decisions informing the continued statewide implementation of the tool, to work with technical assistance supports to help link the use of the tool to service planning, and to assist with the evaluation of data to inform practice, planning, and next steps. CFS continued to receive stakeholder feedback that workload capacity was the most significant barrier to successful implementation of the CANS and a decision was made to no longer proceed with the plan for CFS staff to directly utilize the CANS tool.

Intervention 3 – Ended. The assessment of the physical and emotional safety and well-being of resource families is necessary to improve stability and to help inform placement moves. CFS holds ongoing stability staffings to identify and assess if any additional services may need to be put in to place to support enhancing placement stability. An assessment of placement stability, including the identification of resource parent needs and services to meet those needs, is being incorporated into case consultations through the life of a case. The implementation of case consultations is included in the 2020-2024 CFSP (1.1) and Child and Family Services Review (CFSR) Program Improvement Plan (PIP) (1.2).

To further support placement stability, CFS developed a feedback loop for Resource Peer Mentors (RPMs) to report any potential concerns that they may have including concerns that may impact placement stability. Any identified concerns go to CFS staff including licensing staff, the caseworker, as well as CFS leadership.

Professional Family Development Plans (PFDPs) identify strengths and challenges resources families experience, and training plans are developed to meet the individualized needs of each family. The intent of PFDPs is to enhance the skills and competencies of resource families; therefore, increasing placement stability for our foster children and youth. Some regions have implemented PFDPs and will continue to utilize them. Implementation of the plans is addressed in the 2020-2024 CFSP (1.2), CFSR PIP (2.2), and CWT Plan (11).

Intervention 4 - Ended. Although CFS staff will not be administering the CANS, the tool is being utilized across child-serving systems statewide. CFS will partner with these systems to develop a process to ensure children working with CFS receive a CANS assessment as needed. The State of Idaho is implementing a new children's mental health system of care called Youth Empowerment Services (YES). YES provides a new way for families to find the mental health support and resources they need for children and youth and offers a comprehensive array of services to address the needs of children and youth with serious emotional disturbance. Through a coordinated and collaborative effort, multiple child-serving agencies (family medical providers, schools, and other IDHW programs, and Juvenile Justice) will work with the family to create a treatment plan around the individualized needs and strengths of each child.

Access to YES services provides resources to help improve the level of functioning and overall well-being of children and youth who are challenged with complex mental health disorders. Idaho is creating multiple pathways for accessing a children's mental health assessment. The assessment process is enhanced by using the CANS tool. After the assessment process, the family has the opportunity to establish their child and family team with any of the people in their lives who support them and their child, as well as the professionals and clinical service providers who are working with the child. The child and family have the most critical voices in the treatment planning process. The treatment plan is built directly from the results of the CANS, and the family will be the primary driver of the treatment plan.

CFS is working closely with other IDHW programs and child-serving agencies to collaboratively design how this process will be implemented. YES services are being rolled out in phases between 2017 and 2020.

Feedback Loops – Intervention 1. To support staff in managing STS, child welfare social workers and leadership identified the need for guidance in dealing with traumatic experiences and are developing a guide for supervisors to support staff. CFS engaged tribal partners in the collective work of enhancing trauma-informed practices. Tribal partners are invited to attend trainings provided by CFS including New Worker Child Welfare Academy sessions and the Foster Parent Resource Training. Through regular collaboration, the tribes provide feedback as to the establishment of a trauma-informed child welfare system of care. The Nez Perce Tribe expressed interest in becoming trained in the use of the CANS tool.

Intervention 2. Ongoing partnerships including internal and external partner and stakeholder feedback are critical to the success of achieving CFSP Goal 2. CFS has partnered with stakeholders including the Division of Behavioral Health, Medicaid, Optum Idaho, and the Department of Juvenile Corrections. It is through this feedback process CFS recognized successful implementation of CFS staff administered CANS could not be achieved at this time.

Intervention 3. Resource parents are regularly engaged by CFS in the process of developing a trauma-informed system of care. RPMs provided input into the online PRIDE training model. Core training on trauma has been conducted for resource parents in various locations throughout the state. The One Church One Child program provided the trauma-based Empowered to Connect Conference to adoptive and foster parents, as well as professionals.

Intervention 4. Based on feedback and information provided by the Division of Medicaid on psychotropic medication use by children in foster care, a statewide overview of the 2015 and 2016 data and trends was provided to each regional staff in an effort to help them gain awareness on the apparent overutilization of psychotropic medications. CFS also met with the Governor's Task Force on Children at Risk in early 2017, to provide them with updated data, as well as an overview of steps CFS has taken regarding the use of psychotropic medications with youth in foster care. This task force is comprised of many stakeholders including law enforcement, court partners, the medical and mental health community, educators, a parent, and a former foster youth. CFS will continue to engage this group in discussing data, practice enhancements, and identified next steps.

Per the recommendations of a post-adoption workgroup which began in SFY 2016, a contract is being developed to provide trauma-informed continuity of care within permanency services. Members of the workgroup included community members, a private adoption agency, a community-based trauma-informed/certified therapist, and a citizen review panel member. State Hospital South and Children's Mental Health staff also participated. Several participants had dual roles within adoption,

both professionally and personally (as adoptive parents or adult adoptees). Older youth alumni were invited to participate in this process as well. Feedback was obtained from adoptive families receiving adoption assistance in Idaho using a survey in SFY 2017. The resulting information was used to target specific services prioritized by adoptive families. The contract will be developed upon creation of the FACS contract team.

CFS continues to collaborate with staff and the leadership team on how to partner with and educate stakeholders on the implementation of the trauma-informed interventions and services such as the CANS tool, parenting education, and FGDMs.

Implementation Supports - Strategy 4 was ended in the 2019 APSR; no intervention supports are needed.

Goal 4 (4): Older youth in foster care will have the independent living skills to successfully transition from adolescence to adulthood

Older youth must be provided with a seamless process of service planning and decision making that addresses both the youth's permanency needs and independent living skills development in preparation for their transition to adulthood.

Through relationships with family, friends, and community, staff must ensure that youth will have the resources necessary to succeed in all areas or "domains" of their lives. These domains include identity formation, community connections and supportive relationships, physical and mental health, life skills, education, employment, and housing.

The objectives below represent five key areas that encompass the domains listed above. These five areas serve as the focus for the improvement of service delivery to older youth. These five key areas were determined via a statewide review of all older youth cases and represent the areas that need improvement. In addition to the five key areas, an additional objective will be to increase efforts to engage and partner with tribal communities for a joint effort in delivering Independent Living services to eligible tribal youth. These areas will be reviewed on a biennial basis through case record reviews.

Data Outcome Goals:

Increase the number of Independent Living (IL) eligible youth receiving IL services from 55% to 75% by 2016.

SFY	% of IL eligible youth served
2014	73.2%
2015	82.1%
2016	85.5%
2017	87.7%

Objective 1 (4.1): By 2016, 65% of youth 15 years and older who are in state custody will have completed a Casey Life Skills Assessment (CLSA)/CANS and an Independent Living Plan within 90 days of IL eligibility. The assessment will be completed every year thereafter.

Measure: Biennial evaluation through the Independent Living case record review.

Review Year	% of youth w/CLSA within 90 days	% of youth w/IL Plan within 90 days
2013	58%	57%
2015	76%	64%
2017	88%	71%

Strategy 1 (4.1.1): In 2015, prepare "How-to Guides" and conduct annual training of agency staff and tribal social service staff.

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Intervention completed. Guides were created and sent to staff as well as posted on the internal SharePoint site as a resource for workers to access as needed. The Child and Family Services (CFS) program reviewed the outcomes of this intervention through the SFY 2018 IL Case Record Review(CRR) results as indicated above and through a Chafee workgroup in SFY 2017. Training with agency staff and tribal social service staff is an ongoing effort.

Strategy 2 (4.1.2): By 2017, 100% compliance with the National Youth in Transition Database (NYTD) requirements

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Intervention completed. Training regarding NYTD with agency staff and tribal social service staff is an ongoing effort. "How to Guides" were created and are used during New Worker Child Welfare Academy and local in-service trainings, these interventions have resulted in 100% compliance with the NYTD requirements.

Objective 2 (4.2): By 2016, 43% of youth who emancipate from foster care will have access to important information and records that will be necessary for living independently.

Measure: Biennial evaluation through IL case record review.

Review Year	% of youth who received their H&E Passport
2013	36%
2015	38%
2017	71%

Strategy 1 (4.2.1): In 2015, develop a strategy for ensuring Health and Education Passports are prepared and disseminated.

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Intervention completed. A template for needed documents was provided through the internal SharePoint site. Regional coordinators assist social workers with identifying needed documents and ensuring staff understand the purpose and importance of the health and education passports as part of the transition plan for older youth. Additionally, new CFS social workers have the opportunity to hear why these passports are important during Working with Older Youth academy. Training with agency staff and tribal social service staff is an ongoing effort.

Objective 3 (4.3): By 2016, 52% of foster youth over 17 years of age will have an individualized IL Transition Plan.

Measure: Biennial evaluation through the IL case record review.

Review Year	% of youth who received transition planning services
2013	43%
2015	52%
2017	90%

Strategy 1 (4.3.1): In 2015, prepare “How to Guides” and conduct annual training with agency staff and tribal social services on Engaging Youth in Transition Planning.

2015-2019 Final Report Update

Intervention completed. In November 2014, a formal transition planning training to implement the use of the newly developed guide on Engaging Youth in Transition Planning, was delivered to agency staff, tribal staff, and community partners. This training came as a direct result of the first IL CRR which indicated a need for improvement in providing support to youth transitioning to adulthood. The National Resource Center for Youth Development (NRCYD) trained attendees as trainers to move this work forward in Idaho. In addition to training, a resource binder was created by the NRCYD for newly trained trainers to use with

youth and in teaching other staff the process of transition planning. The IL CRR conducted during SFY 2018 indicated that 63.4 % of youth who exited care received these important documents. This is a significant increase over figures for 2015 of 52%. Training with agency staff and tribal social service staff regarding the need for these documents will be an ongoing effort.

Strategy 2 (4.3.2): In 2015, provide each tribe information on the process for tribal youth to apply for IL services.

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Intervention completed. During SFY 2014, a form was created to capture information needed from tribes to enroll tribal youth in the Idaho Independent Living Program (ILP). This form was sent to all of Idaho's tribal contacts for feedback about the practicality and usefulness. The form was finalized and added to the CFS external website. During SFY 2017, CFS reviewed concerns shared by tribal partners around accessibility and communication. After receiving feedback from regional coordinators and tribal partners, a new process for tracking tribal referrals was established and the form was updated to reflect legislative changes to the age of eligibility. The new process was shared during a SFY 2017 Indian Child Welfare Advisory Council (ICWAC) meeting.

Strategy 3 (4.3.3): In 2015, meet with tribal staff and youth to determine how to serve tribal youth through the ILP.

2015-2019 Final Report Update

Intervention completed. During SFY 2015, the child welfare ICWA and IL policy program specialists met with three of Idaho's tribes to provide information regarding Idaho's IL program and gather feedback regarding collaboration and access to services experienced by tribal partners. CFS shared changes to federal legislation impacting state services and elicited feedback. Information sharing and collaboration has continued with individual tribes and collectively through quarterly ICWAC meetings.

Feedback Loops - Feedback from youth, resource parents, birth parents, caseworkers, and other stakeholders is highly valued in the progress and overall achievement of this goal. Feedback from and engagement with community partners is sought out via NYTD and internal IL CRRs. Results from these evaluative tools are shared with courts, resource parents, youth in care and those who have aged out, federal partners, tribal partners, and youth advocacy organizations. Communication occurs through the Youth Advisory Board presentations in the community, resource parent blog sites, youth advisory board meetings, court presentations, tribal visits/meetings, and regular email blasts to partners working with older at-risk youth populations. Combining both the evaluative components

and data to communication with partners and stakeholders is very important. Partners and stakeholders are welcomed to participate in the internal IL CRR as well as participate in planning once data is collected.

Implementation Supports - Supports needed to implement each intervention are currently available through embedded trainers, regional IL coordinators, Idaho Foster Youth Advisory Board (IFYAB) members, and a CFS policy program Specialist. No implementation support barriers have been identified at this time.

(3) SERVICE DESCRIPTION

Stephanie Tubbs Jones Child Welfare Services: Title IV-B, Subpart 1

The Child and Family Services (CFS) program continues to utilize Title IV-B, Subpart 1 to protect and promote the welfare of all children in Idaho; prevent the abuse, neglect, or exploration of children; support at-risk families through services which allow children to remain safely with their families or return to their families in a timely manner; promote the safety, permanence and well-being of children in foster care and adoptive families; and provide training, professional development and support to ensure a well-qualified workforce.

To assist in meeting the goals of Title IV-B, Subpart 1 and Idaho's 2015-2019 Child and Family Services Plan (CFSP), CFS supported the following services through use of Title IV-B Subpart 1 funds:

Protective Services

- Intensive family-based services, including family preservation services (CFSP Goals 1 and 3)
- Parenting classes (CFSP Goals 1 and 3)
- Concrete family supports such as gas vouchers, assistance with utility bills, clothing, and food vouchers (CFSP Goal 1)
- Family Group Decision Meetings (CFSP Goals 1 and 3)
- Legal fees to support permanency such as guardianship fees, paternity establishment, and legal notices (CFSP Goals 1 and 3)
- Substance abuse treatment services (CFSP Goal 1)
- Mental health services such as psychological evaluations and counseling (CFSP Goals 1, 3 and 4)
- Transportation costs to support parent, relative, sibling, and kin visitation (CFSP Goal 3 and 1)

Foster Care Maintenance

- Foster Family and Relative Foster Care Maintenance Services (CFSP Goals 1 and 3)

Administrative Costs

- Facility and technology services for operation of space and property to support social worker activities (CFSP Goals 1, 2, 3, and 4)

Staff Training

- Staff attendance at child welfare related conferences (CFSP Goals 1, 2, 3, and 4)
- Staff participation in child welfare related training (CFSP Goals 1, 2, 3, and 4)

Promoting Safe and Stable Families Program (PSSF) Services: Title IV-B, Subpart 2

To assist in meeting the goals of Idaho's 2015-2019 Child and Family Services Plan (CFSP), the Child and Family Services (CFS) program supported the following services through use of PSSF funds:

Family Preservation

- Intensive family-based services, including family preservation services (CFSP Goals 1 and 3)
- Parenting classes (CFSP Goals 1 and 3)
- Respite (CFSP Goals 1 and 3)
- Family Group Decision Making (FGDM) meetings (CFSP Goals 1 and 3)
- In-home services to facilitate reunification or preserve placement: gas, emergency assistance, case management (CFSP Goal 1)
- Counseling (CFSP Goals 1 and 3)
- Transportation (CFSP Goals 1 and 3)
- Mental health evaluations and treatment services (CFSP Goals 1 and 3)
- Concrete supports such as cribs, door alarms, or clothing for a non-foster child to avoid bringing a child into foster care (CFSP Goal 1)
- Crisis child care (CFSP Goal 1)
- Domestic violence and anger management evaluation and treatment services (CFSP Goals 1 and 3)
- Supervised visits (CFSP Goals 1 and 3)

Family Support

- Counseling services, including intensive family-based counseling (CFSP Goals 1 and 3)
- Parenting classes (CFSP Goals 1 and 3)
- Daycare expenses for foster families (CFSP Goals 1 and 3)
- Foster parent support/relative caregiver support (CFSP Goals 1 and 3)
- Respite care (CFSP Goals 1 and 3)
- Visitation/parent coaching (CFSP Goals 1 and 3)
- Transportation (CFSP Goals 1 and 3)
- Concrete supports such as clothing, personal care, food, rent and utilities (CFSP Goal 1)
- Domestic violence and anger management evaluation and treatment services (CFSP Goals 1 and 3)

Reunification

- Intensive family-based services (CFSP Goals 1 and 3)
- Parenting classes (CFSP Goals 1 and 3)
- Transportation (CFSP Goals 1 and 3)
- Mental health services including counseling, psychological testing, and case management (CFSP Goals 1 and 3)
- Anger management evaluations and services (CFSP Goal 1 and 3)
- Substance abuse support and coordination (CFSP Goal 1)
- Drug testing (CFSP Goal 1)
- In-home services to facilitate reunification or preserve placement (CFSP Goals 1 and 3)
- Family Group Decision Making Meetings (FGDM) (CFSP Goals 1 and 3)
- Paternity establishment (CFSP Goal 1)
- Sexual abuse counseling (CFSP Goal 3)
- Concrete supports such as clothing, personal care, food, rent and utilities (CFSP Goal 1)
- Visitation/parent coaching (CFSP Goals 1 and 3)
- ICPC home study and/or supervision fees for parent/caregiver reunification if not provided by the receiving state (Goals 1 and 3)

Adoption

- Intensive family-based services (CFSP Goals 1 and 3)
- Child-specific recruitment services (CFSP Goal 3)
- Home studies (CFSP Goal 3)
- Adoption preparation, pre-placement services, and visits (CFSP Goals 1 and 3)
- Adoption placement follow-up (CFSP Goals 1 and 3)
- Counseling, including trauma-informed mental health services (CFSP Goal 3)
- Life books (CFSP Goal 3)
- Post-adoption services such as child care and counseling (CFSP Goals 1 and 3)
- Activities to support bonding and attachment (CFSP Goal 3)
- Post-Permanency Grants (CFSP Goals 1 and 3)
- Concrete supports for pre-adoptive and adoptive families to assist them with being able to care for the child such as door alarms and fencing (CFSP Goals 1 and 3)

Monthly Caseworker Visit Formula Grant

Monthly Caseworker Visit grants are provided to states to improve the quality of caseworker visits with an emphasis on improving caseworker decision-making on the safety, permanency, and well-being of foster children and caseworker recruitment, retention, and training.

Idaho has used caseworker visit grant funds as follows:

- To research and implement technology for caseworkers in the field to increase the timeliness and accuracy of the documentation of completed caseworker visits with children
- To train and implement a statewide standardized format for documentation of caseworker visits with children
- To implement a statewide standardized quality assurance process for administrative and supervisory review of both the frequency and the quality of caseworker visits with children. This will be achieved using standard data reports and a system of accountability for monitoring contacts to ensure workers consistently achieve at least 95 percent of the required visits

Wireless technology in a remote field office was installed to increase direct access to the child welfare information system (iCARE) for workers in the field. The Child and Family Services (CFS) program has provided documentation training to all regions of the state to promote a structured documentation format for monthly contacts. CFS conducts statewide quarterly audits of worker contacts with children in foster care, and requests supervisors implement corrective action plans for any worker who does not meet the requirements for monthly face-to-face contact. Supervisors are able to access worker contact reports in iCARE at any time to monitor their worker's contacts.

Chafee Foster Care Program for Successful Transition to Adulthood

Agency Administering Chafee

The Idaho Department of Health and Welfare (IDHW), Division of Family and Community Services (FACS), Child and Family Services (CFS) program is responsible for the administration and oversight of the programs carried out under the Chafee Foster Care Program (CFCP) State Plan. The reports on progress contained in this report are based on independent living goals, objectives, interventions, and planned activities outlined in the 2015-2019 Children and Family Services Plan (CFSP) for the State of Idaho.

Program Description

Eligibility

The eligibility criteria for a youth's participation in the Independent Living Program (ILP) was developed through a process of consultation and public input. Emphasis was placed on services to those youths most likely to remain in foster care until their 18th birthday. The Child and Family Services (CFS) program requires that a youth be in a foster care placement for ninety cumulative days, an indicator they will more likely be in care long term and need additional assistance in attaining self-sufficiency. Eligibility requirements for independent living services are as follows:

1. A youth must be, or have been, the responsibility of the State or Indian tribe either through a court order or voluntary placement agreement with the child's family;
2. Only youth between the ages of 14-21 years of age are eligible for services and use of funds through the independent living program;
3. Youth must have resided in an eligible placement setting which includes foster care, group care, Indian boarding schools, or similar foster care placement, and excludes detention facilities, forestry camps, or other settings primarily designed for services to delinquent youth; and
4. A youth must have resided in an eligible foster care setting for 90 cumulative days after attaining the age of 14.

Service Provision

Serving Youth Across the State

The Independent Living Program (ILP) in Idaho has been a state-administered and state-delivered program since its inception in 1987. The program has served, and will continue to serve, eligible youth in all geographic areas of the state. Youth who move from one region to another will be served by the region in which the youth currently resides. Any youth for whom the state is legally responsible regarding placement and care, and who satisfies the State of Idaho's criteria for independent living (IL) eligibility, may be served through the program. In keeping with the Chafee Foster Care Program (CFCP), Indian youth for whom a tribe is responsible for placement and care, and who satisfy the eligibility criteria may be served. Youth who are dually committed through an expansion of the Juvenile Justice Act and are not in a detention facility or hospital setting, may be served if they meet the eligibility criteria.

Idaho divides the state into three hubs (North, East, and West) containing seven regional areas. The North Hub consists of Regions 1 and 2, the West Hub consists of Regions 3 and 4, and the East Hub consists of Regions 5, 6, and 7. Each region is allocated a budget to address IL needs based on the population of IL eligible youth the region serves. During FFY 2018, there were 121 youth eligible for services in the North Hub. Of those, 112 received assessment, IL planning and/or services paid through CFCP. There were 260 youth eligible for IL services in the West Hub. Of those, 225 received assessment, IL planning and/or services paid through CFCP. The East Hub had 151 youth eligible for IL services. Of those, 140 received assessment, IL planning and/or services paid through CFCP.

Serving Youth of Various Ages and States of Transition to Adulthood

Youth 14-18 years of age in foster care - CFS provides IL services to eligible youth beginning at 14 years of age. To meet this criterion, CFS has established a standard of 90 cumulative days of foster care placement after the youth's 14th birthday. Engaging youth earlier recognizes the inherent risk factors of developmental and ongoing trauma experienced by children and youth who enter the foster care system. By initiating IL services for youth younger than age 16, more time is available to provide services and prepare youth for successful transition to adulthood. Services to youth in the 14 to 18 age range include all the services noted in the IL plan, except for room and board. Services are initiated with a formal assessment of the youth's readiness for self-sufficiency. Following the assessment, an IL plan is developed to support the eligible youth in acquiring the knowledge, skills, and resources necessary to make a successful transition to adulthood. These services are provided by resource parents, parents, child welfare professionals, tribal social service programs, or private and public partners. Planning and implementation of the IL service plans are youth-driven to assure that they are invested in and take ownership over their own goals and successes. This age group has the entire range of services noted earlier in the plan.

Youth 18-21 years of age - For youth ages 18 through 21, CFS provides IL services to eligible youth, including Indian youth, who have experienced a foster care episode between the ages of 14-18. Youth in this age range may receive the full array of IL services described below, including room and board payments to resource parents for youth between ages 18 and 19, if they are completing secondary education, and room and board funds if they exited foster care at age 18. Services to older youth may be delivered by a wide range of service providers such as state agency staff, tribal social service programs, and community partners or youth service contractors. Youth in this age group will receive voluntary services beginning with assessment and planning for their needs.

Youth 18-21 years of age with legal permanency - If a youth is found eligible for IL services during a foster care episode and subsequently reaches legal permanency status of reunification, adoption or guardianship, the youth remains eligible for IL services until age 21. Room and board services are available only to those eligible youth, including Indian youth, who have aged out of foster care upon reaching the age of 18 years but have not yet reached the age of 21.

Youth 18-26 years of age with legal status of adoption or guardianship prior to age 16 - Education and Training Vouchers (ETV) are available to youth who meet the eligibility requirements, and who have completed secondary education. IL eligible youth with a legal permanency status of adoption or guardianship prior to their 16th birthday are not eligible for ETV per section 477(i)(2) of the Social Security Act.

Scope of Services

Assessment - Paramount in this process of assisting youth to achieve self-sufficiency and the overall goals of the state program, is an assessment of each eligible youth's needs relative to their readiness to live independently. CFS uses the Casey Life Skills Assessment (CLSA) as the mandatory instrument for this purpose. Each youth who is eligible for IL services, including tribal youth, participate in a CLSA

of their needs prior to the provision of services or use of any funds awarded to the state by the CFCP. The youth, as well as their family, resource parents, child welfare professionals, and others having knowledge of a youth's preparedness for living independently, including tribes, are encouraged to participate in the assessment process. It is anticipated that by conducting a consistent, comprehensive assessment of a youth's independent living needs, the state and tribal programs will be more likely to target services that have a meaningful impact on the success of these youth as they prepare for living independently.

Independent Living Plan - Upon completion of this assessment, a youth-driven IL plan is developed for all eligible youth, including tribal youth, placed in out-of-home care who are at least 14 years of age or older. This plan created in collaboration with the youth and other individuals familiar with the youth will include specific goals and objectives to be achieved. The result is that all eligible youth in out-of-home placement have a distinct, individualized IL plan that is designed to help prepare them to make the successful transition from foster care to a self-sufficient adulthood. This will also help to assure youth participating in the state program have a comprehensive plan that encourages the inclusion of those individuals likely to be a long-term natural support system and facilitate the likelihood of successfully completing their plan. The youth's assessment and plan will be updated on an annual basis or more frequently if the youth's circumstances change.

Service Array

The services described below are designed to assist youth in transitioning to self-sufficiency:

Family and Support Persons Involvement - Services to involve the biological parents and, if appropriate, extended family members, resource parents, and other relevant parties, including Indian tribes, in the development of the youth's IL plan and services.

Life Skills - Counseling and instruction in basic living skills such as money management, home management, consumer skills, decision-making, time management, parenting, health care, access to community resources, transportation, leisure activities, and housing options, including coordination of resources and development of contracts with appropriate service providers.

Educational and Vocational - Educational and training funds as needed to ensure completion of educational programs that would result in obtaining employment. Counseling and other assistance related to educational and vocational training (including preparation for a General Equivalency Diploma (GED), high school graduation, vocational education, and higher education) and the coordination of resources and development of contracts with appropriate service providers.

Education and Training Vouchers (ETV) - The ETV program is administered through collaboration between a child welfare policy program specialist and regional IL coordinators. The ETV is utilized to meet the post-secondary educational and vocational training needs of youth served through the

CFCP. A maximum of \$5,000 per youth per year may be utilized in assisting a youth attend a post-secondary educational or vocational training program as defined in the Higher Education Act.

Employment - Counseling and other assistance related to employment, such as job readiness training, job search assistance, and employment placement programs, and the coordination of resources or development of contracts with the Idaho Department of Employment, the Private Industry Councils, Vocational Rehabilitation, and other employment service providers, including tribal employment and training programs.

Human Sexuality Issues - Counseling, education, and other assistance related to human sexuality issues, such as reproductive health, abstinence programs, family planning and pregnancy prevention, sexually transmitted diseases, and avoidance of high-risk sexual behaviors. In October 2015, the Idaho Foster Youth Advisory Board (IFYAB) collaborated in finalizing the Idaho Youth Bill of Rights, which is a document utilized to review youth rights with resource parents upon entering a foster care placement, or when conflict arises within the placement. Affirmations within the bill of rights include a youth's right to be who they are through learning about their sexuality in a safe and supportive environment, as well as a right to receive care and services that are free from discrimination based on gender, identity, and gender expression or sexual orientation.

Counseling - Counseling and other assistance related to self-esteem, interpersonal relationships, permanency planning, and social skills development, such as individual, family counseling, group counseling, and issues that are of cultural relevance.

Age or Developmentally-Appropriate Activities - CFS has continued to collaborate with state, public, and private entities and stakeholders in ensuring opportunities for youth to engage in age or developmentally-appropriate activities.

Driving Privileges - In 2015, the Idaho Legislature approved Administrative Rule 16-0601-1401 modifying IDAPA 16.0.01.451. This rule change allows CFS to reimburse a licensed resource parent for the cost of vehicle insurance for a foster child to create an avenue for youth to drive while in foster care. This rule change will encourage life skills and normalization of eligible children in foster care by allowing them to become drivers while in foster care where they have family support and direction as young drivers. Youth in foster care often miss out on opportunities to be employed or participate in school activities because resource parents do not have the means to get them to and from these activities. Allowing youth to drive will allow them more access to these normalizing activities. Additionally, youth in foster care list driving as one of the top three factors of a successful transition to adulthood.

Self-Sufficiency - Provision of other necessary services and assistance designed to improve a participant's opportunities to transition to self-sufficiency successfully

Outreach - Establishment of a system of outreach which would encourage youth currently in foster care to participate in the independent living program.

Increasing Services - Ongoing development of community organizational efforts aimed at increasing available services to youth.

Support Networks - Development of ongoing support networks for youth leaving foster care including contracted services and involvement of the youth's natural support system.

Medicaid Coverage - Beginning January 1, 2014, Idaho extended Medicaid coverage to youth who aged out of foster care until their 26th birthday using the state's Children's Health Insurance Program (CHIP). At this time, Idaho has chosen to only extend coverage to youth who have aged out of Idaho's foster care system. Staff, former foster youth, current foster youth, community agencies, and local benefits offices across the state were provided information via email and social media regarding how the federal Affordable Care Act helps former foster youth, how to qualify and apply, what information is needed, and provided several resources for additional information.

Trust Accounts - The Child Welfare Funding Team (CWFT) monitors/manages funds for children in foster care who receive either Social Security benefits (SSI/SSA/SSDI), child support dollars from obligated parents, or insurance or court settlements. These funds are used to offset the child's cost of foster care. Any monies left over after the child leaves care and after all outstanding expenses are paid are returned to the youth. No other trust accounts are used for independent living.

Room and Board - Room and Board funds are provided for room and board for youth who left foster care because they attained 18 years of age but have not yet attained 21 years of age. No more than 30% of the state allotment of CFCP funds will be used for room and board. Room and board is defined as those expenses which assist eligible youth, including Indian youth, to secure adequate housing and other necessary household items which promote the goal of self-sufficiency. IL room and board funds may be used for, but are not limited to, the following:

- Rent payments
- Security, cleaning, and similar deposits
- Costs related to household utilities
- Food and Nutrition
- Other household goods and supplies which are essential for a youth's health, safety, or well-being

- Housing-related expenses essential to attend an institution of higher learning, vocational programs, or comparable educational setting

Transition Planning - Idaho foster youth are provided with an initial transition planning meeting within 60 days before or after their 17th birthday, and a final transition planning meeting within 90 days of their 18th birthday. This meeting is utilized to assess the youth's readiness, resources and skills and to connect the youth with the services they need to make a successful transition to adulthood.

Training

Child and Family Services (CFS) social workers receive initial and ongoing support in developing an understanding of and the skills necessary to address the goals and objectives of Idaho's Chafee Foster Care Program (CFCP). New CFS staff are familiarized with the history and details of the CFCP plan. They are also provided with an opportunity to interact with and learn from current and former foster youth through a youth panel incorporated as part of the training. The Working with Older Youth session of Child Welfare New Worker Child Welfare Academy is taught in collaboration with embedded trainers, regional independent living (IL) coordinators, and Idaho Foster Youth Advisory Board (IFYAB) members. Ongoing training and supports are provided through regional IL coordinators and in-service training courses by a child welfare policy program specialist, regional IL coordinators, and embedded trainers as requested.

Resource parents receive PRIDE pre-service training prior to becoming licensed to provide care for children and youth in foster care. Prospective foster parents receive training which aligns with the goals and objectives of the CFCP, such as developmental needs and continuing family relationships. During the final PRIDE session, prospective resource parents are provided with an opportunity to ask questions of youth on a panel which includes one or two members of the IFYAB. The panel shares their foster care experiences from the youth's perspective. Licensed resource parents receive additional training on CFCP goals through other training opportunities on how to ensure normalcy for children and youth in foster care.

Training will continue to include information on the purposes and philosophy of the IL program (ILP), participation requirements, implementation, measurements of success, outcomes, and all other aspects of the program that allow youth to make a smooth transition from foster care to self-sufficiency.

Summary of Accomplishments 2015-2019

As part of the 2015-2019 Child and Family Services Plan (CFSP), the Child and Family Services (CFS) program had goals of increasing the number of youth in foster care with an independent living (IL) plan and transitions plan for those youth within 90 days of their 18th birthday, increase number of youth utilizing Educational and Training Vouchers (ETVs), increased compliance with National Youth in Transition Database (NYTD) requirements and reporting, and development of a Foster Youth

Advisory Board to provide feedback to state policy and procedures as it related to youth in foster care, educating the community and other foster youth about the independent living program and will complete presentations on issues facing youth in foster care.

In the 2016 Annual Progress and Services Report (APSR), the CFS program had 481 youth eligible for IL services. Of those, 268 youth, about 56%, received assessment, IL planning, and/or services paid through CFCP. In this final report, CFS has 532 youth eligible for IL services. Of those, 477, about 90%, received assessment, IL planning and/or services paid through CFCP. The CFS program improved assessment, IL planning and/or services provided through CFCP by 34% over the 2015-2019 reporting period.

During FFY 2018, CFS continued to provide support, leadership and professional development opportunities to Idaho Foster Youth Advisory Board (IFYAB) members through both local and national conferences. Statewide, youth were provided with training on the topics of youth organizing, branding and somatic experience. Board members also received support from internal staff and national partners in continuing to develop their vision for the board. Youth attended the national Daniel Memorial Growing Pains Independent Living Conference and the Foster Youth in Action Leaders for Change Conference.

During FFY 2018, CFS partnered with the IFYAB in educational and outreach initiatives by providing opportunities for IFYAB members to be presentation experts. IFYAB members presented to local community agencies, partners and stakeholders including: the Child Protection Legislative Oversight Committee, Foster Care Awareness Day at the Capitol, Foster Youth in Action Leaders for Change, and the Family First Visioning Council. Youth also presented on panels and in trainings including: information meetings for the recruitment of foster parents, the Foster Parent Pre-Service training, PRIDE training, the annual Resource Parent and Social Worker conference in all three hubs and through the Working with Older Youth Academy in each of the hubs.

Collaboration with Other Private and Public Agencies

To help youth achieve self-sufficiency and independence, the Child and Family Services (CFS) program will continue to consult and collaborate with public and private entities including university partners, the Idaho State Board of Education, the Department of Education, Casey Family Programs, the Idaho Court Improvement Project, law enforcement, all federally recognized tribes in Idaho, legislators, professional child welfare workers, regional and central office child welfare program managers, health care providers, legal services, foster youth and foster youth alumni, housing providers, substance abuse treatment providers, judges, juvenile justice, Idaho's children's mental health program, and public education providers.

On a local level, assessment, planning, and intervention strategies are coordinated with eligible youth, community partners, parents and family members, resource parents, training staff, case managers, and persons requested by youth to participate in their assessment, plan development, and

service provision. CFS integrates independent living (IL) services with existing community programs to assure the most effective system of service delivery. IL skills training is provided to youth by state staff and private agencies to assure that youth are prepared for successful transition to adulthood.

Foster Youth Involvement - Regional foster youth advisory boards exist in six of the seven regions and provide an organized venue for youth to convene, connect, and advocate for topics of concern that impact youth in foster care. Support for the seventh region to form a board will continue to be a focus. Due to small numbers of older youth in this region and a large rural demographic, Region 7 finds it difficult to organize a youth board. Advisory board groups create opportunities for youth to develop leadership skills and have opportunities to speak on issues that relate to youth in foster care in their local areas. Statewide, IFYAB exists to bring together the exceptional youth from each regional board to serve as advocates at the state level and represent the voice of the regional board. All seven regions in Idaho have at least one youth representative on the IFYAB.

During FFY 2018, members of IFYAB was invited to and participated in the Idaho's Family First Visioning Council and workgroups. Attendees were provided with an overview and goals of the Family First Service Prevention Act (FFSPA) and goals for developing an implementation plan. Attendees were then asked to participate in round-robin style groups to address barriers and draft recommendations for an implementation plan. IFYAB members were invited to participate in the workgroups to further refine the drafted goals and objectives as well as to develop strategies and recommendations. CFS is also able to utilize feedback loops through regular IFYAB meetings to gather input from foster youth and foster youth alumni in Idaho.

The board also focuses on public education issues from the youth's perspective, development of new state policies that would better serve youth in foster care and hope to be the youth voice in new and existing child welfare policy moving forward. IFYAB members also participate in advisory and educational speaking engagements as requested by internal and external partners and stakeholders including the Court Improvement Project, the Governor's Task Force for Children at Risk and the Idaho State Legislature Committees. Key advisory goals include the following: sibling rights, a peer-to-peer mentoring collaborative, addressing youth homelessness and transitional housing, exploring supportive services for LGBTQ foster youth, continued collaborative work with state and local agencies focused on improving outcomes and experiences for children and youth in foster care, and exploring collaborative work with other boards across the nation.

Foster Club - CFS utilizes CFCP funds to provide scholarship opportunities for identified young adults to participate in the Foster Club Summer All-Star Internship program. The club was founded on the belief that youth who have successfully transitioned from foster care to responsible young adulthood are best suited to impact the transition of their younger peers. Since 2004, Foster Club All-Stars have been reaching out to other foster youth through conferences, training courses, and events. Foster Club All-Stars utilize learned skills both for personal and professional development and to assist in furthering advocacy efforts for children and youth in foster care.

Casey Family Programs - CFS's partnership with Casey Family Programs continues to flourish. Casey Family Programs has staff assigned to provide transitional services to youth. In turn, the commitment of Casey staff is used as an in-kind match towards Idaho's Chafee Foster Care Program (CFCP) funding allocation.

State Board of Education - CFS continues to partner with the Idaho State Board of Education regarding Idaho's Educational Training Voucher (ETV) Program with an intended goal of assisting youth in making the best educational choices when they apply for ETV funds. Information is distributed to regional independent living and tribal social service staff through the state's IL or ETV Coordinator about all of Idaho's institutions of higher education and entrance requirements.

Idaho Department of Education - The IL or ETV Coordinator participates on the Idaho Department of Education's Secondary Transition Council and shares information about secondary transition with regional staff as well as Casey Family Programs and tribal staff. Locally, state and tribal social services staff, in addition to private agencies providing independent living services, collaborate with each youth's school program to coordinate plans for transition and education.

Citizen Review Panels - Citizen Review Panel members continued to express an interest in issues affecting older youth in care and youth who age out of care. The panel regularly makes recommendations to improve services to IL-eligible youth. Idaho's IL Program continues to respond to these recommendations and provide information to panel members on those topics of interest and concern.

Cooperation in National Evaluations - CFS assures that, as the state agency responsible for the implementation of the independent living program in Idaho, it will cooperate with national evaluations of the effects of the independent living program implemented to achieve the purposes of the Chafee Foster Care Program (Section 477(b)(2)(F)).

Coordination with Other Federal and State Programs for Youth

The child welfare program continues to meet, at both the state and regional level, with partner programs to address issues and concerns around IL services. Representatives from the county juvenile services, housing and transitional living programs, health care agencies providing family planning and abstinence programs, educators, vocational rehabilitation, state agencies, and other groups having an interest in youth who need supportive service programs and are often included in these meetings. Through this ongoing dialogue, CFS anticipates services to youth will be better coordinated, expanded, and delivered in such a way that achieves the purpose of the CFCP.

Regional IL coordinators engage in collaboration with private persons and agencies that develop and maintain transitional living programs for youth who have exited foster care, but still need the structure and support of a small group living arrangement to help them prepare for self-sufficiency and personal responsibility.

Homelessness Prevention - CFS has collaborated with local and state agencies including the Idaho Housing and Finance Association (IHFA). The IHFA is the recipient of the majority of homelessness assistance funds awarded to Idaho and is responsible for the grant administration and oversight of these programs. Homeless assistance funds are used to support a comprehensive and coordinated crisis response system that includes emergency shelters, transitional housing, rapid re-housing and permanent supportive housing. Funded programs include a Continuum of Care (CoC), Emergency Solutions (ESG), and Housing Opportunities for Persons with AIDS (HOPWA). CFS has partnered with the IHFA to share information about youth systems of care in Idaho as IHFA is focused on ending homelessness for youth 18-24 who are aging out of foster care or are otherwise homeless. Part of the CoC's goal is to link youth populations who may become (or are at greater risk of becoming) homeless with local housing and service providers. CFS provides a statewide perspective and advocacy for Idaho's youth population in many of these groups.

In response to the requirements of the Fostering Connections to Success and Increasing Adoptions Act of 2008, the Idaho IL Program provides transition planning meetings for youth 60 days before or after a youth's 17th birthday, and within 90 days of the youth's 18th birthday. The purpose of the transition planning is to assess the youth's readiness, resources, and skills to successfully navigate adulthood, as well as to ensure that the youth has services and supports in place to do so. Housing needs and youth goals regarding housing are addressed during these meetings, and a plan is developed. Youth are provided with information regarding the resources available to them as they prepare to exit the foster care system which includes the following:

- Room and board payments through a voluntary placement agreement in their foster placement to complete secondary education
- Room and board assistance either through an independent landlord or rental agency or through participation in a youth serving organization such as Bannock Youth Foundation, Mana Youth Services, or JemFriends

In addition to direct financial services, youth are required to engage in assessment and independent living planning to access housing assistance. The intent is to ensure that youth have ongoing case management and supportive services to have the resources necessary to make informed decisions about self-sufficiency. Wraparound services to support their housing stability such as money management, managing conflicts, tenant adequacy, etc., can be identified as a barrier to stability through assessment and independent living planning.

Sex Trafficking - With regard to the requirement in section 471(a)(9)(c) of the Social Security Act, CFS has developed, in consultation with partners, policies and procedures for identification, documentation and determination of appropriate services for those at risk and victims of sex trafficking. CFS has met the requirements through a variety of meetings with local specialist in trafficking, collaboration with a variety of community agencies, and development of collaborative policies that address sex trafficking of youth in foster care.

In accordance with the provisions in section 103(10) of the Trafficking Victims Protection Act of 2000 (TVPA) (22 U.S.C. 7102)); (section 106(b)(2)(B)(xxiv) of CAPTA), CFS is adhering to the identification and assessment of all reports involving children known or suspected to be victims of sex trafficking. Upon receipt of a referral relating to child abuse and neglect in which the children are known or suspected to be the victims of sex trafficking, the referral reason will be categorized as such and will be assigned for assessment. The established requirements for response are identified within the Child Welfare Standard: Priority Response Guidelines. CFS is adhering to the training of CFS workers in identifying, assessing, and providing comprehensive services to children who are sex trafficking victims as outlined in the Standard for Reporting and Responding of Runaway Youth and Standard for Identifying, Documenting and Determining Appropriate Services for Child Victims of Human Trafficking.

Children/youth identified as sex trafficking victims are reported to law enforcement within 24 hours and are referred to local community providers and supports for assessment and treatment planning. Service needs identified and provided are documented within the child/youth's service plan. CFS social workers collaborate with community service providers to ensure continuity and quality of services as well as progress towards addressing the child/youth's needs.

Pregnancy Prevention - CFS partners with local and state agencies to increase awareness and prevention surrounding teen pregnancy and disease prevention. One such partnership includes participation on the Sexual Health Information Education Advisory Board of the Central District Health Department. The purposes of the SHIEAB include providing an opportunity for participation in the development, implementation, and evaluation of the project by persons broadly representative of all significant elements of the population to be served and by others in the community knowledgeable about the community needs for reproductive health services. The board serves as a community liaison.

Program Support for CFCP

Training on the Independent Living Program (ILP) is an ongoing effort to inform new CFS staff and contractors, tribal social service staff, resource families, and other entities critical to the success of Idaho's foster youth about the purpose and implementation of independent living services. Updated training will be delivered to these entities whenever program needs, or requirements change.

Training sessions will be provided to all new child welfare staff on IL services through the Child Welfare New Worker Child Welfare Academy at least twice annually. Ongoing training for resource parents and other caregivers, including tribal resource parents, about the independent living needs of youth will occur during PRIDE.

Training will continue to include information on the purposes and philosophy of the ILP, participation requirements, implementation, measurements of success, outcomes, payment mechanisms, entry to

Idaho's child welfare data system, positive youth development and all other aspects of the program that allow youth to make a smooth transition from foster care to self-sufficiency and independence.

Idaho Youth Bill of Rights: The Idaho Youth Bill of Rights was created to inform youth, resource parents, child welfare agencies, and providers about the rights foster youth have while they are in foster care. While not all of these rights are legally protected by law, they are important goals intended to guide the agency's commitment to permanency, safety, and well-being, as well as the CFCP program purposes. Every resource family, treatment foster care home, and residential treatment facility is expected to have a copy of the bill of rights for youth age eight and older to see and have access to. In addition, the youth, resource family, and caseworker must sign a copy of the bill of rights at the time of each placement.

The bill of rights includes the following:

- Have lifelong family connections
- Live with, be loved by and care for those they consider family
- Be who they are
- Be included in their case planning with a team of people that advocate with them and for them
- Have informed choice in the types of physical, dental and mental health care they receive
- Have a qualified advocate representing them and helping the youth advocate for themselves
- Participate in and receive a high-quality education, including the ability to participate in extracurricular activities
- Receive the skills, knowledge, and resources needed to be a successful adult after they transition from foster care.
-

Collaboration with Tribes

The state agency continues to partner with each tribe residing in Idaho to make the full array of independent living (IL) services available to tribal youth. The Child and Family Services (CFS) program works with tribes on a local and program-to-program level. Consultation is defined as a formal process in Idaho, meaning government-to-government, and is not utilized for IL service provision purposes. CFS staff are available to support and train tribal social services staff about the Independent Living Program (ILP). Idaho tribes receive information regarding Idaho's ILP through the Child Welfare Program and Policy Development Manager, policy program specialists, and at regular Indian Child Welfare Advisory Committee (ICWAC) meetings. Benefits and services under the program will be available to Indian children in Idaho on the same basis as to other children in the state, including credit reports for minors in foster care.

In keeping with the requirements of the Chafee Foster Care Program (CFCP), section 477(b)(3)(G), Idaho will negotiate in good faith an agreement with any tribe that does not receive direct CFCP or Education and Training Voucher (ETV) allotments. CFS will ensure benefits and services under the programs will be made available to Indian children in the State on the same basis as to other children in the State. Currently, all tribes access CFCP and ETV funds by sending referrals to CFS.

Program-to-program tribal staff have continued to identify the following concerns related to barriers to accessing IL services: access to appropriate resources, and lack of training opportunities to better understand IL services.

During FFY 2018-2019, CFS staff presented information during an ICWAC meeting regarding IL and are available to support and train tribal social services staff about the available services through Idaho's Independent Living Program, as requested by the tribe. A child welfare policy program specialist reviews tribal youth referrals and coordinate connection between the tribal caseworker and the regional IL coordinator. The child welfare policy program specialist tracks referrals to ensure continuity and quality of services

Case collaboration – CFS addresses tribal IL youth and service needs and concerns as they arise during ICWAC meetings or during local program meetings between the tribe and regional staff. Ongoing collaboration with Idaho's tribes provide tribal staff with an opportunity to inquire about the CFCP in general as well as specific youth completed by the Child Welfare Program and Policy Development Manager, policy program specialists, or local staff as requested by the tribe.

Training opportunities – CFS program staff continue to ensure that tribal staff receives information and invitations to Working with Older Youth Academy.

Education and Training Vouchers

Program Description

Educational Training Vouchers (ETV) are available to youth who are eligible for services under Idaho's Independent Living Program (ILP).

- Youth are eligible for ETV until they turn 26 years old; as long as they are enrolled in a post-secondary education or training program and are making satisfactory progress toward completion of that program. ETV are available to youth who are eligible for services under Idaho's ILP.
- ETV are available to Indian youth who are currently in tribal custody or who have been in tribal custody and meet ILP eligibility criteria through the Regional IL Programs.

- A maximum of \$5,000 per year, or the total cost of attendance at an institution of higher education, may be used for attendance at an institution of higher education. The total amount of the award and any other federal assistance will not exceed the cost of attendance.
- A youth may participate in the ETV program for no more than five (5) cumulative years.
- Prior to the expenditure of ETV funds, Child and Family Services (CFS) will assure that each youth completes an Casey Life Skills Assessment; develops an approved IL plan which includes the plan for achieving educational goals; defines CFS' role in supporting the youth; and completes a standardized ETV application with supporting documentation approved by the appropriate regional IL Coordinator.
- ETV funds will be used to cover costs for educational support including, but not limited to, tuition and fees, room and board, counseling related to education and training programs tutoring, books, rental or purchase of required equipment, supplies, transportation, child care, and other identified service needs to support the youth's education goals. CFS will track the use of ETV funds separately from Chafee through the child welfare information system.
- An institution of higher education is defined as an educational institution that:
 1. Admits as regular students, only persons having a certificate of graduation from a school providing secondary education, or the recognized equivalent of such a certificate.
 2. Is legally authorized within Idaho to provide a program of education beyond secondary education.
 3. Provides an educational program for which the institution awards a bachelor's degree or provides not less than a two-year program that is acceptable for full credit toward such a degree.
 4. Is a public or other non-profit institution.

Is accredited by a nationally recognized agency or association, or if not so accredited, is an institution that has been granted pre-accreditation status by such an agency or association that has been recognized for the granting of pre-accreditation status, and it has been determined that there is satisfactory assurance that the institution will meet the accreditation standards of such an agency or association within a reasonable time.

- The term "institution of higher education" also includes:

1. Any school that provides not less than a one-year program of training to prepare students for gainful employment in a recognized occupation and that meets the provision of paragraphs (1), (2), (4), and (5) of subsection (a) of the Higher Education Act.
2. A public or nonprofit private educational institution in any State that, in lieu of the requirement in subsection (a)(1), admits as regular students, persons who are beyond the age of compulsory school attendance in the State in which the institution is located.

Accomplishments

During FFY 2018, Child and Family Services (CFS) continued to partner with the Boise State University (BSU) Impact Scholars Program (ISP) through participating on quarterly ISP Advisory Board meetings. Topics of discussion included assessing progress towards ISP goals as well as ongoing partnership opportunities between BSU and CFS around support for Education and Training Voucher (ETV) youth.

During FFY 2018, CFS participated in several outreach events both with BSU and Casey Family programs to bring awareness, education, and information about the ETV program.

During FFY 2018, the CFS program updated application materials and process as well as enhanced award letters to recipients to provide additional requirements on funds awarded and cost of allowance information for their university/institution.

During FFY 2018, CFS provided learning opportunities through New Worker Child Welfare Academy to CFS staff regarding the ETV program and eligibility requirements.

During FFY 2018, the CFS program utilized IL groups provided both by internal staff as well as contractors to promote the ETV program to youth across Idaho.

ETV Collaboration with Other Educational Programs

Youth will be encouraged to take advantage of other programs such as scholarships, grants, loans, and student-work experiences as strategies to help pursue their post-secondary educational goals. Youth will be asked to apply for all available scholarships and the Free Application for Federal Student Aid (FAFSA) program website.

A child welfare policy program specialist participates in quarterly conference calls with the Idaho Fostering Success Network (IFSN). The IFSN is made up of faculty and staff at Idaho institutions of higher education as well as other community members and CFS staff who are committed to supporting Idaho's youth and alumni of foster care in higher education. The network provides recourses, training and strategic planning for campuses across Idaho.

ETV Program Support

ETV information is tracked through iCARE, and an intra-agency SharePoint site. SharePoint allows the child welfare policy program to ensure ETV funding is being used most effectively by identifying trends such as student progress, current year in college, semester grades, student spending, and the colleges that students are attending. This gives a big picture of ETV spending and can be drilled down to look closely at local spending. This collective information helps to build programs to assist students in college and creates avenues to reach out to former foster youth attending higher education.

ETV applications are recorded in SharePoint per school year. When they are recorded, specific data is collected, including how many applications the youth has been awarded.

Services for Children Adopted from Other Countries

Post-adoption services for families and children adopted from other countries include referrals to community services and access to services through existing regional and statewide Child and Family Services (CFS) contracts. These services vary by region due to the availability of services in the particular area. CFS social workers responding to requests for post-adoption support are familiar with adoption-competent services providers in their communities. Children from other countries who enter the foster care system due to a disrupted adoption or due to abuse or neglect are provided with the same full range of services available to any other child entering foster care.

In FFY 2016, CFS convened Idaho's Adoption Support and Preservation Workgroup with the purpose of developing a statewide post-permanency support program to provide consistent services to adoptive families. Supports and services to all adoptive families, including those who have adopted from other countries, were considered in the development of the group's recommendations. Survey results as to the service needs of families receiving adoption assistance benefits from CFS in Idaho were reviewed by the group and final recommendations were made in FFY 2017.

One recommendation of the Adoption Support and Preservation Workgroup was the availability of flexible support funds for adoptive families to access to assist with the provision of short-term services. In July 2018, CFS implemented Post-Permanency Grants (PPGs). These grants provide flexible funds to adoptive parents to provide supports or services to their child. To qualify, the child must be under the age of 18 years and have been adopted through a foster care, private, independent, or intercountry adoption. Examples of grants awarded include funds for non-Medicaid covered therapy, educational curriculum for summer at-home learning, moving expenses to maintain a child's permanent placement, extra-curricular activities, and trauma-informed training for the adoptive parent.

CFS is developing a contract to provide post-permanency services. Services through the contract were expected to be available in FFY 2019; however, the contracting process has been delayed due to the prioritization of re-building of all child welfare processes, beginning with safety assessment. The Division of Family and Community Services (FACS) will be developing a new contracts team to

complete the development and monitoring of Division contracts, including those which provide services for the CFS program. Contracted post-adopted services are now expected to be developed upon the availability of the contracts team. Contracted services will be available to children adopted privately, including those adopted from other countries.

Services for All Idaho Children Under the Age of Five

Services provided for all children under the age of five during FFYs 2015-2019 included the following:

Early Head Start

Early Head Start (EHS) is a home visiting program for children birth to three years and their parents. EHS Family Educators provide services in family homes weekly to support the development of strong parent-child relationships and child development. Developmental screenings are also provided. For families involved in the child welfare system, EHS services supported the 2015-2019 Child and Family Services Plan (CFSP) (1.2.1) by addressing the developmental needs of vulnerable children under the age of three years whose families received in-home safety-related services and qualified for the program.

Head Start Preschool Services

Head Start is a center-based preschool for children between the ages of three to five years. The program is designed to meet each child's individual needs while preparing them for kindergarten and life-long learning through play. On-site learning opportunities are provided for parents including parenting classes, nutrition classes, health education, and assistance in furthering education as well as referrals and information about community resources and services. For families involved in the child welfare system, Head Start services supported the 2015-2019 CFSP (1.2.1) by addressing the developmental needs of vulnerable children ages three to five years whose families received in-home safety-related services and qualified for the program. Head Start services were also received by children placed in foster care, assisting to meet their educational needs (OSRI Item 16) while providing parents and foster parents additional support (OSRI Items 12B and 12C).

Infant-Toddler Program

The Infant-Toddler Program (ITP) serves children birth to three years old with developmental delays and disabilities and is offered statewide to all children meeting ITP eligibility requirements. The program is governed by federal and state laws, specifically the Individuals with Disabilities Act, Part C, and Idaho Code Title 16, Chapter 1.

The Infant-Toddler Coordinating Council (ITCC) is comprised of parents of infants and toddlers with disabilities or children with disabilities aged 12 or younger, and members of various state and community agencies and entities. The mission of the council is to advise, assist, and collaborate to build capacity within families through the provision of quality early intervention services. The vision of the council is to support the ITP in meeting the individualized needs of children birth to three years

of age and in empowering their families to maximize their growth and development. CFS has active membership in the ITCC.

For families involved in the child welfare system, the ITP supported the 2015-2019 CFSP (1.2.1) by addressing the needs of children ages three to five years with developmental delays whose families received in-home safety-related services and qualified for the program. Provided services helped to meet the developmental needs of the child while their parent-coaching approach assisted parents in learning to better meet the needs of their child.

CFS and ITP are both part of the Idaho Department of Health and Welfare (IDHW)'s Division of Family and Community Services (FACS). In support of the coordination of services for children involved with both programs, CFS utilizes a practice standard for Birth to Three Mandatory Referrals on Substantiated Reports. The Standard requires CFS to refer all children age birth to three years, who have been the subject of a substantiated report of maltreatment, to ITP including children placed in foster care and children receiving in-home services. During the 2015-2019 CFSP, the referral process between the two programs is streamlined and incorporates the process of designating a surrogate parent. CFS and ITP partnered to provide joint statewide training to the ITP staff and CFS leadership around the updates to the process.

The CFS program works in close collaboration with ITP to ensure that ongoing education and supports are provided to biological families, foster families, children, community partners, and staff, which assists with meeting goals related to OSRI Items 2, 12B, 12C, 16, 17, and 18. CFS and ITP meet regularly to discuss upcoming collaborative staff training, data analysis, as well as how to support birth parents and foster families working together to support ITP services.

Resource and Service Navigation Program

The Resource and Service Navigation Program works with individual families and communities to establish stability, avoid crises, and prevent child abuse and neglect. Navigators work in each region of the state to:

- Identify and develop resources and services that help individuals and families meet their basic needs and reach attainable goals
- Develop personalized service plans with individuals and families that outline specific goals and action steps
- Organize and actively case-manage service plans
- Work with communities to develop or assist in the stabilization of assets and resources

CFS refers families to Navigation for services which assist in reducing the length of time a child is in foster care without a permanent home and address the developmental needs of children in foster care or children receiving in-home services (2015-2019 CFSP 1.2.1; OSR Items 2, 12A, 12B, 16, 17, and 18). Idaho's SACWIS system automates referrals from CFS to Navigation.

Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV)

IDHW's Division of Public Health has implemented an evidence-based home visiting program that matches parents with trained professionals during or after pregnancy and throughout the child's first years. Infants and toddlers identified at greatest risk of maltreatment are prioritized for the program. This program is a service option for families receiving safety-related services through the child welfare program (2015-2019 CFSP 1.2.1; OSRI Item 2)

Women, Infants, and Children Program (WIC)

The WIC program is a supplemental nutrition program for women and their children up to the age of five years. The program provides nutritious supplemental foods, support for breastfeeding, as well as nutritious education and referrals to health care services at no cost to eligible families. For children whose families are involved with the child welfare program, WIC services may assist parents in meeting the nutritional needs of their families, improving their ability to care for their children in their home (2015-2019 CFSP 1.2.1; OSRI Item 2 and 12B). WIC services are also available to resource parents caring for young children placed in their home (OSRI Item 12C).

Populations at Greatest Risk of Maltreatment

The Child and Family Services (CFS) program has identified children age birth to five years old as being the population at greatest risk for maltreatment. The identification of this population as being at greatest risk was made in consideration of Idaho child welfare data. Children birth to five years old make up just over 26% of Idaho's general child population. However, they accounted for more than 45% of the substantiated child abuse and neglect cases received during FFY 2018 (Tables 3.1 and 3.2). This population has been consistently identified at greatest risk of maltreatment in Idaho for several years. Idaho considered populations in relation to race/ethnicity and geographic location but did not find the data to be statistically significant. No other populations have been identified at greatest risk. There is no other notable trend in the data for this at-risk population.

Table 3.1 Maltreatment Substantiations (age 0-5)

FFY 2018 Child Population vs. Children with Substantiated Cases					
Population Estimates			Substantiated Children		
0-17	0-5	%	0-17	0-5	%
452,586	119,286	26.36%	1,896	857	45.75%

Table 3.2 Age 0-5 Population in Foster Care

0-5 Population Percentage of Total Foster Care Population				
	FFY 2015	FFY 2016	FFY 2017	FFY 2018

Number of Children Age 0-5 in Foster Care as of 6/30	571	671	738	835
Percentage of Children Age 0-5 in Foster Care	42%	44%	46%	46%

In addition to the services covered in Services for All Idaho Children Under the Age of Five, CFS provided the following services to this at-risk population during the 2015-2019 CFSP:

Concurrent Planning

A concurrent plan is developed for all children who come into the custody of the IDHW. Many infants are adopted by the relative or non-relative family with whom they are placed at the time of removal. For infants and toddlers, efforts are made to have frequent visitation (several times a week if not daily) in the resource family's home. This gives an opportunity for the resource family to develop a relationship with the child's parent(s), as well as an opportunity for teaching, coaching, feedback, and evaluation of parenting behaviors and skills. Dual home study assessments are completed on all resource parents, allowing for a single approval process for foster care and adoption, reducing the length of time needed to consider a family for permanent placement of a child. In recognition of the impact of child welfare timeframes on the development and attachment of young children, CFS is streamlining concurrent planning and permanency process for children birth-three years in FFY 2019 and FFY 2020 (CFSR PIP 1.1; CWT Plan 3 and 4).

Family Group Decision Making

Family Group Decision Making (FGDM) meetings are used for the purposes of service, safety, and permanency planning. The population of children birth to five years old who have had a removal episode are prioritized for FGDMs. The use of FGDMs has been particularly helpful in engaging relatives early in cases to support parents in alleviating safety concerns and/or identifying alternate permanent placements for children which supports early permanency. FGDMs are also available for children receiving in-home services for safety planning and service planning

Priority Response Guidelines

Priority Response Guidelines are in effect for all reports of child abuse or neglect. All allegations of physical abuse of a child birth to six years old are considered a priority one (requiring immediate response), unless there is reason to believe the child is not in immediate danger.

Kinship Navigator Funding

Idaho applied for Navigator funding as we are committed to developing a robust Kinship Navigator program that will assist in both preventing child abuse and neglect and supporting caregivers to avoid children entering in the child welfare system. Idaho's Kinship Navigator program will assist kinship caregivers in accessing and utilizing programs and services to meet the individualized needs of the children they are raising. We will promote the health of caregivers by developing systemic partnerships among public and private agencies; ensuring families are supported and served. With an enhanced ability to initially identify and provide customized supports to kinship families, Idaho will prevent children from entering formal foster care by supporting placements that promote family stability, safety, and well-being. Idaho was recently awarded \$237,447 for the Title IV-B, subpart 2 funding that was made available for Kinship Navigator programs.

The primary intent of the grant funding has been to ultimately enhance our Kinship Navigator program, while also developing the evaluation components to establish baseline data through the evaluation of activities to inform services, next steps, and the approval of acceptance in to the Title IV-E Prevention Services Clearinghouse. Idaho's grant application reflected that our evaluation activities would be determined after the Children's Bureau released additional information on the evaluation requirements for entry in to the Clearinghouse. After further analysis of these requirements, Idaho has made the decision to delay our application for entry in to the Clearinghouse. We will now focus on an internal evaluation that will measure the impact of our targeted activities. These activities and our internal evaluation will support the foundation for Idaho's plan to apply for the entry in to the Clearinghouse, which will be determined at a later date.

Child Welfare Waiver Demonstration Activities

Idaho does not have a Child Welfare Waiver.

Adoption and Legal Guardianship Incentive Payments

Idaho was awarded a total of \$826,500 in Adoption and Legal Guardianship Incentive payments between FFY 2015 and FFY 2018. An award letter has not yet been received for FFY 2019. Funds have been spent as follows:

- \$133,268 to in-home support services
- \$145,915 to support adoption subsidies
- \$704 to administrative costs

There is a balance of \$21,113 to be spent prior to 9/20/2019. No challenges exist in the spending of these funds which will be utilized to support permanency-related services for children and families.

The Child and Family Services (CFS) program identified a desire to utilize the funds to support post-permanency services early on. This decision represented a new way for Idaho to leverage these funds, and community and organizational infrastructure and processes to support it were not in place. CFS recognized the importance of incorporating internal and external partner and stakeholder feedback in the development of post-permanency services as it was essential to target those services believed to be most beneficial to Idaho families. A workgroup to explore the issues was convened in FFY 2016 and survey of adoptive and guardianship families receiving adoption and guardianship assistance benefits completed in FFY 2017. Reviews of research, national data and post-permanency services in other states were conducted. This information was combined with the feedback received from the post-adoption workgroup and 2017 survey to identify which specific services CFS would target for inclusion in the post-permanency program to be developed. Community-based post-permanency services are limited in the state. To assist in the estimation of the cost of a post-permanency contract, a Request for Information was completed in early FFY 2018. Due to the high cost estimations resulting from the RFI, need to re-assess necessary post-permanency services, and program prioritization of rebuilding all CFS processes, beginning with safety assessment, the contract process has been delayed. Statewide services through a post-permanency contractor are now expected to begin following the creation of a planned contracts team within FACS. Monies received from incentive awards have been identified as one source of funds for the developed services.

(4) PROGRAM SUPPORT

Training and technical assistance were provided and received by the Child and Family Services (CFS) program to support the implementation of the 2015-2019 Child and Family Services Plan (CFSP).

Training and Technical Assistance Provided

The Child and Family Services (CFS) program provides training and technical assistance (TA) to community partners through the Child Welfare New Worker Child Welfare Academy and other specialized training opportunities. In FFY 2018, all sessions of Academy are available to community partners and included: Working with Older Youth, Indian Child Welfare Act, Self-Care, Concurrent Planning, Child Welfare Trauma, Knowing Who You Are, Foster Care Academy, Child and Family Engagement, and Legal Perspectives in Child Welfare. All Academy sessions will continue to be available to community partners throughout the state in the upcoming year.

During the 2015-2019 Child and Family Services Plan (CFSP), CFS provided additional TA and training to community partners and programs such as Head Start, certified family homes, the Idaho Health Districts, school districts, juvenile probation, the Idaho Department of Health and Welfare's (IDHW) Children's Mental Health and Infant Toddler Programs, substance abuse providers, and community mental health agencies on the following topics:

- Child abuse reporting in Idaho
- Trauma-Informed Systems of Care
- Trust-Based Relational Intervention
- Information about CFS program and services
- Testifying in court proceedings
- Cultural Humility
- Abusive Head Trauma
- Substance Abuse Education
- Empowered to Connect

TA was also available to services providers regarding developing independent living case plans, supervised visitation, the Family Group Decision Making model, and parenting models. Providing TA

on these topics to a wide range of audiences supported CFS efforts to achieve goals of the 2015-2019 CFSP (1, 2, and 3) through encouraging informed collaboration and goal implementation.

Training and Technical Assistance Received

During the 2015-2019 Child and Family Services Plan (CFSP), Idaho's Child and Family Services (CFS) program received and participated with the following:

The Butler Institute for Families

CFS worked with the Butler Institute for Families to complete the Idaho Child and Family Services Comprehensive Organizational Health Assessment (COHA). Results were received in SFY 2019 and are being utilized by business design contractor Change in Innovation (C!A) to support the integration of the Child and Family Services Reviews (CFSR) Program Improvement Plan (PIP), 2015-2019 CFSP goals (1.1.1 and 1.1.3), 2020-2024 CFSP goals (1.1) into practice, and Child Welfare Transformation (CWT) Plan (2, 3, 4, 9, 11, 14, and 19). No further technical assistance from the Butler Institute is being provided.

Capacity Building Center for States (CBC)

Idaho worked with the CBC in completing an assessment of technical assistance needs. The CBC assisted CFS in an assessment of Idaho's CQI processes. The assessment did not result in a work plan; however, CFS is utilizing the results of the self-assessment in the development of CQI methods which are being integrated into revised child welfare processes beginning in FFY 2019 (CFSP PIP 1.1, 2.1, 3). No further technical assistance from the CBC is being provided.

Casey Family Programs

TA and support from Casey Family Programs was received in the areas of financial assistance, consultation, and professional guidance regarding strategies for CFS in improving permanency outcomes for youth in out-of-home care. Additional resources were provided to improve the well-being of children in foster care by improving service supports and providing learning opportunities for the CFS workforce and community partners to understand their role in addressing disparities for youth of color. TA and support received from Casey Family Programs assisted CFS in working on 2015-2019 CFSP goals and strategies related to in-home safety services (1.2) and Independent Living (4).

Change and Innovation Agency (C!A)

Idaho began working with C!A in September 2018 to redesign processes related to the safety, permanency, and well-being of children and families served. The CFS program and C!A are partnering to implement the streamlined process to help social workers build capacity and ensure timely decisions are made. The safety redesign process focuses on clear, consistent safety decisions, closure

documentation, and ensuring the right kids are in the right care for the right amount of time. Idaho will continue to work with our partners at CIA to refine processes in concurrent planning, case management, permanency, and foster care licensing and recruitment as well. The use of a structured case consultation process (2015-2019 CFSP 1.1.3; 2020-2024 CFSP 1.1; and CFSR PIP 1.2) is being incorporated into both the safety assessment and concurrent planning re-design.

Deloitte

Idaho began working with Deloitte in August 2018 to develop a new Comprehensive Child Welfare Information System (CCWIS). In June 2019, Idaho will release the first phase of Enhancing Safety and Permanency in Idaho (ESPI) with intake. Idaho plans to fully integrate to this new system in 2020. Implementation of the new system is anticipated to support the achievement of all CFSP, Child and Family Services Review (CFSR) Program Improvement Plan (PIP), and Child Welfare Transformation (CWT) Plan goals.

(5) CONSULTATION AND COORDINATION BETWEEN STATES AND TRIBES

Background

Tribes living within the boundaries of the State of Idaho are the Coeur d'Alene Tribe, the Kootenai Tribe of Idaho, the Nez Perce Tribe, the Northwestern Band of the Shoshone Nation, the Shoshone-Bannock Tribes and the Shoshone-Paiute Tribes.

The Child and Family Services (CFS) program and tribal program staff have become increasingly active and successful in ongoing collaborative efforts to access, coordinate, and enhance services for tribal children and families and reservation service areas in Idaho. Much of this work is accomplished at local worker-to-worker and office-to-office levels, rather than at a government-to-government level. This type of communication, coordination, and collaboration is most often related to routine case management issues on cases where jurisdiction is shared or where the state has custody and the tribe has intervened.

The Indian Child Welfare Advisory Council (ICWAC) is designated, by agreements, as a forum for ongoing tribal technical support and review. The group meets on a quarterly basis. The roles of the Idaho Department of Health and Welfare (IDHW) executive leadership and tribal leadership can include either attending meetings or reviewing meeting minutes.

422 Protections

The State of Idaho is responsible for the 422 protections for children and families who fall outside the boundaries of tribal lands when children are in the state foster care program.

In FFY 2018, the a CFS policy program specialist had face-to-face and phone discussions regarding Section 422 protections of the Social Security Act with the Nez Perce Tribe, the Shoshone-Paiute Tribes, the Coeur d'Alene Tribes, the Northwest Band of the Shoshone Nation, and the Kootenai Tribe of Idaho.

The Coeur d'Alene Tribe is providing the 422 protections to the children and families they serve. The tribe reported their social services program utilizes a spreadsheet database to record demographic information for the children and families they serve. Older children are involved with developing the case plan. Health and education records for children are stored in case files and provided to resource parents, courts, and others as appropriate.

The Nez Perce Tribe is providing the 422 protections to the children and families they serve. The tribe reported their social services program does not have a child welfare information system, but their spreadsheet database system is meeting their needs to document the demographic information of the children and families they serve. The Nez Perce Tribe has a tribal court and presiding judge to conduct six-month reviews and permanency hearings. Children participate in the case planning

process beginning at age 14. Younger children participate depending on their development and desire to be involved in planning. The health and education records of children are kept in a case file, and the information is provided to resource parents and court as appropriate.

The Shoshone-Paiute Tribes are providing the 422 protections to the children and families they serve. The tribe reported they have considered purchasing an information database system but have not found one to meet their needs that is cost effective. Currently, they keep a spreadsheet database that is meeting their needs to document the demographic information of children and families. They reported they have a contract with a judge who comes to their reservation monthly to provide judicial review of their tribal social services cases. They provide a “notice of custody” document for schools and resource parents to give them a summary of a child’s education and health information. Resource parents are invited to attend court hearings and report to the court how children are doing at the six-month review hearing.

The Executive Director of the Northwest Band of the Shoshone Nation reported their tribe allows states to provide the 422 protections as they do not have a social services program. They also reported that within their enrollment database they can make “note” and identify if a child has been placed in foster care, guardianship, or has been adopted. When a child is in foster care they intervene in state court to become a party to the case to ensure the child is kept safe and their cultural and ethnic heritage is maintained.

The Finance Director of the Kootenai Tribe of Idaho, stated their tribe provides for many of the 422 protections. They do not have a computer database system, but keep files with the demographic characteristics, location, goals and status for children who are removed from their homes. The tribe has a tribal court that hears child protection cases twice per month. Case plans are developed with the family and child through the court system. In discussing all the 422 protections, they reported the tribe does not need any assistance from the state to provide for tribal children or families.

The Shoshone-Bannock Tribes indicated during previous conversations in past years that they are providing for all the 422 protections.

Development of the CFSR PIP

Since submission of the 2015-2019 Child and Family Services Plan (CFSP), the Child and Family Services (CFS) program held several meetings to develop a statewide Child and Family Services Reviews (CFSR) Program Improvement Plan (PIP) to establish goals to address areas needing improvement found through the CFS self-assessment and CFSR Round 3. Formal invitations were sent to the Shoshone-Bannock Tribes, Shoshone-Paiute Tribes, Nez Perce Tribe, Coeur d’Alene Tribe, Kootenai Tribe of Idaho and the Northwest Band of the Shoshone Nation to participate in the development of the CFSR PIP. The Shoshone-Bannock Tribes, the Nez Perce Tribe, and the Shoshone-Paiute Tribes participated in the CFSR PIP Kickoff Meeting. Ongoing meetings regarding the CFSR PIP also occurred statewide on regional, hub, and state levels. The representatives from the Shoshone-

Bannock Tribes, Nez Perce Tribe, and Shoshone-Paiute Tribes have continued to participate in the ongoing planning process.

State Collaboration

Coeur d'Alene Tribe

On April 2, 2019, the CFS program's Child Welfare Policy Program Manager, Michelle Weir, and Child Welfare Policy Program Specialist, Stephanie Miller, met with Coeur d'Alene Tribal Social Services Indian Child Welfare (ICW) Manager, Charles Henry. During this meeting, input as to CFS's performance in the past year, ideas for areas needing improvements, and activities to be prioritized were discussed. A priority area of interest was the development of a IV-E tribal agreement. Prior to the meeting, CFS e-mailed a link to a copy of the 2019 Annual Progress and Services Report (APSR). A copy of the tribe's 2019 APSR was requested.

The Idaho Department of Health and Welfare (IDHW)'s Division of Family and Community Services (FACS) Administrator participated in a government-to-government consultation meeting between the IDHW and the Coeur d'Alene Tribe in FFY 2019 which included the further discussion of a IV-E tribal agreement. These discussions are ongoing and planned to continue over the next fiscal year.

Since submission of the 2015-2019 Child and Family Services Plan (CFSP), additional processes utilized to gather input from the Coeur d'Alene Tribe as to the CFSP/APSRs have included the following:

- Government-to-Government Consultation Meetings with the Coeur d'Alene Tribe
 - 11/3/2015 with the IDHW Director and IDHW administrators. Topics included ICWAC, state and tribal collaboration outcomes, tribal foster family training, Social Services Block Grant (SSBG) and Promoting Safe and Stable Families (PSSF) grants, general improvement areas and efficiencies in the provision of services, kinship cases, data systems and sharing, and tribal and IDHW priorities.
 - 6/12/2017 with the FACS Administrator and CFS Deputy Administrator. Also included were programs provided through IDHW's Divisions of Medicaid and Behavioral Health. Topics discussed under the CFS program included the Idaho Indian Child Welfare Advisory Council (ICWAC)/State and Tribal Collaboration outcomes, Tribal Foster Family training, SSBG, the PSSF subgrants, general improvement areas and efficiencies in the provision of services, the ICWA Conference in North Idaho, and coordinating efforts when children are domiciled out of state.
 - In FFYs 2018 and 2019 the IDHW attempted to schedule consultation meetings; however, due to tribal calendars and elections, have not occurred. The goal is to have annual meetings as outlined in the consultation agreement.

- Regular Communication
 - Monthly calls between IDHW and Idaho tribes were coordinated through FFY 2017. Topics discussed during calls include discussions of the CFSP/APSR and ICWA practice. The Coeur d'Alene Tribe was included in call invitations.
 - In FFYs 2017 and 2018 several meetings were held in-person or by phone discussing the possibility of a IV-E tribal agreement.
 - A copy of the revised CFS ICWA Standard was provided to the tribe via e-mail for review and to gather feedback on how to improve practice expectations for CFS staff in implementing and following ICWA.

- Tribal-State Collaboration and Coordination Meetings
 - 4/6/2015 with a CFS child welfare policy program specialist. CFS shared information regarding Independent Living services, trainings, processes and standards, and contact information for CFS regional ICWA liaisons. The tribe expressed interest in learning about how CFS licenses foster families and were connected with a child welfare policy program specialist who specializes in foster care and recruitment. Coeur d'Alene Tribal Social Services staff expressed an interest in and were invited to participate in trainings offered by CFS and community partners on child welfare practice issues.
 - 4/13/2016 with a CFS child welfare policy program specialist. CFS shared information regarding independent living services, trainings, revisions to the ICWA Standard, and contact information for CFS regional ICWA liaisons. The tribe shared concerns with active efforts being tribe-specific and talked about a specific case.
 - 5/8/2017 with a CFS child welfare policy program specialist and Coeur d'Alene Tribal Social Services ICW Manager. CFS shared information on the CFSP/APSR and discussed needs regarding Independent Living Services, training courses, and tribal sub-grants. The ICW Manager reported monthly telephone calls between the tribes as CFS are helpful and should continue and reported tribal site visits by the child welfare policy program specialist at least twice per year would be helpful to continue collaboration and coordination efforts.
 - 4/6/2018 with a CFS child welfare policy program specialist and Coeur d'Alene Tribal Social Services ICW Manager. CFS shared information on the state's CFSP/APSR and discussed needs regarding Independent Living Services, training courses, and tribal sub-grants. The tribe's ICW Manager reported they continue to co-facilitate the CFS ICWA session of Child Welfare New Worker Child Welfare Academy with the CFS North Hub contractor when available. A copy of the 2018 APSR was given to the ICW

Manager who reported the tribe was working on applying for IV-B grant funds and therefore did not have an annual report to provide CFS.

- Indian Child Welfare Advisory Council (ICWAC)
 - The Coeur d'Alene Tribe actively participates in ICWAC which has met six times since January 2018. Information about the CFS CFSP and APSRs is shared and feedback received at these meetings.

The Kootenai Tribe of Idaho

Since submission of the 2015-2019 CFSP, additional processes utilized to gather input from the Kootenai Tribe as to the CFSP/APSRs have included the following:

- Monthly Scheduled Calls
 - Monthly calls between IDHW and Idaho tribes were coordinated through FFY 2017. Topics discussed during calls include discussions of the CFSP/APSR and ICWA practice. The Kootenai Tribe of Idaho is included in call invitations.
- Tribal-State Collaboration and Coordination Meetings
 - In FFY 2015, a CFS child welfare policy program specialist extended invitations via e-mail and telephone to the Kootenai Tribe of Idaho to schedule a Tribal-State Collaboration and Coordination Meeting to include the discussion of the CFSP/APSR. The Kootenai Tribe of Idaho declined to meet as they reported they do not have a social services program and did not feel the need at this time due to low numbers of tribal child welfare cases.
 - In FFY 2016, a CFS child welfare policy program specialist extended invitations via e-mail and telephone to the Kootenai Tribe of Idaho to schedule a Tribal-State Collaboration and Coordination Meeting to include the discussion of the CFSP/APSR. Kootenai Tribe of Idaho did not respond although multiple attempts were made.
 - FFY 2017 with a CFS child welfare policy program specialist and the Vice-Chair and Finance Director with the Kootenai Tribe of Idaho by telephone. CFS shared information on the state's CFSP/APSR, ICWA program, ICWAC meetings, 422 protections, ICWA Case Record Reviews (CRRs), the SSBG sub-grants, and the CFS ICWA Standard. Copies of the 2017 APSR and 2018 APSR Program Instructions, and the ICWA Standard were e-mailed to the tribe prior to the meeting. The tribe had no additional identified needs.
 - In FFY 2017, the Kootenai Tribe of Idaho was included in invitations to attend local, hub, and statewide CFSR PIP groups.

- FFY 2018 with a CFS child welfare policy program specialist and the Finance Director with the Kootenai Tribe of Idaho by telephone. CFS shared information on the state's CFSP/APSR, ICWA program, ICWAC meetings, 422 protections, ICWA Case Record Reviews (CRRs), the SSBG sub-grants, and the CFS ICWA Standard. Copies of the 2018 APSR were e-mailed to the tribe. The tribe had no additional identified needs.
- Indian Child Welfare Advisory Council (ICWAC)
 - The Kootenai Tribe of Idaho is included in invitations to participate in ICWAC which has met six times since January 2018. Information about the CFS CFSP and APSRs is shared and feedback received at these meetings.

The Nez Perce Tribe

On April 2, 2019, CFS Child Welfare Policy Program Manager Michelle Weir and Child Welfare Policy Program Specialist Stephanie Miller met with the Child Protective Services Supervisor from the Nez Perce Tribe, Joni Williams. During this meeting, input as to CFS's performance in the past year, ideas for areas needing improvements, and activities to be prioritized were discussed. A priority area of interest was the development of a IV-E tribal agreement. Prior to the meeting, CFS e-mailed a link to a copy of the 2019 APSR. A copy of the tribe's 2019 APSR was requested. The tribe shared information regarding their utilization of substance abuse treatment services and development of aftercare housing.

Additionally, meetings were held over the past several years either in person or by phone discussing a State-Tribe Title IV-E Agreement. In April 2019, a State-Tribe IV-E agreement with the Idaho Department of Health and Welfare was signed and finalized.

Since submission of the 2015-2019 CFSP, additional processes utilized to gather input from the Nez Perce Tribe as to the CFSP/APSRs have included the following:

- Government-to-Government Consultation Meetings with the Nez Perce Tribes
 - On 4/9/2015, a consultation meeting was held between the Nez Perce Executive Council and the IDHW. Concerns regarding the use of termination of parental rights and adoption as a permanency option and the opportunity to maximize use of customary adoption and guardianship were discussed. Other topics included foster care licensing protocols used by CFS and the tribe, services offered to children who reside on the reservation but do not meet criteria for services, application of the Interstate Compact on the Placement of Children (ICPC), and the possibility of a IV-E agreement.
 - On 8/24/2016, the FACS Administrator and CFS Deputy Administrator met with the Nez Perce Tribe to discuss the development of a IV-E agreement between the state

and tribe, access to kinship and adoption subsidies, SSBG sub-grant reporting requirements, and child care assistance for tribal youth.

- On 12/12/2017, the FACS Administrator and the CFS Deputy Administrator participated in a government-to-government consultation meeting between the IDHW and the Nez Perce Tribe. Topics discussed included the status the Title IV-E agreement between the state and the tribe, child support enforcement, TANF Program, Medicaid and billing issues, and behavioral health needs.
- In FFYs 2018 and 2019 the IDHW attempted to schedule consultation meetings; however, due to tribal calendars and elections, have not occurred. The goal is to have annual meetings as outlined in the consultation agreement.
- Monthly Scheduled Calls and Regular Communication
 - Monthly calls between IDHW and Idaho tribes were coordinated through FFY 2017. Topics discussed during calls included discussions of the CFSP/APSR and ICWA practice. The Nez Perce Tribe was included in call invitations.
 - The Nez Perce Tribe meets with CFS staff in the North Hub monthly to discuss case progress, direction, and permanency of Indian children in State foster care.
 - A copy of the revised CFS ICWA Standard was provided to the tribe via e-mail for review and to gather feedback on how to improve practice expectations for CFS staff in implementing and following ICWA.
- Tribal-State Collaboration and Coordination Meetings
 - 3/4/2015 with a CFS child welfare policy program specialist. CFS shared information regarding Independent Living services, trainings, processes and standards, CFS practice expectations regarding relative search and engagement, and contact information for CFS regional ICWA liaisons. The Nez Perce Tribe reported concern in the areas of receiving copies of court-related documents, timeliness in the transfer of jurisdiction, and relationship and communication issues. Monthly meetings with the North Hub CFS offices were implemented as a result of this concern.
 - 4/12/2016 with a CFS child welfare policy program specialist and the Nez Perce Tribal Social Services Manager. CFS shared information regarding Independent Living services, trainings, revisions to the ICWA Standard, and contact information for CFS regional ICWA liaisons. The implementation of CANS, which was planned at the time, Nez Perce Social Services staff turnover, alternative billing procedures for SSBG and PSSF sub-grants, and the need for assistance with Idaho's Child Care Program (ICCP)

funding were also discussed. The policy program specialist connected the Nez Perce Tribe with ICCP administrators to problem-solve funding issues.

- 5/9/2017 with a CFS child welfare policy program specialist and Nez Perce Tribal Social Services representatives. CFS shared information on the CFSP/APSR and discussed needs regarding independent living services, training courses, and tribal sub-grants. Copies of the 2017 APSR and 2018 APSR Program Instructions were e-mailed prior to the meeting and provided during the meeting. The tribe shared tribal site visits by a child welfare policy program specialist at least twice per year would be helpful to continue collaboration and coordination efforts regarding the CFSP/APSR in addition to the monthly conference calls.
- 4/5/2018 with a CFS child welfare policy program specialist. CFS shared information regarding independent living services, trainings, and CFS and tribal PSSF and SSBG sub-grants. Copies of the 2018 APSR were provided to the tribe at the meeting and the Tribe provided a copy of their Tribal CFSP/APSR to CFS. The tribe expressed an interest in trainings such as working with older youth, crisis intervention, and independent living.
- Indian Child Welfare Advisory Council (ICWAC)
 - The Nez Perce Tribe actively participates in ICWAC which has met six times since January 2018. Information about the CFS CFSP and APSRs is shared and feedback received at these meetings.

The Northwestern Band of the Shoshone Nation

Since submission of the 2015-2019 CFSP, additional processes utilized to gather input from the Northwestern Band of the Shoshone Nation as to the CFSP/APSRs have included the following:

- Monthly Scheduled Calls
 - Monthly calls between IDHW and Idaho tribes were coordinated through FFY 2017. Topics discussed during calls included discussions of the CFSP/APSR and ICWA practice. The Northwestern Band of the Shoshone Nation was included in call invitations.
- Tribal-State Collaboration and Coordination Meetings
 - In FFY 2015, a CFS child welfare policy program specialist extended invitations via e-mail and telephone to the Northwestern Band of the Shoshone Nation to schedule a Tribal-State Collaboration and Coordination Meeting to include the discussion of the CFSP/APSR. The Northwestern Band of the Shoshone Nation did not respond.

- In FFY 2016, a CFS child welfare policy program specialist extended invitations via e-mail and telephone to the Northwestern Band of the Shoshone Nation to schedule a Tribal-State Collaboration and Coordination Meeting to include the discussion of the CFSP/APSR. The Northwestern Band of the Shoshone Nation did not respond although multiple attempts were made.
- On 5/9/2018 with a CFS child welfare policy program specialist spoke with Northwest Band of the Shoshone Nation Tribal Secretary, Dennis Alex. CFS shared information regarding Idaho's CFS ICWA program, CFSP/ASPR, ICWAC meetings, 422 protections, and ICWA Case Record Reviews. Copies of the 2018 APSR were emailed. The terms and progress of the CFS tribal SSBG sub-grant. Tribal needs were discussed.
- Indian Child Welfare Advisory Council (ICWAC)
 - The Northwestern Band of the Shoshone Nation has expressed interest in attending ICWAC meetings and has done so in the past. They have not attended any in the past year but continue to be invited. Information about the CFS CFSP and APSRs is shared and feedback received at these meetings.

The Shoshone-Bannock Tribes

In March 2019, the CFS program extended an e-mail invitation to a State-Tribal Collaboration and Coordination meeting to include discussion of the CFSP/ASPR. A link to the CFS copy of the 2019 APSR and request for a copy of the tribe's 2019 APSR was included in the e-mail. No response was received.

Since submission of the 2015-2019 CFSP, additional processes utilized to gather input from the Shoshone-Bannock Tribes as to the CFSP/APSRs have included the following:

- Government-to-Government Consultation Meetings with the Shoshone-Bannock Tribes
 - On 5/28/2015, the IDHW Director sent the Chairman of the Fort Hall Business Council a letter expressing interest in pursuing mediation to facilitate ongoing dialogue on policy and practice issues and the formation of a consultation agreement.
 - IDHW and the Shoshone-Bannock Tribes worked on consultation agreement drafts. On 5/18/2017, the IDHW mailed a final draft of a proposed consultation agreement to the Shoshone Bannock Tribes. In FFYs 2017, 2018, and 2019, representatives of the IDHW Director's office met with members of the Shoshone-Bannock Tribal Council on multiple occasions and discussed the development and finalization of a consultation agreement.

- Monthly Scheduled Calls and Regular Communication
 - Monthly calls between IDHW and Idaho tribes were coordinated through FFY 2017. Topics discussed during calls included discussions of the CFSP/APSR and ICWA practice. The Shoshone-Bannock Tribes were included in call invitations.
 - The Shoshone-Bannock Tribes continue to work closely with the local offices meeting monthly to staff all open ICWA cases to ensure Indian children's safety as well as ICWA compliance in areas such as placement preferences, permanency, preservation to community and culture and overall Indian children's well-being.
 - A copy of the revised CFS ICWA Standard was provided to the tribe via e-mail for review and to gather feedback on how to improve practice expectations for CFS staff in implementing and following ICWA.
- Tribal Social Services Program-to IDHW Social Services Program Meetings
 - 6/6/2016 with a CFS child welfare policy program specialist, Shoshone Bannock Tribes Social Services staff and Shoshone-Bannock Tribes Attorney to discuss revisions to the ICWA Standard.
- Tribal-State Collaboration and Coordination Meetings
 - In FFY 2015, invitations were extended to the Shoshone-Bannock Tribes for a Tribal-State Collaboration and Coordination meeting to discuss the CFSP/APSR. The Shoshone-Bannock Tribes was unable to get approval through their council to meet.
 - 5/16/2016 with a CFS child welfare policy program specialist and Shoshone-Bannock Tribal Social Services. CFS shared information regarding independent living services, trainings, revisions to the ICWA Standard, and contact information for CFS regional ICWA liaisons. The tribe expressed interest in the development and/or participation of training for PRIDE trainers, QEWs, and independent living.
 - In FFYs 2017 and 2018, invitations were extended to the Shoshone-Bannock Tribes for a Tribal-State Collaboration and Coordination meeting to discuss the CFSP/APSR. The tribe respectfully declined the meeting stating that a formal consultation with the FACS Administrator, CFS Deputy Administrator, and the IDHW Director would be needed for this type of discussion. Including the 2018 APSR were emailed to the tribe to ensure they have access to the information.
- Indian Child Welfare Advisory Council (ICWAC)
 - The Shoshone-Bannock Tribes have actively participated in ICWAC since August 2018.

The Shoshone-Paiute Tribes

Since submission of the 2015-2019 CFSP, additional processes utilized to gather input from the Shoshone-Paiute Tribes as to the CFSP/APSRs have included the following:

- Government-to-Government Consultation Meetings with the Shoshone-Paiute Tribes
 - In FFY 2016, a representative from the IDHW Director's office contacted the Shoshone-Paiute Tribes to inquire about the possibility of a consultation agreement
 - On 3/8/2017, a consultation agreement draft was sent to the new council members of the Shoshone-Paiute Tribes from a representative of the IDHW Director's office.
- Monthly Scheduled Calls and Regular Communication
 - Monthly calls between IDHW and Idaho tribes were coordinated through FFY 2017. Topics discussed during calls included discussions of the CFSP/APSR and ICWA practice. The Shoshone-Paiute Tribes were included in call invitations.
 - A copy of the revised CFS ICWA Standard was provided to the tribe via e-mail for review and to gather feedback on how to improve practice expectations for CFS staff in implementing and following ICWA.
- Tribal-State Collaboration and Coordination Meetings
 - 3/30/2015 with a CFS child welfare policy program specialist and Shoshone-Paiute Social Services. CFS shared information regarding independent living services, trainings, processes and standards, and contact information for CFS regional ICWA liaisons. Further topics of discussion included the need for Native American foster and adoptive homes, ICWA training for attorneys and judges, tribal engagement in Family Group Decision Making Meetings, and the use of QEWs.
 - 3/7/2016 with a CFS child welfare policy program specialist and the Shoshone-Paiute Social Services. CFS shared information regarding independent living services, trainings, revisions to the ICWA Standard, and contact information for CFS regional ICWA liaisons.
 - 5/15/2017 with a CFS child welfare policy program specialist and Shoshone-Paiute Social Services representatives. CFS shared information on the SSBG tribal sub-grant. Copies of the 2017 APSR and 2018 APSR Program Instructions were e-mailed prior to the meeting and provided during the meeting. The tribe expressed interest in learning more about CFS processes such as Family Group Decision Making meetings and developing safety plans.

- 3/19/2018 with a CFS child welfare policy program specialist and Shoshone-Paiute Social Services representatives. Copies of the 2018 APSR were provided at the meeting. Discussion included the terms and progress of the CFS tribal SSBG sub-grant. Other topics included the possibility of an MOU with Idaho that would allow them to place youth on the Nevada side of their reservation, the helpful support of the Mountain Home CFS office in providing administrative staff support to aid the tribe in submitting electronic documents to the courts.
- Indian Child Welfare Advisory Council (ICWAC)
 - The Shoshone-Paiute Tribes has attended ICWAC which has met six times since January 2018. Information about the CFS CFSP and APSRs is shared and feedback received at these meetings.

Chafee Foster Care Plan (CFCP) Tribal Collaboration

See Collaboration with Tribes section found on pages 44-45 under the Chafee segment in this report.

ICWA Compliance

The Child and Family Services (CFS) program monitors and assesses its compliance with ICWA requirements through specialized case record reviews. In 2018, CFS reviewed 58 cases statewide to evaluate the following components:

- Notification of Indian parents and tribes of state proceedings involving Indian children and their right to intervene
- Placement preferences of Indian children in foster care, pre-adoptive, and adoptive homes
- Active efforts to prevent the breakup of the Indian family when parties seek to place a child in foster care or for adoption
- Tribal right to intervene in state proceedings, or transfer proceedings to the jurisdiction of the tribe

The resulting data is summarized in under Goal 1 Strategy 2. The next ICWA CRR will occur in FFY 2019-2020.

CFSP-Consultation and Coordination between States and Tribes-Plan for Improvement

Goal 1: Improve Consultation and Coordination with Tribes

Strategy 1: Enhance training on the ICWA and related topics.

2015-2019 Final Report Update

The ICWA Standard of Practice was updated and subsequently finalized in FFY 2018. This process included gathering feedback from regional field offices and tribal partners to ensure compliance with the Bureau of Indian Affairs (BIA) 2016 ICWA Rule/Regulations and Guidelines. Copies of the revised ICWA Standard were shared with the Shoshone-Bannock Tribes, Shoshone-Paiute Tribes, Nez Perce Tribe, Coeur d'Alene Tribe, Kootenai Tribe of Idaho, and the Northwest Band of the Shoshone Nation for review and feedback to ensure ICWA compliance. Training as to the new standard will be developed and provided to child welfare staff in FFY 2019-2020.

The CFS ICWA Academy training is being revised in collaboration with tribal partners to reflect the BIA 2016 ICWA Rule/Regulations and Guidelines and the updated 2018 ICWA Standard. The training course update is expected to be finalized in FFY 2020. To ensure the application and spirit of ICWA, CFS will continue to invite tribal partners to co-facilitate the ICWA Academy sessions.

Casey Family Programs lead in facilitating and hosting a planning committee in collaboration with CFS, the Idaho Administrative Office of the Courts, the Coeur d'Alene Tribe, the Nez Perce Tribe, the Shoshone-Bannock Tribes, and the Shoshone-Paiute Tribes to develop the annual ICWA conference for CY 2017. With the help of Casey Family Programs, two conferences were held. The first conference was held in Boise, Idaho, on October 6-7, 2017 with 110 people in attendance. The second conference was held in Lapwai, Idaho, on October 8-9, 2017, with 77 people in attendance. The conferences focused on the 2016 Regulations and application of the law within Child Welfare.

Knowing Who You Are (KWYA) training was implemented in 2010 and continues to be offered two to three times per year in each hub. This training is designed to help child welfare professionals explore race and ethnicity to prepare them to support the healthy development of their client's race and ethnic identity. This course is a mandatory training for all CFS employees. The ICWA Program Specialist also discussed with tribal partners the opportunity of attending the Training of Trainers (TOT) session to become co-facilitators. To date, no tribal staff have taken the TOT course.

ICWA Liaisons are encouraged to participate as a co-facilitator in the ICWA New Worker Child Welfare Academy training sessions in their local areas when available. ICWA Liaisons are available as local experts on ICWA. The ICWA session of Academy is mandatory for all CFS staff and is open to tribal partners. Tribal partners are welcome to co-facilitate the training when they are available.

Strategy 2: Involve tribal staff in case record reviews (CRRs).

2015-2019 Final Report Update

An ICWA CRR was concluded in FFY 2018 from a random sample of all ICWA cases open during SFY 2017. A total of 56 cases were reviewed. The CRR gathered data regarding identification of Indian children, notices sent to parents, Indian custodian, tribes and BIA, court findings and actions, and foster care placement preferences for Indian children. Invitations were sent to the Shoshone-Bannock, Northwest Band of the Shoshone Nation, Shoshone-Paiute, Nez Perce, Coeur d'Alene and Kootenai Tribes to participate as reviewers. The Shoshone-Bannock Tribes accepted but were subsequently unavailable. Tribal staff from the Nez Perce Tribe and the Coeur d'Alene Tribe participated in the North Hub reviews. Results were noted in a "2018 ICWA Report". ICWA CRR data showed:

- The CFS program is making active efforts to prevent removal in approximately 50% of cases at the beginning of a case; but shows a significant drop in percentages when finding active efforts to reunify children with their families. which was shared with internal leadership and staff, external partners, and Idaho tribes.
- In 46% of all ICWA cases, Indian children are being placed in an ICWA-compliant foster care setting.
- The child's tribe is receiving notice of child custody proceedings between 36% and 56% of the time, depending on the type of proceeding. Parents are receiving notice between 45% and 72% of the time.
- Use of a qualified expert witness ranged from 50% to 60%, depending on the type of child custody proceeding.
- Court findings of "imminent physical damage or harm", "clear and convincing evidence", "serious emotional or physical damage", and "beyond a reasonable doubt" were extremely low, often at 0% for proceedings other than termination of parental rights when necessary findings were made 50% of the time (2 applicable cases).

The development of an ICWA program improvement plan (PIP) did not occur as had been planned. Due to the CFS program's desire to ensure the development of an ICWA PIP based on timely CRR outcomes, a decision has been made to postpone ICWA PIP development until completion of the next ICWA CRR scheduled to occur in FFY 2019-2020. CFS will partner with Idaho tribes to conduct the next ICWA CRR and develop the subsequent ICWA PIP which is being included in the 2020-2024 CFSP (4.3).

Strategy 3: Develop formal protocols and processes for joint case planning for children identified as American Indian for purposes of ICWA, coordination of crisis response, child protection safety assessments, foster home placements, and court appearances.

2015-2019 Final Report Update

In February 2018, the Administration Office of the Courts (AOC) began working on the development of an Idaho ICWA Manual for the court system which reflects the new Bureau of Indian Affairs guidelines and regulations. Representatives from CFS, courts, Idaho tribes, and other community partners worked together to develop the manual which was completed the first week of May 2018. The Idaho ICWA Manual was presented to the Magistrate Conference by Judge Bryan Murray. With the implementation of the Idaho ICWA Manual for courts and a revised CFS ICWA Standard and Academy curriculum for staff, CFS is confident ICWA compliance will improve throughout the state.

Strategy 4: Improve recruitment of tribal foster homes.

2014-2019 Final Report Update

The CFS program continues to collaborate on recruitment efforts with internal and external partners, including Idaho tribes, to increase the number of licensed American Indian foster homes. Recruitment coordinators from Eastern Washington University (EWU) continue to strengthen relationships with Idaho tribes. Three of Idaho's six tribes (the Shoshone-Paiute Tribes, the Coeur d'Alene Tribe and the Nez Perce Tribe), continue to engage with the EWU coordinators and CFS regional licensing teams. Efforts to engage with these tribes include collaborating on a program to program level for recruitment events and training for tribal caseworkers and resource families.

EWU participated in the following recruitment events during the 2015-2019 CFSP:

- Nez Perce County Fair (FFY 2016)
- Red River Powwow (FFY 2016)
- Coeur d'Alene Tribe Winter Blessing (FFY 2017)
- Fort Hall Craft Fair (FFY 2017)
- Julyamsh Pow Wow with the Coeur d'Alene Tribe (FFY 2017)
- Native American Coalition of Boise Picnic (FFY 2017)
- Lapwai City Hall with the Nez Perce Tribe (FFY 2018)
- Shoshone-Bannock Job Fair (FFY 2018)
- Nez Perce Tribe Pinwheels for Prevention Parade (FFY 2018)
- Craigmont June Picnic Booth with the Nez Perce Tribe (FFY 2018)

Additional recruitment and retention strategies include:

- Posting recruitment marketing material with a Resource Peer Mentor who works on the Coeur d'Alene Tribe Reservation (FFY 2016)

- Collaboration with the organizational leader of the Native American Coalition to provide a personal invitation to tribal members/partners to an informational meeting (FFY 2016)
- Training from the Nez Perce Tribe provided to a resource parent support group (FFY 2017)
- Meetings with the Nez Perce Tribe licensing team and EWU to discuss partnership opportunities. (FFY 2018)
- Foster care recruitment advertisement in the Home and Harvest Magazine (FFY 2018)
- Attendance of two foster families at the 15-hour Positive Indian Parenting training hosted by the Nez Perce Tribe (FFY 2017)

On a local program to program, there are many strong collaborative relationships which are promising for our ability to make progress. Idaho must also continue to make efforts to improve our government to government relationships with our Idaho tribes, to improve our services provided to families and children as well as increase recruitment efforts of American Indian resource families.

Strategy 5: Improve collaboration and planning through quarterly calls, action plans, and other meetings with tribal representatives.

2015-2019 Final Report Update

During the 2015-2019 CFSP, a state child welfare ICWA program specialist met with the CFS regional ICWA liaisons on a quarterly basis to discuss ICWA practice, specific cases, identify any areas of need for the region, and ensure that ICWA is applied consistently state wide.

The Department is continuing its efforts to develop consultation agreements with all Idaho tribes. Consultation agreements are in place with the Nez Perce and Coeur d'Alene Tribes. A draft consultation agreement with the Shoshone-Bannock Tribes is currently being negotiated.

CFS continues to be an active participant in ICWAC. This past year, ICWAC met in February 2018, May 2018, August 2018, October 2018, February 2019, and May 2019. Topics discussed included CFSP/APSR plans and feedback, IV-E agreements, data recruitment strategies for Indian homes and the sharing of program updates by the tribes, CFS, Casey Family Programs, and the courts. Guests at ICWAC meetings included GAL and the Idaho Child Care Program (ICCP). The Shoshone-Paiute Tribes, the Coeur d'Alene tribe, and the Nez Perce, the Shoshone-Bannock Tribes, and Northwest Band of the Shoshone Nation participated in ICWAC this year.

(6) CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA)

Annual Update

During FFY 2018 the Children's Bureau found Idaho not fully in compliance with Child Abuse Prevention and Treatment Act (CAPTA) eligibility requirements as it related to provisions of the Comprehensive Addiction Recovery Act (CARA). Idaho continued to work a program improvement plan for CARA and is will be submitting a final report and governor's assurance for review to meet eligibility requirements to be eligible to receive Child Abuse Prevention and Treatment Act (CAPTA) funds. There have been no substantive changes to state law or regulations related to the prevention of child abuse and neglect that affect the State's eligibility for the CAPTA state grant.

There were no substantial changes being made to the state's CAPTA plan this year. CAPTA funds will continue to be used to support the state's continuous quality improvement system. CAPTA funds will also continue to be used to support the state's enhanced child safety practice through the life of a case, specifically supporting a coaching model to further assist in the embedding of the practice and in developing, strengthening, and facilitating training to improve engagement with families as well as case management. Additionally, CAPTA funds supported workforce development strategies in enhancing supervisory and leadership training, maintain funding support for citizen's review panels in all regions, efforts in collaboration of the Indian Child Welfare Council to enhance relationships and practice of Indian Child Welfare Act (ICWA), improving and developing systems of technology, in conducting multidisciplinary team child fatality reviews, and in facilitating stakeholders groups in collaboration on planning and implementation of the CFSP and PIP.

Funding

Funds received through CAPTA are used to develop and implement projects that support statewide programs relating to child abuse and neglect. The following program areas were selected for FFY 2018-2019:

- Improve the intake, assessment, screening, and investigation of reports of abuse and neglect (section 106(a)(1)).
- Create and improve the use of multidisciplinary teams and interagency protocols to enhance investigations, and improve legal preparation and representation including: (1) procedures for appealing and responding to appeals of substantiated reports of abuse and neglect; and (2) provisions for the appointment of an individual to represent a child in judicial proceedings (section 106 (a)(2)).
- Improve case management, including ongoing case monitoring, and delivery of services and treatment provided to children and their families (section 106(a)(3)).

- Enhancing the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols (section 106(a)(4)).
- Developing and updating systems of technology that support the program and track reports of child abuse and neglect from intake through final disposition and allow interstate and intrastate information exchange (section 106(a)(5)).
- Developing, strengthening, and facilitating training including: (a) training regarding research-based strategies to promote collaboration with families; (b) training regarding the legal duties of such individuals; (c) personal safety training for caseworkers; (d) training in early childhood, child, and adolescent development (section 106(a)(6)).
- Improve the skills, qualifications, and availability of individuals providing services to children and families, and the supervisors of such individuals, through the child protection system, including improvement in the recruitment and retention of caseworkers (section 106(a)(7)).
- Developing, facilitating the use of, and implementing research-based strategies and training protocols for individuals mandated to report child abuse and neglect; (section 106(a)(8)).
- Supporting and enhancing collaboration among public health agencies, the child protection system, and private community-based programs, to provide child abuse and neglect prevention and treatment services (including linkages with education systems) and to address the health needs, including mental health needs, of children identified as victims of child abuse or neglect, including supporting prompt, comprehensive health and developmental evaluations for children who are the subject of substantiated child maltreatment reports (section 106(a)(13)).
- Supporting and enhancing interagency collaboration between the child protection system and the juvenile justice system for improved delivery of services and treatment, including methods for continuity of treatment plan and services as children transition between systems (section 106(a) (13)).

During FFY 2018, the Child and Family Services (CFS) program used CAPTA funds to support multiple projects to improve the quality of services for children who are victims of abuse or neglect. This has been done primarily through the provision of training to child welfare professionals and community partners in best practices, curriculum development for staff regarding abuse and neglect, and enhancing supervisory skills, and case record reviews.

The agency also provided CAPTA funding to support multidisciplinary child protection teams and committees including children welfare leadership committees, the Indian Child Welfare Act Committee (ICWAC), and Family First Visioning Council.

Prevention of child abuse and neglect

Many of the services aimed at preventing the occurrence of child abuse and neglect are provided by the Idaho Children's Trust Fund (ICTF). The ICTF is the identified recipient of federal prevention funds. CFS collaborates with the ICTF to offer prevention services. Additionally, CFS contracts for various family-support services throughout the state.

The Navigation Program works with individual families and communities to establish stability, avoid crises, and prevent child abuse and neglect. Navigators work in each region of the state to:

- Identify and develop resources and services that help individuals and families meet their basic needs and reach attainable goals
- Develop personalized service plans with individuals and families that outline specific goals and action steps
- Organize and actively case manage service plans
- Work with communities to develop or assist in the stabilization of assets and resources

Reporting suspected cases of child abuse and neglect

CFS collaborates with the Governor's Children at Risk Task Force (CARTF) to distribute a brochure that outlines the responsibilities of Idaho's mandatory reporters. The brochure is available in English and Spanish. During this grant cycle, 317 English brochures and 82 Spanish brochures were distributed throughout Idaho.

To encourage mandatory reporting, through a contract with the University of Idaho's Cooperative Extension System, CARTF sponsored the development of an educational video on Idaho's child abuse reporting laws. The ten-minute DVD/video explains the definitions of child abuse and neglect, instructs citizens on their duty to report, and gives them information on who to call and what information they should include in their report. CARTF distributes the DVDs upon request. During this grant cycle, 68 DVDs were distributed out of existing inventory. Upon request, regional caseworkers also train the public on mandatory reporting laws.

Policies and procedures that promote and enhance collaboration among agencies

The Service Delivery Standard was developed by CFS to promote collaboration between all agencies and service providers. Additionally, CFS has a contract to allow substance abuse liaisons to be housed in each of the main regional offices. The contract specifically defines procedures for substance abuse and CFS caseworkers to collaborate in the delivery of services. Additionally, all areas of the state have good working relationships with their local domestic violence agencies and service providers.

The CAPTA plan also supports collaboration among public health agencies, the child protection system, and private community-based programs to provide child abuse and neglect prevention and treatment services (including linkages with education systems). It also addresses the mental and

physical health needs of children identified as abused or neglected, which includes prompt and comprehensive health and developmental evaluations for children who are the subject of substantiated child maltreatment reports.

During FFY 2018, CFS social workers continued to consult with psychiatrists, pediatricians, representatives from the Division of Medicaid, the Infant Toddler Program, the Division of Behavioral Health, and the Supreme Court, in a collaborative effort to enhance health care for children in the foster care system. Included in the overall health care plan is a plan for identifying and monitoring the use of psychotropic medication prescribed for foster children and youth. Additionally, CFS staff have been participating in multidisciplinary meetings with the Division of Behavioral Health Services, Division of Medicaid, Department of Juvenile Corrections, Department of Education, parents, youth, community service providers, educators, and the Praed Foundation, in a collaborative effort to implement a new system of care for Idaho's children and youth with a Serious Emotional Disturbance (SED) as part of the Youth Empowerment Services (YES) program.

Update on Services to Substance-Exposed Newborns

Idaho is a mandatory reporting state for all suspected child abuse or neglect situations. Any person suspecting a child has been abused, neglected, or abandoned is required to report it within 24 hours.

A newborn identified as being affected by substance abuse, withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder would most likely be required to be reported under the following law:

<http://legislature.idaho.gov/idstat/Title16/T16CH16SECT16-1605.htm>

All citizens are encouraged to call and make a report if they suspect abuse or neglect of a child. Failure to report as required in Idaho law section above is considered a misdemeanor.

Idaho CFS has defined a Substance-Affected Infant as an infant who has been identified by a healthcare provider as experiencing symptoms of withdrawal due to the mother's use of illegal substance as defined in Idaho or use of a controlled substance or alcohol during pregnancy; or the infant at the time of birth has tested positive for the presence of an illegal or controlled substance or alcohol in his/her body, blood, urine or meconium; or the infant has been identified by a healthcare provider as exhibiting harmful effects in his/her physical appearance or functioning attributed to the mother's use of illegal or controlled substance or alcohol during pregnancy. Identification of a Substance-Affected Infant by a healthcare provider may occur at birth, during the infant's development, and/or as symptoms manifest.

When a child is identified as substance affected and referred for assessment CFS conducts a comprehensive safety assessment on families involved in a report of an infant identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure. If the infant is found to be unsafe at the conclusion of the assessment, a safety plan to manage the safety threat is put into place, and a case plan is created with the family to address the parent's capacity to

protect their child and the infant's health and treatment needs. In addition to the case plan a Plan of Care is developed to identify the specific needs of the infant and caregivers. The plans may include substance abuse assessment and treatment services to the parents and may include services to help the parents meet the medical, developmental or other needs of the infant. CFS is developing and refining tracking mechanisms for safety plans and service plans specific to infants identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure. CFS also has made system enhancements to track the number of infants born with and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure.

Additionally, collaborative work with internal and external partners from within the agency, hospitals, health care programs, and home visiting programs, as well as Public Health and Maternal and Child Health Programs occurred to meet the new requirements made by the Comprehensive Addiction and Recovery Act of 2016 (CARA). During FFY 2019 a memorandum of agreement (MOU) was developed and approved with Idaho Hospital Association of Idaho for CARA reporting. The Children's Bureau approved CFS's CARA Program Improvement Plan (PIP) to address the specific steps, such as the MOU, needed to come into compliance with the required provision no later than June 30, 2018. Idaho was not able to come into full compliance with CARA by June of 2018 and has continued to work under a PIP. CFS made additional efforts in CARA implementation during the spring of 2019 and will be submitting an updated PIP report to demonstrate full compliance. FFY 2018 CAPTA appropriations increased funding specific to plans of safe care for substance affected infants. Increased funding will be used for implementation and monitoring of plans of safe care with health care professionals. This will require continued outreach, education, and development of provider policy and/or agency agreement to institutionalize plans of safe care into practice. A multi-disciplinary approach to monitoring plans of safe care will also be addressed through agency policy or agreement by creating a multi-disciplinary committee to review services provided to this population and make recommendations to state and local service provider agencies based on the review.

Idaho successfully completed are CARA PIP by completing the following action steps: engage with partners in adopting a definition of "Infant affected by substance abuse or withdrawal symptoms," develop a document form for Plan of Safe Care, establish a Memorandum of Understanding (MOU) with the Idaho Hospital Association (IHA) to implement reporting requirements and Plans of Safe Care, update Idaho's data system to include required data elements, revise practice standards to include requirements for Plans of Safe Care, implement a system for monitoring implementation of plans of safe care to ensure the referral to and delivery of appropriate services and develop and provide staff training. Idaho received a CARA PIP closeout letter from the Children's Bureau on July 19, 2019.

Amendments to CAPTA by P.L. 114-22

As part of the amendments made to CAPTA by P.L. 114-22, the Justice for Victims of Trafficking Act of 2015, CFS has been making updates to practice standards and state legislative changes to implement the required provisions.

In 2015, CFS implemented a new practice standard, Reporting and Responding to Runaway Youth, Missing Youth, and Sex Trafficking Victims, which provides direction and guidance in the assessment and identification of victims of sex trafficking. The development of the standard was done through consultation and collaboration with local sex trafficking coalitions and community partners, including, but not limited to, law enforcement, child advocates, attorneys, health care professionals, youth, and internal staff. The standard defines several terms including sex trafficking and severe forms of trafficking, as well as guidance for assessment and data tracking. CFS also made changes to the child welfare information system (iCARE) to collect and report data regarding children who are victims of sex trafficking. Additional enhancements have been made to identify and collect data regarding sex trafficking cases at the point of intake in addition to the information gathered during the assessment phase.

Beginning in SFY 2017, CFS plans to utilize and customize training developed through the Capacity Building Center for States as part of the Child Welfare New Worker Child Welfare Academy curriculum on sex trafficking to enhance staff skills in the identification, assessment, and delivery of comprehensive services to victims of sex trafficking. No additional technical assistance has been identified as a need related to the implementation of the amendments to CAPTA made by the Justice for Victims of Trafficking Act of 2015.

During the 2017 legislative session, CFS presented legislation to include definitions of "sex trafficking" and "severe forms of trafficking," as defined in sections 103(9)(A) and (10), into the Idaho Child Protective Act for children under age 18. These proposals were accepted by the Idaho Legislature and went into effect on July 1, 2017.

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(7) STATISTICAL AND SUPPORTING INFORMATION

Information on Child Protective Service Workforce

The following information pertains to Child and Family Services (CFS) workers and supervisors responsible for intake, screening, assessment and investigation of child abuse and neglect reports.

Education, qualifications, and training requirements

Education - All case-carrying staff and their supervisors must have at least a Bachelor's Degree in Social Work or a (very) closely related field.

Licensure - Caseworkers must have a current Social Work license prior to employment and must be maintained during their employment. The Idaho Social Work license requires 20 approved continuing education units (CEUs) per year to maintain the license.

Training - Each new caseworker must complete pre-service training. Training includes a range of topics from laws, rules and policy, through concurrent planning and worker safety. Each new worker must complete each session of the pre-service Academy before they can assume full case responsibility for cases. New employees are required to complete pre-service trainings sessions before completion of their probation period. Child Welfare Social Worker 1s have nine months to complete probation requirements. Child Welfare Social Worker 2s have six months to complete probation requirements.

Advancement - Child Welfare Social Worker 1, 2 and 3 classifications have been developed. Child Welfare Social Worker 1 is the entry level, 2 is an experienced caseworker, and 3 is an experienced caseworker who demonstrates supervisory abilities and works closely with the supervisor to gain experience in "lead work," while still being under supervision themselves.

Demographic information – As of April 2019, CFS employed 279 diverse individuals to serve the racial and ethnical needs of the children and families served in Idaho (Table 10.1)

Table 10.1 Child Welfare Staff Demographics

		Child Welfare Social Worker 1	Child Welfare Social Worker 2	Child Welfare Social Worker 3	Clinician	Child Welfare Supervisor	Total
Number of Filled Positions		20	158	39	16	46	279
Race/ Ethnicity	White	16	136	38	14	42	246
	Black	0	0	0	0	0	0
	American Indian	0	1	0	0	2	3

	Asian/ Pacific Islander	0	0	0	1	0	1
	Hispanic	4	21	1	1	2	29
Gender	Female	18	138	36	11	40	243
	Male	2	20	3	5	6	36

Juvenile Justice Transfers

During FFY 2018, there were five youth who were transferred from the custody of the Idaho Department of Health and Welfare (IDHW) into the custody of the Idaho Department of Juvenile Corrections (IDJC). These youths were in foster care at the time they were adjudicated for a crime, and a judge ordered them into the custody of IDJC. Additionally, a Juvenile Corrections Act Proceeding can be expanded by a judge to a Child Protective Act Proceeding (Idaho Juvenile Rule 16). During FFY 2018, there were 35 such expansions (Table 10.2). This source of this data was information contained in the CFS SACWIS system.

Table 10.2 Juvenile Justice Transfers

Region	Transfers to IDJC FFY 2018	Rule 16 Expansions FFY 2018
Region 1	1	5
Region 2	0	0
Region 3	0	6
Region 4	3	11
Region 5	1	4
Region 6	0	5
Region 7	0	4
Totals	5	35

Education and Training Vouchers (ETV)s

Annual reporting of Education and Training Vouchers awarded.

Table 10.3 ETV Awards

	Total ETVs Awarded	Number of New ETVs
Final Number: 2017-2018 School Year (July 1, 2017 to June 30, 2018)	23	10

2018-2019 School Year (July 1, 2018 to June 30, 2019)	25	11
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Inter-Country Adoptions

In FFY 2018, no children adopted from other countries entered Idaho state custody as a result of the disruption or dissolution of an adoption.

Monthly Caseworker Visit Data

Idaho has consistently met or exceeded statutory performance standards for monthly contact between caseworkers and children in foster care (Table 10.4).

Table 10.4 Worker Visits

Visit Measures	FY 2014	FY 2015	FY 2016	FY 2017	FY2018
Total Contacts Required	14,681	14,291	15,748	17,470	18,951
Total Contacts Made	13,899	13,849	15,162	16,889	18,109
Total Seen in Residence	10,326	10,258	11,541	13,113	14,000
Total Percentage Seen in Residence	74%	74%	76%	78%	74%
Total Percentage Seen	95%	97%	96%	97%	96%