This report covers the period July 1, 2008 – June 30, 2009

TABLE OF CONTENTS

	Page
INTRODUCTION	
Responsible State Agency	
Publicly Funded Child and Family Services Continuum	
Program Improvement Plan	
Consultation Process	
APSR and new 5-year Plan Organization	2
APSR and 5 year summary for 2005-2009	
Goal 1. Children will be safe	
Outcome 1 Children are, First and Foremost, Protected fro	
 Timeliness of initiating investigations of reports of c Repeat Maltreatment 	
Outcome 2. Children are Safely Maintained in their Home.	
and Appropriate	s whenever i ossible
3. Services to family to protect children in home and pr	revent removal7
4. Risk of harm to children	
and caregivers in a timely manner Outcome 1. Children have permanency and stability in thei 5. Foster care re-entries	12
7. Permanency goal for child	
8. Reunification, guardianship, or permanent placement	
9. Adoption	
10. Permanency goal of other planned permanent living	=
12. Placement with siblings	
13. Face to face visits with parents and siblings	
14. Connections	
15. Relative placement	34
Goal III. Child and family well-being Outcome 1. Families have enhanced capacity to provide for	
17. Needs and services of child, parents, foster parents	
18. Child and family involvement in case planning	
19. Worker visits with child	
20. Worker visits with parents	42
Outcome 3. Children receive adequate services to meet the health needs	-
22. Physical health of the child	
23. Mental health of the child	47

Goal 4. Continuously improve the organization's capability to achieve its goals of helping families and children	4.0
SF 1. Statewide Information System	
SF2. Case review system	
28. Process for seeking TPR in accordance with ASFA	.50
29. Process for notifying caregivers of reviews and hearings and for	
opportunity for them to be heard.	
SF3.Quality Assurance System	
31. Identifiable QA system that evaluates the quality of services and	
SF4. Staff and provider training	
SF5. Service Array and Resource Development.	
35. Availability of array of critical services	
36. Accessibility of services across all jurisdiction.37. Ability to individualize services to meet unique needs and	./:
•	75
individualizing services	
SF7. Foster and adoptive parent licensing, recruitment and retention	
CFCIP/ETV report and summary	11 115
ATTACHMENTS	
(A) Keeping Children Safe Review Panels Report and Recommendations – October 2008	
(B) Child Well-Being Standard revised	
(C-1) IL Eligibility Criteria(C-2) Tribal application for IL program services	
(D-1) New Worker Academy evaluation – part 1(D-2) New Worker Academy evaluation – part 2	

Idaho Child and Family Services Plan Progress Report (2008-2009) and 5 Year Plan (2005-2009) Summary

INTRODUCTION

STATE AGENCY

The Idaho Department of Health and Welfare (DHW) 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, Indian child welfare, services to persons with developmental disabilities, and early intervention/ screening for infants and toddlers. The FACS Child and Family Services (CFS) program provides child protection, adoptions and foster care and Indian child welfare in close collaboration with other FACS division programs. CFS services are integrated to reflect the Department's family-centered philosophy which affirms the belief that families are the best place for children to grow and develop. The Child and Family Services program focuses on the entire family unit and builds on family strengths while supporting and empowering families to be self-reliant.

The Division of Family and Community Services is responsible for administering state Title IV-E programs. As part of its Title IV-E responsibility, FACS administers funds and services of the Independent Living (IL) Program under Chafee Foster Care Independence Act of 1999 (P.L. 106-169) and ETV Program. IDHW, FACS Division, also administers the Social Services Block Grant (SSBG), Title IV-B, and Child Abuse Prevention and Treatment Act (CAPTA) Basic Grant programs. The FACS Child and Family Services Program is responsible for the plan.

PROGRAM IMPROVEMENT PLAN

Idaho's CFSR-2 was conducted in April 2008. The state's Self Assessment accurately predicted most of the state's strengths and areas needing improvement. Areas of strength included: quality assurance, staff training and information systems. Areas needing improvement included: placement stability; timely adoptions and family engagement (visits, needs assessment, involvement in case planning).

Idaho kicked off its Program Improvement Plan (PIP) process in June 2008. It included a meeting of key stakeholders, a number of whom were involved in the development of the Self Assessment.

There are a number of items in this plan which we have continued to monitor since the closing of PIP-1. That PIP closed in February 2006. PIP-1 goals are indicated as such in the text. This APSR will report on progress over the past year and the previous 5 years (2005-2009). The improvement strategies captured in our PIP-2 will be included in our CFSR 5 year plan (2010-2014). The PIP Advisory group had many ideas for improvement that were not included in the PIP-2, but are being included in the new CFSR 5 year plan.

CONSULTATION PROCESS

This annual plan incorporates the input of individuals who represent a wide range of agencies and community partners throughout the state. The plan was shared and input on the progress made, including updates for the coming year, was sought from the following groups:

- Central Office Deputy Administrators, Program Managers, and Program Specialists;
- Regional Child Welfare Program Managers, Chiefs Of Social Work, and Supervisors;
- Supreme Court Child Protection Committee (CIP);
- Idaho State and Tribal Indian Child Welfare Committee;
- Casey Family Programs;
- University partners;
- Keeping Children Safe Panel Members (citizen review panels); and
- Governor's Children at Risk Task Force.

Because of the diversity and strength of these groups, Idaho's APSR has depth and perspective beyond what could have been developed by IDHW in isolation. The annual plan is also placed on IDHW's website for review by the public at large.

ORGANIZATION OF THIS APSR and 5 YEAR SUMMARY

Idaho's Annual Progress and Services Report (APSR) for FFY 2009 includes information regarding child welfare services provided through Title IV-B, subparts 1 and 2, Title IV-E, Chafee Foster Care Independence Program (CFCIP), and CAPTA as required.

Using a combination of funding streams including IV-B subparts 1 and 2, CAPTA, CFCIP and ETV, Idaho is able to provide a wide continuum of services and training that fulfill the program purposes of each funding source including: protection and promotion of the welfare of all children; prevention of neglect, abuse or exploitation of children; support of at-risk families through services which allow children to remain with their families or return to their families in a timely manner; promote the safety, permanency and well being of children in foster care and adoptive families and provide training, professional development and support to ensure a wellqualified workforce; intervention and treatment services; foster care; services for kinship care; independent living, and services for youth in other permanent living arrangements. Strategic planning across all programs is ongoing and coordinated to assure that services to increase family safety, permanency, and well-being are integrated and comprehensive. The services and training that IDHW provides is family-centered.

Funding streams are identified by the following acronyms:

CAPTA	Child Abuse Protection and Treatment Act
CFCIP	Chafee Foster Care Independence Program
CIP	Court Improvement Project
CJA	Children's Justice Act
CWS	Child Welfare Services, Title IV-B subpart 1
ETV	Education and Training Voucher Program
GF	State General Funds
PSSF	Promoting Safe and Stable Families, Title IV-B, subpart 2

State of Idaho, June 2009

SANCA	Strengthening Abuse and Neglect Courts Act
TANF	Temporary Assistance for Needy Families
TAFI	Temporary Assistance to Families in Idaho
TT / IT	m'd Bar

IV-E Title IV-E

This APSR and 5 year summary is organized by goals and strategies. Under each strategy the funding source used to finance the strategy is recorded. The overall organization of the APSR and 5 year summary mirrors the child welfare goals of the CFSR.

All of the goals and strategies have been developed with input from community partners through a sustained series of collaborative contacts throughout the year.

Under the strategies for each item, an abbreviated description of previously completed items is retained. This gives the reader information on what has been done in the immediate past what is being worked on currently. Future goals will be contained in the new 2010-2014 plan.

GOAL I. CHILDREN WILL BE SAFE

Outcome 1. Children are, First and Foremost, Protected from Abuse and Neglect

STRATEGIES

Item 1. Timeliness of initiating investigations of reports of child maltreatment

- 1.1 Revise FOCUS report to calculate the percentage of cases that meet timeframes of IDHW Priority Response Guidelines (PIP-1 item)

 Completed 2005
- 1.2 Implement consistent methods to monitor timeliness of investigations. (PIP-1 item) Completed 2004
- 1.3 Review results of monitoring timeliness of initial investigation and implement recommended changes (PIP-1 item).

Funding Source: CAPTA
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Below are the statewide quarterly CQI results for timeliness of investigation gathered in Quarters 17 -20. Idaho's goal is to have face-to-face contact with the child of concern within the required timeframes 90% of the time. Idaho has consistently exceeded this goal in all quarters to date. CFSR-2 data shows a 20 percentage point increase between CFSR-1 (74%) and CFSR-2 (94%). We continue to monitor timeliness of all cases on a monthly basis at the regional level and on a quarterly at the state level. Quarterly feedback is provided to regional staff. The monthly reports are consistent with what we find in the CQI case review - percentages in the 90's. When trouble

spots are detected, the region makes an assessment by examining a detailed report and developing an improvement strategy.

Statewide Timeliness		Qtr 17			Qtr 18			Qtr 19			Qtr 20	
month	April 08	May 08	June 08	July 08	Aug 08	Sept 08	Oct 08	Nov 08	Dec 08	Jan 09	Feb 09	Mar 09
% met guidelines	96	99	98	95	95	95	91	96	97	96	97	97

- 1.4 Develop standards to determine priorities for intake/screening. (PIP-1 item) Completed 2004
- 1.5 Develop and provide training to risk assessment supervisors regarding prioritizing referrals. (PIP-1 item) Completed 2005
- 1.6 Develop and provide training regarding timeliness and the agency's priority response guidelines. (PIP-1 item) Completed 2004
- 1.7 Amend priority response guidelines according to best practice or new mandates. Completed 2005

ITEM 1 - SUMMARY OF ACCOMPLISHMENTS 2005-2009

The Intake/Screening Standard was developed and implemented in 2004. Worker and supervisor trainings followed. Timeliness has been monitored consistently since that time. Monitoring both by the regions and central office has proven to be very helpful in increasing timely adherence to Priority Response Guidelines and approval of variances. It took approximately a year and a half for the CQI measures of timeliness (during the previous 12 months) to catch up with the more immediate monthly/quarterly figures. The monthly/quarterly figures are also more reliable as they a based on every priority response statewide. At the close of PIP-1, regions began selfmonitoring without the requirement to send detailed reports to Central Office.

CFSR-2 case review results confirmed that this was an area of strength. Regions and Central Office will continue to monitor timeliness well into the future.

STRATEGIES

Item 2. Repeat Maltreatment

- 2.1 Establish and implement standards for immediate safety and assessment and re-assessment. (PIP-1 item) Completed 2004
- 2.2 Develop training to assist workers to conduct a thorough family centered safety/risk assessment using the existing CFS Risk Assessment tool as part of a decision making process. (PIP-1 Item) Completed 2004

- 2.3 Deliver training to assist workers to conduct a thorough family centered safety/risk assessment using the existing CFS Risk Assessment tool. (PIP-1 Item)

 Completed 2004
- 2.4 Develop worker skills in interviewing families to assist the worker in conducting a thorough family centered safety/risk assessment. (PIP-1 item) Completed 2004
- 2.5 Develop supervisory skills in monitoring the safety/risk assessment process to reduce likelihood of recurrence. Completed 2004
- 2.6 Monitor regional and state recurrence of maltreatment rates (PIP-1 item).

Funding Source: CAPTA
Target Date for Completion: 2005

Status: Carried over to 2010-2014 plan

Below are quarterly statewide CQI results for (absence of) recurrence of maltreatment gathered in quarters 17-20. Our PIP-1 goal was 90% of cases reviewed should not have a substantiated report of re-maltreatment. We have consistently exceeded our goal during this past year except in the 18th Quarter. At the same time our re-maltreatment data indicator continues to stay well under the standard. CFSR-2 occurred during the 17th quarter and we achieved 87.5%, very close to the 90% criterion. We will continue to monitor recurrence of maltreatment through CQI and Data Profiles.

17 th Quarter CFSR-2	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 – 9/08	10/08 – 12/09	1/09 – 3/09
100%	86%	97%	97%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

Recurrence of Maltreatment National Standard: 6.1% or less

Idaho Baseline 5/03: 9.3% PIP-1 Goal: 8.4%

Seventeen Quarter 4/01/07 3/31/08		Nineteenth Quarter 10/1/07 9/30/08	Twentieth Quarter 1/1/08 12/31/08
2.6%	3.0%	3.3%	3.7%

Idaho Child and Family Services Review Data Profile: March 9, 2009

Standard: 6.1% or less

Fiscal Year	Fiscal Year
2007ab	2008ab*
3.6	2000

^{*}Data not yet available

- 2.7 Develop FOCUS reports to enable staff to access and analyze recurrence data on a statewide and regional basis. (PIP-1 item) Completed 2006
- 2.8 Evaluate the use of substantiated disposition in connection with repeat maltreatment. Discontinued 2006
- 2.9 Seek consultation regarding use of central registry to encourage social workers to accurately disposition cases. Completed 2006
- 2.10 Revise process for entering names on the central registry including finalization of administrative rules related to the central registry. Completed 2008
- 2.11 Develop Central Registry Guidelines and training plan for implementation of the newly revised Central Registry Rules. Completed 2008
- 2.12 Train one hundred percent of CFS social workers and clinicians on dispositioning referrals of child abuse and neglect and the new central registry levels and processes. Completed 2008

ITEM 2 - SUMMARY OF ACCOMPLISHMENTS 2005-2009

In reviewing CQI results from February 2004 to March, 2009, Idaho has consistently maintained positive outcomes in the absence of recurrence of maltreatment.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
94%	97%	94%	92%	94%

*revised instrument

CQI results are also supported by Idaho's Child and Family Services Review Data Profile dated March 9, 2009. National standard is 6.1% or less

Fiscal Year	Fiscal Year	Fiscal Year
2006ab	2007ab	2008ab*
3.9	3.6	

*Data not yet available

The data are consistent and conclusive. By all measures cited above, since CFSR-1, the Department has been effective in maintaining low incidences of repeat maltreatment. While we view this item as a strength, we will continue to monitor it through our CQI process and through the state's Data Profile.

Outcome 2. Children are Safely Maintained in their Homes Whenever Possible and Appropriate

STRATEGIES

Item 3. Services to family to protect children in home and prevent removal

- 3.1 Develop and implement standard for use of Protective Supervision when risk is moderate to high but the case doesn't meet the standard of imminent danger. (PIP-1 item) Completed 2004
- 3.2 Train the judiciary, law enforcement and agency staff to apply the standard of using protective supervision to prevent removal of children from their home. (PIP-1 item) Completed 2004
- 3.3 Establish and implement standards for opening an in-home case for services including development of an individualized case plan and monitoring (PIP-1 item) Completed 2004
- 3.4 Train workers on standards for opening an in-home case for services including development of an individualized case plan and monitoring. (PIP-1 item)

 Completed 2004
- 3.5 Pending release of FOCUS report on in-home cases, Regions will monitor the increase of in-home cases during the quarterly review. (PIP-1 item)

 Completed 2005
- 3.6 Increase the percentage of families receiving services to prevent removal of children from their home while at the same time ensuring their safety. (PIP-1 item) Discontinued 2006
- 3.7 Train CFS risk assessors and law enforcement to make reasonable efforts through the use of safety plans associated with the CFS immediate risk and safety assessment tool. (PIP-1 item) Completed 2004
- 3.8 Develop FOCUS report to identify and monitor the increase of in-home cases. (PIP-1 item) Completed 2005
- 3.9 Develop worker skills in engaging parents to work with CFS to lower the risk of child abuse and neglect without court intervention. (PIP-1 item) Completed -2004
- 3.10 Provide training on family-centered practice to assist social workers to engage parents to work with the Department. Completed 2005

3.11 Train staff to go beyond reasonable efforts and to begin "active efforts" as soon as a child is identified as possibly American Indian/Alaska Native and to continue for both pre and post removal of the child.

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Training on the Indian Child Welfare Act continues to be provided to new workers through the Child Welfare Academy. The ICWA on-line training and certificate of completion, offered by the National Indian Child Welfare Association, is a prerequisite to completing the Cultural Competency curriculum of the Child Welfare Academy.

An Active Effort Principle document is available for agency workers, which provides tips and suggestions to distinguish between reasonable and active efforts.

Compliance with the ICWA active efforts requirement continues to be a component of the ongoing ICWA CQI process. Below are comparable statewide 2006 through 2008 CQI results for "Active Efforts" for children in care who are identified as Indian.

ICWA CQI Item	2006	2007	2008
Active efforts made prior to removal	51%	44%	54%
Active Efforts to Reunify with family	90%	79%	76%
At permanency hearings, the court found			
that active efforts were made to finalize	45%	27%	31%
permanent plan			

The criteria for this multi-section item is that the agency made active efforts prior to removal to prevent the break up of the Indian family, to reunify the child with his/her family, and that the court found that active efforts were made to finalize a permanent plan. The threshold for this item is 100% compliance. Results show a continued opportunity to improve.

With collaboration including the Court Improvement Project and the Indian Child Welfare Advisory Council, the agency is taking a multi-disciplinary approach to improving compliance in practice and in system processes related to active efforts. Focused-training on active efforts will be offered at the 2009 ICWA Conference. Regional training is planned between CFS and the Court Improvement Project team to offer ICWA-related trainings to judges and attorneys. Efforts are underway to revise CFS and court forms to offer a streamlined and consistent method of documenting and confirming active efforts.

ITEM 3 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

This item was determined to be an area needing improvement in CFSR-1 and CFSR-2. To improve outcomes, in 2004, CFS developed the "Family Preservation/In-home Family Services" Standard. CFS now routinely monitors the number of in-home cases which have increased substantially. The increase is a result of regional contracts with private providers for case management services. Prior to PIP-1 and the in-home case management contracts, cases determined to have a moderate level of risk may not have been opened for services due to high CFS case loads.

"Active efforts" to prevent removal of American Indian/Alaska Native youth continues to be an area need improving as demonstrated by ICWA CQI's conducted over the past three years. As noted above, improvement has required a multi-pronged approach including training for workers and judges and improving the reliability of the ICWA CQI instrument. These efforts will be continued under the state's new 5 year plan.

Improvement in Item 3 will continue to be monitored through PIP-2. Since Idaho's CQI data is not consistent with the finding of CFSR-2, a new base-line will be established for this item and a PIP goal will be negotiated.

STRATEGIES

Item 4. Risk of harm to children

- 4.1 Develop and implement a standardized process for responding to child abuse and neglect allegations made on members of foster families (PIP-1 item) Completed 2004
- 4.2 Develop and implement a standardized process for responding to child abuse and neglect allegations made on an employee of a residential facility. (PIP-1 item)

 Completed 2004
- 4.3 Monitor and decrease risk of harm to children through CQI process (PIP-1 item).

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Below are the statewide quarterly CQI results of Item 4 - Risk of Harm to Children gathered in Quarters 17-20. The criteria for this item is that the agency made or is making diligent efforts to reduce the risk of harm to the child(ren) of concern. Idaho's PIP-1 goal was to have risk reduced in 76% of the cases reviewed. Idaho has consistently exceeded this goal during the current reporting period. The CFSR-2, however, yielded a 73% on this item making it an Area Needing Improvement. Due to the discrepancy between the CFSR-2 and CQI figures, a new 6 month baseline is being established for PIP-2 monitoring beginning in April 2009.

17 th Quarter	18 th Quarter	19 th Quarter	20 th \ Quarter
CFSR-2 4/08-6/08	7/08 – 9/08	10/08 – 12/09	1/09 – 3/09
100%	84%	83%	84%
15 cases	45 cases	83 cases	45 cases
reviewed	reviewed	reviewed	reviewed

4.4 Update practice standard on responding to reports involving methamphetamine labs.

Funding Source: CWS

Target Date for Completion: revised from 2007 to 2009

Status: Discontinued - 2009

Due to the dramatic decrease in methamphetamine labs in Idaho and the presence of the State's Drug Endangered Protocol, this strategy has been discontinued.

4.5 Establish a reliable method of monitoring the number of child welfare cases where CP issues involve drugs and/or alcohol.

Funding Source: CWS
Target Date for Completion: 2007

Status: Completed - 2008

The Substance Abuse Program, in IDHW's Division of Behavioral Health, collects data from treatment facilities throughout the state. Treatment facilities track the number of referrals made to them from Child and Family Services. This data does not reflect all parents and families who become involved with Child and Family Services due to substance abuse. Those individuals who refused to participate in a substance abuse evaluation or subsequent treatment are not included.

In SFY 2008, 981 clients receiving substance abuse treatment also had an open child protection case. Of these 981 clients, 292 were male and 676 were female. This number represents a small decrease in the number of parents with open child protection cases receiving substance abuse treatment from 2007, but it is projected that this number will increase in 2009. In SFY 2008, substance abuse clients who are involved in the child protection system reported methamphetamine as the primary substance used 49% of the time – down from 55% in 2007. Individuals receiving substance abuse treatment and have an open child protection case stay in treatment an average of 106 days and are offered ancillary services as needed in the areas of housing, child care, transportation, family therapy, life skills education, and case management.

The FOCUS data system was enhanced in 2007 to require a social worker to enter a "contributing condition" on every removal episode, making this entry no longer optional. The FOCUS *Summary Counts for Presenting Issues with Substance Abuse Issues* report was run for the period 7/1/2008 to 3/20/2009. This report looks at child protection referrals where substance abuse is an identified issue. According to the report, 25% of referrals which resulted in a

removal episode were the result of substance abuse issues. This number is substantially lower than national figures and does not appear to accurately reflect Idaho's families involved with CFS. This report is designed so that a social worker could identify up to fifteen contributing conditions on any given case. Since only one contributing condition entry is required, and families often have multiple contributing conditions, it could be that some staff only enter a primary contributing condition rather than all relevant contributing conditions. This low figure reflects a continued need to train CFS staff on how to enter the information so that the data collected by reports is accurate.

- 4.6 Enhance Idaho's disaster plan for assuring the safety of children in alternate care. Completed 2007
- 4.7 Train resource parents related to their role in disaster plans for children in foster care. Completed 2008

ITEM 4 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

CFS has been effective in training staff to reduce the risk of harm to children in foster care. However, frequent staff turnover requires that this training continue to be delivered on a regular basis. Another continuing challenge is in the area of formal re-assessment prior to case closure. Although social workers state they are "informally" re-assessing safety and staffing cases frequently with their supervisor, in some regions it appears that not all staff are using the prescribed re-assessment tool with in-home and out-of-home cases.

According to our CQI results (shown below), it does appear that over the past five years, CFS is reducing the risk of harm to children. We are unsure why this item was rated lower during Quarters 17-20.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
94%	95%	95%	90%	85%

^{*} revised instrument

We will continue to monitor our progress on this item through PIP-2.

GOAL II. PROVIDE STABLE, NURTURING AND PERMANENT RELATIONSHIPS BETWEEN CHILDREN AND CAREGIVERS IN A TIMELY MANNER

Outcome 1. Children have permanency and stability in their living situations

STRATEGIES

Item 5. Foster care re-entries

- 5.1 Training workers and supervisors in the use of the CFS Risk Re-Assessment Tool to complete a reassessment as part of decision-making for reunification or case closure. (PIP- 1 item) Completed 2004
- 5.2 Develop and implement standards regarding what must happen prior to case closure and post case closure to prevent foster care re-entry. (PIP-1 item) Completed 2004
- 5.3 Improve availability of substance abuse services which focus on relapse planning to prevent re-entry into foster care. (PIP-1 item) Completed 2007
- 5.4 Prior to availability of FOCUS enhancement (see 5.7), monitor administration of reassessment when making reunification, case closure or other case decisions in which risk/safety is a critical factor. (PIP-1 item) Discontinued 2007
- 5.4.1 Idaho will revise the CFS re-assessment tool so it will be relevant to the field. Completed 2005
- 5.5 Monitor the percentage of children who re-entered foster care after being discharged from a prior entry within the last 12 months. (PIP-1 item)

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Below are the quarterly statewide CQI results for the most recent reporting period. Idaho's goal was to have no re-entry into foster care in 90% of the cases reviewed. CFSR-2 determined that 83% of children in the review sample had not re-entered foster care within 12 months. This percentage is just short of the 90% criteria.

17 th Quarter	18 th Quarter	19 th Quarter	20 th Quarter
CFSR-2 4/08-6/08	7/08 – 9/08	10/08 – 12/09	1/09 – 3/09
100%	100%	83%	100%
15 cases	45 cases	83 cases	45 cases
reviewed	reviewed	reviewed	reviewed

Re-entry into Foster Care National Standard: 8.6% or less

Idaho Baseline 5/03: 11.9% PIP-1 Goal: 10.5%

Idaho Child and Family Services Review Data Profile dated March 9, 2009

Permanency Composite 1: Measure C1-4: Foster Care Re-entry 25th Percentile = 9.9% (lower score is preferable in this measure)

PIP-2 Goal: 9.55%

Federal FY	Federal FY
2007ab	2008ab
11.6%	10%

- 5.6 Provide information to magistrate judges regarding the use of court-ordered home visitation not to exceed 6 months (PIP-1 item) Completed 2004
- 5.7 Develop and implement a FOCUS alert and integrity rule that prevents a social worker from closing an open case prior to completing a re-assessment.(PIP-1 item)

 Completed 2005
- 5.8 Develop and implement a FOCUS report to identify and analyze cases of re-entry of children into foster care. (PIP-1 item) Completed 2006
- 5.9 Develop a state child mortality review team to review the deaths of children who died as a result of child abuse and neglect.

Funding Source: CAPTA
Target Date for Completion: 2007

Status: Carried over to 2010-2014 plan

In 2006, the Department of Health and Welfare received technical assistance from the National Child Welfare Resource Center (NCWRC) regarding the re-establishment of a statewide Child Mortality/Death Review Team. The Governor's Children At Risk Task Force (CARTF) agreed to pursue the issue as it is one of the goals in their 2006-2009 strategic plan. In January 2007, a strategy session was held with the Governor's CARTF and it was decided that a legislative mandate would be sought to support the development and sustainability of a state child mortality review team. The Task Force distributed informational packets to potential legislative sponsors to develop awareness of the need for a statewide, multi-disciplinary, child mortality review team.

Sponsors were found for House Bill 511aa and it was drafted. During the 2008 legislative session, the bill passed the House and Senate Health and Welfare Committees and the House Floor with a 63-5 vote. The bill was held in the Senate Health and Welfare Committee and died there. The CARTF and the Department are currently looking for funding sources prior to reintroducing the bill.

ITEM 5 - SUMMARY OF ACCOMPLISHMENTS 2005-2009

The CQI data below, demonstrates that Child and Family Services has been successful in reducing the rate of foster care re-entry.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
91%	98%	100%	100%	94%

^{*}revised instrument

Idaho Data Profile (3/9/09)

CW Outcomes	FFY	FFY	FFY
Data 2005	2006ab	2007ab	2008ab
9.2%	11.9%	11.6%	10%

Significant progress has been made in collaborating with the court system. Initially, judges were ordering children to return home under protective supervision. Many judges are now sending children home on court ordered home visit prior to moving to protective supervision. This additional period of close state supervision allows CFS workers to be more involved and assist families in a planned transition while addressing any concerns that may arise. Additionally, CFS managers are currently using the FOCUS Foster Care Re-entry Report to assess why children are returning to foster care.

We will continue to monitor foster care re-entry. Under PIP-2, those regions not meeting the standard for re-entry will analyze their regional re-entry data, assess their strengths and their challenges, and develop a regional plan with a specific goal for reduction in foster care re-entries.

STRATEGIES

Item 6. Stability of foster care placement

6.1 Monitor the stability of foster care placements by reviewing the FOCUS Child Welfare Outcome Report quarterly. (PIP-1 item 6.4)

Funding Source: IV-E
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Stability of foster care placements has been monitored quarterly through the FOCUS Child Welfare Outcomes Report. Idaho has consistently exceeded its PIP-1 goal since the early PIP-1 implementation. As can be seen below, Idaho has met or exceeded the national standard each quarter of the current reporting period until the 20th.

National Standard for Stability: 86.7% or more

Idaho Baseline 5/03: 81.1% PIP-1 Goal: 83%

CFSR

Seventeenth	Eighteenth	Nineteenth	Twentieth Quarter 1/1/08 12/31/08
Quarter	Quarter	Quarter	
4/01/07	7/1/07	10/1/07	
3/31/08	6/30/08	9/30/08	
88.1%	87.9%	87.3%	86.4%

Idaho Child and Family Services Review Data Profile dated March 9, 2009:

Permanency Composite 4: Placement Stability

National Standard 101.5 or higher PIP-2 Goal: 100.2

Federal FY	Federal FY
2007ab	2008ab
91.3	97.3

- 6.2 Develop standard for disclosure of information to foster parent(s) regarding children they are being asked to foster. (PIP-1 item 6.7) Completed 2004
- 6.3 Train staff and foster parents on full disclosure standard. (PIP-1 item 6.8) Completed 2004
- 6.4 Monitor compliance with full disclosure standards. (PIP-1 item 6.9)

Funding Source: IV-E
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Compliance with the "full disclosure" standard continues to be monitored through the quarterly CQI case review (see below). Foster parents are interviewed and asked if they received adequate information to foster the children place in their home. Idaho's PIP-1 improvement goal is 90%. This continues to be an area of strength.

17 th Quarter CFSR-2	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 - 9/08	10/08 - 12/09	1/09 – 3/09
100%	91%	91%	100%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

6.5 Develop readily accessible resources for foster parents. (PIP-1 item 6.10) Completed - 2004

- 6.6 Develop and implement a FOCUS report to analyze and monitor multiple placements and stability of children in foster care. (PIP-1 item 6.15) Completed 2006
- 6.7 Monitor regional and state foster care stability rates. (PIP-1 item 6.16)

Funding Source: IV-E
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Foster care stability (2 or fewer placement settings for children in care for less than 12 months) is also measured through quarterly CQI case reviews (see below). A case will be ANI if the child has lived in more than 1 placement setting during the period under review and any changes in setting were not part of the child's permanency goal or the current placement is not stable. PIP-1 goal was 83%. The CSFR-2 resulted in a score of 79% which is significantly less than the current criteria of 90%.

17 th Quarter CFSR-2	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 - 9/08	10/08 - 12/09	1/09 - 3/09
88%	89%	88%	64%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

ITEM 6 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

As demonstrated by the CQI data below, maintaining stability for children in foster care continues to be a challenge. Our Idaho Data Profile Composite C-4 shows an upward trend, however, our CQI results based on a much smaller sample appears less positive.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
81%	92%	85%	76%	75%

^{*}revised instrument

Idaho Data Profile (3/9/09) Composite C-4 PIP-2 Goal: 100.2

Federal FY	Federal FY	Federal FY
2006ab	2007ab	2008ab
92.8	91.3	97.3

Research findings have shown that placement stability is enhanced by support to foster parents, including providing adequate and timely information; an adequate number of foster homes so that the most appropriate home can be found for an individual child; specialized placements to work with children with behavioral problems; placement with relatives; and not using emergency

shelters or temporary placements. During the last five years the following steps have been taken to improve Idaho's placement stability:

- Standards have been developed to improve communication and contact between resource parents and social workers;
- Regional and statewide recruitment efforts are ongoing to increase the numbers of both general and specialized resource family homes so social workers can make the most appropriate match with a resource family who can best meet the child's needs;
- Resource parents are provided initial and ongoing training in order to prepare them for the challenges and needs of children placed in their homes;
- Social workers have increased the number of children placed with relatives; and
- Stability of children in foster care is strictly monitored through the Department's CQI process;

Idaho will continue efforts to improve stability outcomes for children and youth as a critical part of PIP-2.

STRATEGIES

Item 7. Permanency goal for child

- 7.1 Develop and implement concurrent planning standard which includes time frames and critical decision making points in a case. (PIP-1 item)

 Completed 2004
- 7.2 Train workers on concurrent planning standards. (PIP-1 item) Completed 2004
- 7.3 Monitor establishment of an appropriate permanency goal for a child in a timely manner. (PIP-1 item)

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Timeliness of established permanency goals is monitored statewide through CQI case reviews (see below). Idaho's PIP-1 goal was set at 74%. We have consistently struggled with this outcome. CFSR-2 results of 73% confirm continued difficulties with the establishment of permanency goals in a timely manner. This will be a major focus of PIP-2. The PIP-2 improvement goal is 73.1%.

17 th Quarter	18 th Quarter	19 th Quarter	20 th Quarter
CFSR-2			
4/08-6/08	7/08 – 9/08	10/08 - 12/09	1/09 - 3/09
75%	71%	68%	64%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

- 7.4 Develop a judicial checklist to assist judges in monitoring concurrent planning at judicial reviews. (PIP-1 item) Completed 2004
- 7.5 Deliver training on monitoring concurrent planning at judicial reviews to judges, prosecutors, CASA and IDHW staff. (PIP-1 item) Completed 2005
- 7.6 Assess current practice issues and develop plan for addressing cessation of reunification efforts. (PIP-1 item) Completed 2004
- 7.7 Incorporate concurrent planning in Child Welfare Academy. Completed 2004
- 7.8 Ensure timely TPR filing by developing regional protocols to identify whether a county prosecutor or regional Deputy Attorney General will fulfill that role. (PIP-1 item 28.4) Completed -2004
- 7.9 Train judges, prosecutors, IDHW staff, defense attorney and CASA on the importance of timely permanency in a child's life. (PIP-1 item 28.5)

 Completed 2005

ITEM 7 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

Since 2004, Idaho has established a solid foundation for permanency planning that includes development, implementation, and training of new standards; quarterly CQI case reviews; a specialized adoption CQI; concurrent planning reviews; FOCUS Child Welfare Outcomes monitoring; and planning/training with the courts and other legal personnel. Despite these efforts, some judges and CFS workers appear reluctant to fully embrace the practice of concurrent planning as indicated by our CQI results below.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
82%	76%	80%	66%	68%

^{*}revised instrument

This item will require ongoing training and collaboration with the Department and the courts. Continued work on item 7 will be reflected in new strategies in PIP-2 and our 2010-2014 CFSP.

STRATEGIES

Item 8. Reunification, guardianship, or permanent placement with relatives

8.1 Develop and implement standards and resources for identifying, locating, and engaging parents who are unidentified, incarcerated or living long distances from their children to assure reasonable efforts to reunify the family are addressed and other relative placements are identified. (PIP-1 item) Completed - 2004

- 8.2 Train CFS staff to identify, locate and engage parents. (PIP-1 item) Completed 2004
- 8.3 Monitor compliance with the agency achieving the goal of reunification, guardianship or permanent placement with a relative within 12 months of the date the child entered foster care. (PIP-1 item)

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

CFS monitors compliance in achieving reunification, guardianship or permanent placement with a relative within 12 months of the date the child entered foster care through the quarterly CQI reviews and the CW Outcomes Report. The PIP-1 goal was 65%. Below are the CQI case review results for quarter 17-20. CFSR-2 found a 19 percentage point improvement between performance on CFSR-1 (55%) and CFSR-2 (74%) on this item.

17 th Quarter	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 – 9/08	10/08 - 12/09	1/09 – 3/09
75%	80%	81%	100%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

8.4 Monitor the length of time to achieve a permanency goal of reunification by reviewing the FOCUS Child Welfare Outcome Report quarterly. (PIP-1 item)

Funding Source: CWS
Target Date for Completion: Ongoing
Status: Ongoing

During this reporting period, we began to rely on the CFSR Data Profile rather than the CW Outcomes report. The results are presented below. The most recent data profile indicates that we have fallen before the 75th percentile during the last year.

Idaho Child and Family Services Review Data Profile dated March 9, 2009:

Permanency Composite 1: Measure C1-1 – Exits to reunification in less than 12 months 75th Percentile = 75.2%

Federal FY	Federal FY
2007ab	2008ab
81.3%	73.6%

ITEM 8 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

To address timely reunification, the Department has focused on strengthening family centered practice and implementing Family Group Decision Making. Parents are encouraged to identify their family's needs, participate in the development of their case plan, and access services and resources so their children can remain safely in their home or be reunited as soon as it is safely possible. As indicated by our latest Data Profile (see below) as our re-entry outcomes improve, there is a decrease in our exits to reunification (see item 5). However, our CQI results continue to improve.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
66%	61%	75%	76%	85%

Idaho Data Profile (3/9/09) Composite C-1-1 (exits to reunification in less than 12 months)

CW Outcomes Report 2005	Federal FY 2006ab	Federal FY 2007ab	Federal FY 2008ab
89.4%	84.5%	81.3%	73.6%

In assessing concerns related to item 8, a challenge to timely reunification is parental substance abuse treatment, where recovery often becomes a complex and time uncertain process. We will closely monitor this item, not only using future CQI results but Data Profiles at six month intervals.

STRATEGIES Item 9. Adoption

- 9.1 Develop and implement standards for timely paternity testing and locating absent parents. Also see 28.6 (PIP-1 item 9.3) Completed 2004
- 9.2 Conduct training on standards for Child Support and CFS staff. Also see 28.6 (PIP-1 item 9.4) Completed 2004
- 9.3 Develop and implement standards for due process and notification for TPR on all potential fathers to clarify IDHW's position regarding best practice procedures in regard to Idaho's putative father's statute. Also see 28.6 (PIP-1 item 9.5) Completed 2004
- 9.4 Develop standard to increase timely completion of termination and adoption paperwork requirements (see benchmark 7.2.2). Also see 28.3 (PIP-1 item 9.6) Completed 2004

- 9.5 Train workers on standard for timely completion of termination and adoption paperwork. (PIP-1 item 9.7) Completed 2004
- 9.6 Monitor finalization of adoptions within 24 months by reviewing the FOCUS Child Welfare Outcome Report quarterly. (PIP-1 item 9.8)

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

The CW Outcomes Report has been replaced by the Data Composites for reporting purposes. We continue to struggle to get adoptions finalized in 24 months. As part of PIP-2, regions have begun process mapping of adoptions to assist in identifying where the delays are actually occurring and making recommendations for improvement.

Permanency Composite 2: Measure C2-1 – Exits to adoption in less than 24 months 75th Percentile = 36.6%

Federal FY	Federal FY
2007ab	2008ab
32.1%	17.7%

9.7 When the goal is adoption, monitor whether the adoption is likely to finalize within 24 months. (PIP-1 item 9.9)

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Statewide CQI case reviews monitored the likelihood of finalization of adoptions within 24 months. Idaho's PIP-1 goal was 65%. Quarterly reviews 17 - 20 provided the following data. CFSR-2 produced a score of 31% resulting in an area needing improvement.

17 th Quarter	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 – 9/08	10/08 - 12/09	1/09 – 3/09
75%	64%	32%	50%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

9.8 Provide annual adoption training for new child welfare staff. Completed - 2004

9.9 Provide annual supervisor training on monitoring adoption process and adoption finalization.

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

The Permanency Program Specialist has continued to conduct quarterly statewide conference calls with Department permanency supervisors. Social workers are also able to participate in the calls. Conference calls were held on September 29, 2008, January 26, 2009 and April 13, 2009. One call was canceled due to a process mapping project. Topics covered during the call have included PIP-2, Adoption Assistance, the Idaho Home Study Project, adoption file storage and the use of updated adoption documents.

Training and consultation regarding adoption issues is provided by the Permanency Program Specialist at the request of regions. Regional consultation and training regarding the concurrent planning process and regional procedures related to adoption finalization was provided on July 15, 2008 in one region. A second region has scheduled a 1-day adoption supervisor training for June 5, 2009. The agenda includes negotiating IV-E and state-funded adoption assistance, time-frames for the adoption process, Idaho adoption policies and tools to support social workers.

Process mapping of regional and statewide adoption practice was conducted in all seven regions between August and November 2008. Child welfare supervisors from adoptions foster care licensing and child protection participated as did social workers from these programs. The need for changes to the adoption court report process and dual foster care/adoption home studies was identified as a result of the process mapping. Revisions to the adoption court report were completed in April 2009. The role of dual foster care/adoption home studies is being considered by a statewide workgroup.

A Permanency Matrix was developed and implemented in early 2009 to assist supervisors and managers in tracking legal and placement issues related to adoption time-frames. The purpose of the Matrix is to assist in the identification of issues preventing timeliness of adoption.

Supervisors continue to utilize the Competency-Based Learning Contract (CBLC) to structure the learning and monitoring of social worker acquisition of adoption competencies learned at the CFS Core Adoption Academy.

- 9.10 Initiate proposal to amend the Juvenile Court Rules to allow for expedited cases involving appeals of Termination of Parental Rights. (PIP-1 item 28.1)
 Completed 2005
- 9.11 Develop time frames for CFS social workers to complete the necessary paperwork to prepare a case for TPR. (PIP-1 item 28.3) Completed 2004
- 9.12 Develop standards for timely paternity testing, locating absent parents, and notification for TPR on all potential fathers to clarify IDHW's position regarding Idaho's putative father statute. (PIP-1 item 28.6) Completed 2004

9.13 Provide quarterly adoption training via e-mail or teleconference to regional adoption staff and, if resources permit, private adoption agencies and Certified Adoption Professionals.

Funding Source: IV-E/CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Beginning in July 2008, the CFS Core Academy curriculum on concurrent planning was revised to include additional training regarding permanency and an overview of adoption. All new social workers are required to attend the Core Academy. Supervisors utilize the Competency-Based Learning Contract (CBLC) to monitor social worker acquisition of competencies learned at the Core Academy.

During the statewide Child Welfare Conference in September 2008, training was offered on transitioning children to permanency. The Conference was attended by social workers, supervisors and managers from throughout Idaho. Attendees also had the opportunity to participate in training on preparing children for permanency presented by Darla Henry.

The Permanency Program Specialist continues to participate in monthly Treasure Valley Adoption Council meetings in Boise. Private agency staff, Certified Adoption Professionals and Department social workers participate in these meetings. The Permanency Program Specialist presented information on processing home studies completed by Certified Adoption Professionals and a brief overview of IV-E Adoption Assistance in September 2008. Information regarding the Adam Walsh Act was provided in February 2009.

Adoption training is scheduled for June 2009 through a Department contract with Northwest Resource Associates. Barbara Pearson will be presenting information regarding disclosure, developing and working an adoption plan and preparing children for adoption. The Permanency Program Specialist will be following-up with social workers regarding newly revised forms as well as discussing adoption assistance. Training is scheduled to occur at four sites in the state to encourage staff participation. Certified Adoption Professionals will be invited to attend.

CFS provides ongoing assistance and consultation to Department staff, private adoption agencies and Certified Adoption Professionals through telephone conversations, face-to-face meetings and e-mails.

- 9.14 Collaborate with private adoption agencies to train their trainers to present the PRIDE foster and pre-adoptive preparation/training. Completed 2008
- 9.15 Develop a practice standard on criminal history background checks as they relate to adoptions and foster care. Completed 2007
- 9.16 Review funding streams including Title IV-E in an attempt to maximize funds for adoption recruitment. Completed 2006

9.17 Identify and implement additional adoption recruitment strategies.

Funding Source: IV-E/CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

The Department currently contracts with Special Needs Adoptive Parents (SNAPS) to provide child specific recruitment activities through the Wednesday's Child Program. Children referred to SNAPS have professional portraits taken, have the opportunity to participate in a television feature and are listed on the Idaho Wednesday's Child, Northwest Adoption Exchange and AdoptUsKids websites. Sixty-seven Idaho children were featured on the websites and 42 children participated in televised recruitment between July 2008 and March 2009. SNAPS utilizes a selection of the professional portraits for a Heart Gallery. The Heart Gallery travels to community events and is also available for viewing on-line. Since the summer of 2008, SNAPS has offered the Mentor Program for Foster Youth for children residing in Southwest Idaho. Children are assigned a mentor with whom they participate in individual and group activities. Additionally, SNAPS houses the Idaho Home Study Project which allows families interested in special needs adoption to post their home studies on-line to be easily accessed by Department social workers.

Wendy's Wonderful Kids (WWK) is a program sponsored by a grant from the Dave Thomas Foundation for Adoption (DTFA) awarded to SNAPS. WWK provides child-specific recruitment activities for children available for adoption. Due to the program's participation in research activities, not all children referred have been able to receive services. However, between July 2008 and March 2009, WWK reports finalizing one adoption and placements of three children in pre-adoptive homes and one child in a pre-guardianship home. 12 children remain in need of adoptive placement.

A time-limited contract with Northwest Resource Associates ended in December 2008. Eight children from Idaho were able to participate in child specific recruitment activities. Three children were moved to pre-adoptive placements, one child was placed in a guardianship, one child's permanent plan changed to long-term foster care and three children remain in need of adoptive placement.

In November 2008, the Department participated at an Adoption Day event during which the Governor's Adoption Awareness Month Proclamation was read by the First Lady Laurie Otter. Foster/Adopt promotional items were provided to regional offices along with ideas and resources available for recruitment activities. Information was provided to television stations and newspapers regarding statewide and national statistics and activities related to adoption.

The Permanency Program Specialist is participating in a statewide workgroup focusing on the recruitment and retention of resource families. AdoptUsKids is providing consultation to assist in the development of a statewide recruitment plan, which will include the recruitment of concurrent planning families. This plan will be part of the new 5 year plan.

9.18 Revise adoption manual and forms.

Funding Source: IV-E/CWS
Target Date for Completion: February 2009

Status: Carried over to 2010-2014 plan

Adoption specific material will be incorporated into the CFS Child Welfare Manual which has not yet been finalized. Discussion occurred regarding the benefits and challenges of including concurrent planning and adoption topics throughout the manual as opposed to limiting them to separate sections. As a result, concurrent planning will be included both throughout the manual and in a separate section.

Numerous updates and revisions have occurred to forms related to adoption. The Adoption Assistance Agreement was revised to include the disclosure of tax credit information and educational enrollment required by the Fostering Connections Act. In April 2009, the new adoption court report was implemented. Working closely with Department legal counsel, the Legal Risk Adoptive Placement Agreement was revised to allow for finalization of some legal risk adoptions. New "Child Social and Medical Information" forms are in the final stages of completion, and should be implemented by May 2009.

9.19 Revise Idaho administrative rules to clarify the adoption assistance process. Completed – 2007

Item 9 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

Since 2004, Idaho has taken a multi-faceted approach to reduce the time it takes for children to achieve permanency through adoption. Efforts have included ongoing training of supervisors and social workers regarding expectations related to timeframes and standards regarding adoption-related issues. Recruitment programs were expanded on regional and statewide levels while collaboration with community based agencies resulted in additional training options for prospective adoptive parents. New legal options for expedited appeals, revised adoption forms and clarified rules regarding Adoption Assistance are also in place.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
43%	39%	54%	65%	48%

^{*}revised instrument

Idaho Data Profile (3/9/09) Composite C-2-1:

2005 CW Outcomes Report	Federal FY 2006ab	Federal FY 2007ab	Federal FY 2008ab
24.8%	32.1%	32.1%	17.7%

While some improvement was made initially, our CQI, CW Outcomes Report and federal outcomes data indicate progress has not been maintained. One factor impacting the data appears to be the finalizations of adoptions for children who have been in foster care for several years. However, the challenge of fully implementing concurrent planning, including early identification of permanent resources, also appears to have a negative impact. This item will require ongoing training and collaboration between the Department and the courts. Continued work on Item 9 will be reflected in new strategies in PIP-2 and our 2010-1014 CFSP.

SUPPORTING DOCUMENTATION

Adoption Incentive Funds

Idaho received \$60,000.00 in Adoption Incentive Funds in 2008. The funds were split between statewide and regional use. \$28,000.00 was utilized to remove barriers by promoting adoptions through additional Adoption Assistance. The remainder of the funds was utilized by one region to support a contract for recruitment of families interested in adopting children through the foster care system.

Inter Country Adoptions

In 2008-2009, one child adopted from a foreign country entered Idaho's foster care system and the adoption was subsequently dissolved. The parents adopted a sibling group of four from Romania through the Tree of Life Adoption Agency in January 2001. All four children were placed in foster care in Maine in October 2005. The adoptive parents voluntarily terminated their parental rights to one of the children and three returned home. The family then moved to Montana and later to Idaho where one of the three remaining children, a 13 year old girl, entered foster care in July 2008. The adoptive parents voluntarily terminated their parental rights four months later. The permanent plan for this child is adoption by her current foster parents.

STRATEGIES

Item 10. Permanency goal of other planned permanent living arrangement

- 10.1 Develop and implement permanency practice standards for older youth. (PIP-1 item) Completed 2004
- 10.2 Train staff on permanency practice standards for older youth. (PIP-1 item) Completed 2004
- 10.3 Monitor whether the current permanency goal of long term foster care is being achieved as measured by stability of the placement and if the youth is receiving appropriate services. (PIP-1 item)

Funding Source: IV-E
Target Date for Completion: Ongoing
Status: Ended -2008

As part of PIP-1, CFS completed specialized CQIs in 2006 and 2007 because random samples of our regular CQI did not produce an adequate number of cases. During CFSR-2, the CFSR

stratified sample was designed to produce additional data for item 10. In conjunction with Permanency Composite 3, we felt we would have sufficient information to monitor this item. The composite information and results of CFSR-2 were helpful, but they did not produce the quantity or quality needed to monitor whether OPPLA goals are being achieved. The finding of CFSR-2 found Item 10 was rated a strength in 80% of the cases reviewed. This percentage is comparable to the CQI quarterly case reviews summarized below in Item 10 Summary of Accomplishments 2005-2009.

10.4 Monitor the percentage of youth whose goal is long term foster care who have an independent living plan. (PIP-1 item)

Funding Source: IV-E/CFCIP
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Currently our FOCUS/SACWIS system is able to report the number of youth eligible for Independent Living (IL) Services, but does not report an accurate count of the number youth who actually have an IL plan. An analysis will be completed to determine how to improve the accuracy of this report and a request for an enhancement to FOCUS has been made.

The current FOCUS report indicates that of the 1,235 youth eligible for IL from April 1, 2008 and March 31, 2009, 376 (29%) had a written IL plan or had an IL plan incorporated into their service plan, according to statewide FOCUS data. During the CFSR-2 exit meeting, it was noted that youth interviewed as part of the review, are aware of their IL plans.

- 10.5 Develop resources for "permanency options" counseling for youth who do not have the permanency goal of adoption. (PIP-1 item) Completed 2004
- 10.6 Research concept of open adoption for youth through review of other state's open (PIP-1 item) Completed 2004
- 10.7 Introduce open adoption legislation in the 2005 legislative session. (PIP-1 item) Completed 2007 Carried over to 2010-2014 plan

Item 10 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

Quarters	Quarters	Quarters	Quarters	Quarters
1-4	5-8	9-12*	13-16	17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
92%	62%	81%	89%	81%

*revised instrument

In addition to the "Working with Older Youth" standard, three new tools were added to assist staff in their efforts to create permanency for older youth. The "Permanency Pact" from Fosterclub was included to define permanency options meant to support older youth leaving foster care. The "Declaration of Commitment to Provide Permanent Living Arrangement" was created with the intent of establishing a written commitment from the care provider to provide a permanent living arrangement until the youth reaches 18 years of age. Lastly, the "Mutual Agreement for Youth Turning 18 Years of Age" was developed to clearly define the terms under which a youth may remain in foster care past their 18th birthday. For the purpose of completing their secondary education, Idaho will continue to work on this item through PIP-2 by preparing older youth to have life skills to successfully transition from foster care to adulthood. Central Office has developed additional inquiries related to independent living to be gathered on each youth over 15 who is part of any regional CQI, regardless of their permanency goal. We are hopeful that this will broaden our sample and allow us to adequately monitor if older youth are receiving appropriate services.

STRATEGIES

Item 12. Placement with siblings

12.1 Monitor frequency children are placed with siblings (PIP-1 Item)

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Placement of siblings is monitored through quarterly case reviews. Below are the results of quarters 17 – 20. Except for a slight dip in Quarter 19, we have continued to do consistently well on placement with siblings. CFSR-2 case review results confirmed that this was an area of strength. CFSR-2 data showed a 20 percentage point increase between CFSR-1 (72%) and CFSR-2 (92%), consistent with our CQI results.

17 th Quarter	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 – 9/08	10/08 - 12/09	1/09 – 3/09
100%	89%	83%	100%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

Item 12 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
86%	91%	95%	94%	89%

*revised instrument

In 2005 a standard was developed and implement regarding the importance of placing siblings together whenever possible and frequent contact when unable to place together. This has been consistently emphasized in practice, through the CQI case reviews and has shown dramatic improvement – 20 percentage point increase from 2003 to 2008.

STRATEGIES

Item 13. Face to face visits with parents and siblings

13.1 Revise standard regarding parent/child/sibling visitation. Completed - 2004

13.2 Monitor frequency of parent/child/sibling visitation

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Idaho monitors compliance with the Department's Parent/Child/Sibling Visitation Standard through the quarterly CQI case review process. The goal is to meet the standard 90% of the time. Workers are clearly making visits and alternative forms of contact available to children, their parents and siblings. CQI results for quarters 17-20 are below. CFSR-2 data revealed that 85% of cases were rated as a strength on this item.

17 th Quarter	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 – 9/08	10/08 - 12/09	1/09 – 3/09
100%	77%	69%	85%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

New social workers continue to receive training in the Child Welfare Academy about the importance of contact, the frequency of contact, and alternative methods of contact between parents and children, especially when parents are incarcerated or reside a long distance from their children. CFS staff continue to explore alternative means of contact between children and their parents when face-to-face contact is not possible. Examples include encouraging children to write letters to parents who are incarcerated or live a long distance from their children. Regional staff also videotape messages from children to their parents and accept collect phone calls from parents so their children can talk with them.

Under the direction of the Idaho Criminal Justice Commission (ICJC) a committee has been developed to identify strategies to support children of incarcerated parents and their families. IDHW participates on this committee. Tele-visitation has become one strategy in an overall effort to support children of incarcerated parents and their families. IDHW began working with the Idaho Department of Corrections (IDOC) on a pilot project to implement the use of video phones for visitation between children and their incarcerated parents. Due to funding issues, the pilot project was not implemented. Currently Ada County is developing a web-based visitation program, which CFS will pilot in one of its field offices. The pilot project will test using telecommunications technology to assist the Department in maintaining family connections.

Collaboration for the project has been facilitated through the Idaho Children of Incarcerated Parents Project, which is an initiative of the ICJC subcommittee on Idaho's Pipeline to Prison.

Item 13 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

The Visitation between Parents, Siblings, and Children in Out-of-Home Care standard was finalized in 2004. It addresses both frequency and quality of visitation. Visiting with parents and siblings is monitored through CQI data. Below are the annual statewide CQI results for visiting parents and siblings in foster care gathered in quarters 1-20. The majority of cases that are out of compliance are because of lack of father contact or lack of contact where a parent is incarcerated.

Quarters	Quarters	Quarters	Quarters	Quarters
1-4	5-8	9-12*	13-16	17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
88%	83%	85%	91%	77%

*revised instrument

In CFSR-1, this item was rated a Strength in 91% of the cases reviewed. However, during CFSR-2 this item was identified as an area needing improvement with 84% of the cases meeting the criterion that the agency had made concerted efforts to ensure that visitation was of sufficient frequency to meet the needs of the child. We are unclear as to the reasons for the % reduction in visitation. The only factor we can isolate is the high turnover with new workers and a decline in the economy that may be presenting barriers.

Engaging families including fathers and incarcerated parents is a strategy that will be implemented in Idaho's PIP-2. We will continue to monitor visiting with parents and siblings in foster care through CQI results.

STRATEGIES

Item 14. Maintain connections

14.1 Training social workers on the importance of preserving connections

Funding Source: CWS
Target Date for Completion: Ongoing
Status: Ended

Family Centered Practice is the Department's approach to working with families and is founded on building on families' strengths and connections. The importance of sustaining familial and community ties is evident in staff training, practice, and outcome monitoring. This learning is also reinforced and monitored through the on-going CQI case review process including CQI trainings and exit meetings.

Staff receive training on the importance of preserving family and community connections throughout the Child Welfare Academy. There are specific tasks where this training is especially

relevant and where social workers are trained to maintain a child's connections, such as when an Alternate Care Plan is developed.

Connections are not only beneficial to families, but can be beneficial to CFS outcomes as well. As budgets tighten, social workers must find more efficient and cost effective ways to work. This has also contributed to an increase in using community connections to support families as they work on case plan goals. Family and community connections can be useful in collecting information for assessment, understanding a family's cultural context and individuality, and providing additional support to the family in accomplishing their case plan, as well as providing on-going support once CFS is no longer involved in a family's life.

The Fostering Connections Act of 2008 has provisions to support maintaining connections to a child's school when removed from their home. These provisions may include CFS working with the school district to create a plan for the child to be maintained in their "home" school, as well as a possibility of reimbursement for transportation when a child moves out of area, but continues to attend their same school. Since this Act is relatively new, the Department is in a process of determining the interpretation of the Act and how to best move forward with implementation.

14.2 Support/increase cultural competency of agency staff relative to Native Americans so they can individualize services and maintain connections. (PIP item-1 37.1)

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

The ICWA on-line training from the National Indian Child Welfare Association is a prerequisite to completing the Cultural Competency curriculum. During the Cultural Competency session, the Tribal Relations Program Manager provides a historical and cultural perspective to new agency staff that will assist them in their work with Indian people. Some of topics discussed during the session include an explanation of traditional child rearing practices and how Indian values differ from mainstream societal child rearing practices, the impact of European contact and federal policies on Indian people resulting in generational trauma, substance abuse, alcoholism, and loss of identity. The federal ICWA law is also discussed with participants.

CFS staff are trained on ICWA purpose, requirements, and practices, including those elements related to maintaining a child's unique connections to extended family members and tribes. CFS staff continue to consult with tribes as a source of information for the development of plans for American Indian and Alaska Native children.

Agency workers attended the 2008 ICWA Conference in Boise, Idaho. All of the conference presentations included some aspect of cultural awareness and/or tips and suggestions for non-natives who work with Indian children and families. The 2009 ICWA Conference is scheduled for June 12, 2009 at the Fort Hall Reservation. The theme of the conference is "Fostering Our

Tribal Future". This year's conference will be a one-day session, focused on the future of ICWA, including topics related to bridging legal and social aspects of ICWA.

Plans are in place to conduct ongoing regional ICWA trainings to allow staff, attorneys and judges to become more aware of the ICWA requirements and how to provide consistent and streamlined application of the ICWA provisions. The Indian Child Welfare Advisory Council is in the process of developing a plan to facilitate the regional trainings. Tribal elders and community members will be invited to assist with planning and facilitating the cultural and historical portions of the training.

A regional ICWA Resource Team has been established to provide advanced ICWA training to designated staff members from each DHW region. The team is comprised of one agency worker from each region who has volunteered to be the ICWA point-of-contact for their region. The team first convened in February 2009 to discuss the purpose, including goals and objectives of the team.

The Tribal Relations Program Manager emails social workers on an ongoing basis of upcoming cultural events in tribal or local communities so they can inform foster parents who care for Indian children.

- 14.3 Develop and implement training on ICWA provisions for early identification, prompt notification of tribes, placement preferences and active efforts. (PIP-1 item) Completed 2005
- 14.4 Explore with fathers (not currently involved in the life of their child(ren) the criteria for what it means to be a responsible father. Suggest and train fathers on how they can be more involved in their child's life.

Funding Source: PSSF
Target Date for Completion: Ongoing

Status: Completed 2009

Historically, CFS social workers have worked primarily with mothers of children in foster care, and fathers to a lesser degree. Over the past five years, improvements have been made in understanding the importance and unique role of fathers as well as efforts to actively engage fathers. These efforts to involve and engage both parents have been closely monitored through CQI case reviews. A closer look at CQI results revealed a broader problem. We found that the difficulty in engaging fathers could more accurately be expanded to include "absent parents". Examples of absent parents might be a parent who is incarcerated, or a parent who is located midway through a case and did not have an established relationship with the child. Family Centered Practice encourages involvement of both parents.

While some father specific training and efforts will continue, training topics provided to CFS social workers will be broadened to include effectively engaging and working with "absent parents" rather than focusing only on working with father's specifically.

CFS social workers from across the state attended the 2008 Child Welfare Conference. This two day conference was held September 23rd and 24th, and repeated 25th and 26th to allow for all social workers to attend. The conference focused on advancing child welfare practice in Idaho in the areas of safety, permanency, and well-being, and improving outcomes for youth and families through the application of Family Centered Practice principles. Course offerings included information on engaging resistant and/or absent parents, as well as parent skill building and interventions. Workshops included:

- "Attachment Basics and Utilization of Intervention Principles"
- "Motivating Families towards Positive Change"; and
- "Sharing Successes and Challenges in Engaging Parents"
- 14.5 Provide "options" counseling for fathers who appear to be ambivalent about their parenting role. This will assist them in choosing to be an active part of the child's life or relinquish the child for adoption. Discontinued 2006
- 14.7 Provide parenting classes exclusively for fathers. Discontinued 2008
- 14.8 Develop an information brochure that is included in all Child Protection information handouts to parents and other family members that explain ICWA rights and responsibilities and importance of identifying an Indian child.

Funding Source: CAPTA/CWS
Target Date for Completion: 2009 (revised)
Status: Completed

Beginning in April 2009, as part of the ICWA focused performance improvement plan to identify Indian children in the early stages of a case, caseworkers will be required to provide every parent with the NICWA, "Indian Child Welfare Act: A Family Guide Brochure" at first contact. This tool will be used to offer parents information about ICWA and their rights and responsibilities. This item is completed.

ITEM 14 – SUMMARY of ACCOMPLISHMENTS 2005-2009

Cultural, community, and familial connections are critical to maintaining identity. It is important for CFS staff to understand the unique values of each family when working with children and families. Efforts have been increased in various forums to raise worker awareness about community and cultural ties. All CFS staff are trained on the importance of preserving family and community connections. Standards developed since 2003 have included requirements for identifying and accessing resources that will keep the child connected to the people and places that have been familiar to them. These efforts also include making cultural resources available to staff and collaborating more with Tribal representatives to increase the availability of Indian resource families.

In the 2003 CFSR, this item was assigned an overall rating of strength because it was rated as strength in 96% of the 25 applicable cases and was therefore not included in Idaho's Program Improvement Plan. During the 2008, CFSR, Item 14, preserving connections, was found to be at 79%, thereby being an area needing improvement. We will continue to promote and monitor preserving connections for children through CQI case reviews.

STRATEGIES

Item 15. Relative placement

15.1 Train social workers to identify and consider both maternal and paternal relatives as placement resources. Completed - 2004

15.2 Monitor whether the agency made concerted efforts to place the child with relatives when appropriate.

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Monitoring the agency's concerted efforts to place a child with relatives when appropriate is monitored through quarterly CQI case reviews. Data for quarters 17-20 is provided below. During the past year this item has been a challenge. This item reflects the workers concerted efforts to evaluate relatives and kin as possible placement resources. CFSR-2 findings were that 85% of cases were rated as a strength.

17 th Quarter	18 th Quarter	19 th Quarter	20 th Quarter	
4/08-6/08	7/08 – 9/08	10/08 - 12/09	1/09 – 3/09	
100%	96%	77%	83%	
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed	

A closer look at actual relative placements provided the following data:

	% of Relative Placements as of June 30, 2008		% Relative Placements as of December 31, 2008			
		Relative	Total		Relative	Total
Region	%	Placements	Placements	%	Placements	Placements
1	16.2%	54	333	23.8%	72	302
2	20.0%	9	45	37.5%	18	48
3	28.1%	85	303	26.6%	66	244
4	17.9%	76	425	18.4%	67	364
5	18.2%	41	225	14.2%	30	211
6	18.8%	25	133	20.3%	28	138
7	18.8%	21	112	23.4%	22	94
Statewide	21.7%	342	1,576	21.6%	302	1,401

These regional and statewide percentages are compared to approximately 30% of relative placements nationwide.

To monitor compliance with ICWA (relative/tribal) placement requirements, two elements are reviewed during the ICWA CQI to measure both active efforts to reunify and active efforts to place an Indian child with extended family, tribal members or in another Indian home. An additional rating was added to the 2008 ICWA CQI to assess whether or not efforts were made to maintain cultural connections in cases when an American Indian/Alaska Native child is not placed according to ICWA. Below are comparative results for the last 3 years.

ICWA CQI Item	2006	2007	2008
Active Efforts to Reunify	90%	79%	76%
Child placed with extended family, tribal member or another Indian home	28%	33%	34%
If "No", effort made to maintain cultural connections	N/A	N/A	73%

Several factors have been identified as opportunities for improvement that may impact the low compliance rate with ICWA placement preferences including early identification of American Indian/Alaska Native status, early identification of relatives and the lack of American Indian/Alaska Native foster homes. In response to the findings, the following tasks were identified as focus areas for improvement relating to staff practice and compliance with the Indian Child Welfare Act. They are: (1) identification of Indian ancestry and tribal affiliation; and (2) tribal membership inquiries and responses.

New forms and processes were implemented in April 2009 to address areas of improvement to ensure safety, permanency and well-being for American Indian/Alaska Native children including a process to collect additional information about a child's Indian family history to determine possible tribal affiliation and available resources to the child and/or family members and membership inquiries will be made until a definitive decision is made regarding the known or suspected Indian child's tribal membership status.

Over the past 10 years, CFS has made a range of attempts to engage Idaho tribes around the recruitment of American Indian/Alaska Native homes. Efforts to date have resulted in a very small number of resource families. Individuals from the state and from the tribes have voiced the belief that it is the responsibility of the other to solicit potential foster families. Tribes are additionally frustrated by the demands for foster homes coming out of their tribal courts. CFS acknowledges that many of the initial foster care placements for all children result in permanency with that particular resource family. Unless a relative has stepped forward, these are rarely American Indian/Alaska Native families. This need only gets more acute as time goes on.

To address this need a Foster Parent Recruitment project was started in January 2009 to look at strategies to recruit and retain foster parents, including Indian foster parents. Staff will work with Tribes to identify culturally-appropriate methods to recruit Indian foster families. We will also be including this as a strategy in our new 5 year plan.

One suggestion from a member of the Statewide Self Assessment Committee was to make sure that American Indian/Alaska Native children have the opportunity to attend Indian cultural activities and they also have an opportunity to visit with grandparents who can't always make it to the child's residence to preserve those ties. In response to this, staff requests and the CQI results, the Tribal Relations Program Manager emails staff workers on an ongoing basis of upcoming cultural events in tribal or local communities so they can inform foster parents who care for Indian children.

- 15.3 Revise, implement and monitor standards as outlined in FACS Policy Memo 00-03 on relative placement.(PIP-1 item 6.1) Completed 2004
- 15.4 Train staff on revised relative placement standards. (PIP-1 item 6.2) Completed 2004
- 15.5 Monitor compliance with relative placement standards to increase stability of children in foster care. (PIP-1 item 6.3) Discontinued 2006

Item 15 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

Idaho has worked diligently to contact relatives on behalf of their relative children in foster care. A standard has been developed and implemented during the past five years. This is also a focus of efforts on PIP-2 as a means to help increase placement stability.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
82%	88%	90%	90%	74%

*revised instrument

During the period under review, our attempts to recruit Indian foster families have not been successful at least in terms of numbers of families recruited. We appear to be reaching a greater understanding of some of the barriers. This challenge will need ongoing attention and will be part of our new 2010-2014 CFSP.

GOAL III. CHILD AND FAMILY WELL-BEING

Outcome 1. Families have enhanced capacity to provide for their children's needs

STRATEGIES

Item 17. Needs and services of child, parents, foster parents

- 17.1 Develop and implement standards for linking the assessment to services and developing service plans to address the needs of the child's mother and father, the child, foster and pre-adoptive parents, absent parents and relatives for both in-home and out-of-home cases. (PIP-1 item) Completed 2004
- 17.2 Train social workers to identify the needs of children, parents and foster parents and provide services to meet those needs. (PIP-1 item) Completed 2004
- 17.3 Monitor standards for meeting the needs of the child, child's parents, relatives, foster and adoptive family (PIP-1 item).

Funding Source: CWS/IV-E Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Meeting the needs of children, parents, and foster parents is monitored through the quarterly CQI process. The PIP-1 goal related to this area was set at 60%. Idaho has been well above the PIP-1 goal during all quarters including quarter 17 – 20 below. The CFSR-2 found a 21 percentage point improvement between performance on CFSR-1 (44%) and CFSR-2 (65%) on this item. It remains, however, well below the 90% criteria. We will continue to monitor this item as part of PIP-2.

17 th Quarter CFSR-2 4/08-6/08	18 th Quarter 7/08 – 9/08	19 th Quarter 10/08 – 12/09	20 th Quarter 1/09 – 3/09
80%	78%	69%	64%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

17.4 Assist incarcerated parents in transitioning from the prison system by linking them with community services. Completed - 2008

Item 17 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

During the last five years, Idaho has developed standards that have set practice expectations for identifying family strengths and capabilities, evaluating underlying conditions and contributing factors that lead to maltreatment, assessing parental capacity to protect, and identifying service needs to be included in the service plan. Lack of engagement of the child's father is making a significant contribution to the overall rating of this item. Successful intervention on this item will need to focus more on engagement of fathers as evidenced by our CQI data below. Performance

on this item has increased by as much as 20 percent since CFSR-1. CFS has identified the issues with this item and will continue to work for improvement through PIP-2 and will continue to monitor through CQI case reviews.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
73%	83%	81%	86%	71%

*revised instrument

STRATEGIES

Item 18. Child and family involvement in case planning

- 18.1 Develop standards for workers on involving all family members and permanent caregivers in the development of the case plan. See action step 3.3 pertaining to the development of case plans in in-home cases. (PIP-1 item) Completed 2004
- 18.2 Train staff on standards for involving family members and permanent caregivers in case planning. (PIP-1 item) Completed 2004
- 18.3 Monitor family's involvement in case planning. (PIP-1 item)

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

The quarterly CQI case review process monitors the percent of cases in which the agency made diligent efforts to have parents and children actively participate in identifying the goals and services to be included in their case plan. The PIP-1 goal was established at 70% in 2004. The primary challenge to improving outcomes in this area has been to increase efforts to locate and involve absent fathers and incarcerated parents in service planning. In quarters 17-20 (see below), results have fluctuated. The CFSR-2 results indicate that 67% of cases were rated as a strength on this item.

17 th Quarter	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 - 9/08	10/08 - 12/09	1/09 – 3/09
93%	64%	73%	64%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

18.4 Implement a family group decision making process to develop safety plans and family case plans. (PIP-1 item) Completed - 2004

- 18.5 Develop and implement a case planning process and standard to include specific, measurable, achievable, realistic and time-limited plans which are developed jointly by the agency and the family. (PIP-1 item 25.1) Completed 2004
- 18.6 Train all systems involved in the case planning process (courts, prosecutor, CASA, agency staff) on the importance of family involvement and how to develop individualized measurable family plans. (PIP-1 item 25.2) Completed 2005
- 18.7 Revise the current case plan format in FOCUS to be more "user friendly" to both workers and families. (PIP-1 item 25.3) Completed 2006

Item 18 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

During CFSR-1 in 2003, this item was rated an area needing improvement because diligent efforts to involve parents and children in case planning occurred in only 60% of the cases reviewed. According to our CQI results, Idaho has made and sustained improvement in this item since CFSR-1.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
68%	79%	77%	79%	70%

*revised instrument

Family involvement has increased, primarily through the use of Family Group Decision Making (FGDM). Since FGDM is not used consistently throughout our State, as part of PIP-2, each region will assess, develop, and implement a plan to increase the number of FGDM's or other type of family meetings. Progress will be monitored through percentage of cases rated a strength on Item 18 during CQI case reviews.

STRATEGIES

Item 19. Worker visits with child

- 19.1 Develop standards for worker/child visitation(s) in the child's home or foster home for both open in-home and foster care cases. Combine with worker/parent standards in 20.1 (PIP-1 item) Completed 2004
- 19.2 Develop and implement FOCUS enhancement for "contact visitation" screen to include both worker/child visitation and work/parent visitation (see action step 20.2) (PIP-1 item) Completed 2005

19.3 Monitor compliance with <u>worker/child</u> and worker/parent visits (20.3) (PIP-1 item)

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Contact requirements are clearly outlined in the CFS Worker Contact Standard. Contacts have been monitored through quarterly CQI case reviews. As part of PIP-1 in 2004, the CQI goal originally set for worker/child visits was 75%. That goal has been surpassed. Consistent with these CQI findings, CFSR-2 results revealed that 85% of the cases reviewed met the standard.

The Department received \$188,100 of PSSF funding in 2007 to improve caseworker/child visitation. The expenditures were allocated to each region according to both volume of foster care placements and caseworker visitation outcomes (Item 19 on the OSRI/CQI). The figures below show the allocation of funds by region by state fiscal year through September 2009. Regions are encouraged to assess their local needs for improving case worker/child contact and develop contracts that will allow social workers additional time to contact children or contract for case management on a limited number of cases to reduce caseload so the required 90% compliance can be met by 2011.

In May 2008, the Department received an additional allocation of PSSF funding of \$56,126 (\$18,709 for FFY 08 and \$37,417 for FFY 09). This additional funding was distributed to regions according to the established formula and will be expended in State FY09. Accordingly, the SFY 09 budget for worker/child visitations will increase from \$93,500 to \$149,626.

Region	SFY 08	SFY 09	Revised allocation for SFY09	Revised Totals for SFY08 and SFY09
1	\$ 13,600	\$ 13,500	\$ 21,644	\$ 35,244
2	\$ 7,000	\$ 6,500	\$ 10,541	\$ 17,541
3	\$ 17,500	\$ 17,500	\$ 28,029	\$ 45,529
4	\$ 17,500	\$ 17,500	\$ 27,867	\$ 45,366
5	\$ 22,500	\$ 22,500	\$ 35,813	\$ 58,313
6	\$ 9,000	\$ 8,500	\$ 13,708	\$ 22,708
7	\$ 7,500	\$ 7,500	\$ 12,024	\$ 19,524
Total	\$ 94,600	\$ 93,500	\$ 149,626	\$ 244,226

All seven regions are using additional PSSF funds to pay for worker travel to visit children placed out of the local area, such as children placed in residential treatment. This has been the greatest need statewide. Idaho is also pursuing a contract to hire additional part-time social workers to serve as "another responsible party." The part-time contractors will be stationed near the residential treatment centers and team the case management with the original case manager. This will allow for more frequent contact with children placed long distances from home.

The Department calculated the FFY 2007 baseline caseworker/child contact data by reviewing 339 randomly selected cases, using the sampling methodology developed by the Children's Bureau Data Team. Through this count, Idaho's baseline was determined to be the following:

Measure 1

Children Served	339
Children who received a contact each and every month	173
Percent receiving monthly contact	51%

Measure 2

Visit Months	1007
Visits in placement provider or own home	752
Percent of visits in placement provider or own home	75%

Idaho's target data percentages for the percentage of children in foster care who are visited by their caseworker during each and every calendar month for fiscal years 2008 through 2011 are included in the table below:

FFY	Target % of children seen monthly		
2008	53% with the majority of contact occurring in the child's home		
2009	60% with the majority of contact occurring in the child's home		
2010	70% with the majority of contact occurring in the child's home		
2011	90% with the majority of contact occurring in the child's home		

Although Idaho has developed a FOCUS report to calculate totals of caseworker/child contact, we continued to use the sampling methodology, developed by the Children's Bureau Data Team, to calculate our FFY 2008 data. It was submitted by November 30, 2008. The percentage of children seen each month is:

Caseworker Visit Measures	National Standard by 2011	2007 Idaho Performance	2008 Idaho Performance
Percentage of Children			
Receiving a Caseworker Visit	90%	51%	57%
Each and Every Month in Care			
Percent of Months in Which			
Visit Occurred in Child's	50%	75%	81%
Placement Provider or Own			
Home			

During the 2008 CFSR, Item 19 was rated an area needing improvement based on a finding that in 84% of the cases, reviewers determined that social worker visits with children were of sufficient frequency and/or quality.

Idaho's CQI results are lower than the CFSR rating. Although we use the OSRI in reviewing cases, Idaho maintains a higher standard for the Strength rating. In addition to determining if the quality and quantity of visits was sufficient to ensure the child's safety, permanency, and well-being, Idaho rates this item an area needing improvement if a case worker misses any single month in seeing a child. This allows us to send a consistent message with data gathered for our IV-B plan requirements.

17 th Quarter CFSR-2	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 - 9/08	10/08 - 12/09	1/09 - 3/09
93%	80%	78%	76%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

ITEM 19 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

CQI results demonstrate steady improvement in caseworker/child contacts over time. During the 2003 CFSR, this item was rated as an area needing improvement with only 68% of the cases meeting the criteria for quality or frequency of contact. To monitor compliance with the targeted improvements, monthly reports are run from the FOCUS system and reviewed by the supervisor.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
67%	76%	84%	84%	79%

^{*}revised instrument

Despite, improvements, CFS social workers continue to struggle with this item. It is identified as a key factor in PIP-2, with supervisors being central to improvement by mentoring and monitoring caseworker/child contacts. As part of our PIP-2, in July and August, 2009, all CFS social workers and supervisors will receive training on enhancing the quality and frequency of visits with children.

STRATEGIES

Item 20. Worker visits with parents

- 20.1 Develop and implement standards for worker/parent visitation to include both "in-home" and alternate care cases. Combine with worker/child visitation standard in 19.1 (PIP-1 item) Completed 2004
- 20.2 Develop and implement FOCUS enhancement for "contact visitation" screen. (PIP-1 item). Completed 2005

20.3 Monitor compliance with worker/child (19.3) and worker/parent visits. (PIP-1 item)

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

The outcomes for worker/child visits are found in item 19.3. The goal for worker/parent contact is to have a minimum of monthly contact in 68% of the families. Below are the results of quarters 17-20. Worker/parent visits are consistently impacted by difficulties with regular father contact including incarceration as reflected in a CFSR-2 result of 53%.

17 th Quarter CFSR-2 4/08-6/08	18 th Quarter 7/08 – 9/08	19 th Quarter 10/08 – 12/09	20 th Quarter 1/09 – 3/09
93%	68%	66%	54%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

20.4 Develop standard on "Working with Incarcerated Parents" Discontinued – 2008

Item 20 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

Quarters	Quarters	Quarters	Quarters	Quarters
1-4	5-8	9-12*	13-16	17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
62%	66%	71%	82%	66%

^{*}revised instrument

Increasing the quantity and quality of worker/parent visits has been and will continue to be a focus of our attention. Development of contact standards has established the expectation of frequent and meaningful contact. Development of the contact screens in FOCUS has enabled supervisors to easily monitor contacts. Social workers often have plausible explanations for not maintaining adequate contacts with parents, but practice requires ongoing concerted efforts to engage parents. Engagement is difficult when face-to-face contact is infrequent. PIP-2 will focus on engaging parents and we will continue to seek ways to help workers actually make the face to face contacts with parents.

Outcome 3. Children receive adequate services to meet their physical and mental health needs

STRATEGIES

Item 22. Physical health of the child

- 22.1 Establish and implement standards for all open cases, including in-home cases that address assessment of and meeting the physical needs of children. (PIP-1 item) Completed 2004
- 22.2 Train CFS staff on standards and importance of assessing and meeting the physical needs of children in all cases opened for services (including in-home cases.) (PIP-1 item) Completed 2004
- 22.3 Develop a FOCUS report for supervisors to monitor children's physical assessment and services. (PIP-1 item) Completed 2006
- 22.4 Monitor physical needs of children in all cases opened for services including inhome cases. (PIP-1 item)

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Below are the results of the CQI case review related to meeting the physical health needs of the child for quarters 17-20. Idaho continues to improve in assessing the health and well-being of children in foster care as demonstrated by the results of the CFSR-2 onsite review. Results of the case reviews show that Idaho met the physical needs of children in 98% of the cases reviewed. It should be noted that in recent CQI case reviews (19th and 20th quarters) those percentages have dropped. Overall this continues to be an area of strength, but clearly we will need to continue to monitor Item 22 closely.

17 th Quarter CFSR-2	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 - 9/08	10/08 - 12/09	1/09 - 3/09
100%	90%	76%	63%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

- 22.5 Develop and implement strategies to increase local access to dental, vision, hearing, and general physical health for children with an open case. (PIP-1 item) Completed 2004
- 22.6 Train CFS staff, foster parents and community partners to access physical health services for children. (PIP-1 item) Completed 2004

- 22.7 Develop standards for mandatory developmental screening of all 0-3 year olds by CFS workers when there is an open case or substantiated disposition. Include subsequent referral for assessment to the Infant Toddler Program for children suspected of delays based on the screening. (PIP-1 item) Completed 2004
- 22.8 Train CFS staff to screen children 0-3 years old when there is an open case or substantiated disposition. (PIP-1 item) Completed 2006
- 22.9 Develop a checklist for foster parents to help facilitate the scheduling of medical, dental, and other appointments as deemed necessary and timely within practice standards and rules.

Funding Source: PSSF

Target Date for Completion: October 2008

Status: Discontinued - 2009

Children in care routinely receive appropriate services to meet their medical and dental needs, beginning with a health screening and immediate attention to medical/dental as they enter care. The *Alternative Care Plan* addresses the individual child's medical, emotional and dental health needs and currently serves as a method to facilitate attention, by all parties, to these needs within thirty (30) days of a child's placement.

Health records are part of a child's person profile in FOCUS and reflect information about a child's medical history, health and needed services as well as the required time frames for completion. The child's health is to be reviewed by the social worker and the resource parent each month during monthly contact and decisions made as to what type of services, and providers, should be accessed. The decision was made to discontinue this item as the Department would like to assure the tracking of a child's health history and needs are maintained within the Department while at the same time assuring the monthly contacts between the social worker and resource parent are such that they facilitate good team planning, related to the child's health, and meet the resource parents' needs for maintaining a schedule.

Item 22 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

Item 22 (Physical Health of Child) was rated as a Strength in 98% of cases during the CFSR-2. The physical needs of children, in both in-home services and foster care cases, will continue to be monitored through the quarterly CQI case review.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
87%	90%	83%	82%	78%

*revised instrument

Guidance related to assessing the health and well-being of foster children has been provided to CFS social workers through the Child Well-being Standard, the Mandatory Referral of Children for Infant Toddler Program (ITP) Standard, and Rules Governing Family and Children's Services (IDAPA). The practice standards establish the Department's responsibilities, and time frames, for assuring that each child's physical health needs are assessed and met throughout the life of a case, including medical examination, immunization, dental and vision, and hearing screenings. Children in alternate care receive EPSDT services allowable under Medicaid. To meet the requirements of the Fostering Connections Act, the Child Well-Being Standard (see Attachment B) was recently updated

Statewide, a FOCUS report monitors the health needs and services throughout the life of a case. Resource parents, CFS Staff and community partners have been trained to access health services for children.

SUPPORTING DOCUMENTATION

Health Care Services Plan

According to department administrative rules, every child placed in alternate care will receive a medical card each month. (IDAPA 16.06.01.442) and will receive a medical examination within the first 30 days of their out-of-home placement (IDAPA 16.06.01.447). A dental exam is required within 90 days of placement for every child three and older (IDAPA 16.06.01.445)

Idaho Medicaid has a primary care physician managed health care strategy called Healthy Connections (HC). Under Healthy Connections individuals establish a medical home with their current physician or with another primary care physician who accepts Medicaid. That physician then provides the case management services identified under Healthy Connections. The primary care physician acts as the child's health care coordinator, referring to specialists as needed and overseeing the medical care of each child patient.

The Department's Child Well-Being standard of practice provides expectations for addressing the physical, dental and mental health needs of children in foster care placement. (see attachment 2).

The intervals for periodic medical screenings are set in IDAPA 16.0309 as well as inter-periodic medical screens when medically necessary.

The Department has access to child maltreatment medical experts who can consult and provide specialized assessment of medical needs. A number of locations in Idaho have established physician led foster care clinics, involvement of Nurse Practitioners on-site and regional contracts with health districts.

Meeting the health, dental and mental health care needs are monitored by the case manager, the case supervisor and through periodic CQI case reviews.

There is a section in each child's electronic file where the child's worker enters all

relevant medical, dental and mental health information including names, appointments, results of doctor visits, allergies, immunizations, etc. The Alternate Care Plan also provides critical medical, dental and mental health information for the foster family, the child and the child's family.

IDAPA 16.06.03.447 requires foster parents **to** follow and carry out the health or dental care plan for a child as directed by a qualified medical professional; follow the children's agency approved policies for medical care of a child who is injured or ill; provide prescription medication as directed by a qualified medical professional. A foster parent shall not discontinue or in any way change the medication provided to a child unless directed to do so by a qualified medical professional; and foster parent shall store medications in an area that is inaccessible to a child.

Children assessed as needing psychotropic medications are assessed and monitored by child psychiatrists either employed by the Department, on contract with the Department or in private practice through the child's medical card.

Meeting the health, dental and mental health care needs are monitored by the case manager, the case supervisor and through CQI case reviews.

STRATEGIES

Item 23 Mental health of the child

- 23.1 Establish and implement standards for all open cases, including in-home cases that address assessment of and meeting the mental health needs of children. (PIP-1 item) Completed 2006
- 23.2 Train CFS staff on standards and importance of assessing and meeting the mental health needs of children in all cases opened for services (including in-home cases.) (PIP-1 item)

 Completed 2005
- 23.3 Develop a FOCUS report for supervisors to monitor children's mental health assessment and services. (PIP-1 item) Completed 2006
- 23.4 Monitor mental health needs of children in all cases opened for services including in-home cases. (PIP-1 item)

Funding Source: CMHBG/GF Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

The mental health needs of children are monitored through the quarterly CQI case review. The PIP-1 goal was established at 78. CFSR-2 data showed a 17 percentage point increase between CFSR-1 (70%) and CFSR-2 (87%). Results from quarterly CQI also reflect dramatic increases in addressing the mental health needs of children in both in and out-of-home cases.

17 th Quarter CFSR-2	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 - 9/08	10/08 - 12/09	1/09 - 3/09
100%	97%	94%	88%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

- 23.5 Develop and implement strategies to increase local access to mental health for children with an open case. (PIP-1 item) Completed 2005
- 23.6 Train CFS staff, foster parents and community partners to access mental health services for children. (PIP-1 item) Completed 2005
- 23.7 Establish and implement standards on parent involvement in Children's Mental Health. Completed -2006
- 23.8 Establish and implement standards on the use of the Child and Adolescent Functional Assessment Scale for use in determining a child's functional impairment for Children's Mental Health. Completed 2005
- 23.9 Establish and implement standards on Intake and Screening for Children's Mental Health Discontinued-2006
- 23.10 Support the implementation of the State Suicide Prevention Plan. Discontinued-2006

Item 23 – SUMMARY OF ACCOMPLISHMENTS 2005-2009

Identifying and meeting the mental and behavioral health needs of children in foster care is monitored through CQI data. Below are the yearly statewide CQI results gathered from February 2004 until March of 2009.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
87%	94%	94%	92%	93%

*revised instrument

Although the PIP-1 goal was established at 78%, Idaho exceeded this goal and has maintained above 90% in our CQI results since February 2005. These positive outcomes are partly attributed to the development of clear standards and a memorandum of understanding between Child Welfare and Children's Mental Health, and is especially positive given the shortage of mental health providers across the state.

During the 2008, CFSR, Item 23, mental health of children, was found to be at 87%, thereby becoming an area needing improvement. We will continue to monitor mental health services for children through our CQI results and address these needs in the 2010-1014 CFSP.

GOAL 4. CONTINUOUSLY IMPROVE THE ORGANIZATION'S CAPABILITY TO ACHIEVE ITS GOALS OF HELPING FAMILIES AND CHILDREN

STRATEGIES

Systemic Factor 1. Statewide Information System

- SF1.1 Establish documentation standards for case manager to monitor delivery and effectiveness of services. Standards will include what information should be documented (PIP-1 item 37.2) Completed 2004
- SF1.2 Train CFS staff on documentation for effective service delivery. (PIP-1 item 37.3) Completed 2004/5
- SF1.3 Develop a FOCUS/CFS manual to ensure consistency in data entry and improved documentation around service delivery. (PIP-1 item 37.4) Completed 2006
- SF1.4 Include documentation of functional measures in the FOCUS system for children's mental health. Completed 2006
- SF1.5 Develop FOCUS enhancements that include tribal address, tribal phone, child's tribal membership status, notice sent dates, notice response status, sort children by tribal heritage, and relative/Indian placement status.

Funding: CWS
Target Date for Completion: 2007

Status: Completed -2008

It was identified that all potential Indian children had to be listed as "American Indian/Alaska Native" in the RACE field in order to "trigger" the ICWA screen in FOCUS. It was determined that the trigger was inappropriately assigned to the RACE field and should be assigned to the INDIAN ANCESTRY field. The Tribal Relations Program Manager met with FOCUS staff on several occasions to implement changes in FOCUS. The project was completed in December 2008. Training was provided to DHW staff workers by FOCUS Information System Coordinators on the new ICWA data entry requirements and appropriate use of the FOCUS ICWA data fields. The changes were rolled out in December 2008. CFS staff and IT staff were informed of changes and provided instructions on how to correctly enter data.

SF1.6 Develop automated FOCUS tracking of tribal interventions or transfer of jurisdiction events.

Funding: CWS
Target Date for Completion: 2006

Status: Discontinued-2009

A FOCUS change request for this strategy was submitted in early 2005. However, given the high number of FOCUS enhancements requests and the low number of tribal interventions and transfers, this FOCUS change will be delayed until a later date. The tribal interventions and transfer of jurisdictions will be followed by social workers on a case-by-case basis rather than through an automated system.

SF1.7 deleted and merged

SF1.8 Develop FOCUS report which summarizes any inter-country adoption where the child has come into state foster care and the adoptive parents' rights are terminated.

Funding: CWS
Target Date for Completion: 2008

Status: Discontinued-2009

Design of the data entry screen and report has not yet been scheduled for development due to other competing demands for enhancements. Prior to development of the screen, the description of report requirements must be rewritten. This report would only be used for the CFSP and the information is currently available only through a hand count.

SF1.9 Develop capacity in FOCUS to track ICPC cases Complete - 2007

SF1.10 Submit work authorization for revision of FOCUS licensing screens to correct internal inconsistencies identified in AFCARS consultation. Complete – 2004

System Factor 1 – Statewide Information System SUMMARY OF ACCOMPLISHMENTS 2005-2009

FOCUS has implemented numerous enhancements in the past 5 years including a FOCUS user manual to guide consistent data entry, development of visitation/contact screens and capacity for tracking ICPC's. Changes have been made to help with accurate ICWA data entry. The Data Warehouse has been developed to provide the capacity for ad hoc reporting. CFS and FOCUS continue to meet on a regular basis (1-2 times per month) to address system issues and prioritize requests for enhancements and other changes.

SYSTEMIC FACTOR 2 - CASE REVIEW SYSTEM

STRATEGIES

Systemic Factor 2 Item 28. Process for seeking TPR in accordance with ASFA

28.1 Until legal representation issues can be resolved statewide, develop and implement county protocols for representation of IDHW in court child protection cases, determining when

representation will occur by the prosecuting attorney's office and when by regional deputies attorney general. Also see 28.4 (PIP-1 item 9.1) Completed -2004

28.2 Resolve legal representation issues for IDHW in Child Protection. Also see 28.4 (PIP-1 item 9.2)

Funding Source: CAPTA
Target Date for Completion: 2004 - 2005

Status: Carried over to 2010-2014 plan

Since October 2005, several meetings have occurred including representatives from the State Attorney General's Office, members of the Supreme Court Child Protection Improvement Committee, the FACS Division Administrator, and the president of the Idaho Prosecuting Attorney's Association. The purpose of the meetings is to explore more effective legal representation for CFS workers.

As an outcome of these meetings, the Department is advocating for clarification in judicial rule or state statute that the Department is a party, and therefore, has the right to legal representation. Currently, some county prosecuting attorneys assert that they represent the county or the people of Idaho, but not the Department of Health and Welfare. Defining the Department of Health and Welfare as a party is the first step in ensuring improved legal representation for Children and Family Services. The Supreme Court Child Protection Committee is assisting Children and Family Services in enhancing agency representation by including this as a strategy of the court committee's strategic plan.

Currently the Department does not have the support of the Attorney General's Office or the Prosecuting Attorneys Association to gain party status because financial resources are not in place to implement the change. However, the Department will continue to work towards party status, using both short and long-term solutions. Work on the short-term solutions for Department representation began in September 2007. Since that time the Department has met monthly with members of the Supreme Court Improvement Committee and the Attorney Generals Office to identify and address areas of the state where legal representation has been problematic. As a result of those meetings, the Supreme Court has taken the lead in scheduling meetings with two local judicial districts. Judges, prosecuting attorneys, deputy attorneys general, and departmental staff have been included in the regional meetings to discuss local concerns that impact the timely permanency of children. The Supreme Court and the Attorney General's Office have put additional resources in place, allowing more court time in one judicial district. These entities, in collaboration with the Department, are monitoring legal representation in all judicial districts of the state.

During January 2008, as part of seeking a long-term solution for the issue of party status, the Department requested and received a one-day consultation with Margaret Burt, an attorney from the National Resource Center on Legal and Judicial Issues. She assisted the Department in clarifying the importance of party status and developing strategies and talking points the Department can use as it continues to work towards achieving its ultimate goal of gaining party status.

In collaboration with the Department, the Supreme Court Child Protection Committee also hosted a meeting that included representatives from the Attorney General's Office, the Prosecuting Attorney's Association, magistrates from each judicial district, and the Department. At this meeting Ms. Burt presented different models of agency legal representation and best practice standards for agency representation. She pointed out it was "very uncommon for a child welfare agency not to have party status."

As a next step, the Department will conduct a cost analysis at phasing in the Deputy Attorneys General (DAGs) in representing the Department at specific points in the case. For example, the Department will explore how much it will cost to have a Deputy Attorney General to represent the Department from termination of parental rights to finalization of permanency. Another cost analysis will examine how much it would cost to have the DAGs take the case at the point of the adjudicatory hearing.

When resources are in place, the option of the Department becoming a party to the case will be more feasible. The Department will also develop a model of legal services that it needs to improve permanency outcomes for children. The model will be discussed at a meeting with the Supreme Court Child Protection Committee, the Attorney General's Office, and the Prosecuting Attorney's Association to discuss how and by whom the services can be delivered.

FACS Division will continue to advocate for improved legal representation for CFS social workers during all phases of judicial proceedings. This is an item that will be included in Idaho's PIP-2 as an ongoing strategy.

28.3 Develop ISTARS alerts in the judicial data base to inform judicial personnel of critical time frames and assist them in monitoring the case. (PIP-1 item 28.2)

Completed – 2005

STRATEGIES

Systemic Factor 2 Item 29. Process for notifying caregivers of reviews and hearings and for opportunity for them to be heard.

- 29.1 Train foster parents how they can contribute to reviews and hearings and participate in the court process. (PIP-1 item) Completed 2004
- 29.2 Train judges on requirement to notice caregivers of hearings and reviews and to invite them to participate. (PIP-1 item) Completed 2004/5
- 29.3 Recommend changes to Juvenile court Rules to clarify process and procedure for timely notification of caregiver of court reviews and hearings. (PIP-1 item) Completed 2004
- 29.4 Clarify process and procedure for timely notification of caregivers of court reviews and hearings. (PIP-1 Item) Completed 2004

29.5 Monitor notification of caregivers of reviews and hearings for an opportunity to be heard. (PIP-1 item)

Funding Source: IV-E/CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Compliance with notice to foster parents of all hearings and reviews continues to be monitored through the quarterly CQI case review. Foster parents are interviewed and asked if they received notice of all hearings and reviews for the children in their home. Idaho PIP-1 goal was 75%. Steady progress has been made over the course of PIP-1 to date. See quarters 17-20 below.

17 th Quarter CFSR-2	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 – 9/08	10/08 - 12/09	1/09 – 3/09
100%	78%	87%	96%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

- 29.6 Develop indicator in FOCUS to record caregiver notification of case review and hearings. (PIP-1 item 29.6.2) Completed 2005
- 29.7 Modify current written notification of hearing to reflect the foster parent(s) of a child and any pre-adoptive parent or relative providing care for the child's right to be heard in any proceeding being held during the time the child is in the care of such foster parent, pre-adoptive parent, or relative caregiver. Completed 2008

System Factor 2 – Case Review SUMMARY OF ACCOMPLISHMENTS 2005-2009

During the CFSR-1, the systemic factor, case review was rated an area needing improvement because:

- Parents and children were found to not be actively and consistently involved in the development of case plans;
- Petitions for termination of parental rights were not being filed in accordance with the timeframes established by the adoption and Safe Families Act; and
- Resource parents were not consistently notified or given the right to be heard in reviews or hearings involving the foster children placed in their homes.

This systemic factor was also found to be an area needing improvement during CFSR-2. However, in a collaborative effort with the Court Improvement Committee and the Attorney General's Office, progress is being made in the provision of legal representation services for social workers. This is resulting in more timely review and permanency hearings.

Additionally, the Department and the courts have developed a process for notification of resource parents of all hearings. Notification of resource parents is monitored through our CQI with a high rate of compliance. We will continue to work with the Court Improvement Committee to train judges on the requirement to give caregivers the right to be heard in court.

This systemic factor is included in PIP-2. Due to the excellent working relationship we have with the courts and the Attorney General's Office, we are hopeful in making future progress in the area of case review.

SYSTEMIC FACTOR 3 -- QUALITY ASSURANCE SYSTEM

STRATEGIES

Systemic Factor 3 Item 31. Identifiable QA system that evaluates the quality of services and improvements.

- 31.1 Revise current CFS Continuous Quality Improvement process. (PIP-1 item) Completed 2004
- 31.2 Develop feedback process for summarizing results, identifying strengths, needs, system training needs and tracking trends. (PIP-1 Item) Completed 2004
- 31.3 Develop process for obtaining and documenting stakeholder input, i.e. standardized questions/survey for parents, foster parents and judicial partners. (PIP-1 item)

 Completed 2008
- 31.4 Develop expertise and role of supervisors in case review process.

Funding Source: CWS/CAPTA

Target Date for Completion: 2004

Status: Carried over to 2010-2014

To develop the expertise and role of supervisors in the case review process, CQI training is mandated and monitored through the child welfare academy. Since SFY 2008, four new supervisors participated in CQI training. All supervisors participate regularly in regional CQI case reviews.

In some Regions, supervisors conduct Concurrent Planning Reviews, using a 90-Day Concurrent Planning instrument developed in 2006. Recognizing that supervisors are important change agents, during PIP-2 the role of supervisors will be clarified and enhanced through development and implementation of a supervisor's strategic plan.

31.5 Implement revised CQI process. (PIP-1 item) Completed – 2004/5

31.6 Train CQI case reviewers to establish standardization and inter-rater reliability.

Funding Source: CWS/CAPTA

Target Date for Completion: 2004

Status: Carried over to 2010-2014

To promote standardized administration and inter-rater reliability, members of the CQI review teams are trained on the review process and review instrument (OSRI) prior to participating in the review. In addition, on-going training occurs at the entrance conference prior to each CQI review as the regional Chief of Social Work and Central Office staff give any updated instructions to reviewers and review the scoring criteria for any areas that have been causing difficulties for reviewers.

A full day training is conducted every 6 months to train new CQI reviewers. The following numbers of reviewers have been trained since the last annual report:

August 1, 2008	26 reviewers were in attendance
January 8, 2009	24 reviewers were in attendance

Currently Keeping Children Safe Panel Members (citizen review panels), university partners, and Casey Family Programs staff are serving as CQI reviewers, partnered with CFS staff.

- 31.7 Develop a CQI case review process for children's mental health. Completed 2006
- 31.8 Implement a CQI case review process for children's mental health. Completed 2006
- 31.9 Continue to train and encourage members of the Keeping Children Safe Panels to participate in the CQI case review process. Completed 2008
- 31.10 Develop plan for gaining and supporting participation by Keeping Children Safe Panel members in the CFSR-2 self-assessment phase. Completed 2008
- 31.11 Revise CQI review instrument and rating sheet to correspond to CFSR-2. Completed 2007
- 31.12 Begin to gather data and information for self assessment as part of CFSR-2. Completed 2008
- 31.13 Develop instrument for CQI review of foster care licenses. Completed 2006
- 31.14 Develop and implement a foster care licensing CQI process. Completed 2006

31.15 Conduct annual ICWA case review and submit a progress report.

Funding Source: CWS/CAPTA

Target Date for Completion: 2007

Status: Carried over to 2010-2014

The 2008 ICWA concurrent and retrospective chart review was conducted in all regions between July and August 2008. Results of the review and a correction plan were presented to CFS program managers at their division operations meeting in December 2008.

Results showed a number of ICWA case files missing tribal affiliation data and/or responses from the child's tribe(s) or Bureau of Indian Affairs when Indian ancestry is identified early in the case. The results of the 2008 ICWA CQI chart review process showed that 43% of the cases reviewed did not have a response to membership inquiries. Although some cases were open for a short period of time under the period of review, a majority of the cases showed lack of follow-up by caseworkers keeping the child's Indian status "pending".

In response to the findings, the following tasks were identified as focus areas for improvement relating to staff practice and compliance with the Indian Child Welfare Act: (1) Identification of Indian ancestry and tribal affiliation; and (2) Tribal membership inquiries and responses.

New forms and processes were implemented April 2009 to address areas of improvement to ensure safety, permanency and well-being for American Indian children. The forms and process will include collecting additional information about a child's Indian family history to determine possible tribal affiliation and available resources to the child and/or family members. Also, membership inquiries will be made until a definitive decision is made regarding the known or suspected Indian child's tribal membership status.

CQI monitoring of expected outcomes for the focused review will be conducted as part of the CFS Concurrent Planning (90 day) Review, which is currently be revised and will be implemented as part of the PIP-2.

31.16 Conduct an annual, regional ICWA training during the ICWA CQI.

Funding Source: CWS/CAPTA

Target Date for Completion: 2007

Status: Carried over to 2010-2014

The Tribal Relations Program Manager provided on-site focused ICWA training to case workers and permanency specialists during the 2008 regional ICWA CQI session.

31.17 Collaborate with and involve community partners in Idaho's Self Assessment, the CFSR-2 Case Reviews and PIP-2. Completed - 2008

31.18 Involve additional youth and foster care alumni in the CQI process. Completed - 2008

31.18 Develop CFSR State Plan with identified time frames for achieving each strategy and task.

Funding Source: CWS
Target Date for Completion: 2008

Status: Completed - 2009

A CFSR State Plan, with identified time frames for achieving each strategy and task was submitted to Region 10 in 2008. Idaho's Program Improvement Plan was formally approved, effective April 1, 2009. Idaho has begun working the plan.

31.19 Meet time frames for implementing the self-assessment, the CFSR-2 case review and the corresponding Program Improvement Plan (PIP-2).

Funding Source: CWS
Target Date for Completion: 2008

Status: Completed – 2007, 2008, and 2009

Time frames for the self assessment and onsite review were met in 2008. Idaho submitted PIP-2 to Region 10 within 90 days of receiving the final report. Since that initial submission, PIP-2 has been approved.

System Factor 3 – Quality Assurance System SUMMARY OF ACCOMPLISHMENTS 2005-2009

During CFSR-1, Item 31 was rated as an area needing improvement because the State was in the beginning stages of implementing a statewide comprehensive quality improvement system. Over the past three years Child and Family Services has built, with the help of community partners, a system of continuous quality improvement which has unique features such as Regional Improvement Plans, workers as trained reviewers, direct worker/supervisor case specific feedback as well as staff attended "exit" meetings where findings of the cases are reviewed.

Data from the CQI case reviews is compiled by Central Office staff and shared with division and regional management teams. Results are used on a local and state level to inform and improve practice. Today individual workers, supervisors, managers, and administrators have reliable information about practices taken from case reviews, including interviews with parents, children, and resource parents.

SYSTEMIC FACTOR 4 - STAFF AND PROVIDER TRAINING

STRATEGIES

Systemic Factor 4 Staff and Provider Training

SF4.1 Identify competencies and select a competency model for child welfare social workers and supervisors to serve as a foundation for training and performance evaluation. (PIP-1 item T.1) Completed – 2004

SF4.2 Develop curriculum for an enhanced Child Welfare Academy based on competencies identified in T. l and the learning needs of line staff. (PIP-1 item T.2)

Funding Source: CWS/IV-E

Target for Completion: Revised from 2005 to Ongoing

Status: Completed - 2008

Curriculum development to enhance the Child Welfare Academy based on competencies and the learning needs of staff was addressed in PIP-1, but continues to be a priority. In 2008, the Child Welfare Academy continued as approximately 24 days of curricula delivered in six, three and a half to four and a half day sessions. These modules are provided over a 6 month period and repeated twice annually.

Several improvements were made since last reporting in June of 2008. The Adoption section was integrated into the Concurrent Planning and it was expanded into one and a half days (Part I and Part II). System of Care and Wraparound training were changed to two hour sessions. Planning for legal training was completed and in early 2009 Session #5 includes a full day addressing Legal Perspectives using IDHW Deputy Attorneys General as key training staff on legal testimony and court reporting.

NEW WORKER ACADEMY SESSIONS Participant Capacity: 24			
Introduce Competency Based Learning Contract (CBLC): Required for Academy participants that are new or HAVE NOT had training on the CBLC.	.5 day	8.1 H 45 CFR 1356.60 (b) (2), 235.61 (a), 235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored	
Cultural Competency (attendees must have completed and passed NICWA online training).	1 day	8.1 H 45 CFR 1356 (c) (1) and (2) Indian Child Welfare Act (ICWA) and Cultural Competency related to children and families	
Family Centered Practice for Workers	2.5 days	8.1 H 45 CFR 1356 (c) (1) and (2) Activities designed to preserve, strengthen, and reunify the family, kinship care	
Process Continuous Learning Plan (2 times during the week)	1 hour	8.1 H 45 CFR 1356.60 (b) (2), 235.61 (a), 235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored.	

CORE ACADEMY	SESSIO	N #2 Participant Capacity - 24
Introduce Competency Based Learning Contract (CBLC): Required for Academy participants that are new or HAVE NOT had training on the CBLC.	.5 day	8.1 H 45 CFR 1356.60 (b) (2), 235.61 (a), 235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored
ICPC	.5 day	8.1 H 45 CFR 1356 (c) (1) and (2)
CW Professional Practice in Statutory Context	1 day	8.1 H 45 CFR 1356 (c) (1) and (2) Preparation for and participation in judicial determinations, IV-E Policy and Procedures
Intake/Priority Guidelines	.5 day	Not IV-E eligible
Assessing Safety	.5 day	8.1 H 45 CFR 1356 (c) (1) and (2)
Comprehensive Assessment	1 day	8.1 H 45 CFR 1356 (c) (1) and (2)
Worker Safety	.5 day	SSA Section 474 (a) (3) (E); 45 CFR 1356.60 (c) Worker retention and worker Safety [50% match]
Process Continuous Learning Plan (2 times during the week)	1 hour	8.1 H 45 CFR 1356.60 (b) (2), 235.61 (a) and 235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored.
CORE ACADEMY	SESSIO	N #3 Participant Capacity - 24
Introduce Competency Based Learning Contract (CBLC): Required for Academy participants that are new or have not had CBLC training.	.5 day	8.1 H 45 CFR 1356.60 (b) (2), 235.61 (a), 235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored
Service Planning	1 day	8.1 H 45 CFR 1356 (c) (1) and (2)
Concurrent Planning Part I and II	1.5 days	8.1 H 45 CFR 1356 (c) (1) and (2)
Case Management	1 day	8.1 H 45 CFR 1356 (c) (1) and (2)
Process Continuous Learning Plan (2 times during the week)	1 hour	8.1 H 45 CFR 1356.60 (b) (2), 235.61(a), 235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored.
CORE ACADEMY S	SESSION	#4 Participant Capacity - 24
Introduce Competency Based Learning Contract (CBLC): Required for Academy participants that are new or HAVE NOT had training on the CBLC.	4 hours	8.1 H 45 CFR 1356.60 (b) (2), 235.61 (a), 235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored
Teamwork	.25 day	8.1 H 45 CFR 1356 (c) (1) and (2) Communication skills required to work with children and families, family centered practice, kinship care
Service Integration Emergency Assistance/Partnership and Learning Organization	.5 day	8.1 H 45 CFR 1356 (c) (1) and (2) Pre-placement activities directed toward reasonable efforts and referral for services.
Systems of Care	.25 day	Referral for services and general mental health issues related to children and families in the child welfare system

Wraparound Training	.5 day	8.1 H 45 CFR 1356 (c) (1) and (2) Family Centered Practice and Social Work Methods—Including interviewing, assessment, development of case plan and referral for services. General mental health issues related to children and families in the child welfare system, kinship care, activities designed to preserve, strengthen, and reunify the family.
Interviewing/Family Engagement	1 day	8.1 H 45 CFR 1356 (c) (1) and (2) activities designed to preserve, strengthen, and reunify the family
Family Group Decision Making	1 day	8.1 H 45 CFR 1356 (c) (1) and (2) Family Centered Practice and Social Work Methods—Including interviewing, assessment and development of safety plan, case plan, kinship care, activities designed to preserve, strengthen, and reunify the family.
Process Continuous Learning Plan (2 times during the week)	1 hours	8.1 H 45 CFR 1356.60 (b) (2), 235.61 (a), 235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored.
CORE ACADEMY SESSION #5 Participant Capacity – 24		
Introduce Competency Based Learning Contract (CBLC): Required for Academy participants that are new or HAVE NOT had training on the CBLC.	.5 day	8.1 H 45 CFR 1356.60 (b) (2), 235.61 (a), 235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored
Ethics	.5 day	8.1 H 45 CFR 1356 (c) (1) and (2), (471(a)(8) Ethics associated with IV-E State Plan requirements
Independent Living (Youth)	1 day	8.1 H 45 CFR 1356 (c) (1) and (2), 477(b)(3)(d) Independent living for adolescents, kinship care
Foster Care	1 day	8.1 H 45 CFR 1356 (c) (1) and (2) Placement of children, kinship care
Legal Perspectives	1 day	8.1 H 45 CFR 1356 (c) (1) and (2) Fair Hearing and Appeals, and Preparation and Participation in Judicial Determinations.
IV-E Financing	.5 day	8.1 H 45 CFR 1356 (c) (1) and (2) IV-E Policy and Procedures, eligibility determination and re-determination
Process Continuous Learning Plan (2 times during the week)	1 hours	8.1 H 45 CFR 1356.60 (b) (2), 235.61 (a), 235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored
CORE ACADEMY SE	SSION #6	Participant Capacity – 24
Introduce Competency Based Learning Contract (CBLC): Required for Academy participants that are new or have not had CBLC training.	.5 day	8.1 H 45 CFR 1356.60 (b) (2), 235.61 (a),235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored

Child Abuse and Neglect related to Domestic Violence Issues	1 day	8.1 H 45 CFR 1356 (c) (1) and (2) Referral for services, general domestic violence issues related to children and families in the child welfare system
Child Abuse and Neglect related to Substance Abuse Issues	1 day	8.1 H 45 CFR 1356 (c) (1) and (2) Referral for services, general domestic violence issues related to children and families in the child welfare system
Impact of Child Abuse and Neglect on Child Development	1 day	8.1 H 45 CFR 1356 (c) (1) and (2) Referral for services, general mental health issues related to children and families in the child welfare system, separation, grief and loss, child development and visitation.
Working with Persons (Children/Parents) with Disabilities	1 day	8.1 H 45 CFR 1356 (c) (1) and (2) Referral for services; General mental health issues related to children and families in the child welfare system.
Process Continuous Learning Plan (2 times during the week)	1 hour	8.1 H 45 CFR 1356.60 (b) (2), 235.61 (a), 235.6 (b) (1) On the job training activities component with higher degree of supervision, trainee's performance is closely assessed and monitored.

The topics listed above are reinforced in the field by Supervisors and Social Worker 3's. They assign, monitor, coach, mentor and evaluate related applied learning activities. These applied learning activities are individually defined by a Competency Based Learning Contract (CBLC) negotiated between the new learner at Academy and their supervisor in the region. It continues to be modified and improved based on surveys and information from staff, supervisors and training staff.

Training on the Competency Based Learning Contract (CBLC) is provided at the beginning of each session of Academy for new workers. This allows for a new worker to start at any of the six sessions and become acquainted with the CBLC process their first day attending an Academy. All new workers participate in processing time with the Boise State University Child Welfare Center Director on the Continuous Learning Plan twice a week during each session of Academy. Other Topics in planning or development include Documentation (pending).

The program collects formative evaluation data on the Core Academy. This feedback assists in making modifications to the curricula on an ongoing basis. An Academy Evaluation Workgroup meets to review academy curriculum data and make modifications and suggestions based on feedback from new workers and trainers. See SF 4.9 (T.9) for more detail.

In addition to the core academy, the first statewide Annual Child Welfare Conference occurred in 2008 to address a variety of in-service issues and training needs identified during the Continuous Quality Improvement (CQI) case review process. More than 400 workers in Idaho's child welfare programs came together to learn ways to continue to improve the safety, permanency and well-being of Idaho's youth and families. The conference addressed critical issues facing child welfare workers. It also focused on advancing child welfare practice in Idaho

in the areas of safety, permanency, and well being, and improving outcomes for youth and families through the application of Family Centered Practice. A goal was to support and energize child welfare staff through recognition of strengths in our workforce, sharing successes, addressing challenges and providing support.

This forum provided an excellent learning opportunity for all staff and included dynamic presentations by former foster youth. The two-day conference was offered twice during the week so that all child welfare staff could attend one full session without compromising coverage in regional offices. Each group had the opportunity to listen to national speakers who used their own experiences to inspire youth and the adults who help them. Additional annual events are in the planning stages with an emphasis on the Program Improvement Plans and statewide Regional Improvement Plans.

- SF4.3 Develop a learning contract tool for new social work hires to support identified competencies and maximize transfer of learning from the Child Welfare Academy to the workplace. (PIP-1 item T.3) Completed 2004
- SF4.4 Train supervisors and staff and implement the use of the learning contract tool for new social work hires, to support the transfer of learning and the competencies of the Child Welfare Academy. (PIP-1 item T.4) Completed 2005
- SF4.5 Establish and implement a CFS standard for a new social work hire to assume responsibility for an independent caseload. (PIP-1item T.5) Completed
- SF4.6 Implement a competency based, enhanced Child Welfare Academy new social work hires and existing staff who could benefit from the training. (PIP-1 item T.6)

Funding Source: CWS/IV-E
Target Date for Completion: Ongoing

Status: Completed -2009

Implementation of a competency based, enhanced Child Welfare Academy was addressed in PIP-1, but continues to evolve and is a priority in terms of a continuous quality improvement. National Resource Center trainer/consultants and other trainers and consultants continue to conduct sessions related to topics identified in the CQI training needs assessment. These trainer/consultants also provided technical assistance to program specialists and the curriculum development team on parallel content to the topics included in the new employee Academy.

In addition to the above classroom training, new staff continue to be required to complete the National Indian Child Welfare (NICWA) E-learning course. The ICWA training is a prerequisite for participating in the full-day cultural competency required training in Academy.

The Program continues to seek consultation from the National Resource Center on Organizational Improvement regarding how to sustain the Academy. Financing, building the capacities of the training team and use of technology are all consultation topics. Some ongoing and planned activities to promote sustainability include:

- Sending Academy trainers to the West Coast Trainers Conference and other workforce development competencies to learn more about content development and delivery;
- Participating in the Administration of Children and Families Training Symposium follow-up calls;
- Convening the training team for curriculum refinement;
- Convening the Academy Evaluation Workgroup to evaluate various areas of new worker academy such as supervisor support on the CBLC, the degree the new worker finds the CBLC helpful, etc.
- Convening the Curriculum Review Team to review curriculum that follows a standard training template with specific requirements, to maintain an updated curriculum analysis for the new worker academy and
- Working with the IDHW Learning Management System Coordinator to develop computer-based training and other content suitable for delivery through this medium (ICPC, Financing, etc.).
- Acquiring National Resource Center training for staff and training of trainers on a variety of areas to support PIP-2.
- SF4.7 Develop competency based supervisory curriculum, which addresses content in specific child protection core services areas, i.e. screening, assessment, case management, alternate care, performance management, staff development, clinical supervision around CFS decision making, managing with data, program and resource development. (PIP-1 item T.7)

Funding Source: CWS/IV-E Target Date for Completion: 2009

Status: Revised – Carried over to 2010-2014

An area that had been addressed in PIP-1 included the development of competency based supervisory curriculum. It continues to evolve and is a priority in terms of a continuous quality improvement. Child Welfare Supervisors are required to attend Human Resource Training on Applied Leadership (four sessions), Crucial Conversations or Crucial Confrontations (2 day session), CQI training, Competency Based Learning Contract training for Supervisors and Family Centered Practice for Supervisors.

In 2008-2009, a selected group of supervisors from across the state, a CW program manager and CW chief participated in multiple sessions of technical assistance from the National Resource Center on Organizational Improvement (NRCOI). The training was provided by the same trainer/consultants who re-introduced Family Centered Practice to Idaho during PIP-1 and met the goal of having supervisor summits on an annual basis for technical support and training. University Partners, Casey staff and Central Office Program Staff attended and were facilitated through a process to strengthen supervisors following the NRCOI curriculum titled "Strengthening Child Welfare Supervision as a Key Practice Change Strategy." The series of meetings included small sub-groups that worked on assigned activities between meetings with a deliverable of a strategic plan. The agenda included work with agency leaders to establish an

overall vision and parameters for the working group's activities, working groups to establish goals and outline supervisor roles and needs and development of an outline plan for completion of a supervisor time and activity study.

The working group later reviewed results of the time and activity study, resources (training and support) currently available for supervisors, and outlined additional needed resources. They drafted an outline of a strategic plan for supervision in the state addressing integral elements including a practice model for supervision, enhanced training and professional development, systemic supports needed for effective supervision, improved retention and recruitment efforts, and succession planning. Small working groups drafted elements of the plan and completed work assignments between sessions. Agency leadership was periodically updated regarding the working group's progress in order to offer feedback, and approve activities.

Lastly, the working group reviewed the goals and activities, established reasonable time frames for the work, and developed an implementation plan for marketing the system changes proposed to those impacted by the changes (e.g., supervisors, administrators and agency leaders). The development of the strategic plan helped clarify and standardize the role of supervisors in Idaho. This strategy that was implemented with supervisors is currently being used successfully in other states to develop supervisors as practice change agents, reduce staff turnover and assist with recruitment. This strategy will be carried over into the 2010-2014 plan.

SF4.8 Train supervisors using existing training resources and newly developed competency based supervisory curriculum. (PIP-1 item T.8)

Funding Source: CWS/IV-E/CAPTA

Target Date for Completion: Ongoing

Status: Carried over to 2010-2014

Although this item was part of the PIP-1, training supervisors using existing training resources and competency based supervisor curriculum continues to be a priority. Program Managers agreed that all supervisors need ongoing training that addresses content in specific child protection core areas.

In 2009-2010, the plan is to continue convening supervisors semi-annually (or as needed) to assess, plan, and review training on such topics as screening, assessment, case management, alternate care, performance management, staff development, the continuum of supervision around CFS decision making, managing with data, and managing the workload and resource development. Supervisor training and a Supervisor Institute will be expanded and developed based on their strategic planning efforts as part of the NRCOI consults on "Strengthening Child Welfare Supervision as a Key Practice Change Strategy" (described in SF4.7 above).

SF4.9 Develop a mechanism for ongoing evaluation of the training system and ways to identify ongoing training needs of experienced staff. (combined with T. 12) (PIP-1 item T.9)

Funding Source: CWS/IV-E Target Date for Completion: 2008/2009

Status: Carried over to 2010-2014

Evaluation of training systems and the identification of ongoing training needs for staff was an item in PIP-1 and should continue to be an ongoing process. The State of Idaho Social Worker Academy is designed to support new social workers as they go through their probationary period leading to a permanent hiring decision. The academy seeks to support workers by addressing four goal areas seen as prerequisite to job success:

- Increasing the understanding of the norms, values, and mores of social services in Idaho;
- Increasing the understanding of the statewide rules and standards of social services;
- Increasing the understanding of the statewide practice models and associated standards; and
- Increasing the understanding of the self as a social worker/clinician and identifying personal growth areas.

The Idaho New Worker Academy addresses these goal areas in the six intensive weekly sessions. Within each weekly session, various topics are presented along with their associated on-the-job, applied learning activities.

The Eastern Washington University's Idaho Child Welfare Research and Training Center is partnering with the Idaho Department of Health and Welfare and Boise State University to evaluate the new worker Academy. The goals of the evaluation component of the Academy process include:

- (1) Evaluating the effectiveness of the curriculum on increasing new worker competencies;
- (2) Evaluating the effectiveness of the Academy process on increasing new worker retention; and
- (3) Supporting the integration of the Learning Organization Disciplines into the Academy process, including the supervisory support provided to new workers.

Long Term Evaluation Plan

The Idaho New Worker Academy consists of a series of instructional units designed to support new workers as they enter child welfare. Currently, the probationary period includes multiple supports, including a developmental approach in which new workers go through an orientation period, followed by a shadowing period, followed by a guided and limited case load period, which gradually expands to a full case load at the end of 6 - 8 months.

Formative Evaluation

Each 6-week Academy presentation period is called a Round, and each weekly presentation schedule is call a Session. For Rounds 1 - 4, the Academy evaluation process collected feedback on the effectiveness of individual instructors and their ability to present material in an effective manner. In addition, feedback was collected on the curriculum materials presented and their applicability to participants. In late winter and early Spring, 2006, the Academy staff formed an evaluation committee to look specifically at program improvement. The actions of this evaluation team through Spring 2009 are described below.

Academy Evaluation Plan and Rationale

The Academy Evaluation Workgroup chose a participatory evaluation design as the best way to model the collaborative principles inherent in family centered practice and to meet the needs of the Learning Organization Disciplines. Over time, it is anticipated that the following stakeholders: new workers; supervisors; instructors; program managers; chiefs; program designers; and clients will provide feedback information into the new worker 6-8 month orientation, training, and support process called Academy.

To begin building a long-term evaluation process, the Academy Evaluation Workgroup looked at three major components of the process: 1) the instructional content and procedures; 2) the impact instruction has on learners; and 3) the degree to which instruction and learning aligns with state defined competencies and performance assessment rubrics. A fourth component of the process is currently being addressed in pilot form, that being the degree to which classroom learning is transferred to field based learning through the supervisory process.

Current Status

The Academy evaluation process described above led to important changes and additions to the overall learning design proposed for new workers. First, formative feedback led to both individual instructor and topic team curriculum revision and alignment. A standard curriculum template was created and implemented during Fall 2006 and Winter 2007. Ongoing curriculum revisions have occurred based on feedback from individual session surveys.

A second important addition has been a re-alignment of the Competency Based Learning Contract (CBLC) with adult learning principles. Two central principles of adult learning theory are that adults learn best when their learning is aligned with personal goals and when they are actively solving problems that are important and real to them.

To achieve these principles, the Academy developed structures that help participants relate learning to their work. Specific goal setting activities are required for individual participants related to the 15 state-wide competency areas. The process includes new workers setting learning goals for themselves, taking those goals into the field to get feedback from their supervisors, applying learning strategies to meet the goals by using their caseload or shadowing other workers in real time practice, and the self reflecting on their learning and getting feedback from their supervisors on their progress in meeting the goals.

The evaluation process has changed to meet the changing needs of the program and participants. As trainers or training teams have changed, so has the need to provide individual session

feedback. The Academy evaluation process started with this type of satisfaction feedback, but then went to a more outcome based feedback model as the training teams became stabilized over time. New circumstances, however, led to changes in trainers and thus the need to again provide feedback to new trainers. In addition, it was important to track the support new workers were receiving in their field assignments, so that also became an evaluation target.

Currently, the weekly evaluation instruments collects four important types of information: 1) information related to self reflective feedback on progress related to the 4 major outcomes of Academy; 2) post only, reflective pretest information related to increases in ability to accomplish the state wide 15 competencies; 3) satisfaction feedback related to the learning environment and climate; and 4) feedback related to the perceived support for implementing the transfer of learning activities build into the Academy process via the Competency Based Learning Contract (CBLC). An important supplement to the evaluation process has been after session phone calls to supervisor by Academy leaders. These phone calls keep supervisors current on the engagement levels of their staff in the Academy activities.

An exit survey for new workers who completed the Academy session and the probation period was also implemented during the 2008-09 program year. To date, 19 new workers have completed all six sessions of Academy and returned the exit survey. The information gained is helping program developers understand which components of the Academy process are best supported by the various Academy support systems, including the classroom sessions, the transfer of learning requirements, supervisor feedback, peer mentoring, and other aspects of the formal system.

Exit survey results are shown on Attachment D. Findings indicate that new workers rate themselves as more knowledgeable on the 15 competencies at the end of Academy than they were at the beginning. Findings also indicate that new social workers are progressing strongly toward the four Academy outcomes. Attachment D also shows that the components of Academy are supporting new workers in specific aspects of social work, with the supervisory relationship being the overall greatest support in new worker learning.

The 2008-09 program year also saw the beginning of a process that will lead to alignment of the 15 social worker competencies with the personnel performance evaluation system implemented by the State. Currently, the Academy evaluator is working on identifying models of effective practice that lead to collecting baseline data related to new worker competencies that can then be used by supervisors to evaluate new worker learning on a pre-post basis.

In addition, the possibility of aligning social worker competencies with performance evaluation leads to the setting of personal professional development goals at the end of the Academy process. This would support on-going professional development assessment throughout the retention of a worker, which is hypothesized to lead to increase worker satisfaction and retention.

Developmental Needs

To continue developing the evaluation of the Academy process, the following are needed:

- 1. Rigorous use of the CBLC as a professional growth tool by supervisors. This area has increased greatly in 2008-09, but is still an area of interest.
- 2. Development of a competency orientation and self assessment tool for new workers;
- 3. Development of a database to record CBLC information; and
- 4. On-going oversight by the Academy Evaluation Workgroup for the purposes of monitoring learning, creating new tools to increase program effectiveness, and providing feedback to Program Managers and Chiefs on the impact of the Academy process on retention.

New Worker Academy Summary

The Idaho New Worker Academy has moved from an instructor centered feedback model to a learner centered feedback model which seeks to understand how new workers experiences increase their learning around the target competencies with the hope that increased knowledge and success in the field will lead to increased client outcomes and worker retention. This report has outlined what has already been accomplished in terms of program effectiveness evaluation and what still needs to be accomplished to provide a complete picture to program officials. It should be apparent in the descriptions provided that this report is also a celebration of really good and focused efforts by a group of dedicated professionals for whom excellent service to clients is the standard by which all else is judged.

The CFS Program's CQI instrument asks case reviewers to identify the strengths of the case, areas needing improvement, systemic factors to address, and areas of training that need to be addressed. The comments from the instruments have been entered in a central database. The FACS Division's CW Program and Planning, Evaluation and Training Unit monitors this input to identify emerging training needs to be addressed.

SF4.10 Develop a tool to assess current competency level of individual line staff and supervisors. (PIP item)

Funding Source: CWS/IV-E/CAPTA

Target Date for Completion: 2008/2009

Status: Carried over to 2010-2014

Development of tools for assessing current competency levels was an item in PIP-1 and should continue to be an ongoing process. The State of Idaho has a mandatory electronic performance appraisal system. The Department of Health and Welfare selected 36 competencies from hundreds described in the appraisal system which best describe a Health and Welfare employee. At the Department level, curriculum was developed for supervisors defining these 36 competencies. All Supervisors in the Department are required to attend four two day sessions of Applied Supervision (1-4). This course focuses on developing job descriptions based on the Department's core competencies; developing hiring strategies that focus on competency

assessment; conducting performance appraisals, which include both a performance appraisal and a staff development plan; and dealing with challenging performance issues. This course is taught regularly by Human Resource Specialists and other supervisors and managers within the Department.

A facilitator's guide was developed for Child Welfare Chiefs of Social Work to train supervisors on their orientation, coaching, staff development and performance management roles in indoctrinating new employees to the values and methods of Idaho's Child Welfare system. Training of supervisors using this tool was completed in December 2006. Additionally, Child Welfare supervisors and managers validated child welfare supervisor competencies within the employee appraiser system.

The CFS program refined the Department Competencies, by validating 13 core competences from the Department's list of 36, which best describe Child Protection and Children's Mental Health workers. Job specific electronic performance appraisal templates were developed for these two programs. The integrated Child Welfare Academy curricula and field-based learning contract are mapped to this set of job specific competencies. T.9 describes the ongoing evaluation of academy content including collection of input from each learner about the competencies addressed in each Academy module and a self-assessment of their new learning using a post-reflective pre-scaling tool.

Continuous quality improvement efforts help to advance assessment of competencies for individual line staff and supervisors. Learner self-assessment and supervisor assessment of the new employee continues during the learner's nine-month probationary period, using anchoring exercises and scales associated with Academy topics and is built into the competency-based learning contract. Other tools will evolve as we continue to modify and improve the process.

SF4.11 Construct a CFS specific bridge to the IDHW Employee Appraiser software used in writing annual performance evaluations. Provide a template that will allow supervisors to evaluate their staff using child welfare specific competencies in conjunction with the general competencies currently identified in the Employee Appraiser. (PIP-1 item)

Funding Source: CWS/IV-E Target Date for Completion: Ongoing

Status: Completed - 2009

Although this item was implemented under PIP-1 and an annual performance evaluation template has been developed, the issue of annual performance evaluations and specific competencies for different levels of social workers continues to need to be addressed as an ongoing priority.

After Child Welfare supervisors and managers validated child welfare Supervisor competencies within the employee appraiser system, the competencies were used to define a CFS Social Worker career ladder, which includes the supervisor classifications. There are six-levels to the DHW social work classification. A Social Worker 1 is an entry level employee with general

social work qualifications and no prior child welfare experience (and considered an under fill for the Child Welfare Social Worker 2 Position). Social Worker 2's are considered full journeyman or professional level Child Welfare Social Workers. The remaining levels include Social Worker 3's at the third level of the six-level Child Welfare job series. Incumbents at this level serve as lead worker in a social service unit and mentor students and newer social worker staff completing the Child Welfare Academy. Incumbents provide consultation to other Social Workers on complex cases and work autonomously in single-person and small field offices where supervision is periodic and at a distance. They may serve as supervisor in some areas of the state. The remaining levels include Supervisor, Chief, and Regional Program Specialists.

With the new implementation of the career ladder classifications, job-specific, competency-based performance evaluation templates for CFS supervisors and each of the other levels is being considered. In 2009, the Academy Evaluation Workgroup will be revising the new worker competencies (Social Worker 1 and Social Worker 2) to language more reflective of practice and standards.

SF4.12 Develop resources to implement the training portion of the PIP-1.

Funding Source: CWS/IV-E Target Date for Completion: Ongoing

Status: Discontinued- 2009

Although this item was implemented under PIP-1, the issue of the development of resources to implement training and the intensive training for new workers continues to be a priority. The Division of Family and Community Services submitted three requests to the legislature for additional funding for the expanded Child Welfare Academy. These requests were denied. CFS again submitted a legislative request in 2009-2010 to seek spending authority in order to include 3-4 trainers that would have a variety of training responsibilities that include providing training at the new worker Academy, working with new workers in the field during their probationary period, etc. This would also reduce some of the job responsibilities of regional chiefs to allow them to work more on CQI and other related issues. This recent request was denied.

The program will continue to identify other resources to sustain our gains (e.g. grants) and the issue continues to be a topic for consultation through the National Resource Center on Organizational Improvement

- . . .
- SF4.13 Develop and implement a plan to communicate the availability of training and policy changes. (PIP-1 item T.13) Completed 2004
- SF4.14 Revise current administrative rules regarding foster parent pre- service training statewide. (PIP-1 item 34.1/T.14) Completed 2006
- SF4.15 Revise IDAPA administrative rules for mandatory training hours and consequences for non-compliance. (Activities regarding rule changes are combined with 34.1) (PIP-1 item 34.3/T.15) Completed 2006

- SF4.16 Develop process to monitor foster family compliance with ongoing training requirements. (PIP-1 item 34.4/T.16) Completed 2004/5
- SF4.17 Develop and implement standards for completion of Family Development Plans. (PIP-1 Item 34.5/T.17) Completed 2004
- SF4.18 Train staff and foster families on the use of Family Development Plans (PIP-1 item T.18) Completed 2007

SF4.19 Complete Child Welfare Manual revisions.

Funding Source: CAPTA/CWS

Target Date for Completion: 2007

Status: Carried over to 2010-2014

The CFS Practice Manual is about 70% complete. Completed chapters have been forwarded to our contractors, Write Way, for formatting and preparation for posting as an e-manual. There have been numerous competing priorities since first setting the goal for complete. We have previewed some of the text as it will appear on-line and are very pleased with the results.

Systemic Factor 4 - Staff and Provider Training SUMMARY OF ACCOMPLISHMENTS 2005-2009

During CFSR-1 in April of 2003, Idaho was found not to be in substantial conformity with this systemic factor of training. To address concerns the agency implemented the following key strategies were implemented in PIP-1 and in the time that followed (2005-2009):

- Expanded the New Worker Academy
- Developed a "New Worker Caseload/Supervision Continuum" standard that describes the levels of intensity, duration, and types of training a new CFS employee receives
- Implemented the PRIDE curriculum statewide as Idaho's model of resource parent preparation and training
- Developed standards for training, mutual assessment, home environment checks, and documentation
- Provided multiple opportunities for licensed resource parents to complete a mandatory 10 hours of continuing education each year
- Used licensing caseworkers to monitor compliance with on-going training requirements on a regional basis

Idaho completed their CFSR-2 in April 2008. The State was found to be in substantial conformity with the systemic factor of training.

SYSTEMIC FACTOR 5 -- SERVICE ARRAY AND RESOURCE DEVELOPMENT

STRATEGIES

Systemic Factor 5 Item 35. Availability of array of critical services

35.1 Increase availability of substance abuse services which focus on substance abusing caregivers with children. (PIP-1 item)

Funding Source: CWS/TANF/RMQIC

Target Date for Completion: 2004 - 2005 Status: Completed 2009

Expediting services for parents of children involved in child welfare is essential in timely reunification efforts.

In State Fiscal year 2008, 981 clients who received substance abuse treatment also had an open child protection case. Two hundred ninety two were men and 676 were women. Individuals needing substance abuse services who also have an open child protection case are prioritized for treatment. This allows them to enter treatment quickly after a substance abuse assessment, bypassing any waiting lists.

Individuals receiving substance abuse treatment stay in treatment an average of 106 days. Individuals who receive substance abuse treatment and have an open child protection case are offered the following ancillary services as needed:

- Housing
- Child Care
- Transportation
- Family Therapy
- Life Skills education
- Case management

To date in FY2009, the Division of Behavioral Health has treated 558 clients who had an open child protection case. Based on this rate, Behavioral Health anticipates treating 1,100 clients by the end of the fiscal year. This is an increase from 2008.

Behavioral Health is also involved with the Idaho Meth Project through their involvement with the Interagency Committee on Substance Abuse Prevention and Treatment (ICSA). The Department routinely receives updates and gives input as a stakeholder to the Idaho Meth Project.

Idaho is currently a Safe and Stable Families grant recipient which allows the establishment of pilot Family Drug Courts for parents with substance abuse issues who are involved in the Child Welfare system. These Family Drug Courts are established in two regions of the state, and plans are in place to expand the Family Drug Court to a third region. This targeted grant program aims to improve permanency outcomes for children

affected by methamphetamine or abuse of other substances. Family Treatment Court (FTC) has four phases consisting of intensive case management, frequent appearances before the FTC judge, mandatory drug and alcohol counseling and treatment, attendance at a self-help group such as AA or NA and random drug testing.

All seven regions have a Substance Abuse Liaison contractor based in CFS offices. The Substance Abuse Liaisons work directly with child welfare clients and substance abuse providers in the community to facilitate timely assessments and access to treatment options. Timeliness of these assessments is essential for short and long-term planning for children who are in foster care. Parents or caregivers who have children involved in the child welfare system are prioritized for services and are not placed on waiting lists.

- 35.2 Develop or adopt and implement training curriculum for agency workers on substance abuse and child welfare including relapse prevention planning. (PIP-1 item) Completed 2006
- 35.3 Develop culturally relevant children's mental health services. Discontinued 2007

STRATEGIES

Systemic Factor 5 Item 36. Accessibility of services across all jurisdictions

- 36.1 Each region will develop and implement a plan for improving accessibility to services. (PIP-1 item) Completed 2005
- 36.2 Assure parents have access to adult mental health services. (PIP-1 item) Completed 2004
- 36.3 Provide training to staff regarding existing community resources. (PIP-1 item)

Funding Source: CWS

Target Date for Completion: 2004 - 2005

Status: Completed - 2009

The Idaho CareLine compiled regional Community Resource Directories for resource families and CFS staff. Since phone numbers often change, the directories list resources currently available in the community and refer the staff/resource parent to the CareLine who will connect them with the resource. Additionally, a one-page instruction sheet was developed to teach CFS staff and resource families how they can access the CareLine data base on-line.

Each field office also invites community partners to present an overview on resources during the year at staff meetings.

New CFS staffs receive training in the Child Welfare Academy on developing partnerships, service integration/navigation, emergency assistance funding and the learning organization philosophy. All of these efforts assist staff in knowing how to access community services.

- 36.4 Develop and implement a standard for effective service delivery incorporating models and method for rural areas. (PIP-1 item) Completed 2004/5
- 36.5 Train CFS staff to improve their skills in effective service delivery. (PIP-1 item) Completed 2005
- 36.6 Develop a standard for families to be referred to appropriate community resources for post-adoptive services. (PIP-1 item) Completed 2004
- 36.7 Assure Tribal access to information about available funding to expand services.

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014

The tribal relations program manager continues to distribute notices, usually via e-mail, to tribal program staff about possible grant opportunities – particularly those identifying tribal services as a priority for the grant. In the past year each of the six tribes in Idaho has contracted with the Department for federal Title XX Social Services Block Grant funds totaling \$200,000 per year. During FY 2007, one tribe has applied to the Department for federal promoting safe & stable families (PSSF). During FY2008, four Tribes signed agreements with the Department to provide PSSF funds to their communities, totaling \$30,000. Some of the Tribes are interested in pursuing Title IV-E agreements with the Department to access funding for outside of home placements under their jurisdiction.

The Tribal Relations Program Manager has continued to collaborate with other Divisions and other partners to identify potential funding opportunities for Tribes.

36.8 Reassess current criteria for Specialized Foster Care.

Funding Source: CWA/IV-E

Target Date for Completion: 2007

Status: Completed -2009

A committee has been formed that includes CFS and CMH Regional Program Managers, Chiefs of Social Work and other staff from CFS and CMH to re-examine the criteria for Specialized Foster Care. Examples from other states continue to be collected and reviewed. The committee has also reviewed assessment protocols for determining levels of care. The instrument that was selected to assess the appropriateness of a child's placement is the Child and Adolescent Level of Care Utilization System (CALOCUS) which was developed by the American Academy of Child and Adolescent Psychiatry and the American Association of Community Psychiatrists. The

CALOCUS provides a framework for defining the appropriate character and intensity of both services and resources to meet the needs of children and adolescents, but is tailored to children with serious emotional disturbance. In an effort to determine whether the CALOCUS could also be applied specifically to children in foster care, children in placement were assessed on the CALOCUS to see if the scores are reflective of the child's current placement. This data is still under review. If applicable, the CALOCUS could help provide a consensus on level of care determination. Meanwhile, a subcommittee continues to work on clarifying criteria for both Level III foster care and therapeutic foster care.

STRATEGIES

Systemic Factor 5 Item 37. Ability to individualize services to meet unique needs and individualizing services is addressed in the following PIP-1 action steps: 3.3, 3.4, 17.1, 18.1, 18.2, 18.3, 18.4, 22.1, 23.1, 25.1, 25.1

- 37.1 Encourage and support faith-based mentoring programs for parenting and family relationship training . Complete 2008
- 37.2 Use faith-based families in the community to assist families who need environmental or emotional assistance.

Funding Source: PSSF
Target Date for Completion: Ongoing

Status: Discontinued - 2009

The faith-based community is an excellent resource throughout Idaho. Regional staff visit local churches each year to make presentations on preventing and reporting child abuse and neglect, foster parent recruitment, adoptive searches, and being a mentor and support to individuals who come to the attention of the child welfare system.

When families identify they have an affiliation with a church and give their permission, social workers involve clergy or mentor-families from their church to participate in Family Group Decision Making meetings and/or service planning meetings. Throughout Idaho, churches support families involved with child protection with assistance such as payment of rent, utilities, provision of food, and emotional assistance including counseling, mentoring and fellowship.

"Healthy Families – Nampa" is a coalition of religious, civic, education, minority, media, and business leaders. This coalition is dedicated to improving the well being of children through community initiatives that support healthy marriages and responsible fatherhood. Healthy Families Nampa conducts several special events and campaigns each year to raise awareness, focus attention on family issues, and provide educational opportunities for families and the public. Their website also provides information about 22 various church organizations and service providers, and identifies which offer premarital counseling, family and marriage wellness counseling, mentoring services, and/or parenting and family education services.

37.3 Continue to support the development and expansion of respite care.

Funding Source: CMHBG/PSSF

Target Date for Completion: Ongoing

Status: Completed - 2009

This strategy was previously submitted and monitored by the Children's Mental Health Program. However, CFS has retained this strategy as many client families and foster families use respite care services. A Respite Care Standard was approved and became effective January 1, 2006. The Standard states that each region shall make respite care services available to families, instructs the family and the provider how to receive respite care reimbursement, and tells the social worker how to document respite care in FOCUS.

Reporting of the actual use of respite care by CFS is currently not available; however, regions report that respite care is available. Efforts to expand and develop respite care include:

- Encouraging case workers and resource families to use respite care;
- Making information on how to access respite readily available;
- PRIDE program instructors also speak to resource families about the option of respite care; and
- The use of respite care is also discussed at foster parent recruitment/retention meetings.

Most efforts to expand and develop respite care are similar across the state. However, some efforts are specific to a region. For example, Region 2 is working with Children's Mental Health to develop a plan to expand respite in the region. This collaborative effort is in an early stage and has no measureable outcomes at this time. Region 5 holds respite care training four to five times each year, and expansion of respite is part of the region's ongoing recruitment activities.

37.4 Recruit and train a group of qualified expert witnesses to provide court testimony on behalf of Indian children

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014

This item is being reopened. Some of the Qualified Expert Witnesses (QEW) who were initially trained are no longer available and others are interested in becoming QEW's. The latest ICWA CQI results show that compliance with the ICWA requirement on use of QEW's is low. The Indian Child Welfare Advisory Council will be reviewing the current list of QEWs in 2009 to determine if additional QEWs need to be recruited and trained.

Systemic Factor 5 – Service Array and Resource Development SUMMARY OF ACCOMPLISHMENTS 2005-2009

During the 2003 CFSR, this factor item was rated as an Area Needing Improvement and was included in PIP-1. Idaho has increased services in the areas of assessment and service provision. Idaho allocates state and federal funds to each of the seven regions of the state to allow regions to develop services according to their local needs. Idaho continues to seek and obtain additional resources for services to families by applying for grants, submitting legislative request for additional funding, collaborating with community partners to share and expand resources for services, and utilizing natural family supports to augment existing services.

As part of PIP-1, a standard for service delivery was created. Regions also increased the use of family group decision making meetings to increase and promote family involvement and individualized services. Regions utilized flexible funding, wraparound services, and individualized case planning. The Department also increased cultural competency of CFS staff relative to persons with Indian heritage so staff could individualize services and maintain connections. Idaho was found to be in substantial conformity on this factor in the 2008 CFSR-2.

SUPPORTING DOCUMENTATION

Title IV-B 2, Promoting Safe and Stable Families

As service organizations and agencies vary by community, contracts for PSSF services are established locally in each region of the state. The CFS program also initiates statewide contracts, such as foster care and adoption recruitment. Each of the six Tribes living within the boundaries of Idaho are able to request PSSF funds.

For FY 2008-09, the following services were provided using PSSF funds:

FAMILY PRESERVATION

Region 2 – Family Preservation

Respite Care
Parenting classes
Intensive Family services contracts
Family Group Decision Making
Health and Safety Contract
Drug Testing

Region 3 – Family Preservation

In-home support contract (Family Connections)
Counseling; stabilizing the family environment
Contracted case management for in-home services (Family Connections)
In-home services for Spanish speaking families (Boise State Nursing for Spanish Health Educators)

Region 4 – Family Preservation

Family Preservation Services contract (Family Connections)

Family Group Decision Making contract (Family Connections)

Protective parenting and treatment contract (SANE)

Anger and domestic violence assessment and treatment contract (Tom Wilson)

Brief counseling and assessment contract (BPA behavioral health)

Drug and substance abuse testing services contract (Weinhoff drug testing)

Respite care, parenting classes – community based resources

Counseling for non-Medicaid eligible parents - community based, not contractual

Supervised activity programs for youth – community based resources

Purchases to ensure safe family environment

Bus passes and gasoline required to support case plan activities

Region 5 – Family Preservation

Family Group Decision-Making contract (Linda Arossa)

Family Group Decision-Making contract (Pro Active)

Region 6 – Family Preservation

Intensive Family Services contract (Melissa Vogel)

Intensive Family Services contract (Bright Tomorrows)

Intensive Family Services contract (BYF Family Resource)

Intensive Family Services contract (Awareness Center)

Family Group Decision Making (Awareness Center)

Parenting contract (Melissa Vogel), parenting contract (BYF Family Resource)

Respite, crisis intervention, parenting, transportation (BYF Family Resource)

Gas vouchers, bus passes

Region 7 – Family Preservation

Family Decision-Making, parenting classes, budgeting, sanitation, hygiene, child development, respite, crisis placement contract (Ashton Memorial; ARFIP), training materials, housing, utilities, groceries and transportation.

FAMILY SUPPORT

Region 1 – Family Support

Intensive Family Intervention contract (Idaho Youth Ranch)

Region 2 – Family Support

Intensive family services contracts
Foster family respite
Transportation
Parenting
Drug Testing

Region 3 – Family Support

Mental Health and Counseling services

Transportation, stabilizing the family environment, foster family respite, daycare Youth Companion Services, evaluations/counseling, paternity testing Health Screening (Boise State Nursing for Spanish Health Educators)

Region 4– Family Support

Foster Parent Support contract (Family Connections)

Family Group Decision Making contract (Family Connections)

Foster parent support services contract (Service Alternatives)

Family Preservation/In-Home voluntary services contract (Family Connections)

Foster family counseling for loss and grief issues contract (BPA Behavioral Health)

Substance abuse testing services by contract (Weinhoff Drug Testing)

Crisis Day Care/Respite, parenting skills training – community resources

Faith-based counseling and education services – community resources

Bus passes and gasoline to support voluntary service plan activities

Motel fees and rent to stabilize housing, non-EA eligible families

Purchases of goods for children's safety and hygiene

Payment of utilities and household repairs for safety of children to support voluntary service plan activities

Region 5– Family Support

Foster Parent Liaison contract (incorporated into TFC recruitment contract with Magic Valley Youth and Adult Services)

In-home support contract (Northstar)

In-home support contract (Family Connections)

Region 6- Family Support

Intensive Family Services contract (Melissa Vogel);

Intensive Family Services contract (BYF Family Resource)

Intensive Family Services contract (Bright Tomorrows)

Intensive Family Services contract (Awareness Center)

Family Group Decision Making (Awareness Center)

Parenting contract (BYF Family Resource), parenting contract (Melissa Vogel)

Crisis intervention through Foster Parent respite

Parenting, transportation (BYF Family Resource)

Gas vouchers, bus passes

Individual Counseling with Psychological Associates for mom before TPR

Transportation

Day Care

Region 7– Family Support

Foster Family Respite, training, counseling; parenting, faith-based counseling, transportation. Child Advocacy Center

FAMILY REUNIFICATION

Region 2 – Family Reunification

Psychiatric Evaluation Services contract (Phillips)
Temporary Employee for transportation, family visitation
Family Group Decision Making
Health and Safety contract
Drug Testing

Region 3 – Family Reunification

Legal fees, reunification/stabilization Hispanic families Evaluations and counseling

Region 4 – Family Reunification

Supervised visitation contract (Family Connections)

Supervised visitation contract (Kids Services)

Family Group Decision Making contract (Family Connections)

Brief counseling and assessment services for non-Medicaid eligible parents (BPA)

Anger management, domestic violence assessment and treatment

services contract (Wilson)

Protective parenting assessment and treatment services contract (SANE)

Substance abuse testing services by contract (Weinhoff Drug Testing)

Parenting classes – community and faith based resources

Bus passes and gasoline to comply with case plan requirements

Other services that are court-ordered for case plan compliance

Region 5– Family Reunification

Family Group Decision-Making contract (Linda Arossa)

Family Group Decision-Making contract(Pro Active)

In-home support contract (Northstar), in-home support contract (Family Connections)

Region 6– Family Reunification

Intensive Family Services contract (Melissa Vogel)

Intensive Family Services contract (BYF Family Resource)

Intensive Family Services contract (Bright Tomorrows)

Family Group Decision Making (Awareness Center)

Parenting contract (BYF Family Resource), parenting contract (Melissa Vogel)

Respite (BYF Family Resource), crisis intervention (BYF Family Resource), transportation

(BYF Family Resource, gas vouchers, bus passes within 1st 12 months), recruitment; conference expenses

Family/Individual Counseling

Domestic non-violence groups, anger management groups with family services.

Substance abuse treatment

Region 7– Family Reunification

Transportation, counseling, housing, groceries, utilities.

ADOPTION SUPPORT AND PROMOTION

Region 1 – Adoption Support

Counseling

Updates for adoption home studies

Financial assistance to pre-adopt families to stabilize family to assist with moving cases to finalization.

Region 2 – Adoption Support

Adoption Recruitment and Study contract (Latah County)

Out of area contracts for adoption support

Individual expenses with individuals in the adoption process.

Region 3 - Adoption Support

Home study contract (Idaho Youth Ranch and New Beginnings)
Staff travel, staff training, adoption seminar, and day care for sibling group
Child travel expenses, counseling, advertising/legal fees
Medical consultant for high needs children

Region 4 – Adoption Support

Adoption Home Studies contract (CASI)

Adoption Supervision contract (Harden House)

Adoption study and supervision contract (Region 1 contract – Idaho Youth Ranch)

Transportation for adoption visitation and placement

Motels for adoption visitation and placement

Specialized adoptive parent education classes

Family Group Decision Making contract (Family Connections)

Region 5 – Adoption Support

Recruitment (contract with Magic Valley Youth and Adult Services)

Region 6 – Adoption Support

Temporary employee – adoption support Training Support for Adoption Council Home studies Adoption Services (A New Beginnings) Life books

Region 7 – Adoption Support

Home studies, life books, social histories contract (CASI), genetic forms on occasion as part of the CASI contract.

SUMMARY OF PSSF FUND EXPENDITURES 2005-2009

The following services will be offered under each category in IV-B, subpart 2.

Family Preservation: Family therapy; family group decision-making; in-home support; parenting classes; intensive family intervention services; legal services; parenting time; in-home respite; drug testing; and stabilizing the family environment.

Family Support: Intensive family intervention services; high-risk infant; health education; legal services; transportation and visitation; mental health services; foster family respite; family group decision-making; foster parent training; foster parent support; youth companion; parent education; crisis intervention; and drug testing.

Family Reunification: Supervised visitation; transportation; mental health services; legal services; family and individual counseling; respite; anger management evaluation and treatment; parenting time and parent education; and intensive family services.

Adoption Support and Promotion: Adoption services; adoption supervision; adoption home studies; staff, family and child travel; adoption recruitment; promotion; awareness; counseling; advertising; and legal services.

STRATEGIES

Systemic Factor 6 -- Responsiveness to the Community

SF6.1 Respond to and implement, as feasible, the recommendations of the Keeping Children Safe Panels.

Funding Source: CWS/CAPTA
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Idaho's Keeping Children Safe (KCS), Citizen Review Panels, submit annual recommendations to the Department of Health and Welfare, Children and Family Services. In October 2008 the KCS Panels formally submitted 26 statewide recommendations for 2009. These recommendations are submitted in conjunction with the Citizen Review Panel's annual activities and membership report. Children and Family Services responded to the recommendations after six months and will respond again after twelve months with further updates. On April 24, 2009, the KCS Panel Chairpersons and IDHW Liaisons were provided with the Department's first responses. See Attachment A for the "Keeping Children Safe Panels' 2008 Annual Report and April 2009 Department Responses." The Annual Statewide KCS Panel Conference is scheduled for October 23, 2009, at which time the Department's second and final response will be provided to the statewide membership of the Keeping Children Safe Panels.

SF6.2 Participate in and support the recommendations and activities of the Children at Risk Task Force.

Funding Source: CJA
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

The Child Welfare Program Manager also serves as the Children's Justice Act Coordinator, attends all meetings of the CARTF, and writes the CJA annual report. It should be noted that the strategies of the Governor's Children at Risk Task Force align with the strategies of this

Comprehensive Plan as well as with the strategies submitted by the Supreme Court Child Protection Court Improvement Project Committee.

Additionally, three members of the Children at Risk Task Force participated in Idaho's State Self-Assessment and PIP process associated with the CFSR-2.

SF6.3 Participate in and support the activities of the Kincare Coalition.

Funding Source: IV-E
Target Date for Completion: Ongoing

Status: Completed - 2009

The Idaho Kincare Coalition is an informal statewide organization which includes a network of relative caregivers, advocates, public and private agencies dedicated to improving the lives of kinship families. Improvements have taken the form of providing technical assistance to interested parties, informing and/or advancing policy, and support to programs and services that aide kinship caregivers across Idaho.

Through funding support from Casey Family Programs, the IDHW Navigation Regional service units are continuing to participate with the Idaho Kincare Coalition to assist relative caregivers not formally involved with the child welfare system. Navigation is a short-term, solution-focused, flexible service intended to help members of the community, who are experiencing temporary instability, to find services and resources appropriate for their needs. IDHW navigators are represented by their management team members at monthly Kincare Coalition meetings to provide a direct linkage and accessibility to Department resources and will continue to be the IDHW program working to support the on-going efforts of the Coalition.

SF6.4 Participate in and support the activities of the Idaho Child Welfare Court Improvement Project

Funding Source: CIP/CWS
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

The Central Office CFS Program Manager attends the court improvement project meetings and is also actively involved with the Rules and Statutes and Training Subcommittee.

Continuing to collaborate, the Child Protection Court Improvement Project (CIP) actively works with the Department to improve the number of children who are eligible for Title IV-E funding. The Department's eligibility determination unit sends a list of the case number, the child's name, the judge, and the issues that are causing the case to be non-compliant with Title IV-E to the Director of the Child Protection Court Improvement Project. The CIP Director then forwards the information to each judge with a letter encouraging him or her to include the findings in future orders or to hold a permanency hearing if one has not been held.

The CIP and CFS worked in tandem to gather input for PIP-2. Collaboratively, the courts and CFS are beginning to implement the strategies outlined in PIP-2 by participating together on calls with the national resource center and in monitoring permanency data.

One of the most recent collaborations between the Idaho Child Welfare Court Improvement Project and CFS is a joint application, requesting a system change implementation project from the Western and Pacific Child Welfare Implementation Center.

Children and Family Services values the support of the Court Improvement Committee and will continue to assist the committee in working towards the goals of their strategic plan.

SF6.5 Continue regular meetings of the Idaho Indian Child Welfare (ICW) Committee with both the child welfare and children's mental health programs

Funding Source: CWS/MHBG
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

The Idaho State and Tribal Indian Child Welfare Committee has met continually since the early 1990's. The plan is for those quarterly meetings to continue. The committee changed its name in 2008 to the Indian Child Welfare Advisory Council and revised its bylaws to better reflect its goals and objectives.

An annual activity is the planning, coordination, and oversight for a state-wide Indian Child Welfare conference that is co-hosted each year by the six tribes residing in Idaho and the Department. The 2008 conference, "30 Years of ICWA: Past, Present, Future" was held in June 2008 at Boise State University. Over 130 attendees from the agency, community, and tribes participated in the conference.

During 2008 quarterly meetings, the ICWAC discussed many topics and made recommendations on policy, procedure and systemic processes related to Indian child welfare issues. Tribal ICWAC representatives participated in the agency's CFSR process, PIP development and Title IV-B Plan revisions.

The ICWAC continues to foster connections and collaborations with other state committees such as the Child Protection Committee, Independent Living Committee and the Foster Care Recruitment Committee. ICWAC members also provided input and guidance with the development of ICWA-related documents that agency staff will use to promote the early identification of Indian ancestry and tribal affiliation. A tribal attorney, who is a member of the ICWAC, was also involved in the development of state court documents that include ICWA content.

In 2009, the ICWAC will revisit several components within the IDHW ICWA Standard, including Qualified Expert Witness, Active Efforts, Tribal Notification, TPR and Adoption proceedings. This will be an ongoing review during 2009. ICWAC will also be involved with

the development of the CFS Child Welfare Manual. Plans are also in place to develop an ICWA training session that can be presented to agency staff, court judges and attorneys throughout the state. Another goal of the ICWAC is to bring multiple agencies together to discuss strategies to integrate ICWA-related issues throughout the continuum. The 2009 ICWA Conference is scheduled for June 12 in Fort Hall, Idaho. The theme of the conference is "Fostering Our Tribal Future". The one-day conference will focus on legal and ethical aspects of ICWA.

SF6.6 Continue to develop and implement community councils for children's mental health services to provide information on services provided and service needs at the community level. Discontinued - 2007

SF6.7 In regions where there is a tribally operated social services or tribal court Services, the Department will consult with the tribe to negotiate a procedural agreement for basic critical coordination for crisis response, child protection risk assessments, foster home placement and court appearances.

Funding Source: CAPTA/CWS

Target Date for Completion: 2008

Status: Carried over to 2010-2014 plan

Existing agreements will be revisited by the State and the Tribe to evaluate if the agreement continues to meets the mutual needs of both parties. Where no agreement exists, State designated staff will request consultation with Tribal designated representatives to collaborate on concurrent interests.

SF6.8 Select, train and provide support for 7 region-based ICWA liaisons who can act as the "go to" resource person for staffing of ICWA cases.

Funding Source: CWS
Target Date for Completion: 2007

Status: Carried over to 2010-2014

A regional ICWA Resource Team has been established to provide advanced ICWA training to designated staff members from each DHW region. The team is comprised of one agency worker from each region who has volunteered to be the ICWA point-of-contact for their region. The team first convened in February 2009 to discuss the purpose, including goals and objectives of the team.

Systemic Factor 6 – Community Responsiveness SUMMARY OF ACCOMPLISHMENTS 2005-2009

Recognizing that none of us, alone, can accomplish safety, permanency, and well-being for Idaho's children, CFS has taken the challenge of collaboration to heart and made some significant progress in partnerships with other entities in the state who are also concerned about, provide services to, and work with child welfare and family issues.

SUPPORTING DOCUMENTATION

Collaborative Efforts with Tribal Programs

For the past several years DHW and tribal program staff have become increasingly active and successful in on-going collaborative efforts to access, coordinate and enhance services for Indian people and reservation service areas in Idaho.

During 2008, the collaborative accomplishments included:

- Tribal social workers invited to attend CFS Child Welfare Conference.
- Child Welfare Partnership and Boise State University Scholar's Program representatives attend ICWAC meeting to bring awareness about the programs.
- ICWAC Tribal representatives participate in CFSR-2 and PIP-2.
- Combined meeting of the DHW and Tribal ICWAC, TANF, Medicaid, Behavioral health committees convene with DHW and Tribal leaders in attendance.
- ICWAC and DHW host the 2009 ICWA Conference in Boise, Idaho.
- Tribal representatives, BIA representatives and DHW representatives meet to work out issues with the consent form used by agency staff to verify tribal income for benefit assistance.
- Tribal attorney participates in Court Improvement Project initiative to develop court documents that include ICWA-related content.

The DHW Tribal Relations Program Manager maintains and shares a mailing list of the current leadership for the six tribes in Idaho – Kootenai Tribe of Idaho, Coeur d'Alene Tribe, Nez Perce Tribe, Shoshone-Paiute Tribes, Northwestern Band of the Shoshone Nation, and the Shoshone-Bannock Tribes. This list is used by all DHW program leadership to request tribal participation in planning and implementation of service improvements, provide various notifications and share information with tribal leadership.

Concurrent Jurisdiction

Idaho is a partial or non-mandatory Public Law 83-280 state. In Idaho, as in most 280 states, the tribes and the state share concurrent jurisdiction in a number of legal matters, including actions for the protection of Indian children who live within reservation boundaries.

The Idaho Dept. of Health and Welfare recognizes and defers to the jurisdiction of a child's tribe and tribal court system when a child lives within reservation boundaries, a child protection incident occurs on the reservation and that tribe's social services/court system has moved to take protective action. Occurrences such as these are addressed in the Indian Child Welfare Act as exclusive tribal jurisdiction situations. At the request of a tribal court, the Department will become involved with a case that would otherwise be considered in Idaho's jurisdiction and facilitate the transfer of the case from tribal court to state court.

Alternately, in cases when an Indian child lives off the reservation or the child protection incident occurs off the reservation, CFS responds and appropriately initiates actions for the protection of the Indian child in state court. When an Indian child is the subject of court action in

a child protection matter, written notice is made by certified mail to the child's Tribe, child's parents, child Indian custodian, Attempts at personal contact by telephone, fax and/or e-mail are also made. Every effort is made to encourage the involvement of that child's tribe as a party to the state court case (intervention) or to petition for transfer of the case from state to tribal court (transfer of jurisdiction).

Some processes that support concurrent jurisdiction shared by state and tribal courts are standard and outlined in the written CFS training curriculum and policies. Other processes are unique and negotiated individually in the form of a Memorandums of Understanding (MOU's) signed by a Department official and the tribal leadership. Although the court that hears the case (state or tribal) is the "responsible" entity for the child, it does not indicate that either the state or tribal government is totally responsible for the needs of the child. Every Indian child involved in a state or tribal child protection case who would otherwise be in state court qualifies for services that are available in either (and both) state and tribal service delivery systems. Often the costs of the services to support these children are shared by both the state and tribal programs. The cost-sharing is individually negotiated based on the needs of each child and their family.

During the quarterly Idaho State and Tribal Indian Child Welfare Committee Meetings, recruitment of American Indian/Alaska Native resource parents has been made a standing agenda item. The ICW Committee is comprised of tribal representatives from each of the six tribes, the Department Tribal Relations Program Manager and three CFS Regional Program Managers. Work has begun to look at recruitment strategies and researching possible resource parent training specific to American Indian/Alaska Native families.

STRATEGIES

Systemic Factor 7 - Foster And Adoptive Parent Licensing, Recruitment and Retention

- SF7.1 Establish Idaho response teams in conjunction with AdoptUSKids national foster and adoption recruitment campaign. Completed 2005
- SF7.2 Support Idaho Foster Parent Coalition Discontinued 2006
- SF7.3 Develop standards for responding to inquiries by those interested in applying to become foster parents. (PIP-1 item 6.5) Completed 2004
- SF7.4 CareLine will develop a monthly report to assist Program Managers and Licensing Supervisors in monitoring regional responses to families who have inquired about becoming a foster parent. (PIP-1 item 6.6) Completed 2004
- SF7.5 Develop standard for supporting foster parents and including them as a member of the professional team. (PIP-1 item 6.11) Completed 2004
- SF7.6 Train staff on new foster parent standard in 6.11. (PIP-1 item 6.12) Completed 2004

SF7.7 Monitor compliance with standard in 6.11. (PIP-1 item 6.13)

Funding Source: IV-E
Target Date for Completion: Ongoing

Status: Carried over to 2010-2014 plan

Compliance monitoring on this item is done in quarterly CQI case review interviews with the foster parents of children selected for the review. Foster parents are asked if they felt they have been included as a member of the foster care team and were included in the case planning. The goal was set at 90% and has been achieved in most quarters to date. The vast majority of the foster parents interviewed felt that they were included as part of the professional team.

17 th Quarter CFSR-2	18 th Quarter	19 th Quarter	20 th Quarter
4/08-6/08	7/08 - 9/08	10/08 - 12/09	1/09 - 3/09
100%	83%	87%	96%
15 cases reviewed	45 cases reviewed	83 cases reviewed	45 cases reviewed

SF7.8 Train experienced CFS social workers, community partners and foster families to work together as a professional team. (PIP-1 item 6.14) Completed - 2004

SF7.9 Continue PRIDE pre-service training

Funding Source: IV-E
Target Date for Completion: Ongoing

Status: Completed 2009

The PRIDE foster/pre-adopt pre-service training and practice model continues to be a requirement for resource family (foster, relative, and adoptive) licensure throughout the state. IDHW contracts with universities are in place to offer PRIDE statewide. Statewide, PRIDE has seven university partners and seventy-one resource parents serving as co-trainers.

In 2008, over 475 resource families were trained through the PRIDE program. A third of these families were relative placements. A special kinship session that speaks specifically to kinship care has been developed and is available to supplement the regular PRIDE training.

Due to the success of PRIDE pre- and post-licensure training, resource family training was seen as strength in the 2008 CSFR-2. To further the practice model of PRIDE and improve placement stability, the Department's current Program Improvement Plan includes strategies to identify current challenges to the PRIDE competency of "working as a member of a professional team" and develop a comprehensive plan for bridging the gap and developing the partnership between resource parents and agency social workers.

SF7.10 Analyze reasons for foster parents choosing to discontinue their foster parent licenses.

Funding Source: IV-E
Target Date for Completion: 2007

Status: Completed - 2009

The Resource Family Satisfaction Survey and Exit Interview was administered statewide when resource families exit the program.

According to the 2007 data, during the period between December 2006 and June 2007, 174 foster parents exited the foster parent program in Idaho. Of those exiting foster parents, 36% participated in exit telephone interviews regarding their foster parenting experiences, reflections and what they learned.

The majority (71%) of exiting foster parents reported that they felt supported during their experience. The data collected has also shown that there are distinct differences between resource parents who foster for two years or less and those who foster for over two years. Resource families who foster for more then two years have more children placed in their homes at any given time, have a greater span of age ranges of children placed in their home, and are more likely to adopt a child placed in their home. Resource families that foster children for less than two years are more likely to be relative placements than those who foster for longer periods of time. Regular contact and communication with the worker was identified as key contributors to the resource family feeling supported in both groups. In situations where a resource family perceived a lack of contact and communication with the worker, they did not feel adequately supported. The 2007 data was presented to the regional program managers with an official report posted on the website.

Through our university contract with the Idaho Child Welfare Research and Training Center, exit interviews with foster parents that have left the foster care system have continued through 2008. Names are submitted by the licensing social worker and a call is placed by a work study social work student. The interview data is submitted to the university research director. The 2008 data report is targeted to be released in late spring.

SF7.11 Evaluate PRIDE to determine if foster parents who receive PRIDE preservice training are more prepared to handle children with challenging behaviors and have increased retention.

Funding Source: IV-E
Target Date for Completion: 2008

Status: Discontinued 2009

One of the recommendations of the Resource Family Satisfaction Survey and the Exit Interview was to conduct a six month follow up study of PRIDE graduates to determine if they are more prepared to handle children with challenging behaviors thereby increasing retention.

The evaluation component of PRIDE, completed by participants at the end of the last session, assesses whether the training is helping to make a difference in resource parents' abilities to meet expected outcomes. The current evaluation measures participant perceptions of the training and understanding of the content. Through this evaluation, resource parents report multiple benefits of the PRIDE program such as: "I thought overall the training was very good. I feel a lot more capable of helping children because of all the resources available. The classes have given me a very realistic view of what to expect." Another resource parent wrote, "Helped me to understand all sides of foster parenting. This class is very important – how did they get by before it?"

Due to current resource limitations, the follow-up assessment completed by resource parents several months following the completion of PRIDE pre-service training, the Department has discontinued the strategy of completing a follow-up evaluation at this time. Rather, the Department will be implementing strategies to improve the use of the PRIDE Family Development Plan process to assess each resource parent's progress in applying what they learned in PRIDE to everyday fostering. The Family Development Plans will also guide the Department's efforts in providing ongoing proactive support to each individual family.

SF7.12 Evaluate and consider PRIDE Kinship Family curriculum. Completed - 2007

SF7.13 Evaluate and consider PRIDE Core and Specialized Training curriculum. Complete - 2008

SF7.14 Recruitment of Indian foster homes

Funding Source: CWS
Target Date for Completion: Ongoing

Status: Combined with SF7.15 below

SF7.15 Develop innovative ideas for resource family recruitment for foster/adopt families of color including American Indian families.

Funding Source: CWS-IV-E Target Date for Completion: Ongoing

Status: Revised, Carried over to 2010-2014 plan

In May 2007, Idaho implemented a contract for a Recruiter Peer Mentor (RPM) Program through the University Partnership. This program uses licensed foster/adopt parents to recruit and mentor new potential resource families. Each region has developed a Regional Recruitment Team which includes the hired RPM(s), Department staff, University Partners, private contractors, community partners, tribal members, Hispanic representatives, and Regional Directors.

With regionally based recruitment teams, the recruitment of resource families focuses on the specific needs of each region. All Regional Recruitment Teams are responsible for the development of innovative ideas to recruit resource families, including families of color like

those with Hispanic heritage and American Indian/Alaska Native heritage. Efforts have included a focus on developing a local presence at multicultural events, developing public service announcements depicting diverse groups, dispensing recruitment information to Spanish speaking radio stations and developing recruitment materials reflecting diversity.

In April of 2008, a Recruitment Coordinator was hired through the University Partnership to coordinate the RPM Program and to help develop a statewide recruitment plan with emphasis on diligent recruitment. The Recruitment Coordinator has a degree in marketing and communications and is experienced in working on services related marketing and recruitment campaigns.

In collaboration with Tribal partners, a recruitment flyer was created. This flyer was initially distributed to each Tribal Social Services agency within Idaho and to all CFS offices to use in the recruitment of American Indian/Alaska Native foster and adoptive homes. These flyers were distributed a second time to CFS offices and Tribal Social Services agencies at the ICWAC Meeting held in May of 2008.

During the quarterly ICWAC meetings, recruitment of American Indian/Alaska Native resource parents has been made a standing agenda item. The ICWA Committee is comprised of tribal representatives from each of the six tribes living in Idaho, the Department's Tribal Relations Program Manager and three CFS Program Managers.

A workgroup has formed in response to the need for a statewide recruitment plan that includes a plan for diligent recruitment. Currently the workgroup is working with consultants from AdoptUsKids to develop goals, objectives, strategies and an implementation process for a five year statewide recruitment plan. The Department Tribal Relations Program Manager participated in the initial meeting with AdoptUsKids and each of the six Tribes residing in Idaho's borders will be invited to participate in the regional workgroups facilitated by the AdoptUsKids consultants as they develop their regional action plans to address the need for foster homes that reflect Idaho's ethnic and racial diversity

SF 7.16 Identify and provide handouts and resource information for local recruitment efforts to the regions.

Funding Source: CWS/IV-E Target Date for Completion: Ongoing

Status: Completed 2009

Toolkits have been created by our Recruitment Coordinator for the Recruitment Peer Mentoring Program which includes media and target group resources. The templates were adopted from the fostercaremonth.org website and modified to fit Idaho's approach in promoting foster care month through the Recruitment Peer Mentoring Program and regional recruitment efforts.

Media Toolkit - Includes templates and tips on how to work with the media:

• **News Release:** A news release template to insert local community event information and quotes.

- **Press Advisory:** A template to insert event information and send it to all types of media such as newspaper, TV, radio, and other outlets.
- Newsletter Article: A template for news articles.
- **Core Messages:** To prepare for interviews or talking with the community about foster care including specific state of Idaho data.
- **Media Tips:** Three documents that help prepare and master the art of working with the media.

Targeted Groups Toolkit

- Change a Lifetime Menu: This is a one page document which uses Foster Care Month's "if you have a few minutes, hours, etc." concept. The suggestions listed on this page give a snapshot of how people can get involved.
- **Sample Business Letter**: This letter, adopted by foster care month and a local sample letter asks businesses to display information on reader boards during the month of May and includes ways to get involved.
- **Sample Faith Based Letter**: A letter similar to the business letter and offers ideas of how to support foster children and resource families during Foster Care Month.
- **Church Bulletin**: A church bulletin template to use in conjunction with the faith based letter.
- **Appreciation Letter**: This letter can be used to thank those who make a difference in the lives of foster children each day.

In addition, the Recruitment Coordinator worked with IDHWs Public Information Office to refresh the *Open Your Heart and Home, Become a Foster or Adoptive Parent* logo. Adoption Incentive and other recruitment funds were used to purchase promotional tools to be used in the regional foster/adopt recruitment activities. The tools distributed to each regional recruitment team included: frisbees; highlighters; balloons; pens; candy rolls; note pads; sticky pads; and five-prong highlighters.

Some of these ideas will be integrated into the statewide recruitment plan under SF.7 in the 2010-2014 plan.

SF7.17 Develop and implement a method to monitor the number of resource family homes on a monthly basis. Completed 2008

Systemic Factor 7 - Foster And Adoptive Parent Licensing, Recruitment and Retention SUMMARY OF ACCOMPLISHMENTS 2005-2009

Since 2004, Idaho has established a solid foundation for foster and adoptive parent licensing and retention that have included:

- A standard of practice emphasizing supportive services and relationships to, and with, resource parents, and
- A training model (PRIDE) which both emphasizes the competencies (knowledge and skills) needed by resource parents to be successful.

Since February of 2005 resource parents have been interviewed during CQI case reviews and asking the following question: "Are you treated by the Department as a team member?" The goal of 90% has been achieved in most quarters as reflected in the table below. As the Department works on developing a comprehensive plan to address the barriers and gaps in including the resource parents as a member of the professional team, it is anticipated this percent will be maintained or improved.

Quarters 1-4	Quarters 5-8	Quarters 9-12*	Quarters 13-16	Quarters 17-20
Feb 04 -Jan 05	Feb 05 - Jan 06	Feb 06 - Jan 07	Feb 07 - Mar 08	April 08 - Mar 09
not due to collect	94%	93%	90%	89%

*revised instrument

In partnership with the Idaho Child Welfare Research and Training Center, the regional recruitment efforts have been supported with promotional tools, data, and other resources to sustain ongoing recruitment efforts. The Department will be finalizing a statewide recruitment plan (general, target, and diligent recruitment efforts) which is reflected in PIP-2 and is being included in the 2010-2014 CFSP.

SUPPORTING DOCUMENTATION

Criminal History Background Checks

On March 30, 2007, revised rules outlining the Criminal History and Background Check Requirements went into effect. In Rules Governing Child Care Licensing, 16-06-02.009.02 it states that applicants for foster care, adoptive parents, children's agency facility staff, residential care staff, and day care facility staff must have a completed criminal history and background check, including clearance, prior to certification or licensure. Any other adult living in the home must complete a self-declaration form, be fingerprinted, and not have any designated crimes listed in IDAPA 16.05.06, "Rules Governing Mandatory Criminal History Checks."

An exception to Criminal History and Background checks is when foster children or children in residential care turn 18. They do not have to be printed immediately unless they leave the home for a period of 90 days and return to establish permanent residence at the foster home. Likewise, when a foster parent's child turns eighteen and continues to live in the home, the foster child is not required to have a criminal history and background check unless he/she leaves the home for longer than ninety days and then returns to live in the licensed foster home as a permanent resident. In those cases the foster parent's child who is between the age of eighteen and twenty-one, must complete a criminal history and background check within fifteen days of his/her return. Everyone who resides in or on the property of the foster home must be printed at age 21, unless they have been previously printed.

Idaho's IDAPA rules now describe the provisions and procedures for criminal background checks for prospective and adoptive parents and other adult relatives and non-relatives, in the household, thereby meeting all requirements of CAPTA and the Adam Walsh Act.

Additionally, in May 2007, Idaho's Resource Family Licensing for Relative and Non-Relatives Standard was revised to incorporate the requirements of the Adam Walsh Act. In addition to IDAPA rules, the Standard directs social workers to conduct an Idaho Central Registry check for each adult residing in a potential foster/adopt home. Children and Family Services staff must check the child abuse and neglect central registry in each State the prospective foster/adoptive parents and any other adult(s) living in the home have resided in during the preceding five years. These central registry checks must be made regardless of whether Title IV-E foster care maintenance payment or adoption assistance payments are to be made on behalf of the child.

IL PLAN and REPORT 2008-2009 Progress Report Application for 2010 Funds Summary of Accomplishments 2005-2009

The Idaho Department of Health and Welfare, Division of Family and Community Services is responsible for the administration and oversight of the programs carried out under the Chafee Foster Care Independence Program (CFCIP) State Plan. In this report, FY2008 refers to the time period beginning September 1, 2007 and ending August 31, 2008. The reports on progress contained in this report are based on activities in FY 2008, as well as activities that extend to May 2009. The data contained in this report were obtained through the Department's Family Oriented Computer User System (FOCUS).

PROGRAM DESCRIPTION

Eligibility

The program serves eligible youth in all geographic areas of the state. The region in which the youth currently resides serves youth who move from one region to another. Any youth for whom the state is, or was, legally responsible regarding placement and care and who satisfies the State of Idaho's criteria for IL eligibility may be served through the program. The state also provides services to eligible youth between fifteen (15) to twenty-one (21) years of age who have exited foster care settings in any state's public child welfare agency if there is an assessed independent living need and providing services is appropriate to assisting them to successfully transition to self-sufficiency. In keeping with the CFCIP, American Indian/Alaska Native youth, for whom a tribe is legally responsible for placement and care and who satisfy the eligibility criteria, are served. Youth who are dually committed through an expansion of Idaho's Juvenile Corrections Act and are not in a detention facility or hospital setting are served if they meet the eligibility criteria.

The state initiates Independent Living services beginning at fifteen (15) years of age when a youth has been determined "likely to remain in foster care until their eighteenth (18th) birthday." In making this determination, Idaho uses a standard of ninety (90) cumulative days of eligible foster care placement as the criterion that indicates that a youth is likely to remain in foster care until they reach age eighteen (18). These eligibility criteria recognize the importance of early identification, intervention, and ongoing services to youth. The requirements to establish eligibility under Idaho's plan for independent living services specify that:

- 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;
- Only youth between the ages of fifteen (15) to twenty-one (21) years are eligible for services and use of funds through the independent living program;
- Youth must have resided in an eligible placement setting which includes foster care, group care, Indian boarding school, or similar foster care placement and excludes

detention facilities, forestry camps, or other settings primarily designed for services to delinquent youth;

- A youth must have resided in an eligible foster care setting for ninety (90) cumulative days; and
- Room and board services will be available only to those eligible youth, including American Indian/Alaska Native youth, who have aged out of foster care settings upon reaching the age of eighteen (18) years, but have not yet reached the age of twenty-one (21).

The State of Idaho Independent Living Program does not discriminate against any youth because of race, religion, gender, sexual orientation, ethnicity or handicapping condition. Each youth who satisfies the eligibility requirements for services under the plan has available to them the full array of benefits necessary to achieve the purposes of the CFCIP.

Scope of Services

The services funded through the CFCIP are a compilation of intervention strategies coordinated with eligible youth, community partners, family members, foster parents and case managers. Idaho integrates independent living services with existing community-based programs to reach a larger number of youth with a more effective system of service delivery.

Services which are allowable to assist youth, including American Indian/Alaska Native youth, make the transition to self-sufficiency include, but are not limited to, the following:

- Services to provide each participant with a written transitional Independent Living Plan which shall be based on an assessment (Ansell-Casey Lifeskills Assessment) of his or her needs and incorporated into the youth's case plan;
- Services, including the use of Family Group Decision Making (FGDM) meetings, to involve the youth's parent(s) and, if appropriate, extended family members, foster parents, tribe, and other interested parties in the development of the youth's independent living plan and services;
- 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/or development of contracts with appropriate service
 providers;
- 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/or development of contracts with appropriate service providers;

- Counseling and other assistance related to employment such as job readiness training, job search, employment placement programs and the coordination of resources and/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;
- Counseling, education, and other assistance related to human sexuality issues such as reproductive health, family planning and pregnancy prevention, sexually transmitted diseases and avoidance of high-risk sexual behaviors;
- Counseling and other assistance related to self-esteem, interpersonal relationships, and social skills development, such as individual, group and family counseling as well as issues that are of cultural relevance;
- Provision of room and board assistance for eligible youth between the ages of 18 and 21 years who have aged out of the foster care system upon reaching the age of 18 years or older;
- Provision of other necessary services and assistance designed to improve participant's opportunities to successfully transition to self-sufficiency;
- Establishment of a system of outreach that encourages youth currently in foster care to participate in the Independent Living Program as well as to participate in the Education and Training Voucher Program;
- Ongoing development of community organizational efforts aimed at increasing available services to youth;
- Development of ongoing support networks for youth leaving foster care including contracted services and involvement of the youth's natural support system;
- Training for agency and tribal staff, foster parents, residential facility staff, and related groups to assure their preparation and competence to address the challenges and issues of youth preparing for independent living;
- Educational and training funds as needed to ensure completion of educational programs that would result in obtaining job related employment; and
- Incentives for youth's participation in their assessment, plan and any activities related to the youth's goal of successful completion of their plan.

Room and Board

Idaho provides independent living services for eligible youth, including American Indian/Alaska Native youth, who have left foster care placement upon reaching the age of eighteen (18) but have not yet reached twenty-one (21). Youth in this age range may receive all appropriate independent living services including the room and board program. Services to older youth may be delivered by a wide range of service providers such as state agency staff, tribal social service

agencies and partners such as the Casey Family Programs (CFP). This group of older youth is also expected to participate in an assessment and planning process similar to that of younger foster youth.

For the State of Idaho's Independent Living Program, room and board is defined as those expenses which assist eligible youth, including American Indian/Alaska Native youth, to secure adequate housing, foodstuffs and other necessary household items which promote the goal of self-sufficiency. Independent living 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;
- Foodstuffs:
- Other household goods and supplies that are essential for a youth's health, safety, or well-being; and
- Housing related expenses essential to attend an institution of higher learning, vocational programs or comparable educational setting

Education and Training Voucher Program (ETV)

Idaho encourages and supports youth, including American Indian/Alaska Native youth, in their pursuit to attain the highest level of education possible. IDHW offers youth educational opportunities to attend institutions of higher education to promote long term employment and career goals that assisted youth in making a successful transition to self-sufficiency. To this end, independent living services are provided to individual youth with the planning, counsel and other supports, including use of room and board funds, necessary to pursue their education. Idaho also took advantage of other programs such as scholarships, grants, loans and student work experience as strategies to help youth pursue their educational goals. As of FFY 2004, the Education and Training Voucher (ETV) Program was available for youth interested in pursuing their education goals.

There were 1,235 eligible participants in Idaho's Chafee Foster Care Independence Program (CFCIP) from April 1, 2008 to March 31, 2009. As of March 31, 2009, 95 eligible youth reached the age of majority (18) while in care. The Department is committed to assisting youth in achieving their goals in education and post-secondary training programs. Idaho's ETV program expanded and supplemented the assistance authorized in the 1999 Foster Care Independence Act under section 477 (a)(3) "to help children who are likely to remain in foster care until 18 years of age prepare for and enter post-secondary training and educational institutions."

In assisting youth to attain educational goals, Idaho takes advantage of Title II, Section 201, entitled "Educational and Training Vouchers for Youth Aging Out of Foster Care," which amended Section 477 of Title IV-E of the Social Security Act to allow states to provide educational and training services to youth who meet eligibility criteria. A maximum of \$5,000 per year or the total cost of attendance at an institution of higher education can be used for attendance at an institution of higher education is defined as:

• Admits only students with a high school diploma or equivalent;

- Awards a bachelor's degree or not less than a 2 year program that provides credit towards a degree;
- Public, private or non-profit;
- Accredited or pre-accredited;
- Provides not less than 1 year of training towards gainful employment; and
- Admits only students beyond the age of compulsory school attendance.

These education and training programs are coordinated by the Department's Independent Living Program Specialist and regional Independent Living Coordinators to ensure that the total amount of educational assistance to youth did not exceed the total cost of attendance and was no duplication of services while assisting the youth in meeting their education and training goals. Social workers will work with youth in foster care through their IL plan to coordinate funding sources, such as federal student financial aid programs and grants, to maximize the use of ETV funding.

In order to expand and strengthen educational and training opportunities for youth exiting Idaho's state and tribal foster care programs, educational and training funds are made available to Idaho's Chafee eligible youth who:

- Are eligible for services under Idaho's current CFCIP;
- After attaining 16 years of age, left foster care for kinship guardianship or adoption
- Remained eligible until 23 yrs. as long as they remain enrolled in a full-time education or training program and are making satisfactory progress in completing their course of study or training on their 21st birthday.

ETV allows Idaho to assist eligible foster youth make a more manageable and safe transition to adult living by covering expenditures in the following ways:

- Provide for and direct any and all costs associated with attending an institution of higher education:
- Allow Idaho to approve costs for higher education that do not exceed the lesser of \$5,000 or the total cost of attendance as defined in section 472 of the Higher Education Act; and
- Allow the State to provide funds to foster youth for the purchase of technical equipment, to include but not limited to, computers, calculators, and supplies associated with course work.

Cost of attendance may also include tuition and fees, room and board, counseling, tutoring, supplies, childcare, rental or purchase of required equipment, allowance for books, transportation, required residential training, and special study project, etc.

Foster youth are able to access the ETV program via the youth's Ansell-Casey Lifeskills Assessment and the youth's IL plan, in which the youth is an integral partner in its development. The IL plan spelled out the costs and conditions of the funding. ETV funds are approved through an ETV fund application.

In order to apply for ETV funds, the case plan must contain the following:

• Collaboration with secondary educational counselors, officials and other support persons;

- A plan for successful completion of secondary education;
- A plan for completion of required applications, tests, and financial aid forms;
- A plan for providing support during post-secondary educational attendance including, but not limited to, housing, childcare and tutoring. These activities are allowable costs related to successful participation in post-secondary education and training;
- Documentation of the youth's involvement in the development of their educational plans and in the preparation for post-secondary education and training; and
- Entry into FOCUS automated system.

To ensure appropriate distribution of information regarding the ETV program Department staff, Casey Family Programs staff, youth, tribal staff, foster parents and community stakeholders receive on-going training on the ETV Program requirements and procedures as outlined in this amendment. IDHW tracked use of ETV funds separately from Chafee through Idaho's FOCUS system.

Outreach to eligible youth is accomplished by providing information on ETV to IL eligible youth. ETV information was maintained on the IDHW Foster Care/Adoption website, www.healthandwelfare.idaho.gov/site/4164/default.aspx, and the Foster Club website, www.fosterclub.com. Information is also distributed through the Casey Family Programs, Idaho's foster youth/alumni advisory group (FYI), regional DHW offices, schools, community colleges/universities, Section 8 Housing agencies, Vocational Rehabilitation, IL contractors and news media.

Non-Allowable Services

The grant funds awarded to Idaho through the CFCIP can not be used to supplant other funding sources for the cost of or the cost of providing foster care placement. Nor are program funds used for the provision of room and board for youth under the age of 18 years.

Provision of Services

The Independent Living Program in Idaho has been a state administered and state delivered program since its inception in 1987. The Idaho Department of Health and Welfare has a regionalized service delivery structure. Program development and planning is accomplished at the central office level and program implementation is the responsibility of each of the Department's seven (7) regions. This allows for program modification to address the unique needs and issues of specific communities.

The majority of independent living services for youth eighteen (18) to twenty-one (21) years of age are delivered by agency staff, tribal social service programs and contractors. These services are also delivered by community partners who have collaborated with the state to meet the needs of youth aging out of foster care.

Paramount to this process of assisting youth 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. Idaho uses the Ansell-Casey Lifeskills Assessment as the mandatory assessment instrument for this purpose. Each youth who is eligible for independent living services, including tribal youth, participates in this assessment of their needs prior to the provision of services or use

of any funds awarded to the state by the CFCIP. The youth as well as their family, foster 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 are more likely to target services that have a meaningful impact on the success of these youth as they prepare for living independently.

Upon completion of this assessment, a youth-driven independent living plan is to be developed for all eligible youth, including tribal youth, placed in out-of-home care who are at least 15 years of age or older. This plan created in collaboration with the youth and other individuals familiar with the youth includes specific goals and objectives to be achieved. The goal is that all eligible youth in out-of-home placement have a distinct, individualized independent living plan that is designed to help prepare them to make the successful transition from foster care to a self-sufficient living status. This also helps 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 to facilitate their likelihood of successfully completing their plan. The youth's assessment and plan are updated on an annual basis or more frequently if the youth's circumstances change.

COLLABORATION

Statewide public and private partnerships have been developed to provide Independent Living services throughout the state. Each region develops a service array unique to their community. Representatives from independent living partners from all regions, including tribal representatives and youth, contributed to the development of the statewide Independent Living Program.

The State of Idaho's Independent Living Plan was developed in consultation with private and public child welfare agencies, each of the six (6) Indian tribes residing in the state, older youth who are preparing for independent living and child welfare advocates including staff of the federal Administration for Children and Families. These groups and individuals provided invaluable recommendations in creating Idaho's plan of services to youth preparing for independent living.

Idaho believes public input regarding the independent living program is an ongoing process and will continue to consult with the public and private sectors, including tribes, to focus on the continuous improvement of services to assist youth preparing for independent living. Collaboration activities achieved and planned with other Federal and State programs for youth include:

Idaho Resources Opportunities Communities and Knowledge (IROCK)

Community agencies such as IDHW, Casey Family Programs, Idaho Commerce and Labor, Job Corps, Idaho Youth Ranch, Life's Kitchen and other service agencies meet every other month to discuss and implement outreach and support to transition-aged youth in the Treasure Valley area which includes Regions 3 and 4 in the Southwest part of the state. The group, which is called IROCK (Idaho Resources Opportunities Communities and Knowledge) for Young Adults, now has a charter signed by all its members in that geographic area. In the past year, efforts have been

made to establish IROCK collaboration groups in the other five regions. Regional Independent Living Coordinators and Regional Directors have been making contacts and are in various stages of implementation of collaborative groups.

The Department continues to meet, at both the state and regional level, with partner programs to address issues and concerns in the area of independent living services. Often representatives from the county juvenile services, housing and transitional living programs, educators, state agencies, and other groups having an interest in youth who are in need of supportive service programs are included in these meetings. Through this ongoing dialogue the Department anticipates that services to youth can be better coordinated, expanded, and delivered in such a way that achieves the purpose of the CFCIP.

Casey Family Programs

The Idaho Department of Health and Welfare's continues to have a strong collaboration with Casey Family Programs (CFP). CFP continues to be a significant contributor and support to the "Foster Youth/Alumni in Idaho" (FYI) advisory group. In addition, both Department staff and CFP partners collaborate on available scholarships and loans for youth and assist youth in filling out applications to access scholarship programs which include the Orphan Foundation and federally funded grants including Pell Grants. CFP's Continuing Job, Education and Training Program (CJET) is also available to eligible youth.

The Casey Family Programs (CFP) continues to support expansion of independent living services in the state. One of the ways in which CFP supports Idaho's efforts is by providing the funding match required for the state's grant allotment. This funding match is in the form of inkind services with CFP allocating three (3) full-time positions for direct service work and training. In addition, CFP partners in other direct services including staff development and training, foster parent training, and case consultation or planning to enhance positive outcomes for participating youth. An example of the partnership between IDHW and CFP is the integration of the Ansell-Casey Life Skills Assessment instrument for assessing a youth's readiness for independent living. In 2007, CFP provided a trainer to deliver a "Train the Trainer" session over three days on this assessment instrument. Independent Living coordinators from each regional office as well as CFP staff, university partners, and representatives from the Department's mental health program are trained to deliver the Ansell-Casey training to staff and foster parents statewide on an on-going basis.

Foster Youth/Alumni of Idaho

The Foster Youth/Alumni of Idaho (FYI) continues to be supported by Casey Family Programs and through their partnership with the IDHW. FYI members have been a resource to IDHW. FYI accomplishments include:

- FYI members are engaged in Resource Parent recruitment;
- FYI members and the CFP partnership engaged in three alumni events throughout the state to recruit FYI membership and strategic planning.
- FYI members have been frequent, invited guests for the Supreme Court Child Protection Court Improvement Committee meetings, on radio programs, and in other venues to raise awareness of foster care issues;

- IDHW included FYI in the state's CFSR-2 process in preparation of the state self-assessment and the PIP;
- FYI is increasingly becoming a valuable asset for IDHW, Casey Family Programs and other community organizations;
- FYI members have provided training to IDHW staff; and
- FYI members train in PRIDE pre-service training.

Foster Care Alumni of America

Idaho established a Chapter of Foster Care Alumni Association of America (FCAA) in December 2008, in collaboration with Casey Family Programs, IDHW, and private and public partners. Membership is open statewide. IDHW is supporting membership for IL eligible youth by allowing IL funds to be used to pay for membership dues. The mission of FCAA is to connect the alumni community and to transform policy and practice, ensuring opportunity for people in and from foster care. Foster care alumni are a critical part of Idaho FCAA and a foster care alumnae was elected as the first director of the Idaho chapter. More information about FCAA is available at http://www.fostercarealumni.org/FCAA chapters.htm.

Tribes

The Department continues to partner with Idaho tribes to make available a full array of independent living services to tribal youth. Beginning in 2008, tribal social service staff have been invited to participate in all statewide Independent Living Coordinators meetings and conference calls. One outcome was discovering that clarification was needed between Region 6 Department staff and Shoshone-Bannock Social Services staff to facilitate IL Program applications for tribal youth. Consultation was provided to the tribe and the process has been streamlined.

In Region 1, the IL Coordinator meets with the Tribal Social Services Social Worker to develop IL plans for the tribal youth and hold transition and exit meetings for the youth with the tribe's worker, navigator, community support representatives, and contractors. The tribe's social worker is provided a monthly progress report on the youth's participation in the IL program. In Region 2, an IL Department staff and a Nez Perce social service staff meet regularly to discuss plans tribal youth in Department custody.

Tribal social service staff are invited to participate in quarterly statewide Independent Living Coordinators conference calls. Agendas, conference call notes, updates, requests for input, and routine correspondence are sent to IL Coordinators and tribal social service staff. Before the "Working with Older Youth Standard" was last revised, input was sought by conference call and e-mail from Department IL staff and tribal social service staff.

The procedure for tribes to access independent living services and funds for eligible tribal youth is included in the Chafee Foster Care Independence Program State Plan dated 2005 – 2009 and in the CFS "Working with Older Youth Standard" finalized in July of 2007. Each year, prior to submission, a draft of the CFSP and Idaho's Chafee Independence Living Plan are sent to the tribes for their input. In 2006 and 2007, the tribes requested that we integrate ICWA section. In 2007, the tribes also requested that we develop a form that the tribes could use to request IL services.

Therefore, an optional IL eligibility and service request form (see Attachment 4) was developed specifically for tribal social service staff to submit Independent Living services and supports for tribal youth.

Following is the process for an IL eligible youth from a tribe residing within the boundaries of Idaho to apply for services whether in the custody of the Tribal Court or the Idaho Department of Health and Welfare:

- The youth's tribal social services worker review the eligibility criteria for IL Program Services (see Attachment C-1);
- The Ansell-Casey Life Skills Assessment (ACLSA) <u>www.caseylifeskills.org</u> is completed by the youth, the youth's caretaker and the youth's tribal social services worker;
- The results from the Ansell-Casey Life Skills Assessment (ACLSA) are used by the youth's tribal social services worker to develop an Independent Living Plan with the youth. It is critical that the youth be included in all independent living case planning meetings. Each youth must have had an individualized written plan for permanency and independent living skill development completed;
- An Independent Living Program Services Request Form for Tribal Youth (see Attachment C-2) can be completed by the youth's tribal social services worker or services can be requested by phone, letter, or e-mail;
- The form can be sent to the IDHW Regional Independent Living Program Coordinator with whom the tribe worked. An updated list of Regional Independent Living Program Coordinators, and their contact information, was provided to the tribes as staffing changes are made; and
- Following receipt of the youth's application, the Regional Independent Living Program Coordinator contacts the youth's tribal social services worker to coordinate services.

Idaho tribes receive information regarding Idaho's Independent Living Program through the IDHW/FACS Tribal Relations Program Manager and the state Independent Living Program Specialist. The Regional Independent Living Program Coordinators and the Independent Living Program Specialist are also available to provide independent living support, technical assistance and training to Tribal Social Services staff. The Chafee Foster Care Independence Program Plan was distributed to tribes within Idaho for review and comment. Idaho sent three tribal social service representatives to the Daniel Memorial 21st Annual National Independent Living Conference in September 2008.

Tribal Social Service staff are invited to attend statewide Independent Living Coordinator meetings and conference calls. Tribal social service staff are included in all conference calls and e-mails sent to regional Independent Living Coordinators and the Casey Family Program.

The Idaho Department of Health and Welfare collaborates with Idaho Tribes to make Education and Training Voucher (ETV) funding available to tribal youth who are currently, or previously were, in tribal custody and meet the independent living eligibility criteria.

Idaho State Board of Education

The Department partners with the Idaho State Board of Education regarding Idaho's Education and Training Voucher Program (ETV) with the intended goal of assisting youth in making the best educational choices when they applied for ETV Program Funds. The Student Affairs Program Manager confers with IDHW to ensure that post-secondary schools and training programs met HEA guidelines.

PROGRAM SUPPORT

As part of the Idaho plan to assist youth to address their independent living needs, child welfare staff, tribal social service staff, foster parents, group home workers and community partners are targeted to receive ongoing and routine training and technical assistance in the area of independent living. This serves as a means of developing an increased awareness of, and the skills to address, the needs of youth as they prepare for independent living. Through the provision of relevant information and development of skills with the groups noted above it is anticipated that eligible youth will be better supported in making a successful transition to self-sufficiency. The state Independent Living Program Specialist is available to provide technical consultation to support regional, tribal, and community partners in the development and delivery of training related to independent living issues.

Some of the specific training implemented in the State of Idaho related to this area of service include:

- Training for all new child welfare staff on independent living services via the Child Welfare Academy;
- Ongoing training for foster parents and other caregivers, including tribal foster parents, relative to the independent living needs of youth;
- Coordination with community partners in independent living related training programs;
- Coordination with Casey Family Programs to provide training on Casey's Integrated Transition Practice Framework (ITPF), "It's My Life" to child welfare staff, foster parents, Idaho Tribes, community partners and youth. Case Planning domains include Cultural and Personal Identity Formation, Supportive Relationships and Community Connections, Physical and Mental Health, Life Skills, Education, Employment, and Housing;
- Collaboration and coordination with tribal programs to provide training to tribal social service staff; and
- Utilization of the National Resource Centers to provide training to all parties providing care and/or services to youth participating in state or tribal independent living programs.

SUPPORTING DOCUMENTATION

Trust Fund Program – Idaho did not choose to establish a trust fund program for youth receiving IL or transitional assistance. Because of the increase of allowable funds in individual's savings accounts, the state did not see the program as necessary.

Medical expansion – Communication has begun around expanding Medicaid to provide services to youth ages 19 to 21 who have aged out of foster care. However, expansion of Medicaid coverage to this population is not being considered at this time due to economic limitations. Idaho continues to offer Medicaid coverage to youth exiting foster care up to their 19th birthday.

SUMMARY OF ACCOMPLISHMENTS FOR FFY2005-2009

The Independent Living activities and services planned and delivered throughout the FFY 2005-2009 five year period continued the commitment of Idaho Family and Community Services to provide individualized assistance to youth as they transition from foster care placement settings toward self-sufficiency.

The CFCIP Goals in Idaho are designed to achieve the purposes of CFCIP as stated in section 477(b)(2)(A) and section 477(a)(1-5) of the Act:

- 1. Assist youth to transition from dependency to self-sufficiency;
- 2. Help youth receive the education, training, and services necessary to obtain employment;
- 3. Help youth prepare for and enter post-secondary training and educational institutions;
- 4. Provide personal and emotional support to youth through mentors and the promotion of interactions with dedicated adults; and
- 5. Provide financial, housing, counseling, employment, education, and other appropriate services and support to former foster care recipients between eighteen (18) to twenty-one (21) years of age.

The ongoing and remaining CFCIP goals for FFY 2005-2009 are found below:

<u>GOAL 1</u>: Every youth 15 years of age and older in custody of IDHW has a case plan that specifically addresses life skills, education, employment, housing, use of community resources and life long connections which provide support within their community to the youth.

Beginning in 2004, the Working with Older Youth Standard was implemented, requiring youth 15 years of age and older in the custody of IDHW to have a case plan that included independent living services, based on the Ansell-Casey Assessment and the involvement of youth and foster parents in the plan development. Training in independent living skills was made available statewide to IL eligible youth depending on their individual needs identified through the assessment and planning process. Training was provided to regional staff, Tribal social service staff, and foster parents.

Action Step 1.1

Development of a case plan which is youth-driven with a primary permanency goal and a concurrent permanency plan. Case plan will indicate the goals to be accomplished and time lines for completion as well as provision for services required to meet the case plan goals.

Target date for completion: Ongoing Status: Completed

The Working with Older Youth Practice Standard was finalized in 2007 and revised in April 2009, distributed and reviewed by regional and central office staff. It specifies how case plans are to be youth-driven and contain primary and concurrent permanency plans, timelines for completion, and provision for services required to meet case plan goals.

Action Step 1.3

Community Transition Services and technical assistance will be provided by Casey Family Programs to the field offices.

Target date for completion: Ongoing Status: Completed

Casey Family Programs has delivered community transition services, case management, and technical assistance to field offices in Regions 3 and 4.

Action Step 1.5

The foster family will be informed of the results from the independent living skills assessments completed by the youth in their care and invited to participate in development of the case plan. Foster families will be provided with resources needed to assist youth in skill development. Provision for support and resources will be addressed in the case plan.

Target date for completion: Ongoing

Status: Ongoing, revised, carried over to 2010-1014 IL plan

During the past year, foster parents received training on the Ansell-Casey Life Skills Assessment at the September 2007 Resource Parent Conference. This training was to take place again at the May 2009 Resource Parent Conference; however, it was not included by the planning committee. This will be carried forward in the next IL plan.

GOAL 2

Develop connections for youth within their communities so they have every opportunity to successfully transition to adulthood. Provide information to youth who have exited from care to access CFCIP and ETV services.

Several informational sources were developed for IL eligible youth during the past five years. These include:

• A brochure and web site which list the contact information for Independent Living and Education Training Vouchers in Idaho

- "Health and Education Passports" for youth as they exit care which include birth
 certificates, social security cards, complete and up to date immunization records, health
 records and medical card, education records, the youth's most recent Independent Living
 Plan, Verification of Dependency in the State of Idaho, a Permanency Pact Safety Plan,
 state and regional resource guides, and the ETV brochure developed during this time
- An external web site for Idaho's Independent Living Program available through IDHW's Child Welfare Program.
- A Foster Youth Guide for youth in care explaining the terminology and procedures involved in their child protection case, tips on foster homes, and answers to the questions that are common to youth who enter care for the first time.
- A revised Idaho ETV Application, posted to the external IDHW web site;
- Description of ETV and ETV eligibility, posted to the IDHW web site;
- A document describing institutions of higher education in Idaho and the definition of an institution of higher education, posted to the IDHW web site;

Action Step 2.1

Create an informational brochure which lists the contact information for independent living services for CFS regional offices, Casey Family Programs and service providers.

Target date for completion: Revised, December 2008

Status: Completed

Independent Living information and contact information have been added the Child Welfare Program's external web site and are also available in hard copy.

GOAL 3

Provide opportunities for youth who age out of care to access Education and Training Vouchers.

Access to Education and Training and Vouchers increased significantly during the past five years. When the program was relatively new, the state was unable to expend all ETV funds but 90% of the ETV funds were used in FFY2007 to support Idaho youth who had lived in foster care and were IL eligible to pursue higher education and the prospects that come with that advantage. There are now ETV brochures and other descriptions of ETV available on the IDHW external web site. All regional, Tribal and Case Family Group staff who work with IL eligible youth have access to ETV applications and youth are encouraged to take advantage of the opportunity.

GOAL 4

Develop standards for consistent delivery of Independent Living services to IL eligible youth.

The "Working with Older Youth" Standard was first developed in 2005 and revised in 2006 and 2009 to respond to changing requirements and additional benefits of the IL program. The standard contains extensive description of Independent Living assessments, plan development and services as well as data entry to assure correct reporting, ETV applications and implementation, Transition Plans required by both CFCIP and the Fostering Connections and

Increasing Adoptions Act of 2008. Services for youth who have exited care and procedures for IL for Tribal youth not in IDHW care.

OTHER ACHIEVEMENTS AND FUTURE EFFORTS

Beginning in July 2008, the responsibility for management and oversight of the Independent Living Program was separated from the position that also managed and provided oversight to the state Foster Care Program. This staffing change made it possible for additional time and effort to be dedicated to the Independent Living Program, resulting in some of the achievements listed above.

Idaho's Independent Living Program plans to build on the achievements of the past five years in the coming years, including but not limited to the following areas:

- Analysis and possible implementation of the National Youth in Transition Data Set;
- Information for IL eligible youth on the timelines and activities involved in preparing for higher education;
- Information for IL eligible youth on considerations and preparation to pursue technical careers;
- Completion of a fiscal analysis on the impact of expanding Medicaid coverage to youth ages 19-21 who aged out of foster care;
- Increasing the number of IL eligible youth in the custody of the Department who receive independent living assessments and IL Plans documented in the state's child welfare database;
- Establishment of statewide opportunities for youth in care and foster care alumni to collaborate with each other and make recommendations to state policy through such vehicles as Foster Youth of Idaho (FYI), the Idaho Chapter of the Foster Care Alumni Association (FCAA), Idaho Resources, Opportunities, Communities and Knowledge (IROCK), regional focus groups, and participation in individual plan development; and
- Education of youth, staff, partners, foster parents on all aspects of the State's Independent Living Program.

PROGRAM CONTACT

Diane Helton, CRP/Independent Living Program Specialist IDHW/FACS Children and Family Services 450 W. State Street, 5th Floor P.O. Box 83720 Boise, Idaho 83720-0036 (208) 334-4932

REPORT JUNE 30, 2009

From April 1, 2008 to March 31, 2009, 1,235 youth were eligible for Independent Living services for Independent Living services and 740 youth were served. Following is a breakdown of youth who were eligible and those who participated in IL services by gender and race/heritage:

	IL eligible youth	IL eligible youth served
Gender	youm	youth serveu
Males	538	310
Females	719	446
Race/Ethnicity		
Caucasian	993	580
Hispanic	147	94
African American	26	18
Native Am/Alaska Native	129	78
Asian	13	10
Other	4	4
Age (years)		
15	96	96
16	139	128
17	200	176
18	234	159
19	204	86
20	384	111
TOTAL	1,235	740

The ETV Program had the following number of participants by region:

Region	# Participants
1	11
2	3
3	6
4	16
5	7
6	3
7	1
TOTAL	47

Region	# Participants	Continuing	New
1	11	6	5
2	3	1	2
3	6	2	4
4	16	9	7
5	7	2	5
6	3	2	1
7	1	0	1
Totals	47	22	25

TRAINING PLAN ACCOMPLISHMENT SUMMARY (2005-2009)

Idaho completed their CFSR-1 in April 2003, and the State was not in substantial conformity with this systemic factor of training. To address concerns the agency implemented its PIP-1 with the following key strategies:

- Expanded the New Worker Academy;
- Developed a "New Worker Caseload/Supervision Continuum" standard that describes the levels of intensity, duration, and types of training a new CFS employee receives;
- Implemented the PRIDE curriculum statewide as Idaho's model of resource parent preparation and training;
- Developed standards for training, mutual assessment, home environment checks, and documentation;
- Provided multiple opportunities for licensed resource parents to complete a mandatory 10 hours of continuing education each year; and
- Used licensing caseworkers to monitor compliance with on-going training requirements on a regional basis.

Idaho completed the CFSR-2 in April 2008. The State was found to be in substantial conformity with the systemic factor of training.

Details of accomplishments between 2005 and 2009, are further elaborated below.

Competency Model For Child Welfare Workers In Idaho

Competencies were identified by a subcommittee of subject matter experts and a competency model for child welfare social workers and supervisors was established to allow for a foundation for training and performance evaluation. Division staff from FACS and from Human Resources reviewed performance evaluations to determine the extent to which supervisors were using the staff competencies in the performance evaluation process. This provided a baseline measure. The FACS Division in collaboration with Human Resources also completed a career ladder for social workers in which the competency model is being used.

Competency based curriculum development – As part of PIP-1, Idaho committed to the development of an infrastructure for developing and implementing of a Child Welfare Competency Model; a Child Welfare Supervisor Academy, and training resources to sustain these activities; Expansion of the Child Welfare Academy; and implementation of a transfer of learning strategy and a rigorous case review process that provides input into training needs.

In support of these improvement requirements, ACF approved Idaho to receive extensive technical assistance from at least six national child welfare resource centers. Centers provided technical assistance on curriculum design, training content, transfer of learning strategies, and university partnership development.

As a result, specific practice standards were developed, trained and implemented. New worker orientation was developed with program implementation to allow for a self-reflection tool in alignment of personal values with program goals. New workers are connected more with their supervisors regarding performance expectations and staff development. The supervisor is now more involved in the field experiences new workers are required to complete during their training period. Retention is addressed via worker evaluations as well as efforts by different boards of the Idaho Child Welfare Partnership.

Course Content

The revised Academy was implemented for new child welfare staff. The Academy was expanded from a four and a half days to a 24 day format. All new CFS social workers are expected to register and attend Core Academy classroom training within the first six months of hire. The training curriculum is delivered in six, three and a half to four and a half day sessions to address specific competencies for line staff. Sessions include content on: statutes, rules and practice standards; the family centered practice model; information about the business processes of the practice continuum (intake, investigation, case manager, foster care, and adoption), child abuse, and neglect related to domestic violence, substance abuse, and neglect, working with persons (children/parents) with disabilities, legal training, etc. Sessions occur twelve months a year to allow the Academy to be repeated twice annually.

Trainers

The CFS Program includes staff with lead responsibilities for implementation of the New Worker Academy. Trainers are located statewide in regional offices and in the FACS Division central office. Along with CFS Program Specialists, department training staff, university partners and contracted subject matter experts deliver the Academy course content.

Transfer of Learning

The Competency Based Learning Contract (CBLC) for new social work hires was developed to support identified competencies and maximize transfer of learning from the Child Welfare Academy to the workplace. It is used with all new workers and their supervisors. New workers are trained on the CBLC on their first day of attending the Child Welfare Academy.

Supervisors have their own CBLC (supervisor) manual and receive training on their role in supporting new workers during the training and the intense field experience to support the training. Supervisors and staff are trained on the implementation of the learning contract tool and there is ongoing training for new supervisors (CBLC for Supervisor Training). This training is also provided to Social Worker 3's as needed (via classroom training or teleconferencing). These individuals provide supervision and intensive field experience supervision.

Coordination

Boise State University Child Welfare Center staff have worked with the Department to provide logistical support and curriculum development for the Child Welfare Academy. BSU has retained a full-time academy trainer/curriculum developer. BSU has coordinated Academy logistics.

Training Period

A six-month training period is defined in the CFS Standard for assuming responsibility for an independent caseload. The standard is based on the criteria defined in the CFS Standard and specifies the role of the new worker and supervisor.

Independent Caseload

A Standard was developed for new social work hires to assume responsibility for an independent caseload and was revised in April, 2009. Supervisors were trained on this Standard and data are collected in order to determine how new workers are meeting this expectation.

Supervisor Training

A curriculum workgroup surveyed CFS supervisors to validate relevant supervisory competencies within the mandatory employee appraiser system and identified content needs. Additionally, the workgroup researched and gathered other states' supervisory curriculums and selected Utah's to modify for Idaho's needs. This particular curriculum was selected because it offered parallel supervisor content to the content adapted for the new worker Academy. However, due to the financial and infrastructure challenges the program faced in continuing to develop and sustain the Child Welfare Academy for new employees, the program opted to explore existing supervisor resources for addressing short term needs, while seeking technical assistance from the National Resource Center on Organizational Improvement to implement the long range goal of development of a competency-based Supervisor Academy. The plan included training supervisors in a curriculum entitled "Cornerstone 2" and was adapted to give supervisors a strong foundation of supervisory practice using a family centered approach. A NRC provided an initial training of trainers (Chiefs of Social Work and university partners) who, in turn, trained all CFS supervisors using this curriculum.

Annual supervisory conferences to train all supervisors in critical thinking related to specific child protection core areas were instituted. Ongoing training occurs for supervisors on topics such as screening, assessment, case management, alternate care, performance management, staff development, clinical supervision around CFS decision making, managing with data and managing the workload and resource development. Supervisors will play an integral role in convening to assess, plan and review competency based supervisory curriculum training.

Additional training included required training available to new supervisors through the state Human Resources system in addition to training on CQI Reviews. Additional sessions were added to the schedule to meet this expectation.

Ongoing Evaluation and Identification of Training Needs

The period of time from 2004-2009 has seen positive changes in the implementation and evaluation of the Idaho New Worker Academy. From 2004 until fall, 2005, the Academy was a short, one-week process that addressed new worker orientation to the Idaho rules and child safety expectations within the state system. Beginning in 2006, the Academy began to evolve into a comprehensive new worker training program that served multiple components of the child welfare system, including the new worker knowledge and abilities; supervisor expectations of new worker learning requirements; peer mentoring opportunities within the field, and, most importantly, a graduated case load that allowed new workers to developmentally build and manage a case load while learning on the job skills and aptitudes. There are plans in place to further develop the Academy training and evaluation process and allow for better assessment of the impact Academy has on new workers performance over time.

Child Welfare Specific Performance Evaluations

Child Welfare supervisors validated child welfare Supervisor competencies within the employee appraiser system. This process defined a new CFS Social Worker career ladder (six levels), which includes the supervisor classification. Job-specific, competency-based performance evaluation templates for CFS supervisors (and the other levels of social workers) are being drafted. The electronic appraiser template is being modified for new employees to incorporate more specific child welfare descriptions of competencies that align with Academy content.

Training Resource Development

The Division of Family and Community Services (FACS) requested additional funding from the Idaho Legislature for the expanded Child Welfare Academy, the most recent request being the addition of positions to serve as 'embedded trainers' in the field. These requests were denied. The program continues to work to identify other resources to sustain our gains (e.g. grants). This continues to be a topic for consultation through the National Resource Center on Organizational Improvement.

Several systems are in place to communicate information (both internal to the Department and external) regarding training information, policies and procedures. The Department has an internal (DHW) Infonet to communicate training courses. It has a Learning Management System (LMS) that has the capacity to host computer-based courses, track course attendance, issue certificates of completion, host or link to libraries of materials, and host on-line group rooms and discussion boards. The Idaho Child Welfare Partnership website at www.icwpartnership.org/ has the capabilities of the LMS (listed above) and includes listings of training sessions that are available (outside of DWH) to other agencies and partners.

Recent Update

Idaho, like other states, is in the process of making adjustments due to a faltering economy. In the area of training, a number of changes/reductions are currently under consideration. Idaho's new 5-year CFSP (2010-2014) Training Plan describes the potential impact of some of those changes.

SUPPORTING DOCUMENTATION

Non-supplantation report for IV-B 2

State expenditures for Title IV-B subpart 2 for FFY 1992 were \$125,000; FFY 2007, State expenditures for Title IV-B 2 were \$424,266.37

Juvenile Justice Transfers

In Idaho, youth come under the purview of the Juvenile Corrections Act for an act that would constitute a criminal offense if committed by an adult. From May 1, 2008 to April 30, 2009, six (6) youth who were in the custody of Idaho Department of Health and Welfare, under the Idaho Child Protective Act, were subsequently transferred into the custody of the Department of Juvenile Corrections under the Juvenile Corrections Act.

A regional break down of the number of children under the care of IDHW who were transferred into the custody of the DJC (Dept of Juvenile Corrections) follows:

Region	# transfers to DJC
Region 1	0
Region 2	0
Region 3	0
Region 4	1
Region 5	0
Region 6	1
Region 7	4
Total	6

More frequently, cases are expanded from the Juvenile Corrections Act to the Child Protective Act because a judge found the youth had been abused, neglected, abandoned, was homeless, or the legal custodian was failing or unable to provide a stable home environment. In these cases some youth will be given a "dual" commitment, coming under the purview of both child protection and juvenile justice. In other cases, the judge may vacate the Juvenile Justice proceedings and leave the child solely under the purview of the Child Protective Act.

At this time we are unable to get an accurate count of the number of youth who were dually committed as a result of a Juvenile Corrections expansion.

Timely Home Studies Reporting and Data

During FFY 2008 (October 1, 2007 to September 30, 2008), there were 231 incoming requests for home studies to our agency. 47% of these requested home studies were done within the 60-day time frame. 79% of the home studies were completed within 90 days of the request. Data prior to 10/1/07 is not available.

Child Welfare Demonstration Project

Non-Applicable

Summary of CAPTA Accomplishments – 2004-2009

The following CAPTA program areas were selected during the last five years (2004-2009) to improve Idaho's statewide programs relating to child abuse and neglect:

- 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 improving 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 proceeding. (section 106 (2)(2);
- Improve case management, including ongoing case monitoring, and delivery of services and treatment provided to children and their families (section 106 (a)(3;
- Enhance the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols (section 106(a)(4);
- Develop and update 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);
- Develop, strengthen, and facilitate training including (A) training regarding research-based strategies to promote collaboration with families; (B) training regarding the legal duties of such individuals, and (C) personal safety training for caseworkers (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);
- Develop and deliver information to educate the public on the role and responsibilities of the child protection system and the nature and basis for reporting suspected incidents of child abuse and neglect (section 106(a)(11).
- 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 abused or neglected, including supporting prompt, comprehensive health and developmental evaluations for children who are the subject of substantiated maltreatment reports (section 106(a)(14).

Please see the final report, under Goals and Objectives for a more detailed description of the activities that occurred in FY 2004 through 2009. A summary of these accomplishments include:

• For the last five years, Idaho has used CAPTA funds to maintain citizen review panels in seven regions of the states. This includes recruitment of citizen review panel members, expenses of monthly meetings, convening the chairpersons semi-annually, and facilitating an annual Statewide Keeping Children Safe meeting to

- train citizen review panels, gather their annual recommendations, and provide a Departmental response to their previous recommendations;
- Annually, CAPTA funds are shared with Idaho Tribes by facilitating Indian Child Welfare Committee Meetings and portions of the annual Indian Child Welfare Conference that deal with safety assessment;
- Since 2005, CAPTA funding has covered expenses for intake and assessment modules for all new social workers in our Child Welfare New Worker Academy (3 to 4 times per year);
- CAPTA provided partial funding for a workload analysis to support the intake, risk assessment, and case management social workers. Results of the analysis assisted us in receiving 12 new social workers, thereby supporting staff retention;
- During the last 5 years, Idaho's Continued Quality Improvement process was funded through our CAPTA. This allowed staff to travel from one region to another, ensuring objective case reviews. It also provided funding to train approximately 60 new reviewers each year;
- Child abuse and neglect awareness prevention and education activities have been provided through our CAPTA plan. Training and distributing brochures regarding mandatory reporting of child abuse and neglect has been done annually;
- From 2004-2005, supervisor in-service training was conducted. Examples of inservice training provided include safety and risk training, substantiating reports of child abuse and neglect, critical thinking in child welfare cases;
- The 2009 CAPTA Plan was used to develop a supervisor's strategic plan that outlines and clarifies the role of supervisors. Supervisors from each region convened 4 times to develop the plan;
- Idaho's Central Registry process was revised in 2008 and 2009. CAPTA funds were used to update our information system and train staff;
- During the last 5 year period, eight chapters of our Child and Family Service Practice eManual were brought on-line using CAPTA funds;
- Portions of the Annual Child Welfare Conference related to intake/safety assessment, personal safety for social workers, and disaster planning were funded through CAPTA; and
- CAPTA funds allow our State Liaison Officer to travel to attend national meetings.