

**EXECUTIVE SUMMARY**  
**Final Report: Indiana Child and Family Services Review**  
**June 2008**

**INTRODUCTION**

This document presents the findings of the Child and Family Services Review (CFSR) for the State of Indiana. The CFSR is the Federal Government's program for assessing the performance of State child welfare agencies with regard to achieving positive outcomes for children and families. It is authorized by the Social Security Amendments of 1994 requiring the Department of Health and Human Services to promulgate regulations for reviews of State child and family services programs under titles IV-B and IV-E of the Social Security Act. The CFSR is implemented by the Children's Bureau of the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services.

Since Indiana's first CFSR, a statewide stakeholder group was created in 2003 and charged with researching best practices and consequently developed numerous recommendations for redesigning child welfare services in Indiana. Indiana's 2005 General Assembly passed a number of bills that enacted recommendations from the 2003 stakeholder group. Notable enactments include the following:

- Establishing a Department of Child Services (DCS)
- Hiring 400 new case managers over a two-year period
- Adopting caseload standards consistent with national best practice standards

Furthermore, on January 11, 2005, Governor Mitchell E. Daniels, Jr., issued an Executive Order establishing the Indiana DCS, which officially separated child welfare from the umbrella of the Indiana Family and Social Services Administration, effective July 1, 2005. As a result, the Director of the newly formed department was elevated to a cabinet level position, reporting directly to the Governor.

Upon its establishment, DCS underwent an extensive self-evaluative process around its structure, policies, processes, and outcomes to foster creation of an infrastructure consistent with practice reform to strengthen engaging and teaming with families. This redesign of DCS infrastructure and training to enhance the skills of its workers began in January 2006, shortly before the timeframe in which cases reviewed during the onsite CFSR were selected. Although Indiana's practice reform efforts have not yet been implemented statewide, the beginnings of their impact on practice and outcomes can be seen in Montgomery County, one of the three onsite counties reviewed during this round of the CFSRs.

The Indiana CFSR was conducted the week of July 9, 2007. The period under review for the case reviews was from April 1, 2006, through July 9, 2007. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the Indiana DCS
- The State Data Profile, prepared by the Children's Bureau, which provides State child welfare data for fiscal year (FY) 2004, FY 2005, and the CFSR 12-month target period ending March 31, 2006
- Reviews of 65 cases in Marion County, Montgomery County, and Jefferson County
- Interviews or focus groups (conducted at all three sites and at the State level) with stakeholders including but not limited to children, parents, foster parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, and attorneys

Information from each resource is presented for all of the items reviewed.

### **Background Information**

The CFSR assesses State performance on 23 items relevant to 7 outcomes and 22 items pertaining to 7 systemic factors. In the Outcomes Section of the report, an overall rating of Strength or Area Needing Improvement (ANI) is assigned to each of the 23 items. An item may be assigned an overall rating of Strength if 90 percent of the applicable cases reviewed were rated as a Strength. Performance on the seven outcomes is evaluated as Substantially Achieved, Partially Achieved, and Not Achieved. In order for Indiana to be in substantial conformity with a particular outcome, 95 percent of the cases reviewed must be rated as having substantially achieved the outcome. If Indiana is not in substantial conformity with a particular outcome, it must develop and implement a Program Improvement Plan (PIP) to address the areas of concern within that outcome.

ACF has set very high standards of performance for the CFSR. The standards are based on the belief that because child welfare agencies work with our country's most vulnerable children and families, only the highest standards of performance should be acceptable. The focus of the CFSR process is on continuous quality improvement; standards are set high to ensure ongoing attention to the goal of achieving positive outcomes for children and families with regard to safety, permanency, and well-being.

It should be noted, however, that States (including the District of Columbia and Puerto Rico) are not required to attain the 95-percent standard established for the CFSR Onsite Review at the end of their PIP implementation. ACF recognizes that the kinds of systemic and practice changes necessary to bring about improvement in particular outcome areas often are time-consuming to implement. Also, improvements are likely to be incremental rather than dramatic. Instead, States work with ACF to establish a specified amount of improvement or implement specified activities for their PIP. That is, for each outcome or item that is an ANI, each State (working in

conjunction with the Children's Bureau) specifies how much improvement the State will demonstrate and/or the activities that it will implement to address the ANIs and determines the procedures for demonstrating the achievement of these goals. Both the improvements specified and the procedures for demonstrating improvement vary across States. Therefore, a State can meet the requirements of its PIP and still not perform at the 95-percent (for outcomes) or 90-percent (for items) level as required by the CFSR.

The second round of the CFSR assesses a State's current level of functioning with regard to child outcomes by once more applying high standards and a consistent, comprehensive, case-review methodology. This is intended to serve as a basis for continued planning in areas in which the State still needs to improve. The goal is to ensure that program improvement is an ongoing process and does not end with the closing of the PIP.

Because many changes have been made in the onsite CFSR process based on lessons learned during the first round and in response to feedback from the child welfare field, a State's performance in the second round of the CFSR is not directly comparable to its performance in the first round, particularly with regard to comparisons of percentages. Key changes in the CFSR process that make it difficult to compare performances across reviews are the following:

- An increase in the sample size from 50 to 65 cases
- Stratification of the sample to ensure a minimum number of cases in key program areas, resulting in variations in the number of cases relevant for specific outcomes and items
- Changes in criteria for specific items to increase consistency and to ensure an assessment of critical areas, such as child welfare agency efforts to involve noncustodial parents

### **Summary of CFSR Findings Regarding Outcomes**

The 2007 CFSR identified several areas of high performance in Indiana with regard to achieving outcomes for children. Indiana meets the national standards for one of the national data indicators—Permanency Composite 2: Timeliness of adoptions. In addition, although Indiana did not achieve substantial conformity with any of the seven CFSR outcomes, the State achieved overall ratings of Strength for the following individual indicators:

- Foster care reentries (item 5)
- Proximity of children's placements to parents (item 11)

Stakeholders commenting on foster care reentries cited careful planning and monitoring of the reunification process, practice reform, and Child and Family Team Meetings as statewide efforts that have made a difference with this item. In terms of proximity of children's placement to parents, 100 percent of cases were rated as a Strength despite challenges noted by stakeholders and outlined in the Statewide Assessment.

Also, Indiana performed at a relatively high level (although it did not meet the 95 percent required for substantial conformity) on the CFSR indicators pertaining to services provided to families to protect children in their homes and prevent removal (84.0 percent were rated a Strength); permanency goal of another planned permanent living arrangement or OPPLA (88.0 percent of cases were rated a Strength); placement with siblings (87.0 percent of cases were rated a Strength); meeting children's educational needs (84.0 percent were rated a Strength); and meeting children's physical health needs (86.0 percent of cases were rated a Strength).

The generally high level of performance on these areas may be attributed in part to Indiana's use of Regional Service Councils (RSCs) to expand the availability of services to families across the State and the use of Child and Family Team Meetings as a collaborative approach to working with families. Practice reform efforts in Indiana are believed to have a positive impact on all outcomes, and it is anticipated that families will continue to experience the positive effects of practice reform over time. In addition, collaboration with Community Partners for Child Safety and Healthy Families Indiana are cited as strengthening the support families receive in each community.

The CFSR also identified key areas where improvements are needed to better achieve desired outcomes for children and families. One key area of concern was Indiana's performance on Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs. This was determined to be substantially achieved in 35.4 percent of the cases. Although Indiana was relatively effective in maintaining sufficient contact between caseworkers and children on their caseload (item 19), this item was indicated as a Strength in 71 percent of the cases reviewed. Within Well-Being Outcome 1, Indiana's ratings were lowest for item 17 (45 percent), which pertains to the service needs of the child, parents, and foster parents; item 18 (51 percent), which pertains to child and family involvement in case planning; and item 20 (37 percent), which pertains to worker visits with parents. Performance on these items may be attributed at least in part to lack of efforts to locate fathers, assess their needs, and engage them. In addition, the quality of the visits with mothers, involving mothers and children in case planning, and assessing and meeting the needs of foster parents were challenges.

Another area of concern was Indiana's performance on Permanency Outcome 1: Children have permanency and stability in their living situations. This outcome was rated as substantially achieved in only 37.5 percent of the cases reviewed. Additionally, the State did not meet three of the national standards for the data indicators associated with this outcome: Composite 1, which pertains to timeliness and permanency of reunification; Composite 3, which pertains to achieving permanency for children in foster care for long periods of time; and Composite 4, which pertains to placement stability. Within Permanency Outcome 1, Indiana's ratings were lowest for item 7 (53 percent), which pertains to establishing permanency goals in a timely manner, and item 9 (50 percent), which pertains to achieving adoptions in a timely manner.

Performance on these items may be attributed at least in part to what stakeholders described as a challenge with concurrent planning not being understood and not institutionalized in practice as it is described in the State's policy. Some stakeholders interviewed during the onsite CFSR suggested that petitions for terminations of parental rights (TPRs) are not filed consistently within Adoption and Safe Families Act (ASFA) time requirements. In addition, in the cases reviewed, there were challenges with staff completing the necessary paperwork for the adoption, delays in filing for TPR, delays in scheduling court hearings or delays related to continuances, and a lack of efforts by the agency to seek adoptive families for children. Stakeholders also reported that children are not being placed in appropriate placements that match their needs at the onset of placement, due primarily to a scarcity of foster families, a lack of evaluation of children's needs, and insufficient information for foster parents about the child's behavior problems at the time of placement.

### **Summary of CFSR Findings Regarding Systemic Factors**

With regard to systemic factors, Indiana was found to be in substantial conformity with the factors of Statewide Information System; Agency Responsiveness to the Community; and Foster and Adoptive Parent Licensing, Recruitment, and Retention. Overall, the systemic factors were highly praised by the stakeholders interviewed during the onsite CFSR.

Indiana was not in substantial conformity with the systemic factors pertaining to the Case Review System, Quality Assurance (QA) System, Training, and Service Array. With regard to Case Review System, the key strengths identified by stakeholders were the State's provision for a process for periodic reviews of each child (item 26). The key concern with regard to the Case Review System identified by stakeholders and case reviews pertained to inconsistent involvement of parents, particularly fathers, and youth in developing their case plans. In addition, while there is a process in place that attempts to ensure that each child has a permanency hearing no later than 12 months after entering care and every 12 months thereafter, there are court delays and inconsistencies in the types of hearings being held.

Although the QA system identified Quality Services Reviews (QSRs) and QA Reviews (QARs) as the State's two QA systems, a challenge noted by stakeholders was the lack of a feedback loop or process for providing QA information to supervisors and individual workers and units. Without the ability to identify specific units or workers, it may be difficult to make change at the individual or unit level. The State is in the process of redesigning its QA process and implementing an outcome-based evaluation procedure. At the time of the CFSR, only two of the State's regions had been reviewed under Indiana's revised process. (item 31)

The next primary area of concern documented through the CFSR was around ongoing staff training (item 33) and training for current or prospective foster parents, adoptive parents, and staff of State-licensed or approved facilities (item 34). Indiana has an established, comprehensive training program designed around practice reform that has resulted in positive outcomes for children and families.

Ongoing training is primarily focused on the five core skills of practice reform and new hire training. The CFSR uncovered training needs in the areas of licensing, dealing with the emotional and behavioral needs of the children in foster care, and substance abuse and addiction, as well as an inconsistency in the quality in delivery of foster, adoption, and kinship training.

Another primary area of concern identified through the CFSR was the lack in the array of services necessary to address the needs of the children and families served by the child welfare agencies in the State, particularly substance abuse treatment services, mental health services, and domestic violence services. In addition, although there was general agreement among stakeholders that existing services to assist children in transitioning from foster care to independent living were of good quality, there also was general agreement that there were not enough services. This also was evident in the case reviews. Although all of these services exist in the State and in the sites participating in the review, and RSCs have been instrumental in obtaining these types of services throughout the State, they also were noted to be insufficient to meet the identified need.

The specific findings with regard to the State's performance on the safety and permanency outcomes are presented in table 1 at the end of the Executive Summary. Findings regarding well-being outcomes are presented in table 2. Table 3 presents the State's performance with regard to the seven systemic factors assessed through the CFSR. In the following section, key findings are summarized for each outcome and systemic factor.

## **I. KEY FINDINGS RELATED TO OUTCOMES**

### **Safety Outcome 1: Children are first and foremost protected from abuse and neglect**

Safety Outcome 1 incorporates two indicators. One indicator pertains to the timeliness of initiating a response to a child maltreatment report (item 1), and the other relates to the recurrence of substantiated or indicated maltreatment (item 2).

Indiana did not achieve substantial conformity with Safety Outcome 1. The outcome was determined to be substantially achieved in 54.5 percent of the applicable cases, which is less than the 95 percent or higher required for a rating of substantial conformity. Indiana did not meet the national standards for the data indicator pertaining to Safety Outcome 1: The absence of maltreatment recurrence or the absence of maltreatment of children in foster care by foster parents or facility staff.

Indiana was in substantial conformity with item 1 during the 2001 CFSR and therefore did not address it in its PIP. Indiana was not in substantial conformity with item 2 during the 2001 CFSR and was required to address the outcome in its PIP. Indiana did meet its target goals for this outcome by the end of the PIP implementation period.

A key concern identified for this outcome in the 2007 review is that Indiana was not consistent in responding to maltreatment reports within the timeframes established by agency policy, due to lack of staff and staff who are not adequately trained. Key concerns identified regarding the recurrence of substantiated or indicated maltreatment are that staff were not consistent with thoroughly assessing families and linking them with community-based services at the onset of the case to prevent maltreatment recurrence.

### **Safety Outcome 2: Children are safely maintained in their homes when possible and appropriate**

Performance on Safety Outcome 2 is assessed through two indicators. One indicator (item 3) addresses the issue of child welfare agency efforts to prevent children's removal from their homes by providing services to the families that ensure children's safety while they remain in their homes. The other indicator (item 4) pertains to the child welfare agency's efforts to reduce the risk of harm to the children.

Indiana did not achieve substantial conformity with Safety Outcome 2. The outcome was determined to be substantially achieved in 70.7 percent of the cases reviewed, which is less than the 95 percent or higher required for a rating of substantial conformity. With both items rated as ANI in the 2001 CFSR, Indiana was not in substantial conformity with this outcome and was required to address the outcome in its PIP. Indiana did meet its target goals for this outcome by the end of the PIP implementation period.

Key findings of the 2007 CFSR with regard to this outcome were the following:

- In the majority of cases, reviewers determined that DCS made concerted efforts to address the factors that brought the family to the attention of the agency. There were multiple cases where flexible funds were used to pay for services, and a wide range of services were offered to families. However, reviewers identified some cases in the 2007 review in which the services did not adequately address safety issues, and children remained at-risk in the home or were placed in foster care without efforts to provide services.
- For the most part, reviewers determined that in a majority of cases the risk of harm to children was appropriately managed by removing the children from home either prior to or during the period under review and providing services to the parents to reduce risk of harm.

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

There are six indicators incorporated in the assessment of Permanency Outcome 1, although not all of them are relevant for all children. The indicators pertain to the child welfare agency's efforts to prevent foster care reentry (item 5), ensure placement stability for children in foster care (item 6), and establish appropriate permanency goals for children in foster care in a timely manner (item 7).

Depending on the child's permanency goal, the remaining indicators focus on the child welfare agency's efforts to achieve permanency goals (such as reunification, guardianship, adoption, and permanent placement with relatives) in a timely manner (items 8 and 9) or to ensure that children who have OPPLA as a case goal are in stable placements and adequately prepared for eventual independent living (item 10).

Indiana did not achieve substantial conformity with Permanency Outcome 1. This determination was based on the following findings:

- The outcome was substantially achieved in 37.5 percent of the cases, which is less than the 95 percent required for an overall rating of substantial conformity.
- The State Data Profile indicates that for the CFSR 12-month target period (FY 2005), Indiana did not meet the national standards for three Permanency Composites. It met the national standard for timeliness of adoptions (Permanency Composite 2).

Indiana did not achieve substantial conformity with this outcome during the 2001 CFSR and was required to address the outcome in its PIP. Indiana met its target goals for this outcome by the end of the PIP implementation period.

The case reviews during the 2007 CFSR indicated the following concerns:

- The agency was not consistent with regard to establishing a child's permanency goals, attaining goals of reunification, permanent placement with relatives, or guardianships, or achieving adoptions in a timely manner.
- Some children were in multiple placement settings, and in several instances the child's current placement was not stable.
- Some children were in foster care for long periods of time before adoptions were achieved.
- There was a general lack of concurrent planning. Only one case in the sample had concurrent goals.

Although there were many concerns associated with this outcome, both the case review findings and the stakeholder interviews indicated that Indiana has made concerted efforts to improve long-term placements for children with a permanency goal of OPPLA and that Indiana continues to improve support and resources to prepare children for independent living.

### **Permanency Outcome 2: The continuity of family relationships and connections is preserved for children**

Permanency Outcome 2 incorporates six indicators that assess the child welfare agency's performance with regard to (1) placing children in foster care in close proximity to their parents and close relatives (item 11); (2) placing siblings together (item 12); (3) ensuring frequent visitation between children and their parents and siblings in foster care (item 13); (4) preserving connections of children in foster care with extended family, community, cultural heritage, religion, and schools (item 14); (5) seeking relatives as potential placement resources (item 15); and (6) promoting the relationship between children and their parents while the children are in foster care (item 16).

Indiana did not achieve substantial conformity with Permanency Outcome 2. The outcome was rated as substantially achieved in 62.5 percent of the cases, which is less than the 95 percent or higher required for substantial conformity. Indiana did not achieve substantial conformity with this outcome in its 2001 CFSR and was required to address the outcome in its PIP.

During the 2001 review, item 15 (placement with relatives) was rated as an ANI. Indiana met its target goals for this outcome by the end of the PIP implementation period.

During the 2007 CFSR, items 12, 13, 14, 15, and 16 were rated as ANIs. A key concern identified for these items was the lack of diligent efforts to locate parents (particularly fathers) and the lack of effort to connect children in foster care with their fathers. Additional findings of the 2007 CFSR were the following:

- Children in the cases reviewed were placed in close proximity to their biological parents whenever possible and appropriate.
- While in some instances children in the cases reviewed were placed with siblings when that was appropriate, there were several instances when the agency had not placed children together when separation was not necessary and instances when it had not attempted to locate placements for a sibling group.
- The agency was not effective in ensuring frequent visitation between siblings in foster care who were placed apart. However, the agency was less effective in ensuring adequate visitation between parents, particularly fathers, and their children. Both stakeholders and the Statewide Assessment noted that the agency makes concerted efforts to promote visitation with the parent with whom the child is expected to be reunified. Also, stakeholders and the Statewide Assessment noted that foster parents do not always have the resources or support needed to ensure visitation occurs.
- For the most part, the agency made efforts to ensure that children in foster care maintained their connections to their extended family, culture, neighborhood, schools, etc., although in some instances the agency did not explore the child's connections, and the Statewide Assessment describes the agency challenges in terms of involving Tribes.
- For the most part, the agency made concerted efforts to place children with relatives, although in a few cases, the agency did not search for either maternal or paternal relatives when considering placement.
- The agency did not make concerted efforts to strengthen or maintain the parent-child bond in many of the cases. Although there was an agency focus on encouraging parent's participation and providing resources, there were challenges in particular with working to involve fathers.

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

Well-Being Outcome 1 incorporates four indicators. One indicator pertains to the child welfare agency's efforts to ensure that the service needs of children, parents, and foster parents are assessed and that the necessary services are provided to meet identified needs

(item 17). A second indicator examines the child welfare agency's efforts to actively involve parents and children (when appropriate) in the case planning process (item 18). The two remaining indicators examine the frequency and quality of caseworker contacts with the children in their caseloads (item 19) and with the children's parents (item 20).

Indiana did not achieve substantial conformity with Well-Being Outcome 1. The outcome was rated as substantially achieved in 35.3 percent of the cases reviewed, which is less than the 95 percent required for a determination of substantial conformity. Performance on this outcome varied based on the type of case. The outcome was found to be substantially achieved in 38 percent (15 cases) of the 40 foster care cases compared to 32 percent (8 cases) of the 25 in-home services cases.

Indiana also did not achieve substantial conformity with this outcome during its 2001 CFSR and was required to address the outcome in its PIP. Indiana met its target goals for this outcome by the end of the PIP implementation period.

In both the 2001 and the 2007 CFSRs, all four items incorporated in the outcome were rated as ANIs. A key concern identified in the 2007 CFSR was that the agency did not consistently conduct diligent searches for absent parents (usually fathers) or make concerted efforts to reach out to noncustodial parents, even when they were accessible. An additional finding of the 2007 CFSR with regard to this outcome was that foster care cases were more likely than in-home services cases to be rated as a Strength with regard to assessing and meeting the service needs of children and parents and involving parents and children in case planning.

Specific findings of the 2007 CFSR include the following:

- DCS was highly effective in assessing and meeting the needs of children in foster care and in-home cases, and somewhat less effective in assessing and meeting the needs of the biological mothers.
- The agency was not at all effective in assessing and meeting the needs of foster parents and biological fathers.
- Reviewers determined that the agency did not make concerted efforts to involve mothers, fathers, or children in case planning.
- In many cases, there was frequent contact between caseworkers and their children in their caseloads; however, the visits did not always focus on issues pertinent to case planning, service delivery, and goal attainment.
- Reviewers determined that worker visits with parents in terms of frequency and quality were not sufficient; in particular, visits with fathers were not occurring.

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

There is only one indicator for Well-Being Outcome 2. That indicator pertains to the child welfare agency's efforts to address and meet the educational needs of children in both foster care and in-home services cases (item 21).

Indiana did not achieve substantial conformity with Well-Being Outcome 2. Reviewers determined that 83.8 percent of the cases reviewed substantially achieved this outcome. This is less than the 95 percent or higher required for substantial conformity. The outcome was determined to be substantially achieved in 90 percent of the applicable foster care cases compared to 29 percent of the applicable in-home services cases.

Indiana was not in substantial conformity with this outcome in its 2001 CFSR and addressed the outcome in its PIP. Indiana did meet its target goals for this outcome by the end of the PIP implementation period.

A key finding of the 2007 CFSR was that in the many of the cases, the agency was effective in assessing and meeting children's educational needs, particularly children in foster care. In a small number of cases, however, education-related concerns were identified in the case file, but the agency did not make any efforts to assess the child, or educational needs were identified, but no services were provided to address those needs.

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

This outcome incorporates two indicators that assess the child welfare agency's efforts to meet children's physical health (item 22) and mental health (item 23) needs.

Indiana did not achieve substantial conformity with Well-Being Outcome 3. The outcome was determined to be substantially achieved in 75.5 percent of the applicable cases, which is less than the 95 percent required for substantial conformity. Performance on this outcome varied based on the type of case. The outcome was determined to be substantially achieved in 75 percent (30 cases) of the 40 applicable foster care cases compared to 81.0 percent (13 cases) of the 17 applicable in-home services cases.

Indiana also did not achieve substantial conformity with this outcome in its 2001 CFSR and was required to address the outcome in its PIP. Indiana met its target goals for this outcome by the end of the PIP implementation period.

A key finding of the 2007 CFSR was that while many children did receive medical and dental assessments and services, in some instances there were no dental or health assessments completed, even for children who came to the agency because of medical concerns. Item 23, pertaining to children's mental health needs, continued to be rated as ANI in the 2007 CFSR; in several instances needs were not assessed nor addressed, in others they had been assessed, but not addressed.

## **II. KEY FINDINGS RELATED TO SYSTEMIC FACTORS**

### **Statewide Information System**

Substantial conformity with the systemic factor of Statewide Information System is determined by whether the State is operating a Statewide Information System that can identify the status, demographic characteristics, location, and goals for children in foster care.

Indiana was found to be in substantial conformity with the systemic factor of Statewide Information System. Indiana also was in substantial conformity with this systemic factor in its 2001 CFSR, and therefore it was not addressed in the State's PIP.

In the current review, the State was rated as being in substantial conformity with this factor because it was determined that the State has designed and implemented an information system, ICWIS (Indiana Child Welfare Information System), that can identify the status, demographic characteristics, location, and goals for the placement of all children in foster care.

### **Case Review System**

Five indicators are used to assess the State's performance with regard to the systemic factor of a Case Review System. The indicators examine the development of case plans and parent involvement in that process (item 25), the consistency of 6-month case reviews (item 26) and 12-month permanency hearings (item 27), the implementation of procedures to seek TPR in accordance with the timeframes established in ASFA (item 28), and the notification and inclusion of foster and pre-adoptive parents and relative caregivers in case reviews and hearings (item 29).

Indiana is not in substantial conformity with the systemic factor of the Case Review System. The State was not in substantial conformity with this systemic factor in its 2001 CFSR and was required to address the factor in its PIP. Indiana met its target goals for this systemic factor by the end of the Round 1 CFSR PIP implementation period.

Indiana was found to ensure that a periodic review of the status of each child occurred no less frequently than once every 6 months, and usually more often, either by a court or an administrative review (item 26). In addition, there is a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child (item 29).

Despite these areas of strengths, the following concerns were noted:

- Although case plans were reported to be developed for all children, and many efforts, such as the Child and Family Team Meeting model, are beginning to be implemented in the State to increase engagement of families in the case planning process, information from stakeholder interviews, the Statewide Assessment, and the onsite case reviews indicates that child and family involvement in case planning remains a challenge for the State in general (item 25).
- Indiana has a policy and a process that ensures each child has a permanency hearing at timely intervals; however, there are concerns about the consistency and effectiveness of the hearings across sites in promoting permanency for children in foster care. Specifically, concerns were noted about the clarity between permanency hearings and regular reviews, the timeframes allotted to permanency hearings, and the inconsistency in effectiveness of the hearings across review sites. (item 27)
- While related State policies, statutes, and efforts are in place to support efficiency and address areas of delay in the TPR process, in both the Statewide Assessment and the Onsite Review, stakeholders identified concerns with timely achievement of TPR. Two key concerns include (1) confusion around when DCS files for TPR, although a compelling reason not to file exists, while simultaneously filing a petition to dismiss a mandatory TPR petition; and, (2) the reluctance of some judges to hear TPR cases without an identified adoptive family (item 28).

### **Quality Assurance System**

Performance with regard to the systemic factor of the QA System is based on whether the State developed standards to ensure the safety and health of children in foster care (item 30), and whether the State is operating a statewide QA system that evaluates the quality and effectiveness of services and measures program strengths and ANIs (item 31).

Indiana is not in substantial conformity with this systemic factor. Indiana was in substantial conformity with this factor during the 2001 CFSR.

Key findings of the 2007 CFSR are the following:

- DCS has implemented several procedures for ensuring standards for delivery of quality services that protect the health and safety of children, including performance-based contracting that establishes standards for service providers and an agency-wide practice model that focuses on children's safety, as well as permanency and well-being (item 30).
- The QA system was not operational statewide at the time of the CFSR, and the QSR process had been completed in only two regions and was described as effective in addressing systemic issues (item 31).
- On the other hand, there is an inconsistent implementation of the redesigned process. Additionally, stakeholders in one county could not describe the QA process, its purpose, or how results are used. A challenge noted by stakeholders was that there is a lack of a feedback loop or process that provides QA information to supervisors, individual workers, or units (item 31).

## **Training**

The systemic factor of Training incorporates an assessment of the State's new caseworker training program (item 32), ongoing training for child welfare agency staff (item 33), and training for foster and adoptive parents (item 34).

Indiana is not in substantial conformity with the systemic factor of Training. Indiana was not in substantial conformity with this systemic factor in its 2001 CFSR and addressed the factor in its PIP.

Key findings of the 2007 CFSR are the following:

- Indiana is operating staff development and training that supports the Child and Family Services Plan (CFSP), addresses services under title IV-B and IV-E, and provides initial training to staff.
- Stakeholders noted that training is mandated and caseworkers are not given cases until after they have completed the 12 weeks of training. Stakeholders also describe the training as balanced between 9 weeks of classroom learning and 3 weeks of practice in the field or "transfer of learning."
- Stakeholders commented that while caseworkers were required to complete 15 hours of ongoing training each year, the focus surrounded core skills required under practice reform and not the skills and knowledge base needed to carry out their duties included in the CFSR.
- Indiana is providing training for current and prospective foster parents, adoptive parents, and staff of State-licensed or approved facilities.

Despite these strengths, the following concerns were noted:

- Ongoing training is primarily focused on implementation of practice reform and new hire efforts, which, while providing a skill foundation for workers, limits skill-building opportunities for more experienced workers.
- The Foster, Adoption, and Kinship Training program is not standardized throughout the State, there is no accountability built within the structure of how trainers are trained, and the quality of the training varies depending on the trainer.
- Training in Spanish is not available.
- Onsite child care and driving distance were cited by some stakeholders as challenges in terms of foster parents being able to attend trainings.

## **Service Array**

The assessment of the systemic factor of Service Array addresses three questions: (1) Does the State have in place an array of services to meet the needs of children and families served by the child welfare agency? (item 35), (2) Are these services accessible to families

and children throughout the State? (item 36), and (3) Can services be individualized to meet the unique needs of the children and family served by the child welfare agency? (item 37).

Indiana is not in substantial conformity with the systemic factor of Service Array. Indiana was in substantial conformity with this systemic factor in the 2001 CFSR and was not required to address it in its PIP.

Although Indiana has a broad array of services in place, and RSCs are focused on identifying service gaps in all communities in their region, the Onsite Review identified gaps and insufficient resources to address important needs, such as substance abuse treatment, services and foster homes for Spanish-speaking children and families, and independent living (IL) services (item 35). Services are not available in all jurisdictions; in particular, accessing services in rural areas is a challenge where transportation and limited services continue to present obstacles. Families are not able to access services from non-contracted providers, which prevents them from accessing needed services (item 36). At the time of the CFSR, services were found to be consistently individualized to meet the unique needs of children and families served by the agency, and this was noted as being a focus of practice reform efforts across the State (item 37).

### **Agency Responsiveness to the Community**

Performance with regard to the systemic factor of Agency Responsiveness to the Community incorporates an assessment of the State's consultation with external stakeholders in developing the CFSP (items 38 and 39), and the extent to which the State coordinates child welfare services with services or benefits of other Federal or Federally-assisted programs serving the same population (item 40).

Indiana is in substantial conformity with the factor of Agency Responsiveness to the Community. Indiana also was in substantial conformity with this factor in its 2001 CFSR. The general finding in the 2007 CFSR was that Indiana engages in ongoing consultation with key stakeholders to obtain their input regarding the goals and objectives of the CFSP. The State also includes the input of stakeholders in the development of annual reports of progress and services, particularly with the development of the RSCs. In addition, the CFSR found that there was coordination between DCS and other Federal and Federally-assisted programs to meet the service needs of the children and families served by the agency.

### **Foster and Adoptive Parent Licensing, Recruitment, and Retention**

The assessment of this systemic factor focuses on the State's standards for foster homes and child care institutions (items 41 and 42), the State's compliance with Federal requirements for criminal background checks for foster and adoptive parents (item 43), the State's

efforts to recruit foster and adoptive parents that reflect the ethnic and racial diversity of foster children (item 44), and the State's activities with regard to using cross-jurisdictional resources to facilitate permanent placements for waiting children (item 45).

Indiana is in substantial conformity with the systemic factor of Foster and Adoptive Parent Licensing, Recruitment, and Retention. Indiana was found to be in substantial conformity with this factor for the 2001 CFSR. Key findings of the 2007 CFSR were the following:

- Indiana has implemented comprehensive standards for licensing foster family homes and child care institutions.
- Indiana applies the same licensing standards to all licensed foster family homes and child care institutions, and there are no provisional or temporary licenses.
- Indiana requires local and Federal FBI criminal background checks, child protection background checks, and fingerprint checks for all foster and adoptive parents for initial licensure and renewal.
- DCS has a process in place for ensuring diligent recruitment of foster and adoptive homes as well as child-specific adoptive homes.
- DCS uses cross-jurisdictional resources to facilitate timely adoptive and permanency placements for waiting children.

**Table 1. Indiana CFSR Ratings for Safety and Permanency Outcomes and Items**

Outcomes and Indicators	Outcome Ratings			Item Ratings	
	In Substantial Conformity?	Percent Substantially Achieved*	Met National Standards?	Rating**	Percent Strength
<b>Safety Outcome 1:</b> Children are first and foremost, protected from abuse and neglect	NO	54.5	Did not meet 2		
Item 1: Timeliness of investigations				ANI	69
Item 2: Repeat maltreatment				ANI	71
<b>Safety Outcome 2:</b> Children are safely maintained in their homes when possible and appropriate	NO	70.7			
Item 3: Services to prevent removal				ANI	84
Item 4: Risk of harm				ANI	71
<b>Permanency Outcome 1:</b> Children have permanency and stability in their living situations	NO	37.5	Did not meet 3 Met 1		
Item 5: Foster care reentry				Strength	100
Item 6: Stability of foster care placements				ANI	63
Item 7: Permanency goal for child				ANI	53
Item 8: Reunification, guardianship, and placement with relatives				ANI	69
Item 9: Adoption				ANI	50
Item 10: Other planned living arrangement				ANI	88
<b>Permanency Outcome 2:</b> The continuity of family relationships and connections is preserved	NO	62.5			
Item 11: Proximity of placement				Strength	100
Item 12: Placement with siblings				ANI	87
Item 13: Visiting with parents and siblings in foster care				ANI	59
Item 14: Preserving connections				ANI	75
Item 15: Relative placement				ANI	75
Item 16: Relationship of child in care with parents				ANI	62

\*95 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for the Indiana to be in substantial conformity with the outcome.

\*\*Items may be rated as a Strength or an Area Needing Improvement (ANI). For an overall rating of Strength, 90 percent of the cases must be rated as a Strength.

**Table 2. Indiana CFSR Ratings for Child and Family Well-Being Outcomes and Items**

Outcomes and Indicators	Outcome Ratings		Item Ratings	
	In Substantial Conformity?	Percent Substantially Achieved	Rating**	Percent Strength
<b>Well-Being Outcome 1:</b> Families have enhanced capacity to provide for children's needs	NO	35.3		
Item 17: Needs/services of child, parents, and foster parents			ANI	45
Item 18: Child/family involvement in case planning			ANI	51
Item 19: Worker visits with child			ANI	77
Item 20: Worker visits with parents			ANI	37
<b>Well-Being Outcome 2:</b> Children receive services to meet their educational needs	NO	83.8		
Item 21: Educational needs of child			ANI	83.8
<b>Well-Being Outcome 3:</b> Children receive services to meet their physical and mental health needs	NO	75.5		
Item 22: Physical health of child			ANI	86
Item 23: Mental health of child			ANI	79

\*95 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for the Indiana to be in substantial conformity with the outcome.

\*\*Items may be rated as a Strength or an Area Needing Improvement (ANI). For an overall rating of strength, 90 percent of the cases reviewed for the item (with the exception of item 21) must be rated as a Strength. Because item 21 is the only item for Well-Being Outcome 2, the requirement of a 95-percent strength rating applies.

**Table 3: Indiana CFSR Ratings for Systemic Factors and Items**

<b>Systemic Factors and Items</b>	<b>Substantial Conformity?</b>	<b>Score*</b>	<b>Item Rating**</b>
<b>Statewide Information System</b>	Yes	4	
Item 24: The State is operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care			Strength
<b>Case Review System</b>	No	2	
Item 25: Provides a process that ensures that each child has a written case plan to be developed jointly with the child’s parents that includes the required provisions			ANI
Item 26: Provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review			Strength
Item 27: Provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter			ANI
Item 28: Provides a process for TPR proceedings in accordance with the provisions of the ASFA			ANI
Item 29: Provides a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child			Strength
<b>Quality Assurance System</b>	No	2	
Item 30: The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of children			Strength
Item 31: The State is operating an identifiable QA system that is in place in the jurisdictions where the services included in the CFSP are provided, evaluates the quality of services, identified strengths and needs of the service delivery system, provides relevant reports, and evaluations program improvement measures implemented			ANI
<b>Training</b>	No	2	
Item 32: The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who delivers these services.			Strength
Item 33: The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP.			ANI

<b>Systemic Factors and Items</b>	<b>Substantial Conformity?</b>	<b>Score*</b>	<b>Item Rating**</b>
Item 34: The State provides training for current or prospective foster parents, adoptive parents, and staff of State-licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children			ANI
<b>Service Array</b>	No	2	
Item 35: The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency			ANI
Item 36: The services in item 35 are accessible to families and children in all political jurisdictions covered in the State's CFSP			ANI
Item 37: The services in item 35 can be individualized to meet the unique needs of children and families served by the agency			Strength
<b>Agency Responsiveness to Community</b>	Yes	4	
Item 38: In implementing the provisions of the CFSP, the State engages in ongoing consultation with Tribal representatives, consumers, services providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP			Strength
Item 39: The agency develops, in consultation with these representatives, annual reports of progress and services delivered pursuant to the CFSP			Strength
Item 40: The State's services under the CFSP are coordinated with services or benefits of other Federal or Federally-assisted programs serving the same population			Strength
<b>Foster and Adoptive Parent Licensing, Recruitment, and Retention</b>	Yes	3	
Item 41: The State has implemented standards for foster family homes and child care institutions that are reasonably in accord with recommended national standards			Strength
Item 42: The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds			Strength
Item 43: The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children			Strength

<b>Systemic Factors and Items</b>	<b>Substantial Conformity?</b>	<b>Score*</b>	<b>Item Rating**</b>
Item 44: The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom adoptive homes are needed			ANI
Item 45: The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children			Strength

\*Scores range from 1 to 4. A score of 1 or 2 means that the factor is not in substantial conformity. A score of 3 or 4 means that the factor is in substantial conformity.

\*\*Items may be rated as a Strength or as an Area Needing Improvement (ANI).

**Final Report  
Indiana Child and Family Services Review  
June 2008**

**U.S. Department of Health and Human Services  
Administration for Children and Families  
Administration on Children, Youth and Families  
Children's Bureau**

## INTRODUCTION

This document presents the findings of the Child and Family Services Review (CFSR) for the State of Indiana. The CFSR is the Federal Government's program for assessing the performance of State child welfare agencies with regard to achieving positive outcomes for children and families. It is authorized by the Social Security Amendments of 1994 requiring the Department of Health and Human Services to promulgate regulations for reviews of State child and family services programs under titles IV-B and IV-E of the Social Security Act. The CFSR is implemented by the Children's Bureau of the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services.

The Indiana CFSR was conducted the week of July 9, 2007. The period under review for the case reviews was from April 1, 2006, through July 9, 2007. The findings were derived from the following document from the Indiana Department of Child Services (DCS) and data collection procedures:

- The Statewide Assessment, prepared by the Indiana DCS
- The State Data Profile, prepared by the Children's Bureau, which provides State child welfare data for fiscal year (FY) 2004, FY 2005, and the CFSR 12-month target period ending March 31, 2006
- Reviews of 65 cases at 3 sites throughout the State: 31 cases in Marion County, 17 cases in Jefferson County, and 17 cases in Montgomery County
- Interviews or focus groups (conducted at all three sites and at the State level) with stakeholders including, but not limited to children, parents, foster parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, and attorneys

Information from each resource is presented for all of the items reviewed. All 65 cases were open child welfare agency cases at some time during the period under review. The key characteristics of the 65 cases reviewed are presented in the table on the following page.

The first section of the report (Section A: Outcomes) presents the CFSR findings relevant to the State's performance in achieving specified outcomes for children in the areas of safety, permanency, and well-being. For each outcome, there is a table presenting the data for the case review findings and national indicators (when relevant). The table is followed by a discussion of the State's status with regard to substantial conformity with the outcome at the time of the State's first CFSR review, the State's status relevant to the current review, and a presentation and discussion of each item (indicator) assessed under the outcome. Differences in findings across the sites included in the Onsite Review are described when noteworthy. Variations in outcome and item ratings as a function of type of case (i.e., foster care or in-home services) also are identified when appropriate. The second section of the report (Section B: Systemic

Factors) provides an assessment and discussion of the systemic factors relevant to the child welfare agency's ability to achieve positive outcomes for children.

### Key Indiana Case Characteristics

Case Characteristics	Foster Care Cases N=40	In-Home Cases N=25
<b>When case was opened/child entered foster care</b>		
Open prior to the period under review	31 (78%)	7 (28%)
Open during the period under review	9 (22%)	18 (72%)
Child entered foster care during the period under review	9 (22%)	NA
<b>Child's age at start of period under review</b>		
Younger than age 10	20 (50%)	*
10 but younger than 13	2 (5%)	*
13 but younger than 16	8 (20%)	*
16 and older	6 (15%)	*
<b>Race/Ethnicity</b>		
African American (Non-Hispanic)	11 (28%)	*
White (Non-Hispanic)	26 (64.5%)	*
Hispanic (of all races)	0	*
Two or more races	3 (7.5%)	*
Unknown		
<b>Primary Reason for opening case</b>		
Neglect (not including medical neglect)	19 (48%)	13 (52%)
Physical abuse	2 (5%)	3 (12%)
Sexual abuse	2 (5%)	0
Medical neglect	1 (2.5%)	0
Substance abuse by parent	10 (25%)	9 (36%)
Substance abuse by child	0	0
Domestic violence in child's home	0	0
Emotional maltreatment	0	0
Abandonment	3 (8%)	0
Child's Behavior	1 (2.5%)	0
Mental/physical health of child	0	0
Other	2 (5%)	0

\*Information on these characteristics for in-home services cases is not provided because all children in the family are considered in these cases.

## SECTION A: OUTCOMES

In the Outcomes Section of the CSFR Final Report, an overall rating of Strength or Area Needing Improvement (ANI) is assigned to each of the 23 indicators (items) reviewed. An item is assigned an overall rating of Strength if 90 percent of the applicable cases reviewed were rated as a Strength. In addition to the item ratings, States are evaluated with regard to performance on seven outcomes, each of which incorporates one or more of the individual items. The evaluation options for these outcomes are Substantially Achieved, Partially Achieved, and Not Achieved. For a State to be in substantial conformity with a particular outcome, 95 percent of the cases reviewed must be rated as having substantially achieved the outcome. Two outcomes, Safety Outcome 1 and Permanency Outcome 1, also are evaluated based on State performance with regard to seven national data indicators. For a State to be in substantial conformity with these outcomes, the national standards for each data indicator must be met as well as the case review requirements. A State that is not in substantial conformity with a particular outcome must develop and implement a Program Improvement Plan (PIP) to address the areas of concern identified for that outcome.

ACF has established a very high standard of performance for the CFSR. The standards are based on the belief that because child welfare agencies work with our Nation's most vulnerable children and families, only the highest standards of performance should be considered acceptable. The standards are set high to ensure ongoing attention in achieving positive outcomes for children and families with regard to safety, permanency, and well-being. This is consistent with the goal of the CFSR to promote continuous improvement in performance on these outcomes.

It should be noted, however, that States are not required to attain the 95-percent standard established for the CFSR Onsite Review at the end of their PIP implementation. ACF recognizes that the kinds of systemic and practice changes necessary to bring about improvement in particular outcome areas often are time consuming to implement. Also, improvements are likely to be incremental rather than dramatic. Instead, States work with ACF to establish a specified amount of improvement or to determine specified activities for their PIP. That is, for each outcome or item that is an ANI, each State (working in conjunction with the Children's Bureau) specifies the following: (1) how much improvement the State will demonstrate and/or the activities that it will implement to address the ANIs, and (2) the procedures for demonstrating achievement of these goals. Both the improvements specified and the procedures for demonstrating improvement vary across States. Therefore, a State can meet the requirements of its PIP and still not perform at the 95-percent (for outcomes) or the 90-percent (for items) levels established for the CFSR.

The second round of the CFSR is intended to assess a State's current level of performance by once more applying the high standards and a consistent, comprehensive, case-review methodology. The results of these efforts are intended to serve as the basis for continued

PIPs addressing areas in which a State still needs to improve, although prior PIP requirements may have been achieved. The goal is to ensure that program improvement is an ongoing process and does not end with the closing of a PIP.

In the following sections, for each outcome assessed there is information pertaining to how the State performed on that outcome in the first round. If the outcome was not substantially achieved during the first round of the CFSR, there is a discussion of the key concerns identified at that time and the strategies implemented in the PIP to address those concerns. The discussion also focuses on whether the key concerns that emerged in the first CFSR continued to be present in the second review, or whether those concerns were resolved, but other concerns emerged.

Because many changes have been made in the onsite CFSR process based on lessons learned during the first round and in response to feedback from the child welfare field, a State's performance in the second round of the CFSR is not directly comparable to its performance in the first round, particularly with regard to comparisons of data indicators or percentages regarding Strength and ANI ratings. Key changes in the CFSR process that make it difficult to compare performance across reviews are the following:

- An increase in the sample size from 50 to 65 cases
- Stratification of the sample to ensure a minimum number of cases in key program areas, resulting in variations in the number of cases relevant for specific outcomes and items
- Changes in criteria for specific items to enhance consistency and ensure an assessment of critical areas, such as child welfare agency efforts to involve noncustodial parents in planning for their children

## I. SAFETY

### Safety Outcome 1

<b>Outcome S1: Children are, first and foremost, protected from abuse and neglect</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement</b>					
	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Substantially Achieved	9	3	6	18	<b>54.5</b>
Partially Achieved	5	1	4	10	<b>30.3</b>
Not Achieved or Addressed	2	2	1	5	<b>15.2</b>
<b>Total Applicable Cases</b>	<b>16</b>	<b>6</b>	<b>11</b>	<b>33</b>	
Not Applicable Cases	15	11	6	32	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	
<b>Conformity of statewide data indicators with national standards</b>					
	<b>National Standard (%)</b>		<b>State's Percentage</b>		<b>Meets Standard</b>
Absence of maltreatment recurrence	94.6		92.7		NO
Absence of maltreatment of children in foster care by foster parents or facility staff	99.68		99.3		NO

### Status of Safety Outcome 1

Indiana did not achieve substantial conformity with Safety Outcome 1. The outcome was determined to be substantially achieved in 54.5 percent of the applicable cases, which is less than the 95 percent or higher required for a rating of substantial conformity. There was little variation in performance on Safety Outcome 1 across counties.

Indiana also did not meet the national standards for the two data indicators relevant for Safety Outcome 1. These indicators pertain to the absence of maltreatment recurrence and absence of maltreatment of children in foster care by foster parents or facility staff.

## **Key Concerns From the 2001 CFSR**

In the 2001 CFSR, item 1 was rated as a Strength and item 2 was rated as an ANI. The 2001 report indicates that when subsequent child abuse and neglect (CA&N) allegations occurred on open cases in one locality, they were not always investigated as new CA&N reports, as is required by Indiana statute. The issues outlined in the report included (1) caseworkers not having a clear understanding of the policy, (2) high level of staff turnover, (3) lack of adequate staff training, and/or (4) lack of clarity regarding the lines of responsibility.

To address these concerns, the agency implemented the following strategies in their PIP:

- Establish an initial training program that integrates policy, practice, and social work theory and prepares workers to begin work with the necessary knowledge and skills
- Evaluate the need to revise the current safety, risk, and strengths and needs assessment tools based on studies of validation
- Establish policy requiring the use of formal written safety plans when a report is substantiated but no further action is taken (Service Referral Agreement, Initial Assessment, Children in Need of Services or CHINs) or when a child's well-being or safety could benefit from a safety plan
- Provide appropriate services to meet assessed needs
- Establish policy (via updates to the Child Welfare Manual) to be followed when case closure or termination of services is considered
- Develop policy on concurrent planning

## **Key Findings of the 2007 CFSR**

In contrast to the 2001 CFSR, item 1 (Timeliness of initiating investigations) was rated as an ANI in the 2007 CFSR, because an investigation of a maltreatment report was initiated in accordance with State policy in only 69 percent of the cases.

In item 2, reviewers looked at whether there had been a substantiated or indicated maltreatment report on the family during the period under review, and if so, whether another substantiated or indicated report involving similar circumstances had occurred within a 6-month period before or after that identified report. In the 2007 CFSR, item 2 was rated as an ANI because this was found to be a Strength in only 71 percent of the cases, and DCS continues to have similar issues as described in the 2001 CFSR.

The findings pertaining to the specific items assessed under Safety Outcome 1 are presented below.

**Item 1: Timeliness of initiating investigations of reports of child maltreatment**

Strength                       Area Needing Improvement

**Case Review Findings**

The assessment of item 1 was applicable for 32 (49 percent) of the 65 cases. Cases were not applicable when there were no child maltreatment reports during the period under review. In assessing item 1, reviewers were to determine whether the response to a maltreatment report occurring during the period under review had been initiated in accordance with the State child welfare agency policy requirements.

Indiana policy determines that an investigation will be considered initiated when both of the following occur:

- The Family Case Manager (FCM) makes face-to-face contact with the alleged child victim and notifies, in person or via phone, the parent/guardian/custodian.
- The FCM has assessed, and is able to reasonably assure, the safety of the child.

Investigations will be initiated within the following timeframes:

- Within 1 hour if the allegations would cause a reasonable person to believe that the child is in imminent danger of serious bodily harm
- Within 24 hours if the allegations involve abuse but the conditions in item 1 do not apply
- Within 5 days if the allegations involve neglect and none of the conditions in item 1 or 2 above apply

The results of the assessment of this item are presented in the table below.

<b>Item 1</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	11	4	7	22	<b>69</b>
Area Needing Improvement	5	2	3	10	<b>31</b>
<b>Total Applicable Cases</b>	<b>16</b>	<b>6</b>	<b>10</b>	<b>32</b>	
Not applicable	15	11	7	33	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

As shown in the safety profile, there has been a gradual increase in Indiana of the number of reports received by Child Protective Services (CPS). Indiana had a 12.0-percent increase in the number of reports investigated between FY 2003 and FY 2005. DCS substantiated or indicated in 34.4 percent of the assigned investigations in FY 2005.

Performance on item 1 did not vary substantively across sites. For Marion County 69 percent of cases were investigated in a timely manner, in Jefferson County 67 percent were investigated in a timely manner, and in Montgomery County 70 percent were investigated in a timely manner.

Item 1 was rated as a Strength when the investigation was initiated and face-to-face contact was established with the child within the timeframes required by State policy or law. It was rated as an ANI when face-to-face contact was not established within the required timeframes.

### **Rating Determination**

Item 1 was assigned an overall rating of ANI. In 69 percent of the applicable cases, reviewers determined that the agency had initiated an investigation of a maltreatment report in accordance with required timeframes. This percentage does not meet the 90 percent required for an overall item rating of Strength. Of the cases reviewed, five required 24-hour face-to-face contact and five required that contacts be made within 5 days. Of the 10 cases rated ANI, 5 had multiple reports during the period under review. Item 1 was rated as a Strength in the State's 2001 CFSR.

### **Stakeholder Interview Information**

There was general agreement among stakeholders in Marion County and Jefferson County, commenting on item 1 during the onsite CFSR that there are challenges in initiating investigations of child maltreatment allegations in a timely manner. They cited not having enough staff, not training staff sufficiently, inconsistent policies and issues with not having enough Spanish-speaking staff to conduct

the investigation as primary barriers to completing investigations in a timely manner. Stakeholders report that all staff attend “on-call” training designed to prepare them to take incoming reports and that all staff are expected to conduct investigations. Stakeholders in Marion County reported a need for increased coordination between the agency and law enforcement in responding to reports. These issues are also reflected in the Statewide Assessment. It should be noted that some stakeholders from these counties felt that investigations were made in a timely manner. Stakeholders describe variance among counties in how the initial call is screened and who screens the call. These stakeholders expressed the belief that this impacts timeliness of investigations. Montgomery County stakeholders indicated they have a system in place, they adhere to high standards, and they work collaboratively with law enforcement. However, the case review findings on timeliness of investigations from Montgomery County do not differ markedly from the findings in Marion County and Jefferson County.

### **Statewide Assessment Information**

According to the Indiana Statewide Assessment, State policy determines whether an investigation will be considered initiated when the FCM makes face-to-face contact with the alleged child victim and notifies, in person or by phone, the parent/guardian/custodian and the FCM has assessed, and is able to reasonably assure, the safety of the child. The Statewide Assessment reports that the addition of staff has lowered the caseloads for many of the FCMs. The hiring process was revised to significantly reduce the time a position was vacant. Indiana has revised the training program for new workers, allowing workers to be better prepared when they complete initial investigative assignments.

One barrier noted in the Statewide Assessment for ensuring timely response is language barriers. There is a growing population of immigrants in the State of Indiana. DCS is not always able to respond to cases with the immigrant population within the timeframes because of the need for bilingual staff and interpreters. Another challenge described in the Statewide Assessment is who responds to the initial call. Some counties use DCS staff, some use law enforcement and one county, Marion, contracts with a provider to take hotline reports. The assessment indicates that not all reports are taken by experienced, well-trained staff knowledgeable in taking intake reports. The Statewide Assessment also reports staff turnover and busy periods when workers may have a greater time to initiation time. Workers are responding immediately, but may not be able to locate the child or family, so they may not be able to make face-to-face contact with the child or family, thus not initiating in a timely manner.

### **Item 2. Repeat maltreatment**

Strength                       Area Needing Improvement

### Case Review Findings

The assessment of item 2 was applicable for 31 (48 percent) of the 65 cases. Cases were not applicable for item 2 if there was no substantiated or indicated maltreatment report during the period under review. For all applicable cases, reviewers were to determine whether there had been a substantiated or indicated maltreatment report on the family during the period under review, and if so, whether another substantiated or indicated report involving similar circumstances had occurred within a 6-month period before or after that identified report. Information regarding the ratings is provided below.

<b>Item 2</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	12	3	7	22	<b>71</b>
Area Needing Improvement	4	2	3	9	<b>29</b>
<b>Total Applicable Cases</b>	<b>16</b>	<b>5</b>	<b>10</b>	<b>31</b>	
Not applicable	15	12	7	34	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

Indiana has not met the standard in the area of absence of repeat maltreatment. DCS decreased in the area of absence of repeat maltreatment from 93.7 percent in FY 2004 to 92.7 percent in FY 2005. The Federal standard for the review period is 94.6 percent or higher. A review of the Indiana Child Welfare Information System (ICWIS) data concluded that the majority of recurrence involved neglect-to-neglect cases. These are situations in which the first and subsequent reports are for neglect allegations. As a result, neglect reports are the largest category of cases investigated.

There is little variation among the three counties reviewed, with Marion County having 75 percent of cases rated as a Strength, Jefferson County with 60 percent of cases, and Montgomery County with 70 percent.

### Rating Determination

Item 2 was rated as a Strength when there was no indication of two or more substantiated or indicated maltreatment reports on the family within a 6-month period, or when there were two or more substantiated reports, but they did not involve the same perpetrator or circumstances. Item 2 was assigned an overall rating of ANI. In 29 percent of the cases, reviewers determined that there was recurrence of maltreatment. The State did not meet the national standard for the data indicator pertaining to the recurrence of maltreatment. In the State's first CFSR, item 2 also was rated as an ANI, and the State did not meet the national standard at that time.

In three of the nine cases, there were three or more reports of child maltreatment during a 6-month period. In eight cases, it was noted by reviewers that the reports were made for similar or the same circumstances.

### **Stakeholder Interview Information**

Stakeholder comments varied on item 2 during the onsite CFSR with regard to performance in preventing maltreatment recurrence. Stakeholders noted that staff are assessing families more thoroughly than previously assessed and trying to link families with community-based services at the onset of the case in an effort to prevent maltreatment recurrence. Stakeholders also noted that when the Child and Family Team approach is used, there is a decrease in repeat maltreatment. Various stakeholders attributed positive outcomes to the agency working with the courts and having safety plans that keep the perpetrators out of the home to protect children from further abuse, thereby preventing maltreatment recurrence. Several stakeholders reported that substance abuse issues are one of the primary reasons for recurrence of maltreatment. Stakeholders report that while the agency has gotten better at assessing safety issues early, some stakeholders report there is no formal policy in place requiring that they complete the safety assessment.

### **Statewide Assessment Information**

According to the Statewide Assessment, a survey of child welfare professionals (staff and court personnel) was conducted, and 65 percent of staff respondents and 69 percent of court personnel reported DCS was somewhat effective in preventing recurrence of maltreatment. Of that same group, 6.9 percent of staff and 5 percent of court personnel reported DCS was somewhat ineffective in preventing the recurrence of maltreatment. Input from youth participating in focus groups felt that there should be more unscheduled home visits when a report is made. They also suggested that children should be talked to more than one time, and alone, because the focus groups felt that parents may tell the children what to say and do when DCS is in the home.

There are several identified barriers that impact the agency's ability to reduce the rates of maltreatment. Throughout the Statewide Assessment process, DCS found that rural counties often lack the resources to provide services compared to larger urban areas. These resources issues, such as transportation, money and childcare, prevent some families from completely participating in services. DCS also found situations in which children have been returned to the home too quickly—against the recommendations of the agency.

## Safety Outcome 2

<b>Safety Outcome S2: Children are safely maintained in their homes whenever possible and appropriate</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement</b>					
	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Substantially Achieved	21	11	14	46	<b>70.7</b>
Partially Achieved	5	0	3	8	<b>12.3</b>
Not Achieved or Addressed	5	6	0	11	<b>17.0</b>
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

### Status of Safety Outcome 2

Indiana did not achieve substantial conformity with Safety Outcome 2. The outcome was determined to be substantially achieved in 70.7 percent of the cases reviewed, which is less than the 95 percent or higher required for a rating of substantial conformity. The outcome was substantially achieved in 12.3 percent of the cases reviewed. Performance on Safety Outcome 2 varied across counties. One hundred percent of Montgomery County cases were either partially or substantially achieved in this area, compared with 83.8 percent of Marion County cases and 64.7 percent of Jefferson County cases.

### Key Concerns From the 2001 CFSR

Key concerns from the 2001 CFSR relevant to this outcome were the following:

- Assessments tended to focus on the parents' service needs and ignored children's service needs. As a result, the needed services for children were not provided in some localities.
- Underlying issues such as substance abuse, domestic violence, and multigenerational issues are sometimes overlooked in the assessment and service delivery processes, resulting in a failure to provide adequate services to keep children safe and prevent subsequent maltreatment and prevent removal.
- There were delays between the completion of the CA&N investigation, finalization of the assessment, and initiation of services. In some instances, these delays appeared to be due to frequent case transfers, ICWIS entry problems, and/or waiting lists for services.

- After children were reunified with their families, DCS sometimes closed the case without providing post-reunification services, linking the family to community supports, or ensuring that changes occurring within the family were lasting ones.
- In some localities, there appeared to be a lack of communication between FCM and contracted service providers as well as a lack of documentation in the case record that services were provided.
- In some localities, there is a lack of coordination between the DCS and the county Department of Corrections (DOC) to support the delivery of services and to avoid duplication.

To address these concerns, the agency implemented the following strategies in its PIP:

- Evaluate the need to revise the current safety, risk, and strengths and needs assessment tools based on studies of validation
- Develop a policy regarding the use of genograms
- Enhance current policy on case planning to require that case plans be developed at formal case conferences with the involvement of all parties and with the focus on child-specific issues
- Enhance training on case planning to give staff the skills to engage families and utilize assessments more effectively in determining appropriate objectives and services for the child
- Utilize Interagency Agreements between courts and the Division of Family and Children to better service delinquent children
- Define best practice to allow 6 months of post-reunification services
- Develop policy to require that a risk assessment must be done prior to case closure, and services addressing any unresolved risk are provided to the family
- Enhance training on case planning to give staff the skills to engage families and utilize assessments more effectively in determining appropriate services and objectives for the child

### **Key Findings of the 2007 CFSR**

The 2007 CFSR findings indicate a lack of consistency with regard to DCS efforts to prevent children's entry into foster care (item 3). DCS policy describes four instances in which FCMs are to establish a safety plan: (1) At the time of the safety assessment; (2) at the completion of an investigation when DCS will not be following up; (3) at case closure, if the multidisciplinary team recommends closure of a case but the strengths/needs reassessment continues to identify needs that do not cause risk to the child, and (4) at the completion of an investigation when DCS determines that the investigation findings will be indicated.

All indicated and substantiated findings require the FCM to outline referrals that may assist the family in preventing further incidents of abuse/neglect and thus agency involvement.

The 2007 CFSR findings also indicate a lack of consistency in providing sufficient services to children and families to address risk of harm issues (item 4). Case reviewers determined that in several cases, children were in unsafe situations or at risk of harm in their homes because no services were provided, the services provided were insufficient to ensure the children’s safety, and/or the case was closed without ensuring that areas of risk were addressed and resolved.

The findings pertaining to the specific items assessed under Safety Outcome 2 are presented below.

**Item 3. Services to family to protect child(ren) in home and prevent removal**

Strength       Area Needing Improvement

**Case Review Findings**

An assessment of item 3 was applicable in 38 (58 percent) of the 65 cases. Cases were excluded from this assessment if the children entered foster care prior to the period under review and there were no other children in the home or if there was no substantiated or indicated maltreatment report or identified risk of harm to the children in the home during the period under review. For this item, reviewers assessed whether, in responding to a substantiated maltreatment report or risk of harm, the agency made diligent efforts to provide services to families to prevent placement of children in foster care while at the same time ensuring their safety. The results of this assessment are shown in the table below.

<b>Item 3</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	16	5	11	32	<b>84</b>
Area Needing Improvement	0	6	0	6	<b>16</b>
<b>Total Applicable Cases</b>	<b>16</b>	<b>11</b>	<b>11</b>	<b>38</b>	
Not applicable	15	6	6	27	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

There was significant variation in performance on item 3 between Jefferson County and the other sites under review. In Marion County and Montgomery County, 100 percent of the cases were rated as a Strength; however, Jefferson County had only 45 percent of cases rated a Strength.

Item 3 was rated as a Strength when reviewers determined the following:

- Services were provided to the parents and child to prevent removal (21 cases).
- The child was placed voluntarily with relatives and services were provided to the relatives, parents, and children (five cases).
- The children were appropriately removed from the home because the removal was necessary to ensure the child's safety (one case).
- Services were provided after the reunification of the child (three cases).

Case review information indicates that a range of services was offered or provided to families. These included services provided by DCS staff and also the following: intensive home visiting services; in-home safety planning; referrals to parenting classes; referrals to substance abuse treatment; individual and family therapy services; funding for car and home repairs; utility payments made by the agency; behavioral management; parenting skills training; funds for utilities; domestic violence services; employment services; pediatric services; and random urinalysis. In addition, it was noted in the cases that referrals were made quickly and post-reunification services are in place as long as the family needs them.

Item 3 was rated as an ANI when reviewers determined the following:

- No services were provided, and the children remained at risk in the home (one case).
- Some services were provided; but those services did not adequately address the safety issues in the family, and the children remained at risk in the home (four cases).
- The child was placed into foster care without efforts to provide services (one case).

Of the six cases, five were in-home cases. In four of the in-home cases, services were delayed by 2 to 3 months.

### **Rating Determination**

Item 3 was assigned an overall rating of ANI. In 84 percent of the cases, reviewers determined that DCS had made concerted efforts to maintain children safely in their own homes. This percentage is less than the 90 percent required for a rating of Strength. This item was rated as an ANI in the State's 2001 CFSR.

### **Stakeholder Interview Information**

Stakeholders commenting on item 3 during the onsite CFSR describe Child and Family Teams as helpful in preventing removals. Several stakeholders in Montgomery County describe the services to prevent removal of children as “very effective” and “excellent,” which would support the Montgomery County data from the CFSR. There was general agreement among stakeholders that many removals of children from their homes are prevented by collaborative agencies such as Healthy Families and Community Partners. These are prevention programs located in all regions of the State. Stakeholders also noted that the availability of flexible funds to pay for basic needs such as utilities and food, support services offered post-reunification, home-based mental health services, and the intensity of visits by FCMs support efforts to maintain children in their own homes.

### **Statewide Assessment Information**

According to the Statewide Assessment, Regional Service Councils (RSCs) have helped to expand the array and availability of services throughout the State’s regions. The strength of this approach taken by the RSC is bringing together child welfare stakeholders from a defined group of counties to support cross county collaboration. Rural counties also have the opportunity to leverage dollars and require contracts for services to cover multiple counties.

The Statewide Assessment notes that the service array, availability, and accessibility can vary from county to county and impact the ability to protect children in the home and prevent their removal when appropriate. Focus groups were held with parents as part of the development of the Statewide Assessment. Parents felt that DCS does a good job in working with families before removal and that it makes the right decisions for removal. Families reported they do not feel compelled to receive services without ongoing DCS intervention and if they choose to receive services, they are often placed on waiting lists. The youth surveyed felt DCS does a pretty good job in keeping kids safe in their own homes. DCS staff and court personnel who were surveyed reported DCS was somewhat effective in providing services to prevent removing children.

### **Item 4. Risk of harm to child**

Strength       Area Needing Improvement

### **Case Review Findings**

An assessment of item 4 was applicable for all 65 cases. The results of this assessment are shown in the table below.

<b>Item 4</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	21	11	14	46	<b>71</b>
Area Needing Improvement	10	6	3	19	<b>29</b>
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

As shown in the table, performance on this item differed across sites. The item was rated as a Strength in 82 percent of Montgomery County cases, compared to 68 percent of Marion County cases and 65 percent of Jefferson County cases. As with item 3, the difference in Montgomery County may be due to the focus on system reform in that County.

Item 4 was rated as a Strength when reviewers determined that the risk of harm to children was appropriately addressed by the agency through (1) conducting initial and ongoing assessments of risk and safety either in the children’s home or in the children’s foster home, and (2) addressing all safety-related concerns identified through the assessment. Cases were rated as a Strength when reviewers determined one or more of the following:

- The risk of harm to children was appropriately managed by removing the children from the home either prior to or during the period under review and providing services to the parents to reduce risk of harm (21 cases).
- The risk of harm to children was appropriately addressed by removing the children from the home either prior to or during the period under review and seeking termination of parental rights (TPR) (12 cases).
- The risk of harm to children was appropriately managed by providing services to families to address risk concerns while the children remain in the home (15 cases).

In cases where item 4 is rated as a Strength, there were services put in place to address risks in the home whether children remained in the home or were removed. Risk and needs assessments at the time of removal were noted as thorough and effective in ascertaining risk.

Item 4 was rated as an ANI when reviewers determined one or more of the following:

- There was risk of harm to the children when they were in their homes and the services necessary to reduce that risk were not provided or the safety plan that was established was not sufficient to address the risk (nine cases).
- There was insufficient ongoing risk assessment in the foster home or non-foster care (relative or fictive kin) placement setting (four cases).

- There was risk of harm to the child due to continual running away that was not being adequately addressed by the agency (one case).
- There was risk of harm (and safety issues) during visitation with parents, particularly trial home visits, and the agency did not address those risks (seven cases).

### **Rating Determination**

Item 4 was assigned an overall rating of ANI. In 71 percent of the applicable cases, reviewers determined that the agency had appropriately addressed the risk of harm to the children. This percentage is less than the 90 percent or higher required for an overall rating of Strength on this item. Item 4 was rated as an ANI in the State's 2001 CFSR.

### **Stakeholder Interview Information**

Stakeholder comments on this item varied. Some said DCS is very effective at assessing and addressing risk and safety of children. Several described Safety and Risk Assessment tools that are used to determine a level of risk and develop a plan to protect children. In addition, they report seeing a more proactive approach by DCS in dealing with risk and safety over the last couple years. DCS staff are described as using their monthly visits with both in-home and foster care cases to assess risk and safety utilizing the tools they have available. Stakeholders in Marion County noted that pediatric consultation is available to CPS investigators "24/7" through the Child Protection Center. The consultation is focused on sexual abuse, physical trauma, and medically fragile children. Stakeholders in Montgomery County described use of the Family Team Meetings and drug screenings to assess needs of parents and children as effective at assessing risk and safety issues.

Stakeholders expressed concerns that there is not always sufficient follow-up to ensure the safety of children once a report is made and that children are sometimes returned home prematurely. Stakeholders from the State noted that there may be more harm in residential treatment centers because of untrained, under-qualified staff and that use of restraints is an issue. In addition, restraints and inappropriate discipline were mentioned by some stakeholders as safety concerns in foster homes. Stakeholders also expressed the opinion that there may be more safety-related concerns when children are placed in relative homes than when they are placed in non-relative foster homes. They noted that relatives may not always understand the importance of monitoring parent/child visits or of limiting the parents' contact with the child when the agency believes that those limitations are in the child's best interest. Caseload size, staff turnover, and staff burnout were noted by stakeholders as possible reasons for delays in interviewing, getting information to law enforcement, and transferring cases appropriately.

**Statewide Assessment Information**

According to the Statewide Assessment, FCMs are to complete the initial risk assessment tool on all substantiated investigations. The assessment is completed based on conditions that exist at the time of the reported incident. There was consensus among survey respondents that DCS was “somewhat effective” in reducing the risk of harm to children including those in foster care and those who receive services in their own homes.

As reported in the Statewide Assessment, the State’s revised criminal history background check policy resulted in a more comprehensive process for screening prospective and/or licensed foster parents and relative caregivers. The Statewide Assessment described the problem of maintaining adequate numbers of staff to allow FCMs the time to have frequent ongoing contact with children in their caseload. In 2006, Indiana enacted legislation requiring FBI fingerprint checks for foster parents and their respective household members to improve the screening process. Prior to this, only limited State information was accessed regarding charges or convictions. However, presently a national database is searched prior to renewing or granting an initial license.

## II. PERMANENCY

### Permanency Outcome 1

<b>Outcome P1: Children have permanency and stability in their living situations</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement</b>					
	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Substantially Achieved	7	2	6	15	<b>37.5</b>
Partially Achieved	13	6	4	23	<b>57.5</b>
Not Achieved or Addressed	0	2	0	2	<b>5.0</b>
<b>Total Applicable Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
Not Applicable Foster Care Cases	11	7	7	25	
<b>Conformity of Statewide data indicators with national standards:</b>					
	<b>National Standard (Scaled Score)</b>		<b>State's Composite Score</b>		<b>Meets Standard (Yes/No)</b>
Composite 1: Timeliness and permanency of reunification	122.6 +		120.9		NO
Composite 2: Timeliness of adoptions	106.4 +		114.7		YES
Composite 3: Permanency for children in foster care for extended time periods	121.7 +		119.7		NO
Composite 4: Placement stability	101.5 +		95.6		NO

### Status of Permanency Outcome 1

Indiana did not achieve substantial conformity with Permanency Outcome 1. This determination was based on the following findings:

- The outcome was substantially achieved in 37.5 percent of the cases, which is less than the 95 percent required for an overall rating of substantial conformity.
- The State Data Profile indicates that for the CFSR 12-month target period, the State did not meet the national standards for Permanency Composite 1: Timeliness and permanency of reunification; Permanency Composite 3: Permanency for children in foster care for extended time periods; and Permanency Composite 4: Placement stability.

However, the State did meet the national standard for Permanency Composite 2: Timeliness of adoptions. Performance on the individual measures included in all composites is presented in the discussion of the items related to each measure.

Although Indiana's performance on this outcome was fairly low in all sites, there was variation across sites. The outcome was found to be substantially achieved in 60 percent of Montgomery County cases compared with 20 percent of Jefferson County cases and 35 percent of Marion County cases.

### **Key Concerns From the 2001 CFSR**

Key concerns from the 2001 CFSR relevant to this outcome were the following:

- Some foster care placements were disrupted by runaway episodes.
- The ability to achieve permanency in a timely manner was impacted by several factors, i.e., not engaging families in case planning, FCM turnover and inexperience, and case plans and notes that do not reflect the current goal.
- In adoption cases, the ability to finalize adoptions was delayed due to the time it took to resolve TPR appeals.
- Concurrent planning was not defined and formalized.
- It appeared that DCS did not identify and/or attempt to locate fathers early on in the case planning and service delivery processes.
- In some instances, the lack of communication between DCS and DOC delayed permanency.
- There was no specifically identifiable independent living (IL) services section in the case plan.
- There were significant gaps in the housing, employment, and training services and resources available to older youth.

To address these concerns, the agency implemented the following strategies in their PIP:

- Develop policy to complete initial mental health screening of children who have been taken into custody or adjudicated CHINS as well as parents, guardians, or custodians of these children
- Enhance policy to require a risk reassessment as well as a strengths and needs assessment and provision of services addressing any unresolved needs to the family prior to case closure
- Develop policy to mandate that safety be reassessed prior to reunification of children and parents
- Develop policy mandating a multidisciplinary review prior to recommending reunification to the court
- Enhance training on case planning to give staff the skills to engage families and utilize assessments more effectively in determining appropriate services and objectives for the child
- Develop policy on concurrent planning

- Develop policy to mandate contact standards per assessed risk and needs of the child and family
- Pursue legislation allowing Indiana to utilize concurrent planning
- Enhance training on case planning, assessments of children and families, and concurrent planning
- Target recruitment of foster parents to meet the special needs and diversity of children in care
- Pursue a legislative change to mandate that only children without identified families are to be placed on the Internet when TPR is filed or the court mandates filing
- Provide adoption preparation for all special needs children in Indiana's custody who are legally free for adoption
- Combine the foster parent, adoptive parent, kinship parent preparations in order that they all receive the same 36 hours of pre-service training and require pre-adoptive parents to complete 10 hours of ongoing training each year, plus First Aid, cardiopulmonary resuscitation (CPR), and Universal Precautions training
- Revise statewide foster care and adoption recruitment campaigns to find prospective families interested, willing, and able to parent children in Indiana's custody
- Fully execute IL services contracts
- Provide training to staff, stakeholders and foster parents on IL services to youth, collaborating with Impact and the Department of Workforce Development in training delivery
- Redesign Section B of the Case Plan to identify IL services as a service for multiple permanent plans
- Revise interagency agreements between courts and local Office of Family and Children to include IL services, clarify responsibility for case planning, and develop policy regarding visitation
- Clarify policy regarding use of Chafee room and board dollars, incorporating recommendations of State IL Steering Committee, including policy regarding charge interviews of youth discharged from care, and update Child Welfare Policy Manual to reflect new policy
- Redesign case plan with an edit in ICWIS to prevent case plan approval without completion of IL section, including case conference dates and attendees
- Require IL assessment at age 14 of children who should be receiving services involving youth participation and services provided to address and determine goals, with follow-up assessment

## **Key Findings of the 2007 CFSR**

Similar to the 2001 CFSR, in the State's 2007 CFSR, items 6, 7, and 9 were rated as ANIs. However, item 5 is rated a Strength in the 2007 CFSR. Although item 10 was rated a Strength in the 2001 CFSR, it is rated an ANI in the 2007 CFSR.

Additional findings of the 2007 CFSR case reviews include the following:

- The rate of reentry into foster care was a Strength for the State (item 5).
- Although placement stability continues to be a challenge for the State, it is evident it has made efforts to reduce placement change (item 6).
- The agency was not consistent with regard to establishing a child's permanency goal in a timely manner and the goal of reunification was maintained for an excessive period of time (item 7).
- The agency was not consistent with regard to attaining the goals of reunification, permanent placement with relatives, or guardianship in a timely manner (item 8).
- The State was not consistent with regard to achieving adoptions in a timely manner. Barriers to timely adoptions were both court-related (i.e., scheduling, continuances, appeals) and agency-related (i.e., delayed TPR filing and requests for court hearings and insufficient efforts to find adoptive homes) (item 9).
- The agency did not make concerted efforts to ensure a long-term placement for the child and provide necessary services to prepare for independent living (item 10).

Key concerns expressed by stakeholders with regard to permanency were the following:

- Foster parents do not receive adequate training and information about child's behavioral needs.
- Children are not being placed initially in the appropriate placements that meet their needs and there are not enough adoptive homes for the children in foster care, particularly older children and children with special needs.
- Although concurrent planning has been defined in policy, it continues to be an informal process in practice.
- Staff are unclear about the policies and procedures for TPR.
- Reunification is not always an appropriate goal, yet sometimes it remains the permanency goal in the child's plan.
- Adoptions are not finalized in a timely manner that is consistent with the needs of children.
- Although IL services have improved since the 2001 CFSR, they are still not sufficient to meet the needs of older children.

Findings pertaining to the specific items assessed under Permanency Outcome 1 are presented below.

**Item 5. Foster care reentries**

X  Strength      \_\_\_ Area Needing Improvement

**Case Review Findings**

An assessment of item 5 was applicable for 9 (23 percent) of the 40 foster care cases. Cases were not applicable for assessment if the child did not enter foster care during the period under review. In assessing this item, reviewers determined whether the entry into foster care during the period under review occurred within 12 months of discharge from a prior foster care episode. The results of this assessment are presented in the table below.

<b>Item 5</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	5	2	2	9	<b>100</b>
Area Needing Improvement	0	0	0	0	<b>0</b>
<b>Total Applicable Foster Care Cases</b>	<b>5</b>	<b>2</b>	<b>2</b>	<b>9</b>	
Not Applicable Foster Care Cases	15	8	8	31	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	

State performance on the individual measure of foster care reentry (Measure C1.4) included in Composite 1: Timeliness and Permanency of Reunification was as follows: 14.4 percent of the children exiting foster care reentered foster care in less than 12 months. For the data set used to establish the national standards for the data composites, the median performance on this measure was 15 percent, and the 25th percentile was 9.9 percent. For this measure, lower percentages are associated with higher levels of performance. The data indicate that Indiana performed above the median performance for the data used to establish the national standards.

**Rating Determination**

Item 5 was assigned an overall rating of Strength. Item 5 was rated as a Strength in cases in which the child’s entry into foster care during the period under review did not take place within 12 months of discharge from a prior episode. The item was rated as a Strength in 100 percent of the applicable cases (9), which exceeds the 90 percent or higher required for a rating of Strength. This item was rated as an ANI in the State’s 2001 CFSR.

### Stakeholder Interview Information

Stakeholders commenting on this item in the onsite CFSR expressed differing opinions. Some stakeholders suggested that the agency is effective in preventing reentry due to a carefully planned and monitored reunification process in which the agency continues to assess for risk after the child has been returned home. Practice Reform and Child and Family Team Meetings were cited by several stakeholders as efforts that have made a difference with this item. Other stakeholders, however, said that the agency does not do enough to prevent multiple entries into foster care and sometimes makes it too easy for parents to regain custody of their children.

### Statewide Assessment Information

According to the Statewide Assessment, numerous factors helped Indiana prevent multiple entries of children into foster care. The availability of in-home services and increased use of faith-based support efforts has been a positive influence. Indiana DCS has the ability to give the family needed support when children are on a trial home visit. A strong social service network through mechanisms such as Step Ahead during the period under review was a positive collaborative effort by the community. The Statewide Assessment also reports that reduced caseloads, initiating Practice Reform across the State, and utilizing Child and Family Team Meetings are anticipated to increase their likelihood of success and continue to reduce the number of children who reenter the foster care system.

### Item 6. Stability of foster care placement

Strength       Area Needing Improvement

### Case Review Findings

All 40 foster care cases were applicable for an assessment of item 6. In assessing this item, reviewers were to determine whether the child experienced multiple placement settings during the period under review and, if so, whether the changes in placement settings were necessary to achieve the child’s permanency goal or meet the child’s service needs. Reviewers also assessed the stability of the child’s current placement setting. The findings of this assessment are presented in the table below.

Item 6	Marion County	Jefferson County	Montgomery County	Total Number	Percent
Strength	12	3	10	25	63
Area Needing Improvement	8	7	0	15	37
<b>Total Applicable Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
Not Applicable Foster Care Cases	0	0	0	0	

As shown in the table, performance on this item differed across sites. The item was rated as a Strength in 100 percent of Montgomery County cases, compared with 60 percent of Marion County cases and 30 percent of Jefferson County cases.

Indiana's performance on the individual measures included in Composite 4: Placement stability is presented below.

Indiana DCS scored 95.6 for FY 2005. The national standard for this composite is 101.5 or higher.

- 83.3 percent of the children in foster care for less than 12 months experienced two or fewer placement settings. The State scored at the national median (83.3 percent) for the data set used to establish this measure of the data composite.
- 61.3 percent of the children in foster care for at least 12 months but less than 24 months experienced two or fewer placement settings. The State scored above the national median (59.9 percent) for the data set used to establish this measure of the data composite.
- 36.9 percent of the children in foster care for at least 24 months experienced two or fewer placement settings. The State scored above the national median (33.9 percent) for the data set used to establish this measure of the data composite.

The data indicate that Indiana performed at or above the national median on all three measures of placement stability. However, it did not meet the national standard for this measure in FY 2005.

Item 6 was rated as a Strength when reviewers determined one or more of the following:

- The child did not experience a placement change during the period under review and either the current placement was stable or the child was discharged from foster care during the period under review (19 cases).
- The placement changes experienced were in the child's best interest and were intended either to achieve the child's permanency goal or to provide specialized services to the child (seven cases). For example, placement changes were made to move the child to a relative's home or to an adoptive home.

Item 6 was rated as an ANI when reviewers determined one or both of the following:

- The child was in multiple placement settings during the period under review or placement change was not planned by the agency to achieve the child's permanency goal (seven cases).
- The child's current placement setting (at the time of the onsite CFSR) was not stable (six cases).
- The child was in multiple placement settings during the period under review and the current placement setting (at the time of the onsite CFSR) was not stable (two cases).

### **Rating Determination**

Item 6 was assigned an overall rating of ANI. In 63 percent of the applicable cases, reviewers determined that children experienced placement stability or that changes in placements were in the best interest of the child. This percentage is less than the 90 percent or higher required for a rating of Strength. Item 6 was rated as an ANI in the State's 2001 CFSR.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR were in general agreement that placement stability for children in foster care could be improved. The key concerns noted by stakeholders were the following:

- Children are not being placed in appropriate placements that match their needs at the onset of placement, due primarily to a scarcity of foster families and lack of evaluation of children's needs.
- Foster parents do not have sufficient information about the child's behavior problems at the time of placement.
- Foster parents do not receive adequate training that prepares them for dealing with challenging children.
- There are insufficient services to meet children's mental health and behavioral needs, and these are the issues that generally cause disruptions.
- The agency is not consistent with regard to screening, assessing, supporting, and monitoring relative foster homes.
- In Marion County the practice is to utilize emergency shelters as the first placement for children over age 6.

Despite these concerns, stakeholders were in general agreement that the State is making concerted efforts to improve placement stability through the following measures:

- The use of Child and Family Team Meetings is part of practice reforms across the State and, when used, they stabilize placement.
- In Montgomery County, there is a foster parent support group that meets quarterly and gives foster parents the opportunity to get additional support.
- After-hour support and respite care has provided additional support to foster parents in Marion County, which has improved placement stability.
- In Marion County, DCS utilizes the services of Youth Emergency Services (YES) to complete assessments that inform the appropriateness of relative placement of children. YES is able to complete the home studies 7 days a week and during times that can accommodate the family. This allows the children to be placed in the relative's home usually the same day as the assessment.

### Statewide Assessment Information

According to the Statewide Assessment, DCS makes every effort to avoid removing a child from a foster family home for reasons other than the reunification of the foster child with the legal family, adoption, or implementation of another permanency goal. Whenever a foster parent requests that a child in their home be removed, the FCM must determine the reason for the request. The FCM will contact the foster parent to assess whether supportive measures will help alleviate some of the presenting problems.

The Statewide Assessment reports that children currently entering foster care are experiencing more difficult issues than those experienced by children in care historically. As a consequence, although there have been efforts to improve training and preparation of foster parents before children are placed with them, DCS and the foster parents are not always adequately prepared to deal with those issues. In an effort to foster placement stability, DCS has also highlighted the importance of maintaining contact with the child's community in training given to foster parents.

### Item 7. Permanency goal for child

Strength       Area Needing Improvement

### Case Review Findings

All 40 foster care cases were applicable for an assessment of item 7. In assessing this item, reviewers were to determine whether the agency had established a permanency goal for the child in a timely manner and whether the most current permanency goal was appropriate. The results of this assessment are shown below.

Item 7	Marion County	Jefferson County	Montgomery County	Total Number	Percent
Strength	11	3	7	21	53
Area Needing Improvement	9	7	3	19	47
<b>Total Applicable Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
Not Applicable Foster Care Cases	0	0	0	0	

Indiana did not meet the national standard for Permanency Composite 3: Achieving permanency for children in foster care for extended time periods. The Federal standard in this area is 122.6 or higher. Indiana's score in this area was 119.7. Performance on the individual measures included in this composite was as follows:

- 26.0 percent of the children in foster care for 24 months or longer at the start of the 12-month CFSR target period were discharged from foster care to a permanent home (i.e., adoption, reunification with parents or other relatives, or guardianship) by the end of the target period. This percentage is greater than the national median for this measure (25.0 percent) for the data set used to establish the national standards. This percentage is less than the 75th percentile (29.1 percent) for this measure for the data set used to establish the national standards.
- 94.3 percent of the children exiting foster care in 2005 who were legally free for adoption at the time of exit were discharged to a permanent home. This percentage is less than the national median for this measure (96.8 percent) for the data set used to establish the national standards.
- 45.7 percent of the children who were discharged from foster care during the 12-month target period with a discharge reason of emancipation had been in foster care for 3 years or longer at the time of discharge. This percentage is slightly less than the national median of 47.8 percent for the data set used to establish the national standards. For this measure, lower scores indicate more positive performance.

The above data suggest that Indiana's strengths with regard to this data composite lie in two areas: (1) the significant percentage of children in foster care for 24 months or longer at the start of the 12-month CFSR target period who were discharged from foster care to a permanent home by the end of the target period (26.0 percent); and (2) the significant percentage of children who were discharged from foster care during the 12-month target period with a discharge reason of emancipation and who had been in foster care for 3 years or longer at the time of discharge (45.7 percent).

Performance on this item varied across sites based on case review findings. The item was rated as a Strength in 70 percent of Montgomery County cases, compared with 30 percent of Jefferson County cases and 55 percent of Marion County cases.

Item 7 was rated as a Strength when reviewers determined that the child's permanency goal was appropriate and had been established in a timely manner.

The case was rated as an ANI when reviewers determined one or both of the following:

- The child's current permanency goal was not appropriate given the case situation and the needs of the child (three cases).
- The child's permanency goal was not established in a timely manner (seven cases).
- The goals in the case plan are not appropriate because they have not been updated/revised (one case).
- The goal of reunification was maintained for an excessive period of time (seven cases).

- TPR was not sought in accordance with the Adoption and Safe Families Act (ASFA) timelines (five cases).

Case review findings pertaining to the 40 applicable case goals were as follows:

- Sixteen children had a goal of Adoption only.
- Fifteen children had a goal of Reunification with parents only.
- One child had a goal of Reunification with parents and Reunification with relatives.
- Eight children had a goal of Other planned permanent living arrangement (OPPLA) only.

### **Rating Determination**

Item 7 was assigned an overall rating of ANI. In 53 percent of the applicable cases, reviewers determined that the agency established an appropriate permanency goal for the child in a timely manner. This percentage is less than the 90 percent or higher required for a rating of Strength. This item also was rated as an ANI in the State's 2001 CFSR. While establishing appropriate goals for children in foster care in a timely manner appears to be a challenge, these data suggest it is a greater challenge in Jefferson County than in Marion or Montgomery Counties.

### **Stakeholder Interview Information**

Several stakeholders commenting on this item during the onsite CFSR expressed varying opinions regarding DCS effectiveness in identifying appropriate permanency goals in a timely manner. Although concurrent planning is described as being part of the policy change in the Statewide Assessment, stakeholders report that it is often not a formal process but an informal one. This was reflected in the cases reviewed during the CFSR. It was also reported by stakeholders that some judges have concerns about concurrent planning and this prevents workers from formally establishing concurrent permanency goals in the child's case plan. Several stakeholders describe TPRs not being filed timely and that caseworkers need further training to help them understand how timely decisions about filing for TPR impacts child permanency and compliance with Federal requirements.

With regard to reunification, stakeholders commented that judges are sometimes reluctant to change the goal if the parent is receiving substance abuse treatment and, as a result, TPR petitions are not filed consistent with ASFA requirements. Further, in some instances stakeholders report that agency staff work toward achievement of permanency goals that are different from the goal(s) specified in the case plan.

### **Statewide Assessment Information**

According to the Statewide Assessment, there are 12-month permanency hearings for children for whom reasonable efforts continue to apply. They are held (1) every 12 months from the date of the child’s removal from the child’s own home or the date of the dispositional hearing, whichever occurs first; (2) more often, if ordered by the court; or (3) not more than 30 days after the court finds that reasonable efforts to preserve or reunify the family are not required.

The Statewide Assessment reports that there was substantial variance across counties in achieving reunification within 12 months of a child’s entry into care. Many Indiana counties met the national median of 69.9 percent of children exiting to reunification within 12 months of removal. However, there were some counties that fell far below the median, and in some instances as much as 30 percent lower.

The Statewide Assessment indicates challenges to achieving timely permanency goals still exist due to high caseloads. FCMs do not have the time to assess the most appropriate permanency options for a child. Some FCMs still focus solely on reunification and move the children back and forth between a foster home and their own home. Many FCMs do not have all the skills, training, or permission to implement concurrent planning which leads to multiple placements. There are some courts in Indiana who will not allow children to be placed with relatives at removal. In addition, service providers often do not have permanency as a goal in their treatment plan.

### **Item 8. Reunification, Guardianship, or Permanent Placement With Relatives**

     Strength        X   Area Needing Improvement

#### **Case Review Findings**

Item 8 was applicable for 16 (40 percent) of the 40 foster care cases. In assessing these cases, reviewers were to determine whether the agency had achieved the permanency goals of reunification, guardianship, or permanent placement with relatives in a timely manner or, if the goals had not been achieved, reviewers were to determine whether the agency had made, or was in the process of making, diligent efforts to achieve the goals.

The results of this assessment are shown in the table below.

<b>Item 8</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	4	3	4	11	<b>69</b>
Area Needing Improvement	3	1	1	5	<b>31</b>
<b>Total Applicable Foster Care Cases</b>	<b>7</b>	<b>4</b>	<b>5</b>	<b>16</b>	
Not Applicable Foster Care Cases	13	6	5	24	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	

Indiana did not meet the national standard for Permanency Composite 1: Timeliness and permanency of reunification. Indiana's composite score for FY 2005 was 120.9 and did not meet the national standard of 122.6.

Performance on the individuals measures included in this composite was as follows:

- 74.3 percent of the reunifications occurred in less than 12 months of the child's entry into foster care. This percentage is higher than the median of 69.9 percent for State performance on this measure for the data set used to establish the national standards.
- The median length of stay in foster care for children discharged to reunification was 7.0 months. This length of stay does not meet the national median of 6.5 months for the data set used to establish the national standards for Permanency Composite 1. (Note that lower number of months means higher performance.)
- 41.7 percent of children entering foster care for the first time in the last 6 months prior to FY 2006 were discharged from foster care to reunification in less than 12 months of entry into foster care. This percentage is higher than the national median of 39.4 percent for one of the measures used in calculating the data set used in one of the Permanency Composites.

These data suggest that Indiana's strengths with regard to this data composite relate to the reunifications that occurred in less than 12 months of the child's entry into foster care. Performance on the fourth measure included in this composite pertains to foster care reentry and is provided in the discussion of item 5.

Item 8 was rated as a Strength when reviewers determined that the goal had been achieved in a timely manner or that the agency was making concerted efforts to achieve the goal in a timely manner. Item 8 was rated as an ANI when reviewers determined that the

agency had not made diligent efforts to achieve the goal in a timely manner. In five of these cases, reviewers noted that services necessary to support the goal of reunification were not provided.

### **Rating Determination**

Item 8 was assigned an overall rating of ANI. In 69 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to attain the goals of reunification, permanent placement with relatives, or guardianship in a timely manner. This percentage is less than the 90 percent or higher required for a rating of Strength. In the State's 2001 CFSR, there was no comparable item. At that time, item 8 pertained to IL services. The change for item 8 from an assessment of IL services to an assessment of timeliness of achieving goals of reunification, guardianship, and permanent placement of relatives was not made until Federal FY 2002.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR identified the following barriers to timely reunification, guardianship, and/or permanent placement with relatives:

- Reunification as a goal is not always appropriate, yet it is not changed in the plan.
- Parents using drugs and parents relapsing into drug use after treatment present a barrier.
- There is a lack of funds for subsidizing guardianship and clarity over who files for it.
- Agency staff members are not working diligently to locate relatives and parents.

### **Statewide Assessment Information**

According to the Statewide Assessment, the policy states every child is to have a case plan as long as the child is under the care of the DCS. The case plan accomplishes the following: (1) identifies the needs of each child; (2) identifies the needs of the parent(s) that resulted in the child being at risk in the home; (3) evaluates the appropriateness of services made available to prevent placement and those provided to reunify the child and family; (4) delineates a program for future services to assist the client in changing the behavior that brought them to the attention of DCS and that will help them to provide a safe, nurturing environment for their children at reunification; (5) provides specified activities to meet the desired outcome of the services listed above; and (6) identifies the objective (the changed behavior) that is expected as a result of the service being provided.

The Point-in-Time Permanency Profile Data Element II indicates that the greatest percentages of children, 65.5 percent, are placed with non-relatives, while the percentage placed with relatives was only 13.2 percent. This corresponds with the First-Time Entry

Cohort Section of the Data Profile, which shows that 61.1 percent of children are placed in a non-relative foster home for their first placement. Indiana uses non-relative placement (65.5 percent) at a much higher rate than the national average of 46 percent. According to the Statewide Assessment, the data suggest that FCMs were making more foster home placements as a means to avoid any potential liabilities that could arise from authorizing a relative placement.

**Item 9: Adoption**

Strength       Area Needing Improvement

**Case Review Findings**

Item 9 was applicable for 16 (35 percent) of the 40 foster care cases. In assessing this item, reviewers were to determine whether diligent efforts had been, or were being, made to achieve finalized adoptions in a timely manner. The results are shown in the table below.

<b>Item 9</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	3	2	3	8	<b>50</b>
Area Needing Improvement	5	2	1	8	<b>50</b>
<b>Total Applicable Foster Care Cases</b>	<b>8</b>	<b>4</b>	<b>4</b>	<b>16</b>	
Not Applicable Foster Care Cases	12	6	6	24	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	

The following information describes Indiana’s performance on the individual measures included in Composite 2: Timeliness of adoptions:

- 31.9 percent of the children exiting to adoption were discharged in less than 24 months from the time of entry into foster care. This percentage exceeds the national median (26.8 percent) for this measure but is less than the 75th percentile (36.6 percent) for this measure for the data set used to establish the national standards for the composite.
- The median length of stay in foster care for children adopted was 28.2 months. This length of stay is less than the national median (32.4 months) but exceeds the 25th percentile (27.3 months) for this measure for the data set used to establish the national standard for the composite. (Note a lower number of months equates to a higher level of performance).

- 22.3 percent of children in foster care for 17 months or longer on the first day of the CFSR 12-month target period were discharged to a final adoption by the last day of the target period. This percentage is below the 75th percentile (22.7 percent) for this measure for the data set used to establish the national standard for the composite.
- 15.3 percent of children in foster care for 17 months or longer on the first day of the CFSR 12-month target period became legally free for adoption (i.e., there was a TPR for both mother and father) within 6 months. This percentage exceeds the 75th percentile for this measure of 10.9 percent for the data set used to establish the national standard for the composite.
- 57.0 percent of children who were legally free for adoption were adopted within 12 months of becoming legally free. This percentage exceeds the national median (45.8) and it exceeds the 75th percentile (53.7 percent) for the data set used to establish the national standard for the composite.

Item 9 was rated as a Strength when reviewers determined that the State had made diligent efforts to achieve finalized adoptions in a timely manner. Item 9 was rated as an ANI when reviewers determined that the State had not made diligent efforts to achieve finalized adoptions in a timely manner. Key concerns were attributed to one or more of the following:

- Delays in scheduling court hearings or court delays related to continuances or postponements (two cases)
- Delays due to the agency not filing for TPR in a timely manner (two cases)
- Lack of concerted efforts on the part of the agency to seek an adoptive family for a child (two cases)
- Agency staff not completing necessary paperwork for adoption (three cases)

All 16 children with a permanency goal of adoption were in foster care for considerably longer than 24 months. Of the 16, 4 were in foster care for more than 3 years and 1 for more than 8 years. Of the 16, 3 children exited to a finalized adoption during the period under review; however, only 2 of the remaining 13 children were determined to be in pre-adoptive placements at the time of the review.

### **Rating Determination**

Item 9 was assigned an overall rating of ANI. In 50 percent of the applicable cases, reviewers determined that diligent efforts had been, or were being, made to achieve finalized adoptions in a timely manner. This percentage is less than the 90 percent or higher required for a rating of Strength. This item also was rated as an ANI in the State's 2001 CFSR.

Although the State meets the national standard for Composite 2: Timeliness of adoptions, case reviewers determined that DCS made diligent efforts to achieve adoptions in a timely manner in only 50 percent of the cases.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR expressed the opinion that adoptions generally are not finalized in a timely manner. Stakeholders attributed this to courts seeing some children as not “adoptable” and not having enough DCS staff to facilitate the adoption process. TPR delays were also reported to be an obstacle to achieving timely adoptions. Adoption goals were described as clear in some cases, but stakeholders commented that it becomes more difficult establishing adoption goals with older children. Lack of financial support and lack of understanding about post-adoption services were cited as barriers by several stakeholders. In Marion County, it was noted that having two judges has made a difference with timely adoptions. When Family Team Meetings are used throughout the State, they are believed to help the process move more quickly because they are addressing issues that get in the way of adoption.

### **Statewide Assessment Information**

According to the Statewide Assessment, the Juvenile Code addresses court termination of parental rights, both voluntary and involuntary. The Adoption Code addresses the adoption process from the filing of the petition to the requirements for adoption records and assistance and it specifically requires the State of Indiana to develop, implement, and maintain a Special Needs Adoption Program. The Interstate Compact on the Placement of Children (ICPC) governs interstate and intercountry adoptive placements, the latter in conjunction with the Immigration and Naturalization Service. In addition, the State adheres to the Multiethnic Placement Act of 1994 and the Interethnic Adoption Provisions in making adoption placements of children.

The Statewide Assessment reports that 61 percent of court personnel responding to a survey rated DCS as very or somewhat effective in achieving timely adoption for a child when appropriate. Forty-six percent of DCS staff surveyed rated DCS as very or somewhat effective in this area. Judges interviewed for the assessment were in consensus that DCS was following the guidelines in achieving timely adoption; however, they felt that 24 months was much too long of a time period before adoption could occur.

### **Item 10. Permanency goal of other planned permanent living arrangement**

Strength       Area Needing Improvement

### **Case Review Findings**

Item 10 was applicable for 8 (20 percent) of the 40 foster care cases. In assessing these cases, reviewers were to determine if the agency had made, or was making, diligent efforts to assist children in attaining their goals related to other planned permanent living arrangements. The results are presented in the table below.

<b>Item 10</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	4	2	1	7	<b>88</b>
Area Needing Improvement	1	0	0	1	<b>12</b>
<b>Total Applicable Foster Care Cases</b>	<b>5</b>	<b>2</b>	<b>1</b>	<b>8</b>	
Not Applicable Foster Care Case	15	8	9	32	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	

Item 10 was rated as a Strength when reviewers determined that the agency had made concerted efforts to ensure long-term placement for the child and to provide the necessary service to prepare the child for IL. Item 10 was rated as a Strength when reviewers determined the following:

- The child is receiving the necessary services and supports to promote a successful transition from foster care to IL once the child reaches the age of emancipation (five cases).
- The child has long-term special needs that are being adequately addressed in a specialized institutional setting, and the State plans transitioning to a supervised living arrangement at the age of majority (one case).
- The child in a group home placement has a successful transition to IL (one case).

In cases in which the child was in a foster home, there were formal agreements on the part of foster parents to continue caring for the child until the child aged out of foster care.

Item 10 was rated as an ANI in one case because the agency was not providing the child with IL services to assist in transitioning to independent living, even though it was in the case plan.

### **Rating Determination**

Item 10 was assigned an overall rating of ANI. In 88 percent of the applicable cases, reviewers determined that the goal of OPPLA was being addressed in an appropriate way. This percentage is less than the 90 percent or higher required for a rating of Strength. The item was rated as a Strength in the State's 2001 CFSR.

### **Stakeholder Interview Information**

Several stakeholders noted that although IL services are more available in the State and have improved over the past year, they are insufficient to meet the needs of children. Stakeholders at the State level report that resources and activities are improving because case managers are better able to tend to the needs of children due to lower caseloads. Stakeholders in Marion County reported that flexible funding and a mentoring program for older children have made a difference in meeting the individual needs of children. In Marion County, stakeholders reported that IL services are often offered through residential placements and that these services focus on education planning, housekeeping, budgeting, and other skill-based training.

### **Statewide Assessment Information**

According to the Statewide Assessment, the Indiana DCS administers funds allocated to the Chafee Foster Care Independence Program (CFCIP). Statewide quality assurance (QA) statistics reveal that Indiana does not make IL services a priority for the youth in care. There are many children who are eligible for services who are not receiving services. Youth enrolled in IL receive services for approximately 10 months. In 60 percent of the cases reviewed, youth are being serviced through a qualified IL provider who is actually providing appropriate services. In only 40 percent of the cases reviewed are the local office staff completing the discharge interview by a face-to-face interview with the youth, even though as a final edit in ICWIS the FCM is required to have the face-to-face interview prior to case closure. IL follow-up assessments occur in 41 percent of the cases prior to the case planning conference.

The Statewide Assessment indicates, as with other program areas, that youth are involved in the planning process 54 percent of the time. It appears that local office staff decide what is in the best interest of children without input from the youth. The Statewide Assessment suggests that additional training to support the local staff in working with youth toward independence is necessary to not only assist the youth in making decisions about their future but also to help the staff in permanency planning for children 14 to 18 years of age. Many youth reported in focus groups that they were unaware of community resources and needed assistance with locating and identifying resources. Some wardships are dismissed when a child turns 17 and the children are not referred again for IL services until they are 18 years of age. Many youth report having their case closed when they turn 18 and not having a support system in place.

## Permanency Outcome 2

<b>Outcome P2: The continuity of family relationships and connections is preserved for children</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement</b>					
	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percentage</b>
Substantially Achieved	11	6	8	25	<b>62.5</b>
Partially Achieved	9	4	2	15	<b>37.5</b>
<b>Total Applicable Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
Not Applicable Foster Care Cases	0	0	0	0	

### Status of Permanency Outcome 2

Indiana did not achieve substantial conformity with Permanency Outcome 2. The outcome was rated as substantially achieved in 62.5 percent of the cases, which is less than the 95 percent or higher required for substantial conformity. Performance on this outcome varied across sites. The outcome was determined to be substantially achieved in 80 percent of Montgomery County cases, compared with 60 percent of Jefferson County cases and 55 percent of Marion County cases.

### Key Concerns From the 2001 CFSR

Indiana did not achieve substantial conformity with this outcome in its 2001 CFSR. During the 2001 review, item 15 (placement with relatives) was rated as ANI. Key concerns identified in the 2001 review relevant to Permanency Outcome 2 were the following:

- The lack of public and private transportation made visitation difficult.
- In some localities, the continuity of the child’s connections was not being preserved because of FCM turnover.
- The lack of communication between DCS and the County DOC was sometimes a barrier when one of the siblings was under the jurisdiction of the DOC.
- In some cases, the connections with siblings were not being preserved, e.g., there were no indications that visits were occurring with siblings.
- Consistent identification and evaluation of relatives as a placement option did not occur in all cases.
- In some cases, DCS did not consider paternal relatives for placement, nor were fathers identified or attempts made to locate them.

- The DCS does not routinely use the Federal Parent Locator Service to search for absent parents.

To address these concerns, the agency implemented the following strategies in their PIP:

- Revise policy regarding visitation standards of youth and families
- Develop policy regarding the use of genograms
- Redefine caseload standards to equalize caseloads among staff
- Combine the foster/adoptive/kinship parent preparations so that they all receive the same 36 hours of pre-service training and require pre-adoptive parents to complete 10 hours of ongoing training each year, plus First Aid, CPR, and Universal Precautions training
- Revise statewide foster care and adoption recruitment campaigns to find prospective families interested, willing, and able to parent children in the custody of Indiana, targeting kinship homes
- Provide training to staff, foster/adoptive/kinship parents, licensed child-placing agencies (LCPAs), court-appointed special advocates, guardians *ad litem* (GALs), courts, and providers regarding change in suggested adoption policies as well as existing policies on adoption
- Attempt to expedite criminal history checks and child protection history checks within Indiana and nationwide
- Develop a policy to have staff members identify all relatives who are appropriate and willing to care for their relative children who have been taken into custody, subsequently notifying the court of this search

### **Key Findings From the 2007 CFSR**

Similar to the 2001 CFSR, item 11 was rated as a Strength and item 15 was rated as ANI in the 2007 CFSR. However, the concerns pertaining to Permanency Outcome 2 that were identified in the 2007 CFSR (as indicated below) were not apparent in the 2001 CFSR. The primary concerns identified in the 2007 CFSR were the following:

- Failure to place siblings together (item 12)
- Lack of consistency in promoting visitation between or among siblings in foster care (item 13)
- Lack of consistency with regard to efforts to maintain the child's connection with extended family, culture, and community (item 14) and with regard to efforts to maintain and strengthen the parent child relationship while children are in foster care (item 16)
- Lack of consistency in seeking and evaluating relatives as potential placement resources (item 15)

Despite these concerns, the case reviews also found the following:

- Children were routinely and consistently placed in close proximity to parents or potential permanent caregivers (item 11).

Key concerns expressed by stakeholders with regard to permanency were the following:

- Lack of available foster families
- Lack of consistency in locating fathers and promoting their involvement in case planning and maintaining relationships

The findings pertaining to the specific items assessed under Permanency Outcome 2 are presented and discussed below.

**Item 11. Proximity of foster care placement**

  X   Strength                         Area Needing Improvement

**Case Review Findings**

Item 11 was applicable for 34 (85 percent) of the 40 foster care cases. Cases determined to be not applicable were those in which (1) TPR had been attained prior to the period under review, (2) contact with parents was not considered to be in the child’s best interest, and/or (3) parents were deceased or whereabouts were unknown. In assessing item 11, reviewers were to determine whether the child’s most current foster care setting was in close proximity to the child's parents or close relatives. The results of this assessment are presented in the table below:

<b>Item 11</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	17	8	9	34	<b>100</b>
Area Needing Improvement	0	0	0	0	<b>0</b>
<b>Total Applicable Foster Care Cases</b>	<b>17</b>	<b>8</b>	<b>9</b>	<b>34</b>	
Not Applicable Foster Care Cases	3	2	1	6	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	

Item 11 was rated as a Strength when reviewers determined that the child was placed in the same community or county as the parents or that the child’s placement was not in the same community or county, but was still in close proximity to the parents. The item also

was rated as a Strength if the child was placed out of his or her community or county, but that the placement was necessary to meet the needs of the child and/or support attainment of the permanency goal.

**Rating Determination**

Item 11 was assigned an overall rating of Strength. In 100 percent of the cases, reviewers determined that DCS had made diligent efforts to ensure that children were placed in foster care placements that were in close proximity to their parents or relatives or that were necessary to meet special needs.

This percentage exceeds the 90 percent required for a rating of Strength. This item also was rated as a Strength in the State’s 2001 CFSR.

**Stakeholder Interview Information**

Several stakeholders expressed the opinion that DCS makes every effort to place children in their own communities. Barriers to placing children in their own communities include lack of placements in general, but in particular not enough foster homes that will take adolescents.

**Statewide Assessment Information**

According to the Statewide Assessment, it is Indiana’s policy to place children in the least restrictive, most family-like setting that meets the child’s needs. Any out-of-home placement for a child is to be made with such considerations as time allows matching the needs of the child with the strengths of the out-of-home care resource. DCS attempts to locate relatives as a placement resource first. In the absence of a relative placement, DCS may seek placement in a foster family home. When possible, a child is placed in close proximity to the child’s family, particularly when reunification with the family is the case plan goal.

According to the Statewide Assessment, Indiana DCS has experienced barriers in this area. More of the children coming into care need specialized care and have to go outside of the community to access those resources. Additionally, there are an increased number of foster parents who are aging and are limiting the children they will take. There are not enough African-American and Hispanic family homes and homes that will accept teenagers.

**Item 12. Placement with siblings**

Strength       Area Needing Improvement

### Case Review Findings

Item 12 was applicable for 31 (78 percent) of the 40 foster care cases. Cases were not applicable if the child did not have a sibling in foster care at any time during the period under review. In assessing item 12, reviewers were to determine whether siblings were, or had been, placed together and, if not, whether the separation was necessary to meet the needs (service or safety needs) of one or more of the children. The results of this assessment are presented in the table below:

<b>Item 12</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	15	4	8	27	<b>87</b>
Area Needing Improvement	2	2	0	4	<b>13</b>
<b>Total Applicable Foster Care Cases</b>	<b>17</b>	<b>6</b>	<b>8</b>	<b>31</b>	
Not Applicable Foster Care Cases	3	4	2	9	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	

Item 12 was rated as a Strength when reviewers determined that the child was placed with all siblings, or if siblings were separated, the separation was due to the special needs of one of the siblings or to the fact that placement with siblings was not in the child's best interest.

Item 12 was rated as a Strength when reviewers determined the following:

- The child was in a placement with all siblings (14 cases).
- The child was in a placement with some siblings and the separation from other siblings was determined to be in the best interest of one of the siblings (one case).
- The child was not placed with any siblings, but the siblings were separated due to the special needs of one of the siblings (seven cases).
- The child was not placed with some siblings but not others because the agency was unable to find a single placement for all siblings (two cases).
- The child(ren) was placed with separate relatives but placed in the same community to help facilitate visitation (three cases).

Item 12 was rated as an ANI when reviewers determined the following:

- Children were not placed with siblings, and the separation was not deemed to be in the best interest of one of the siblings (four cases).
- The agency had not made sufficient efforts to locate a placement for a sibling group (four cases).

### **Rating Determination**

Item 12 was assigned an overall rating of ANI. In 87 percent of the applicable cases, reviewers determined that the agency placed siblings together in foster care whenever possible and appropriate. This is less than the 90 percent or higher required for a rating of Strength. This item was rated as a Strength in the State's 2001 CFSR.

### **Stakeholder Interview Information**

Several stakeholders expressed the opinion that DCS makes concerted efforts to place siblings together. However, stakeholders also noted that there are not enough foster family homes to ensure that siblings can remain together, particularly if there is a large sibling group of four or more children. Stakeholders reported that siblings are often separated because one of them needs a higher level of care or there are safety issues. Concurring with the Statewide Assessment, stakeholders describe efforts DCS has made to build relationships between foster parents, which supports siblings seeing one another when they cannot be placed together. They also described sibling groups where the children have different fathers and in these instances they encourage contact between siblings. Despite the focus of the agency on placing siblings together, some stakeholders reported that youth have not been placed with siblings throughout their time in foster care and have had to locate siblings on their own, not with agency staff support.

### **Statewide Assessment Information**

According to the Statewide Assessment, it is the policy of DCS that in the absence of a strong reason to the contrary, groups of siblings are to be placed together whenever possible in order to maintain existing ties and supports and to minimize the degree of loss to the children.

As part of the Statewide Assessment, interviews were conducted with judges throughout the State; all judges commented that keeping siblings together is something that they are sensitive to and try to ensure that it happens whenever possible. Sixty-three percent of court staff surveyed responded that DCS was very good at keeping siblings together. QA results show that in 95 percent of the cases reviewed, documentation indicated that efforts were made to place siblings together and when that was not possible continued efforts were made to locate placement that would accommodate the sibling group. The DCS "Sibling Placement Report" provides county-specific and regional data with regard to the number of sibling groups in out-of-home placements and the number/percentage of those placements where the siblings are placed together.

According to the Statewide Assessment, DCS did not always have a sufficient number of licensed foster homes to accommodate the children who needed to be placed with siblings. Another challenge reported in the Statewide Assessment is lack of foster parent training that addresses the importance of maintaining sibling connection. In addition, sometimes placements were made with the best interest of the foster family instead of the best interest of the child.

**Item 13. Visiting with parents and siblings in foster care**

Strength       Area Needing Improvement

**Case Review Findings**

Item 13 was applicable for 37 (93 percent) of the 40 foster care cases. Cases were not applicable for an assessment of this item if the child had no siblings in foster care and if one of the following conditions was met with regard to the parents: (1) TPR was established prior to the period under review and parents were no longer involved in the child’s life (or parents were deceased) or (2) visitation with a parent was considered to not be in the best interest of the child. In assessing this item, reviewers were to determine (1) whether the agency had made, or was making, diligent efforts to facilitate visitation between children in foster care and their parents and siblings in foster care, and (2) whether these visits occurred with sufficient frequency to meet the needs of children and families. The findings of this assessment are presented in the table below:

<b>Item 13</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	11	5	6	22	<b>59</b>
Area Needing Improvement	9	4	2	15	<b>41</b>
<b>Total Applicable Foster Care Cases</b>	<b>20</b>	<b>9</b>	<b>8</b>	<b>37</b>	
Not Applicable Foster Care Cases	0	1	2	3	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	

Performance on this item varied across sites. The item was rated as a Strength in 55 percent of Marion County cases and 56 percent of applicable Jefferson County cases, compared with 75 percent of applicable Montgomery County cases.

Item 13 was rated as a Strength when reviewers determined that the frequency and quality of visitation with parents and siblings met the needs of the children or when visitation did not meet the child's needs, but the agency made concerted efforts to promote visitation. Item 13 was rated as a Strength when reviewers determined the following:

- The frequency of visitation met the needs of the child (14 cases).
- The frequency of visitation did not meet the needs of the child, but the agency had made concerted efforts to promote more frequent visitation (six cases).
- The frequency of visitation did not meet the child's needs despite agency efforts, and the agency provided alternative forms of contact, such as telephone or email (one case).
- Visitation was not in the child's best interest, but agency made efforts to make it work (one case).

Item 13 was rated as an ANI when reviewers determined one or more of the following:

- The agency did not make concerted efforts to promote visitation with the mother (four cases).
- The agency did not make concerted efforts to promote visitation with siblings (five cases).
- The agency did not make concerted efforts to promote visitation with the father (nine cases).

### **Rating Determination**

Item 13 was assigned an overall rating of ANI. In 59 percent of the applicable cases, reviewers determined that the agency made concerted efforts to ensure that visitation was of sufficient frequency to meet the needs of the family. This percentage is less than the 90 percent required for a rating of Strength. This item was rated a Strength in the 2001 CFSR.

### **Stakeholder Interview Information**

Many stakeholders commenting on this item during the onsite CFSR were in general agreement that the agency makes concerted efforts to ensure frequent visitation of children in foster care with their parents when reunification is the goal. Variance was described between foster parents in their comfort and willingness to work with the parents and have them in their home. However, stakeholders also said that visits are held in a variety of locations, for example the office, the park, and at medical appointments. Transportation to ensure visits occur was described as being available by some stakeholders yet others reported it was an issue. This is mentioned in the Statewide Assessment as well. However, several stakeholders described an effective system for progressively increasing visits and closely monitoring visits until reunification is achieved.

### **Statewide Assessment Information**

According to the Statewide Assessment, DCS visitation policy states that it is every child’s fundamental right to visit with their parent. These timeframes represent the minimum amount of time required for visitation by various parties.

1. **Initial Contact:** Contact is to take place between the child and legal family within 48 hours of the removal of the child from the home. Contact can be a telephone call, contact at a court hearing, or supervised visits in the agency, a neutral setting, foster home or parental home.
2. **Face-to-Face Contact:** Contact is to occur within 5 working days of the removal of the child from the parents’ home, unless otherwise ordered by the court or the child refused contact. When there are concerns for the child’s safety, visits are to be supervised.
3. **Regularly Scheduled Visits:** Contact is to be made on at least a weekly basis, unless otherwise ordered by court. Face-to-face visitation with siblings in other placements is to occur at least every other week, and any significant others may visit at that time as well or more often if ordered by court. However, if a sibling is placed in a residential facility, hospital or other type of institution, the frequency of face-to-face visitation with other siblings is reduced to one visit per month.

According to the Statewide Assessment, what the State found in practice is that foster parents do not have the impetus or ability to transport or facilitate visitation as often as it needs to occur. During a focus group, foster parents reported that visitation varies and they feel that there should be 1 to 2 hours per week of visitation. Some barriers noted are when the children are picked up for visits there are not adequate car seats. They feel that when visits are made with the family, someone should be sitting in the room to monitor the visits as often the parents just sit and do not interact with the child. They felt there was a barrier occasionally with siblings visiting in an adoptive placement, as one set of adoptive parents are sometimes not eager to set up visitation.

### **Item 14. Preserving connections**

Strength       Area Needing Improvement

### **Case Review Findings**

Item 14 was applicable for 40 (100 percent) of the 40 foster care cases. In assessing item 14, reviewers were to determine whether the agency had made, or was making, diligent efforts to preserve the child’s connections to neighborhood, community, heritage, extended family, faith, and friends while the child was in foster care. This item is not rated on the basis of visits or contacts with parents or siblings in foster care. The results of the assessment are provided in the table below.

<b>Item 14</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	13	8	9	30	<b>75</b>
Area Needing Improvement	7	2	1	10	<b>25</b>
<b>Total Applicable Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	
Not Applicable Foster Care Cases	0	0	0	0	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	

Performance on this item varied across sites. The item was rated as a Strength in 65 percent of Marion County cases, as compared with 90 percent of Montgomery County cases and 80 percent of Jefferson County cases.

Item 14 was rated as a Strength when reviewers determined one or more of the following:

- The agency made concerted efforts to preserve the child’s connections with extended family members (e.g., through phone contact and visits) (24 cases).
- The agency made concerted efforts to preserve the child’s connections with the child’s religious or cultural heritage (10 cases).
- The agency made concerted efforts to preserve the child’s connections with the school and community (e.g., selecting placements that do not require a change of school, jobs, friends, etc.) (10 cases).
- The agency made concerted efforts to explore connections, but none were found (eight cases).

Item 14 was rated as an ANI when reviewers determined one or more of the following:

- The agency did not make concerted efforts to maintain the child’s connections to extended family (four cases).
- The agency did not make concerted efforts to preserve the child’s connections with the child’s religious or cultural heritage (three cases).
- The agency did not make concerted efforts to preserve the child’s connections to school or community (one case).
- The agency did not explore child’s connections (five cases).

### **Rating Determination**

Item 14 was rated as an ANI. In 75 percent of the cases, reviewers determined that the agency had made concerted efforts to maintain the child’s connections with extended family, culture, religion, community, and school. This is less than the 90 percent required for a rating of Strength. This item was rated as a Strength in Indiana’s 2001 CFSR.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR from Marion and Montgomery Counties expressed different opinions as to whether the agency makes concerted efforts to maintain children's connections to extended family, culture, faith, community, and school while the children are in foster care. Some Stakeholders from Montgomery County described efforts that are made to keep children connected to their schools, their community, their routines, etc. A few Stakeholders described the agency as not effective with maintaining the child's connections, including school activities and keeping children connected to extended family and friends.

### **Statewide Assessment Information**

According to the Statewide Assessment, DCS makes a diligent effort to preserve essential connections of children in out of home care. When possible, a child is placed in close proximity to the child's family, particular when reunification with the family is the case plan. In following the provisions of the Indian Child Welfare Act, Indiana DCS makes concerted efforts to place children identified as Native American with a Native American family and DCS makes every effort to support the integrity of Indian families and communities.

The Statewide Assessment describes legislation that supports children continuing in their school of legal settlement even if foster care placement outside of the school district occurs. The practice of utilizing kinship placement is expected to further the development of this practice, which should allow for more children to remain in their communities. An additional practice indicator report is titled "Locally Placed CHINS." This report provides county-specific and regional data with regard to the number of out of home placements and the number of those placements that are within the county and/or region. This report is used to evaluate the effectiveness of DCS in keeping children close to home.

According to the Statewide Assessment, Tribal Representatives indicated in interviews that the agency is not consistently identifying Native American children. They reported being notified by DCS of only one Native American child in a 3-year period. This case involved a child in care, and it was felt that neither DCS nor the courts attempted to involve the Tribe in any manner. DCS policy requires formal written notice via certified mail be sent to the Tribe's social service department as soon as an Indian child is removed. It was reported in the interviews that this is not occurring. The Tribal Representatives felt that more training for DCS and court staff would help in servicing Native American families in the future.

**Item 15. Relative placement**

\_\_\_ Strength     X Area Needing Improvement

**Case Review Findings**

Item 15 was applicable for 36 (90 percent) of the 40 foster care cases. Cases were not applicable if relative placement was not an option during the period under review because (1) the child was in an adoptive placement at the start of the time period, or (2) the child entered foster care needing specialized services that could not be provided in a relative placement. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to locate and assess relatives (both maternal and paternal relatives) as potential placement resources for children in foster care. The results of this assessment are presented in the table below.

<b>Item 15</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	15	4	8	27	<b>75</b>
Area Needing Improvement	3	4	2	9	<b>25</b>
<b>Total Applicable Foster Care Cases</b>	<b>18</b>	<b>8</b>	<b>10</b>	<b>36</b>	
Not Applicable Foster Care Case	2	2	0	4	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	

Performance on this measure varied somewhat across sites. Eighty-three percent of applicable Marion County cases and 80 percent of the cases in Montgomery County were rated as a Strength for this item compared with 50 percent of applicable Jefferson County cases.

Item 15 was rated as a Strength when reviewers determined one or more of the following:

- The child was placed with relatives (16 cases).
- The child was not placed with relatives but the agency made diligent efforts to search for both maternal and paternal relatives (13 cases). In these cases, children were not placed with relatives either because a relative could not be found or because the relatives who were located were unable or unwilling to care for the children, lived too far from the parents, and/or had a criminal record or history of substantiated child maltreatment.

Item 15 was rated as an ANI when reviewers determined the following:

- The agency had not made diligent efforts to search for either maternal or paternal relatives during the period under review (five cases).
- The agency had made efforts to search for maternal relatives, but not paternal relatives (one case).
- The agency had made efforts to search for paternal relatives, but not maternal relatives (one case).
- The agency located relatives, but made no efforts to place the child with them (two cases).

### **Rating Determination**

Item 15 was assigned an overall rating of ANI. In 75 percent of cases, reviewers determined that the agency had made diligent efforts to locate and assess relatives as potential placement resources. This percentage is less than the 90 percent or higher required for a rating of Strength. This item was rated as an ANI in the State's 2001 CFSR.

### **Stakeholder Interview Information**

Most stakeholders commenting on this item during the onsite CFSR expressed the opinion that the agency has greatly improved in making concerted efforts to search for relatives and evaluate relatives as placement resources for the child. Stakeholders reported that this search begins during the investigation phase of a case and is expected to continue throughout the life of the case. A few stakeholders indicated that the agency searches equally for maternal and paternal relatives and that "fictive kin" (i.e., people not related by birth or marriage who have an emotionally significant relationship to the child) are included in the search for placement resources because they are viewed as "family" to the child. One stakeholder commented that they are rarely successful in locating absent fathers; however, they conduct a search of the public assistance system, DOC, and they use genograms as a method of exploring potential relatives. Another stakeholder indicated that in instances when absent fathers cannot be located, the agency will locate the paternal relatives and place the child with them if appropriate.

### **Statewide Assessment Information**

According to the Statewide Assessment, the court is required to consider placing a child in the home of an appropriate family member before any other type of placement. The Statewide Assessment explains that FCMs have the ability to run fingerprint and name based National Criminal Information Center and FBI criminal history checks immediately, therefore, they are able to screen relatives quickly and place children with appropriate relatives at the point of a detention hearing. Per State policy, the genogram must be completed no later than 30 days following the removal from home or the CHINS disposition. The genogram is sporadically completed by FCMs. This can make the diligent search for relatives difficult and relative placements contingent on the relatives that parents bring to the

attention of the agency. FCMs were trained on the use of genograms and ecomaps but have not fully incorporated the use of these as demonstrated in the QA results of 2005 showing completion in 68 percent of CHINS cases.

The Statewide Assessment reports the use of relative placement in FY 2005 was 12.6 percent. This was a decrease from the previous fiscal year, which was 14.1 percent. This decrease can be attributed to several factors. During this time period, there was a criminal case filed against a former FCM for placing a child in the home of relatives who had a criminal history. One of the children died as a result of abuse by one of his relative caregivers. The criminal case resulted in legislative changes requiring fingerprint checks of relatives prior to placement.

**Item 16. Relationship of child in care with parents**

Strength       Area Needing Improvement

**Case Review Findings**

Item 16 was applicable for 34 (85 percent) of the 40 foster care cases. In Indiana, several cases were not applicable for this item because the child was in foster care on a 48-hour hold and therefore issues pertaining to maintaining the bond between children and parents while the child is in foster care were not relevant. Other cases were not applicable if (1) parental rights had been terminated prior to the period under review and parents were no longer involved with the child, or (2) a relationship with the parents was considered to be not in the child’s best interest throughout the period under review. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to support or maintain the bond between children in foster care and their mothers and fathers through efforts other than arranging visitation. The results of this assessment are provided in the table below:

<b>Item 16</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	10	4	7	21	<b>62</b>
Area Needing Improvement	7	4	2	13	<b>38</b>
<b>Total Applicable Foster Care Cases</b>	<b>17</b>	<b>8</b>	<b>9</b>	<b>34</b>	
Not Applicable Foster Care Cases	3	2	1	6	
<b>Total Foster Care Cases</b>	<b>20</b>	<b>10</b>	<b>10</b>	<b>40</b>	

Performance on this measure varied somewhat across sites. Among applicable cases, 78 percent in Montgomery County were rated as a Strength for this item, compared with 59 percent in Marion County and 50 percent in Jefferson County.

Item 16 was rated as a Strength when reviewers determined that the agency made concerted efforts to support and/or strengthen the bond between parents and children through one or more of the following activities:

- Encouraging the parents' participation in school or after school activities and attendance at medical appointments and special events (two cases)
- Providing transportation so that parents can participate in these events (five cases)
- Providing opportunities for family therapeutic situations (six cases)
- Encouraging foster parents to mentor biological parents and serve as parenting role models for them (four cases)
- Encouraging parent participation in parenting classes to enhance parent child interaction and bonding (six cases)
- Using title IV-E funds to provide multiple services to strengthen bonds between parent and child (seven cases)

Item 16 was rated as an ANI when reviewers determined the following:

- The agency did not make concerted efforts to support the relationship with the father (eight cases).
- The agency did not make concerted efforts to support the relationship with the mother (three cases).
- The agency did not make concerted efforts to support positive relationships with mother or father (two cases).

### **Rating Determination**

Item 16 was assigned an overall rating of ANI. In 62 percent of the cases, reviewers determined that the agency had made concerted efforts to support the parent-child relationships of children in foster care. This percentage is less than the 90 percent or higher required for a rating of Strength. This item was rated as a Strength in the State's 2001 CFSR.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the onsite CFSR reported that the court does a good job in keeping fathers involved. When Child and Family Team Meetings are used with families, there is a focus on the parent-child relationship and education of parents in how to maintain connections. However, some stakeholders described the relationship between the parent and child as the foster parent's responsibility, such as including the parent in school activities and medical appointments. One Stakeholder indicated that incarcerated parents do not receive visits and that attempts are not made to maintain relationships with parents in the local jail or prison system.

**Statewide Assessment Information**

According to the Statewide Assessment, Indiana has established guidelines the FCM must follow in completing the visitation plan. The plan is to be completed in ICWIS within 5 working days after the initial visit. The plan is to be a written agreement detailing the time of visits, as well as the place and frequency of visits, transportation arrangements, notification of change in a visit, who is allowed to visit, including siblings, and to what degree visitation is to be supervised.

The Statewide Assessment describes that the DCS often contracts with service providers who are able to facilitate frequent and high-quality visits. DCS completes the criminal history checks on noncustodial parents and facilitates visits to assess whether or not a noncustodial parent or his/her relatives are a placement option. As needed, DCS offers assessments, background checks, and appropriate services indicated by assessment. DCS conducted a survey with DCS staff, and results included comments that caseloads were still too high for workers to do more frequent visits, thus preventing them from establishing relationships with children and/or families.

**III. CHILD AND FAMILY WELL-BEING**

**Well-Being Outcome 1**

<b>Outcome WB1: Families have enhanced capacity to provide for their children’s needs</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement</b>					
	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total</b>	<b>Percentage</b>
Substantially Achieved	7	6	10	23	<b>35.4</b>
Partially Achieved	19	9	7	35	<b>53.8</b>
Not Achieved or Addressed	5	2	0	7	<b>10.8</b>
<b>Total Applicable Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	
Not Applicable Cases	0	0	0	0	

## **Status of Well-Being Outcome 1**

Indiana did not achieve substantial conformity with Well-Being Outcome 1. The outcome was rated as substantially achieved in 35.4 percent of the cases reviewed, which is less than the 95 percent required for a determination of substantial conformity. Performance on this outcome varied across sites. The outcome was determined to be substantially achieved in 59 percent of Montgomery County cases, compared to 35 percent of Jefferson County and 23 percent in Marion County cases. Performance did not vary based on the type of case. The outcome was found to be substantially achieved in 38 percent (15 cases) of the 40 foster care cases, compared to 32 percent (8 cases) of the 25 in-home services cases.

## **Key Concerns From the 2001 CFSR**

Indiana did not achieve substantial conformity with this outcome during its 2001 CFSR. For the 2001 CFSR, all four items incorporated in the outcome were rated as ANIs.

Some key concerns identified in the 2001 review were the following:

### **Item 17 ANI**

- The services provided were not always linked to family needs.
- Children were not getting the services they needed because services were primarily focused on parents.
- Assessments that focused on specific issues overlooked broad and underlying needs.
- In some localities, there was a lack of systemic coordination between FCM and service providers to identify needs and provide services.

### **Item 18 ANI**

- In many cases, children and parents did not participate in case planning, especially in probation cases.
- The high level of FCM turnover results in a lack of experience in engaging families in the case planning process.

### **Item 19 ANI**

- When the DCS did not have primary responsibility for case management, the FCM practice of face-to-face visits with children fell short of State policy in approximately half the cases due to unclear policy, workload pressures, turnover, and inexperience.

- There appeared to be no system in place to monitor visits to ensure that FCMs were seeing children and families on a regular basis.

#### Item 20 ANI

- The FCM practice of parent visits fell short of State policy apparently because of workload pressures, turnover, inexperience, and the FCMs' perceived identity as case brokers.
- Service providers visited with parents and children often in place of visits by FCM.
- Parents sometimes did not know whom to contact due to high staff turnover in some localities.

To address these concerns, the agency implemented the following strategies in its PIP:

- Evaluate the need to revise the current safety, risk, and strengths and needs assessment tools based on studies of validation.
- Develop a policy regarding the use of genograms.
- Develop a policy to require a risk assessment prior to case closure. Services addressing any unresolved risk will be provided to the family.
- Provide assessment training statewide for experienced and new workers.
- Enhance current policy on case planning to require that case plans be developed at formal case conferences with all parties participating and focusing on child-specific issues.
- Enhance training on case planning to give staff the skills to engage families and utilize assessments more effectively in determining appropriate objectives and services for the child.
- Enhance current policy on visits with the family and child to clarify expectations for these visits based upon the identified service level and consistent with Council on Accreditation (COA) standards.

#### **Key Findings of the 2007 CFSR**

Similar to the 2001 CFSR, in the 2007 CFSR, all of the items included under Well-Being Outcome 1 were rated as an ANI. However, some of the concerns identified during the 2001 CFSR were not noted during the 2007 review, suggesting that they may have been resolved.

The findings pertaining to the specific items assessed under Well-Being Outcome 1 are presented and discussed below.

**Item 17: Needs and services of child, parents, and foster parents**

Strength       Area Needing Improvement

**Case Review Findings**

Item 17 was applicable for all 65 cases. In assessing this item, reviewers were to determine whether the agency had (1) adequately assessed the needs of children, parents, and foster parents and (2) provided the services necessary to meet those needs. This item excludes the assessment of children’s (but not parents’) needs pertaining to education, physical health, and mental health. These are addressed in later items. The case review results were the following:

<b>Item 17</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	12	7	10	29	<b>45</b>
Area Needing Improvement	19	10	7	36	<b>55</b>
Not applicable	0	0	0	0	0
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

Performance on this item did not vary across sites. The item was rated as a Strength in 39 percent of Marion County cases, 41 percent of Jefferson County cases, and 59 percent in Montgomery County cases. The item was rated as a Strength in 48 percent (19 cases) of the 40 foster care cases, compared to 40 percent (10 cases) of the 25 in-home services cases.

Item 17 was rated as a Strength when reviewers determined that the needs of children, parents, and foster parents had been adequately assessed and that identified service needs had been met. Item 17 was rated as an ANI when reviewers determined that there was either inadequate assessment of needs or inadequate services to meet identified needs.

Specific case review findings for item 17 are shown in the table below. The data in the table suggest that the agency is more effective in assessing and meeting service needs for children and mothers than it is for fathers and foster parents. There did not appear to be much difference between foster care and in-home cases.

<b>Item 17: Needs Assessment and Service Provision</b>			
<b>In-Home Cases</b>			
<b>Needs Assessment and Service Provision</b>	<b>Number of Cases</b>		
	<b>Strength</b>	<b>ANI</b>	<b>Total Applicable</b>
Mother's needs assessed and met	19 (76%)	6 (24%)	25
Father's needs assessed and met	11 (50%)	11 (50 %)	22
Child's needs assessed and met	22 (88%)	3 (12 %)	25
<b>Foster Care Cases</b>			
<b>Needs Assessment and Service Provision</b>	<b>Number of Cases</b>		
	<b>Strength</b>	<b>ANI</b>	<b>Total Applicable</b>
Mother's needs assessed and met	22 (73%)	8 (27%)	30
Father's needs assessed and met	14 (56%)	11 (44%)	25
Child's needs assessed and met	36 (90%)	4 (10%)	40
Foster parents' needs assessed and met	21 (64%)	12 (36%)	33

**Rating Determination**

Item 17 was assigned an overall rating of ANI. In 45 percent of the cases, reviewers determined that the State had adequately assessed and addressed the service needs of children and parents. This percentage is less than the 90 percent or higher required for a rating of Strength. This item also was rated as an ANI in the State's 2001 CFSR.

**Stakeholder Interview Information**

Many stakeholders commenting on this item expressed the opinion that the agency has been making efforts to strengthen their skills in assessing and addressing the needs of children and parents. Several stakeholders referenced a new curriculum being implemented that assesses the needs of the child and family that looks beyond the presenting problem. This is described as a family-centered approach, which looks at the whole picture and addresses the underlying issues. Staff skills in interviewing and engaging families also are a part of the curriculum. When Child and Family Team Meetings are being used, stakeholders indicated that that process helps identify needs. However, most stakeholders expressed the opinion that DCS is not consistently effective in assessing and meeting the service needs of fathers. Stakeholders also suggested that it is a challenge to assess children's mental health and educational needs. IL services were not available to youth consistently across counties. Additional stakeholder comments regarding these services for children are provided in the discussion of items 22 and 23, and in the discussion of the systemic factor of Service Array.

Many stakeholders also reported that the agency usually is effective in assessing and meeting the needs of foster parents. Specifically, in Montgomery County, it was noted that DCS staff attend the quarterly foster parent meetings and, in that forum, foster parents share their needs and problems. Stakeholders describe foster parents being able to call the DCS office and get what they need; however, they noted that treatment foster parents' needs are assessed more comprehensively.

### **Statewide Assessment Information**

According to the Statewide Assessment, each county DCS office is responsible for providing the same mandated case management activities for children in out-of-home care as it provides for all children under its supervision. The Statewide Assessment indicates that a risk-and-needs assessment is completed for all substantiated CPS investigations and assists the FCM in determining the service level for the case. Services are individualized for each child and family depending upon their needs. In addition to the initial risk-and-needs-assessment, reassessments are completed every 180 days or at times of critical case decisions.

Per the Statewide Assessment, the Ansell Casey Life Skills Assessment tool is being implemented. Several comments received from the participants of foster parent focus groups suggest that youth ages 16 and up do not know about or have access to services they need to learn to live independently. They felt the youth are too immature to take advantage of services at that age. The participants felt that DCS was not effective in this area. Participants in youth focus groups also felt this was an area in which improvement was needed. Youth reported not being certain that all caseworkers know about who the provider is for IL services. However, they reported their experiences with the services have been good, and they felt some of the preparation was good to help them living independently.

### **Item 18: Child and family involvement in case planning**

Strength       Area Needing Improvement

### **Case Review Findings**

Item 18 was applicable for 61 (94 percent) of the 65 cases. A case was not applicable if parental rights had been terminated prior to the period under review, and if the parents were not involved with the child in any way and the child was too young or had cognitive delays or other conditions that were barriers to participation in case planning. In assessing this item, reviewers were to determine whether parents and children (if age-appropriate) had been involved in the case planning process, and if not, whether their involvement was contrary to the child's best interest. A determination of involvement in case planning required that a parent or child had actively participated in identifying the services and goals included in the case plan. This assessment produced the following findings:

<b>Item 18</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	9	10	12	31	<b>51</b>
Area Needing Improvement	20	6	4	30	<b>49</b>
<b>Total Applicable Cases</b>	<b>29</b>	<b>16</b>	<b>16</b>	<b>61</b>	
Not Applicable Cases	2	1	1	4	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

Performance on this item varied across sites. Among applicable cases, this item was rated as a Strength in 31 percent of Marion County cases, compared to 63 percent of Jefferson County cases, and 75 percent of Montgomery County cases. Performance did not vary substantively based on the type of case. The item was rated as a Strength in 53 percent (19 cases) of the 36 applicable foster care cases and 48 percent (12 cases) of the 25 in-home services cases.

Item 18 was rated as a Strength when reviewers determined that all appropriate parties had actively participated in the case planning process or that the agency had made concerted efforts to involve them in the case planning process.

Key findings with regard to this item were the following:

- There were 41 cases in which involvement of the mothers in the case planning process was applicable for assessment. Reviewers determined that the agency made concerted efforts to involve mothers in case planning in 24 (59 percent) of these cases.
- There were 42 cases in which involvement of the fathers in the case planning process was applicable for assessment. Reviewers determined that the agency made concerted efforts to involve fathers in 20 (48 percent) of these cases.
- There were 27 cases in which involvement of the children in the case planning process was applicable for assessment. Reviewers determined that the agency made concerted efforts to involve children in case planning in 16 (59 percent) of these cases.

The item was rated as an ANI when reviewers determined that the agency had not made concerted efforts to involve the mother, father, and/or child (when age-appropriate) in the case planning process. There are no noteworthy differences in performance with regard to involving fathers compared to involving mothers and children.

### **Rating Determination**

Item 18 was assigned an overall rating of ANI. In 51 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to involve parents and/or children in the case planning process. This percentage is less than the 90 percent or higher required for a rating of Strength. This item was rated as an ANI in the 2001 CFSR.

### **Stakeholder Interview Information**

Some stakeholders commenting on this item during the Onsite Review expressed the opinion that involving parents and children in case planning is significantly improved when Child and Family Team Meetings are used. However, one stakeholder reported that caseworkers develop plans without making any contact with the family, and this also was indicated by youth who said that the case plans are written without their involvement. The general consensus, however, was that the extent of engagement of parents and children in case planning varies depending on the skills and efforts of the individual caseworkers. Stakeholders in Montgomery County indicated that using Child and Family Team Meetings and engaging parents and children in case planning is effective and rated the agency as excellent in this area.

Additional comments regarding the case planning process are provided in the Systemic Factors section under item 25.

### **Statewide Assessment Information**

According to the Statewide Assessment, Indiana meets the Federal requirement for a written case plan on all children in foster care. The Statewide Assessment describes a stakeholder survey conducted by DCS where there were conflicting responses to the effectiveness of DCS in involving parents and children in the case planning process between DCS staff, court personnel, and service providers. Forty-two percent of DCS staff felt that DCS was somewhat effective in this area, 44 percent of the court personnel surveyed felt DCS was Very Effective, and 36.4 percent of the service providers felt that DCS was Somewhat Ineffective in this area. Service providers commented that DCS does not always take into consideration the importance of involving biological parents in-services with children who are in foster care.

A foster parent focus group described being involved in the case plan but reports they do not get as much information as the CASA or GAL. Focus groups with parents found discrepancies in case plan involvement. Some parents said they were really involved in the case plan process, while others reported meeting with the caseworker and being asked what they needed and having those needs added to the case plan. Youth reported being involved in developing their case plans, and they felt their plans and the services they received as a result of the plan were based on their individual needs, but they were not satisfied with all of the providers assigned to them. Although some participants in focus groups reported being involved in the development of their case plans, these same participants

also reported having their case plans being presented to them at their conference indicating that the FCM had developed and typed up the plan prior to meeting with the individual. According to the Statewide Assessment, it is clear that most parents and youth do not have a clear understanding of what their involvement should be in the development of their case plan.

**Item 19: Caseworker visits with child**

Strength       Area Needing Improvement

**Case Review Findings**

Item 19 was applicable for all 65 foster care cases. In conducting the assessment of this item, reviewers were to determine whether the frequency of visits between the caseworkers and children was sufficient to ensure adequate monitoring of the child's safety and well-being and whether visits focused on issues pertinent to case planning, service delivery, and goal attainment. The results of the assessment are presented in the table below:

<b>Item 19</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	17	12	17	46	<b>71</b>
Area Needing Improvement	14	5	0	19	<b>29</b>
Not applicable	0	0	0	0	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

Performance on this item varied slightly across sites. The item was rated as a Strength in 100 percent of Montgomery County cases compared to 71 percent of Jefferson County cases and 55 percent of Marion County Cases. However, performance on the item did not vary substantially based on the type of case. The item was rated as a Strength in 68 percent (27 cases) of the 40 foster care cases and 76 percent (19 cases) of the 25 in-home services cases.

Item 19 was rated as a Strength when reviewers determined that the frequency and quality of visits between caseworkers and children were sufficient to ensure adequate monitoring of the child's safety and well-being and promote attainment of case goals.

Item 19 was rated as an ANI when reviewers determined the following:

- The frequency of caseworker visits was not sufficient to meet the needs of the child and the visits did not focus on issues pertinent to case planning, service delivery, and goal attainment (three cases).
- The frequency of caseworker visits with children was not sufficient to meet the needs of the child, although when visits did occur, they were substantive (five cases).
- The frequency of caseworker visits was sufficient but the visits did not focus on issues pertinent to case planning, service delivery, or goal attainment (nine cases).
- There were long periods of time during the period under review in which the agency caseworker did not visit the child (two cases).

Specific information from the case reviews is presented in the table below.

<b>Item 19 Visitation Pattern of Caseworker Visits With Child</b>			
<b>Visitation Pattern</b>	<b>Foster Care</b>	<b>In-home Services</b>	<b>Total</b>
More than once a week	1 (3%)	1 (4%)	2 (3%)
Once a week	1 (3%)	0	1 (2%)
Less than once a week, but at least twice a month	8 (20%)	4 (16%)	12 (18%)
Less than twice a month, but at least once a month	17 (43%)	19 (76%)	36 (55%)
Less than once a month	13 (33%)	1 (4%)	14 (22%)
<b>Total</b>	<b>40</b>	<b>25</b>	<b>65</b>

### **Rating Determination**

Item 19 was assigned an overall rating of ANI. In 71 percent of the cases, reviewers determined that caseworker visits with children were of sufficient frequency and/or quality. This percentage is less than the 90 percent or higher required for a rating of Strength. This item was rated as an ANI in the State’s 2001 CFSR.

### **Stakeholder Interview Information**

Many stakeholders commenting on this item during the Onsite Review expressed the opinion that contact between DCS caseworkers and the children in their caseloads is increasing in frequency and quality to meet the needs of the child and achieve the case plan goals. This is the result of a change in policy beginning in April 2007 stipulating that staff visit every 30 days as opposed to every 60 days. Stakeholders noted that caseworkers have face-to-face contact with children at least monthly and in some cases, if needed, weekly contact is made, particularly with children in the in-home services cases. One stakeholder described the content of visits as including

an assessment of the child’s safety, asking what their needs are, talking about their life and, depending on their age, playing games with the child. Stakeholders noted that supervisors and managers review documentation to ensure that the visits are occurring and that issues pertaining to the case plan and case goals (if relevant) are being addressed in the visits. Several stakeholders also indicated that both the frequency and the quality of caseworker contacts with children tend to vary across caseworkers and across counties in the State. The key barriers to more frequent and high-quality caseworker contacts with children were noted to be high caseloads, high staff turnover, and high vacancy rates at DCS. However, stakeholders reported that these issues are being addressed by the agency.

**Statewide Assessment Information**

According to the Statewide Assessment, DCS must be aware of the placement status of a child at all times. The Statewide Assessment reports that until April 15, 2007, visits between the FCM and the child were to be face-to-face, every 30 days for children in in-home placement and were 60 days for children in out-of-home care, at the place where the child resides; after that date, visits are required every 30 days regardless of placement type.

As stated in the Statewide Assessment, the QAR process measured the frequency of visits, assessed the documentation of visits in the contact log or visit log, and measured whether visits were initiated and held within the required timeframes. Results from 2005 QARs found in 65 percent of CHINS cases, face-to-face visits were made every 60 days between the FCM and the child. As part of the Statewide Assessment, they conducted a focus group with youth where they discussed the frequency and quality of the caseworker visits. There was wide variance in how often they saw their caseworkers. This varied all the way from no visits, once a year, to three or four times a year, to once a month. They reported they saw their CASA more frequently than their caseworker. It was reported when the caseworker visited them they usually went away from their placement and ate and sometimes shopped. The youth recommended having their caseworker visit them more often.

**Item 20: Caseworker visits with parents**

Strength       Area Needing Improvement

**Case Review Findings**

Item 20 was applicable for 57 (88 percent) of the 65 cases. Cases were not applicable for this assessment if parental rights had been terminated prior to the period under review and parents were no longer involved in the children’s lives. All cases that were not applicable were foster care cases. Reviewers were to assess whether the caseworker’s face-to-face contact with the children’s mothers

and fathers was of sufficient frequency and quality to promote attainment of case goals and/or ensure the children's safety and well-being.

The results of this assessment are presented in the table below:

<b>Item 20</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	5	5	11	21	<b>37</b>
Area Needing Improvement	21	10	5	36	<b>63</b>
<b>Total Applicable Cases</b>	<b>26</b>	<b>15</b>	<b>16</b>	<b>57</b>	
Not Applicable Cases	5	2	1	8	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

Performance on this item varied across sites. Among the applicable cases, the item was rated as a Strength in 69 percent of Montgomery County cases, compared to 33 percent of Jefferson County cases and 19 percent of Marion County cases. There was little variation based on the type of case. The item was rated as a Strength in 41 percent (13 cases) of the 32 applicable foster care cases, and 32 percent (8 cases) of the 25 in-home services cases.

Item 20 was rated as a Strength when reviewers determined that visits occurred with sufficient frequency to meet the needs of parents and children and that visits focused on issues pertinent to case planning, service delivery, and goal attainment. Item 20 was rated as an ANI when reviewers determined one or more of the following:

- Visits with the mother were not of sufficient frequency or quality (eight cases).
- Visits with the mother were not of sufficient frequency, although when they did occur they were of sufficient quality (one case).
- Visits with the mother were of sufficient frequency, but not quality (three cases).
- Visits with the father were not of sufficient frequency or quality (six cases).
- Visits with the father were of sufficient frequency, but not quality (three cases).
- There were no visits with the father (17 cases).
- There were no visits with the mother (three cases).

**Rating Determination**

Item 20 was assigned an overall rating of ANI. In 37 percent of the applicable cases, reviewers determined that the frequency and/or quality of caseworker visits with parents were sufficient to monitor the safety and well-being of the child or promote attainment of case goals. This percentage is less than the 90 percent or higher required for a rating of Strength. This item also was rated as an ANI in the State's 2001 CFSR.

**Stakeholder Interview Information**

Stakeholders commenting on this item during the Onsite Review reported that caseworkers generally meet requirements for conducting visits with parents in Montgomery County because of the number of parents who have drug problems and are required to come to the office for drug screens. Stakeholders in Montgomery County describe caseworkers making an effort to see parents as often as they see the child, and that they try to increase visits as they get closer to reunification, but that it does not always occur.

**Statewide Assessment Information**

According to the Statewide Assessment, the frequency of face-to-face contacts between the FCM and the legal parent(s) or guardian(s) shall be consistent with the service level established through the completion of risks and needs assessments. Contacts are to be documented in ICWIS in the contact log. Each service level has specific family contact standards, that is, there are a minimum number of face-to-face contacts and collateral contacts the assigned FCM is to have with the family each month. The QAR process monitors frequency and timeliness of contact with parents. However, there is currently no means of assessing the quality of these visits. There also are no tools in ICWIS that track and monitor parental visits. One of the identified practice indicator reports is "Visitations and Contacts Report." This report provides county specific and regional data with regard to the number of children with familial visitations as well as caseworker contact with both child and family occurring during a specific month.

## Well-Being Outcome 2

<b>Outcome WB2: Children receive appropriate services to meet their educational needs</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement</b>					
	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percentage</b>
Substantially Achieved:	14	9	8	31	<b>83.8</b>
Partially Achieved	0	1	0	1	<b>2.7</b>
Not Achieved	1	3	1	5	<b>13.5</b>
<b>Total Applicable Cases</b>	<b>15</b>	<b>13</b>	<b>9</b>	<b>37</b>	
Not Applicable Cases	16	4	8	28	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

### Status of Well-Being Outcome 2

Indiana did not achieve substantial conformity with Well-Being Outcome 2. Reviewers determined that 83.8 percent of the cases reviewed Substantially Achieved this outcome. This is less than the 95 percent or higher required for substantial conformity. There were slight differences in performance on this outcome across sites. Of the applicable cases, the outcome was determined to be Substantially Achieved in 93 percent of the Marion County cases, 89 percent of the Montgomery County cases, and 69 percent of the Jefferson County cases. The outcome was determined to be Substantially Achieved in 26 (90 percent) of the applicable foster care cases and 5 (29 percent) of the applicable in-home services cases.

### Key Concerns of the 2001 CFSR

The State was not in substantial conformity with this outcome in the 2001 CFSR. Key concerns identified during the 2001 CFSR were the following:

- In one locality, DCS follow-up on educational needs and problems was limited due to a high volume of cases and staffing shortages.

- In one locality, there was a lack of documentation addressing educational issues (e.g., no individual education plans, no identification of special education needs, no description of advocacy efforts, no school records, and no indications that developmental assessments of drug exposed children had been conducted).
- In some localities, foster parents had not received copies of educational records.

To address these concerns, the agency implemented the following strategies in its PIP:

- Provide final edit in ICWIS ensuring that educational data fields are complete prior to approval of case plan
- Develop policy to complete initial mental health screening of children who have been taken into custody or adjudicated CHINS and of the parent, guardian, or custodian as well
- Develop policy requiring staff attendance at the educational meetings of children in foster care or adjudicated CHINS

### **Key Findings of the 2007 CFSR**

As indicated in the discussion for item 21 below, the findings of the 2007 CFSR suggest that the concerns found in the 2001 review are different than in the 2007 CFSR. There was a lack of assessment of educational needs in some instances when there was evidence that the child was experiencing school-related problems and educational needs were identified and noted in the case record, but no services were provided to address those needs and educational issues were not included in the case plan.

### **Item 21: Educational needs of the child**

Strength       Area Needing Improvement

### **Case Review Findings**

Item 21 was applicable for 37 (57 percent) of the 65 cases reviewed. Cases were not applicable if any of the following applied: (1) children were not of school age, or (2) children in in-home cases did not have service needs pertaining to education-related issues. In assessing this item, reviewers were to determine whether children’s educational needs were appropriately assessed and whether services were provided to meet those needs. The results of this assessment are provided below.

<b>Item 21</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	14	9	8	31	<b>84</b>
Area Needing Improvement	1	4	1	6	<b>16</b>
<b>Total Applicable Cases</b>	<b>15</b>	<b>13</b>	<b>9</b>	<b>37</b>	
Not applicable	16	4	8	28	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

Item 21 was rated as a Strength when reviewers determined that the child’s educational needs were appropriately assessed and services were provided, if necessary. Item 21 was rated as an ANI when case reviewers determined the following:

- There was a lack of assessment of educational need—in some instances when there was evidence that the child was experiencing school-related problems (three in-home cases and one foster care case).
- Educational needs were identified and noted in the case record, but no services were provided to address those needs, and educational issues were not included in the case plan (two foster care cases).

### **Rating Determination**

Item 21 was assigned an overall rating of ANI. In 84 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to meet the educational needs of children. This percentage is less than the 95 percent required for this item to be rated as a Strength. A 95 percent standard is set for this item because it is the only item assessed for the outcome.

### **Stakeholder Interview Information**

Stakeholders interviewed for this item expressed differing opinions. Some described youth having their needs met and others described youth being moved around frequently, which creates difficulties for them to successfully complete school. Other stakeholders described difficulty in getting records for children when they transfer schools, high dropout rates for teens, and transportation issues as barriers for children to get their educational needs met.

### **Statewide Assessment Information**

According to the Statewide Assessment, DCS is responsible for the educational needs of the child in foster care. The child is to attend only accredited public schools unless the parents approve or request that the child continue or be placed in a private school and are

willing and able to pay for all related costs. Unless parental rights have been terminated, parents have the authority to make educational decisions for their children.

Focus groups were conducted as part of the development of the Statewide Assessment. The group reported that DCS does not have enough information about the educational needs of the children as they come into care and the agency is not always aware that a child is in a special education program. Parents reported DCS did not keep them informed about school programs or special events. Youth interviewed in focus groups reported they did not feel that DCS does a good job of tracking their school development. They felt like they are often forced into the GED track rather than someone helping them make the diploma track work for them.

Foster parents reported in focus groups that the educational system itself causes barriers in that schools tend to dismiss foster parents. For example, if a foster parent suggests a child needs testing, the school system will disregard the foster parent and place a child in a situation that the foster parent knows will not work for the child. Interviews with judges throughout the State consistently reported education as an area in need of improvement.

### Well-Being Outcome 3

<b>Outcome WB3: Children receive adequate services to meet their physical and mental health needs</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Substantially Achieved	21	9	13	43	<b>75.5</b>
Partially Achieved	4	3	1	8	<b>14.0</b>
Not Achieved or Addressed	2	4	0	6	<b>10.5</b>
<b>Total Applicable Cases</b>	<b>27</b>	<b>16</b>	<b>14</b>	<b>57</b>	
Not Applicable	4	1	3	8	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

### **Status of Well-Being Outcome 3**

Indiana did not achieve substantial conformity with Well-Being Outcome 3. The outcome was determined to be substantially achieved in 75.5 percent of the applicable cases, which is less than the 95 percent required for substantial conformity. Performance on Well-Being Outcome 3 varied across sites. Among the applicable cases, the outcome was determined to be substantially achieved in 78 percent of Marion County cases and 93 percent of Montgomery County cases, compared to 56 percent of Jefferson County cases. However, performance did not vary substantively based on the type of case reviewed. The outcome was determined to be substantially achieved in 75 percent (30 cases) of the 40 applicable foster care cases and 76 percent (13 cases) of the 17 applicable in-home services cases.

### **Key Concerns From the 2001 CFSR**

Indiana did not achieve substantial conformity with Well-Being Outcome 3 in its 2001 CFSR and was required to address the outcome in its PIP. In the 2001 CFSR, item 22, pertaining to the physical health of the child, and item 23, pertaining to the mental health of the child, were both rated as an ANI. The key concerns identified in the 2001 CFSR were the following:

- Immunizations were not documented in some case records.
- There was evidence that medical examinations were not always done in a timely manner.
- There was no standardized procedure for when the FCM provides medical records to the foster parents. A foster family not getting the medical records of a seriously-ill child caused them problems.
- In some cases, neither health problems nor medical services were addressed in the case record.
- In some cases, in one locality the assessments did not identify serious health needs such as prenatal/in-the-womb drug exposure and developmental delays.
- Some health care providers who do not accept Hoosier Health Care present barriers to children in foster care getting necessary medical care.
- In some localities, children did not receive timely treatment for their mental health needs due to delays in assessment and service delivery.
- Neither service referral agreements nor subsequent case plans followed up on the behavioral, emotional, and substance abuse needs that were identified in the assessment.

To address these concerns, the agency implemented the following strategies in its PIP:

- Develop policy to complete a physical health examination of children who have been taken into custody or adjudicated CHINS, including a dental health examination consistent with COA standards
- Develop policy to complete initial mental health screening of children who have been taken into custody or adjudicated CHINS and of the parent, guardian, or custodian as well
- Provide training to staff and foster parents on medical passports and documenting medical information

**Key Findings of the 2007 CFSR**

As with the findings during the 2001 CFSR, item 22 (physical health of child) and 23 (mental health of the child) were rated as an ANI in the 2007 CFSR.

Concerns pertaining to the agency’s effectiveness in assessing and meeting children’s mental health needs that were noted in the 2001 CFSR also emerged as concerns in the 2007 CFSR, particularly with regard to the lack of mental health services in the community.

Findings pertaining to the specific items assessed under Well-Being Outcome 3 are presented and discussed below.

**Item 22: Physical health of the child**

Strength       Area Needing Improvement

**Case Review Findings**

Item 22 was applicable for 49 (75 percent) of the 65 cases reviewed. Cases that were not applicable were in-home services cases in which physical health concerns were not an issue. In assessing item 22, reviewers were to determine whether (1) children's physical health needs (including dental needs) had been appropriately assessed, and (2) the services designed to meet those needs had been, or were being, provided. The findings of this assessment are presented in the table below:

<b>Item 22</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	21	11	10	42	<b>86</b>
Area Needing Improvement	4	2	1	7	<b>14</b>
<b>Total Applicable Cases</b>	<b>25</b>	<b>13</b>	<b>11</b>	<b>49</b>	
Not Applicable Cases	6	4	6	16	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

Performance on Physical Health item did not vary substantively across sites. However, there was variation in performance based on the type of case. The item was rated as a Strength in 85 percent (34 cases) of the 40 applicable foster care cases and in 89 percent (8 cases) of the 9 applicable in-home services cases.

Item 22 was rated as a Strength when reviewers determined that children's health needs (medical and dental) were routinely assessed and services provided as needed. Item 22 was rated as an ANI when reviewers determined one or more of the following:

- There was no indication in the case record of any medical assessments or services even when a case came to the agency because of medical-related concerns (two cases).
- Dental care services were not provided until a year after the need for the service was determined (two cases).
- There were no assessments of physical or dental health noted in the case file (four cases).

Six of the cases rated as an ANI for item 22 were foster care cases, and one was an in-home services case.

### **Rating Determination**

Item 22 was assigned an overall rating of an ANI. In 86 percent of the applicable cases, reviewers determined that the agency was adequately addressing the health needs of children in foster care and in-home services cases. This percentage is less than the 90 percent or higher required for a rating of Strength. Item 22 was rated as an ANI in the State's 2001 CFSR.

### **Stakeholder Interview Information**

Stakeholders commenting on item 22 for the Onsite Review expressed different opinions. Many stakeholders said that the agency is effective in meeting children's medical needs. However, other stakeholders said that some children get routine medical and dental care, but other children do not. Several stakeholders noted that dental services are not accessible in all areas of the State because only

a few dentists will accept Medicaid, and they would like to see the agency aggressively pursuing more dentists to take this type of medical card. Several foster parents noted that dental care cannot begin until the child is 12 months old and that is not early enough for some children in their care who have dental needs younger than 12 months.

The Jumpstart is a program described by several stakeholders in Marion County as providing good upfront developmental and medical screening for children under the age three. Medical Passports are used to keep track of medical history, and stakeholders report that some foster parents do a better job than others in keeping the Passport document safe and up to date. Stakeholders report Medicaid pays for taxi cab service for children to and from medical appointments, which helps to ensure their needs are met.

### **Statewide Assessment Information**

According to the Statewide Assessment, the policy of DCS is to make arrangements for a medical examination of the child prior to placement or immediately following an emergency placement. Children are required to have basic medical information contained in the Medical Passport completed by the child's physician when they come into care. If a child does not have a physician, the FCM should arrange for the child to have a complete physical, with documentation then entered into the Medical Passport that will serve as an ongoing record of the child's medical history and treatment. The Medical Passport program does not apply to children receiving in-home services, and there is no formal means of addressing and documenting the medical needs or treatment of children receiving in-home services.

The Statewide Assessment reports that foster parents and FCMs receive training about requirements for maintaining a record of medical history and treatment for each child in placement. FCMs initiate and periodically review the records contained in the Medical Passport. Input from foster parents showed that they do not know the process of assessing needs of children and families and they felt that DCS was not always aware of the children's health needs. Parents commented DCS does a good job of seeing to the medical needs of children. They said that children have a physical exam within a week of being removed. Youth felt that health care was adequate for some and not for others. Some youth indicated they had a hard time finding a doctor or a dentist.

The Statewide Assessment indicates that DCS does not do a good job of keeping children with their same medical providers and therapists. Changing medical providers and therapists can cause problems for children with getting their medications. QA results revealed that only 74 percent of the children in the care and control in the State of Indiana have their well-being assessed through medical exams, dental checkups, visual exams, medical history, and developmental assessments.

**Item 23: Mental health of the child**

Strength       Area Needing Improvement

**Case Review Findings**

Item 23 was applicable for 38 (58 percent) of the 65 cases reviewed. Cases were not applicable if the child was too young for an assessment of mental health needs or if there were no mental health concerns. In assessing this item, reviewers were to determine whether (1) mental health needs had been appropriately assessed, and (2) appropriate services to address those needs had been offered or provided. The findings of this assessment are presented in the table below:

<b>Item 23</b>	<b>Marion County</b>	<b>Jefferson County</b>	<b>Montgomery County</b>	<b>Total Number</b>	<b>Percent</b>
Strength	13	7	10	30	<b>79</b>
Area Needing Improvement	2	6	0	8	<b>21</b>
<b>Total Applicable Cases</b>	<b>15</b>	<b>13</b>	<b>10</b>	<b>38</b>	
Not Applicable Cases	16	4	6	27	
<b>Total Cases</b>	<b>31</b>	<b>17</b>	<b>17</b>	<b>65</b>	

There was variation in performance on item 23 across sites. The item was rated as a Strength in 87 percent of applicable Marion County cases and 100 percent of applicable Montgomery County cases, compared to 54 percent of applicable Jefferson County cases. There also was variation in performance based on the type of case. The item was rated as a Strength in 83 percent (24 cases) of the 29 applicable foster care cases and 67 percent (6 cases) of the 9 applicable in-home services cases.

Item 23 was rated as a Strength when reviewers determined that children’s mental health needs were appropriately assessed and the identified mental health needs were addressed.

Item 23 was rated as an ANI when reviewers determined the following:

- Mental health needs were not assessed nor addressed (three cases)
- Mental health needs were assessed but not met (one case)
- Mental health needs were being addressed through psychotropic drugs without a proper diagnosis (one case)

- Services were provided but they were not appropriate to the child's needs (one case)
- Mental health needs were not assessed, but services were provided (three cases)

### **Ratings Determination**

Item 23 was assigned an overall rating of ANI. In 79 percent of the applicable cases, reviewers determined that the agency had made concerted efforts to address the mental health needs of children. This percentage is less than the 90 percent or higher required for a rating of Strength. Item 23 was rated as an ANI in Indiana's 2001 CFSR.

### **Stakeholder Interview Information**

Although stakeholders commenting on item 23 expressed some different opinions regarding the agency's effectiveness in meeting the mental health needs of children, there were some common themes that emerged. One common theme was that the agency is good at ensuring screens are done, but that it is difficult to get the ongoing services that are needed. Several stakeholders describe high staff turnover in mental health agencies, which has created questions of staff's competency to serve children. It also was reported that Medicaid does not adequately cover mental health services. In Montgomery County it was noted that two mental health centers cannot adequately provide services to children, and that red tape slows the process down.

### **Statewide Assessment Information**

According to the Statewide Assessment, Indiana policy requires the FCM to determine the level of functionality of the family and the specific areas in which services are needed. All children receiving ongoing services will have completed a mental health screening tool within 7-10 days of removal or the filing of the CHINS. The initial assessment is for the purpose of addressing the developmental, social, emotional, and psychological needs of each individual. If there are behavioral indicators that reveal the need for a mental health assessment, then one is scheduled and provided. FCMs and supervisors receive ticklers for follow-up screenings and when screenings are overdue. The screening and assessment policy applies only to children who enter placement. However, mental health services are provided on an as-needed basis to all children, regardless of in-home or placement status.

The Statewide Assessment states that foster parents felt DCS did not do a good job of keeping children with their same medical providers and therapists. They also felt that there was a difference in receipt of mental health services because when the caseworker knew how to recognize problems, the child would get needed intervention. Youth responded they had access to counseling services they needed, usually on a weekly basis. Some youth reported in focus groups that overmedication is an issue and that they are diagnosed as depressed and then medicated. They felt that DCS should expect the youth would be depressed due to their living situation and the fact they have been removed from the only home they have known.

**SECTION B: SYSTEMIC FACTORS**

This section of the CFSR Final Report provides information regarding the State’s substantial conformity with the seven systemic factors examined during the CFSR. Information on the items included in each systemic factor comes from the Statewide Assessment and from interviews with stakeholders conducted during the Onsite Review. A score for substantial conformity is established for each systemic factor. A score of either 1 or 2 represents that a State is not in substantial conformity with the systemic factor. A rating of 1 means that none of the CFSP requirements are in place, and a 2 indicates that some or all of the CFSP requirements are in place, but more than one of the requirements fails to function. Scores of 3 and 4 represent substantial conformity; a rating of 3 means that all of the CFSP requirements are in place, and no more than one fails to function, and a 4 indicates all of the CFSP requirements are in place and functioning. In addition, information is provided regarding the State’s performance on each systemic factor for the State’s first CFSR. If the systemic factor was part of the State’s PIP, the key concerns addressed in the PIP and the strategies for assessing those concerns would be noted, as well as any changes in ratings that occurred as a result of the State’s second CFSR.

**I. STATEWIDE INFORMATION SYSTEM**

<b>Rating of Review Team Regarding Substantial Conformity</b>				
Rating	<b>Not in Substantial Conformity</b>		<b>Substantial Conformity</b>	
	1	2	3	4
				<b>X</b>

**Status of the Statewide Information System**

Indiana is in substantial conformity with the systemic factor of Statewide Information System. The State was found to be in substantial conformity with this item during its first CFSR. Findings for the item assessed for this factor are presented below.

**Item 24: State is operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care**

  X   Strength                           Area Needing Improvement

Item 24 is rated as a Strength because the State is operating a statewide information system. According to the Statewide Assessment and stakeholder interviews conducted during the Onsite Review, the ICWIS system can identify the legal status, demographic characteristics, location, and goals for the placement of every child who is in foster care or was in foster care within the preceding 12 months. Indiana received a rating of Strength on this factor during its first CFSR. Therefore, the State was not required to address this factor in its PIP.

#### **Statewide Assessment Information**

According to the Statewide Assessment, Indiana’s current State Plan is to continue to develop its existing SACWIS, which was created in response to the lack of an integrated approach to automation support for child welfare services.

Some of the positive changes noted in the Statewide Assessment include:

- Redesign of the case planning process in ICWIS
- Development of QA reports to expand the capacity of county reviews of child welfare cases via ICWIS
- Enhancements to the functionality supporting child fatality reports, fatality reviews, and monitoring
- Management reports to compare county/caseworker statistics, expand monitoring of foster care reentry, multiple placement and removal episodes, elapsed time to permanency, placement change reasons, repeat maltreatment by assessment category, and repeat maltreatment by type of abuse
- Capability to store digital images online within the ICWIS application

The Statewide Assessment described that over the past year, DCS has completed a comprehensive and disciplined reassessment of ICWIS, as approved by ACF in October 2005. The reassessment effort was geared towards identifying the critical issues that have prevented ICWIS from becoming fully SACWIS conformant. In addition, through the ICWIS reassessment effort it became evident that the system was not easy to use nor aligned with how the work is done in the field and that staff were using the system as “an after the fact” tool for data entry and not as an ongoing decision support tool. This has led to staff often not entering data into the system in

a timely and accurate manner. Outstanding SACWIS requirements fall under the categories of Eligibility, Interfaces, Financial Management (Accounts Payable and Receivable, Reconciliation), and AFCARS.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the Onsite Review expressed opinions regarding ICWIS that are consistent with the information reported in the Statewide Assessment. The following are the key strengths of the system identified by stakeholders:

- ICWIS is responsive in that it provides important information about children, including their legal status, location, demographic information, and case goals.
- For the most part, data are entered in a timely manner and are accurate. Overall several respondents stated that the quality of data has improved and was described as an “extremely robust” system.
- They are currently going through an ICWIS redesign to enhance the system and they are involving staff from the field in the redesign process. Efforts are being made to develop a more user-friendly automation system with implementation expected in October 2007 and estimated completion in June 2008.
- Data reports are shared with all levels of staff throughout the agency.
- The court’s QUEST information system is able to track and monitor timelines for hearings and progress of children in the court system.
- ICWIS has automated reminders/tickers to alert agency staff to upcoming important events, such as review of case plans and goals, permanency hearings, or the point at which the child has been in foster care for 15 of 22 months.
- ICWIS summarizes the Federal CFSR indicators using the “Digital Dashboard,” which is used for QA reviews by frontline staff.
- FCMs and managers have tablet PCs equipped with mobile ICWIS. Mobile ICWIS appears to be more suited to investigations, particularly those requiring after hours responses, rather than ongoing cases as mobile ICWIS does not include the capacity for case plan development.

Despite these strengths, a few stakeholders suggested that ICWIS could be improved by being more user friendly, and there continue to be questions regarding the quality of the data. Some suggested that the training on the system was not adequate to meet the needs of new staff. Additionally, mobile ICWIS requires Internet access which may not be available to staff who are out of the office. Stakeholders report that the transfer of information from mobile ICWIS to ICWIS may not occur smoothly. There also were indications that reports were not updated frequently enough to be useful. Stakeholders commented that the State is working on completing the remaining 12 areas that are not in compliance with SACWIS. An additional concern noted by stakeholders is that access is limited to county-specific children. Once a county determines that the child has had an abuse/neglect report or case in

another county, they must determine the case specifics from the county via email. This limited access was statutorily based until recently (within the last 2 years), and counties have not had a great deal of success in accessing information from other counties through the automated system.

## II. CASE REVIEW SYSTEM

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		Substantial Conformity	
	1	2	3	4
		X		

### Status of the Case Review System

Indiana is not in substantial conformity with the systemic factor of Case Review System. Indiana was rated as being an ANI with this factor during its first CFSR. Therefore, it was required that it address this factor in its PIP.

Specific findings for each item included in this systemic factor and the reasons for item ratings are presented below.

#### **Item 25: Provides a process that ensures that each child has a written case plan to be developed jointly with the child’s parent(s) that includes the required provisions**

\_\_\_\_\_ Strength        X   Area Needing Improvement

Item 25 is rated as an ANI because, although Indiana has been able to provide a process that ensures each child has a written case plan that is developed in a timely manner, there is concern that parents are not consistently involved in the planning process. This item was rated as an ANI in the State’s 2001 CFSR.

## **Key Concerns From the 2001 CFSR**

The following were identified as key concerns during the State's first CFSR:

- Infrequent FCM visits with the family hindered achievement of the permanency goal.
- Some case plans did not identify services and outcomes.
- The lack of transportation and child care are barriers to all parties participating in case conferencing.
- Sometimes foster parents were not included in case conferences, did not receive a copy of the case plan, and often were asked to sign the case plan the day of the hearing with no time for review.

In its PIP, Indiana identified the following strategies to improve parental involvement in the development of the child's case plan:

- Provide training for staff to give staff the skills to engage families and utilize assessment more effectively in determining appropriate objectives and services for the child.
- Develop a policy to mandate contact standards per assessed risk and needs of the child and family.
- Enhance current policy on case planning to require case plans be developed at formal case conferences with all the parties participating and focusing on child-specific issues.

## **Statewide Assessment Information**

According to the Indiana Statewide Assessment, DCS is able to meet the goal that every child in foster care has a written case plan. There are a number of checks and balances to assure compliance with the case plan both through internal supervisory or case staffing review and externally through QA and court reviews. The SACWIS-related system, ICWIS, ensures that written case plans are created and made a part of the file or case record. ICWIS notifies FCMs when the plans are due and the form that the FCMs are to complete covers the required criteria and provisions. The State's QA results show that in 84 percent of the cases reviewed the current case plan addresses appropriate services for assessed risks and needs of child, family, and foster parents.

Whether FCMs are actually engaging families and children in this process is not clear according to the Statewide Assessment. Focus group results from parents, youth, and foster parents indicated that they were not regularly involved in developing the case plan. Parents reported varying degrees of opportunity for input into case planning. They reported the case plan was usually presented to them in its final format. According to interviews conducted for the Statewide Assessment, DCS staff reported this was an area in

which DCS performed somewhat effectively, while service providers reported DCS performed somewhat ineffectively in involving family in the case planning process.

The Statewide Assessment included data on parental involvement in case plan development. It showed that during FY 2005 there were 27,029 case plan conferences held statewide, and approximately 45 percent of the conferences showed entries in both the parents notified and attended columns. This is the only quantifiable area in ICWIS that can show parental involvement in case plan development.

The Statewide Assessment reports that DCS has policies requiring case plans to be developed at formal case conferences; however, the policy does not give specifics or examples of what meaningful involvement is in case planning. As a result, caseworkers' practice throughout the State differs in terms of degrees of engagement. DCS also has enhanced trainings on skills to engage families and utilize assessments more effectively in determining appropriate objectives and services for the child.

### **Stakeholder Interview Information**

There was general agreement among stakeholders commenting on this item during the Onsite Review that DCS prepares case plans for all children in foster care and for the in-home services cases, and that these case plans are developed in a timely manner. However, there was variation in stakeholder opinions regarding the involvement of parents and youth in the case planning process. Many stakeholders expressed the opinion that in instances where staff have been trained and are using the Child and Family Team Meeting approach, involvement works well and encourages active participation of parents and children. These meetings are described by stakeholders as being arranged to meet families' schedules, they encourage parents to be more involved in the process, and they explore the parent's needs in more depth than they had previously. The case planning process also was described as creative and collaborative by stakeholders.

For cases where the staff have not been trained in facilitating Child and Family Team Meetings, stakeholders describe a process that is not inclusive of parents or children. In particular, fathers have not been involved in the case planning process. This is part of the practice reform efforts being made across Indiana, which are occurring county by county. Several stakeholders from the State reported that approximately half of the staff in Indiana had been trained. As the Child and Family Team Meeting training continues for staff across the State, stakeholders universally agreed that it will promote positive change in terms of including parents and children in the case planning process.

The findings of the Onsite Review with regard to child and family involvement in case planning (item 18) are consistent with information in the Statewide Assessment and stakeholder opinions. This item was rated as an ANI in 49 percent of the cases. The

rating was due to the lack of involvement of fathers (22 of 42 cases), mothers (17 of 41 cases), and age-appropriate children (11 of 27 cases).

**Item 26: Provides a process for the periodic review of the status of each child no less frequently than once every 6 months, either by a court or by administrative review**

  X   Strength                             Area Needing Improvement

Item 26 is rated as a Strength because Indiana provides a process for periodic reviews and the reviews seem to be occurring in a timely manner. Indiana received a rating of Strength on this factor during its first CFSR. Therefore, it was not required that it address this factor in its PIP.

**Statewide Assessment Information**

According to the Indiana Statewide Assessment, “Periodic Case Review” regulations set forth the timeframes in which reports must be made by DCS and hearings held by the juvenile court in a formal court proceeding. The statute sets forth the mandatory timeframes but allows the court to order that reviews be held at more frequent intervals. However, due to special circumstances such as court congestion, there may be cases where formal court hearings are not held in a timely manner. State QA results show this area as a Strength in that the Periodic Case Review is current in 94 percent of the cases reviewed.

As indicated in the Statewide Assessment, the ICWIS system includes a tickler system to track the time between date of removal or dispositional decree, the date of the review hearing, and time between review hearings and when case plans are due. It also maintains the schedule of case conferences. In terms of QA, there are supervisor reports in ICWIS that track when case plans are due and overdue.

**Stakeholder Interview Information**

There was consensus among stakeholders interviewed during the Onsite Review that cases are being reviewed at minimum every 6 months, and ASFA timelines are met. In some instances, it was reported that reviews are held more frequently if necessary, based on the needs of the case.

The following were listed as key strengths described by stakeholders:

- The QUEST system holds critical data for the courts; however, not all counties are participating in this system.

- Ticklers help ensure reviews are held in a timely manner.
- The relationship with the courts is described as good, which helps support timeliness.
- Under the Court Improvement Program grant, data that track the frequency of hearings are collected.

**Item 27: Provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter**

       Strength                        X   Area Needing Improvement

Item 27 is rated as an ANI because, although Indiana has a process that ensures each child has a permanency hearing at timely intervals, there are concerns about the consistency and effectiveness of the hearings across sites in promoting permanency for children in foster care. Specifically, concerns were noted about the lack of clarity between permanency hearings and regular reviews, the short timeframes allotted to permanency hearings, and the inconsistency in effectiveness of the hearings across review sites. Stakeholders report that some cases linger on for years because caseworkers are apprehensive about making recommendations when they feel the judge may not be in agreement. Hearings also are reset if the court does not agree with the caseworker recommendations. It was noted in Montgomery County that defense attorneys often cause delays as they do not understand the need to get the hearings done within the deadlines. Stakeholder interviews also reported that judges do not feel urgency for more timely hearings because they want to give the parent as much time as possible. Item 27 was rated as Strength in the State’s 2001 CFSR and therefore the State was not required to address this item in its PIP.

**Statewide Assessment Information**

According to the Indiana Statewide Assessment, Indiana code requires a permanency hearing not more than 30 days after a court finds that reasonable efforts are not necessary. Indiana’s code is more expansive than the Federal requirement in that it applies to all children under DCS care, whether in foster care placement or in-home with a parent. Indiana attempts to achieve permanency for every child who is in out-of-home care and under the custody of the State and to ensure that those cases are reviewed every 3 months with a permanency hearing being mandated at 12 months after the disposition. The “Review of Dispositional Decrees and Formal Review Hearings” sets forth timeframes in which reports must be made by DCS and hearings held by juvenile courts. The statute gives latitude to the juvenile court inasmuch as it sets forth the mandatory timeframes but also includes numerous provisions allowing the court to order more frequent permanency hearings or reviews.

The Statewide Assessment reports that with regard to permanency hearings, changes have been made with the 12-week new caseworker training program that include transfer of learning days and an assigned mentor upon graduation, along with practice reform, which encourages cases to be reviewed more closely prior to permanency hearing. One barrier in this area is due to delays created by related litigation such as divorce, criminal, or custody cases. This can cause DCS to be out of compliance with timeframes for reviews.

### **Stakeholder Interview Information**

The opinions of stakeholders interviewed during the Onsite Review differed with regard to the timeliness of the permanency hearings. Many stakeholders said that permanency hearings occur in a timely manner and that they are effective in moving a case forward. The Juvenile Justice Improvement Committee is currently working to educate courts about the permanency hearings; this is thought to be making a difference in the timeliness of permanency hearings. Other stakeholders noted that there are court delays due primarily to variability of judges, court schedules, and judges changing the permanency plan during the hearing in order to give the parent more time to make necessary changes, which can delay permanency. Stakeholders reported that the content of the permanency hearings did not differ from that of the 6-month periodic review; in both type of hearings the permanency goal and progress is reviewed. Several stakeholders from Marion County reported that there is inconsistency in the type of hearing that is being held and that permanency hearings can be as brief as 3 minutes.

### **Item 28: Provides a process for TPR proceedings in accordance with the provisions of ASFA**

\_\_\_\_\_ Strength        X   Area Needing Improvement

Item 28 is rated an ANI because, while related State policies, statutes, and efforts are in place to support efficiency and address areas of delay in the TPR process, there are substantial barriers negatively impacting the process. Stakeholder interviews at the Onsite Review related confusion when the agency is filing for TPR even though a compelling reason not to file exists, and simultaneously filing a petition to dismiss a mandatory TPR petition. Item 28 was rated as a Strength in the State’s 2001 CFSR, and therefore the State was not required to address this item in its PIP.

### **Statewide Assessment Information**

According to the Indiana Statewide Assessment, before a child can be adopted, legal steps must be taken to sever the existing relationship between the child and any living parent. This can be done either through obtaining the voluntary consent of the parent or by petitioning for a court proceeding to terminate parental rights involuntarily. A petition for TPR can be filed when the child has been

removed from the parent for 6 months under a dispositional order, or earlier if there has been a ruling that reasonable efforts toward reunification are not required or if the child has been under DCS supervision for at least 15 of the past 22 months.

The Statewide Assessment reports that practice varies concerning the court process for TPR. Some local judges may not hear termination cases without an identified adoptive family. Some will not terminate if parents have signed consents. TPRs are a low priority compared to some of the other cases that judges hear, and they are very time consuming.

### **Stakeholder Interview Information**

The consensus of most stakeholders interviewed during the Onsite Review is that the agency is filing for TPR in a timely manner, although a few stakeholders acknowledged that some filings were delayed prior to January 2007 due to continuances on TPR appeals. After January 2007, the State is no longer granting continuances on TPR appeals. State law requires a TPR petition be filed after 15 of the most recent 22 months in foster care. ICWIS has a tickler system that notifies caseworkers when they need to file for TPR. As such, it is an automatic process to technically meet the requirement rather than being driven by case dynamics. To illustrate, for example, one stakeholder reported that the agency will file for TPR even when it believes it is not in the child's best interest, but in order to meet the required timeframes. If compelling reasons exist, the State may simultaneously file a petition to dismiss a mandatory TPR petition. This practice of simultaneously filing petitions causes confusion for parties to the case, especially in instances where the family is successfully working toward reunification. Stakeholders described compelling reasons for not filing TPR include finding a relative placement with guardianship pending, parents who are working on recovery from drugs/alcohol, locating a father who may be a viable placement, the age of the child, and the child wanting to be independent at age 18.

### **Item 29: Provides a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child**

Strength                       Area Needing Improvement

This item was rated as a Strength because there is a process for caregivers to be notified of hearings and, although the process varies from county to county, stakeholders in the Onsite Review indicated that caregivers have an opportunity to be heard. The item was rated as a Strength in Indiana's 2001 CFSR.

### **Statewide Assessment Information**

According to the Indiana Statewide Assessment, there is a requirement that DCS send notice of the periodic case review at least 10 days before the periodic review to each of the following: (1) the child's parent, guardian, or custodian; (2) an attorney who has entered an appearance on behalf of the child's parent, guardian, or custodian; (3) a prospective adoptive parent; and/or (4) any other person who is currently providing care for the child. The foster parent must be notified at least 5 business days before the review. The court is required to provide any of the above named individuals an opportunity to be heard and to make recommendations in the periodic review hearing and permanency hearing.

As indicated in the Statewide Assessment, if the individual was in court when the date was set, that has been used as notice for most parents, guardians, or foster parents of upcoming hearings. Indiana's 2005 QA results indicate that in 69 percent of CHINS cases a notice had been sent to the foster parents, prospective adoptive parents, or other persons caring for the child. Focus groups were held throughout the State with foster parents to discuss notification and opportunity to be heard. The foster parents were generally aware of the next court hearings for a child, although the method of notification varied from county to county. The Statewide Assessment indicates there is tremendous difference regarding foster parents' level of involvement in court proceedings. Many of the foster parents in the focus group talked about knowing the children they care for best but not being given the opportunity to be heard in a hearing. They commented that it is often up to the judge if they are allowed to voice their concerns.

### **Stakeholder Interview Information**

Indiana law requires that notice be given to foster parents, pre-adoptive parents, and relative caregivers of children in foster care of court reviews and case hearings. Stakeholders describe court hearings being set before they leave the court and some report receiving notice via registered mail and being contacted directly by the caseworker. They describe that often advance notice ranges from 2 weeks to as much as 1 month prior to the hearing. Copies of notices on hearings and reviews are kept in the child's file, and this was substantiated during the Onsite Review. However, there were some stakeholders in Marion County who did not concur and reported that notification was not consistently given, and they felt there is not a consistently applied formal process in place for notification of case reviews or court hearings.

With regard to an opportunity to be heard in case reviews or court hearings, stakeholders in Jefferson and Marion Counties describe a process whereby the agency attorney meets with foster parents, pre-adoptive parents, and relative caregivers of children in foster care in advance to inquire if anyone wishes to speak at the hearing. The stakeholders indicated that the system that is currently in place allows for all parties to be heard. In addition, they describe a form that has been developed for the purpose of encouraging foster parents, pre-adoptive parents, and relative caregivers of children in foster care to give input to the judge, especially in instances when

they cannot attend the hearings. However, some stakeholders expressed that if time is limited the judge may not encourage participation. In Montgomery County, stakeholders referenced a questionnaire that foster parents/relative caregivers complete that is sent to the judge. It inquires about education, counseling, behavioral issues, special needs, frequency of contact with caseworker, and CASA contacts. Stakeholders report that when foster parents submit reports to judges, these judges use them in court.

### III. QUALITY ASSURANCE SYSTEM

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		Substantial Conformity	
	1	2	3	4
		X		

#### Status of Quality Assurance System

Indiana is not in substantial conformity with the systemic factor of Quality Assurance System. The State is currently in the process of redesigning its QA process and implementing an outcome-based evaluation procedure. At the time of the CFSR, only two of the State’s regions had been reviewed under Indiana’s revised process. During the first round of the CFSR, Indiana was found to be in substantial conformity with this systemic factor and therefore was not required to address the factor in its PIP. Findings with regard to the specific items assessed for this factor are presented below.

#### Item 30: The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children

  X   Strength                      \_\_\_\_\_ Area Needing Improvement

Item 30 is rated as Strength because the State has developed and implemented standards that ensure quality services are provided to protect the safety and health of children. This item was rated as a Strength in the State’s 2001 CFSR.

### **Statewide Assessment Information**

According to the Indiana Statewide Assessment, the Child Welfare QAR tool is designed to assess the services offered by the FCM to the family in order to identify quality of care and outcomes of the service. Through a peer review process within the QAR, the agency measures the quality of services provided to children in foster care in three specific areas: (1) Services are provided to the child and parent/guardian/custodian to improve conditions in the parent, guardian, or caregiver home from which the child was removed and facilitate return of the child to his/her own home, to a permanent placement, or to remedy conditions causing local office involvement. (2) Services provided to youth in IL are based on assessment (either by assessment tools and/or assessment by mental health provider). The youth involved with IL services are receiving specific IL services identified by the child's individual needs through a qualified provider that has been contracted by the county. (3) The current case plan addresses appropriate services for assessed risks and needs of the child, family, and foster parents.

Service standards were developed for each major child welfare service funded with title IV-B, parts I & II, Social Service Block Grant, Chafee Independence, and the Family & Children Fund. All service providers offering a standardized service, regardless of the program service name or position, use the service standards for that service. Service standards included a summary of the components for all services within the title, the target population, goals, and objectives for the services, as well as required qualifications for the service provider.

Service Standards had been developed for the following services:

- Regional Child Welfare Services Coordinator
- Diagnostic/Evaluation/Assessment Services
- Individual/Family Counseling
- Home-Based Therapy
- Intensive Home-Based Casework Services
- Parent/Child/Sibling Visit Facilitation
- Homemaker/Parent Aid
- Transportation
- Pre-/Post-placement and Post-adoption Services
- Family Preparation for Adoption
- Child Preparation for Adoption
- Foster/Adoptive/Kinship Caregiver Training

- Foster Family Support Services
- Custody Studies, Step-Parent Adoption Studies & Foster Home Studies/Updates/Relicensing Studies
- CFCIP-Voluntary Services Caseworker
- CFCIP Foster Care Independence Program
- CFCIP Room and Board
- CFCIP Youth Advisory Board

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the Onsite Review noted that service standards are in place that apply to the quality of services that are provided to children in foster care. They report many standards have been updated and described them as “clear.” In particular, stakeholders cited improvement in safety standards. As part of the standards that ensure quality of services, stakeholders described the Child Welfare QAR Instrument and the QSR systems as crucial and used by supervisors to monitor performance and to strengthen the operation and improve services to families. Standards focus on prevention, protection, or other short- or long-term interventions to meet the needs of the family and the best interests and need of the individuals. In addition, stakeholders reported that the information from the QAR and QSR is helping to identify training needs for staff. The agency has standards in place for foster homes that focus specifically on safety and health.

Examples of standards in place that ensure quality services are:

- Discipline standards
- Safety
- Food
- Medical
- Background checks
- Home studies
- Fingerprint checks on foster parent applicants and all members of households
- Pet checks

Some stakeholders indicated concerns during interviews that faith-based providers are exempt from licensing regulations and certification standards. Another concern shared during interviews is that responsibility for licensure is moving from contractors back to the agency; however, new agency staff are not familiar with licensing standards, which could pose safety issues for children in

foster care. One stakeholder noted that there may be problems in that each county may implement policies differently. Several stakeholders reported that rules and standards are so stringent that they prevent children from having “normal” lives. For example, having overnight visits with friends, getting a driver’s license, and having a babysitter are made difficult by the regulations. There also were concerns noted that there may not be adequate standards regarding group homes in terms of staff qualifications, staff training, and general oversight.

**Item 31: The State is operating an identifiable Quality Assurance System that is in place in the jurisdictions where the services included in the CFSP are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented**

Strength                       Area Needing Improvement

Item 31 is rated as an ANI because although Indiana has a QAR process in place, it is not outcome-based and the QSR has not been conducted in all regions of the State. Additionally, the QAR process was not conducted in two of the three CFSP sites, including the largest metropolitan area, in at least 2 years. The State has adopted the QSR as its outcome-based QA process. QAR is a case compliance review, while the QSR looks at outcomes, interviews stakeholders, and is an ongoing effort to test practice reform. This item was rated as a Strength in the State’s 2001 CFSP.

**Statewide Assessment Information**

According to the Indiana Statewide Assessment, DCS began a comprehensive redesign of its QAR process in October 2005. DCS established a State QSR team to make suggestions for a new process of assessing services to children and families. The QAR is a tool designed to assess the level of compliance with (1) Federal and State statutes, regulations, and policies; (2) adherence to best social work practice, including safety, permanency, child and family well-being; and (3) evaluating systemic factors in the local agency and statewide, such as Case Review System, Service Array, and Agency Responsiveness to the Community. Both QAR and QSR results will be used to mentor caseworkers, provide additional training, identify gaps in services, and identify performance standards to drive policy and practice guidance.

The Statewide Assessment notes the current barriers to success are directly related to staffing ratios. The QSR process is dependent on reviewers that have not only an extensive knowledge of the practice model, but also a thorough grasp of DCS policies and their implementation. Staffing ratios are not at State-mandated levels, and the drain on staff time for training and reviews is extensive in lieu of practice reform efforts and workloads.

### Stakeholder Interview Information

The majority of stakeholders interviewed during the Onsite Review identified QSRs and QARs as the State’s two QA systems. However, stakeholders in Jefferson County could not describe the QA process, its purpose, or how results are used. These systems are described by stakeholders as new, yet comprehensive and effective. They report the results of these processes are integrated into the State’s strategic plan, and external stakeholders describe being part of the planning process and being included in evaluating the results of the data. In terms of qualitative review of cases, they are selected by region and are representative of all stages of service delivery. The review was described by some stakeholders as being strength-based and comprehensive in looking at clinical and system issues. The QSR Instrument assesses the services offered by the FCM to the family in order to identify quality of care and outcomes of the service. As part of the QSR qualitative process, the State is using Consumer Satisfaction Surveys with families who have received services and other forms of stakeholder interviews. At the time of the CFSR, the QSR process had been completed in two regions and is described as effective in addressing systemic issues. The QSR will be a permanent, ongoing QA process in the State. Stakeholders in Marion and Jefferson Counties indicated that the QAR process last occurred in these counties approximately 2 years ago.

A challenge noted by stakeholders was that there is a lack of a feedback loop or process to provide QA information to supervisors, individual caseworkers, and units. Without the ability to identify specific units or workers, the stakeholders expressed it may be difficult to make change at the individual or unit level.

### IV. TRAINING

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		Substantial Conformity	
	1	2	3	4
		X		

### Status of Training

Indiana is not in substantial conformity with the systemic factor of Training. Although the State has a training system in place for foster parents, adoptive parents, relatives and private agency staff, there is inconsistency in the quality of the training being delivered. One concern noted is that ongoing training is primarily focused on implementation of practice reform efforts which, while providing a

skill foundation for caseworkers, limits skill-building opportunities for more experienced workers. Indiana was not in substantial conformity during the previous CFSR; therefore, the State was required to address it in its PIP. Findings for the item assessed for this factor are presented below.

**Item 32: The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services**

Strength       Area Needing Improvement

Item 32 is rated as a Strength because the CFSR determined that Indiana is operating a staff development and training program that supports the CFSP, addresses services under title IV-B and IV-E, and provides initial training to staff. This item was rated as an ANI in the State’s 2001 CFSR.

**Key Concerns From the 2001 CFSR**

The following were identified as key concerns during the State’s first CFSR:

- New employees were assigned caseloads as soon as they were hired; it was difficult for them to attend training.
- Staff often have to wait a long time before receiving core training because of the limited number of available training slots, and because training was not offered as frequently as needed.
- Initial FCM training did not provide a sufficient understanding of the responsibilities of the job, and the lack of mentoring made it difficult for FCM to manage full caseloads.
- Training on ICWIS data entry was provided before the FCM had an adequate understanding of child welfare program and policy.

In its PIP, Indiana identified the following strategies to improve its staff development and a training program:

- Prepare all regional training sites to be fully operational by March 1, 2003
- Establish an initial training program that integrates policy, practice, and social work theory and prepares caseworkers to begin work with knowledge and skills
- Offer a Master of Social Work (M.S.W.) program to child welfare supervisors

### **Statewide Assessment Information**

According to the Indiana Statewide Assessment, in order to implement the Training Institute Plan, DCS has both expanded its in-house training staff as well as expanded its contractual support for training. Between November 2004 and September 2005, approximately 400 new caseworkers graduated from the Training Institute. During the first 9 months of this period, caseworkers completed training modules at established intervals. Starting in July of 2005, the formal 12-week continuous training program began.

As noted in the Statewide Assessment, one trend that has impacted a renewed emphasis on new caseworker training has been the developing partnership between DCS and the Indiana University (IU) School of Social Work. The Indiana Partnership for Social Work Education in Child Welfare (IPSWECW) was created in 2001 to provide high-quality social work education for public child welfare employees by creating opportunities for M.S.W. education, while at the same time creating and implementing a curriculum that meets the competencies for child welfare practice as defined by the State of Indiana.

Strengths outlined in the Statewide Assessment:

- DCS has expended considerable resources in revising policy and implementing a pre-service training program for all new caseworkers.
- DCS is working with legislators to expand resources for child welfare practice in general.
- DCS has responded to community input and government feedback to emphasize pre-service training per the recommendations of the Commission on Abused and Neglected Children, Their Families, and the CFSR process.
- DCS has developed and expanded the partnership with the IU School of Social Work to maximize Federal dollars to offer training as well as continue to keep training current with best practices in child welfare.
- DCS is developing behavioral anchors for competencies for FCMs that will have implications for training, supervision, and evaluation of practice.

### **Stakeholder Interview Information**

The majority of stakeholders expressed approval of Indiana's core training for caseworkers and commented that the training has improved greatly. They noted that training is mandated and caseworkers are not given cases until after they have completed the 12 weeks of training. Stakeholders describe the training as balanced between 9 weeks of classroom learning and 3 weeks of practice in the field or "transfer of learning." They describe pre- and post-tests to training that measure job performance and competencies acquired in training. The State is incorporating it in its pre-service training. The first three skills of statewide practice reform include Teaming, Engaging, and Assessing. They anticipate incorporating the two remaining practice reform skills by September 2007.

Several supervisors from Marion County reported that the changes in the pre-service training have resulted in caseworkers who are much better prepared to do their job in the field.

Stakeholders described the mentoring process as 3 months in duration and describe it as well received. Stakeholders report that new staff are better prepared to take on cases and mentors are compensated for taking on this leadership role. In Jefferson County, being a mentor is on top of the caseworker's regular work, which adds to their workload. Stakeholders also report there is a 12-day new supervisor training which includes supporting staff, human resources, leadership, education, and administration. Stakeholders describe how the agency has incorporated feedback from participants about training which has resulted in making changes; for example, increasing the number of "application days" in response to complaints that there were too many days in the classroom.

Some stakeholders felt that it would be better if staff spent some time in the office and shadowing before going to training to give them a frame of reference for what they would later learn in training. Others believe that training is still too theory-based and generic. Stakeholders indicated that supervisors do not always receive training prior to taking on supervisory duties. With regard to training on the ICWIS, some stakeholders suggested that it is not adequate to meet the needs of new staff.

**Item 33: The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP**

Strength       Area Needing Improvement

Item 33 is rated as an ANI because there is insufficient ongoing training available to staff in all areas of the State. Stakeholders reported that the primary ongoing training that is occurring in the State is in support of the practice reform currently being implemented. This item was rated as a Strength in the State's 2001 CFSR.

**Statewide Assessment Information**

According to the Indiana Statewide Assessment, the Indiana Child Welfare Training Institute offers ongoing training classes to staff. DCS has a Catalog of Courses available and it is distributed periodically. Attendance records are kept and entered into an access database. Training classes offered by State trainers to both new and experienced staff are evaluated on customer satisfaction surveys completed by participants. State trainers consistently rate high on these surveys. A system of cohort reunions (focus groups) was designed so that feedback could be obtained after new caseworker training participants have been in the field practicing for 6 months.

The Staff Development division has approximately 100 outlines, handouts, and/or curricula from which classes can be delivered. Indiana has included external and internal experts in strategic planning activities that relate to training.

### **Stakeholder Interview Information**

Stakeholders agreed that practice reform training is being implemented in place of other types of ongoing training. The training focuses on the five core skills of practice reform, which encompass engaging, teaming, assessing, planning, and intervening. Stakeholders also mentioned that the State is working on expanding its university stipend program for DCS staff, and they explained that a survey has been completed that will look at staff's five top training needs. There is a plan to develop web-based trainings for staff as a result.

A concern of many stakeholders regarding ongoing training pertained to the focus primarily on practice reform and the new hires training and that training opportunities for experienced staff are needed. Cited areas for training included addiction and licensing issues. A few stakeholders reported that funding can be a barrier to staff attending ongoing trainings even in instances where staff self-identify training. Some stakeholders reported that there is no system in place to track ongoing training.

### **Item 34: The State provides training for current or prospective foster parents, adoptive parents, and staff of State-licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out its duties with regard to foster and adopted children**

Strength       Area Needing Improvement

Item 34 is rated as an ANI because the State has a training system in place, but there is inconsistency in the quality in delivery of the training. Indiana has a Foster, Adoption, and Kinship Training (FAKT) program in place for pre-service training. A State centralized committee must approve trainings that count as ongoing training hours for foster parents, adoptive parents, and staff of State-licensed facilities. FAKT trainers are certified, and the training is standardized throughout the State regardless of whether the home is licensed by an LCPA or by the local DCS office. Foster parents licensed through the Indiana CB are mandated to take the FAKT training. Therapeutic foster families must do an additional 20 hours of training. This item was rated as an ANI in the State's 2001 CFSR and therefore was required to address this item in its PIP.

## **Key Concerns From the 2001 CFSR**

The following were identified as key concerns during the State's first CFSR:

- Many foster parents have difficulty accessing training because of its location and the time of the day that it is offered. This makes it difficult to fulfill the licensing requirements.
- In rural areas, the need to cluster trainings delayed training for new foster parents.
- Some foster parents need child care in order to be able to attend training and they do not have the money to pay for it.

In its PIP, Indiana identified the following strategies to improve the training system for its current or prospective foster parents, adoptive parents, and staff of State-licensed approved facilities that care for children receiving foster care or adoption assistance:

- Prepare all regional training sites to be fully operational by March 1, 2003.
- Increase budget by \$455,000 for foster parent training statewide.
- Healthy Families Indiana and local offices of family and children will collaborate to provide training for both child welfare staff and Healthy Families support caseworkers.
- Change policy to allow foster parents to carry over five training credits per year as long as they meet the minimum yearly requirement per licensing policy.

## **Statewide Assessment Information**

According to the Indiana Statewide Assessment, foster parent training requirements are the same as for the staff of child care facilities. Staff working directly with children must receive at least 20 hours of training each year and part-time staff must receive at least 10 hours of training. The facility is required to document that staff receive training in administrative procedures and overall program goals, principles, and practices of child care; family relationships and the impact of separation; behavior management techniques; emergency and safety procedures; and the identification and reporting of CA&N. There are statewide conferences and seminars conducted by private agencies in partnership with the State that have offered a variety of professional trainings for staff, including opportunities from the Juvenile Judges Symposium, the State CASA conference, the Indiana Association of Residential Child Caring Agencies (IARCCA) State conference, and the Indiana Foster Care and Adoption Association State conference.

The capacity to track whether foster/adoptive parents are meeting training requirements during the review period was localized or regionalized and now is the responsibility of the Training Coordinator and/or Licensing Caseworker for the county child welfare departments and child caring agencies. However, whether a foster or pre-adoptive parent met those requirements was reported through

ICWIS, and foster care licenses were denied or renewed based on that reporting. The identification of training needs per region or local population of foster parents was based on trends of needs observed of children coming into care and was guided by the State Foster Parent Advisory Committee, as well as in some areas, input from the County Director of the local child welfare departments.

The Statewide Assessment reports that training is provided by either the county or a contracted Training Coordinator, or it was contracted through a provider agency. In Marion County, foster parent training and licensing is contracted out and, as such, the county department of child welfare has not trained or licensed the foster parents that foster for the county for many years. The task of training and licensing foster homes and relative homes and preparing adoptive families is split between two therapeutic licensed child-placing agencies, according to the zip code in which potential parents live. This creates a “middle man” dynamic when it pertains to communication to and with the county department and often results in foster parents feeling disconnected. FAKT curriculum is used for pre-service training. The FAKT Training the Trainers (TOT) program, while standardized, has no accountability built into the structure of how trainers are trained and is challenging, given the number of providers that are delivering the training. There is little oversight once the TOT has been delivered. The FAKT training is being taught by so many different trainers and providers that consistency is difficult to measure. Lack of resources precludes the ability to monitor each training class closely through observation/review of evaluations. This degree of oversight precludes QA.

According to the Statewide Assessment, almost all of the regions, apart from Marion County and a few other large cities within other counties, experience challenges associated with rural living. In some areas, the issue becomes balancing the cost of providing training with a sufficient number of people needing to be trained and being able to offer training when it is needed versus scheduling less training to attract attendance on a cost effective basis.

### **Stakeholder Interview Information**

A majority of stakeholders commenting on this item during the Onsite Review concurred with the strengths and barriers outlined in the Statewide Assessment. The FAKT training is described by stakeholders as a 20-hour pre-service curriculum, with a plan to eventually increase the training to 40 hours and include the practice reform topics. There was general consensus that FAKT trainers are certified and the training is standardized throughout the State regardless of whether the home is licensed by an LCPA or by the local office. The training is required before a family can be licensed and before placement of a child is made. In addition, stakeholders describe mandatory 10 hours of training annually and 20 hours for licensed therapeutic foster caregivers. Stakeholders in Marion County described receiving a monthly flyer that announces training opportunities, and they described recent training topics as very useful. An example was given of a training curriculum designed for foster parents on sexually inappropriate behavior exhibited by certain youth. They noted that up to 4 hours of ongoing training requirements can be met by reading books, watching videos, and

taking online courses, which also are available. A few stakeholders described a committee that has been developed that meets monthly and looks at trainers, policies, proposed training topics, and the quality of the curriculum. Stakeholders report there is an Annual Foster Care and Adoption Association Conference, which offers a selection of ongoing training topics.

Stakeholders opinions about the quality of the training differs; some stakeholders described training as intensive and comprehensive, while others felt the quality of the training varies greatly depending on the trainer and that it does not prepare them for the realities of foster parenting. Several stakeholders mentioned the need for training in dealing with the emotional and behavioral needs of the children in foster care. Another key concern identified is that the training, and in particular the videos used in training, are dated. In addition, training is not available in Spanish. Onsite child care and driving distance were cited by some stakeholders as challenges in terms of foster parents being able to attend trainings.

**V. SERVICE ARRAY**

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		Substantial Conformity	
	1	2	3	4
		<b>X</b>		

**Status of Service Array**

Indiana is not in substantial conformity with the systemic factor of Service Array. There are key service gaps included but not limited to the areas of behavioral health, substance abuse services, foster homes, services for Spanish-speaking children and families, and IL services. The State was in substantial conformity with this systemic factor in the 2001 CFSR and therefore did not need to address this factor in its PIP. Findings for the item assessed for this factor are presented below.

**Item 35: The State has in place an array of services that assess the strengths and needs of children and families and that determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency**

\_\_\_ Strength       X  Area Needing Improvement

Item 35 is rated as an ANI. Although there are many praiseworthy services available in the State and concerted efforts to access services for the children and families through RSCs, there are key service gaps noted to be in the areas of behavioral health, substance abuse treatment, and domestic violence services; services for monolingual Spanish-speaking families; and services for youth making the transition from foster care to IL. Item 35 was rated as a Strength in Indiana’s 2001 CFSR.

### **Statewide Assessment Information**

The Statewide Assessment describes four layers of services aimed at creating a safe home environment to enable children to remain safely with their parents and to help children in foster and adoptive care achieve permanency. The four areas of program delivery that connect to the Service Array include prevention services, preservation services, placement services, and permanency services.

The Statewide Assessment reports that DCS has partnered and collaborated with the following providers to change the way they do business in Indiana by engaging families; identifying and filling service gaps; being open and transparent; and making an investment in Indiana’s children through leveraged and braided funding, partnerships, increased staff, and a delivery system of prevention, preservation, placement, and permanency that seeks to be available regardless of where a family lives. Providers include the Department of Education, DMHA, Division of Family Resources, Department of Workforce Development, DOC, Indiana State Department of Health, Indiana Youth Services Association, Indiana Youth Institute, IARCCA, and all of the approximately 300 child welfare services agencies. Some local partners are, but are not limited to local offices of the State agencies, DCS provider networks, schools, social service agencies, health care providers, public health agencies, hospitals, child care providers, community mental health agencies, child abuse prevention agencies like Healthy Families or the Neighborhood Alliance for Child Safety, systems of care providers, local Prevent Child Abuse councils, youth services bureaus, child advocacy centers, the faith-based community, 12-step programs, city and county government, law enforcement agencies, and prosecutor offices.

Foster parents interviewed in focus groups generally agreed that there were available services for the children, but felt that sometimes foster parents were not invited to give input as to what services were needed for the child. Foster parents feel they are good at assessing a child’s needs.

The Statewide Assessment describes several barriers with the service array:

- There is a lack of cultural and ethnic competency in the assessment and delivery of services.

- Transportation to and from services can be a barrier.
- Hours of service availability can present obstacles when the family is working and cannot access services in the evening.
- Accessing services during the day for families where the parent works the evening shift is complicated by the need for children to be in school.

### **Stakeholder Interview Information**

Stakeholders describe a regional approach to determine service needs for children. The RSCs are set up in 18 regions across the State, chaired by the local DCS Manager, and comprised of judges, foster parents, CASA, FCMs, and supervisors. The RSCs work to determine what services are needed and design a system to fill the gaps in services, with each region having conducted some activity to identify gaps. When Child and Family Team Meetings are used with families, they are described as getting to the family's specific issues and enabling staff to make appropriate referrals that address safety, permanency, and well-being of children. Stakeholders had disparate opinions about the array of services available to families across the State. Some reported having a good array of services with no service gaps, and others felt that there were gaps across the State. Several stakeholders mentioned availability of services being related to the variability of funding in each region.

Gaps noted by multiple stakeholders included the following:

- Dental services for families with Medicaid
- Services for monolingual Spanish-speaking families
- Mental health services
- Foster homes that will take children with special needs and/or behavioral problems
- Foster homes for minority youth/Spanish-speaking foster parents
- In-patient substance abuse treatment for mothers with children
- Substance abuse services for adolescents
- Adult sex offender treatment services for pregnant and parenting teens
- Services with more flexible hours for parents
- Anger management for younger children
- Placement stabilization services
- Not linking teens with IL services early enough or leaving them to find the services themselves (reported by some youth)
- In-county domestic violence shelters and child advocacy centers for rural areas

**Item 36: The services in item 35 are accessible to families and children in all political jurisdictions covered in the State’s CFSP**

     Strength        X   Area Needing Improvement

Item 36 is rated as an ANI because there is a lack of placement resources in the metropolitan area and a lack of non-contracted providers in other parts of the State. Transportation was identified as a general barrier. This item was rated a Strength in Indiana’s 2001 CFSR.

**Statewide Assessment Information**

According to the Indiana Statewide Assessment, in each of the 18 DCS Regions, RSCs have been developed and regional managers within each work to develop these councils to identify and address service gaps in the communities they serve. The councils approve contracts with providers to ensure the optimum service array, pricing, and outcomes. Another strength the State has demonstrated in addressing the accessibility of services statewide is the expansion of Hoosier Healthwise (Medicaid) to cover children up to the age of 19, and then to additionally cover children that have aged out of the foster care system up to the age of 22.

The Statewide Assessment reports that there has been a shift in philosophy regarding regional equity and not just abundance of services in urban areas. Rural areas have historically been lacking in accessibility to services. In the Statewide Assessment, transportation was identified in rural areas as an obstacle to accessing services; it also presents a barrier in urban areas. In rural areas, distance is the primary transportation challenge. Limited availability of services in some smaller counties can extend the time necessary to access a service. In urban areas, distance can be a problem along with poor or inadequate public transportation systems.

**Stakeholder Interview Information**

Stakeholders concurred that the RSCs are designed to identify service gaps and address these gaps across Indiana. The list of additional service gaps identified by stakeholders during the Onsite Review includes all of those reported in the Statewide Assessment. However, stakeholders describe that when the Child and Family Team Meeting approach is used, they are able to better identify specific needs and determine how to get those needs met and fill service gaps. In some instances, it was described that service providers would provide services for children and/or families from outside of their county as a way to fill service gaps. Urban areas are described as having access to more specialized services in general. Flexible funds are used to help ensure families receive services. Stakeholders praised the prevention services that are offered statewide and, specifically, Healthy Families was described as a program that serves 92 counties and makes community referrals as part of its practice. Pre- and post-adoption services offered to families include support groups, respite services, and counseling for both the child and parents.

A key concern of stakeholders in Marion County is that children routinely go into a shelter due to lack of placement resources. Several stakeholders described a concern related to a lack of access to non-contracted providers for specific services that may be needed, for example, family therapy or other mental health services. In rural areas, stakeholders reported that health needs and mental health needs are difficult to meet in terms of accessing doctors who take Medicaid. Transportation is reported to be an issue for families in accessing resources in rural areas and this concurs with the Statewide Assessment. IL services are described as variable from county to county, with group care providers being more likely to provide services than foster family caregivers. Stakeholders describe an improvement in IL services; however, they report they are not reaching all eligible youth.

**Item 37: The services in item 35 can be individualized to meet the unique needs of children and families served by the agency**

  X   Strength           Area Needing Improvement

Item 37 is rated a Strength because Indiana typically provides individualized services to children and families. Stakeholders noted that service providers tailor the services to meet the needs of the family. This item was rated as a Strength in the State’s 2001 CFSR.

**Statewide Assessment Information**

According to the Indiana Statewide Assessment, the new case plan module in ICWIS rolled out on January 24, 2003, for all 92 counties. Prior to rolling out this case plan, DCS provided statewide training to staff on motivational interviewing and rapport building. This training was provided in order to enhance staff skills necessary to convene and engage families in the case planning process. To ensure that staff were knowledgeable about documenting the changes on the new case plan, Indiana provided training within the ICWIS module. The new case plan template allows for staff and families to address strengths and time-limited measurable objectives in a narrative form, rather than in pre-selected categories. Finally, the new case plan module includes a field for staff to delineate the latest Individual Education Plan and Individual Transition Plan dates and the designated educational needs of each child. This case plan required case conferencing to ensure that the needs of all family members are being met.

The Statewide Assessment describes Child and Family Team Meetings, which requires the family to take responsibility for the future of their case by acknowledging each person's role in resolving the issues that brought them to the attention of the DCS. This process further individualizes services for all family members. Mental Health Screenings were developed for all youth placed into substitute care or who became adjudicated as a CHINS. The screening is completed by the FCMs. Children who are identified with mental health needs via the screening tool are referred to a mental health professional for assessment and recommendations.

**Stakeholder Interview Information**

There were some differences of opinion among stakeholders commenting on this item during the Onsite Review. Stakeholders in all three of the counties included in the Onsite Review expressed the opinion that caseworkers are highly effective in meeting the unique needs of children and families, although several noted that this sometimes varied depending on the experience of the caseworker. These stakeholders attributed the individualization of services to the use of the Ansell Casey Life Skills Assessment, which is used every 6 months with youth. Practice reform, changes in the contracting process, and the Child and Family Team Meeting approach were reported to also support individualized services being offered. Flex funds and waiver funds are used as a means to purchase individualized services. Examples were given during interviews of funds being used to pay for utilities and to purchase a washing machine. Efforts were described to recruit and retain bilingual (English/Spanish) staff as a way of meeting the individual needs of children and families in the agency.

In comparison, some State-level stakeholders voiced concern that the agency is not consistently effective in individualizing services to meet the unique needs of children and families. They noted that many case plans are “cookie cutter” in terms of services and are not individualized, particularly IL plans. Services for Spanish-speaking families are cited as a need across the State as this population continues to grow.

**VI. AGENCY RESPONSIVENESS TO THE COMMUNITY**

<b>Rating of Review Team Regarding Substantial Conformity</b>				
	<b>Not in Substantial Conformity</b>		<b>Substantial Conformity</b>	
Rating	1	2	3	4 <b>X</b>

**Status of Agency Responsiveness to the Community**

Indiana is in substantial conformity with the systemic factor of Agency Responsiveness to the Community. The State was found to be in substantial conformity with this systemic factor in its 2001 CFSR. Findings with regard to the specific items assessed for this factor are presented below.

**Item 38: In implementing the provisions of the CFSP, the State engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies, and includes the major concerns of these representatives in the goals and objectives of the CFSP**

Strength     Area Needing Improvement

Item 38 is rated as a Strength because the State engages in ongoing consultation with consumers and service providers. The Statewide Assessment reports that planning efforts around the Child and Family Services Plan (and Updates), local Early Intervention Plans, Child Protection Plans, other local and regional planning efforts, and statewide initiatives have included invitations to stakeholders. Several stakeholders interviewed reported providing input in the State Plan. This item was rated as a Strength in the State's 2001 CFSR.

#### **Statewide Assessment Information**

According to the Indiana Statewide Assessment, commencing with the new administration in January of 2005, a strong emphasis has been placed on the importance of stakeholders in the development of plans related to child welfare. A protocol was developed establishing RSCs in each of the 18 DCS Regions. The purpose of these councils is to allow for local communities to address their unique needs while following State-defined service standards. Council representation includes members of DCS, the local court, the local CASA/GAL programs, and a foster parent. Community representatives are encouraged to attend these meetings and provide input. All agendas/minutes of meetings are posted on the DCS website. The purpose of this council is to ensure that needed services are available in each region to meet the needs of families and children.

The Statewide Assessment reports that planning efforts around the Child and Family Services Plan (and Updates), local Early Intervention Plans, Child Protection Plans, other local and regional planning efforts, and statewide initiatives have include invitations to key stakeholders as identified above. Collaboration has increased with the Chief Justice surrounding the Child Abuse Prevention and Treatment Act (CAPTA) requirements. Recently established Citizen Review Panels also are developing goals around which planning efforts will focus.

Some challenges noted in the Statewide Assessment include until recently, Tribal representation since the 2004-2009 Child and Family Services Plan has been sporadic. This has been primarily due to a change of leadership within that organization. An additional challenge has been the active involvement of youth. In 2004, Regional Advisory Boards were established and attendance was patchy. A statewide Youth Advisory Board has subsequently been established and should enhance this input.

As indicated in the Statewide Assessment, engaging partners and sustaining their partnership is a time-consuming process that has been somewhat elusive during the period of review. This is in part due to the tremendous growth of the agency and the time needed to develop the infrastructure necessary to sustain the number of new employees being hired, trained, and deployed. Stakeholder partnerships have not been a priority for previous administrations. Legislative mandates, external to the agency, have required significant resources.

### **Stakeholder Interview Information**

Stakeholders commenting on this item agreed that the relationship between DCS administration and the State court system is very good; they meet regularly and a strong collaboration exists. Other relationships noted by stakeholders include the DMHA, the Department of Education, the Police Department, the Department of Health, the Indiana Coalition Against Domestic Violence, and Indiana University. Stakeholders report the six RSCs meet with key people from the communities and solicit their input on regional strategic plans that look at the goals for the next 3-4 years. Practice reform presentations are being completed at RSC meetings and include “what is practice reform” and what type of impact they anticipate it having in that particular community.

Several stakeholders interviewed reported providing input in the State Plan. Stakeholders from the State described parents and youth being involved in focus groups and giving input. Youth interviewed indicated that they have a voice within DCS. For example, the Youth Advocacy Group (YAG) advocated effectively changing the Medicaid cut-off age from 18 to 21 in order to provide more coverage for older youth in foster care, and this was accomplished. They also continue to raise issues for the State’s consideration concerning sibling visits for children and youth in foster care. In Marion County, law enforcement representatives, judges, and mental health representatives interviewed reported very positive collaborations with DCS.

Consistent with the Statewide Assessment, consultation with the Tribes was described as a challenge in one stakeholder interview. However the State has recently made substantive efforts to engage Tribal representatives.

### **Item 39: The agency develops, in consultation with these representatives, annual reports of progress and services delivered pursuant to the CFSP**

Strength       Area Needing Improvement

Item 39 is rated as a Strength because Indiana develops annual reports of progress and services in consultation with representatives. This item was rated as a Strength in Indiana’s 2001 CFSR.

### **Statewide Assessment**

According to the Indiana Statewide Assessment, the “open and transparent” philosophy of the DCS Director and the willingness to share appropriate information and work together to resolve issues has helped some local jurisdictions better partner with stakeholders. Senate Bill 400 requires DCS to report to their city/county councils on a semiannual basis a summary of agency progress and initiatives, particularly as it relates to funding. This provides an opportunity in every county for citizen and stakeholder input.

The Statewide Assessment describes that, in preparation for the annual report, numerous stakeholders were contacted to provide updated information. Examples of those contacted included the Coordinators of the title IV-B Contract Process, the IFCAA, Ball State University (agency that coordinated many of the title IV-E IL programs), Contract Trainers, DMHA, Prevent Child Abuse Indiana, Child Abuse/Neglect Prevention Councils, First Steps, IU School of Social Work, provider agencies of the Community-Based Child Abuse and Prevention Program (CBCAP), Kids First Trust Fund, Early Intervention Planning Councils, and Child Protection Teams. This information was collated and summarized by DCS staff in the preparation of the annual progress report.

### **Stakeholder Interview Information**

During the Onsite Review, all stakeholders commenting on the item reported that they had the opportunity to provide input into the annual reports of progress. DCS uses the local focus groups and stakeholder interviews to obtain input for the Statewide Assessment and the APSR. Practice reform efforts and stakeholder consultation is incorporated into the APSR. Agency administrators reported that many objectives have been completed and they are tracking the ones that have not been completed.

However several stakeholders interviewed during the CFSR report that there has not been Tribal representation at the APSR meetings in the past.

### **Item 40: The State’s services under the CFSP are coordinated with services or benefits of other Federal or Federally-assisted programs serving the same population**

  X   Strength    \_\_\_\_\_ Area Needing Improvement

Item 40 is rated as a Strength because services are coordinated with other Federally-assisted programs. During stakeholder interviews, almost all stakeholders reported that there is good coordination of services between DCS and other agencies and community services, particularly those that operated with funding support from the Federal Government. This item was rated as Strength in the State’s 2001 CFSR.

**Statewide Assessment Information**

According to the Indiana Statewide Assessment, there has been continued involvement from numerous stakeholders regarding the various initiatives described in the 5-year Child and Family Services Plan submitted July 12, 2004, and the two annual updates. The Statewide Assessment discusses ongoing collaboration and coordination around the Child and Family Services Plan and CPS between DMHA, Healthy Families Indiana, CAPTA, CBCAP, Community Partners for Child Safety Program, Kids First Trust Fund, Building Strong Families, Court Improvement Program, Medicaid, early intervention programs, child support and the Federal Parent Locator Service, substance abuse programs, Tribal programs, and/or juvenile justice programs.

**Stakeholder Interview Information**

Almost all stakeholders reported during the Onsite Review that there is good coordination of services between DCS and other agencies and community services, particularly those that operated with funding support from the Federal Government. They identified the same coordinated efforts and agencies that were noted in the Statewide Assessment. The agency coordinates with TANF to fund the Healthy Families prevention programs and the Assisted Guardianship Program. CAPTA dollars were given by the agency to CASA to increase volunteers. They are actively involved with the managed care organization in the State, Medicaid, the State housing program, and the DMHA. The partnership between DCS and IU to support the title IV-E training program was described as a “true partnership.” In Marion County, the collaboration between DCS and the courts was reported to be one of the strengths of the community, and they describe Federal, State, and local entities working together to improve the child welfare system.

**VII. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION**

<b>Rating of Review Team Regarding Substantial Conformity</b>				
	<b>Not in Substantial Conformity</b>		<b>Substantial Conformity</b>	
Rating	1	2	3	4
			<b>X</b>	

### **Status of Foster and Adoptive Parent Licensing, Recruitment, and Retention**

Indiana is in substantial conformity with the systemic factor of Foster and Adoptive Parent Licensing, Recruitment, and Retention. However, the State does not have in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children for whom foster and adoptive homes are needed. During the 2001 CFSR, Indiana was found to be in substantial conformity with this factor. Findings with regard to the specific items assessed for this factor are presented below.

#### **Item 41: The State has implemented standards for foster family homes and child care institutions which are reasonably in accord with recommended national standards**

  X   Strength           Area Needing Improvement

Item 41 is rated as Strength because standards have been implemented for foster family homes and childcare institutions. According to information received from the CFSR, there are comprehensive licensing standards in place for both foster homes and other types of placement facilities that address safety and health issues, qualifications, education and training, health and medical issues. This item was rated as a Strength in the State's 2001 CFSR.

#### **Statewide Assessment Information**

According to the Indiana Statewide Assessment, DCS has standards in place for adoptive and foster homes and these standards have been implemented. Additionally, DCS has updated and enhanced key requirements for licensing and monitoring of residential facilities and child placing agencies.

The Statewide Assessment reports that at the onset of placement considerations, DCS believes in the least restrictive, most family-like setting for a child removed from their home. Relative (kinship) placement is to be considered before other forms of placement. The FCM works with the parents to help identify perspective and appropriate relative/kinship placements.

Moreover, the Statewide Assessment states that a number of changes in performance and practice since the previous Statewide Assessment include but are not limited to significant updates to the policy on Foster Family Home Licensing; discontinuance of Conditional Licenses as of July 1, 2005; mandated use of Spaulding Outline format for all home studies, including the Family

Network Diagram effective October 24, 2005; revision of the Foster Parent Handbook; development and implementation of QAR process for foster family-licensed homes; and design, development, training, and implementation of LCPA staff entering their own requests for Foster Family Home licenses directly into ICWIS.

Barriers identified in the Statewide Assessment explain that the process to complete home studies can vary from county to county. Some counties complete these internally and others contract this function out. The lack of DCS-designated licensing staff limits the ability to license county foster homes. This can result in inconsistencies between counties.

Strengths and promising practices reflected in the Statewide Assessment include: Hiring and supporting competent consultants, development of and presentation of effective training for facilities and agencies incorporating key collaborators, development of comprehensive review documents that effectively measure compliance with applicable regulations, more collaborative efforts among community resources including foster parents who have pertinent information regarding licensing, strengthening strategic planning for programs and services by using child welfare models from other States which have successful outcome measures, focusing on preventative services to the families in an effort to keep the family intact, addressing placement stability in foster care and strengthening post-placement services, and continuously evaluating the program to insure that there are no gaps in the continuum of care for children who are in need of services.

### **Stakeholder Interview Information**

Stakeholders commenting on this item during the Onsite Review were in general agreement that the State's licensing procedure involves standards for foster family homes and child care institutions that ensure the safety of the children in out-of-home placements. These licensing standards were described as comprehensive in that they address health and safety issues, employee qualifications, education and training requirements, food, and medical requirements. There are no provisional or temporary licenses, and any request for waivers, variances, or any type of exception would need to go through the State office. However, stakeholders were clear that statutory and safety requirements are not waived.

Consistent with the Statewide Assessment, stakeholders commented that the timeliness of moving through the process from training to licensure is problematic. Training may occur quickly, but there were delays cited in the home study process, which may in turn cause foster parents to lose credit for their original training.

**Item 42: The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds**

  X   Strength             Area Needing Improvement

Item 42 is rated as a Strength because Indiana has applied standards to all licensed or approved foster family homes and child care institutions. The Indiana Statewide Assessment notes that foster parents and approved relatives (kinship care) are subjected to the same licensing standards and monitoring, unless the courts order relative placement despite the State’s license requirements. Furthermore, stakeholder interviews noted that homes licensed by private providers must meet the same standards as homes licensed by DCS. This item was rated as a Strength in the State’s 2001 CFSR.

**Statewide Assessment**

According to the Indiana Statewide Assessment, foster parents and approved relatives (kinship care) are subjected to the same standards and monitoring, unless the courts order relative placement despite the State’s license requirements. All prospective foster parents, adoptive parents, and kinship parents receive 20 hours of pre-service training.

The Statewide Assessment describes staffing and training issues that differ from rural to large urban counties. In rural counties there is a continued shortage of trainings, staff, and continuity. Potential foster parents/kinship parents have to travel long distances to receive trainings, which is a barrier to the process. The Statewide Assessment also reports that home studies are not done in a consistent format. Some counties conduct them internally, while others subcontract for this service. Indiana established a statewide QA process for review of licensing. LCPAs are subjected to two license reviews, one as the agency and the other as an individual license.

**Stakeholder Interview Information**

There was general consensus among stakeholders commenting on this item during the Onsite Review that relative foster parents, non-relative foster parents, and preadoptive parents have the same requirements and training. However, all relative caregivers do not have to become licensed. They also noted that there are no provisional licensing standards. Stakeholders reported that although relatives are required to go through the same process as other applicants in terms of training and background checks, they can have a child placed with them without being licensed. Homes licensed by private providers must meet the same standards as homes licensed by DCS. Examples of standards that all homes must follow included annual inspections of the home, fire and safety standards, and rabies shots for pets.

**Item 43: The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children**

  X   Strength             Area Needing Improvement

Item 43 is rated as a Strength because the State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care/adoptive placements. This item was rated as a Strength in the State’s 2001 CFSR.

**Statewide Assessment Information**

According to the Statewide Assessment, agencies perform their own checks with the exception of the fingerprinting (which must be done by the State police), and LCPAs must rely on the county agencies to do the CPS checks. All agencies are subjected to being randomly selected to send in licensing files in their entirety to DCS Central Office when requested for QAR, and Regional Central Office Licensing Field Consultants conduct the field audits. One can not get licensed without having the proper criminal background checks completed and returned with results that show no disqualifying charges. The only children that are to be placed in an unlicensed home are those that are going into relative homes. The only funds an unlicensed relative home would qualify for would be TANF. As indicated in the Statewide Assessment, the results from the last two State QARs show a decrease in the number of criminal background check errors from 44 percent to 33 percent.

Barriers noted in the Statewide Assessment describe that, although the collaboration with the State police is working smoothly in some areas, that has not been the case in other areas. The cost of fingerprinting, particularly for non-DCS agencies/facilities, can be overwhelming. FBI checks are all sent to one location, which causes a “bottleneck” in the process and can slow down the response time for results of the fingerprint-based checks, and this can slow down the licensure process considerably.

**Stakeholder Interview Information**

Stakeholders commenting on this item during the Onsite Review concur with the Statewide Assessment that the State has been doing both FBI and State police background checks. FBI fingerprint checks for foster parents and all members of the household began October 2006, and in residential facilities all employees and volunteers must be fingerprinted. Some stakeholders expressed the opinion that the fingerprint checks are a lengthy process and can delay services to children and timely placements. Stakeholders reported a “bottleneck” that can take 8 weeks to get the results of fingerprint checks, and in some instances they have prints that are

unreadable and have to send them to the FBI to be manually read. However, stakeholders anticipate the new digital fingerprinting technology will speed up the process.

**Item 44: The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed**

Strength       Area Needing Improvement

Item 44 is rated as an ANI because the State does not have in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children for whom foster and adoptive homes are needed. The State does not have a sufficient pool of adoptive parents to meet the needs of the children in foster care. Stakeholder interviews note that the State is slow in responding to the need to recruit Hispanic, bilingual foster homes close to the family and African-American foster families. They also note that there are not enough basic foster homes as opposed to therapeutic homes. This item was rated as an ANI in the State’s 2001 CFSR and was therefore addressed in the PIP.

**Key Concerns From the 2001 CFSR**

The following were identified as key concerns during the State's first CFSR:

- There was a major need to focus on recruiting additional foster parents, especially those who can address the mental health needs or developmental disabilities needs of children, thereby reducing the reliance on residential care.
- Families were lost due to long delays between training and the initiation of home studies and licensing by the DCS. In one locality, training must be clustered due to small volume, and as a result, the training is delayed. In another locality, licensing staff have ongoing caseloads in addition to their licensing responsibilities. As a result, they have insufficient time to keep up with the volume of work associated with licensing.
- Foster parents have been a good source for recruiting other foster parents, whereas agency marketing campaigns have not been very successful.
- Although foster parent interest rises after child welfare media occurrences (e.g., abandoned baby), follow-up with those who expressed interest has not resulted in new foster parents in one locality.
- Families were more likely to seek licensure from private agencies due to higher subsidies and more support from caseworkers.

In its PIP, Indiana identified the following strategies to strengthen its process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children for whom foster and adoptive homes are needed:

- Revise statewide foster care and adoption recruitment campaigns to find prospective families interested, willing, and able to parent children in the custody of Indiana
- Increase budget by \$455,000 for foster parent training statewide

### **Statewide Assessment Information**

According to the Statewide Assessment, there is a process in place to recruit potential foster and adoptive families that would reflect the ethnic and racial diversity of children for whom those homes are needed. Indiana contracts with the IFCAA to organize and design its recruitment efforts. IFCAA created materials designed to reflect the ethnic and racial needs of Indiana's foster/adoptive children. The organization strategically placed radio spots and newspaper advertisements to maximize its exposure to families of various ethnicities and races. A grassroots effort within various faith-based communities also was initiated. The group utilized conventions such as the Black Expo to meet potential foster/adoptive families face-to-face. The Statewide Assessment reports that it was difficult to close the connection loop between the recruitment organizations (IFCAA) and the State and private licensing agencies to determine how many and which of the potential foster/adoptive families who began the process actually completed the licensing process.

The Statewide Assessment summarizes foster parents' input from focus groups. Foster parents felt that there need to be staff dedicated to recruitment in the counties so they can follow up on interested persons, and in general there is not enough information available for those who want to know how to become a foster parent. Many people assume that at least one of the parents has to "stay at home," and that deters people from checking further.

The following barriers to foster/adoptive parent recruitment were outlined in the Statewide Assessment:

- There is a concern that there is still a lack of communication between those responsible for recruitment and those who complete licensing.
- The current recruitment process lacks a "customer service" approach.
- The State does not have plans at this time for a central intake center, considered vital for a consistent recruitment effort.
- No Hispanic materials or trainers are currently available to communicate with potential Hispanic foster parents.
- Licensure information is not readily available.

### **Stakeholder Interview Information**

Stakeholders interviewed reported that in early 2003 they began a media campaign, which resulted in efforts such as “Thursday’s Child” and “Monday’s Child,” which profile a child each week in an attempt to recruit foster parents from the community. They use the Heart Gallery website to post information and photos of children needing adoptive placements, and they try to have children attend events that could lead to an adoptive placement, such as church. It was noted that the agency does a good job with the adoption of sibling groups. Stakeholders also report that the agency has contracted with three outside agencies, including the Villages and IFCAA to focus on recruitment and retention of foster parents. The stakeholders described needs assessments being conducted that included a phone survey of approximately 600 people, and 53 focus groups were conducted as well. This resulted in regional action plans to improve recruitment and retention. There is a central call center operated by IFCAA that provides information to potential adoptive and foster parents. A recruitment incentive mentioned by one stakeholder is to provide foster parents with home insurance. It was noted that in Montgomery County the Foster Parent Support Group has done some work on recruitment.

Several stakeholders indicated that with the change of administration and contracting of services, efforts have slowed in terms of recruitment, and there is not an active ad campaign at the time of the CFSR. The majority of stakeholders commenting on this item expressed the opinion that there is a significant need for foster homes, particularly Spanish-speaking and bilingual foster parents, and homes for adolescents, in particular, male children and children with special needs. Stakeholder interviews note that the State is slow in responding to the need to recruit Hispanic, bilingual, foster homes close to the family, and African-American foster families. Several stakeholders noted that requirements, such as extensive background checks taking 8-10 weeks and the length of time the entire process takes, sometimes up to 1 year, deter potential foster parents.

### **Item 45: The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children**

  X   Strength                             Area Needing Improvement

Item 45 is rated as a Strength because the State has a process for cross-jurisdictional resources for adoptive or permanent placements for waiting children and is using this process effectively. This item was rated as a Strength in Indiana’s 2001 CFSR.

### **Statewide Assessment Information**

According to the Indiana Statewide Assessment, the DCS Internet website has been expanded to allow interested families, both in and out of State, access to child summaries to enhance their interest in a particular child. There has been some increase in the placement of

special needs children in adoptive homes as a result of the website and participation in adoption fairs. The Special Needs Adoption Program (SNAP) has been involved in a number of interstate Adoption Heart Galleries (with Ohio and Kentucky). There have been cross-trainings between the SNAP specialists and ICPC consultants so that the interstate placement process is understood by both departments. There has been a major focus on the SNAP program so that the program is fully staffed with six adoption specialists. The regions of the six specialists were reconfigured to conform to the DCS Super Regions. The ICPC office is a strong and stable support to successful placements due to its oversight of length of placement approval process as well as ensuring that supervisory reports are provided to other States, and received by Indiana.

As indicated in the Statewide Assessment, the DCS adoption website has been enhanced to allow interested families, both in and out of State, access to child summaries to express their interest in a particular child without the delay of waiting for SNAP staff to mail or fax the summaries. DCS also participates in a number of national recruiting websites by having pictures of waiting children posted on **AdoptUSKids** and Adoption.com. This also allows out-of-State families the ability to view Indiana's waiting children. Indiana participates in national adoption programming from the Dave Thomas Foundation for Adoption.

#### **Stakeholder Interview Information**

Stakeholders commenting on this item during the Onsite Review noted there is a process in place to use cross-jurisdictional resources, but in reality they make very few adoptions out-of-State or foster care placements out-of-State. Stakeholders reported that the agency often uses **AdoptUSKids**, Adoption.com, Heart Galleries, and some TV broadcasts that go to neighboring States, Thursday's Child, and Monday's Child to assist in finding adoptive placements.