Child and Family Services Review 2017 STATEWIDE ASSESSMENT



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Introduction

Alaska is the largest of the 50 United States. At 663,627 square miles, Alaska constitutes over 17% of the entire country, and Alaska is nearly 2.5 times larger than the second largest state, Texas. Yet this vast area is home to only 710,000 people. Alaska's urban centers, such as Anchorage, Wasilla, Fairbanks and Juneau, have adequate access to services and resources. Communities in rural Alaska, however, have such limited road systems that small plane, boat, and snowmobile travel are required for service delivery.

The child welfare system in Alaska is a state-administered, serving families and children across a vast geographic area. Alaska's child welfare system consists of many agencies and stakeholders who are all committed to safe children, strong families. The primary child welfare agency in Alaska is the Office of Children's Services; other members of the child welfare system includes the Alaska Court System; Alaska's 229 federally-recognized Tribes, partners from the Department of Law, the Public Defender Agency, Guardians ad Litem, the Court Improvement Project, the Citizens' Review Panel, the Child Welfare Academy, the Alaska Center for Resource Families as well as community-based service providers and partners located throughout the state.

Of the 189,380 children living in Alaska in CY 2016, 1 in 10 was reported to OCS for child maltreatment. Of the 18,291 alleged victims that were reported to OCS in CY 2016, 13,010 had one or more screened in reports, and 1413 children entered foster care. When added to the existing children in out-of-home care, there were 4,191 children total (or 2% of the overall child population of Alaska) who spent a part, or all, of 2016 in out-of-home care. Since 2014, Alaska has seen a 52.5% increase in children in out-of-home care since.

Factors impacting Alaska's child welfare system include an increase in the deaths of young children (primarily infants 0-3 years of age), which led to a partnership with the Division of Public Health regarding Safe Sleep practices for new parents in 2014. Additionally, Alaska continues to experience a disproportionate number of Alaska Native children in the custody of OCS; currently 55% of all children in foster care are of Alaska Native heritage, yet, Alaska Native children make up 18.9% of the overall population of children in Alaska. (State of Alaska: Department of Labor population estimates, July 2015).

Since CY 2014, Alaska has been facing an unprecedented economic downturn, spurred by the precipitous drop in the price of oil on the national and global markets, which has directly impacted the availability of services and resources in Alaska. For families, cuts to the annual Permanent Fund Dividend checks, the loss or reduction of vital services in our communities and the impacts of the opioid epidemic that is plaguing the United States generally, are assaulting our families and children at levels that Alaska has never seen before in all regions of Alaska. The criminal elements that accompany the opioid epidemic are profound. In 2016, Anchorage experienced the highest ever homicide rate for the city; an increasing rise in the rates of drug-related property crime and the rates of domestic violence and sexual assault in all of our communities continued to grow as well. At the heart of these statistics are Alaska's children and families who are experiencing the aftermath of these impacts.

Similar to many child welfare agencies in other states, OCS is facing significant challenges in meeting the needs of families. Worker vacancy and turnover is at 34%, with most new workers staying on the job a short 18 months. The state and federal requirements placed on Alaska's child protection workers at both the state and federal level are nearly impossible to successfully meet in every case. OCS attempts to balance workloads among the available positions utilizing the Child Welfare League of America guidelines; however, with the high rate of turnover, caseloads remain at double the national (CWLA) guidelines. OCS workers are also challenged with the increasing threats of violence to their personal safety through this work; however, OCS has worked diligently to improve safety in OCS offices at most sites. The impacts of large caseloads due to the impacts of worker turnover, results in workers inability to

complete the necessary requirements of monthly caseworker visits, case planning, and work towards safe and stable permanency through reunification. OCS has seen a slight increase in the number of children who have reunified with their families, but OCS continues to be well below the national standard for this federal outcome.

Despite these challenges the Department of Health and Social Services, which oversees the work of the OCS, has initiated several initiatives to assist with improving outcomes for children and families who are in the OCS system. Most profoundly, is the collaborative work with Alaska's Tribes and Tribal organizations: In 2016, Alaska developed and is implementing a 5-year strategic plan called *Transforming Alaska's Child Welfare System (2016-2020)*, in which transformation is focused on improving the outcomes for Alaska Native children, their families and Tribes through a six-pronged approach. The strategic plan can be found at: http://dhss.alaska.gov/ocs/Documents/Publications/pdf/AK-Transforming-Child-Welfare-Outcomes StrategicPlan.pdf. Other state initiatives focused on better screening decisions for our youngest citizens, children 0-5 years of age and are showing improvements in the reduction of reported infant deaths to OCS in years 2015, and 2016. Initiatives targeting diligent relative search efforts are showing improvements in the identification and placement of more children with relatives, yet challenges for relatives to be considered for placement options remain.

The Office of Children's Services, along with other partners and stakeholder groups has completed the 2017 Statewide Assessment as the first part of the Child and Family Services Review which is scheduled for May 22-26, 2017. This is a transparent and honest assessment of the strengths and challenges that Alaska's child welfare system is experiencing. Alaska wishes to thank the many staff and stakeholders who contributed to the development of the 2017 Statewide Assessment. The reader will notice in this assessment that the major areas of impact identified throughout the assessment:

- 1) Increases in the number of children in out-of-home care 52.5%;
- 2) Rising caseloads due to high worker turnover;
- 3) Impacts of opioids, alcohol and other substances resulting in families' inability to keeptheir children safe; and
- 4) Limited resources for vital services preventing custody and/or facilitating timely reunification.

Alaska looks forward to reviewing the results of the CFSR, to help inform our child welfare system of areas requiring focus for the federal Performance Improvement Plan (PIP).

The following information is largely from the federal OMB Control Number: 0970-0214, Expiration date: 2/28/2018. Where relevant, Alaska has added clarifying information to inform the reader as to the CFSR process in Alaska.

The Child and Family Services Reviews (CFSRs), authorized by the 1994 Amendments to the Social Security Act (SSA), are administered by the Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services (Children's Bureau). The goals of the CFSR are to:

- Ensure substantial conformity with title IV-B and IV-E child welfare requirements using a
 framework focused on assessing seven safety, permanency, and well-being outcomes and seven
 systemic factors;
- Determine what is happening to children and families as they are engaged in child welfare services; and
- Assist states in helping children and families achieve positive outcomes.

The CFSR Process

The CFSR is a two-phase process, as described in 45 CFR 1355.33. The first phase is a statewide assessment conducted by staff of the state child welfare agency, representatives selected by the agency who were consulted in the development of the Child and Family Services Plan (CFSP), and other individuals deemed appropriate and agreed upon by the state child welfare agency and the Children's Bureau.

The second phase of the review process is an onsite review. The onsite review process includes case record reviews, case-related interviews for the purpose of determining outcome performance, and, as necessary, stakeholder interviews that further inform the assessment of systemic factors. The onsite review instrument and instructions are used to rate cases, and the stakeholder interview guide is used to conduct stakeholder interviews.

Information from both the statewide assessment and the onsite review is used to determine whether the state is in substantial conformity with the seven outcomes and seven systemic factors. States found to be out of substantial conformity are required to develop a Program Improvement Plan (PIP) to address the identified areas out of substantial conformity. States participate in subsequent reviews at intervals related to their achievement of substantial conformity. (For more information about the CFSRs, see the *Child and Family Services Reviews* at http://www.acf.hhs.gov/programs/cb.)

In Alaska, the Children's Bureau, previously conducted CFSR reviews in 2002 and 2008, respectively. Alaska, like all states did not pass the entire CFSR in either of the previous reviews, nor is it expected that Alaska will pass all areas of the 2017 review. In collaboration with our federal and state partners the Office of Children's Services will be developing a 2-year PIP based on the findings of the 2017 CFSR. Additionally, the PIP will assist Alaska with further development of our next CFSP which will be in effect from 2019-2024. The CFSP will guide the program and practice development in Alaska towards improving outcomes for children and families beyond the completion of the PIP.

Integration of the CFSP/APSR and CFSR Statewide Assessment

The CFSR process is intended to be coordinated with other federal child welfare requirements, such as the planning and monitoring of the CFSP. The Children's Bureau is encouraging states to consider the statewide assessment as an update to their performance assessment in the state's most recent CFSP and/or Annual Progress and Services Report (APSR) rather than a separate assessment process and reporting document. Most of the content for the statewide assessment overlaps with the CFSP/APSR and the same expectations for collaboration with external partners and stakeholders exist across all planning processes. States can use the statewide assessment process to re-engage these partners and stakeholders in preparation for the CFSR.

The Statewide Assessment Instrument

The statewide assessment instrument is a documentation tool for states to use in capturing the most recent assessment information before their scheduled CFSR. Each section, as outlined below, is designed to enable states to gather and document information that is critical to analyzing their capacity and performance during the statewide assessment phase of the CFSR process.

- Section I of the statewide assessment instrument requests general information about the state agency and require a list of the stakeholders that were involved in developing the statewide assessment.
- Section II contains data profiles for the safety and permanency outcomes. These include the data indicators, which are used, in part, to determine substantial conformity. The data profiles are developed by the Children's Bureau based on the Adoption and Foster Care Analysis and

Reporting System (AFCARS) and the National Child Abuse and Neglect Data System (NCANDS), or on an alternate source of safety data submitted by the state.

- Section III requires an assessment of the seven outcome areas based on the most current information on the state's performance in these areas. The state will include an analysis and explanation of the state's performance in meeting the national standards as presented in section II. States are encouraged to refer to their most recent CFSP or APSR in completing this section.
- Section IV requires an assessment for each of the seven systemic factors. States develop these responses by analyzing data, to the extent that the data are available to the state, and using external stakeholders' and partners' input. States are encouraged to refer to their most recent CFSP or APSR in completing this section.

The Children's Bureau encourages the state to use this document "as is" to complete the assessment, but the state may use another format as long as the state provides all required content. The statewide assessment instrument is available electronically on the Children's Bureau website at http://www.acf.hhs.gov/programs/cb/resource/round3-cfsr-statewide-assessment.

Completing the Statewide Assessment

The statewide assessment must be completed in collaboration with state representatives who are not staff of the state child welfare agency (external partners or stakeholders), pursuant to 45 CFR 1355.33 (b). Those individuals should represent the sources of consultation required of the state in developing the Title IV-B State Plan and may include, for example, Tribal representatives; court personnel; youth; staff of other state and social service agencies serving children and families; and birth, foster, and adoptive parents or representatives of foster/adoptive parent associations. States must include a list of the names and affiliations of external representatives participating in the statewide assessment in section I of this instrument.

Alaska has engaged partners and stakeholders through the CFSP, APSR and now the CFSR processes. Our partners have been instrumental in the development of Alaska's Statewide Assessment and many will participate as reviewers in the CFSR.

The Children's Bureau encourages states to use the same team of people who participate in the development of the CFSP to respond to the statewide assessment. Additionally, the Children's Bureau also encourages states to use this same team of people in developing the PIP. Members of the team who have the skills should be considered to serve as case reviewers during the onsite review.

How the Statewide Assessment Is Used

Information about the state child welfare agency compiled and analyzed through the statewide assessment process may be used to support the CFSR process in a range of ways. The statewide assessment is used to:

- Provide an overview of the state child welfare agency's performance for the onsite review team;
- Facilitate identification of issues that need additional clarification before or during the onsite review;
- Serve as a key source of information for rating the CFSR systemic factors; and
- Enable states and their stakeholders to identify early in the CFSR process the areas potentially needing improvement and to begin developing their PIP approach.

Statewide Assessment Instrument: Introduction

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Public reporting burden for this collection of information is estimated to average 240 hours for the initial review and 120 hours for subsequent reviews. This estimate includes the time for reviewing instructions, completing the assessment, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Statewide Assessment Instrument

Section I: General Information

Name of State Agency: Alaska Department of Health and Social Services; Office of Children's Services

CFSR Review Period

CFSR Sample Period:

- April 1, 2016 through February 28, 2017
- Period of AFCARS Data: AFCARS FFY 16A & FFY 16B data
- Period of NCANDS Data: NCANDS FFY16 (10/1/2015 –9/30/2016)
- (Or other approved source; please specify if alternative data source is used):Online Resources for Children in Alaska (ORCA): the Office of Children's Services' Statewide Automated Child Welfare Information System(SACWIS)
- Case Review Period Under Review (PUR): April 1, 2016 through on-site review (May22-26, 2017)

State Agency Contact Person for the Statewide Assessment

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Statewide Assessment Participants

Provide the names and affiliations of the individuals who participated in the statewide assessment process; please also note their roles in the process.

State Response:

INTER	NAL	PAR	RTN	ERS

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Tracy Spartz Campbell, OCS Deputy Director

Travis Erickson, Division Operation Manager

KariLee Pietz, Social Services Program Administrator

Kim Guay, Social Services Program Administrator

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Linda Beecher, State of Alaska, Public Defender Agency

Sarah Redmon, Facing Foster Care in Alaska

Anita Alves, State of Alaska, Office of Public Advocacy (GAL)

Jamie Yaletchko, Facing Foster Care in Alaska

Section II: Safety and Permanency Data State Data Profile

State Data Profile deleted in its entirety

Section III: Assessment of Child and Family Outcomes and Performance on National Standards

Instructions

Refer to the section in the state's most recent Child and Family Services Plan (CFSP) or Annual Progress and Services Report (APSR) that provides assessment information on state performance on each of the seven child and family outcomes. Review the information with the statewide assessment team and determine if more recent data are available that can be used to provide an updated assessment of each outcome. If more recent data are not available, simply refer to the most recent CFSP or APSR document by indicating the document name/date and relevant page numbers where the information can be found for each outcome. Analyze and explain the state's performance on the national standards in the context of the outcomes.

For Alaska specifically, the current CFSP and APSR can be found at the following links:

- CFSP: http://dhss.alaska.gov/ocs/Documents/Publications/pdf/2014-2019 CFSP.pdf
- APSR: http://dhss.alaska.gov/ocs/Documents/Publications/pdf/2017 APR.pdf

In past CFSRs, Alaska included in the data analysis the statewide data indicators as outlined in the Adoption and Foster Care Analysis and Reporting System (AFCARS) data reports (found in Section II of this report). For Round 3 of the CFSR, the Children's Bureau issued Technical Bulletin # 9 on October 16, 2016, which stated, in part, that for states that have a CFSR in FY 2016 or in subsequent years, the CB will utilize the AFCARS data indicators for context, but will not utilize them for the final report on substantial conformity. For this reason, Alaska's state performance for CFSR Items 1-18, will be primarily based on the outcomes from the OCS Quality Assurance Case Reviews, as well as through the data reporting from the OCS Online Resource for Children of Alaska (ORCA) data system that used the Child and Family Services Review (CFSR) data dictionary to replicate the CFSR measures.

The OCS operates an ongoing quality assurance case review system to monitor quality of care and adherence to state and federal practice standards. The reviews are conducted through the Evaluation Unit (QA) which is located organizationally in state office and reports to the Director. Reviews are conducted in a manner similar to the CFSR process. The reviews follow a standard protocol to include use of the federal review instrument (OSRI, On-site Review Instrument), telephonic interviews with parents, Tribes, Guardians ad Litem, and the worker or supervisor for the case. Cases are randomly selected for the on-going reviews to include both foster care and inhome cases. The review findings are compiled in a report distributed to management and the field office and a debriefing is held with the field office. The findings are incorporated into the Continuous Quality Improvement Process (CQI) through the CQI Committee. Field Offices prepare a plan of improvement in response to the review findings. In 2016 twelve field offices were reviewed from across the regions with 149 cases reviewed.

A. Safety

Safety Outcomes 1 and 2

Safety outcomes include: (A) children are first and foremost, protected from abuse and neglect; and (B) children are safely maintained in their own homes whenever possible and appropriate.

- For each of the two safety outcomes, include the most recent available data demonstrating the state's performance. Data must include state performance on the two federal safety indicators, relevant case record review data, and key available data from the state information system (such as data on timeliness of investigation).
- Based on these data and input from stakeholders, Tribes, and courts, include a brief assessment of strengths and concerns regarding Safety Outcomes 1 and 2, including an analysis of the state's performance on the national standards for the safety indicators.

State Response:

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

CFSR Item 1: Timeliness of initiating investigation of reports of child maltreatment.

The percentage of Initial Assessments initiated within state policy timeframes will be 95% or more.

(Note: For purposes of the Statewide Assessment, the Office of Children's Services refers to investigations as Initial Assessments).

Timeliness of Initiation

Year	Case Count	Strength	Area Needing Improvement	Strength Rating
2016	79	43	36	54%
2015	177	98	79	55%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

• CFSR Measure: Maltreatment Recurrence

Of all children who were victims of a substantiated maltreatment report during a 12-month period, the percentages who were victims of another substantiated maltreatment report within 12 months will be 9.1% or less.

Maltreatment Recurrence

Initial Substantiation Year	Children with 1or more Substantiations	Subsequent Substantiation within 12 Months	Rate
2015*	3219	588	18.6%
2014	2690	510	19.0%
2013	2523	501	19.9%

Source: OCS CFSR Report 001, Recurrence of Maltreatment.

CFSR Measure: Maltreatment in Out-of-Home Care

Of all children in out-of-home care during a 12-month period, the victimization rate per 100,000 days of care will be 8.5 or less.

Maltreatment in Out of Home Care*

Calendar Year	In OOH Care	Total Days	Substantiated Maltreatment	Rate
2016	4021	1018587	100	9.8
2015	3662	912630	136	14.9
2014	3185	753628	99	13.1
2013	2833	693969	83	12.0

Source: OCS CFSR Report 002, Maltreatment in Foster Care.

The rate of maltreatment by foster parents only is considerably lower. This data is not included to dispute the data in the Maltreatment in Out-of-Home Care table (above), but rather, to provide additional information on the role of foster parents regarding maltreatment in out-of-home care.

^{*2016} data are not missing; it is used to calculate recurrence for 2015. Full information on federal data rules is located in Appendix I.

^{*}OCS stakeholders are accustomed to looking at this data in terms of the number or percent of children that were maltreated by a foster parent during a specified period. The federal measure considers children on trial home visits to be in foster care, and it includes maltreatment by anyone (i.e., the parent of a child on a trial home visit). The federal measure addresses the issue of differing durations of care (i.e., a child in care only 30 days vs. a child in care 365 days by dividing the total number of maltreatment events by the total number of days in care.

Maltreatment in Care by Foster Parents

Calendar Year	In Care	Total Days	Substantiated Maltreatment	Rate
2016	4021	1018587	35	3.4
2015	3662	912630	42	4.6
2014	3185	753628	27	3.6
2013	2833	693969	42	6.1

Source: OCS CFSR 002 Maltreatment in Foster Care.

Assessment of Safety Outcome 1 Strengths and Concerns

The CFSR Item 1, Timeliness to Initiating Investigation of Reports of Harm, is supported by two CFSR measures related to Maltreatment in Foster Care. The data for this item shows that the Office of Children's Services (OCS) state performance did not meet either of the two CFSR safety data indicators for the national standard for Safety Outcome 1.

Above, the QA case review data shows that the rating for CFSR Item 1: Timeliness of Initial Assessment decreased from 55% to 54% case review sample data. This is consistent with the ORCA data below, for all Initial Assessments completed in the year, which shows marginal improvement since 2014, but a rate of 56.8% that is well below the national performance of 95%. The impacts of high caseloads are likely the primary reason that the rate for this item is not higher.

Timeliness of Initiation

Year	Completed Initial Assessments	Initiation Rate
2016	8309	56.8%
2015	7759	52.9%
2014	7101	52.4%

Source: ORCA Data Report, RR 00050 Completed Initial Assessment Between Dates.

Alaska has a priority response system outlined in the OCS Child Protective Services Manual, for which workers are mandated to respond to Protective Services Reports (PSRs) in the following priority:

OCS Protective Services Report (PSR)—Priority Response

Priority Level	Response level
Priority 1	PSRs must be responded to as soon as possible but no later than 24 hours of the time the report is received by OCS.
Priority 2	PSRs must be responded to no later than 72 hours of the time the report is received by OCS.
Priority 3	PSRs must be responded to within seven days of the time the report is received by the OCS.

Source: OCS Child Protection Services Manual, Chapter 2: Intake, policy 2.1, pgs. 3-4.Revised 10/1/2016)

When looking at the data as it specifically relates to each priority response level, timely response is more frequent with higher priority level PSRs. The timely response rate in 2016 was: priority 1, 71.9%; priority 2, 60.1%; priority 3, 51.3%. This is the percentage of reports to which the OCS had face-to-face contact with each alleged victim within the response priority time.

Timeliness of Initiation by Priority

Year	Initial Assessments	Priority 1	Priority 2	Priority 3	All
2016	8309	71.9%	60.1%	51.3%	56.8%
2015	7474	72.5%	58.1%	45.7%	52.9%
2014	7386	71.4%	62.8%	44.7%	52.4%

Source: ORCA Data Report, RR 00050 Completed Initial Assessment Between Dates.

While workers are making face-to-face contacts with each alleged victim, the contacts are not always timely and workers struggle with completing the necessary documentation for the Initial Assessments in a timely manner. Of the 4,050 Initial Assessments open as of 1/10/17, 1,687 had been open over 120 days. High staff turnover causes many of these Initial Assessments to be reassigned to caseworkers that are already carrying caseloads well above the Child Welfare League of America (CWLA) recommended maximum caseload size (Appendix II). The reassigned workers, generally, have no history with the case. When the departed worker did not adequately document work, the reassigned worker may need to duplicate family and collateral contacts to assess and establish safety. Over many years, Alaska has engaged in numerous targeted efforts to address this problem; each reduced the number of open Initial Assessments temporarily, but these gains could never be sustained due to:

- Chronically high staff turnover. In 2016, 34% of case carrying positions became vacant. Long term analysis is challenging due to incomplete record keeping, but it appears this rate is consistent with historical norms.
- *Chronically high caseloads*. Caseloads have exceeded the CWLA recommended standard of 12 cases per worker for many years, and were 25% above the CWLA standard in 2016.
- Failure to maintain a consistent Initial Assessment practice model. Prior to 2006, OCS followed the Structured Decision Making (SDM) model. Transition to a Safety Initial Assessment model began in 2006, and took several years to be fully implemented. Following

full implementation, results did not meet expectations. In response, a series of additional changes to training and/or practice followed. The net impact has been that Safety Assessment significantly increased the amount of time required to fully complete an Initial Assessment, but did not improve outcomes for timeliness of Initial Assessments.

Alaska's state performance and rating for the CFSR measure, Maltreatment Recurrence, is nearly double the national standard of 9.1% or less; in Alaska the QA case review results show a rate at 18.6%. OCS is addressing a number of contributing factors involving identification, monitoring, and decision making with regards to high-risk children.

• Screen in rates dropped below 40% in 2012. In response, a comprehensive file review was conducted by managers in conjunction with the Alaska Child Welfare Academy (CWA) at the University of Alaska, Anchorage. These case reviews revealed that too many reports were being screened out due to incorrect inclusion of Impending Danger standards into Intake screening decision making. While Impending Danger is useful in determining child safety as a part of the Initial Assessment, it can only be reliably assessed following the type of face-to-face contacts that occur during Initial Assessments. Incorporating Impending Danger principles into Intake screening decisions resulted in PSRs reported to OCS being screened out because the child was perceived as safe at the time of the report, despite the allegations that maltreatment had occurred recently.

Screening Rates by Year

Year	Reports	Screened In Reports	Screen In Rate
2016	17402	9502	54.6%
2015	16564	9164	55.3%
2014	15678	8133	51.9%
2013	15726	7474	47.5%
2012	16118	6404	39.7%

Source: OCS CFSR 003 Screening Rate by Jurisdiction Region.

The chart above outlines the data that shows an increase in the number of screened in reports in the last five years.

Nationally, states have moved towards an intake model in which receiving, documenting and screening decisions for PSRs is centralized to ensure that screening decisions are determined on a consistent and standardized basis statewide. In Alaska, OCS began transitioning towards centralized intake in 2016, in order to minimize variances between field offices and regions as to how PSRs are processed. Intake supervisors were consolidated to Anchorage (2) and Wasilla (1); these supervisors make final screening decisions on intakes received by staff in the Anchorage, Northern, Southcentral, and Southeast Regions. The Anchorage Region receives and screens reports for the Western Region. Supervision of these supervisors was transferred to a statewide Intake manager, who has working closely with staff to improve the consistent application of screening decision standards. The following table shows the high degree of consistency between regions in 2016 as compared to prior years.

Screening Rates by Jurisdiction Region*

Year	Anchorage	Northern	Southcentral	Southeast	Western	Statewide
2016	53.5%	54.0%	53.5%	53.8%	65.8%	54.8%
2015	59.5%	46.7%	54.0%	54.7%	67.4%	55.4%
2014	51.4%	43.9%	54.6%	55.1%	74.2%	51.6%
2013	42.4%	46.8%	52.9%	52.9%	72.0%	47.3%
2012	39.9%	30.0%	47.6%	44.1%	66.1%	39.3%

Source: OCS CFSR 003 Screening Rate by Jurisdiction Region.

- Identifying and monitoring high-risk children was also identified as an area needing attention. Efforts in this area garnered additional attention following a spike in infant mortality events in 2014. OCS has several pilot projects in place, although only the initiatives involving children under age one are statewide. The number of infant mortality incidents was unchanged in 2015 and significantly decreased in 2016; at this point, it is not possible to directly correlate this decrease to any of the following OCS efforts:
 - o An Anchorage initiative, "Five and Five," required additional case staffing for screened in reports when at least one alleged victim was under age six and
 - five or more prior maltreatment reports; or
 - any child in the family has been removed from the home; or
 - any caretaker has had parental rights terminated in the past.

Five and Five Initial Assessments are still flagged in the Open Initial Assessment Report (OCS ORCA Report, RR00159), and additional scrutiny is given if the screened in reports have been open longer than 90 days. Outcome comparison data is not available.

- The High-Risk Infants (HRI) effort flags Initial Assessments that have a child under age one, and
 - the family has three or more prior maltreatment reports; or
 - any child in the family has been removed from the home.

These Initial Assessments are flagged in the Open Initial Assessment Report, (OCS ORCA Report, RR00159) and additional scrutiny is given if they have been open longer than 45 days. Outcome comparison data is not available.

OCS is partnering with Eckerd Kids in a statewide trial initiative that identifies highrisk children under age three that are alleged victims of maltreatment in a maltreatment report. The Eckerd Kids Rapid Safety Feedback initiative uses proprietary algorithms to identify high risk children. Additional tracking and case

^{*}Jurisdiction Region is the Region where the alleged maltreatment occurred

staffing are facilitated by the OCS Evaluation Unit; outcome comparison data is not available.

• The Maltreatment Assessment Protocol (MAP) effort requires users to follow a standardized decision tree process to determine when maltreatment allegations should be substantiated. The MAP began as a paper process in February, 2015, and was incorporated into ORCA in June, 2015. There were three goals: 1) reduce the wide variances in regional substantiation rates by incorporating a research-based substantiation model; 2) allow substantiations based on risk by including AS 47.10.011 statutory definitions; 3) improve due process for alleged perpetrators by automating notices informing them of findings and attaching the form required to appeal the finding. The following chart shows that although the statewide substantiation rate has remained nearly constant, variations between regions have decreased. Continued work in these areas may reduce these differing rates further, but other factors are involved. For example, case reviews conducted by the OCS Division Operations Manager for Field Operations indicate that reporters are less likely to report maltreatment events deemed minor or questionable, which are the types of reports that are more likely to be not substantiated. Fewer, potentially "not substantiated" reports, result in a higher substantiation rate.

Substantiation Rate

REGION	2014	2015	2016
Anchorage	11%	19%	21%
Northern	33%	35%	31%
Southcentral	30%	36%	30%
Southeast	22%	27%	18%
Western	41%	33%	37%
Statewide	23%	26%	26%

Source: OCS ORCA Report, RR 00050 Completed Initial Assessments Between Dates

The combined result of these efforts has been a significant increase in the number of PSRs assigned to Initial Assessment workers (a 48% increase since 2012), even though the overall number of maltreatment reports received during this period has increased only 7% (OCS CFSR Report, 0016, Allegations, Screening, Substantiation). There has been a corresponding, and significant, increase in the count of children removed from their homes, as outlined in the section: Assessment of Safety Outcome 1 Strengths and Concerns, earlier in this report.

The rate of maltreatment for children residing in out-of-home care decreased significantly in 2016. OCS asserts the stated rate of 9.8% is artificially low due to the high number of incomplete Initial Assessments, awaiting documentation and completion. In 2016, only 100 maltreatment reports were substantiated on children in care; however, 157 additional reports had at least 1 unresolved allegation. There is still a small backlog from 2015 on reports of maltreatment for children in out-of-home care; 26 children have unresolved allegations. It is not likely that a high number of these will be substantiated, but it can be stated with confidence that this rate for this

^{*}PSRs substantiated during the year (regardless of report date)

measure would be higher, if Initial Assessments for children in out-of-home care were completed in a timelier manner.

A significant aspect to the rates of maltreatment for children in out-of-home care is that this rate includes those children who are residing in their parents' home on a trial home visit. The case review data shows that parents and their partners are twice as likely to maltreat children in care during a trial home visit as foster parents who are caring for a child. This suggests that ongoing safety assessment of children on trial home visits is an area that can be improved. The following table shows the percentages of maltreatment by perpetrator role.

Perpetrators of Maltreatment

Year	Foster Parent Perpetrator	Parent Perpetrator	Other Perpetrator*
2016	35.0%	65.0%	13.0%
2015	30.9%	60.3%	13.2%
2014	27.3%	65.7%	14.1%

Source: OCS CFSR 002 Maltreatment in Foster Care.

^{*}Note: "Other Perpetrator" is generally another adult resident, often a paramour, in the home.

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

CFSR Item 2: Services to family to protect child(ren) in the home and prevent removal or re-entry into foster care.

The percentage of cases in which the agency took least intrusive actions to control present or impending danger will be 95% or more.

2016 Safety Maintained In Home When Possible and Appropriate

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	40	37	3	93%
In Home	52	31	21	60%
Total	92	68	24	74%

Source: OCS Quality Assurance Annual Report, CY 2016

2015 Safety Maintained In Home When Possible and Appropriate

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	97	70	27	72.2%
In Home	92	34	58	37.0%
Total	189	104	85	55.0%

Source: OCS Quality Assurance Annual Report, CY 2015

CFSR Item 3: Risk and Safety Assessment and Management

The percentage of cases in which the agency took sufficient actions to control present or impending danger will be 95% or more.

2016 Sufficient Actions to Control Present/Impending Danger

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	83	61	22	73%
In Home	66	28	38	42%
Total	149	89	60	60%

Source: OCS Quality Assurance Annual Summary, CY 2016

2015 Sufficient Actions to Control Present/Impending Danger

			Area	
	Case		Needing	Strength
Case Type	Count	Strength	Improvement	Rate
Out of Home	166	102	64	61.4%
In Home	111	23	88	20.7%
Total	277	125	152	45.1%

Source: OCS Quality Assurance Annual Summary, CY 2015

Assessment of Safety Outcome 2 Strengths and Concerns

Alaska's state performance did not meet either of the two Safety Outcome 2 national standards.

Although OCS state performance falls short of the national standards in most items, the strength ratings for out-of-home cases are generally far better than ratings for in-home cases. For example, CFSR Item 2, Services to Family to Protect Child(ren) in the home and prevent removal or re-entry into foster care, outlines a rating for out-of-home cases at 93% that nearly meets the national performance of 95%, but the in-home rating of 60%, is significantly lower than the national performance. However, the data from both in-home and out-of-home populations in this measure represents significant improvements from 2015, whereby OCS improved from 55% to 74% for Item#2.

Risk and Safety Assessment and Management, CFSR Item 3, strength ratings are also higher for out-of-home cases. Both ratings are significantly higher than the previous year, with the out-of-home rating 31% higher than the in-home rating in 2016. OCS QA case reviewers note that OCS has been relatively strong at ongoing safety assessment, but weaker at initial safety assessment. Improvement in this area is largely attributed to better needs assessment, increased use of safety plans as an intervention to manage safety for in-home cases, and improved quality of safety plans. Additionally, improved documentation contributed to the higher rating in 2016. QA case reviewers noted a decrease in situations in which activities appeared to have occurred, but insufficient documentation prevented verification of the item. The improved documentation by caseworkers likely accounted for the higher ratings for this item from 2015 to 2016.

One significant factor encompassed under the Item 3 ratings is Alaska's high rate of maltreatment recurrence. Many cases, especially in-home cases, are opened following an incident of repeat maltreatment. These cases cannot be rated as a strength area even if all other elements of this item are met. QA case reviewers note a high number of cases each year in which this is the only factor preventing the cases from being rated as a strength.

OCS has struggled with in-home case identification and management, over the years. It has long been an OCS philosophy that children should be maintained in their own homes whenever possible. Trainings for the OCS practice model adopted in 2006 asserted that effectively applying the model would result in a shift to far more in-home cases as the new safety planning strategies were employed. The reality has been far different. Although the number of in-home cases increased significantly after implementation, subsequent case reviews by the OCS Division Operations Manager for field operations (and others) determined that the majority of these cases should not have been opened as in-home cases, but rather, the children should have been removed due to the presence of safety threats that could not be reasonably managed in the home

In some situations, high caseloads were the problem. In-home cases require a higher level of monitoring, more intensive case management services, and more frequent caseworker visits than cases with children placed in out-of-home care. The OCS Child Protection Manual, (Policy 2.2.10.2 Case Decision) requires cases determined to be 'high risk' to be opened for services. Although there were provisions for overriding the high risk determination, some supervisors believed policy required opening these cases, even when they knew no services would be provided and no subsequent contact would be made. Many such cases were opened despite the knowledge that caseload size made it impossible to provide the required services. Many, in fact, never had a single OCS contact after the Initial Assessment was complete.

In other situations, needed resources simply were not available. Alaska has hundreds of very small communities with no road access, no OCS office in the community, and extremely limited local services. Service providers and OCS workers can only reach these locations via small aircraft, and weather delays are common. Such contact generally occurs monthly, although some areas are somewhat more frequent. Tribal social services agencies provide assistance, but they face the same travel problems as OCS workers. In these areas, it is simply not practical to develop a safety plan that requires frequent contact with OCS workers or service providers in order for the child to safely remain in the home

The most concerning problem, though, was the incorrect determination of safety. Incorrect interpretation of Impending Danger standards resulted in many children remaining in their homes that should have been removed. Too often, households experiencing temporary sobriety or absence of violence were misinterpreted as safe for children to remain in, despite evidence that these conditions were chronic in nature. Children left in these homes were subjected to additional maltreatment.

Incorrect in-home safety determinations can also be the result of widely varying interpretations by judges in some regions as to whether evidence presented in court constitutes subjection to maltreatment as defined in AS 47.10.011. In areas, where judges are reluctant to make this finding, caseworkers are faced with a difficult choice: remove children from unsafe homes knowing they will quickly be returned by the court, or do not attempt removals that would otherwise be advised because they are not likely to prevail in court. The result is the same: in-home cases with safety threats that cannot be fully managed.

Even in areas with many resources and OCS has dedicated in-home caseworkers, outcomes were poor for children and families in in-home cases. The high incidence of subsequent maltreatment reports, substantiations, or removals for children served in in-home cases, supports the previous assertion that, had Impending Danger been correctly assessed, a significant percentage of these children should have been removed from their homes. Increased attention to these issues has resulted in a decrease of over 50% in the number of in-home cases since 2015.

QA case reviewers identified a few areas that are historically problematic for these items, but progress in these areas is partially responsible for the improvedratings.

- Persistent attempts to reach parents following unsuccessful contact attempts. Failure to reach a parent can be misinterpreted as evidence that the contact information is no longer valid, which in turn decreases the likelihood the worker will attempt to contact them again.
- Maintaining efforts to involve parents that are not in close proximity to the child and/or have been less engaged that the other parent. Although it is logical to actively work towards reunification with the more engaged and compliant parent, efforts to contact and engage with the other parent must continue.

Insufficient contact with parents and children is also a contributing factor in this rating. High caseloads and turnover are believed to be the most significant factors. Caseworkers are required to have monthly face-to-face contact with each child and parent. QA case reviewers noted that, as the month progressed and it became clear that there was not enough time to see all children/parents, workers engaged in a triage of sorts in which they determined which children/parents most needed to be seen, leaving other children/parents without the mandated monthly visit.

B. Permanency

Permanency Outcomes 1 and 2

Permanency outcomes include: (A) children have permanency and stability in their living situations; and (B) the continuity of family relationships is preserved forchildren.

- For each of the two permanency outcomes, include the most recent available data demonstrating the state's performance. Data must include state performance on the four federal permanency indicators and relevant available case record review data.
- Based on these data and input from stakeholders, Tribes, and courts, include a brief assessment of strengths and concerns regarding Permanency Outcomes 1 and 2, including an analysis of the state's performance on the national standards for the permanency indicators.

State Response:

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

CFSR Item 4: Stability of Foster Care Placement.

The percentage of cases in which placements will be stable and in the best interests of the child will be 95% or more.

Stability of Foster Care Placement

CY Year	Cases	Strength	Strength Rating
2016	83	74	89%
2015	166	127	77%

Source: Quality Assurance Annual Review Summary, CY 2015 and 2016.

CFSR Measure: Placement Stability

Of all children who enter care in a 12 month period, the rate of placement moves, per 1,000 days of out-of-home care will be 4.12 or fewer.*

Rate of Placement Moves per 1,000 Days in Care

CY Year	Entered Care During Period	Days in Care During Period	Placement Moves	Moves per 1,000 days in Care
2016	1406	237061	1621	6.84
2015	1486	309912	1898	6.12
2014	1328	286797	1602	5.59

Source: OCS CFSR 004 CFSR Placement Stability.

*OCS stakeholders are accustomed to looking at this data in terms of the number of moves per child (i.e., 2 moves a year). This approach does not differentiate between children with 2 moves in 30 total

days of care, and children with 2 moves in 365 (or more) total days of care. The federal measure seeks to account for this by dividing the total number of placement changes by the total number of days in care.

Interpreting the rate is difficult, even with some context. Children entered care throughout the year, were in care an average of 169 days, and averaged 1.2 moves. Meeting the national standard of 4.12 would have required 645 fewer moves. See the Assessment section for more analysis on placement stability.

CFSR Item 5: Permanency Goal for the Child

The percentage of cases where the child's permanency goal is appropriately matched to the child's needs and established in a timely manner, and Adoption and Safe Families Act (ASFA). Termination of Parental Rights (TPR) requirements are met, will be 95% or more.

Permanency Goal for Child

CY Year	Cases	Strength	ANI	Strength Rating
2016	80	60	20	89%
2015	158	119	39	75%

Source: OCS Quality Assurance Annual Review Summary, CY 2015 and 2016

CFSR Item 6: Achieving Reunification, Guardianship, Adoption, or Other Planned, Permanent Living Arrangement

The percentage of cases concerted efforts are made to achieve reunification, guardianship, adoption, or other planned permanent living arrangement will be 95% or more.

Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement

CY Year	Cases	Strength	ANI	Strength Rating
2016	83	57	26	69%
2015	166	92	74	55%

Source: OCS Quality Assurance Annual Summary, CY 2015 and 2016

• CFSR Measure: Permanency in 12 Months of Entry

Of all children who enter care in a 12 month period and stay for 8 days or more, the percent who discharge to permanency within 12 months of entering care will be 40.4% or more.

Permanency within 12 Months of Entry

Year	Entered Care During Period	Discharged to Permanency Within 12 Months	Rate
2015*	1443	393	27.2%
2014	1280	356	27.8%
2013	1014	329	32.4%

Source: OCS CFSR 005 Permanency in 12 Months for Children Entering Foster Care.

• CFSR Measure: Re-entry to Care in 12Months

Of children who enter care in a 12 month period, who discharged within 12 months to reunification, live with relative, or guardianship, the percent who re-entered care within 12 months of their discharge will be 8.3% or less

Re-entry to Care in 12 Months

Year	Entered Care During Period	Discharged to Permanency Within 12 Months	Foster Care Re-Entry	Rate
2015*	1439	320	31	9.7%
2014	1275	285	23	8.1%
2013	1008	234	26	11.1%

Source: OCS CFSR 007 Re-entry to Care in 12 Months.

• CFSR Measure: Permanency in 12 Months for Children in Care 12 to 23 Months

Of children in care on the first day of the 12 month period who had been in care between 12 and 23 months, the percent discharged to permanency within 12 months of the first day will be 43.7% or more.

Permanency in 12 Months for Children in Care 12 to 23 Months

Year	In Care on 1 st Day	Discharged to Permanency Within 12 Months	Rate
2016	794	291	37%
2015	555	175	32%
2014	504	158	31%

Source: OCS CFSR 006 Permanency in 12 Months for Children In Care Over 12 Months.

^{*2016} data is not missing; it is used to calculate permanency for children entering care in 2015. Full information on federal data rules is located in Appendix II.

^{*2016} data is not missing; it is used to calculate re-entry to care for children discharged in 2015. Full information on federal data rules is located in Appendix II.

• CFSR Measure: Permanency in 12 Months for Children in Care 24 Months or More

Of children in care on the first day of the 12 month period who had been in care for 24 months or more, the percent discharged to permanency within 12 months of the first day will be 30.3% or more

Permanency in 12 Months for Children in Care 24 Months or More

Year	In Care on 1 st Day	Discharged to Permanency Within 12 Months	Rate
2016	615	211	34%
2015	498	170	34%
2014	494	126	26%

Source: OCS CFSR 006 Permanency in 12 Months for Children In Care Over 12 Months.

Assessment of Permanency Outcome 1 Strengths and Concerns

OCS did not meet the national standard for the Items #4, #5, and #6, in Permanency Outcome 1; however, there have been significant improvements from the prior year in several items and CFSR measures. These improvements occurred despite a 52.5% increase in the number of children in out-of-home care since 1/1/14. The rate of increase to the children in care population slowed to 7% in 2016, as the number of removals decreased slightly.

Unique Children Entering Out-of-Home Care

CY Year	In Care on 1st Day*	Removed During Year**	Change From Previous Year	Percentage Change
2017	2984			
2016	2778	1413	-73	-5.2%
2015	2271	1486	157	10.6%
2014	1956	1329	269	20.2%
2013	1859	1060	59	5.9%

Source: OCS CFSR 008 In Care on 1st Day of Period, and OCS CFSR 009 Removals by Year Unique Children.

Despite the continued increases in the number of children in out-of-home care, the majority of children served in out-of-home care have stability in their living situations. The OCS QA case review 2016 rating of 89% for CFSR, Item #4, Stability of Foster Care Placement, is near the national performance, and represents a 12% improvement over 2015. In 2016, 69% of children entering care had one or fewer placement changes, which represents an increase of 5% over 2015. Another 20% of the children in care had only two placement changes. The combined rating for these children is 4.36 moves per 1,000 days in foster care, which is near the national performance of 4.12; however, the number of placement changes for the remaining 21% of children elevates the overall rate to 6.84. When looked at in combination, these data points reinforce the conclusion that most children have stability in their living situations, but there remain too many children with too many placement changes. The QA case review

^{*}includes youth over 18 of age and Trial Home Visits over six months

^{** 2017} data for removals will not be available until 1/1/18

rating is somewhat higher because reviewers can consider additional factors when rating this item as a strength (i.e., a move was in the best interests of the child).

OCS QA case reviewers rated Item 5, Permanency Goal for the Child, as a strength in 89% of reviewed cases in 2016. QA case reviewers noted improvements in timely filing of Petitions for Termination of Parental Rights (TPR) as one factor in the 14% improvement from the 2015 rating. Although reviewers generally found permanency planning was timely and the goals were appropriate to the child, these efforts did not translate into a timely written case plan. Since 2014, the percentage of children with a completed case plan within 60 days of removal has decreased from 39.6% in 2014 to 26.1% in 2016. This decrease corresponds with the surge of children entering care for the same period of time making it likely the decreasing documentation of written case plans is related to increasedcaseloads.

Initial Case Plan (Permanency Plan)

	Removed and		
	In Care > 60	Timely	
Year	Days	Case Plan	Rate
2016	1224	319	26.1%
2015	1486	542	36.5
2014	1328	526	39.6

Source: OCS CFSR 011 Permanency Plan Timeliness.

Improvements were also observed for CFSR Item 6, Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement; although the 69% rating is well below the national standard. QA case reviewers attribute this improvement to the relationship with Item 5, in which improvements in filing timely TPR petitions show corresponding improvements in this Item for finalized guardianships, adoptions and other planned permanent living arrangements.

Permanency efforts were significantly impacted by the surge of children in out-of-home care. Higher removal counts, combined with a decreasing percentage of children exiting within 12 months, caused the population of children in care over 12 months to balloon. Those in care 12-23 months increased 70%, and those in care between 24-35 months increased 115%. The following chart tracks the ripple effect from the surge of removals that began in 2014. Children removed in 2014 that did not achieve permanency during the year were in care 0-12 months on 1/1/2015, 13-23 months on 1/1/16, and 24-35 months on 1/1/17 (follow highlighted cells left to right).

Children in Out of Home Care by Duration

In Care on 1 st Day of	In Care 0 To 12 Months	In Care 13 To 23 Months	In Care 24 To 35 Months	In Care 36 To 47 Months	In Care 48 To 59 Months	In Care >= 60 Months	Total
2017	1248	814	567	198	66	91	2984
2016	1310	801	372	134	54	97	2768
2015	1169	566	267	107	63	95	2267
2014	897	511	249	130	61	106	1954

Source: OCS CFSR 005 Permanency in 12 Months for Children Entering Care and OCS CFSR 006 Permanency in 12 Months for Children In Care Over 12 Months.

Alaska's Permanency Within 12 Months of Entry rate of 27.2% is well below the national performance of 40.4%. This is nearly identical to the 27.8% rate from 2015, and down from 32.4% in 2014. The decrease directly correlates to the increase of children in care that overwhelmed the system. Caseworkers did not have sufficient capacity to manage all caseload responsibilities, including effective identification and pursuit of permanency options.

The Re-entry to Care rate, 9.7%, is near the national performance of 8.3%. This is the rate at which children that entered during a 12 month period, were discharged within 12 months to reunification, live with relative, or guardianship, and subsequently re-entered care. Although 9.7% is a 1.6% increase over the prior year, it is lower than the 2014 rate of 11.1%. Factors responsible for these changes are not known.

Children in care 12-23 months on 1/1/16 discharged to permanency at a rate of 37%. This is below the national performance of 43.7%, but a 5% improvement over the prior year. Discharges to adoption decreased from 352 in 2014, to 285 in 2015. Over the past several years, OCS responded by initiating a number of efforts designed to focus on timely permanency. These included:

- 'Hot for Permanency' focused on permanency for children in care over 24 months that were currently placed with a relative.
- Administrative Review responsibilities were removed from Permanency Planning Specialists (formerly titled Regional Adoption Specialists), and regular permanency manager meetings were established.
- OCS partnered with Casey Family Programs to bring the Director's Executive Team, regional and state office managers, ICWA specialists, Permanency Specialists, and numerous partners to the table to identify strategies for improvement in this area in September, 2016.

In part due to these efforts, the count of discharges to adoption increased to 347 in 2016, and increasing counts of signed adoption subsidy agreements are expected to result in a significant increase in 2017.

The number of children in care 24 months or more discharged to permanency at a rate of 34% each of the last two years, which exceeds the national performance of 30.3%. The work related to the bulleted permanency efforts mentioned above are likely responsible for maintaining this high rate despite the increasing number of children in this cohort.

The foster care re-entry to care rate is near the national performance. Since 2013, the statewide rate decreased from 11.1% to 9.7%. As the chart below shows, regional rates vary significantly. More analysis is required to determine why the Southeast and Western regions have had the highest rates for the past two years (2014 rates: 17.6% and 10.3%). It should be noted, however, that Western region's entire area of jurisdiction involves remote villages with few or none of the services generally utilized for long-term support of reunified families.

Foster Care Re-Entry Rate by Region

Region	Entered Care During Period	Permanency in 12 Months From Removal	Foster Care Re- Entry	Rate
Anchorage	634	172	17	9.9%
Northern	256	58	4	6.9%
Southcentral	356	43	2	4.7%
Southeast	101	19	3	15.8%
Western	92	28	5	17.9%
Statewide	1439	320	31	9.7%

Source: OCS CFSR 007 Re-entry within 12 Months.

Permanency Outcome 2: The Continuity of Family Relationships and Connections is Preserved for Children

CFSR Item 7: Placement with Siblings

Of cases with at least two siblings in Out of Home care, the percentage in which all siblings are placed together will be 95% or more.

Placement with Siblings

Year	Case Count	Strength	Area Needing Improvement	Strength Rate
2016	39	35	4	90%
2015	89	71	18	79.8%

Source: OCS Quality Assurance Annual Reports, CY 2015 and CY 2016

CFSR Item 8: Visiting with Parents and Siblings in Foster Care

The percentage of cases where children in out-of-home care have visits of sufficient quality with their parents and siblings at a frequency consistent with the child's safety and best interest will be 95% ormore.

Visiting with Parents and Siblings in Foster Care

Year	Case Count	Strength	Area Needing Improvement	Strength Rate
2016	74	62	12	84%
2015	141	86	55	61.0%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

CFSR Item 9: Preserving Connections

This measure determines whether concerted efforts were made to maintain the child's connections to his or her neighborhood, community, faith, extended family, Tribe, school, and friends.

Efforts Made to Maintain Connections

Year	Case Count	Strength	Area Needing Improvement	Strength Rate
2016	83	78	5	94%
2015	165	145	20	87.9%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

CFSR Item 10: Relative Placement

The percentage of cases where maternal and paternal kinship placements are sought and considered will be 95% or more.

Kinship Placements are Sought and Considered

Case Count		Strength	Area Needing Improvement	Strength
Year 2016	83	79	4	Rate 95%
2015	162	150	12	92.6%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

CFSR Item 11: Relationship of Child in Care with Parents

The percentage of cases where concerted efforts were made to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation will be 95% or more.

Relationship of Child in Care with Parents

Year	Case Count	Strength	Area Needing Improvement	Strength Rate
2016	73	58	15	79%
2015	81	53	28	65.4%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

Assessment of Permanency Outcome 2 Strengths and Concerns

Alaska is at or near the national standard for three items in Permanency Outcome 1, and strength ratings improved significantly for each item from 2015. QA case reviewers note that the quality of casework in this area was similar to the prior year, but more cases were rated as a strength in response to federal scoring guidance. Had 2015 QA case reviews been completed with the same scoring protocol, they would be at or near 2016 ratings.

Permanency Outcome 2 2015 to 2016 Comparison

Item	2015 Strength Rating	2016 Strength Rating
Placement with Siblings	80%	90%
Visiting with Parents and Siblings in Foster Care	61%	84%
Preserving Connections	88%	94%
Relative Placement	93%	95%
Relationship of Child In Care with Parents	65%	79%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

Placing siblings together CFSR, Item 7 is one of the highest OCS priorities. This item determines if concerted efforts were made to ensure that siblings are placed together. The 2016 strength rating of 90% represents a significant improvement over 2015 case review findings, and is very near the national standard of 95%. Of the 2444 children in an active foster care placement on 1/1/2017, 1747 children had a sibling in care. Of these, 1408 (80.6%) were placed with a sibling. This represents a 4% increase from 1/1/2016. Notice, that the QA case review score is higher because it measures concerted efforts to place siblings together. Cases can be rated as a strength if efforts were made, even if the siblings were not ultimately placed together.

Children Placed with Siblings*

Cinidicii i lacca with Sibilings							
Year	Children	No Siblings	Placed w/ Sibling	Not Placed with Sibling	Percent Placed w/Sibling		
2017	2444	697	1408	339	80.6%		
2016	2233	599	1243	391	76.1%		

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

The strength rating for Item 8, Visiting with Parents and Siblings in Foster Care, improved 23% from 2015, and at 85% is approaching the national performance of 95%. This improvement occurred even as the number children in Out of Home care continued to grow.

QA case reviewers identified two factors in 2015 that were less common in 2016, but were often present in cases that were not rated as a strength for Item 8. The first factor involves cases in which one parent is more compliant and/or engaged than the second parent. In these situations, caseworkers did not make sufficient efforts to engage with the less compliant parent. The second factor is similar; unsuccessful attempts to contact a parent were too often interpreted as evidence the parent was refusing contact or had moved to an unknown location. Caseworkers then ceased efforts to contact and/or engage with these parents. QA case reviewers were later able to contact many of these parents using existing contact information from the case file as a part of the case review process. QA case reviewers noted that in many of these cases where they were able to locate the parent, the parent expressed interest in being involved with the case planning process for the child(ren). For purposes of the QA case reviews, cases in which there is no contact with a parent cannot be rated as a strength unless the parent's whereabouts were unknown, or the parent explicitly stated he/she did not want to be involved.

The Item 9, Preserving Connections, performance rated 94%, and is only 1% below the national standard. OCS attributes this to systematic efforts to identify and coordinate with Tribes, and to identify and place children with relatives. QA case reviewers note Tribal workers generally praise OCS efforts to keep the Tribe apprised of events and to ensure that children in out of preference foster placements are afforded opportunities to participate in cultural events. Of the 1525 Alaska Native/American Indian children in care on 1/12/17, over 70% were in a preference placement. Of these, 50.4% were in a first preference placement.

^{*}Children in current foster care placement, excluding Trial Home Visits and residential care placements.

2017 ICWA Placement Preference Level

	First	Second	Third	Fourth	Out of Preference	Total
Preference	768	108	153	40	456	1525
Rate	50.4%	7.1%	10.0%	2.6%	29.9%	100.0%

Source: ORCA Data Report, RR 00163 Children in Out of Home Placement.

Alaska meets the national standard for Item 10 Relative Placement with a strength rating of 95%. This item rates efforts to seek and consider maternal and paternal kinship placements. With 229 federally recognized Tribes and 55% of children in care Alaska Native/American Indian (AN/AI), most placement decisions involve the placement preferences outlined in the Indian Child Welfare Act (ICWA). Alaska also has a state law setting forth similar placement preferences for non-AN/AI. Caseworkers and Tribes work together to identify relatives as soon as possible after removal. Tribal workers and relatives are participants in placement review meetings, such as Team Decision Making (TDM), which are held for the vast majority of placement changes.

The percentage of children placed with relatives has risen over 10% since 1/1/2014.

Placed with Relative Snapshot

Year	All Children	Alaska Native/American Indian	Non-Alaska Native/American Indian
2017	51.8%	51.8%	51.8%
2016	46.9%	44.6%	49.9%
2015	45.0%	44.3%	46.0%
2014	41.4%	41.2%	41.6%

Source: OCS CFSR 014 Relative Placements.

A significant number of children that are not currently placed with a relative have been placed with a relative in the past. Relative placements can disrupt for a number of reasons, including:

- After placement, it is discovered that a child physical or mental health needs exceed the level of care that can be provided in a home setting;
- The impact of harassment by biological parents creates an untenable situation; this is exaggerated when the parent and relative foster parent reside near each other or in a small community;
- Relative foster parents underestimate the impact of caring for additional children on their household:
- Support services in remote locations are often extremely limited.

Accounting for disrupted placements gives a more accurate view of overall relative placement efforts. The table below includes children placed with a relative (on first day of the year) and those that are not currently placed with a relative but have had at least one relative placement since removal.

At Least 1 Relative Placement since Removal*

Year	All Children	AN/AI	Non-AN/AI
2017	65.7%	67.3%	63.5%
2016	63.2%	63.2%	63.1%
2015	60.8%	63.2%	57.3%
2014	61.1%	64.9%	54.6%

Source: OCS CFSR 015 Relative Identification.

The strength rating for CFSR Item 11, Relationship of Child in Care with Parents, increased to 79% in 2016, up 14% from 2015, but Alaska's state performance is still well below the national standard of 95%. This item is impacted by some of the issues discussed earlier. For instance, workers do not always make sufficient efforts to engage parents that are less compliant, especially when another parent is more involved. Secondly, failure to persistently attempt to reach parents following unsuccessful contact attempts; too often, this is misinterpreted as evidence that the contact information is no longer valid, which in turn decreases the likelihood the worker will attempt to contact them again. The QA case reviewers contacted many of these parents using existing contact information, and many of those parents thought to be refusing or resistant to engagement expressed a desire to be more involved.

Early identification of relatives is a critical component to all aspects of Permanency Outcomes 1 and 2. In 2015, only 4.4 relatives were identified per child within 45 days. A pilot program began in 4/1/16 in Anchorage, with the goal of increasing the percentage of children with at least 4 maternal and 4 paternal relatives identified, and increasing the percentage of identified relatives that receive a notice of their legal right to request placement.

2015 Relative Identification and Notification (Baseline)

REGION	Notice Compliance	At Least 4 Maternal Relatives	At Least 4 Paternal Relatives	Average Relatives Per Child
Anchorage	2.3%	15.5%	9.1%	3.1
Statewide	11.7%	23.9%	12.3%	4.4

Source: OCS CFSR 015 Relative Identification.

Pilot (since 4/1/16 thru 10/31/16) Relative Identification and Notification

REGION	Notice Compliance	Maternal Relative Compliance	Paternal Relative Compliance	Average Relatives Per Child
Anchorage	46.2%	43.2%	21.6%	6.2
Statewide	35.9%	32.4%	16.0%	5.0

Source: OCS CFSR 015 Relative Identification.

As this Anchorage pilot progressed, rates of both relative documentation and notification of the right to request placement improved. Analysis of the pilot outcomes will identify barriers that prevented compliance rates from being higher, and to determine which elements of the pilot can be implemented statewide. Insufficient time has passed to evaluate the effectiveness of this program; however, it is hoped there will be corresponding increases in relative placements, fewer relative placement disruptions, and decreased time to permanency.

October 2017 Relative Identification and Notification

REGION	Notice Compliance	Maternal Relative Compliance	Paternal Relative Compliance	Average Relatives Per Child
Anchorage	57.5%	58.8%	26.5%	8.0
Statewide	42.4%	33.3%	17.7%	5.7

Source: OCS CFSR 015 Relative Identification.

The Anchorage efforts have also demonstrated concerted efforts to identify of relatives of Alaska Native/American Indian children that are not in an ICWA preference placement. In Anchorage, for example, there were 588 AN/AI (or are listed in ORCA with an undetermined race and were considered as AN/AI) children with 1 or fewer relatives identified in the ORCA. An extensive file review found that most had multiple relatives identified, but not entered into ORCA; therefore, these relatives did not receive a legal notice of their right to request placement. Identified relatives that were entered into ORCA, received the required notice of right to request placement. When few or no relatives could be identified, external search engines were utilized as an additional effort to identify relatives for the child; as of January, additional relatives were identified for all but 17. Diligent relative searches have been conducted on all, and no additional relatives found.

C. Well-Being

Well-Being Outcomes 1, 2, and 3

Well-being outcomes include: (A) families have enhanced capacity to provide for their children's needs; (B) children receive appropriate services to meet their educational needs; and (C) children receive adequate services to meet their physical and mental health needs.

- For each of the three well-being outcomes, include the most recent available data demonstrating the state's performance. Data must include relevant available case record review data and relevant data from the state information system (such as information on caseworker visits with parents and children).
- Based on these data and input from stakeholders, Tribes, and courts, include a brief assessment of strengths and concerns regarding Well-Being Outcomes 1, 2, and 3.

State Response:

Well-Being Outcome 1: Families Have Enhanced Capacity to Provide For their Children's Needs.

CFSR Item 12: Needs and Services of Child, Parents, and Foster Parents

The percentage of cases in which the needs and services of the child(ren), parents, and foster parents are assessed and necessary services provided will be 95% or more.

2016 Needs and Services of Child, Parents, and Foster Parents

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	83	55	28	66%
In Home	66	36	30	55%
Total	149	91	58	61%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

2015 Needs and Services of Child, Parents, and Foster Parents

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	166	70	96	42.2%
In Home	111	21	90	18.9%
Total	277	91	186	32.9%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

CFSR Item 12A: Needs Assessment and Services to Children

The percentage of cases in which the needs of the child(ren) are assessed and necessary services are provided will be 95% or more

2016 Needs Assessment and Services to Children

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	83	75	8	90%
In Home	66	48	18	73%
Total	149	123	26	83%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

2015 Needs Assessment and Services to Children

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	166	139	27	83.7%
In Home	111	45	66	40.5%
Total	277	184	93	66.4%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

CFSR Item 12B: Needs Assessment and Services to Parents

The percentage of cases in which the needs of the parents are assessed and necessary services are provided will be 95% or more

2016 Needs Assessment and Services to Parents

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	69	49	20	71%
In Home	66	41	25	62%
Total	135	90	45	67%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

2015 Needs Assessment and Services to Parents

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	138	50	88	36.2%
In Home	111	23	88	20.7%
Total	249	73	176	29.3%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

CFSR Item 12C: Needs Assessment and Services to Foster Parents

The percentage of cases in which the needs of the foster parents are assessed and necessary services are provided will be 95% or more

2015 and 2016 Foster Parents Needs Assessed and Necessary Services Provided

Year	Case Count	Strength	Area Needing Improvement	Strength Rate
2016	155	123	32	79%
2015	80	71	9	89%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

CFSR Item 13: Child and Family Involvement in Case Planning

The percentage of cases in which concerted efforts were made to actively involve the child and family in case planning will be 95% or more

2016 Child and Family Actively Involved in Case Planning

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	78	57	21	73%
In Home	66	30	36	45%
Total	144	87	57	60%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016:

2015 Child and Family Actively Involved in Case Planning

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	159	57	102	35.8%
In Home	111	20	91	18.0%
Total	270	77	193	28.5%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

CFSR Item 14: Caseworker Visits with Children

The percentage of cases in which the frequency and quality of visits between caseworkers and children are sufficient to ensure the safety, permanency and well-being of the children and promote achievement of case goals will be 95% or more

2016 Caseworker Visits with Children

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	83	43	40	52%
In Home	66	28	38	42%
Total	149	71	78	48%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016:

2015 Caseworker Visits with Children

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	166	53	113	31.9%
In Home	111	20	91	18.0%
Total	277	73	204	26.4%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

CFSR item 15: Caseworker Visits with Parents

The percentage of cases in which the frequency and quality of visits between caseworkers and parents are sufficient to ensure the safety, permanency, and well-being of the children and promote achievement of case goals will be 95% or more

2016 Caseworker Visits with Parents

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	69	9	60	13%
In Home	66	19	47	29%
Total	135	28	107	21%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016:

2015 Caseworker Visits with Parents

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	137	13	124	9.5%
In Home	111	14	97	12.6%
Total	248	27	221	10.9%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

Assessment of Child and Family Well-Being 1 Outcome Strengths and Concerns

Alaska's state performance for Well-Being I, did not meet the national standards for all items in this outcome as is outlined in the seven CFSR Items 12-15. According to the OCS QA case reviews, in most cases, ratings are significantly worse for in-home cases, which reflect the issues with in-home cases discussed earlier in the Assessment of Safety Outcome 2 section. The only exception is CFSR Item 15, Caseworker Visits with Parents, in which ratings for both in-home and out-of-home case are poor.

Specific to each of the Items 12-15, the following analysis is provided. Needs and Services of Child, Parents, and Foster Parents CFSR Item 12 improved from 32.9% in 2015 to 61% in 2016, but remains well below the national standard of 95% or more. QA case reviewers noted improvements in needs assessments, as reviewers were seeing more assessments in the case file and the assessments were better addressing the needs. Common characteristics in cases that were not rated as strengths were failure to include non-parent adults, either living in, or frequently present in, the home, in the needs assessments (generally non-parent paramours). Incarcerated parents were also not included in the needs assessments, even when they were expected to return to the home upon release from prison. Additional factors included difficult service delivery in some locations, and, for in-home cases, a tendency to focus only (or mainly) on the identified victim; with in-home cases, needs must be assessed for each child, not just the identified victim, in the home in order for the case to be rated as a strength. In contrast, only the identified child is reviewed in out-of-home cases.

- For CFSR Item 12A Needs Assessment and Services to Children, improved 26% from 2015. The rate for out-of-home cases, 90%, approaches the national standard of 95%.
- The rate for CFSR Item 12B, Needs Assessment and Services to Parents, improved from 29.3% to 67% in 2016. As mentioned above, improved needs assessments were the main area of improvement.
- The rating for Item 12c, Needs Assessment and Services to Foster Parents, decreased significantly. QA case reviewers note that the decrease is due to a scoring change requirement with the instrument rather that deterioration in practice. Prior to October 2015, payments to foster parents allowed for this item to be rated a strength. However, technical guidance issued in October, 2015, instructed reviewers to give less credit for foster care payments as evidence of support, which resulted in fewer cases being rated as a strength.

Caseworker Visits with Children CFSR Item 14, improved 22% over 2015, but the 2016 rate of 52% remains well below the national standard of 95%. Although ORCA data shows that 72% of the total required caseworker visits were conducted, the number of cases receiving visits in each month was considerably smaller. Additionally, too many visits were insufficient to frequency, duration or quality. The 52% increase in children in care since 2013 has made it extremely difficult for caseworkers to complete all required tasks. QA case reviewers observed situations in which as the month progressed and it became clear that there was not enough time to see all children/parents, workers engaged in a triage of sorts in which they determined which children/parents most need to be seen, thus, not seeing all children on a caseload as required.

The Item 15 rating, Caseworker Visits with Parents, is poor. This rating can be partially attributed to issues addressed earlier in Items 8,9, and 11: failure to persistently attempt to reach parents following unsuccessful contact attempts, and failure to continue engagement efforts with parents that live apart and/or have different levels of engagement and compliance.

In response to high caseloads and as part of ongoing Tribal collaboration efforts, in May 2016, OCS received permission from the Children's Bureau to include the count of visits by Tribal workers as caseworker visits, based on information that the Tribal workers provide input into the child's case plan, make recommendations/decisions about services, placements, permanent plans, etc. based on those visits and/or in addition to those visits. This effort is specific to Tribes that are a part of the Rural Child Welfare Services grants or Tribal Title IV-E Maintenance Agreements. It is too early to determine if these efforts will improve ratings for Items 14 and 15.

Well-Being Outcome 2: Children Receive Appropriate Services to Meet Their Educational Needs

CFSR Item 16: Educational Needs of the Child

The percentage of cases in which the educational needs of the child(ren) are assessed and services to address identified needs are provided will be 95% or more.

2016 Child Education Needs

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	74	73	1	99%
In Home	16	12	4	75%
Total	90	85	5	94%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

2015 Child Education Needs

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	150	149	1	99.3%
In Home	43	26	17	60.5%
Total	193	175	18	90.7%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

Assessment of Child and Family Well-Being 2 Outcome Strengths and Concerns

Alaska's state performance with Item 16, Meeting the Educational Needs of Children is a strength. The overall rate of 94% is just below the federal standard of 95%, and the rate for out-of-home cases is 99%. QA case reviews show that performance with in-home cases is significantly lower. A review of the 2015 case rating summaries shows no identifiable areas of improvement for out-of-home cases. As mentioned previously, in-home case were rated lower due to the failure to ensure educational needs assessments occur for all children in the household, not just the identified victim, with services provided when indicated in the needs assessment.

Well-Being Outcome 3: Children Receive Adequate Services to Meet Their Physical and Mental Health Needs

CFSR Item 17: Physical Health of the Child

The percentage of cases in which the physical health needs of the child(ren) are assessed and services to address identified needs are provided will be 95% or more.

2016 Physical Health Needs Assessed and Services Provided

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	83	81	2	98%
In Home	24	20	4	83%
Total	107	101	6	94%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

2015 Physical Health Needs Assessed and Services Provided

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	166	163	3	98.2%
In Home	46	30	16	65.2%
Total	212	193	19	91.0%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

CFSR Item 18: Mental/Behavioral Health of the Child

The percentage of cases in which the mental health needs of the child(ren) are assessed and services to address identified needs are provided will be 95% or more

2016 Mental Health Needs Assessed and Services Provided

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	64	56	8	88%
In Home	48	27	21	56%
Total	112	83	29	74%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

2015 Mental Health Needs Assessed and Services Provided

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out of Home	136	99	37	72.8%
In Home	97	27	70	27.8%
Total	233	126	107	54.1%

Source: OCS Quality Assurance Annual Reports. CY 2015 and CY 2016

Assessment of Child and Family Well-Being Outcome 3 Strengths and Concerns

Alaska's state performance for CFSR Item 17, the Physical Health of the Child, is at 94% which is just below the national standard of 95%. The rate for out-of-home cases is 98.2%. A review of the 2015 case rating summaries shows no identifiable areas of improvement for out-of-home cases. As mentioned previously, in-home ratings can improve by ensuring needs assessments occur for all children in the household, not just the identified victim, with services provided when indicated.

In Alaska, nearly all of the children in foster care are eligible for Medicaid. There are some instances in which Medicaid is the secondary coverage, due to the child having existing coverage through the parents' insurance plans.

Efforts by foster parents are a critical component in Alaska's performance with this item. Foster parents take children to the appointments, schedule assessments with support of caseworkers, and are called upon to offer the support necessary for children placed in their foster homes. They maintain medical, dental, immunization, and treatment records for the children.

With rare exceptions, all children in the custody of the OCS are eligible for Medicaid; thus medical services for children are generally covered through Medicaid. OCS policy 6.3.1 requires foster parents to arrange for an Early and Periodic Screening, Diagnostic and Treatment (EPSDT) screening within 30 days of placement for all children. The EPSDT screening assesses the various medical and behavioral needs of the child. The following table shows that compliance with this requirement decreased over the past year. EPSDT information is usually entered by an OCS specialty unit that receives regular reports from the Medicaid database. A new Medicaid database was implemented in 2015, and it is suspected that the new report code inadvertently omits some EPSDT data.

EPSDT Compliance

Year	Children in Care	Any EPSDT	Rate	EPSDT within 180 Days	Rate
2016	2578	2220	86.1%	2073	80.4%
2015	2064	1986	96.2%	1825	88.4%

Source: OCS CFSR 016 EPSDT Documentation Report.

The CFSR item 18 Mental/Behavioral Health of the Child, is rated at 88% for out-of-home cases and 56% for in-home cases. The overall rate for this item is 74%. These rates all represent significant increases from 2015. QA case reviewers attribute the increase for this item to better needs assessments. Improvements in in-home cases are attributed to a decrease in situations in which efforts

were focused on the one child that was subjected to maltreatment. As discussed earlier, in order for inhome cases to be rated as a strength, all children in the household must be assessed and services provided when indicated.

Regional Psychiatric Nurses play an important role in monitoring children in custody who have mental health needs and/or are on prescribes psychotropic medications. The OCS Psychiatric Nurses play a vital role by serving as the liaisons between OCS and mental health providers and facilities. The nurses help identify in-state and out-of-state facilities for children that need in-patient, residential care, and are notified when children are placed in acute psychiatric facilities, participate in Team Decision-Making meetings, and coordinate discharge planning for the children from the residential care facilities. The OCS Psychiatric Nurses use quarterly psychotropic medication reports, generated by the Division of Health Care Services (DHCS), to monitor psychotropic medications for children in care. Additionally, OCS has an agreement with DHCS for which Seattle Children's Hospital (SCH) provides secondary medication reviews for children in OCS custody who are on 2 or more psychotropic medications. If there are concerns about the medications a child is receiving, the nurses will arrange for doctor-to-doctor consults between SCH and the child's prescribing physician. Records are reviewed to ensure each child's medication plan of care involves age appropriate dosages, avoids contraindications, and controls for and/or minimizes side effects. Psych Nurses report that, in the years since these procedures were put into place, instances of overmedication and inappropriate medication have decreased significantly. They attribute this both to the monitoring they do and a greater awareness by physicians.

Psychotropic Medications Quarterly Summary Children by number of Medications

Region	1 Med	2 Med	3 Med	4 Med	5 Med	Total children	Avg count meds/child
Anchorage	44	26	14	7	2	93	1.7
Northern	16	7	4	1	2	30	1.9
Southcentral	29	16	12	3	0	60	1.8
Southeast	12	4	2	0	0	18	1.4
Western	7	6	2	1	0	16	1.8

Source: OCS ORCA Report, RR 00183 Psychotropic Medications Quarterly Summary, 2/13/2017.

OCS Psychiatric Nurses note that, as OCS staff stay longer in their jobs, they gain awareness of these issues for children. Although the importance of assessing for and providing mental health services is covered in training, new workers with big caseloads are not able to make this an area of focus. This often changes following the first-hand experience of having a child on their caseload is admitted to an acute care facility.

EPSDT evaluations contain a mental health assessment. Compliance with EPSDT requirements helps make sure children receive early mental health assessments.

One factor that can contribute to lower strength ratings is waitlists for services; these waitlists can delay service provisions for children with education, physical health, or mental/behavioral health needs. These delays can prevent a case from being rated as a strength for Items 16, 17, 18.

Section IV: Assessment of Systemic Factors

Instructions

The statewide assessment information for systemic factors is used in determining ratings for substantial conformity. Therefore, it is imperative that the statewide assessment team ensures that information in this section speaks to how well each systemic factor requirement functions across the state. To complete the assessment for each systemic factor, state agencies should:

- 1. Review the *CFSR Procedures Manual* (available on the Children's Bureau Web site at http://www.acf.hhs.gov/programs/cb), which elaborates on key concepts and provides examples of data that are relevant to the assessment of systemic factor requirements.
- 2. Respond to each assessment question using the requested data and/or information for each systemic factor item. Relevant data can be qualitative and/or quantitative. Refer to the section in the state's most recent Child and Family Services Plan (CFSP) or Annual Progress and Services Report (APSR) that provides assessment information on state performance for each of the seven systemic factors. Review the information with the statewide assessment team and determine if more recent data is available that can be used to provide an updated assessment of each item. If more recent data are not available, refer to the most recent CFSP or APSR document by indicating the document name/date and relevant page numbers where the information can be found for each systemic factor item.
- 3. Emphasize how well the data and/or information characterizes the statewide functioning of the systemic factor requirement. In other words, describe the strengths and limitations in using the data and/or information to characterize how well the systemic factor item functions statewide (e.g., strengths/limitations of data quality and/or methods used to collect/analyze data).
- 4. Include the sources of data and/or information used to respond to each item-specific assessment question.
- 5. Indicate appropriate time frames to ground the systemic factor data and/or information. The systemic factor data and/or information should be current or the most recent (e.g., within the last year).

The systemic factor items begin with #19 instead of #1 because items #1 through 18 are outcome-related items covered in the onsite review instrument used during the onsite review. Items related to the systemic factors are items #19 through 36.

A. Statewide Information System

Item 19: Statewide Information System

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

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

State Response:

Alaska asserts that the Statewide Information System is a strength area. Alaska's statewide information system, the Online Resources for Children in Alaska (ORCA), is accessible to all staff in all OCS field offices statewide. ORCA ensures that the state can routinely identify the status, demographics, location, and goals for placement of every child in foster care. Alaska asserts that the ORCA system is functioning and that users can readily identify the necessary information in ORCA.

In order to assess the data validity and reliability within ORCA, Alaska looked first to the system rules and processes around placement documentation and due process notifications to providers. Alaska then compared the ORCA demographic data with the same data with the Electronic Vital Record System (EVRS), located with the DHSS Division of Public Health, Bureau of Vital Statistics, to verify data accuracy for name and date of birth information. Additionally, Alaska produced information from the OCS Automated Foster Care Analysis and Reporting System (AFCARS) specific to the demographic error rates as additional verification of data reporting. Finally, Alaska utilizes several internal ORCA reports regarding children in placement, one of which is integral to a weekly monitoring process to identify missing placement data.

Identification of status:

Alaska asserts that the identification of status is an area of strength. Court events, or Legal status, documentation is virtually centralized, meaning that one individual is responsible for entering all legal statuses for the Anchorage, Southcentral and Western Region, while two other individuals document legal statuses for the Southeast and Northern Regions, respectively. Centralizing the data entry ensures that the process for data entry is standardized, which increases accuracy.

Identification of demographic characteristics: Alaska asserts that the accuracy of demographic characteristics is seen as an area of strength. OCS has established practice protocols under CPS Policy and Procedure Manual 6.2.1.4: *Verifying Citizenship and Immigration Status*, for requesting and collecting birth certificates of all children. ORCA requires a gender and date of birth to be documented for all children in placement. The date of birth is necessary for the system to determine if the correct service type is selected for the placement, as Alaska's foster care base rates are determined by the child's age. The system checks for the existence of a gender and date of birth each time a child's placement changes.

In September of 2016, ORCA staff sampled 33 records of children currently in out-of-home placement to compare the demographic data documented in ORCA with the demographic data documented in Alaska's Vital Statistics database, Electronic Vital Record System (EVRS). Seven of the 33 individuals were not in the EVRS database. Of the 26 individuals in EVRS, the following number of records matched between EVRS and ORCA:

Element	% Match
Date of Birth	100
Last Name	92
First Name	96

Source: ORCA staff sample log, 9/2016

For children in custody who were not located in EVRS when this sampling occurred, a cross-comparison of these seven profiles was conducted with the OCS Permanent Fund Dividend (PFD) database. The State of Alaska issues an annual payment to every Alaskan; for children in OCS custody, OCS is statutorily mandated to apply for the children's PFD each year the child is in custody. The PFD is then held in trust until the child's 18th birthday. A PFD check cannot be issued unless there is proof of eligibility, which is generally verified, in part, through birth certificate verification. The PFD database was able to identify all of the seven remaining children; however, birth certificates could only be verified on two of the seven children.

The OCS Adoption and Foster Care Analysis and Reporting System (AFCARS) files include data from the ORCA system. Twice a year, OCS completes an AFCARS test run in preparation for submission. ORCA staff utilizes the results of the test run to identify missing AFCARS data. ORCA staff then contacts the appropriate caseworker to enter the missing data. A data quality report for Alaska's AFCARS FFY2016A demonstrates low error rates for demographic data elements. In this submission, Alaska had no error rates above 10%, which is the threshold for an AFCARS penalty. Below is a chart documenting shows the number of missing demographic records in the FFY 2016A AFCARS report:

Element Name	Records Missing	% Failing
FC-06 Date of Birth	0	0
FC-07 Sex	0	0
FC-08 Race	0	0
FC-09 Hispanic Origin	213	6.37
FC-18 First Removal Date	0	0
FC-20 Last Discharge Date	0	0
FC-21 Latest Removal	0	0
FC-41 Current Placement Setting	0	0
FC-42 Out of State	0	0

Source: Alaska Adoption and Foster Care Analysis and Reporting System data quality report, for review period FF2016A

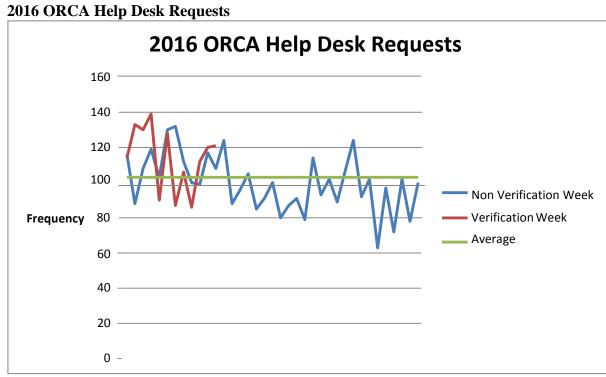
Identification of location:

Alaska asserts that the identification of location is an area of strength. When a child is in the custody of OCS and placed in a foster home or facility, a placement must be documented in ORCA to indicate where the child is physically located. The initial placement in ORCA is necessary for initiating a title IV-E eligibility status review, legal notifications to relevant parties, generating payments to providers, tracking caseworker visit compliance and requesting special needs funds.

Each month, primary caseworkers review the list of children placed with licensed providers and indicate that the data is accurate by 'verifying' the placement information. This is completed in ORCA by checking a box for each placement information row. While caseworkers do verify information for children placed with licensed providers each month, this verification process does not include unlicensed providers. The information in each verification rowincludes:

- Case Name
- Child Name
- Provider Name
- Start Date of Placement
- End Date of Placement (if applicable; absence of an end date indicates the child is still placed with this provider)
- Custody End Date (if applicable)

The end result of this activity is that a payment is distributed to the provider. OCS does not collect data on how often the placement information needs to be corrected prior to verification. However, data on customer service assistance proves that user assistance needs do not spike unusually during placement verification weeks. When the number of requests during placement verification weeks is compared to non-verification weeks, OCS does not see a significant difference that could be definitively attributed to data modifications during the placement verification week. Below is a chart displaying the number of requests for assistance the ORCA Help Desk staff received each week during CY 2016.



Source: ORCA Help Desk requests for CY 2016.

Additionally, OCS sends each placement provider a monthly provider statement which details placement information for the current month, and for the two months prior. Providers contact the OCS Provider Payments Unit, or the primary caseworker, if any of the information in the Notice of Change of Placement is inaccurate. If there is a discrepancy noted by the provider, the provider is instructed to contact the OCS Provider Payments Unit to correct any of the information within the ORCA system:

- Child Name
- Start of Placement
- End Date of Placement (if applicable)

An internal report, the OCS Children in Out-of-Home Placement RR00163, contains data regarding children in a current AFCARS removal episode, including demographics, location, permanency goal, and provider contact information. The report allows users to filter/sort by relevant information:

- Region
- Office
- Supervisor
- Primary caseworker

The OCS ORCA Report, OCS Children in Out-of-Home Placement RR00163, is reviewed each week by ORCA staff to identify children who are missing placement documentation. If missing data is identified, the ORCA staff contacts the primary caseworker and supervisor to call attention to the issue and offer assistance with documenting the placement. Various report runs of this report indication that very few children who are entered into ORCA have missing placement documentation:

Date or Report run	Number of children with placement documentation in ORCA	Number of children with missing placement documentation in ORCA	Percent with of children missing placement documentation in ORCA
8/9/2016	3012	14	0.4
9/23/2016	2983	7	0.2
12/16/2016	3025	27	0.8

Source: OCS ORCA Report, RR 00163 OCS Children in Out-of-Home Placement, 8/9/2016, 9/23/2016, and 12/16/2016...

Goals for placement for every child: Alaska asserts that Goals for placement of every child is an area of strength. The OCS ORCA Report, Plan Summary Report RR00072, includes a row for all children in a documented out-of-home placement on the day the report is run. On this report users can see the goal, or lack of goal, as well as dates that indicate whether or not the permanency goal (case plan) review is current or overdue. This information is available on demand and is refreshed with production data approximately every 15 minutes. The OCS AFCARS data files include data from the ORCA system. Twice a year, ORCA completes an AFCARS test run in preparation for submission. ORCA staff utilizes the results of the test run to identify missing data. ORCA staff then contacts the appropriate case worker to enter the missing data. A data quality report for Alaska's AFCARS FFH 2016A demonstrates low error rates for the Goal for placement of every child data element. In this submission, Alaska's error rate for this was 6.35%, which is well under the 10% threshold for an AFCARS penalty.

Alaska has demonstrated that the OCS ORCA can readily identify the status, demographic characteristics, location and goals for the placement of every child who is in care. Additionally, the ORCA system has various reports to check, monitor, verify and follow up on missing data elements as described above. It is for these reasons, that Alaska asserts that the Alaska statewide information system, ORCA as a strength.

B. Case Review System

For purposes of the Systemic Factor, Alaska looks at OCS processes for case planning and reviews, as well as the court processes and hearings on key federal requirements related to Alaska's Case Review System. The items that are assessed for this section include:

- Item 20: Written Case Plan
- Item 21: Periodic Reviews
- Item 22: Permanency Hearings
- Item 23: Termination of Parental Rights
- Item 24: Notice of Hearings and Reviews to Caregivers

Alaska asserts that the Case Review System is an area needing improvement. In the 2015-2019 Child and Family Services Plan, Alaska indicated that it was not in substantial conformity with this item. The reasons stated at that time remain true today: 1) case plans are not consistently developed with the child's parents; 2) Alaska does not have a way to track the percent of cases in which a Termination of Parental Rights petition was filed on time; and 3) notification of caregivers for court hearings and reviews is an area of need.

Item 20: Written Case Plan

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

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

State Response:

Written case plans continue to be an area needing improvement for the State of Alaska Office of Children's Services. The child's parents are not always included jointly in case planning and not all cases have a current case plan document to guide the plan participants. The case plans utilized by OCS have the required provisions included; however, ORCA data and quality assurance data show that case plans are not completed timely and/or are not always completed jointly with the family.

The Office of Children's Services determined in early 2016, that changes to the case planning process were needed to improve outcomes for timely case plans, which became effective 9/28/2016. Insufficient time has passed to determine if this revised model is providing the desired outcomes for case plan improvements. For purposes the discussion of this item, OCS has elected to utilize ORCA case planning data from 9/28/2016 point in time.

Timely Case Plans:

Initial case plans: As noted in Permanency Outcome 1 data for CFSR, Item5 in Section III of this document, OCS QA case reviewers found that timely and appropriate case plan goals are established, but that case plans not are completed timely. According to ORCA data, there has been a decrease in the documentation of the initial case planning since 2014. During this same period of time, the OCS experienced a significant increase in the number of children in out-of-home care. The decrease in the timely completion of initial case plans appears to correspond with an increase in children entering care for the same period of time. The following table demonstrates the decrease in timely initial case plans:

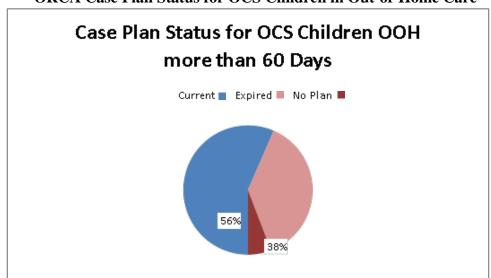
Initial Case Plan (Permanency Plan)

Year	Removed and In Care > 60 Days	Timely Case Plan	Rate
2016	1224	319	26.1%
2015	1486	542	36.5%
2014	1328	526	39.6%

Source: OCS CFSR 011 Perm Plan Timeliness.

All case plans: The chart below provides information regarding the completion of all case plan documents, not just the initial case plan. This chart depicts ORCA data from a point-in-time on 09/28/2016 and shows that 56% of cases with a child out of the home for 60+ days had a current case plan. This is a decrease from the April 2016 data used in the 2017 APSR, which noted 65.8% had a current case plan. Additionally, the point-in-time data indicates that on 9/28/2016, 6% of children who were in out-of-home care after 60 days did not have an active case plan entered into ORCA. QA case reviewers note that timely documentation and updates are areas that Alaska can improve. As outlined in Assessment of Permanency Outcome 1 Strengths and Concerns, case planning is occurring in a timely manner, but the written case plans are not completed in a timely manner and case plans are not updated as frequently as policy would require. However, most expired case plans accurately reflect the current needs of the children and parents. The chart below shows that updating the case plans is an area needing improvement.

ORCA Case Plan Status for OCS Children in Out-of-Home Care



Source: OCS ORCA Case Plan Summary. 9/28/2016.

Joint Development of Case Plans:

CPS policies, 2.9.3, Family Services Assessment: Case Planning with Parents and 2.9.4 Family Services Assessment, Case Planning with Children, mandates that all case plans must be developed jointly with the parents and the child. The OCS QA case review data specific to joint development of case plans indicates

two things: 1) In CY 2016 children and families were included in case planning 60% of the time; and 2) In CY 2015, children and families were included in case planning less than a third of the time. Generally, the QA case review data shows that involvement of the child and family in case planning is lacking. However, it is important to note that OCS has shown a large improvement from one year to the next. The reason for this change is not determined, although the agency is hopeful that the focus on case planning and the changes made to the Family Services Assessment process (FSA 2.0, explained below) will continue to impact improvements in this area.

2016 Child and Family Actively Involved in Case Planning

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out-of-Home	78	57	21	73%
In-Home	66	30	36	45%
Total	144	87	57	60%

Source: OCS Quality Assurance Annual Reports. CY 2016

2015 Child and Family Actively Involved in Case Planning

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out-of-Home	159	57	102	35.8%
In-Home	111	20	91	18.0%
Total	270	77	193	28.5%

Source: OCS Quality Assurance Annual Reports, CY 2015

As part of the program improvement plan following the 2008 CFSR, OCS indicated that to improve child and parent involvement in case planning, OCS would implement a Family Services Assessment (FSA) model which was achieved in October 2013. In 2015, after receiving feedback from staff and stakeholders and reviewing and analyzing QA case review data related to case plan compliance regarding parent engagement, OCS identified that the FSA model as implemented, was not effective in improving outcomes for case planning involvement with children and parents; OCS was not achieving the desired outcomes. The trends with the FSA model that OCS identified were that, like every other case planning model, FSA promoted family engagement; however, the model did not produce the expected level of family engagement. Additionally, it was determined that workers were not completing the necessary needs assessments for case planning.

In response, the FSA model was revised into FSA 2.0 and changed the case planning process documentation. In March 2016, OCS piloted the FSA 2.0 and then implemented statewide in September 2016. The new case plan process under FSA 2.0 requires that the child's case plan be completed in ORCA; however, parent case plans are completed on a paper template with the parents at locations that may be outside of the OCS office. Once completed, the parents' case plans are scanned into ORCA. OCS expects that it will be easier to engage parents in case planning if the documents are developed and reviewed in the field where workers meet with families. OCS will monitor case plan data to determine the impact FSA 2.0 on completion, engagement, and involvement of child and family in case plan development.

Alaska asserts that Item 20 is an area needing improvement. OCS data outlined above shows that case plans are not completed within desired timelines and are not developed jointly with the children and parents. Until recently, all case planning needed to be completed in ORCA, whereby, the worker has had to rely on

completing the plan on the office computer and not in the field where a worker is more likely to meet with parents and children. Current, technologies for the OCS ORCA system do not include mobility options for workers to access electronic case files and/or complete necessary documentation in the field. Additionally, increased caseloads and high worker turnover may also contribute to low levels of family engagement with case planning. Alaska is hopeful that the documentation improvements in this area and anticipate that the program change made in September 2016 related to case planning will assist in increasing compliance in this area.

Item 21: Periodic Reviews

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

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

State Response:

Alaska asserts that item 21 is a strength area. For many years in Alaska, the federally-mandated administrative reviews were conducted by OCS staff, located in each of the five OCS service regions. In 2016, OCS elected to consolidate the administrative reviews with the QA Unit staff centralized in Anchorage. Most of this report thus far, has focused on the work that the QA Unit has conducted with regards to the on-going, case reviews for purposes of federal compliance with the CFSR. However, administrative reviews follow the mandates outlined in both federal and state guidance; for each out-of-home case, an administrative review must be conducted one every 6 months. Thus, the QA Unit is conducting both the CFSR case reviews as well as the federally-mandated administrative reviews for children and families.

Specific to the administrative reviews, the QA case reviewers utilize OCS ORCA Admin Reviews Due, RR00024 Report, to gather data about the administrative reviews. This report shows how many cases should be reviewed, how many are due for review in the current month and next, and how many are overdue for an administrative review. OCS has historically shown a high rate of compliance with timeliness of completed administrative reviews, as noted in the ORCA Admin Reviews Due RR 00024 Report. Since July 2014, OCS has not experienced a month with less than 87% compliance with timely administrative reviews the average in calendar year 2015 was 90% compliance rate.

OCS has an ORCA report available to staff and managers to track the Administrative Reviews that are due and overdue. Below is a table showing the results from the January 25, 2017 Admin Review Due report.

Administrative Review Status

Region	Overdue	Total children by region
Anchorage	0	1224
Northern	0	523
Southcentral	1	849
Southeast	1	179
Western	2	201
Statewide	3	2,976

(Source: 01/25/2017 OCS ORCA Report Admin Review Status Due RR00024, 1/25/2017.)

This table shows that on 1/25/2017, there were 2976 total children in out-of-home care and only three children considered overdue for an administrative review, as of 1/25/2017. The ORCA data shows that 99.9% of the administrative reviews are timely. Each month the OCS QA team members review any cases that are considered overdue for review. For the three cases identified as overdue in this report, data entry errors were identified related to custody date and discharge information; after internal review, they have been determined that they are not overdue.

Alaska has demonstrated through the data and the information stated in this section, that OCS has a fully functioning administrative review system that ensures periodic reviews no less than every six months for custody cases. The QA Unit has successfully developed a process to conduct the administrative reviews from a centralized location in Anchorage for every child in care while maintaining a high rate of functioning on a statewide basis.

Item 22: Permanency Hearings

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

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

State Response:

OCS asserts that this is an area of strength for Alaska. The OCS does not have reliable ORCA data available to demonstrate compliance with this item; however, the Alaska Court System maintains data to demonstrate that Alaska does provide for a permanency hearing no less than 12 months from when the child entered foster care.

The Alaska Court System maintains permanency data for Child in Need of Aid (CINA) cases. The following table shows that 67% of children entering care in 2014 and 2015 had a Permanency Hearing within 12 months of the filing of the CINA petition.

Permanency Hearing within 12 Months

Year	Entered Custody	Perm Hearing Within 12 Months	Rate
2015	967	655	67.7%
2014	989	665	67.2%

Source: Alaska State Court System, CourtView Date System, SFY 2016

The next table shows how timelines of permanency hearings varies across judicial districts in Alaska.

Permanency Hearings for Children Removed in 2015*

Judicial District	Children	Within 12 Months	Rate
First	79	47	59.5%
Fourth	143	96	67.1%
Second	59	30	50.8%
Third	686	482	70.3%
Total	967	655	67.7%

Source: Alaska State Court System, CourtView Date System, SFY 2016

Permanency Hearings for Children Removed in 2014

Judicial District	Children	Within 12 Months	Rate
First	57	33	57.9%
Fourth	182	130	71.4%
Second	63	19	30.2%
Third	687	483	70.3%
Total	989	665	67.2%

Source: Alaska State Court System, CourtView Date System, SFY 2016

The majority of children have a permanency hearing within the first year. However, in looking deeper into the data also shows that OCS Southeast Region, which is located in the First Judicial District, holds their first permanency hearing sooner, with the average being 337 days from the date of the initial CINA custody petition. Conversely, the Fourth Judicial District, which primarily covers the OCS Northern and Western Regions, holds their first permanency hearing later than the statewide average, with the average of 369 days. This court district average was significantly influenced by four cases in one rural community, which took an average of 687 days to hold the first permanency hearing; the low case numbers in some communities has significant impact on the regional averages.

The Alaska Court System data system also tracks data related to the timeliness of subsequent permanency hearings. This data shows that permanency hearings occur no less frequently than 12 months from the previous hearing. According to the Alaska Court System data report for CINA cases closed in state fiscal year 2016, the average time between permanency hearings was 226 days.

The court system data demonstrates that this item is a strength area for Alaska as the statewide average to timely permanency hearings are occurring within the 12-month federal requirement, both for initial as well as subsequent permanency hearings. Although there are cases that may be outside the statewide average of 361 days to the first hearing and 226 days to the required subsequent hearings, the majority of cases are heard timely by the court.

^{*2016} is not missing; it is used to calculate compliance for children removed in the prior year

Item 23: Termination of Parental Rights

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

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

State Response:

Alaska asserts that this item is an area needing improvement. The OCS does not have an automated system to ensure that Termination of Parental Rights (TPR) petitions are filed timely and there is not available data to show how often the presence of compelling reasons not to file are the reason for delayed filing. The OCS ORCA system does not record the date a TPR petition is *filed*. Additionally, the OCS administrative reviews and QA case reviews do not collect data related to the filing of TPR proceedings.

The table below shows the majority of TPR petitions are filed within 15 months of removal with a much higher rate in 2015 than 2014.

Time to TPR Petition

Year	TPR Petitions Filed	Filed within 15 Months	Rate
2015	580	419	72.2%
2014	734	458	62.4%

Source: Alaska State Court System, CourtView Date System, SFY 2016

In Alaska, many termination cases finalize through a voluntary consent to adopt process, whereby, a petition to terminate parental rights would not be filed. The ORCA system does not track consent to adopt data separate from TPR filing data. The Alaska Court System reports that of CINA cases closed in state fiscal year 2016, there were 26 TPR petitions closed with a consent to adoption or guardianship listed as the disposition. Additionally, because compelling reasons not to file a TPR petition are often noted verbally during the court hearing, the Alaska Court System does not track cases in which compelling reasons have been found.

The Alaska Court System report, *Time to Termination of Parental Rights Petition (Toolkit measure 4H)*, shows that the average time for filing a TPR is in accordance with the timeframes with this law, as 455 days, equals 15 months for the average filing of TPR petition.

2015 TPR Petitions Filed Within 15 Months of CINA Petition*

Judicial District	TPR Petitions Filed	Filed Within 15 Months	Rate
First	49	41	83.7%
Second	3	3	100.0%
Third	396	261	65.9%
Fourth	132	114	86.4%
Total	580	419	72.2%

Source: Alaska State Court System, CourtView Date System, SFY 2016

^{*2016} data is not missing; it is used to calculate compliance for prior years

2014 TPR Petitions Filed Within 15 Months of CINA Petition

Judicial District	TPR Petitions Filed	Filed Within 15 Months	Rate
First	35	25	71.4%
Second	14	6	42.9%
Third	542	322	59.4%
Fourth	143	105	73.4%
Total	734	458	62.4%

Source: Alaska State Court System, CourtView Date System, SFY 2016

In summary, this item is an area needing improvement. Alaska does not have a data system to ensure TPR petitions are filed in a timely way and does not have a method to track when the court has found compelling reasons not to file a TPR petition.

Item 24: Notice of Hearings and Reviews to Caregivers

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

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

State Response:

The state asserts that this item is an area needing improvement. Alaska does not have a consistent, standardized method to provide notices of court hearings to caregivers. Alaska does not notify caregivers of administrative reviews, unless the youth's goal is Another Planned Permanent Living Arrangement (APPLA) and does not invite caregivers to other administrative reviews. OCS does not have adequate data to document that caregivers receive the necessary notices outlined in this item. For those caregivers that were mailed a notice, OCS does not have a way to track whether or not the caregiver received the notice

The Department of Law (DOL) consistently provides initial notice of court hearings to grandparents; however, the notices are mailed and there is not a tracking mechanism to show if the notices are received by the grandparents or not. After the initial hearing, the responsibility for notifying caregivers of court hearings rests with the assigned CPS case worker. There is no mechanism to track whether or not the relative caregivers were notified of court hearing; nor is there a process to verify if the caregiver received the notice if the notice was sent. The OCS Northern, Western Regions, and the Juneau Field Office have staff assigned to centralize the noticing function. Support staff is notified of court hearing dates and have various methods to track hearings. The support staff sends notices to foster parents and grandparents when their address is known.

Alaska does not have a system to document and track notification to caregivers for court hearings and administrative reviews. Foster parents or caregivers are not invited to participate in the administrative reviews, with the exception of administrative reviews for youth with a goal of APPLA. For APPLA cases, OCS provides notice of administrative reviews to all foster parents. Since centralizing the administrative reviews, OCS is confident that notices for APPLA case reviews are sent consistently. OCS utilizes the

United States Postal Service, but OCS does not have a method to track that the provider received the notice.

Additional information related to this item can be gathered from the 2015 OCS Foster Parent Survey conducted by the OCS Evaluation Unit. This survey included both relative and non-relative licensed foster families. 743 of the 1290 foster parents responded to the survey for a 58% response rate. This data highlighted in the three tables that follow are from the 2015 foster parent survey results. The results of the survey show that foster parents do not consistently receive notice of hearings; however, for those who do receive notice of hearings, many attended court hearings and offered comments to the court. The OCS asserts that if notice of hearings were provided consistently to caregivers, they would attend hearings and provide information to the court. The results from the foster parent survey demonstrate consistency across the state in regards to the responses provided. It is unknown why there is uniformity across the regions or what that uniformity means for the state's system.

This table provides information about notice of court hearings to foster parents. In all regions, nearly a third of foster parents state that they did not receive notice of hearings. Statewide responses show that 63% of respondents received notice of court hearings; however, in 12% of these responses foster parents report being notified less than a week before the hearing. OCS policy 6.6.3 (C)(2), Notification of Court Hearings and Conferences, Administrative Reviews, Removals, and Assumption of Custody, states that OCS will provide written notice at least 10 days prior to the scheduled date of the hearings to the out-of-home care provider, except in emergency hearings.

OCS Foster Parent Survey, Notifications for Court Hearings

Period of Time Prior to Court Hearing Foster Parent Informed of Hearing Region	Number of Foster Parents	Three to Four Weeks in Advance	One to Two Weeks in Advance	One Week in Advance	Not Notified
Anchorage	264	20%	31%	9%	39%
Northern	83	22%	31%	16%	31%
Southcentral	127	15%	34%	14%	37%
Southeast	101	18%	30%	15%	38%
Western	30	13%	33%	17%	37%
Statewide	605	19%	32%	12%	37%

Source: OCS Quality Assurance Unit, OCS Foster Parent Survey, 2015

According to the OCS Foster Parent Survey results, the following table provides information about foster parents attending court hearings. More than half of the foster parents who responded to the survey report indicated that they attended court hearings regarding the child placed in their home.

OCS Foster Parent Survey, Attendance of Foster Parents at Court Hearings

	Number of Foster			Did Not	
Region	Parents	Attended	Percent	Attend	Percent
Anchorage	267	160	60%	107	40%
Northern	85	51	60%	34	40%
Southeast	105	61	58%	44	42%
Southcentral	130	75	58%	55	42%
Western	30	18	60%	12	40%
Statewide	617	365	59%	252	41%

Source: OCS Quality Assurance Unit, OCS Foster Parent Survey, 2015

Additionally, the table below speaks to foster parents having a right to be heard in court. Again, more than half of the survey respondents note that they had opportunity to make comments in court. Of the 36% of respondents who state comments were not provided to the court, it is unknown if they were invited by the court to make comments or not.

Foster Parents Able to Make Comments at Court Hearings

Region	Number of Foster Parents	Comments Provided	Percent	Comments not provided	Rate
Anchorage	159	104	65%	55	35%
Northern	49	29	59%	20	41%
Southcentral	75	50	67%	25	33%
Southeast	59	37	63%	22	37%
Western	18	12	67%	6	33%
Statewide	360	232	64%	128	36%

Source: OCS Quality Assurance Unit, OCS Foster Parent Survey, 2015

The three smaller OCS regions (Northern, Southeast-Juneau Field Office, and Western) report that having a standardized method to notify caregivers of court hearings. Administrative reviews specific to APPLA goals consistently send notices of administrative reviews to caregivers regarding scheduled reviews. However, because there is not a standardized system in all field offices and regions, there is not a method to track notices being received by the caregivers, and because caregivers are not included in all administrative reviews related to children, Item 24 is an area of need for Alaska.

C. Quality Assurance System

Item 25: Quality Assurance System

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

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

State Response:

The Quality Assurance System is an area needing improvement for Alaska. In the 2014-2019 CFSP, Alaska identified that there is a "strong commitment to the concept of a continuous quality improvement process to include, as a component, the case review quality assurance." At the time, Alaska also identified a "strong base" by which to build a strong CQI process, to include the development of a CQI team to "plot the course" for a CQI process. Today, Alaska continues to work towards a CQI process, but has not yet affected a consistent, statewide, data-driven process, that assesses, evaluates and informs policy and practice improvements and outcomes based on the totality of the data available to the agency. Alaska understands that strong CQI must demonstrate how data informs the entire agency of program and practice improvements, gaps, strengths, and barriers but data does not necessarily drive practice change, nor does the CQI process fully consider all of the data available consistently across the agency and across the OCS service regions.

In Alaska, a distinction needs to be made between Quality Assurance and CQI: The OCS QA team provides a significant role in conducting statewide case reviews by mimicking the federal CFSR case review process. Alaska asserts that the case review process through the OCS Evaluation Unit, which conducts the QA case reviews, is a strength area, in that it consistently assesses the quality of the case records in each region/field office in Alaska, and is able to provide reports on statewide trends and opportunities for program improvement. The Evaluation Unit provides regular, consistent reports to the regional managers and the CQI team about case review results and outcomes. Additionally, the Evaluation Unit works with the regional managers and the Division Operations Manager to identify possible trends and focus on program improvement based on the case review data findings.

The CQI process in Alaska is primarily focused on improvement outcomes at the regional and field office level, relying heavily on case review data reports from both the Quality Assurance team and the ORCA data reports. OCS collects and maintains a great deal of data, but data alone does not change outcomes or practice. The OCS must bridge the gap between having data and using the data to inform practice changes to improve outcomes for children and families. Additional elements that are lacking is consideration and review of available data sources such as the eligibility data outcomes, data from services provided through grants and contracts, data from the OCS payment system to help to inform service needs and resources for children and families in Alaska, as well as local knowledge about community standards, local services such as Tribal, and strengths and needs of the local areas. Due to the lack of solid and integrated CQI by which the data helps to inform both practice direction and improvement across all aspects of the agency from the field, to the regions, to the services and programs needed to support families, this systemic factor is identified as an area needing improvement.

(1) 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, it evaluates the

quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates implemented program improvement measures.

The Office of Children's Services is operating an identifiable QA case review system. While the QA case review system operates in all jurisdictions of the state, the larger CQI system is centrally administered and focuses heavily on the improvements to the case work at the field level, with less focus on programmatic and community-based services improvements to support children and families who are involved with OCS. The CQI system is not consistent or uniform across Alaska, and therefore, inconsistencies in practice and program outcomes create for inconsistent data results that are less helpful to the service array and program supports for children and families.

The OCS Continuous Quality Improvement (CQI) Committee meets monthly and includes regional and state office program managers. CQI meetings include a review and discussion of data from ORCA and QA Unit case review system. Discussion of the trends in data, new initiatives, and recommendations for change occur in the CQI meetings. Although the CQI committee has finalized a CQI policy manual, identified appropriate committee members, and has access to data and reports, the committee has not yet developed into and effective mechanism to create program improvement or practice change across the OCS.

ORCA provides a large amount of quantitative data and reports created to assist field, regional and state office staff to manage their work. Data is available through on-demand reports related to case worker visits with children and parents, case plan completion, permanency goals, and much more. The ondemand reports allow managers to have access to important information about what is happening in their offices and programs, and allows the CQI team to discuss statewide trends or differences from region to region. Data from ORCA and the QA case reviews is available with statewide, regional, or field office summaries, however, OCS does not have a consistent process to use data to guide practice change. While OCS has a robust amount of data available, generally, only a small portion is being utilized effectively,

In addition to QA case review and ORCA data, OCS stakeholder input is important to the quality assurance system, which comes in the form of surveys, community cafés, and stakeholder meetings. The information can provide rich dialogue for OCS related to how programs and services are working and where there are trends or patterns. Unfortunately, OCS has not identified standardized methods to review, analyze, and follow-up on information received from the surveys. The surveys OCS and partners completed in 2015 or 2016 include:

- Through the collaborative efforts with the Citizens' Review Panel, an annual staff survey was sent out to all OCS staff in Alaska. OCS has close to 500 employees. The survey received completed responses from 281 individuals; nine of whom declined to participate, leaving 272 or 54% of the staff that completed the survey. The information received was reviewed by the Director's Executive Team and management. A large amount of information is available from the survey results, but OCS does not have a standardized method to analyze the data and implement change to improve outcomes or worker satisfaction.
- A Tribal survey is sent to Tribal partners throughout Alaska every other year. In 2015 the survey
 was sent to 217 ICWA and Tribal workers, with 96 responding to the survey. There was an
 increase in the response rate with 44% responding in 2015 compared to only 30% in 2013. The
 survey results were reviewed by the Director's Executive Team, OCS managers, and the Tribal
 State Advisory Team.

A foster parent survey is completed every other year with licensed foster parents throughout Alaska. In 2015 the survey was sent to 1290 foster parents, and 743 responses were received; this

is a 58% response rate. The purpose of this survey is to gather information from foster parents regarding their experiences with the foster care program. The information received was reviewed by OCS management.

(2) The state has standards to evaluate the quality of services (including standar ds t o ensure that child ren in foster care are provided quality services that protect their health and safety).

Through the quality assurance case review system OCS is able to document and track performance for safety, permanency, and well-being of children through the 18 CFSR items outlined in Section III of this report. This method allows a standardized review and data is available by field office, region, or statewide. Since OCS centralized the administrative reviews to the OCS QA unit, a system has been implemented by which a memorandum is sent to OCS management if there are concerns for safety or well-being of children is identified as a concern. In calendar year 2016, several memos were sent because of significant concerns. The memos are reviewed by OCS managers and action was taken as needed to remedy the condition. Additionally, if there are questions that arise in the reviews related to ICWA status or Tribal issues, the QA unit notifies the ICWA specialist for follow-up.

OCS has practice and procedure standards across the span of child welfare services, adoption, foster care licensing, eligibility, and provider payment services; as defined in federal and state law. OCS has a comprehensive policy and procedure manual to direct and guide staff in meeting the requirements of the law and providing for the best interest of children and families; this is one mechanism to provide standards for quality services for safety, permanency and well-being by the OCS staffs. However, OCS has long recognized that the process for consistent policy development, implementation and maintenance is a challenge for Alaska, for which a rigorous method for consistent policy maintenance and review does not exist. CQI should inform the standardized policy processes for Alaska.

For grant and contract services provided by the OCS, program expectations and reporting requirements are clearly outlined in the final agreements with the grantee or contractor. Although OCS may evaluate the reports received from grantees, there is not a standardized system to analyze the effectiveness of the programs as they relate to safety, permanency, and well-being. Information regarding assessment of need and grant review is provided in CFSR Item 29 regarding the services array later in this report.

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

Data is collected through the QA case reviews and through ORCA to rate the strength of needs assessment and service provision to children, parents, and foster parents (see Well-Being Outcome 1, CFSR Items 12, 12A, 12B and 12C). By reviewing the QA case review data the CQI committee is able to identify strengths and needs in our system.

Through collaboration with partners, OCS is able to gather data to identify strengths and needs of the service delivery system. Because Alaska is large and has minimal services available in some communities, OCS has numerous grant and contract services available to assist in providing necessary services to children and families. Each grant and contract program is required to provide quarterly performance data regarding service usage and program outcomes. There is currently no consistent method to evaluate this data to evaluate the service delivery system in Alaska.

OCS program coordinators review grant and contract reports each quarter to determine how well the program is meeting the client needs, and also assesses if additional services or changes to the service may be needed. The data is also reviewed to assess if we are utilizing the grant to the fullest extent and if funding changes may be needed due to increases or decreases in grant usage. In 2016 increases were made to the Child Advocacy Center grants due to increased need and utilization. Additionally, OCS utilized Community Cafes completed in 2016 to identify strengths and needs of the service delivery

system or support findings from ORCA and case reviews. More information on the Community Café findings is located in the systemic factor section related to Services Array.

(4) The state provides relevant reports.

The OCS has a robust system of reports available providing details from ORCA and the QA case reviews. Case specific data is accessible to OCS staff, including case workers, supervisors, and managers. Reports are available and provide data regarding caseload information, timely initiation of child abuse and neglect assessments, monthly contacts with children and parents, and identification of Alaska Native children in out of preference placements, to name a few. ORCA provides quantitative data and the QA reviews provide quantitative and qualitative data.

and permanency the public be Safety data is available to and can accessed: http://dhss.alaska.gov/ocs/Pages/statistics/default.aspx. The public statistics page is updated monthly. OCS also provides customized reports, such as the "score card" for managers, which is a quick reference report that compares data from previous months showing summaries for important areas of work. This report was developed and is being used by regional and state office managers.

(5) The state evaluates implemented program improvement measures.

OCS does not have a consistent method to evaluate implemented program improvement measures. Alaska collects and reviews data available through many sources, including ORCA, QA reviews, and surveys; however, Alaska has not developed a consistent process to analyze the success of the program improvement measures; and therefore, is not systematically utilizing the data to effectively improve policy, or practice improvements.

The quality assurance system, CFSR Item 25 is an area needing improvement. OCS has many components to build on for an effective Quality Assurance System. Unfortunately, Alaska is not using the data and information collected to make informed decisions or improvements across the child welfare system, on a consistently systematic basis. OCS has a strong QA case review process and large amounts of relevant data available through the case reviews and the ORCA system, however, as a whole, this systemic factor is an area of need because OCS does not have a standardized method to use data collected to consistently inform practice change.

D. Staff and Provider Training

For this Systemic Factor, Alaska looks at the OCS staff training as well as the foster parent and adoptive parent training. The items that are assessed for this section include:

- Item 26: Initial Staff Training
- Item 27: On-going Staff Training
- Item 28: Foster and Adoptive Parent Training

Alaska asserts that the systemic factor, Staff and Provider training, is a strength. The 2014- 2019 CFSP outlined in detail the level of initial and on-going staff training provided to OCS frontline worker and supervisors.

Item 26: Initial Staff Training

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

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

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

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

State Response:

Alaska asserts that Item 26 as a strength. Through partnership with the University of Alaska, Anchorage Child Welfare Academy (CWA), OCS provides training to new Protective Service Specialists (PSS), Social Service Associates (SSA), and frontline supervisors. The CWA provides OCS bi-annual reports that outline how many participants were trained, as well as data regarding the specific segments of the required initial staff training. The OCS is meeting the requirement to provide initial staff training that includes the basic skills and knowledge required for the Protective Services Specialist (PSS) positions.

Pursuant to title IV-E standards, all PSS positions are required to attend Standards, Knowledge & Insight Leading to Success (SKILS), core training within the first two months of employment through the CWA. Prior to attending SKILS, the employee must complete Pre-SKILS functions such as shadowing senior PSS, attend and observe court hearings, review client records, and other tasks assigned by the supervisor. In addition, all PSS staff must take twelve online courses that are aimed at giving the employee basic knowledge before they attend the skills-based, classroom training. Online modules include:

- Introduction to the Practice Model;
- Mandatory Reporting;
- Introduction to ICWA;
- Cultural Humility;
- HIPAA;
- MEPA;
- Interviewing Basics;

- Child Interviewing;
- Adult Interviewing;
- Adult Functioning;
- Permanency; and
- Crisis Prevention Intervention.

Each online module averages one hour in length and they are designed to orient the new worker to basic information about OCS and child welfare, so that when they get to the SKILS classroom, the participants have a shared foundation. The online modules are monitored for completion on specific course sites, through a learning management system, called a Blended Learning Center (BLC) (through the Blackboard technology) employed by the CWA. This data is then reported to OCS before the start of SKILS. There is a 95% – 100% completion rate of the online modules before attendance at SKILS. If it appears that a PSS will not complete the online modules, it is reported to OCS management, who contacts the supervisor to remind them the worker must complete all modules before attending SKILS. If a worker does not complete the required Pre-SKILS work, they are not able to participate in the SKILS training; within the past two years, only a few workers did not complete the necessary pre-SKILS training before SKILS. In these cases where workers did not complete the pre-SKILS training, some were either waived, or allowed to attend SKILS, with the completion of the pre-SKILS training after SKILS was completed. In other circumstances, new workers have had to wait until the next SKILS starts.

Once a worker attends SKILS, the length of time that a PSS must attend SKILS is determined by the type of work the PSS was hired to do. For instance, an Initial Assessment (IA) PSS attends 10 classroom days, while a Family Services PSS attends 15 classroom days of SKILS. Family Services PSS staff are to attend additional training days because they are responsible for completing initial assessments as part of their ongoing management of a case, whereas the IA staff is not responsible for family services work.

SKILS training focuses on building practical skills through hands-on exercises, including a simulation of the first knock on the door, videotaped information collection and case planning, home visits (utilizing actors who pose as the parents of a mock case) that goes through the life of the case while in SKILS. Other topics covered in SKILS embrace topics such as; values of child protection, intake, documentation in ORCA, safety decision-making, safety planning, relative searches, information collection standards, risk assessment, substantiation standards, trauma-informed care, worker safety and resiliency, children's court rules, parent visitation, separation, grief and loss, special considerations for youth, licensing foster parents, assessment, engagement, permanency, case planning, brokering and teaming with service providers, evaluation of case plans, and case closure.

The CWA trainers debrief the training at the completion of each day to make revisions and course corrections based on the needs of the learners. The trainers and director of the CWA meet as a team each month to review the SKILS training evaluations and discuss whether changes need to be made to the curriculum and/or plan different ways to train a topic based on the comments and ratings. The SKILS data is collated and reported in the CWA bi-annual report to OCS. The CWA director is in frequent contact with the OCS management to ensure training and policy and practice are closely aligned.

Transfer of Learning (TOL) teleconferences are scheduled once a week with PSS staff who have completed SKILS. The TOL meetings are intended to help integrate what was learned in the classroom to best practices in the field, applying scenarios from cases that have been assigned to the PSS after return from SKILS. During the TOL meetings, different aspects of the OCS practice model are reinforced and applied to real case dynamics as presented by the PSS. Attendance is taken at the TOL meetings; should a PSS miss more than one session the supervisor is contacted to ensure attendance. The TOL teleconference attendance varies from 47 - 83%, as reported by data collected by the CWA. Workers report the TOL

meetings to be very helpful, however, they report having a difficult time attending due to caseload demands.

From January – June 2016, a total of 36 PSS staff were hired and attended SKILS training at CWA. SKILS training is also available to Tribal and other community members; 2 Tribal and/or community partners attended SKILS during the same reporting period.

The effectiveness of the SKILS training is evaluated in two ways: 1) a survey is collected at the end of each day of training by the CWA training staff, and 2) the CWA conducts a Pre/Post Test for each cohort. The CWA recently revised their training evaluations to become a weekly evaluation versus daily and amended the evaluation questions to better reflect the PSS' preparedness to do the job upon completion of SKILS.

The table below shows the percentage of all SKILS participants who rate the three questions on a Likert scale. The majority of SKILS participants rate their understanding of topics covered, activities helpful and ability to apply learning to their job as high.

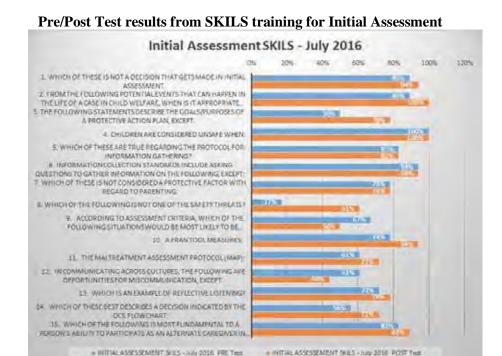
SKILS Training Feedback from PSS staff

131/133 SKILS Training Feedback, Jan - Jun 2016	Low				High	
Please rate the Training in the following areas:	1	2	3	4	5	
Rate your understanding of the topics covered in class today.	0%	0%	2%	38%	59%	
The learning activities helped prepare me to do my job.	0%	1%	3%	32%	65%	
Rate you initial ability to apply what you learned today to your job.	0%	1%	6%	34%	58%	

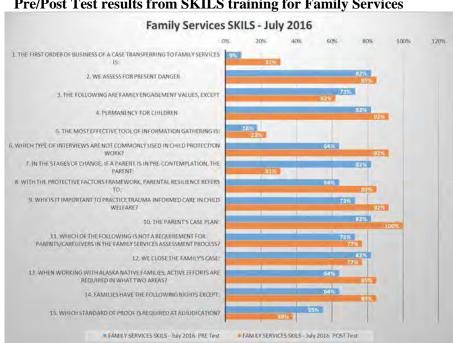
Source: University of Alaska, Anchorage, Child Welfare Academy database

In addition, the OCS has conducted annual staff surveys and uses this survey to inquire about SKILS and evaluate the qualitative nature of SKILS. In 2016, the OCS staff survey was administered through partnership with the Citizen's Review Panel; the survey included a significant portion addressing the training needs for staff. OCS has made many changes to SKILS based upon survey results, exit surveys, and feedback from SKILS participants.

A pre/post-test has recently been designed and implemented beginning with the July 2016 SKILS Cohort. The two charts below indicate data regarding knowledge of the OCS practice model for individuals who attended SKILS training in July 2016.



Source: University of Alaska, Anchorage, Child Welfare Academy database



Pre/Post Test results from SKILS training for Family Services

Source: University of Alaska, Anchorage, Child Welfare Academy database

The charts above demonstrate that generally the participants rate their knowledge higher in the post-test. The pre/post test questions were reviewed and revised in December 2016 based on analysis of the rate of difference between pre and post correct percentages. Questions with less than a 5% difference between pre/post responses were revised to make the learner have to dig a bit deeper to demonstrate knowledge learned. The revised pre/post-test was implemented with the January 2017 SKILS Cohort.

OCS also provides 25 short videos specific to the introduction and navigation of ORCA. The ORCA videos are mandatory for all new frontline employees and are required within six weeks post-SKILS training. The videos also serve as refresher training, as they can be viewed at any time, when needed. The videos provide basic information on how to use and enter information into the ORCA system.

In addition to SKILS, there are several other training requirements for new workers, including: ICWA I; ICWA II; Child Functioning; Knowing Who You Are (KWYA); Child Forensic Interviewing (for Initial Assessment staffs); Foster Parent Orientation; Fetal Alcohol Spectrum Disorder (FASD) 101; Car Seat Training and much more. Attendance for ICWA II; Child Functioning; Child Forensic Training and KWYA has always been tracked through the CWA database system. The CWA works with OCS regional management to schedule the post-SKILS training so that the required staffs can attend.

Every newly-hired PSS is required to complete a Staff Development Plan (SDP) that encompasses a variety of educational learning requirements in several different learning formats, throughout the first year of employment with OCS. The SDP requirement is communicated to the new PSS by OCS administration upon hire and the CWA upon enrollment in initial training. The SDP begins with on-boarding activities to orient the new PSS to the agency including general expectations, NASW Code of Ethics, policy and procedure specific to their position, reviewing the OCS vision, mission, guiding principles, and OCS practice model. The SDP, required for the past three years, is reviewed and revised each time there is a significant practice or policy change. The SDP was revised and reissued in January 2017. Revisions focused on additional policy requirements, giving the supervisor more discretion with regard to timing of required tasks and adding pertinent topics such as human trafficking training. Plans have been made for CWA to track the other SDP requirements beginning in spring 2017.

In the past year more Social Services Associates (SSAs) were hired to help the PSS staff with the demanding workload by conducting various routine tasks such as monitoring family contacts. All SSAs also go through training at the CWA, which is held one time per year for SSA staff. There currently is no SDP for the SSA staffs, but data regarding the training is gathered, however, from January – June 2016, all newly hired SSA (11) attended SSA core training.

The table below shows rating for importance, satisfaction, and application of learning of SSAs to their jobs. The table below demonstrates that nearly all of the participants found the training topics to be important to their job, expressed satisfaction with the training and had a high confidence level in applying what they had learned to their jobs. The CWA has recently revised their training evaluation tool to be more in line with rating the staffs' preparation to do their job.

Training Feedback from Social Services Associates

140 SSA Training Feedback, Feb 2016	Low			-	High
Please rate the Training in the following areas:	1	2	3	4	5
How would you rate the importance of the topics covered in class today to your job?	0%	0%	0%	47%	53%
Overall, what was your level of satisfaction with today's session?	0%	3%	3%	30%	63%
Rate your level of confidence in applying what you learned today to your job.	0%	0%	0%	40%	60%

Source: University of Alaska, Anchorage, Child Welfare Academy database

While OCS places a heavy emphasis on the training of frontline workers, Social Service Associates and supervisors, OCS also provides limited training to other OCS staff. The OCS state office program staff has received training from the CWA. This training occurs one time per year by CWA, and includes topics related to the OCS practice model and any specific requests that staff appear to be struggling with

according to data or other reports. Additionally, supervisors provide program specific training to their staff. State office program managers who work closely with children, families, or field staff attend SKILS training within their first year of employment.

Additionally, foster care licensing staff receive basic licensing training provided by the Community Care Licensing Managers. This two day, face—to-face training is coupled with hands-on training and on-boarding provided by the licensing supervisors. Because licensing staff do not have a high turnover rate, the training is offered as needed, but usually on an annual basis. Currently, licensing staff do not receive OCS practice model training as many staff in licensing have transferred from the frontline child welfare work

Alaska, has demonstrated through that Item 26 is a strength area. There is a comprehensive and consistent initial training system in place statewide that ensures new workers have the basic skills and knowledge needed to perform their jobs. This includes training provided to frontline workers, supervisors, support staff, as well as Tribal and community partners.

Item 27: Ongoing Staff Training

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

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

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

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

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

State Response:

Alaska asserts that Item 27, Ongoing Staff Training, is an area of needing improvement. Alaska does not have a requirement for annual training hours for staff. OCS struggles to track and prescribe set training or training hours for staff after their first year. While trainings are available, the trainings are not adequately tracked to insure that they are consistently applied and utilized. PSS staff has several options available to gain additional and ongoing training after their first year with OCS. Child Welfare Academy (CWA) provides up to 10 days of training and/or technical assistance to each of the 5 OCS regions annually. Each region uses the QA case review data to identify needs and gaps in practice to determine the use of the training/technical assistance days. Additionally, the CWA tracks what trainings were provided to which regions. In the past year regions requested the following on-site training sessions:

- leadership development, such as emotional intelligence;
- case plan development, including strengthening families;

- effective safety plans; and
- practice model overview.

The CWA has designed and maintained their website to locate additional learning opportunities for workers, which come in different learning formats. The website includes micro-learning videos, podcasts, archived webinars, online modules, and other resources. Protective Services Managers around the state also bring in local professionals to provide training within staff meetings on specific topics of interest or need for the regions. There is currently no data kept on how often staff access these offerings.

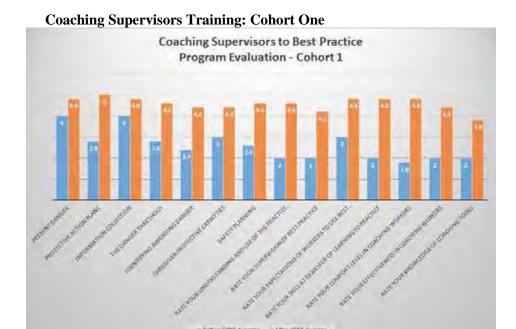
When OCS rolls out a new or significant practice change, the CWA provides mandatory training to all PSS staffs, including supervisors and managers. Attendance at mandatory trainings is tracked in the CWA database. OCS offers a wide variety of webinar- based training throughout the year in an effort to reinforce policy and provide an additional method for adult learners to understand practice changes. The webinars are recorded and available for new staff to view or review; on the CWA website (https://www.uaa.alaska.edu/academics/college-of-health/departments/school-of-social-work/child-welfare-academy/Webinars/). In CY 2016, webinars provided trainings to include: Prudent Parent Standard, Building Protective Factors, and "What is an MDT or CAC?" The CWA does not track participation in webinars; and OCS does not have a process to accurately verify attendance. Additionally, OCS provides staff with training information through micro-learning videos, the biennial child maltreatment conference, OCS website information, and publication of a monthly newsletter.

The CWA offers a seven-day supervisor training in which the content of the supervisor training is primarily focused on critical thinking, emotional intelligence, coaching, resiliency, and leadership skills. Based upon the responses to the evaluations and feedback received from the supervisors, modifications were made to this training. Most recently, the feedback received indicated that supervisors need more training on brain development and leadership, so the curriculum was modified to add brain and heart intelligence. Additionally, the understanding of transfer of learning from classroom to practice for all line staff is now emphasized in the supervisor training.

In 2015, to better support best practice and improve critical thinking, OCS and the CWA developed a new program, Coaching Supervisors to Best Practice (CSBP). To date, 3 cohorts have completed the 21-week program. Cohorts have included up to 8 supervisors in each; the current cohort includes five supervisors in the coaching program, 20 have completed it, and there are 26 supervisors who have not yet participated in this program. The coaching program was implemented to benefit frontline supervisors, and with that population in my mind, the program was designed to provide long-term coaching while having a minimal "workload" impact. To reduce workload impact, this program is spread out over 21 weeks. The program consists of weekly readings, an assignment based on the reading and one hour of coaching employed by the CWA. Following feedback the supervisors provided in the first cohort, changes to this program were made by reducing the amount of required homework for participants.

Both quantitative and qualitative evaluation is completed on the CSBP program. For the first cohort, Dr. Elizabeth Sirles, Director of the School of Social Work at the University of Alaska Anchorage, completed a qualitative survey of both supervisor and coaches. Summary qualitative data from the 1st cohort results in many improvements to the program. Cohort 1 was a group of the newest supervisors that had been hired in the past year. Cohort 2 was a cohort of experienced supervisors who voluntarily applied to take the program.

The two charts on the following page outline pre and post-test on understanding the OCS practice model and tools used in effective supervision. Both charts demonstrate that supervisors who participated in the CSBP program increased their knowledge, skills, and abilities of all areas identified.



Source: University of Alaska, Anchorage, Child Welfare Academy database



Source: University of Alaska, Anchorage, Child Welfare Academy database

The OCS recognizes the need to further assess the training needs of ongoing staff. The CWA is planning to implement additional evaluation of training needs and assessment of overall data collection in this fiscal year. One area that will be a focus is looking at the data analysis regarding how training is impacting the work.

Alaska recognizes Item 27 as an area needing improvement because there is not a standardized way to ensure ongoing training is readily available and accessible to all staff statewide to provide them with the

skills needed to carry out their work with families and children. Although Alaska has a variety of training methods available, there is not a systematic way to ensure all staff receive the training needed and there is not a minimum training hours requirement for OCS staff.

Item 28: Foster and Adoptive Parent Training

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

Please provide relevant quantitative/qualitative data or information with respect to the above-referenced current and prospective caregivers and staff of state licensed or approved facilities, that care for children receiving foster care or adoption assistance under title IV-E, that show:

- staff receive training pursuant to the established annual/bi-annual hourly/continuing education requirement and time frames for the provision of initial and ongoing training.
- how well the initial and ongoing training addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.

State Response:

Overall, Foster and Adoptive Parent Training, Item 28 is a strength for Alaska. The information in this section will demonstrate how OCS is ensuring that provider training is occurring statewide for current or prospective foster parents, adoptive parents, and residential child care facilities (RCCF) and addresses the skills and knowledge base needed to carry out their duties with regards to foster and adoptive children. Alaska has a robust training curriculum which provides initial and ongoing training to meet foster home, adoptive home and residential child care facility needs regarding children in placement.

The OCS provides grant funding to facilitate the training and support to foster and adoptive families in Alaska. The current grantee is the Northwest Resource Associates / Alaska Center for Resource Families (ACRF). ACRF receives the Resource Family Training grant and the Services for Adoption Support grant. The Resource Family Training grant funds the provision of initial Core Training for resource families. ACRF tracks resource family training information, provides ongoing training for resource families, and offers a toll free phone number to receive inquiries from foster and adoptive families.

Licensed families must complete Core Training within one year from the date of the initial licensure. Core Training covers: Understanding OCS and the role of the resources parent; the impact of child abuse and neglect; separation, grief and loss; appropriate discipline and positive parenting; understanding culture and working with birth parents; and transitions and reunification. Core Training is conducted through onsite, web-based, CD-based, and workbook style, self- study programs. The onsite Core Training consists of 18 hours in the classroom with 5 hours of homework, and the web-based, CD based, workbook style, and self-study program is 16 hours.

A total of 545 homes participated in Core Training during SFYs 15 and 16. 392 homes completed Core Training and 153 homes participated in some amount of Core Training but did not receive a certificate of completion. During this time period, there were 1343 new foster homes in the ACRF database, meaning these homes were licensed and should have participated in the Core Training.

An example of how Core Training prepares families to carry out their duties as foster parents may be demonstrated by OCS' high compliance rates with Well-Being Outcomes listed in Section III of this document. OCS consistently demonstrates an ability to meet the medical, mental health and educational

needs of children and youth in care. During Core Training, foster parents are taught about their responsibility to get the initial physical exam (EPSDT) for the foster child in the first 30 days; their responsibility for transportation to appointments including medical and therapeutic; and that children should remain in their school of origin unless there is a reason to move them. OCS believes one of the reasons for high compliance rates with Well-Being is that foster parents understand their role in providing for education and medical needs of children.

ACRF provides services statewide with four offices located in Juneau, Wasilla, Anchorage, and Fairbanks. The ACRF has 12 staff to respond to inquiries and provide training. Training is available and accessible statewide for current or prospective foster and adoptive parents.

• In Alaska, foster and adoptive parents receive training pursuant to the established annual/bi-annual hourly/continuing education requirement and time frames for the provision of initial and ongoing training.

ACRF tracks the annual training requirement for foster homes. Alaska foster homes are required to receive ongoing training (10 hours for a single parent household and 15 hours for a two-parent household). Foster care providers are entered into the ACRF database with the date of their foster care license as the start date to measure the annual training period. Foster parents must complete the required training hours by the end of each licensure year.

ACRF calculates a point in time, the number of foster parents with completed yearly training requirements. For example, on January 19, 2017, of the 1722 licensed homes at the end of 2nd quarter who are in the ACRF database, 904 have completed their yearly training requirement. This number reflects all families who, at this point in time, from their anticipated renewal date have completed their 10 to 15 hours training requirement. This does not mean the rest of the foster homes are out of compliance; those foster homes are still in their current licensing year and have time to complete the required training hours. The foster parents are allowed to complete training anytime within the 12 month licensing period.

When a foster parent is caring for a child with special needs, the OCS PSS or Community Care Licensing Specialist may make a referral to ACRF for additional training. If a foster parent requests training on a topic that ACRF does not have, ACRF will prepare training for the requested topic or refer to an agency or organization that presents training on the topic.

Foster Care licensing specialists request the training records for foster families from ACRF and review the records for compliance with annual requirements. If a foster parent does not meet the required hours, they become not fully licensed and payment is issued through state general funds instead of title IV-E funding. Alaska does not have an established training requirement for unlicensed relatives or adoptive parents.

• In Alaska, the initial and ongoing training addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.

ACRF office provides consistent curricula: Core Training for Resource Families, Connecting While Correcting, Trauma-Informed Caregiving for Resource Families, and the Adoption Learning Path classes (Core + Adopting through OCS + Building Families through Adoption). In addition, ACRF partners with OCS to develop new curriculum to meet State and Federal requirements. For example, new curriculums that were developed since 2015 include 1) Public Law 113-183, Preventing Sex Trafficking and Strengthening Families Act, and 2) the federally-mandated Reasonable and Prudent Parent Standard. For both efforts, OCS and ACRF participated on a workgroup, developed a work plan, and identified the key strategies to provide training and technical assistance to foster families. ACRF developed the training materials and worked with OCS licensing staff to provide mailings, webinars and individual outreach to families.

The ACRF 2016 Satisfaction Survey was conducted from August 24 through September 21, 2016. The survey was sent to 2300 foster and adoptive parents, and OCS staff. 226 individuals responded to the

survey, for a response rate of approximately 10%. Of the 226 individuals, 85.23% found the topics and subjects current and useful to the foster parent's situation. The yearly satisfaction survey assists ACRF and OCS to measure whether the foster and adoptive parent training system is functioning effectively to address information and skills needed to carry out their duties as foster and adoptive parents.

ACRF uses training evaluation forms for all training delivered. The training evaluation forms are completed by participants at the end of each training delivered. The evaluations include the following question: "How well do you feel these classes will help you with/add to your skills/knowledge?" In SFY 2016, 575 surveys were returned for classroom and on-site training, not including CORE. Of these, 87% of participants of onsite classroom training stated that the trainings were excellent or good for increasing the knowledge they need to be a foster parent. In addition, in SFY 2016, 2055 evaluations were returned for CORE Training for Resource Families. Of these, 89.2% of participants of onsite classroom training stated that the trainings were excellent or good for increasing the knowledge they need to be a foster parent.

The OCS QA Unit conducted a 2015 survey of licensed foster parents. The survey was sent to 1290 licensed foster parents. There were 743 foster parents who returned the survey for a response rate of 58%. Of those responding to the survey, 85% reported that the training provided has prepared them for the challenges of providing care for children. Foster parents were asked their perceptions of the training program, and how prepared they were for the challenges of providing care.

Training Prepared Foster Parents for Challenges of Providing Care

Region	Number of Foster Parents	Agree	Percent	Do Not Agree	Percent
Northern	88	78	89%	10	11%
Southcentral	119	102	86%	17	14%
Anchorage	249	214	86%	35	14%
Western	28	24	86%	4	14%
Southeast	93	74	80%	19	20%
Total	577	492	85%	85	15%

Source: OCS Quality Assurance Unit, OCS Foster Parent Survey, 2015

The table above provides the data results specifically related to the training provided to foster and adoptive parents who participate in training. Statewide, an overwhelming number of foster parents find it helpful in providing knowledge and skills needed to be successful in their role.

Adoption Training

OCS does not have ongoing training requirements for adoptive families, but encourages families to continue to seek support through continuing education opportunities. ACRF maintains a listing of the families who have adopted through OCS and notifies them of trainings and events. Families may also be referred to ACRF post-adoption by the OCS adoption unit if a family contacts them for support or subsidy changes. The ACRF provides a wide variety of adoption specific courses and also encourages adoptive and guardianship parents to utilize the trainings developed for resource families.

If specialized or individualized training needs arise, the PSS may make referrals to ACRF for adoptive families. Once the adoption home study referral has been completed, ACRF invites these families to

classes, places the family on the ACRF mailing list, and provides a training assessment and develops a training packet for adoptive families. An adoptive family can receive training from ACRF at any time to assist with issues that arise while parenting their adopted child. These services are available to all adoptive families in Alaska. If post-adoption needs arise, the family can continue to access support and services. If the family contacts the OCS adoption unit, they may refer the family to ACRF as well.

The Preparation for Adoption Readiness for Kids in Alaska program (PARKA) was created to provide intensive preparation training to families interested in adopting special needs children from foster care. This program began in 2010 and serves the Anchorage community and those families in driving distance. Once the family has been through the program, OCS purchases a home study for the family, and the PARKA project partners with the OCS regional offices to provide matching services. Since the inception of the program in 2010 through June 2016 the PARKA program has trained and prepared 60 families for adopting special needs children. Since the program began 35 children were placed with PARKA families; 25 children have finalized adoptions through this process.

Residential Child Care Facilities

The State of Alaska has 51 licensed Residential Licensed Child Care Facilities (RCCF). Each facility has a system for training staff. Regulation 7 AAC 50.250(e) Orientation and Training states that a residential child care facility shall ensure that each caregiver, other than volunteer, receives a minimum of 15 hours of training a year. The 15 hours must be in addition to orientation, training in CPR, and first aid.

RCCFs may be licensed to provide specializations services such as: boarding care, emergency shelter care, emergency shelter care for runaway children, supervised transition living, care for pregnant and parenting adolescents, substance use, wilderness and adventure experiences and maternity homes. Each specialization has additional training requirements outlined in Alaska regulations. Each facility monitors the effectiveness of their training. The Division of Health Care Services (DHCS), Residential Licensing Unit monitors that training requirements are met during on-site inspections for the purpose of licensing, a licensing renewal, or an investigation.

Generally, RCCF licenses are renewed once every two years. During SFY 16, the DHCS completed 28 on-site inspections for RCCFs scheduled for license renewal. During the non-renewal year facilities, are provided a self-inspection packet to complete and submit to the Department. During a licensing inspection, the licensing specialist reviews and documents training hours per state statutes and regulations. Employee orientation and training documentation are reviewed for full time, part-time and volunteer staff. The Department reviews all new hires and a sample of continuously employed staff including auxiliary staff (maintenance, cooks, janitorial, office, etc.). No data is available to determine if training prepares RCCF staff for the position they are employed.

When training hours are not met for RCCFs, a corrective action is required. Of the 28 facilities that had training records reviewed onsite, nine facilities had one or more staff out of compliance, with a total of 27 staff members not having the required number of annual training hours documented. Two of the nine facilities had previous corrective actions for the training regulation and were given a warning notice as well as required to submit a plan of correction.

Alaska has demonstrated through the data and information above that CFSR, Item 28 is a strength area. Alaska has a comprehensive training curriculum available statewide for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities. The training addresses the skills and knowledge needed to carry out their duties with and meet the needs of children incare.

E. Service Array and Resource Development

The systemic factor related to Service Array and Resource Development is an area of need in Alaska. Alaska has determined that we do not have a fully functioning/effective service array. Alaska has limited services and not all services are available in all areas of the state. The following items will be addressed in this systemic factor:

• Item 29: Array of Services

• Item 30: Individualizing Services

Item 29: Array of Services

How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the CFSP?

- Services that assess the strengths and needs of children and families and determine other service needs;
- Services that address the needs of families in addition to individual children in order to create a safe home environment:
- Services that enable children to remain safely with their parents when reasonable; and
- Services that help children in foster and adoptive placements achievepermanency.

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

- The state has all the above-referenced services in each political jurisdiction covered by the CFSP:
- Any gaps in the above-referenced array of services in terms of accessibility of such services across all political jurisdictions covered by the CFSP.

State Response:

Alaska asserts that Item 29 is an area needing improvement. Alaska utilizes a variety of contracted and community providers, including Tribes for service provision. The OCS Service Array section has reviewed its resource use, expenditure data; performance based grants, and the types, duration and intensity of service provision as well as a recent community survey to make this determination.

The OCS provides child protection services to all communities and villages in Alaska, with the exception of three Tribal communities with exclusive jurisdiction. Due to the vast geographical nature of Alaska, it is difficult to ensure all services are accessible in all political subdivisions. While this cannot be changed, it is the number one challenge regarding having a fully functioning service array.

There are significant gaps in the services array throughout the state, especially in rural areas where communities are not connected by roads. A visual representation of Alaska's regional geography is provided in Appendix III. The map illustrates the vastness between Alaska's communities as well as colored dots to indicate where existing grant services are located.

The OCS Service Array Section manages funding for services provided under Title IV-B Subparts 1 & 2, Chafee, ETV, CAPTA, Title IV-E, CBCAP, Adoptions and Legal Guardianship Incentive Funds, and state general funds to provide services including:

• Child Advocacy Centers (CAC)s and the associated Multi-Disciplinary Teams (MDT);

- Family Support Services: Community prevention services available to non-OCS involved families:
- Family Preservation Services: In-home services to prevent removal for families identified by OCS to have children at high risk of maltreatment;
- Family Reunification Services: Services to promote the return of children to their parents' home following out-of-home placement. These services include family contact/visitation services;
- Emergency Shelter Services: Supporting the needs of youth intransition;
- Mentorship Services: Identifying and fostering supportive relationships for youth;
- Chafee Independent Living Services: Assisting youth in their transition to independence;
- Education and Training Voucher Program: post-secondary education support services foryouth;
- Services for adoption and guardianship support;
- Adoption and Guardianship Assistance.

As a part of the 2008 CFSR, Alaska identified in the statewide assessment, this item was rated as an area in need of improvement, in part, due to the lack of services available, specifically substance abuse and mental health treatment services statewide. The Division of Behavioral Health provides mental health and substance abuse services to address the needs of children and families in Alaska. Numerous barriers exist to Alaska's OCS involved children and families, in being able to access these types of residential and outpatient services statewide. According to the Alaska Behavioral Health Systems Assessment Final Report (2015), mental health and addiction issues in Alaska create a high need for improved service provision. With the limited amount of federal and state funding allocated to the OCS Service Array section programs, it is difficult to meet the needs of children, youth and families in all communities across the State.

Alaska is in the infancy stages of performance-based contracting which will, within the next few years, enable the Department to track service outcomes to identified needs and case outcomes. In the past, Alaska was focused on the numbers of services provided or individuals served, as opposed to whether those services are effective or efficient. Alaska has worked to implement Results-Based Budgeting performance measures into its statewide grant processes. This process has not yet resulted in data which we can use to determine if the services provided are meeting the needs or whether they should be discontinued or modified. Much of the information regarding functioning of each grant comes from informal contact between the regional OCS offices that refer the children and families, as well as from quarterly grant reports which report statistical and anecdotal information about services delivered. The Service Array section continues to refine strategies and integrate new evaluation elements as practice shifts over time for each region, while also working with managers and stakeholders to define what grant programs are necessary, which are functioning and which need to be modified.

OCS relies on grantees, community agencies and organizations to deliver services to children and families. OCS administers grants and contracts for service provision and is only starting to develop ways to adjust existing resources and to develop new ones to meet identified needs. OCS leadership provides direction to Service Array for the development and direction of grant and contract services based on agency priorities as well as available funding sources. Once a grant is awarded to a grantee in a competitive process, the grantee enters into program funding for approximately three years. At each new fiscal year during this cycle, a new continuation grant is awarded. This gives OCS the opportunity to formally clarify and give new programmatic direction to the grantee to change or modify grant services or funding as needed. At this time, quarterly grant reporting and meetings with the OCS offices who interact with the grantee inform changes, modifications and corrections to the grantee's process, which helps improve the grant program or grantee functioning.

Alaska's system of granting funds does not meet the extent of Alaska's needs. The awarded grantee agency typically provides services within the community of their location, and sometimes communities

located nearby. The amount of funding awarded is not always sufficient to pay for the personnel or travel which would be necessary for adequate service provision in areas outside of the immediate community. Alaska has a significant number of remote communities which are only accessible by plane or boat. Based on the history of grant awards, it is clear that efforts to solicit for a grantee are often unsuccessful in the more rural areas, particularly in the Southeast and Western Regions. The map provided in Appendix III shows the lack of formal OCS grant service provision in those regions. There are many theories as to why this may be, but again, there has been no formal survey or needs assessment to determine why community agencies or Tribes do not apply for available grant awards. As the grant solicitation is a formal competitive process, there is no built in opportunity for feedback from the community about why they did or did not submit a proposal to provide the solicited services.

In an effort to determine statewide needs for strengthening families in Alaska communities, OCS conducted a one-time community assessment; these Community Cafes were completed in SFY16, and was completed so that OCS could learn about what communities need to help strengthen their families. The needs assessment was qualitative in nature, its quality was high. Participants of the Community Cafés included a broad representation from each community, including interested community members, professionals, leaders and parents of children. The Cafés occurred in all five of the OCS service regions and included the communities of Anchorage (providers n=30) (families n=50), Hooper Bay (n=100), Kotzebue (n=40), Sitka (n=15), Sutton (n=15), and Wasilla (n=25). Qualitative data was collected and analyzed. This needs assessment focused on gathering community and parent input on what the priorities are for each area to strengthen families in their communities. There was surprising uniformity in the top priorities across the various cafes conducted in the different regions.

Here is a list of the top community needs identified through the Community Cafes:

- Provide services locally;
- o Connect families with someone to help them access services;
- o Encourage workplaces and employers to be flexible and understanding;
- o Connect families with someone to help them access services;
- Host community gatherings and events;
- Share cultural traditions, language, stories and skills;
- Hands-on, in-home coaching for new parents;
- Engage elders and extended family to support new parents;
- Help parents tend to their own personal and emotional needs;
- Help parents provide an environment for their children that is nurturing and loving.

Other important themes received from the findings from the Community Cafés related to the OCS Service Array:

- In all of the cafés, participants expressed the need for service providers and the children and families they serve to build trust, form alliances and bridge cultural and other divides. This was expressed through concerns from service providers about how to engage families in services and supports, how to share information about resources that exist; and from families about the lack of support and feeling that the service provider was working against them and not towards a common aim.
- Participants identified the need to increase access to mental health services for parents, particularly for parents with FASD and other cognitive deficits.
- Participants consistently prioritized connecting families with a helpful, trusting person
 who can help families advocate, navigate and connect to needed resources. While most
 participants agreed there were resources available in their communities, often families

and service providers were not aware of available services. A peer helper, or family navigator, is necessary to create bridges and connect families with resources.

The café findings are consistent with the 2015 Tribal survey (n=217) with a response rate of 44% where qualitative comments underscored the need for service availability in local communities as a means to prevent removal, for outreach to AK Native families to encourage them to become foster parents and for services to be more supportive and responsive and less judgmental. OCS is using the data in various ways. The themes produced by the Tribal survey report are being used in decision making about improvements and changes to existing grants or the formulation of new grants which can help fill gaps across regions. The information has informed the development of a parent navigation program to meet the identified needs of connecting OCS-involved parents to services and supports.

1. Services that assess the strengths and needs of children and families and determine other service needs.

OCS partners closely with the Tribes and other community service providers to assess strengths and needs and to determine other service needs. In addition, OCS case workers are often relied upon by the community and OCS-involved children and families, to identify the child and family strengths and needs; the informal and community resources available; and ways to meet the identified needs when there are no other resources available within the community.

The OCS case worker is often the conduit for the family to access services as the case worker makes the formal referral for the necessary service and will authorize special needs funding to help the family pay for services if there are no other resources available. OCS utilizes special needs funds to pay for services and/or transportation to services which might not otherwise be available to children and families to meet their needs, such as substance abuse and mental health assessments for parents and children. OCS provides special needs funding for services and travel to services because not all services are accessible throughout the different OCS service regions, children and families cannot afford to pay for the services and there may be a lack of Medicaid providers to help cover necessaryservices.

While the Medicaid system should be able to pay for some services, barriers in the system make it difficult to impossible for the child or family to obtain these services using Medicaid resources. Some of these challenges include: 1) no Medicaid providers in the community;2) the Medicaid providers available are not seeing new clients; or 3) the agency in the community who can provide the services has chosen not to be a Medicaid provider due to the billing challenges of the Medicaidsystem.

In Section III of this document, under Well-Being 1, Alaska included data and tables related to the OCS QA case review data regarding CFSR, Item 12 for Needs Assessment and Services for Children, and Needs Assessment and Services for Parents, for calendar years 2015 and 2016. Item 12 noted that the Needs Assessment and Services of Child, Parents and Foster Parents improved from 32.9% in 2015 to 61% in 2016; however, OCS remains well below the national standard of 95% or more for this item.

Alaska does not have a formal, established routine for collecting needs assessment data from communities regarding service array, resource development and service gaps. Nor, is the service array routinely included as an aspect of the OCS CQI processes. Although OCS frequently engages in meaningful discussions about needs and gaps in various community and stakeholder meetings, there is no process to systematically evaluate the data in order to make decisions which will contribute to an improved functioning of services array.

The need for an increase of the number and quality of services to meet identified needs is a recurring theme in various community needs assessments which have been conducted by other state agencies and communities. Areas of need continue to be identified, specific to mental health and substance abuse

services. The Alaska Behavioral Health Systems Assessment Final Report (2015) listed various barriers facing Alaska's Behavioral Health System. OCS faces these same barriers with the children and families served and would concur with the findings of this report. These barriers are:

- Gaps in the continuum of care for mental health and substance abuse services;
- Medicaid presents challenges to Alaska's behavioral health system, billing capacity is lacking;
- Documentation challenges presented by requirements of Medicaid;
- Workforce development to meet increased need for behavioral health services;
- Geographic differences make it difficult to know what which resources are available; and divides between the behavioral health system and other systems.
 Source: Alaska Behavioral Health Systems Assessment Final Report (10/22/15), www.healthymatsu.org/LiteratureRetrieve.aspx?ID=132208

The OCS Independent Living (IL) program provides assessment and independent living services to eligible youth ages 16 and older is available statewide. Currently, there are seven Regional Independent Living Specialists who specialize in services to older youth; these specialists provide the Casey Life Skills needs assessments for youth and assist them in developing individualized transition plans which identify needed resources and services to help youth meet their goals. NYTD data for FFY15 shows that approximately 62% of youth received an Independent Living Needs Assessment. This is an improvement from FFY13 where only 45% of youth received this needs assessment. Approximately 45% of eligible youth received IL services in SFY16. Youth in foster care, received a slightly higher percentage of IL services (48%) compared to youth out of foster care (42%).

NYTD Outcome data from FFY15 indicates that the areas of financial self-sufficiency, educational attainment and homelessness outcomes for foster youth are areas in need of improvement in Alaska. Available housing supports are highly utilized, with the program providing direct housing support and housing vouchers in multiple communities through a partnership with the Alaska Housing Finance Corporation (AHFC). Despite the existing resources, housing continues to be a challenge, with housing supports not available in the remote areas of the state and the high cost of housing overall. Overall, housing stability has proven difficult for youth once they obtain housing indicating a need for service array to target case management and support for youth who need both housing and housing stability.

2. Services that address the needs of families in addition to individual children in order to create a safe home environment.

OCS has a strong evidence of statewide availability across regions to Child Advocacy Center (CAC) services which are services that can help address the needs of families in addition to individual children in order to create a safe home environment. The CACs are currently the largest grant programs managed within the OCS Service Array Section. CACs respond to the high volume of child sexual and physical abuse allegations in the state. If a community does not have a functioning CAC, travel is provided by OCS or law enforcement to the identified CAC for the area. There are currently 11 fully-established CACs which provide assessment and determine other service needs for children and families in Alaska. Additionally, there is a developing CAC in Barrow (serving the North Slope Borough) which is expected to become fully functional in 2017. The CAC in Nome was accredited in SFY16 by the National Children's Alliance, making it the fourth CAC in Alaska to achieve this goal. OCS supports the accreditation process through grant funding, and training and technical assistance to CACs to help them meet the rigorous national standards necessary for accreditation. The OCS grants require the CACs to offer victims of abuse and their non-offending caregivers quality and comprehensive services that meet all

of their critical medical, mental health, case management, legal and other needs following an incident of abuse.

In SFY16, CACs served 2156 children. Data from CAC quarterly grant reports indicate that 96% of parents surveyed (for 1162 survey responses), parents reported satisfactory safety, and positive or neutral effect on child's anxiety. The percentage of children who engage in follow-up mental health services (40%) indicates this is an area needing improvement and this was confirmed through a needs assessment conducted in May 2016. The needs assessment asked the existing CACs to identify the needs of their program and to justify those needs based upon the numbers they serve and their accreditation requirements. This assessment identified gaps in the availability of follow-up services for clients including specialized, trauma-focused, mental health services; advocacy services for families; and specialized medical services. Statewide, there are waitlists for specialized mental health services for children recovering from trauma. There are regional gaps in CAC services due to turnover of forensically-trained, medical providers in rural Alaska. Alaska recognizes that funding for CACs has remained unchanged from SFY 2009-2016 while service delivery has increased across the majority of the CACs.

3. Services that enable children to remain safely with their parents when reasonable

Current in-home or family preservation grant services are not sufficient or accessible statewide, and there is no quantitative or formal qualitative information to show that the existing services are effective. OCS has experienced an increase in the number of children in custody; an effective family preservation service may be useful as a means to try to useful as a means to ensure that children with manageable safety threats can be maintained in their own homes. OCS does not have a formal in-home service model; however, OCS CPS policy, 2.2.10.2, Case Decision, indicates that OCS must open a case if a child is at high risk of future maltreatment or the child is unsafe, but can be maintained in their own home with a safety plan in place. It has long been an OCS philosophy that children should be maintained in their own homes whenever possible; however, OCS has struggled over many years with in-home case identification and management.

2016 Safety Maintained In-Home When Possible and Appropriate

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out-of-home	40	37	3	93%
In-home	52	31	21	60%
Total	92	68	24	74%

Source: OCS Quality Assurance Annual Reports. CY 2016

2015 Safety Maintained In Home When Possible and Appropriate

Case Type	Case Count	Strength	Area Needing Improvement	Strength Rate
Out-of- home	97	70	27	72.2%
In-home	92	34	58	37.0%
Total	189	104	85	55.0%

Source: OCS Quality Assurance Annual Reports. CY 2015

When OCS opens a case for in-home case management, OCS may refer the family to in-home family preservation services delivered by OCS grantees. The chart below shows the communities with available grantees as well as numbers served and an effectiveness measure.

SFY16 Family Preservation Data

Community	Families Served	Children Served	Percentage of Contact Hours Met	% Reported Increase in Parental Ability
Anchorage	9	27	70%	80%
Ketchikan	12	14	55%	90%
Fairbanks	35	76	40%	75%
Homer	15	28	76%	70%
Mat-Su	40	76	180%	48%
Nome	11	37	76%	70%
Totals	122	258		

Source: OCS Family Preservation Grant Reports, SFY16, 7/1/2015 to 6/30/2016.

OCS is beginning to collect data on the effectiveness of in-home services provided by services providers who receive an OCS grant. The data has no comparison since these measures were not collected by every grantee during SFY 2016. OCS would expect to see that the population who received these in-home preservation services resulted in outcomes of children being able to remain safely in their home, at a higher rate than families who did not receive the services. This is an aspect of data collection within grant service provision that needs more development and refining. While the grantee self-report of effectiveness based on established Results-Based Budgeting measures is important, it will also be important for OCS to check those performance measures against the outcomes OCS is seeing in the population served.

In evaluation of anecdotal information collected from quarterly grantee reports and telephonic meetings with grantees, services can be underutilized by families when the communication between the grantee and the OCS office is poor, or when the grantee is having staffing and turnover issues. Alaska's service grantees have similar turnover and workforce issues as OCS. When there is turnover, service provision to families decrease or new referrals are not made. This grantee staff turnover has the most impact in the rural area grants when the grantee agency may only have one or two staff delivering the services. Aside from formal in-home family preservation grant services, there are in-home services being delivered by Tribal entities or other community service providers. OCS does not collect data from these community providers regarding the numbers or quality of the services they deliver to OCS-involved families.

4. Services that help children in foster and adoptive placements achieve permanency

a. Services to promote reunification of children with their families

The OCS Family Reunification grant program provides services to families referred by OCS who have a child in out-of-home care. These services consist of supervised visitation, parent coaching and support, and assistance with coordination of case plan activities. The total number of children served from existing reunification family contact grants in SFY16 is about 24% of the population of children who were in out-of-home care. ORCA data indicate that during calendar year 2016, 57% of discharges from out-of-home placement were to reunification with the parent. The rate has improved slightly since 2014 when 51% of the discharges were for the reason of reunification. This data indicates both lack of accessibility to the services and a lack of services to promote reunification.

SFY16 Family Reunification Data

Community served	Provider	Families Served	Children Served	% Reported Increase in Parental Ability
Anchorage	Salvation Army Booth	58	125	unknown
Anchorage	Cook Inlet Tribal Council	46	112	95%
Fairbanks	Fairbanks Counseling and Adoption	45	82	90%
Ketchikan	Women in Safe Homes	41	50	90%
Mat-Su	Alaska Family Services	249	303	unknown
Nome	Nome Community Center	32	73	80%
Totals		471	745	

Source: SFY16 Grantee Reports

The above chart shows a summary of SFY16 data compiled from quarterly grant reports for the OCS Family Reunification grants in which families are self-reporting increases in their parenting abilities. While grantees are also reporting high percentages in the increase of protective capacities there is not currently information to show how this is related or correlated to reunification rates for the families who receive these services. Evaluation is a growth area for this program as well as across the OCS service array in order to show the effectiveness and quality of the services, so OCS can make determine whether the services are having the desired impact.

Due to the significant increase in children in care since 1/1/2014, the need for timely and effective family reunification services is extensive. The family reunification grantees do not report that there are waitlists for services however, OCS is aware that the family reunification services are not meeting the need compared to the numbers of children who are in out-of-home care.

The specific need for supervised visitation to meet the needs of children and parents to have family contact during the out-of-home stay has been a driving force behind OCS referrals, more so than the parent coaching and case plan services provided by the family reunification grants. Family contact requires time-intensive efforts including: coordinating schedules, arranging transportation, supervision of the contact and documentation. This high need has prompted a SFY17 increase of funding award for grantees located in the urban Anchorage and Southcentral regions. OCS Caseworker workloads mean that a high level of support is needed from grant services or Tribal organizations, other community providers, or the foster parents in order to meet the family contact needs for families.

b. Services to Promote Adoption and Guardianship when children cannot be reunified

Sadly, the number of children who cannot be returned home and need permanent homes each year exceeds the number of families who are available to meet this need. Based on ORCA data as of October 2016, there were 402 children in out-of-home care who are legally free. While many of these children may be placed with relatives or other potentially permanent homes, an undetermined number are not with a permanent placement. Data entry into ORCA is not a reliable source of information as to whether children are with an identified permanent placement or not. It is important for OCS to have accuracy in the data regarding how many children in out-of-home care are not in potentially permanent homes, in order to target strategies to promote adoption or guardianship for these children and youth.

OCS funds grantees to provide guardianship and adoption home studies for families who have been identified as permanent placements for specific children in OCS foster care. Home studies serve as an assessment of the prospective permanent family, but they are also designed to help the family prepare and develop awareness about the concept of adoption and guardianship and some of the changes they may expect for their family and the child. Home studies are required to finalize an adoption or guardianship in Alaska, therefore, they promote permanency for children. Home study services are delivered statewide by grantees who are assigned to each region of the state. Grantee home study writers travel to where the potential adoptive or guardianship family is living in Alaska in order to provide the services and they must complete the home study. Quarterly reports submitted by the grantee show high adherence to timely completion of the home study despite challenges due to family schedules, weather delays, and the assessment of sometimes complicated family situations. Home study delays can also be caused by OCS worker delay in referring the family for a home study in a timely manner. There are no measures to determine quality of the home study, although the OCS Regional Permanency Specialists in the region are responsible for reviewing the studies for quality and completeness. If the study does not meet quality standards, they send the home study back to the grantee for revisions. Data is not maintained regarding how often studies are returned for revisions.

Subsidized adoption and guardianships are provided to families who adopt and become guardians for children who cannot return to their home of origin; this is available statewide and for families adopting, or becoming guardians of, OCS children who reside in other states. This service promotes adoption and guardianship by helping defer some of the costs of meeting the child's ongoing needs in post-adoption or guardianship. This service may provide a monthly payment negotiated to assist the family in meeting the special needs of the child, and most subsidies provide Medicaid coverage, which is important for families in meeting the children's medical and behavioral health needs in post-adoption.

Adoption and Guardianship Annual Data, SFY 2013-2016

duoption and Guardianship Almuai Data, SF 1 2013-2010							
Adoptions Funded through Title IV-E Funds	2013	2014	2015	2016			
Current (Continuing + New - Aged Out - Disrupted)	2219	2339	2554	2622			
Adoptions Funded by the State of Alaska							
Current (Continuing + New - Aged Out - Disrupted)	631	620	634	595			
Guardianships Funded through Title IV-E							
Funds							
Current (Continuing + New - Aged Out - Disrupted)	28	37	49	60			
Guardianships Funded by the State of Alaska							
Current (Continuing + New - Aged Out - Disrupted)	93	80	72	53			
TOTALS							
Continuing Adoptions & Guardianships	2850	2971	3129	3309			
Children in Active Subsidies at the end of the FY	2971	3076	3309	3330			

Source: OCS Subsidized Adoption and Guardianship Annual data for SFYs 2013, 2014, 2015, and 2016.

The above table shows the numbers of the number of adoption and guardianship subsidies signed in SFY 2013 – SFY 2016. Services to promote adoption and guardianship for children is an emergent need, considering that nearly 50% of children in care are reunified, the other 50% will need to exit through another permanency option such as adoption and guardianship. As the table indicates, the number of new

adoption and guardianship subsidies signed in SFY16 fell from the previous year although the numbers of children entering care increased during that fiscal year.

It is clear from the data and analysis that CFSR, Item 29 Array of Services, is an area needing improvement. The array of services is not fully functioning, and there are many services that are not available in all communities of Alaska. The services that are available do not have automated or standardized referral processes, and families and workers may not always be aware of what services and resources are available to them.

Item 30: Individualizing Services

How well is the service array and resource development system functioning statewide to ensure that the services in item 29 can be individualized to meet the unique needs of children and families served by the agency?

Please provide relevant quantitative/qualitative data or information that show whether the services in item 29 are individualized to meet the unique needs of children and families served by the agency.

 Services that are developmentally and/or culturally appropriate (including linguistically competent), responsive to disability and special needs, or accessed through flexible funding are examples of how the unique needs of children and families are met by the agency.

State Response:

The state asserts that CFSR Item 30, Individualizing Services, is an area in need of improvement. While there are available flexible funding resources and developmentally and culturally appropriate services supported by the State, these resources are not sufficient to meet the unique needs children and families in Alaska. Given the amount of limited funding available to support services, coupled with the limited availability of community-based supports for families, individualized services and meeting the unique needs of families and children is an ongoing challenge. In CY 2016, OCS has developed a web-based resource listing of all of the OCS- funded grants available statewide, including the communities the grantees serve in order to assist OCS workers in linking families and children with the services to meet their individualized needs (located at: http://dhss.alaska.gov/ocs/Documents/GrantMap/default.htm). Additionally in the last year, OCS staff were trained regarding the availability of OCS Service Array programs funded by OCS. There is an additional need to focus on identifying other community resources which meet developmental and cultural needs of children and families.

In CFSR Item 29, the OCS Tribal Survey outlined of the findings from the survey. This survey also indicated an average 57% agreement from the respondents that collaborations between OCS and Tribal workers have strengthened the quality of services for Alaska Native children. The survey findings rated the item "cultural continuity of Alaska Native children in maintained" at low 37% while a child is in out-of-home care. While these percentages show that OCS' efforts to individualize services are resulting in an improvement of the quality of services, there is more that needs to be done regarding cultural continuity to have higher functioning in this area.

OCS is committed to continuing to strengthen its service array by working closely with Tribes and Tribal organizations. Alaska is making efforts to fill service gaps by partnering with Tribes to facilitate

culturally competent and local resources to help families who need services. A five-year strategic plan entitled, "Transforming Child Welfare Outcomes for Alaska Native Children", was developed in partnership with community and Tribal partners to identify objectives to transform outcomes for Alaska Native children. One of the six primary objectives identified in the plan is the ability to provide a continuum of culturally-specific supports to Alaska Native families in the child welfare system. An interdepartmental work group formed to tackle this issue by addressing systemic barriers in how traditional services are identified, procured, and integrated into family service plans. This work group is in the process of compiling regionalized lists of traditional healing/wellness methods/activities, vetted by elders and traditional healers. These types of services may be available in virtually every corner of this state regardless of the remoteness of location and in some instances may be used as in lieu of traditional western services, or as a supplement to formal services in the form of pre or postcare.

Alaska recognizes that a cultural and racial barrier exists within the delivery of services to minority populations in Alaska. OCS workers often have difficulty engaging with Alaska Native families because of fear and mistrust by the families and lack of cultural competency of OCS workers. As a result, families are often unwilling to open their door, or to engage in services. Cultural interventions are not universally accepted in the current system which is a barrier to individualizing services. Provision of services through the Rural Child Welfare grant to local Tribal organizations helps bridge the gap between the Office of Children's Services organization and Alaska Native families in select rural areas where grants were applied for an awarded.

The OCS Rural Child Welfare (RCW) grants are provided to rural organizations to help fill gaps in formal service provision in specific rural communities. In SFY16, the grantees were all Tribal agencies or organizations who provided Alaska Native services, primarily to families, including, facilitate/monitor/update Tribal In-Home Safety or Case Plan, make referrals/help complete applications for services, one-on-one parenting guidance/support, engage/take/teach parents and children about cultural activities (subsistence, dance, art), relative searches, relative placement support, and foster parent recruitment.

While data is available to show the numbers of individuals being served by the Rural Child Welfare grant in identified rural areas of the state, it is clear that Alaska cannot meet the individualized needs, based on the actual number of children served through RCW compared to the percentage of children who are residing in out-of-home care in a rural areas (not including the communities of Anchorage Eagle River, JBER, Wasilla, Ft. Wainwright, North Pole or Fairbanks). Narrative reports from RCW grantees and verbal reports from OCS workers indicate that some of the factors related to relatively low numbers served by the RCW grant has to do with a variety of factors, to include: 1) low caseload sizes of RCW workers to account for the amount of travel they have to do to meet with rural families; 2) communication difficulties in the referral process; 3) staff turnover, both for OCS workers who make the referrals and for RCW workers who perform the service provision. Data collection has not focused on whether the service provision for RCW by Tribal entities has improved outcomes for the Alaska Native population served in the rural areas.

Source data from the RCW grantee and ORCA data reports, indicate that the RCW grants are serving nearly 19% of the Alaska Native / American Indian children who are placed in out-of-home care and residing in rural Alaska communities. This type of service provision in collaboration with Tribes and Tribal organizations is an important step in meeting the cultural needs children or families in these rural areas.

The OCS Service Array Section provides training and technical assistance to offer professional development opportunities for grantee and contract providers to help increase the quality of service delivery in meeting the needs of the population served. Examples of training and technical assistance topics include: 1) trauma-informed care; 2) cultural awareness; and 3) working with children and parents

with disabilities. Increased training and the specialization of staff in various areas of service delivery promote individualized service delivery; however staff turnover for both OCS and with providers of services is one of the barriers to achieving this goal. While grantees report that the training and assistance is helpful and appreciated, OCS does not currently have a process to assess the effectiveness of these efforts.

Due to limited services being available, individualized services are not always available or accessible to children and families Alaska has determined that CFSR, Item 30, Individualizing Services, is an area needing improvement.

F. Agency Responsiveness to the Community

For this Systemic Factor, the following items will be addressed:

- Item 31: State Engagement and Consultation With Stakeholders Pursuant to CFSP and APSR
- Item 32: Coordination of CFSP services with Other Federal Programs

Item 31: State Engagement and Consultation With Stakeholders Pursuant to CFSP and APSR

How well is the agency responsiveness to the community system functioning statewide to ensure that in implementing the provisions of the CFSP and developing related APSRs, 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, objectives, and annual updates of the CFSP?

Please provide relevant quantitative/qualitative data or information that show that in implementing the provisions of the CFSP and related APSRs, 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, objectives, and annual updates of the CFSP.

State Response:

The state asserts that CFSR, Item 31, State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR, is a strength area for Alaska. The OCS includes internal and external partners in ongoing consultation and includes their feedback and concerns in decision-making and annual updates to the CFSP and related APSRs. Community cafes were facilitated around the state to assist in gathering the input and feedback from stakeholders.

Alaska's 2015-2019 CFSP was developed with input and recommendations provided by key statewide stakeholder groups during their regularly scheduled meetings. External groups include: Tribal-State Collaboration Group (TSCG), Court Improvement Project (CIP), Alaska Citizens' Review Panel (CRP), Facing Foster Care in Alaska (FFCA), OCS grantees and contractors, the Health Oversight Committee (HOC), Resource Family Advisory Board (RFAB), and the Children's Justice Act Task Force (CJATF). Internal OCS groups include: the Staff Advisory Board (SAB), the Executive Steering Committee (ESC), and the OCS Supervisory Leadership Council (SLC).

The concerns and feedback from these groups directly influenced the development and implementation of CFSP goals and objectives. Feedback and areas of concern identified by these partners was used to develop objectives in the CFSP. For example, partners identified the need to improve relative searches and the importance of surveying youth after a change in foster care placement to identify any issues in the home; both of these are currently objectives in the CFSP.

OCS continues to routinely engage with, and solicit feedback and ideas from, numerous and diverse statewide partners as a means of reviewing and assessing the identified priorities and strategies to improve outcomes and services to children and families. Stakeholder input is gathered throughout the year during ongoing program-specific workgroups and committee meetings at state and local levels; OCS uses this input to inform the APSR. Partners are included in the OCS policy committee and the implementation of change initiatives to ensure their feedback is taken into consideration.

OCS facilitates quarterly CFSP/APSR teleconferences or webinars with all stakeholders: these meetings allow staff and partners to learn about the CFSP, ask questions, hear about trends and implementations, and provide feedback and/or voice concerns regarding the strategies and objectives outlined in the CFSP. OCS invites a diverse group of stakeholders to the quarterly meetings to include the following partners: Tribal State Collaboration Group (TSCG), Tribal-State Advisory Team (TSAT) partners, Public Defender Agency, Department of Law, Guardians Ad Litem (GAL), Court-Appointed Special Advocates (CASA), Court Improvement Project (CIP), Citizens' Review Panel (CRP), Facing Foster Care in Alaska (FFCA), OCS regional and program managers, Alaska Center for Resource Families (ACRF), Child Welfare Academy (CWA), and Supervisory Leadership Council (SLC).

These quarterly meetings have encouraged discussion, but to date, there have not been recommendations for changes in the goals and objectives of the CFSP. Internal and external stakeholders continue to attend the meetings and be supportive of the goals and objectives as well as the areas needing improvement as identified in the CFSP. In the January 2017 call, the group was asked "How can OCS gather feedback and suggestions from Tribal and Community Partners?" The group discussion and recommendations included the following:

- Email proposed changes and provide a comment period;
- Ongoing communication with the Resource Family Advisory Board was recommended for issues about resource families;
- Consider how OCS staff are oriented to the legal parties and learn about the role of GAL, PD, and AAG (Anchorage does training);
- "Fix-it meetings" in Anchorage were helpful for problem-solving and partnering; and including partners in change initiatives like was done in family contact plan work several years ago;
- Frontline articles (the OCS staff newsletter) or policy changes being emailed to partners would help partners be aware of practice changes.

Because the meeting occurred in 1/2017, no changes to practice have been made. However, OCS managers will review the suggestions and determine if any will be implemented. In the April quarterly call, OCS will report out on the outcomes of the suggestions.

• In implementing the provisions of the CFSP and related APSRs, the state engages in ongoing consultation with <u>Tribal representatives</u> and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP.

OCS works closely with the Tribal-State Advisory Team (TSAT) and Tribal-State Collaboration Group (TSCG) in an ongoing partnership which has assisted OCS in identifying areas of need and developing plans to improve services in Alaska. Through these groups and other partnerships, there is bidirectional sharing of data and information around the development, implementation, and updating/adjustment of the CFSP and APSR, as well as the consideration of the feedback from the Tribes during that process. The TSCG has been a forum to discuss the state compliance with ICWA, services related to permanency planning for Tribal children, and independent living programs and services.

Input from Tribal partners was gathered in development of the CFSP and APSR: the 2017 APSR has a detailed work plan which lists specific areas of collaboration and partnership with the Tribes. The items in the work plan were developed after recommendations from Tribal partners. An example includes the development of the Tribal Confidentiality Agreement; the agreements allow OCS and Tribes to share information regarding Tribal members involved in the child protection system. The agreement was completed in 2016 and many Tribes have signed the agreements to allow information sharing.

Additionally, the Alaska Federation of Natives, First Alaskans Institute, Alaska DHSS/OCS, the Tribal-State Collaboration Group, and Casey Family Programs continue to partner with OCS and Alaska Native

Tribes on several projects to improve the lives of children, identify pathways to move forward, and align efforts improve outcomes for Alaska Native children, families and communities. Tribal representatives are invited to the quarterly CFSP calls and were included in the meeting with Children's Bureau to review the Statewide Assessment in August 2016. Tribal representatives participate on the OCS policy development workgroup, the Executive Steering Committee, and have been included in planning and implementation to assist with Alaska meeting the requirements of Public Law 113-183 (Preventing Sex Trafficking and Strengthening Families Act). There are currently Tribal partners who participate in policy committee meetings; through these meetings Tribal partners have opportunity to impact policy changes by making recommendations and suggestions, or stating concerns. With the recent policy changes driven by the ICWA / BIA regulation changes, the Tribal partners input assisted OCS in updating and developing policy to guide staff in their work.

Since 2014, OCS has included a Tribal representative as a part of the OCS interview teams for key OCS positions. This collaboration has strengthened OCS' ability to hire staff that have strong values towards working with Alaska Native families.

• In implementing the provisions of the CFSP and related APSRs, the state engages in ongoing consultation with <u>consumers</u> and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP.

In partnership with the FFCA, OCS works with current and former foster care youth to gather input, concerns, and feedback. Three times a year, FFCA hosts a retreat for youth, and OCS independent living (IL) program staff participates in portions of the retreat to interact, share information, and receive feedback from the youth. In March of 2016, the IL program met with youth during a youth retreat to collect input about youth placement disruptions and ideas for OCS to effectively address this issue.

Youth input was used to develop the 2015-2019 CFSP, as several youth around the state participated in the Community Café meetings. Based on strong feedback from older youth and FFCA representatives regarding concerns in foster homes that may cause a placement change, an objective was added to the CFSP to develop and implement a system to receive youth feedback following placement changes. OCS began collaboration on this effort in March 2016 with FFCA youth, and is partnering with FFCA to meet complete this objective. The OCS Director's Executive Team meets with FFCA leadership three times per year to review goals and discuss current work and objectives. FFCA representatives are invited to the quarterly CFSP calls and were included in the meeting with Children's Bureau to review the Statewide Assessment in August 2016.

OCS does not have a direct method of collecting feedback or input from birth parents; however, the Public Defender Agency (which often represents parents in legal CINA proceedings) participates in the quarterly CFSP calls. In January 2016, a representative from the Public Defender Agency had questions regarding relative searches and placement requests from relatives. Following that discussion, separate phone calls were facilitated to gather input and feedback about the process. Based on that feedback, OCS provided additional information to regional and field office staff regarding the importance of relative searches, guidance on how to complete relative searches, and the importance of documenting relative searches in ORCA. The CFSP includes an objective related to early identification of relatives, and this closely ties to the feedback received by the Public Defender Agency.

OCS works in partnership with the Citizens' Review Panel (CRP) on improvements to the child welfare system. The CRP attempts to provide site reviews in each of the 5 OCS service regions each year, and based on the results of these site visits, provides to OCS and the Alaska State Legislature an annual report of their findings and recommendations. OCS meets with the CRP monthly to discuss the various concerns of the CRP and also, develops strategies for CRP assistance. In FY 2016, the CRP collaborated with OCS on the annual staff survey. The CRP, in turn, partnered with the University of Alaska,

Anchorage to complete the staff survey. The results of the staff survey were shared with staff across the agency.

• In implementing the provisions of the CFSP and related APSRs, the state engages in ongoing consultation with <u>service providers</u> and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP.

As part of the development of the 2015-2019 CFSP, community cafes were facilitated around the state, in CY 2014. Through these organized discussions, OCS was able to gather the input and feedback from stakeholders, which included services providers in all regions of the state. In the discussions, the following areas were consistently identified by stakeholders as being essential to enhance Alaska's child welfare system. Consequently, all of these concepts are incorporated into Alaska's 201-2019 plan for improvement:

- early interventions with families;
- better collaboration with community providers;
- quality case plans;
- stronger assessment of resource families;
- increased placement with relatives/ stronger supports for relative caregivers;
- retention of caseworkers; and
- smaller caseloads for caseworkers.

Efforts to engage service providers in the provision of the CFSP and APSR include the 2016 Community Cafes, to collect input regarding prevention services in Alaska. Currently, there is not a clearly defined process to seek ongoing feedback from service providers statewide for purpose of the APSR. Alaska has not identified a consistent method to gather ongoing feedback from service providers in all areas of the state.

• In implementing the provisions of the CFSP and related APSRs, the state engages in ongoing consultation with <u>foster care providers</u> and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP.

The Resource Family Advisory Board (RFAB) is comprised of current and past foster, adoptive, and guardianship resource families, as well as OCS staff, Tribal partners, and community partners such as the ACRF. The RFAB vision is to "strengthen and improve support for resource families and OCS as we partner to care for Alaska's children". OCS has two staff who are members of the RFAB. The RFAB met with OCS Director's Executive Team and other key OCS managers on October 7, 2016 to discuss their current work, concerns that have arisen from foster parents, and provide feedback to OCS.

OCS leaders meet with the RFAB each spring prior to submission of the APSR to review and discuss the objectives and progress on goals. OCS has identified resource family assessment and support as strategy 1.C.2 in the CFSP and supports the work of the RFAB as one component of support to families. The team was supportive of strategies identified in the CFSP Plan for Improvement, including improving background checks, supporting relative caregivers, and early identification of relatives. The group discussed situations they have been involved with that relative identification did not happen quickly, and expressed concerns about the delays in the identification of relatives by OCS. The link to the APSR and CFSP were provided to this group for review, no comments or feedback were received from the RFAB members

• In implementing the provisions of the CFSP and related APSRs, the state engages in ongoing consultation with the <u>juvenile court</u> and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP.

OCS partners with the Court Improvement Project (CIP), the Department of Law, and the Public Defender Agency and has included the participation from these agencies in the quarterly CFSP calls and the meeting with Children's Bureau to review the Statewide Assessment in August 2016. OCS, DJJ and the Alaska Court system continue to work towards piloting the "Dual Status Youth" initiative in Anchorage which targets DJJ youth who are also in legal custody with OCS to improve services to this population of youth.

OCS and the CIP work together on improvements to the court services for children and families. The OCS Director participates in regularly scheduled CIP committee meetings. CIP and OCS have partnered to continue their efforts at systemic improvements for Alaska's children & families in need of aid. The CIP coordinator has participated in planning teleconferences for the CFSP and APSR, in order to provide input and feedback from the CIP and court system perspective. Additionally, the CIP coordinator collaborated with OCS by participating in the title IV-E review in November 2015. The CIP and the Alaska Court System work with OCS on Systemic Factor B: Case Review System, as they track and maintain data needed to respond to the items in that factor.

OCS partners with the Department of Law and involved the Chief Assistant Attorney General in the development of the Statewide Assessment, as well as ongoing development of the CFSP and the APSRs. In addition, Assistant Attorneys General (AAG) participate in committees with the OCS as part of the normal process to provide legal support and recommendations. These collaborative efforts include AAG participation in TSCG and OCS Policy Committee. The AAG works with OCS on Systemic Factor B: Case Review System and Systemic Factor C: Quality Assurance, as they have an active role in the completion of items in those factors.

• In implementing the provisions of the CFSP and related APSRs, the state engages in ongoing consultation with <u>other public and private child- and family-serving agencies</u> and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP.

Alaska values partnership and team work with other agencies; additional information may be found in Systemic Factor E: Services Array regarding specific work with other agencies. OCS routinely engages with, and solicits feedback and ideas from, numerous and diverse statewide partners as a means of reviewing and assessing the identified priorities and strategies to improve outcomes and services to children and families. The 2017 APSR includes an extensive listing of the partnerships and collaborative efforts OCS has in place to engage partners in the work related to the CFSP and APSR, including efforts to illicit feedback regarding concerns. Stakeholder input is gathered throughout the year during ongoing program or population specific workgroups and committee meetings at state and local levels. Additional information specific to how OCS engages in ongoing consultations regarding the provisions of the APSR and CFSP include the following:

• OCS works closely other Department of Health and Social Services divisions to implement the provisions of the CFSP. OCS partners with the Division Health Care Services for the accurate and timely completion of criminal background checks through the HCS centralized background check program, as well as assistance with determining Medicaid reimbursable services and claiming for custody children in need of medical care. Timely background checks are an objective of the CFSP. If there are delays in the completion of background checks, if fingerprint are rejected, or if there are other concerns that may cause delays in this process, OCS and the HCS background check program work together to resolve them.

OCS is fortunate to have a strong partnership with Casey Family Programs (CFP), which
provides significant technical and financial resources in Alaska, without which many positive
partnerships and practice enhancements would not be possible. CFP provides support,
consultation, and technical assistance to Alaska's state and Tribal child welfare services to
strength partnership with Alaska Tribes with a goal to decrease disproportionality in the child
welfare system.

CFP enhanced efforts to increase understanding and importance of permanency values for OCS managers and Tribal and community partners. Improving the timeliness of permanency for children is an objective of the CFSP, and this collaboration provided OCS staff and partners with a solid foundation to move forward in demonstrating improvements related to permanency for children. Through analysis of the data related to the increased number of children in custody, OCS identified a need to focus on permanency needs for children and youth in OCS custody in an effort to exit children from care when it was safe and appropriate.

In September 2016, through partnership with Casey Family Programs, OCS was able to bring the Director's Executive Team, regional and state office managers, ICWA specialists, Permanency Specialists, and numerous partners to the table to identify strategies for improvement in this area. During small group work, regions were able to identify strategies that would assist them in moving forward to reduce the number of children in Out-of-Home care by achieving permanency for children. This additional support and focus appears to be making a difference in the achievement of permanency through adoption and guardianship. In SFY 16 OCS finalized 299 subsidized adoptions and guardianships. In the first six months of SFY 17 OCS has finalized more than 266 subsidized adoptions and guardianships.

In summary, Item 31 is a strength area for Alaska. OCS engages and seeks feedback from internal and external partners. Tribal and community partners are include in identifying concerns, reviewing data, and developing and implementing change efforts. The CFSP and related APSRs were developed with input and through ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies. Through the examples provided above, OCS has documented that we engage partners and utilize the feedback from them to improve policy and practice.

Item 32: Coordination of CFSP Services With Other Federal Programs

How well is the agency responsiveness to the community system functioning statewide to ensure that the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population?

Please provide relevant quantitative/qualitative data or information that show the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population.

State Response:

Alaska asserts that Item 32, Coordination of CFSP Services with Other Federal Programs, is a strength. State services under the CFSP are being coordinated with services and benefits of other federal programs that assist the same service population. Through the collaborative efforts the state asserts that services to meet client needs are improved.

Twice a month, Administrative Operations Managers (AOMs) from the nine divisions of the Department of Health and Social Services meet for the purpose of programmatic and budgetary alignment, utilizing a Results-Based Budgeting framework. By assuring intra-departmental and inter-departmental activities are

planned and executed in a manner that considers both short and long-term results, and reduces duplication of services, the State of Alaska maximizes the generation of federal and other non-state revenues. An example of this work includes recent technology changes: the AOMs collaborated in the implementation of the two recent technical upgrades in accounting and personnel management software, including establishing structure, evaluating department-wide communication plans, and a support system at go-live. Another example is the collaborate work to strength the departments workforce: the Human Resources manager attends these meetings and receives coordinated feedback from the AOMs in regard to areas of need regarding employee recruitment and hiring.

During CY 2016, Alaska has been transitioning to a new statewide accounting system, Integrated Resource Information System (IRIS) in which continued efforts for department-specific, chart of account elements in which tracking of federal, state and other non-state revenues can be tracking and followed.. The chart of account elements designed are intended to provide efficiencies for the future of financial management to department divisions, offices, boards, and sections.

OCS relies on close relationships with a wide range of partners and interdependencies to improve the outcomes for Alaskan children and families. Through open communication, the divisions and other partners are collaborating in efforts to best service the population. Specific examples of active partnerships with other agencies who receive federal funding include the following:

- Title XIX medical eligibility: OCS has partnered with other divisions to insure a seamless transition for former foster care youth in accessing Medicaid until age 26. This benefits clients by ensuring they are able to access medical care when they leave foster care.
- Division of Behavioral Health: Through collaboration efforts, DBH is able to leverage existing
 grants and services so that OCS clients can benefit. The DBH is working to enroll more Medicaid
 providers to meet the needs of children and families in Alaska; at this time OCS does not have
 data to demonstrate improvements in this area. OCS also works closely with DBH on medicalnecessity determinations for children in need of residential or psychiatric residential care.
- Division of Health Care Services and Department of Public Safety: OCS partners with these agencies to ensure timely and accurate background checks are received for OCS resource families. OCS has reimbursable billing agreements with both agencies to pay for background checks and fingerprints completed. All fully licensed foster families and all adoptive families who receive a subsidy, have completed a background check.
- Division of Health Care Services: The Alaska Medicaid Coordinated Care Initiative (AMCCI)
 provides services to benefit children in foster care. This service is provided through MedExpert,
 in which a MedExpert staff is available to work with OCS on the coordination of medical services
 and supports for children in foster care.
- Division of Public Assistance: OCS has partnered with DPA to leverage TANF federal dollars towards existing OCS services. In FY2016 OCS and DPA reviewed programs that could possibly be covered under TANF funding. The focus was on those grants that were funded, or primarily funded, with State General Funds. The description was compared to what was allowable under either purpose 3 or 4 of TANF and the logic in connecting the TANF purpose to the grant. OCS and DPA have identified OCS efforts that may be used as maintenance of efforts for the state. Through this effort the following services were implemented:
 - o It was determined that the CAC grants could be funded from TANF funds, this has allowed for an increase in grant funding to serve children and families.

O Programs like the Emergency Relief Support program, a pilot project to provide to provide time-limited financial support to relatives providing unlicensed foster care to children in OCS custody, are funded through State General Funds dollars, but maybe used by DPA to support their maintenance of efforts requirements. This program provides increased support to relatives caring for relative children, and allows the needs of children to be met.

Additionally, OCS works closely with the Child Care Program Office of DPA to ensure foster parents have access to child care support and funding for children in OCS custody when needed for employment. Because this is a prioritized population for this program, DPA has established a Reimbursable Services Agreement (RSA) with OCS to provide this funding directly to foster parents. OCS has since centralized this work to one small unit, so foster parents and OCS staff no longer needs to work through the cumbersome request for funds process, which sometimes causes delays in reimbursement to foster parents.

For the past two years, the DHSS, as a whole, has been involved in significant Medicaid reform and expansion efforts for Alaska. Two statutes were passed in the 2016 legislative session, SB 74 and SB 91, which are focusing on these reform and expansion efforts. As a part of these efforts, the DHSS is actively developing an 1115 Medicaid waiver application. As a part of this effort, the children and families involved with the child welfare system are seen as a priority for expanded services, especially in the areas of behavioral health treatment and substance abuse, which means they should have more access to services.

OCS and Tribal partners have worked together on the Tribal title IV-E partnership since the late 1990s. The purpose of the Tribal title IV-E reimbursement program is to pass federal title IV-E funds to the Tribe/Tribal entities through the OCS to increase child welfare services to Tribal citizens. The program allows the OCS to make title IV-E foster care administration funds and title IV-E training funds available to the Tribe/Tribal Entity as a reimbursement for expenses incurred by Tribe/Tribal entity. OCS currently has agreements with 11 Tribes/Tribal entities and is actively seeking new partners across the state. In addition, OCS is currently in the initial implementation phase with two Tribal title IV-E maintenance partners.

As the title IV-B/title IV-E agency, the OCS shares information with the following partners through approved memorandum of agreement (MOA) to: access services for children or families, verify income and resources for parents to determine eligibility, verify eligibility for services, monitor health care services, locate potential resources, and provide legal documentation for children by obtaining their birth certificates. MOAs assist in collaboration efforts with Department of Revenue (Permanent Fund Dividend), Department of Education, and Bureau of Vital Statistics.

Finally, the Children's Justice Task Force (CJATF) completed the update to the Mandatory Reporter Training in 2016. This is an online training for which all OCS staff as well as various providers in Alaska should complete in order to understand Alaska's mandated reporter laws.

In summary, OCS is working closely with partners to ensure that the state's services under the CFSP are coordinated with services or benefits of other federal or federally-assisted programs serving the same population. Through the partnership and collaborative opportunities listed above, OCS is able to maximize the efforts to improve services to children and families and address the objectives in the CFSP. For these reasons, Alaska has determined that CFSR, item 32 is a strength. The provisions of the CFSP are coordinated with services or benefits of other federal or federally-assisted programs serving the same population. OCS has a close partnership with other state and private agencies, Tribal organizations, and community partners to ensure funds are used in an effective manner to support services to children and families.

G. Foster and Adoptive Parent Licensing, Recruitment, and Retention

For this Systemic Factor, the following items will be addressed:

- Item 33: Standards Applied Equally
- Item 34: Requirements for Criminal Background Checks
- Item 35: Diligent Recruitment of Foster and Adoptive Parents
- Item 36: State's Use of Cross-Jurisdictional Resources for Permanent Placement

As outlined below, Alaska asserts that Items 33-35 as strength, while Item 36 is an area needing improvement. Alaska has a foster and adoptive parent licensing, recruitment, and retention system that functions in a standardized manner in all jurisdictions in the state; however, placements across state lines and placements crossing jurisdictions in the state do not function consistently and do not meet required timelines.

Item 33: Standards Applied Equally

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds?

Please provide relevant quantitative/qualitative data or information that show the state's standards are applied equally to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds.

State Response:

Alaska has identified CFSR, Item 33, Standards Applied Equally, as a strength area. The below information will demonstrate how OCS is ensuring that state standards are applied to all licensed or approved foster family homes or child care institutions receiving Title IV-B or IV-E funds.

For a child in the custody of OCS and residing in out-of-home care, OCS will place the child in one of three placement options: 1) a licensed foster home, 2) an unlicensed relative home, or in 3) a residential child care institution. Licensed foster homes and residential child care institutions are required to meet state statutory and regulatory licensing standards under AS 47.32, 7 AAC 50 and 7 AAC 10. Unlicensed relative homes are exempt from licensing statutes and regulations and they do not receive foster care payments. State statutes, regulations, and the Community Care Licensing Manual provide essential information about the rules, licensing standards, and procedures to ensure licensing practices are applied equally across the state.

On January 24, 2017, Alaska had 2,314 foster homes: Of these homes, 1,312 of these homes were fully licensed, and received foster care payments funded through title IV-E and state general fund dollars. There were 563 fully licensed; these not fully licensed homes do not receive payments through title IV-E funds., but instead are funded through state general fund dollars only.

Licensing Standards

Licensing requirements are defined by law in Alaska statutes and regulations. To become a licensed foster parent, there are specific requirements; the foster parent must be at least 21 years old, regulations require three references at least two of whom are unrelated, a criminal history background check, the foster home must meet basic fire, safety, and sanitation standards, the foster home must have enough room and beds for a foster child, attend core training, and complete training requirements.

Foster homes can become "not fully licensed" when key licensing standards are not met. These changes may include; not completing annual training requirements, or lack of a background check for a family

member living in the home. Children placed in "not fully licensed" homes are temporarily ineligible for title IV-E payments. For this reason, each quarter, the licensing supervisors provide OCS State Office with data on the number of providers in each region who are not fully licensed, the number of children temporarily title IV-E ineligible during the past quarter due to missing licensing documentation, and the reasons the homes are not fully licensed. Data in the following table shows the number of providers temporarily ineligible for quarter ending 9/30/2016, compared to the number of children who are temporarily ineligible for title IV-E foster care payments for the quarter. Child safety is monitored during monthly caseworker visits.

Number of Title IV-E Children placed in a Not-Fully Licensed Foster Home

Region	Foster Homes	Children
Anchorage	20	36
Northern	11	20
Southcentral	23	49
Southeast	4	6
Western	15	33
Total	73	144

Source: Licensing Manager Title IV-E Compliance Spreadsheets, Quarter report on 9/30/2016.

The chart on the below provides a summary of the data related to reasons for which foster homes are not fully licensed for the quarter ending 9/30/2016. The table shows that the Southcentral Region has the highest number of missing documents for fingerprint results, references and training hours. Additionally, the table shows that the missing standard by standard (home inspection) documentation is uniformly missing at relatively the same levels across all regions with 1-3 provider files in each region not having a completed standard by standard (home inspection. The data also shows that background checks are generally consistently documented in the providers file in all regions.

Reasons Foster Homes were Temporarily Ineligible*

Region	Fingerprints	References	Background Check Issues	Home Inspection	Training	Other
Anchorage	6	4	0	2	4	6
Northern	1	2	1	3	3	10
Southcentral	10	5	0	3	10	5
Southeast	3	2	0	3	1	0
Western	4	4	1	1	7	1
Total	24	17	2	12	25	22

Source: Licensing Manager Title IV-E Compliance Spreadsheets

^{*}There may be multiple reasons that apply to the same home; thus, counts for this chart will not match the number of foster home in the previous chart.

If a region identifies a trend with foster homes and the reason they are not fully licensed, the licensing manger and supervisor address that need. For example, NRO determined a number of foster homes were not fully licensed in a rural section of Northern region due to fingerprints not being completed. Fairbanks licensing staff traveled to the different communities to complete fingerprinting to alleviate this issue. Another example of how this data is used to ensure the standards are applied equally: WRO identified eight foster homes not fully licensed due to training, so the licensing supervisor referred those providers to ACRF, who contacted the foster parents to complete training. After ACRF contacted the providers and mailed out training materials, two providers have met training requirements.

OCS Licensing Investigations, Maltreatment in Care, Residential Child Care Facility Licensing Investigations

The OCS regional foster care licensing units receive complaints alleging violation(s) of licensing the statute or regulations, which may include reports of abuse or neglect within a licensed foster home. The regional licensing supervisors will screen the licensing complaint as "screen in" or "no merit". The "no merit" decision means the complaint has been screened out. A screened in licensing investigation is assigned to a Community Care Licensing Specialist (CCLS) as a licensing investigation.

Training waivers

A licensed foster care provider who cares for a relative child can request a training waiver when annual training hours have not been met. Training waivers are available statewide. Of the training waivers submitted, 72% have been approved. For a training waiver to be approved, the family must demonstrate they are able to meet the child's needs without completing the required training hours and the primary Protective Services Specialist must make agree with the approval of the training waiver.

Training waivers are denied if there is an open investigation, or there has been a recent investigation and OCS determines training will remedy the reason for the investigation. Training waivers are denied when the PSS has concerns about the foster home and training will support the foster parent. In calendar year 2016 there were 40 training waivers submitted. Of these, 38 were approved and 2 were denied. Below is chart indicating the percentage of training waivers approved or denied in calendar year 2016:

Denied 5% Approved 95%

Training Waivers CY 2016

Source: OCS Training Waiver Tracking Log

Barrier Crimes and/or Conditions:

Federal law prohibits title IV-E reimbursement for adoption, guardianship, or foster care payments for a child who is placed in a foster home, adoptive, or guardian home where a foster parent, prospective adoptive parent, or guardian has committed any of the following crimes:

- a felony conviction at any time for child abuse or neglect;
- spousal abuse;
- a crime against children;

- a crime involving violence including rape, sexual assault, or homicide, and
- a felony conviction with the past 5 years for physical assault, battery, or a drug-related offense.

Alaska regulations identify a barrier crime as a criminal offense that is inconsistent with the standards for licensure, certification, approval, or eligibility to receive payments and are outlined in 7 AAC 10.905. A barring condition is outline in AS 47.05.310(c)(1) as an individual who has been found by a court or agency of this or another jurisdiction to have neglected or abused a child. An individual who wants to be a licensed provider or adopt a child from OCS, and has a barrier crime or condition, can request a background check variance, as outlined in Alaska statute and regulation. All variance applications are reviewed first by the OCS regional barrier crime variance committee and then forwarded to the statewide DHSS Barrier Crime Variance Committee for recommendation to the DHSS Commissioner. The applicant may request a reconsideration of the Commissioner's determination. The DHSS Barrier Crime Variance Committee has set considerations by which determinations of approved or denied decisions are made. These considerations include: complete application, barring offense related to job duties, does offence provide a safety concern, time span since offence, personal statement, and rehabilitation/treatment. This process is consistent across the state.

The majority of the variance requests for barriers are made by relatives. During CY 2016, only 15% of OCS barrier crime or conditions variances were for non-relative/non-child specific placements.

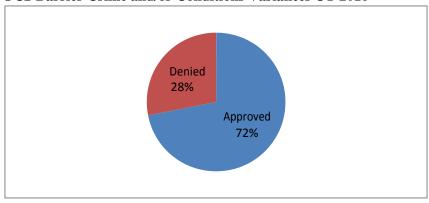
In CY 2015, there were a total of 33 barrier crime variance applications submitted by OCS resource families. Of those, 23 were approved OCS barrier crime and conditions variances, and 10 were denied (70% were approved). In CY 2016 (to date) there have been 57 barrier crime variance applications submitted by OCS resource families. Of those, 41 were approved OCS barrier crime and conditions variances, and 16 were denied (72% were approved).

Variance Applications for Barrier Crime and Condition

Year	Count	Approved	Denied	Denial Rate
2016	57	41	16	28.1%
2015	33	23	10	30.3%

Source: DHCS Barrier Crimes Variance Committee Tracking Log

OCS Barrier Crime and/or Conditions Variances CY 2016



Source: DHCS Barrier Crimes Variance Committee Tracking Log

The table and pie chart above provide data related to the number of barrier crime variances that were approved and denied. The majority of the applications are approved, which means those individuals are able to be foster or adoptive parents with OCS.

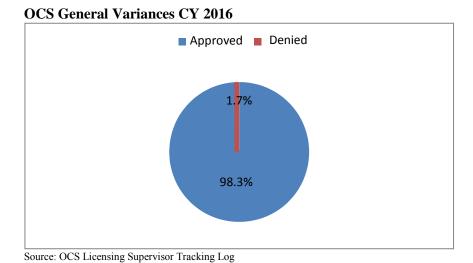
General Variances:

Licensed foster homes and applicants can apply for a general variance for non-health and safety items listed in the licensing regulations. OCS may grant a general variance to identify alternative methods for meeting the general licensing requirements, and upon demonstration that the requirement can be met through an acceptable alternative. For example, window size not meeting licensing standards, water temperature, or increasing the capacity on the license.

General various requests are reviewed by the OCS regional variance committees. The regional variance committee consists of at least four members and includes an OCS community care licensing manager, community care licensing supervisor, child protection supervisor or manager, and a Tribal representative. The two licensing managers participate in all general variance committee meetings to ensure consistency across the state.

When a general variance is denied at the regional general variance committee, the recommendation is sent to the statewide general variance committee for determination second level review.

In calendar year 2016 there were 363 general waivers submitted. Of these, 357 were approved and 6 were denied. The chart below shows the percentage of general variances approved or denied in calendar year 2016:



The general variances that were denied in CY 2016, were due to safety concerns and no alternate method to satisfy safety provided. For example, the windows in the bedrooms on the second floor of a two story house did not meet egress requirements and the structure of the windows would make it hard to break through the frame. Another example, young children slept on the second floor and parents on the first floor and the window in the children's bedroom did not open.

Residential Child Care Facilities utilize the same process for barrier crime and/or condition variances. A Residential Child Care Facilities variance may be for admitting a child when the facility is at capacity or a youth turns 18 while in treatment and needs to finish treatment.

Review of licensing files

In November of 2015, The Children's Bureau, Administration for Children and Families conducted a secondary review of Alaska's title IV-E foster care program. For the title IV-E audit, 191 licensing files were reviewed. The Children's Bureau determined that Alaska was in substantial compliance with federal eligibility requirements. One licensing error was found due to a title IV-E payment being made for a child placed in a foster home that did not meet the licensing requirements.

In August of 2016, a single audit was conducted on 60 licensing files. There were no errors were found due to licensing. The intent of Alaska's single audit, regulation 2 AAC 45, is to parallel the federal Single Audit Act Amendments of 1996, OMB Circular A-133 and its successor the Uniform Grant Guidance 2 CFR part 200 to a significant extent. This enables the State to receive audits conducted for the federal government that also meet state agency information needs, resulting in an efficient and effective method of gathering information. Because the files were available following the single audit, the Social Services Program Officer (SSPO) reviewed 20% of the 60 files for title IV-E compliance as another method of quality assurance.

Adoption

Licensed foster families or unlicensed relatives may eventually adopt or become the guardian of the child placed in their care if the child cannot return home. In order to finalize an adoption or guardianship, the family must participate in a home study and the study must be approved by the Regional Permanency Specialist in the region.

Home studies must be conducted using a standardized format covering required content, including an assessment of the family and verification that CPS check and fingerprint base background checks were completed. Regional Permanency Specialists (RPS) are responsible for ensuring the studies contain the required content but must also utilize their permanency expertise in reviewing the quality of the assessment of the family. After reviewing the homestudy the RPS makes a decision, based on study as well as other pertinent information known to OCS, about whether the family should be recommended for adoption of the specific child.

In summary, Item 33 is a strength area because Alaska applies the standards equally statewide as demonstrated by the information provided above.

Item 34: Requirements for Criminal Background Checks

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that the state complies with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements, and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children?

Please provide relevant quantitative/qualitative data or information that show the state is complying with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children.

State Response:

Item 34 is a strength area for the Office of Children's Services (OCS). The below information demonstrates how OCS is ensuring that Alaska is complying with federal requirements for criminal background clearance as related to licensing or approved foster care and adoptive placements and has in place provisions for addressing the safety of foster care and adoptive parents.

APSIN Background Checks

Prior to the placement of a child, Alaska Public Safety Information Network (APSIN) checks are completed on a relative who requests placement and any member of the relative's household 16 years of age or older; on an applicant for a provisional foster care license under emergency conditions and members of the applicant's household. These standards are applied across all regions when a provider is applying for a provisional emergency foster care license.

According to the user agreement between OCS and the Department of Public Safety (DPS), OCS flags licensed foster parents and active relative placements. When a provider is flagged, anytime the provider receives a criminal charge or has an information alert (to locate/warrant), OCS receives a message form DPS (flag hit).

When the OCS Background Check Unit receives a flag hit from DPS on a licensed home, the OCS Background Check Unit emails the details from the flag hit to the licensing worker, supervisor, and manager. For unlicensed relative homes, the flag hit details are emailed to the PSS, supervisor, and manager. In calendar year 2016, there have been 142 licensed provider flag hits and 45 unlicensed relative flag hits. All flag hits are reviewed and a determination is made regarding if an investigation is required..

The OCS Background Check Unit monitors the Set Flag Report in ORCA. On 8/22/2016, the Set Flag Report showed 60 licensed homes missing fingerprints; this includes 3 parents and 57 household members, and 16 unlicensed relative homes missing APSIN checks. This last group includes household members. The OCS Background Check Unit emails the assigned licensing worker or PSS regarding the incomplete background checks and directs the individual to complete the required checks. The Background Check Unit reports the individual as not being flagged in ORCA.

Alaska Background Check Program

The Alaska Department of Health and Social Services (DHSS) has a dedicated program, called the Alaska Background Check Program (BCP), located with the Division of Health Care Services. The BCP provides centralized background check, and in partnership with the Department of Public Safety, processes fingerprint-based criminal history checks for individuals associated with licensed and/or certified entities under the authority of DHSS or are otherwise eligible to receive payments, in whole or in part, from the Department.

BCP background checks consist of two parts. First, is a name-based search requiring a review of at least 10 registries available to the department. The registries include:

- Alaska Public Safety Information Network(APSIN),
- Alaska Court System/Court View and Name Index, Juvenile Offender Management Information System,
- Certified Nurse Aide Registry,
- National Sex Offender Registry,
- Office of Inspector General,
- Alaska Medical Assistance Exclusion List,
- Child Care Program Office child care provider database,
- Child abuse / neglect registry, and
- Any other records/registries the Department deems are applicable.

Secondly, a background check determination includes a review of State and Federal fingerprint-based criminal history results. The BCP completes the background checks for licensed foster homes, Tribally-licensed foster homes, unlicensed relative, adoptive and guardianship homes, Child Placement Agency (CPA) foster homes, and Residential Child Care Facilities.

The Office of Children's Services (OCS) uses Live Scan machines to capture fingerprints for electronic submittal, retrieval of information through the BCP and DPS systems. OCS has 27 Live Scan machines, including 18 portable units, to ensure statewide access to fingerprinting. The prints are forwarded electronically to the Department of Public Safety (DPS) immediately. DPS sends the fingerprint results electronically to the New Alaska Background Check System (NABCS). These results are automatically filed with each individual's profile in the system.

NABCS is the Department of Health & Social Services' database program for the processing and tracking of criminal history checks for individuals in contact with Alaska's vulnerable populations receiving services in licensed and/or certified entities. OCS and Residential Child Care licensing staff, supervisors, and managers have access to NABCS. The BCP reports that the average timeframe from fingerprint submission to the BCP's final determination is 15 days for SFY17. Each division is able to review their own background check data.

Individuals who have an active background check through the BCP are flagged for barring crimes. This means that if a new barrier crime occurs, the BCP is notified, at which time the BCP will revoke the current background check and issue a revocation notice to the individual and notify OCS of the action.

Adoption and Guardianship

All families must have an approved guardianship or adoption home study, to include CPS and fingerprint based background checks in order to finalize an adoption or guardianship of a child in care. Background checks are a requirement for state and title IV-E federal adoption and guardianship subsidies to be implemented to assist families in meeting the special needs of the children. The OCS adoption and guardianship eligibility team verifies that fingerprint background checks have been completed as part of the eligibility determination for the adoption or guardianship subsidy. In calendar year 2016, 259 eligibility determinations were completed, and found to be in compliance with the fingerprint requirements.

In summary, Item 34 is a strength in Alaska. Alaska has a fully functioning system to ensure required background checks are completed. This is consistent statewide and includes a variance process to address safety issues with foster and adoptive families.

Item 35: Diligent Recruitment of Foster and Adoptive Homes

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide?

Please provide relevant quantitative/qualitative data or information that show the state's process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide.

State Response:

Alaska has identified that CFSR, Item 35, Diligent Recruitment of Foster and Adoptive Homes, is a strength. OCS has a process to ensure that the diligent recruitment of potential foster and adoptive families reflects the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed statewide. On December 16, 2016, OCS had 3,014 children who were in the custody of the state. Of this number, 1,254 or 41.61% were placed with relatives. Additionally, OCS had a total of 1,653 licensed foster homes and group homes and 219 child placement agency licensed foster homes. Of these 1,653 licensed foster homes, 584 are child-specific relative homes and 373 are ICWA homes.

The table on the following page shows the number of Alaska Native/American Indian children in care by region who are placed in Alaska Native/American Indian home, by region and race of all children. This data includes children who are out-of-home, not on a trial home visit, not in a relative placement, and not in a child placement agency or residential facility. As mentioned above, OCS has 41.61% of the children out of the home placed with relatives. Relatives may be licensed or unlicensed.

Alaska Native/American Indian Children by Region

Alaska Native/American mulan Cimuren by Region					
REGION	Children in Care	Alaska Native/ American Indian	Percent Alaska Native/ American Indian		
Anchorage	1224	713	58.3%		
Northern	522	357	68.4%		
Southcentral	849	322	37.9%		
Southeast	175	131	74.9%		
Tribal Northern	1	1	100.0%		
Tribal Southeast	2	2	100.0%		
Western	196	196	100.0%		

Source: OCS Custom ORCA Report, run 12/15/2016.

Children in Out of Home Care by Race (as of 1/26/17)*

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	Alaska Native/ American Indian	Asian	Black	Pacific Island	White		
Count	1722	76	256	123	1365		
Percent of Total	58.0%	2.6%	8.6%	4.1%	46.0%		
Total Children	2969	2969	2969	2969	2969		

Source: OCS ORCA Report, dated 1/26/2017

Alaska Native/ICWA Foster Homes

In Alaska, Alaska Native and American Indian individuals make up about 20% of the state's population. The information in the previous graphs show that there are a disproportionate number of Alaska Native

^{*}The "Count" of the races exceeds "Total Children" because many children have more than one race.

children in out-of-home placements compared to the number of Alaska Native foster homes. Foster parent(s) who have identified their race as American Indian, Asian, Black, Pacific Island, White and undetermined are proportionate to the children in out-of-home placements, for this reason, OCS focuses efforts of recruiting Alaska Native/ICWA homes

An ICWA-preference foster home is a foster home where the provider indicated a race of Alaska Native/American Indian and the foster parent provided their Certificate of Indian Blood, or Bureau of Indian Affairs card, indicating tribal enrollment. The Tribe recognizes these homes as ICWA preference placements. In the past year, OCS has increased the number of ICWA homes by 42; on January 19, 2017, there were 365 licensed ICWA homes. This increase can be attributed to regional recruitment efforts being held in the communities, collaboration with Tribal partners, and the support of the Casey Family Program to implement regional recruitment teams/plans. Nevertheless, Native children in care outnumber the ICWA homes licensed to care for them. Currently, 443 Alaska Native children are in out of preference placement and 152 children available for adoption are in out of preference placement.

OCS is collaborating with Tribal partners to develop a process to place Alaska Native children who are in state custody into tribally-licensed foster homes. The State of Alaska is developing a Memorandum of Agreement to allow OCS to place children in care into Tribally-licensed foster homes. This will provide localized and culturally-appropriate care by increasing the pool of Alaska Native foster homes available for children in the department's custody. No implementation date has been set at this time.

OCS has a statewide process for the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state and special needs for whom foster and adoptive homes are needed. The recruitment and retention activities are described in regional recruitment and retention plans. Each region has a Recruitment and Retention Committee. The regional recruitment committees meet quarterly to discuss recruitment and retention events and to view data from the previous quarter to determine if they are on track for their goals. The data reviewed includes the number of ICWA homes, and homes identified to care for sibling groups or medically fragile children. Beginning in FY 17, all five regional recruitment and retention teams identified recruitment needs by establishing baseline numbers in their plans in order to track progress toward identified goals such as increasing:

- a. ICWA preference resource families:
- b. Resource families willing to care for children with complex medicalneeds;
- c. Resource families willing to care for sibling groups and teens;
- d. The number of Emergency Shelter Care and therapeutic foster Care in rural Alaska; so that therapeutic foster homes in rural Alaska allow for children to remain in their communities.

To track statewide progress each regional recruitment and retention team provides data to state office on a quarterly basis. Examples of regional recruitment and retention events scheduled to promote and increase the number of foster homes are included in the bullets below.

- OCS is currently developing flyers to send to statewide individuals with current Alaska medical licenses.
- OCS is running a nine month TV ad for foster care recruitment. This TV ad was filmed in the
 rural communities of Western region. The theme of the ad is that you don't have to live in a big
 city, have a big house, fancy car or lots of money to be a foster parent. At this time, four
 individuals have request additional information on how to become a foster parent after seeing the
 TV add.
- As part of the growing need for therapeutic foster care homes in rural Alaska, OCS in conjunction with two Child Placement Agencies (Presbyterian Hospitality House and the Alaska Child and Family Services) have explored providing Therapeutic Foster Care (TFC) services in the communities of Nome and Bethel. In December 2015, Tanana Chiefs Conference, in partnership with the OCS and the Alaska Center for Resource Families, hosted a two-day training "Raise Awareness and Foster Dreams" from the surrounding villages in the interior of Alaska. The event

was considered a success with 14 Tribal applications and 7 OCS applications being completed. To date, 6 of the 7 OCS applicants have been issued a foster care license.

- The Anchorage Foster Care Licensing Unit sent out training invitations to Tribal partners. A Licensing 101 Basic Training Class, Licensing 201 Home Visit Expectations, and Mandated Reporter Training were offered to tribal families. OCS staff was trained on how to engage Alaska Native families. Nineteen team home visits were conducted for the purpose of listening to ICWA foster parent experiences as foster parents, gathering suggestions for improvement, and getting to know them better. The goal to increase the number of ICWA compliant foster homes in the Anchorage area by 10 was exceeded; 14 new ICWA homes were licensed.
- OCS implemented the Emergency Relief Support (ERS) pilot program in the Southeast region, Western Region and Northern Region. The purpose of the Emergency Relief Support program is to provide time-limited financial support to relatives providing unlicensed foster care to child in OCS custody. Resource Families participating in the ERS receive a monthly support payment in the amount of \$500.00 per child, per placement for up to 3 months, while they pursue licensure or public/Tribal assistance programs.

Adoption

Alaska facilitates listings on four Adoption exchange websites to provide for general and child-specific recruitment of adoptive homes for waiting children. These exchanges are the Alaska Adoption Exchange, the Northwest Adoption Exchange, and the Adopt US Kids and A Family for Every Child website exchanges. Currently 24 children, including one sibling group, are listed as waiting for permanent homes. In the last 5 years, 44 out of 68 listed children have been adopted, for a total of 68%. The numbers of children listed on the exchanges are lower than the numbers of legally free children in the state. The low use is likely due to a variety of issues including:

- a lack of worker skill and knowledge regarding the actions needed to photo list achild;
- difficulty in obtaining good quality photographs;
- negative personal beliefs about photo listing recruitment strategies; and
- concerns from other legal party regarding listing children, particularly Alaska Native children, on national exchanges.

Child-specific recruitment is completed by use of the exchanges but also by diligent relative searches, OCS data on the numbers of children placed with relatives and/or in ICWA-preferred placements who have finalized adoptions:.

- Wendy's Wonderful Kids (WWK) is a program delivered by a non-profit agency located in the Anchorage and Wasilla area; serving 12 children. WWK provides diligent efforts to locate adoptive homes for children who are legally free, and monitoring of 10 additional children who are in a pre-adoptive placement. These services are individualized for the child.
- The Preparation for Adoption Readiness for Kids in Alaska (PARKA) project provides intensive preparation and training to approximately 10 families per year who are interested in adopting children with special needs from foster care. Once the family has been through the program, OCS purchases a home study for the family and the PARKA project partners with the regional offices to provide matching services. These services take into consideration the child's individual needs. Since 2010, 35 hard-to-place children with special needs have been placed with families who have graduated from the program.

The Heart Gallery, which is collaboration between OCS and a faith-based organization with the assistance of many community partners, is providing adoptive home recruitment for special needs children in OCS custody without an identified adoptive home. The faith-based organization,

called Beacon Hill organized professional photos, completed narratives to go with each photo, is managing the photo listing website, and is fielding inquiries from interested families and offering orientation for those who are interested in adoption. This service is currently available in Anchorage and Southcentral regions of Alaska, with plans for expanding to waiting children statewide. Currently, there are 26 children listed on this website and OCS is working with the Heart Gallery on preparing families to adopt children from foster care and matching children with families that will best meet their needs.

In summary, the information provided in this section demonstrates that Item 35 is a strength area. OCS has a fully functioning, statewide process to license, recruit, and retain foster and adoptive families for meet the ethnic and racial diversity of the children in out-of-homecare.

Item 36: State Use of Cross-Jurisdictional Resources for Permanent Placements

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

Please provide relevant quantitative/qualitative data or information that show the state's process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide.

Please include quantitative data that specify what percentage of all home studies received from another state to facilitate a permanent foster or adoptive care placement is completed within 60 days.

State Response:

Item 36 is an area in need of improvement for Alaska. The information in this section will demonstrate how OCS needs to improve the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide. Overall, the numbers on completed Interstate Compact for the Placement of Children (ICPC) within 60 days will make this item an area needing improvement.

As a member of the Interstate Compact for the Placement of Children (ICPC), the State of Alaska is bound by the Compact's regulations; Alaska Statute and OCS policies support the ICPC regulations. ICPC cases are divided into ICPC-Out cases, in which children in the custody of Alaska OCS may be sent to other states; and ICPC-In cases, in which children from other states may be placed in Alaska to live with parents, relatives, or other foster care providers. On September 30, 2016, there were 212 Alaska children involved in the ICPC services through OCS, of which161 were ICPC-Out cases, and 135 children in 93 ICPC-In cases.

According to ICPC regulation #2 regarding non-expedited requests, the ICPC home study report is to be completed within 60 calendar days after receiving a home study request. The receiving state shall, directly or by contract, complete a study of the home environment for purposes of assessing the safety and suitability of the child being placed in the home. If the home study report cannot be provided within 60 days due to delays caused by OCS, its contractor, or placement resource, a statement explaining the delay must be submitted to the sending state with a projected time as to when the report will be completed.

The following two tables show the rates by which the State of Alaska is completing home studies in a timely manner. The first table shows the percentage of ICPC home studies completed within 60 days and 90 days, and more than 90 days from 2012 – 2016. Data used for this determination has been derived from the OCS ORCA database, specifically from the ICPC record for each home study requested. These home studies are for public adoption, foster care in a family setting or with parents and relatives.

Total number of ICPC-In Home Studies Completed by Calendar Year

Year	Total	Completed in 60 Days	Percentage in 60 Days	Completed in 61-90 Days		Completed in more than 90 Days	Percentage Over 90 Days
2012	85	28	32.9%	14	16.5%	43	50.6%
2013	107	36	33.6%	27	25.3%	44	41.1%
2014	99	37	37.4%	23	23.2%	39	39.4%
2015	78	30	38.5%	15	19.2%	33	42.3%
2016	49	21	42.9%	9	18.3%	19	38.8%

Source: OCS ORCA ICPC Homestudy Completion Time Report, RR 301170120t

2016 Home Study Completion Compliance

Туре	Total	Completed in 60 Days	Percentage in 60 Days	Completed in 90 Days	Percentage in 90 Days	Over 90 Days	Percentage Over 90 Days
Adoption	3	0	0.0%	1	33.3%	2	66.7%
Licensed	14	5	35.7%	5	35.7%	4	28.6%
Parent	7	1	14.3%	1	14.3%	5	71.4%
Relative	10	7	70.0%	0	0.0%	3	30.0%
Total	34	13	38.2%	7	20.6%	14	41.2%

Source: OCS ORCA ICPC Homestudy Completion Time Report, RR 20170120

The second table above shows the percentage of ICPC home studies completed within 60 days, 90 days, and over 90 days, for specific ICPC-In types, adoption, licensed, parent, and relative placement. As indicated above, OCS is not successful in completing the home studies within the required timeframe. OCS completed 0% of the ICPC adoption home studies requests timely, 34.7% of licensed requests, 14.3% of parent requests, and 70% of the relative requests within 60 days. OCS has reviewed the data and has identified the following barriers to completing an adoption home study within 60 days that includes: Adoption home study requests are referred to a grantee agency; the grantee agencies have 90 days to complete a home study. In addition, OCS must complete the fingerprint-based, criminal background check, and receive the results before making the home study referral to the grantee, this process could take at minimum 30 days. When the home study is completed, the Regional Permanency Specialist reviews and approves the home study, which may take 30 days. On average, an ICPC –In adoption home study is taking five months to complete.

As indicated in the table above, OCS has completed 35.7% of the licensed foster care home studies within 60 days. Previously, the ICPC Program Coordinator was sending completed packets to the sending state. The Program Coordinator determined this was causing a delay in the timeliness and not meeting ICPC regulations. Currently, the Program Coordinator is sending the home study to the sending state, if the home study is completed before the rest of the documents are obtained. This process is expected to increase the timeliness.

Additionally, the table further indicates that OCS completed 14.3% of parent placement home studies. Delays are frequently due to fingerprinting not being completed until after the home study has been finished. As with foster care placement requests, the ICPC Program Coordinator is now sending the home study to the sending state as a preliminary report while awaiting the fingerprint results in order to increase the timeliness.

For all types of home study requests, worker turnover and caseload sizes are significant factors causing delays in timely completion. New workers with limited experience and knowledge of the ICPC processes create delays in the timely completion of home studies. With the increase in caseloads often workers who were designated to work ICPC cases are assigned additional cases. For example, the ICPC worker may be assigned initial assessment cases.

In mid-August 2016, the ICPC program Coordinator began sending preliminary reports (home study or notice as to why home study will be late) without waiting for final paperwork such as the foster care license, or fingerprint-based, criminal background check results, in order to increase compliance with 60-day timelines. Data from mid-August 2015 to December 31, 2016 indicates that compliance with sending the home study report within 60 days has increased significantly for all but adoption home studies (see data in the table below).

August thru December 2016 Homestudy Completion Compliance

Туре	Total	Completed in 60 Days	Percentage in 60 Days	Completed in 90 Days	Percentage in 90 Days	Over 90 Days	Percentage Over 90 Days
Adoption	3	0	0.0%	0	0.0%	3	100.0%
Licensed	6	3	50.0%	2	33.0%	1	16.7%
Parent	2	1	50.0%	0	0.0%	1	50.0%
Relative	4	4	100.0%	0	0.0%	0	0.0%
Total	15	8	53.3%	2	13.3%	5	33.3%

Source: OCS ORCA ICPC Homestudy Completion Time Report, RR 20170120s

Out of Town Requests

Each OCS office within the state will accept requests for services and assistance from other OCS office. These requests are completed through the Out-of-Town Requests (OTR). There are three types of OTR requests: initial assessment interviews, placement and secondary worker assignment, and unlicensed relative home study requests. Three of the five regions have dedicated staff for OTRs: Anchorage, Wasilla, and Fairbanks. Each region has an OTR email box for the transmission of OTR requests and assigned staff to monitor the OTR email box.

In Alaska, children cannot be placed in another region without sending an OTR to the receiving region. Due to ongoing concerns with the responsiveness and ongoing collaboration for OTR cases, a workgroup was developed to review the current system and work to improve this process. This workgroup meets includes the regional Protective Services Managers I. This group worked to identify changes in the current system that would have a positive impact on the services to children and families involved in the OTR case. Solutions resolved by the workgroup include:

• Developed standard language in the subject line of the OTR email, each region now has an OTR contact person who is a supervisor or manager, and a change in OCS value about OTRs.

• Direction to consider the children in state custody as "our children", not an individual regions child.

OTR issues still being addressed include: quality of information in the OTR, unlicensed relative home studies not being completed in a timely manner, OTR policy and ORCA data. Each region currently has individualized spreadsheets to track OTR data. OCS is working on creating a standardized spreadsheet. The Anchorage region is meeting every other month with regional OTR contacts to talk about children who have been out of their home community for more than 180 days. They are developing a plan to return the children to their home community.

Alaska has not been successful in demonstrating uniform and concise documentation of OTR requests. Each region has their own spreadsheet for tracking OTRs coming into the region or going to another region. Each regional spreadsheet looks different in regards to how data is tracked. Two of the five managers reported, OTR data is not logged on to the OTR spreadsheet when they are on vacation.

OCS staff turnover and caseloads may contribute to delays in the completion of OTR requests. There are only three offices that have workers dedicated to the OTR cases (Wasilla, Fairbanks, and Anchorage). The other offices incorporate the requests in with all of the primary worker assignments.

Adoption

Alaska is a member state of the Interstate Compact on Adoption and Medical Assistance (ICAMA). ICAMA is an agreement between and among its member states that enables them to coordinate the provision of medical benefits and services to children receiving adoption assistance in interstate cases. ICAMA prevents or eliminates geographic barriers that may delay or deny the provision of medical assistance and post-adoption services to families who have adopted children with special needs. In SFY 16, Alaska had 394 adopted/guardianship children from other states utilizing Alaska Medicaid through this process. In the same year, 724 of Alaska's children were receiving Medicaid in other states.

OCS works closely with services which provide diligent recruitment efforts and matching of placement resources for children who are legally free and need permanent homes. The PARKA project promotes intra-state adoptions between regions by providing intensive preparation and training to 10 families per year who are then matched with children statewide who are in foster care. Wendy's Wonderful Kids services, Beacon Hill's Heart Gallery and Alaska's Adoption Exchange promotes both intra and interstate adoptions by recruiting adoptive homes for specific children who are legally free through methods such as photo listings, matching activates and file mining for potential placement resources.

Child Specific Recruitment is completed by use of the adoption exchanges but also by diligent relative searches, OCS data on the numbers of children placed with relatives and/or in ICWA preferred placements who have finalized adoptions:

In summary, Item 36 is an area of need for Alaska. Alaska does not have a fully functioning system to ensure successful placement across region or state lines. Although Alaska has methods to facilitate interand intra-jurisdictional placements, the practice is inconsistent and timelines are not met consistently or timely.

Appendix I

CWLA Guidelines for Computing Caseload Standards

The most requested CWLA Standards are those that provide recommended caseload ratios for workers in child welfare program areas, such as child protective services, foster care, adoption, and residential services. These ratios of clients to staff members offer guidance based on the field's consensus of what constitutes best practice. They're also supported by the findings of caseload and workload studies and by projects that show particular success in reaching agency goals.

The following broad principles provide a context for agencies as they approach the task of computing caseloads for child welfare workers:

People are the key ingredient in an effective child welfare system. Child welfare work is labor intensive. Caseworkers must be able to engage families through face-to-face contacts, assess the safety of children at risk of harm, monitor case progress, ensure that essential services and supports are provided, and facilitate the attainment of the desired permanency plan. This cannot be done if workers are unable to spend quality time with children, families, and caregivers. ²

Computing caseloads is an inexact science. When in doubt, err on the side of safety.

When systems are short-staffed, bad things can happen. Studies of critical incidents, including child deaths, child injuries, and children missing from foster care, almost always involve an overworked caseworker who didn't have sufficient time to adequately assess or monitor the child's situation. In addition to leading to such tragedies, insufficient staffing results in inefficient services. ³

Our goal is to ensure safety, permanency, and well-being for all children who come to the attention of the child welfare system. We need to focus on what it takes to achieve these service goals. In the federal Child and Family Service Reviews, those states that showed strength in such areas as family involvement and worker contact with children in foster care were more likely to achieve safety and permanency goals. ⁴ Caseloads must permit such activities and opportunities. Currently no universally accepted formula for computing caseloads exists. But the following general rules of thumb can guide jurisdictions in determining the number of workers necessary to meet CWLA's recommended standards:

The CWLA caseload standards are expressed in terms of maximum cases per worker. Any formula should result in caseloads *no greater than* the maximum recommended number, rather than exceed it. For example, anticipated vacation and sick leave time, agency holidays, and regularly scheduled training events should be deducted from the number of calendar days to arrive at the total actual workdays available per worker per month. This should be done before computing caseloads.

Some caseload ratios are expressed in terms of cases per month, whereas others are expressed in terms of the number of cases on any given day. These variations need to be accounted for in computing cases. For example, for investigative workers in child protective services, the recommended caseload is 12 active cases per month. This number should not be construed to mean 12 active cases at any point in time, but 12 active cases in the workdays available during a designated 30-day period ormonth.

Moreover, if the worker is carrying forward cases from the previous month, the number of new cases should be reduced accordingly.

Caseloads should be computed separately for each worker category. For example, when computing any category of workers, staff who may play a role in service delivery but are not performing the specific functions of this category, should not be included in the worker count. Though helpful, case aides, supervisors, and others who may assist with cases, do not perform the same functions, and including them provides a misleading caseload count.

Case transfers and changes in case status should receive careful consideration. Caseload counts should accrue to the worker, not to the case. Multiple workers may address the practice needs of a family and its children in a given period. Whenever cases transfer from one worker to another within a specified period, they should be counted on each worker's caseload. The fact that this is a *single* case does not negate the need to count it as part of *each* worker's caseload. The same principle applies to changes in case status.

Caseloads and workloads. A U.S. Children's Bureau document, *Workload Standards for Children and Family Social Services*, differentiates caseload and workload measures as follows:

Caseloads are defined as the amount of time workers devote to direct contacts with clients.

Workloads are defined as the amount of time required to perform a specific task. ⁵

Although CWLA recommends caseload ratios for each area of child welfare practice, workloads are best determined through careful time studies conducted within the individual agency. They should be based on the responsibilities assigned to complete a specific set of tasks or units of work for which the worker is responsible. For those agencies interested in developing their own specific workload figures, time required to conduct the following tasks should be calculated: travel; collateral visits, outreach activities, and court schedules; emergencies that interrupt regular work schedules; supervision, consultation, and collaboration; work with community groups; attendance at staff meetings, staff development, professional conferences, and administrative functions; case management; and telephone contacts, reading of records, case recording or computer entry, and reports of conferences and consultations.

Notes

The Public Children Services Association of Ohio, which last studied the workload issue in 1997, found that a social worker putting in a normal 40-hour week can conduct about 11 investigations per month. (Knox, D., & Higgins, J. [September 3, 2003]. Caseload Definition in Dispute. Akron Beacon Journal.) A recent Allegheny County, Pennsylvania, study concluded that investigative workers could conduct 16 investigations per month, with the qualification that this number would not permit them to conduct "best practice." They suggested a lower caseload ratio, such as CWLA's recommended 12 investigations per month, would permit best practice. (Yamatani, H., & Engel, R. [November 2002]. Workload Assessment Study. Allegheny County Office of Children, Youth, and Families. Unpublished.)

The Oregon Project was successful in achieving permanency for children in foster care. This project recommended a maximum caseload of 15 children per worker (Emlen, A.; Lahti, J.; Downs, G.; McKay, A.; & Downs, S. [1977]. Overcoming Barriers to Planning for Children in Foster Care. Portland, Oregon:

Regional Research Institute, Portland State University), consistent with CWLA's caseload recommendations of 12-15 children per worker for foster care. A study in Idaho and Washington State showed that when caseloads were reduced to no more than 10 children per worker, permanency for children was accomplished in a timely manner (Katz, L. [1990]. Effective permanency planning for children in foster care. Social Work, 35, 220-26.)

The General Accounting Office, in its March 2003 report, states, "Some of the caseworkers we interviewed handle double the number of cases recommended by advocacy organizations and spend between 50 and 80 percent of their time completing paperwork, thereby limiting their time to assist children and families." (U.S. General Accounting Office. [2003]. Child Welfare: HHS Could Play a Greater Role in Helping Child Welfare Agencies Recruit and Retain Staff [GAO-03-357]. Available at www.gao.gov/atext/d03357.txt.)

A 1998 study of New York's child welfare services found that high workload resulted in incomplete abuse and neglect investigations, an inability of workers to regularly monitor clients, and prolonged permanency decisions for children. (State of New York Comptroller, Division of Management Audit. [1998]. Caseworker Deployment in Selected Child Welfare Programs Report (96-S-52).)

Results of the 2001 and 2002 Child and Family Service Reviews. (U.S. Department of Health and Human Services, ACF, ACYF, Childrens Bureau. Results of the 2001 and 2002 Child and Family Service Reviews. Power point presentation, available at www.acf.hhs.gov/programs/cb/cwrp/results.htm.)

Developing Workload Standards for Children and Family Social Services. Prepared by Peat, Marwick, Mitchell, and Co., in association with CWLA, for the United States Department of Health, Education, and Welfare, 1978.

Appendix II CFSR Data Dictionary

	Appendix II Cr5K Data Dictionary								
CFSR Measure	Description	Denominator	Numerator	Exclusions	Notes				
Permanency	Of all children	Number of	Number of	• Children in care	• Trial home visit				
in 12 months	who enter care	children who	children in	< 8 days	adjustment is				
for children	in a 12 month	enter care in a	the	 Children who 	applied				
entering care	period, what	12- month	denominator	enter care at age	 Youth entering 				
	percent	period	who	18 or older	at 17 but who				
	discharged to		discharged to		turn 18 while in				
	permanency		permanency		care or discharge				
	within 12		within 12		at age 18 are not				
	months of		months of		counted as				
	entering care?		entering care		achieving				
					permanency				
Permanency	Of all children	Number of	Number of	Children age	• Youth age 17				
in 12 months	in care on the	children in	children in	18 or more on	on the first day				
for children	first day of a 12-	care on the	the	the first day of	but who turn 18				
in care 12-	month period	first day of a	denominator	the year	while in care or				
23 months	who had been in	12-month	who		discharge at age				
	care (in that	period, who	discharged to		18 are not				
	episode)	had been in	permanency		counted as				
	between 12 and	care (in that	within 12		achieving				
	23 months, what	episode)	months of the		permanency				
	percent	between 12	first day						
	discharged to	and 23							
	permanency	months							
	within 12								
	months of the								
	first day?								

CFSR Measure	Description	Denominator	Numerator	Exclusions	Notes
Permanency in 12 months for children in care 24 months or more	Of all the children in care on the first day of a 12 month period who had been in care (in that episode) for 24 months or more, what percent discharged to permanency within 12 months of the first day?	Number of children in care on the first day of a 12-month period, who had been in care (in that episode) for 24 months or more	Number of children in the denominator who discharged to permanency within 12 months of the first day	• Children age 18 or more on the first day of the year	• Youth age 17 on the first day but who turn 18 while in care or discharge at age 18 are not counted as achieving permanency
Re-Entry to foster care in 12 months	Of all children who enter care in a 12-month period, who discharged within 12 months to reunification, live with relative, or guardianship, what percent reentered care within 12 months of their discharge?	Number of children who enter care in a 12- month period, who discharged within 12 months to reunification , live with relative, or guardianshi p	Number of children in the denominator who re-enter care within 12 months of their discharge	• Children in care < 8 days • Children who enter or exit care at age 18 or older	• If a child has multiple reentries within 12 months of their discharge, only his first re-entry is selected

CFSR Measure	Description	Denominator	Numerator	Exclusions	Notes
Placement Stability	Of all children who enter care in a 12-month period, what is the rate of placement moves, per day of foster care?	Of children who enter care in a 12- month period, total number of days these children were in care as of the end of the 12- month period	Of children in the denominator, total number of placement moves during the 12-month period	Children in care Readys Children who enter care at age Ready age Ready Ready Children who enter care at age Ready Read	• Placement stability is expressed as a rate per 1,000 days in care

CFSR Measure	Description	Denominator	Numerator	Exclusions	Notes
Maltreatment in Foster Care	Of all children in foster care during a 12-month period, what is the rate of victimization, per day of care?	Of children in care during a 12- month period, total number of days these children were in care as of the end of the 12- month period	Of children in the denominator, total number of substantiated or indicated reports of maltreatment (by any perpetrator) during a foster care episode within the 12-month period	• Complete foster care episodes lasting < 8 days • Youth in foster care at 18 or older • For youth who start out as 17 years of age and turn 18 during the period, any time in care and victimizations that occur after the 18th birthday is not counted • Records with an incident date occurring outside of the removal episode, even if report dates fall within the episode (used when incident date exists) • Maltreatment reports that occur within the first 7 days of removal • Victims age 18 or older • Records with disposition or report dates falling outside of the 12- month period • Subsequent reports that occur within 1 day of the initial report	• Maltreatment in foster care is expressed as a rate per 100,000 days in care

CFSR Measure	Description	Denominator	Numerator	Exclusions	Notes
Recurrence of Maltreatment	Of all children who were victims of a substantiated or indicated maltreatment report during a 12-month period, what percent were victims of another substantiated or indicated maltreatment report within 12 months?	Number of children with at least one substantiate d or indicated maltreatmen t report in a 12-month period	Number of children in the denominator that had another substantiated or indicated maltreatment report within 12-months of their initial report	 Subsequent reports that occur within 14 days of the initial report Subsequent reports in which the incident date shows that the subsequent report refers to the same incident as the initial report If report date is prior to the first 12 months Victims age 18 or older 	• Relies primarily on the report date to determine whether the maltreatment occurred in the first 12 month period; therefore, if a case does not reach disposition until the following 12 month period but has a report date in the first, we include it

Map of Service Locations

