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# Statewide Assessment Instrument

## Section I: General Information

Name of State Agency: **ARKANSAS DEPARTMENT OF HUMAN SERVICES,  
DIVISION OF CHILDREN AND FAMILY SERVICES**

### CFSR Review Period

CFSR Sample Period: Rolling Monthly Sampling Period:  
04/01/2015 – 09/30/2015 (FC), 11/14/15 (IH)  
05/01/2015 – 10/31/2015 (FC), 12/15/15 (IH)  
06/01/2015 – 11/30/2015 (FC), 01/14/16 (IH)  
07/01/2015 – 12/31/2015 (FC), 02/15/16 (IH)  
08/01/2015 – 01/31/2015 (FC), 03/16/16 (IH)

Period of AFCARS Data: 2012B – 2015A

Period of NCANDS Data: FFY 2013 – FFY 2014

(Or other approved source; please specify if alternative data source is used): *N/A*

Case Review Period Under Review (PUR): 04/01/2015 – 04/03/2016  
05/01/2015 – 05/01/2016  
06/01/2015 – 06/05/2016  
07/01/2015 – 07/10/2016  
08/01/2015 – 08/14/2016

### 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:

Name	Agency / Location	Title / Position	Role in Statewide Assessment
Greg Moore	HZA, Inc. / DCFS Central Office	CQI Manager	CFSR Coordinator
Cecile Blucker	DCFS Central Office	DCFS Director	CFSR Planning Team
Beki Dunagan	DCFS Central Office	Assistant Director of Community Services	CFSR Planning Team
Christin Harper	DCFS Central Office	Policy / Prof. Development Administrator	CFSR Planning Team
Miranda Raines	DCFS Central Office	DCFS Program Administrator	CFSR Planning Team
Tyronza Hampton	DCFS Central Office	DCFS Planning Specialist	CFSR Planning Team
Kate Shufeldt	Administrative Office of the Courts / Juvenile Division	Court Improvement Program Director	CFSR Planning Team
Shervin Djafarzadeh	HZA, Inc. / DCFS Central Office	QA Manager	Data Analysis / Support
Paul Knipscheer	HZA, Inc. / DCFS Central Office	Senior Analyst	Data Analysis / Support
Kristi McGibbony	HZA, Inc. / DCFS Central Office	QA Specialist	Data Analysis / Support
Jeremy Holstead	UALR MidSOUTH Training Academy	Data Coordinator	Data Analysis / Support
Nellena Garrison	DHS Office of Systems and Technology	CHRIS Manager	Information / Support
Mischa Martin	DHS Office of Chief Counsel	Attorney Supervisor	Information / Support
Leslie Sebren	DCFS Central Office	DCFS Program Administrator	Information / Support
Lindsay McCoy	DCFS Central Office	DCFS Program Administrator	Information / Support
Brooke Harris	DCFS Central Office	CANS/FAST Program Manager	Information / Support
Lecole White	DCFS Central Office	ARCCC Program Manager	Information / Support
Anne Wells	DCFS Central Office	Mental Health Specialist	Information / Support
Megon Bush	DCFS Central Office	Specialized Placement Unit Manager	Information / Support
Cindy Waller	DCFS Central Office	Contracts Administrator	Information / Support
Jo Thompson	DCFS Central Office	DCFS SOC Director	Information / Support
Holly Rhodes	DCCECE Placement & Residential Licensing Unit	Administrative Assistant	Information / Support
Shirley Preston	DCCECE Placement & Residential Licensing Unit	Licensing Specialist	Focus Group Participant / Information

Name	Agency / Location	Title / Position	Role in Statewide Assessment
Peggy Poole	DCCECE Placement & Residential Licensing Unit	Licensing Specialist	Focus Group Participant / Information
Patty Glanton	DCCECE Placement & Residential Licensing Unit	Licensing Specialist	Focus Group Participant
Cecilia Dyer	Garland County	OCC Attorney	Focus Group Participant
Elizabeth Armstrong	Sebastian County	Attorney Ad Litem	Focus Group Participant
Kim Bibb	Clay and Greene Counties	Attorney Ad Litem	Focus Group Participant
Amanda Frankenberger	Clay, Greene and Mississippi Counties	Advocate Coordinator, CASA	Focus Group Participant
Anna Imbeau	Sebastian County	OCC Attorney	Focus Group Participant
Shelley Hart	Benton, Carroll, Madison and Washington Counties	Program Director, CASA	Focus Group Participant
Crystal Vickmark	Benton, Carroll, Madison and Washington Counties	Executive Director, CASA	Focus Group Participant
Elizabeth Manso	Perry and Pulaski Counties	Attorney Ad Litem	Focus Group Participant
Cynthia Martin	Polk, Montgomery and Sevier Counties	Program Director, CASA	Focus Group Participant
Tess Fletcher	Faulkner, Van Buren and Searcy Counties	Executive Director, CASA	Focus Group Participant
Jedediah Thompson	DCFS Area 1	Area Director	Focus Group Participant
Lisa Jensen	DCFS Area 2	Area Director	Focus Group Participant
Jennifer Wunstell	DCFS Area 3	Area Director	Focus Group Participant
Aquonette White	DCFS Area 4	Area Director	Focus Group Participant
Latisha Young	DCFS Area 5	Area Director (Acting)	Focus Group Participant
Milton Graham	DCFS Area 6	Area Director	Focus Group Participant
Angela Newcomb	DCFS Area 7	Area Director	Focus Group Participant
Suzann Henry	DCFS Area 8	Area Director	Focus Group Participant
Cyndi Rowlett	DCFS Area 9	Area Director	Focus Group Participant
Cassandra Scott	DCFS Area 10	Area Director	Focus Group Participant
Julie Rankin	Area 3	Program Coordinator	Focus Group Participant
Heather Fendley	Area 3	Family Service Worker Supervisor	Focus Group Participant
Toni Arbour	Area 4	Family Service Worker Supervisor	Focus Group Participant
Gloria Billings	Area 4	Area Coordinator	Focus Group Participant
Chalonda Williamson	Area 4	Family Service Worker County Supervisor	Focus Group Participant
Jeffery Williams	Area 4	Family Service Worker Supervisor	Focus Group Participant
Kim Smith	Area 9	Program Coordinator	Focus Group Participant
Martha Patrick	Area 10	Family Service Worker County Supervisor	Focus Group Participant
Sylvia Ware	Area 9	Family Service Worker Supervisor	Focus Group Participant
Marva Walker	Area 9	Family Service Worker	Focus Group Participant

<b>Name</b>	<b>Agency / Location</b>	<b>Title / Position</b>	<b>Role in Statewide Assessment</b>
-	-	Supervisor	-
Sherry Mangrum	Area 8	Family Service Worker Supervisor	Focus Group Participant
Christy Kissee	Area 8	Family Service Worker Supervisor	Focus Group Participant
Teri Leisure	Area 8	Family Service Worker Supervisor	Focus Group Participant
Kandy Tarpley	Area 8	Family Service Worker Supervisor	Focus Group Participant
Curtis Parker	Area 9	Family Service Worker Supervisor	Focus Group Participant
Stephanie Beasley	Area 6	Family Service Worker County Supervisor	Focus Group Participant
Nate Dennison	Area 7	Family Service Worker Supervisor	Focus Group Participant
Craig Taylor	Area 6	Family Service Worker Supervisor	Focus Group Participant
Laura Rogers	Area 5	Family Service Worker County Supervisor	Focus Group Participant
Zedralyn Butler	Area 7	Family Service Worker Supervisor	Focus Group Participant
Brenda Richard	Area 1	Family Service Worker County Supervisor	Focus Group Participant
Deborah Pippin	Area 2	Family Service Worker County Supervisor	Focus Group Participant
Bobbie Newsom	Area 2	Family Service Worker County Supervisor	Focus Group Participant
Siobhan Ming	Area 2	Family Service Worker County Supervisor	Focus Group Participant
Lori Johnson	Area 1	Family Service Worker Supervisor	Focus Group Participant
Jewell "Marie" Lawrence	Area 2	Family Service Worker County Supervisor	Focus Group Participant
Tina Wood	Area 1	Family Service Worker Supervisor	Focus Group Participant
Veronica McGhee	Area 10	Family Service Worker County Supervisor	Focus Group Participant
Gwendolyn Hawkins	Area 10	Family Service Worker Supervisor	Focus Group Participant
Christine Dockery	Area 7	Family Service Worker Supervisor	Focus Group Participant
Rosie Cole	Area 7	Family Service Worker Supervisor	Focus Group Participant
Vanessa Socia	Area 7	Family Service Worker Supervisor	Focus Group Participant
Alicia Smith	Area 10	Family Service Worker Supervisor	Focus Group Participant
Cathleen Armstrong	Area 3	Adoption Specialist	Focus Group Participant
Gabby Martinez	Area 3	Family Service Worker	Focus Group Participant
Alexandria Hollingshead	Area 3	Family Service Worker	Focus Group Participant
Jamie Moore	Area 8	ASP/CACD Investgator	Focus Group Participant
Kimberly Hobbs	Area 8	Adoption Specialist	Focus Group Participant

Name	Agency / Location	Title / Position	Role in Statewide Assessment
April Faughn	Area 8	Family Service Worker	Focus Group Participant
Bradford Gray	Area 8	Family Service Worker	Focus Group Participant
Amber Fleming	Area 9	Family Service Worker	Focus Group Participant
Carlos Torres	Area 2	Family Service Worker	Focus Group Participant
Carey Tjapkes	Area 1	Family Service Worker	Focus Group Participant
Margot Gaston	Area 1	Family Service Worker	Focus Group Participant
Ryan McClure	Area 2	Family Service Worker	Focus Group Participant
Gary Watkins	Area 2	Family Service Worker	Focus Group Participant
Nirika Morris	Area 1	Adoption Specialist	Focus Group Participant
Suzanne Stephens	Area 2	Family Service Worker Specialist	Focus Group Participant
Brenda Keith	Area 6	Adoption Specialist	Focus Group Participant
Monica Spencer	Area 5	Adoption Specialist	Focus Group Participant
Cassie Quezada	Area 5	Family Service Worker	Focus Group Participant
Charlie Jeffers	Area 5	Family Service Worker	Focus Group Participant
Sarah Rion	Area 5	Family Service Worker	Focus Group Participant
Anissa Ballew	Area 7	Adoption Specialist	Focus Group Participant
Stephanie Moten	Area 7	Family Service Worker	Focus Group Participant
Latonya Millet	Area 10	Adoption Specialist	Focus Group Participant
Andrea Akins	Area 10	Family Service Worker	Focus Group Participant
Latoshia Savage-Willis	Area 10	Family Service Worker	Focus Group Participant
Robin Stevens	Area 7	Family Service Worker	Focus Group Participant
Amanda Hogan	Area 3	TYS Coordinator	Focus Group Participant
Shawna Wright	Area 3	Program Assistant	Focus Group Participant
Dorothy Green	Area 4	Program Assistant	Focus Group Participant
Sherri Burris	Area 8	TYS Coordinator	Focus Group Participant
Linda Carter	Area 9	Program Assistant	Focus Group Participant
Angela Foy	Area 7	Program Assistant	Focus Group Participant
Joyce Taylor	Area 6	Program Assistant	Focus Group Participant
Joshua Henley	Area 2	Program Assistant	Focus Group Participant
Sally Burleson	Area 5	TYS Coordinator	Focus Group Participant
Crystal Tipton	Area 2	Program Assistant	Focus Group Participant
Dacia Elmore	Area 2	Program Assistant	Focus Group Participant
Cassie Watkins	Area 1	TYS Coordinator	Focus Group Participant
Laura Ennis	Area 2	Financial Coordinator	Focus Group Participant
Kristen Moseley	Area 10	Health Services Worker	Focus Group Participant
Ruth Byrd	Area 10	Program Assistant	Focus Group Participant
Letreana Jenkins	Area 7	Program Assistant	Focus Group Participant
Angela Murry	Area 7	Program Assistant	Focus Group Participant
Margaret English	Area 3	Field Trainer, UALR, MidSOUTH	Focus Group Participant
Amy Wisdom	Area 3	Field Instructor, UALR, MidSOUTH	Focus Group Participant
Gale Perry	Area 4	Field Trainer, SAU	Focus Group Participant
Joannie Phelps	Area 4	Field Trainer, SAU	Focus Group Participant
Natalie Gatlin	Area 8	Field Trainer, ASU	Focus Group Participant
Kenya Duncan	Area 8	Field Trainer, ASU	Focus Group Participant
Phoebe Cox	Area 6	Field Trainer, Philander	Focus Group Participant

Name	Agency / Location	Title / Position	Role in Statewide Assessment
-	-	Smith College	-
Rodney Crownover	Statewide	Training Director, UALR, MidSOUTH	Focus Group Participant
Jean Button	Area 1	IV-E Coordinator, UAF	Focus Group Participant
Misty Blanton	Area 1	Regional Team Leader, MidSOUTH	Focus Group Participant
Jill Scott	Area 1	Field Trainer, UAF	Focus Group Participant
Mary Bolding	Area 1	CHRIS Trainer, MidSOUTH	Focus Group Participant
Lenda Creger	Area 2	Field Trainer, UAF	Focus Group Participant
Misty Paschall	Area 6	Regional Leader, MidSOUTH	Focus Group Participant
Felita House	Area 10	Field Trainer, UAM	Focus Group Participant
Lee Allen	Area 7	IV-E Coordinator, UAPB	Focus Group Participant
Annette Dawn	Area 10	Field Trainer, UAM	Focus Group Participant
Tammy Vaughn	Area 10	IV-E Coordinator, UAM	Focus Group Participant
Paula Hall	Compact Family Services	Senior Director of Social Services	Focus Group Participant
John Morgan	Ouachita Children's Center	Case Management Director	Focus Group Participant
Linda Ragsdale	Ouachita Children's Center	Executive Director	Focus Group Participant
Anglea Stein	Ouachita Children's Center	-	Focus Group Participant
Cathy Dickens	Ouachita Children's Center	Case Management Supervisor	Focus Group Participant
Carolyn Lewis	MidSouth Health Systems	Therapeutic Foster Care Director	Focus Group Participant
Madelyn Keith	East Arkansas Youth Services	CEO	Focus Group Participant
Greg Russell	Northwest Arkansas Children's Shelter	Executive Director	Focus Group Participant
Allie Hennis	Ozark Guidance Center	Foster Care Program Director	Focus Group Participant
Megan Wedgeworth	Piney Ridge Center, Inc.	Director of Admissions	Focus Group Participant
Michelle Cutrer-Boggess	Northwest Arkansas Children's Shelter	Director of Program Services	Focus Group Participant
Betsy Anderson	Vera Lloyd Presbyterian Family Services	Program Director	Focus Group Participant
Karen Walker	Centers for Youth and Families (CRT)	-	Focus Group Participant
Clementine Tanner	Dana's House	Administrator	Focus Group Participant
Deandra Whitaker	Area 8	Foster Parent	Focus Group Participant
Vickie Lynn Harrison	Area 8	Foster Parent	Focus Group Participant
George Smith	Area 8	Foster Parent	Focus Group Participant
Michele Smith	Area 8	Foster Parent	Focus Group Participant
Emily Rodriguez	Area 6	Foster Parent	Focus Group Participant
Amy Lin Cortright-Haynes	Area 7	Foster Parent	Focus Group Participant
Karen Hillman	Area 10	Foster Parent	Focus Group Participant
Lee Lowder	Lee Lowder, LPC, Inc.	Contract Therapist	Focus Group Participant

<b>Name</b>	<b>Agency / Location</b>	<b>Title / Position</b>	<b>Role in Statewide Assessment</b>
Danny Stanley	Southwest Arkansas Counseling and Mental Health Center, Inc.	Assistant Clinical Director	Focus Group Participant
Van Hall	Southwest Arkansas Counseling and Mental Health Center, Inc.	TFC Program Manager	Focus Group Participant
Kim Brown	MidSouth Health Systems Substance Abuse Treatment Program	Coordinator	Focus Group Participant
Staci Ringwald	Western AR Counseling and Guidance Center	CASSP Coordinator	Focus Group Participant
Diane Bynum	Western AR Counseling and Guidance Center	Director of Substance Abuse Treatment	Focus Group Participant
Tina Flowers	Decision Point	Coordinator	Focus Group Participant
Destini Trusty	Counseling Associates, Inc.	Program Coordinator	Focus Group Participant
Kristy Kennedy	Counseling Associates	Assistant Director of Childrens Services	Focus Group Participant
Nicole Allison	Cherokee Nation	Case Manager	Focus Group Participant
Tad Teehee	Cherokee Nation	Case Manager	Focus Group Participant
Lou Stretch	Cherokee Nation	Program Manager	Focus Group Participant
Hettie Charboneau	Cherokee Nation	Program Manager	Focus Group Participant



## **Section II: Safety and Permanency Data**

Data profile has been deleted in its entirety.

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

The Arkansas Department of Human Services, Division of Children and Family Service's Quality Assurance (QA) and Continuous Quality Improvement (CQI) systems and processes are explained in detail on pages 83 through 95 of Arkansas's 2015 Annual Progress and Services Report. A detailed update to that information is provided within the assessment of the Quality Assurance System in Section IV of this document. Most notably for Section III of the statewide assessment, the discussion within Item 25 describes the changes to the Quality Services Peer Reviews, DCFS' qualitative case review process. Arkansas's QSPR process utilizes the federal Child and Family Services Reviews Onsite Review Instrument (OSRI). Prior to State Fiscal Year 2016, DCFS employed the OSRI used in the first two rounds of CFSSRs, but the Division adopted the Round 3 OSRI for use in the QSPR process beginning July 1, 2015. This section expounds upon the summary information provided in the SFY 2015 QSPR Performance Synopsis on pages 78 through 82 of Arkansas's 2015 APSR.

The Service Quality and Practice Improvement Unit conducted Quality Services Peer Reviews (QSPR) in each of the Division of Children and Family Services' (DCFS) ten geographic service areas between July 2014 and June 2015. Thirty stratified, randomly selected cases were reviewed within each of the service areas using the Round 2 OSRI, totaling 300 case reviews conducted statewide for the State Fiscal Year (SFY) 2015 round of reviews. Seventy-three of Arkansas's 75 counties are represented in the findings from the reviews, with at least one case being reviewed from each of the selected counties. None of the cases in Calhoun or Prairie Counties were eligible for review. Each service area's score was weighted in the calculation of the statewide scores to account for the differing client population sizes across the Areas. Each Area was assigned a weight proportional to its foster care caseload as of October 1, 2014. The breakdown of foster children by service area is illustrated in the following table.

<b>Area</b>	<b># Children</b>	<b>% Statewide Population</b>
1	439	10.97%
2	824	20.59%
3	251	6.27%
4	214	5.35%
5	378	9.45%
6	507	12.67%
7	241	6.02%
8	480	12.00%
9	502	12.55%
10	165	4.12%
<i>Total</i>	<i>4,001</i>	<i>100.00%</i>

In addition to its qualitative case review process, DCFS also conducts child maltreatment investigation reviews on an ongoing basis to monitor the quality of and outcomes from its investigative practices. During SFY 2015, staff from Hornby Zeller Associates, Inc. (HZA) reviewed 50 randomly selected child maltreatment investigations from each of DCFS' ten geographic service areas. The referrals were selected using a rolling sampling period from the investigations closed by DCFS between January 1, 2014 and April 30, 2015, with each sampling period ending with the most recent quarter prior to each Area's review. A rolling sampling approach was used to ensure that each service area's reviews were focused on recent investigative practices. Among the 500 referrals that were reviewed, 99 were given a disposition of True (20 percent), 386 were Unsubstantiated (77 percent) and 15 were Exempt (three percent). Approximately one-quarter of the referrals (24 percent) were Priority I reports with the remaining three-quarters (76 percent) being Priority II reports.

Arkansas will use the data from these case record and investigative reviews as well as available data from the statewide information system to assess its performance on the child and family outcomes pertaining to safety, permanency and well-being. Please note that the performance data from the case record reviews presented in the tables below reflect the statewide weighted scores, which were calculated using the methodology described above.

## 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

	SFY 2015	SFY 2014	SFY 2013	SFY 2012	SFY 2011	SFY 2010	2008 CFSR
<b>Safety 1: Children are first and foremost protected from abuse and neglect</b>	<b>82%</b>	<b>73%</b>	<b>75%</b>	<b>77%</b>	<b>85%</b>	<b>76%</b>	<b>77%</b>
ITEM 1: Timeliness of investigations (N=182)	84%	78%	84%	85%	91%	83%	77%
ITEM 2: Repeat maltreatment (N=147)	95%	88%	86%	88%	83%	82%	95%

#### Timeliness of Initiating Investigations

Reports of abuse and/or neglect were received during the twelve-month period under review in 182 of the cases reviewed during the SFY 2015 QSPR. Caseworkers initiated the investigations within the State mandated timeframes in 84 percent of these cases, a six percentage point increase from the SFY 2014 QSPR. Areas 2, 9 and 10 achieved substantial conformity with the initiation measure, while Area 7 was within one percentage point of achievement.

**SFY15 Investigation Reviews: Timely Initiation**

-	Yes		No	
	#	%	#	%
<b>State Total</b>	<b>384</b>	<b>76.80%</b>	<b>116</b>	<b>23.20%</b>
<i>By Area</i>				
Area 1	35	70.00%	15	30.00%
Area 2	43	86.00%	7	14.00%
Area 3	40	80.00%	10	20.00%
Area 4	37	74.00%	13	26.00%
Area 5	39	78.00%	11	22.00%
Area 6	29	58.00%	21	42.00%
Area 7	38	76.00%	12	24.00%
Area 8	36	72.00%	14	28.00%
Area 9	45	90.00%	5	10.00%
Area 10	42	84.00%	8	16.00%

The SFY 2015 child maltreatment investigation reviews evidenced a similar, although slightly lower, level of performance around initiation. Specifically, 384 of the 500 reviewed investigations (77 percent) were initiated timely. Area 9 had the highest initiation rate at 90 percent, followed by Areas 2 and 10 with 86 percent and 84 percent, respectively. Area 6 fared the worst, initiating only 29 of the 50 review investigations (58 percent) on time.

**Repeat Maltreatment**

The SFY 2015 QSPR revealed the fewest incidents of repeat maltreatment in Arkansas since the Round 2 CFSR. The children in nearly half of the reviewed cases (49 percent) experienced maltreatment that resulted in a substantiated referral during the twelve-month period under review, but only ten of these incidents of maltreatment (5 percent) involved abuse/neglect that occurred within six months of a similar, founded maltreatment referral. Areas 3, 5 and 10 were the only service areas to not achieve substantial conformity with the repeat maltreatment measure, but even these Areas were only one or two percentage points away from meeting the standard.

**Round 3 CFSR Data Indicator: Recurrence of Maltreatment**

Indicator	Performance	NS	Status
Recurrence of maltreatment	5.40%	9.10%	<b>Met</b>

Arkansas's Round 3 CFSR Data Profile from November 2015 supports the findings from the SFY 2015 QSPR. As illustrated in the preceding table, the State met the national

standard on the statewide data indicator related to recurrence of maltreatment. Of all children who were victims of a substantiated or indicated maltreatment report in Arkansas during federal fiscal year (FFY) 2013, only 5.4 percent were victims of another substantiated or indicated maltreatment report within twelve months.

**Round 3 CFSR Data Indicator: Maltreatment in Foster Care**

Indicator	Performance	NS	Status
Maltreatment in foster care	7.76	8.50	<i>Not Met</i>

Despite exceeding the national standard on the Recurrence of Maltreatment safety indicator, Arkansas did not achieve an acceptable level of performance on the Maltreatment in Foster Care safety indicator. The state's performance, 7.76 victimizations per 100,000 days in care, exceeds the observed national performance of 8.50 victimizations. Even so, the state did not achieve the Children's Bureau's goal of 6.30 victimizations or less. DCFS is committed to protecting children and is looking into the State's performance. One issue that may be impacting this indicator is past incidents of maltreatment that are called into the Child Abuse Hotline by mandated reporters, e.g., therapists and counselors, when they are disclosed by children after they enter foster care. Some of these incidents occurred well before the child's entrance into foster care but are erroneously documented as occurring around the time the report is made. Arkansas has enhanced its SACWIS to allow for date ranges, versus specific dates, as to when maltreatment occurred for those situations in which a report may not know the exact date of when an incident occurred. This should help to establish a more accurate record for maltreatment referrals and to better reflect the experiences of children within the child welfare system. However, Arkansas recognizes that some children are, in fact, abused and neglected while in foster care, and the State is working to address that issue through the recruitment and foster home assessment processes, resource family training and supports, consistent implementation of Structured Decision Making across the state and frequent, substantive caseworker visitation with all children involved with the child welfare system.

**Safety Outcome 2**

<b>Safety 2: Children are safely maintained in their home when possible and appropriate</b>	<b>63%</b>	<b>73%</b>	<b>64%</b>	<b>63%</b>	<b>62%</b>	<b>60%</b>	<b>59%</b>
ITEM 3: Services to prevent removal (N=143)	73%	73%	73%	70%	67%	62%	68%
ITEM 4: Risk of harm (N=300)	64%	74%	66%	64%	63%	61%	61%

## **Services to Prevent Removal**

DCFS did not provide the services needed to protect children and prevent them from entering foster care in more than one-fourth of the applicable cases (27 percent), which is comparable to its performance during the SFY 2013 and SFY 2014 QSPRs. Area 1 struggled with the prevention measure the most followed by Area 5 and Area 6 with sufficient preventive services provided in 42, 65 and 69 percent of cases, respectively. Many of the problems in the deficient cases stemmed from a lack of caseworker involvement and a lack of services. The underlying issues facing these families (e.g., substance abuse) were not sufficiently monitored (e.g., via drug screens and caseworker visitation) or addressed (e.g., through referrals for drug/alcohol assessments). Other deficient ratings resulted from incomplete, untimely services that did not sufficiently mitigate identified risk factors (e.g., services provided months after issues with safety were identified) or because caseworkers and supervisors were not focused on the appropriate risk factors in the home (e.g., focusing on peripheral issues like environmental concerns while disregarding potentially violent caregivers).

## **Assessing and Addressing Risk and Safety Concerns**

During SFY 2015, sufficient efforts were not made to assess and address risk and safety concerns for children receiving services in more than one-third of the reviewed cases (36 percent), a ten percentage point decrease from SFY 2014. The deficient ratings stemmed from problems with both initial and ongoing assessments of risk and safety and with safety management. Formal assessments of risk and safety were missing or not completed on time in many of the cases with deficient ratings, but the prevailing problem was the dearth of ongoing, informal assessments resulting from infrequent face-to-face contact between caseworkers and clients. Safety management was also a concern in some of the deficient cases. Genuine safety concerns were identified in the deficient cases, with little done to monitor the families or to intervene to ensure the children's safety. Area 4 was the only service area to achieve substantial conformity with the safety assessment and management measure, but Areas 7 and 10 are also showing promise in this area of practice. Areas 1 and 2 struggled the most, sufficiently assessing risk/safety and managing concerns in fewer than half of the reviewed cases.

DCFS continues to do a better job of assessing and addressing risk and safety issues for children in foster care than those who remain in the family home; roughly three-quarters of the cases (74 percent) rated as being deficient during SFY 2015 were in-home cases. In fact, more than four-fifths of the reviewed foster care cases (85 percent) achieved a rating of strength on this measure compared to just over half of the reviewed in-home cases (55 percent). Much of this is attributable to the differences in contact and engagement between the Agency and children in care and that with children who remain in the family home. As described within the analysis of Well-Being Outcome 1 below, children in foster care receive much more frequent, substantive caseworker visitation than do children in in-home cases. Children in foster care (and

their families) are subsequently more engaged in the assessment of risk, safety, strengths and needs, and they typically receive more services than do children who remain in the family home. For a variety of reasons, in-home cases are often assigned a lower level of priority than are their out-of-home equivalents when, in fact, the children are much more vulnerable than those in foster care. Given these children's increased susceptibility to repeat maltreatment, frequent, substantive contact with caseworkers which includes thorough, quality assessments of risk and safety is indispensable.



## 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 for children.

- 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

	SFY 2015	SFY 2014	SFY 2013	SFY 2012	SFY 2011	SFY 2010	2008 CFSR
<b>Permanency 1: Children have permanency and stability in their living situations</b>	<b>57%</b>	<b>68%</b>	<b>65%</b>	<b>67%</b>	<b>66%</b>	<b>62%</b>	<b>41%</b>
ITEM 5: Foster care re-entry (N=46)	96%	88%	97%	97%	85%	93%	100%
ITEM 6: Stability of foster care placement (N=150)	61%	70%	68%	74%	69%	74%	64%
ITEM 7: Permanency goal for child (N=150)	89%	89%	86%	90%	92%	84%	72%
ITEM 8: Reunification, guardianship & placement w/ relatives (N=68)	84%	80%	91%	78%	88%	85%	72%
ITEM 9: Adoption (N=57)	68%	63%	54%	68%	71%	56%	33%
ITEM 10: APPLA (N=27)	84%	91%	69%	63%	77%	71%	57%

#### Foster Care Re-Entry

The children in 46 of the 150 foster care cases (31 percent) selected for review entered out-of-home care during the review period; only two of these cases (4 percent) involved a removal which occurred within twelve months of a prior foster care episode. No re-entries were identified in eight of the ten service areas, while one re-entry each was found in Areas 1 and 3. Arkansas's performance improved by eight percentage points on the re-entry measure between the 2014 and 2015 rounds of reviews.

**Round 3 CFSR Data Indicator: Re-entry to Care in 12 Months**

Indicator	Performance	NS	Status
Re-entry to care in 12 months	6.30%	8.30%	<b>Met</b>

Arkansas's performance on the foster care re-entry measure within the OSRI is corroborated by the state's performance documented within the Round 3 CFSR Data Profile. Arkansas exceeded the national standard (of 8.30 percent) on the permanency indicator regarding the proportion of children who re-enter care within twelve months of being discharged to reunification, relative placement or guardianship. Specifically, the Data Profile provides that, of all the children who entered care between April 1, 2012 and March 31, 2013 and who discharged within twelve months to reunification, live with a relative or guardianship, only 6.30 percent re-entered care within twelve months of their discharge.

**Placement Stability**

For purposes of the QSPRs, children are considered to experience stability if their current placement is stable and any moves they have made during the twelve-month period under review have been planned and designed either to achieve the case goals or to better meet their needs. These conditions were not met in more than one-third of the reviewed foster care cases (39 percent), denoting a nine percentage point drop on the stability measure between the 2014 and 2015 reviews. While some of the deficient cases were rated as such because the children's current placement was not stable (e.g., the use of temporary shelters), most of the deficient ratings resulted from placement changes that were not planned by the Agency. In these cases, children were placed in accommodations that were not equipped to meet their needs or to deal with their problematic behaviors. Adequate placement resources were not available in most service areas during SFY 2015, so many of the placement decisions in the deficient cases were based on the availability of placements versus the actual needs of the children. Late in the fiscal year (i.e., as of May 18, 2015), Arkansas had only 2,499 licensed beds (in 1,126 homes) for the 4,342 children in care, equaling a bed-to-child ratio of just 0.58. No service area achieved substantial conformity with regard to placement stability, but Areas 2, 3 and 10 presented the least stable placements during the twelve-month period under review.

**Round 3 CFSR Data Indicator: Placement Stability**

Indicator	Performance	NS	Status
Placement stability	8.11	4.12	<i>Not Met</i>

Arkansas's issues with placement stability were also bore out in the State's Round 3 CFSR Data Profile. The permanency indicator related to placement stability showed a rate of 8.11 placement moves during the period of April 1, 2014 through March 31, 2015 compared to the national standard of 4.12 placement moves.

### **Timely and Appropriate Permanency Goals**

Consistent with last year, the permanency goals in 89 percent of the reviewed foster care cases were appropriate and established on time. Areas 2, 4, 6, 7 and 10 were the only service areas to not achieve substantial conformity during the SFY 2015 QSPR, although Areas 4, 6 and 10 were each within three percentage points of fulfillment.

### **Efforts to Achieve Permanency Goals**

#### *Reunification, Guardianship and Placement with Relatives*

Sixty-eight cases were reviewed in which Reunification, Guardianship or Placement with Relatives was the assigned permanency goal for the target child, and appropriate services were provided to achieve the goals in 59 of these cases (84 percent). The State's performance improved by four percentage points between the 2014 and 2015 QSPRs.

#### *Adoption*

The target children in 57 of the reviewed foster care cases were assigned a permanency goal of adoption. Despite a five percentage point increase on the adoption measure from the previous QSPR, appropriate efforts were not made to achieve finalized adoptions in a timely manner in just under one-third of the relevant cases (32 percent). Consistent with prior years' reviews, the prevailing problem in the deficient cases was a lack of urgency. Adoption summaries and packets were not completed timely, there were delays in assigning Adoption Specialists and children's pictures were not promptly (if ever) placed on the Arkansas Heart Gallery website. The impediments to permanency for many of these children, however, were system-wide and not limited to DCFS alone. Many of the deficiencies resulted from delays in the Division and its attorneys filing for and the courts granting termination of parental rights (TPR). Furthermore, avoidable continuances were granted for Permanency Planning Hearings (PPH) and TPR hearings in several of these cases. The QSPRs continue to find that some children with goals of adoption, e.g., those with serious medical or behavior problems, are viewed as being "unadoptable," while others are knowingly left in homes in which the families are not willing to provide them with legal permanence. Areas 3 and 7 were the only service areas to achieve substantial conformity on this indicator. Conversely, Areas 2 and 10 performed the worst on the adoption measure, with adequate efforts not being made to achieve finalized adoptions in 62 and 40 percent of the reviewed cases, respectively.

### *Alternative Planned Permanent Living Arrangements*

Twenty-seven cases were reviewed in which APPLA was the assigned permanency goal for the target child. DCFS provided the appropriate services to the transitional-aged youth in all but three of these cases. The Division's performance dropped by seven percentage points since the previous QSPR because of the weighting of each service area's performance, but it should be noted that one fewer case was rated as being deficient from a year ago (when the same number of cases were applicable). There was consistent caseworker contact with and engagement of youth in the reviewed cases, ranging from the case planning process to transitional services.

#### **Round 3 CFSR Data Indicators: Permanency in 12 Months**

<b>Indicator</b>	<b>Performance</b>	<b>NS</b>	<b>Status</b>
Permanency in 12 months (entries)	62.30%	40.50%	<b>Met</b>
Permanency in 12 months (12-23 mos)	55.70%	43.60%	<b>Met</b>
Permanency in 12 months (24+ mos)	28.40%	30.30%	<b>No Diff</b>

In addition to the relative achievements identified through the SFY 2015 QSPR around establishing timely, appropriate permanency goals for children in foster care (Item 7) and working to achieve the goals of reunification, guardianship and placement with relatives (Item 8), the Round 3 CFSR Data Profile underscored Arkansas's relative success in moving children to permanency. The state met or exceeded the national standard for discharging children in foster care to permanency within the twelve-month periods being examined for each length of stay, including children entering care, children in care between twelve and 23 months and children in care 24 months and longer.

#### **Permanency Outcome 2**

	<b>SFY 2015</b>	<b>SFY 2014</b>	<b>SFY 2013</b>	<b>SFY 2012</b>	<b>SFY 2011</b>	<b>SFY 2010</b>	<b>2008 CFSR</b>
<b>Permanency 2: The continuity of family relationships and connection is preserved</b>	<b>68%</b>	<b>71%</b>	<b>67%</b>	<b>68%</b>	<b>67%</b>	<b>73%</b>	<b>54%</b>
ITEM 11: Proximity of placement (N=107)	89%	86%	90%	93%	92%	90%	96%
ITEM 12: Placement with siblings (N=94)	74%	70%	85%	75%	83%	92%	82%
ITEM 13: Visiting w/ parents & siblings in foster care (N=121)	81%	76%	68%	73%	69%	69%	59%
ITEM 14: Preserving connections (N=146)	81%	86%	79%	77%	69%	87%	79%
ITEM 15: Relative placement (N=115)	86%	87%	77%	77%	69%	84%	67%
ITEM 16: Relationship of child in care w/ parents (N=102)	48%	73%	68%	70%	69%	70%	48%

## **Placement Proximity**

Despite the aforementioned shortage of placement resources, the SFY 2015 QSPR provided that Arkansas was largely successful at placing children in foster care within close proximity to their families. The children's placements at the time of the reviews were close enough to their parents to facilitate frequent face-to-face contact (generally a travel distance of less than an hour) in 89 percent of the applicable cases, a slight improvement from 2014. Areas 2, 3, 5 and 7 were the only service areas to not attain substantial conformity on the proximity measure, but Areas 2, 5 and 7 are moving in the right direction with 82 percent of applicable cases rated as Strengths in each.

## **Placement with Siblings**

Ninety-four of the reviewed foster care cases included sibling groups. Sufficient efforts were not made to ensure that the siblings were placed together in roughly one-quarter of these cases. Caseworkers either did not attempt or were unable to locate placement resources capable of accommodating all of the siblings in the deficient cases. Due to the shortage of resource families in Arkansas, the children in many of the deficient cases were placed where beds were available as opposed to placements best suited to meet their individual needs. There was also not enough effort to reunite siblings once they were initially separated. Areas 1 and 5 performed best on the sibling placement measure, while Areas 6, 9 and 10 were the service areas least likely to place siblings together during the 2015 round of reviews.

## **Visitation between Foster Children and their Parents and Siblings**

In building on its successes at placing children in foster care in settings close to their parents, Arkansas continues to improve its performance around ensuring that children are able to visit with their parents and siblings. The SFY 2015 QSPR marked the second consecutive year of gains and the State's best showing on the parent-child visitation measure to date. Even so, sufficient efforts were not made to ensure adequate visitation between foster children and their birth families in nearly one-fourth of the applicable cases, so continued efforts are still needed. Many of the deficient ratings stemmed from a lack of visitation between the target child and their parents, but issues were also identified with insufficient visitation between siblings who are not placed together. Arkansas believes that face-to-face visitation is indispensable in promoting the continuity of the children's relationships with family members, so caseworkers must continue work to exploit the children's closeness to their parents to facilitate frequent, quality visitation. This will increase the chances of family reunification and subsequently decrease the need for continued placement outside of the home. Areas 4 and 10 were the only service areas to achieve substantial conformity with the parent-child visitation measure, but Areas 1, 5, 6 and 8 were within a few percentage points of attainment. Area 2 exhibited the worst performance; more than a quarter of the children in the applicable cases (27 percent) did not receive adequate visitation with their parents and/or siblings.

## **Preserving Important Connections**

Children form important bonds outside of their immediate families; providing children in care with permanence requires that they maintain as many of their important connections as possible. Arkansas put forth sufficient efforts to preserve the bonds of children in care with their neighborhoods, communities, extended families, faith, schools and friends in 118 of the 146 applicable cases (81 percent). This represents a five percentage point decline from the State's performance during the 2014 QSPR. Areas 4 and 8 were the only service areas to achieve substantial conformity with the connections measure, while Area 3 struggled the most with preserving children's important ties.

## **Relative Placement**

Best practice dictates that relatives are the preferred placement option for children who cannot safely remain with their parents. Placing children with family members helps to mitigate some of the trauma they experience when entering foster care, and relatives provide emotional supports for children and help promote the reunification process as well as other important connections, including their critical ethnic, cultural and community ties. DCFS effectively worked to identify, locate and evaluate potential relative placements and place foster children in those homes when appropriate in 86 percent of the applicable cases, which is consistent with its performance during the 2014 QSPR. Areas 3, 4, 5, 8 and 9 achieved substantial conformity with the relative placement measure, and Areas 1, 2 and 10 are showing promise. Areas 6 and 7 were the least successful at exploring relatives as potential placement options for children in care.

## **Relationship of Children in Care with their Parents**

Despite its success in placing children near to (and relative success in providing them sufficient contacts with) their families, DCFS struggled with promoting and supporting positive relationships between children in care and their parents/caregivers through efforts beyond establishing basic visitation plans. Sufficient efforts were not made to sustain these important connections in more than half of the applicable cases (52 percent), a 25 percentage point downswing from the previous QSPR. Visitation was being provided between the children and their caregivers in most of the deficient cases, but efforts to promote additional connections were not found. None of the Areas attained substantial conformity with this measure, while Areas 1 and 2 fared the worst, putting forth sufficient efforts in only one-fifth of the reviewed cases.

## 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

	SFY 2015	SFY 2014	SFY 2013	SFY 2012	SFY 2011	SFY 2010	2008 CFSR
<b>Well-Being 1: Families have enhanced capacity to provide for children's needs</b>	<b>52%</b>	<b>61%</b>	<b>52%</b>	<b>48%</b>	<b>45%</b>	<b>45%</b>	<b>28%</b>
ITEM 17: Needs/services of child, parents and foster parents (N=300)	66%	71%	65%	62%	56%	56%	37%
ITEM 18: Child/family involvement in case planning (N=287)	57%	64%	61%	53%	49%	53%	31%
ITEM 19: Worker visits with child (N=300)	57%	68%	61%	52%	60%	54%	46%
ITEM 20: Worker visits with parents (N=242)	38%	48%	41%	42%	37%	42%	33%

#### Effectively Assessing and Attending to the Service Needs of Families

DCFS did not properly assess the needs of and/or provide appropriate services to children and families in more than one-third of the reviewed cases (34 percent) during SFY 2015. Caseworker visitation was limited in many of the deficient cases, thus preventing staff from properly assessing the families' needs or identifying and providing appropriate services. Other problems centered on incomplete and untimely needs assessments and service provision. Need was suitably assessed for some family members while others were excluded or not all of the needed services were provided or they were provided outside of a reasonable timeframe within which to protect the

children and help the family. Nowhere were the inconsistencies in casework between in-home and foster care cases more evident than in the practice surrounding needs assessment/service provision; nearly four-fifths of the deficient cases (79 percent) were in-home cases. No Area achieved substantial conformity with this Item, although Area 4 was within three percentage points of attainment. Areas 1, 2 and 6 struggled the most with assessing need and providing fitting services.

### **Engaging Children and Families in Case Planning**

The SFY 2015 QSPR revealed that children and/or their parents were excluded from the case planning process in 43 percent of the reviewed cases. After three consecutive years of gains, Arkansas's performance declined by seven percentage points on the engagement measure from the 2014 review. There was an absence of case planning altogether in some of the deficient cases, but the prevailing problem centered on families, or at least particular family members (especially fathers), being left out of the process. Inconsistent contact between caseworkers and clients prevented meaningful family engagement in many of the deficient cases. In-home cases represented a disproportionate segment of the deficiencies here too, as nearly three-fourths of the deficient ratings (73 percent) were identified in in-home cases. More than half of the in-home cases (53 percent) reviewed during SFY 2015 were rated as being deficient with regard to engaging children and families in case planning. No service areas achieved substantial conformity on the engagement measure, but Areas 1, 2 and 6 involved children, youth and families in case planning the least. Casework in Arkansas must become more family-centered. Caseworkers must avoid making unilateral decisions about cases and involve families in the decisions surrounding their cases. Outcomes can improve when families are engaged in decision-making, so DCFS must work to ensure the involvement and participation of *all* family members in every aspect of case planning for *all* case types.

### **Caseworker Visitation with Children and their Parents**

After two years of progress, Arkansas's performance dropped by eleven percentage points on the child visitation measure and ten percentage points on the parent visitation measure during SFY 2015. Children did not receive adequate visitation in 43 percent of the reviewed cases, while caseworkers failed to provide parents with frequent, substantive visitation in more than half of the reviewed cases. The bulk of the deficient ratings involving both child and parent visitation stemmed from inconsistent, infrequent contact with the clients. Caseworker visitation was too inconsistent and sporadic in the deficient cases to address issues pertaining to the safety, permanency, and well-being of the children. Apart from the issues with frequency of contact, the review also unearthed problems with the quality of some of the caseworker communication. In these instances, caseworkers did not consistently have private, face-to-face conversations with the children, the visits did not occur in the home/placement or caseworkers did not discuss with families the issues pertinent to promoting the achievement of the case goals.



In-home cases suffered the most with regard to caseworker visitation as well. More than three-quarters of the foster children (76 percent) in the reviewed cases received adequate visitation during the twelve month review period, whereas nearly half of the children in the in-home cases (47 percent) did not receive ample contact. Caseworker visitation with parents was equally inadequate between in-home and foster care cases, as DCFS struggles with engaging parents across the board. Staff in Areas 1 and 2 visited clients the least during SFY 2015, providing children with frequent, substantive visitation in only 40 and 27 percent of the cases and providing parents with consistent, quality contact in 13 and 24 percent of the cases, respectively. Caseworker visitation with clients is the foundation of effective practice in child welfare. In the absence of contact with families, caseworkers cannot assess risk, safety, strengths, needs or resources, nor can they effectively engage families or work with them to strengthen parental capacity. DCFS must find a way to ensure that caseworkers maintain consistent, engaging contact with both children and their parents.

### Well-Being Outcome 2

	SFY 2015	SFY 2014	SFY 2013	SFY 2012	SFY 2011	SFY 2010	2008 CFSR
<b>Well-Being 2: Children receive services to meet their educational needs</b>	<b>88%</b>	<b>88%</b>	<b>84%</b>	<b>80%</b>	<b>78%</b>	<b>75%</b>	<b>71%</b>
ITEM 21: Educational needs of child (N=156)	88%	88%	84%	80%	78%	75%	71%

### **Educational Needs of Children**

Although not a true strength in practice, i.e., a score of 90 percent or higher, DCFS did a pretty good job of assessing and addressing the educational needs of the children in many of the reviewed cases. Specifically, caseworkers sufficiently worked to identify and attend to the educational needs of children involved with the Division in all but 14 of the applicable cases (12 percent), a result which is similar to that of the 2014 QSPR.

**Well-Being Outcome 3**

	SFY 2015	SFY 2014	SFY 2013	SFY 2012	SFY 2011	SFY 2010	2008 CFSR
<b>Well-Being 3: Children receive services to meet their physical and mental health needs</b>	<b>81%</b>	<b>88%</b>	<b>89%</b>	<b>79%</b>	<b>75%</b>	<b>69%</b>	<b>62%</b>
ITEM 22: Physical health of child (N=188)	86%	92%	94%	90%	85%	84%	74%
ITEM 23: Mental health of child (N=155)	85%	92%	88%	77%	74%	68%	67%

**Physical and Dental Health Needs of Children**

DCFS put forth sufficient efforts to assess and address the physical and dental health needs of children involved with the Division in 86 percent of the applicable cases. After substantially achieving the physical health measure for the past three consecutive fiscal years, Arkansas's performance dropped by six percentage points between the 2014 and 2015 rounds of reviews.

**Mental and Behavioral Health Needs of Children**

DCFS put forth sufficient efforts to assess and address the mental and behavioral health needs of children involved with the Division in 85 percent of the applicable cases. After substantially achieving the mental health measure for the first time last year, Arkansas's performance dropped by seven percentage points in SFY 2015.

**Performance by Service Area**

The following table, SFY 2015 QSPR Performance by Service Area, presents each of DCFS' ten geographic service area's performance on the seven child and family outcomes and corresponding items from the Round 2 CFSR OSRI. It is important to note that the percentages presented in this table are the actual raw scores for each service area. Only the statewide scores were weighted during the SFY 2015 (and previous) QSPRs.

**SFY 2015 QSPR Performance by Service Area**

	<b>Area 1</b>	<b>Area 2</b>	<b>Area 3</b>	<b>Area 4</b>	<b>Area 5</b>	<b>Area 6</b>	<b>Area 7</b>	<b>Area 8</b>	<b>Area 9</b>	<b>Area 10</b>
<b>SAFETY 1: Children are first and foremost protected from abuse and neglect</b>	<b>47%</b>	<b>100%</b>	<b>73%</b>	<b>79%</b>	<b>76%</b>	<b>82%</b>	<b>89%</b>	<b>79%</b>	<b>90%</b>	<b>88%</b>
ITEM 1: Timeliness of investigations	53%	100%	73%	84%	81%	82%	89%	84%	90%	100%
ITEM 2: Repeat maltreatment	92%	100%	88%	92%	89%	94%	100%	93%	100%	88%
<b>SAFETY 2: Children are safely maintained in their home when possible and appropriate</b>	<b>47%</b>	<b>43%</b>	<b>73%</b>	<b>100%</b>	<b>67%</b>	<b>73%</b>	<b>83%</b>	<b>60%</b>	<b>63%</b>	<b>80%</b>
ITEM 3: Services to prevent removal	42%	70%	77%	100%	65%	69%	100%	72%	88%	83%
ITEM 4: Risk of harm	47%	43%	73%	100%	70%	77%	83%	60%	63%	83%
<b>PERMANENCY 1: Children have permanency and stability in their living situations</b>	<b>73%</b>	<b>27%</b>	<b>47%</b>	<b>67%</b>	<b>67%</b>	<b>73%</b>	<b>67%</b>	<b>67%</b>	<b>53%</b>	<b>60%</b>
ITEM 5: Foster care re-entry	75%	100%	80%	100%	100%	100%	100%	100%	100%	100%
ITEM 6: Stability of foster care placement	73%	47%	47%	67%	60%	73%	60%	73%	60%	53%
ITEM 7: Permanency goal for child	93%	80%	93%	87%	100%	87%	80%	93%	93%	87%
ITEM 8: Reunification, guardianship, and placement with relatives	100%	67%	100%	75%	100%	86%	80%	67%	90%	100%
ITEM 9: Adoption	67%	38%	100%	83%	83%	71%	100%	60%	75%	75%
ITEM 10: Alternative planned permanent living arrangement	100%	100%	100%	100%	67%	100%	100%	100%	0%	80%
<b>PERMANENCY 2: The continuity of family relationships and connection is preserved</b>	<b>87%</b>	<b>47%</b>	<b>64%</b>	<b>87%</b>	<b>73%</b>	<b>64%</b>	<b>60%</b>	<b>73%</b>	<b>73%</b>	<b>80%</b>
ITEM 11: Proximity of placement	100%	82%	60%	90%	82%	100%	82%	92%	92%	100%
ITEM 12: Placement with siblings	92%	75%	88%	71%	100%	44%	75%	78%	67%	43%
ITEM 13: Visiting with parents and siblings in foster care	83%	73%	80%	90%	86%	82%	80%	85%	77%	92%
ITEM 14: Preserving connections	79%	80%	69%	93%	80%	79%	73%	93%	87%	73%
ITEM 15: Relative placement	82%	83%	100%	91%	90%	69%	75%	92%	100%	80%
ITEM 16: Relationship of child in care with parents	22%	20%	63%	56%	83%	56%	50%	58%	54%	80%
<b>WELL BEING 1: Families have enhanced capacity to provide for children's needs</b>	<b>40%</b>	<b>30%</b>	<b>63%</b>	<b>83%</b>	<b>67%</b>	<b>60%</b>	<b>70%</b>	<b>50%</b>	<b>47%</b>	<b>67%</b>
ITEM 17: Needs/services of child, parents and foster parents	57%	50%	80%	87%	77%	63%	80%	67%	73%	67%
ITEM 18: Child/family involvement in case planning	57%	33%	67%	83%	62%	56%	75%	63%	62%	62%

	<b>Area 1</b>	<b>Area 2</b>	<b>Area 3</b>	<b>Area 4</b>	<b>Area 5</b>	<b>Area 6</b>	<b>Area 7</b>	<b>Area 8</b>	<b>Area 9</b>	<b>Area 10</b>
ITEM 19: Worker visits with child	40%	27%	67%	100%	63%	73%	77%	53%	60%	87%
ITEM 20: Worker visits with parents	13%	24%	43%	67%	52%	38%	63%	42%	33%	70%
<b>WELL BEING 2: Children receive services to meet their educational needs</b>	<b>80%</b>	<b>79%</b>	<b>92%</b>	<b>100%</b>	<b>88%</b>	<b>82%</b>	<b>94%</b>	<b>100%</b>	<b>94%</b>	<b>100%</b>
ITEM 21: Educational needs of child	80%	79%	92%	100%	88%	82%	94%	100%	94%	100%
<b>WELL BEING 3: Children receive services to meet their physical &amp; mental health needs</b>	<b>73%</b>	<b>67%</b>	<b>82%</b>	<b>96%</b>	<b>91%</b>	<b>75%</b>	<b>95%</b>	<b>85%</b>	<b>92%</b>	<b>91%</b>
ITEM 22: Physical health of child	83%	72%	85%	100%	94%	81%	100%	82%	94%	100%
ITEM 23: Mental health of child	64%	81%	93%	94%	95%	69%	93%	100%	94%	88%

## Section IV: Assessment of Systemic Factors

The Child and Family Services Plan (CFSP) is a five-year strategic plan that sets the stage for states to accomplish the vision and goals they have for strengthening their child welfare system. The Annual Progress and Services Reports (APSRs) are annual updates to a CFSP. For Round 3 of the Child and Family services Reviews, the Children's Bureau has more fully integrated the CFSP and the APSRs with the CFSR statewide assessment process to reduce states' burden and align federal planning and monitoring efforts. For the 2015–2019 CFSP, states are required to assess their performance on the CFSR's seven outcomes and seven systemic factors and demonstrate how assessed levels of performance relate to the state's goals and objectives. This information is then updated in each APSR so that states may revise and refine their goals and objectives as needed.

Because the CFSP/APSR evaluation is similar to the statewide assessment for the CFSR, states are now directed to refer to their CFSP/APSRs within the statewide assessment and update information only as needed. Subsequently, these documents are referenced throughout Section IV of Arkansas's Round 3 CFSR Statewide Assessment to demonstrate where particular sections provide quantitative and qualitative data that is useful in evaluating the state's current performance on the CFSR outcomes and systemic factors. Both the CFSP and the APSR may be found at the respective hyperlinks below, as may the DCFS Policy and Procedure Manual and various DCFS Publications (e.g., PUB-004 – Minimum Licensing Standards), which are also referenced throughout Section IV.

- **2015-2019 Child and Family Services Plan**  
<http://humanservices.arkansas.gov/dcfs/dcfsDocs/SFY%202015-2019%20Child%20and%20Family%20Services%20Five%20Year%20Plan.pdf>
- **2015 Annual Progress and Services Report**  
[http://humanservices.arkansas.gov/dcfs/dcfsDocs/Updated%20Initial%20comments%20addressed%20ARKANSAS%20ANNUAL%20PROGRESS%20AND%20SERVICE%20REPORT%202015%20th%2010-5-15%20\(2\).pdf](http://humanservices.arkansas.gov/dcfs/dcfsDocs/Updated%20Initial%20comments%20addressed%20ARKANSAS%20ANNUAL%20PROGRESS%20AND%20SERVICE%20REPORT%202015%20th%2010-5-15%20(2).pdf)
- **DCFS Policy and Procedure Manual**  
<http://humanservices.arkansas.gov/dcfs/dcfsDocs/Master%20DCFS%20Policy.pdf>
- **DCFS Publications**  
<https://ardhs.sharepointsite.net/CW/DCFS%20Publications/Forms/AllItems.aspx>

### Focus Groups

DCFS held focus groups with stakeholders across the state to engage them in the statewide assessment process, and the findings from those group interviews are discussed throughout Section IV. Please refer to Appendix A for a complete description of the protocol used for the CFSR focus groups.

## Summary of Stakeholder Involvement

A total of 37 focus groups were held to gather information to assess Arkansas's performance and functioning with regard to the Round 3 CFSR Systemic Factors. Five additional focus group sessions were scheduled but for which no participants showed up, including two groups in Monticello (Legal and Service Providers) and one group in each of Little Rock (Placement Providers), Arkadelphia (Foster Parents) and Fayetteville (Foster Parents). A total of 151 participants attended the groups that did take place with a breakdown as follows:

- Training – 18 participants
- Supervision & Management – 33 participants
- Services & Supports – 20 participants
- Investigations & Casework – 26 participants
- Service Providers – 9 participants
- Placement Providers – 14 participants
- Foster Parents – 7 participants
- Legal – 10 participants
- Area Directors – 10 participants
- Tribal – 4 participants

While DCFS is extremely grateful for all of the stakeholders who attended the focus groups and graciously provided their insights, the Division is also taking forward “lessons learned” from this round of stakeholder interviews. Specifically, DCFS needs to ensure that all focus groups are scheduled at times that are conducive to each stakeholder group’s participation. For example, the Division should likely avoid scheduling future focus groups for foster parents during the day, as many of our foster families work and cannot take off during the day. Providing child care may also enable more foster families to attend future sessions. Additionally, DCFS needs to, as much as possible, schedule focus groups with members of the legal community for days/times in which they are not in court.

The feedback from all of the focus groups has been compiled and is included in the analysis of the pertinent system factors throughout Section IV.

## 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 foster care?

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

#### State Response:

As described on pp. 26 and 27 of Arkansas's 2015-19 Child and Family Services Plan, DCFS has operated the **CH**ildren's **R**eporting and **I**nformation **S**ystem (CHRIS), Arkansas's statewide automated child welfare information system (SACWIS), since 1997. CHRIS is a fully longitudinal database that permits tracking of children from the time they enter the child welfare system through the time they leave the system. DCFS Policy I-E, Official Record Keeping and Access to Official Records, provides that CHRIS maintains "the official record of child welfare information for DCFS" (DCFS Policy and Procedures Manual, p. 12). The system supports the full scope of services provided by the Division and is available statewide and accessible to all county offices.

The FFY 2015 Annual Progress and Services Report (Continuous Quality Improvement Process, pp. 84-5) explains that CHRIS "serves as a centralized source to store information (e.g., client, legal and service information) and manage workloads (e.g., its tickler system for reminding workers/supervisors of time sensitive tasks)." It is also the source of DCFS' state and federal reporting, including DCFS management reports and the reporting required for the Adoption and Foster Care Analysis and Reporting System (AFCARS), the National Child Abuse and Neglect Data System (NCANDS), the National Youth in Transition Database (NYTD) and the federal caseworker visits reports. The information stored within CHRIS is available to the system's users 24 hours a day / seven days a week / 365 days per year (save for brief downtimes required for system maintenance, of course).

Specific to Item 19, CHRIS provides data/information that identifies the 1.) status, 2.) demographic characteristics, 3.) location and 4.) permanency goal(s) for children in foster care (and children previously in care). The child's race, ethnicity, and gender are mandatory fields that must be documented within CHRIS for staff to move to the next screen. Other than demographics, information such as status, location and permanency goal can change, for example, if a case starts out as protective services and subsequently the child is taken into custody. DCFS policy requires caseworkers to enter such changes into CHRIS but the same blocks do not exist within the SACWIS.

Staff may immediately access any of this important information for any child by going to the corresponding client- and case-specific screens in CHRIS. This information may also be easily aggregated and reported by the SACWIS by county, service area and statewide. The following management reports demonstrate the types of data readily available to CHRIS users (through CHRIS Net) regarding the combined demographics of children in care by DCFS service area on March 1, 2016:

- *Current Foster Care Children by Gender and Area of Removal*
- *Current Foster Care Children by Race/Ethnicity and Area of Removal*
- *Current Foster Care Children by Age and Area of Removal*

**Current Foster Care Children by Race/Ethnicity and Area of Removal as of March 1, 2016**

Area	AI/AN	Asian	Black	Hispanic	More than one	NH/PI	UTD	White	Total by Area
01	1	1	18	71	46	8	0	370	515
02	12	4	45	66	144	0	2	643	916
03	0	0	26	19	46	0	0	245	336
04	0	0	82	19	35	0	0	171	307
05	1	0	43	11	52	0	4	358	469
06	0	2	340	47	71	0	0	184	644
07	0	0	106	6	21	0	2	133	268
08	0	2	55	29	37	0	0	400	523
09	0	0	105	17	60	0	4	358	544
10	0	0	115	14	18	0	0	59	206
<b>Total By Age</b>	<b>14</b>	<b>9</b>	<b>935</b>	<b>299</b>	<b>530</b>	<b>8</b>	<b>12</b>	<b>2,921</b>	<b>4,728</b>

**Current Foster Care Children by Gender and Area of Removal as of March 1, 2016**

Area	Female	Male	Total by Area
01	249	266	515
02	468	448	916
03	169	167	336
04	144	163	307
05	244	225	469
06	308	336	644
07	140	128	268
08	258	265	523
09	248	296	544
10	109	97	206
<b>Total By Gender</b>	<b>2,337</b>	<b>2,391</b>	<b>4,728</b>



## Current Foster Care Children by Age and Area of Removal as of March 1, 2016

AREA	-1	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	Total by Area
1	0	46	35	40	35	41	29	26	24	28	19	14	21	21	18	16	29	24	23	11	7	8	0	515
2	0	59	77	60	72	55	44	51	59	48	44	49	36	32	35	42	39	43	35	16	12	6	1	915
3	0	24	26	21	17	18	11	22	16	24	18	13	13	15	13	12	16	23	24	7	1	2	0	336
4	0	20	37	22	23	21	15	10	18	15	13	11	11	15	14	12	7	16	13	11	3	0	0	307
5	1	45	38	37	31	20	16	24	27	22	23	22	19	19	17	24	22	24	22	6	3	6	1	469
6	0	73	65	45	42	42	34	35	25	26	28	27	29	17	13	24	29	33	28	13	7	9	0	644
7	0	28	28	21	10	14	14	16	12	11	6	5	6	6	11	11	17	16	22	7	4	3	0	268
8	0	59	44	32	31	31	29	23	23	24	15	23	12	19	29	21	21	26	29	16	9	7	0	523
9	0	51	49	55	39	31	27	28	31	27	25	19	21	25	13	17	20	26	23	9	5	3	0	544
10	0	20	11	16	18	10	6	7	11	5	12	5	10	6	12	16	6	12	12	5	3	2	1	206
<b>Total by Age</b>	<b>1</b>	<b>425</b>	<b>410</b>	<b>349</b>	<b>318</b>	<b>283</b>	<b>225</b>	<b>242</b>	<b>246</b>	<b>230</b>	<b>203</b>	<b>188</b>	<b>178</b>	<b>175</b>	<b>175</b>	<b>195</b>	<b>206</b>	<b>243</b>	<b>231</b>	<b>101</b>	<b>54</b>	<b>46</b>	<b>3</b>	<b>4,727</b>

The table pertaining to the ages of children currently in care presents two errors, thereby demonstrating how these management reports may be used by field supervisors, area directors, program staff and the Office of Community Services to ensure the accurate documentation of children's demographic information in CHRIS. First, one child in Area 5 has a birthdate documented in the SACWIS that gives that child an age of -1, which, of course, is not possible. Next, the ages of only 915 of the 916 children in care in Area 2 are presented in the table, which indicates that there is a problem with the date of birth or other critical field currently documented in CHRIS for the remaining child. This error also impacts the total number of children reflected in the report; this table identifies 4,727 children in custody when, in fact, there were 4,728 as of March 1, 2016 per CHRIS Net. Other than field review and use of the data by DCFS's QA vendor which will flag inconsistencies, DCFS is not aware of a structured process in place to correct them.

Along with demographic information, the SACWIS provides data related to permanency goals and placement settings (children's physical locations) by individual child and jurisdiction. The following are examples of the types of management reports immediately available to CHRIS users (via CHRIS Net) concerning the goals for and placements of children in care:

- *Current Foster Care Children with Last & Next Hearing Dates & Case Plan Goals*
- *Foster Children with Case Plan Goal and Length Of Stay - Filtered by Case Plan Goal - All Counties*
- *Foster Care Children by Latest Placement*
- *Foster Care Clients with Current Placement Type by County*

As of March 1, 2016, these reports demonstrate that goals were documented in CHRIS for 4,409 of the 4,728 children in care (93.25 percent), while the current placement was listed for 4,708 of these children (99.58 percent). One explanation for the difference is not requiring goals to be recorded for children in care less than 60 days. Staff, supervisors and Area Directors can review the reports for accuracy. They can cross-check the validity of placement data by verifying information in the Unpaid Voucher screen monthly during Preview days where each record has to be previewed.

These and similar reports are generated by the user as of a point in time, and the data tables from which these reports are created are refreshed/updated daily to provide users with current information. This information is also amassed by Hornby Zeller Associates, Inc. (HZA), DCFS' quality assurance vendor, at regular intervals for reporting and oversight. For example, this information is reported to the Legislature and Governor's Office on a quarterly and annual basis through the *Quarterly Performance Reports* and *Annual Report Cards*. HZA will flag errors when it sees them and attempt to make adjustments, when feasible, to address them in its analyses. However, DCFS is not aware of a structured process to verify the reports and make corrections when errors are noted.

Arkansas does, however, have management reports available through CHRIS Net which are useful in monitoring the quality of this important information. It is through these reports that the State's success in identifying errors in these data points may be determined. The *AFCARS Foster Care Data Compliance Summary Report* covers the current AFCARS reporting period and is grouped and summarized by Data Element. It describes the degree to which the foster care reporting data to be submitted by the State does not meet the AFCARS standards specified in 45 CFR 1355.40. A parallel report, the *AFCARS Adoption Data Compliance Summary Report*, is also available for the adoption reporting data for the current AFCARS reporting period. Both of these reports indicate that the statewide information system is functioning such that it can readily identify the status, demographic characteristics, location and goals for the placement of every child in foster care. The following tables were developed from these reports and delineate the number and types of errors as well as the percent of records with errors for each pertinent AFCARS Data Element as of March 1, 2016, the first for foster care and the second for adoptions:

**Data Elements re: Item 19 for Current AFCARS Reporting Period - Foster Care**

Data Element	Element Name	Timeliness	Missing	Out Of Range	Consistency	Total Errors	Subject Records	Percent Failing
6	Child's Birth Date	0	0	0	0	0	5870	0
7	Child's Sex	0	0	0	0	0	5870	0
8	Child's Race	0	0	0	0	0	5870	0
9	Child's Hispanic or Latino Origin	0	0	0	0	0	5870	0
41	Current Placement Setting	0	1	0	0	1	5870	0.02
42	Out-Of-State Placement	0	1	0	0	1	5870	0.02
43	Case Plan Goal	0	218	0	0	218	5637	3.87
47	Mother's Date of TPR	0	0	0	37	37	5637	0.66
48	Father's Date of TPR	0	0	0	37	37	5637	0.66

\*Data current as of March 1, 2016

**Data Elements re: Item 19 for Current AFCARS Reporting Period - Adoptions**

Data Element	Element Name	Missing	Out Of Range	Consistency	Total Errors	Subject Records	Percent Failing
5	Child's Birth Date	0	0	0	0	290	0
6	Child's Sex	0	0	0	0	290	0
7	Child's Race	0	0	0	0	290	0
8	Child's Hispanic or Latino Origin	0	0	0	0	290	0
19	Mother's Date of TPR	4	0	0	4	290	1.38
20	Father's Date of TPR	18	0	0	18	290	6.21

\*Data current as of March 1, 2016

CHRIS Net also provides management reports that look at missing information, e.g., AFCARS errors, in individual cases. The *AFCARS Foster Care Error Report – Open and Closed Cases* lists all AFCARS foster care errors for the current reporting period for both open and closed cases by service area, county and primary caseworker. As errors are corrected (if they can be corrected), they are dropped from the report, thereby allowing supervisors and program staff to use these reports as management tools to ensure that the appropriate data is documented within the SACWIS. Another example

involves the *Current Foster Care Children with No Current Open Placement* management report which identifies children currently in foster care with no placement documented in CHRIS. The Office of Community Services monitors this report and emails area directors at least monthly regarding the children from their Areas with no current placements. Each Area has its own process for following up on the email and correcting the data, but most area directors use their area coordinators to follow up with specific county offices, supervisors and caseworkers.

Beyond the State's management reports, the AFCARS Frequency Report Utility provided by the Children's Bureau is useful for assessing Arkansas's success at identifying the required data points for each child in foster care. The utility produces a Frequency Report from the AFCARS data file displaying the number, or frequency, of children's records for each type of response reported for each Data Element. The report also includes what percentage each frequency is of all the actual responses. By reviewing the frequency responses to particular data elements, the degree to which CHRIS captures the status, demographic characteristics, location and goals of children in care may be determined. Applying the Frequency Report Utility to Arkansas's 2015B AFCARS files produced the following:

**Foster Care Element #06: Child's Date of Birth**

-	Frequency	Percentage
Not Reported	0	0.00
Reported	6,069	100.00
Total	6,069	100.00

**Foster Care Element #07: Child's Sex**

-	Frequency	Percentage
Not Reported	0	0.00
Reported	6,069	100.00
Total	6,069	100.00

**Foster Care Element #08a-f: Child's Race**

-	Frequency	Percentage
Not Reported	0	0.00
Reported	6,069	100.00
Total	6,069	100.00

\*Table reflects all races / sub-elements

**Foster Care Element #09: Child's Hispanic Origin**

-	Frequency	Percentage
Not Reported	0	0.00
Reported	6,069	100.00
Total	6,069	100.00

**Foster Care Element #41: Current Placement Setting**

-	Frequency	Percentage
Not Reported	2	0.03
Reported	6,067	99.97
Total	6,069	100.00

**Foster Care Element #42: Placement Out of State**

-	Frequency	Percentage
Not Reported	2	0.03
Reported	6,067	99.97
Total	6,069	100.00

**Foster Care Element #43: Most Recent Case Plan Goal**

-	Frequency	Percentage
Not Reported	56	0.92
Reported	6,013	99.08
Total	6,069	100.00

**Conclusion**

The results from the AFCARS Frequency Utility support the data presented from the CHRIS Net management reports. Based on all of the aforementioned information and analysis, Arkansas assesses the functioning of the systemic factor related to the Statewide Information System (Item 19) to be a **Strength** overall. CHRIS is a fully longitudinal database that permits the tracking of all children from the time they enter the child welfare system through the time they leave the system and all related casework activities statewide. The timeliness of data entry is addressed by DCFS's QA vendor which sends email reminders to the field on the 7<sup>th</sup> day of each month to complete all data entry for the prior month. Arkansas can readily identify the status, demographic characteristics, location and goals for the placement of every child who is (or has been within the immediately preceding twelve months) in foster care, and its SACWIS far exceeds the minimum functioning required for Item 19.

## B. Case Review System

### 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:

As described in Section III, the SFY 2015 and prior QSPRs, Arkansas's qualitative case reviews, utilized the CFSR onsite review instrument (OSRI) from rounds 1 and 2. In examining the state's performance on Item 18, Child and Family Involvement in Case Planning, the SFY 2015 QSPR revealed that children and/or their parents were excluded from the case planning process in 109 of the 287 applicable cases (38 percent). During SFY 2015, caseworkers were most successful at engaging mothers in case planning in the reviewed cases, while fathers were the family members least likely to be engaged in case planning. The degree to which specific participant types were engaged is outlined in the following table.

**SFY 2015 QSPR: Engagement in Case Planning by Family Member**

-	<i>Mothers</i>	<i>Fathers</i>
Applicable Cases (N)	241	154
Cases w/ Strength Rating	165	84
<b><i>Proportion Achieved</i></b>	<b>68%</b>	<b>55%</b>

It is important to note that, during SFY 2015 and in prior years, each service area's score was weighted (proportional to its foster care caseload) in the calculation of the statewide scores to account for the differing client population sizes across the Areas. Subsequently, the statewide scores reflect that Arkansas achieved substantial conformity on the case planning measure in only 57 percent of the cases reviewed during SFY 2015. The succeeding table identifies Arkansas's performance on Item 18 between the Round 2 CFSR in 2008 and the SFY 2015 QSPR.

	SFY 2015	SFY 2014	SFY 2013	SFY 2012	SFY 2011	SFY 2010	2008 CFSR
Item 18: Child & Family Involvement in Case Planning (N=287)	57%	64%	61%	53%	49%	53%	31%

Arkansas's SFY 2015 QSPR data is of sound quality and is representative of the entire state. As described in Section III, the QSPRs constitute DCFS' qualitative case review process, so the ratings for these elements are based on more than just documentation within the SACWIS. Parents are interviewed as part of the review process, thereby capturing the degree to which they felt genuinely engaged in case planning. Furthermore, cases were selected at random for the review, and 73 of Arkansas's 75 counties were reviewed in 2015, which contributes to the representativeness of the data and its quality.

Beginning with the SFY 2016 QSPR, DCFS adopted the Round 3 OSRI and applied to and gained approval from the Children's Bureau for the state-led CFSR. As previously discussed, 15 cases, including nine foster care and six in-home cases, are now reviewed from each service area. In adopting the new tool and preparing for the CFSR, the QSPRs also moved from an annual to a six-month review cycle. Two additional months were added to the SFY 2016 review cycle to allow for training/preparation to facilitate a successful implementation of the new review tool.

QSPRs had been conducted in six of the ten service areas by the end of the second quarter of SFY 2016 (December 31, 2015). Consistent with the sampling plan, 90 cases were reviewed from those six service areas, and 88 of those cases were applicable with regard to Item 13, Child and Family Involvement in Case Planning. Forty-four of the 88 applicable cases (50 percent) evidenced sufficient efforts to involve the families in the case planning process. Consistent with the 2015 QSPR (and previous year's reviews), mothers were the family members most involved in the case planning process, while fathers were the family members least engaged in case decision-making. The following table delineates the extent to which parents were involved in case planning.

**SFY 2016 QSPR: Engagement in Case Planning by Family Member**

	<i>Mothers</i>	<i>Fathers</i>
Applicable Cases (N)	64	47
Cases w/ Strength Rating	42	23
<b><i>Proportion Achieved</i></b>	<b>66%</b>	<b>49%</b>

After three consecutive years of gains, Arkansas's performance dropped on the case planning measure during SFY 2015, and the case reviews conducted thus far during

SFY 2016 have evinced continued problems. Inconsistent contact between caseworkers and clients prevented meaningful family engagement in many of the deficient cases. In other cases, particular family members are engaged in case planning while others were excluded. Again, fathers were the family members least involved in case planning.

As described within the systemic factor pertaining to the Quality Assurance System (Item 25), DCFS' QSPR process is now even more robust given the additional level of oversight and the increase in the types of and circumstances around the cases eligible for review. However, because the data presented for SFY 2016 only represents six of the ten service areas, it is not as representative as the SFY 2015 QSPR data. These queries need to be rerun once the statewide performance information is available.

### *Stakeholder Input*

While stakeholders noted several promising practices in terms of developing case plans, more work is needed to include families in case planning. Caseworkers and supervisors noted improvement in completing case plans with families, while stakeholders from the legal community (OCC attorneys, attorneys ad litem and CASA volunteers) noted that several counties have been successful in including parents; however, other counties have not. Staff at all levels agree that the case plans are more appropriate when parents are involved.

Implementation of the CANS/FAST functional assessments have been helpful in improving case plans, making case plans less "cookie cutter" in style, although it does take staff longer to complete the case plans.

The general consensus among all stakeholders is that high caseloads are prohibiting staff from including families in the case planning process on an ongoing basis. The 30 day timeframe in which to complete the initial case plan prior to going to court factors in on the quality of the assessment, enabling workers to do just the bare minimum. DCFS stakeholders did voice frustration that there are judges who dictate what is to go into the case plan and what families are to do; however, those orders are made without input received from the families.

Staff did note that the 20-day report in CHRIS, which notifies them of case plans coming due, has been helpful. It is valuable to identify what is coming due, not just what is overdue.

### **Conclusion**

Based on the aforementioned data and information, Arkansas finds that the case review system is not functioning consistently well across the state with regard to engaging parents in the case planning process. The State believes Item 20 to be an **Area**



**Needing Improvement.** DCFS must work to ensure the involvement and participation of all family members in every aspect of case planning for all case types. Such family engagement will help to ensure that services are tailored to best address each family member's strengths and needs and that the Agency is only involved with the family for the shortest amount of time needed to accomplish the case goals.

**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:**

The Adoption and Safe Families Act (ASFA) of 1997 (P.L. 105-89) amended title IV-E of the Social Security Act to provide added safety and permanency for children in out-of-home care. ASFA requires that the status of each child in out-of-home care be reviewed at least once every 6 months by either a court or an administrative review [42 U.S.C. § 675(5)(B)]. Such periodic reviews must determine the child's safety; review the continuing need for foster care; and determine compliance with case plan and progress made towards alleviating or mitigating the causes necessitating placement in foster care.

Correspondingly, Arkansas statute (A.C.A. § 9-27-337) requires that review hearings be held at least every six months until there is a permanent order of custody, guardianship, or adoption or the juvenile is returned home and family services are discontinued pursuant to court order. Arkansas Code provides that the court shall determine and shall include in its orders the following:

- Whether the case plan, services, and placement meet the special needs and best interest of the juvenile, with the juvenile's health, safety, and educational needs specifically addressed;
- Whether the state has made reasonable efforts to provide family services;
- Whether the case plan is moving towards an appropriate permanency plan pursuant to 9-27-338 for the juvenile; and
- Whether the visitation plan is appropriate for the juvenile, the parent or parents, and any siblings, if separated.

In making its findings, the court shall consider the following:

- The extent of compliance with the case plan, including, but not limited to, a review of the department's care for the health, safety, and education of the juvenile while he or she has been in an out-of-home placement;
- The extent of progress that has been made toward alleviating or mitigating the causes of the out-of-home placement;
- Whether the juvenile should be returned to his or her parent or parents and whether or not the juvenile's health and safety can be protected by his or her parent or parents if returned home; and

- An appropriate permanency plan pursuant to 9-27-338 for the juvenile, including concurrent planning.

In complying with both ASFA and Arkansas Code, DCFS Policy VI-G stipulates “The court will review out-of-home placement cases no less than every six months, including children in out-of-home cases who are placed out-of-state. The first six month review shall be held no later than six months from the date of the original out-of-home placement of the child. However, the court may require a review prior to the six month review hearing. In addition, at any time during the life of an out-of-home placement case, any party may request the court to review the case, and the party requesting the hearing shall provide reasonable notice to all parties.”

Data used by Arkansas’s Administrative Office of the Courts (AOC) to track hearings shows that review hearings were held within six months of case opening for 90 percent of the cases opening during the first half of Federal Fiscal Year (FFY 2015). An additional seven percent of the review hearings during this period were held within nine months. Of the cases that remained open for more than a year, periodic reviews were held, on average, every three months. AOC’s data was pulled from DNet, its web-based information system used by attorneys and courts across the state. DNET receives information from and shares data with CHRIS.

### *Stakeholder Input*

During the focus groups with DCFS supervisors, caseworkers, and attorneys and Court Appointed Special Advocates, there was overwhelming consensus amongst the stakeholders that periodic reviews occur regularly and include the required provisions. , Frequent and timely court reviews were considered to be a strength of Arkansas’s case review system. Confirming the evidence found in AOC’s data files, stakeholders noted that most cases are reviewed every three months, and if things are going well, then every six months. In some areas, the judge schedules reviews for five months to give leeway in ensuring they occur every six months. Group members agreed that the attorneys within the Office of Chief Counsel (OCC) do a good job in monitoring their assigned cases to ensure that review hearings occur timely. Some barriers identified were that occasionally cases are docketed for a certain date, but sometimes get continued because the judges do not have time to hear all the cases scheduled for a given day.

### **Conclusion**

Based on the aforementioned quantitative and qualitative data, and the consistency between the two, Arkansas finds that the case review system is functioning well statewide to ensure that periodic reviews occur at least every six months for children in care. The State concludes that Item 21 is a **Strength**.

**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:**

The Adoption and Safe Families Act requires that a permanency planning hearing (PPH) be held within twelve months of the date a child enters foster care, and then every twelve months thereafter, to review and approve the permanency plan for the child. Additionally, under ASFA, permanency planning hearings must, for children who have attained age 16, determine the services needed to assist the child to make the transition from foster care to independent living and consult with the child in an age appropriate manner regarding their proposed permanency or transition plan.

Similarly, Arkansas Code (§ 9-27-338) provides that a permanency planning hearing shall be held to finalize a permanency plan for juveniles twelve months after the date the juvenile enters an out-of-home placement and after a juvenile has been in an out-of-home placement for 15 of the previous 22 months, excluding trial placements and time on runaway status, as well as no later than 30 days after a hearing granting no reunification services. Further, if a juvenile remains in an out-of-home placement after the initial permanency planning hearing, a PPH shall be held annually to reassess the permanency plan selected for the juvenile. At every permanency planning hearing, the court shall make a finding on whether the department has made reasonable efforts and shall describe the efforts to finalize a permanency plan for the juvenile.

In accordance with Federal and State law, DCFS Policy VI-G stipulates “Each child in an out-of-home placement, including children out-of-state, shall have a permanency planning hearing no later than 12 months of the date the child is considered to have entered foster care and not less than every 12 months thereafter during the continuation of foster care. A child will be considered to have entered foster care on the earlier of: the date of the first judicial finding that the child has been subjected to child abuse or neglect, or the date that is 60 days after the date on which the child is removed from the home.”

“The Division must obtain a judicial determination that reasonable efforts were made to finalize the permanency plan for the child no later than 12 months of the date the child entered foster care. If a child remains in an out-of-home placement after the initial

permanency planning hearing, an annual permanency planning hearing shall be held to reassess the permanency goal selected for the child.”

The data from DNet covering the first two quarters of FFY 2015 revealed that 77 percent of permanency planning hearings were held within twelve months of case opening. Of cases that remain open for more than a year, on average a permanency planning hearing was held every eight to nine months.

### *Stakeholder Input*

Feedback and information collected during stakeholder focus groups held throughout the state reflect the effectiveness of the case review system in ensuring that each child has a permanency hearing within twelve months of entry into foster care, and no less frequently than every twelve months thereafter. Stakeholders report that communication and diligent monitoring of time-frames between DCFS staff, attorneys and judges result in the majority of permanency hearings being scheduled and held timely, especially initial permanency hearings. Many judges set the date for the first permanency hearing in court at the adjudication, when needed, and explain the process and time line to the parties involved. Regarding permanency hearings not held timely, stakeholders cite overcrowded dockets forcing scheduled hearings to be continued as the primary cause; this happens most often in situations where the parents are no longer participating and there is no perceived harm in delaying. Arkansas will capitalize on this area of strength by emphasizing with all stakeholders the importance of timely legal permanency for all children.

### **Conclusion**

Although the quantitative data referenced above demonstrates that some initial permanency planning hearings are not being held within the required timeframes, the qualitative data collected through stakeholder interviews conducted across the state suggests that such issues are isolated to specific jurisdictions and not reflective of the case review system’s functioning statewide. However, given the incongruence between the data types, further information is needed to accurately assess the functioning of the case review system with regard to holding PPHs within the timeframes required by law.

CHRIS does not capture sufficient data for use in evaluating the degree to which specific hearings are held within the required timeframes. The Office of Chief Counsel maintains a point-in-time database that captures only a limited number of historical hearings, but the initial PPH is one such historical hearing that is documented in OCC’s database. However, because of significant turnover amongst attorneys and legal support staff, several areas have data that is not updated in the database. Subsequently, OCC opted to not share any information for the CFSR out of concern that the incomplete data would not provide an accurate assessment of the case review system and could misrepresent the effectiveness of their office.

**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:**

Consistent with the Adoption and Safe Families Act and state law (A.C.A. § 9-27-341), DCFS must pursue termination of parental rights when a child has been in foster care for at least 15 of the most recent 22 months or the court has determined that the child is an abandoned infant or that the child's parent(s) have been convicted of one of the felonies designated in Section 475(5)(E) of the Social Security Act, including murder, voluntary manslaughter or felony assault that led to serious bodily injury against any of his/her children. Both ASFA and Arkansas Statute provide exceptions to these requirements if the child is being cared for by a relative; the agency documents a compelling reason why the filing would not be in the child's best interest; or, in any case where reasonable efforts are required, the State has not provided the family with those services needed for the safe return of the child. Concurrent with the termination process, the state must identify, recruit, process, and approve a qualified family to adopt the child.

The SFY 2015 QSPR, which utilized the Round 2 OSRI, evidenced sound functioning within Arkansas's case review system around the filing of TPR proceedings. Ninety-four (94) of the 150 children in the reviewed foster care cases had been in care for at least 15 of the most recent 22 months at the time of the QSPR. Four additional children met other ASFA requirements for TPR. DCFS filed or joined a TPR petition within the required timeframes for 53 of these children. Further, an exception to the termination requirement existed for 38 of the 45 children for whom a TPR petition was not filed. In total, the reviewers found that the filing of termination proceedings occurred in accordance with required provisions for 91 of the 98 applicable children (93 percent).

The findings from the QSPRs conducted during the first two quarters of SFY 2016 (the first review to use the Round 3 OSRI) demonstrate consistent strong practices around pursuing TPR. Reviews had been conducted in six of ten service areas as of December 31, 2015, involving 54 foster children. Item 5, Permanency Goal for Child, was not assessed for three of these children because of circumstances specific to their cases (short-term foster care). Twenty-one of the 51 children in the applicable foster care cases had been in care for at least 15 of the most recent 22 months at the time of the review, and two additional children met other ASFA requirements for termination. TPR petitions were filed within the required timeframes for 17 of these children, while exceptions existed for four of the six children for whom TPR proceedings were not pursued. Consistent with SFY 2015 and previous years, the filing of termination

proceedings occurred in accordance with the required provisions for 21 of the 23 applicable children (91 percent).

### *Stakeholder Input*

The stakeholder input obtained through the focus groups conducted across the state corroborates the findings from the qualitative case reviews and substantiates that, on the whole, the case review system works effectively to ensure the timely filing of TPR proceedings in accordance with federal statute. Feedback on timely filings was positive in most Areas. However, stakeholders in one particular region of the state indicated challenges in one or two counties around the filing of termination proceedings, noting the influence of systemic issues such as high OCC attorney turnover and heavy caseloads as barriers. Focus group participants from this region reported that one specific OCC attorney's TPR Petition filings are sometimes overdue (some by a year or more) and the required service to parents cannot or has not been accomplished for some petitions that have been filed. Leadership from another area of the state reported issues with OCC attorneys not filing TPR petitions when requested by DCFS staff. It was stated that there have been instances where a petition has been pending for months, and Parent Counsel successfully argues it is no longer valid and should be dismissed and re-filed. The OCC attorneys in the Area have since failed to re-file such requested petitions, resulting in children lingering in care.

### **Conclusion**

Although a few stakeholders described issues around the timeliness in which some TPR petitions are filed, these appear to be more isolated incidents in specific jurisdictions than a systemic issue across the state. Further, many of the concerns involving termination of parental rights that were discussed in various focus group sessions centered on the timeliness in which TPR hearings were held (e.g., because of continuances) and not on the filing of the petitions. Based on the findings from the QSPRs and the feedback from stakeholders across the state, Arkansas believes that the case review system is functioning well statewide to ensure that the filing of termination of parental rights proceedings occurs in accordance with the law / required provisions. Subsequently, the State assesses Item 23 to be a **Strength**.

Even so, Arkansas recognizes the need to strengthen its data collection and monitoring around this element. OCC captures data pertaining to TPR within its internal database, such as the dates petitions to terminate parental rights are filed with the clerks, the dates on which the parents are served with TPR Petitions, the dates TPR Hearings are held and whether or not TPR is granted by the courts. However, because of the issues described within Item 22 around attorney and legal support turnover, OCC was concerned that some of this data is likely incomplete, so their office chose not to share any information for the CFSR so as to not misrepresent their practice. The OCC management team works in constant partnership with their supervising and field attorneys and, through those collaborations, stresses the importance of timely, accurate

data input. Therefore, as OCC is able to stabilize its workforce, it is probable that the completeness of their data will improve.



**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, pre-adoptive 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:**

DCFS policy states that the Department shall provide the foster parent(s) of a child, and any pre-adoptive parent(s) or relative caregiver(s) notice of any proceeding held with respect to the child and the opportunity to be heard. The method of notification varies across DCFS county offices depending upon what has proven most effective for a particular community and the practices of the local judge.

In recognizing the need to further monitor its practices around providing notice to caregivers, DCFS worked with the CHRIS team in SFY 2015 to develop a SACWIS enhancement that would allow staff to document when notice is given. CHRIS Release 22.2 on June 30, 2015 provided a new value of 'Notification of Court Hearing to Foster Parent(s)/Pre-Adoptive Parent(s)/Relative caregiver(s)' to the 'Purpose' pick list on the Case Contact screen. Although this enhancement was messaged to field staff, currently it is not being used consistently to document when notice is given to caregivers.

Since its implementation within Arkansas's SACWIS, the new contact purpose has been used just 27 times, in 23 unique cases. The contact purpose has been used twice in four cases, with two of those cases having notifications issued on the same date (for two separate individuals), while the two remaining cases had the contact purposes issued for two separate dates (i.e., two separate hearings). The Notification of Hearing contact purpose has only been used four times during Calendar Year 2016; most of the remaining contacts listing the new purpose were documented between July and October 2015.

*Stakeholder Input*

Although DCFS does not have quantitative data to track adherence for the notification requirement, feedback gathered from the stakeholder focus groups conducted across the state provided the following information. Family Service Workers in most counties provide notice by calling or texting the foster parent(s), pre-adoptive parent(s) or caregiver(s), and also remind them in person of upcoming court dates during home visits; a few counties rely on the attorney ad litem (AAL) or CASA (Court Appointed Special Advocates) volunteers to remind caregiver(s) of upcoming hearings.

It is occasionally difficult to get notice of continuations or docket changes to foster parent(s), pre-adoptive parent(s) and caregiver(s) when changes happen at the last minute; this is frustrating for caregiver(s) who have taken off work to attend.

Area Directors, front-line workers and other key stakeholders report no major issues notifying foster parent(s), pre-adoptive parent(s) and relative caregiver(s) of any reviews or hearings, aside from last-minute continuations or unforeseeable delays. The Division utilizes a variety of methods to ensure notification, and stakeholders interviewed indicated they were generally aware of upcoming proceedings and felt comfortable contacting the Department or AALs to inquire about or confirm attendance at reviews or hearings.

Ongoing CQI and feedback from focus groups further highlights that most foster parent(s) and caregiver(s) across the state routinely attend hearings and are given an opportunity in court to give updates and report concerns regarding the children in their care. Stakeholders also noted that the majority of judges announce upcoming hearing dates in court and include the information in the court order, and will inquire of the Department if/how a foster parent or caregiver was given notice and their reason for not attending if none are present at a hearing. In instances where a foster parent or relative caregiver cannot attend, the attorney ad litem most often provides the court a status update and raises any issues or concerns to be addressed on behalf of the caregivers.

## **Conclusion**

Overall, the case review system is functioning well regarding notice of hearings and reviews and right to be heard for foster parents, pre-adoptive parents and relative caregivers, indicating this is an area of **Strength** for Arkansas. DCFS will continue to message to staff the importance of documenting when notice is given to caregivers and will continue to meet with foster parents, adoptive parents and relative caregivers to ensure that they are notified of, and have a right to be heard in, any hearing held with respect children placed with them.

## 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:

DCFS' Quality Assurance (QA) and Continuous Quality Improvement (CQI) systems and processes are explained in detail on pages 83 through 95 of Arkansas's 2015 Annual Progress and Services Report, so the information contained here within Item 25 of the Statewide Assessment is intended to supplement and clarify that information, as needed, to fully assess the functioning of the systemic factor pertaining to the State's Quality Assurance System.

As described on p. 83 of Arkansas's 2015 APSR, DCFS believes that CQI processes should support the child welfare agency's values, vision and mission through ongoing data and information collection and analysis and the regular use of CQI results is imperative to make decisions, improve practice, share information with stakeholders and achieve better outcomes for children and families. Since the state's Round 2 CFSR in 2008, DCFS has worked to implement a fully functional CQI system to build upon strengths and address deficiencies at every level within Arkansas's child welfare system.

The Foundational Administrative Structure of DCFS' CQI System is outlined on pages 83 through 85 of the 2015 APSR, including how the Division ensures that the system is applied consistently and functions effectively across the state. As described in the APSR, the CQI System is functioning in all of Arkansas's 75 counties and, therefore, is operated in all of the jurisdictions where the services included in the State's CFSP are provided.

The Quality Data Collection (pp. 85-89), Case Record Review Data and Process (pp. 89-91) and Analysis and Dissemination of Quality Data (pp. 91-95) sections of the 2015 APSR summarize how the system 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); identifies strengths and needs of the service delivery system; provides relevant reports; and evaluates implemented program improvement measures. However, DCFS is continually working to enhance its CQI

System, so further discussion of recent developments within the system is needed to fully characterize the statewide functioning of the systemic factor requirements.

### *Quality Services Peer Reviews*

The most significant changes to Arkansas's CQI System since the publishing of the 2015 APSR involve the Quality Services Peer Reviews, DCFS' qualitative case record review process. Arkansas's QSPR process utilizes the federal Child and Family Services Reviews Onsite Review Instrument (OSRI). Prior to State Fiscal Year 2016, DCFS employed the OSRI used in the first two rounds of CFSRs, but the Division adopted the Round 3 OSRI for use in the QSPR process beginning July 1, 2015. Arkansas uses the CFSR OSRI in its QSPR process to ensure that the standards against which the State measures its practices and services are consistent with those utilized by the Children's Bureau.

In its efforts to build and institutionalize capacity consistent with the Children's Bureau's CQI Information Memorandum, ACYF-CB-IM-12-07, Arkansas applied and received approval to use the QSPR process to conduct its own case reviews for the Round 3 CFSR (in lieu of the traditional onsite review process). Since the case reviews conducted as part of the CFSR have to be completed within a six-month period, the QSPR process was transitioned from an annual to a six-month review schedule. CFSR Technical Bulletin #7 (March 2014) provides that the foster care sampling period must coincide with the six month AFCARS submission period immediately following the data profile period, while the in-home case sampling period will extend an additional 45 days beyond the foster care sampling period. However, to ensure that the reviews are focused on recent case practices, Arkansas proposed to and received approval from the Children's Bureau to use a rolling monthly sampling approach. Accordingly, the State now pulls the sample for each month of the review period, with the sample period advancing one month for each month of the six-month period.

In addition to adopting the new review tool and changing the sampling periods, DCFS also adjusted the sampling frames and case selection processes. The universe of cases from which the foster care samples are selected now include all children for whom the agency had placement and care responsibility and who were considered to be in foster care on the basis of AFCARS reporting requirements for at least 24 hours during the sampling period. The sampling frame for the in-home services cases now encompasses all cases (Protective Services cases and Differential Response referrals) opened for services for at least 45 consecutive days during the sampling period and in which no children in the family were in foster care for 24 hours or longer during any portion of the review period. With regard to case selection,

DCFS selects a stratified, random sample of 150 cases from each universe, which is comprised of 90 foster care cases and 60 in-home cases. Fifteen cases (nine foster care and six in-home cases) are drawn from each of the Division's ten geographic service areas, to ensure that the sample is made up of a cross-section of the child welfare system, including the largest metropolitan area and other counties of varying

sizes, that is representative of the state's demographics. The 15 cases are pulled from three counties within the service area; the counties to contribute cases are chosen at random from the sampling frame for the entire Area. Arkansas does not use pre-established ratios in determining the number of cases to be reviewed from each selected county. Instead, the number of cases reviewed per county varies depending on the random case pull. Using simple random sampling facilitates a proportional, representative sample.

The QSPR process continues to involve an examination of the electronic and physical case records combined with interviews with children, families and all pertinent stakeholders, e.g., caseworkers/supervisors, foster parents, service providers, etc. However, DCFS has enhanced the quality assurance activities involved with the reviews to further strengthen the process. These QA activities are now interwoven throughout the case review process to ensure fidelity to the methodology, the integrity of the instruments and information contained therein and the accuracy of the ratings. All reviewed cases must undergo two levels of quality assurance. The initial, or first-level, QA ensures that reviewers are accurately rating cases and properly applying the federal instructions within the OSRI. The secondary, or second-level, QA ensures consistency among all cases reviewed across reviewers and throughout all service areas within the state.

Both levels of quality assurance use a collaborative approach and place shared responsibility on both the reviewer and QA staff. Reviewers gather and reconcile the information needed to answer the relevant questions using the guidance within, and supplemental to, the instrument and the support and guidance of the quality assurance team. QA staff assist in all phases of the review, from the preparation of the case for the review through the completion of the instrument, by answering questions, working with reviewers on clarifying issues and assisting reviewers in evaluating/reconciling information to arrive at appropriate case ratings. Secondary oversight is conducted on all reviewed cases once the first-level QA and OSRI are completed. The second-level QA is conducted by a QA staff person other than the individual assigned to the first-level QA, as relying on more than one individual to verify case review instrument information and ratings helps to ensure inter-rater reliability and accurate conclusions. The focus of secondary oversight is to ensure consistency across the review sites and all reviewers.

Once all of the cases in the sample have been reviewed, finalized and gone through both levels of QA, the findings for the service area's performance on each of the measures will be compiled and analyzed. A QSPR Synopsis will then be drafted to convey the results to both Area and State staff. The scores for each measure are outlined in the reports, while the discussion in these reports focus on the most prominent and significant strengths and areas needing improvement identified during the reviews. Each Area is encouraged to develop a practice improvement plan relating to the two issues on which the Area scored lowest, unless the Area passed all issues.

Additionally, the CQI Manager along with the Quality Assurance and the Child Protective Services Managers facilitate meetings between the DCFS Director, Assistant

Director of Community Services and other key members of the Division's executive team and the area directors and all supervisors from each service area following their review to discuss the findings. Not only are findings described in their QSPR Synopsis reviewed, but also two other reports DCFS uses to assess performance, namely the Meta-Analysis and investigative reviews reports. Discussions include strengths, challenges, trends, innovative practices and problem solving. This provides a comprehensive, area-wide examination focused on using data for continuous quality improvement, which is consistent with federal regulations and the quality casework practices embodied in DCFS' practice model.

The Service Quality and Practice Improvement (SQPI) Unit also issues a Statewide QSPR Performance Report outlining Arkansas's performance following the review of the entire state each year. These reports combine the results of each service areas' reviews, 150 case reviews statewide, to provide an overall summary of the child welfare system's performance pertaining to the goals of safety, permanency and well-being for children receiving services.

### *Data-Based Decision-Making*

Arkansas has fully embraced the Child and Family Services Reviews as an effective means by which to evaluate the state's effectiveness in working to improve the safety, permanency and well-being outcomes and experiences of children and families. Arkansas's first CFSR took place in 2001, while the second round occurred in 2008. The Round 2 CFSR served as a springboard for DCFS' transformational efforts. Arkansas internalized key learning from the statewide assessment and on-site reviews and began to implement immediate and long-term strategies to cultivate positive outcomes for the children and families served by the child welfare system.

The findings from the 2008 CFSR underscored Arkansas's need to develop a more family-centered child welfare system focused on improving safety, permanency and well-being outcomes. To reach the goal of a more effective child welfare system, DCFS established and implemented a Program Improvement Plan (PIP) with four broad strategies aimed at achieving behavioral change and ultimately improving outcomes for children and families, including:

1. Build and implement a comprehensive practice model to guide the work of the field and central office supports.
2. Design and implement communication, professional development, and change management strategies.
3. Grow the State's service array (with attention to the variety and effectiveness of procured services as well as the types of services and supports provided through community partnerships).
4. Enhance the State's quality assurance mechanisms to become a more effective system regarding results monitoring and practice improvement.

The Division implemented its Program Improvement Plan in FFY 2009 and utilized the Quality Services Peer Review process to monitor its progress. During implementation of the PIP, DCFS was challenged by a lack of skilled workers, effective and timely services; high caseloads; turnover; and limited community awareness and support. While all of these elements continue to be daily struggles, the Division has made significant strides forward, as demonstrated by its progress on the CFSR measures.

At the center of DCFS' transformational efforts are its movement towards data-based decision making at every level of the organization. While the QSPRs are a key component of the Division's CQI system, DCFS has worked to incorporate the use of multiple data sources into the decisions of its frontline staff, supervisors, area directors, program managers and executive staff in order to improve the effectiveness of agency interventions and, thereby, outcomes for children and families.

The 2008 CFSR revealed that Arkansas had one of the highest placement rates, i.e., proportion of children who enter foster care, in the country. The CFSR also highlighted inconsistent practices across the state around risk and safety assessments and management (i.e., efforts to mitigate identified concerns). In an effort to enhance critical thinking skills and processes related to child maltreatment assessments, DCFS implemented Structured Decision Making (SDM) in the spring of 2010. SDM is a well-structured, evidence-informed framework for making decisions involving child protection. The model requires the gathering of sufficient investigative material and other information needed for informed decision-making; safety, risk and protective factors must be considered when making child welfare decisions. SDM provides that children should only be removed from their homes when it is necessary to ensure their safety.

Beyond case-level decisions, DCFS expanded data-based decision-making amongst its leadership following the Round 2 CFSR. Despite completing the formal PIP process in June 2011, DCFS continued to employ strategic planning and performance monitoring to fully implement its family-centered practice model. Managing by data led the Division to apply and gain approval for the Title IV-E Waiver Demonstration Project. Through the flexibility in funding granted by the Waiver, DCFS has implemented six evidence-based interventions, including:

- Nurturing the Families of Arkansas (NFA) – Nurturing Parenting Program model
- Child and Adolescent Needs and Strengths (CANS) and Family Advocacy and Support Tool (FAST) functional assessments
- Team Decision Making (TDM)
- Differential Response (DR)
- Permanency Round Tables (PRT)
- Arkansas's Creating Connections for Children (ARCCC) Program – approach to foster family recruitment and retention based on the Annie E. Casey Foundation's Family to Family model

As outlined in its IV-E Waiver Demonstration Project proposal, Arkansas believes that these interventions will help the state to achieve the following statutory goals:

1. Prevent child abuse and neglect and the re-entry of infants, children, and youth into foster care.
2. Increase positive outcomes for infants, children, youth, and families in their homes and communities, including tribal communities, and improve the safety and well-being of infants, children, and youth.
3. Increase permanency for all infants, children, and youth by reducing their time in foster placements when possible and promoting a successful transition to adulthood for older youth.

Arkansas's IV-E Waiver is explained in greater detail on pp. 95 through 123 of the 2015 APSR. DCFS' Waiver Core Team, the decision-making authority for the Waiver, continually monitors program implementation and evaluation data and makes changes as needed. The Interim Evaluation Report will be published by March 31, 2016 and will serve to measure the functioning and effectiveness of each of the six interventions, as it represents the midpoint of the five-year demonstration project.

#### *Stakeholder Input*

The aforementioned information (and that outlined in the referenced documents) provides that the specified quality assurance requirements are occurring statewide. However, to be sure, DCFS broached the effectiveness of its Quality Assurance System with its stakeholders through the CFSR focus groups conducted in February and March 2016. Information gathered from stakeholders throughout the state pointed out the strengths of Arkansas's QA System. Overall, the QA reports are described as helpful in determining problem areas, as well as tracking progress. Stakeholders said that the reports are typically given to supervisors and then important information is handed down. Meetings are also held to explain what is shown in the reports, addressing any issues and needed improvement with staff. These meetings received good reviews from staff and service providers, who described them as beneficial and informative.

However, despite these strongpoints, the focus group interviews also identified areas of opportunity within the QA System. External stakeholders mentioned that they generally have limited access to the reports and expressed a desire to have increased exposure to QA data. Staff and service providers both stated that there is limited means to track desired improvement. Supervisors and service providers also mentioned that some of the data they receive are focused at the state rather than local level, and big towns skew the data for the more rural areas which may paint the wrong picture when determining what changes are needed to improve practice.

The DCFS area directors (ADs) expressed frustration at different times with reports generated from CHRIS Net, mentioning lack of format consistency across reports, inability to customize reports to be area-specific or county-specific, and lack of communication regarding why and when reports are inaccessible. Several ADs also



expressed concern with the new QSPR sampling process, particularly that only three counties per area are now reviewed versus all counties in the previous methodology. Some service areas of the state encompass as many as nine counties, and the area directors feel that 15 cases, most of which are selected from larger counties with higher staff turnover, won't accurately reflect the performance of the entire Area. This may lead to morale issues as it is discouraging for stable counties when larger, troubled counties generate a poor review for the entire Area. The ADs all desire a review of each county but understand the disparity of populations and time constraints.

## **Conclusion**

Even with the identified opportunities for continued improvement, Arkansas believes that the Quality Assurance System is, by and large, functioning effectively across the state. Subsequently, DCFS assesses Item 25 to be a **Strength**. Still, the Division will continue to work to improve the effectiveness of its management reports and the extent to which they are shared with its external stakeholders. Additionally, although DCFS must maintain fidelity to the current QSPR sampling methodology and review process through the end of the Round 3 CFSR PIP process, the Service Quality and Practice Improvement Unit will work with the area directors to supplement the reviews during the second six-month period of each fiscal year to fully meet their needs with regard to continuous quality improvement.

## D. Staff and Provider Training

### 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:

In regard to initial training for staff who deliver services pursuant to the CFSP, the vast majority of these staff successfully complete the required initial training hours. However, as noted in several focus groups, there is some debate as to whether the staff members begin the initial training within an acceptable time period and whether the content of the initial trainings adequately prepares employees for their specific job duties.

Amongst the provider community, staff at placement providers appeared to be trained more consistently than the other applicable stakeholders who were interviewed. Most placement providers indicated that their staff must complete a specific amount of training before working with clients and that their training is both general and specific to profession. These providers generally believed or appeared to believe that their training programs are adequate. Initial training hours for therapeutic foster care agencies and their foster parents as well as placement provider staff are governed by Minimum Licensing Standards for Child Welfare Agencies, which are overseen by the Child Welfare Agency Review Board.

For Division of Children and Family Services staff, as referenced on page 20 of the State Fiscal Year (SFY) 2015 Training Plan, by the end of June 2015, approximately 95% of the 258 Family Service Workers (FSWs) who had been hired since July 1, 2014 and were still with the agency had either completed New Staff Training (NST), were currently participating in NST, or were registered to start a NST beginning in July 2015. Those who had not yet completed training or were not yet registered were on a waiting list for the next NST in their area. Summary descriptions of the DCFS New Staff Training can be found on pages 2 and 19 of the SFY 2015 Training Plan.

Also as included in the SFY 2015 Training Plan, 100% of Supervisors hired during the same time period had completed New Supervisor Training. Finally, roughly 96% of Program Assistants (PAs) hired since July 1, 2014 and who were still with the agency had completed or were currently participating in new PA training as of June 30, 2015. Pages 19 and 20 of the SFY 2015 Training Plan provide a brief overview of the required in-service trainings for DCFS New Supervisors and New Program Assistants.

For a more recent perspective of DCFS initial staff training, during the first two quarters of SFY 2016, the following number of staff members who were hired between July 1, 2015 and December 31, 2015 also completed the following required trainings for their respective positions:

- 101 FSWs were hired and 98 FSWs completed New Staff Training
- 20 Supervisors were hired or promoted and 12 Supervisors completed New Supervisor Training (a new Supervisor Training is scheduled to begin in mid-April 2016)
- 35 Program Assistants were hired and 27 Program Assistants completed New PA Training.

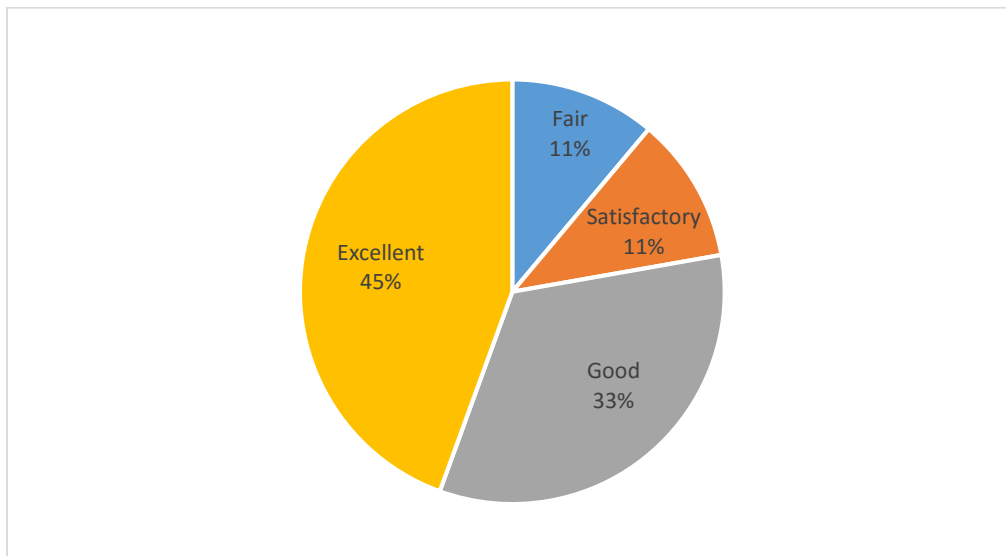
While there is a high degree of compliance in terms of training attendance, feedback from various focus groups held around the state, as referenced above, indicated that staff members believe that much of the initial training was either too generalized or, in some cases, inapplicable. Many of the stakeholders, especially those for whom specialized training is unavailable, believe that they have learned mostly by utilizing on the job training and a trial by error approach to their daily work. This resulted in staff feeling overwhelmed and underprepared for their specific positions. Some stakeholders mentioned positive aspects about the training curriculum; however, the general consensus from the CFSR focus groups regarding initial training was critical. Several suggestions were made to begin the FSW training with the investigative phase, as many stakeholders felt this area in particular was lacking.

However, focus group participants also acknowledged that another possible explanation for the initial training not fully preparing staff may be attributed to staff often carrying full or partial caseloads at the time of initial training. While new FSWs in training are expected to have a small caseload (please see page 22 of the SFY 2015 Training Plan “New Worker Initial Caseload Assignment” considerations), it is not uncommon for new staff to have considerable and complex caseloads, or at least to be on call during training, due to staff turnover and the increasing number of children in foster care in Arkansas. These caseloads and other systemic factors may lead to staff becoming overloaded and overwhelmed at work. Consequently, these same workers may not be able to fully process the training and, therefore, unable to transfer knowledge and skills learned in the classroom to the workplace.

A survey (also described on page 20 of the SFY 2015 Training Plan) conducted by the University of Arkansas at Little Rock (UALR) MidSOUTH Training Academy in the

spring of 2015 to evaluate how training did or did not prepare FSWs for their initial period of employment with the agency and to determine what could be done to improve NST offered similar perspectives as those gathered through the 2016 CFSR focus groups, particularly in terms of barriers to initial training. While admittedly only a small percentage of the overall trainee population responded to the survey, the vast majority of the FSWs who participated in the survey indicated the initial training was either “excellent” or “good” when asked to rate the helpfulness of the classroom training in learning the FSW job duties from the date of employment until the time of the survey. The following graph from the survey report provides additional detail.

*From the date of your employment until now, please rate the helpfulness of the classroom training in learning your job.*



Factors that promoted learning and participation in the New Staff Training process that FSWs listed in their survey responses included:

- Group sessions; speakers; power points; great trainers
- Hands-on learning strategies, relevance to field work, quality of instruction
- The trainers were very engaging and use fun techniques to assist the learners in remembering the material that was taught during the sessions.
- Real life examples. Shadowing an experienced worker.
- The discussion in regards to different areas to help discuss policy as well as how we should be performing *[sic]* on the job. The policy exercises were excellent. The different ways of learning in regards to the groups, role playing, and various exercises.
- CHRIS training.
- It was informative to have speakers come in and talk about their expertise. I learned from the attorney who came in and the guest foster parents. It is also helpful to have different trainers just to make things more interesting.

Survey responses regarding factors that served as barriers to the New Staff Training process, once again, mirroring those of the CFSR focus group comments, included:

- Knowing that I had a lot of work to do in the office, but being gone ever *[sic]* other week was hard.
- Spending too much time on abstract ideas and not enough time on practical every day functions.
- Very little training in resource.
- The barriers were having to be on call and work fully *[sic]* time during the NST, which had nothing to do with work MidSouth! I thoroughly enjoy any training experience though *[sic]* MidSouth! Thanks for a job well done!
- I would not say barriers but it was a lot of information that we went over but sometime we did not have time to elaborate on certain topics.
- The main factor that I found to be a barrier is that my county has other ways of how policy is or even is not implemented throughout the system.
- Traveling 1.5 hours to training site.
- Expectations to perform DHS related job functions while away at/during classroom training weeks.

It may also be worth noting that, in addition to the annual UALR MidSOUTH FSW and FSW Supervisor survey regarding New Staff Training referenced above, NST and an individual FSW's ability to comprehend and apply the knowledge and skills taught during this initial training are also evaluated through the following mechanisms:

- Pre and post-tests for applicable training sessions delivered to DCFS staff
- Participant evaluations of the trainings at the conclusion of each training
- Individual Training Needs Assessment (ITNA) meetings that occur with the new FSW and his/her supervisor and applicable training staff 20 working days after a New Worker Training concludes to discuss:
  - FSW's performance during training
  - FSW's job performance up to that point in time
  - FSW's strengths and weaknesses
  - Development of a plan to build on FSW's strengths and address FSW's identified weaknesses

## Conclusion

Based on the aforementioned data and information, as well as that contained within the referenced documents, Arkansas finds the staff and provider training system to be functioning effectively 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. While certainly there are elements within initial staff training curriculum that could likely be improved or expanded upon, the State believes that Item 26 is a **Strength**.

**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 include 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:**

As reported on pages 22 and 23 of the SFY 2015 Training Plan, all DCFS employees are required to have a minimum number of annual continuing education training hours based on an employee's specific job function. Any continuing education provided by UALR MidSOUTH or the Academic Partnership in Public Child Welfare (i.e., "the IV-E Partnership") is reported directly to DCFS on a quarterly basis.

As outlined on pages 8 and 9 of the SFY 2015 Training Plan, each year direct service DCFS staff must complete the mandated *Managing Difficult Encounters with Families* and *A Comprehensive and Compassionate Approach to Trauma Assessment* trainings. The hours for both of these trainings are applied to the annual ongoing training requirement and provided by the Academic Partnership for Public Child Welfare. The specific training objectives within those two mandated trainings are adjusted annually based on:

- Feedback from the previous year's *Managing Difficult Encounters with Families* and *A Comprehensive and Compassionate Approach to Trauma Assessment* trainings

- Data MidSOUTH collects through Individual Training Needs Assessments offered at the end of each initial training series for DCFS staff
- Evaluations collected at the conclusion of MidSOUTH continuing education offerings
- Input collected during quarterly Regional Team Meetings between DCFS and the Academic Partnership in Public Child Welfare as well as monthly meetings with DCFS Area Directors, the IV-E University Coordinators, and the DCFS Professional Development Unit Manager.

Also as described on pages 8 and 9 of the SFY 2015 Training Plan, the Academic Partnership in Public Child Welfare works with local Area Directors to schedule the *Managing Difficult Encounters with Families* and *A Comprehensive and Compassionate Approach to Trauma Assessment* trainings for DCFS staff during each calendar year. During calendar year 2015, approximately 62% of Program Assistants and 73% of all other staff (FSWs and Supervisors) attended the *Managing Difficult Encounters with Families* training. During that same time period roughly 65% of PAs and almost 77% of all other frontline staff (FSWs and Supervisors) attended *A Comprehensive and Compassionate Approach to Trauma Assessment* training.

Beyond these two standard mandated trainings, DCFS employees may satisfy their remaining continuing education requirement in a multitude of different ways. For instance, DCFS staff may elect to access continuing education opportunities offered through other community organizations and collaborations, educational institutions, and in-state and out-of-state conferences.

There are also typically trainings mandated by DCFS Central Office throughout the year for DCFS staff related to new programs or initiatives such as the initial Child and Adolescent Needs and Strengths (CANS)/Family Advocacy Support Tool (FAST) Trainings provided by Dr. John Lyons that all DCFS Supervisors and Family Service Workers were required to attend prior to the implementation of the Arkansas CANS/FAST in February 2015 (see pages 12 and 13 of the SFY 2015 Training Plan for attendance numbers and other details regarding this training). These mandated in-service trainings may count toward the ongoing training requirement for staff. For a more comprehensive picture of continuing education trainings offered throughout SFY 2015 for DCFS staff, please refer to pages 8 through 16 of the SFY 2015 Training Plan.

An example of more recently required continuing education for DCFS staff includes the 2015 Legislative Update Training mandated for all DCFS Supervisors and FSWs in the summer of 2015. Approximately 77% of the staff (FSWs and Supervisors) attended this training. In addition, DCFS Central Office also mandated that all DCFS Supervisors as well as DCFS FSW caseworkers and adoption specialists attend the CANS/FAST Refresher and Recertification Trainings were held during the fall of 2015 and winter of 2016. As of December 31, 2015 approximately 65% of the required staff had attended this training with several other training sessions being offered in the third quarter of SFY 2016 as well.

### *Stakeholder Input*

The fact that there is not a 100% attendance rate even for mandated continuing education trainings may be linked to the issues identified in the CFSR focus groups. During these sessions several participants claimed that they are often unable to attend necessary, available trainings because of time constraints caused by heavy caseloads. Travel was sometimes explicitly mentioned as an issue that compounded time issues (suggestions were made in the CFSR focus groups to bring the training to the people who need it instead of asking them to travel).

While over the past two years there have been a plethora of mandated continuing education trainings for DCFS staff (many related to the IV-E Waiver Demonstration Project interventions), some CFSR focus group participants stated that they were not able to attend other, optional trainings because specialized training is not offered for their profession (this seemed to be a theme that was most common among adoption specialists). A few stakeholders did not offer an explanation regarding why they had not received ongoing training. Those who did not receive much or any additional training often mentioned that they learned on the job and/or that regular business meetings sometimes were shaped to cover common training topics.

For those who did complete ongoing training, some stakeholders claimed that, in general, training did not offer quality information and/or that they become burned out by being trained frequently or by receiving too much information all at once. However, there were also many stakeholders who participated in the CFSR focus groups who had positive comments regarding how well the trainings address skills and knowledge needed by staff to carry out their duties as highlighted in the CFSP. Several stakeholders specifically praised training offered by MidSOUTH.

At the same time, many positive comments included suggestions for improvement. Once again, the most common complaint regarding ongoing training appeared to be that the training is often not specialized and/or that more specialized trainings are needed. Many stakeholders specifically mentioned the need for training that addresses drug issues and safety issues.

Of the stakeholders who claimed they did receive necessary training, it was sometimes unclear during the focus groups whether or not such training was received within the appropriate timeframes. It may be worth noting that for mandated continuing education trainings for DCFS staff, make-up sessions are almost always necessary because staff do not complete the trainings that are initially offered.

As with initial training, placement provider staff members appeared to receive more frequent ongoing training based on feedback gathered through the CFSR focus groups. These providers seemed to offer additional training opportunities mostly in-house or have staff access UALR MidSOUTH continuing education trainings. Ongoing training hours for placement provider staff are also governed by Minimum Licensing Standards



for Child Welfare Agencies, which are overseen by the Child Welfare Agency Review Board.

## **Conclusion**

Given the data and information the state agency currently maintains in regard to ongoing staff training, the State believes Item 27 to be an **Area Needing Improvement**. More work can likely be done to improve the monitoring of staff attendance in relation to ongoing training. More attention may be needed to ensure that ongoing trainings are relevant to specific job functions and available to all staff statewide. Furthermore, a heightened focus on the transfer of knowledge and/or skill from ongoing trainings to the workplace would also benefit the State and its employees, though systemic barriers such as high caseloads and frequent staff turnover must be acknowledged when addressing these issues.

**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:

- that they 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:**

Stakeholders who participated in the CFSR focus groups seemed to generally believe that initial training for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities is received timely for initial and ongoing training. The current DCFS foster/adoptive parent pre-service training is described on page 23 of the SFY 2015 Training Plan and includes details regarding the 895 prospective foster/adoptive parents (individuals) who completed Foster/Adopt PRIDE pre-service training during that timeframe. From July 1, 2015 through December 31, 2015, 454 prospective foster/adoptive parents completed Foster/Adopt PRIDE pre-service training. The training records that are completed by foster and adoptive applicants at UALR MidSOUTH Training Academy Foster are transferred nightly into DCFS CHRIS training records for those applicants. Foster and adoptive homes may not be open for placement in CHRIS until the prospective foster and adoptive parents have successfully completed the required initial training.

DCFS foster and adoptive homes may access ongoing training through UALR MidSOUTH, other community providers, and applicable online as well as other media resources (first aid/CPR recertification training may not count toward the annual 15 hour continuing education requirement). DCFS Resource Workers monitor the annual 15 hour ongoing training requirement for foster and adoptive homes. If a foster or adoptive home does not meet the annual ongoing training requirement, the home becomes ineligible in CHRIS and, per DCFS Policy VII-E, no additional children may be placed in the home until the ongoing training requirement is satisfied. CHRIS Net reports such as the "Foster Family Home Reevaluations Due and Upcoming by Month" report assist Resource Workers in monitoring ongoing training for providers, among other

reevaluation requirements. The “Open Foster Home Eligibility Summary and Detail” report on CHRIS Net also assists Resource Workers, supervisors, and management in monitoring the ongoing training requirement for DCFS providers. This report summarizes by county the number of foster homes by Eligible and Not Eligible Status, and staff can drill down to individual providers to get more detailed information regarding providers who are Non IVE-Eligible. The Placement and Residential Licensing Unit (PRLU) staff of the Division of Child Care and Early Childhood Education also reviews approximately 75 to 80 percent of DCFS foster homes annually to ensure that DCFS is successfully monitoring provider compliance, to include the annual ongoing training requirement. PRLU staff documents this information in their electronic Placement and Residential Licensing System (PRLS).

Minimum Licensing Standards for Child Welfare Agencies outline the training requirements for therapeutic foster care (TFC) parents. Most TFC providers in Arkansas use either the PRIDE curriculum or the Pressley Ridge curriculum as the initial training for their foster parents. As with DCFS foster homes, TFC foster homes cannot be open for placement until the prospective TFC foster parents have successfully completed the required initial training curriculum required for a particular TFC provider. PRLU also monitors initial and ongoing training for TFC providers.

### *Stakeholder Input*

In regard to how well the initial and ongoing training addresses the skills and knowledge base needed to carry out duties related to caring for children involved in the child welfare system, many stakeholders commented that they believe initial training is especially helpful. Some who held this view offered suggestions to better the training system, but were generally pleased with what they were taught. PRIDE training was praised and/or mentioned several times, but stakeholders’ most prevalent complaint regarding training curriculum was that it often did not cover important topics such as caring for children with specific behavioral needs. It was noted that children with such needs are sometimes placed with foster parents who have not been adequately trained to meet behavioral needs, which has reportedly led to placement disruptions and even losing discouraged foster parents from the system altogether.

Ongoing training was also mentioned as being helpful, but, again, several stakeholders claimed that travel and child care issues make it difficult to attend continuing education offerings. Others mentioned that they were able to attend continuing education opportunities; however, it was generally unclear whether or not the ongoing training was timely.

### **Conclusion**

Based on the information above, foster and adoptive parents receive training pursuant to the established continuing education requirement and time frames for the provision of initial and ongoing training. In addition, these initial and ongoing trainings address the

skills and knowledge base needed to carry out their duties with regard to foster and adopted children to the extent that a classroom-based training curriculum can do so. As such, the State finds that Item 28 is a **Strength**, but recognizes the critical role that real-life experience with fostering and adopting as well as adequate support of provider homes plays in retaining foster and adoptive homes.

## E. Service Array and Resource Development

### 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 achieve permanency.

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:

In 2013, Arkansas began a comprehensive overhaul of our former assessment tool (Family Strengths, Needs, and Risk Assessment (FSNRA)). A statewide workgroup was formed and meetings with staff, judges, community partners, and leadership from the Division were held to discuss options for a new assessment tool, which would best fit Arkansas's needs. The Child and Adolescent Needs and Strengths (CANS) and Family Advocacy and Support Tool (FAST) were chosen as the replacement tools. When a case is first opened, the CANS and FAST tools are administered to children and adolescents in foster care and families receiving in-home services, respectively. The purpose of the CANS/FAST tools are to help staff prioritize the highest area of need and identify strengths within the child/family. At the investigative stage, the Health & Safety Checklist is used to identify strengths and need. The Division works to ensure services that assess the strength and needs of children and families are available at all stages of the system.

Once the needs are identified, staff develop a comprehensive case plan with the services identified to address the specific needs or build upon an individual's strengths. The case plan is monitored by staff for compliance and revised as needed in order for a child to safely remain in the home or achieve permanency on a timely basis. Arkansas has a high number of cases where the court will order "standard services" for every

family even if that service is not identified as a need. DCFS complies with those orders of the court and developed a specific area within the case plan to note if the services were court ordered.

DCFS delivers some of the services directly to clients while others are provided through a contract with specific providers. Division-delivered services are available statewide while some contracted services are only available in limited jurisdictions. Services gaps are usually addressed through the development of a Purchase Order for needed services not available by contract.

Programs and services of other Divisions within the Department are also available to clients of DCFS. Delivery of such services is coordinated with other Divisions administering TEA/TANF Medicaid, Food Stamps, Social Services Block Grant, and other federal entitlement programs. DCFS continues to work with the state Community-Based Child Abuse Prevention Program (CBCAP) State Lead Agency funded under Title II of CAPTA to develop child abuse prevention programs, in addition to the ones DCFS purchases.

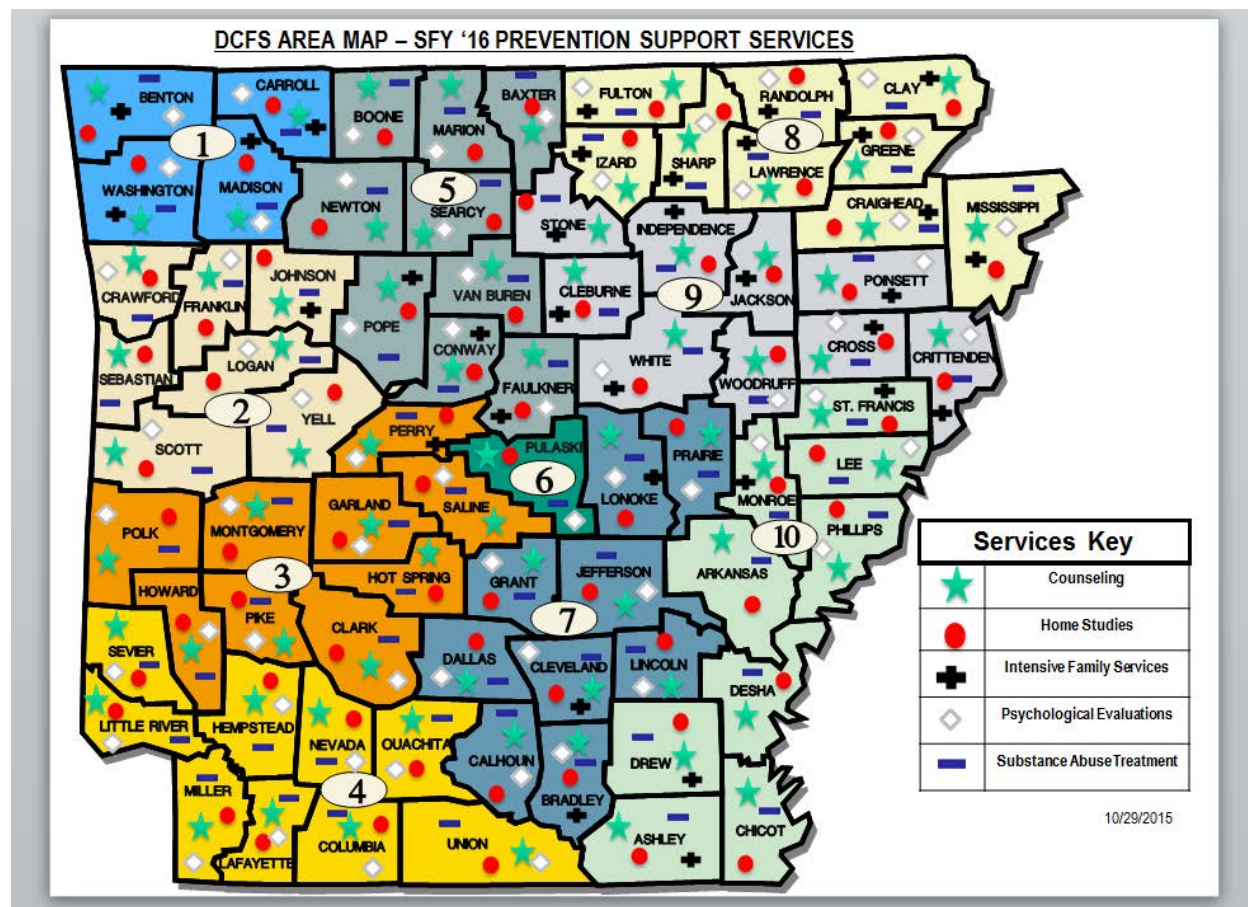
Service accessibility and resource development across the state is an area we continue to need to focus on improving. Based on evidence contained with CHRIS, case reviews and stakeholders, Arkansas continues to have an overall lack of services, especially in the more rural parts of the state. The lack of appropriate placements, which is one example where services are lacking, impacts all stages of the case—family/child visitation, change of school (being driven back and forth long distances daily), lack of family involvement with the case plan least restrictive setting (higher level of care than what is needed but no step down or therapeutic placement available), and not being placed with any or all siblings. At the end of the 1<sup>st</sup> quarter (SFY 2016), 70 percent of the children with siblings in foster care were placed with at least one of their siblings. Of those children with siblings in care, 50 percent were placed with all of their siblings. In essence, there are not sufficient resources to place all siblings together. Another outcome resulting from too few placements is the extent to which children have placement stability while in foster care. Regardless of how long children are in care, the percentage of children who experience two or fewer placements is consistently below the national standard.

For a complete listing of services offered—please refer to page 20-25 of the FFY 2015 Annual Progress and Services Report; Arkansas CAPTA Plan pages 124-129  
[http://humanservices.arkansas.gov/dcfs/dcfsDocs/Updated%20Initial%20comments%20addressed%20ARKANSAS%20ANNUAL%20PROGRESS%20AND%20SERVICE%20REPORT%202015%20th%2010-5-15%20\(2\).pdf](http://humanservices.arkansas.gov/dcfs/dcfsDocs/Updated%20Initial%20comments%20addressed%20ARKANSAS%20ANNUAL%20PROGRESS%20AND%20SERVICE%20REPORT%202015%20th%2010-5-15%20(2).pdf)

Please refer to page 57-62 of the SFY 2015-2019 Child and Family Services Five Year Plan  
<http://humanservices.arkansas.gov/dcfs/dcfsDocs/SFY%202015-2019%20Child%20and%20Family%20Services%20Five%20Year%20Plan.pdf>

Please refer to the Health Care Oversight Plan

<http://humanservices.arkansas.gov/dcfsc/dcfscDocs/Health%20Care%20Oversight%20-%20Mental%20Health%202015%20-%20APSR.pdf>



### Stakeholder Input

Stakeholders reported a wide range of services that are lacking, ranging from assessments or evaluations to mental health services and even placement services. A number of stakeholders noted that Intensive Family Services are desperately needed; and, they argued that this particular service could reduce the number of removals in many cases. A few stakeholders stated that they like the Nurturing the Families of Arkansas (NFA) parenting program, but there are long wait lists for clients. They also noted the eligibility criteria for NFA needs to be expanded in order to meet the needs of our current DCFS client population.

Since there are not a lot of services available locally, transportation has become an issue. Clients have to travel far distances to obtain services. Stakeholders reported that it is particularly difficult to get gas cards approved by Central Office, and Program

Assistants are often overwhelmed by excessive transportation needs. DCFS staff stated that they sometimes find themselves just driving back and forth all day.

Another issue discussed among stakeholders was the difficulty in obtaining buy-in from the community. Poverty in some areas is a contributing factor as some communities lack the capacity to make contributions. In other areas, however, there is a lack of understanding about the agency's needs. Stakeholders also mentioned that DCFS has issues with running out of money, particularly toward the end of the fiscal year, which makes service provision difficult. Many stakeholders also claimed that they have had problems with Medicaid. For example, one DCFS worker stated, "I had to fight with Medicaid to get a child services even after the services were recommended by a therapist."

Several stakeholders argued that problems with service accessibility can be attributed to case practice. Caseworkers need to gather sufficient knowledge about the children they work with to direct them to services they need. One service provider stated that, "it seems DCFS is just triaging and putting out fires," making it difficult for DCFS staff to focus on service accessibility. Another stakeholder argued that DCFS pushes for services (i.e. more foster homes), but that initial push is then followed by a significant lag on DCFS's part in getting the services set up and ready to function.

There was some concern among stakeholders not being forthcoming about children's needs. Caseworkers are desperate to secure a placement for children, and consequently, when the service needs of children come to light, they are found to be inappropriately placed. For example, a service provider claimed that youth are sometimes placed at a facility meant for pregnant teens even though some of the youth are not pregnant. Some of the stakeholders reported that because of the high turnover rates of DCFS workers, it has been difficult to maintain and build solid partnerships, which are considered to be foundational in accessing services for clients.

## Conclusion

Stakeholder interviews and case reviews indicate that the consistency of available services throughout the State appears problematic. Some counties are benefiting from a wide array of services while others, generally more rural areas, have limited access to services to prevent and adequately address issues that impact child safety. Based on all of the aforementioned information and analysis, Arkansas finds that the service array and resource development system is not functioning well enough to ensure that the requisite array of services is accessible in all political jurisdictions covered by the CFSP. Accordingly, the State assesses Item 29 to be an **Area Needing Improvement**.



**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:**

Services are individualized through the development of a case plan for each child/family that address the specific needs identified through the CANS/FAST assessment. These services allow children to safely remain in the home, work towards reunification, or achieve timely permanency. All case plans address the safety, permanency, and well-being of the families of Arkansas. Policy clearly states that children and families will receive individualized services. Interviews from staff/stakeholders suggest that there may be opportunities for Arkansas to improve its individualizing or tailoring of services to meet the unique needs of children and families. However, progress is evident in the expansion of successful services and development of specialized interventions. An example of DCFS' progress is that many forms and brochures are also written in Spanish and Marshallese, which helps to individualize services to those populations. DCFS has also implemented Differential Response and Team Decision Making, which help to individualize the investigation process and safety planning around the particular needs of children and families.

For a complete listing of services offered, please refer to pages 57-62 of the Child and Family Services Plan on pages 20-25 of the 2015 Annual Progress and Services Plan, as well as Arkansas's CAPTA Plan on pages 124-129.

Please also refer to the Health Care Oversight Plan, for which there is a hyperlink below.

<http://humanservices.arkansas.gov/dcf/dcfDocs/Health%20Care%20Oversight%20-%20Mental%20Health%202015%20-%20APSR.pdf>

***Stakeholder Input***

Focus group participants agree that basic services, such as local community mental health services and parenting education classes, are available in all counties. There is still an opportunity to further individualize them. Group members stated that drug and

alcohol assessments are often very “cookie cutter” and are “one size fits all.” The majority of Area Directors stated that individualizing services needs a lot of work, as they are not addressing the families’ specific issues. One Area Director reported that when it comes to mental health services, children are in waiting rooms for hours. Another example is that very limited play therapy services are available statewide, which could be a way to individualize a young child’s therapeutic needs. There are also limited numbers of trained Trauma Focused Cognitive Behavioral Therapy (TFCBT) providers across the state. Staff also identified the need for specialized parenting education classes for low-functioning families and parenting coaches that can assist, monitor, and model good parenting choices.

Some stakeholders claimed that judges have a tendency to order the same services regardless of each family’s particular circumstances. For example, a couple of stakeholders reported that judges almost always order parenting classes, even in cases where parenting is not an issue. A few stakeholders believe that DCFS workers are overloaded in just ensuring basic needs are met for children, and thus do not have the time to focus on individualizing service plans. As a result, children are not getting the services that they need. They reported that residential facilities are kicking children out for behavioral issues, which puts more stress on DCFS staff. Workers end up putting children in inappropriate placements, which backfire.

In a focus session with the Cherokee Nation, stakeholders voiced similar views that services are “all cookie-cutter,” with no options for individualizing them. One stakeholder stated that there is no individualizing for parenting classes and gave an example of standard parenting classes offered to a low functioning family. In an effort to meet the needs of the family, they had their Parenting Specialist drive to the family and tailor the parenting class to address their specific needs. Another tribal representative stated that DCFS workers do not have time to review families’ service needs and customize them; rather case plans are checklists where workers just cut and paste what they have and move it over. One stakeholder reported that she had to argue with the worker to put services in the case plan, while another stated that she has never had a worker review an individualized plan or services with a family.

There were some instances where stakeholders agreed that an individualized approach is working. Some stakeholders claimed that Intensive Family Services (IFS) is a great individualized service for families. However, one Area Director stated that IFS is not available in all counties, which is “not fair to families who may have their children removed because there are not enough intensive services to keep them in the home.” One DCFS worker reported, “If I can do a protection plan and have IFS in the home the next day, kids wouldn’t have to come into care.” Another stakeholder claimed that specialization often occurs through the Permanency Round Table (PRT) process, stating that, “The caseworker is able to step out and create unique resources for kids. I have not seen that before and I see examples of it working.” There was hope that the new CANS tool would do more for individualization, but staff have not really seen it. Plans are still directed and geared towards the parents rather than the children. Additionally, service providers are saying they are overloaded and are not able to

handle the capacity of referrals DCFS sends, but DCFS continues to use the same providers and services, even though the demand is greater than the supply and other services would benefit families more. One group member reported that there is some flexibility in the services that they can ask for, but it takes a couple months to get them set up.

## **Conclusion**

DCFS continues to expand the array and accessibility of services as demand grows and new needs are identified. While considerable progress has been made on this systemic factor, there were still challenges noted by staff and stakeholders. Arkansas finds that the service array and resource development system is not functioning well enough yet statewide to ensure that the services in Item 29 may be individualized to meet the unique needs of children and families served by the agency. Correspondingly, the State assesses Item 30 to be an **Area Needing Improvement**.

## **F. Agency Responsiveness to the Community**

### **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:**

DCFS uses a number of forums to share and gather information from stakeholders across the state. In fact, one goal of the CFSP, specifically Objective 4, focuses on improving communication regarding the mission, goals and resource needs of DCFS through consistent messaging with both internal and external stakeholders. Quarterly meetings with an Advocacy Council are used to identify ways to improve the assessment, engagement and service delivery practices of DCFS. Advocacy Council members include, among others, youth, foster care providers, members of the courts, tribal representatives, faith based entities, service and placement providers, citizen review panel coordinators, family members, and public and private child and family service agencies. Other forums or strategies used to gain input and support from the community include presenting at conferences and workshops, conducting and sharing information from surveys, issuing special reports and holding meetings with targeted audiences. Internally, quarterly meetings are conducted with targeted audiences, such as with Differential Response staff, resource recruitment and retention staff, and supervisors.

While communication with stakeholders has improved, there is still room for continued improvement. DCFS is taking steps to share information in a timelier manner, as well as to become more consistent in how data are shared or information is used to enhance or impact outcomes. DCFS will continue to develop reports and data that are simple in presentation and can be understood in many venues so that the needs of children and families in Arkansas are more effectively communicated.

The strategic plan for Arkansas's CFSP, while administrative in nature, is reflective of the feedback received from external and internal stakeholders. Information gathered

from stakeholders is shared with DCFS' Executive staff on an ongoing basis which is then used to brainstorm and strategize on needed changes to enhance the support and supervision provided to direct services staff, help them to enhance their skills, and develop improved practices with families and relationships with community partners.

Continuous Quality Improvement meetings with Service Area staff are also conducted no less than annually. Findings from the Quality Services Peer Review, examination of child protective services practices and a meta-analysis of data analyzed from CHRIS are used to identify promising practices and areas where practice improvement is needed. Area Directors are encouraged to develop and implement the goals and objectives of DCFS' CFSP through development of individualized Program Improvement Plans. Although this is an area where work needs to continue, it is an area where development persists.

Information on DCFS' collaborative efforts can be found in its 2015 Annual Progress and Services Report 3 to 20. Furthermore, pages 34 to 38 of the 2015 APSR outline the progress DCFS has made in collaborating with stakeholders.

### *Stakeholder Input*

We received mixed results as to how well we have been engaging with our stakeholders. Focus group sessions with internal and external stakeholders revealed that many of the stakeholders agreed that DCFS has improved its engagement and collaboration efforts with community service providers. For example, a placement provider stated, "Engagement is going well. Central Office has been responsive to [our] requests and good with providing feedback about what/how DCFS is addressing issues that are brought forward." A few of the stakeholders even pointed to the focus group sessions as positive engagement from the State, although one stakeholder claimed that DCFS is reactive instead of proactive, while another stated that levels of engagement vary across counties which could be improved in the year ahead. Cherokee Tribal representatives believe that the implementation of tribal liaisons has opened doors in improving collaboration and consultation with the agency. DCFS will continue its efforts to improve communication with all stakeholders, both internal and external.

### **Conclusion**

Based on information collected on processes used by DCFS to actively engage in ongoing collaboration and consultation with internal and external stakeholders, and from our focus group feedback with key stakeholders, DCFS believes that the agency responsiveness to the community system is functioning well with respect to engaging stakeholders pursuant to the CFSP and APSR. Arkansas finds Item 31 to be a **Strength**.

**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:**

DCFS consults and coordinates with other public and private child and family service agencies which include Division of Developmental Disabilities (DDS), Division of Behavioral Health Services (DBHS), Division of Youth Services (DYS), and Division of County Operations (DCO). DCFS also collaborates with entities such as the Office of Child Support Enforcement (OCSE), on an as needed basis.

Programs and services of other federal or federally assisted programs within the Department of Human Services (DHS) are also available to clients of DCFS. Delivery of services is coordinated with other Divisions administering TEA/TANF Medicaid, Food Stamps, Social Services Block Grant, and other federal entitlement programs.

Because there are children in foster care who become adjudicated and enter the Juvenile Justice System, which we reference as Division of Youth Services, DCFS works closely with DYS. We also have a liaison within our Division that works with DYS and those in DYS' custody. Although these children are considered to be in the custody of DYS at the time of the transfer, DCFS continues involvement in lieu of a parent. DCFS has a Memorandum of Understanding with DYS so that we can ensure the smooth transfer of custody as such youth enter and discharge from the DYS system. The discharge process could involve a transfer back to DCFS custody and authority, reunification with parent/relative, or aging out on their own. Our goal for circumstances in which youth age out of the foster care system is to provide a support system upon discharge.

DCFS' Behavioral Health Manager and the Behavioral Health unit also collaborate closely with the Division of Behavioral Health to advocate for foster children and youth in the planning process for behavioral health services. DCFS works with DBHS as new initiatives are brought forward to address and improve mental health services for children and youth.

DCFS continued to collaborate with DBHS in regards to substance abuse services for our clients in the past fiscal year. As part of DCFS' efforts to obtain funding for substance abuse services for our clients, DBHS was consulted in the development of the Promulgation process to insure that the terminology and service descriptions were consistent. DCFS also required that its contracted providers be certified and funded

through DBHS. These efforts insure that DBHS and DCFS do not have conflicting expectations and requirements for our substance abuse providers.

The Division of Behavioral Health Services is the lead DHS Agency responsible for the oversight of Arkansas System of Care (AR SOC) activities. The AR SOC applies the system of care philosophy to a broad array of services and supports that help build meaningful partnerships with families, youth, and other concerned partners. Eligibility criteria for the AR SOC include being a child at high risk of out-of-home placement, having multi-agency involvement, and having behavioral health concerns. DCFS-involved children are a priority population for the AR SOC and DCFS staff throughout the state are involved in participating in such activities at both the state and community levels. DCFS supports and utilizes the SOC process through established contractual performance indicators for Intensive Family Services (IFS) that require our providers to refer all youth who have a serious emotional disturbance to SOC for wraparound services.

In 2013 DCFS added two Centralized Developmental Disabilities Coordinator Positions that focus solely on DDS waiver packets for children. This is a critical process in assuring timely processing and approval of children becoming eligible for these waiver services. This came about due to feedback from the field. This was a very tedious and timely administrative process and was very difficult for field staff to complete and track along with all other responsibilities. DCFS recognized that we could impact “high end” placements if the waiver services were in place for children as well as assure the “right services were being provided at the right time” which could impact the ability to establish more timely permanence for children in foster care. Putting this in place benefited the field and children needing such services and their receiving them in a timely manner. It has also helped with reducing costs to the Division.

DCFS also has an Eligibility Unit within Central Office. This unit determines IV-E eligibility for youth in foster care. Staff within the unit have a working relationship with Medicaid and OCSE to secure benefits and services for eligible children. The Division has close ties to OCSE to ensure children are eligible to receive appropriate entitlements.

### *Stakeholder Input*

During our focus group sessions stakeholders were asked about Item 32 and their experience working with other federal assistance programs. Feedback we received from our internal and external stakeholders found Medicaid to be the most difficult outside federal program to work with. All groups mentioned encountering long waiting periods for application approval, which lead to gaps in coverage for medication, especially for children leaving foster care. All stakeholders expressed a desire for a better alternative to expedite the approval process for these children, and prevent their coverage being dropped or put on hold for months at a time. Multiple groups of stakeholders also cited issues regarding child support and working with the Arkansas Office of Child Support Enhancement (OCSE), many of which are due to lack of contact with outside divisions

such as child support and social security. Additionally, investigators, caseworkers, and supervisors mentioned having a difficult time obtaining housing assistance approval and working with Housing and Urban Development (HUD). They stated that it can be very difficult to get approval for parents and families they are working with.

## **Conclusion**

Over the past couple of years, a number of efforts have been taken to improve communication across internal and external stakeholders and to improve coordination of services/benefits with other federal/federally assisted programs serving the same population. These steps are proving beneficial but, given the problems highlighted in coordinating services with Medicaid, OCSE and HUD, continued work is still needed. The Division is working to collect additional data to assess how effectively Arkansas DCFS is coordinating CFSP services with other federal programs. However, based on the issues highlighted by the stakeholders, Arkansas finds that the requisite collaboration and coordination is not happening consistently across the state, resulting in the State assessing Item 32 to be an **Area Needing Improvement**.



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

### **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:**

Consistent with the statutory and regulatory requirements of the Federal Foster Care Program, as authorized by Title IV-E of the Social Security Act, Arkansas maintains consistent standards for the approval of all foster and adoptive homes and child care institutions within the state. The Child Welfare Agency Review Board, as authorized under the Child Welfare Agency Licensing Act (Ark. Code Ann. 9-28-401 et. seq.), prescribes minimum licensing standards for child welfare agencies, as defined under the statute. Specifically, the Child Welfare Agency Review Board (CWARB) promulgates and publishes rules and regulations setting minimum standards governing the granting, revocation, refusal, conversion and suspension of licenses for a child welfare agency and the operation of a child welfare agency. According to A.C.A. 9-28-402(14), "Minimum standards" means those rules and regulations as established by the Child Welfare Agency Review Board that set forth the minimum acceptable level of practice for the care of children by a child welfare agency. These standards are outlined in the Minimum Licensing Standards for Child Welfare Agencies publication produced by the CWARB and the Placement and Residential Licensing Unit within the Division of Child Care and Early Childhood Education (PUB-004).

The Placement and Residential Licensing Unit is charged with the enforcement of the Child Welfare Agency Licensing Act 1041 of 1997. The Unit inspects and monitors Residential, Emergency Residential, Psychiatric Residential Treatment, Independent Living facilities for children, and Child Placement Agencies that place children into foster and adoptive homes, and into residential facilities, in accordance with the Minimum Licensing Standards for Child Welfare Agencies. The Unit makes recommendations to the Child Welfare Agency Review Board for licensure of agencies and alternative methods of compliance with standards, investigates complaints of violations of licensing standards, and if necessary recommends adverse action against an agency found to be in violation of the standards.

As described in PUB-022 and the DCFS Policy and Procedure Manual, the Department of Human Services, acting through the Division of Children and Family Services, serves as the court-appointed legal custodian for children in foster care. All children within the Department's custody must be placed in a licensed or approved foster home, shelter, or

facility, or an exempt child welfare agency as defined at A.C.A. § 9-28-402. DCFS is a licensed Child Welfare Agency and all of its approved foster homes must be in compliance with all licensing requirements and DCFS policies.

Foster Home means a private residence of one or more family members that receives from a child placement agency any minor child, juvenile member of a family in need of services, or dependent or dependent-neglected juvenile who is unattended by a parent or guardian in order to provide care, training, education, custody or supervision on a 24 hour basis, not to include adoptive homes. Although the licensing standards' definition of a foster home does not include adoptive homes, DCFS foster and adoptive homes must meet the same licensing standards to comply with federal funding regulations. Anything less than full licensure or approval is insufficient for meeting title IV-E eligibility requirements.

The Division is responsible for selecting an appropriate foster home placement for each child who enters foster care. The home must meet foster home standards and the individual child's needs for the duration of placement. In order to have an appropriate foster home for each child in foster care, to minimize the risks involved in placement of a child in foster care, and to ensure that the child in foster care will not be moved from one foster home to another, it is necessary to select families on the basis of careful assessment. The purpose of the assessment process is to:

- evaluate the applicants' personal qualifications and physical requirements of the home outlined in this publication;
- educate prospective foster parents on the characteristics of children in foster care;
- evaluate their ability to meet those needs; and,
- evaluate the applicants' compliance with the Minimum Licensing Standards and DCFS policy requirements for foster homes.

The home assessment is a mutual selection process. It involves several components including, but not limited to, background checks (e.g., Central Registry, State Police Criminal Record Check, FBI Criminal Record Check) an in-home consultation visit, 30 hours of pre-service training (e.g., PRIDE), CPR and Standard First Aid training (no placements can be made in the foster home until the foster parents have obtained CPR and First Aid certification), a home study (e.g., SAFE home study), and ongoing consultation with the prospective foster parents to ensure that all appropriate criteria related to both compliance and quality are met. Prospective foster parents, with the exception of provisional foster parents, are highly encouraged to attend an Information Meeting before the in-home consultation visit. At least one parent in the foster home must be able to communicate effectively in the language of the child. However, this does not apply to foster parents for infants or short-term emergency placements.

Standards of approval include minimum licensing standards as well as DCFS policy requirements. Foster home standards are based on the personal qualifications of applicants and household members as well as the physical standards of their home.

Families must continue to meet the standards for the duration of their service as a foster home.

There are two types of DCFS foster homes, including Provisional Foster Homes and Regular Foster Homes. Provisional foster homes are identified and recruited by the Family Service Worker, who, in an effort to preserve family connections and expedite placement, may seek to place a child in foster care with a relative or fictive kin.

- “Relative” means a person within the fifth degree of kinship to the child or to at least one of the children in a sibling group, including step-siblings and half-siblings, by virtue of blood or adoption (Policy VI-A) if one has been identified and is appropriate.
- “Fictive kin” means a person not related by blood or marriage, but who has a strong, positive, emotional tie to a child and has a positive role in the child’s life if one has been identified and is appropriate.

The purpose of opening a provisional foster home is to enable DCFS to make an expedited placement for a child with a relative or fictive kin with whom a bond already exists. Therefore, a provisional home may be opened before the results of the FBI Background Check are received, before the provisional foster parents have completed the pre-service training, and before a full home study is finished. However, a visual inspection of the home is required before placement in a provisional home. These are the only differences in initial approval requirements, including Minimum Licensing Standards, between provisional foster homes and regular foster homes in Arkansas.

Once opened as a provisional home, DCFS staff works with the foster parents in that home to bring them into full compliance within a six month period. Provisional foster homes that are not in full compliance at the end of six months must be closed and the child(ren) removed, unless the relative has acquired custody. During the period of time that the home is on provisional status, a foster care board payment is not provided. However, provisional foster parents may apply for and receive benefits for which the relative and/or fictive kin is entitled due to the placement of the child in the home (e.g., SNAP). Provisional foster homes may also receive child support or any federal benefits (e.g., SSA) paid on behalf of the child, as applicable.

If the home is opened as a regular foster home, a foster care board payment will then be provided to help support the needs of the child placed in the home. However, if the home received any child support and/or any federal benefits paid on behalf of the child while the home was on provisional status, those child support payments and/or federal benefits must then be transferred to the Division to reimburse the state for foster care board payments and other expenses as appropriate. Once opened as a fully approved foster home, the foster parents may then request to care for children who are not related or not fictive kin children in foster care with the understanding that additional evaluation of their home would be required to ensure that it would be an appropriate placement for children who are not related or not fictive kin to the foster parent(s).

Regular Foster Homes are approved foster homes that may provide care for both related and non-related children. In addition, a Regular Foster Home may also serve, if desired, as an informal respite home. An informal respite home is an approved DCFS foster home that can provide temporary care (no more than seven continuous days at one time) for children in out-of-home placements when the children's full-time foster family is unable to do so and a member of the foster family's support system cannot assist.

Appendix 6 within the DCFS Policy and Procedure Manual (p. 408) provides an infographic outlining the foster/adoptive parent application and assessment process. DCFS Policy VII-D provides that DCFS will deny the approval of a home if, at any point during the home assessment process, it is determined that an applicant does not meet the standards or any other criteria of a quality foster home.

DCFS Policy VII-E outlines that, in order to ensure the continued quality of all DCFS foster homes, the Division must reevaluate each foster home's ability to care for children at least annually and whenever there is a major life change. Major life changes include:

- Death or serious illness among the members of the foster family.
- Marriage, separation, or divorce.
- Loss of or change in employment.
- Change in residence.
- Suspected child maltreatment of any child in the foster home.
- The addition of family members (e.g. birth, adoption, aging relative moving in).

The completion and approval of all foster home reevaluations must be documented in CHRIS. If a foster home reevaluation is not completed and documented annually in CHRIS, any IV-E eligible child placed in the home will lose IV-E eligible claimability until the reevaluation of the family is completed and documented.

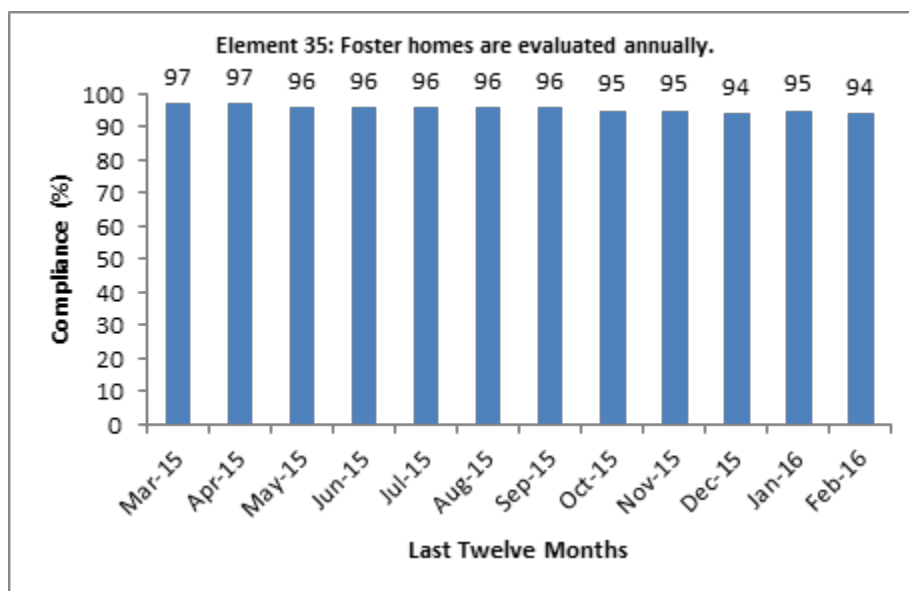
In addition to continuing to meet all Minimum Licensing Standards and DCFS Policy requirements as they relate to foster homes, foster parents must also complete a minimum of 15 hours of Division-sponsored or Division-approved in-service training annually after the first year of service. No more than five hours of videos, TV programs, books, or online courses for each foster parent will be accepted per year and must have prior approval by the Area Director or designee. Foster parents must also maintain current CPR certification and Standard First Aid training. Maintenance of CPR certification and First Aid training is in addition to the fifteen hours of continuing education and, therefore, cannot be counted as part of the annual 15 hour continuing education requirement. Foster parents must complete their annual in-service training requirements before any additional children in care are placed in their home, unless an exception is granted. Foster parents who do not meet the in-service training requirements will be notified that they must complete the in-service training requirements within 60 days. No additional children will be placed in the home during this 60 day period. If the foster parents' annual in-service training requirements are

more than 60 calendar days overdue, then a reevaluation will also be required unless an extension to meet in-service training requirements has been granted by the Area Director. Such extensions are the exception and not the rule.

Procedure VII-E1 outlines the processes involved in the quarterly monitoring of foster homes by DCFS, while Procedure VII-E2 defines the procedures associated with foster home reevaluations. CHRIS Net reports such as the “Foster Home Quarterly Visit CFS-475B” and “Foster Family Home Reevaluations Due and Upcoming by Month” reports assist Resource Workers and supervisors in monitoring the quarterly visit and reevaluation requirements. The “Open Foster Home Eligibility Summary and Detail” report on CHRIS Net also assists Resource Workers, supervisors, and management in monitoring the ongoing status and eligibility of DCFS providers. This report summarizes by county the number of foster homes by Eligible and Not Eligible Status, and staff can drill down to individual providers to get more detailed information regarding providers who are no longer IV-E-Eligible.

As described on page 86 of Arkansas’s 2015 APSR, the Compliance Outcome Report (COR) is a monthly report generated by HZA from CHRIS which measures 35 indicators that represent standard casework or case-related activities, many of which must comply with state regulatory requirements. Element 35 monitors foster home reevaluations, specifically the percentage of foster homes that require a reevaluation that actually receive a reevaluation. This information is available on a monthly basis at the State, Area and County levels, as is trending over a twelve month period. The following graph shows DCFS’ compliance for the twelve month period of March 1, 2015 through February 29, 2016. The graph illustrates the Division’s continued success in completing the required foster home reevaluations within the required timeframes

**COR Element 35: March 1, 2015 through February 29, 2016**



In order to secure the best placement for each child in foster care, the Division seeks to maintain a large pool of quality foster homes. For this reason, Policy VII-F provides that the Division will consider reopening foster homes when situations arise where foster parents who previously self-elected to close their home and/or whose home was closed by the Division would like to reopen. Requirements vary depending on how long a foster home has been closed. Procedures VII-F1, VII-F2 and VII-F3 outline the processes involved in the re-opening of foster homes based on whether they have been closed less than one year, more than one but less than two years or more than two years, respectively.

Appendix 8 on pages 410 through 413 of the DCFS Policy and Procedure Manual delineates the protocol for policy waivers and alternative compliance. A “Policy Waiver” is defined as a request to deviate from the letter of the DCFS Policy, and procedures or standards. The DCFS Director approves all policy waiver requests. An “Alternative Compliance” is defined as a request for approval from the Child Welfare Agency Review Board to allow a licensee to deviate from the letter of a regulation. The licensee must demonstrate substantial compliance with the intent of the regulation. This includes, but is not limited to, regulations governing background checks and convictions for prohibited offenses. Traffic violations, other than DUI or DWI, do not require a policy waiver or alternative compliance as they are dealt with through the vehicle safety program. DUI and DWI violations require a policy waiver.

The procedures for requesting a policy waiver or an alternative compliance are the same, up until the point when the request is given to the Assistant Director of Community Services. The FSW initiates each request and then sends them up through their supervisor and area director, either of whom may deny the request based on the specific circumstances surrounding the situation necessitating such an exception. The assistant director or her designee will determine if the requested policy waiver or alternative compliance should be approved or denied. Denials are sent back to the area director and then on to the supervisor, FSW and the family. For policy waivers, the assistant director’s recommendation for approval is sent to the DCFS Director for final approval or denial. The Director’s final decision is then conveyed to the FSW for appropriate action.

The following require a policy waiver:

- Any misdemeanor convictions, except for minor traffic violations
- Driving under the influence (DUI) or Driving while intoxicated (DWI)
- Any issues that are not in compliance with DCFS Policy

For alternative compliance (AC), the assistant director’s recommendation for approval is sent to the director for her review. If the director denies the request for an AC, it is sent back to the assistant director. If the director approves of the request, then she will send the AC to the manager of the Placement and Residential Licensing Unit (PRLU) within DCCECE.

The PRLU Manager will then review the AC request to ensure all required documents are in the packet and request that any missing documentation be submitted. Once all of the required documentation is included in the AC packet, the PRLU Manager will place the AC request on the agenda of the next scheduled meeting of the Child Welfare Agency Review Board. The Foster or Adoptive Parent and FSW who made the original request for the alternative compliance will appear before the CWARB to answer questions, and then the CWARB will give final approval or denial of the request.

The crimes that require an alternative compliance from the CWARB are outlined in Appendix 8 of the DCFS Policy and Procedure Manual and will be further addressed in Item 34, as will the specific offenses/crimes for which a person may not ever request an AC because they are forbidden.

Consistent with the Unit's monitoring of all child welfare agencies, PRLU assigns licensing specialists to monitor DCFS for compliance with licensing standards. The licensing specialists will issue a corrective action notice if any deficiencies are found. The notice will state the agreement regarding the corrective action and a reasonable timeframe for the violation to be corrected.

Section 102 of the Minimum Licensing Standards publication (pp. 12-13, PUB-004) outlines PRLU's requirements around inspections, investigations and corrective actions. These policies have been developed to meet or exceed the minimum licensing requirements. PRLU must conduct licensing inspections, often referred to as monitor visits, to all licensed agencies, foster homes and facilities to ensure continued compliance with all licensing standards.

Licensing specialists must investigate complaints of alleged violations of licensing standards against all placement agencies and residential facilities, and they may participate in investigations of alleged child maltreatment. Licensing complaints must be initiated within 72 hours and must be completed within 60 days of receipt of the allegations.

Inspections and investigations may be scheduled or unscheduled, at the discretion of the licensing specialist, and may be conducted outside regular working hours. Routine residential inspections are generally unscheduled except when there is a need to meet with particular staff that may not otherwise be available or to review records not kept on site. At least one unannounced after hours visit must be conducted at each facility annually. Foster home visits are generally scheduled.

The frequency of inspections is at the discretion of the Licensing Unit and may be based on the agency's compliance history. However, the standard requirements are as follows:

- Each active residential facility shall be inspected each trimester.
- No fewer than monthly visits shall be conducted at newly licensed agencies.
- Agencies requiring more frequent monitoring due to compliance history shall be determined by the Licensing Specialist in consultation with their supervisor.

- Each building used as resident housing or for resident programs shall be inspected by licensing at least annually.
- Each building used as resident housing or for resident programs at facilities with a small campus shall be inspected at each visit regardless of the nature of the visit.
- A minimum of ten resident records shall be reviewed at least annually.
- A minimum of ten personnel records shall be reviewed at least annually.
- A review of background checks of each personnel record shall be conducted annually.
- Placement agency records shall be reviewed at least annually.
- DCFS foster homes shall be visited at least annually.
- A minimum of at least ten private agency foster homes shall be visited annually.

The Placement and Residential Licensing Unit reviews approximately 75 to 80 percent of DCFS foster homes annually to ensure that DCFS is successfully monitoring provider compliance, e.g., the annual ongoing training requirement. PRLU staff documents this information in their electronic Placement and Residential Licensing System (PRLS).

The following table outlines the number of monitoring visits conducted by PRLU during the first half of State Fiscal Year 2016 (July through December 2015).

**Licensing Inspections: 1st & 2nd Quarters SFY 2016\***

Placement Type	July 2015	Aug. 2015	Sept. 2015	Oct. 2015	Nov. 2015	Dec. 2015	Totals
<b>Residential Facilities</b>	21	39	24	34	28	29	175
<b>Placement Agencies/FC</b>	0	6	10	2	2	3	23
<b>Private Foster Homes</b>	10	30	8	24	10	12	94
<b>DCFS Foster Homes</b>	100	88	76	114	62	33	473
<b>Total Inspections</b>	131	163	118	174	102	77	765

\*July 1-December 31, 2015

As described above, DCFS and other child welfare agencies may request an alternative compliance to a licensing standard from the Child Welfare Agency Review Board. The CWARB may grant an agency's request for alternative compliance upon a finding that the child welfare agency does not meet the letter of a regulation promulgated under the Child Welfare Agency Licensing Act but that the child welfare agency meets or exceeds the intent of that rule through alternative means.

If the board grants a request for alternative compliance, the child welfare agency's practice as described in the request for alternative compliance shall be the compliance terms under which the child welfare agency will be held responsible and violations of those terms shall constitute a rule violation. The CWARB has authorized the managers and supervisors of the Licensing Unit to make temporary rulings regarding alternative compliance requests when the best interests of a child requires an immediate decision, subject to final approval at the next regularly scheduled meeting of the Board.



Alternative compliance requests granted in the areas listed below must be time limited and shall not exceed two years in length. These alternative compliances shall be monitored on an ongoing basis for compliance and shall be reviewed by the CWARB every two years:

- Floor space
- Staff to Child ratio
- Capacity
- Sleeping arrangements
- Bathrooms

During the first two quarters of SFY 2016 (July 1–December 31, 2015), DCFS received 202 requests for policy waivers and ACs; 177 of these requests (88 percent) received approval. The following table outlines the number of requests and approvals by provider type:

**Policy Waiver/AC Requests by Provider Type Q1 & Q2 SFY 2016**

Type	Requests	Approved
Adoption	23	18
Foster home	75	65
Fictive kin	4	4
FFSS	1	1
Provisional	74	65
Provisional Fictive Kin	2	1
Reopen	18	18
Not specified	3	3
ICPC	2	2
<b>Totals</b>	<b>202</b>	<b>177</b>

Beyond the 177 requests that were ultimately approved, an additional 11 requests were withdrawn and seven were denied. The approval status of the remainder is pending. Twenty-four of the requests (14 percent) were ultimately referred to the Child Welfare Agency Licensing Board.

The specific standards for which exceptions were requested were varied, but State Police Criminal Record Checks accounted for more than a quarter of the requests. Foster home re-openings constituted roughly eleven percent of the requests, followed by resources (income), vehicle safety checks and housing.

## Conclusion

Based on the aforementioned data and information, Arkansas finds that the foster and adoptive parent licensing, recruitment, and retention system is functioning effectively statewide to ensure that state standards are applied to all licensed, approved foster family homes and child care institutions receiving title IV-B and IV-E funds. The State assesses Item 33, Standards Applied Equally, to be a **Strength**.

**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:***Compliance with Federal Requirements for Criminal Background Clearances*

The Child Welfare Agency Licensing Act (A.C.A. § 9-28-409) requires that child welfare agencies conduct background checks on certain individuals. These agencies must conduct the background checks using forms approved by the Placement and Residential Licensing Unit. Consistent with the Act, Minimum Licensing Standards require the following checks:

Child Maltreatment Central Registry – each of the following persons in a child welfare agency must be checked for reports of child maltreatment (initially and then at least every two years) in his or her state of residence and any state of residence in which the person has lived for the past five years and in the person's state of employment, if different:

- An employee having direct and unsupervised contact with children;
- A volunteer having direct and unsupervised contact with children;
- A foster parent and all household members 14 years of age and older, excluding children in foster care;
- An adoptive parent and all household members 14 years of age and older, excluding children in foster care;
- An owner having direct and unsupervised contact with children; and
- A member of the agency's board of directors having direct and unsupervised contact with children.

Arkansas Criminal Record Check – each of the following persons in a child welfare agency must be checked with the Identification Bureau of the Department of Arkansas State Police to determine if the person has pleaded guilty or nolo contendere to or has been found guilty of the offenses listed in the Act:

- An employee having direct and unsupervised contact with children;
- A volunteer having direct and unsupervised contact with children;
- An owner having direct and unsupervised contact with children;

- A member of the agency's board of directors having direct and unsupervised contact with children;
- Foster parents, house parents, and each member of the household 18 years of age and older, excluding children in foster care; and
- Adoptive parents and each member of the household 18 years of age and older, excluding children in foster care.

FBI Background Check – each of the following persons in a child welfare agency who has not lived in Arkansas continuously for the past five years must have a fingerprint-based criminal background check performed by the Federal Bureau of Investigation in compliance with federal law and regulation to determine if the person has pleaded guilty or nolo contendere to or been found guilty of the offenses listed in the Act:

- An employee having direct and unsupervised contact with children;
- A volunteer having direct and unsupervised contact with children;
- An owner having direct and unsupervised contact with children;
- A member of the agency's board of directors having direct and unsupervised contact with children;
- Foster parents, house parents, and each member of the household 18 years of age and older, excluding children in foster care; and
- Adoptive parents and each member of the household 18 years of age and older, excluding children in foster care.

The Child Welfare Agency Review Board has the authority to deny a license to any applicant found to have any record of founded child maltreatment in the official record of the central registry. Any person found to have a record of child maltreatment must be reviewed by the owner or administrator of the agency, in consultation with the CWARB or its designee, to determine corrective action. Corrective action may include, but is not limited to, counseling, training, probationary employment, non-selection for employment, or termination. The Board has designated the Placement and Residential Licensing Unit Management Team with the authority to review and approve corrective action for personnel with a true finding of child maltreatment. All licensing specialists must consult with their supervisor regarding corrective action on all true maltreatment findings. The Board has the authority to deny a license or church-operated exemption to an applicant who continues to employ a person with any record of founded child maltreatment.

All Arkansas State Police Background Check requests are returned directly to the agency making the request. Minimum Licensing Standards requires an agency to notify licensing of an excludable offense. All FBI Background Check results are returned to PRLU. In accordance with Minimum Licensing Standards, the agency requesting the check is sent a letter stating the applicant does or does not meet eligibility requirements. The agency then notifies the applicant who may contact PRLU for further information. An owner, operator, volunteer, foster parent, adoptive parent, household member of a foster parent or adoptive parent, member of any child welfare agency's board of directors, or an employee in a child welfare agency may not petition the Child Welfare Agency Review Board unless the agency supports the petition. When petitioning the

CWARB, the applicant bears the burden of showing the Board that the applicant does not pose a risk of harm to any person.

The Child Welfare Agency Review Board may permit an applicant to be an owner, operator, volunteer, foster parent, adoptive parent, member of an agency's board of directors, or an employee in a child welfare agency notwithstanding having pleaded guilty or nolo contendere to or been found guilty of a prohibiting offense upon making a determination that the applicant does not pose a risk of harm to any person served by the facility. In making a determination, the Child Welfare Agency Review Board shall consider:

- The nature and severity of the crime;
- The consequences of the crime;
- The number and frequency of the crimes;
- The relation between the crime and the health, safety, and welfare of any person, such as the:
  - Age and vulnerability of the crime victim;
  - Harm suffered by the victim; and
  - Similarity between the victim and the persons served by a child welfare agency;
  - The time elapsed without a repeat of the same or similar event;
  - Documentation of successful completion of training or rehabilitation related to the incident; and
- Any other information that relates to the applicant's ability to care for children or is deemed relevant.

The Child Welfare Agency Review Board's decision to disqualify a person from being an owner, operator, volunteer, foster parent, adoptive parent, member of a child welfare agency's board of directors, or an employee in a child welfare agency under this section shall constitute the final administrative agency action and is not subject to review.

The only exceptions to these processes involve those requests initiated by DCFS, wherein all State Police and FBI results are returned directly to the Division. The Placement and Residential Licensing Unit does not receive, and is not authorized, to view the results. The PRLU does facilitate requests to be placed on the agenda of the Child Welfare Agency Review Board Agenda. However, PRLU does not make recommendations or distribute information to the Board members for these requests.

DCFS Policy VII-C outlines the Division's foster home assessment process, including the component related to background checks, which meet or exceed the requirements outlined in the Child Welfare Agency Licensing Act. As described on pages 190-191 of the Policy and Procedure Manual, DCFS will only place children in approved foster homes where the foster parents and appropriate members of the household have been cleared through a series of background checks, specifically the Arkansas Child Maltreatment Central Registry, the Arkansas Adult Maltreatment Central Registry, the Arkansas State Police Criminal Record Check and an FBI Criminal Background Check (with the exception that placements may be made in Provisional Foster Homes before

FBI results are received). Any household member who resides in the home for more than three cumulative months in a calendar year (e.g., an adult biological child of the foster parents who is home for the summer and holiday breaks or a relative who visits for 6 weeks twice a year) must clear all background checks. DCFS' requirements for each of the specific background checks are outlined below:

Child Maltreatment Central Registry – Foster parents and all other members of the household age 14 years and older, excluding children in foster care, must be cleared through the Arkansas Child Maltreatment Central Registry. The Arkansas Child Maltreatment Central Registry Check will be repeated every two years on all appropriate household members. If applicable, a Child Maltreatment Central Registry Check shall also be conducted on each household member age 14 years or older in any state of residence in which they have lived for the past five years, and in their state of employment, if different, for reports of child maltreatment.

State Police Criminal Record Check – Foster parents and all other members of the household age 18 and one half years and older, excluding children in foster care, must be cleared through a State Police Criminal Record Check. As soon as possible after a household member, excluding children in foster care, reaches his or her 18th birthday, the paperwork to request the State Police Criminal Record Check must be initiated to ensure results are received by the time that household member reaches 18 and one half years of age. The State Police Criminal Record Check shall be repeated every two years on all appropriate household members.

FBI Criminal Background Check – Foster parents and all members of the foster home who are 18 and one-half years of age and older, excluding children in foster care, must also clear an FBI fingerprint-based Criminal Background Check. As soon as possible after a household member, excluding children in foster care, reaches his or her 18th birthday, the paperwork to request the FBI Criminal Record Check must be initiated to ensure results are received by the time that household member reaches 18 and one half years of age. The FBI check does not need to be repeated.

DCFS Procedure VII-C1 delineates the Division's processes for handling background checks.

The following table denotes the total number of criminal background checks processed by the DCFS Backgrounds and Notifications Unit during the first two quarters of SFY 2016, including requests, results and the number of hits for each type.

**DCFS Background Checks Processed Q1 & Q2 SFY 2016\***

Type	Requests	Results	Hits
State Criminal	2932	2893	186
FBI Criminal	2772	1652	282
Provisional	1180	1147	139
Court-Ordered	127	126	27
ICPC	182	176	20
Rejected	20	--	--
<b>Totals</b>	<b>7213</b>	<b>5994</b>	<b>654</b>

\*July1 - December 31, 2015

The "Open Foster Home Eligibility Summary and Detail" report on CHRIS Net also assists Resource Workers, supervisors and management in monitoring the criminal background check requirement for DCFS providers. This report summarizes by county the number of foster homes by Eligible and Not Eligible Status, and staff can drill down to individual providers to get more detailed information regarding providers who are Non IVE-Eligible including the specific reason why providers are not currently eligible.

Item 33 describes Arkansas's Policy Waiver and Alternative Compliance processes, which comply with the requirements outlined in the Child Welfare Agency Licensing Act.

The crimes that require an alternative compliance from the CWARB are outlined in Appendix 8, as are the specific offenses/crimes for which a person may not ever request an AC because they are prohibited.

Consistent with the Act, the following crimes require an Alternative Compliance from the CWARB:

- A. Criminal attempt
- B. Criminal complicity
- C. Criminal conspiracy
- D. Criminal solicitation
- E. Assault in the first, second, or third degree
- F. Aggravated assault
- G. Aggravated assault on a family or household member
- H. Battery in the first, second, or third degree
- I. Breaking or entering
- J. Burglary
- K. Coercion
- L. Computer crimes against minors
- M. Contributing to the delinquency of a juvenile
- N. Contributing to the delinquency of a minor

- O. Criminal impersonation
- P. Criminal use of a prohibited weapon
- Q. Communicating a death threat concerning a school employee or student
- R. Domestic battery in the first, second, or third degree
- S. Employing or consenting to the use of a child in a sexual performance
- T. Endangering the welfare of a minor in the first or second degree
- U. Endangering the welfare of an incompetent person in the second degree
- V. Engaging children in sexually explicit conduct for use in visual or print media
- W. False imprisonment in the first or second degree
- X. Felony abuse of an endangered or impaired person
- Y. Felony interference with a law enforcement officer
- Z. Felony violation of the Uniform Controlled Substance Act
- AA. Financial identity fraud
- BB. Forgery
- CC. Incest
- DD. Interference with court ordered custody
- EE. Interference with visitation
- FF. Introduction of controlled substance into the body of another person
- GG. Manslaughter
- HH. Negligent homicide
- II. Obscene performance at a live public show
- JJ. Offense of cruelty to animals
- KK. Offense of aggravated cruelty to dog, cat, or horse;
- LL. Pandering or possessing visual or print medium depicting sexually explicit conduct involving a child
- MM. Sexual solicitation
- NN. Permanent detention or restraint
- OO. Permitting abuse of a minor
- PP. Producing, directing, or promoting a sexual performance by a child
- QQ. Promoting obscene materials
- RR. Promoting obscene performance
- SS. Promoting prostitution in the first, second, or third degree
- TT. Prostitution
- UU. Public display of obscenity
- VV. Resisting arrest
- WW. Robbery
- XX. Aggravated robbery
- YY. Sexual offenses
- ZZ. Simultaneous possession of drugs and firearms
- AAA. Soliciting money or property from incompetents
- BBB. Stalking
- CCC. Terroristic act
- DDD. Terroristic threatening
- EEE. Theft of public benefits
- FFF. Theft by receiving
- GGG. Theft of property

- HHH. Theft of services
- III. Transportation of minors for prohibited sexual conduct
- JJJ. Unlawful discharge of a firearm from a vehicle
- KKK. Voyeurism

An alternative compliance may not be requested by any individual who has pleaded guilty or nolo contendere to, or has been found guilty of any of the following offenses as he or she is permanently disqualified from being a foster or adoptive parent per A.C.A. §9-28-409(e)(1):

- A. Abuse of an endangered or impaired person, if felony
- B. Arson
- C. Capital murder
- D. Endangering the welfare of an incompetent person in the first degree
- E. Kidnapping
- F. Murder in the first or second degree
- G. Rape
- H. Sexual assault in the first or second degree

An alternative compliance may not be requested by any prospective foster or adoptive parent with a felony conviction for the following offenses, as no foster child in DHS custody may be placed in such an individual's home:

- A. Child abuse or neglect
- B. Spousal abuse or domestic battery
- C. A crime against children, including child pornography
- D. A crime involving violence, including rape, sexual assault, or homicide, but not including other physical assault or battery

A prospective foster or adoptive parent may request an alternative compliance for a felony conviction for physical assault, battery or a drug-related offense if the offense was not committed within the past five years. If an applicant produces evidence that a conviction has been expunged or sealed, this information must be forwarded to the Office of Chief Counsel for review.

#### *Case Planning Process with Provisions for Addressing Safety of Placements*

DCFS Policy IV-B, Services Case Plan, outlines that consideration of the health and safety of children must be included in the case planning process for all children involved in all case types. Furthermore, Procedure IV-B1, delineates how the case planning process must include a plan for ensuring that children receive safe and proper care.



The assessment of Item 33 describes the monitoring and reevaluation processes of both PRLU and DCFS for placement resources. These processes include physical inspections of foster homes and other placement providers to identify and mitigate any safety concerns.

Additionally, DCFS Policy VII-K, Child Maltreatment Allegations Concerning Out-of-Home Placements, provides that all child maltreatment allegations concerning any person in a foster home shall be investigated in accordance with the Child Maltreatment Act (§ 12-18-602). The safety and welfare of all children in foster care are paramount to DCFS. If any child in foster care is the subject (alleged offender or alleged victim) of an allegation of child abuse and/or neglect, the Division must notify the child's family, the OCC attorney, Child Abuse Hotline, the child's CASA and the child's attorney ad litem. The attorneys ad litem for all other children placed in the home must be notified as well.

For all Priority I allegations, if the alleged offender is a foster parent or any other member of the foster family household, then all the children in foster care in that home will be immediately removed from that foster home. If the alleged offender is a child in foster care, unless he or she is the only child in the home, then the alleged offender child will be removed from that home and placed in a foster home without any other children. Any exceptions to this policy must be approved and documented by the Assistant Director of Community Services.

When any foster home is the subject of a Priority II child maltreatment allegation, an evaluation will be conducted on an individual basis to determine if the children can safely remain in the home during the investigation. If it can be shown that it is in the best interest of any of the children currently placed in that foster home, a protection plan may be considered to allow any or all of the children to remain in the home. If the safety and welfare standards of the Division cannot be met and the children cannot safely remain in the home, the children in care shall be removed and placed in another approved foster home.

While any foster home is being investigated because of a maltreatment allegation, Priority I or II, no additional children in foster care may be placed in the home. Resource workers are notified by the Area Director of any maltreatment allegations concerning foster homes.

If the Priority I or II report is unsubstantiated, consideration will be given to returning any children who were removed from the foster home as a result of the allegation. This is determined by holding a staffing so that all stakeholders may have input. Decisions are made on a case by case basis and must be based on the best interest of the child. If the report of Priority II maltreatment is an investigative true finding, the protection plan must be reevaluated if the children are allowed to remain in the home during the administrative hearing process.

Regardless of the finding, upon completion of a child maltreatment investigation, the resource worker must reevaluate the foster home if the home is to remain open.

For all investigative determinations where allegations of Priority II child maltreatment are found true and upheld by the administrative hearing, the well-being of each child who is in the home must be reassessed on an individual basis. If it can be shown that it is in the best interest of any child to remain in that home, then a waiver or alternative compliance may be requested so that the home may remain open to care for that child. In those cases where the foster home is allowed to remain open, if the foster parents wish to be considered for the placement of additional children, a reevaluation of the home will be conducted before any additional child is considered for placement in that home regardless of the finding of the investigation and/or the administrative hearing ruling. The reevaluation will determine if any corrective actions, a revised Individualized Training Plan, etc. are necessary to ensure the health and safety of any and all children placed in the home.

Procedure VII-K1 describes the processes associated with initial responses to reports of maltreatment in out-of-home placements, while Procedure VII-K2 delineates the steps which must be taken when the report results in a True finding. Similarly, Procedure VII-K3 outlines for staff how to respond when the True findings are reversed on administrative appeal, whereas Procedure VII-K3 summarizes the processes for responding to True findings upheld on administrative appeal.

## **Conclusion**

Based on the abovementioned information, Arkansas finds that its foster and adoptive parent licensing, recruitment, and retention system is functioning effectively 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. Accordingly, the State assesses Item 34, Criminal Background Check Requirements, to be a **Strength**.

**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:**

The Foster Parent Recruitment and Retention Activity Update on pages 132 through 166 within Arkansas's 2015 APSR provides a summary of DCFS' efforts to recruit, support and retain quality foster families to care for children and youth within the foster care system. Similarly, the Adoptions section on pages 172 through 178 of the APSR furnishes a solid overview of Arkansas's efforts to recruit and support adoptive families for those children in care awaiting forever families.

The number of children in foster care in Arkansas has been steadily increasing over the past year, and there are not enough foster homes to meet children's needs. As of March 9, 2016, there were nearly 4,800 children in the State's custody, which represents an increase of approximately 900 children from a year prior. There are currently fewer than 3,200 beds in roughly 1,400 homes licensed to accept children in care, equaling only 0.66 foster home beds per foster child across the state. With less than one licensed, approved foster home bed for each child in care, DCFS staff are often forced to place children based on the availability of placements versus on the individual needs of children. The shortage of placement resources is not a new phenomenon in Arkansas, but the problem has only been exacerbated by the increase in the number of children entering and remaining in the foster care system.

Arkansas is committed to providing permanent, lasting placements for children and youth in foster care by having a pool of available foster and adoptive families who both reflect their characteristics and address their need for permanent homes and lifelong connections. As a result, the Division of Children and Family Services applied for and received the Title IV-E Demonstration Waiver Project in 2012 and the Diligent Recruitment of Families for Children in the Foster Care System federal grant (HHS-2013-ACF-ACYF-CO-0593) in 2013 to recruit and retain quality foster families to care for children and youth in the State's foster care system. DCFS is using the funding to implement Arkansas Creating Connections for Children Program (ARCCC), a comprehensive, multi-faceted and community-based diligent recruitment program based on Annie E. Casey Foundation's *Family to Family* model.

ARCCC comprises three primary components, including 1.) Community Outreach and Development, 2.) Recruitment and 3.) Retention and Support and is staffed by a program manager, program lead (for the grant) and ten community engagement specialists (CES) responsible for implementing the program. These strategies are designed to recruit, train, and support a cadre of foster and adoptive families who reflect the characteristics of the children in foster care so they can assist young people with establishing lifelong connections and achieving permanency in the shortest time possible. ARCCC combines technology, e.g., geospatial mapping, with evidence-informed practices to recruit and support a pool of qualified resource families in the highest need communities to serve the populations most in need. The program targets specific counties with limited placement resources and adapts specific recruitment strategies to different communities based on the characteristics of the children in foster care from those communities.

Although ARCCC staff will focus primarily on recruitment activities, the values and principles of *Family to Family* provide that all levels of staff should understand the profiles of children entering foster care and the resource family needs for their respective jurisdictions. In this way, recruitment is not the responsibility of a particular group of staff. Instead, it is everyone's responsibility to recruit and support resource families. This underlying tenet of *Family to Family* is encapsulated in the notion that recruitment is everyone's business (RIEB). All levels of staff support the recruitment and retention of resource families as do other stakeholders, e.g., community members, foster/adoptive parents, businesses, civic groups, religious organizations, and schools.

ARCCC was designed to accomplish the following objectives: 1.) To develop a network of foster families that is more neighborhood-based, culturally sensitive and strategically located in the communities where youth live; 2.) To reduce reliance on institutional and congregate care by meeting the needs of many more of the youth in those settings through family foster care; 3.) To increase the number and quality of foster families to meet projected needs; and 4.) To reduce the length of time children stay in care.

More information regarding ARCCC's implementation is available within Arkansas's 2015 Annual Progress and Services Report. The APSR also outlines the challenges DCFS faced in its initial implementation of the program, including delays in hiring of the CESs (and turnover in these positions), development of the geographic information system website and corresponding recruitment data, and identification of training curricula and customer services standards related to *Family to Family*.

ARCCC program staff have made considerable progress in overcoming some of these obstacles since the 2015 APSR, which will be captured in Arkansas's upcoming 2016 APSR. Much of this progress is attributable to the technical assistance provided to DCFS by the National Resource Center for Diligent Recruitment (NRCDR), as well as the tenacity of the ARCCC staff. The NRCDR has assisted ARCCC in developing a work plan, local recruitment teams, and the program's Recruitment Planning Tool.. Further, the collaboration with the NRCDR has assisted the ARCCC team in identifying the data needed to inform the recruitment process, which is used in updating each

service area's Recruitment Planning Tool. These tools are tailored to individual service areas and counties based on the data, e.g., demographics and characteristics of children in care, licensed foster families, and applicants. They identify target populations, measurable goals, recruitment strategies and other elements needed to develop local recruitment plans. The Recruitment Planning Tools are reassessed and updated at least semi-annually, as are the local recruitment plans to ensure that all activities and decision-making are based on current data.

### *Adoptions: SFY 2015*

During SFY 2015, 711 adoptions were finalized. The median length of time from entry into foster care until finalization of adoption for children whose adoptions were finalized during SFY 2015 was 23.6 months, three months sooner than the national standard of 27.3 months. Children ages 2 to 5 represented the largest group of children who were adopted during SFY 2015 and, of the children adopted during the fiscal year, 67 percent were white and 14 percent were black.

At the end of SFY 2015, 586 children were available for adoption. Children available for adoption are defined as those who have a termination of parental rights on both parents and a goal of adoption. Of the available children, 56 percent were white and 22 percent were black. The largest group ranged in age from ten to 13 years old.

### *Ethnic and Racial Diversity*

As of March 20, 2016, there were 4,831 children in the State's custody, 49 percent of whom were female. The following tables provide a breakdown of the race, ethnicity and ages of these children.

**Race/Ethnicity of Children in Foster Care**

<b>Race / Ethnicity</b>	<b>N</b>	<b>%</b>
WHITE	2974	61.6
BLACK	946	19.6
MULTIPLE	569	11.8
HISPANIC	293	6.1
AIAN	17	0.4
ASIAN	9	0.2
NAPI	8	0.2
UTD	15	0.3
<b>TOTALS</b>	<b>4831</b>	<b>100.0</b>

\*Data current as of 3/20/2016

**Ages of Children in Foster Care**

<b>Age Category</b>	<b>N</b>	<b>%</b>
0 to 1	870	18.0
2 to 5	1206	25.0
6 to 11	1318	27.3
12 to 15	756	15.6
16 to 18	573	11.9
Older than 18	107	2.2
Age Unknown	1	0.0
<b>Totals</b>	<b>4831</b>	<b>100.0</b>

\*Data current as of 3/20/2016

There were 591 children available for adoption as of March 20, 2016, of whom 40 percent were female. The following tables outline the race, ethnicity and ages of the children available for adoption.

**Race/Ethnicity of Children Available For Adoption**

<b>Race / Ethnicity</b>	<b>N</b>	<b>%</b>
WHITE	344	58.2
BLACK	113	19.1
MULTIPLE	85	14.4
HISPANIC	45	7.6
AIAN	2	0.3
UTD	2	0.3
<b>TOTALS</b>	<b>591</b>	<b>100.0</b>

\*Data current as of 3/20/2016

**Ages of Children Available For Adoption**

<b>Age Category</b>	<b>N</b>	<b>%</b>
0 to 1	31	5.2
2 to 5	118	20.0
6 to 11	199	33.7
12 to 15	187	31.6
16 to 18	55	9.3
Older than 18	1	0.2
<b>Totals</b>	<b>591</b>	<b>100.0</b>

\*Data current as of 3/20/2016

As of March 20, 2016, there were 3,271 foster/pre-adoptive parents documented for 1,887 resource homes. Fifty-five percent of these adults were female. The following tables delineate the race, ethnicity and ages of these parents.

#### Race/Ethnicity of Foster/Pre-Adoptive Parents

Race / Ethnicity	N	%
WHITE	2767	84.6
BLACK	393	12.0
HISPANIC	59	1.8
MULTIPLE	26	0.8
ASIAN	12	0.4
AIAN	8	0.2
NAPI	5	0.2
UTD	1	0.0
TOTLAS	3271	100.0

\*Data current as of 3/20/2016

#### Ages of Foster/Pre-Adoptive Parents

Age Category	N	%
20 to 29	341	10.4
30 to 39	1226	37.5
40 to 49	921	28.2
50 to 59	531	16.2
60 to 69	228	7.0
70 or Older	24	0.7
Totals	3271	100.0

\*Data current as of 3/20/2016

Of Arkansas's currently licensed, approved foster and pre-adoptive families, 66 percent of the parents are between the ages of 30 and 49 which is appropriate given the ages of the children in foster care and available for adoption. White families constitute over four-fifths of available families whereas white children constitute three-fifths of those in foster care and who are available for adoption; as such, white families tend to be overrepresented among foster and adoptive parents. About 12 percent of the available families are Black compared to about 20 percent of the children who are Black not counting an additional 14 percent of multiple races.

## Conclusion

Arkansas continues to have a shortage of foster and adoptive families although recruitment efforts, not reflected in the documented number of homes, stand to add hundreds of new resources in light of the response. Despite areas of strength and notable growth, the State finds that the foster and adoptive parent licensing, recruitment, and retention system is currently not functioning well enough 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. While there are some jurisdictions in which such diligent recruitment efforts are occurring, these efforts are not consistent in all counties across the state.

Subsequently, Arkansas assesses Item 35, Diligent Recruitment of Foster and Adoptive Homes, to be an **Area Needing Improvement**. In order to increase its same race placements, DCFS should focus recruitment efforts with families of color, perhaps prioritizing them for home studies and licensing among those who have already expressed interest through the current recruitment processes.



**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:**

Arkansas's Interstate Compact Placement of Children (ICPC) Unit assists in moving children in need of a foster care or pre-adoptive placement, as well as adoption, across state lines. The unit also assists to reunify children with parents in an orderly and timely manner when they are living in another state. When a child requires foster care or adoptive placement outside the resident state, DCFS will use the ICPC process. Arkansas will work with other state's ICPC units to request home studies be completed of prospective foster or adoptive placements, while other states will contact Arkansas's ICPC unit to request the same.

FSWs work with their Area ICPC liaisons to connect to other states' ICPC offices. Following adherence with national best practices, Arkansas will not grant custody to the out-of-state placement resource until at least six months of supervision has been completed.

Within 60 days of receiving a request from another state to complete a home study, the ICPC Unit will assess the placement to ensure the placement is "not contrary to the interests of the child." The approval process is similar to that done for Arkansas's in-state placement resources; for instance, a child maltreatment registry check is conducted, as well as criminal record check with both the state police and the FBI. A SAFE home study is also completed. A recommendation will be made by the FSW supervisor or Area Director for or against the placement while the Adoption Manager will authorize the adoption home study. A placement approval (ICPC-100A) will be completed and sent to the sending state.

To the extent the placement comes to fruition, Arkansas, upon receipt of the child into the Arkansas home, will supervise the placement and provide or arrange needed services. Quarterly progress reports are completed, describing the frequency of the monthly visits to the child, where those visits took place and what was discussed and

identified as strengths as well as service needs. The quarterly reports are submitted to Arkansas's ICPC Central Office who in turn forwards them to the sending state.

As described above, children involved in an ICPC case should receive at least one face-to-face contact with DCFS staff during each calendar month (assuming the case was open for the entirety of that calendar month). Between July 1 and December 31, 2015, there were 1,225 total months in which a face-to-face contact should have been made for ICPC cases. Of those 1,225 months in which a visit should have been completed, DCFS staff completed a visit for 735 of them (60 percent).

### *Stakeholder Input*

Overall, focus groups with stakeholders revealed that out of state placements involving ICPC is always a slow process. Legal stakeholders blamed issues with "Reg. 7's" (short for Regulation No. 7, which refers to ICPS Priority Placements) not being completed in a timely fashion which create long waiting times for placement. They also mentioned that the increased number of children in foster care forces a relatively large portion of children to be placed outside of their home counties, even though they prefer to keep children in the area so they can work with local therapists to facilitate the moves. When working with Native American tribes, stakeholders did mention positive interaction, as well as staff doing a good job of asking about any Native American heritage and some tribes wanting to be involved by sending representatives to hearings. However, others mentioned tribes not wanting to get involved, indicating collaboration varies across the state.

### **Conclusion**

Although Arkansas has a number of policies and procedures related to ICPC and cross-jurisdictional resources for permanent placements, DCFS does not have sufficient data to be able to fully assess the effectiveness of the system in using cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children statewide. From the limited amount of quantitative and qualitative data that is available, however, it does not appear that the system is functioning well in this regard. Consequently, Arkansas assesses Item 36 to be an **Area Needing Improvement**.

## **Appendix A: Arkansas Round 3 CFSR Focus Group Protocol**

### **Purpose of the Focus Groups**

Child and Family Services Reviews (CFSR) are federal monitoring tools used to evaluate state child welfare systems (title IV-B and IV-E programs) that focus on the safety, permanency and well-being outcomes and experiences of children and families. Arkansas has embraced the CFSR process as an effective means by which to evaluate the strengths and areas of challenge within its own system, including how the system has progressed over time as well as how the state compares nationally. The Division of Children and Family Services uses the CFSR Onsite Review Instrument for its ongoing qualitative case review process, which constitute a central component of its continuous quality improvement system. Stakeholder input (e.g., through interviews with children, families, agency staff, service providers, etc.) is an indispensable component of those reviews and has instilled within DCFS the value and necessity of hearing directly from the stakeholders involved in the system in assessing its functioning and effectiveness. As a result, the Division will be interviewing between 100 and 200 stakeholders for the Round 3 CFSR Statewide Assessment to inform the assessment of Arkansas's functioning on the seven systemic factors. These interviews will take the form of focus group interviews that will be conducted across the state during February and March 2016.

### **Logistics**

Stakeholder interviews constitute a valuable source of qualitative data for most evaluation processes, but particularly for the CFSRs because they allow State officials to hear directly from the people who "live" the system regarding their experiences. However, for stakeholder interviews to be both valid and reliable sources of information for the purposes of the CFSRs, they need to be representative of the entire state. Interviewing a few stakeholders from one or two counties is not sufficient; as such limited perspective cannot speak to the functioning of the system statewide. Therefore, DCFS will conduct focus groups with similar groups of stakeholders from across Arkansas.

### *Locales*

Because traveling to all 75 counties is not practical given the relatively limited capacities of Arkansas's small CFSR Planning Team, DCFS will hold the focus groups in five easily accessible locations in different regions of the state and invite stakeholders from the surrounding communities. Specifically, the Division will hold the sessions at the five MidSOUTH Training Academies, where staff, providers and foster and adoptive parents are already accustomed to going to training and other types of meetings. The Academies are located in Fayetteville (Northwest AR), Arkadelphia (Southwest AR), Monticello (Southeast AR), Jonesboro (Northeast AR) and Little Rock (Central AR).

Stakeholders from all ten of DCFS' geographic service areas will be invited, and the CFSR Planning Team will seek to involve stakeholders from as many of Arkansas's 75 counties as possible. For example, for the sessions at the Fayetteville MidSOUTH Training Academy, DCFS will invite stakeholders from the 16 northwestern most counties in the state and, because of its centralized location, the Division will invite stakeholders from the 20 or so most central counties to the Little Rock groups.

### *Group Composition*

In an attempt to get input from as many different stakeholder groups as possible, DCFS will hold eight (8) focus groups in each of the five (5) Academies, totaling 40 groups across the state. Additionally, the Division will likely hold at least a couple of focus groups in central office, e.g., for area directors, executive staff, etc. The composition of the eight groups to be held in the five different regions is as follows:

- **Focus Group 1: Training** – MidSOUTH Training Staff, Field Trainers and University Partners
- **Focus Group 2: Supervision and Management** – FSW Supervisors (Unit-level), FSW County Supervisors and Area Supervisors / Area Coordinators
- **Focus Group 3: Services and Supports** – Program Assistants, Adoption Specialists, Health Services Workers, Resource Workers, Transitional Youth Services Coordinators and Licensing Specialists
- **Focus Group 4: Investigations and Casework** – CACD Investigators and DCFS Family Service Workers, including Investigations, In-Home (Differential Response and Protective Services) and Foster Care
- **Focus Group 6: Placement Providers** – Therapeutic Foster Care, Residential, Emergency Shelters, Acute, Crisis Residential Treatment
- **Focus Group 5: Service Providers** – Counseling, Substance Abuse Treatment, System of Care / Wraparound, Intensive Family Services and Home Studies
- **Focus Group 7: Foster Parents** – Licensed, approved foster families
- **Focus Group 8: Legal** – Office of Chief Counsel Attorneys, Attorneys Ad Litem, CASA and Parent Counsel

### *Schedule*

The schedule for the 40 focus groups is as follows:

#### FAYETTEVILLE

##### *Monday, February 1<sup>st</sup>*

- 9:00am–10:30am – Focus Group 1: Training
- 11:00am–12:30pm – Focus Group 2: Supervision and Management
- 1:00pm–2:30pm – Focus Group 3: Services and Supports
- 3:00pm–4:30pm – Focus Group 4: Investigations and Casework

*Tuesday, February 2<sup>nd</sup>*

- 8:30am–10:00am – Focus Group 5: Service Providers
- 10:30am–12:00pm – Focus Group 6: Placement Providers
- 12:30pm–2:00pm – Focus Group 7: Foster Parents
- 2:30pm–4:00pm – Focus Group 8: Legal

MONTICELLO*Thursday, February 4<sup>th</sup>*

- 9:00am–10:30am – Focus Group 1: Training
- 11:00am–12:30pm – Focus Group 2: Supervision and Management
- 1:00pm–2:30pm – Focus Group 3: Services and Supports
- 3:00pm–4:30pm – Focus Group 4: Investigations and Casework

*Friday, February 5<sup>th</sup>*

- 8:30am–10:00am – Focus Group 5: Service Providers
- 10:30am–12:00pm – Focus Group 6: Placement Providers
- 12:30pm–2:00pm – Focus Group 7: Foster Parents
- 2:30pm–4:00pm – Focus Group 8: Legal

LITTLE ROCK*Monday, February 8<sup>th</sup>*

- 9:00am–10:30am – Focus Group 1: Training
- 11:00am–12:30pm – Focus Group 2: Supervision and Management
- 1:00pm–2:30pm – Focus Group 3: Services and Supports
- 3:00pm–4:30pm – Focus Group 4: Investigations and Casework

*Tuesday, February 9<sup>th</sup>*

- 8:30am–10:00am – Focus Group 5: Service Providers
- 10:30am–12:00pm – Focus Group 6: Placement Providers
- 12:30pm–2:00pm – Focus Group 7: Foster Parents
- 2:30pm–4:00pm – Focus Group 8: Legal

ARKADELPHIA*Thursday, February 11<sup>th</sup>*

- 9:00am–10:30am – Focus Group 1: Training
- 11:00am–12:30pm – Focus Group 2: Supervision and Management
- 1:00pm–2:30pm – Focus Group 3: Services and Supports
- 3:00pm–4:30pm – Focus Group 4: Investigations and Casework

*Friday, February 12<sup>th</sup>*

- 8:30am–10:00am – Focus Group 5: Service Providers
- 10:30am–12:00pm – Focus Group 6: Placement Providers
- 12:30pm–2:00pm – Focus Group 7: Foster Parents
- 2:30pm–4:00pm – Focus Group 8: Legal

JONESBORO*Tuesday, February 23<sup>rd</sup>*

- 9:00am–10:30am – Focus Group 5: Service Providers
- 11:00am–12:30pm – Focus Group 6: Placement Providers
- 1:00pm–2:30pm – Focus Group 7: Foster Parents
- 3:00pm–4:30pm – Focus Group 8: Legal

*Wednesday, February 24<sup>th</sup>*

- 8:30am–10:00am – Focus Group 1: Training
- 10:30am–12:00pm – Focus Group 2: Supervision and Management
- 12:30pm–2:00pm – Focus Group 3: Services and Supports
- 2:30pm–4:00pm – Focus Group 4: Investigations and Casework

**Focus Group Interview Questions**

To ensure that the State is assessing each of the systemic factors in a manner consistent with the federal expectations, Arkansas will use the questions from the CFSR Stakeholder Interview Guide (SIG) for the focus group interview questions. Every question will not be necessary for every group, or any groups in some instances. Rather, the CFSR Planning Team will specify the questions that will be asked of selected stakeholders. The team will select the stakeholders and relevant interview questions based on the information needed for the statewide assessment. The exact questions from the SIG will be used with little variance. Furthermore, the same questions will be asked of each focus group consisting of the same types of stakeholders. For example, all five Focus Group 4's (Investigations and Casework) will be asked the same questions.

Arkansas will also use the supplemental for the Stakeholder Interview Guide developed by the Children's Bureau as a tool to provide alternative language and phrases that interviewers can apply to all the Stakeholder Interview Guide questions, if needed. When using alternative language and phrasing, moderators will not to veer from the substance of the question that targets critical stakeholder information needed to assess and rate each systemic factor item. The central aim is to collect data and/or information that show how well each systemic factor item is functioning statewide. When alternative language or phrases are used, the moderator will confirm that the stakeholders understand the focus of the question. The moderator will always ask the questions

directly from the SIG and will only follow up with alternative language when needed to convey to the stakeholders what specifically is being asked of them.

Each systemic factor is composed of one or more items. For example, the statewide information system and case review system systemic factors are composed of one and five items, respectively. When a systemic factor is addressed with a focus group, all of the pertinent questions from the SIG will be asked of that group. Within the stakeholder interview guide, the questions are listed under each systemic factor item. Some questions are followed by follow-up questions. Follow-up questions will be used as prompts when interviewees do not provide the needed information when responding to the broader prior questions. Again, focus group moderators will not veer from the *substance* of a question to gather extraneous information that is not needed for the purposes of the review. Furthermore, it will be noted for each focus group that the review focuses on the most recent data and information, and participants will be asked to confine their responses to information that is reflective of that time period.

Moderators will use *specific group outlines* for individual focus groups. The requisite follow-up questions will be asked for each item, as needed, to ensure a complete assessment. The following group outlines identify the specific questions from the SIG that will be asked of each group:

- **Focus Group 1: Training**
  - Item 25: QA System
  - Item 26: Initial Staff Training
  - Item 27: Ongoing Staff Training
  - Item 28: Foster / Adoptive Parent Training
  - Item 29: Array of Services
  - Item 30: Individualizing Services
  - Item 31: State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR
  
- **Focus Group 2: Supervision and Management**
  - Item 20: Written Case Plan
  - Item 21: Periodic Review
  - Item 22: Permanency Hearings
  - Item 23: Termination of Parental Rights
  - Item 25: Quality Assurance System
  - Item 26: Initial Staff Training
  - Item 27: Ongoing Staff Training
  - Item 29: Array of Services
  - Item 30: Individualizing Services
  
- **Focus Group 3: Services and Supports**
  - Item 26: Initial Staff Training
  - Item 27: Ongoing Staff Training
  - Item 29: Array of Services

- Item 30: Individualizing Services
- **Focus Group 4: Investigations and Casework**
  - Item 20: Written Case Plan
  - Item 21: Periodic Review
  - Item 22: Permanency Hearings
  - Item 23: Termination of Parental Rights
  - Item 24: Notice of Hearings and Reviews to Caregivers
  - Item 26: Initial Staff Training
  - Item 27: Ongoing Staff Training
  - Item 29: Array of Services
  - Item 30: Individualizing Services
  - Item 32: Coordination of CFSP Services w/ Other Federal Programs
  - Item 36: State Use of Cross-Jurisdictional Resources for Permanent Placements
- **Focus Group 5: Service Providers**
  - Item 25: Quality Assurance System
  - Item 29: Array of Services
  - Item 30: Individualizing Services
  - Item 31: State Engagement & Consultation w/ Stakeholders Pursuant to CFSP & APSR
  - Item 32: Coordination of CFSP Services w/ Other Federal Programs
- **Focus Group 6: Placement Providers**
  - Item 24: Notice of Hearings and Reviews to Caregivers
  - Item 26: Initial Staff Training
  - Item 27: Ongoing Staff Training
  - Item 28: Foster and Adoptive Parent Training
  - Item 29: Array of Services
  - Item 30: Individualizing Services
  - Item 31: State Engagement & Consultation w/ Stakeholders Pursuant to CFSP & APSR
  - Item 32: Coordination of CFSP Services w/ Other Federal Programs
- **Focus Group 7: Foster Parents**
  - Item 20: Written Case Plan
  - Item 24: Notice of Hearings and Reviews to Caregivers
  - Item 28: Foster and Adoptive Parent Training
  - Item 29: Array of Services
  - Item 30: Individualizing Services
  - Item 31: State Engagement & Consultation w/ Stakeholders Pursuant to CFSP & APSR
- **Focus Group 8: Legal**
  - Item 20: Written Case Plan



- Item 21: Periodic Review
  - Item 22: Permanency Hearings
  - Item 23: Termination of Parental Rights
  - Item 24: Notice of Hearings and Reviews to Caregivers
  - Item 29: Array of Services
  - Item 30: Individualizing Services
  - Item 36: State Use of Cross-Jurisdictional Resources for Permanent Placements
- **Focus Group 9: Area Directors / Executive Staff**
    - Item 20: Written Case Plan
    - Item 21: Periodic Review
    - Item 22: Permanency Hearings
    - Item 23: Termination of Parental Rights
    - Item 24: Notice of Hearings and Reviews to Caregivers
    - Item 25: Quality Assurance System
    - Item 26: Initial Staff Training
    - Item 27: Ongoing Staff Training
    - Item 28: Foster and Adoptive Parent Training
    - Item 29: Array of Services
    - Item 30: Individualizing Services
    - Item 31: State Engagement & Consultation w/ Stakeholders Pursuant to CFSP & APSR
    - Item 32: Coordination of CFSP Services w/ Other Federal Programs
- **Focus Group 10: Tribal Representatives**
    - Item 20: Written Case Plan
    - Item 21: Periodic Review
    - Item 22: Permanency Hearings
    - Item 23: Termination of Parental Rights
    - Item 24: Notice of Hearings and Reviews to Caregivers
    - Item 29: Array of Services
    - Item 30: Individualizing Services
    - Item 31: State Engagement & Consultation w/ Stakeholders Pursuant to CFSP & APSR

### **Preparing for the Focus Groups**

Focus group facilitators and note-takers should become thoroughly familiar with the questions in the Stakeholder Interview Guide (SIG) before beginning the interviews. Moderators should note that stakeholders may provide information out of sequence from the order of the SIG.

**Consent**

Each focus group participant will be given and asked to sign a consent form stating that they agree to participate in the interviews, that they recognize that their comments will, as much as possible, be kept confidential and that they too are asked to not disclose any individual's comments outside of the group.

**Note-taking**

In addition to a moderator, each focus group will be assigned a primary note-taker and at least one back-up note-taker. Each stakeholder's comments will be documented. However, note-takers will not use participant's names when attributing comments to them. Instead, both the primary and back-up note-taker will use a numbering scheme based on the seating in the room to capture each comment from a particular stakeholder. Notes will be typed, either during or after each focus group. All of the notes will then be compiled and analyzed for inclusion in the statewide assessment.