

*North Carolina's
Child and Family Services Plan
FY 2015 - 2019*

2017 Annual Progress and Services Report

SUBMITTED JUNE 2016

Application for Funding:

- Stephanie Tubbs Jones Child Welfare Services (CWS)...
Title IV-B of the Social Security Act, Subpart 1
- Promoting Safe and Stable Families (PSSF)...
Title IV-B of the Social Security Act, Subpart 2
- Chafee Foster Care Independence Program (CFCIP) and
Education and Training Vouchers (ETV) Programs ...

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Executive Summary

The submission of the 2017 Annual Progress and Services Report (APSR) is required of all state agencies that administer or supervise the Title IV-B, subparts 1 (IV-B 1) and 2 (IV-B 2), and Title IV-E of the Social Security Act and provides an accounting of the programs and services delivered in North Carolina (NC). The contents of this plan are dictated by the U.S. Department of Health and Human Services, Administration on Children, Youth and Families (ACYF), Program Instruction ACYF-CB-PI-16-03.

The NC Department of Health and Human Services (NC DHHS) has determined that to be successful in fulfilling its vision that all North Carolinians enjoy optimal health and well-being, the following values should be infused into every aspect of our work:

- Customer-focused
- Anticipatory
- Collaborative
- Transparent
- Results-based

Incorporated into this vision statement is our mission statement that our work with families will be conducted in collaboration with our partners, in a manner that protects health and safety while providing essential human services. NC DHHS continues to implement its five service goals (<http://www.ncdhhs.gov/excel/>) and NC Division of Social Services (NC DSS) is infusing these service goals into all aspects of its child-serving, Child Welfare Services Program, as evidenced through NC DHHS Open Window (<http://dhhsopenwindow.nc.gov/>). NC DHHS Open Window captures important information on all NC DHHS services and programs, as well as the contracts that support them. Open Window also contains key planning and performance information for NC DHHS as well as for other divisions and offices. Through Open Window, NC DHHS spells out what services, programs, and other contracts are provided, how they are funded, and whether our performance is producing the results we seek.

These service goals and performance measures guide the direction of our strategic planning efforts in conjunction with the outcomes of the Child and Family Services Review Round 3 (CFSR R3). Strategic Planning and Program Improvement Planning (PIP) will continue to strengthen NC's Child Welfare System administered through NC DSS, while supporting and integrating all of the programs that serve the children and families of NC into a seamless child welfare continuum. These programs include: the IV-B, subparts 1 (also known as the Stephanie Tubbs Jones Child Welfare Services Program) and subparts 2 (also known as the Promoting Safe and Stable Families Program) of the Act; Monthly Caseworker Visit (MCV) funds; and the Chafee Foster Care Independence Program (CFCIP) and Education Training Vouchers (ETV) programs for older and/or former foster care youth; adoption incentive funds, and training funded through IV-B and IV-E. Consolidation of these service plans will help NC integrate the full array of child welfare services, from prevention and protection through permanency (45 CFR 1357.15(a)).

I. General Information

North Carolina's 2017 APSR integrates outcomes from the CFR R3 and builds on and modifies the 2015-2019 CFSP. This APSR is posted on NC DSS website <http://www.ncdhhs.gov>. The point of contact for this plan is:

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1. State Agency Administering the Programs

The NC DHHS is the designated state agency with authority to prepare and submit the APSR and is the sole state agency responsible for administering or supervising the administration of the Child Welfare Services Program in North Carolina. Therefore, in accordance with *45 CFR 1356.60(b)(2)*, activities will be cost allocated based on the benefiting program concept. Training activity costs will be shared under Title IV-E and other federal and local resources as part of the NC DSS Comprehensive Child Welfare Training Plan. These sources of funding, in combination with state appropriations, cover the expenses of the entire child welfare training program.

Ours is a state-supervised, county-administered child welfare system. North Carolina law (NC GS § 7B-302) specifically states that County Directors of Social Services are responsible for the provision of protective services for all children who are abused, neglected, or dependent.

2. Vision Statement

The vision for NC DHHS is noted in the Executive Summary. Additionally, the NC DSS vision includes family-centered practice principles and the provision of services that promote security and safety for all. The values underlying a family-centered practice approach include: providing services with respect to the individual's family, kin, friend, and community networks; acknowledging families as experts in their own situations; promoting families generating their own solutions and participating in planning and decision making; focusing on strengths; promoting both family empowerment and family/service provider accountability; respecting diversity; and engaging and partnering with community, local, and informal supports using the principles of partnerships as a guideline for service provision. The principles of partnership are as follows: (1) everyone desires respect, (2) everyone needs to be heard, (3) everyone has strengths, (4) judgments can wait, (5) partners share power, and (6) partnership is a process.

NC DSS renews its commitment to this vision of family-centered practice while elevating well-being into all of our conversations with children/youth, their families, and the communities that we engage.

II. 2017 APSR Requirements

1. Collaboration

Program Improvement Plan (PIP)

In the first quarter of calendar year 2016, NC DSS and the Children's Bureau coordinated a 2-day Child and Family Service Review summary/initial PIP development meeting that included broad-scope, root cause analysis as to why North Carolina was not in substantial conformity with any of the CFSR's 7 statewide data indicators or any of the 7 case review outcomes. Attendance at this event was overwhelming: participants included over 200 individuals representing not only state and county child welfare agencies, but collaborative partners including but not limited to tribes, courts, universities, service providers, parents, youth, foster parents, parent attorneys, and other state-level agencies within NC. After this initial meeting, it was determined that additional meetings would be needed to effectively capture stakeholder voices as North Carolina dove deeper into the root cause analysis and program improvement planning.

NC DSS, with assistance from the Jordan Institute for Families at the University of North Carolina (UNC-CH), facilitated 5 PIP workgroup sessions focused on (1) system infrastructure, (2) service collaboration, (3) court collaboration, (4) stakeholder engagement, and (5) county practice. An average of 48 participants attended each workgroup. Again, there was a tremendous representation of stakeholders across the child and family service system. Collaborative workgroups contributed to the development of a summary of root causes, goals, and strategies to produce a draft PIP.

Through this process, NC DSS was able to capitalize on many strong local community partnerships. North Carolina can build upon these local partnerships and collaborations to improve safety, permanency, and well-being outcomes for children and families. One challenge now being drafted into a PIP strategy is to assess how to best strengthen these community partnerships so they are all serving children and families most effectively.

Since North Carolina developed a PIP this fiscal year, specific goals and strategy realignments will be identified in the "Update to the Plan for Improvement" section below.

Going forward, stakeholders will continue to be involved in the upcoming year in the implementation of the goals and strategies and reporting of progress through various communication strategies including but not limited to surveys, e-mail correspondence, workgroup meetings, presentations, and webinars.

Joint Planning

Annually, NC DSS collaborates with the Children's Bureau and a wide range of stakeholders to engage in joint planning related to the APSR and overall child welfare system performance and improvement of NC's child welfare system. A joint planning meeting was held in March 2016 and was attended by individuals representing county child welfare agencies, courts, child advocacy centers, universities, youth, and others.

2. Update on Assessment of Performance

North Carolina completed its CFSR Statewide Assessment in 2015. It was not in substantial conformity with any of the CFSR statewide data indicators or case review outcomes. For a detailed update on the performance of our state's child welfare system, please refer to North Carolina's Child and Family Services Review Report, which can be found on the NC DSS web site: (<http://bit.ly/1Rr6MpG>).

3. Update to the Plan for Improvement and Progress Made to Improve Outcomes

Revisions to Goals, Objectives, and Interventions

NC's current CFSP includes the goal of expanding NC's continuous quality improvement (CQI) model, Reaching for Excellence and Accountability in Practice (REAP), statewide. After the Children's Bureau issued the Child and Family Services Review report in February 2016 outlining NC's outcome areas that were not in substantial conformity, North Carolina embarked on an extensive, inclusive process to develop a program improvement plan (PIP).

NC's draft PIP goals, strategies/objectives, and activities can be found in Appendix A. North Carolina has added its draft PIP to its 2015-2019 CFSP, thus updating our CFSP goals, objectives, and interventions.

NC believes the PIP, once it is approved by the Children's Bureau, will provide an opportunity to prioritize efforts toward strengthening child welfare services in North Carolina, including our quality assurance system, laying the groundwork to support a comprehensive CQI model (i.e., REAP) in the future.

Implementation Supports

The PIP process is affording NC the opportunity to develop a plan to meet technical assistance needs. NC is already working with the Capacity Building Center for States. Together with the Children's Bureau, potential technical assistance partners are being identified such as the National Child Welfare Workforce Institute, FRIENDS (Family Resource Information, Education and Network Development Services), the National Center for Community-Based Child Abuse Prevention, and the National Resource Center for Diligent Recruitment. The Capacity Building Center will continue to work with NC on promoting successful implementation of the newly identified/revised goals and strategies/objectives.

Progress Measures

Ten NC counties participated in the Onsite Review Instrument (OSRI) portion of the federal CFSR. Through the implementation of the PIP, these counties will continue to use the OSRI as one mechanism to measure improvement. Staff at the state level will also use the OSRI on cases randomly selected from the remaining 90 counties. This combined data will be used as an indication of progress improvement of the outcome areas. NC has identified activities to support each PIP goal and strategy/objective, providing data measures of completion dates and ultimately progress toward system improvement. Details on these activities can be found in Appendix B (NC's PIP Measurement Plan [draft]).

Progress Benchmarks

Since the submission of last year's APSR, NC has made progress with regard to the following CFSP benchmarks:

- Monitoring and Oversight through Monthly Caseworker Visits. In August 2015, NC DSS provided technical assistance to county social service agencies regarding the new federal requirements for caseworker visits effective 10/1/2014. Here is a link to that guidance: <https://www2.ncdhs.gov/dss/dcdl/famsupchildwelfare/CWS-05-2015.pdf>. Further detail on NC's progress with the outcome measures is available within this APSR in section II.7 (Monthly Caseworker Formula Grants).
- Expanding Trauma-Informed Practice in NC. North Carolina has continued to make meaningful progress in expanding trauma-informed practice statewide. Much of this progress is due to the hard work and success of those involved in Project Broadcast, a five-year initiative funded by ACYF (Grant #90CO1058). This project, which began in October 2011, is designed to improve safety, permanency, and well-being outcomes of children involved in the North Carolina child welfare system through improving their access to trauma- and evidence-informed practices and services. Highlights of this project include the following:
 - **Trauma Screenings**. The project developed two trauma screening tools for use by child welfare professionals – one for children under age six and one for children age six and older. Over the course of 36 months (January 2013 to December 2015), child welfare workers in 12 counties completed 9,714 trauma screenings, increasing our understanding of the trauma experiences of 6,651 unique children and allowing caseworkers to build plans and make decisions in response to that information.
 - **Child Welfare Workforce Development**. In SFY 2015-16, child welfare professionals from 12 counties began participating in a learning community designed to give them trauma knowledge and teach them strategies to spread that knowledge to their workforce and develop a plan to sustain a trauma-informed culture. In addition, project members were involved in a number of efforts described in section V.4. (Training Plan). This includes such activities as reviewing and embedding a trauma perspective in existing curricula, executing a trauma-related webinar on staff retention for which 274 people from 70 county DSS agencies registered, and ensuring trauma-informed information has been consistently highlighted in articles in the widely disseminated and read NC DSS publications *Fostering Perspectives* and *Child's Services Practice Notes*.
 - **Resource Parent Workforce Development**. Project Broadcast is using the National Child Traumatic Stress Network's *Caring for Children Who Have Experienced Trauma: A Workshop for Resource Parents* (commonly referred to as the "resource parent curriculum," or RPC) to train foster, adoptive, kinship, and therapeutic parents in project counties. The project is ensuring sustainability by simultaneously training child welfare and mental health professionals to facilitate the RPC training in the future. Twenty-two (22) individuals from both public and private child placing agencies are currently being trained in RPC through the 2015-

16 Learning Community. Approximately 56 individuals have been trained by Center for Child and Family Health (CCFH) or are in the process of being trained to conduct RPC throughout NC, either through funding from Project Broadcast or by leveraging other funding streams.

- ***Clinician Workforce Development.*** A 2015-16 Learning Collaborative funded by Project Broadcast is being conducted in the treatment model Attachment and Bio-Behavioral Catch-up (ABC), which focuses on young children birth to two years old. It began in August 2015 with 20 parent coaches from eight agencies (six public agencies, one Child Development Center, and one in-patient drug treatment center). Sixteen (16) parent coaches are still in training. Other funding is supporting additional Learning Collaboratives to increase the number of clinicians in NC who can provide evidence-based treatment in various trauma-informed modalities. These include, but are not limited to, 251 clinical participants and 88 senior leaders in Trauma-Focused Cognitive Behavioral Therapy (TF-CBT); 26 clinical participants and 10 senior leaders in Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS); 31 clinical participants and 9 senior leaders in Parent Child interaction Therapy (PCIT); and 39 clinicians and 10 senior leaders for Child Parent Psychotherapy (CPP). Overall, these learning collaboratives have the potential to graduate an additional 347 trauma-informed clinicians in our state.
- ***Collaboration across Systems of Care.*** The project continues to develop collaborative relationships to ensure children receive adequate services to meet their physical and mental health needs. A survey was conducted with all 100 counties regarding the strengths and needs of their relationships with their Local Management Entities/Management Care Organizations (LME/MCOs) as well as their local Community Care of North Carolina (CCNC) networks. The project convened a trauma summit with 14 county departments of social services and the eight LME/MCOs to continue dialogue about improving services. A behavioral health listserv was created to ensure timely communication to counties regarding behavioral health developments.

For a more detailed update on Project Broadcast, see Appendix C.

Another trauma-related initiative of note is ***Partnering for Excellence*** (PFE) an initiative that aims to create a coordinated system of screening and evidence-based service delivery between child welfare and mental health. Funded by The Duke Endowment, led by Benchmarks, PFE is working in Rowan County, NC to identify child mental health concerns early in child welfare involvement and provide trauma-informed services to improve child outcomes, reduce use of high-end services, and prevent children from entering foster care. It is anticipated that PFE will expand to serve Cleveland County, NC in 2017.

The ***Final Report of the Governor's Task Force on Mental Health and Substance Use***, issued May 1, 2016, is yet another example of progress when it comes to making our state more trauma-informed and strengthening our mental health system. Recommendations from this

task force provide a road map that will help shape our systems for care, recovery, and prevention and provide guidance on better use of existing resources, improved interagency collaboration, and strengthening public-private partnerships. To read the final report, see Appendix D.

Less progress has been made on the following CFSP benchmarks since the submission of last year's APSR:

- Exploration of a Child Welfare Services Practice Model. NC DSS postponed the decision to implement a child welfare services practice model until the CFSR was complete. As noted within this APSR under section II.3 (Update to the Plan for Improvement), NC DSS has drafted PIP Goal #1 to include establishing clear performance expectations for practice in CPS Assessments, In-Home services, and Foster Care services. The establishment of clear performance expectations for practice involves disseminating existing and revised risk and safety service expectations through a variety of mechanisms, including but not limited to training and technical assistance.

The new and revised progress measures outlined in the PIP goals and strategies/objectives will be reported on in next year's APSR.

4. Update on Service Description

Part II of the CFS-101 will provide the specific information for each service category regarding the estimated number of individuals and families to be served. Part III of the CFS-101 provides an update on Title IV-B, subparts 1 & 2 (Family Preservation, Family Support, Time-Limited Reunification, and Adoption Promotion and Support Services), CFCIP, and ETV in regards to the population served, geographic areas where services are available, and estimated number of individuals and families to be served.

The Stephanie Tubbs Jones Child Welfare Services Program (title IV-B, subpart 1)

A strength of the NC child welfare system is the North Carolina Child Medical Evaluation Program (CMEP). CMEP provides a structured system for medical and mental health evaluations in cases of alleged child maltreatment. The primary goal of the program is the provision of diagnostic services to be used by county DSS agencies in child protective service investigations.

Each medical evaluation consists of a medical/social history, interviews of the child and accompanying caretaker, and a complete physical examination. There can also be a mental health component intended to provide extended evaluations. The objectives of these evaluations are (1) to assist with disclosure and decision making in cases that cannot be substantiated through medical evaluation or social worker investigation and (2) to determine caretaker capacity/child safety.

In FY 2017, the CMEP anticipates:

- Providing approximately 1,100 child medical evaluations;
- Providing approximately 600 child and family evaluations;
- Recruiting additional medical evaluation providers;

- Providing quality assurance; and
- Providing a continuous quality improvement process.

Each year, the NC General Assembly authorizes funding to support the program. In FY 2016, NC DSS began obligating IVB-1 in addition to other state and federal funding sources to support the program. It will continue to provide this support in FY 2017.

Services provided in the four areas under the Promoting Safe and Stable Families Program (title IV-B, subpart 2)

Family Preservation

During FY 2016, NC DSS released an Intensive Family Preservation Services request for applications (RFA). The services are provided by contracted, community-based agencies across 11 regions serving all 100 NC counties. The term of the award is for three years, from July 1, 2016 to June 30, 2019.

The Intensive Family Preservation Services (IFPS) program is based on the evidence-based Homebuilders model. All IFPS contractors must meet the following requirements:

- Provide services based on the values and beliefs of Family Preservation Services.
- Serve eligible population at risk of child’s removal from the home.
- Implement the model and comply with agency and program requirements.
- Promote the five protective factors and children’s social and emotional well-being.
- Demonstrate the ability to provide trauma-informed services as they relate to clients and staff.
- Demonstrate positive outcomes through accountability and evaluation tools.
- Demonstrate a commitment to meaningful parent engagement and leadership opportunities.
- Demonstrate collaborative relationships with community partners in the prevention of child abuse and neglect.

Family Support

Children’s Trust Program Services

As the Community-Based Child Abuse Prevention (CBCAP) lead agency, NC DSS has used a combination of CBCAP, IVB-2 and Children’s Trust funding to support evidenced-based and evidenced-informed parenting education/support programs as well as Respite and Community Response Program services. These services have been known as “Family Support.” NC DSS is intentionally shifting away from using the term “Family Support” and instead labeling them as “Children’s Trust Programs.”

Beginning in SFY 2016-17, all contracted Children’s Trust Programs will be required to promote donations to the Children’s Trust Fund and the Kids First license plates. This will allow the State to increase revenue for prevention, as proceeds from the sale of these license plates will go into the Children’s Trust Fund to sustain and/or increase community-based child abuse prevention programs.

In early 2016, NC DSS released a request for applications (RFA) for Children's Trust Program services for the provision of primary and secondary child maltreatment prevention activities that begin July 1, 2016. This RFA was issued for a three-year grant period (SFY 2017, 2018, 2019). Agencies must provide a service or implement a program that demonstrates an acceptable level of evidence-based or evidence-informed practice; each program must include qualitative and quantitative evaluation plans that have proven outcomes in increasing protective factors for the prevention of child abuse. The intent of the RFA is to support community-based programs to provide outreach, support, and services to individuals and families identified as being at-risk of compromised health and safety to eliminate or reduce those risks by promoting protective factors that strengthen and support families.

North Carolina Children's Trust Program service providers are required to meet all of the following requirements to be eligible for funding:

- Provide services based on the principles of family support practice.
- Demonstrate a commitment to meaningful parent engagement and leadership opportunities.
- Demonstrate collaborative relationships with community partners in the prevention of child abuse and neglect.
- Implement primary and/or secondary prevention services.
- Serve target populations most at risk of child abuse or neglect.
- Promote two or more of the five protective factors linked to lower incidence of child abuse and neglect.
- Provide a service or implement a program that demonstrates an acceptable level of evidence-based or evidence-informed practice.
- Demonstrate a clear plan for implementation support.
- Use outcome accountability and evaluation tools that demonstrate positive outcomes for children and families.

Eighty percent (80%) of available funds were granted to 30 agencies implementing one or more of the following evidenced-based, evidenced-informed models:

- Incredible Years Pre-School BASIC Parent Program for parents of children age 3-6
- Incredible Years School-Age BASIC Parent Program for parents of children age 6-12
- Strengthening Families Program for parents of children age 6-11
- Circle of Parents
- Darkness to Light, Stewards of Children

Twenty percent (20%) of available funds are granted to seven agencies implementing evidence-based, evidence-informed models and activities not listed in the 80% category above. These programs are implementing the following models:

- In-Home SafeCare
- Motivational Interviewing

- Nurturing Parenting and Circle of Parents
- Nurturing Parenting and Incredible Years
- Parent Child Interaction Therapy
- Parents as Teachers
- Parents as Teachers Play Groups

Community Response Program

In 2012, NC DSS used Children’s Trust Fund dollars to support a request for application (RFA) for the provision of a Community Response Program (CRP). CRP builds on a family-centered System of Care approach to child welfare and North Carolina’s Multiple Response system by filling a gap in the continuum of child maltreatment prevention programming by reaching out to families who have been reported to county social services agencies (i.e., to child protection services), but whose cases have been screened out at CPS intake, closed with a decision of “services recommended,” closed with a decision of “no services needed,” or closed after an initial assessment with a finding of “unsubstantiated.” Four pilot sites were awarded funding beginning July 1, 2012 through June 30, 2016.

In 2016, NC DSS switched the CRP funding source from Children’s Trust Funds to IVB-2 to support the release of a new application for county social service agencies to apply. The grant award period is from July 1, 2016 through June 30, 2019. The number of grant awards was increased from four (4) in the prior funding period to eight (8) this next cycle.

Community Response Program recipients are required to:

- Target families with children ages birth to five.
- Demonstrate collaborative relationships with community partners in the delivery of services and community child maltreatment prevention strategies.
- Provide services based on the principles of family support practice.
- Demonstrate a commitment to meaningful parent and family engagement.
- Ensure families have access to supports and services to meet their basic needs, including economic support, benefits access, employment coaching, and financial literacy programming.
- Provide and/or make referrals to a service or program that demonstrates an acceptable level of evidence-based or evidence informed practice.

Time-Limited Family Reunification

Prior to July 2013, Intensive Family Reunification Services (IFRS) were contracted to community-based agencies. A lack of referrals resulted in low numbers of families served and a large amount of funds unspent. By the end of the 3-year grant period of July 2010 - June 2013, approximately \$2.5 million had not been used.

Effective July 1, 2013, IFRS programs were no longer contracted to community-based agencies. Instead, Time-Limited Family Reunification funds were allocated directly to all local 100 county social service agencies. The funding formula includes (1) a base amount for each county, plus (2)

a percentage of the remaining funds available based on the number of children who entered the county's foster care system in the prior fiscal year. County social service agencies are expected to provide the services and activities to eligible families working toward the goal of reunification as defined in the Social Security Act.

Since implementation of this newer approach may take some time to build awareness of the funding and eligible services, NC DSS initially allocated the funding to counties at less than 15% of the available total IVB-2 grant award. As technical assistance has been provided each year to counties, the amount of available funding, the number of children served, and expenditures have increased. In FY 2017, North Carolina anticipates spending 17.086% of IVB-2 funding for Time-Limited Family Reunification. NC DSS has determined that this allocation is appropriate based on the needs of our state. NC DSS will continue to review these services and expenditures to determine if any there is any need to increase the funding level in the future.

Adoption Promotion and Post Adoption Support Services

Adoption Promotion

NC DSS obligates IVB-2 funding, in combination with other funding sources, for adoption promotion services to county social service agencies and to contracted private agencies. Available statewide, the purpose of Adoption Promotion is to help secure permanent homes for hard-to-place children. Participating agencies are reimbursed for adoption promotion services that culminate in the finalization of an adoption. These services are:

- Recruitment: the process of finding, screening, and identifying prospective adoptive placement resources.
- Pre-adoption Training: preparatory training for prospective adoptive families to provide knowledge and skills necessary for parenting children with special needs.
- Post-Placement Support: services provided by an adoption agency between the time a child is placed in the home of his or her prospective adoptive parents and the time the child's adoption is finalized in court.
- Facilitation of Legal Procedures: completion of legal work to finalize an adoption.

In FY 2017, NC DSS will continue to ensure the above adoption promotion service types are available in all 100 NC counties.

Post Adoption Support Services

Post Adoption Support services are provided by contracted, community-based agencies across 11 regions serving all 100 NC counties. Agencies will be entering their final year of a 3-year, competitive award cycle in FY 2017. Agencies continue to provide evidence-based, trauma-informed services to any NC family of an adopted child whether they were adopted through the child welfare system or through private adoption. Services may include but are not limited to case management, therapy, crisis intervention, respite, and parenting education/support.

CFCIP and ETV

All Chafee and ETV services may be accessed through any of the county departments of social services and NC DSS.

CFIP: This program is available in all 100 NC counties. Between July 2015 and March 2016, 4,774 youth were served by CFCIP in NC. The table below provides the number of current and former foster youth ages 13-15 served by LINKS in this time period, as well as the number of current and former foster youth ages 16-21 served by LINKS in this time period.

**Current/Former Foster Youth Served by LINKS
between July 2015 and March 2016, by Age**

AGE	YOUTH SERVED*
Age 13-15	1,674
Age 16-21	3,289

Data Source: SIS Monthly

**Note: youth who had birthdays during the period appear in both age categories*

In FY 2017 North Carolina will continue administering CFCIP as it did in FY 2016 and anticipates serving the same number of youth. There have been no changes to the available services.

ETV: NC ETV makes available vouchers for youth who were in foster care at age 17 and youth who were adopted out of foster care or placed in a relative guardianship on or after their 16th birthday; these vouchers can be used to attend appropriately accredited postsecondary institutions of higher learning or access vocational training. This program is available in all 100 NC counties. In FY 2017 NC ETV will continue to be administered in the same way as it was in FY 2016 and anticipates serving the same number of youth. Approximately 700 students apply for the North Carolina Education and Training Voucher Program each year and over 300 students receive funding. The total amount of funding supporting this program in FY 2017 is \$856,329.

Populations at Greatest Risk of Maltreatment

NC DSS recently released a request for applications (RFA) for both the Children's Trust Program services and Community Response Program services requiring agencies to demonstrate they intend to serve families at greatest risk of child maltreatment. Targeted families include one or more of the following population(s):

- Families and children living in poverty
- Parents/caregivers abusing substances
- Young parents and/or parents of young children age 0-5
- Single parents
- Families experiencing domestic violence
- Parents/caregivers and/or children with disabilities or mental illness
- Fathers, non-custodial parents, and parent companions
- Former adult victims of child abuse and neglect

- Unaccompanied homeless youth and families experiencing homelessness
- Tribal populations
- Military families
- Victims of human trafficking

Currently, Children’s Trust, Respite, and Community Response Programs identified the following populations/risk factors in their communities and are providing supportive services to meet the identified need. Parenting support groups/classes, home visiting programs, and respite services are targeted to:

- Pregnant youth
- Fathers
- Teen parents
- First-time parents
- Families of children with developmental delays or special needs
- Parents with special needs
- Native Americans
- Latinos
- Victims of domestic violence
- Grandparent/relative caregivers
- Separated parents and single parents
- Families with behavioral health needs
- Families experiencing substance abuse
- Homeless youth and families
- Families living in public housing communities
- Court involved youth
- Lesbian, gay, bisexual, transgender, queer, questioning, intersex (LGBTQI) youth

In addition, NC DSS will continue to use Stephanie Tubbs Jones (IVB-1) funding to contract with the Family Support Network of North Carolina (FSN). The FSN is part of the UNC School of Medicine in Chapel Hill. Family Support Network subcontracts with regional FSN programs to provide education, training, and support services to all families caring for children who are medically fragile or have special needs, including children who are substance-exposed, HIV positive, or developmentally delayed. Research supports the concept that education and support of these vulnerable families helps reduce the likelihood of abuse or neglect of their children. The three goals of FSN are to: (1) provide education and training to foster, adoptive, birth, and kinship families caring for medically fragile or special needs children in order to improve their knowledge about the conditions affecting the children and how to care for them; (2) reduce isolation and improve family functioning through social support programs, including facilitating and leading support groups; and (3) enhance collaboration among local family support programs and service

providers, including county social services agencies, Family Resource Centers, county foster parent associations, and neonatal intensive care units.

During 2014-15, FSN proposed to provide information and referral services to 810 parents by providing one-on-one information and referral services. The network greatly exceeded this goal by serving 4,489 family members through this activity.

FSN activities anticipated in 2016-17 to support the work of the local affiliates include facilitating the provision of support to families across the state by:

- Building community capacity to support families through technical assistance with local affiliates to assess community needs, collaborate with local organizations, and support families as they deal with the realities of raising a child who has special needs.
- Participate in the Parent to Parent USA listserv, to ensure families with children who have low-incidence disabilities are matched with families in other parts of the country who are dealing with similar issues.
- Carrying out evaluation activities in support of the project.

Services for Children in Foster Care Under the Age of Five

- Since January 2013 Project Broadcast has screened more than 2,400 young children for trauma exposure; more than 400 (16%) were “screened in” for trauma. In response, Project Broadcast engaged the leadership from NC’s Child Development Centers to improve collaboration and services to these children. A workgroup is being formed to eliminate barriers to collaboration and align policies to ensure children receive appropriate developmental screenings and that they include social-emotional screenings when indicated. For more on Project Broadcast, see Appendix C.
- NC DSS has partnered with NC Pediatric Society to develop two self-paced, online courses for child welfare professionals, both of which describe the American Academy of Pediatrics’ standards for medical visits. These standards call for more frequent medical visits for children under the age of five. For more on these courses, see section V.4. (Training Plan).
- Additional NC DSS efforts to ensure children in foster care under the age of five receive the medical and mental health care they need to foster their development and facilitate their timely permanence are described in section V.2. (Health Care Oversight and Coordination Plan).

Services for Children Adopted from Other Countries

There has been no change since the submission of the 2015-2019 CFSP.

5. Program Support

Provision of Training and Technical Assistance

General

The NC DSS Child Welfare Section is organized into the following teams: (1) policy; (2) staff development; (3) licensing and regulatory; (4) adoption indexing and NC Kids; (5) community-based services; (6) Interstate Compact for the Placement of Children (ICPC); (7) program monitoring; (8) OSRI; and (9) local support. These teams provide program support to the counties to facilitate the delivery of child welfare services. Details about the efforts of a number of these teams are found immediately below (e.g., program monitoring, adoption indexing/NC Kids, local support) and in other parts of this document. In addition, NC DSS supports child welfare programs statewide through the following avenues, which it will continue to use in FY 2017:

- Mass Communication Vehicles. These include periodic “Dear County Director Letters”; frequent webinars and publications (i.e., *Children’s Services Practice Notes*, *Fostering Perspectives*, *Training Matters*) which are described in more detail below in the section V.4 (Training Plan Update); and twice-monthly online meetings called “Staying Connected” calls, which allow NC DSS to address a wide variety of topics of interest to the counties in a format that is responsive, flexible, and timely. NC DSS also has multiple listservs it uses to communicate to internal and external stakeholders. These include but are not limited to:
 - Director’s Listserv
 - Supervisor's Listserv
 - Child Welfare Listserv
 - MRS Listserv
 - Trauma Listserv
 - TIPS-MAPP Leaders Listserv
 - LINKS Coordinator Listserv
 - Behavioral Health County Liaison Listserv
 - Licensed Child Placing Agencies Listserv
 - Residential Facilities Listserv
- TA Gateway. Described in NC’s CFSP and in previous APSRs, the TA (Technical Assistance) Gateway is a web-based portal that offers counties a streamlined method to request assistance and obtain guidance from NC DSS. To date, use of the TA Gateway has been limited to the 17 REAP pilot counties. NC DSS had hoped to expand use of this tool to other counties in 2015-16; however, lack of resources and other challenges prevented this. It is anticipated that as part of the Program Improvement Plan, in FY 2017 NC DSS will be able to invest the resources needed to make the TA Gateway available to additional counties.

Program Monitoring Team

In SFY 2015-16, the NC DSS Program Monitoring Team began generating and reviewing data to evaluate county child welfare programs. These evaluations will result in the development and implementation of a Program Development Plan (PDP) with each of the 100 county child welfare

agencies. The PDP addresses the agency practice issues identified in the evaluations. The first evaluations were conducted in June 2015. The evaluation process includes the following:

1. A review of county child welfare data for outlying data points from multiple sources including:
 - a. Self-reports on their workforce and workloads;
 - b. OSRI/OMS;
 - c. Client Services Data Warehouse Reports;
 - d. Data sources for AFCARS and NCANDS reporting;
 - e. History of client complaints;
 - f. Child Fatality Reports; and
 - g. Any other sources of reliable information.
2. A preliminary conference with county child welfare agency staff regarding:
 - a. Conducting a pre evaluation conference with county staff to outline logistics and expectations for the on-site record review;
 - b. Identifying county staff questions about their program practices and outcomes;
 - c. Conducting a preliminary review of the data, including OSRI outcomes, and initial identification of potential program risk areas;
 - d. Identifying the program area which will be examined in the record review;
 - e. Identifying agency staff who will serve as case reviewers; and
 - f. Discussing dates and logistics for the on-site record review.
3. Written follow up from NC DSS to the county child welfare agency.
4. A list of cases to be reviewed is provided to the county staff approximately two weeks ahead of the monitoring visit.
5. An onsite evaluation that includes:
 - a. An entrance conference;
 - b. Training on the use of the review tools;
 - c. The record review and quality control reviews of completed tools;
 - d. Aggregating record review data;
 - e. Conducting a debriefing with county staff to analyze causal and organizational issues that must be addressed as the result of the evaluation; and
 - f. An exit conference with agency staff to discuss strengths and areas for development.
6. Written report drafted by NC DSS, reviewed by the county agency, and finalized.
7. Within 30 days, a PDP addressing the areas identified in the report is developed by the county with support and guidance of the NC DSS Program Monitoring Team.
8. An NC DSS Children's Program Representative (from the Local Support Team) provides the initial technical assistance to the county to implement the PDP.

9. The NC DSS Program Monitor reviews data relevant to the county PDP to prepare for an onsite, follow-up consultation.
10. An onsite six-month review of progress on the PDP is conducted to:
 - a. Review progress on implementing the PDP activities and outcomes;
 - b. Review additional data and conduct a debriefing of the data to amend the PDP if needed.
11. NC DSS provides a report on the consultation to the county.

Guidance, coaching, and mentoring are provided throughout the evaluation. Benefits to counties include giving them a clearer understanding of requirements and best practice in child welfare work and providing an opportunity to work with data to analyze their agency processes for efficiency. The monitoring process brings county staff together to develop an agency plan; this promotes agency-wide ownership of all activities in their child welfare section.

After each evaluation, a survey is sent to participants to provide feedback to NC DSS on the process. To date feedback from county child welfare agencies indicates the evaluation process provides objective data about agency practices and is a valuable training and coaching activity for county staff members participating in the case review.

The Program Monitoring Team has not been in existence long enough to produce measureable results that would impact the CFSP goals and objectives or the elements measured by the CFSR. NC DSS is still learning from the monitoring process. The process has established some baselines NC DSS will use to track and measure progress through each county's Program Development Plan. The NC DSS PIP being developed is addressing the connections between monitoring, the OSRI, and CFSR outcomes. The most significant outcome since the Program Monitoring Team began its work is a 17.5% decrease in the number of CPS assessments remaining open each month; this has resulted in more timely decisions during assessments.

Local Support Team

Since last year's APSR the NC DSS Local Support team has also supported child welfare programs in North Carolina by providing training and technical assistance. The Local Support Team is comprised of Child Fatality Reviewers and Children's Program Representatives. The Children's Program Representatives (CPRs) provide training and technical assistance to its 100 county child welfare agencies. One facet of their work is to provide quarterly consultation with each county. The consultation has a set agenda of topics to discuss but also allows for discussion of pressing issues and questions identified by either the county or NC DSS. Included in CPR consultation is a review of the county's data and what might be the root cause of any concerning numbers, a review of any recent changes to law or policy, discussion of issues identified as needing technical assistance, and discussion of the county's current QA/CQI efforts. The Program Development Plan (PDP) created with the Program Monitoring team is also reviewed with the county and areas where technical assistance is needed are discussed and planned. Technical assistance provided to a county as a result of their PDP is aimed at improving the county's practice in keeping children safe and moving children in foster care to permanence.

Since July 1, 2015, CPRs also provided training and technical assistance through the provision of regional meetings for local child welfare supervisors across the state. Regional meetings are planned to address changes in policy and practice as well as identified areas of deficiencies. In SFY 2015-16 a focus of these meetings was to provide training and technical assistance regarding new policies put in place as a result of federal and state legislation. These policies impact the safety, permanence, and well-being of children and youth in foster care. For example, regional meetings in the past year provided training about policy released to support the Reasonable and Prudent Parent Standard. This directly impacts the well-being of children and youth in foster care. Another focus of these meetings was to provide training and technical assistance regarding North Carolina's recent CFSR. Discussions included issues identified around safety and permanency, and technical assistance was provided to address these issues in agency practice.

CPRs also provide *Introduction to Child Welfare Data Sources* training across the state. In SFY 2015-16 the training was provided five times. This training educates local child welfare staff about the state's sources for child welfare data and its access. Participants are trained to know where to look for a variety of reports that can assist in identifying areas needing improvement and can serve to inform counties engaged in continuous quality improvement or quality assurance efforts. Please visit <https://ncswlearn.org/plp/catalog/curriculum.aspx?cid=470> for a more detailed description of this course.

Adoption Indexing/NC Kids Team

The NC Kids Foster Care and Adoption Network team provides extensive program support and technical assistance to NC in the area of adoption. For more on this please refer to sections II.8 (Adoption and Legal Guardianship Incentive Payments) and V.1 (Foster and Adoptive Parent Diligent Recruitment Plan).

Staff Development Team

The NC DSS Child Welfare Services Section Staff Development team provides extensive support to child welfare programs statewide. For more on this please refer to section V.4 (Training Plan).

Partnership and Performance Toolkit

NC DSS Child Welfare Services Section staff members are co-facilitating a learning community to support county DSS programs wishing to use data and a focus on key quality indicators to improve outcomes for children in foster care placed with private child-placing agencies. Funded by The Duke Endowment and led by the UNC-CH School of Social Work, the project uses a toolkit to guide county DSS agencies through a four-step process for achieving outcomes-focused partnerships with private agencies. In the current learning community, which began July 1, 2015, three public child welfare agencies (Cabarrus County DSS, Rowan County DSS, and Stanly County DSS) have selected a private agency partner and are working through the toolkit. As described in the draft PIP (see Appendix A), NC is considering expanding this project to additional counties in the near future.

Anticipated Technical Assistance and Capacity Building Needs

The PIP process gives NC the opportunity to develop a plan to provide technical assistance and capacity-building support in the coming year. NC is already working with the Capacity Building Center for States. Together with the Children’s Bureau, potential technical assistance partners are being identified such as the National Child Welfare Workforce Institute, FRIENDS (Family Resource Information, Education and Network Development Services), the National Center for Community Based Child Abuse Prevention, and the National Resource Center for Diligent Recruitment. The Capacity Building Center will continue to work with NC on promoting successful implementation of the newly identified/ revised goals and strategies/objectives.

Program Support Updates

The following child and family services-related research, evaluation, management information systems, and/or quality assurance systems have been implemented or updated since the submission of the 2016 APSR or will be implemented or updated in FY 2017:

- *NC FAST*. NC DHHS is well into the development of its new enterprise-level case management system, “North Carolina Families Accessing Services through Technology” (NC FAST). The state’s NC FAST team began developing the child welfare module of the NC FAST in January 2016. Select NC DSS staff members from the Child Welfare Services Section are temporarily detailed to the NC FAST team to facilitate the development of this module, which is expected to debut January 1, 2017. Thus, it is anticipated that by the time of next year’s APSR North Carolina’s child welfare agencies and the children and families they serve will already be experiencing the benefits of NC FAST, which are projected to include the following:

Benefits from an Integrating Case Management System

- 80% of the families in the child welfare system are also receiving some other human services benefit.
- Workers would no longer need to look up and re-enter data in multiple systems resulting in less required data gathering from the client or family.
- Administering all these services and benefits from one system supports a complete view of a client and family including family composition, location and movement, and participation in all programs.
- Enables real-time sharing of client and case information across programs and counties.
- Enables families to provide their information only once for eligible programs.
- Provides a Decision Support Model to deliver timely services and protect NC’s most vulnerable children.
- Supports a truly integrated, cross-functional service delivery approach that moves beyond the current siloed and paper-based systems.
- Leverages existing investments in infrastructure and software technology to continue delivering services for additional programs and interfaces to health services in the future.

Benefits from an Integrated Child Welfare and Eligibility System

- Real time shared data between programs and counties
 - Enhanced operational analytics
 - Common data model
 - Aligned business operations
 - Interoperability
 - Elimination of unnecessary complexities with interfaces
 - Enhanced ability to adapt policies
 - Improved outcomes
 - Promotion of client-focused delivery
- *Resource Parent Learning Portal*. In July 1, 2015, NC DSS began efforts to develop an online portal to support the ongoing learning of our state’s resource parents. These efforts are described below (see section V.4., Training Plan). The Division’s goal in the next 5 years is to develop a robust site where foster parents can register for select courses, attend online training, and record/track their annual required training hours. In the next year the site (fosteringNC.org) will be launched and promoted. When it debuts the portal will feature not-for-credit training content such as resources, brief videos, and webinar or audio recordings, all suitable/of interest to a foster parent audience.
 - *Evaluation of Child Protective Services System in North Carolina*. In 2015 the NC General Assembly passed a law (Session law 2015-241, Section 12C.8) requiring NC DSS to partner with an outside evaluator to conduct a comprehensive, statewide evaluation of North Carolina’s child protective services system. To accomplish this task NC DSS partnered with Public Consulting Group, which conducted an evaluation, the results of which were submitted to the NC General Assembly on March 1, 2016. The evaluation’s final report, "North Carolina Statewide Child Protective Services Evaluation," can be found in Appendix E.

6. Consultation and Coordination with Tribes

Since last year’s APSR the responsibility for providing child welfare services and protections to children from North Carolina’s only federally-recognized tribe, the Eastern Band of Cherokee Indians, has shifted from the state to the tribe. The General Assembly of North Carolina, Session Law 2014-100, Senate Bill 744, signed into law on August 7, 2014, allows for “any federally recognized Native American tribe within the State to assume responsibility for any social services...that are otherwise the responsibility of a county under State law, then, notwithstanding any other provision of law, the county shall be relieved of the legal responsibility related to the tribe’s assumption of those services.” Full text of Senate Bill 744 can be found here: <http://www.ncleg.net/Sessions/2013/Bills/Senate/PDF/S744v9.pdf>.

The Eastern Band of Cherokee Indians (EBCI) is a federally-recognized Indian tribe under federal law and asserted its inherent sovereign authority to assume responsibility for certain human

services by October 1, 2015. Over the last two years leadership within the NC Department of Health and Human Services, Division of Social Services, and counties that border Tribal Trust lands have worked extremely hard to assist the Tribal leadership with their planning of a Health and Human Services agency on Tribal trust lands. This level of commitment from the Department, border counties, and the EBCI has led to Tribal Public Health and Human Services being prepared to provide intake, child protection, foster care, licensing, adoption, and other child welfare services to the population living on Tribal trust lands. The EBCI has received approval from the federal Administration for Children and Families (ACF) for its Title IV-E application. Federal approval is retroactive to October 1, 2015. North Carolina routinely involves Native American tribes in work related to the monitoring and provision of child welfare services, and will continue to do so in FY 2017. In the past year, results from the recent federal Child and Family Services Review (CFSR) report required the NC Department of Health and Human Services to submit a Program Improvement Plan (PIP) to the Children's Bureau. Preliminary CFSR findings were shared during a two-day stakeholder planning meeting in January 2016; over 270 professionals from across the state attended. Key stakeholders helped draft recommendations for consideration by the Division of Social Services. To gather further stakeholder input to guide the development of the PIP, in March 2016 the Division held five, day-long workgroup sessions throughout the state. Marvel Welch, a member of the EBCI and of the North Carolina Commission of Indian Affairs, and Dallas Pettigrew, EBCI Family Safety Program Manager, participated in these workgroups. When it is approved, the final CFSR Program Improvement Plan will be sent to Principal Chief Patrick Lambert and Tribal Public Health and Human Services Secretary Vickie Bradley (PO Box 666, Cherokee, NC 28719; 828/554-6180 or 828/497-7460).

Collaboration and coordination with tribes is also illustrated by the fact that North Carolina's Deputy Secretary for Human Services serves on the Commission of Indian Affairs and co-chairs the Indian Child Welfare Committee with Marvel Welch, a member of the EBCI. American Indian members are selected by tribal or community consent from Indian groups recognized by the State of North Carolina and are principally geographically located as follows: the Coharie of Sampson and Harnett Counties; the Eastern Band of the Cherokee Nation; the Haliwa-Saponi of Halifax, Warren, and adjoining counties; the Lumbee of Robeson, Hoke, and Scotland Counties; the Meherrin of Hertford County; the Waccamaw-Siouan from Columbus and Bladen Counties; the Sappony; and Native Americans located in Cumberland, Guilford, and Mecklenburg Counties.

The annual Indian Child Welfare Gathering and Conference was held November 5, 2015 at the University of North Carolina at Pembroke. The purpose of this event was to continue the Commission's work associated with Indian Child Welfare in NC. The next annual Indian Child Welfare Gathering and Conference will be held November 3, 2016 at the Western Carolina Outreach Center. The theme for 2016 is "it takes a village healing our children, healing our communities."

Compliance with ICWA

North Carolina continues to monitor compliance with the federal Indian Child Welfare Act (ICWA). NC child welfare law and policy require workers to assess whether children provided child protective services have Native American heritage (regardless of membership in federally- or

state-recognized tribes). When a parent/guardian indicates they believe their child identifies with a particular tribe, the worker completes a form with the family and then shares the information with the tribe. The form captures the child's identifying information and any family members that are/were tribe members. It also captures services the tribe may offer to prevent placement and/or move to expedite permanency, as well as potential foster care placements. Workers are expected to make active efforts throughout the life of the case to create and maintain a relationship with the family and tribe. Though it is understood that information can be disclosed to the tribe without the family's consent, it is family-centered practice that the worker seek the family's consent to notify the tribe of all family meetings, court hearings, and any other proceedings involving the children.

Child welfare professionals in North Carolina have multiple opportunities to learn about ICWA and how to comply with it through training provided to them by the Division of Social Services. All child welfare staff learn about ICWA when they take *Child Welfare in North Carolina: Preservice*, which is required for all new social workers and supervisors before they have direct client contact. New staff learn about ICWA again when they take *Legal Aspects of Child Welfare in NC*, a two-day classroom course they must take in their first year. *Legal Aspects* was offered nine times between July 1, 2015 and March 23, 2016 and was completed by 272 new child welfare workers and supervisors. ICWA is also covered in courses providing job-specific training, such as *CPS Assessments in Child Welfare Services*, *Placement in Child Welfare*, and *Adoptions*; as they have been in the past, these courses will be offered on an ongoing basis in FY 2017.

In SFY 2016, NC DSS began implementing program monitoring of county social service agencies. Items in the review include determining whether Native American heritage was assessed as well as whether the tribe was contacted at the time of the decision to petition the court for the removal a child. Following are examples of what program monitoring revealed about assessment of Native American heritage in several child welfare service areas:

- CPS Assessments. From July 1, 2015 to March 31, 2016, NC DSS reviewed 515 CPS assessment cases. Native American heritage was assessed in 83% of these cases.
- CPS In-Home Services. From Jan. 1 to March 31, 2016, NC DSS reviewed 49 CPS in-home cases. Native American heritage was assessed in 90% of these cases.
- Foster Care. From Jan. 1 to March 31, 2016, NC DSS reviewed 75 foster care cases. Native American heritage was assessed in 93.3% these cases.

After each monitoring review, counties must develop a Program Development Plan in response to issues identified in the review through a change in practice or processes. This area will continue to be tracked. If there is a lack of progress in improving the outcomes, additional technical assistance and guidance will be provided to improve the ICWA compliance.

7. Monthly Caseworker Visit Formula Grants

Standard for Content and Frequency of Caseworker Visits

Since the submission of the 2015-2019 CFSP, NC DSS continues its effort to reduce the number of incidences of maltreatment in foster care and the number of placement disruptions through the

use of the Monthly Caseworker Visit (MCV) Formula Grant. NC DSS and county DSS agencies continue to use the documentation tool; since the submission of the CFSP there have been no changes in policy. NC DSS is currently tracking the following outcomes:

Outcome Measures	National Standard	NORTH CAROLINA PERFORMANCE			
		FY 2012	FY 2013	FY 2014	FY 2015
Absence of Maltreatment in Foster Care	99.68%	99.77%	99.72%	99.77%	99.85%
Nat'l Median					
Two or fewer placement settings for children in care less than 12 months	83.3%	88.41%	88.01%	86.74%	85.19%
Two or fewer placement settings for children in care 12 to 24 months	59.9%	69.61%	69.89%	69.34%	67.13%

Duncan, D.F., Kum, H.C., Flair, K.A., Stewart, C.J., Vaughn, J.S., Guest, S., Rose, R.A., Gwaltney, A.Y., & Gogan, H.C. (2016). Management Assistance for Child Welfare, Work First, and Food & Nutrition Services in North Carolina (v3.2). Retrieved [04-06-2016], from the University of North Carolina at Chapel Hill Jordan Institute for Families website. URL: <http://ssw.unc.edu/mq/>.

FFY 2015-2019 USE OF MCV GRANT

Based on the data below and the information in the 2015-2019 CFSP, NC DSS is able to report declining compliance with MCV grant requirements.

FFY	MCV Measure	Target	Score	Met Target?
2013	Measure 1: Percentage of visits made on a monthly basis by caseworkers to children in foster care	90%	93%	Yes
	Measure 2: Percentage of visits that occurred in the residence of the child	75%	89%	Yes
2014	Measure 1: Percentage of visits made on a monthly basis by caseworkers to children in foster care	90%	92%	Yes
	Measure 2: Percentage of visits that occurred in the residence of the child	75%	89%	Yes
2015	Measure 1: Percentage of visits made on a monthly basis by caseworkers to children in foster care	95%	92%	No
	Measure 2: Percentage of visits that occurred in the residence of the child	75%	88%	Yes

In 2015, for the first time in several years, some counties did not meet MCV targets for Measure 1. This can be attributed at least in part to the fact that whereas in previous years the target had been 90%, in 2015 it changed to 95%. The performance of the counties, on the other hand, was 92%—consistent with previous years. Nevertheless, to address this shortfall in performance, those counties not meeting the targets will explore the rationale for missing the target and will develop a theory of change and implement ongoing monitoring of this activity.

Federal statute requires that at least 50% of the total number of monthly visits made by caseworkers to children in foster care during a fiscal year occur in the child’s residence. In North

Carolina in SFY 2014-15, 88.4% of monthly caseworker visits with children in foster care occurred in the child's residence.

8. Adoption and Legal Guardianship Incentive Payments

NC DSS uses Adoption Incentive Payments in combination with other funding sources to promote adoptions in North Carolina. Since the submission of the 2015-2019 CFSP, no changes have been made to the plan for the funding and NC DSS has not encountered any challenges in expending the funds in a timely manner. Adoption Incentive Payments continue to be used to support the following services:

- Recruitment: The process of finding, screening, and identifying prospective adoptive placement resources.
- Pre-adoption Training: Preparatory training for prospective adoptive families to provide knowledge and skills necessary for parenting children with special needs.
- Post Placement Support: Services provided by an adoption agency between the time that a child is placed in the home of his or her prospective adoptive parents and the time that the child's adoption is finalized in court.
- Facilitation of Legal Procedures: Completion of legal work to finalize an adoption.

9. Child Welfare Demonstration Activities

Not applicable to North Carolina.

10. Quality Assurance

NC's QA/CQI System

Our state's current CFSP includes the goal of expanding statewide NC's continuous quality improvement (CQI) model, Reaching for Excellence and Accountability in Practice (REAP). After the Children's Bureau issued the CFSR results in February 2016, North Carolina embarked on an extensive, inclusive process to develop a program improvement plan (PIP). NC believes the PIP, once it is approved by the Children's Bureau, will provide an opportunity to prioritize efforts toward strengthening child welfare services in North Carolina, including our quality assurance system, laying the groundwork to support a comprehensive CQI model (i.e., REAP) in the future.

NC is in the process of developing and refining its child welfare quality assurance (QA) system, which is focused on the effective use of case reviews. In 2015 our state completed the case review portion of the federal CFSR. The Children's Bureau allowed North Carolina to complete a "state led" CFSR case review after North Carolina demonstrated the CFSR case review could be completed with consistency by trained reviewers and QA personnel from both county agencies and NC DSS. In the CFSR case review, 105 complete case samples from either Foster Care or In-Home were selected from ten counties that had been trained in the case review process using the federal onsite review instrument (OSRI). Between April 1, 2015 and September 30, 2015, the review of these cases was conducted, sometimes with oversight from the U.S. Children's Bureau,

by QA staff from the participating county and the NC DSS. Reviews involved interviews of those involved in each case, including children, parents, and social workers.

After completion of the CFSR review, NC began its case review process for the 2016 calendar year. The goals of this review were to continue to sustain the skills of those trained to use the OSRI and to prepare for ongoing case review measurement during our state's upcoming Program Improvement Plan (PIP). Ultimately, data and lessons learned from these reviews helped guide the development of NC's draft PIP goals and strategies.

As part of the CFSR case review approval by Children's Bureau, North Carolina developed and implemented a case review process protocol (see Appendix B).

The Role of NC's Case Review Instrument in Ongoing QA/CQI

At present, the case review instrument plays a key role in child welfare QA in our state. Support and partnership from the Children's Bureau has enabled North Carolina to adopt the federal OSRI as its case review instrument. The Children's Bureau provided NC the OSRI as a web-based, interactive document included in a database known as the Online Monitoring System (OMS). With the OSRI/OMS, NC can analyze data from case reviews in real time. The OMS site also provides a training/practice mock up site, identical to the actual OMS site, which allows for training of new reviewers/QA staff or refreshers for current review staff. The Children's Bureau also provided onsite training on OSRI/OMS at four locations in NC to case review/QA staff from the 10 CFSR counties and the NC DSS. In addition, under contract with the Children's Bureau, JBS International provides online technical assistance and support 24/7 within the OMS. Once staff are trained, the user-friendly OSRI/OMS system allows them to communicate and analyze case findings in a productive, consistent manner.

North Carolina plans to expand the use of the OSRI as part of the Program Improvement Plan to strengthen its statewide quality assurance system. During the first year of the PIP, NC will use the *prospective baseline methodology* offered by the Children's Bureau. As part of this, in addition to conducting 113 case reviews in the current 10 OSRI counties, NC will conduct another 100 case reviews using the OSRI instrument. These additional 100 cases will be randomly selected among the remaining 90 counties. Data collected from these 213 cases will serve as our baseline for improvement, and we will continue to review 213 cases each year throughout the PIP and additional monitoring year. This process will provide valuable insight into child welfare programs across our state and will be the cornerstone of our statewide quality assurance system.

System Improvements Based on QA/CQI

The results of the most recent CFSR are a great resource for identifying areas needing improvement within North Carolina's child welfare system. As stated above, NC believes its draft PIP, once it is approved by the Children's Bureau, will allow us to strengthen many areas of our system, including QA. Indeed, NC has already seen some improvements as the result of its efforts around QA—including a strengthening of our capacity to do QA. The Division's case review unit, now referred to as the "OSRI Team," has expanded to include:

- Five (5) consultant positions (four of which are now filled) who can complete reviews or provide QA to counties;
- A program administrator position dedicated to the scheduling reviews and analyzing OMS data; and
- An administrative assistant who helps manage OMS registration and users allowed in the system.

The OSRI team can travel to multiple locations to complete case reviews if necessary, and thanks to mobile Wi-Fi it can do so with improved access to technical support and supervisory oversight. NC DSS Children’s Program Representatives (CPRs) and Program Monitors are available to assist as needed. The entire team is outfitted with up-to-date laptops that can access the OMS and input data. Quarterly meetings with the ten participating counties help ensure case reviews are being done consistently and that counties and the OSRI Team understand each other’s needs and expectations. The use of data from the OMS enables team members to provide more factual information to county and NC DSS personnel in discussions about practice improvements.

III. Child Abuse Prevention and Treatment Act (CAPTA)

CAPTA State Plan Update

State Legislation

Since the submission of the 2015-2019 CFSP, there have been no substantive changes to any law or regulations that would impact eligibility for the CAPTA State Grant.

Use of CAPTA State Grant

For the purposes of improving the child protective services system, NC DSS currently uses the CAPTA State Grant in combination with other federal and state funding to support the following programs/activities:

- Creating and improving the use of multidisciplinary teams to enhance investigations.
 - **Children's Advocacy Center of North Carolina** is an accredited state chapter of the National Children's Alliance, the national umbrella organization for children's advocacy centers dealing with child abuse. Children's Advocacy Center of North Carolina provides training and technical assistance to a network of accredited child advocacy centers (CACs) across NC. CACs bring together collaborative partners on behalf of children and families to make accessing services easier. Some of the collaborative partners CACs bring together include local child protective services, law enforcement, prosecutors, and medical and mental health providers.
- Developing and updating systems of technology.
 - **Child Medical Exam Program (CMEP)**, as referenced in Section II.4. (Update on Service Description), provides a structured system for medical and mental health

evaluations in cases of alleged child maltreatment. NC DSS is using CAPTA funds to support the CMEP as it develops a database to provide a better understanding of CMEP-related needs across the state, the quality of assessments completed, and consistency of CMEP's evaluation approach.

- Developing, strengthening, and facilitating training.
 - **Family and Children's Resource Program (FCRP).** The CAPTA State Grant, in combination with other funding sources, enables NC DSS to partner with the Family and Children's Resource Program, part of the Jordan Institute for Families at the UNC School of Social Work, to support North Carolina's child welfare training system. FCRP contributes to workforce development in a variety of ways, including by developing, revising, and delivering a number of classroom and online courses; maintaining and continually enhancing ncswLearn.org, NC's learning portal for child welfare workers; producing the practice-enhancing publications *Children's Services Practice Notes*, *Fostering Perspectives*, and *Training Matters*; and planning and hosting webinars on timely topics relevant to child welfare.
 - **Child Forensic Interviewing Course.** This four-day, competency-based, classroom training teaches child protective service workers the knowledge and skills needed to conduct legally-defensible interviews in cases of alleged child abuse. This research-based course presents an adaptation of the child forensic interview protocol developed by Michael Lamb and colleagues at the National Institute of Child Health and Development (NICHD). CAPTA funds enable NC DSS to offer this course in collaboration with faculty from the Program on Childhood Trauma and Maltreatment at UNC-CH. Between July 1, 2015 and March 23, 2016 *Child Forensic Interviewing* was offered four (4) times, reaching 72 child welfare professionals. NC DSS will offer the course the same number of times and reach approximately the same number of people in SFY 2016-17.

Citizen Review Panels

For a copy of the annual report from the citizen review panels, see Appendix F. For a copy of North Carolina's most recent response to the panel and state and local child protective services agencies, see Appendix G.

Update on Services to Substance-Exposed Newborns

Reporting to CPS. By North Carolina statute (N.C.G.S. § 7B-301), anyone who suspects a child is being abused or neglected must report what they know to the county department of social services; child protective services (CPS) takes these reports. This law applies to everyone, including health care providers involved in the delivery or care of infants.

CPS Intake and CPS Assessment. NC DSS policy regarding infants born with and identified as being affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure can be found in the Child Welfare Services Manual, Chapter VIII: Protective Services, [Section 1407 – Structured Intake](#), and [Section 1408 – Investigative and Family Assessments](#).

County child welfare agencies use the form [DSS-1402](#), or “Structured Intake Report” to record information when receiving a child protective services report. This tool includes specific questions regarding drug exposed infants, including:

- What is the present physical condition of the child?
- If the baby is in the hospital, is he/she scheduled to be released soon?
- What is the attitude of the parent/caretaker toward the child?

Further, the Substance Abuse Screening Tool (see p. 64 of Section 1407, Chapter VIII of the NC Child Welfare Services Manual), a tool for use during the report screening process, provides additional guidance to agencies when they receive reports of drug-exposed infants. Specifically, the tool prompts agencies to ascertain whether the parent’s alcohol or drug use resulted in a positive screening at the child’s birth. Due to the fact that federal and state laws do not recognize prenatal child abuse, a mother’s positive screening, coupled with the infant’s negative screening in the absence of further information indicating abuse or neglect, does not warrant a CPS assessment in North Carolina. However, if a mother’s screen is positive and the infant’s is negative and there is also an agency history which indicates the child may be at risk, a CPS assessment is warranted. Newborn children who have a positive urine or meconium toxicology for drugs or alcohol are considered at risk and therefore warrant a CPS assessment. The CPS assessment would indicate what response is necessary. Without a CPS assessment, removal from the parent in the hospital would not be appropriate.

Planning to Ensure Safety and Well-Being. NC DSS policy regarding planning for the safe care of infants identified as being affected by illegal substance abuse or withdrawal symptoms or Fetal Alcohol Syndrome can be found in the Child Welfare Services Manual, Chapter VIII: Protective Services, [Section 1408 – Investigative and Family Assessments](#). County child welfare agencies who have accepted a CPS report for assessment regarding infants identified as being affected by illegal substance abuse or withdrawal symptoms or Fetal Alcohol Syndrome are responsible for assessing the safety of these infants and planning for their safe care. County child welfare agencies in these circumstances must ascertain whether it is safe for the infant to go home with the parents upon discharge from the hospital, whether an alternative plan for safe care needs to be arranged with a relative caregiver, or whether it is necessary for the infant to enter the agency’s legal custody and be placed within a family foster home.

Child welfare agencies must follow current policy regarding the assessment of child maltreatment allegations, including infants born and identified as being affected by illegal substance abuse or withdrawal symptoms. These requirements include, but are not limited to:

- Face-to-face contact and interviews with the children and parent/primary caretakers named in the report within the identified time frame for response;
- Visits to the home where the alleged victim child resides;
- Assessment of safety, risk, strengths and needs;

- Ongoing contact during the assessment sufficient to ensure safety, assess ongoing risk, monitor the effectiveness of the safety response, and ascertain family strengths.

Related Services. In addition to the above laws, policies, and procedures, services to substance-exposed newborns in North Carolina includes the **Perinatal Substance Use Project**. This NC DHHS sponsored-project makes available the following:

- *Treatment Referrals* — screening, information, and appropriate referrals for women throughout North Carolina who are pregnant or parenting and using substances. Also maintains an updated listing of available perinatal and maternal substance abuse treatment beds (residential services) throughout the state. Currently, specialized residential substance abuse services for women and their children are available in 12 agencies in 10 counties. Outpatient perinatal/maternal substance abuse services are available in 7 agencies as many counties. “NC CASAWORKS for Families Residential Programs in Abuse Service” are also available in 7 agencies in 7 counties.
- *Technical Support* — Technical assistance to agencies working with pregnant and parenting women on issues related to substance abuse.
- *Education & Outreach* — Gender-specific substance abuse training for agencies providing services to women who are pregnant and parenting.
- *Publications* — for North Carolina professionals featuring news and resources related to gender-specific substance abuse treatment in North Carolina.

Amendments to CAPTA made by P.L. 114-22, the Justice for Victims of Trafficking Act of 2015

North Carolina is continuing to implement the requirements of P.L. 114-22 (Justice for Victims of Trafficking Act) and P.L. 113-183 (Preventing Sex Trafficking and Strengthening Families Act) as they pertain to operating a statewide program relating to child abuse and neglect that includes (1) provisions and procedures regarding identifying and assessing all reports involving known or suspected child sex trafficking victims and (2) provisions and procedures for training CPS workers about identifying, assessing, and providing comprehensive services to children who are sex trafficking victims, including efforts to coordinate with state law enforcement, juvenile justice, and social service agencies such as runaway and homeless youth shelters. NC’s efforts to address trafficking among the child welfare population, from 2013 to present, include, but are not limited to, the following:

- In calendar year 2013 the North Carolina General Assembly (NCGA) passed Session Law 2013-368 (<http://www.ncleg.net/Sessions/2013/Bills/Senate/PDF/S683v7.pdf>) which amended the juvenile code definition of abused juvenile (G.S. 7B-101) to include any juvenile less than 18 years of age whose parent, guardian, custodian, or caretaker who commits or allows to be committed an offense under G.S. 14-43.11 (human trafficking), G.S. 14-43.12 (involuntary servitude), or G.S. 14-43.13 (sexual servitude) against the child. In addition, Session Law 2013-368 included a provision under G.S. 14-204 which provides immunity from prosecution for minors suspected of or charged with prostitution and that

law enforcement agencies discovering a minor involved in prostitution shall take the minor into temporary custody as an undisciplined juvenile and immediately report an allegation of human trafficking to the department of social services in the county where the minor resides or is found.

- In calendar year 2014 the University of North Carolina School of Social Work (UNC-CH) was selected as an ACF/Children's Bureau grantee (#90CA1822). The project's name is Project NO REST (North Carolina Organizing and Responding to the Exploitation and Sex Trafficking of Children). From the early stages of developing the grant application, through the current project stage, NC DSS has and will continue to partner closely with UNC-CH on Project NO REST to implement a systemic, multi-disciplinary, and coordinated statewide response to the issue of child trafficking. For more on Project NO REST, see the subsection "Victims of Human Trafficking" in section IV of this report.
- In response to P.L. 113-183 (Preventing Sex Trafficking and Strengthening Families Act), in September 2015 NC DSS released updated Child Placement Services Policy (<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-10/man/>) to include provisions for reporting children who have run away or are missing from foster care to law enforcement and the National Center for Missing and Exploited Children, to locate children missing from care, and to collect data regarding the experiences of children and youth missing from care prior to their missing/runaway period and their experiences while missing.
- In calendar year 2016 NC DSS revised *Child Welfare in North Carolina: Pre-Service*, the mandatory pre-service course for new workers and supervisors, to include information on recognizing human trafficking. For more on the revision of this course, see section V.4 (Training Plan).
- To facilitate meeting the requirements of both P.L. 114-22 and P.L. 113-183, NC DSS anticipates releasing in July 2016 a revised Child Protective Services Intake Policy (<http://info.dhhs.state.nc.us/olm/manuals/dss/csm-60/man/CS1407.pdf>, to include provisions for identifying and screening child protective services reports of the human trafficking of children.
- To facilitate meeting the requirements of both P.L. 114-22 and P.L. 113-183, NC DSS anticipates releasing in fall 2016 revisions to NC's Child Protective Services Investigative and Family Assessments Policy, to include provisions for assessing and providing services to children and youth who have been trafficked or are at risk of being trafficked.
- During calendar years 2016 and 2017 NC DSS plans to continue exploring and developing training opportunities to ensure child welfare workers across the state are prepared to recognize and respond to cases of child trafficking.
- In October 2015 Dr. Dean Duncan, from the UNC School of Social Work, gave a presentation about Project NO REST and the intersection of child welfare and human trafficking to the Western Child Welfare Partnership, a group made up of representatives of public and private child-placing agencies in North Carolina. Approximately 25 people

from 16 agencies were present. For more on Project NO REST, see the subsection "Victims of Human Trafficking" in section IV of this report.

IV. Chafee Foster Care Independence Program

Agency Administering CFCIP

NC DSS continues to be the agency responsible for administering the CFCIP and the Education and Training Voucher Program (ETV). The NC DSS program under which these are administered is called NC LINKS.

As entity supervising a county administered child welfare system, NC DSS provides oversight and monitoring to the 100 county departments of social services that provide CFCIP/LINKS direct services and services youth across the state. The process for determining eligibility for benefits and services described in NC's CFSP is unchanged.

Accomplishments/Updates

Foster Care to 21

While North Carolina has not participated in the federal extension of foster care in the past, the NCGA passed legislation during 2015 to extend foster care to age 21. Session Law 2015-241 ([House Bill 97](#)) included provisions which support the federal option of extending care to youth until their 21st birthday. While this impacts the federal IV-E program, the option to extend foster care for older youth will have a positive impact on the CFCIP by increasing the chances youth will choose to remain in care and engage in LINKS services. It will also expand the options of their living arrangements. Currently, NC's voluntary placement agreements allow youth to remain in foster care past age 18 but require them to live only in licensed placements. Foster Care to 21 will remove this limitation.

Supporting Age- and Developmentally-Appropriate Activities

NC's LINKS program has always supported and funded age- and developmentally-appropriate activities when they were justified in helping a youth achieve one of the other seven CFCIP outcome goals. Now that this has been added a CFCIP goal, in FY 2017 North Carolina will continue its efforts to make this a reality for all youth in foster care.

The fact that this new CFCIP goal aligns well with the **Reasonable and Prudent Parent Standard** will facilitate this. In SFY 2015-16 NC DSS established statewide policies providing standards for the application of the Reasonable and Prudent Parent Standard in family foster homes and residential child caring institutions. NC DSS also issued guidance for demonstrating to the court, at each permanency hearing, whether a child has regular ongoing opportunities to engage in age- or developmentally-appropriate activities.

These policies were developed through an active, collaborative workgroup that began in April 2015 between NC DSS and representatives from county child welfare agencies, the Guardian ad

Litem Program's Administrative Office, private child-placing agencies (including Benchmarks member organizations), and SaySo and other foster youth advocacy organizations. The policies were released in September 2015.

Additionally, the NCGA passed legislation that further supports the Reasonable and Prudent Parent Standard and ensuring that older youths in care have regular, ongoing opportunities to engage in age- or developmentally-appropriate activities. Session Law 2015-135 ([Senate Bill 423](#)) aligned state law with federal law by:

- Establishing a reasonable and prudent parenting standard in the North Carolina foster care system, providing liability insurance for foster parents;
- Reducing barriers to obtaining a driver's license for foster youth by allowing minors in custody to contract for automobile insurance;
- Specifying persons other than the foster parent who may sign for a foster child to obtain a learner's permit or provisional driver's license; and
- Clarifying that foster parents do not violate financial responsibility requirements by allowing foster youth their own insurance coverage to operate a vehicle owned by the foster parent.

Further, NC DSS has made changes to the forms "Model Court Report for Permanency Planning Hearings" ([DSS-5311](#)), "Monthly Foster Care Contact Record" ([DSS-5295](#)), and "Monthly Foster Care Contact Record, Group Home Version" ([DSS-5296](#)) to support the implementation of the reasonable and prudent parent standard. Fields added to these forms capture information about whether ongoing opportunities exist for children and youth in care to engage in age- or developmentally-appropriate activities, as well as provides the agency an opportunity to document information about their efforts to ensure that children and youth in foster care are provided these opportunities and whether resource parents are applying the standard.

NC DSS makes and will continue to make efforts to inform and support child welfare agencies, resource parents, and youth about the importance of the Reasonable and Prudent Parent Standard and ensuring youth in care (especially older youth) have regular, ongoing opportunities to engage in age- or developmentally-appropriate activities. Examples of this from the past year include the following:

- **Webinar: Normalcy for Youth and Foster Parents.** More than 478 individuals registered for this event for young people in foster care, foster parents, congregate care staff, and LINKS staff from NC county DSS agencies. For more on this event, see section V.4 (Training Plan).
- **Webinar: Promoting Normalcy for Children and Youth in Foster Care.** On Nov. 3, 2015, in partnership with the UNC School of Social Work, NC DSS offered a 90-minute webinar for child welfare professionals from NC county DSS agencies; child welfare professionals from NC private child-placing agencies; and program staff, volunteers, and attorneys from NC Guardian ad Litem programs. More than 490 individuals registered for this event, a recording of which is available at <http://fcrp.unc.edu/webinars.asp>. Event handouts and extensive follow-up document answering many questions asked during this event can also be found at this link.

- **Article: 2015 North Carolina Legislative Changes Impacting Foster Parents and Young People in Foster Care.** Appeared in [Fostering Perspectives](#), Vol. 20, No. 2 (May 2016). For more on *Fostering Perspectives*, see section V.4 (Training Plan)
- **Article: Foster Care Alumni Reflect on NC's New "Normalcy" Legislation.** Appeared in [Fostering Perspectives](#), Vol. 20, No. 1 (Nov. 2016). For more on *Fostering Perspectives*, see section V.4 (Training Plan).
- **Article: Navigating Reasonable and Prudent Parenting.** Appeared in [Fostering Perspectives](#), Vol. 20, No. 1 (Nov. 2016). For more on *Fostering Perspectives*, see section V.4 (Training Plan).
- **Presentations about Implementing the Reasonable and Prudent Parenting Standard** were made to the following groups:
 - Aug. 18, 2015. Presentation to Western Child Welfare Partnership, a group made up of representatives of public and private child-placing agencies. Approximately 45 people from 24 agencies were present, including representatives from eight county DSS agencies.
 - February 26, 2016. Presentation to the NC chapter of the Foster-Family Based Treatment Association (FFTA). Approximately 30 people from 25 agencies were present.
 - April 13, 2016. Presentation to the Western Adoption and Foster Care Association, a group made up of representatives of public and private child-placing agencies. Approximately 25 people from 25 agencies were present

Supporting Transitioning Youth

The NCGA has also passed legislation to improve the quality of care and outcomes for foster youth transitioning to adulthood. Within 2015 Appropriations, Session Law 2015-241 ([House Bill 97](#)), the NCGA included provisions to fund and support “Foster Care Transition Living Initiative Fund” that will support a demonstration project with services by Youth Villages to:

- Improve outcomes for youth ages 17-21 years who transition from foster care through implementation of 16 outcome-based Transitional Living Services,
- Identify cost-savings in social services, juvenile and adult correction services associated with the provision of Transitional Living Services to youth aging out of foster care, and
- Take necessary steps to establish an evidence-based transitional living program available to all youth aging out of foster care. The Foster Care Transitional Living Initiative Fund shall support the following strategies:
 - Transitional Living Services, which is an outcome-based program that follows the Youth Villages Transitional Living Model. Outcomes on more than 7,000 participants have been tracked since the program's inception. The program has been evaluated through an independent Randomized Controlled Trial. Results indicate that Youth Villages Transitional Living Model had positive impacts in a

variety of areas, including housing stability, earnings, economic hardship, mental health, and intimate partner violence in comparison to the control population.

- Public-Private Partnership, which is a commitment by private-sector funding partners to match one hundred percent (100%) of the funds appropriated to the Foster Care Transitional Living Initiative Fund for the 2015-2017 fiscal biennium for the purposes of providing Transitional Living Services through the Youth Villages Transitional Living Model to youth aging out of foster care.
- Impact Measurement and Evaluation, which are services funded through private partners to provide independent measurement and evaluation of the impact the Youth Villages Transitional Living Model has on the youth served, the foster care system, and on other programs and services provided by the State which are utilized by former foster care youth.
- Advancement of Evidence-Based Process, which is the implementation and ongoing evaluation of the Youth Villages Transitional Living Model for the purposes of establishing the first evidence-based transitional living program in the nation. To establish the evidence-based program, additional randomized controlled trials may be conducted to advance the model.

Training to Support the 2015-2019 CFSP

NC DSS continues to contract with Independent Living Resources, Inc. (ILR) to provide transitional living education services to NC's foster youth, foster parents and case workers. Please see section V.4 (Training Plan) for additional details.

National Youth in Transition Database (NYTD)

In spring 2015 the U.S. Children's Bureau found North Carolina to be out of compliance with the mandatory NYTD participation rate of 60%. In response, NC DSS and its Performance Management Section developed a monthly monitoring process to provide status updates on the progress of efforts to engage youth and survey participation. Since July 1, 2015 this has been a standing agenda item on the monthly calls NC DSS has with county DSS LINKS coordinators. These monthly status updates include data on the total number of eligible youth per county, the number of youth who have completed a survey per county, and a calculation showing what percentage of the eligible youth have completed the survey per county. When a county's performance related to NYTD data collection needs improvement, NC DSS provides technical assistance.

In an effort to boost county NYTD reporting performance, on September 15, 2015 NC DSS issued an administrative letter ([CWS-10-2015](#)) reminding agencies of the need to conduct these surveys and of looming federal penalties if counties did not do so. To motivate agencies, this letter also included a list detailing which counties had outstanding NYTD surveys. NC DSS also encouraged county DSS agencies to offer a small financial incentive to youth promote the improvement of NYTD survey collection. These efforts were successful, enabling NC to achieve the mandated 60% response rate.

In the coming year, NC DSS will continue to develop ways to improve survey collection by providing information and technical assistance targeted on ways to locate, engage, and maintain a connection with youth in order to increase survey participation rates.

Youth Engagement

In FY 2015, NC DSS contracted with ILR, Inc. and [SaySo](#), a youth-led advocacy organization, to engage key stakeholders. ILR, which employs foster care alumni, and SaySo provide advocacy for foster youth and incorporate the youth voice from around the state by engaging youth at local DSS agencies, community events, statewide meetings, and conferences.

The Division's contract with ILR/SaySo includes a position entitled "SaySo Liaison to NC DSS/General Assembly." This position is occupied by a former foster youth who is a resource to NC DSS and the NCGA, offering the youth voice in policy and program development and proposed legislation. NC DSS plans to renew its contract with the ILR/SaySo in FY 2017 to maintain youth involvement in system reforms.

Homelessness Prevention

Families at-Risk of Homelessness/Unaccompanied Homeless Youth. NC DSS continues to coordinate with the State Coordinator of the North Carolina Homeless Education Program <http://center.serve.org/hepnc/index.php> to ensure compliance with the McKinney-Vento Homeless Act. In addition, NC DSS is an active member of the North Carolina Collaborative for Youth in Transition (NCCYT). The NCCYT is a network of representatives from public and private agencies that promote successful transitions to adulthood for youth in our communities. The aim is to inform and influence the systems affecting transitioning youth by advocating for improved services and outcomes. Goals include: (1) Share and disseminate information; (2) Promote collaboration; and (3) Advocate for improved services and improved outcomes in all areas of life for transitioning youth.

In addition, NC DSS continues to partner with Independent Living Resources, Inc. (ILR) to provide training to help foster parents, relative guardians, adoptive parents, workers in group homes, and case managers understand and address the issues confronting adolescents preparing for independent living. Offerings in 2015 in this area included the courses *Helping Youths Reach Self-Sufficiency* and *LINKS 101*, LINK UP conferences, and day-long "It's My Transition" workshops. For more detail, please refer to the subsection "Chafee Foster Care Independence Program (CFCIP) Training" in section V.4 (Training Plan).

Supporting Transitioning Youth

In FY 2017, NC DSS will continue its partnership with the [North Carolina Collaborative on Youth in Transition](#) whose members include representatives from the NC Administrative Offices of the Courts, the NC Department of Commerce Workforce Investment Act, SaySo, the NC Department of Public Instruction, the NC Division of Mental Health, Developmental Disabilities, and Substance Abuse Services, the NC Division of Juvenile Justice, and community-based shelters and youth-serving agencies. The goals of the collaborative are to share and disseminate information, promote collaboration, and advocate for improved services and outcomes in all areas of life for transitioning youth.

Pregnancy Prevention

Sharing the NC DHHS mission to protect the health and safety of all North Carolinians, NC DSS often partners with the NC Division of Public Health (NC DPH) around issues of prevention. NC DPH is the lead agency of the Adolescent Pregnancy Prevention Program funding. When NC DPH posts a request for applications to award Teen Pregnancy Prevention Initiative grants, NC DSS assists NC DPH by reviewing the grant applications and recommending awarded sites. An overview of the awarded programs and locations can be accessed at this link <http://www.teenpregnancy.ncdhhs.gov/>. Since every county social services agency is responsible for identifying a LINKS coordinator, resources such as these are shared via the NC DSS LINKS Coordinator email listserv so local coordinators may share them with youth.

Victims of Human Trafficking

Since July 1, 2015 NC DSS and its partners have been working to promote a safe transition to independence by reducing the risk that youth will be victims of human trafficking. The most notable example of this is Project NO REST (North Carolina Organizing and Responding to the Exploitation and Sex Trafficking of Children). Funded through a five-year grant (#90CA1822) provided by Administration for Children and Families (ACF) and begun in October 2014, the goals of Project NO REST are (1) to build awareness of human trafficking affecting children and youth involved in the child welfare system in NC, (2) to reduce the number who are trafficked, and (3) to improve outcomes for those who are.

NC DSS is partnering with the grantee organization, UNC-CH, to identify and address necessary system improvements for protection and service provision to children and youth, including child welfare-involved children and youth, who have been trafficked or are at risk of being trafficked. Other key partners on the project include, but are not limited to: county social service agencies; NC Conference of District Attorneys (AOC); NC Department of Public Instruction; NC Division of Mental Health, Developmental Disabilities, and Substance Abuse Services; state and local law enforcement agencies; sexual assault response agencies; statewide coalitions against sexual assault and human trafficking; child advocacy centers; Prevent Child Abuse North Carolina; NC Child; North Carolina-based Runaway and Homeless Youth grantees; and various nonprofit, anti-human trafficking agencies focused on victim services and advocacy.

Strategies for achieving project goals include:

- Promoting a strategic, coordinated approach to the provision of services for children and youth who are victims of human trafficking and who have contact with the child welfare system.
- Expanding and coordinating human trafficking-related research data and evaluation, especially related to children and youth involved with the child welfare system in NC.
- Providing and promoting outreach, training, and technical assistance to agencies and organizations at the state and local level to increase victim identification and expand the availability of services.

- Promoting effective, culturally appropriate, trauma-informed services that improve the short-and long-term health, safety and well-being of victims who were or are involved with the child welfare system.

Project goals and strategies will be accomplished by bringing together government agencies, nonprofit organizations, and other stakeholders to implement a comprehensive and coordinated plan to address human trafficking among child welfare-involved children and youth. During 2016-17, the project anticipates:

- Selecting up to five (5) communities across the state to fund implementation efforts addressing human trafficking over two years.
- Developing and providing trafficking training and technical assistance.
- Developing an inventory of the facilities across the state that provide services to youth who have been trafficked.
- Convening service providers, survivors of trafficking, child caring agencies, social service agencies, funders, and others from across the state to develop a service and practice model for youth who have been trafficked.
- Continuing an analysis of existing data sources, development of additional data sources to address gaps, and report of findings to stakeholders and others.
- Disseminating ongoing project information, including project milestones, to the Children’s Bureau, as well as project stakeholders and others.

NC DSS will continue partnering with the UNC-CH to identify and address necessary system improvements for protection and service provision to children and youth, including child welfare-involved children and youth, who have been trafficked or are at risk of being trafficked. Specifically, NC DSS is currently amending child welfare policy to address trafficking. Policy guidance being developed for child welfare services includes recognizing, assessing, and providing services to children and youth who have been trafficked.

Training in Support of LGBTQ Youth in Foster Care

Since July 1, 2015, North Carolina has worked to train resource parents and child welfare professionals to support and affirm lesbian, gay, bisexual, transgender or questioning (LGBTQ) youth and/or address the unique issues confronting LGBTQ youth, particularly through the following:

- *Learning to Support, Include, and Empower Lesbian, Gay, Bisexual, Trans* and Questioning Youth in Substitute Care.* NC DSS, in partnership with the Center for Family and Community Engagement at NC State University, now offers this Self-paced, online course for Foster care social workers and foster parents with public and private child-placing agencies. For more on this, please refer to section V.4 (Training Plan).
- "Reflections from a Father and Son about LGBTQ Children in Foster Care." This article appeared in Nov. 2015 the widely distributed NC DSS-sponsored publication *Fostering Perspectives* (vol. 20, no. 1). Support for LGBTQ children in care is an ongoing theme in

Fostering Perspectives. For more about this publication, please refer to section V.4 (Training Plan).

Consultation with Tribes

As described above (II.6, Consultation and Coordination with Tribes), as of October 1, 2015, the Eastern Band of Cherokee Indians (EBCI), a federally-recognized Indian tribe under federal law, now provides child welfare services, including Chafee-related services and programming, to the population living on Tribal trust lands.

Education and Training Voucher Program

Since 2003, NC DSS has contracted with Orphan Foundation of America, DBA Foster Care to Success (FC2S), to administer the North Carolina Education and Training Voucher Program (NC ETV). NC ETV makes available vouchers for youth who were in care at age 17 and youth who were adopted out of care or placed in a relative guardianship on or after their 16th birthday to attend appropriately accredited postsecondary institutions of higher learning or access vocational training. FC2S continues to have the expertise and commitment to address the needs of program participants throughout the state and effectively administer the NC ETV Program.

The Division does not anticipate changes to the way in which the NC ETV Program is administered. Presently, the Division is in the process of renewing its contract with FC2S for SFY 2016-17 to continue administering the ETV program.

The table below provides the total number of ETV awards for the 2014-15 school year and the 2015-16 school year (as of April 2016), as well as the number of youth who were new voucher recipients each school year.

Annual Reporting of NC Education and Training Vouchers Awarded

School Year	Total ETVs Awarded	Number of New ETVs
2014-15	322	151
2015-16	284*	129*

**As of April 2016*

V. Targeted Plans Update

1. Foster and Adoptive Parent Diligent Recruitment Plan

North Carolina continues efforts to implement and strengthen its Foster and Adoptive Parent Diligent Recruitment plan, which plays an important role in its statewide efforts to ensure the state is recruiting potential foster and adoptive families who reflect the ethnic and racial diversity of children for whom foster and adoptive homes are needed.

There are no statewide bans, restrictions, or limitations designed to discourage or prevent same-sex couples or LGBTQ individuals from becoming resource parents, nor does North Carolina have in place any policies that limit its ability to recruit foster and adoptive families that reflect the diversity of children in care.

Foster and adoptive parent recruiting in our state was found by the most recent federal CFSR to be an area needing improvement. To respond to this finding, North Carolina has included a strategy in its draft federal Program Improvement Plan (PIP) designed to strengthen the resource parent recruitment plan to increase the capacity of our resource parents to meet the needs of the children and youth they serve. Under this strategy, we will engage the National Resource Center for Diligent Recruitment in providing support to improve the diligent recruitment plan, clarify and streamline the components of family recruitment efforts at both the state level and county level, explore additional and/or refine current recruitment strategies (as needed), and develop and execute a communication plan regarding the improved diligent recruitment plan for county DSS and private child-placing agencies. It is anticipated this collaboration with the National Resource Center for Diligent Recruitment may lead to changes to North Carolina's CFSP in next year's APSR.

This year, as in the past, the Division of Social Services' NC Kids Adoption and Foster Care Network served as a statewide recruitment entity. NC Kids is a first point of contact for individuals interested in becoming resource parents; it is also a supportive service to county DSS agencies. The following update on our progress and accomplishments is broken down into three sections:

- Characteristics of children for whom foster and adoptive homes are needed,
- Direct recruitment by NC DSS, and
- Support to local entities in their recruitment of resource families.

Update on Characteristics of Children for Whom Foster and Adoptive Homes Are Needed

In the figures below, data for 2014-15 are current through March 1, 2016. Foster care data is from the NC DSS Management Assistance site (<http://ssw.unc.edu/ma/>). Adoption data is from North Carolina's Adoption Information Management System (AIMS).

Traits	2013-14		2014-15		2015-16	
	Homes Needed	In FC	Homes Needed	In FC	Homes Needed	In FC
NUMBER OF CHILDREN*	284	9760	259	10248	256	10243
AGE**						
0-6 years	58	3849	58	4066	39	4102
7-12 years	110	2977	112	3194	115	3215
13-18 years	110	2934	96	2988	139	2926
GENDER***						
Male	149	5047	58	5358	156	5297
Female	118	4713	112	4890	137	4946
RACE^						
African American	903	3288	986	3438	1,093	3343
American Indian	N/A	241	N/A	254	N/A	250
White	835	5267	931	5580	1,048	5677
Hispanic	152	837	168	825	187	770
Other	42	964	42	976	65	973

* Children registered on NC Kids are either actively registered (currently recruiting through the website) or on legal risk status (internal matching only).

** Children registered through NC Kids who are in need of adoptive homes in North Carolina are older children (ages 6-18), with the highest age of children in need of adoptive placement as 13 years old.

*** Significantly more male children in need of adoptive placement are registered through NC Kids.

^According to the 2012 census, 71.9% of the NC population is White, 22% is Black, and 8.7% is Hispanic/Latino. Of those children in need of adoptive placement, a disproportionate number are Black

In the table above, the data in columns labeled "Homes Needed" depict children waiting to be adopted who are registered with NC Kids Adoption and Foster Care Network. Note, however, that not all children available for adoption are registered with NC Kids. In many instances, this is because an adoptive placement has already been identified for the child, which makes inclusion in NC's photolisting inappropriate. Thus, the totals listed above in the "Homes Needed" columns in all likelihood undercount the number of North Carolina children in foster care who are in need of adoptive homes.

Direct Recruitment

Adoption recruitment efforts through NC Kids are an important part of our CFSP. A notable achievement in the past year was the expansion of the **North Carolina Heart Gallery**, which

specifically targets foster and adoptive parent recruitment for older children, children with disabilities, children of color, and sibling groups. Efforts in this area included the following:

- NC DSS partnered with the NC State Employees Credit Union (NC SECU) to display 47 Heart Galleries throughout the state, one in each of NC SECU's regions, rotating to all of the branches within the region during January and July 2015. Because the program was a success the displays were extended through the end of December 2015. An additional 20 photos were completed and added to both the NC SECU and NC DSS galleries in January 2016. NC SECU is committed rotating the galleries through their branches through December 2016.
- Six more Heart Galleries are in rotation around the state to various community partners for varying periods of time. These displays have appeared in 22 different venues during SFY 2015-16, including churches, an ICWA conference, social service agencies, the Mecklenburg County Adoption Conference, and the Independent Living Resources Annual Conference.
- A total of 49 children have been featured in the NC Heart Gallery since October 2014. Of those, 21 are no longer featured. Outcomes for these 21 children are as follows:

Placement with an adoptive family	13
Placement with a guardian	2
Reunification	1
Aged out of foster care	3
Other	2

NC's Permanency Innovation Initiative is an effort launched in 2013 by NC's General Assembly. Under this state-sponsored initiative a private child-placing agency, Children's Home Society of North Carolina (CHS), provides services to improve permanency outcomes for children living in foster care, to improve engagement with biological relatives, and to reduce costs associated with maintaining children in foster care. Since July 1, 2015 CHS has achieved positive outcomes for children and families with the following services.

Family Finding. Family Finding is a six-step model offering methods and strategies to locate and engage family members of children living in out-of-home care, with a focus on achieving legal and relational permanence. Since July 1, 2015:

- 242 children have been served by CHS Family Finding efforts
- 64% of children receiving the most intensive level of Family Finding services have had a Decision Making meeting
- 65% of these children had 5+ relatives or fictive kin commit to ongoing engagement with them
- 69% of children who had a "Decision Making" meeting had 1+ relatives or fictive kin commit to helping them achieve permanency
- 22% of children receiving Family Finding services were placed with a family
- 18% of children receiving Family Finding services achieved permanence with a family

- 100% of children and case workers involved in Family Finding report satisfaction with the services

Child Specific Adoption Recruitment. Child-Specific Adoption Recruitment (CSR) is an approach to finding adoptive families for children that involves developing an individualized plan for each child based on the child's background and needs. The goal is to identify specific parents who meet the specific needs of each child awaiting a permanent family. Since July 1, 2015, CHS has provided CSR services to 102 children. Of these:

- 48% have been matched with a family
- 43% have been placed with a family
- 43% have been adopted
- 100% of CSR-involved children and case workers report satisfaction with the services

Permanency-Related Training. Since July 1, 2015, child welfare agencies and partners have received a total of 210 hours of permanency-related training and coaching/consultation from CHS as part of the Permanency Innovation Initiative. This includes 27 training sessions with 690 staff from 14 NC county DSS agencies.

Dissemination of information on how to become a foster or adoptive parent or about specific children legally free for adoption continues with the NC Kids website, hotline, and email list. Since the submission of the CFSP, NC Kids has been tracking calls, emails, and inquiries made by community members about becoming resource parents. This tracking is done through a survey (when the inquiry is by email) or by a consultant during initial phone calls. Between June and December 2015 NC Kids received more than 700 phone and email contacts, including 8 about Heart Galleries, 138 in response to the NC Kids web site, 292 child-specific website inquiries, 12 as a result of word of mouth, and 235 contacts in response to AdoptUSKids.

Fostering Perspectives (www.fosteringperspectives.org), is a free newsletter produced by the NC Division of Social Services in partnership the UNC School of Social Work. It goes out twice a year to every licensed foster parent in North Carolina, and also to North Carolina's child welfare professionals. Each print issue reaches about 10,000 people, most of them in NC. Information about new issues of *Fostering Perspectives* is also sent to the approximately 5,200 people who subscribe to the newsletter listserv. Each issue furthers diligent recruitment efforts by regularly featuring waiting children and offering information that supports existing foster parents (current foster parents are the best means of recruiting new foster parents). The themes of the issues this year were "Taking Care of Yourself" (Vol. 19, No. 2) and "Parenting Special Populations in Foster Care" (Vol. 20, No. 1). In addition, every issue of features profiles and photos of young people in foster care free for adoption.

Regular Outreach, Education, and Community Recruitment Events. NC Kids Adoption and Foster Care Network also engages in regular outreach, education, and community recruitment events. For example in November 2015 the NC Department of Health and Human Services held an Adoption Month Event regarding the need for additional community investment around recruitment of resource parents in NC. Outreach activities typically involve partnering with and educating county DSS agencies regarding the requirements of and resources available through NC Kids. In 2015-16 these activities included things such as distributing mailers and written

materials and presenting during the Oct. 2015 webinar "Tips and Strategies for Successful Out-of-State Adoptive Placement," for which 148 child welfare professionals from 57 agencies were registered from 57 agencies. Webinar handouts and recording of the webinar are available at <http://fcrp.unc.edu/webinars.asp>. For more on webinars, see section V.4 (Training Plan).

Supportive Services

Since the submission of the CFSP, NC DSS has engaged in the following in fulfillment of the state's diligent recruitment plan:

- **Foster Care to 21.** NC Session Law 2015-241 (2015 Appropriations Act) was passed to include "Fostering Success/Extend Foster Care to 21 Years of Age." NC DSS worked with collaborative partners and the General Assembly to afford the opportunity for youth to continue foster care services from 18 to 21 years of age if the individual is:
 - Completing secondary education or a program leading to an equivalent credential;
 - Enrolled in an institution that provides postsecondary or vocational education;
 - Participating in a program or activity designed to promote, or remove barriers to employment;
 - Employed for at least 80 hours per month; or
 - Is incapable of completing the educational or employment requirements of this subsection due to a medical condition or disability.

This law also provides the availability of adoption assistance payments to continue until the youth reaches the age of 21 if the youth was adopted at 16 or 17 years of age. NC DSS is in the process of refining a plan for the expansion of foster care and adoption assistance. Implementation of the plan shall take place on January 1, 2017. These developments around Foster Care to 21 will enhance NC's capacity to recruit and retain families for children and youth in need of foster and adoptive homes.

- **Foster Parent Liability Insurance.** A portion of North Carolina's Foster Care Family Act (Session Law 2015-135), which became law in July 2015, brought foster parent liability insurance to our state for the first time. To protect foster parents from financial exposure, the Act ordered NC's Rate Bureau, which is responsible for establishing and administering rules and rates for insurance, to develop an optional liability insurance policy for licensed foster parents. Foster parents can use this optional insurance, if they choose to purchase it, to protect their assets against litigation in the event a child in their care is hurt. This optional new insurance became available on May 1, 2016. It is hoped the availability of this new insurance will help attract and retain resource parents in our state.
- **Continued Implementation of Trauma-Informed Partnering for Safety – Model Approach to Partnerships in Parenting (TIPS- MAPP) statewide.** This allows for better preparation of foster and adoptive parents. Special attention is given to addressing issues of fidelity to the training model, which will improve the assessment and selection of resource parents.
- **Latino MAPP Workgroup.** In the 2016 APSR, the following "next steps" were highlighted for this group: (1) develop written summary of survey results; (2) develop contact list from liaisons identified in the survey results; (3) update agency liaisons (from the survey) with

survey results and steps being taken by workgroup. In 2015-16 the contact list was developed and used to identify possible resources when needed for Spanish-speaking MAPP Leaders. These and other activities as outlined in the 2015-2019 CFSP will continue.

- Update: One county DSS has two bilingual staff who will be trained as MAPP leaders in the next year. In addition, a question was added to the MAPP registration process that asks registrants to identify languages in which they are fluent. This will help us track potential agency staff resources for providing MAPP in Spanish.
- **MAPP Materials in Spanish.** NC DSS also continues to communicate with Children’s Alliance of Kansas, the owner of MAPP, regarding the translation of additional MAPP training materials into Spanish. We have been told progress is being made in this area.
- **Latino Recruitment and Retention Guide.** To support local entities regarding diligent recruitment of Latino families, NC DSS’s recruitment guide [Treat Them Like Gold](#) was recently updated and a companion guide focused on recruitment and partnering with Spanish speaking resource families was developed in partnership the UNC School of Social Work and with county DSS agency representatives. This new [guide](#) was published online and disseminated to public and private child-placing agencies on Oct. 9, 2015.
- **Online Orientation for Prospective Foster Parents.** NC DSS, in partnership the UNC School of Social Work, continues to offer its online, on-demand, self-paced orientation for prospective foster parents. Public and private child-placing agencies have been asked to make completion of this online orientation mandatory for all foster parents. This orientation is located on the homepage of North Carolina’s learning portal for child welfare professionals, ncswLearn.org. Since it was deployed in 2013 the orientation has been uniquely accessed 6,038 times. Since July 1, 2015 its certificate of completion has been uniquely accessed 2,925 times.
- **Webinar: Tips and Strategies for Successful Out-of-State Adoptive Placements.** On October 6, 2015 NC DSS, in partnership the UNC School of Social Work, hosted this 90-minute webinar, for which. 148 individuals registered. Overall, the webinar received positive reviews from participants, with 96% of those who responded to a satisfaction survey saying their understanding of the topic increased and 100% saying they intend to use what they learned on the job. Webinar handouts and recording of the webinar are available at <http://fcrp.unc.edu/webinars.asp>. For more on webinars, see section V.4 (Training Plan).
- **State-Funded Supplement for Children Exposed to the Human Immunodeficiency Virus (HIV).** NC provides supplemental board payments for children in foster care and supplemental adoption assistance payments for children who have been adopted that were diagnosed as having been prenatally exposed to HIV or who have developed symptoms of HIV/AIDS in foster care. Supplemental payments for HIV positive children may be made to foster/adoptive parents, group homes, or child caring institutions licensed by NC DSS. Reimbursement rates range between \$800-\$1,600 per month based on the age of the child and the status of the disease. Since July 1, 2015, over \$200,000 has

been expended to provide 181 children an HIV adoption assistance subsidy and 30 children in foster care an HIV supplemental board payment.

- **Special Children Adoption Incentive Fund (SCAIF).** The NC Appropriations Act annually authorizes Social Services Block Grant (SSBG) funding for a Special Children Adoption Incentive Fund. The SSBG funding is then combined with local and state matching funds to make adoption a possibility for children with special health care needs who would otherwise remain in the foster care system because of the financial loss to foster/adoptive parents. By the end of SFY 2015-16, an average of 209 families of adopted children will have been provided SCAIF monthly payments totaling approximately \$1,850,000.

2. Health Care Oversight and Coordination Plan

Fostering Health NC, a project administered by the NC Pediatric Society, will continue to partner with NC DSS and other stakeholders in operationalizing North Carolina's Health Oversight and Coordination Plan (HOCP) through:

1. Leveraging technology to improve information flow and care coordination with Community Care NC's (CCNC) Provider Portal.

Goal: Increase number of counties with executed Technology-Enabled Care Coordination Agreements (TECCAs) from 13 to 21 by May 2016

- Update: Currently there are 40 counties with a signed TECCA, exceeding expectations.

2. Sharing best practices—increasing knowledge of American Academy of Pediatrics (AAP) recommended standards of care.

Goal: Continue dissemination of FHNC online library resources:

<http://www.ncpeds.org/foster-care-medical-home>

- Update: This continues. In addition, in December 2015 NC DSS began offering on its human services learning portal the following two self-paced, online courses for child welfare professionals, which both describe the AAP standards:
 - *Fostering Connections I: Partnering to Improve the Health and Well-being of Children in Foster Care* is a brief course for child welfare line staff, supervisors, managers, and directors. It provides knowledge and tools to help them collaborate successfully with medical homes and the local community care network to improve outcomes for children in foster care.
 - *Fostering Connections II: Building Local Systems to Improve the Health and Well-being of Children in Foster Care* helps agency leaders create successful interagency partnerships between DSS, medical homes, and the local community care network.

3. Resources include guidance on Medicaid coding, social emotional screening, and transition.
 - Goal:** Finalize psychotropic medication guidance document/coordinate dissemination with agency partners.
 - Update: This document was completed and dissemination of it began in October 2015. It is frequently used in FHNC technical assistance efforts. It is also profiled as a special resource “add on” in the self-paced, online courses for child welfare professionals *Fostering Connections I and Fostering Connections II*.

4. Improving processes—facilitate locally-developed protocols for care coordination that align w/AAP recommendations.
 - Goal:** Increase number of counties with signed letters of agreement in place from 1 to 13 by May 2016.
 - Update: We currently have 11 counties with signed agreements with 2 more in process.
 - Goal:** Increase number of counties using alternative Health Summary Forms from 2 to 6 by May 2016.
 - Update: There are currently 26 counties utilizing the new forms, exceeding expectations. In SFY 2016-17 it will become a requirement for all 100 counties to use them.

5. Informing policy—support advances in cross-agency collaboration
 - Goal:** Participate in developing a memorandum of understanding between Division of Medical Assistance (DMA), DSS, DPI, Department of Juvenile Justice (DJJ), and CCNC to support broader sharing of actionable information about youth in foster care.
 - Update: *Information-sharing MOU*—because the contemplated MOU will likely support the CCNC “Health Passport” platform, FHNC is working with CCNC in organizing this effort. .
 - Goal:** Facilitate completion and dissemination of guidance on improving continuity of mental health services for youth placed outside their “home” LME-MCO catchment areas (i.e., protocols for using “Single Case Agreements”).
 - **Update:** *Continuity across LME/MCO catchment areas*—multidisciplinary workgroup (participants included representatives from DSS, DMA, DMH, NC Council of Community Programs, CCNC, FHNC) drafted a set of protocols and common terminology to improve coordination for children/youth in the child welfare system needing behavioral health services outside their home catchment areas. The workgroup submitted these drafts in June 2015 to the LME/MCO Steering Committee, Out-of-Network Agreement Task Force for

consideration. The Division of Medical Assistance distributed these recommendations in May 2016.

In addition to these updates, progress has been made with regard to the implementation of the foster care medical home model in North Carolina. As of May 16, 2016, 94 pediatric practices in more than half of our counties are implementing this model.

3. Disaster Plan

This Disaster Plan is applied to all Disaster Case Management stakeholders at the local, state, and federal levels, while operating within the State of North Carolina after a disaster. The base plan provides general operating guidance and is supported by more specific annexes. The complete plan is attached in Appendix H. The state was not affected by a disaster in the past year. There are no changes or additions needed to the plan.

4. Training Plan

Initial and ongoing staff training in our state were found by the most recent federal CFSR to be areas needing improvement. North Carolina may make changes to the Training Plan in next year's APSR in response to this finding. North Carolina believes that in part this finding is based on federal interviews with stakeholders who were uninformed or mistaken about the state's child welfare training system, its capacity, and how it works. Our state has a robust, responsive, competency-based child welfare training system offering 59 child welfare curricula, including pre-service and in-service courses. For a concise description of the organization of the child welfare courses offered by the NC Division of Social Services, please see Appendix I, "Structure of NC's Child Welfare Training Courses" (note: this document will be integrated into NC's training plan when it is revised). In future North Carolina will work to improve communication about the training system with stakeholders and to strengthen areas identified by the CFSR as areas needing improvement.

Because training plays an important role in some of the strategies in North Carolina's draft PIP (see Appendix A) this, too, may lead to changes to North Carolina's Training Plan in next year's APSR. In the future, in addition to its traditional North Carolina training partners, NC DSS expects to collaborate with the National Child Welfare Workforce Institute and the Capacity Building Center for a number of yet to be determined training-related endeavors.

Responding to Increased Demand

In 2015 the work of the NC DSS Program Monitoring Team generated huge interest among county DSS agencies in training registrations. Program evaluations with the counties have shed light on gaps in training of county staff. This, in combination with changes in laws and policies, generated a substantial increase in the number of training registrations. The *CPS Intake* training, which has a maximum capacity of 26 learners, is a good example of this increase. The number of registrations received for this course in 2015 often outstripped this capacity: July 2015 event: 29 registrations; August event: 59 registrations; October event: 91 registrations.

In keeping with established practices, NC DSS child welfare training system administrators are responding to this situation by using training system data captured from www.ncswlearn.org to identify areas of particular demand and reallocating available resources to meet need where it exists. The NC DSS is also exploring all available avenues, including consulting with the NC General Assembly, to procure new resources to provide needed training.

Available Training

A full calendar of training events is offered on a six-month basis each year. For the most recent course offerings, please visit www.ncswlearn.org.

Update on Training Activities

New Courses and Webinars

This year North Carolina added the following new courses and webinars to its child welfare training system. Unless otherwise noted, more detailed information for each item below can be found at www.ncswlearn.org:

- ***Secondary Trauma: A Course for Child Welfare Workers***
 - Format: One classroom day (6 hrs.).
 - Audience: Child welfare line staff employed in NC county DSS agencies.
 - Description: This course helps child welfare professionals manage their physical and emotional responses to the child abuse and neglect they encounter on the job. In it they learn and practice a variety of strategies that will help them prevent and respond to secondary trauma.
 - Duration: Full-time (offered annually on an ongoing basis).
 - Provided by: Jordan Institute for Families, UNC-CH.

- ***Secondary Trauma: A Course for Supervisors & Managers***
 - Format: Two classroom days.
 - Audience: Supervisors, managers, administrators, and directors employed in NC county DSS agencies.
 - Description: On Day 1 participants learn to prevent and respond to secondary trauma at the personal level, which is what workers learn in the 1-day STS course. On Day 2 they learn to effectively target STS at the worker, supervisor, and agency level, and they develop a plan to address this issue in your agency.
 - Duration: Full-time (offered annually on an ongoing basis).
 - Provided by: Jordan Institute for Families, UNC-CH.

- ***Learning to Support, Include, and Empower Lesbian, Gay, Bisexual, Trans, and Questioning Youth in Substitute Care***
 - Format: Self-paced, online course (4 hrs.) *Note: this course is available through NC State University:* http://cfface.chass.ncsu.edu/documents/Registering_for_LGBTQ.pdf

Audience: Foster care social workers and foster parents with public and private child-placing agencies.

Description: Provides an introduction to issues of sexual orientation, gender identity, and gender expression of youth in foster care. Includes a module that incorporates quotes from youth about their needs and experiences.

Duration: Full-time (offered 24/7 on an ongoing basis).

Provided by: Center for Family and Community Engagement at NC State University.

- ***Fostering Connections I: Partnering to Improve the Health and Well-being of Children in Foster Care***

Format: Self-paced, on-demand, online course (0.5 hrs.) *Note: IV-E funds were not used to develop this course (that funding was provided by the NC Pediatric Society), but IV-E is used to make this course available on www.ncswlearn.org on an ongoing basis.*

Audience: Child welfare child welfare supervisors, managers, and directors employed in NC county DSS agencies.

Description: Provides knowledge and tools to help child welfare professionals collaborate successfully with medical homes and the local community care network to improve outcomes for children in foster care. Includes descriptions of practice and policy issues related to American Academy of Pediatrics' recommended medical visit schedule for young people in foster care.

Duration: Full-time (offered 24/7 on an ongoing basis).

Provided by: NC Pediatric Society and Jordan Institute for Families, UNC-CH

- ***Fostering Connections II: Building Local Systems to Improve the Health and Well-being of Children in Foster Care***

Format: Self-paced, on-demand, online course (0.5 hrs.) *Note: IV-E funds were not used to develop this course (that funding was provided by the NC Pediatric Society), but IV-E is used to make this course available on www.ncswlearn.org on an ongoing basis.*

Audience: Child welfare professionals of all types employed in NC county DSS agencies.

Description: Teaches agency leaders to create successful interagency partnerships between DSS, medical homes, and the local community care network.

Duration: Full-time (offered 24/7 on an ongoing basis).

Provided by: NC Pediatric Society and Jordan Institute for Families, UNC-CH

- ***Advocating for Child and Adolescent Mental Health Services: The Basics of Behavioral Health Managed Care***

Format: Self-paced, on-demand, online course (2 hrs.) *Note: IV-E funds were not used to develop this course (that funding was provided by the NC Division of Mental Health, Developmental Disability, and Substance Abuse), but IV-E is used to make this course available on www.ncswlearn.org on an ongoing basis.*

Audience: Child welfare professionals of all types employed in NC county DSS agencies.

Description: Provides basic information on working with Local Management Entities/ Managed Care Organizations (LME/MCOs) to connect children and families to services.

Duration: Full-time (offered 24/7 on an ongoing basis).

Provided by: Behavioral Health Care Resource Program, Jordan Institute for Families, UNC-CH.

- **Webinars.** Each year the NC Division of Social Services, in partnership with the Family and Children’s Resource Program at the UNC School of Social Work, offers a series of 90-minute webinars in support of excellence in child welfare practice. Presenters used evidence-based information to provide participants with tools they can immediately apply in their work. For each event handouts (including presenter slides) are developed and made available to participants, either through email or through the Division’s online learning portal, www.ncswLearn.org. Also, for some webinars a follow-up document providing additional resources and answering key questions asked during the webinar is prepared and emailed to registered participants after the event.

Each webinar is delivered using Adobe Connect Pro software. This learning platform allows presenters to speak to participants and each other, display slides, and use interactive features such as chat and polling questions. Webinars reach a great many people in NC: in past years the average number of registrants for a single webinar was 438. The table below depicts information about NC DSS sponsored webinars offered between July 1, 2015 and June 21, 2016.

Webinar Topic/Title	Date	Registrants
1. Tips for Adoptive Placements	10/06/15	144
2. Promoting Normalcy for Children	11/03/15	491
3. Concurrent Planning and Making Medical Decisions	02/11/16	492
4. Preservice Redesigned: What You Need to Know	05/10/16	280
5. The Child and Family Services Review and Program Improvement Plan: What’s Ahead for NC?	06/21/16	TBA

Recordings of this year’s webinars, as well as any related handouts, are available here: www.ncswLearn.org.

Course Revisions/Updates

To ensure child welfare professionals in North Carolina have access to up-to-date information about the best ways to achieve positive outcomes for families and children, North Carolina is continually revising and updating its child welfare training courses. Here is an update on courses revised in SFY 2015-16 by the NC Division of Social Services and its training partners:

- **Child Welfare in North Carolina: Pre-Service.** North Carolina has redesigned the cornerstone of its child welfare training system, the pre-service course for new workers and supervisors. It began piloting this new version in February 2016; statewide implementation will begin in July 2016. The new version of this course:

- Reduces the time needed to complete pre-service from four to three weeks. While the course still offers the required 72 hours of pre-service training, this 25% reduction helps agencies by putting new workers on the job sooner;
- Decreases the number of days learners spend in the classroom from eleven to eight, which reduces travel costs for agencies;
- Allows learners to take the course's first week online, so they don't have to leave their agencies;
- Enhances learning by adding new online videos, online activities, and more electronic course materials; online content remains accessible to participants for reference after the training;
- Helps learners by tying week one learning activities to real-world experiences in the agency; and
- Gives supervisors more opportunities to be involved in training of new workers.

Many of these changes have been made in response to input from county DSS agencies, which have expressed a desire to reduce travel time and time staff spend away from the agency for pre-service. Changes have also been made to respond to requests from supervisors, who have asked to know more about what their staff are learning so they can do more to help staff prepare for the complex role of child welfare worker.

The redesigned pre-service features new content and updates. Additions include information about new laws and policies, trauma-informed practice, protective factors, working with LGBTQ youth, human trafficking, and promoting normalcy for young people in care. The course also covers collaboration with families and community agencies and gives learners a basic grasp of documentation and the use of case records.

Of course, because pre-service's main goal—orienting staff before they have direct contact with families—is the same, many things haven't changed. For example, the course still defines roles and responsibilities for all child welfare roles (intake through adoption) and emphasizes the importance of family-centered practice. This course is offered by NC DSS 30 times a year.

To improve communication between NC DSS and the counties about Pre-Service training, the Division collaborated with UNC-CH to develop a 10-minute online orientation to the course for supervisors. To view the orientation, go to: https://ncswlearn.org/presenter/Pre-Service_V2/Supervisor_Orientation_to_PST/story.html. The orientation gives supervisors information about the redesigned Pre-Service and how they can best support their workers through training and transfer of learning.

- **Adoption Assistance Eligibility.** This year the NC DSS partnered with the Jordan Institute for Families at UNC-CH to convert this online course from synchronous to self-paced. The new course profile is as follows:

Format: Self-paced, online, on-demand (2 hrs.).

Audience: NC county DSS social workers and supervisors involved in financial support or assistance for adoptive families.

Description: Provides an understanding of how to determine eligibility for adoption assistance, the requirements for vendor payments, and the criteria for reimbursing one-time expense related to adoption.

Duration: Full-time (offered 24/7 on an ongoing basis).

Provided by: NC DSS and the Jordan Institute for Families, UNC-CH.

- ***Staying Power! A Supervisor's Guide to Coaching and Developing Child Welfare Staff.*** This classroom course was revised in 2015 from a 3-day training of the same title to a 2-day training. The course now provides more focus on coaching and team development. It is also hoped that making the course shorter will increase attendance, since supervisors and agency leaders find it difficult to be away from their agencies for three days.
- ***Domestic Violence Policy and Best Practices in Child Welfare.*** This classroom course, previously titled *Child Welfare Practices in Cases Involving Domestic Violence*, was revised in 2015. The course was expanded from 2 to 3 days in length, which allows for more discussion about the dangers and dynamics of domestic violence, the effects of domestic violence on children, cultural aspects of domestic violence, safety planning, and outcome-based service planning. The course also now focuses more on the batterer as a parent and how the abuser's parenting behavior impacts child safety, permanency, and well-being.
- ***Understanding and Intervening in Child Neglect.*** This self-paced online course was revised in 2015-16 to incorporate new research and to add more effective, improved activities. This course now emphasizes a holistic approach for responding to neglect that focuses on building protective factors, strengths-based case planning, and evidenced-based practices.
- ***Coaching Children's Caregivers through Challenging Moments.*** This classroom course, which teaches child welfare professionals a partnership-based coaching approach and skills to help caregivers make long-lasting changes in their lives, was revised in 2015. This revision from a 3-day training of the same title to a 2-day training intentionally mirrors the coaching approach and techniques taught in *Staying Power!* so supervisors and staff can speak the same language and apply the same coaching strategies. The course now focuses more on the practical application of coaching to address the many challenges families face when they are asked to make changes and learn new skills.

Publications to Support Professional Development and Best Practice

- ***Children's Services Practice Notes.*** Sponsored by the NC DSS and produced by the Jordan Institute for Families at the UNC School of Social Work, *Practice Notes* (www.practicenotes.org) provides North Carolina's child welfare professionals with information to enhance their practice and improve outcomes for children and families. Since July 1, 2015 issues were published on the following topics:
 1. *Partnering with Schools* (January 2016). Explores ways child welfare agencies can strengthen their partnerships with schools to promote the academic well-being of children in foster care.

2. *Child Welfare Worker Safety* (April 2016). Considers ways to promote the physical and psychological safety of child welfare professionals as they engage in their difficult, rewarding work.
 3. *Collaborating with Mental Health* (June 2016). Focuses on partnering with mental health providers and NC's mental health system to enhance the well-being of young people in foster care.
- ***Fostering Perspectives*** *Fostering Perspectives*. Sponsored by the NC DSS and produced by the Jordan Institute for Families at the UNC School of Social Work, *Fostering Perspectives* (www.fosteringperspectives.org) brings child welfare professionals and foster and adoptive parents strategies and innovative approaches for working with the children in care. Since July 1, 2015 issues were published on the following topics:
 1. *Parenting Special Populations in Foster Care* (Nov. 2015). Explores ideas and strategies for understanding and parenting children in foster care who belong to special populations.
 2. *Celebrating the Difference You Make* (May 2016). Reaching readers in time for Foster Care Month, this issue gives them a host of reminders of the many ways resource parents make the world a better place.
 - ***Training Matters***. Sponsored by the NC DSS and produced by the Jordan Institute for Families at the UNC School of Social Work, *Training Matters* (www.trainingmatters-nc.org) provides information on training and professional development to North Carolina's child welfare workers and supervisors. Distributed electronically, the newsletter enhances the understanding, use, and impact of North Carolina's child welfare training system. The edition published in May 2016 gave readers training-related updates and an overview of the child welfare training system.
 - ***Treat Them Like Gold: A Best Practice Guide for Partnering with Resource Families***. This detailed guidebook includes a full range of practical strategies for recruiting and retaining resource families. It also addresses broader considerations such as funding, diversity, community partnerships, and other systemic factors. Originally published in 2009, it was revised in 2015 and made available in October at: <https://www2.ncdhhs.gov/dss/publications/>
 - ***Partnering with Latino and Immigrant Families: Resources and Suggestions for Child Welfare Professionals***. This 2015 guide, which arose through the work of the Division's "Latino MAPP Workgroup," is a supplement to *Treat Them Like Gold*. It shares North Carolina (and national) resources for helping achieve safety, permanency, and well-being for the increasing number of Latino and immigrant families served by the North Carolina child welfare system. Published in October 2015 at: <https://www2.ncdhhs.gov/dss/publications/>

Expansion of Foster Parent Training

- **Resource Parent Learning Portal**. In 2014 the NC Division of Social Services announced its intention to begin building an online portal to support the ongoing learning of our state's resource parents. In partnership with the Jordan Institute for Families at the UNC School of Social Work and the Division's other training partners, the goal in the next 5 years is to develop

a robust site where foster parents can register for selected courses, attend online training, and record/track their annual required training hours. In 2015 planning for this training resource continued, a domain name was chosen (www.fosteringNC.org), and a site logo designed.

- **Foster Parent Pre-Service Training in Spanish.** In 2015 North Carolina increased opportunities for TIPS-MAPP training for Spanish-speaking foster parents applicants across the state.
- **Normalcy Webinar for Youth and Foster Parents.** On April 19, 2016 NC DSS, in partnership with Forsyth County Youth in Transition, SaySo (Strong Able Youth Speaking Out), and the Jordan Institute for Families at the UNC School of Social Work and with funding support from a Jim Casey Youth Opportunities Initiative Supplemental Policy Advocacy Grant, offered a 60-minute webinar for young people in foster care, foster parents, congregate care staff, and LINKS staff from NC county DSS agencies. More than 478 individuals registered for this event, which was entitled “Creating ‘Normalcy’ for Young People in Foster Care.” A recording of this webinar is available at <http://fcrp.unc.edu/webinars.asp>.
- **Resource Parent Curriculum (RPC).** Project Broadcast is using the National Child Traumatic Stress Network’s *Caring for Children Who Have Experienced Trauma: A Workshop for Resource Parents* (RPC) to train foster, adoptive, kinship, and therapeutic parents in project counties. For details, see Appendix C.
- **ARC Reflections: Attachment, Regulation, and Competency.** Six counties are piloting another trauma-informed resource parent curriculum through the Annie E. Casey Foundation and the Trauma Center at Justice Resource Institute. Buncombe, Catawba, Cleveland, Haywood, Lincoln, and Mitchell counties are implementing *ARC Reflections: Attachment, Regulation and Competency: A Framework for Intervention with Traumatized Youth*. To learn more about ARC visit: <http://www.traumacenter.org/research/ascot.php>.

Chafee Foster Care Independence Program (CFCIP) Training

NC DSS continues to partner with Independent Living Resources (ILR) to provide training to foster parents serving older youth. Offerings in 2015 in this area included the following:

Helping Youths Reach Self-Sufficiency. This 3-day classroom course develops a core group of foster parents to teach foster parents to help youth reach self-sufficiency. Offered one time since July 2015.

LINKS 101. This 3-day classroom course provides basic life skills training on principles, positive youth development, assessment, teaching skills and developing a comprehensive program to county DSS LINKS workers, residential workers, and others serving adolescents involved in the North Carolina foster care system. Offered one time since July 2015.

Conferences and Workshops. Since July 2015, NC DSS partnered with the youth-advocacy group SaySo (Strong Able Youth Speaking Out) to offer two “LINK UP” life skills conferences and three day-long “It’s My Transition” workshops to youth in foster care. A total of 254 youth were served by these events.

In SFY 2016-17, NC DSS anticipates reaching the same number of people by providing similar CFCIP training programming in partnership with ILR.

Ongoing Training Opportunities

A full calendar of training events is offered on a six-month basis each year. For the most recent course offerings as well as data on training completions and the number of training events, see Appendix J, “Child Welfare Training Registration Information: July 1, 2015 to March 23, 2016.”

VI. Statistical and Supporting Information

1. CAPTA Annual State Data Report Items

Information on Child Protective Service Workforce

Education. Each year, NC DSS administers an annual child welfare staffing survey with county social service agencies. In addition to collecting other data, this survey captures responses as to the education levels of current child welfare staff in the state. According to the latest survey, on the date the survey ended (Jan. 31, 2016) NC county DSS agencies employed a total of 2,021 child welfare line staff. Of these, 558 (27%) had a Bachelor’s Degree in Social Work (BSW) as their highest degree; 945 (47%) had some other Bachelor’s Degree; 316 (16%) had a Master’s Degree in Social Work (MSW); 200 (10%) had some other type of Master’s Degree. As of Jan. 31, 2016, NC county DSS agencies reported employing a total of 350 Social Work Supervisors. Of these 76 (22.5%) had a BSW; 153 (44%) had some other Bachelor’s Degree; 67 (19%) had an MSW; 52 (14%) had some other Master’s Degree; and 2 (0.5%) had a degree higher than a Master’s. NC county DSS agencies reported employing 53 Program Managers. Of these, 11 (21%) had a BSW; 23 (43%) had some other Bachelor’s Degree; 10 (19%) had an MSW; and 9 (17%) had some other type of Master’s Degree. NC county DSS agencies reported employing 33 Program Administrators. Of these, 5 (16%) had a BSW; 10 (30%) had some other Bachelor’s Degree; 12 (36%) had an MSW; and 6 (18%) had some other Master’s Degree.

Qualifications. In 2014, the North Carolina General Assembly authorized an evaluation of NC’s child protective services (CPS) system. In October 2015, NC DSS contracted with Public Consulting Group, Inc. (PCG) following a competitive bid process to perform the evaluation. The report, which can be found in Appendix E, was completed March 1, 2016. One of the components evaluated was the administrative structure. PCG found the experience and qualifications of social workers varies across counties. PCG attributes this variation largely to the inability for smaller counties to attract and retain highly qualified applicants because of their geographical location, lower salaries, distance to universities, or a combination of factors.

Training. The minimum training requirements for child welfare staff are established by NC General Statute. They are identified in the CFSP and remain unchanged. Initial and ongoing staff training were found by the most recent Federal CFSR to be areas needing improvement. As discussed in section V.4, NC may make changes to its Training Plan in next year’s APSR. NC has a robust, responsive, competency-based child welfare training system offering 59 child welfare curricula, including pre-service and in-service courses. In future North Carolina will work to improve

communication about the training system with stakeholders and to strengthen areas identified by the CFSR as areas needing improvement.

Based on the most recent annual staffing survey (completed Jan. 31, 2016), on average it takes 10.66 weeks to fully prepare a new NC child welfare worker to carry a caseload.

Caseloads. Current NC child welfare policy provides guidance on expected caseload sizes:

- Child welfare intake shall be no greater than one worker per 100 CPS referrals a month
- CPS assessments shall be no greater than 10 families at any time per worker
- CPS In-Home Services shall be no greater than 10 families at any time per worker

Monthly, county social service agencies maintain a Child Welfare Workforce Data Workbook and submit it to NC DSS on a quarterly basis. According to the most recent submission collected on 12/31/2015, the average caseload sizes in NC are:

- Child welfare intake: 71.8 referrals per available staff and 67.5 referrals per FTE
- CPS assessments: 13 cases per available staff and 10.9 cases per FTE
- CPS In-Home Services: 10 cases per available staff and 8.99 cases per FTE

Current NC child welfare policy provides guidance on expected supervisor/worker ratios. Supervisor/worker ratios shall not exceed an average of one FTE supervisory position to five FTE social work positions.

Juvenile Justice Transfers

Based on data retrieved from North Carolina's Child Placement and Payment System, between July 1, 2015 through May 2, 2016, 50 children left DSS custody through transfer to another agency. Unfortunately, due to shortcomings in North Carolina's data systems, it is not possible to say how many (if any) of these children transferred from county DSS custody to the custody of juvenile justice. It is anticipated that the future implementation of the child welfare module of NC FAST will address this shortcoming.

2. Sources of Data on Child Maltreatment Deaths

North Carolina currently uses data from the Office of the Chief Medical Examiner in reporting the number of child maltreatment fatalities in our state to NCANDS. In reporting the number of child maltreatment fatalities to NCANDS, the prior year's total is provided. This is due to the lag time in the local medical examiners' offices sending their reports to the Office of the Chief Medical Examiner. The Office of the Chief Medical Examiner is part of North Carolina's Department of Health and Human Services. The Office of the Chief Medical Examiner is the only source consulted; to seek the information from other sources would risk duplication and inaccuracy in our NCANDS reporting.

- ***Impact of NC's Child Fatality Task Force (CFTF).*** The CFTF is a legislative study commission that examines the causes of child death and makes recommendations to the Governor and General Assembly on how to reduce child death, prevent abuse and neglect, and support the safe and healthy development of children. The CFTF was created in 1991 by

state statute. Since that time, the child death rate in NC has decreased 46%. This reduction between 1991 and 2014 represents 15,000 more children reaching adulthood by averting lives lost had the 1991 death rate remained unchanged during that time span. For more on the CFTF visit:

<http://www.ncleg.net/DocumentSites/Committees/NCCFTF/Homepage/>.

3. Education and Training Vouchers

For information related to NC's Education and Training Vouchers Program, including the unduplicated number of youth who received ETV awards, please refer to the "Education and Training Voucher Program" subsection of section IV.

4. Inter-Country Adoptions

In FY 2015, four (4) children who were previously adopted abroad entered state custody in North Carolina. For two of these children, International Family Services in Texas handled the adoption; in North Carolina Children's Home Society of NC served as these children's local agency. The agencies that handled the adoptive placement or adoption for the other two children are not known. Administrative data show that of these four children, one entered state custody as a result of abuse and neglect, one due to abandonment, and two as a result of dependency. The primary permanency goals for these children are as follows: child 1, custody with other court approved caretaker; child 2, adoption; child 3, reunification (achieved in April 2016); child 4, another planned permanent living arrangement (APPLA).

5. Monthly Caseworker Visit Data

States are required to collect and report data on monthly caseworker visits with children in foster care. Data for FY 2016 is to be reported separate from the 2017 APSR and will be due for submission to CB by December 15, 2016. For preliminary data on this topic, please refer to section II.7 (Monthly Caseworker Visit Formula Grants).

VII. Financial Information

1. Payment Limitations – Title IV-B, Subpart 1

Non-Federal funds expended for child care, foster care maintenance payments and adoption assistance payments in FY 2005 was \$16,803,473

The amount of non-Federal funds North Carolina expended for foster care maintenance payments and applied as match for the title IV-B, subpart 1 program in FY 2005 was \$530,218.

2. Payment Limitations – Title IV-B, Subpart 2

States are required to spend a significant portion of their title IV-B, subpart 2 PSSF grant for each of the four service categories of PSSF: family preservation, community-based family support, time-limited reunification, and adoption promotion and support services.

For each service category that does not approximate 20 percent of the grant total, the State must provide a rationale for the disproportion.

Time-Limited Family Reunification Services

Time-Limited Family Reunification Services are estimated for FFY 2017 to be 17.08% estimated expenditure \$1,723,954 of the IV-B 2 total \$10,089,781: source CFS-101 Part II; Annual Estimated Expenditure Summary of Child and Family Services for FFY 2015-2016) of the grant total. While this service category falls below the 20 percent target, it reflects the best estimate for future spending based on actual spending in prior years.

North Carolina proposes this allocation for Time-Limited Reunification Services based on historical expenditures. Beginning with State Fiscal Year 2013-14, North Carolina utilized the Time Limited Family Reunification grant through the county departments of social services. The information received from the local management staff remains positive in response to the direct allocation as a means to address the needs of children and families served by the Foster Care program.

As with all four service categories, North Carolina will submit a request to amend the CFS-101 should a change in service needs warrant an adjustment to allocations.

3. FY 2016 Funding—Revised CFS-101 Budget Request

No revisions for prior year CFS-101 budget requests are included in this submission

4. FY 2017 Budget Request—CFS-101, Parts I and II

5. FY 2014 Title IV-B Expenditure Report—CFS-101, Part III

6. Standard Form 425 (SF-425) Federal Financial Report (FFR)

- *Title IV-B, subpart 1
- *Title IV-B, subpart 2 – PSSF
- *Title IV-B, subpart 2 – Monthly Caseworker Visit Funds
- *CAPTA
- *CFCIP and ETV

Appendix

- A. NC's PIP Goals, Strategies, and Activities (draft)**
- B. NC's PIP Measurement Plan (draft)**
- C. Project Broadcast Update**
- D. Final Report of the Governor's Task Force on Mental Health and Substance Use (May 1, 2016)**
- E. North Carolina Statewide Child Protective Services Evaluation**
- F. Community Child Protection Teams NC Advisory Board 2015 End of Year Report**
- G. NC Division of Social Services Responses to Community Child Protection Teams 2012 and 2013 End of Year Reports**
- H. Disaster Plan**
- I. Structure of NC's Child Welfare Training Courses**
- J. Child Welfare Training Registration Information: July 1, 2015 to March 23, 2016**

Attachments

- 1. CFS-101, Part I, II, III**