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EXECUTIVE SUMMARY

INTRODUCTION

Indiana participated in a Child and Family Services Review (CFSR) that was conducted in accordance with section 1123(A) of the Social Security Act and sections 1355.31 through 1355.37 of Title 45 of the Code of Federal Regulations (CFR). The Administration for Children and Families (ACF) in the United States Department of Health and Human Services, has the responsibility for reviewing federally-funded child and family services programs to determine the States’ substantial conformity with State plan requirements and other requirements under titles IV-B and IV-E of the Social Security Act.

The CFSR is a process in which ACF, in partnership with States, monitors and evaluates child and family services, including child protective services, family preservation and support, foster care, independent living and adoption services. The first phase of the CFSR consisted of the development of a State Profile, derived from data for Federal Fiscal Year (FFY) 1999 contained in the Adoption and Foster Care Analysis and Reporting System (AFCARS) and for Calendar Year 1999 from the National Child Abuse and Neglect Data System (NCANDS). The profile highlighted key performance indicators related to safety and permanency for children entering the child welfare system. From this profile and other sources of information, Indiana developed a Statewide Assessment (SWA), which described the process, procedures and policies of its child protective services, including foster care and adoption. This SWA also focused on the systemic factors in place that enabled Indiana to carry out the program.

The second phase involved an on-site review, conducted in three local offices and in Indianapolis during August 20-24, 2001. The purpose of the on-site review was to assess the quality of services to abused or neglected children and to verify the information contained in the State Profile and SWA. This was accomplished by an intensive examination of 50 cases, drawn at random, of children who were active in the system during the period under review (April 1, 2000 through August 22, 2001). The cases included foster care and child protective service (in-home) cases.

Approximately 50 reviewers and team leaders, operating in State/Federal teams, reviewed and rated the services provided these children and their families, in relationship to the three goals of safety, permanency and well-being. The ratings were derived from documentation in the case records as well as from interviews with those involved with the cases, such as parents, caseworkers, foster parents, service providers and, when appropriate, the children themselves.

Individual and group interviews were also held with approximately 90 selected stakeholders who had the knowledge and experience to describe and assess the child and family services system. They included foster parents, judges, FSSA attorneys, birth parent attorneys, caseworkers and their supervisors, guardians ad litem, Court Appointed Special Advocates (CASA), law enforcement, service providers and advocacy group representatives. The primary purpose of these interviews was to assess independently the quality and efficacy of the systemic factors described in the SWA.
The results of the SWA, the on-site case reviews and the stakeholder interviews were compiled by the review team into this report and were used to make a determination about Indiana’s substantial conformity with regard to each of seven outcomes related to safety, permanency and well-being, and each of seven systemic factors.

Substantial conformity is based upon the State’s ability to meet national standards; the criteria related to outcomes for children and families; and the criteria related to the State agency’s capacity to deliver services leading to improved outcomes. Ninety percent of the cases must be rated as "substantially achieved" during a State's initial review for the State to be in substantial conformity for the outcomes.

This Executive Summary provides a synopsis of Indiana’s performance on outcomes and the systemic factors.

PART A - PERFORMANCE OUTCOMES

I. SAFETY

Status of Safety Outcome S1 (Children are, first and foremost, protected from abuse and neglect) – Not in Substantial Conformity

The State received a rating of "Not in Substantial Conformity" for safety outcome S1 because it did not meet the national standard for repeat maltreatment. However, during the case review process, more than 90 percent of the cases reviewed were found to be in substantial conformity for S1 during the period under review (PUR) with respect to timeliness of investigations and repeat maltreatment.

A data discrepancy occurred in the performance indicator, repeat maltreatment. ACF informed the Indiana Family and Social Services Administration (FSSA) of this in a letter dated September 17, 2001. The FSSA informed ACF on November 16, 2001 that it would not resubmit data to resolve the discrepancy.

Strengths

• Over the past few years, there has been a major improvement in the State with respect to the timely completion of Child Abuse and Neglect (CA&N) investigations.
• Assessments and service interventions were timely.

Area Needing Improvement

• When subsequent CA&N allegations occurred on open cases in one locality, they were not always investigated as new CA&N reports, as is required by Indiana statute. This problem may be the result of (1) caseworkers not having a clear understanding of the policy, (2) a high level of staff turnover, (3) the lack of adequate staff training, and/or (4) the lack of clarity regarding the lines of responsibility.
Status of Safety Outcome S2 (Children are safely maintained in their homes whenever possible and appropriate) – Not in Substantial Conformity

Indiana did not meet the initial case review standards for Safety Outcome S2 because only 83% of the applicable cases were rated as "substantially achieved" for the outcome.

Strengths
• Many and varied services were promptly initiated to prevent the removal of children from their homes.
• The title IV-E waiver allows DFC to put services in place to prevent children’s removal from the home and to provide services to families that would otherwise not be eligible to receive these services.
• DFC was addressing the risk of harm either through the provision of services or through the removal of the children when services were unsuccessful.

Area Needing Improvement
• Assessments tended to focus on parents’ service needs and ignore children’s service needs. As a result, the needed services for children were not provided in some localities.
• After children were reunified with their families, DFC sometimes closed the case without providing post-reunification services, linking the family to community supports or ensuring that changes that occurred within the family were lasting ones.

II. PERMANENCY

Status of Permanency Outcome P1 (Children have permanency and stability in their living situations) – Not in Substantial Conformity

Permanency Outcome P1 was rated as "not in substantial conformity" based on the following findings:
• 88.2 percent of the cases reviewed were rated as "substantially achieved" for the outcome; and,
• The State did not meet the national standards for foster care re-entries, length of time to achieve reunification, length of time to achieve adoption, and stability of foster care placements.

A data discrepancy occurred in the performance indicator, foster care re-entries. ACF informed the FSSA of this in a letter dated September 17, 2001. The FSSA informed ACF on November 16, 2001 that it would not resubmit data to resolve the discrepancy.

Strengths
• Children were generally placed in the most appropriate settings with few disruptions.
• The frequency of permanency hearings exceeded the requirements of the Adoption and Safe Families Act of 1997, Public Law 105-89 (ASFA).
• The coordination among Division of Family and Children (DFC), the judiciary, and service providers contributed to the achievement of permanency in a timely manner.
• Relative adoptions and subsidized guardianships were considered a permanency resource and were supported by equivalent payments and supportive services.

Area Needing Improvement
• The ability to finalize permanency in a timely manner was impacted by several factors: not engaging families in case planning; Family Case Management (FCM) turnover and inexperience; case plans and notes that do not reflect the current goal.
• Some foster care placements were disrupted by runaway episodes.
• There was no specifically identifiable Independent Living Program (ILP) section in the case plan.
• The length of time to achieve adoption was due to delays in adoptive family recruiting, securing home studies and the filing of court petitions.

Status of Permanency Outcome P2 (The continuity of family relationships and connections is preserved for children) – Not in Substantial Conformity

Permanency Outcome P2 was rated as "not in substantial conformity" since 88.2 percent of the cases reviewed were rated as "substantially achieved" for the outcome.

Strengths
• When children were not placed close to their families, valid reasons were given.
• Siblings were placed together except where there was risk of harm.
• DFC supported regular visitation between children and their parents by arranging for and providing transportation, flexible scheduling and allowing visits to occur in the homes of foster families.
• Children were placed within the same community whenever possible.
• In many instances, placements with relatives occurred when they met licensing standards and it was in the best interests of the child to be placed with that relative.
• Children in care visited with their parents often.

Areas Needing Improvement
• The lack of public and private transportation made visitation difficult.
• In some localities, the DFC often because of FCM turnover was not preserving the continuity of the child’s connections.
• Consistent identification and evaluation of relatives as a placement option did not occur in all cases.

III. CHILD AND FAMILY WELL-BEING

Status of Well-Being WB1 (Families have enhanced capacity to provide for their children’s needs) – Not in Substantial Conformity

Well-Being Outcome WB1 was rated as "not in substantial conformity" since 60 percent of the cases reviewed were rated as "substantially achieved" for the outcome.
Strengths
• There is a wide array of individualized services available in almost all jurisdictions.
• Much of the success in meeting the needs of children and their families can be attributed to the dedication of individual staff.
• In many cases, state visitation policy regarding FCM visits with parents is followed.

Areas Needing Improvement
• The services provided were not always linked to family needs.
• Children were not getting the services they needed because services were primarily focused on parents.
• The case plan used by DFC is lengthy and complex and consequently difficult for most family members to understand.
• In many cases, children and parents did not participate in case planning, especially in probation cases.
• When the DFC did not have primary responsibility for case management, the FCM practice on face to face visits with children fell short of State policy in approximately half the cases due to unclear policy, workload pressures, turnover and inexperience.
• FCM practice on parent visits fell short of State policy apparently because of workload pressures, turnover, inexperience and the FCM’s perceived identity as case brokers.

Status of Well-Being WB2 (Children receive appropriate services to meet their educational needs) – Not in Substantial Conformity

Well-Being Outcome WB2 was rated as "not in substantial conformity" since 71.1 percent of the cases reviewed were rated as "substantially achieved" for the outcome.

Strength
• Concerted efforts are made by DFC to maintain children who are in foster care in their same school districts.

Area Needing Improvement
• In one locality, DFC follow-up on educational needs and problems was limited due to a high volume of cases and staffing shortages and in another locality, there was a lack of documentation addressing educational issues.

Status of Well-Being WB3 (Children receive adequate services to meet their physical and mental health needs) – Not in Substantial Conformity

Well-Being Outcome WB3 was rated as "not in substantial conformity" since 70 percent of the cases reviewed were rated as "substantially achieved" for the outcome.

Strengths
• Evidence of annual check-ups and immunizations was found in many case records.
• Services were provided to meet identified health needs.
• In many instances, individualized mental health needs of children and their families were being addressed, and appropriate mental health referrals were made.
Areas Needing Improvement
- Immunizations were not documented in some case records. (source: case reviews)
- There was evidence that medical examinations were not always done in a timely manner.
- In some localities, children did not receive timely treatment for their mental health needs due to delays in assessment and service delivery.

**PART B. - SYSTEMIC FACTORS**

**IV. STATEWIDE INFORMATION SYSTEM**

**Status: Substantial Conformity**

**Strengths**
- The Indiana Child Welfare Information System (ICWIS) can identify the status, characteristics, location and goals for every child in foster care.
- Because the reliability of the ICWIS data has improved significantly, managers and administrators are now able to rely on ICWIS for program, quality assurance and budgetary decisions.

**Areas Needing Improvement**
- Many difficulties with ICWIS were identified.
- At times ICWIS training occurred before new staff has learned the child welfare program. ICWIS training is also limited to one site, and is not integrated into the new FCM competency-based training.

**V. CASE REVIEW SYSTEM**

**Status: Substantial Conformity**

**Strengths**
- Child-specific case plans are completed within 60 days of the child’s entry into foster care.
- Periodic reviews by the court and permanency hearings were conducted more often than ASFA requires.
- As more of the ASFA reforms have taken root in the system, most of the terminations are now occurring within the ASFA timeframes.
- Most foster and adoptive parents were notified of hearings in a timely manner.

**Areas Needing Improvement**
- Indiana statute requires the filing of a TPR petition once the ASFA TPR timeframes have been reached even though DFC may believe TPR is not in the best interests of the child. This provision was put into statute to ensure that courts would be involved in the TPR decision making process. Subsequently DFC requests a dismissal of the petition from the court. ASFA allows for States to document in the case plan a compelling reason for determining that the filing of a TPR would not be in the best interests of a child. (source: stakeholder perceptions).
• Infrequent FCM visits with the family hindered the achievement of the permanency goal.
• Some case plans did not identify services and outcomes.

VI. QUALITY ASSURANCE SYSTEM

Status: Substantial Conformity

Strengths
• Standards were in place regarding the timeliness of CPS investigations, contacts, visitations, input into ICWIS, case planning conferences and outcome-based service delivery.
• All Indiana counties have now undergone quality assurance reviews that include the development of action plans to address any problems identified during the reviews.
• There is a focus on accountability with regular reporting required.

Area Needing Improvement
• None

VII. TRAINING

Status: Not in Substantial Conformity

Strengths
• A statewide comprehensive core training structure for new supervisors and FCM is in place.
• There is a wide variety of high-quality ongoing training available for supervisors and FCM.
• Foster/adoptive parents and residential child care staff are required to participate in pre-service and ongoing training.

Areas Needing Improvement
• Since new employees were assigned caseloads as soon as they were hired, it was difficult for them to attend training.
• Staff often have to wait a long time before receiving core training because of the limited number of available training slots and because training was not offered as frequently as needed.
• It is difficult for FCM to find time to attend ongoing training because of the demands of their caseloads.
• Many foster parents have difficulty accessing training because of its location and the time of day that it is offered.
SERVICE ARRAY

Status: Substantial Conformity

Strengths
- There was a wide array of flexible services available that had the capacity to meet the individual needs of children and families.
- There are statewide community-based wrap-around services available through a title IV-E waiver demonstration.
- The title IV-E waiver is used to individualize services.

Areas Needing Improvement
- The lack of individualized services in some localities was due to problems in case planning and the lack of comprehensive assessments.
- Shortages occurred statewide in foster homes for special needs children and for substance abuse and sexual perpetrator services.
- Getting to and from services was a problem especially outside of normal business hours and in most rural localities.

VIII. AGENCY RESPONSIVENESS TO THE COMMUNITY

Status: Substantial Conformity

Strengths
- Collaboration is a major strength of the DFC.
- CA&N Prevention Councils include information on services provided by DFC.
- DFC works closely with Head Start, Food Stamps, Public Housing and other federally assisted programs.

Area Needing Improvement
- Although DFC encouraged foster parent support groups in all localities, sustaining them was sporadic.

X. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT AND RETENTION

Status: Substantial Conformity

Strengths
- DFC is updating foster home standards in response to a series of foster parent focus groups.
- Licensing standards are applied to both related and unrelated foster families.
- Criminal background checks are conducted on all individuals residing in foster family homes and on all staff employed in child care institutions.
- Foster homes are reflective of the population in care in many localities.

Area Needing Improvement
• There was a major need to focus on recruiting additional foster parents, especially those who can address the mental health needs or developmental disabilities needs of children, thereby reducing the reliance on residential care.

• Families were lost due to long delays between training and the initiation of home studies and licensing by the DFC.

• There are differences between some of the 1946 standards and current practice.

**SUMMARY OF FINDINGS**

**PART A. - PERFORMANCE OUTCOMES**

Per 45 CFR 1355.34(b)(3)(ii), 90% of the cases must be rated as "substantially achieved" for a particular outcome for the State to be in substantial conformity for each Performance Outcome. In addition, 45 CFR 1355.34(b)(3)(i) requires the State to meet the national standards for each statewide data indicator associated with the Performance Outcomes in order to receive a rating of "substantial conformity" for an outcome.

I. SAFETY

<p>| Outcome S1: Children are, first and foremost, protected from abuse and neglect. |
| Number of cases reviewed by the team according to degree of outcome achievement: |</p>
<table>
<thead>
<tr>
<th>Howard</th>
<th>Marion</th>
<th>Wabash</th>
<th>Total Number</th>
<th>Total Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substantially Achieved:</td>
<td>13</td>
<td>21</td>
<td>10</td>
<td>44</td>
</tr>
<tr>
<td>Partially Achieved:</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Not Achieved or Addressed:</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Not Applicable:</td>
<td>1</td>
<td>0</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Conformity of Statewide data indicators with national standards:

<table>
<thead>
<tr>
<th>Repeat maltreatment</th>
<th>6.1%</th>
<th>7.8%</th>
<th>Meets Standard</th>
<th>Does Not Meet Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maltreatment of children in foster care</td>
<td>0.57%</td>
<td>0.42%</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**Status of Safety Outcome S1 – Not in Substantial Conformity**

The State received a rating of "Not in Substantial Conformity" for safety outcome S1 because it did not meet the national standard for repeat maltreatment. However, during the case review process, more than 90 percent of the cases reviewed were found to be in substantial conformity for S1 during the period under review (PUR) with respect to timeliness of investigations and repeat maltreatment.
A data discrepancy occurred in the performance indicator, repeat maltreatment. ACF informed the Indiana Family and Social Services Administration (FSSA) of this in a letter dated September 17, 2001. The FSSA informed ACF on November 16, 2001 that it would not resubmit data to resolve the discrepancy.

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

_X_ Strength ___ Area Needing Improvement

The case record review ratings were as follows:
10 - Strength (90.9%)
1 - Area Needing Improvement (9.1%)
39 - Not Applicable

**Basis**
**Statewide Assessment**

The following information was provided by the State regarding its requirements for initiating investigations of maltreatment reports.

- The timeframes for initiating investigations of child maltreatment are:
  1. **immediate investigation** if the report alleges that the safety or well-being of the child appears to be endangered or the death of a child has occurred;
  2. **immediate investigation** within one (1) hour, if the child is in imminent danger of serious bodily harm;
  3. **immediate investigation** within 24 hours, if the report alleges that the child may be a victim of child abuse (other than above); or
  4. **investigation** within a reasonably prompt time, but not later than five (5) calendar days, if the report concerns neglect (other than indicated above).

- When a reporter alleges that the immediate well-being of a child is endangered, Child Protective Services (CPS) is to initiate the investigation immediately, regardless of the time of day or night. (Child Welfare Manual (CWM) 205.1)

- A family case manager or a law enforcement agent must make face-to-face contact with the child as soon as possible but no later than five (5) days following initiation of an investigation.

- An investigation is deemed to have been initiated when investigative staff has satisfactorily determined that a child who is the subject of a child abuse or neglect report is, and will continue to be, safe until the next step in the investigative process is taken.

**Onsite Review**
**Strengths**
- Over the past few years, there has been a major improvement in the State with respect to the timely completion of CA&N investigations. (source: case reviews & stakeholder perceptions)
- There is an excellent working relationship between the Division of Family and Children (DFC) and local law enforcement agencies (LEA). The quality of this relationship results in coordinated and timely responses to hot-line and after-hours CA&N investigations. (source: stakeholder perceptions)
Area Needing Improvement
• None

Item 2. Repeat maltreatment

___ Strength  __X__ Area Needing Improvement

The case record review ratings were as follows:
44 - Strength (95.7%)
2 - Area Needing Improvement (4.3%)
4 - Not Applicable

Basis
Statewide Assessment
• Many recurrences of maltreatment are cases of chronic neglect. Many of these cases are not at a level where mandated intervention by the court is needed. Services are time-limited. Multiple reports of the same child but with different perpetrators exist in some cases. Many times cases of neglect or physical abuse by a primary caretaker are a symptom of more complicated CA&N cases.
• One of the biggest concerns with the recurrence data is incorrect use of the linking process in the Indiana Child Welfare Information System (ICWIS). Users who close a case and reopen it to link it to a new report are creating instances of recurrence in the data. A statewide bulletin was issued as well as continued education to local staff by the ICWIS coordinators and the child welfare field consultants to improve this situation.

Onsite Review
Strengths
• Assessments and service interventions were timely. (source: case reviews)
• Coordinated family-centered and child-focused preservation, prevention and wrap-around services were effective in preventing subsequent maltreatment and in keeping the children in the home. (source: case reviews)
• In subsequent substantiated CA&N reports of a comparable nature, DFC either removed the child from the home or provided more intensive services. (source: case reviews & stakeholder perceptions)
• In one locality when there was a substantiated CA&N allegation, the child welfare community, including local agencies, schools and the DFC, more closely observed the family. (source: stakeholders)

Areas Needing Improvement
• The State did not meet the national standard for repeat maltreatment.
• When subsequent CA&N allegations occurred on open cases in one locality, they were not always investigated as new CA&N reports, as is required by Indiana statute. This problem may be the result of (1) caseworkers not having a clear understanding of the policy, (2) a high level of staff turnover, (3) the lack of adequate staff training, and/or (4) the lack of clarity regarding the lines of responsibility. (source: case reviews)
**Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.**

| Number of cases reviewed by the team according to degree of outcome achievement: |
|-------------------------------|---------|---------|---------|----------|----------|
|                                | Howard  | Marion  | Wabash  | Total Number | Total Percentage |
| Substantially Achieved:        | 12      | 16      | 7       | 35        | 83.3     |
| Partially Achieved:           | 0       | 2       | 0       | 2         | 4.8      |
| Not Achieved or Addressed:    | 2       | 3       | 0       | 5         | 11.9     |
| Not Applicable:               | 0       | 1       | 7       | 8         | NA       |

**Status of Safety Outcome S2 – Not in Substantial Conformity**

Indiana did not meet the initial case review standards for Safety Outcome S2 because only 83% of the applicable cases were rated as "substantially achieved" for the outcome.

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

___ Strength  ______ Area Needing Improvement

The case record review ratings were as follows:

- 21 - Strength (84%)
- 4 - Area Needing Improvement (16%)
- 25 - Not Applicable

**Basis**

**Statewide Assessment Data**

- In-home placements increased from 1,639 in January, 2000 to 3,850 in January, 2001.
- Both foster care and relative placements decreased in the same time period.

**Program**

- CPS may request detention and continued removal of the child by the juvenile court so that the child may be protected from further abuse or neglect. Child in Need of Services (CHINS) petitions may also be filed without removing the children.
- Indiana has a title IV-E waiver to develop and deliver services that improve the parents’ ability to care for their children in their home and in their community.
- The State focuses on the prevention of maltreatment through Healthy Families Indiana, Hoosier Healthwise, and First Steps.
Onsite Review

Strengths

- Many and varied services were promptly initiated to prevent the removal of children from their homes. These services included wrap-around and in-home (services); individual therapy; parent assessments; Women, Infants & Children (WIC); Head Start; Temporary Assistance to Needy Families (TANF); child care; and Medicaid. (source: case reviews)
- The title IV-E waiver allows DFC to put services in place to prevent children’s removal from the home and to provide services to families that would otherwise not be eligible to receive these services. (source: stakeholder perceptions)
- In one locality, a doctor provides counseling and consultations on colposcopic procedures. (source: stakeholder perceptions)
- CPS staff have the capability to respond to allegations of CA&N at all times and used an on-call system to respond to CA&N reports after office hours. (source: stakeholder perceptions)

Areas Needing Improvement

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

Item 4. Risk of harm to child

___ Strength  X Area Needing Improvement

The case record review ratings were as follows:
37 - Strength (86%)
6 - Area Needing Improvement (14%)
7 - Not Applicable

Basis

Statewide Assessment

- In April, 1996, Indiana implemented a Safety, Risk and Strengths and Needs Assessment Tool, which was designed by the National Council on Crime and Delinquency.
- Indiana is developing policy and training to illustrate the relationship between child protection with domestic violence issues.
- Besides CHINS the State creates Informal Adjustment cases when there is probable cause to believe the child is a child in need of services, and it is determined that a program of informal adjustment is in the best interest of the child.
The highest number of child fatalities occurred in Indiana in 1998. Indiana responded by:

1. Forming a child fatality task force to develop policy and practice;
2. Issuing a policy directive in September, 1999 to direct counties to develop a child fatality review process and report on child fatalities;
3. Obtaining legislative support in the 2001 legislative session to enhance the state child fatality review team; and
4. Ensuring that child protection teams allow for local input on child protection issues.

Onsite Review
Strengths

- DFC was addressing the risk of harm either through the provision of services or through the removal of the children when services were unsuccessful. In addition, post reunification services were available without time limits in one locality. Community-based services to the extended family included therapy, counseling and homemaker (source: case reviews & stakeholder perceptions)
- Even though not required by current policy, safety plans were developed in those cases where a relative was assisting a parent working informally with DFC. (source: case reviews)
- DFC collaborated extensively with community partners to monitor safety and risk to children. Community partners were educated on how CPS operates and how to receive assistance and when. (source: case reviews)
- One site has the DAWN Project in which the DFC worked closely with the Court to serve youth that have been diagnosed as emotionally disturbed and are at risk of long-term out-of-home placement. At this same site, the local Children’s Bureau/Family Works was also responsive in providing an array of services. (source: case reviews & stakeholder perceptions)
- Parents are involved in the development of the informal adjustment agreements, which are used in more serious in-home service cases. (source: stakeholder perceptions)

Areas Needing Improvement

- After children were reunified with their families, DFC sometimes closed the case without providing post-reunification services, linking the family to community supports or ensuring that changes that occurred within the family were lasting ones. (source: case reviews)
- In some localities, there appeared to be a lack of communication between Family Case Managers (FCM) and contracted service providers as well as a lack of documentation in the case record that services had been provided. (source: case reviews)
- In some localities, there is a lack of coordination between the DFC and the county Department of Correction (DOC) to support the delivery of services and to avoid duplication. (source: stakeholder perceptions)
II. PERMANENCY

Outcome P1: Children have permanency and stability in their living situations.

Number of cases reviewed by the team according to degree of outcome achievement:

<table>
<thead>
<tr>
<th></th>
<th>Howard</th>
<th>Marion</th>
<th>Wabash</th>
<th>Total Number</th>
<th>Total Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substantially Achieved:</td>
<td>7</td>
<td>12</td>
<td>11</td>
<td>30</td>
<td>88.2</td>
</tr>
<tr>
<td>Partially Achieved:</td>
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<td>1</td>
<td>2</td>
<td>5.9</td>
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<tr>
<td>Not Achieved or Addressed:</td>
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<td>0</td>
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<td>5.9</td>
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<tr>
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<td>5</td>
<td>9</td>
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Conformity of Statewide data indicators with national standards:

<table>
<thead>
<tr>
<th></th>
<th>National Standard</th>
<th>State’s Percentage</th>
<th>Meets Standard</th>
<th>Does Not Meet Standard</th>
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<tbody>
<tr>
<td>Foster care re-entries</td>
<td>8.6%</td>
<td>13.8%</td>
<td></td>
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<tr>
<td>Length of time to achieve reunification</td>
<td>76.2%</td>
<td>64.0%</td>
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<tr>
<td>Length of time to achieve adoption</td>
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<td>22.8%</td>
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<tr>
<td>Stability of foster care placements</td>
<td>86.7%</td>
<td>77.7%</td>
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<tr>
<td>Length of stay in foster care (This is not used to determine substantial conformity)</td>
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<td>N/A</td>
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Status of Permanency Outcome P1 – Not in Substantial Conformity

Permanency Outcome P1 was rated as "not in substantial conformity" based on the following findings:
- 88.2 percent of the cases reviewed were rated as "substantially achieved" for the outcome; and
- The State did not meet the national standards for foster care re-entries, length of time to achieve reunification, length of time to achieve adoption, and stability of foster care placements.

A data discrepancy occurred in the performance indicator, foster care re-entries. ACF informed the FSSA of this in a letter dated September 17, 2001. The FSSA informed ACF on November 16, 2001 that it would not resubmit data to resolve the discrepancy.
**Item 5. Foster care re-entries**

___ Strength _X_ Area Needing Improvement

The case record review ratings were as follows:

33 - Strength (97.1%)
1 - Area Needing Improvement (2.9%)
16 - Not Applicable

**Basis**

Statewide Assessment

- 13.8% of the children in foster care have had two or more removal episodes (the National Standard is 8.6%). Among the 13.8% (664 children) are re-entries due to adoption disruptions and the need to reinstitutionalize some youth.
- In the cohort of youth who entered foster care for the first time in 1999, 592 left foster care for reunification or placement with a relative. The State does not know what percentage of those 592 youth re-entered the foster care system. The data does not explain why children re-entered care.

Onsite Review

Strengths:
- In all of the applicable cases, there were no multiple foster care entries during the PUR. (source: case reviews)
- In one locality, re-entries into foster care were reduced by the use of post-reunification services provided without time limits. (source: stakeholder perceptions)

Areas Needing Improvement

- The State did not meet the national standard for foster care re-entries.
- In approximately 1/5 of the cases, multiple entries into foster care occurred prior to the PUR. (source: case reviews)

**Item 6. Stability of foster care placement**

___ Strength _X_ Area Needing Improvement

The case record review ratings were as follows:

29 - Strength 85.3%
5 - Area Needing Improvement 14.7%
16 - Not Applicable

**Basis**

Statewide Assessment

Data

- 77.7% of Indiana's children have had no more than two placements while in foster care.
- In the cohort profile of children entering care for the first time and who were in the first 6 months of care in 1999, 76% had two or fewer placements.
The longer that children are in care, they are twice as likely to change placement.

Of 8,419 children who were in foster care during Federal Fiscal Year (FFY) 1999, 4,996 had two or fewer placements. 1,111 children had six or more placements. The State does not know what the average length in care was for these 1,111. The State speculated that the lack of placement stability might be due to special needs children becoming adolescents with greater therapeutic needs.

Program

Another placement change factor is due to children being placed in foster care before or during assessment, which can last from a few days to several months.

Placement change may be due to information learned in the assessment.

Onsite Review

Strengths

- Therapeutic foster care and residential care appeared to be used appropriately when children needed a more restrictive placement. (source: case reviews)
- Children were generally placed in the most appropriate settings with few disruptions. (source: case reviews)

Areas Needing Improvement

- The national standard for the stability of foster care placements was not met. In one locality, an insufficient pool of foster parents constrained appropriate matching and led to a reliance on shelter care. (source: case reviews & stakeholder perceptions)
- In one locality, the common practice of using shelter care as a child’s first placement resulted in placement instability. Some shelter placements led to disruptions because they were not matched to the children’s needs. (source: case reviews)
- Some foster care placements were disrupted by runaway episodes. This may have occurred either because children were inappropriately matched or because the foster parents did not have adequate supports to meet the children’s needs (e.g., training, timely therapeutic interventions, etc.). (source: case reviews & stakeholder perceptions)

**Item 7. Permanency goal for child**

___ Strength  X Area Needing Improvement

The case record review ratings were as follows:

- 24 – Strength (70.6%)
- 10 - Area Needing Improvement (29.4%)
- 16 - Not Applicable

Basis

Statewide Assessment Data

- Of all children exiting care in FFY 1999, 88.2 % achieved permanency through reunification, adoption, guardianship, or living with relatives.
34.5% of all children in foster care in the State have a permanency goal of reunification, although 62.9% in the cohort entering care for the first time ever during the year have a goal of reunification.

Of all children who were reunited with their parents or caretakers during FFY 1999, 64.0% were reunited in less than 12 months from the time of the latest removal from the home.

In the cohort profile, 592 of the 1,664 children entering foster care for the first time were reunified within one year.

Program

Indiana implemented an Assisted Guardianship program in July, 2000 to deliver an alternative permanency option for children in the child welfare system who were living with relatives.

The State is concerned about the length of stay in foster care and the amount of time to achieve permanency and believes that clearly formulated case plans and input from all parties could help achieve permanency options more timely.

Scarce services in rural areas are a problem.

The State will review whether a formal concurrent planning policy or statute would decrease the amount of time children spend in care.

Onsite Review

Strengths

The frequency of permanency hearings exceeded the requirements of the Adoption and Safe Families Act of 1997, Public Law 105-89 (ASFA) (source: case reviews & stakeholder perceptions)

The coordination among DFC, the judiciary, and service providers contributed to the achievement of permanency in a timely manner. (source: case reviews & stakeholder perceptions)

Courts made very clear to birth parents the consequences of their not following the service plan. (source: case reviews & stakeholder perceptions)

Termination of Parental Rights (TPR) petitions were filed in a timely manner. (source: case reviews & stakeholder perceptions)

The length of stay in foster care has been decreased by half within the past three years. (source: stakeholder perceptions)

Children, who were involved in case planning in one locality, seemed to have attained permanency more quickly. (source: case reviews)

Service providers worked diligently with parents to get services in place and to support visits. (source: case reviews)

Assessments were conducted and services were provided in a timely manner. (source: case reviews)

In one locality, a wide array of faith-based services were used by families of different religions and cultures to support permanency. (source: case reviews)

The title IV-E waiver allowed DFC to provide wrap-around services in the local community to families that would otherwise not be eligible to receive these services. (source: stakeholder perceptions)

Informal concurrent planning which expedites permanency was occurring in some localities. (source: stakeholder perceptions)
Areas Needing Improvement

- The ability to achieve permanency in a timely manner was impacted by several factors: not engaging families in case planning; FCM turnover and inexperience; case plans and notes that do not reflect the current goal. (source: case reviews)
- In adoption cases, the ability to finalize adoptions was delayed due to the time it took to resolve Termination of Parental Rights (TPR) appeals. (source: case reviews)
- Concurrent planning was not defined and formalized. (source: case reviews & stakeholder perceptions)
- It appeared that DFC did not identify and/or attempt to locate fathers early on in the case planning and service delivery processes. (source: case reviews)
- In some instances, the lack of communication between DFC and DOC delayed permanency. (source: case reviews & stakeholder perceptions)
- In one locality, the transfer of cases from juvenile to probate court resulted in delays in the achievement of permanency since new parties had to become familiar with the case. (source: stakeholder perceptions)

Item 8. Independent living services

___ Strength _X_ Area Needing Improvement

The case record review ratings were as follows:
5 – Strength (62.5%)
3 - Area Needing Improvement (37.5%)
42 - Not Applicable

Basis
Statewide Assessment
- According to profile data, 8.2% of the children in foster care in the State have a permanency goal of emancipation; however the same profile shows that none of these children were placed in Supervised Independent Living.
- The total number of Indiana children in care in FFY 1999 was 6,081. In that group 1,729 or 28% were between the ages of 12-17.

Onsite Review
Strengths
- Indiana has contracted with Ball State University to design services for youth aging out of foster care. (source: stakeholder perceptions)
- The private placement agencies that operated group homes and institutions provided most of the Independent Living Program (ILP) services to older foster care youth. (source: stakeholder perceptions)

Areas Needing Improvement
- There was no specifically identifiable ILP section in the case plan. (source: case reviews)
- There were significant gaps in the housing, employment, and training services and resources available to older youth. (source: stakeholder perceptions)
Item 9. Adoption

___ Strength   ___ Area Needing Improvement

The case record review ratings were as follows:
10 – Strength (83.3%)
2 - Area Needing Improvement (16.7%)
38 - Not Applicable

Basis
Statewide Assessment
Data
• Although Indiana reported in the Statewide Assessment that there were approximately 682 children who need adoptive families, subsequent data received from the State revealed that approximately 150-200 children are waiting for adoptive parents at any given time. The discrepancy was attributed to children being counted multiple times for the same category.
• 1,133 children were placed in adoption in FFY 1999 and 1,258 children were placed in adoption in FFY 2000.
• Although ¾ of adoptions are the result of foster parent conversion to adoptive parents, these foster care placements are not initially recruited as potential adoptive families nor identified as such until the permanency goal becomes adoption.
• 22% of the children exit foster care into a finalized adoption in less than 24 months from the time of the latest removal from the home.
• Program
• Indiana has made substantial efforts in the last two years to promote timely adoptions for children.
• The State has increased efforts to locate adoptive parents.
  1. The "My Forever Family" publication has increased awareness of the need for adoptive homes;
  2. The agency is increasing efforts to locate available relatives and adoptive placements for children;
  3. A judicial effort to make permanency determinations for children at 12 months has expedited freeing children for adoption;
  4. The State is making a significant effort to expand the understanding and use of adoption subsidies;
  5. The increased availability of Medicaid for hard-to-place children has promoted adoptions; and,
  6. Increased legal services to process termination cases and additional hearing officers are needed.
Onsite Review
Strengths
• Relative adoptions and subsidized guardianships were considered a permanency resource and were supported by equivalent payments and supportive services. (source: case reviews & stakeholder perceptions)
• Current and prior foster parents and relatives were routinely considered for adoptive placements. (source: case reviews)

Areas Needing Improvement
• The national standard on the length of time to achieve adoption was not met.
• The length of time to achieve adoption was due to delays in adoptive family recruiting, securing home studies and the filing of court petitions. (source: case reviews & stakeholder perceptions)
• Delays in adoptions also occurred due to incomplete disclosure of the child’s history to prospective adoptive families and lack of communication between GAL and FCM. (source: case reviews & stakeholder perceptions)
• In one locality, delays in adoptions occurred due to the change in venue from juvenile to probate court, resolving subsidy issues and preparing adoption summaries. (source: case reviews & stakeholder perceptions)
• In one locality, some foster children and prospective adoptive families were not fully prepared by the DFC prior to the finalization of the adoption. (source: case reviews)

Item 10. Permanency goal of other planned permanent living arrangement

X Strength ___ Area Needing Improvement

The case record review ratings were as follows:
7- Strength (87.5%)
1 - Area Needing Improvement (12.5%)
42 - Not Applicable

Basis
Statewide Assessment
Data
• 5.4% of children in foster care in the State have a permanency goal of long-term foster care.

Program
• Before ASFA, an older population was in DFC care. ASFA mandated that children placed in care prior to November, 1997 be "phased in" over the next two years. These children could no longer be placed in long term foster care despite this being their goal for a long period of time. Barriers to filing termination of parental rights for these children are significant mental health issues, unwillingness to be adopted, and suitability of adoption as an appropriate alternative. Many of these children aged out of foster care into emancipation. Data for 1998 and 1999 may be skewed because of the gradual implementation.
Permanency outcomes are driven in placement by attention to the case, how it is staffed, how often it is reviewed and the process and frequency of communication. A higher ratio of staff to cases also helps to increase permanency.

Onsite Review
Strengths
- "Other planned living arrangement" appeared to be an appropriate case plan goal where used. (source: case reviews)
- Adoption and guardianship were excluded due to the children's behavioral problems. (source: case reviews & stakeholder perceptions)
- Efforts were made to use the least restrictive placement setting. (source: case reviews & stakeholder perceptions)

Area Needing Improvement
- None

<table>
<thead>
<tr>
<th>Outcome P2: The continuity of family relationships and connections is preserved for children.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of cases reviewed by the team according to degree of outcome achievement:</td>
</tr>
<tr>
<td>Howard</td>
</tr>
<tr>
<td>Substantially Achieved:</td>
</tr>
<tr>
<td>Partially Achieved:</td>
</tr>
<tr>
<td>Not Achieved or Addressed:</td>
</tr>
<tr>
<td>Not Applicable:</td>
</tr>
</tbody>
</table>

Status of Permanency Outcome P2 – Not in Substantial Conformity

Permanency Outcome P2 was rated as "not in substantial conformity" since 88.2 percent of the cases reviewed were rated as "substantially achieved" for the outcome.

Item 11. Proximity of foster care placement

_X_ Strength  ___  Area Needing Improvement

The case record review ratings were as follows:
33 – Strength (100%)
0 - Area Needing Improvement
17 - Not Applicable

Basis
Statewide Assessment
• Indiana statutes require the court to consider the least restrictive placement. If the child is safe, the placement should be the most family-like and most appropriate setting available. It should be close to the parents' home, one that least interferes with family autonomy and is least disruptive of family life.

Onsite Review
Strengths
• When children were not placed close to their families, valid reasons were given. (source: case reviews)
• In one locality, a DFC contract with a private agency that operated a group home and provided Family Foster Home (FFH) placements increased opportunities for in-county placements. (source: stakeholder perceptions)

Area Needing Improvement
• None

Item 12. Placement with siblings

_X_ Strength ___ Area Needing Improvement

The case record review ratings were as follows:
14 – Strength (93.3%)
1 - Area Needing Improvement (6.7%)
35 - Not Applicable

Basis
Statewide Assessment
• Absent a strong reason to the contrary, groups of siblings are to be placed together whenever possible in order to maintain existing ties and supports and to minimize the degree of loss to children. (CWM 403.332)

Onsite Review
Strength
• Siblings were placed together unless there was evidence that separation was necessary to meet the needs of the children. (source: case reviews)

Area Needing Improvement
• None
**Item 13. Visiting with parents and siblings in foster care**

_**X**_ Strength ___ Area Needing Improvement

The case record review ratings were as follows:
21 – Strength (84%)
4 - Area Needing Improvement (16%)
25 - Not Applicable

**Basis**

**Statewide Assessment**
- Contact is to take place between the child and legal family within 48 hours of the removal of a child from the home except when it is otherwise ordered by the court or the child refuses contact. Face to face contact is to occur within 5 working days of the removal of the child from the parental home with the same two exceptions as above. Contact is weekly unless otherwise ordered by the court. (CWM 404.2)
- The State wants to examine the on-site review contacts between FCM, children and families because there is a direct correlation between the above contacts and successful permanency for children.

**Onsite Review**

**Strengths**
- DFC supported regular visitation between children and their parents by arranging for and providing transportation, flexible scheduling and allowing visits to occur in the homes of foster families. (source: case reviews)
- Relatives, FCM, service providers and foster parents encouraged regular and frequent visitations between foster children and their parents and siblings. (source: case reviews & stakeholder perceptions)

**Area Needing Improvement**
- The lack of public and private transportation made visitation difficult. (source: case reviews & stakeholder perceptions)

**Item 14. Preserving connections**

_**X**_ Strength ___ Area Needing Improvement

The case record review ratings were as follows:
28 – Strength (82.4%)
6 - Area Needing Improvement (17.6%)
16 - Not Applicable
Basis
Statewide Assessment
• Indiana statutes require that the placement should be close to the parents’ home, one that least interferes with family autonomy and is least disruptive of family life. This imposes the least restraint on the freedom of the child and the child’s parent, guardian or custodian and provides a reasonable opportunity for participation by the child's parent, guardian, or custodian.
• Though there are no federally recognized tribes in Indiana, the FSSA designated a liaison to other states and Indian tribal organizations for the Interstate Compact on Adoption and Medical Assistance (ICAMA). FSSA also plans to maintain current information on the Urban Indian Organization and the National Indian Organizations and to contact them when services are needed for tribal members. Moreover FSSA contacts the Federal Bureau of Indian Affairs for Indian Council instructions.

Onsite Review
Strengths
• Children were placed within the same community whenever possible. (source: case reviews)
• When parents moved out of State, FCM made travel arrangements to ensure that family connections were maintained. (source: case reviews)
• Children placed in facilities were transported to visits. (source: case reviews)
• Many children were being placed within their own school district. (source: case reviews)
• DFC considered relatives for potential placement. (source: case reviews)
• In most cases, connections were preserved with the extended family through DFC support of church attendance, family events and school activities. (source: case reviews)
• Post-adoption agreements permitted preservation of relationships after a finalized adoption (source: case reviews & stakeholder perceptions)
• DFC allowed appropriate visitation between children and their parents after TPR. (source: case reviews)

Areas Needing Improvement
• In some localities, the continuity of the child’s connections was not being preserved by the DFC often because of FCM turnover. (source: case reviews & stakeholder perceptions)
• The lack of communication between DFC and the County DOC was sometimes a barrier when one of the siblings was under the jurisdiction of the DOC. (source: case reviews)
• In some cases, the connections with siblings were not being preserved, e.g., there were no indications that visits were occurring with siblings. (source: case reviews)
Item 15. Relative placement

___ Strength _X_ Area Needing Improvement

The case record review ratings were as follows:
27 – Strength (81.8%)
6 - Area Needing Improvement (18.2%)
17 - Not Applicable

Basis
Statewide Assessment
• In July, 2000 Indiana implemented an assisted guardianship program as an alternative planned permanent living arrangement under ASFA. This program was designed for those children who live with relatives where reunification with the parent or adoption is not in the best interest of the child. The program allows children to remain with relatives outside of the child welfare system, yet relatives are subsidized. To date 150 children are in the assisted guardianship program.
• Data indicates that foster care placements are made more often with non-relatives than with relatives. This may be because relatives are unwilling to meet foster care requirements.

Onsite Review
Strengths
• In many instances, placements with relatives occurred when they met licensing standards and it was in the best interests of the child to be placed with that relative. (source: case reviews & stakeholder perceptions)
• In some instances, both maternal and paternal relatives were considered as placement options. (source: case reviews & stakeholder perceptions)

Areas Needing Improvement
• Consistent identification and evaluation of relatives as a placement option did not occur in all cases. (source: case reviews)
• In some cases, DFC did not consider paternal relatives for placement, nor were fathers identified or attempts made to locate them. (source: case reviews)
• The DFC does not routinely use the Federal parent locator service to search for absent parents. (source: case reviews & stakeholder perceptions)

Item 16. Relationship of child in care with parents

_X_ Strength ___ Area Needing Improvement

The case record review ratings were as follows:
20 – Strength (90.9%)
2 - Area Needing Improvement (9.1%)
28 - Not Applicable
Basis
Statewide Assessment
- Not addressed

Onsite Review
Strengths
- Children in care visited with their parents often. For example, they had weekend visits and visited for birthday parties and special events. (source: case reviews)
- When face to face visits were not possible, children kept in contact with their parents by telephone (source: case reviews)
- Family group therapy and ongoing visits were used to maintain the bond between parents and children. (source: case reviews)
- In one case, the DFC used the Interstate Compact for the Placement of Children (ICPC) to locate a mother who had left the State and re-established her relationship with her children. (source: case reviews)

Area Needing Improvement
- None

III. CHILD AND FAMILY WELL-BEING

<p>| Outcome WB1: Families have enhanced capacity to provide for their children’s needs. |
| Number of cases reviewed by the team according to degree of outcome achievement: |</p>
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<th>Howard</th>
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<tr>
<td>Partially Achieved:</td>
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<td>1</td>
<td>7</td>
</tr>
<tr>
<td>Not Achieved or Addressed:</td>
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<tr>
<td>Not Applicable:</td>
<td>0</td>
<td>0</td>
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</tbody>
</table>

Status of Well-Being WB1 – Not in Substantial Conformity

Well-Being Outcome WB1 was rated as "not in substantial conformity" since 60 percent of the cases reviewed were rated as "substantially achieved" for the outcome.

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

___ Strength X Area Needing Improvement

The case record review ratings were as follows:
35 – Strength (70%)
15 - Area Needing Improvement (30%)
0 - Not Applicable
Basis

Statewide Assessment

- Services were readily accessible in the majority of the State.
- However, distance, scarcity of services and lack of transportation challenged small, rural counties in their attempt to serve families.
- Large urban counties had delays in services due to high demand.
- Service providers were critical to successful family services since the role of family case managers shifted from caseworkers to case-managers.
- Service contractors have been more willing to provide services to smaller surrounding counties due to the regional process of planning for services. This allowed contractors to serve a larger area, which benefits their agency.

Onsite Review

Strengths

- There is a wide array of individualized services available in almost all jurisdictions. These services include parenting classes, WIC, juvenile sex offender treatment, family therapy, health care, family education, budgeting and substance abuse treatment. (source: case reviews & stakeholder perceptions)
- Much of the success in meeting the needs of children and their families can be attributed to the dedication of individual staff. (source: case reviews & stakeholder perceptions)
- Needs were identified through many different types of assessments including safety, risk, needs, parenting, substance abuse and domestic violence, some of which are entered into ICWIS. (source: case reviews)
- In one locality, the DAWN Project provided collaborative wrap-around services for emotionally disturbed youth and their families based on a comprehensive assessment. (source: stakeholder perceptions)

Areas Needing Improvement

- The services provided were not always linked to family needs. (source: case reviews & stakeholder perceptions)
- Children were not getting the services they needed because services were primarily focused on parents. (source: case reviews & stakeholder perceptions)
- Assessments that focused on specific issues overlooked broad and underlying needs. (source: case reviews)
- In some localities, there was a lack of systemic coordination between FCM and service providers to identify needs and provide services. (source: case reviews & stakeholder perceptions)
- In some localities, incomplete documentation made it difficult to determine if proper services were being provided to meet the identified needs. (source: case reviews & stakeholder perceptions)
- In one locality, neither in-depth initial assessments nor subsequent assessments were performed. (source: case reviews)
Item 18. Child and family involvement in case planning

___  Strength  ___  Area Needing Improvement

The case record review ratings were as follows:
28 – Strength (59.6%)
19 - Area Needing Improvement (40.4%)
3 - Not Applicable

Basis
Statewide Assessment
• The DFC must, if possible, involve the parents and child(ren) in the development of the case plan. The Case Plan I, State Form 2956, and Case Plan II State Form 45001, have spaces for the signature of the child. CWM Section 3, Appendix L; Administrative Letter, 11/27/2000, "Case Plan Development"

Onsite Review
Strengths
• Some localities utilize family group conferencing as a mechanism to engage children and parents in case planning. In these sites, children were involved in case planning without arbitrary rules establishing age or developmental limits. (source: case reviews & stakeholder perceptions)
• The court used a case plan summary to help family members understand the service plan in one locality. (source: case reviews & stakeholder perceptions)

Areas Needing Improvement
• The case plan used by DFC is lengthy and complex and consequently difficult for most family members to understand. (source: case reviews & stakeholder perceptions)
• In many cases, children and parents did not participate in case planning, especially in probation cases. The high level of FCM turnover results in a lack of experience in engaging families in the case planning process. (source: case reviews & stakeholder perceptions)
• In one locality, it appeared that contracted service providers were more likely than the DFC worker to develop case plans in collaboration with parents. (source: case reviews)
• In one locality, foster parents found it difficult to present unpleasant information in family case conferences in a way that was open and honest. (source: case reviews & stakeholder perceptions)
Item 19. Worker visits with child

___ Strength  
X Area Needing Improvement

The case record review ratings were as follows:
27 – Strength (54%)
23 - Area Needing Improvement (46%)
0 - Not Applicable

Basis
Statewide Assessment
• CWM 403.43 - The FCM is required to make face to face contact with both the child(ren) in out-of-home care and the child’s caregiver at least once every two months or more often as the case dictates.
• Data from Quality Assurance (QA) reviews for 60 of 92 counties showed that the appropriate collateral contacts were being made in 69% of the cases reviewed.
• State policy allows for collateral contacts to be made by certain service providers.

Onsite Review
Strength
• In approximately half of the cases, FCM fulfilled the DFC visitation policy. (source: case reviews)

Areas Needing Improvement
• When the DFC did not have primary responsibility for case management, the FCM practice on face to face visits with children fell short of State policy in approximately half the cases due to unclear policy, workload pressures, turnover and inexperience. (source: case reviews & stakeholder perceptions)
• There appeared to be no system in place to monitor visits to ensure that FCM were seeing children and families on a regular basis. (source: case reviews & stakeholder perceptions)
• When case management is contracted out to a private agency and the FCM fulfills primarily a broker role, monitoring to ensure that the services were provided was not always occurring. (source: case reviews & stakeholder perceptions)
• State policy does not prescribe visitation for a child on probation. (source: case reviews & stakeholder perceptions)
• Although FCM respond to caregivers when they call, they seldom initiated contact in some localities. (source: stakeholder perceptions)
Item 20. Worker visits with parents

___ Strength   ___ Area Needing Improvement

The case record review ratings were as follows:
20 – Strength (60.6%)
13 - Area Needing Improvement (39.4%)
17 - Not Applicable

Basis
Statewide Assessment
• CWM 403.43 (Same as item 19) Frequent contact by family case managers and children and their families allow for better service delivery and increased knowledge of the needs. It helps to improve relations and trust with the family as well as quicker achievement of permanency.

Onsite Review
Strength
• In many cases, state visitation policy is followed. (source: case reviews)

Areas Needing Improvement
• FCM practice on parent visits fell short of State policy apparently because of workload pressures, turnover, inexperience and the FCM’s perceived identity as case brokers. (source: case reviews)
• Service providers visited with parents and children often in place of visits by FCM. (source: case reviews)
• Parents sometimes did not know whom to contact due to high staff turnover in some localities. (source: case reviews)

<table>
<thead>
<tr>
<th>Outcome WB2: Children receive appropriate services to meet their educational needs.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of cases reviewed by the team according to degree of outcome achievement:</strong></td>
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<td>Not Achieved or Addressed:</td>
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<td>Not Applicable:</td>
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Status of Well-Being WB2 – Not in Substantial Conformity

Well-Being Outcome WB2 was rated as "not in substantial conformity" since 71.1 percent of the cases reviewed were rated as "substantially achieved" for the outcome.
Item 21. Educational needs of the child

___ Strength  ___ Area Needing Improvement

The case record review ratings were as follows:
32 – Strength (71.1%)
13 - Area Needing Improvement (28.9%)
5 - Not Applicable

Basis
Statewide Assessment
Data
• State QA reviews found that in 60 out of 92 counties reviewed, school records were being obtained in 69% of the cases where children are of school age.
• If a child is in special education a surrogate parent is being obtained in only 51% of the cases.

Program
• The State is decreasing its crisis mode of operating. Lower caseloads allow staff to spend more time meeting the educational needs, medical needs and court-related issues.
• Improved foster care recruitment and training of foster parents contributes to better educational services. However, FCM do not adequately document how foster parents are meeting the needs of children.
• FCM perceive that they are meeting the educational needs better, however the documentation does not support this perception.

Onsite Review
Strengths
• Concerted efforts are made by DFC to maintain children who are in foster care in their same school districts. Some localities have a bus that transports children placed out of their districts to their home schools. (source: stakeholder perceptions)
• Case plans addressed educational needs and case records included report cards, conference notes, and contact logs. (source: case reviews)
• In some localities, foster parents and service providers attended to the children's educational needs and FCM advocated for children with the schools, e.g., a FCM. filed a complaint that resulted in the Department of Education ordering a one-on-one aide and reconvening a child case conference to consider the need for compensatory services. (source: case reviews)
• CA&N includes educational neglect that was addressed by the provision of services. (source: stakeholder perceptions)
Areas Needing Improvement

- In one locality, DFC follow-up on educational needs and problems was limited due to a high volume of cases and staffing shortages. (source: case reviews)
- In one locality, there was a lack of documentation addressing educational issues, e.g., no individual education plans, no identification of special education needs, no description of advocacy efforts, no school records and no indications that developmental assessments of drug exposed children had been conducted. (source: case reviews)
- In some localities, foster parents had not received copies of educational records. (source: case reviews & stakeholder perceptions)

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<tr>
<th>Outcome WB3: Children receive adequate services to meet their physical and mental health needs.</th>
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<td>Number of cases reviewed by the team according to degree of outcome achievement:</td>
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**Status of Well-Being WB3 – Not in Substantial Conformity**

Well-Being Outcome WB3 was rated as "not in substantial conformity" since 70 percent of the cases reviewed were rated as "substantially achieved" for the outcome.

Note: Even though individual items were rated as not applicable, an outcome can only be rated as not applicable when both of the items were rated as not applicable. This did not occur.

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

___ Strength ___ Area Needing Improvement

39 – Strength (83%)
8 - Area Needing Improvement (17%)
3 - Not Applicable

Basis
Statewide Assessment
Data
- Data for 60 of 92 county QA reviews indicate that FCM are completing medical passports on 54% of the cases.
Program

- Most children taken into care are immediately placed on Medicaid or another health care program.
- Early and Periodic Screening, Diagnosis and Treatment (EPSDT) is not required.
- Children who are taken into care must have an immediate basic health exam.
- As issues present themselves, additional services such as mental health, developmental or psychiatric are provided.
- The State has several early intervention and prevention programs.

Onsite Review

Strengths

- Services were provided to meet identified health needs. (source: case reviews)
- Evidence of annual check-ups and immunizations was found in many case records. (source: case reviews)
- Foster parents, service providers, and relatives assumed responsibility for seeing that physical health needs were met. (source: case reviews)
- Foster care children qualified and were enrolled in the Hoosier Health Care program, which is a combination of Medicaid and the children's health insurance program. (source: case reviews & stakeholder perceptions)

Areas Needing Improvement

- Immunizations were not documented in some case records. (source: case reviews)
- There was evidence that medical examinations were not always done in a timely manner. (source: case reviews)
- There was no standardized procedure for when the FCM provides medical records to the foster parents. A foster family not getting the medical records of a seriously ill child caused them problems. (source: stakeholder perceptions)
- Medical passports were not regularly provided to foster parents, and when provided, foster parents did not know what they were for. (source: stakeholder perceptions)
- In some cases, neither health problems nor medical services were addressed in the case record. (source: case reviews)
- In some cases in one locality, the assessments did not identify serious health needs such as prenatal/in-the-womb drug exposure and developmental delays. (source: case reviews)
- Those health care providers who do not accept Hoosier Health Care present barriers to children in foster care getting necessary medical care. (source: stakeholder perceptions)

Item 23. Mental health of the child

___ Strength ______ X ______ Area Needing Improvement

The case record review ratings were as follows:
31 – Strength (73.8%)
11 - Area Needing Improvement (26.2%)
8 - Not Applicable
Basis
Statewide Assessment
- Data on the Indiana serving children’s mental health needs is conspicuously absent.
- DFC partners with the FSSA Division of Mental Health and Addiction (DMHA) and the families that receive services.
- The prevalence of mental health problems in children has increased over the years. Each child that enters the child welfare system is evaluated based upon the family and children needs.
- Most children that enter the system are referred to counseling or therapy. Many times this is part of the curriculum at residential facilities and includes individual, family and group therapy.
- Local community mental health agencies are utilized to provide outpatient services to children and families.

Onsite Review
Strengths
- In many instances, individualized mental health needs of children and their families were being addressed, and appropriate mental health referrals were made. (source: stakeholder perceptions)
- Contracted service providers supplied specialized mental health assessments and follow-up services. (source: case reviews)
- In one locality, the DAWN Project provides wraparound services for emotionally disturbed youth and their families. (source: stakeholder perceptions)
- A combination of public and private resources met mental health service needs in one locality. (source: stakeholder perceptions)

Areas Needing Improvement
- In some localities, children did not receive timely treatment for their mental health needs due to delays in assessment and service delivery. (source: case reviews)
- Neither service referral agreements nor subsequent case plans followed up on the behavioral, emotional and substance abuse needs that were identified in the assessment. (source: case reviews)
**PART B. - SYSTEMIC FACTORS**

**IV. STATEWIDE INFORMATION SYSTEM**

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

_X_ Strength ___ Area Needing Improvement

**Basis**

**Statewide Assessment**
- The State has an operational SACWIS system called the Indiana Child Welfare Information System (ICWIS). ICWIS establishes an electronic case record and is available to all FCM and their supervisors.
- Information in ICWIS includes child and family demographics, child welfare status, case plan goals and child placement information.

**Onsite Review**

**Strengths**
- ICWIS can identify the status, characteristics, location and goals for every child in foster care. (source: stakeholder perceptions)
- Because the reliability of the ICWIS data has improved significantly, managers and administrators are now able to rely on ICWIS for program, quality assurance and budgetary decisions. (source: stakeholder perceptions)
- New equipment and software have improved timeliness of reports. (source: stakeholder perceptions)
- Computer-generated orders have streamlined court processes in one locality. (source: stakeholder perceptions)

**Areas Needing Improvement**
- The following difficulties with ICWIS were identified (source: stakeholder perceptions):
  1. The automated case planning process is not easy for the children and their families to understand;
  2. Case plan development and implementation are delayed by the need to input the data into ICWIS and to obtain the required signatures;
  3. Cross-county confidentiality controls delay timely CA&N investigations;
4. Screens do not flow from one to the other; repeat data on a family member cannot be moved automatically to another family members’ record; and authorization is needed to access certain screens;
5. There is an inability to access detailed information on a case across units and across counties;
6. Since the case record is child specific, it is difficult to identify family needs; and,
7. Reports lack trends and cross county comparisons. Requests for one time reports have to go through the help desk.

- At times ICWIS training occurred before new staff has learned the child welfare program. ICWIS training is also limited to one site, and is not integrated into the new FCM competency-based training. (source: stakeholder perceptions)
- Although the CA&N investigations were completed, the information was not always entered into ICWIS timely. Since ICWIS is used to track the instances of CA&N, inputting the information into ICWIS could be useful when looking at new CA&N allegations. (source: stakeholder perceptions)

V. CASE REVIEW SYSTEM

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

(____) Strength (X) Area Needing Improvement

Basis
Statewide Assessment
Data
• Data for 60 of the 92 counties show that case plans are complete in 54% of the cases.
Program
• The completion of case plans regressed in 1997 and 1998 due to the start up of ICWIS, however it increased in 1999.
• The ICWIS system provides support to case planning through the use of edits to remind staff to complete portions of the case plan for supervisory approval.
• Courts have been encouraged to review case plans and mandate the filing of the plans at each review hearing.
• FCM perceive that data entry seems to be a statistical and reporting function rather than a family-planning tool.
• When management began to use ICWIS reports, the following rates improved: open and pending investigations, re-victimization, perpetrator recidivism, out-of-home stay and case plan completion.
Onsite Review
Strengths
- Child-specific case plans are completed within 60 days of the child’s entry into foster care. (source: stakeholder perceptions)
- Some parents are involved in case planning through case conferencing and in some localities receive a summary of the comprehensive case plan. (source: stakeholder perceptions)
- Sometimes Court Appointed Special Advocates (CASA) participated in case planning conferences. (source: stakeholder perceptions)

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

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

X  Strength  ___  Area Needing Improvement

Note: Courts perform periodic reviews in Indiana

Basis
Statewide Assessment
- The 60 county QA reviews conducted since July, 1999 show that periodic reviews were occurring in 89% of the cases.
- Interviews with local judges revealed that court reviews are occurring more often than every six months, sometimes every three months or less depending on the case. Consequently the average length in out-of-home placement has decreased from 36 months, three years ago, to 20.3 months today.

Onsite Review
Strengths
- Periodic reviews by the court were conducted more often than ASFA requires. (source: stakeholder perceptions)
- Prior to each court review, the FCM holds a case conference. (source: stakeholder perceptions)
Areas Needing Improvement
• Although frequent court hearings have important implications for expediting permanency, the increased demands placed on FCM decrease the time they are able to devote to other activities such as case planning and family visitation. (source: stakeholder perceptions)
• FCM are unclear about the role of the CASA and the GAL. (source: stakeholder perceptions)
• There are insufficient CASA and GAL for the number of children in care. (source: stakeholder perceptions)

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

X Strength ___ Area Needing Improvement

Basis
Statewide Assessment
• The 60 QA reviews conducted since July, 1999 indicated that permanency hearings met the required time requirements in 80% of the cases.
• Interviews with local judges indicated that the change in permanency hearings is positive. Judges are holding staff accountable three to six months before the permanency hearing to have a plan in place on or before the 12-month permanency hearing.

Onsite Review
Strengths
• For most children, permanency hearings were held more often than ASFA requires. (source: stakeholder perceptions)
• In some localities, the addition of judicially appointed referees, prosecuting attorneys and public defenders expedited the timely completion of ASFA requirements. (source: stakeholder perceptions)
• The recently implemented Statewide practice of combining the periodic review with the permanency hearing and holding these combined hearings at least once every six months has expedited permanency in many localities. (source: stakeholder perceptions)

Area Needing Improvement
• Due to high caseloads in some localities, judges have less time to review and hear cases. (source: stakeholder perceptions)
Item 28. Provides a process for termination of parental rights (TPR) proceedings in accordance with the provisions of the Adoption and Safe Families Act.

X Strength ___ Area Needing Improvement

Basis
Statewide Assessment
• Filing for TPR has been progressing gradually.
• Challenges in the judicial system include:
  1. Some judges don't agree with the timeline;
  2. The court docket doesn't always permit timely adjudication as a CHINS; attorney fees for CHINS proceedings exceed the funds available;
  3. Older children had significant mental health issues;
  4. Some older children were unwilling to be adopted;
  5. Confusion over TPR and abandoned infants existed;
  6. Services are scarce in rural counties; and,
  7. Concurrent planning is episodic.

Onsite Review
Strengths
• As more of the ASFA reforms have taken root in the system, most of the terminations are now occurring within the ASFA timeframes. (source: stakeholder perceptions)
• The orders for TPR and proceedings were entered on the day of the TPR hearing and the judge reviewed and approved the order before the end of the day in one locality. (source: stakeholder perceptions)
• In one locality, many cases are resolved through voluntary consent by parents prior to the TPR hearing. (source: stakeholder perceptions)
• When exceptions are granted to the 15-month TPR requirements, they are based on an individualized determination of what is in the child’s best interest that is consistent with Indiana statute. (source: stakeholder perceptions)
• All families are notified both verbally and in writing regarding the ASFA TPR timeframes at the beginning of their involvement with the court in one locality. (source: stakeholder perceptions)

Areas Needing Improvement
• Indiana statute requires the filing of a TPR petition once the ASFA TPR timeframes have been reached even though DFC may believe TPR is not in the best interests of the child. This provision was put into statute to ensure that courts would be involved in the TPR decision making process. Subsequently DFC requests a dismissal of the petition from the court. ASFA allows for States to document in the case plan a compelling reason for determining that the filing of a TPR would not be in the best interests of a child. (source: stakeholder perceptions)
• In one locality, delays of up to two years sometimes occurred between the time that parents signed a consent to voluntarily relinquish their child and the actual date that relinquishment occurred. (source: stakeholder perceptions)
Though TPR hearings were held expeditiously and TPR orders were entered earlier than allowed by Indiana statute, the finalization of the TPR process was delayed by parental appeals. Of the cases reviewed all but one of the TPR orders were upheld after appeal. (source: case reviews & stakeholder perceptions)

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

| X | Strength | ___ | Area Needing Improvement |

Basis
Statewide Assessment
- State law requires the FSSA to notify parents of administrative hearings ten days before the hearing.
- Interviews with judges indicated that under most circumstances all individuals that show up for court are given an opportunity to be heard.
- The 60 QA reviews conducted since July, 1999 show that timely notice was given to 63% of the foster parents.

Onsite Review
Strengths
- Most foster and adoptive parents were notified of hearings in a timely manner. (source: case reviews)
- Notification was given to foster parents to attend court hearings via certified mail. (source: stakeholder perceptions)
- When foster and pre-adoptive parents attended hearings, most were given an opportunity to be heard. (source: stakeholder perceptions)
- DFC attorneys were responsible for providing the appropriate notice to foster parents, pre-adoptive parents, and relative caregivers. (source: stakeholder perceptions)
- Those foster parents unable to attend a court hearing were given an opportunity to provide a written report. (source: stakeholder perceptions)

Areas Needing Improvement
- Some foster parents did not receive timely notifications regarding hearings. (source: stakeholder perceptions)
- In some localities, foster and adoptive parents were not always given the opportunity to be heard. (source: case reviews & stakeholder perceptions)
VI. QUALITY ASSURANCE SYSTEM

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

_ X _ Strength ___ Area Needing Improvement

Basis
Statewide Assessment
- The State implemented a QA process in July, 1999. Since then, 60 of the 92 counties have been reviewed.

Onsite Review
Strengths
- Standards were in place regarding the timeliness of CPS investigations, contacts, visitations, input into ICWIS, case planning conferences and outcome-based service delivery. (source: case reviews & stakeholder perceptions)
- DFC has applied for accreditation through the Council on Accreditation of Services for Families and Children (COA). In order to meet accreditation standards, qualifications for staff will be enhanced, uniform case practice standards will be put in place, and oversight will be strengthened. (source: stakeholder perceptions)
- Supervisors conducted regular case conferences with FCM to review case progress and the office director provided oversight on high profile cases. (source: stakeholder perceptions)
- Foster parents are required to be licensed and attend pre-service and in-service training. Criminal background checks are required for licensure. (source: stakeholder perceptions)
- FCM staff met monthly with the Child Protection Team (CPT) on generalized and case specific issues in one locality. (source: stakeholder perceptions)

Area Needing Improvement
- None
Item 31. The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented.

**X** Strength ___ Area Needing Improvement

Basis

Statewide Assessment
- Since July, 1999, 60 of the 92 counties have held their QA review using a 90% compliance standard.
- All 92 local offices were reviewed by August, 2001.
- An outcome-based QA process is being developed for implementation latter this year.

Onsite Review

Strengths
- All Indiana counties have now undergone QA reviews that include the development of action plans to address any problems identified during the reviews. (source: stakeholder perceptions)
- There is a focus on accountability with regular reporting required. (source: stakeholder perceptions)
- CPS and LEA meet daily on intakes for both agencies in one locality. (source: stakeholder perceptions)
- A monthly child welfare staffing was held in one locality. (source: stakeholder perceptions)
- DFC developed an annual Child Protection plan with input from LEA, prosecutor, schools, hospitals and mental health providers describing protocols for coordination of services. The review of the document via public hearing was mandated. (source: stakeholder perceptions)
- Child fatality review teams were in place in some localities. (source: stakeholder perceptions)
- CPT were multi-disciplinary teams that meet monthly. CPT allowed members to air differences on how CPS cases are to be handled. (source: stakeholder perceptions)
- There was a full-time staff person to conduct special studies in one locality. (source: stakeholder perceptions)
- The QA teams included county directors, supervisors and FCM. The QA process has become a useful learning and case practice reinforcement process. (source: stakeholder perceptions)
- ICWIS and other MIS generated reports are the basis of the QA review. (source: stakeholder perceptions)
- Stakeholder interviews were part of the QA process. (source: stakeholder perceptions)
- Outcome-based Request For Proposals (RFP) will be implemented to improve contractor performance in the delivery of services. (source: stakeholder perceptions)
- Regional Consultants fulfilled both training and monitoring functions. (source: stakeholder perceptions)
Areas Needing Improvement
- Some FCM were deprived of adequate supervision in some localities and as a result the quality of practice declined. (source: stakeholder perceptions)
- In one location, a single person was responsible for reviewing all reports of Service Referral Agreement (SRA) cases. Consequently, there was insufficient time available to ensure the quality of the review. (source: stakeholder perceptions)

VII. TRAINING

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

___ Strength ___ Area Needing Improvement

Basis
Statewide Assessment
- From October, 1996 through October, 2000, 304 training workshops in FCM Core Series, Supervisor and Manager Core Series and Overviews and FCM Training were given in Indiana. Training evaluations indicated high satisfaction.
- The DFC has two initiatives:
  1. Integrating Child Welfare Competency Based and Public Assistance Competency Based training; and,
  2. Completing the remaining Regional Training Centers.

Onsite Review
Strengths
- A statewide comprehensive core training structure for new supervisors and FCM is in place, and in one locality, all FCM receive core training for new workers. (source: stakeholder perceptions)
- Regional training centers are being developed. (source: stakeholder perceptions)
- In one locality, experienced staff mentored new employees for orientation. (source: stakeholder perceptions)
- In one locality, the CPS investigations team supervisor provided a specific orientation program for new CPS staff. (source: stakeholder perceptions)
Areas Needing Improvement

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

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

- Strength ___ Area Needing Improvement

**Basis**

**Statewide Assessment**

- The State estimates an average of eight days of training per staff per year. New staff receive 15 to 20 days of training whereas experienced staff may receive less than one day.
- The Child Welfare Competency-Based training is being integrated with Public Assistance Competency Based training. The State defines integration as maintaining specialized functions while finding appropriate ways to intersect and collaborate, to prevent duplication or gaps in services, to minimize the waste of limited resources or when it is in the workers' best interest to collaborate.

**Onsite Review**

**Strengths**

- There is a wide variety of high-quality ongoing training available for supervisors and FCM. This includes training on substance abuse issues. (source: stakeholder perceptions)
- An Individualized Training Needs Assessment process is in place to assure that the training needs of staff are addressed. (source: stakeholder perceptions)
- In one locality, DFC and its partners provide joint training at each other's sites. (source: stakeholder perceptions)
- Training for working with the developmentally delayed, special needs children and adults, and for teen sexual perpetrators is provided in one locality. (source: stakeholder perceptions)
Areas Needing Improvement

• It is difficult for FCM to find time to attend ongoing training because of the demands of their caseloads. (source: stakeholder perceptions)

• There is no ongoing training for FCM on effective ways to work with parents of children with developmental delays and/or mental health and sexual problems. (source: stakeholder perceptions)

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

___ Strength   ___ Area Needing Improvement

Basis
Statewide Assessment
Data
• In 1999 more than 15,000 individuals participated in pre-service, in-service and first aid training yet there has been a deficit of appropriate in-service training available to caregivers.
• The State’s QA process found that the case conference policy for settling disputes with foster parents occurred in 44% of the cases where appropriate.

Program
• Two major concerns are the kind of training and how to pay for it.
• Indiana has not utilized title IV-E training funds for child care institutions because of the difficulty in using private dollars to match Federal dollars. The State has contracted with DMG Maximus to assist them in solving cost allocation problems in this area.
• The DFC Director conducted roundtable discussions with foster parents in 1999. The primary issues that surfaced were communication and inclusion in the case plan process.

Onsite Review
Strengths
• Foster/adoptive parents and residential child care staff are required to participate in pre-service and ongoing training. (source: stakeholder perceptions)
• Prospective relative foster parents must receive training and be licensed before the State will place children with them. (source: case reviews & stakeholder perceptions)

Areas Needing Improvement
• Many foster parents have difficulty accessing training because of its location and the time of day that it is offered. This makes it difficult to fulfill the licensing requirements. (source: stakeholder perceptions)
• In rural areas, the need to cluster training delayed training for new foster parents. (source: stakeholder perceptions)
• Some foster parents need child care in order to be able to attend training and do not have the money to pay for it. (source: stakeholder perceptions)
VIII. SERVICE ARRAY

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

_X_ Strength ___ Area Needing Improvement

Basis

Statewide Assessment

- Indiana has Family Preservation/Family Support services, home-based prevention and early intervention services, time-limited re-unification and adoption services funded through title IV-B, Subparts 1 & 2.
- Since July, 1997 Indiana has had a title IV-E child welfare waiver demonstration that provides home-based and community-based services in order to prevent removal and/or to reduce out-of-home placements and to expedite family re-unification.
- Since April, 1996 the State implemented a Safety, Risk and Strengths and Needs Assessment Tool. The assessment of risks and needs are completed on all substantiated cases and at six-month intervals.
- Indiana has many early intervention and prevention programs to address the needs of children and families in order to prevent the need for services. Among them are:
  1. Building Bright Beginnings promotes the development of children from birth through four years of age;
  2. First Steps provides early intervention for children with developmental delays or at risk of developmental delays;
  3. Healthy Families Indiana connects families with newborns with community resources statewide; and,
  4. Hoosier Healthwise is a health insurance program for children, pregnant women and low-income families.

Onsite Review

Strengths

- There was a wide array of flexible services available that had the capacity to meet the individual needs of children and families. (source: stakeholder perceptions)
- Through the title IV-E waiver, flexible funding, parenting classes, anger management and substance abuse treatment were available. (source: stakeholder perceptions)
- Risk and needs assessment tools were used to make recommendations for the appropriate service level for families and their children. (source: stakeholder perceptions)
As part of the title IV-E waiver process, the County DOC probation offices are able to effectively utilize services. (source: stakeholder perceptions)

Transportation was available, and it was not an issue in the provision of services in one locality. (source: stakeholder perceptions)

In one locality, the Green House program allowed parents and their children to live together and to receive services as a family. (source: stakeholder perceptions)

Faith-based providers were used effectively and widely by many families in one locality. (source: stakeholder perceptions)

Areas Needing Improvement

- Shortages occurred statewide in foster homes for special needs children and for substance abuse and sexual perpetrator services. (source: stakeholder perceptions)
- Disabled children in need of rehabilitative services were made CHINS so that child welfare would pay for their services. (source: stakeholder perceptions)
- Children coming into foster care did not obtain prescriptions due to Medicaid delaying their applications. (source: stakeholder perceptions)
- In one locality, there were shortages of foster family homes, housing, substance abuse services, residential group home services, services for the hearing impaired, pregnancy and services provided for Spanish speaking parents. (source: stakeholder perceptions)
- In another locality, there was a service gap in the step down from residential to therapeutic foster care. (source: case reviews)

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

| X | Strength | ___ | Area Needing Improvement |

**Basis**

**Statewide Assessment**

- Services are readily accessible in the majority of the State.
- Small rural counties are challenged by distance and lack of transportation.
- Large metropolitan areas have waiting lists.

**Onsite Review**

**Strengths**

- There are statewide community-based wrap-around services available through a title IV-E. waiver demonstration. (source: stakeholder perceptions)
- Healthy Families Indiana is a significant statewide effort to prevent child maltreatment. (source: stakeholder perceptions)
- Step Ahead is a comprehensive, statewide process that provides a coordinated approach to deliver needed services to individuals, children and families in their communities. (source: stakeholder perceptions)
- Home-based services were readily available in most localities. (source: stakeholder perceptions)
• DFC had a family educator on staff who will provide transportation outside of normal business hours to ensure that families receive services in one locality. (source: stakeholder perceptions)

• Mental Health services were provided by agencies after regular office hours in one locality. (source: stakeholder perceptions)

• A liaison in the Juvenile Court signed families up for services immediately in one locality. (source: stakeholder perceptions)

Areas Needing Improvement
• Getting to and from services was a problem especially outside of normal business hours and in most rural localities. (source: stakeholder perceptions)
• There were some delays in accessing services in one locality because the demand for services exceeds the supply. (source: stakeholder perceptions)

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

_X_ Strength ___ Area Needing Improvement

Basis
Statewide Assessment
• Indiana implemented a Safety, Risk and Strengths and Needs Assessment Tool that was designed by the National Council on Crime and Delinquency.
• The assessments of risks and needs are completed on all substantiated cases and at six-month intervals thereafter to identify and match services to individual needs.

Onsite Review
Strengths
• The title IV-E waiver is used to individualize services. (source: stakeholder perceptions)
• ICWIS contains a listing of services that could be entered into the case plan, which makes it easier to select services. This listing included a category of “Other” which allowed further individualization. (source: stakeholder perceptions)
• Cases served by the DAWN Project were highly individualized in one locality. (source: stakeholder perceptions)
• Due to the combination of individualized assessments by multiple service providers and the case conferencing approach, services for children and families were very individualized in one locality. (source: case reviews & stakeholder perceptions)

Areas Needing Improvement
• The lack of individualized services in some localities was due to problems in case planning and the lack of comprehensive assessments. Consequently, the likelihood of identifying needed services on an individual basis and follow through with service provision were greatly diminished. (source: case reviews)
• Deficits existed in services to developmentally-delayed and mentally ill children and parents. (source: stakeholder perceptions)
IX. AGENCY RESPONSIVENESS TO THE COMMUNITY

Rating of Review Team Regarding Substantial Conformity

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

_**X**_ Strength ___ Area Needing Improvement

Basis

Statewide Assessment

- Before 2000 the concerns of stakeholders were addressed on an as needed basis or in meetings throughout the year.
- Stakeholders would receive a draft CFSP and could provide written comments.
- The DFC is using the Statewide Assessment team to expand stakeholder involvement in the CFSP and the PIP.

Onsite Review

Strengths

- Collaboration is a major strength of the DFC (source: stakeholder perceptions). The collaboration activities include the following:
  1. developing an ASFA implementation team;
  2. conducting foster parent focus groups throughout the State;
  3. establishing (in one locality) an Early Intervention Team, comprised of representatives from DFC, DOC, schools, LEA, and mental health;
  4. creating (in one locality) a SAFEPOLICY program, which focuses on prevention and intervention of at-risk youth in another locality;
  5. working with the courts and CASA on permanency issues;
  6. establishing working collaborations with the Family Advocacy Center and LEA; and,
  7. forming (in one locality) a sexual abuse task force to coordinate investigations and responses.
- DFC cultivated good relationships among service partners in child welfare and was responsive to community partners and families in most localities. (source: stakeholder perceptions)
- DFC staff serve on numerous committees including Step Ahead Councils, the First Steps program for the developmentally delayed, the legislatively mandated multidisciplinary Early Intervention program, the CPT and the Healthy Families efforts. (source: stakeholder perceptions)
• The CPT, which consists of DFC, medical personnel, and LEAs, developed a child protection plan that is in place at all localities. (source: stakeholder perceptions)
• In one locality, DFC is re-locating staff into the communities to better partner with community-based service providers. (source: stakeholder perceptions)
• Though DFC is the primary funder of services, it collaborates with other agencies in the best interest of the children. (source: stakeholder perceptions)
• There was a good working relationship with the Guardian Home in one locality. (source: stakeholder perceptions)

Area Needing Improvement
• Although DFC encouraged foster parent support groups in all localities, sustaining them was sporadic. (source: stakeholder perceptions)

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

_X_ Strength ___ Area Needing Improvement

Basis
Statewide Assessment
• Not addressed

• Onsite Review
• Strengths
• CA&N Prevention Councils include information on services provided by DFC. (source: stakeholder perceptions)
• Senate Bill 400 requires DFC to report to the County governments on a semi-annual basis. (source: stakeholder perceptions)
• The FSSA annual report was available in all public libraries, on the Internet and at all local FSSA offices. (source: stakeholder perceptions)

Area Needing Improvement
• None

Item 40. The State’s services under the CFSP are coordinated with services or benefits of other Federal or federally assisted programs serving the same population.

_X_ Strength ___ Area Needing Improvement

Basis
Statewide Assessment
• DFC formed an ASFA implementation group in 1998 to address issues surrounding the implementation of ASFA such as service delivery, juvenile court issues and permanency planning.
Each local DFC Director was charged with holding training with the FSSA Division of Disability, Aging & Rehabilitative Services (DDARS) and the DMHA so that staff know how to access their services and how to refer children needing to transition to adult services.

The Child Welfare Provider Team was formed in December, 1999 to improve the relationship between child welfare service providers and the DFC and to provide a forum in which the best interests of children can be discussed.

Healthy Families Indiana has working agreements with Head Start and WIC.

George Mason University has selected Indiana to participate in developing Multicultural Leadership Teams that will conduct training sessions on systems that impact young children and their families.

DFC has created the Family Unification Program to expand housing services to youth that have exited foster care. Those same youth are being considered for eligibility for Welfare to Work (WtW) services provided by the Workforce Development. WtW also serves on the Steering Committee for the ILP.

The Casey Family Program has chosen Indianapolis as one of four national sites to develop a Transitional Living Program for youth.

Title IV-E foster care protocol agreements have been developed with all county DOCs to assure that all eligible title IV-E delinquent children receiving title IV-E foster care maintenance payments are also receiving all services required under the title IV-B State plan.

Onsite Review

Strengths

- DFC works closely with Head Start, Food Stamps, Public Housing and other federally assisted programs. (source: stakeholder perceptions)
- The DFC includes the Indiana Manpower and Comprehensive Training (IMPACT) program and TANF programs and, as such, is able to identify client needs and maximize dollars by incorporating services funded through those programs if families meet eligibility requirements (specifically, domestic violence and vocational assessments). Assessment services funded by IMPACT are used for foster care clients. (source: stakeholder perceptions)
- Effective CA&N awareness campaigns operated in several localities. (source: stakeholder perceptions)

Area Needing Improvement

- None
X. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION

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<th>Rating of Review Team Regarding Substantial Conformity</th>
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Item 41. The State has implemented standards for foster family homes and child care institutions, which are reasonably in accord with recommended national standards.

_X_ Strength ___ Area Needing Improvement

Basis

Statewide Assessment
- The Indiana Administrative Code Rules, the Indiana Juvenile Code and Child Welfare Policy clearly define the standard set for foster family homes, adoptive homes and child care institutions.
- A survey that addressed six different issues related to standards for foster family homes and child care institutions was conducted. Most respondents believe the State is doing an effective job.
- There is an urgent need to revise the foster home regulations, which date from 1946.
- Regulations for group homes, child caring institutions and private secure care have been revised in the last ten years.
- A bimonthly orientation is provided to the public where each rule and regulation is read, discussed and explained.
- Ongoing consultation is provided to all licensed facilities.
- The Fall 1999 roundtables recommended new training, increased communication to foster parents about the children in their home and more collaborative relationships.

Onsite Review

Strengths
- DFC is updating foster home standards in response to a series of foster parent focus groups. (source: stakeholder perceptions)
- Practice was kept current through the use of policy directives. (source: stakeholder perceptions)
- Since re-licensing is done by ICWIS, timeliness is excellent. (source: stakeholder perceptions)

Areas Needing Improvement
- There are differences between some of the 1946 standards and current practice. (source: stakeholder perceptions)
• Agency policy dictates that children are to be placed in homes that are licensed; however the court sometimes will order placement with relatives who have not been licensed. In these instances, a safety check is conducted on the home and the family is expected to attend the next licensing training. (source: stakeholder perceptions)

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

_X_ Strength ___ Area Needing Improvement

Basis
Statewide Assessment
• The State applies licensing standards equally to foster family homes and child caring institutions to ensure that appropriate care is given to therapeutic and special need placements.
• PL 211-1999, which further defined Special Needs and Therapeutic foster homes, has had a direct impact on the support services and financial reimbursement of the home. Also in-service training has been revised to meet the needs of these homes.

Onsite Review
Strengths
• Licensing standards are applied to both related and unrelated foster families. (source: stakeholder perceptions)
• It is FSSA policy that only licensed homes receive title IV-E/B funds. (source: stakeholder perceptions)
• Licensing of homes was done on a timely basis. (source: stakeholder perceptions)

Area Needing Improvement
• Occasionally children are placed in relative homes that have not met licensure requirements. Maintenance payments are made to these homes from County funds. (source: stakeholder perceptions)

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

_X_ Strength ___ Area Needing Improvement

Basis
Statewide Assessment
• The State requires all individuals to submit to a criminal history check to work in child caring facilities as well as relative caregivers, prospective foster family and prospective adoptive homes.
• The State monitors compliance by an annual State review and unannounced inspections at facilities and homes.
• The criminal checks are processed through local and State LEA.
• The DFC is unable to track a person's criminal history outside of the State.

Onsite Review
Strength
• Criminal background checks are conducted on all individuals residing in foster family homes and on all staff employed in child care institutions. (source: stakeholder perceptions)

Area Needing Improvement
• None

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

___ Strengthening Area Needing Improvement

Basis
Statewide Assessment
• The DFC contracted with the Children’s Bureau of Indianapolis in 1996 to create the Indiana Adoption Initiative to use the media to recruit foster and adoptive families.
• Ethnically and racially diverse children are featured prominently in the Indiana Adoption website, newspaper features, television spots, billboards, faith-based outreach and adoption fairs.
• The May, 2001 edition of the My Forever Family picture book features 86 Caucasian children and 51 children of color, whereas 83 waiting families are Caucasian and 21 are families of color.
• The pool of waiting adoptive families does not proportionately reflect the ethnic and racial diversity of Indiana’s children in care.

Onsite Review
Strengths
• Foster homes are reflective of the population in care in many localities. (source: stakeholder perceptions)
• DFC placed ads in newspapers, addresses community groups and has operated a booth at volunteer fairs. (source: stakeholder perceptions)
Areas Needing Improvement
- There was a major need to focus on recruiting additional foster parents, especially those who can address the mental health needs or developmental disabilities needs of children, thereby reducing the reliance on residential care. (source: stakeholder perceptions)
- Families were lost due to long delays between training and the initiation of home studies and licensing by the DFC. In one locality, training must be clustered due to small volume and as a result the training is delayed. In another locality, licensing staff have ongoing caseloads in addition to their licensing responsibilities. As a result, they have insufficient time to keep up with the volume of work associated with licensing. (source: stakeholder perceptions)
- Foster parents have been a good source for recruiting other foster parents, whereas agency marketing campaigns have not been very successful. (source: stakeholder perceptions)
- Although foster parent interest rises after child welfare media occurrences (e.g., abandoned baby), follow-up with those who expressed interest has not resulted in new foster parents in one locality. (source: stakeholder perceptions)
- Families were more likely to seek licensure from private agencies due to higher subsidies and more support from workers. (source: stakeholder perceptions)

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

X Strength ___ Area Needing Improvement

Basis
Statewide Assessment
- The Indiana Adoption Initiative encourages the promotion of adoptive families and waiting children across county lines. Regional representatives and adoption contractors share information about families and waiting children monthly. A toll free number and a website centralize inquiries.
- The Indiana Adoption Initiative received 16,831 adoption inquiries in 2000 of which 977 were child-specific.
- Additional funding is being sought for matching and placement services.
- Accessibility to adoption assistance resources has been inconsistent in the counties.
- Indiana has increased cross-state adoptions because of the Internet and the Indiana Adoption Initiative web page. The State has a collaborative tri-state initiative with Ohio and Kentucky to recruit adoptive families for waiting children.
- The Villages of Indiana and Villages of Kentucky promote dual licensure among states to move children into safe, permanent homes.
- A strong ICPC facilitates successful placements across state lines.
Onsite Review

Strengths
• The DFC worked closely with neighboring county offices to ensure that children are placed appropriately. (source: stakeholder perceptions)
• Provisions were in place to register children in national adoption exchanges if local recruitment efforts do not work in a certain period of time. (source: stakeholder perceptions)
• Localities have used foster parents, friends of foster parents, Regional Special Needs Adoption Program (SNAP), and have listed children on the Internet in Picture Book as recruitment resources. (source: stakeholder perceptions)
• Debra Corn and Villages are agencies with State foster care contracts that successfully recruit foster families across jurisdictions and match families and children well. (source: case reviews)

Area Needing Improvement
• The implementation of cross jurisdictional placements was an issue at times in some localities, e.g. before a cross jurisdictional placement could proceed, approval of the county director was required, etc. (source: stakeholder perceptions)
### Appendix A

**XI. DETERMINATION OF SUBSTANTIAL CONFORMITY**

For each outcome and systemic factor listed below, mark “Y” where the State is determined to be in substantial conformity and “N” where the State is determined not to be in substantial conformity. For each outcome or systemic factor marked “N” place a “X” beside the performance indicator, listed by item number in this form, that has been determined to be an area needing improvement.

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<td>N Outcome WB1</td>
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<td>X Item 17</td>
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<td>Y Foster and Adoptive Parent Licensing, Recruitment, and Retention</td>
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**Permanency**

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**Y Quality Assurance System**

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Appendix B

Acronyms

Administration for Children and Families (ACF)
Adoption and Safe Families Act of 1997, Public Law 105-89 (ASFA)
Chafee Foster Care Independence Program (CFCIP)
Child Abuse and Neglect (CA&N)
Child and Family Services Plan (CFSP)
Child in Need of Services (CHINS)
Child Protection Team (CPT)
Child Protective Services (CPS)
Child Welfare Manual (CWM)
Council on Accreditation of Services for Families and Children (COA)
Court Appointed Special Advocates (CASA)
Department of Corrections (DOC)
Division of Disability, Aging & Rehabilitative Services (DDARS)
Division of Family and Children (DFC)
Division of Mental Health and Addiction (DMHA)
Early and Periodic Screening, Diagnosis and Treatment (EPSDT)
Family Case Managers (FCM)
Family and Social Services Administration (FSSA)
Federal Fiscal Year (FFY)
Guardian Ad Litems (GAL)
Independent Living Program (ILP)
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Page 2 – Appendix B (Acronyms)

Indiana Child Welfare Information System (ICWIS)
Indiana Manpower and Comprehensive Training (IMPACT)
Individualized Training Needs Assessment (ITNA)
Informal Adjustment (IA)
Interstate Compact on Adoption and Medical Assistance (ICAMA)
Interstate Compact for the Placement of Children (ICPC)
Law Enforcement Agencies (LEA)
Management Information System (MIS)
Period Under Review (PUR)
Program Improvement Plan (PIP)
Quality Assurance (QA)
Service Referral Agreement (SRA)
Special Needs Adoption Program (SNAP)
State Fiscal Year (SFY)
Temporary Assistance to Needy Families (TANF)
Termination of Parental Rights (TPR)
Welfare to Work (WtW)
Women, Infants & Children (WIC)
Appendix C

Indiana Children and Family Services Review Team

FEDERAL TEAM LEADERS- Len Tufo and Linda Mitchell

STATE TEAM LEADER - Jane Bisbee
Marion -
Site Coordinator Mary Elliott
Site Leader A Team -Stephanie Beasley-Fehrman and Jerry Milner/Patris Shirrells
Site Leader B Team - Patsy Sproatt and Miranda Lynch/Carolyn Wilson-Hurey

<table>
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<tr>
<th>State</th>
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<tbody>
<tr>
<td>1. Mark Munchel</td>
<td>Michelle Rawlings</td>
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<tr>
<td>2. Nancy Gettinger</td>
<td>Don Siltberg</td>
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<tr>
<td>3. Melissa Clark</td>
<td>Marva Benjamin</td>
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<td>4. Linda Akers</td>
<td>Carol Kraklan</td>
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<td>5. Beth Bryant</td>
<td>Terri Lewis</td>
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<td>6. Mary Lou Easter</td>
<td>Jackie Shervington</td>
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<td>7. Penny Pfau</td>
<td>Jennifer Gardner</td>
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Howard

Site Coordinator Roger Suhre
Site Leader - Linda Marsh and Jennifer Butler/Barbara Putyra

| 1. Bill Walker  | James Steele         |
| 2. Jim Bedwell  | Richard O'Grady     |
| 3. Kimberly Plantenga | Linda Morrison |
| 4. Sharon Persons | Rick Robb          |
| 5. Debbie Wessel  | Maurita Johnson     |

Wabash

Site Coordinator Connie Herman
Site Leader - Liz Teusch & Ronald Stevens/Anita Langham

| 1. Sherry Murray | Margaret Taylor |
| 2. Peggy Shively  | Paula Seidman   |
| 3. Pat Brown      | Linda Homan-Lane |
| 4. Chris Wagner   | Gwen Harris      |
| 5. Wayne Hawk     | Bob Whittington  |