

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Children and Families
Administration on Children, Youth and Families
Children's Bureau

Final Report
New Hampshire Child and Family Services Review
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U.S. Department of Health and Human Services
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EXECUTIVE SUMMARY
Final Report: New Hampshire Child and Family Services Review

This document presents the findings of the Child and Family Services Review (CFSR) for the State of New Hampshire. The CFSR was conducted the week of June 9, 2003. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the State child welfare agency – the New Hampshire Department of Health and Human Services, Division of Children, Youth, and Families (DCYF);
- The State Data Profile, prepared by the Children’s Bureau of the U.S. Department of Health and Human Services, which provides State child welfare data for the years 1999 through 2001;
- Reviews of 50 cases at three sites throughout the State (it should be noted that three of the out-of-home placement cases reviewed were the placement and care responsibility of the Division for Juvenile Justice Services (DJJS) through its agreement with the child welfare agency); and
- Interviews or focus groups (conducted at all three sites and at the State-level) with stakeholders including, but not limited to children, parents, foster parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, and attorneys.

A key finding of the New Hampshire CFSR is that the State is in substantial conformity with one of the seven outcomes and with five of the seven systemic factors. With regard to the outcomes, New Hampshire achieved substantial conformity with Well Being Outcome 2. The CFSR determined that DCYF effectively addresses the educational needs of children in foster care and in-home services cases.

The two weakest areas of State performance on the outcomes occurred for Permanency Outcome 1 (Children have permanency and stability in their living situations) and Well Being Outcome 1 (Families have enhanced capacity to provide for their children’s needs). For permanency outcome 1, both case review findings and the State Data Profile indicate that DCYF is not effective in preventing foster care re-entries and in reunifying and achieving finalized adoptions for children in a timely manner. In addition, although the State met the national standard for the percentage of children in foster care for less than 12 months who experienced no more than 2 placements, case reviewers found that in a substantial percentage of the applicable cases reviewed, children experienced inappropriate placement changes.

With regard to Well Being Outcome 1, all of the indicators for the outcome were determined to be in need of improvement. Although performance on this outcome was fairly low in all sites, cases in Keene were more likely to be rated as having substantially achieved this outcome (75 percent) than were cases in Manchester (48%) or in Portsmouth (53%). The case review findings indicate that the agency did not consistently assess underlying parental issues that posed a risk to children, such as domestic violence, substance abuse, or sexual abuse, resulting in a lack of appropriate service provision.

With regard to the systemic factors, the State was determined to be in substantial conformity with the factors of Statewide Information System; Quality Assurance System; Training; Agency Responsiveness to the Community; and Foster and Adoptive Parent Licensing, Recruitment, and Retention. The State did not achieve substantial conformity with the systemic factors of Case Review System or Service Array. With respect to the systemic factor of Case Reviews, the CFSR found that the State was not convening permanency hearings in accordance with Federal requirements. Rather than holding the child's first permanency hearing 12-months from the date that the child entered foster care, the State courts determined that the first permanency hearing should be convened 12 months after the adjudication hearing. Because adjudication hearings in the State often were delayed for several months, children's permanency hearings also were being delayed. Court-related delays were found to impede service provision before and during placement into foster care, negatively impacting safety and permanency for children.

The findings with regard to the State's performance on the safety and permanency outcomes are presented in table 1 at the end of the Executive Summary. Findings regarding well-being outcomes are presented in table 2. Table 3 presents the State's performance relative to the national standards, and table 4 provides information pertaining to the State's substantial conformity with the seven systemic factors assessed through the CFSR.

I. KEY FINDINGS RELATED TO OUTCOMES

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

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

New Hampshire did not achieve substantial conformity with Safety Outcome 1. Although the outcome was substantially achieved in 97.7 percent of the cases reviewed (which is more than the 90 percent required for a rating of substantial conformity), the State Data Profile indicates that the State did not meet the national standard for the percentage of children in 2001 experiencing more than one substantiated or indicated child maltreatment report within a 6-month period. However, the State did meet the national standard for the percentage of children maltreated while in foster care in 2001.

A key CFSR finding with regard to this outcome is that DCYF initiates child maltreatment investigations and establishes face-to-face contact with alleged child victims in accordance with State-established timeframes. However, only 9 (18%) of the 50 cases were applicable for an assessment of this indicator. For the remainder of the cases reviewed, there was no maltreatment report during the

CFSR period under review. In addition, despite the case review finding of no maltreatment recurrence as it is measured for the CFSR (item 2), the maltreatment recurrence data reported in the State Data Profile indicate that New Hampshire did not meet the national standard for this measure. Stakeholders expressed concern that State statute requires a pattern of harm be established before reports of maltreatment can be substantiated.

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

Performance relevant to safety outcome 2 is assessed through 2 indicators. One indicator (item 3) addresses the issue of DCYF's efforts to prevent children's removal from their homes by providing services to the families that ensure children's safety while they remain in their homes. The other indicator (item 4) pertains to DCYF's effectiveness in reducing the risk of harm to the child.

New Hampshire did not achieve substantial conformity with Safety Outcome 2. This determination is based on the finding that the outcome was substantially achieved in 83.0 percent of the cases reviewed, which does not meet the 90 percent required for a rating of substantial conformity.

Although the State did not achieve substantial conformity with safety outcome 2, a key finding of the CFSR was that in most of the cases reviewed, DCYF provided appropriate services to families to prevent the removal of children from their homes and made concerted efforts to address the risk of harm to children. However, in some cases, reviewers determined that the assessments conducted were not sufficient to address the safety issues in the home, which resulted in some children remaining at risk. This latter finding is consistent with the opinions of some stakeholders that DCYF is not as effective as it needs to be in assessing for underlying problems in the family, such as domestic violence, sexual abuse, and substance abuse.

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

There are 6 indicators incorporated in the assessment of permanency outcome 1, although not all of them are relevant for all children. The indicators pertain to the agency's effectiveness in preventing foster care re-entry (item 5), ensuring placement stability for children in foster care (item 6), and establishing appropriate permanency goals for children in foster care in a timely manner (item 7). Depending on the child's permanency goal, the remaining indicators focus on the agency's efforts to achieve permanency goals (such as reunification, guardianship, adoption, and permanent placement with relatives) in a timely manner (items 8 and 9), or whether the agency is effective in ensuring that children who have other planned living arrangements are in stable placements and adequately prepared for eventual independent living (item 10).

New Hampshire did not achieve substantial conformity with Permanency Outcome 1. This determination is based on the following findings:

- The outcome was substantially achieved in 41.9 percent of the cases, which is less than the 90 percent required for an overall rating of substantial conformity.
- The State Data Profile indicates that for fiscal year (FY) 2001, the State did not meet the national standard for the percentage of children who (1) were re-entering foster care within 12 months of a prior foster care episode, (2) were reunified within 12 months of entry into foster care and (3) were discharged to finalized adoptions within 24 months of entry into foster care.

However, the State did meet the national standard for the percentage of children in FY 2001 who were in foster care for less than 12 months and who experienced 2 or fewer placements.

All indicators pertaining to Permanency Outcome 1 were rated as Areas Needing Improvement. The key concerns identified during the CFSR pertained to inconsistencies with regard to DCYF efforts to establish appropriate permanency goals and to file for termination of parental rights in a timely manner. In addition, case reviewers determined that in many cases the agency had not made diligent efforts to achieve reunifications or adoptions in a timely manner. Both case reviews and stakeholder comments indicated that there are multiple agency- and court-related barriers to achieving timely adoptions.

Permanency Outcome 2. The continuity of family relationships and connections is preserved for children.

Permanency outcome 2 incorporates six indicators that assess agency performance with regard to (1) placing children in foster care in close proximity to their parents and close relatives (item 11); (2) placing siblings together (item 12); (3) ensuring frequent visitation between children and their parents and siblings in foster care (item 13); (4) preserving connections of children in foster care with

extended family, community, cultural heritage, religion, and schools (item 14); (5) seeking relatives as potential placement resources (item 15); and (6) promoting the relationship between children and their parents while the children are in foster care (item 16).

New Hampshire did not achieve substantial conformity with Permanency Outcome 2. This determination is based on the finding that the outcome was rated as substantially achieved in 74.2 percent of the cases, which is less than the 90 percent required for substantial conformity. Cases in Keene and Manchester were more likely to have achieved substantial conformity with this outcome (86%) than cases in Portsmouth (56%).

A key CFSR finding is that DCYF makes concerted efforts to (1) place children in close proximity to their families, (2) place siblings together in foster care, and (3) preserve children's connections with their extended families. However, the CFSR also found that DCYF is less diligent with regard to its efforts to facilitate visitation between children in foster care with their siblings and parents. An additional finding is that concerns raised by the review with respect to this outcome pertained to lack of agency efforts to seek and assess relatives as placement resources and support or strengthen the parent-child relationship, particularly with respect to fathers and paternal relatives.

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

Well Being Outcome 1 incorporates four indicators. One pertains to agency efforts to ensure that the service needs of children, parents, and foster parents are assessed and that the necessary services are provided to meet identified needs (item 17). A second indicator assesses agency effectiveness with regard to actively involving parents and children (when appropriate) in the case planning process (item 18). The two remaining indicators examine the frequency and quality of caseworker contacts with the children in their caseloads (item 19) and the children's parents (item 20).

New Hampshire did not achieve substantial conformity with Well-Being Outcome 1. This determination is based on the finding that the outcome was rated as substantially achieved for 56.0 percent of the cases reviewed, which is less than the 90 percent required for a determination of substantial conformity. There was some difference across sites included in the onsite CFSR with regard to performance on this outcome. Cases in Keene were more likely to be rated as having substantially achieved this outcome (75 percent) than were cases in Manchester (48%) or in Portsmouth (53%).

All indicators for Well-Being Outcome 1 were rated as Areas Needing Improvement. Case reviewers determined that the agency was not consistently effective in (1) assessing children's and parent's needs and providing appropriate services to meet those needs, (2)

involving children and families in case planning, and (3) ensuring that the contact between caseworkers and the children and parents in their caseloads was of sufficient frequency and quality to meet the needs of the family.

Well Being Outcome 2: Children receive appropriate services to meet their educational needs.

There is only one indicator for well being outcome 2 and that pertains to agency effectiveness in addressing children’s educational needs (item 21).

New Hampshire achieved substantial conformity with Well-Being Outcome 2 based on the finding that 94.8 percent of the cases reviewed were determined to have substantially achieved this outcome, which meets the 90 percent required for substantial conformity.

The CFSR found that DCYF made concerted efforts to assess children's educational needs and provide appropriate services to meet those needs effectively. Case review findings and stakeholder interviews indicate that foster parents have assumed primary responsibility for advocating for children with the educational system and for ensuring that children’s educational needs are being addressed. In addition, according to the Statewide Assessment, the agency has both a formal relationship with the Department of Education, through the James O. Consent decree, and informal relationships between DCYF staff, educational specialists, and the Department of Education that contribute significantly to meeting children’s educational needs.

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

This outcome incorporates two indicators; one assesses agency efforts to meet children’s physical health needs (item 22) and the other assesses agency efforts to address children’s mental health needs (item 23).

New Hampshire did not achieve substantial conformity with Well-Being Outcome 3. This determination was based on the finding that the outcome was rated as substantially achieved in 77.6 percent of the 49 applicable cases, which is less than the 90 percent required for a determination of substantial conformity. However, 100 percent of the applicable cases reviewed in Keene were rated as having substantially achieved this outcome compared to 73 percent of the cases in Manchester and 67 percent of the cases in Portsmouth. Stakeholders in Keene who were interviewed during the onsite CFSR noted that the local DCYF office participates in community and inter-agency collaboratives that expand both the availability of, and access to, services. These collaborative efforts may explain why all of the cases in that site were found to have substantially achieved this outcome.

A key CFSR finding is that DCYF generally is effective in addressing children's physical health needs, but is less effective in assessing and addressing their mental health needs. Case reviews and stakeholders comments suggest that children's mental health needs are not being consistently assessed when it is apparent that a mental health assessment is needed.

II. KEY FINDINGS RELATED TO SYSTEMIC FACTORS

Statewide Information System

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

New Hampshire is in substantial conformity with this factor because the State's information system, Bridges, meets these requirements.

Case Review System

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

New Hampshire is not in substantial conformity with the systemic factor of Case Review System. Key CFSR findings indicate that DCYF is not consistent in involving parents in the case planning process or in holding permanency hearings for children in foster care in a timely manner. With regard to the timeliness of permanency hearings, stakeholders commenting on this issue noted that in New Hampshire, the courts convene the initial permanency hearing 12 months from the time of the adjudication hearing instead of 12 months from the time of the child's entry into foster care. Because adjudication hearings can be delayed, sometimes for several months, many children in foster care do not have a permanency hearing 12 months from the date that they entered foster care. The CFSR also found that permanency hearings are not being held on a consistent basis for cases involving Children in Need of Supervision (CHINS) or adjudicated delinquents. Another key finding with respect to this systemic factor is that there are numerous agency- and court-related delays pertaining to termination of parental rights (TPR).

Despite these concerns, the CFSR did determine that DCYF is effective in ensuring that there is a process for a review of the status of each child in foster care at least every 6 months. Stakeholders commenting on this issue noted that these reviews are held in a timely manner and facilitate substantive discussion of the status of each child. In addition, the CFSR found that foster parents, preadoptive parents, and relative caregivers are notified of reviews and hearings and in general they are given the opportunity to attend reviews and provide input in person or, if they are unable to attend, they can provide input in a written form.

Quality Assurance System

The State's performance with regard to the systemic factor of Quality Assurance System is based on whether the State has developed standards to ensure the safety and health of children in foster care (item 30) and whether the State is operating a statewide quality assurance system that evaluates the quality and effectiveness of services and measures program strengths and areas needing improvement (item 31).

New Hampshire is in substantial conformity with the systemic factor of Quality Assurance System. The CFSR determined that DCYF has implemented standards to protect the health and safety of children in foster care and that the State's quality assurance (QA) system evaluates the quality of services, identifies strengths and needs for improvement through quality review reports, and monitors follow-up to the reports.

Training

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

New Hampshire is in substantial conformity with the systemic factor of training. The CFSR determined that both the initial training and ongoing training for DCYF staff who deliver services to children and families are effective, support the goals and objectives of the Child and Family Services Plan, and support the development of the knowledge and skills necessary for effective service delivery.

The CFSR also found that the State provides comprehensive pre-placement and ongoing training to foster and adoptive parents that is effective in preparing them to parent effectively the children in their care. In addition, the State has supported the development of a Foster Parents Association that provides training and support to foster parents throughout the State.

Service Array

The assessment of the systemic factor of service array addresses three questions: (1) Does the State have in place an array of services that meet the needs of children and families served by the child welfare agency (item 35)? (2) Are these services accessible to families and children throughout the State (item 36)? And (3) Can services be individualized to meet the unique needs of the children and family served by the child welfare agency (item 37)?

New Hampshire is not in substantial conformity with the systemic factor of Service Array. The CFSR determined that the services available in the State are not adequate to enable children to remain safely with their parents when reasonable and help children in foster and adoptive placements achieve permanency. In addition, the CFSR found that existing services are not consistently available throughout the State. Key services that were noted to be lacking were substance abuse treatment and mental health services.

Despite these concerns, the CFSR also determined that DCYF is effective in tailoring services to meet the individual needs of children and families. Stakeholder comments generally agreed with information in the Statewide Assessment indicating that DCYF promotes a family-centered approach to case planning that focuses on meeting individualized needs.

Agency Responsiveness to the Community

The systemic factor of agency responsiveness to the community incorporates the extent of the State's consultation with external stakeholders in developing and implementing the Child and Family Services Plan (items 38 and 39), and the extent to which the State coordinates child welfare services with services or benefits of other Federal or federally assisted programs serving the same population (item 40).

New Hampshire is in substantial conformity with the systemic factor of Agency Responsiveness to the Community.

Item 38 is rated as an Area Needing Improvement because although DCYF staff participate in a variety of State level interagency committees and advisory boards, the major concerns of local stakeholders, consumers, foster care providers, the courts, and other public and private child- and family-serving agencies are not frequently included in the goals and objectives of the CFSP.

Item 39 is rated as a Strength because DCYF develops annual reports of progress and services in consultation with their advisory groups and other stakeholders. The Citizen's Review Panel also develops an annual report

Item 40 is rated as a Strength because services are coordinated with a range of Federal and federally assisted programs through inter-agency collaboratives.

Foster and Adoptive Parent Licensing, Recruitment, and Retention

The assessment of this systemic factor focuses on the State's standards for foster homes and child care institutions (items 41 and 42), the State's compliance with Federal requirements for criminal background checks for foster and adoptive parents (item 43), the State's efforts to recruit foster and adoptive parents that reflect the ethnic and racial diversity of foster children (item 44), and the State's activities with regard to using cross-jurisdictional resources to facilitate permanent placements for waiting children (item 45).

New Hampshire is in substantial conformity with the systemic factor of Foster and Adoptive Parent Licensing, Recruitment, and Retention. The CFSR found that all foster-family homes and child care institutions are uniformly required to meet the State's licensing and certification standards, and that criminal background checks and reviews of child maltreatment histories are consistently completed for foster families and child care institution staff. These clearances include checks in States where applicants previously lived.

The CFSR also found that DCYF conducts recruitment activities throughout the State and works with community partners to help recruit foster and adoptive homes that reflect the racial and ethnic diversity of the children in care and that the agency uses a variety of methods to facilitate the placement of children with adoptive families across jurisdictional lines.

Table 1. CFSR Ratings for Safety and Permanency Outcomes and Items for New Hampshire

Outcomes and Indicators	Outcome Ratings			Item Ratings		
	<i>In Substantial Conformity?</i>	<i>Percent Substantially Achieved*</i>	<i>Met National Standards?</i>	<i>Rating**</i>	<i>Percent Strength</i>	<i>Met National Standards</i>
Safety Outcome 1-Children are first and foremost, protected from abuse and neglect	No	97.7	1 met, 1 not met			
Item 1: Timeliness of investigations				Strength	89	
Item 2: Repeat maltreatment				ANI	100	No
Safety Outcome 2 - Children are safely maintained in their homes when possible and appropriate	No	83.0				
Item 3: Services to prevent removal				Strength	85	
Item 4: Risk of harm				Strength	85	
Permanency Outcome 1- Children have permanency and stability in their living situations	No	41.9	1 met, 3 not met			
Item 5: Foster care re-entry				ANI	80.0	No
Item 6: Stability of foster care placements				ANI	84	Yes
Item 7: Permanency goal for child				ANI	65	
Item 8: Reunification, guardianship and placement with relatives				ANI	63	No
Item 9: Adoption				ANI	36	No
Item 10: Other planned living arrangement				ANI	67	
Permanency Outcome 2 - The continuity of family relationships and connections is preserved	No	77.4				
Item 11: Proximity of placement				Strength	100	
Item 12: Placement with siblings				Strength	94	
Item 13: Visiting with parents and siblings in foster care				ANI	71	
Item 14: Preserving connections				Strength	90	
Item 15: Relative placement				ANI	76	
Item 16: Relationship of child in care with parents				ANI	76	

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

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

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

Outcomes and Indicators	Outcome Ratings		Item Ratings			
	<i>In Substantial Conformity?</i>	<i>Percent Substantially Achieved*</i>	<i>Met National Standards</i>	<i>Rating**</i>	<i>Percent Strength</i>	<i>Met National Standards</i>
Well Being Outcome 1 – Families have enhanced capacity to provide for children's needs	No	56.0				
Item 17: Needs/services of child, parents, and foster parents				ANI	60	
Item 18: Child/family involvement in case planning				ANI	59	
Item 19: Worker visits with child				ANI	74	
Item 20: Worker visits with parents				ANI	65	
Well Being Outcome 2 – Children receive services to meet their educational needs	Yes	94.8				
Item 21: Educational needs of child				Strength	95	
Well Being Outcome 3 – Children receive services to meet their physical and mental health needs are met	No	77.6				
Item 22: Physical health of child				Strength	89	
Item 23: Mental health of child				ANI	79	

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

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

***Well Being Outcome 3 – Both applicable items must be rated a strength for the outcome to be substantially achieved.

Table 3: New Hampshire's Performance on the Six Outcome Measures for Which National Standards have been Established (2001 data)

Outcome Measure	National Standard	New Hampshire Data
Of all children who were victims of a substantiated or indicated maltreatment report in the first 6 months of CY 2001, what percent were victims of another substantiated or indicated report within a 6-month period?	6.1% or less	8.3%
Of all children who were in foster care in the first 9 months of CY 2001, what percent experienced maltreatment from foster parents or facility staff members?	.57% or less	.10%
Of all children who entered foster care in FY 2001, what percent were re-entering care within 12 months of a prior foster care episode?	8.6% or less	13.3%
Of all children reunified from foster care in FY 2001, what percent were reunified within 12 months of entry into foster care?	76.2% or more	48.8%
Of all children who were adopted from foster care in FY 2001, what percent were adopted within 24 months of their entry into foster care?	32.0% or more	5.2%
Of all children in foster care during FY 2001 for less than 12 months, what percent experienced no more than 2 placement settings?	86.7% or more	88.7%

Table 4: CFSR Ratings for the Seven Systemic Factors

Systemic Factors	In Substantial Conformity?*	Rating
IV. Statewide Information System	Yes (4)	
Item 24: System can identify the status, demographic characteristics, location and goals of children in foster care		Strength
V. Case Review System	No (2)	
Item 25: Process for developing a case plan and for joint case planning with parents		ANI
Item 26: Process for 6-month case reviews		Strength
Item 27: Process for 12-month permanency hearings		ANI
Item 28: Process for seeking TPR in accordance with ASFA		ANI
Item 29: Process for notifying caregivers of reviews and hearings and for opportunity for them to be heard		Strength
VI. Quality Assurance System	Yes (4)	
Item 30: Standards to ensure quality services and ensure children’s safety and health		Strength
Item 31: Identifiable QA system that evaluates the quality of services and improvements		Strength
VII. Training	Yes (4)	
Item 32: Provision of initial staff training		Strength
Item 33: Provision of ongoing staff training that addresses the necessary skills and knowledge.		Strength
Item 34: Provision of training for caregivers and adoptive parents that addresses the necessary skills and knowledge		Strength
VIII. Service Array	No (2)	
Item 35: Availability of array of critical services		ANI
Item 36: Accessibility of services across all jurisdictions		ANI
Item 37: Ability to individualize services to meet unique needs		Strength
IX. Agency Responsiveness to the Community	Yes (3)	
Item 38: Engages in ongoing consultation with critical stakeholders in developing the CFSP		ANI
Item 39: Develops annual progress reports in consultation with stakeholders		Strength
Item 40: Coordinates services with other Federal programs		Strength
X. Foster and Adoptive Parent Licensing, Recruitment and Retention	Yes (4)	
Item 41: Standards for foster family and child care institutions		Strength
Item 42: Standards are applied equally to all foster family and child care institutions		Strength
Item 43: Conducts necessary criminal background checks		Strength
Item 44: Diligent recruitment of foster and adoptive families that reflect children’s racial and ethnic diversity		Strength
Item 45: Uses cross-jurisdictional resources to find placements		Strength

*Systemic factors are rated on a scale from 1 to 4. A rating of 1 or 2 indicates “Not in Substantial Conformity.” A rating of 3 or 4 indicates Substantial Conformity.

** Individual items may be rated either as a Strength or as an Area Needing Improvement (ANI)

FINAL REPORT: NEW HAMPSHIRE CHILD AND FAMILY SERVICES REVIEW

Introduction

This document presents the findings of the Child and Family Services Review (CFSR) for the State of New Hampshire. The CFSR was conducted the week of June 9, 2003. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the State child welfare agency – the New Hampshire Department of Health and Human Services, Division for Children, Youth, and Families (DCYF).
- The State Data Profile, prepared by the Children’s Bureau of the U.S. Department of Health and Human Services, which provides State child welfare data for the years 1999 through 2001;
- Reviews of 50 cases at three sites throughout the State; and
- Interviews or focus groups (conducted at all three sites and at the State-level) with stakeholders including, but not limited to children, parents, foster parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, and attorneys.

The key characteristics of the 50 cases reviewed are the following:

- Twenty-three cases were reviewed in the Manchester district office, 12 in the Keene district office, and 15 in the Portsmouth district office.
- All 50 cases had been open cases at some time during the period under review.
- 31 cases were “foster care cases” (cases in which children were in the care and custody of the State child welfare agency and in an out-of-home placement at some time during the period under review), and 19 were “in-home services cases” (cases in which families received services from the child welfare agency while children remained with their families and no child in the family was in out-of-home care during the period under review). Three of the foster care cases were the placement and care responsibility of the Division for Juvenile Justice Services (DJJS) through its agreement with the child welfare agency.
- Of the 31 foster care cases, 16 children (52%) were younger than age 10 at the start of the period under review; 4 children (13%) were at least 10 years old, but not yet 13 years old; and 11 children (35%) were 13 years of age and older at the start of the period under review.
- Of the 31 foster care cases, 19 children were male and 12 were female.

- There were 43 cases (86%) in which all children in the family were White; 2 cases (4%) in which all children in the family were Black; and 3 cases (6%) in which all children in the family were of two or more races. In two cases (4%) the race/ethnicity of the children was not provided.
- Of the 50 cases reviewed, the **primary** reason for the opening of a child welfare agency case was the following:
 - Neglect (not including medical neglect) – 23 cases (46%)
 - Sexual abuse – 8 cases (16%)
 - Physical abuse – 6 cases (12%)
 - Child’s behavior or child in juvenile justice – 4 cases (8%)
 - Abandonment – 3 cases (6%)
 - Medical neglect – 2 cases (4%)
 - Emotional maltreatment – 1 case (2%)
 - Mental/physical health of child – 1 case (2%)
 - Substance abuse of parents – 1 case (2%)
 - Voluntary placement by mother – 1 case (2%)
- Of the 50 cases reviewed, the most frequently cited of all reasons for children coming to the attention of the child welfare agency were the following:
 - Neglect (not including medical neglect) – 34 cases (86% of all cases)
 - Substance abuse by parents – 13 cases (26% of all cases)
 - Physical abuse – 10 cases (20% of all cases)
 - Sexual abuse by parents – 10 cases (20% of all cases)
- In 26 (84%) of the 31 foster care cases, the children entered foster care prior to the period under review and remained in care during the entire period under review.

The first section of the report presents the CFSR findings relevant to the State’s performance in achieving specific outcomes for children in the areas of safety, permanency, and well-being. For each outcome, there is a table presenting key findings, a discussion of the State’s status with regard to the outcome, and a presentation and discussion of each item (indicator) assessed. For the most part, findings are presented for all three districts taken together, with differences among them described when they are particularly noteworthy. Findings regarding DCYF and children in foster care also pertain to children and youth placed in out-of-home care by DJJS pursuant to its agreement with DCYF. The second section of the report provides an assessment and discussion of the systemic factors relevant to the child welfare agency’s ability to achieve positive outcomes for children.

SECTION 1: OUTCOMES

I. SAFETY

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:					
	Keene	Manchester	Portsmouth	Total Number	Total Percentage
Substantially Achieved:	8	21	14	43	97.7
Partially Achieved:	1	0	0	1	2.3
Not Achieved or Addressed:	0	0	0	0	0
Not Applicable:	3	2	1	6	
Conformity of Statewide data indicators with national standards:					
	National Standard	State's Percentage	Meets Standard	Does Not Meet Standard	
Repeat maltreatment	6.1	8.3		X	
Maltreatment of children in foster care	.57	.1	X		

STATUS OF SAFETY OUTCOME 1

New Hampshire did not achieve substantial conformity with Safety Outcome 1. Although the outcome was substantially achieved in 97.7 percent of the cases reviewed (which is more than the 90 percent required for a rating of substantial conformity), the State Data Profile indicates that the State did not meet the national standard for the percentage of children experiencing more than one substantiated or indicated child maltreatment report within a 6-month period. New Hampshire did meet the national standard for the percentage of children maltreated while in foster care.

A key CFSR finding with regard to this outcome is that DCYF initiates child maltreatment investigations and establishes face-to-face contact with alleged child victims in accordance with State-established timeframes. However, only 9 (18%) of the 50 cases were applicable for an assessment of this indicator. For the remainder of the cases reviewed, there was no maltreatment report during the CFSR period under review. In addition, despite the case review finding of no maltreatment recurrence as it is measured for the CFSR (item 2), the maltreatment recurrence data reported in the State Data Profile indicate that New Hampshire did not meet the national standard for this measure.

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

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

Strength Area Needing Improvement

Review Findings: The assessment of item 1 was applicable for 9 of the 50 cases. Forty-one cases were not applicable because they did not involve reports of child maltreatment during the period under review. In assessing item 1, reviewers were to determine whether the response to a maltreatment report occurring during the period under review had been initiated in accordance with the State child welfare agency requirements. The New Hampshire DCYF requires that workers initiate a response to a maltreatment report in accordance with the following timeframes and circumstances:

- Level 1 – Immediately, but no later than within 24 hours of receipt of report by the District Office. Face-to-face contact with the alleged child victims and parents is required.
- Level 2 – Within 48 hours of receipt of the report by the District Office. Face-to-face contact with the alleged child victims and parents is required.
- Level 3 – Within 72 hours from receipt of the report by the District Office. Every effort must be made to ensure child safety through face-to-face contact with both the alleged child victims and parents. When the child’s safety is not jeopardized and with supervisory approval, telephone or collateral contacts may be made within 72 hours.

The results of the case review assessments were the following:

- Item 1 was rated as a Strength in 8 (89%) of the 9 applicable cases (5 of which were foster care cases).
- Item 1 was rated as an Area Needing Improvement in 1 (11%) of the 9 applicable cases (which was not a foster care case).

Cases were rated as a Strength for this item when responses to child maltreatment reports, including establishing face-to-face contact with children, were initiated within the required State time frames. One case was rated as an Area Needing Improvement because the investigation of two Level 3 reports was not initiated until at least 2 weeks after the report was received, rather than the 72 hours required by the State.

Stakeholders commenting on the issue of timeliness of initiating investigations expressed the opinion that the agency responds to child maltreatment reports in a timely manner. Stakeholders reported that the police and the child welfare agency collaborate in responding to maltreatment reports and that this collaboration is effective. Stakeholders noted, however, that DCYF does not initiate

investigations of maltreatment reports that are received on the weekends and that the police are responsible for responding to these reports. However, stakeholders also reported that law enforcement can access the agency via a hotline and obtain consultation regarding decisions to place and placement options, although there are not State agency staff available to go into the field.

Determination and Discussion: Item 1 was assigned an overall rating of Strength based on the finding that in 89 percent of the applicable cases, the agency had initiated an investigation of a child maltreatment report in accordance with the State's required time frames.

Item 2. Repeat maltreatment

Strength Area Needing Improvement

Review Findings: The assessment of item 2 was applicable for 44 of the 50 cases. Six cases were not applicable because there was never a substantiated or indicated child maltreatment report on any of the children in the family. In assessing this item, reviewers were to determine whether there had ever been a substantiated report on the family. Reviewers also were to determine if there was at least one substantiated maltreatment report during the period under review, and if so, if another substantiated or indicated report occurred within 6 months of that report. The results of the assessment were the following:

- Item 2 was rated as a Strength in 44 (100%) of the 44 applicable cases (28 of which were foster care cases).

Item 2 was rated as a Strength under the following circumstances:

- There was a substantiated or indicated maltreatment report involving the family prior to the period under review but no substantiated or indicated report during the period under review (39 cases).
- There was a substantiated or indicated maltreatment report involving the family during the period under review, but there was no substantiated or indicated report within 6 months of that report (5 cases).

Additional findings with respect to the frequency of maltreatment reports over the life of the case were the following:

- In 6 cases, there was 1 maltreatment report.
- In 29 cases, there were between 2 and 5 maltreatment reports.
- In 11 cases, there were between 6 and 10 maltreatment reports.
- In 4 cases, there were more than 10 maltreatment reports (including one case with 24 reports).

It is not known how many of these reports were substantiated.

Stakeholders commenting on the topic of repeat maltreatment reported that there is a statutory requirement in the State that a pattern of harm must be established before a maltreatment allegation can be substantiated. Stakeholders expressed concern that this results in situations in which children often are the subject of multiple reports that are either screened out or “unfounded” before the agency substantiates an allegation.

Determination and Discussion: Item 2 was assigned an overall rating of Area Needing Improvement. Although the item was rated as a Strength in 100 percent of the applicable cases, the State's rate of maltreatment recurrence for the year 2001 reported in the State data profile (8.3%) did not meet the national standard of 6.1 percent or less. The criteria and standards for both indicators must be met for this item to be rated as a Strength.

According to the Statewide Assessment, the percentage of children with a recurrence of substantiated maltreatment has increased slightly from 7 percent in 1999 to 8.3 percent in 2001. In preparation for the Statewide Assessment, DCYF examined the circumstances surrounding these assessments and found that many of these children were experiencing a pattern of increasing severity of maltreatment, which eventually resulted in several substantiated reports involving the same type of incident.

Safety Outcome 2

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:					
	Keene	Manchester	Portsmouth	Total Number	Total Percentage
Substantially Achieved:	8	18	13	39	83.0
Partially Achieved:	1	3	0	4	8.5
Not Achieved or Addressed:	2	1	1	4	8.5
Not Applicable:	1	1	1	3	

STATUS OF SAFETY OUTCOME 2

New Hampshire did not achieve substantial conformity with Safety Outcome 2. This determination is based on the finding that the outcome was substantially achieved in 83.0 percent of the cases reviewed, which does not meet the 90 percent required for a rating of substantial conformity.

Although the State did not achieve substantial conformity with safety outcome 2, a key finding of the CFSR was that in most of the cases reviewed, DCYF provided appropriate services to families to prevent the removal of children from their homes and made concerted efforts to address the risk of harm to children. However, in some cases, reviewers determined that the assessments conducted were not sufficient to address the safety issues in the home, which resulted in some children remaining at risk. This latter finding is consistent with the opinions of some stakeholders that DCYF is not as effective as it needs to be in assessing for underlying problems in the family, such as domestic violence, sexual abuse, and substance abuse.

Findings pertaining to the specific items assessed under Safety Outcome 2 are presented and discussed below.

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

Strength Area Needing Improvement

Review Findings: There were 26 cases for which an assessment of item 3 was applicable. Twenty-four cases were excluded from this assessment because the children entered foster care prior to the period under review and/or there were no substantiated or indicated maltreatment reports or identified risks of harm to the children in the home during the period under review. For this item, reviewers assessed whether, in responding to a substantiated maltreatment report or risk of harm, the agency made diligent efforts to provide services to families to prevent removal of children from their homes while at the same time ensuring their safety. The results of the assessment were the following:

- Item 3 was rated as a Strength in 22 (85%) of the 26 applicable cases (6 of which were foster care cases)
- Item 3 was rated as an Area Needing Improvement in 4 (15%) of the 26 applicable cases (2 of which were foster care cases).

Cases were rated as a Strength for this item based on the following determinations:

- Appropriate services were provided to the parents and child to prevent the child's removal from the home (15 cases).
- The children were appropriately removed from the home to ensure their safety (5 cases).
- The family received appropriate post-reunification services (2 cases).

Cases were rated as an Area Needing Improvement for this item when reviewers determined that the agency did not assess or address existing safety issues in the home, such as domestic violence, substance abuse, and the backgrounds of the people residing in the home.

Services provided to the families included, but were not limited to, individual counseling or therapy, in-home family counseling,

transportation for visitation, supervision during visitation, Parents Anonymous, parent aides, day care, respite care, after school care, wraparound services, developmental services, psychiatric services, medication management, anger and behavior management, substance abuse treatment and counseling, parenting education, home-health care services, housing assistance, money management services, educational services, and truancy programs.

Most stakeholders commenting on this item indicated that there are a number of community-based services and home-based services available in the State to prevent children’s removal from their homes or their re-entry into foster care after reunification. Stakeholders also expressed the opinion that the in-home services available are usually successful in maintaining children safely in their own homes.

Determination and Discussion: This item was assigned an overall rating of Strength because in 85 percent of the cases, reviewers determined that the agency had made diligent efforts to provide the services necessary to maintain children safely in their own homes. This finding is consistent with information provided in the Statewide Assessment indicating that community-based services for children and families are available and are used to prevent placement into foster care whenever possible. The Statewide Assessment also notes that the Division for Juvenile Justice Services (DJJS) uses community-based diversion programs for first-time, non-violent minor offenders in order to prevent their placement in foster care or an out-of-home facility.

Item 4. Risk of harm to child

Strength Area Needing Improvement

Review Findings: An assessment of item 4 was applicable for 47 cases. Three cases were not applicable for assessment because reviewers determined that there was no risk of harm to the child during the period under review. In assessing item 4, reviewers were to determine whether the agency had made, or was making, diligent efforts to reduce the risk of harm to the children involved in each case. The assessment resulted in the following findings:

- Item 4 was rated as a Strength in 40 (85%) of the 47 applicable cases (27 of which were foster care cases).
- Item 4 was rated as an Area Needing Improvement in 7 (15%) of the 47 applicable cases (2 of which were foster care cases).

This item was rated as a Strength when reviewers determined the following:

- The risk of harm to children was appropriately managed by removing the children from home either prior to or during the period under review and providing services to the parents to reduce risk of harm (10 cases).

- The risk of harm to children was appropriately addressed by removing the children from the home either prior to or during the period under review and seeking termination of parental rights (TPR) (13 cases).
- The risk of harm to children was appropriately managed by providing services to families to address risk concerns while the children remain in the home (16 cases).
- The risk of harm was appropriately managed by removing the child from an abusive foster home (1 case).

This item was rated as an Area Needing Improvement when reviewers determined the following:

- There was continued risk to the child in the home and the agency's response was not appropriate to addressing the risk issues (5 cases).
- There was risk to the child during visitation and the agency did not provide the necessary supervision (2 cases).

Stakeholders commenting on this item were in general agreement that once a report is substantiated or a child is removed from the home, the agency is effective in addressing risk of harm issues. However, they also expressed concern that, because of the State's requirement that a pattern of maltreatment be established for a determination of substantiation, children are at high risk of harm prior to the agency making a determination of substantiation and often enter foster care with a long history of "unfounded" or "screened out" maltreatment reports. In addition, a few stakeholders noted that the DCYF is not consistently effective in responding to the underlying issues in a family that tend to put children at risk of harm.

Stakeholders also report that delayed adjudication can negatively impact the provision of services in a case. As noted in the Statewide Assessment and reported in stakeholder interviews, there are instances when parent's attorneys advise parents against engaging in services until after adjudication and many judges will not order services prior to adjudication. The Statewide Assessment also notes that many district offices utilize case plans as court reports. This means if there are delays in adjudications and subsequent dispositional hearings the creation and development of case plans can be slowed along with a meaningful initiation of services to address identified safety risks.

Determination and Discussion: This item was assigned an overall rating of Strength because in 85 percent of the applicable cases reviewers determined that DCYF had made diligent efforts to address the risk of harm to the children.

As noted in the Statewide Assessment, the State uses a Structured Decision Making model that includes both a Safety Assessment tool and a Risk Assessment tool based on national research that is designed to indicate the likelihood of future re-maltreatment. These tools were incorporated into Bridges (the Statewide Automated Child Welfare Information System), and are required to be completed on every case within 24 hours of the first contact with the child and before the close of the assessment. The Statewide Assessment also notes that in CY2002, a safety assessment was completed for 92 percent of assessments (i.e., investigations). Sixty-seven percent

of these households were assessed as safe, 3.1 percent were assessed as unsafe, and 29.8 percent were assessed as conditionally safe. When a home is determined to be conditionally safe, staff are required to put safety services in place.

II. PERMANENCY

Permanency Outcome 1

Outcome P1: Children have permanency and stability in their living situations.					
Number of cases reviewed by the team according to degree of outcome achievement:					
	Keene	Manchester	Portsmouth	Total Number	Total Percentage
Substantially Achieved:	2	6	5	13	41.9
Partially Achieved:	5	9	3	17	54.8
Not Achieved or Addressed:	0	0	1	1	3.2
Not Applicable:	5	8	6	19	
Conformity of Statewide data indicators with national standards:					
	National Standard	State's Percentage	Meets Standard	Does Not Meet Standard	
Foster care re-entries	8.6	13.3		X	
Length of time to achieve reunification	76.2	48.8		X	
Length of time to achieve adoption	32.0	5.2		X	
Stability of foster care placements	86.7	88.7	X		

STATUS OF PERMANENCY OUTCOME 1

New Hampshire did not achieve substantial conformity with Permanency Outcome 1. This determination is based on the following findings:

- The outcome was substantially achieved in 41.9 percent of the cases, which is less than the 90 percent required for an overall rating of substantial conformity.
- The State Data Profile indicates that for fiscal year (FY) 2001, the State did not meet the national standard for the percentage of children who (1) were re-entering foster care within 12 months of a prior foster care episode, (2) were reunified within 12 months of entry into foster care and (3) were discharged to finalized adoptions within 24 months of entry into foster care.

However, the State did meet the national standard for the percentage of children in FY 2001 who were in foster care for less than 12 months and who experienced 2 or fewer placements.

All indicators pertaining to Permanency Outcome 1 were rated as Areas Needing Improvement. The key concerns identified during the CFSR pertained to inconsistencies with regard to DCYF efforts to establish appropriate permanency goals and to file for termination of parental rights in a timely manner. In addition, case reviewers determined that in many cases the agency had not made diligent efforts to achieve reunifications, guardianships, or adoptions in a timely manner. A frequent finding was that there are multiple agency- and court-related barriers to achieving timely adoptions.

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

Item 5. Foster care re-entries

Strength Area Needing Improvement

Review Findings: Five of the 31 foster care cases were applicable for an assessment of foster care re-entries because they involved children who entered foster care at some time during the period under review. In assessing this item, reviewers determined whether the entry into foster care during the period under review occurred within 12 months of discharge from a prior foster care episode. The assessment resulted in the following findings:

- Item 5 was rated as a Strength in 4 (80%) of the 5 applicable cases.
- Item 5 was rated as an Area Needing Improvement in 1 (20%) of the 5 applicable cases.

Cases were rated as a Strength for this item when it was determined that entry into foster care during the period under review did not take place within 12 months of discharge from a prior episode. One case was rated as an Area Needing Improvement because the child entered foster care twice within a 3-month period. The reviewers determined that the re-entry was due to the fact that the agency's assessment had not captured domestic violence issues in the family.

Stakeholders commenting on this issue expressed the opinion that the agency is effective in preventing re-entry into foster care through its use of risk assessment tools, trial home visits, and community-based services that support reunification.

Determination and Discussion: Item 5 was assigned an overall rating of Area Needing Improvement based on the following:

- In 20 percent of the applicable cases reviewed, children re-entered foster care within 12 months of discharge from a prior episode.

- The data from the State Data Profile indicate that New Hampshire’s re-entry rate for FY 2001 (13.3%) did not meet the national standard of 8.6 percent or less.

According to the Statewide Assessment, DCYF conducted an internal assessment of the re-entry of children in care that examined a random sample of 25 percent of the children with re-entries from each fiscal year for a total of 47 children. The assessment found that 45 percent of these children were under the supervision of DJJS. The Statewide Assessment notes that this is a substantial percentage given that the children under supervision of DJJS represent less than 10 percent of the State’s foster care population reported to AFCARS. The Statewide Assessment noted that some of these DJJS re-entries are not “real” re-entries, but represent short-term placements at home after a shelter care episode while waiting for an opening in a group home or treatment facility. This occurs as a result of the shortage of placement resources for these children.

Item 6. Stability of foster care placement

Strength Area Needing Improvement

Review Findings: All 31 foster care cases were applicable for an assessment of Item 6. In assessing this item, reviewers were to determine whether the child experienced multiple placement settings during the period under review and, if so, whether the changes in placement settings were necessary to achieve the child's permanency goal or meet the child's service needs. The findings of this assessment were the following:

- Item 6 was rated as a Strength in 26 (84%) of the 31 applicable cases.
- Item 6 was rated as an Area Needing Improvement in 5 (16%) of the 31 applicable cases.

Additional findings of the case review were the following:

- Children in 23 cases experienced only 1 placement setting during the period under review (no placement changes).
- Children in 5 cases experienced 2 placement settings during the period under review.
- Children in 2 cases experienced 3 placement settings during the period under review.
- In 1 case, a child experienced 5 placement settings during the period under review.

Cases were assigned a rating of Strength for this item when reviewers determined that the child did not experience a placement change during the period under review (21 cases), or that the placement changes experienced were in the child's best interest (5 cases), such as moving a child to a therapeutic setting for specialized treatment.

A rating of Area Needing Improvement was assigned when reviewers determined that the child experienced multiple placement changes because the agency had not made a sufficient assessment of the child's needs (2 cases) or because there were insufficient resources to meet the child's needs (1 case). In 2 cases, reviewers determined that the child's current placement is unstable and is likely to disrupt. In one case rated as an Area Needing Improvement, the child was noted to be in the juvenile justice system. This child was placed in an emergency shelter for over 3 months because there was no available slot in a residential treatment center.

Stakeholders commenting on this issue expressed the opinion that most children are in stable placements, although a few stakeholders suggested that DJJS children in foster care may experience greater placement instability than other children in foster care. Also, although stakeholders in Keene and Portsmouth noted that supports are available to foster parents to promote placement stability (e.g., respite care and transportation assistance), stakeholders in Manchester indicated that these types of supports are not readily available.

Determination and Discussion: Item 6 was assigned an overall rating of Area Needing Improvement. Although data from the State Data Profile for FY 2001 indicate that the percentage of children experiencing no more than 2 placements in their first 12 months in foster care (88.7%) meets the national standard of 86.7 percent or more, in 16 percent of the applicable cases, reviewers determined that children experienced multiple placement changes that did not promote attainment of their goals or meet their treatment needs. The criteria and standards for both indicators must be met for this item to be rated as a Strength.

According to the Statewide Assessment, DJJS often places youth in temporary facilities such as shelter care or evaluative programs prior to reunification or placement in a more restrictive setting and that this accounts for a substantial percentage of placement changes. The Statewide Assessment also noted that there is a need for intensive, flexible community mental health supports for families and foster families to increase placement stability.

Item 7. Permanency goal for child

Strength Area Needing Improvement

Review Findings: All 31 foster care cases were applicable for an assessment of item 7. In assessing this item, reviewers were to determine whether the agency had established an appropriate permanency goal for the child in a timely manner. The results of this assessment were the following:

- Item 7 was rated Strength in 20 (65%) of the 31 applicable cases.
- Item 7 was rated as an Area Needing Improvement in 11 (35%) of the 31 applicable cases.

The case review found that the children in the 31 foster care cases had the following permanency goals:

- 11 children had a goal of adoption.
- 12 children had a goal of long-term foster care/emancipation.
- 6 children had a goal of reunification.
- 2 children had the goal of guardianship.

At the time of the onsite review, 22 of the 31 children in the foster care cases had been in foster care for 15 of the most recent 22 months. TPR had been filed in 13 of these cases, and attained in 9. For the 9 cases for which TPR had not been filed, a reason for not filing had been entered in 7 of the case files; in 2 case files, no reason was provided.

Twenty cases were assigned a rating of Strength for this item when reviewers determined that the child's permanency goal was appropriate and had been established in a timely manner. Cases were assigned a rating of Area Needing Improvement when reviewers determined the following:

- The goal is/was appropriate but was not established in a timely manner (5 cases).
- The goal is not appropriate given the needs of the child and the circumstances of the case (4 cases). In 2 of these cases, the reviewers determined that the goal of long-term foster care was inappropriate because the child in each case was 6 years old.
- There were delays in filing for TPR and no exceptions were noted to explain the delay (2 cases).

Some stakeholders commenting on the issue of permanency planning reported that the agency and the courts emphasize establishing permanency goals early in a case. However, other stakeholders suggested that the emphasis on permanency planning varies across judges and DCYF workers, particularly with regard to the willingness to seek TPR in a case. Several stakeholders reported that concurrent planning is taking place in the agency and is effective in promoting permanency; however, there were no cases reviewed during the CFSR that involved active pursuit of concurrent permanency goals.

Determination and Discussion: Item 7 was assigned an overall rating of Area Needing Improvement based on the finding that in 35 percent of the applicable cases, reviewers determined that the agency had not established an appropriate goal for the child in a timely manner.

According to the Statewide Assessment, the initial placement goal for DCYF is generally reunification. The exceptions are spelled out in a court order. Also, for youth under the supervision of DJJS, reunification is always the goal at the beginning of each out-of-home placement. For DJJS cases, if reunification is determined to be unlikely, relative placement(s) and/or another planned permanent living arrangement are considered. DJJS has recently focused on barriers to permanency by issuing a new permanency hearing policy. The Statewide Assessment also notes that the Court Improvement Project (CIP) protocols and trainings address issues

that impede timely attainment of permanency for child abuse and neglect cases. Although the protocols do not address DJJS cases, the CIP is expanding to address this population.

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

Strength Area Needing Improvement

Review Findings: Item 8 was applicable for 8 of the 31 foster care cases. In assessing these cases, reviewers were to determine whether the agency had achieved the goals of reunification, guardianship, or permanent placement with relatives for children in a timely manner or, if the goals had not been achieved, whether the agency had made, or was in the process of making, diligent efforts to achieve the goals. The results of this assessment were the following:

- Item 8 was rated as a Strength in 5 (63%) of the 8 applicable cases.
- Item 8 was rated as an Area Needing Improvement in 3 (37%) of the 8 applicable cases.

Six cases included in this assessment had a goal of reunification and 2 cases had the goal of guardianship. The goal of reunification had been achieved in one case within 12 months of the child’s entry into foster care. However, 3 of the 5 children who had not yet achieved the goal of reunification had been in foster care for more than 12 months by the end of the CFSR period under review.

Cases were rated as a Strength for this item when reviewers determined that the goal had been achieved in a timely manner (1 case) or that the agency had made diligent efforts to achieve the goal despite existing barriers (i.e., serious mental health or behavioral issues that required intensive treatment or placement in a special facility) (4 cases). The item was rated as an Area Needing Improvement when reviewers determined that the goal had not been achieved in a timely manner (1 case), or the agency was not making adequate efforts to achieve the goal (2 cases).

Stakeholders commenting on this issue noted that DCYF engages in several practices to assess a family’s readiness for reunification such as the following: (1) use of Structured Decision Making tools, (2) team decision-making, and (3) court reviews. Stakeholders noted that the Permanency Plus program in the Portsmouth catchment area is an especially effective resource to achieving timely reunification. However, several stakeholders also identified barriers to timely reunification including high caseloads and a lack of appropriate services to bring about the necessary changes in the family. Stakeholders also noted an increase in the number of children with guardianship as a goal. Finally, several stakeholders expressed concern that sometimes the court will order that a child be reunified contrary to the agency’s recommendation that the family is not yet ready for reunification.

Determination and Discussion: This item was assigned an overall rating of Area Needing Improvement based on the following:

- Data from the State Data Profile indicate that for FY 2001 the percentage of reunifications occurring within 12 months of entry into foster care (48.8%) did not meet the national standard of 76.2 percent or more.
- Case reviewers determined that the agency had not made diligent efforts to attain the goals of reunification or guardianship in a timely manner in 37 percent of the 8 applicable cases.

According to the Statewide Assessment, New Hampshire's failure to meet the national standard for the percentage of children reunified within 12 months of entry into foster care could be the result of delays in court processes, a lack of availability of resources/services in some areas, and situations in which it is in the child's best interest to remain in placement for treatment or educational reasons. An additional reason for the delay of reunification may be the decision to reunify at the end of a school year or at a natural school break in an effort to minimize educational disruptions. New Hampshire has been operating under the James O. Consent Decree since 1991, which has focused practice on ensuring that the educational needs of children are considered in placement decisions and that children's special education needs are met when placement occurs or changes. While waiting to return a child home in June rather than in April or May could put a child out of compliance with the national standard regarding reunification within 12 months, the State believes that the minimization of educational disruption is in the best interests of the child.

Item 9. Adoption

Strength Area Needing Improvement

Review Findings: Eleven of the 31 foster care cases were applicable for an assessment of item 9. In assessing this item, reviewers were to determine whether diligent efforts had been, or were being, made to achieve finalized adoptions in a timely manner. The results were the following:

- Item 9 was rated as a Strength in 4 (36%) of the 11 applicable cases.
- Item 9 was rated as an Area Needing Improvement in 7 (64%) of the 11 applicable cases.

Adoption was finalized in 4 of the 11 cases in which the child had a permanency goal of adoption. In one case, the finalization occurred within 24 months of the child's entry into foster care. Three adoption finalizations occurred 28 to 54 months after the child's entry into foster care. Four of the 7 children for whom adoptions had not been finalized were in adoptive placements.

This item was assigned a rating of Strength when reviewers determined that the agency had achieved a finalized adoption in a timely manner (1 case) or was making active efforts to achieve the adoption within 24 months (3 cases). Item 9 was rated as an Area Needing Improvement when reviewers determined that the agency did not pursue TPR in a timely manner (3 cases) or that adoptions were not finalized in a timely manner because of court-related delays, particularly with regard to scheduling TPR hearings (4 cases).

Most stakeholders commenting on the issue of adoption finalization expressed the opinion that the agency is making a concerted effort to pursue adoptions in a timely manner and to observe the ASFA timelines for permanency. However, stakeholders voiced concern about existing agency and court policies and procedures that result in delaying adoptions. Stakeholders reported, for example, that DCYF workers do not recruit an adoptive resource or transfer a case to the adoption unit until TPR is granted.

Stakeholders also identified the following court-related barriers to timely adoptions:

- The courts are not sufficiently staffed and the dockets are overcrowded.
- There are delays in scheduling the adjudication hearings, which then impacts case planning, service delivery, and scheduling the permanency hearing within the 12 month timeframe.
- Several months may pass between the permanency hearing and the initiation of termination proceedings.
- When TPR is filed, the case proceedings are transferred from District Court to Probate Court and in 5 of the 10 New Hampshire counties, there are only part-time Probate Courts. However, State-level stakeholders and the Statewide Assessment note that under the Family Division Pilot Project being implemented in Grafton and Rockingham Counties, all child welfare case proceedings are heard in one court.
- There are multiple continuances and appeals.

In addition, while most stakeholders agreed that the recent CIP protocols have attempted to address many of the existing delays, there is a need for further improvements in this area.

Determination and Discussion: This item was assigned an overall rating of Area Needing Improvement based on the following findings:

- Data from the State Data Profile indicate that the State's percentage of finalized adoptions in FY 2001 occurring within 24 months of removal from home (5.2%) does not meet the national standard of 32.0 percent or more.
- Case reviewers determined that in 64 percent of the 7 applicable cases the agency had not made concerted efforts to achieve a finalized adoption in a timely manner.

According to the Statewide Assessment, the average time in New Hampshire to achieve a finalized adoption between 1999 and 2001 was 44 months. It was noted that in order to meet the 24-month timeline, there must be no delays in hearings, appeals, or continuances;

both parents must be located at the beginning of the court process; and the child must be residing in the home that will be the adoptive home shortly after placement. However, as indicated in the Statewide Assessment, there are multiple barriers to meeting this schedule including the following:

- Because TPR and other adoption decisions are made by the Probate Court, a change of venue from the District Court is required when seeking TPR.
- TPR trials use a high standard of “beyond a reasonable doubt” and are often lengthy.
- The timeframe for filing for TPR is based on the time of the adjudication hearing rather than on the time of the child’s entry into foster care.

Item 10. Permanency goal of other planned permanent living arrangement

Strength Area Needing Improvement

Review Findings: Twelve of the foster care cases were applicable for an assessment of item 10. In assessing these cases, reviewers were to determine if the agency had made, or was making, diligent efforts to assist children in attaining their goals related to other planned permanent living arrangements. The results were the following:

- Item 10 was rated as a Strength in 8 (67%) of the 12 applicable cases.
- Item 10 was rated as an Area Needing Improvement in 4 (33%) of the 12 applicable cases.

In two cases, the goal of long-term foster care was established because of the child’s special physical and mental health needs. In these cases, the State and the foster parent had co-guardianship of the child.

Item 10 was rated as a Strength when reviewers determined that children were receiving appropriate services and the foster care placement was stable. Two of these cases involved children who required placement in a residential facility to meet critical, long-term needs. Six cases involved older youth who were nearing the age of emancipation and were receiving independent living services.

The item was rated as an Area Needing Improvement when reviewers determined that the agency did not provide appropriate services to achieve the goal (1 case) or the agency did not conduct ongoing reviews of the goal of long-term foster care for continued appropriateness and consideration of other more permanent goals (3 cases).

Stakeholders commenting on this item noted that the agency seeks alternative planned living arrangements for young children who have special needs or older youth with exceptional circumstances. For special needs children, stakeholders noted that use of co-

guardianship as a permanency goal enables the child to receive needed services and remain in a stable foster home while the agency retains custody. However, stakeholders reported that DCYF is moving away from agency guardianships and co-guardianships to pursue more permanent goals, such as adoption, when adequate supports and services can be secured. Stakeholders also expressed the opinion that independent living services for teens should begin before age 15 and multiple curricula are needed because of the variations in youth’s skills and ability levels.

Determination and Discussion: This item was assigned an overall rating of Area Needing Improvement because in 33 percent of the applicable cases, reviewers determined that the agency had not made concerted ongoing efforts to explore more permanent options and to develop permanent relationships for children with a goal of long-term foster care.

According to the Statewide Assessment, the DCYF Bureau of Clinical Services is conducting case reviews for children with significant barriers to viable, timely permanent plans or who have been in residential facilities for over 1 year. Five to six cases are reviewed in depth each month. The Statewide Assessment also notes that Permanency Planning Team (PPT) meetings provide for a review of cases by supervisors and administrators when children do not have a permanent plan after 12 months.

Permanency Outcome 2

Outcome P2: The continuity of family relationships and connections is preserved for children.					
Number of cases reviewed by the team according to degree of outcome achievement:					
	Keene	Manchester	Portsmouth	Total Number	Total Percentage
Substantially Achieved:	6	13	5	24	77.4
Partially Achieved:	1	2	4	7	22.6
Not Achieved or Addressed:	0	0	0	0	0.0
Not Applicable:	5	8	6	19	

STATUS OF PERMANENCY OUTCOME 2

New Hampshire did not achieve substantial conformity with Permanency Outcome 2. This determination is based on the finding that the outcome was rated as substantially achieved in 74.2 percent of the cases, which is less than the 90 percent required for substantial conformity.

Cases in Keene and Manchester were more likely to have achieved substantial conformity with this outcome (86%) than cases in Portsmouth (56%).

A key CFSR finding is that DCYF makes concerted efforts to (1) place children in close proximity to their families, (2) place siblings together in foster care, and (3) preserve children's connections with their extended families. However, the CFSR also found that DCYF is less diligent with regard to its efforts to facilitate visitation between children in foster care with their siblings and parents, particularly their fathers. An additional finding is that concerns raised by the review with respect to this outcome pertained to lack of agency efforts to seek and assess relatives as placement resources and support or strengthen the parent child relationship.

Findings pertaining to the specific items assessed under Permanency Outcome 2 are presented below.

Item 11. Proximity of foster care placement

Strength Area Needing Improvement

Review Findings: Of the 31 foster care cases, 29 were applicable for an assessment of item 11. Cases determined to be not applicable were those in which (1) TPR had been attained prior to the period under review, (2) contact with parents was not considered to be in the child's best interest, and/or (3) parents were deceased or whereabouts were unknown. In assessing item 11, reviewers were to determine whether the child's most recent foster care setting was in close proximity to the child's parents or close relatives. The result of this assessment was that Item 11 was rated as a Strength in all (100%) of the 29 applicable cases.

The key findings were the following

- Child was placed in the same community as parents or relatives (18 cases).
- Child's out-of-county placement was necessary to meet the child's needs (8 cases).
- Child's out-of-State placement was necessary to meet the child's needs (3 cases).

Stakeholders commenting on this item were in general agreement that most children are placed in close proximity to their parents or relatives. Stakeholders reported, however, that children entering foster care as CHINS or as delinquents are more likely than children entering foster care through child protective services to be placed outside their community or out-of-State for residential treatment and services.

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

According to the Statewide Assessment, DCYF makes every effort to keep children in their home community and connected to their home school. The Statewide Assessment also notes, however, that the array of placement resources in each community may not meet the needs of a specific child. In such a case, the agency seeks placement resources for the child outside of their community.

Item 12. Placement with siblings

Strength Area Needing Improvement

Review Findings: Seventeen of the 31 foster care cases involved a child with siblings who were in foster care. In assessing item 12, reviewers were to determine whether siblings were, or had been, placed together and, if not, whether the separation was necessary to meet the needs (service or safety needs) of one or more of the children. This assessment resulted in the following findings:

- Item 12 was rated as a Strength in 16 (94%) of the 17 applicable cases.
- Item 12 was rated as an Area Needing Improvement in 1 (6%) of the 17 applicable cases.

In 11 of the 17 applicable cases, the child was in a placement with at least one other sibling, and in 7 of those cases, the child was in a placement with all siblings.

Cases were rated as a Strength for this item if the child was in placement with all of his or her siblings (7 cases), or when reviewers determined that the separation of the siblings was necessary to meet at least one child's safety or treatment needs (9 cases). One case was rated as an Area Needing Improvement when reviewers determined that the agency had not made diligent efforts to find a foster care home to ensure that a sibling group was kept together.

Stakeholders commenting on this item observed that the agency makes diligent efforts to place children with their siblings. When that is not possible, due to lack of placement resources or to meet special needs, stakeholders noted that the agency tries to keep siblings near each other and encourages frequent visitation. Some stakeholders suggested that there is a need for more foster homes, in general, and ones that can accommodate sibling groups.

Determination and Discussion: This item was assigned an overall rating of Strength based on the finding that in 94 percent of the applicable cases, reviewers determined that DCYF makes diligent efforts to place siblings together in foster care whenever possible.

As noted in the Statewide Assessment, DCYF policy requires that efforts are made to place siblings together unless to do so would be detrimental to the physical, emotional, or mental well being of one of the children.

Item 13. Visiting with parents and siblings in foster care

____ Strength X Area Needing Improvement

Review Findings: An assessment of item 13 was applicable for 28 of the 31 foster care cases. Three cases were not applicable for an assessment of this item because TPR had been established prior to the period under review and parents were no longer involved in the children’s lives. In assessing this item, reviewers were to determine (1) whether the agency had made, or was making, diligent efforts to facilitate visitation between children in foster care and their parents and siblings in foster care and (2) whether these visits occurred with sufficient frequency to meet the needs of children and families. The findings of this assessment were the following:

- Item 13 was rated as a Strength in 20 (71%) of the 28 applicable cases.
- Item 13 was rated as an Area Needing Improvement in 8 (29%) of the 28 applicable cases.

Typical visitation between children and their mothers for the 20 cases for which this assessment was applicable was the following:

- Weekly visits – 3 cases.
- Twice a month visits - 7 cases.
- Monthly visits – 1 case.
- Less than monthly visits - 9 cases.

In seven of the nine cases in which visits with mother occurred less frequently than once a month, reviewers determined that the agency had made concerted efforts to promote more frequent visitation.

Typical visitation between children and their fathers for the 12 cases for which this assessment was applicable was the following:

- Weekly visits – 2 cases.
- Twice a month visits - 3 cases.
- Monthly visits – 2 cases.
- Less than monthly visits – 5 cases.

In three of the five cases in which visits with father occurred less frequently than once a month, reviewers determined that the agency had made concerted efforts to promote more frequent visitation.

Visitation between siblings was applicable in 10 cases in which siblings were not placed together in foster care. Typical visitation between siblings was the following:

- Weekly visits – 3 cases.
- Monthly visits – 2 cases.
- Less than monthly visits – 5 cases.

In three of the five cases in which sibling visits occurred less frequently than once a month, reviewers determined that the agency had not made efforts to promote more frequent visitation.

This item was rated as a Strength when reviewers determined that the frequency of visitation met the needs of the child and parent, or that, when visitation was less frequent than needed, the agency had made diligent efforts to promote more frequent visitation, including providing transportation or supervising visits.

Eight cases were rated as an Area Needing Improvement for this item when reviewers identified the following:

- The frequency of visits was not sufficient to meet the needs of the child and the agency did not make appropriate efforts to facilitate more frequent visitation between a parent and child (7 cases).
- The agency did not facilitate visitation between siblings following TPR (1 case).

Stakeholders commenting on this item reported that the agency strongly encourages and facilitates visitation between parents and children. They also noted that foster parents are primary catalysts in supporting visitation and are receptive to visits in the home. Stakeholders cited a lack of transportation as a barrier to more frequent or regular visitation.

Determination and Discussion: Item 13 was assigned an overall rating of Area Needing Improvement because in 29 percent of the applicable cases, reviewers determined that the agency had not made concerted efforts to ensure that visitation between parents and children and between siblings was of sufficient frequency to meet the needs of the child.

Item 14. Preserving connections

Strength Area Needing Improvement

Review Findings: Item 14 was applicable for assessment in all of the 31 foster care cases. In assessing item 14, reviewers were to determine whether the agency had made, or was making, diligent efforts to preserve the child's connections to neighborhood, community, heritage, family, faith, and friends while the child was in foster care. The assessment resulted in the following findings:

- Item 14 was rated as a Strength in 28 (90%) of the 31 applicable cases.
- Item 14 was rated as an Area Needing Improvement in 3 (10%) of the 31 applicable cases.

Reviewers indicated that in 26 of the 31 cases, children's primary connections had been “significantly” preserved while they were in foster care, and in 5 of the 31 cases, children’s primary connections had been “partially” preserved.

Cases were rated as a Strength for this item when reviewers determined that the agency had made diligent efforts to achieve one or more of the following:

- Preservation of child’s primary connections with extended family members (27 cases).
- Preservation of child’s primary connections with school and community (1 case).

Cases were rated as an Area Needing Improvement for this item when reviewers determined that the agency had not made diligent efforts to preserve the child's connections with extended family members (3 cases).

Stakeholders commenting on this issue expressed the opinion that the agency is generally effective in preserving connections to family and schools.

Determination and Discussion: Item 14 was assigned an overall rating of Strength because in 90 percent of the cases, reviewers determined that the State had made diligent efforts to preserve children's connections.

According to the Statewide Assessment, DCYF policy and practice emphasizes maintaining children’s important connections, such as keeping a child in his or her community of origin. If a child must move placements, special efforts are made to maintain the child in the same school. Maintaining ties to relatives, friends, and organizations, etc., also is supported and considered in case planning.

Item 15. Relative placement

_____ Strength X Area Needing Improvement

Review Findings: Twenty-five of the 31 foster care cases were applicable for an assessment of item 15. Cases were not applicable for assessment of this item when a child’s special treatment needs precluded a consideration of relative placement. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to locate and assess relatives (both maternal and paternal relatives) as potential placement resources for children in foster care. The results of this assessment were the following:

- Item 15 was rated as a Strength in 19 (76%) of the 25 applicable cases.
- Item 15 was rated as an Area Needing Improvement in 6 (24%) of the 25 applicable cases.

Cases were rated as a Strength for this item when reviewers determined that children were placed with relatives (1 case) or the agency had made diligent efforts to search for both maternal and paternal relatives, if possible (18 cases). Relatives were ruled out as potential placement resources when they were unable or unwilling to care for the children or had a criminal record or history of substantiated child maltreatment.

Cases were rated as an Area Needing Improvement when reviewers determined that the agency had made diligent efforts to search for maternal relatives but not paternal relatives (5 cases) or when the agency had not searched for either paternal or maternal relatives (1 case).

Most stakeholders commenting on this item were in agreement that DCYF makes concerted efforts to seek relatives as potential placement resources. Stakeholders cited a number of procedures that promoted this effort including the following: (1) conducting routine searches of maternal and paternal relatives early in the case, (2) use of parent locator services to find absent parents, (3) use of the CIP protocols for relative searches, and (4) efforts by workers to locate absent parents or to involve non-custodial parents in the court reviews that take place 3-, 6-, and 9-months after placement in foster care.

Determination and Discussion: This item was assigned an overall rating of Area Needing Improvement because in 24 percent of the cases, reviewers determined that DCYF had not made diligent efforts to locate and assess relatives as potential placement resources. The key concern pertained to inconsistent efforts on the part of the agency to seek paternal relatives as well as maternal relatives.

According to the Statewide Assessment, relatives and other kinship connections are explored as the first option for out-of-home placements. It is noted in the Statewide Assessment that New Hampshire has increased its use of relative foster care placements. Kinship Care providers have the option to become licensed Foster Family Care providers and are entitled to all services and board and care rates of foster family care so long as they maintain the licensing requirements. Kinship Care providers who do not pursue licensure may be granted a board and care rate for Kinship Care through a TANF relative payee grant established by application for this category. Relatives in this situation who move toward adoption as a goal have the option to apply for an adoption subsidy to assist with extraneous costs related to care of that child.

Item 16. Relationship of child in care with parents

_____ Strength X Area Needing Improvement

Review Findings: An assessment of item 16 was applicable for 25 of the 31 foster care cases. A case was considered not applicable for an assessment of this item if parental rights had been terminated prior to the period under review and parents were no longer involved with the child or if a relationship with the parents was considered to be not in the child's best interests. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to support or maintain the bond between children in foster care and their mothers and fathers. The results of this assessment were the following:

- Item 16 was rated as a Strength in 19 (76%) of the 25 applicable cases.
- Item 16 was rated as an Area Needing Improvement in 6 (24%) of the 25 applicable cases.

This item was rated as a Strength when reviewers determined that the agency promoted the parent-child relationship by facilitating and encouraging frequent visitation/contact (15 cases) or continued involvement of the parents in the child's life (4 cases).

The item was rated as an Area Needing Improvement when reviewers determined that the agency had not made sufficient efforts to promote the father-child relationship (4 cases), mother-child relationship (1 case), or improve the parent-child bond (1 case). Reviewers reported that in some instances, when a worker was rebuffed by a parent, or the parent was resistant to services, the agency did not continue to make adequate efforts to support that parent's relationship with his or her child.

Determination and Discussion: Item 16 was assigned an overall rating of Area Needing Improvement because reviewers determined that in 24 percent of the applicable cases, the agency had not made concerted efforts to support the parent-child relationships of children in foster care.

III. CHILD AND FAMILY WELL-BEING

Well-Being Outcome 1

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:					
	Keene	Manchester	Portsmouth	Total Number	Total Percentage
Substantially Achieved:	9	11	8	28	56.0
Partially Achieved:	2	8	5	15	30.0
Not Achieved or Addressed:	1	4	2	7	14.0
Not Applicable:	0	0	0	0	

STATUS OF WELL-BEING OUTCOME 1

New Hampshire did not achieve substantial conformity with Well-Being Outcome 1. This determination is based on the finding that the outcome was rated as substantially achieved for 56.0 percent of the cases reviewed, which is less than the 90 percent required for a determination of substantial conformity.

There was some difference across sites included in the onsite CFSR with regard to performance on this outcome. Cases in Keene were more likely to be rated as having substantially achieved this outcome (75 percent) than were cases in Manchester (48%) or in Portsmouth (53%).

All indicators for Well-Being Outcome 1 were rated as Areas Needing Improvement. Case reviewers determined that the agency was not consistently effective in (1) assessing children's and parent's needs and providing appropriate services to meet those needs, (2) involving children and families in case planning, and (3) ensuring that the contact between caseworkers and the children and parents in their caseloads was of sufficient frequency and quality to meet the needs of the family.

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

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

____ Strength X Area Needing Improvement

Review Findings: An assessment of item 17 was applicable for all 50 cases. In assessing this item, reviewers were to determine whether the agency had (1) adequately assessed the needs of children, parents, and foster parents; and (2) provided the services necessary to meet those needs. The results were the following:

- Item 17 was rated as a Strength in 30 (60%) of the 50 applicable cases (18 of which were foster care cases).
- Item 17 was rated as an Area Needing Improvement in 20 (40%) of the 50 applicable cases (13 of which were foster care cases).

Ratings for this item did not differ substantially as a function of type of case (i.e., foster care or in-home services). Forty-two percent of the foster care cases were rated as an Area Needing Improvement for this item, compared to 37 percent of the in-home cases.

This item was rated as a Strength when reviewers determined that the needs of children, parents, and foster parents had been adequately assessed and that identified service needs had been met.

A rating of Area Needing Improvement was assigned to all cases when reviewers determined that the agency had not adequately assessed the needs of children, parents, and/or foster parents (when relevant), and that this lack of assessment, both initially and ongoing, resulted in a lack of appropriate service provision. In four of the in-home cases, reviewers noted that the agency failed to assess and address underlying parental issues that posed a risk to children, such as domestic violence, substance abuse, or sexual abuse, even though needs were assessed and services were provided in other areas (e.g., parenting, counseling).

Stakeholders commenting on the issue of assessment and service provision expressed the opinion that the skill and experience of workers is a critical variable in assessing family needs, and that not all workers have the necessary skills. In addition, some stakeholders suggested that the provision of appropriate services may be hindered by staff turnover as well as by a lack of available services in some areas.

Determination and Discussion: Item 17 was assigned an overall rating of Area Needing Improvement because in 40 percent of the cases, reviewers determined that the State had not adequately assessed and/or addressed the service needs of children, parents, and foster parents. A key concern identified for in-home services cases pertained to a lack of assessment of underlying issues that present a risk of harm.

According to the Statewide Assessment, DCYF and DJJS use Bridges to track the service needs of children and families and have used a Structured Decision Making model to assess for service needs since March 2002. The Statewide Assessment also notes that a range of specialists are co-located with DCYF in various district offices to improve service coordination, including experts in: child development, education, domestic violence, substance abuse, and health (nurses).

As indicated in the Statewide Assessment, New Hampshire has implemented the following efforts to ensure that services needs are met:

- Developed resources with local communities to serve families with medical, social and mental health needs;
- Promoted a family support agenda within DCYF and its bureaus, and
- Increased communication between public policy makers and children and family service providers.

Item 18. Child and family involvement in case planning

Strength Area Needing Improvement

Review Findings: An assessment of item 18 was applicable for 49 of the 50 cases. One foster case was considered not applicable as the biological parents' rights had been terminated and the child was autistic and not able to participate. In assessing this item, reviewers were to determine whether parents (including pre-adoptive parents or permanent caregivers) and children (if age-appropriate) had been involved in the case planning process, and if not, whether their involvement was contrary to the child's best interest. A determination of involvement in case planning required that a parent or child had actively participated in identifying the services and goals included in the case plan. This assessment produced the following findings:

- Item 18 was rated as a Strength in 29 (59%) of the 49 applicable cases (18 of which were foster care cases).
- Item 18 was rated as an Area Needing Improvement in 20 (41%) of the 49 applicable cases (12 of which were foster care cases).

Ratings for this item did not differ significantly as a function of type of case (i.e., foster care or in-home services). Forty percent of the foster care cases were rated as an Area Needing Improvement for this item, compared to 42 percent of the in-home cases.

This item was rated as a Strength when reviewers determined that all appropriate parties had actively participated in the case planning process. The item was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- Fathers who should have been involved in case planning were not involved (14 cases).
- Mothers who should have been involved in case planning were not involved (12 cases).
- Children who were old enough to have been involved in case planning were not involved (8 cases).

Furthermore, in one case, there was no current case plan in the child's file.

Most stakeholders commenting on this issue expressed concern about the inconsistency with regard to the involvement of children and parents in case planning. Several stakeholders remarked that the case planning document in Bridges is "cumbersome" and not conducive to working with families. In addition, some stakeholders suggested that family involvement in case planning varies across workers and reflects differences in the worker's experience and skills.

Determination and Discussion: Item 18 was assigned an overall rating of Area Needing Improvement based on the finding that in 41 percent of the cases, reviewers determined that DCYF had not made diligent efforts to involve parents and/or children in the case planning process.

According to the Statewide Assessment, families are engaged whenever possible in the case planning process. The Statewide Assessment notes that the DCYF and DJJS case planning tool has space to document parental comments regarding the plan and the family's agreement with the case planning activities. In addition, as reported in the Statewide Assessment, a brochure is given to families as the assessment work is being completed describing "What Happens Next." This brochure (Form 2256) describes the case plan and the role of the family services workers.

Despite these efforts, the Statewide Assessment notes that the average percentage of parents attending the Administrative Case Review (for SFY 2001) was 30, while the average percentage of children attending was 3. The Statewide Assessment indicated that these percentages represent a significant attendance issue for every office. Scheduling difficulties and transportation problems were identified in the Statewide Assessment as possible barriers to parent and child participation in reviews.

Item 19. Worker visits with child

Strength Area Needing Improvement

Review Findings: All 50 cases were applicable for an assessment of item 19. In conducting this assessment, reviewers were to determine whether the frequency of visits between the caseworkers and children was sufficient to ensure adequate monitoring of the child's safety and well-being and whether visits focused on issues pertinent to case planning, service delivery, and goal attainment. The results of the assessment were the following:

- Item 19 was rated as a Strength in 37 (74%) of the 50 applicable cases (24 of which were foster care cases).
- Item 19 was rated as an Area Needing Improvement in 13 (26%) of the 50 applicable cases (7 of which were foster care cases).

Reviewers noted the following with respect to frequency of visits for the 31 foster care cases:

- In 2 cases, visits typically occurred bi-weekly.
- In 2 cases, visits typically occurred weekly.
- In 17 cases, visits typically occurred once a month.
- In 10 cases, visits typically occurred less than monthly.

Reviewers noted the following with respect to frequency of visits for the 19 in-home services cases:

- In 2 cases, visits typically occurred bi-weekly.
- In 12 cases, visits typically occurred once a month.
- In 5 cases, visits typically occurred less than monthly.

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

The item was rated as an Area Needing Improvement when reviewers determined the following:

- The frequency of caseworker visits was not sufficient to meet the needs of the child, but when visits did occur, they focused on issues pertinent to case planning, service delivery, and goal attainment (9 cases).
- The frequency of caseworker visits was not sufficient to meet the needs of the child and the visits did not focus on issues pertinent to case planning, service delivery, and goal attainment (4 cases).

A key concern identified is that the contact between the worker and the child often did not occur in the child's home.

Some stakeholders commenting on this issue noted that workers visit children at least monthly and make concerted efforts to see the child alone. Other stakeholders, however, expressed the opinion that workers are not visiting children in foster care with sufficient frequency, although they acknowledged that the frequency of contact is driven by the size of the worker's caseload and worker turnover or reassignment.

Determination and Discussion: Item 19 was assigned an overall rating of Area Needing Improvement based on the finding that in 26 percent of the cases, reviewers determined that caseworker visits with children were not of sufficient frequency and/or quality. According to the Statewide Assessment, families involved in low-risk, in-home services cases must be visited at least once every 6 weeks, while families in moderate- or high-risk, in-home services cases must be visited at least monthly. For in-home cases, the highest level of risk requires four face-to-face contacts with children per month; up to three of these can be met by a service provider.

Children in foster care but placed with relatives must be visited at least once every 6 weeks, children in non-relative foster homes must be visited at least monthly, while children placed in residential facilities must be visited three times in the first year and semi-annually thereafter. The worker in consultation with the supervisor must determine the frequency of visitation with children in foster care placed in therapeutic foster homes.

Item 20. Worker visits with parents

Strength Area Needing Improvement

Review Findings: An assessment of item 20 was applicable for 48 of the 50 cases. Cases were not applicable if the parents were no longer involved in the child's life or if parent involvement was contrary to the child's interest. Reviewers were to assess whether the caseworker's face-to-face contact with the child's mother and father was of sufficient frequency and quality to promote attainment of case goals and/or ensure the child's safety and well being. The results of this assessment were the following:

- Item 20 was rated as a Strength in 31 (65%) of the 48 cases (20 of which were foster care cases).
- Item 20 was rated as an Area Needing Improvement in 17 (35%) of the 48 cases (9 of which were foster care cases).

The frequency of caseworker visits with mothers was the following (38 applicable cases):

- Twice a month visits - 4 cases (1 of which was a foster care case).
- Monthly visits – 15 cases (6 of which were foster care cases).
- Less than monthly visits – 18 cases (14 of which were foster care cases).
- No visits – 1 case (not a foster care case).

The frequency of caseworker visits with fathers was the following (32 applicable cases):

- Twice a month visits - 2 cases (2 of which were foster care cases).
- Monthly visits - 9 cases (four of which were foster care cases).
- Less than monthly visits - 14 cases (10 of which were foster care cases).
- No visits – 7 cases (5 of which were foster care cases).

This item was rated as a Strength when reviewers determined that visits occurred with sufficient frequency to meet the needs of parents and children and that visits focused on issues pertinent to case planning, service delivery, and goal attainment.

The item was rated as an Area Needing Improvement when reviewers determined the following:

- Visits were not occurring with sufficient frequency (9 cases).
- Visits were not occurring with sufficient frequency, nor did they focus on substantive issues pertaining to the case (6 cases).
- Visits were occurring with sufficient frequency, but did not focus on substantive issues pertaining to the case (2 cases).

Stakeholders commenting on the issue of worker contacts with parents expressed concern that workers were not visiting parents as frequently as is necessary to further attainment of case goals.

Determination and Discussion: This item was assigned an overall rating of Area Needing Improvement because in 35 percent of the applicable cases, reviewers determined that the frequency and/or quality of caseworker visits with parents were not sufficient to monitor the safety and well-being of the child or promote attainment of case goals.

According to the Statewide Assessment, for in-home cases, the visitation requirements for children noted under item 19 also apply to face-to-face contact with parents and other caretakers. For foster care cases, the visitation schedule with parents is determined on a case by case basis and documented in the case plan.

Well-Being Outcome 2

Outcome WB2: Children receive appropriate services to meet their educational needs.					
Number of cases reviewed by the team according to degree of outcome achievement:					
	Keene	Manchester	Portsmouth	Total Number	Total Percentage
Substantially Achieved:	11	14	12	37	94.8
Partially Achieved:	0	0	1	1	2.6
Not Achieved or Addressed:	1	0	0	1	2.6
Not Applicable:	0	9	2	11	

STATUS OF WELL-BEING OUTCOME 2

New Hampshire achieved substantial conformity with Well-Being Outcome 2 based on the finding that 94.8 percent of the cases reviewed were determined to have substantially achieved this outcome, which meets the 90 percent required for substantial

conformity.

The CFSR found that DCYF has made concerted efforts to assess effectively children's educational needs and provide appropriate services to meet those needs. According to the Statewide Assessment, the agency has both a formal relationship with the Department of Education, through the James O. Consent decree, and informal relationships between DCYF/DJJS staff, educational specialists and the Department of Education that contribute significantly to meeting children's educational needs and to each child's well-being.

The findings for the item assessed for Well Being Outcome 2 are presented below.

Item 21. Educational needs of the child

Strength Area Needing Improvement

Review Findings: An assessment of item 21 was applicable for 39 of the 50 cases reviewed. Cases that were not applicable for assessment included cases in which the children were not of school age or did not have needs pertaining to education-related issues. In assessing this item, reviewers were to determine whether children's educational needs were appropriately assessed and whether services were provided to meet those needs. The results of this assessment were the following:

- Item 21 was rated as a Strength in 37 (95%) of the 39 applicable cases (24 of which were foster care cases).
- Item 21 was rated as an Area Needing Improvement in 2 (5%) of the 39 applicable cases (both of which were foster care cases).

Cases were rated as a Strength for this item when reviewers determined that all potential educational needs were assessed and addressed as appropriate. In the two foster care cases rated as an Area Needing Improvement, reviewers determined that needed evaluations were not completed and that the agency had not sufficiently advocated to have the children's needs met.

Stakeholders generally agreed that DCYF, through the efforts of both caseworkers and foster parents, makes concerted efforts to meet the educational needs of children. Stakeholders reported that foster parents now can and often do act as surrogate parents to advocate and make education-related decisions for children placed in their care. However, in one county, stakeholders noted that foster parents experience difficulties accessing educational services for behaviorally challenged children.

Determination and Discussion: Item 21 was assigned an overall rating of Strength because in 95 percent of the applicable cases, reviewers determined that DCYF, through the efforts of both caseworkers and foster parents, had made diligent efforts to meet the educational needs of children. According to the Statewide Assessment, all staff are required to address the educational needs within

the case plan. In addition, the administrative case review process addresses the documentation of the child’s grade level, whether the child has an IEP, what the child’s functioning is within that IEP, and any other education-related issues.

Well-Being Outcome 3

Outcome WB3: Children receive adequate services to meet their physical and mental health needs.					
Number of cases reviewed by the team according to degree of outcome achievement:					
	Keene	Manchester	Portsmouth	Total Number	Total Percentage
Substantially Achieved:	12	16	10	38	77.6
Partially Achieved:	0	5	3	8	16.3
Not Achieved or Addressed:	0	1	2	3	6.1
Not Applicable:	0	1	0	1	

STATUS OF WELL-BEING OUTCOME 3

New Hampshire did not achieve substantial conformity with Well-Being Outcome 3. This determination was based on the finding that the outcome was rated as substantially achieved in 77.6 percent of the 49 applicable cases, which is less than the 90 percent required for a determination of substantial conformity.

A key CFSR finding is that DCYF generally is effective in addressing children’s physical health needs, but is less effective in assessing and addressing their mental health needs. Case reviews and stakeholders comments suggest that children’s mental health needs are not being consistently assessed in situations in which there is an indication that this would be an appropriate procedure.

Another finding is that 100 percent of the applicable cases reviewed in Keene were rated as having substantially achieved this outcome compared to 73 percent of the cases in Manchester and 67 percent of the cases in Portsmouth.

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

Item 22. Physical health of the child

Strength Area Needing Improvement

Review Findings: An assessment of item 22 was applicable for 44 of the 50 cases reviewed. Cases that were not applicable for this assessment were in-home services cases in which physical health concerns were not an issue. In assessing this item, reviewers were to determine whether (1) children's physical health needs had been appropriately assessed, and (2) the services designed to meet those needs had been, or were being, provided. The findings of this assessment were the following:

- Item 22 was rated as a Strength in 39 (89%) of the 44 applicable cases (26 of which were foster care cases).
- Item 22 was rated as an Area Needing Improvement in 5 (11%) of the 44 applicable cases (all of which were foster care cases).

This item was rated as a Strength when reviewers determined that children's health needs were routinely assessed and services provided as needed.

Cases were rated as an Area Needing Improvement for this item when reviewers determined the following:

- The child did not receive health screening, preventative health, dental care, or needed vision services (4 cases).
- The foster family did not receive medical records for the child indicating that the child had severe asthma (1 case).

Stakeholders commenting on this item were in general agreement that DCYF is effective in meeting children's physical health needs. The Foster Care Health Program's nurse coordinators were instrumental in securing needed evaluations and accessing care. It was noted that there are long-standing and widespread difficulties finding Medicaid providers for dental services. Emergency room services are sometimes used to treat serious unmet dental needs. This difficulty was resolved in Keene because DCYF participated in community efforts which succeeded in recruiting two dentists who now provide care to children in that district.

Determination and Discussion: Item 22 was assigned an overall rating of Strength based on the finding that in 89 percent of the applicable cases, reviewers determined that the agency adequately addressed children's physical health needs.

According to the Statewide Assessment, the agency makes concerted efforts to address children's physical health needs and all children in out-of-home care receive Medicaid or the Medicaid managed care program depending on the type of need for each individual child. The Statewide Assessment also notes, however, that there is difficulty providing dental care for children because dental service providers under Medicaid are limited, although a wider variety of services is available under the Medicaid managed care program.

Item 23. Mental health of the child

_____ Strength X Area Needing Improvement

Review Findings: An assessment of item 23 was applicable for 39 of the 50 cases reviewed. Cases that were not applicable were foster care cases in which the child was too young for an assessment of mental health needs or mental health needs were not the reason for agency contact with the child. In assessing this item, reviewers were to determine whether (1) mental health needs had been appropriately assessed and (2) appropriate services to address those needs had been offered or provided. The findings of this assessment were the following:

- Item 23 was rated as a Strength in 31 (79%) of the 39 applicable cases (18 of which were foster care cases).
- Item 23 was rated as an Area Needing Improvement in 8 (21%) of the 39 applicable cases (6 of which were foster care cases).

Reviewers determined that children’s mental health needs were “significantly” assessed in 32 cases, “partially” assessed in 3 cases, and “not at all assessed” in 4 cases. Reviewers determined that identified mental health service needs were “significantly met” in 30 cases, “partially met” in 5 cases, “not at all met” in 3 cases, and there were no identified mental health needs in 1 case.

This item was rated as a Strength when reviewers determined that children’s mental health needs were "significantly" or “partially” assessed, and mental health service needs were “significantly” met, when relevant.

The item was rated as an Area Needing Improvement when reviewers determined the following:

- The child did not receive a formal mental health assessment when there were indications of potential mental health needs (5 cases).
- There was insufficient monitoring of children’s medication for identified mental health needs by the parent and agency (1 case).
- Children with mental health needs did not receive ongoing mental health treatment (2 cases).

Some stakeholders commented on this issue expressed the opinion that DCYF makes efforts to provide mental health services for children, although these efforts are not always successful. Stakeholders in Keene described success in addressing mental health needs through a community collaborative; however, stakeholders in the other two sites included in the onsite CFSR reported a lack of mental health evaluators and service providers. Stakeholders also noted that the provision of mental health services is adversely effected by high turnover of therapists and the high caseload size of workers.

Determination and Discussion: Item 23 was assigned an overall rating of Area Needing Improvement based on the finding that in 79 percent of the applicable cases, reviewers determined that DCYF had not made sufficient efforts to address the mental health needs of children.

According to the Statewide Assessment, there are several challenges to the agency in ensuring that children's mental health needs are addressed. These include the following:

- There is a high rate of staff turnover among therapists.
- Families and children that are not eligible for Medicaid do not have the same access to services that Medicaid-eligible families have.
- Mental health services are insufficiently covered in the managed care contract.
- There are long waiting lists at community mental health centers.
- Community health centers do not have enough specialized services to conduct evaluations of Attention Deficit Hyperactivity Disorder (ADHD), attachment problems, and psychosexual problems.

SECTION 2: SYSTEMIC FACTORS

IV. STATEWIDE INFORMATION SYSTEM

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

New Hampshire is in substantial conformity with the systemic factor of Statewide Information System.

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.

Strength Area Needing Improvement

Item 24 is rated as a Strength because the system has the capacity to identify the status, demographic characteristics, location, and goals for the placement of every child in foster care, and these data are consistently entered and available in the system.

According to the New Hampshire Statewide Assessment, Bridges, which is the name of the Department of Health and Human Services' Statewide Automated Child Welfare Information System, is the case management record for the children and families served by DCYF and DJJS. It provides the input capability and data structures necessary to capture and store essential data. This includes demographic data for victims of alleged abuse and neglect as well other individuals involved in the assessment of family services cases. Bridges records documentation of interviews and actions, assessment findings, authorizations for placement and other services, and payment records.

The Statewide Assessment also notes that "New Hampshire understands that Bridges is the principle tool to aid management in monitoring practice and is therefore a key to improving service delivery and practice." Therefore, DCYF and DJJS management use data from this automated system to augment case management, caseload management, planning, budgeting, resource management,

and as a basis for research. As noted in the Statewide Assessment, examples of using the data captured by Bridges to improve practice include:

- The Child Protection Administrator revised the process for conducting and documenting assessments to address the large number of overdue assessments.
- The Child Protection Administrator developed and implemented a new clinical case monitoring process that re-evaluates case plans at established intervals.

The Statewide Assessment indicates that there are a variety of reports generated by the Bridges application available to support case and client tracking. In addition, there are stand-alone Access databases designed to capture various data to aid in managing particular focal points of various programs and services. These include one for Adoption, Foster Care Health, and Foster Care Licensing. These were developed at particular points in time as stopgap measures but integrating these into the Bridges application remains one of the goals of DCYF.

DCYF recently surveyed 35 Bridges users to gather their opinions about the system's ease of use and ideas for system enhancement. The results of the survey indicate that district office direct care staff is less positive about the system than supervisors and State office staff.

- District Office Supervisors found logging in easier than district office direct care staff,
- District Office Supervisors and State Office staff found the system was up and running when they needed it more than District Office direct care staff,
- District Office Supervisors and State Office staff said they understood how to use the system more than the District Office direct care staff,
- District Office Supervisors and State Office staff found navigating the system easier than the District Office direct care staff reported, and
- District Office Supervisors and State Office staff reported that information is more easily found than the District Office direct care staff reported.

Stakeholders commenting on the Statewide information system during the onsite CFSR indicated that Bridges can identify the status, demographic characteristics, goals for placement, and location of every child in foster care, including the actual address as well as the placement agency. Other benefits of the system identified by stakeholders included the following:

- The system provides immediate access to information on a statewide basis.
- The system is stable.
- The information is available for children that are in "unpaid" (i.e., unlicensed relative care) as well as "paid" placements.
- The system includes ticklers for administrative reviews and permanency hearings.

- Recent modifications to Bridges to address many past concerns have made it more user friendly.

Stakeholders also identified the following as areas where Bridges needs improvement.

- The system includes the necessary data but is not used to create a tracking tool to highlight length of time in care.
- There are separate systems, such as a training and adoption databases, that are not integrated into Bridges.
- The system can be cumbersome to use, for example workers are required to enter demographic information repeatedly when they are completing forms or writing case plans and they cannot easily retrieve case plans.
- Case plans are difficult to access on the system but State-level stakeholders from DCYF and DJJS reported that case plan goals are readily available.
- There sometimes are delays in entering some data.

V. CASE REVIEW SYSTEM

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

New Hampshire is not in substantial conformity with the systemic factor of Case Review System.

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 Area Needing Improvement

Item 25 is rated as an Area Needing Improvement because although case plans are generally kept up to date, there are delays in developing initial case plans and parents and children are not consistently involved in the case planning process.

According to information in the Statewide Assessment, data from a 2002 DCYF review of placement cases in three district offices found that 79 percent of placement cases had an updated case plan on file. In addition, only 61 percent of the cases had a case plan

completed within 60 days of placement. The Statewide Assessment noted however that the 2002 Administrative Case Review annual report indicated that by the child's first 6-month Administrative Case Review, 96 percent of DCYF cases had case plans that were in compliance with the time-frame requirements, and 94 percent of DJJS cases had case plans that were in compliance. This was a significant increase for both divisions as the rate of compliance in State fiscal year 2001 was 89 percent for both divisions.

As noted in the Statewide Assessment, community partners reported that case plans have improved recently and involve goals and service plans that reflect innovative approaches to reunification or other forms of permanency. However, community partners also noted that parents are not sufficiently involved in the process of writing the case plan, and often do not understand them. A focus group (convened as part of the State assessment process) with administrative case reviewers identified the following barriers to involvement of parents in case planning:

- Agency staff are not yet fully comfortable with the procedures of family-centered practice.
- The format of the case plan is not always easy for parents to understand.
- Parents do not participate in case planning prior to adjudication because their attorneys advise them not to.
- For DJJS, parents are not involved, because the focus of the case is on the child's behavior.

Stakeholders commenting on case plans during the onsite CFSR noted that all children have case plans, and that they are usually "in place" by the time of the child's first 6-month review. Stakeholders commenting on the case planning process during the onsite CFSR provided contrasting opinions. Some stakeholders reported that DCYF makes concerted efforts to involve parents in the case planning process while other stakeholders noted that the extent of parent involvement in the case planning process varies across workers and depends on a worker's experience and knowledge. Some stakeholders suggested that parents have difficulty participating in case planning through administrative case reviews, because they are overwhelmed with other appointments and find it difficult to attend. Stakeholders noted that efforts to improve parent participation by holding administrative case reviews in locations where parents have other engagements, such as at the courthouse before hearings, have met with some success. The inconsistency with regard to parent involvement is reflected in the case review finding that in 41 percent of the applicable cases, parents and children were not involved in the case planning process.

In addition, some stakeholders reported that JPPOs involve parents in the case planning process, while other stakeholders indicated that this is the exception rather than the rule for JPPO workers. Several stakeholders indicated that in juvenile justice cases, there is little focus on the parents or on case plans in general. Finally, stakeholders noted that the case plan, which is used for both juvenile justice and child welfare cases, is very cumbersome (it is 28 pages long) and not family friendly.

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

Strength Area Needing Improvement

Item 26 is rated as a Strength because the State provides for the administrative case reviews of the status of each child in foster care at least every 6 months and these reviews are held in a timely manner and facilitate substantive discussion of the status of each child.

According to the Statewide Assessment, administrative case reviews are held every 6 months and court reviews are held every 90 days for each child who resides in an out-of-home placement and is under the supervision of either DCYF or DJJS. The Statewide Assessment notes that some agency personnel believe that the frequency of court hearings has diluted the effectiveness of the administrative case review process. The agency staff noted that parents and caregivers often are overwhelmed by the number of hearings and meetings and are more likely to attend the court hearings than the administrative reviews. However, the Statewide Assessment also indicates that the court review process ensures that parents and children (when age appropriate) have their viewpoint included in case planning.

There was general agreement among all stakeholders commenting on the topic of the 6-month case reviews during the onsite CFSR, that a case review of each child in foster care occurs at least once every 6 months, and usually more often. However, stakeholders expressed differing opinions regarding the relative value of court reviews compared to administrative reviews. Although some stakeholders indicated that the court reviews are successful in promoting permanency because they ensure that services are in place and because parents usually attend them, other stakeholders suggested that the administrative reviews are more productive than court reviews because they last longer and can involve an open discussion of relevant issues, which sometimes is difficult in a courtroom setting.

Stakeholders noted that Easter Seals has the contract to implement the administrative reviews across the State and that this agency has been very effective in meeting the requirements of the contract. Several stakeholders expressed concern, however, that because the State cannot pay for transportation for the parents to the reviews, some parents are unable to attend reviews.

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

____ Strength X Area Needing Improvement

Item 27 is rated as an Area Needing Improvement because in New Hampshire, the courts convene the initial permanency hearing 12 months from the time of the adjudication hearing instead of 12 months from the time of the child's entry into foster care. Because adjudication hearings can be delayed, sometimes for several months, not all children in foster care have a permanency hearing 12 months from the date that they entered foster care. In addition, permanency hearings also are not being held on a consistent basis for cases involving Children in Need of Supervision (CHINS) or adjudicated delinquents.

According to the Statewide Assessment, permanency hearings are effective in making decisions about children's permanent plans but, in accordance with State statute, the permanency hearing is scheduled 12 months after adjudication rather than 12 months after the child enters foster care. Although State statute and court protocols require that adjudicatory hearings be held within 30 days of the filing of neglect, abuse or delinquency petitions and within 21 days of the filing of CHINS petitions, some courts have very limited judge and court time and the adjudicatory hearing often can be delayed for several months. When this happens, permanency hearings can be delayed beyond 12 months from the date of entry into foster care, the date required by the Federal Adoption and Safe Families Act (ASFA). Supervisors and staff surveyed as part of the Statewide Assessment reported that, whenever possible, they attempt to have the date of the permanency hearing scheduled at the adjudicatory hearing to avoid as much of a delay in the permanency hearings as possible.

The Statewide Assessment also notes that permanency hearings are not consistently held for DJJS cases in which juveniles are in out-of-home placements. Although almost all juveniles are reunified with their parents, for some of these cases, reunification will not be the goal. In these cases, parents may be candidates for termination of parental rights (TPR) proceedings and the youth may be a candidate for adoption and/or an alternative planned living arrangements. At present, the Memorandum of Agreement between the two divisions requires DJJS staff to ensure that permanency hearings are held when applicable, TPR is pursued when relevant, and appropriate case goals are identified when reunification is no longer the permanency plan.

Finally, the Statewide Assessment reports that the State's Court Improvement Program (CIP) has developed protocols for court actions related to permanency for child welfare cases. However, participants in a DCYF supervisor focus group said that in some areas of the State the limited availability of court time results in courts being unable to adhere to the CIP protocols. With regard to DJJS cases, the Statewide Assessment notes that training for all district and family court judges was held on April 3, 2003. This training defined the need for permanency hearings in DJJS cases and described how they are to be conducted. On the following day, the same training was held for DJJS district office supervisors, JPPOs and administrative case reviewers.

Stakeholders commenting on the topic of 12-month permanency hearings were in general agreement that these hearings are not taking place in a timely manner. Stakeholders in Manchester, however, noted that the hearings are beginning to occur in a more timely manner because of the CIP protocols. One primary reason for delays noted by stakeholders was that permanency hearings are scheduled 12 months from adjudication rather than 12 months from the time of the child’s entry into care. Because an adjudication hearing can be delayed for several months, depending on the court’s calendar, the permanency hearing also is delayed. Stakeholders identified the following additional reasons for delays in permanency hearings:

- Judicial reluctance to finalize permanent plans;
- The fact that, contrary to State policy, the hearings sometimes turn into full evidentiary hearings, which can last 3 days;
- The fact that court dockets are overcrowded, which leads to the granting of continuances;
- The perception of some judges that the requirements of ASFA apply to DHHS operations, but that the court is not required to adhere to them; and
- An agency delay in assessing the family’s service needs and providing services to parents, which results in the court granting continuances for the permanency hearing.

Some stakeholders also expressed concern that permanency hearings are not being held at all for CHINS cases or for cases involving adjudicated delinquents. They noted that in juvenile justice cases, there often is a presumption of reunification so no permanency planning is done. As a result, stakeholders are concerned that children who cannot be reunified often end up “aging out” of DJJS at the age of 17 and entering DCYF, and then eventually age out of that system as well. This problem was attributed to a DJJS and Court philosophy that does not promote alternative permanency plans for these children.

Item 28. Provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption and Safe Families Act.

Strength Area Needing Improvement

Item 28 is rated as an Area Needing Improvement because TPR proceedings are frequently delayed and compelling reasons for exceptions are not consistently documented or reviewed.

The Statewide Assessment notes that between 2000 and 2002, DCYF has filed an increasing percentage of TPR petitions with the courts within State timelines. According to the Statewide Assessment, one of the more significant issues that has impacted the timeliness of TPRs in New Hampshire has been the protocols developed by the State's CIP. The protocols are the result of collaboration among the State's District Courts, Family Division, Probate Court, and Superior Court. Although the protocols discourage the granting of continuances and establish procedures for ensuring that hearings regarding permanency and TPR are held in a timely manner, some hearings are still not being held in accordance with the schedule in the protocols.

Stakeholders commenting on this topic were in general agreement that although there is a process in place for filing for TPR, there are delays and problems associated with both the filing for TPR and the attainment of TPR. With regard to filing, stakeholders suggested that in a majority of applicable cases, TPR is not being filed. Stakeholders reported that compelling reasons for making exceptions to filing for TPR were not presented by the agency nor reviewed by judges during court hearings. Some stakeholders noted that sometimes workers do not file for TPR because (1) it requires a "too high" burden of proof, (2) the judge has a reputation for not granting TPRs; (3) they do not have an adoptive placement for the child; and/or (4) the child is an adolescent and does not want to be adopted. A few stakeholders noted that DJJS workers are discouraged from filing for TPR because of the belief that older children are not likely to be adopted.

Stakeholders attributed delays in filing for TPR to the following:

- Affidavits to locate absent parents were not filed in a timely manner.
- The agency believes that it is necessary to wait the full 12 months out of 22 before filing for TPR, even if there are good reasons for early filing. (In New Hampshire, the TPR filing decision is to be made within 12 months from the time of the adjudication hearing.)
- The worker did not search for absent (non-custodial) parents early on in the case.
- Many permanency reports do not provide the detailed information necessary to pursue TPR.
- Social studies of birth families that are required to be completed by DCYF prior to pursuing TPR and adoption are not being completed on a timely basis.

Stakeholders attributed delays in achieving TPR to the following:

- In one county, stakeholders noted that TPR hearings can take up to 15 days to complete because the district court only hears child welfare cases 1 day a week, and the probate judge is part-time and only hears cases on Fridays.
- Some TPR hearings can take up to a year to be decided.
- The court will not terminate parental rights on both parents unless an adoptive family is identified.
- The appeals proceedings in some locations can take up to 2 years.

- The ASFA requirements regarding timeframes are not adhered to by the courts and the court views the time clock as beginning at the point of adjudication, not at the time of entry into foster care.
- There is a loss of time in transferring cases from the District Court to the Probate Court, resulting in a scheduling of the TPR hearing 9 to 12 months after the filing.
- DCYF and DJJS legal representation is compromised by lack of availability, turnover, and, in some cases, insufficient preparation among agency attorneys.
- Local court judges often give parents 3 or 6 more months to work on the case plan before considering a TPR petition.

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

Strength Area Needing Improvement

Item 29 is rated as a Strength because foster parents, preadoptive parents, and relative caregivers are notified of reviews and hearings. In general, they also are given the opportunity to attend reviews and provide input in person or, if they are unable to attend, they can provide input in written form.

According to the Statewide Assessment, foster parents are informed about the court process and their role in this process during the foster parent pre-service training. They also are provided with this information in the foster parent handbook. Additionally, the DCYF worker includes a brochure describing the administrative case review process when sending the written invitation to all attendees.

The Statewide Assessment also notes that DCYF policy requires foster parents, relative caregivers, pre-adoptive parents, and residential care providers to be given notice of administrative case reviews and permanency hearings for children in their care. They may choose to attend the hearing or submit a letter to the court about the status of the child in their care. As noted in the Statewide Assessment, foster parent attendance at permanency hearings varies from court to court.

Stakeholders commenting on this topic during the onsite CFSR indicated that Easter Seals routinely notifies parents of administrative case reviews. Several stakeholders also reported that foster parents typically receive notification of court hearings, but the consistency and timeliness of the notification appears to vary across the sites included in the CFSR onsite review. The court is responsible for sending out the notifications based on information regarding names and addresses provided by the agency, and the notifications are

sent out at least 2 weeks prior to the hearing. Stakeholders in one site commented that notification declined somewhat when the responsibility for providing notification of court hearings was transferred from the agency to the court.

Stakeholders also noted that foster parents who attend hearings tend to believe that the court protocol is helpful in promoting permanency for children. Stakeholders reported that some judges do not believe that foster parents should be given the opportunity to be heard, while other judges are very open to getting input from foster parents, adoptive parents, and relative caregivers. Some stakeholders indicated that when foster parents do not attend, they are allowed to provide written input to the court, although this may vary across courtrooms.

VI. QUALITY ASSURANCE SYSTEM

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		Substantial Conformity	
	1	2	3	X4

New Hampshire is in substantial conformity with the systemic factor of Quality Assurance System.

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.

Strength Area Needing Improvement

Item 30 is rated as a Strength because standards for foster parents and foster care providers to protect the health and safety of children in their care have been established and are actively monitored.

According to the Statewide Assessment, DCYF has a mission and commitment to deliver quality child protection to children, adolescents and families. To meet this commitment, the Division has implemented a continuous quality improvement process that is integrated into day-to-day business operations and results in a continuous cycle of assessment and performance improvement. The process involves each staff person, consumer, service provider, and community stakeholder who plays a vital role in ensuring an effective, efficient organization that meets community needs.

The Statewide Assessment also notes that DCYF has service-specific standards and measurable parameters for out-of-home placements, which are examined during monitoring visits of the Bureau of Quality Improvement to district offices as well as in the context of other DCYF quality assurance activities. The goal is to protect the health and safety of the children in out-of-home placements. In addition, DJJS has developed and implemented a standardized method for conducting program evaluation at the district offices. This method differs from that of DCYF in that it focuses more on the case practices of JPPOs, outcomes for their clients in placement, and community safety.

Finally, the Statewide Assessment notes that DCYF and DJJS have established a comprehensive certification process for community-based providers of purchased services. Purchased services include those services performed by a third party and paid for by DCYF or DJJS. The certification for payment process requires that each applicant provide documentation of his/her qualifications and willingness to comply with the requirements of the service he/she wishes to provide. Requirements may include licensure, training, being Medicaid reimbursable, clinical record keeping, completion of treatment reports, and progress on designated outcome measures.

Stakeholders commenting on this topic during the CFSR indicated that home studies, training, and licensure have been put together in a more structured way to ensure standards. Stakeholders reported that licensing and certification requirements, including health and safety standards, are stringently upheld. Maltreatment reports regarding children in foster care are investigated by DCYF's Special Investigations Unit, which stakeholders credited with addressing health and safety issues for foster children. Stakeholders also commented that the licensing standards have been revised several times over the past five years with input from child placing agencies, adoptive parents, and others. However, stakeholders noted that foster parents do not always receive medical records, which may have a negative impact on their ability to address the health issues of the children in their care.

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

Strength Area Needing Improvement

Item 31 is rated as a Strength because the State's quality assurance (QA) system evaluates the quality of services, identifies strengths and needs for improvement through quality review reports, and monitors follow-up to the reports.

According to the Statewide Assessment, the Bureau of Quality Improvement has primary responsibility for monitoring performance, reporting on outcomes, and evaluating the effectiveness and efficiency of services as they are delivered to children and families. These reports may focus on broad programmatic issues, overall operations in a specific district office, a specific item related to policy development, or a combination of all three.

As indicated in the Statewide Assessment, in September 2001, the Division for Juvenile Justice Services was created and became a separate division from DCYF. While there is still significant collaboration with the DCYF BQI unit, DJJS employs a quality assurance administrator and program specialists. DJJS oversees certification of experiential, residential and group home facilities. The DJJS program specialist conducts site visits and reports on residential and group home program compliance with rules and policy. The program specialist also oversees corrective action plan development and implementation for these residential facilities. The DJJS quality assurance program specialist also is responsible for monitoring case practice and compliance in the district offices.

Stakeholders commenting on this topic during the onsite CFSR were in general agreement that the State has a statewide quality assurance system. Stakeholders noted that BQI conducts reviews of district offices and that district offices follow up on the recommendations resulting from BQI reviews. These reviews include interviews with staff and clients as well as case reviews to examine outcomes for children and parents. Stakeholders at the local level reported that there is a quality assurance unit that conducts sample case reviews and provides feedback. A few stakeholders, however, expressed concern about the lack of clear policy regarding supervisory review of cases.

VII. TRAINING

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		Substantial Conformity	
	1	2	3	X4

New Hampshire is in substantial conformity with the systemic factor of Training.

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

services.

Strength Area Needing Improvement

Item 32 is rated as a Strength because initial training provided for all staff who deliver services is consistently received and effectively supports the goals and objectives of the CFSP.

According to the Statewide Assessment, a competency-based training program is provided through the DCYF Core Academy and the DJJS Juvenile Probation and Parole Institute. Competencies are identified that have an overall theme of safety, permanency, and well-being for children and families. Trainings are offered that provide skill and knowledge in specific competencies.

All new DCYF workers must complete the core academy. This training is offered four times per calendar year at the State office in Concord. Every new employee is required to attend and experienced staff members are encouraged to attend from time to time to stay current with new research in the field and updated policies and procedures and to receive topic-specific updates.

In addition to the core academy, participation in DCYF's mentoring program is required for all new caseworkers. Each new employee is paired with a trained mentor, approved by the child protection program administrator and the respective supervisor. The mentor is an experienced field staff person. Mentor and mentee begin their relationship during the mentee's Academy training and continue, as needed, once the Academy is completed. This relationship continues depending on the need of the individual employee. Both mentors and mentees, as part of the Academy, attend a training to learn about the concept of mentoring as well as receive practical guidance on how best to interact as mentor/mentee and to best utilize their relationship as a learning tool. The mentor program, which has been in place for three years, has involved a total of 173 CPSW mentors and mentees. The most common interaction reported between the mentor/mentee is to request assistance in applying their newly acquired skills, knowledge and techniques to their casework or questioning/challenging the use of their training in the day-to-day work, in general.

To support the transfer of learning, the bureau has dedicated 18 hours of training for supervisors to improve their understanding of the concepts involved in knowledge transfer and providing them with a range of skills to use with their staff to enhance the employee's learning. Results to date show an increase in supervisory involvement with new employee curriculum. Supervisors are expressing more interest in helping to revise and develop a new CPSW curriculum as well as support attendance for all new CPSW's at the Academy. More supervisors are attending the academy graduation to show their support for newly trained staff.

Stakeholders commenting on the topic of initial training generally expressed the opinion that the core training available to new workers has improved in the past year and a half. Many stakeholders also noted that the mentoring program is a major success and is

well liked by all participants. Some stakeholders noted that workers do not take on a case load until training is completed, while other stakeholders indicated that workers do receive cases before they received the core training. Training for JJPO workers is provided every 6 months, and stakeholders reported that this degree of frequency meets their needs.

A few stakeholders suggested that the core training does not adequately prepare the workers for their jobs, and that there needs to be better training for workers around engaging parents and avoiding adversarial relationships with parents. Some stakeholders suggested that more hands-on experience prior to the core training classes would be beneficial.

With regard to DJJS, stakeholders noted that JJPO workers need training on the TPR process.

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

Strength Area Needing Improvement

Item 33 is rated as a Strength because ongoing training for staff supports their development of a wide range of useful skills and knowledge.

According to the Statewide Assessment, an annual training calendar is developed each year to meet the ongoing/advanced training needs of DCYF and DJJS staff. The Bureau of Staff Development and Training (BSDT) uses aggregate data from the individual training needs assessments as a starting point to identify potential training needs statewide. Bureau staff and the DJJS Professional Development Staff also meet with individual supervisors and selected staff to learn their specific needs for ongoing/advanced training. Each employee, upon completing one year's service, is required to attend 30 hours, or five days, training annually. Annual Individual Training Needs Assessments are completed by both workers in DCYF and DJJS to identify training needs for the upcoming year. Each staff person and their supervisor target training for the upcoming year via the Annual Individual Training Plan.

Stakeholders commenting on this topic during the onsite CFSR noted that there is advanced training available from district offices, that staff are encouraged to attend the available training, and that there is an annual training assessment for workers and supervisors. A few stakeholders also noted that workers have annual individualized training plans, that supervisors review training records prior to annual employee evaluations, and that workers are expected to complete action plans stating how they will use skills acquired during training in their practice.

However, stakeholders also expressed the opinion that the amount of advanced training available is not sufficient to meet the needs of the workers or supervisors. Stakeholders noted a need for training in the following areas:

- Regional cross training including DCYF, DJJS, and the mental health agency,
- Supervisor training for DJJS supervisors,
- Initial and ongoing training for agency attorneys on court protocols and other responsibilities,
- Specialized training for foster care nurses,
- Training on CIP protocols and court procedures,
- Training on concurrent planning,
- Training on engaging families, and
- Cultural competency training.

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

Strength Area Needing Improvement

Item 34 is rated as a Strength because foster and adoptive parents receive comprehensive initial training and have access to a variety of ongoing training that prepares them to care for foster and adopted children.

Information in the Statewide Assessment indicates that DCYF offers foster parent and foster care provider training primarily through its Education and Training Partnership under contract with the College for Lifelong Learning (CLL). The Foundations for Fostering (FFF) provides 21 hours of pre-service training for foster and adoptive parents, as well as residential child care staff.

In addition, State policy requires staff of foster care facilities to participate in a minimum of 40 hours of training per year. Foster parents are required to participate in 16 hours of training every two years, or 32 hours every two years for specialized foster care. Caregiver Ongoing Training (COT) offers foster parents, adoptive parents, and foster care provider staff with 55 different courses in a variety of settings, including distance learning. Also, DJJS training is open to residential and group home facility staff. Finally, the adoption unit provides a 21-hour pre-service training for adoptive parents, and CLL offers a course for foster parents considering adoption.

Stakeholders commenting on the topic of training for foster and adoptive parents were in general agreement that the training offered is of high quality and that the State requirements for hours of training are being met. Stakeholders noted that the training is offered in classroom settings as well as through distance learning, and that foster parents often serve as co-trainers. In addition, new foster parents are mentored by more experienced foster parents.

Stakeholders also reported that foster parents are satisfied with the training and believe that it meets their needs for the most part. However, one unmet training need identified pertained to parenting behaviorally challenging children.

VIII. SERVICE ARRAY

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		Substantial Conformity	
		1	X2	3

New Hampshire is not in substantial conformity with the systemic factor of Service Array.

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.

Strength Area Needing Improvement

Item 35 is rated as an Area Needing Improvement because the services available are not adequate to enable children to remain safely with their parents when reasonable and help children in foster and adoptive placements achieve permanency. The most frequently cited service gaps pertained to substance abuse treatment, mental health services, and transportation to access services.

The Statewide Assessment lists a variety of services as part of its general service array. These include the following:

- DCYF has funded Family Resource and Support Services throughout the State to provide prevention oriented home visiting and child care services since 1994. A new Comprehensive Family Support initiative was launched in 2002 to provide services to families on a voluntary basis through a contractor in each of the 12 district office areas.
- DCYF’s Bureau of Clinical Services promotes the physical and mental health of children through various services, including:
 - The Foster Care Health Program, which provides nurse coordinators in each of the District offices to ensure that the health needs of children in foster care are met and encourage parents to actively engage in making decisions regarding their child’s health care needs,
 - A Senior Psychiatric Social Worker serves as a mental health consultant to the field and coordinates with the N.H. Hospital’s children’s unit to ensure that community based discharge planning occurs and that these children do not remain hospitalized longer than needed because of resource and treatment issues, and
 - Three Education Specialists monitor the provision of special educational services to children in placement.

In addition, the Permanency Plus Time Limited Family Reunification project is in its second year of operation in the Portsmouth District office. Currently scheduled for expansion, Permanency Plus focuses on matching children experiencing first time entry into foster care with a resource family. The resource family agrees to work intensively with the birth family toward reunification and if that is not successful, to permanently expand their families and become a permanent placement for that child.

The Statewide Assessment also identifies deficits in the service array including long waiting lists for services for children in need of mental health, a lack of dental health services for children receiving Medicaid, a shortage of foster homes in some areas, and a lack of substance abuse treatment services resulting in long waiting lists for treatment.

Stakeholders commenting on the topic of service array generally expressed the opinion that the array of available services is not sufficient to enable children to remain safely with their parents, or to help children in foster and adoptive placements achieve permanency. The most frequently cited service gaps pertained to substance abuse treatment (for both adolescents and women with children), mental health services (families can wait 4- 6 months for a mental health evaluation), and transportation to access services. Although stakeholders in one site noted that the agency has a contract for transportation services, the contractor was described as “unreliable.” In addition, several stakeholders commented on the lack of coordination among agencies in providing services.

Additional gaps in services identified by stakeholders were the following:

- Specialized services to address specific types of behavioral problems, such as services for juvenile sex offenders.
- Domestic violence treatment.
- Sexual abuse treatment.
- Therapeutic foster homes, foster homes for delinquent children, and Hispanic foster homes.

- Medical evaluations.
- Appropriate placements for children discharged from residential treatment facilities.
- Dental care (lack of dentists willing to accept Medicaid).
- Home-based services designed to prevent placement, including a sufficient number of parent aides.
- Services for developmentally delayed children and parents.
- Residential placements for mental health treatment to reduce the need to send children out of State.

In addition to the gaps in services, stakeholders identified the following as barriers to accessing services:

- Lack of sufficient day care and the cost of day care.
- Lack of services for families who are not in the system. For example, stakeholders reported that families who are not court-involved have difficulty accessing mental health services.

Despite the service gaps, several stakeholders praised the State’s Independent Living (IL) program, although it was noted that IL services should be provided to children age 15 and younger. A few stakeholders remarked that the division between DCYF and DJJS impedes delivery of IL services to adolescents in DJJS’s care; however, other stakeholders described comprehensive IL services for some CHINS and delinquent adolescents. Stakeholders also praised the ability of the agency to access education services for children with special needs.

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

Strength Area Needing Improvement

Item 36 is rated as an Area Needing Improvement because services are not consistently available throughout the State, and transportation challenges relative to the location of services impedes access.

Information provided in the Statewide Assessment indicates that the array of services varies from community to community, particularly with regard to specialized programs. For example, in Portsmouth, the Permanency Plus pilot provides intensive, time-limited reunification services and in the Manchester and Nashua district offices, the Project First Step title IV-E Waiver demonstration project combines child protection and substance abuse services.

According to the Statewide Assessment, focus groups convened to examine the issue of service array noted the following:

- Limited funding is available for adults who require treatment for substance abuse/addiction;
- Some community providers, such as community mental health centers, have waiting lists that delay the provision of essential services; and
- While significant steps are underway to provide regional supports and services complimentary to diverse cultural groups, many of these services still do not exist on a statewide basis.

In addition, as noted in the Statewide Assessment, the lack of centrally located access in towns and cities to State-supported services is a significant barrier in the State because of the combined lack of public transportation in most areas and the State’s predominantly rural environment. Many statewide services are provided through district or regional offices that can only be accessed through auto or bus transportation. For example, residents of Lebanon must find transportation to Claremont (which is located 21 miles away) to access most services provided by the Department of Health and Human Services (DHHS). Furthermore, offices that provide complimentary services, such as community mental health and services for people with developmental disabilities, are situated in different locations, often miles apart.

Stakeholders commenting on this issue were in agreement that the service array varies across the State and that there are areas of the State that are without reasonable access to services. A key problem is the lack of transportation and the need in many communities to travel long distances to access basic services. Keene has achieved some success improving access to services through community collaboratives, such as arranging for dental care for foster children with two local dentists.

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

Strength Area Needing Improvement

Item 37 is rated as a Strength because services are regularly selected and tailored to meet the individual needs of children and families.

According to the Statewide Assessment, the State’s CARE-New Hampshire initiative is focused on identifying children placed in service-intensive facilities and developing a flexible array of community-based services to allow them to return to their home communities. The initiative is led by the New Hampshire Division of Behavioral Health and presently serves the Manchester (urban), Berlin (rural), and Littleton (rural) district offices. In addition, the State promotes a family-centered approach to case planning that focuses on meeting individualized needs.

Stakeholders commenting on this topic generally expressed the opinion that DCYF makes concerted efforts to tailor services to the needs of children and families. There are wraparound services available in many communities, and efforts to respond to the cultural needs of changing communities. In addition, there are specialized programs that focus on meeting the unique needs of children and families, such as the Permanency Plus program, the Family Strengths program, and the CARE-NH program. A few stakeholders suggested that there is a need for greater individualization of IL services. Stakeholders in Portsmouth indicated that flexible funds are available at county administrator discretion to provide some services not available through existing providers.

IX. AGENCY RESPONSIVENESS TO THE COMMUNITY

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		Substantial Conformity	
	1	2	X3	4

New Hampshire is in substantial conformity with the systemic factor of Agency Responsiveness to the Community.

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

Strength Area Needing Improvement

Item 38 is rated as an Area Needing Improvement because although DCYF staff participate in a variety of State level interagency committees and advisory boards, the major concerns of local stakeholders, consumers, foster care providers, the courts, and other public and private child- and family-serving agencies are not frequently included in the goals and objectives of the CFSP.

According to the Statewide Assessment, DCYF promoted numerous avenues for receiving input from its consumers and stakeholders in the development of the Child and Family Services Plan (CFSP) 2000-2004. Partners in the development of the plan included the existing advisory boards, the Family Empowerment project, and information from ongoing community needs assessments and quality improvement program reviews.

The Statewide Assessment also indicates that DCYF began a series of community forums in 2002 at the twelve district offices. Participants included local community stakeholders, law enforcement organizations, foster parents, legislators, educators, as well as many of DCYF staff and administrators. In addition to discussing needs for children and families particular to those communities, information was presented about the division's Structured Decision Making (SDM) system, child abuse reporting requirements, foster home recruitment, and voluntary services. Local community wellness indicators, as well as the status of children and families involved in reports of abuse/neglect to the local office, were also presented. DCYF plans to continue these forums in 2003 as part of its ongoing community outreach process.

The Statewide Assessment also notes that it is challenging to ensure that essential stakeholders were meaningfully involved in ways that did not conflict with their schedules and competing demands on their time. DCYF is responding to this challenge by holding more meetings and forums in communities that are the most convenient for invited participants to attend. Also, DCYF is incorporating consumer and stakeholder satisfaction questions in confidential surveys conducted as part of the research in existing demonstration projects. This process provides another source of information to compare with and add to information provided through routine meetings.

Finally, DCYF is in partnership with statewide groups that assess and report on interagency systemic issues that effect children and families. These groups include the Attorney General's Task Force on Child Abuse and Neglect, the Governor's Commission on Domestic and Sexual Violence, Victims' Services committee, the Governor's Domestic Violence Fatality Review Committee, and the Governor's Child Fatality Review Committee. All of these groups have access to information about DCYF services, cases and policy and they make recommendations for changes in policy, practice, or laws that would allow for improved services that would better guarantee the safety and well-being of the state's children and families. Reports and recommendations from these commissions and committees are directed to the Bureau of Quality Improvement.

Local stakeholders reported active consultation at the case level and awareness of Statewide advisory groups, but little knowledge of how local stakeholder concerns are considered by DCYF and DJJS in developing their goals and objectives. Stakeholders at the State level reported that private family service agencies have some involvement, but not enough, in developing the State's child welfare goals. At the time of the CFSR, there was not an active youth advisory board. Stakeholders reported that the Child Welfare Committee, responsible for consulting with stakeholders to develop the 2005-2009 CFSP, is undergoing a reorganization designed to

improve its connections with the DCYF Advisory Board, the Citizen’s Review Panel, local family services agencies, foster and adoptive parents, and adolescents in foster care.

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

Strength Area Needing Improvement

Item 39 is rated as a Strength because DCYF develops annual reports of progress and services in consultation with their advisory groups and other stakeholders. The Citizen’s Review Panel also develops an annual report

According to the Statewide Assessment, DCYF has developed the following strategies to promote constructive ongoing consultation with stakeholders:

- groups involved in any evaluation process are provided with information about each division’s mandates, operational laws, and statutory limitations;
- discussions occur with other agencies and stakeholder to encourage the concept of collective community responsiveness and responsibility;
- ongoing evaluation is conducted by people familiar with research and evaluation techniques, and
- confidentiality, or even anonymity, is provided for consumers, staff and stakeholders when possible to encourage more meaningful input.

Stakeholders reported that DCYF develops its Annual Progress and Services Report (APSR) in consultation with the Child Welfare Committee (formerly Child Welfare Advisory Board) and a variety of other DCYF advisory boards, interagency committees, and service networks.

Stakeholders in one site noted that the local office conducts ongoing consultation with service providers, foster care providers and other child and family serving agencies around service provision. They noted that the district office is very open to criticism and “approachable” and that there is a spirit of community ownership of child welfare issues.

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

Strength Area Needing Improvement

Item 40 is rated as a Strength because services are coordinated with a range of Federal and federally assisted programs through inter-agency collaboratives.

As noted in the Statewide Assessment, DCYF coordinates with a range of programs and providers, including:

- The New Hampshire Coalition Against Domestic and Sexual Violence,
- The Greenbook demonstration,
- New Hampshire Children's Trust Fund,
- The Department of Education,
- Other New Hampshire DHHS divisions, including the Division of Behavioral Health and DJJS,
- University of New Hampshire Family Research Lab, and
- The Court Improvement Program.

The Statewide Assessment also notes that DCYF and DJJS finalized a Memorandum of Agreement in 2002 for DJJS to place CHINS and delinquent youth into title IV-E funded foster care placements. The agreement addresses case planning, case reviews, permanency hearings, and termination of parental rights.

Stakeholders commenting on this topic identified a number of efforts on the part of DCYF to coordinate services with other agencies, including the State's Behavioral Health Provider agency, DJJS, the Bureau of Special Education, and the foster parent association. Stakeholders noted that staff from the mental health division provide training for DCYF at an annual conference and DCYF district offices commit time for workers and supervisors to participate. Stakeholders noted that DCYF shows a strong interest and willingness to collaborate, but sometimes workers are unable to follow through due to high caseloads.

X. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		Substantial Conformity	
	1	2	3	X4

New Hampshire is in substantial conformity with the systemic factor of Foster and Adoptive Parent Licensing, Recruitment, and Retention.

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

Strength Area Needing Improvement

Item 41 is rated as a Strength because foster-family homes and child care institutions are uniformly required to meet the State’s licensing and certification standards, as well as participate in initial and ongoing training.

According to the Statewide Assessment, Foster Family Care licensing requirements include fire and health inspections, applicant abilities, criminal and central registry checks, medical examinations, references, completion of pre-service training, and sufficient income to cover household expenses. Foster care licensing rules now includes staffed foster homes. Child Care, Residential, and group home institutions are required to meet the licensing standards and certification for payment standards in order to care for children. Foster parents and residential staff have yearly in-service training requirements that must be met prior to license or certification renewal. Finally, foster care licensing rules recently added staffed foster homes, where four or fewer youth can reside in a family-like setting with supervision provided by a rotating staff from a child placing agency or child care institution. Foster family care licenses are up for renewal every 2 years. Licensing for other types of foster care providers may be renewed from yearly to every 4 years depending on the type of care provided.

Stakeholders commenting on this issue noted that existing standards take into consideration children’s safety and health and are adhered to fairly stringently. A few stakeholders noted that the local fire officials have inconsistent interpretations of fire code provisions for foster homes (e.g. applying sprinkler systems requirements for institutions rather than that of private homes). DCYF

and the Foster Parent Association have had some success working with State fire officials to establish consistent requirements among localities. Stakeholders noted that children are not placed in homes until they are fully licensed, unless it is a relative home.

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

Strength Area Needing Improvement

Item 42 is rated as a Strength because the State’s licensing and certification standards are applied to all foster family homes and child care institutions.

According to the Statewide Assessment DCYF applies the same standards to all applicants.

Stakeholders commenting on this issue were in general agreement that the State’s standards apply to all foster homes and child placing agencies, including relatives serving as foster parents.

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

Strength Area Needing Improvement

Item 43 is rated as a Strength because criminal background checks and reviews of child maltreatment histories are consistently completed for foster families and child care institution staff. These clearances include checks in States where applicants previously lived.

According to the Statewide Assessment all foster and adoptive families must pass a New Hampshire criminal record background check, per licensing requirements. This is also a requirement by Bureau of Child Care Licensing (BCCL). The State’s rule for foster family care licensing requires DCYF to check other States where the applicant has previously lived. Implementing this requirement is challenging in that a national register for crime is not readily accessible and may be cost prohibitive.

Stakeholders reported that criminal background checks are conducted at the State and local levels and child maltreatment histories are checked out through the central registry.

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

Strength Area Needing Improvement

Item 44 is rated as a Strength because DCYF conducts recruitment activities throughout the State and works with community partners to help recruit foster and adoptive homes that reflect the racial and ethnic diversity of the children in care.

According to the Statewide Assessment, DCYF has a statewide foster parent recruitment plan and a contract to provide ongoing technical assistance with advertising support through local community efforts. Recruitment is targeted to attract ethnically diverse families who can best serve all of DCYF’s children. However, placement of children is not delayed if a foster family home of the same race or ethnicity is not located at the time of placement. While New Hampshire continues to have a large portion of the population identified as “White/Non-Hispanic,” there are areas in the State that have some diversity.

Stakeholders commenting on this issue indicated that the Director of Minority Services at DHHS has provided DCYF with a list of community partners and community contacts to help with recruitment of ethnic and racially diverse foster homes. Several stakeholders also indicated that each region has a budget for recruitment and has local recruitment teams.

Stakeholders reported that DCYF makes efforts to recruit and retain foster and adoptive families from backgrounds that reflect the racial, ethnic and other types of diversity found in the State. Stakeholders also recognized the support of current foster parents as an important recruitment and retention strategy. They cited Casey Family Services’ support of the Foster Parent Association under a contract with DCYF as instrumental in promoting a renewal of the association at the State and local levels over the past year and a half. The association was credited by stakeholders as contributing to the retention of 80 percent of foster homes over the past year.

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

Strength Area Needing Improvement

Item 45 is rated as a Strength because the State uses a variety of methods to facilitate the placement of children with adoptive families across jurisdictional lines.

According to the Statewide Assessment, a photo listing exchange of children and families (books) in Maine, Massachusetts, Vermont, Rhode Island, and Connecticut is maintained in New Hampshire for use in adoption situations cross jurisdictionally. In addition, the adoption supervisor attends quarterly meetings of the New England Adoption Managers where child specific cases are discussed and recruitment strategies are shared.

The Statewide Assessment also notes that New Hampshire children who are legally free for adoption are registered on the AdoptUSKids national website. Registered families from all States can send inquiries and/or approved home studies if they are interested in a specific child. Since the implementation of this website, in July 2002, DCYF has received several inquiries.

The Statewide Assessment indicates that in an effort to educate and promote the effective use of the Interstate Compact statute, DCYF, in May 2002, provided all district, family and probate courts, copies of the Interstate Compact on the Placement of Children Manual and Instructional Guide for juvenile and family judges. Barriers to the cross-jurisdictional issues are lessened when filing adoption petitions as judges have direct access to the federal laws.

Although the State has only a small number of children (approximately 12) currently waiting for an adoptive placement, DCYF makes concerted efforts to access cross-jurisdictional resources to find adoptive homes.

Stakeholders commenting on this issue noted that the State makes use of multiple cross-jurisdictional resources to ensure that appropriate placements are found for children in a timely manner. They cited AdoptUs Kids as one resource, as well as listing of children on the website. Stakeholders also described the statewide structure of the DCYF adoption unit, which facilitates adoptive placements across county lines. A few stakeholders noted that when the agency explores placements outside of the local jurisdiction, it is usually a placement with a relative or parent who has moved. However, stakeholders reported that adoptive placements have been found in other States for two waiting children with complex special needs through a contract with Downey Side for Children.

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 check beside the performance indicator, listed by item number in this form, that has been determined to be an area needing improvement.

Outcomes

I. Safety

 N **Outcome S1**
 Item 1
 X Item 2

 N **Outcome S2**
 Item 3
 Item 4

II. Permanency

 N **Outcome P1**
 X Item 5
 X Item 6
 X Item 7
 X Item 8
 X Item 9
 X Item 10

 N **Outcome P2**
 Item 11
 Item 12
 X Item 13
 Item 14
 X Item 15
 X Item 16

III. Child and Family Well-Being

 N **Outcome WB1**
 X Item 17
 X Item 18
 X Item 19
 X Item 20

 Y **Outcome WB2**
 Item 21

 N **Outcome WB3**
 Item 22
 X Item 23

Systemic Factors

IV. Y Statewide Information System
 Item 24

V. N Case Review System
 X Item 25
 Item 26
 X Item 27
 X Item 28
 Item 29

VI. Y Quality Assurance System
 Item 30
 Item 31

VII. Y Training
 Item 32
 Item 33
 Item 34

VIII. N Service Array
 X Item 35
 X Item 36
 Item 37

IX. Y Agency Responsiveness to the Community
 Item 38
 Item 39
 Item 40

X. Y Foster and Adoptive Parent Licensing, Recruitment, and Retention
 Item 41
 Item 42
 Item 43
 Item 44
 Item 45

