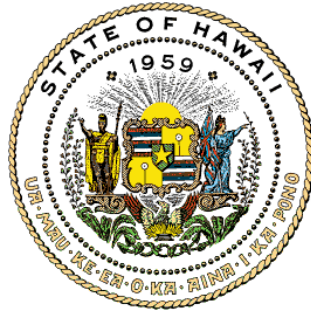


State of Hawaii  
Department of Human Services  
Social Services Division  
Child Welfare Services Branch



**CHILD AND FAMILY SERVICES  
PLAN (CFSP)  
Federal Fiscal Years (FFYs) 2015 - 2019**



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## Website Information:

The approved plan will be available in the Child Welfare Services section of the State of Hawaii, Department of Human Services' website.

<http://humanservices.hawaii.gov/ssd/home/child-welfare-services/>

State agency responsible for administering the Title IV-B programs under the plan:	Hawaii Department of Human Services (DHS)
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# **TABLE OF CONTENTS**

Section I: GENERAL INFORMATION

Section II: ASSESSMENT OF PERFORMANCE & PLAN FOR IMPROVEMENT

Section III: SERVICES

Section IV: COORDINATION BETWEEN STATES AND TRIBES

Section V: CHAFEE FOSTER CARE INDEPENDENCE PROGRAM (CFCIP) &  
EDUCATIONAL TRAINING VOUCHERS (ETV)

Section VI: MONTHLY CASEWORKER VISITS

Section VII: ADOPTION INCENTIVE PAYMENTS

Section VIII: CHILD WELFARE WAIVER DEMONSTRATION ACTIVITIES

Section IX: TARGETED PLANS WITHIN CFSP

Attachments

A. Disaster Plan

B. Training Plan and Schedule for SFY 2015

# ACRONYMS & ABBREVIATIONS

AA	Adoption Assistance (Payments) or Affirmative Action
AAPI	Adult-Adolescent Parenting Inventory (assessment tool)
ACCSB	Adult & Community Care Services Branch
ACF	Administration for Children and Families
AFCARS	Adoption and Foster Care Analysis and Reporting System
AFDC	Aid to Families with Dependent Children
AG	Attorney General
ANI	Area in Need of Improvement
APPLA	Another Planned Permanent Living Arrangement
APSR	Annual Progress Services Report
ARP	Administrative Review Panel
AQCRO	Audit, Quality Control and Research Office
BESSD	Benefit Employment and Support Services Division
CAMHD	DOH, Child and Adolescent Mental Health Division
CAMD	DOH, Child and Adolescent Mental Health Division
CAN or CA/N	Child Abuse and/or Neglect
CANS	Child/Adolescent Needs and Strengths Assessment
CAPTA	Child Abuse Prevention and Treatment Act
CASA	Court-Appointed Special Advocates
CBT	Cognitive Behavioral Therapy
CC	Community College
CCH	Catholic Charities Hawai`i (Social Service Agency)
CCI	Child Caring Institution
CCFFH	Community Care Foster Family Homes
CFCIA	Chafee Foster Care Independence Act
CFCIP	Chafee Foster Care Independence Program
CFS	Child and Family Service (Social Service Agency)
CFSP	Child and Family Services Plan
CFSR	Child and Family Services Review (case review system)
CIF	Child Information
CIP	Court Improvement Project
CJC	Children's Justice Center
CM	Case Management or Case Manager
CoF	Commission on Fathers
CoSW	Commission on the Status of Women
CPO	Chief Procurement Officer or Child Placing Organization
CPSS	Child Protective Service System (Computer Database System)
CQI	Continuous Quality Improvement
CRP	Citizens Review Panel
CSA	Child Sexual Abuse
CSE	Child Support Enforcement
CSEA	Child Support Enforcement Agency
CWLA	Child Welfare League of America
CWI	Child Welfare Intake
CWS	Child Welfare Services
CWSB	Child Welfare Services Branch

CWSBA	Child Welfare Services Branch Administrator
CY	Calendar Year
DA	Division Administrator
DAG	Deputy Attorney General
DAGS	Department of Accounting and General Services
DD	Developmental Disability
DDD	Developmental Disabilities Division
DH	Detention Home
DHHS	Department of Health & Human Services
DHS	Department of Human Services
DFE	Diagnostic Forensic (Physical) Exam
DOD	Department of Defense
DOE	Department of Education
DOH	Department of Health
DOT	Department of Transportation
DP	Domestic Partner (often same-sex)
DRS	Differential Response System
DV	Domestic Violence
EHS	Enhanced Healthy Start
EPRT	Early Permanency Roundtable
ESH	Emergency Shelter Homes
ETV	Education and Training Voucher
FAFSA	Free Application for Federal Student Aid
FAP	Family Advocacy Program (Military Social Services)
FC	Foster Custody OR Foster Care
FCT	Family Court
FFP	Federal Financial Participation
FHL	Foster Home Licensing
FJ	Family Journal
FASD	Fetal Alcohol Spectrum Disorder
FFY	Federal Fiscal Year
FSS	Family Strengthening Services, part of Hawaii's DRS
FSP	Family Services Plan
FTE	Full-Time Equivalent
FTF	Face-to-Face
FT	Full-Time
FY	Fiscal Year
GAL	Guardian Ad Litem
GAO	U.S. Government Accountability Office
GE	Geographic Exemption (for a child to attend public school outside of his/her area)
GIA	Grant in Aid
HAR	Hawaii Administrative Rule
HCAHT	Hawaii Coalition against Human Trafficking
HCWCQI	Hawaii Child Welfare Continuous Quality Improvement Project
HCWEC	Hawaii Child Welfare Education Collaboration
HPHA	Hawaii Public Housing Authority
HFYC	Hawaii Foster Youth Coalition
HHS	Health & Human Services
HIPAA	Health Information Portability & Accountability Act of 1966

HOPA	Head of Purchasing Agency
HRS	Hawaii Revised Statute
HSCADV	Hawaii State Coalition against Domestic Violence
HSP	Human Service Professional
HYCF	Hawaii Youth Correctional Facility
HYOI	Hawaii Youth Opportunities Initiative
ICF	Internal Communication Form
ICPC	Interstate Compact for the Placement of Children
ICSD	Information and Communication Services Division
ICWA	Indian Child Welfare Act
IHBS	Intensive Home-Based Services
IL	Independent Living
ILP	Independent Living Program
IPP	Individualized Program Plan
IT	Information Technology
ITAO	It Takes an 'Ohana (Resource Caregiver Organization)
JJT	Juvenile Justice Transfer
LAMM	Leadership Academy for Middle Managers
LAS	Leadership Academy for Supervisors
LCP	Legal Custodial Parent or Lead-Containing Parent
LEP	Limited English Proficiency
LG	Legal Guardianship
LGBTQ	Lesbian, Gay, Bisexual, Transgender/Transsexual, Queer/Questioning
LISS	Lanai Integrated Services System
LRP	Licensing Review Panel
MCV	Monthly Caseworker Visit
MCWSS	Maui Child Welfare Services Section
MDT	Multi-Disciplinary Team
MH	Mental Health
MICU	Management Information and Compliance Unit
MISS	Molokai Integrated Services System
MLT	Management Leadership Team
MOA	Memorandum of Agreement
MOU	Memorandum of Understanding
MEDQUEST	State of Hawaii Health Insurance
MQD	MedQUEST Division
MSO	Management Services Office
MST	Multi-Systemic Therapy
NCANDS	National Child Abuse and Neglect Data System
NCFAS	North Carolina Family Assessment Scale
NCTSN	National Child Traumatic Stress Network
NCWWI	National Child Welfare Workforce Institute
NMC	New Media Center (formerly known as WBC)
NPRM	Notice of Proposed Rule Making
NRC	National Resource Center
NRCCPS	National Resource Center for Child Protective Services
NRCLJI	National Resource Center on Legal and Judicial Issues
NYTD	National Youth in Transition Database
OA	Office Assistant

OARS	OIT Automated Request System
OBMR	Outcome-Based Management Report
OIT	Office of Information Technology
OPPLA	Other Planned Permanent Living Arrangement
OT	Overtime or 'Ohana Time or Occupational Therapy
OYS	Office of Youth Services
PA	Permanency Assistance (Payment)
PACT	Parents and Children Together (Social Service Agency)
PAS	Performance Appraisal System
PC	Permanent Custody
PD	Program Development or Position Description
PDA	Program Development Administrator
PDO	Program Development Office
PFC	Project First Care or Permanent Foster Custody
PHI	Protected Health Information
PI	Program Instructions or Principle Investigator
PIDF	Partners in Development Foundation (Social Service Agency)
PIP	Program Improvement Plan
PL	Public Law
PNS	Procurement Notices System
POS	Purchase of Service & Grants Management Unit
PPE	Pre-Placement Physical Exam
PPS	Post-Permanency Services
PRT	Permanency Roundtable
PT	Part-Time or Physical Therapy
PTSD	Post-Traumatic Stress Disorder
PUR	Period under Review
QA	Quality Assurance
RAI	Rapid Assessment Instrument
RC	Resource Caregiver (formerly known as Foster Parent)
RE	Reasonable Efforts
RFI	Request for Information
RFP	Request for Proposals or Review of Proposals
RH	Resource Home
RHL	Resource Home Licensing
RHY	Runaway and Homeless Youth
RIF	Reduction in Force (Workforce Layoffs)
RMS	Random Moments Study/System
RMTS	Random Moments Time Study
SAAMS	Substance Abuse Assessment and Monitoring Services
SAMHSA	Substance Abuse and Mental Health Services Administration
SAS	Safe and Sound Program
SACWIS	Statewide Automated Child Welfare Information System
SBBH	School-Based Behavioral Health
SDS	Staff Development Services (Training)
SFHR	Safe Family Home Report
SFY	State Fiscal Year
SHAKA	State of Hawaii Automated Keiki Assistance (Computer Database System)
SIP	Section Improvement Plan

SLH	Sessions Laws of Hawaii
SOU	Systems Operating Unit
SPAW	Safety, Permanency and Wellbeing Roundtables
SPC	Strategic Planning Committee
SPED	Special Education
SPO	State Procurement Office
SSA	Social Services Assistant
SSBG	Social Services Block Grant
SSD	Social Services Division
SSDA	Social Services Division Administrator
SSI	Social Security Income
SSO	Support Services Office
SSTD	Strengths and Stressors Tracking Device
STI	Sexually Transmitted Infection
TFC	Temporary Foster Custody
TPR	Termination of Parental Rights
TRO	Temporary Restraining Order
T/TA	Training and Technical Assistance
UH	University of Hawaii
UHMC	University of Hawaii, Maui College
VCA	Victims of Crime Act of 1984
VCM	Voluntary Case Management (Services), part of Hawaii's DRS
VFC	Voluntary Foster Custody
VFCA	Voluntary Foster Custody Agreement
VIH	Visits in the Home
VRSD	Vocational Rehabilitation & Services for the Blind Division
WWK	Wendy's Wonderful Kids (Social Service Program that finds adoptive homes)
ZTT	Zero to Three (Ages 0-3) or Zero to Three Court



## **SECTION I: GENERAL INFORMATION**

### **A. STATE AGENCY ADMINISTERING THE PROGRAMS**

The Hawaii Department of Human Services, (DHS) is the single State agency, located in Honolulu, Hawaii, mandated to lead, plan, and coordinate administration of Titles IV-B, IV-E, and XX of the Social Security Act.

### **B. AGENCY FUNCTIONS**

DHS is the State agency responsible for the following major State functions.

- a. Provide employment-related services, childcare services, and economic assistance to eligible families and individuals.
- b. Provide medical assistance programs to eligible families and individuals.
- c. Provide child welfare and adult community care services to eligible families and individuals.
- d. Provide a continuum of prevention, rehabilitation and treatment services and programs for at risk youth.
- e. Serve as a catalyst to provide Hawaii residents with affordable housing and shelter.
- f. Administer programs of vocational rehabilitation, independent living rehabilitation, services for the blind, and disability determination.

### **C. AGENCY STRUCTURE**

The Department has four divisions and four administratively attached agencies, overseeing programs, services, and benefits.

- a. MedQuest Division (MQD)
- b. Benefits, Employment and Support Services Division (BESSD)
- c. Vocational Rehabilitation & Services for the Blind Division (VRSBD)
- d. Social Services Division (SSD)
- e. Hawaii Public Housing Authority (HPHA)
- f. Office of Youth Services (OYS)
- g. Hawaii State Commission on Status of Women (CoSW)
- h. Hawaii State Commission on Fatherhood (CoF)

The DHS organizational chart is included.

The Department has designated the Social Services Division (SSD), Child Welfare Services Branch (CWSB) as the organizational unit responsible for the implementation and direct oversight of the Title IV-B and Title IV-E programs. The Child Welfare Program Development Office (PDO), housed within CWSB is responsible for development of services, and the Purchase of Service Unit (POS) is responsible for the procuring services.

State agency responsible for administering the Title IV-B programs under the plan:	Hawaii Department of Human Services (DHS)
Chief program official:	Patricia McManaman, Director
Organizational unit responsible for the plan:	Social Services Division Child Welfare Services Branch Program Development Office
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## **D. CHILD WELFARE SERVICE BRANCH (CWSB)**

### **1. OVERVIEW**

Hawaii’s CWSB is a state-administered child welfare agency that used to be called “Child Protective Services” (CPS). It is one of two branches under the SSD. CWSB provides services to all eligible children and families in the State of Hawaii when children have been abused and/or neglected and/or are at risk for abuse and/or neglect. These services include the following:

- a. Child Protection
- b. Family Support & Strengthening
- c. Foster Care
- d. Adoption
- e. Independent Living
- f. Licensing of Resource Caregiver Homes, Group Homes, and Child Placing Organizations

The CWSB organizational chart is included.

### **2. STRUCTURE & FUNCTIONS**

#### **a. Oversight and Support from SSD**

CWSB is one of two branches under the Social Services Division (SSD). The other SSD branch is the Adult and Community Care Services Branch (ACCSB). SSD also houses the Support Services Office (SSO), which serves the entire SSD through its four units: Staff Development Services (SDS), Management Information & Compliance Unit (MICU), Purchase of Services and Grants Management Unit (POS), and Systems Operations Unit (SOU).

The SDS unit provides Core Training for all new CWSB and ACCSB employees as well as ongoing in-service trainings on new programs, policies, and practice. SDS has a standard training schedule for new hires, but the Unit also provides training for employees who are hired in between the scheduled Core Trainings. Additionally, SDS provides trainings and educational programs to resource caregivers, partner social services agencies, the Department of Education, and community groups.

The other three SSO units provide support related to finances, regulatory compliance, contracts and information technology. MICU manages claims for federal funds and compliance with federal and State regulations for children in foster care. POS oversees contracts for an array of services provided by community agencies for CWSB and ACCSB families. SOU provides technical management, oversight, and support, with a primary focus on the CWSB computer system.

#### **b. Program Development (PD)**

Under the oversight of the CWSB, the Program Development Unit's statewide responsibilities include the following:

- i. Policy and Program Development and Analysis;
- ii. Policy Clarification;
- iii. National and International Research on Child Welfare Best Practices;
- iv. Interstate Compact on the Placement of Children;
- v. Contracting and Procurement;
- vi. Management Information System/Automation;
- vii. New Initiatives;
- viii. Programmatic Implementation of Federal and State Laws and Rules;
- ix. Legislative Response, Clarification, and Action;
- x. Finance, Budget, and Payment Operations; and
- xi. Continuous Quality Improvement.

In SFY 2013, two new Assistant Program Administrator positions were created within the PD Unit to address identified statewide needs. One position focuses on domestic violence (DV) and related issues, and the other prioritizes issues related to the lesbian, gay, bisexual, transgender/transsexual, and questioning (LGBTQ) population. The DV position was filled in November 2013, and the LGBTQ position was filled from March 2013 to May 2013, and again starting in August 2014.

#### **c. Direct Service Sections**

In addition to the PD Unit, CWSB has eight direct service Sections. This structure follows a comprehensive CWSB reorganization that occurred between 2009 and

August 2013. Four Sections serve Oahu, the most populated island, and four Sections serve the four major geographic areas of the neighbor islands (Kauai, West Hawaii, East Hawaii, and Maui County). The CWSB Administrative office and the PD Unit are located in downtown Honolulu, on the island of Oahu.

- i. **Oahu CWSB Section 1**, formerly known as Oahu Special Child Welfare Services Section, is made up of four units that serve the island of Oahu.

Two special services units manage all sex abuse and institutional abuse cases. One of these units investigates sex abuse and institutional abuse, while the other Unit provides case management for sex abuse cases. Staff shortages in the general investigation units have caused social workers from the special units to be assigned to non-sex abuse cases for investigation as well as case management. The investigation Unit is housed in the Kalihi area of Honolulu, and the case management/permanency Unit is located in Kapolei.

The two other units in Oahu Section 1 are general direct service CWSB units which provide assessment, case management, and permanency services to children and families. Both of these units are located in the Kalihi area of Honolulu and used to be part of the Diamond Head Section, which no longer exists.

- ii. **Oahu CWSB Section 2**, also known as West Oahu Section, and formerly known as Leeward Child Welfare Services Section, has four hybrid units. These units provide assessments, family maintenance, and permanency services to families that CWSB has identified as having safety concerns or being at high risk for child maltreatment. Each of the units has a Supervisor, social workers and/or human service professionals, assistants, aides and secretaries. Three units are located in Kapolei and one Unit is located in Ewa.

As of May 2014, this Section had a dozen social worker vacancies, partially because of a hiring freeze from October 2013 to January 2, 2014. Since the freeze was lifted, Supervisors have been prioritizing the hiring of eligible applicants. Until the Unit is fully staffed, Supervisors continue to consider different ways to move cases forward. One change was a merger of the case management and permanency functions; this occurred during the August 2013 CWSB reorganization.

- iii. **Oahu CWSB Section 3**, formerly known as Oahu Statewide Services Section, is made up of five units: two Statewide Intake Units, one Resource Home Licensing Unit (RHLU), one Statewide Federal Payment Programs Eligibility Unit (FPPEU), and one Closed Files Unit, which stores the Oahu CWS closed case files.

The co-located Intake Units operate 24-hours per day, 365 days per year, and receive and screen all incoming reports of alleged child abuse and neglect from the entire state. The intake units use a Differential Response System (DRS) to screen cases, assess safety and risk, and assign intakes to one of three programs:

- 1) CWS investigation: Intakes with identified safety factors with severe/high risks are assigned to CWSB units for investigation. A CWSB investigator must respond to these cases within 48 hours.
- 2) Voluntary Case Management (VCM): Intakes with no identified safety factors, but with moderate risk factors are assigned to VCM. The timeframe for response to VCM cases is five days.
- 3) Family Strengthening Services (FSS). Intakes with no identified safety factors and with low risk factors are assigned to FSS.

If VCM or FSS identifies safety factors in a case, the case is returned to CWSB for further investigation and services.

One of the intake units houses two VCL/CRT positions which were created after the August 2013 reorganization. The positions combine the Voluntary Case Management Liaison (VCL) and Crisis Response Team (CRT) position responsibilities. The workers in this new combination position assist the VCM providers, and also respond to urgent CWS cases where children are being taken into custody.

The intake units initiate the 48-hour Tracker system, used by the assessment workers/Unit Supervisors. The initiation begins with the risk assessment tool. The goal of the 48-hour Tracker is to help CWSB assessment workers respond timely to new CWS intakes.

Most new CWS cases are assigned to the units in the other Oahu Sections that handle investigations. On a new case, if a child needs to be placed out of his/her home urgently and a social worker is not available to go out immediately, a case assistant will respond and place the child any day or time. Then, the next day, an investigator will follow-up and fully assess the child and family. With the new Crisis Response Team that will be implemented in early 2015 on Oahu through the Title IV-E Waiver Demonstration Project, there will always be an available investigator, so that unnecessary removals will be minimized.

The FPPEU consists of a Supervisor, secretary, office assistant and eight eligibility workers. One eligibility worker is located on the island of Hawaii and the rest are on Oahu. After the reorganization, the assistant Supervisor became an eligibility worker to assist with Title IV-E determinations, and an office assistant position was added to the Unit to support the processing of Title IV-E determination cases.

FPPEU continues to work on Title IV-E determinations and reducing the numbers of determinations that are in pending status.

The Closed Files Unit consists of a Staff Service Assistant to assist the CWSB Sections with paying bills and paperwork related to personnel matters, and two Office Assistants who manage approximately 65,000 closed case records for CWSB at multiple locations and assist CWSB with retrieving case records as needed for information, re-openings or closings.

Oahu Section 3 faced recent challenges including handling constant changes and planning to implement a new Crisis Response Team (CRT) System. The new CRT services, made possible by Hawaii's Title IV-E Waiver Demonstration Project, will be implemented throughout Oahu in early 2015. The goal of CRT is to reduce to number of children who come into foster care for short periods of time (30 days or less).

Oahu Section 3 moves forward in 2014 with the goal of improving services to the families and children CWSB serves while at the same time looking at resources and how to best use them efficiently.

- iv. **Oahu CWSB Section 4**, also known as East Oahu Section, was formerly known as Central/Diamond Head Child Welfare Service Section. The East Oahu Child Welfare Services Section 4 (EOCWSS) was established on August 1, 2013, several years after the Reduction in Force and at the start of the August 2013 reorganization. This Section has four units that are all housed in one location (as of July 1, 2013). These changes have improved morale and the units are forming connections.

The creation of Section 4 included the creation of a new caseworker role that combines the responsibilities of permanency workers and case managers. Before the August 2013 reorganization, these were two distinct positions handling different types of cases. Now the "new" permanency workers are assigned cases after the investigation of an intake is completed, and the permanency worker has case management responsibilities until the case is closed, whether through reunification, adoption, guardianship, or emancipation from foster care. This shift in responsibilities has caused some stress for staff who had previously only serviced children and youth after a determination that reunification with the child's birth parents was not appropriate.

Oahu Section 4 filled some staff vacancies before the October 2013 hiring freeze and also after the freeze lifted in January 2014. Adding new staff relieved some of the pressure on the existing staff, but recruiting and retaining staff continues to be a challenge. In summer 2014, a Unit Supervisor retired and a new Supervisor was hired.

- v. **East Hawaii CWSB Section (EHCWSS)** is made up of three units. EHCWS Unit 1 (formerly called Special Services Unit) consists of a Child/Adult Protection Specialist (C/APS) Supervisor; two Human Service Professional (HSP) Case manager/Permanency Social Worker IV positions, one of which is vacant at this time; one HSP Case manager/Permanency Social Worker III position; two HSP/Social Worker III positions (licensing social workers); and support staff that includes a Secretary, three SSA III (Social Services Assistant) positions, and one SSA IV position, one of which is vacant at this time.

EHCWSU2 (formerly called Central Unit) is comprised of a C/APS Temporary Assignment (TA) Supervisor, which is vacant; one C/APS and two HSP/Social Worker IV positions that are Assessment Workers; three C/APS Social Worker

positions that are Case managers/Permanency Social Workers; and support staff that includes a Secretary and three SSA IVs.

EHCWSU3 (formerly called East Hawaii South CWS) consists of a C/APS Supervisor; one C/APS Social Worker position; two HSP/Social Worker IV positions and one HSP/Social Worker III position that are Assessment Social Workers; three HSP/Social Worker III positions, two of which are vacant; and support staff that includes a Secretary, which is currently vacant, and four SSA II positions, one of which is vacant at this time.

EHCWSS' primary challenges are related to changes in responsibilities and staffing.

During the August 2013 reorganization, the Voluntary Case Management Liaison (VCL) position was changed to a case manager/permanency Social Worker position because that level of experience was needed to meet the standards and expectations of CWS cases. As a result, the EHCWSU1 Supervisor monitors the Voluntary Case Management (VCM) cases and an EHCWSU1 SSA enters VCM logs into CPSS. Learning about VCM cases has consumed a great deal of the Supervisor's time, which has reduced Supervisor's availability for other responsibilities. To ensure a smooth transition, the Supervisor and SSA work collaboratively with the VCM Supervisor and the P.A.R.E.N.T.S., Inc. Director. (P.A.R.E.N.T.S., Inc. is the DHS-contracted agency which provides VCM services for East Hawaii.)

A change in geographic coverage has created a time management burden for some workers. Historically, East Hawaii covered the East side/Hilo side of Hawaii Island; however, in early 2013, EHCWSS's coverage extended to the Kau/Pahala area. This has not been a significant burden on the Unit overall, because there have only been four intakes in the Kau area since the change, and none of those intakes resulted in a child entering foster care. However, the workers (especially the standby workers) have found the ninety minutes travel time to Kau (one-way) to be a challenge to their schedules.

East Hawaii continues to have its share of vacancies, as indicated above, and recruitment and retention efforts are ongoing. The abolishment of the Clerk Typist (CT) positions a few years ago continues to impact the Section's operations. Duties previously performed by the CT have been added to the work of the Office Assistant and Secretaries. In the interim, the Section has utilized practicum students or volunteers from the University of Hawaii at Hilo, Hilo Community College, Alu Like, Inc., and First to Work to assist in performing administrative responsibilities, such as telephone coverage, shredding of confidential documents, photocopying, faxing, filing, and typing. Unfortunately, these volunteers have either been time-limited or consistently unreliable. A more stable and consistent solution is needed, because the current practice is unpredictable and inadequate.

The most recent hiring freeze, from October 2013 to January 2014, has hindered staff recruitment and lowered morale.

During SFYs 2013 and 2014, some social workers have had difficulty managing their cases, unable to transfer, close, and log their contacts on a timely and consistent basis. To address the problem of timely logging, following their Morning Briefings, the social workers dedicate one hour each morning to log their contacts from the previous day. The problem has primarily been with social worker performance, and the Supervisors continue to work with the staff to not only help them be successful in their work performance, but to also ensure that the program participants are provided with appropriate and timely services.

Through these challenging times, the East Hawaii Section's three CWSB units are consistently willing and able to assist and support each other whenever needed.

- vi. **West Hawaii CWSB Section (WHCWSS)** is made up of 2 units – both units are hybrid/tribrid, providing assessment, case management, and permanency services. The licensing functions are performed by one worker who is supervised by the Section. This Section serves children and families on the West side/Kona side of Hawaii Island.

West Hawaii Section has struggled for several years to meet standards and expectations. West Hawaii Section regularly lags behind other Sections on investigation response time, making monthly face-to-face contact with all children, conducting necessary safety and risk assessments, inputting case logs in a timely manner, and other important measures. Some of the problems have obvious causes, like staff shortage and the resulting high case loads. Throughout much of SFY 2013 and SFY 2014, West Hawaii has had no permanent Section Administrator and no Unit Supervisors. The West Hawaii staff works hard, but assistance and guidance is needed for them to reach their performance goals.

While CWSB has focused for many years on fortifying the West Hawaii Section workforce and its systems of practice to better serve the families and children of the greater Kona area, in SFYs 2013 and 2014, CWSB implemented a new strategy for addressing the ongoing problems in West Hawaii Section. Rather than providing West Hawaii with information, tools, support, and guidance from afar, CWSB provided hands-on assistance. For example, Staff Development trainers travelled to West Hawaii to work with six new staff members to help reinforce learning from Core training, and Section Administrators and Supervisors from other Sections regularly spent several days at a time in West Hawaii assisting the Section in concrete ways.

One of the visiting Section Administrators set up tracking systems to help the West Hawaii staff know what visits needed to occur each month. One visiting Supervisor worked with the Section on closing cases that needed no more services from CWSB. A permanent Supervisor for one of the West Hawaii units began work on June 16, 2014. CWSB is beginning to see the results of



these intensive efforts. For example, one recent month, monthly face-to-face visits had improved more than 25%.

The staff in West Hawaii report the positive impact of the statewide efforts to assist their Section, as illustrated by this response to the May 2014 Workforce Survey:

I am from West Hawaii CWSB office. Prior to 1/2014, . . . I was going to retire as soon as I could. Since that time, current supervisors and section [administrators] have turned things around. We [West Hawaii staff members] have been . . . thanked for hanging in there. . . . [C]lose supervision of supervisors/section admin/and their bosses is paramount in offices functioning to greatest capacity. . . . [I]t gives new inspiration.

Until WHCWSS has a fully-trained, permanent, on-site Section Administrator and Unit Supervisors, Administrators and Supervisors from other Sections will continue to share the load and assist West Hawaii in achieving positive outcomes with families. CWSB goals for West Hawaii include a fully staffed Section and improvement in all areas of the CFSR.

- vii. Maui CWSB Section (MCWSS)** covers all of Maui County, which includes the islands of Maui, Molokai, and Lanai. Kahoolawe is also an island in Maui County, but it is uninhabited and therefore needs no services. There are two units on Maui (East Unit and West Unit), one Unit on Molokai, and a Sub-Unit on Lanai. All units are considered hybrid units, providing assessment and case management/permanency, except the East Unit. The East Unit has workers who provide assessment and case management/permanency, but the East Unit also houses the sole dependency worker for all of MCWSS. Foster home licensing is performed by two workers under the supervision of the Section Administrator.

The Maui Section differs from the other Sections in the State in that case management duties, including reunification, are performed by permanency workers, and a separate dependency worker handles all of the adoptions and legal guardianship cases on Maui. Elsewhere in the State, case management, permanency, and dependency duties have been merged and become the expectation for one worker.

The Maui Section did not reorganize during the August 2013 CWSB reorganization. Because Maui Section's performance and outcomes are consistently the best in the State, CWSB Administration decided to not "mess with success," and kept Maui's functional structure intact.

The Lanai social worker position is currently vacant, and DHS is in the process of recruiting to fill it. In the interim, Lanai is covered by Maui and Molokai; social workers fly to Lanai to service the island at least once a month.

SFY 2013 was a good year for MCWSS. The Section filled positions that had been vacant for over a year. Vacancies that have been filled in MCWSS include an East Supervisor and a West Supervisor, two permanency workers, one assessment social worker, and two Office Assistants. The Office Assistants perform clerical work. With the additional staff, MCWSS has been able to distribute the caseload to be more manageable, and thereby look more closely at service delivery for Maui County children and families. MCWSS has explored different ways to improve services. One system the Section implemented is a “one aide assignment,” in which one aide follows the children in the case from beginning to end. Despite the changes from the assessment worker to the permanency worker and then to the dependency worker, the aide remains the same. An aide is a Social Services Assistant who primarily transports clients and supervises ‘ohana time (the children’s visits with parents). The results have been positive. There have been no disruptions to ‘ohana time, annual medical and dental appointments, therapy, and school meetings. The assigned aides know everything about the children on their caseloads and they have been able to practice identified CFSR items such as items 13, 16, 21, 22, and 23. The “one aide assignment” provides Maui County children with one stable person during the life of their CWSB case, and the aides provide invaluable information to the social workers.

Managing a Section that is separated by bodies of water is difficult and requires travel between the islands. The Section Administrator and/or Supervisors visit staff on Lanai and Molokai on a monthly basis to provide guidance and support. However, travel to those islands is challenging because of limited flights and ferry access. As a manager, the Section Administrator depends on the telephone and email as the primary forms of communication with staff located on Lanai and Molokai. Providing services to children and families is also difficult because many of the providers do not reside on these islands; they fly in to service the island and then fly out at the end of the day. Having services by providers on the island would be ideal and is a goal for which these communities can strive; however, at this time, this remains a challenge.

Communication has to be a priority in order to coordinate timely response and service delivery. Open communication amongst all of the units is essential for consistent practice across the Section. A lot of energy and time is put into communicating via Morning Briefings, monthly Supervisors’ meetings, monthly staff meetings, etc.

Morning Briefings are very valuable to MCWSS. It is here that staff is informed about what is occurring in the Section, and the Briefings provide an opportunity to clarify expectations. Morning Briefings occur every day except Tuesdays because Tuesday is MCWSS Family Court day. A specific topic and CFSR item(s) have been identified for each day. For example, Monday meetings are run by the Section Administrator and cover the CFSR outcomes and items. On Wednesdays, the East Unit Supervisor covers the Briefing and the discussion focuses on court-related concerns such as court reports, petitions, change in status, reasonable efforts, etc. The CFSR items discussed would be 6 and 7, or any item that may be affecting the Section at that time. Thursday Briefings

review MCWSS systems and a CFSR item, and Fridays' discussions address licensing issues, 'ohana time, and travel-related concerns, in addition to items 18, 19, and 20. The Morning Briefings are an area of strength for MCWSS; they support clarity and consistency with all staff.

**viii. Kauai CWSB Section (KCWSS)** oversees all of Kauai County, which includes the islands of Kauai and Niihau. The KCWSS includes three units: Central, East, and West Units. All three are considered tribrid units, providing assessment, case management, and permanency services. KCWSS employs a system of "one case – one worker," meaning that one social worker is assigned a case and that same worker follows it from assessment, through case management, and through permanency. The foster home licensing function is assigned to two workers under the Section Administrator. Services to Niihau Island are provided by the West Unit. In March 2014, five positions in KCWSS were vacant: one Supervisor, three social workers, and one social service assistant. KCWSS is working diligently with personnel staff to fill these vacancies.

Morale has been negatively affected by vacancies, many PIP directives, and complex cases that include children with high end mental health needs coupled with a lack of available placement resources. Workers in this Section are happy to comply with expectations of the job, but at times feel overwhelmed. However, KCWSS focuses on positives and achievements to relieve those feelings. KCWSS works on reinforcing Section pride. KCWSS acknowledges the need to improve its rate of monthly face-to-face visits between workers and children on their caseload. The Section Administrator and Supervisors are working together to address this issue.

A few years ago, KCWSS began the 'Aha project to improve communication and collaboration with the community. One aspect of the project focused on events to connect young men in foster care with positive adult male role models. Community stakeholders have recently taken over this project, with KCWSS supporting the effort and participating in events to stay connected with these community partners.

As in the past, when data is broken down by Section, Kauai stands out as particularly strong in initial response time for investigations. Kauai Section staff works across Unit lines to ensure immediate response to investigations. If the assigned Unit is unable to respond, a worker from another Unit meets face-to-face with the family on a new case, completes a child safety assessment, and then hands off the remainder of the investigation to the assigned unit.

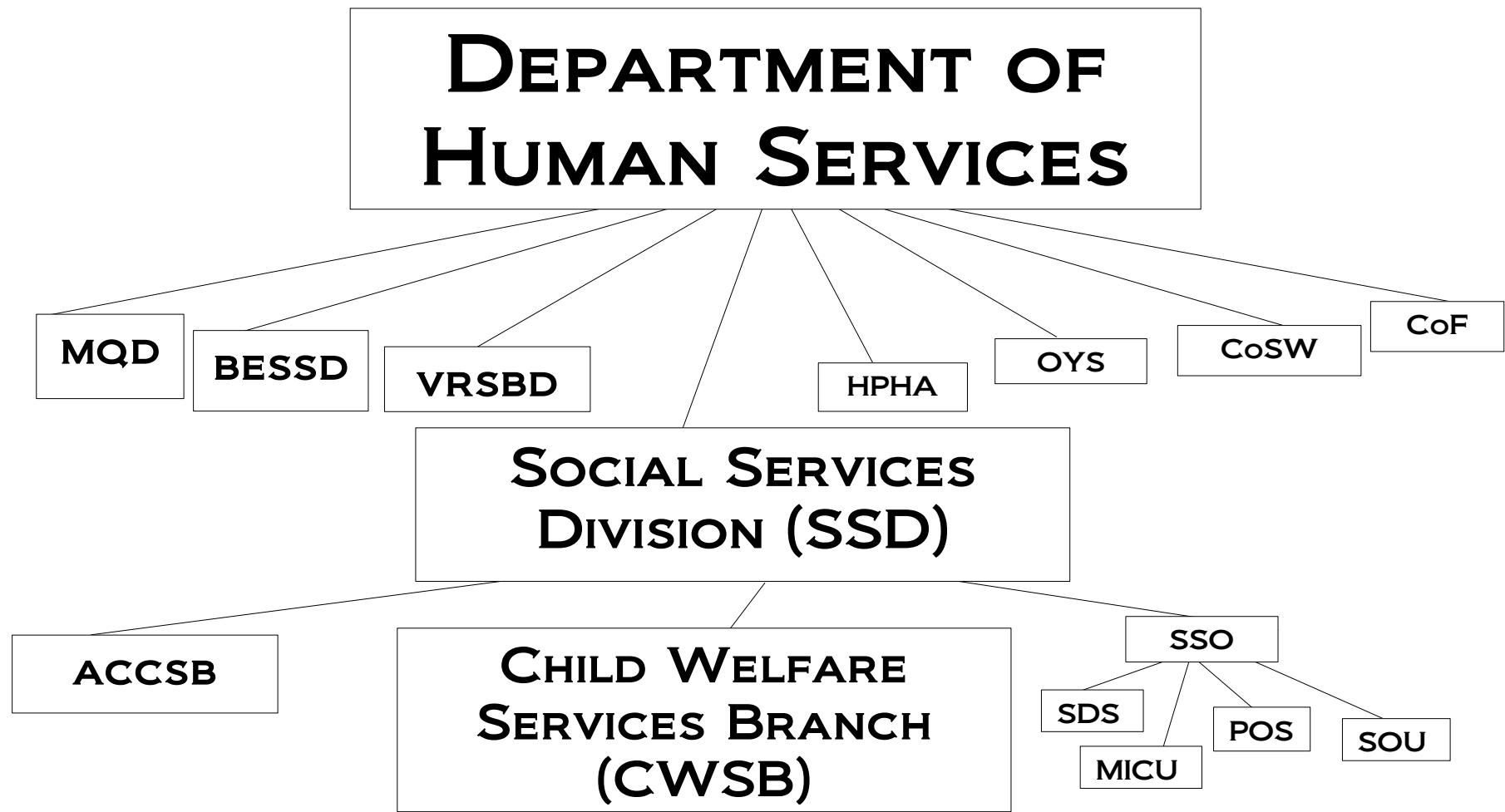
KCWSS is working to implement other methods of learning the CFSR items and outcomes. Maui and East Hawaii Sections have used different strategies to help staff learn and connect these items and outcomes and to improve daily practice. KCWSS is looking to these Sections and other best practices through the State for successful CFSR strategies to implement on Kauai.

As of May 2014, CWSB had 411 funded positions with 318 employees (77%) and 93 position vacancies (23%). The total number of funded positions in CWSB changes from year to year, depending on budget allocations, hiring freezes, and positions being abolished due to a reduction in force (RIF). DHS continues efforts to recruit for open positions, but the 2009-2010 RIF has had lasting negative consequences.

### CWSB Staff Positions and Vacancies

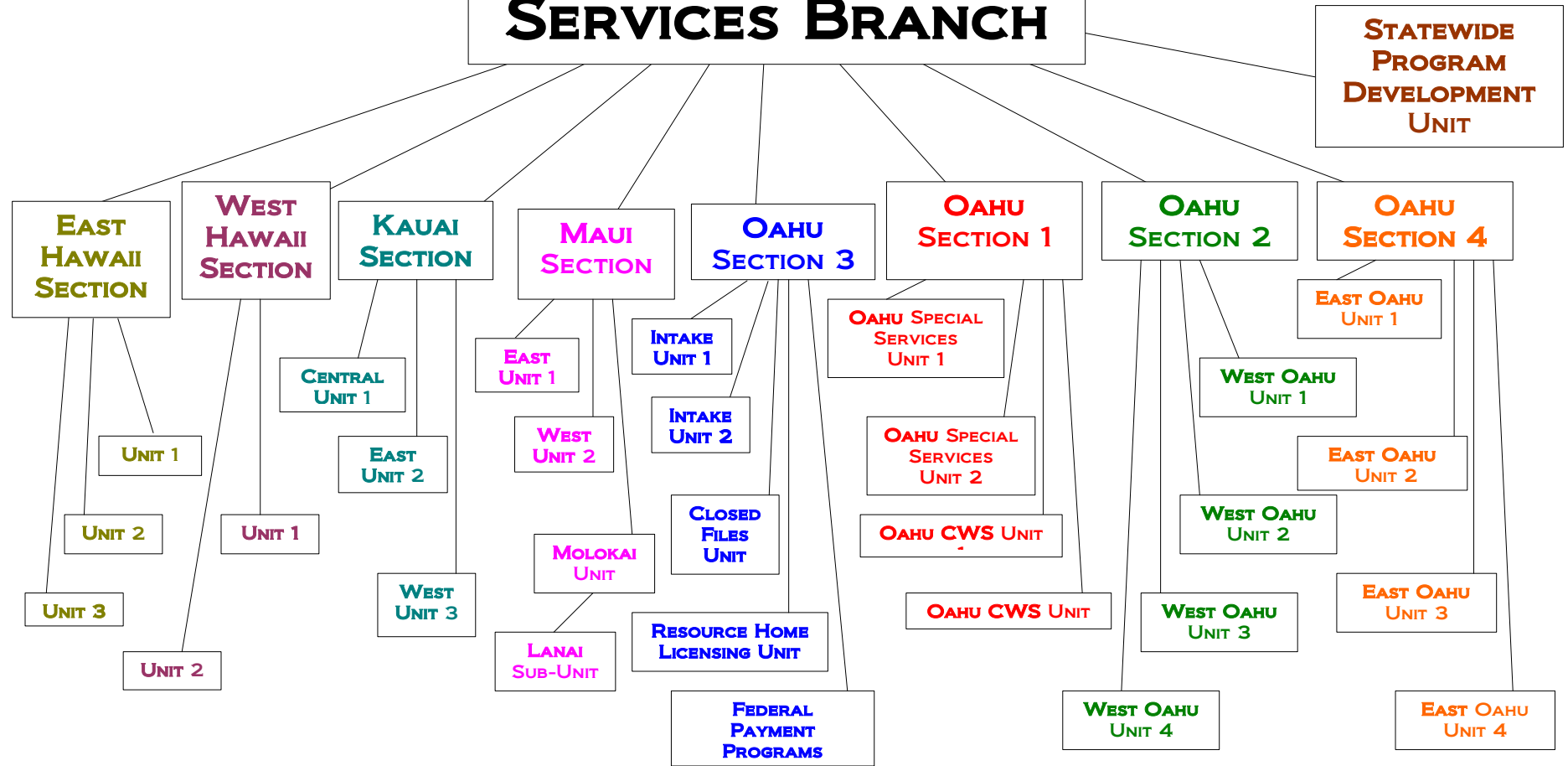
	June 2010	June 2011	April 2012	May 2013	May 2014
<b>Total Number of CWSB Staff Positions</b>	Over 500	444	417	428	411
<b>Number of Vacant CWSB Positions</b>	unknown	91	103	94	93
<b>Percentage of Vacancies</b>	unknown	20%	25%	22%	23%

Data Sources: DHS Directories, Past APSRs, April 2012 CWSB Workforce Survey, May 2014 CWSB Workforce Survey & Direct Staff Inquiry



MQD = MedQuest Division (State Health Insurance)	ACCSB = Adult & Community Care Services Branch
BESSD = Benefit, Employment & Support Services Division	SSO = Support Services Office
VRSBD = Vocational Rehabilitation & Services for the Blind Division	SDS = Staff Development Services (Training)
HPHA = Hawaii Public Housing Authority	MICU = Management Information & Compliance Unit
OYS = Office of Youth Services	POS = Purchase of Service & Grants Management Unit
CoSW = Commission on the Status of Women	SOU = Systems Operations Unit
CoF = Commission on Fatherhood	

# CHILD WELFARE SERVICES BRANCH



## **E. OUR MISSION**

The mission of the State of Hawaii, Department of Human Services (DHS) is to provide timely, efficient, effective programs, services, and benefits in order to empower the most vulnerable populations in our State to expand their capacity for self-sufficiency, self-determination, independence, ability to make healthy choices, improve their quality of life and personal dignity. Every day, our committed staff works toward the fulfillment of this mission.

The overarching purpose, functions and goals of DHS, as described above, provide an understanding of the governing policies that shape and direct DHS operating programs, including Child Welfare Services Branch (CWSB). Under the leadership of the DHS Director, along with strong internal and external partnerships, DHS has created opportunities to expand and improve access to services for CWS families and children.

## **F. OUR VALUES**

The Department of Human Services has five values that guide its practice:

1. Customers are our highest priority.
2. We take personal responsibility for our actions.
3. We are accountable for outcomes.
4. We create opportunities through partnerships.
5. We provide options for self-sufficiency.

## **G. OUR VISION**

We envision that in Hawaii, all children will grow up and thrive in a safe, supportive, and stable home environment where family connections and cultural practices are preserved, and community members collaborate and take responsibility for the welfare of every child. Ultimately, all children will reach their full potential and become productive members of their communities.

For the next five years, Hawaii CWSB envisions providing a system of services that is well-coordinated, integrated, culturally relevant, family-focused, family-friendly, data-informed and data-driven, and is fully consistent with the service principles noted below.

- 1) **Safety & Wellbeing** - Safety and wellbeing of children and of all family members is paramount.
  - Preserve the family and avoid emotional trauma of removal by providing in-home services when child safety can be assured
  - Strengthen domestic violence services to victim parents, victim children, and batterers.
  - Use trauma-informed assessments and treatment for all family members
  - Collect and use data to measure safety and well-being outcomes
- 2) **Holistic** - Services to focus on the family as a whole
  - Promote strong partnership between service providers and families
  - Engage and identify individual and family needs
  - Provide strengths-based services
  - Identify, enhance, and respect family's wellbeing needs
  - Provide services from a culturally-informed perspective

- 3) **Child and Youth Development** - Focus on age appropriate services and healthy physical, social, and emotional development
  - Ensure proper medical and dental care for children and youth
  - Assist caregiver in monitoring child for developmental milestones
  - Encourage and promote developmentally appropriate interaction among family members
  - Monitor and track use of psychotropic medication
  - Achieve timely permanency for all children
  - Prepare youth for emancipation through independent living training and support services
  
- 4) **Best Interest Services** - Services to focus on the child's best interest
  - Focus on the child/family needs
  - Provide individualized service plans that match services to the child/family needs
  - Prevent the child's removal with In-Home Safety Plans
  - When it is necessary to remove children from the family home, do so following specified protocol to minimize the children's trauma.
  - Provide both short term and long term interventions to expedite achieving permanency for all children in foster care
  
- 5) **Timely, Flexibility, Accessibility** - Timely coordination of accessible, tailored services
  - Provide timely referrals to services
  - Reduce the number of families placed on waiting lists for services
  - Whenever possible, serve families in their home or in easily accessible locations within their communities
  - Provide transportation services in remote areas
  - Deliver services in ways that are respectful of the family's language, cultural values and beliefs
  - Tailor services to each family and individual's unique needs.
  
- 6) **Services organized as a continuum** – Services are linked together as a whole
  - Define measurable outcomes with service providers
  - Communicate clear expectations with families
  - Use outcome data to make decisions regarding reunification and related matters
  - In the Family Services Plan (FSP), link each service to other services and supports for the whole family
  - Promote collaboration among providers and each family's natural supports.
  
- 7) **Engagement with community partners** - Collaborate and involve community partners
  - Strengthen partnership with stakeholders and community organizations:
    - i. Birth Parents Advocacy groups
    - ii. Court Improvement Project - Family Court
    - iii. Department of Consumer Affairs – Youth Credit Reports
    - iv. Department of Labor – Youth Employment
    - v. DOE – Educational Stability and Special Education Programs
    - vi. DOH – Child and Adolescent Mental Health
    - vii. Domestic Violence Coalition – Shelters, Treatment Providers
    - viii. Honolulu Police Department – Family Violence Detail



- ix. Honolulu Prosecutor's Office – Sex Abuse and Serious Harm Cases
- x. Human Trafficking Coalition
- xi. It Takes an Ohana - Resource Family Association
- xii. Military Bases - Family Advocacy Centers
- xiii. Foster Youth and Former Foster Youth
- xiv. Others

8) **Intensity and duration of services** – Meet the family's needs and ensure the child's safety

- o Provide services of the correct intensity to keep the child safe and meet family's needs
- o Provide services long enough to meet the family's needs and ensure safety
- o Facilitate family support to prevent abuse/neglect and prevent removal
- o Provide Crisis Intervention services, including in-home services to preserve the family
- o Understand the evolving needs of the family and the child, and adjust intensity and duration of services accordingly
- o Provide services to strengthen family functioning and prevent crisis

Hawaii acknowledges the significance of fully embracing the concept of “it takes a village to raise a child” where families and communities must take responsibility to end/prevent child abuse/neglect, and to ensure that the children of Hawaii are safe, happy, thriving, and afforded the best opportunities during their development years with the goal of ultimately becoming productive members of society.

## **H. OUR COMMITMENT**

Hawaii's commitment for the next five years is deeply rooted in the Department's overarching mission noted above, our vision, and our CWS Family Partnership and Engagement Practice Model values. Consistent with its Title IV-E waiver demonstration project, in the next five years, Hawaii is committed to reducing the unnecessary entry of children into foster care, providing safety plans and in-home services to strengthen families' ability to care for children at home, and ensuring timely permanency for foster children who have been in foster care nine months or longer.

For the next five years, Hawaii will use lessons learned from the past to ensure best and promising practices are institutionalized, and that data is utilized to assess the effectiveness of services based not only on compliance numbers, but on well-being outcomes for children and families.

## **I. COLLABORATION**

One of Hawaii CWSB's many strengths lies in its ability to embrace collaboration and warmly engage its internal and external partners, which has resulted in breaking down boundaries between professionals at various levels and encouraging professionals to solve problems effectively as a team. Looking back over the past five to ten years, Hawaii has recently seen more collaboration than ever before. In current practice, intense and meaningful collaboration for all projects and initiatives is assumed and inevitable. CWSB understands that true collaboration inspires staff to create the best possible systems and practices. Hawaii CWSB has seen the

commitment that its community partners have to contribute to the overall mission of the organization and the improved safety and well-being of the families in Hawaii.

### **1. Title IV-E Foster Care Eligibility Program Improvement Plan**

As FFY 2014 comes to a close, Hawaii continues to sustain the collaboration efforts with current internal partners, such as Purchase of Service (POS) Unit, Foster Home Licensing Unit, Information Technology System Office, Section Administrators, frontline Supervisors, Federal Payment Programs Eligibility Unit (FPPEU), Fiscal Management Office (FMO), and external partners, such as Family Court – Court Improvement Project and the Attorney General’s office, in order to meet Hawaii’s goals for Title IV-E Foster Care Eligibility Program Improvement Plan (April 2014 – March 2015). This Title IV-E Eligibility PIP is only related to foster care eligibility and not adoption assistance or kinship guardianship assistance eligibility. As Hawaii CWSB fleshes out its CFSP in concrete action steps over the next year, many pieces of the Title IV-E Foster Care Eligibility PIP will be incorporated into the plans.

### **2. Hawaii Child Welfare Continuous Quality Improvement Project**

Hawaii will continue collaborating with the University of Hawaii, Maui College to support Hawaii’s Continuous Quality Improvement (CQI) work. This collaboration involves meetings with Maui College CQI lead Heide Lilo and her staff, CWS program development staff, purchase of services staff, and our information system manager in CPSS and in SHAKA. With the planning and implementation of the Title IV-E Waiver, UH-Maui will also be able to facilitate and coordinate Hawaii CWSB’s Safety, Permanency, and Wellbeing (SPAW) services. SPAW meetings are similar to Permanency Roundtables and have the goal of expediting permanency. SPAW is one of the initiatives of Hawaii CWSB’s Title IV-E Waiver Demonstration Project. UH-Maui will also continue to conduct CFSR reviews of Hawaii CWSB’s cases, and orientate and assist with training of CWSB staff and partners on the new CFSR Round 3 review tool.

### **3. Title IV-E Waiver Demonstration Project**

In October 2013, the federal Administration for Children and Families (ACF) awarded Hawaii a Title IV-E Waiver. This opportunity allows Hawaii implement programs to reduce its foster care population, using the Title IV-E funds that are “saved” by fewer children being in foster care. Since receiving notice of the Waiver award, Hawaii has engaged in major collaborative work with both internal and external partners to develop interventions, train staff on the interventions, and prepare for implementation. Implementation of the five-year Title IV-E Waiver project begins on January 1, 2015. The project continues through September 2019. Collaboration with internal and external stakeholders will continue on a regular basis, as Hawaii evaluates the success of the Waiver Demonstration Project.

### **4. Voluntary Extended Care to 21 – Imua Kākou**

Another example of strong collaboration among internal and external partners, including the Family Court, is the State’s success in preparing for and implementing extended foster care maintenance payments, adoption assistance, and kinship guardianship assistance for certain young adults up to age 21. The law was passed in July 2013 to be implemented in July 2014. With the support and intense involvement of strong internal

and external partners, Hawaii CWSB quickly developed the programs which became available to this target population on July 1, 2104. The target population consists of former foster youth who emancipated from foster care or who were adopted or entered legal guardianship at age 16 or older, and who are under the age of 21. Additionally, to be eligible for the program, the young adult must be employed, in school, or actively working toward one or the other. Ongoing communication is essential to this new program; CWSB collaborators participate in monthly and quarterly meetings to address any issues that arise.

#### **5. CAMHD and DDD**

Child Welfare Services Branch (CWSB) continues to work with the Department of Health, Child and Adolescent Mental Health Division (CAMHD) on addressing the needs of youth with co-occurring mental health concerns and developmental disabilities through an implementation grant awarded to CAMHD by the Substance Abuse and Mental Health Services Administration. The goal is to identify and provide services to meet the needs of this population through collaboration with child serving agencies including CAMHD, CWSB, and the Department of Health's Developmental Disabilities Division (DDD) using a family-driven, youth-guided approach. Partnerships in this work continue to strengthen CWSB's work with these and other agencies, which helps improve service access and delivery to meet the needs of children served by CWSB.

#### **6. Domestic Violence**

Hawaii CWSB will continue to collaborate with the Hawaii State Coalition against Domestic Violence (HSCADV), DV service providers, the statewide Stop Violence against Women Planning Committee, Family Court, the Court Improvement Project, and community partners through various meetings and work groups to address the serious problems of families where violence occurs. The HSCADV and providers attended Request for Information meetings and provided input to assist in developing the scope of services for future procurements, and the HSCADV offers training and guidance to providers regarding service delivery.

#### **7. Continue to Enhance**

In the next five years, Hawaii plans to continue and enhance relationships and collaboration with agencies that address Human Trafficking, LGBTQ issues, and Homelessness in order to improve services to these newly-targeted, under-served populations.

#### **8. National Level**

During the past five years, Hawaii has also increased its connections not only with its local partners, but with connections to other States in the nation through list-serve services and national conferences and webinars. Hawaii appreciates the connections and collaborations with Children's Bureau staff such as Pat Pianko from Region IX, Krista Thomas –Waiver DC office, and Mark Jazo, from the Bureau's systems office.

#### **9. Use of Modern Technology**

The use of modern technology, e.g., iPhones and laptops, has enabled collaborations among national partners with go-to-meetings and webinars, as well as with local partners via teleconferencing. For the next 5 years, Hawaii plans to increase its use of mobile technology to allow stronger collaboration among CWS staff and our partners.

## **10. Developing the CFSP**

Through Hawaii CWSB's CFSR PIP, and other initiatives, and through on-going existing consultation/collaboration work groups with internal and external partners, such as the CFSR PIP steering committee, Citizen Review Panel (CRP); Section Administrators, Unit supervisors, CWS Advisory Council, and Strategic planning committee, data were shared and discussions included strengths, areas needing improvement, and areas to focus on for the 2015-2019 CFSP. Ongoing opportunities were provided to internal and external partners including reviewing of data and identifying the goals and objectives of this 2015-2019 Child and Family Services Plan (CFSP) as well as identifying current strengths or concerns. Various opportunities will continue to be extended via work group discussion, monthly/quarterly committee meetings, and team meetings with our partners to ensure implementation and monitoring of our CFSP. CWSB is in the process of reestablishing its statewide CQI Council, which will significantly help ensure implementation and monitoring of this CFSP. Hawaii CWSB's collaboration has included and will continue to include these agencies:

- a. Birth Parents Advocates
- b. Casey Family Programs
- c. Catholic Charities Hawai'i
- d. Child and Family Services
- e. Court Improvement Project
- f. CWS Advisory Council
- g. Department of Education
- h. Department of Health – Maternal and Child Health
- i. Department of Health – Child Adolescent Mental Health
- j. Early Periodic Screening Diagnostic Treatment providers
- k. Enhanced Healthy Start
- l. EPIC 'Ohana, Inc.
- m. Family Programs Hawaii
- n. Frontline Administrators, Supervisors, Caseworkers, Assistants, and Aides
- o. Gartner Consultant; SHAKA, E-world – Information Technology Systems
- p. Hawaii Children's Trust Fund
- q. Hawaii Citizen Review Panel (CRP)
- r. Hawaii Coalition for Domestic Violence
- s. Hawaii Court Improvement Project (CIP)
- t. Hawaii Early Intervention Council (DOE/DOH)
- u. Hawaii Family Courts
- v. Hawaii Foster Youth Coalition & Hawaii Youth Opportunities Initiatives
- w. Hawaii Coalition Against Human Trafficking
- x. Hawaii Strategic Planning for Homelessness
- y. It Takes an 'Ohana (ITAO), formerly known as the Hawaii Foster Parents Association
- z. Language Interpreters
- aa. Law Enforcement & Prosecutors Office
- bb. Legal Aid Society of Hawaii
- cc. Marshallese Council
- dd. Missing Children Office
- ee. Office of Hawaiian Affairs (OHA)

- ff. Office of Youth Services
- gg. P.A.R.E.N.T.S., Inc.
- hh. Parents and Children Together (PACT)
- ii. Parents as Allies – Parents Advocates
- jj. Parents for Righteousness – Parents Advocate
- kk. Partners in Development Foundation (PIDF)
- ll. Project Laulima – children with disability /mental health
- mm. Transitional Housing/Shelters
- nn. United States Military
- oo. University of Hawaii – Law School
- pp. University of Hawaii – Maui College
- qq. University of Hawaii – Public Policy Center
- rr. University of Hawaii – School of Social Work
- ss. Other collaboration/coordination bodies.

### **11. CFSP Implementation and Monitoring**

For the implementation and monitoring of our 2015-2019 CFSP, strong collaboration is the norm, with Hawaii CWSB taking the lead in engaging and collaborating again with its internal and external partners, such as the Hawaii Citizen Review Panel (CRP), the Hawaii CQI Council, Court Improvement Program (CIP), the Children’s Trust Funds, the Department of Health-Child and Adolescent Mental Health Division, Department of Education – Early Education, UH-Maui, parents advocates, youth coalitions, and contracted providers.

**SECTION II:  
ASSESSMENT OF PERFORMANCE  
&  
PLANS FOR IMPROVEMENT**

**A. GOALS**

The Hawaii's five-year CFSP is intended to improve its overall child welfare system in generating favorable outcomes for children and families in consistent with the seven CFSR outcome areas and seven systemic factors. Our vision and Practice Model dovetail with these goals. The goals are reproduced below.

1. ***Children are first and foremost, protected from abuse and neglect.***  
(CFSR Safety Outcome 1)

Item 1. Timeliness of Initiating Investigations of Reports of Child Maltreatment
----------------------------------------------------------------------------------

2. ***Children are safely maintained in their homes whenever possible and appropriate.***  
(CFSR Safety Outcome 2)

Item 2. Services to Family to Protect Children in the Home and Prevent Removal or Re-Entry Into Foster Care
Item 3. Risk and Safety Assessment and Management

3. ***Children have permanency and stability in their living situations.***  
(CFSR Permanency Outcome 1)

Item 4. Stability of Foster Care Placement
Item 5. Permanency Goal for Child
Item 6. Achieving Reunification, Guardianship, Adoption and Other Planned Permanent Living Arrangement (OPPLA)

4. ***The continuity of family relationships and connections is preserved for the children.***  
(CFSR Permanency Outcome 2)

Item 7. Placement with Siblings
Item 8. Visiting With Parents and Siblings in Foster Care
Item 9. Preserving Connections
Item 10. Relative Placement
Item 11. Relationship of Child in Care With Parents

5. ***Families have enhanced capacity to provide for their children's needs.***  
(CFSR Child and Family Well-Being Outcome 1)

Item 12. Needs/Services of Child, Parents, and Resource Caregivers
Item 13. Child/Family Involvement in Case Planning
Item 14. Caseworker Visits with Child
Item 15. Caseworker Visits with Parents

6. ***Children receive appropriate services to meet their educational needs.***

(CFSR Child and Family Well-Being Outcome 2)

Item 16. Educational Needs of the Child
-----------------------------------------

**7. *Children receive appropriate services to meet their physical and mental health needs.***

(CFSR Child and Family Well-Being Outcome 3)

Item 17. Physical Health of the Child
---------------------------------------

Item 18. Mental/Behavioral Health of the Child
------------------------------------------------

## **PART I: SAFETY**

Hawaii CWSB integrated the upcoming Child and Family Services Review (CFSR) items with the CFSP since most of Hawaii CWSB's outcomes and goals match those used to determine the quality of performance in the CFSR.

Hawaii CWSB is fortunate that Continuous Quality Improvement (CQI) efforts are indeed continuous, in that CFSRs occur throughout the year. CWS staff has access to regular (at least quarterly) updated data on statewide performance. This allows CWSB administrators to see results of initiatives more quickly (in order to make the needed modifications), and also identify areas of concern and take action before potential problems worsen.

The CQI process itself has a built-in corrective action system, where an action plan for improved performance in targeted areas is developed with a CWSB Section as soon as the data from that Section's annual CFSR has been verified and analyzed. Percentages indicate how many cases were rated as a strength for each item out of all the cases reviewed and applicable for that item. These reviews are modeled after the Federal CFSR and serve to assess practice on an ongoing basis.

### **CFSR Safety Outcome 1**

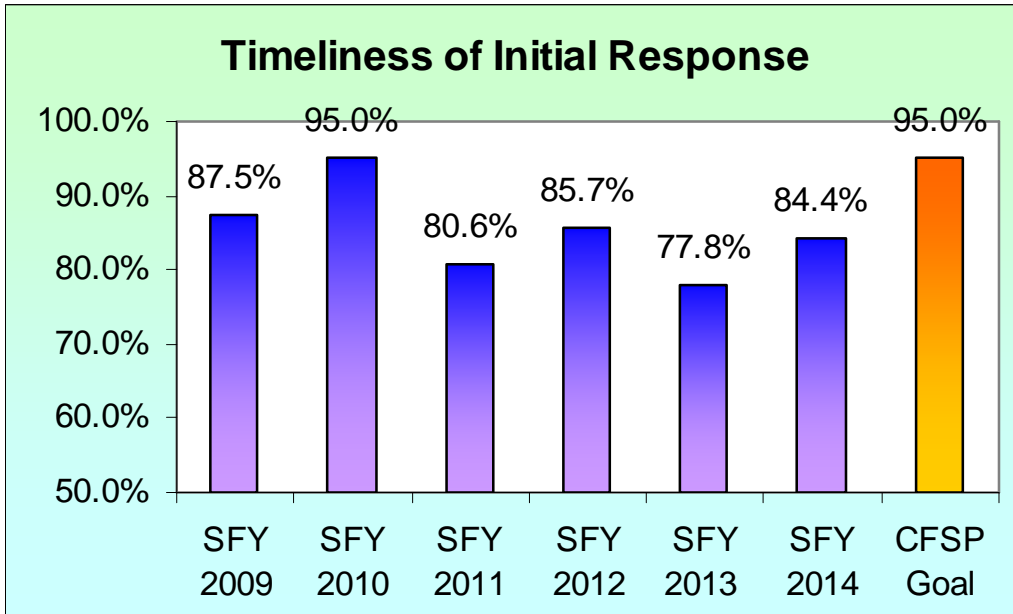
*Children are first and foremost protected from abuse and neglect.*

### **CFSR Item 1: Timeliness of Initial Response of Investigations**

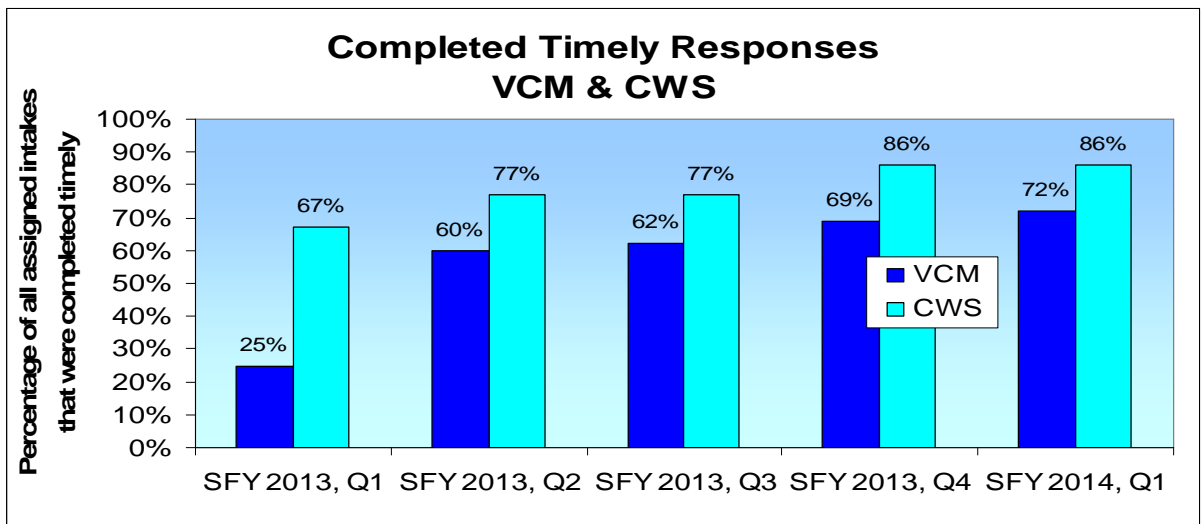
<b>Cases with timely responses</b> <b>CFSP Goal: 95%</b>
-------------------------------------------------------------

Timely response means a that social worker has face-to-face contact, not only with the target child victim, but also with all other minor children in the family within two business days of investigation assignment for CWS cases, and within five business days for Differential Response Voluntary Case Management (DR-VCM) cases.

The two figures below show Hawaii's statewide performance in this area over the last 5 years.



Data Source: University of Hawaii, Maui College (UHMC) Hawaii Child Welfare Continuous Quality Improvement (HCWCQI) Project, statewide case record review data



Data Source: Statewide aggregate data from SHAKA 48-Hour & 5-Day Tracker

**Strengths:**

- SHAKA 48-hr/5-day Tracker
- Weekly teleconferences to support the Tracker and mitigate delays
- Keeping these data on the radar at all leadership meetings.
- Planned implementation of the Title IV-E Waiver Crisis Response Team (CRT)

**Challenges:**

- Assessment workers' workload
- Staff vacancies
- Locating families



**Goals over the next 5 years:**

FFY 2016: 87% of all CWS reports (whether assigned to CWS or VCM for follow-up) shall have timely response by caseworkers.

FFY 2017: 90% of all CWS reports shall have timely response by caseworkers.

FFY 2018: 92% of all CWS reports shall have timely response by caseworkers.

FFY 2019: 95% of all CWS reports shall have timely response by caseworkers.

**Measurement Method:** For the case record reviews, during the period under review, the proportion of cases in which responses to all accepted child maltreatment reports received were initiated, and face-to-face contact with the children made or concerted efforts were made for contact, within the time frames established by agency policies or State statutes. For the statewide aggregate data, the proportion of cases in which contact was made with all children within the established timeframe.

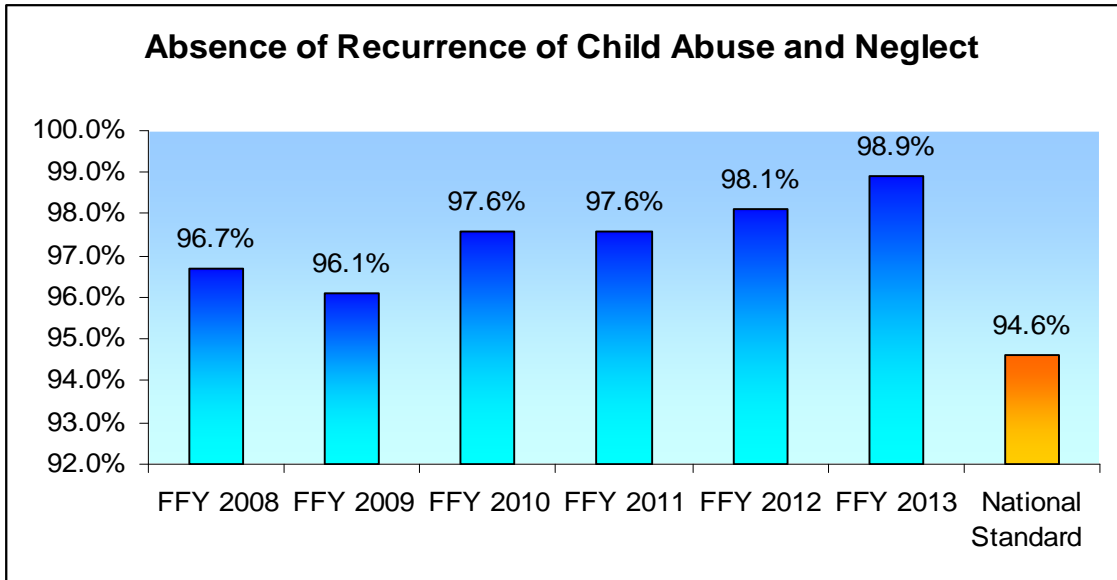
**Data Sources:** State CFSR CQI ongoing review of cases by HCWCQI; SHAKA statewide aggregate data; CPSS statewide aggregate data

**Improvement plans include:**

- Continue the use of SHAKA 48-Hour and 5-Day Tracker with weekly teleconferences with Section Administrators to identify barriers and find solutions to enable workers to access families and conduct face-to-face visits with all children in the home on a timely basis
- Review of Timely Response Data during all Branch (6 times a year) and Management Leadership Team meetings (6 times a year) to help keep success on this item as a salient priority for CWSB leadership, and to ensure continuous assessment of statewide progress toward the goal. The data reviews will allow creative problem-solving and the sharing of successful practices across sections and units.
- Implement the Crisis Response Team (CRT) in February 2015, as part of Hawaii's Title IV-E Waiver Demonstration Project. CWS' CRT will respond to urgent calls within two hours.
- Restore Hawaii Child Welfare Education Collaboration with University of Hawaii at Manoa, which will produce MSW-trained social workers who will work in CWS for a minimum of two years post-graduation (thereby filling vacancies) in exchange for financial assistance with tuition.

## **Absence of Recurrence of Maltreatment**

*Of all children with a screened-in report of alleged maltreatment in a 12-month period (regardless of disposition), what percent had another screened-in report within 12 months of their initial report?*



Data Source: Hawaii CFSR Data Profile

**Strengths:**

- ‘Ohana Conferencing is used to engage and educate the family to keep children safe
- Multidisciplinary Team is convened prior to reunification to identify and recommend treatment for risk factors
- Monthly Worker Visit Tool is used to ensure quality visits by caseworkers which reinforce non-physical discipline methods

**Challenges:**

- Lack of follow-up services for families involved in CWS
- Difficult to modify individual attitudes toward violence and the physical discipline of children
- Societal attitudes toward violence and the physical discipline of children

**Goal for the next 5 years:** Hawaii’s goal is primarily to sustain this excellent performance.

**Measurement Method:** aggregate data comparison to national standard. Of all children who were victims of a substantiated or indicated maltreatment allegation, the percent who were not victims of another substantiated or indicated maltreatment allegation within the 6-months following that maltreatment incident

**Data Sources:** State CPSS aggregated data and the Federal CFSR data profile based on the State’s National Child Abuse and Neglect Data System (NCANDS)

**Sustainability Plans to include:**

- Encourage use of ‘Ohana Conference and Multi-Disciplinary Team (MDT) process before reunification
- Reinforce the use of the Monthly Worker Visits Tool as ongoing tool to assess child’s situation
- Focus on increasing worker monthly face-to-face visits
- Implement Title IV-E Waiver Project’s Intensive Home-Based Services in February 2015 to stabilize reunification

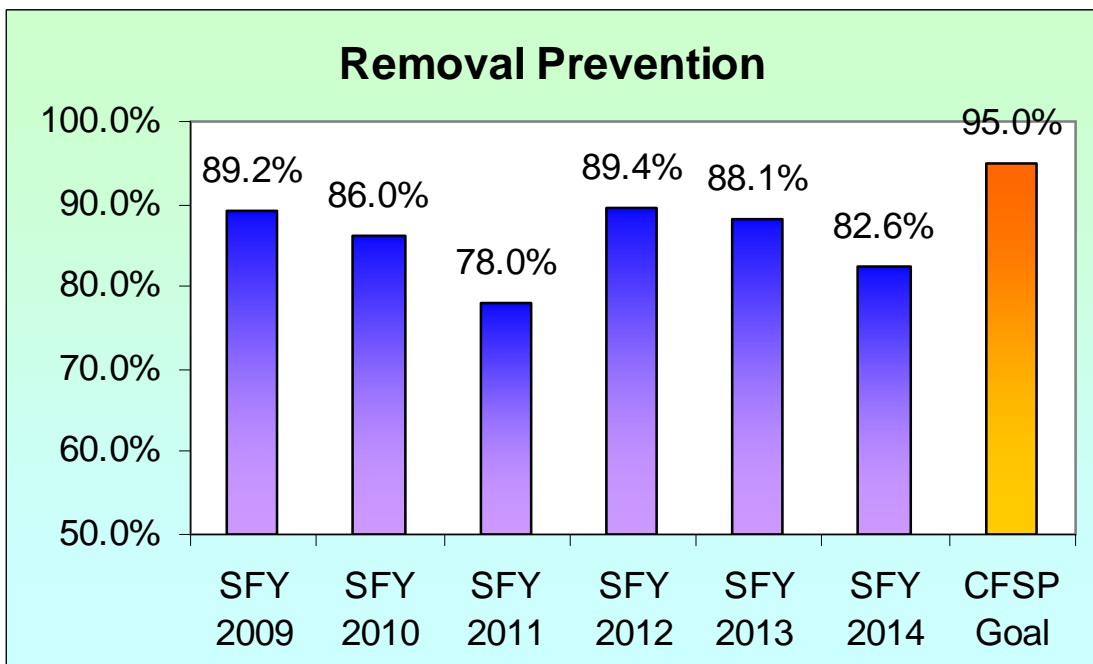
## CFSR Safety Outcome 2

*Children are safely maintained in their homes whenever possible and appropriate.*

### CFSR Item 2: Services to prevent removal and maintain children safely in their family home

*DHS will provide services, when appropriate, to protect children in their homes and prevent removal or re-entry into foster care.*

<b>State Fiscal Year CQI Data</b>	<b>Cases with no removal &amp;/or no reentry into foster care</b> <b>CFSP Goal: 95.0%</b>
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Data Source: UHMC-HCWCQI Project

Although Hawaii has improved on this item, Hawaii plans to achieve the 95% goal by strengthening efforts to prevent children from entering into foster care as much as possible.

#### Strengths:

- Concerted worker efforts to provide services to prevent removal or re-entry into foster care
- Referral to appropriate in-home services to prevent removal
- Using of the child safety assessments tool to guide decision making
- Training on family engagement
- Use of Ohana Conferencing
- Use of Monthly Worker Visit Tool during monthly visits to assess needs, which helps workers to quickly identify problems before they become worse.

**Challenges:**

- High numbers of children that enter care for short periods (less than 10 days, and less than 30 days)
- Lack of crisis services to help stabilize a potentially unsafe home
- High numbers of CWS staff vacancies which creates unmanageable workloads and slow or incomplete safety assessments of children

**Goal for the next 5 years:**

- SFY 2016: Increase outcome in this area to 85%
- SFY 2017: Increase outcome to 90%
- SFY 2018: Increase outcome to 93%
- SFY 2019: Increase outcome to 95%.

**Measurement Method:** For the case record reviews, during the period under review, the proportion of cases in which workers employed all reasonable and possible tactics and resources to stabilize the family and prevent removal.

**Data:** CFSR ongoing case review data; CWS database aggregated data

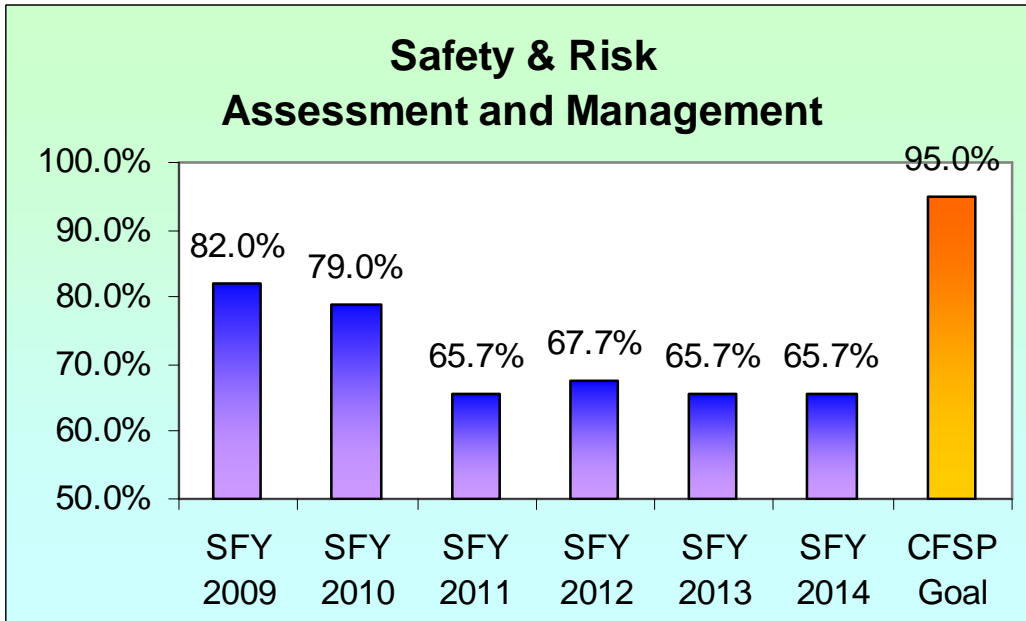
**Improvement Plans to include:**

- Re-enforce the use of Analysis for In-home services Tool, and the use of In-home Safety planning **before** any child is removed
- Re-enforce mandatory documentation in CPSS of supervisory review and approval of removal of any child.
- Strengthen the use of the Monthly Worker Visit Tool
- Use of IV-E Waiver’s Crisis Response and Intensive Home-Based Services
- Match and referral to appropriate services to meet family/child needs
- Use of a trauma-informed evidence-based assessment tool to assess safety of victim child and adult victim (mother) in domestic violence (DV) cases.
- Ensure capacity of DV shelters to house both victim child and adult victim (mother) of DV cases together as long as child’s safety is not jeopardized.

**CFSR Item 3: Safety & Risk Assessment and Management**

*DHS will reduce the risk of harm to children, including those in foster care and those who receive services in their own homes.*

<b>State Fiscal Year CQI Data</b>	<b>Cases (both in-home and foster care) where children’s safety needs were met</b> <b>CFSP Goal: 95 %</b>
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Data Source: UHMC-HCWCQI Project

#### Strengths:

- Workers' use of informal and formal risk and safety assessment tools
- Workers addressing identified risk and safety issues immediately
- Assessments of safety and risk were documented in CWS database
- Several formal tools are available and employed by workers
  - 1) Child Safety Assessment
  - 2) Monthly Worker Visit Tool
  - 3) Safety in Placement
  - 4) Comprehensive Strength and Risk Assessments
- Frequency and quality of face-to-face contact contributed to assessing and managing the safety of the children, in their family homes and in foster care

#### Challenges:

- Contact with children is sometimes not frequent enough to confirm their safety at home or in foster care.
- Contact with children in another State (ICPC problems)
- Lack of documentation of visits
- Safety concerns in the foster home are not consistently addressed.
- Consistent completion of safety and risk assessments prior to case closure
- Consistent use of interpreters to enhance communication with the family about safety concerns

#### Goals for the next 5 years

- SFY 2016: Increase outcome in this area to 70%
- SFY 2017: Increase outcome in this area to 80%
- SFY 2018: Increase outcome in this area to 90%
- SFY 2019: Increase outcome in this area to 95%.

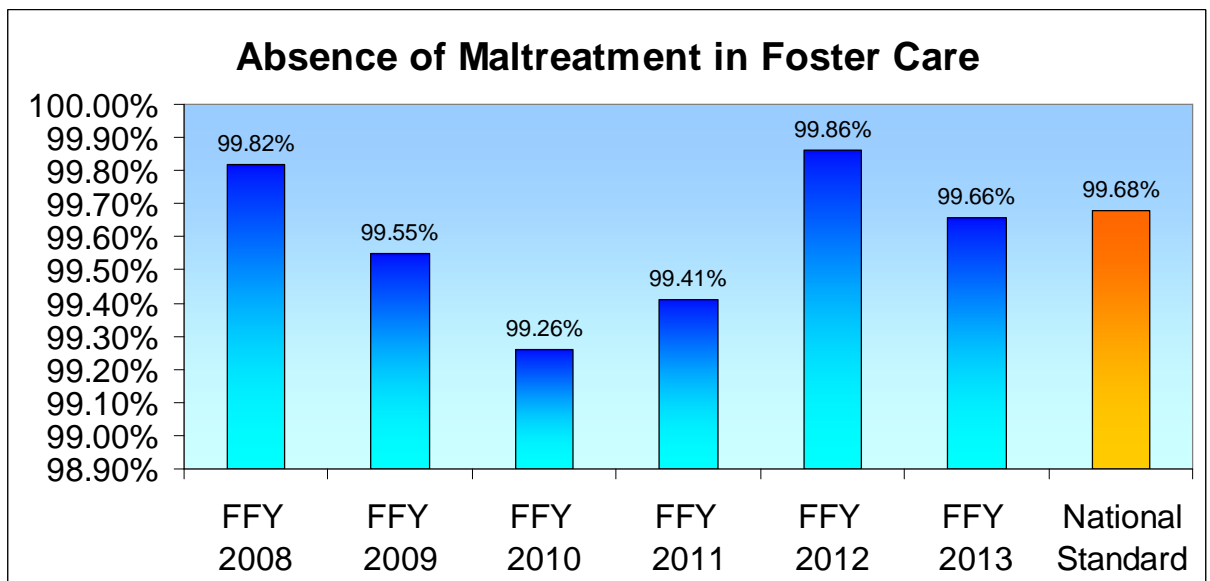
**Measurement Method:** For the case record reviews, during the period under review, the proportion of cases in which workers adequately assessed the children’s risk and safety and responded appropriately to these assessments. For NCANDS and AFCARS, aggregate data will be collected.

**Data Sources:** CFSR on-going review of cases, NCANDS, AFCARS

**Improvement Plans to include:**

- Use of CQI to do follow-up with implementation of new forms and new initiatives with Sections to confirm practice of using Worker Visit forms, and Assessment of Placement Form and identify areas needing re-fresher training for front line staff and supervisors
- Individual worker use of the Monthly Visit data will help workers keep track of whom they need to see
- Monthly review of worker visit data. Hawaii plans to begin mid-month teleconferences with Section Administrators to review data and barriers to completion of monthly worker’s visit.
- Establish clear procedures on how to procure providers out of State to conduct monthly face to face visits with child, when the ICPC office in the receiving State is unable to assign a caseworker to that child yet.

### Safety in Foster Care



Data Source: Hawaii CFSR Data Profile

**Strengths**

The above data confirms noticeable improvement in good practice that Hawaii has done to ensure foster children are safe in placement. This positive change may be a result of the Assessment of Safety of Placement tool which was implemented statewide in March

2011. SFY 2012 was the first full year that the tool was continuously used. This tool which helps social workers assess the safety of placement for foster children. Workers are required to complete this assessment tool on a quarterly basis which is reviewed and approved by the unit supervisor. Social workers are also required to document the result of their assessment in their court reports. It is believed that the use of this tool has led to safer placements by early identification of potential problems and providing resource families with the needed support to keep their homes safe.

## PART 2: PERMANENCY

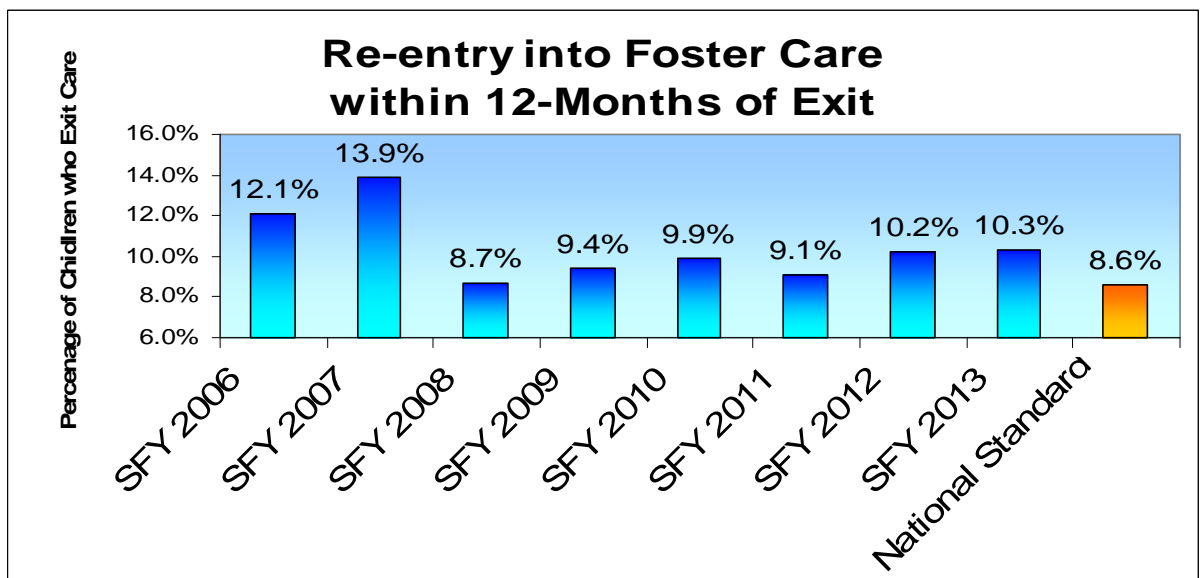
### Permanency Outcome 1

*Children have permanency and stability in their living situations.*

#### Foster Care Re-entries

*DHS will prevent multiple entries of children into foster care.*

The graph below shows the percentage of children who re-entered foster care within 12 months after exiting foster care. The graph below is based on statewide aggregate data for each year.



Data Source: DHS, Management Services Office  
Please note: For this measure, *lower* percentages are desirable.

### Permanency Composite 1

Hawaii's Data Composites	FFY 2009	FFY 2010	FFY 2011	FFY 2012	FFY 2013	NATIONAL STANDARD
Permanency Composite 1: Timeliness & Permanency of Reunification	141	127.3	138.1	133.8	134.6	122.6 or higher

Data Source: Adoption and Foster Care Analysis and Reporting System (AFCARS)

Permanency composite 1 focuses on the timeliness and permanency of reunification and is composed of three timeliness individual measures (exits to reunification in less than 12 months; median stay in foster care for children who had exited to reunification; and exits to reunification for children entering foster care within a six-month period) and one permanency measure (children who entered foster care during the 12-month reporting period the percentage who re-entered within 12 months of a prior foster care episode). This is another area that Hawaii has performed very well on, significantly better than the national standard and plans to sustain this performance through the continued use of effective strategies identified below.

### **Strengths**

- ‘Ohana Conferencing, which can help round up the supports that a family needs to be successful in reunification
- ‘Ohana Time (In May 2012, Hawaii changed not only the terminology -- family visitation -- but also the process/practice which shifted dramatically from the traditional family visitation, such as families no longer have to call in to confirm visits, they were trusted/expected to show up, and they did. The visits no longer have to be confined to office location, but workers were encouraged to engage families in setting up visits in natural settings, such as playgrounds, at family gatherings, at family home, at school, during lunch hours, during doctor’s appointments, during sport events, etc. Collaborations, training, new system coding and on-going discussion with front line staff helped ironed out minor issues related to ‘Ohana Time. Hawaii believes that children having more frequent visits in natural settings with their families while they are in foster care (i.e., ‘Ohana Time) ultimately leads to sustained reunifications and fewer re-entries after being reunified, because parents are learning and practicing healthy and safe ways of interacting with their children in real life settings and situations (e.g., after school homework time, children’s ball games, doctors’ appointments, family gatherings, and lunch time at home) prior to them returning home.)
- Multidisciplinary Team Meetings prior to reunification to help the caseworker to assess the safety of the family home and parents’ ability to safely parent.

### **Challenges:**

- Insufficient social supports for the family
- Insufficient services available to the family
- Referrals not made to needed services
- Chronic family violence
- Inaccurate predictions of family’s ability to safely care for the child
- Parental substance abuse
- Providers’ lack of success in the helping the parents to incorporate the necessary skills and tools for safe parenting

For the next 5 years, Hawaii is committed to preparing families for reunification and supporting the reunification to avoid child re-entry to foster care.

**Measurement Method:** Of all children who entered care during the year, the percentage who re-entered foster care within 12 months of a prior foster care episode.



**Data Sources:** Statewide Adoption and Foster Care Analyses and Reporting System (AFCARS) and CFSR Data Profile.

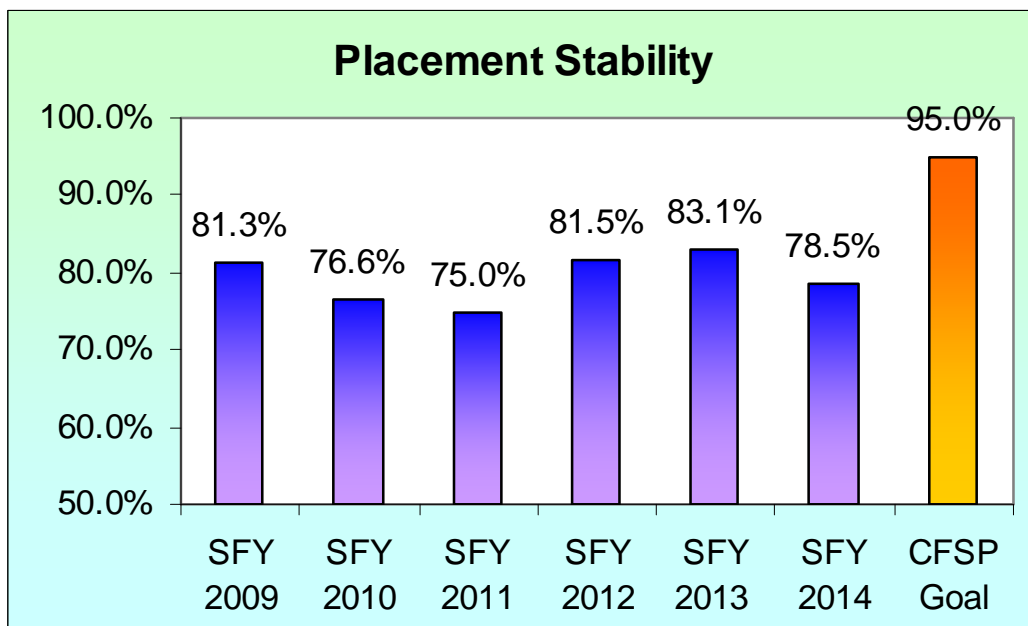
**Improvement Plans to include:**

- Strengthen ‘Ohana Time, which will allow biological families to learn from resource caregiver mentors and give biological families real life parenting practice prior to reunification.
- Encourage the use of ‘Ohana Conference to develop support for family before reunification occurs.
- Broader use of a Rapid Assessment Instrument (RAI), the Strengths and Stressors Tracking Device (SSTD), will improve CWS workers’ evaluation of the family’s environment and readiness for successful reunification.

**CFSR Item 4: Stability of foster care placement**

*DHS will minimize placement changes for children in foster care.*

<b>State Fiscal Year CQI</b>	<b>Children in foster care who had one or two placements</b> <b>CFSP Goal: 95.0%</b>
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Data Source: UHMC-HCWCQI Project

This CFSR item is reviewed to determine if the child in foster care is in a stable placement at the time of the review and that any changes in placement that occurred during the period under review were in the best interest of the child and consistent with achieving the child’s permanency goal(s).

**Strengths**

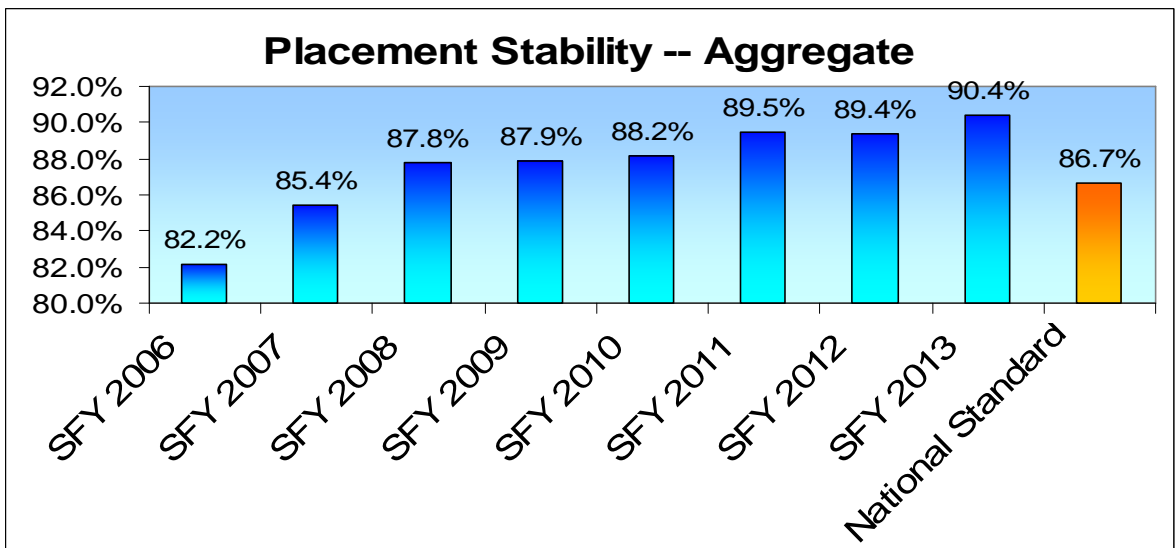
- Implementation and use of the Assessment of Placement Form

- Automatic referral to Family Finding, as each child enters foster care
- Hawaii’s ability to provisionally license a resource home within a few hours, thereby allowing children to be immediately placed in an appropriate Child-Specific licensed home, and never having to be placed in a shelter or interim resource home.
- Upfront efforts by workers to identify long term placements
- The aloha of the people of Hawaii who are committed to these children
- Resource caregiver training which appropriately prepares resource caregivers, so that they are able to sustain the placement through children’s challenging behaviors
- Therapy and other support services to youth which helps them to sustain placements.

**Challenges**

- Unaddressed safety concerns in the resource home that jeopardize the stability of the placement;
- Temporary placement in shelter homes, in Project First Care home, and the other in an on-call shelter home;
- Lack of monthly case worker visits;
- Child’s multiple behavioral issues,
- Resource caregivers inability to care for child

The graph below reports on the same question as the CFSR chart above, but the data for the graph below is annual aggregate data. The graph shows the percentage of children who were in foster care that had no more than two placements.



Data Source: DHS, Management Services Office; Statewide CWS Outcomes Report  
 Please note: For this measure, *higher* percentages are desirable.

### Permanency Composite 4

Hawaii's Data Composites	FFY 2009	FFY 2010	FFY 2011	FFY 2012	FFY 2013	NATIONAL STANDARD
Permanency Composite 4: Placement Stability	102.2	102.7	106.7	107.1	108.8	101.5 or higher

Data Source: Adoption and Foster Care Analysis and Reporting System (AFCARS)

Permanency Composite 4 is comprised of three individual measures: 2 or fewer placement settings for all children in care (1) less than 12 months, (2) 12-24 months, and (3) 24+ months.

**Goal for the next 5 years:** Maintain 90.4% or higher in Placement Stability Aggregate data which is already exceeding National Standard; Maintain 108.8 of Permanency Composite 4, also already exceeding National Standard, and to Increase Placement Stability outcome to 95.0 % or higher in the case record reviews.

**Measurement Methods:** (1) For the case record reviews -- proportion of cases reviewed in which the child in foster care is in a stable placement at the time of the onsite review and that any changes in placement that occurred during the period under review were in the best interest of the child and consistent with achieving the child's permanency goal(s). (2) For the State FY statewide aggregate data, proportion of children in foster care with 2 or fewer placements. (3) For the permanency composite, it is a scaled score of three measures – two or fewer placements settings for children in care less than 12 months, 12-24 months, and 24+ months.

**Data Sources:** CFSR ongoing review of cases, CPSS, and Adoption and Foster Care Analysis and Reporting System (AFCARS)/CFSR data profiles.

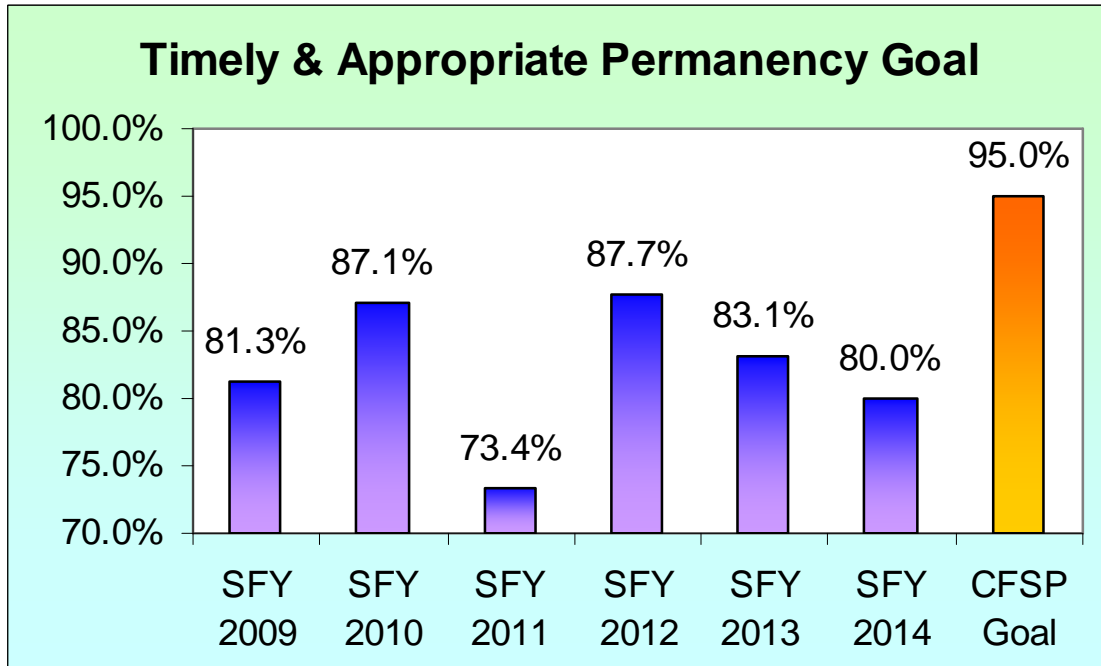
**Improvement Plans to include:**

- Track and monitor monthly face to face visit with child
- Track, reinforce, and train, if necessary, on the use of Assessment of Placement form
- Increase family findings – upfront to avoid placement in shelters or PFC homes. The CRT will initiate family findings immediately if removal is imminent.
- Specialized training for resource caregivers to better address multiple behavioral issues of their foster youth

**CFSP Item 5: Appropriate and Timely Permanency Goal**

*DHS will determine the appropriate permanency goal for children in foster care on a timely basis.*

<b>State Fiscal Year CQI</b>	<b>Cases where children’s permanency goals were appropriate &amp; were established within 60 days of entry into foster care</b> (out of all children in foster care over 60 days) <b>CFSP Goal: 95%</b>
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Data Source: UHMC-HCWCQI Project

This item is assessed to determine whether permanency goals were appropriate and established for the child in a timely manner.

**Strengths**

- Usually permanency goals are established by the caseworker timely
- Usually the permanency goal that is established by the caseworker for the child is appropriate to meet the child’s needs.
- Caseworkers are documenting permanency goals in CWS database.

**Challenges**

- Goal does not change from reunification as quickly as it should.
- Actions to further the desired goal are not taken.
- Termination of parental rights has not occurred, although there is no indication that the parents can and will safety care for the child.
- In some cases the permanency goal remains reunification, yet parents were no longer in services, and motion for termination of parental rights (TPR) was not filed, and compelling reasons were not documented;

- Cautious use and implementation of Another Planned Permanent Living Arrangement (APPLA)

**Goal for the next 5 years:**

- SFY 2016: Achieve 80% or higher on this item.
- SFY 2017: Achieve 85% or higher on this item.
- SFY 2018: Achieve 90% or higher in this item.
- SFY 2019: Achieve 95% or higher in this item.

**Measurement Method:** Proportion of foster care cases in which the permanency goal was appropriate and established for the child in a timely manner

**Source of Data:** CFSR on-going review of cases

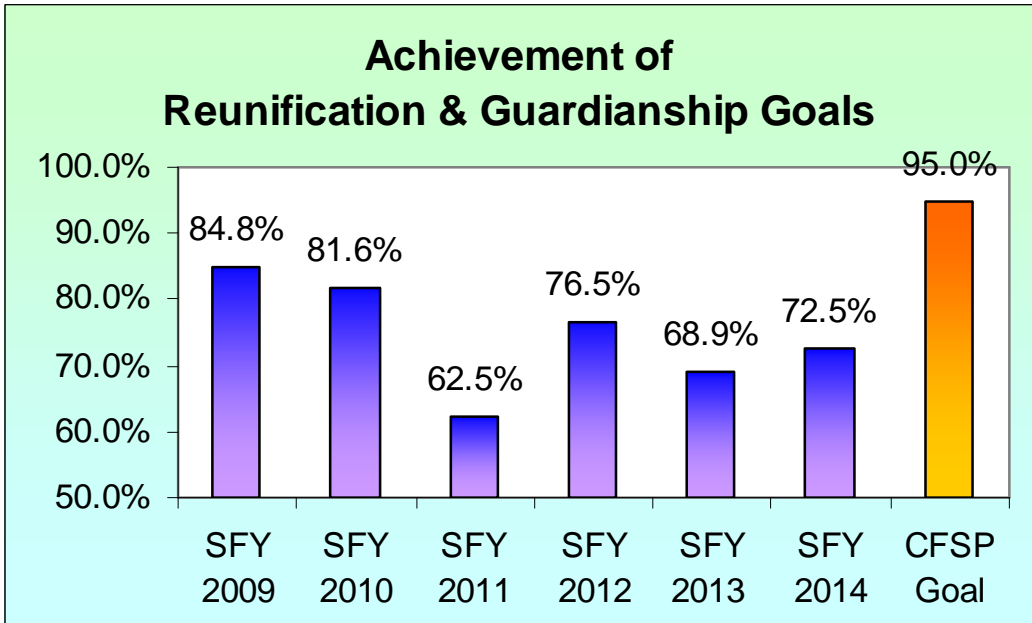
**Improvement Plans to include:**

- Bi-monthly review/discussion of case goals through extraction/review of AFCARS data that indicate missing case plan goal
- Identify Sections with challenges for target training on goals, data inputting, and corrections of errors
- Provide training and procedures on documenting compelling reason for an APPLA
- Finalize APPLA procedures and training for internal and external partners.
- Use the Safety Permanency and Well-being (SPAW) Waiver intervention to identify appropriate goals and expedite permanency outcomes for children in foster care.

**CFSR Item 6: Achievement of Reunification, Guardianship, Adoption, and Another Planned Permanent Living Arrangement (APPLA) Goals**

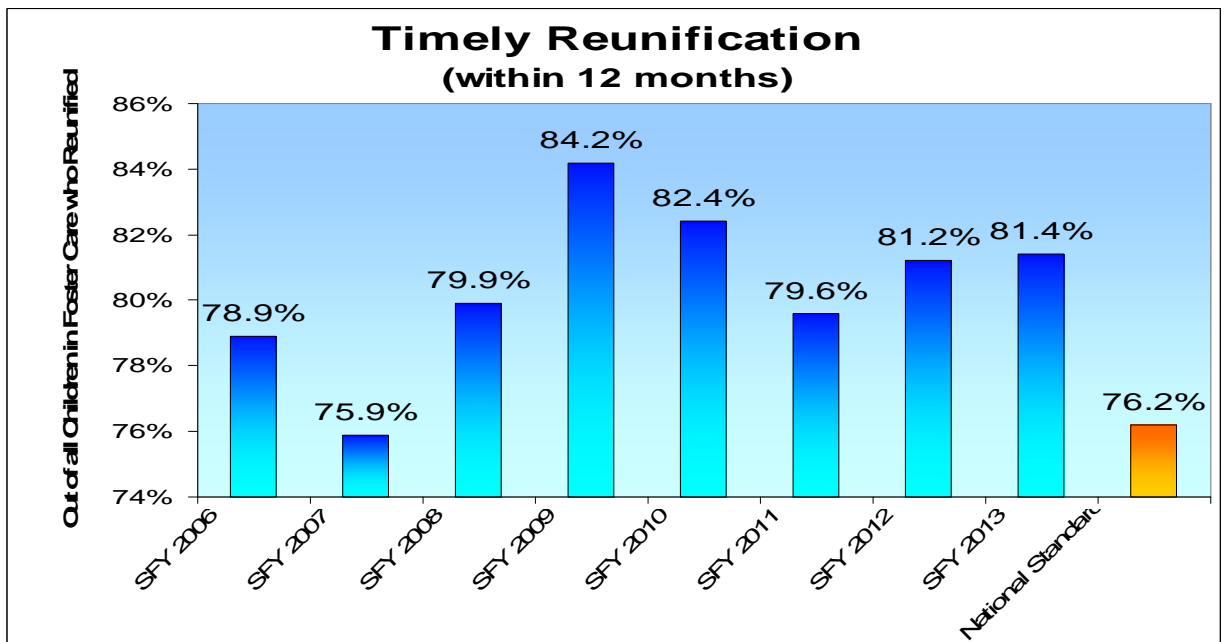
*DHS will help children in foster care return safely to their families when appropriate, be adopted, placed into a guardianship, or placed in another planned permanent living arrangement.*

<p><b>State Fiscal Year CQI</b></p>	<p><b>Cases where reunification, adoption, guardianship, or APPLA was achieved or pursued in a timely fashion (generally within 12 months)</b>  <b>CSFP Goal: 95.0 %</b></p>
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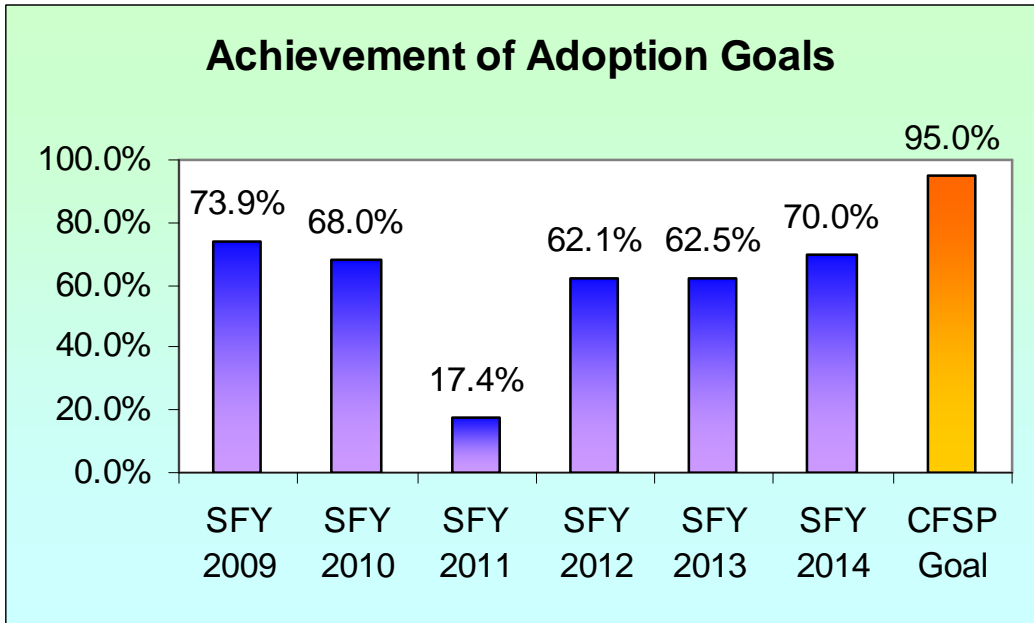


Data Source: UHMC-HCWCQI Project

The graph below displays data similar to the CFSR chart immediately above, but the graph below only includes reunification cases and does not include guardianship with relatives cases. Also, the graph below reports statewide aggregate data, unlike the chart above which reports on the selected cases reviewed only. The percentages in the graph below are of the children that had been in foster care that were reunified with their parents or caretakers within 12 months of the latest removal, out of all children who were reunified at the time of discharge from foster care.



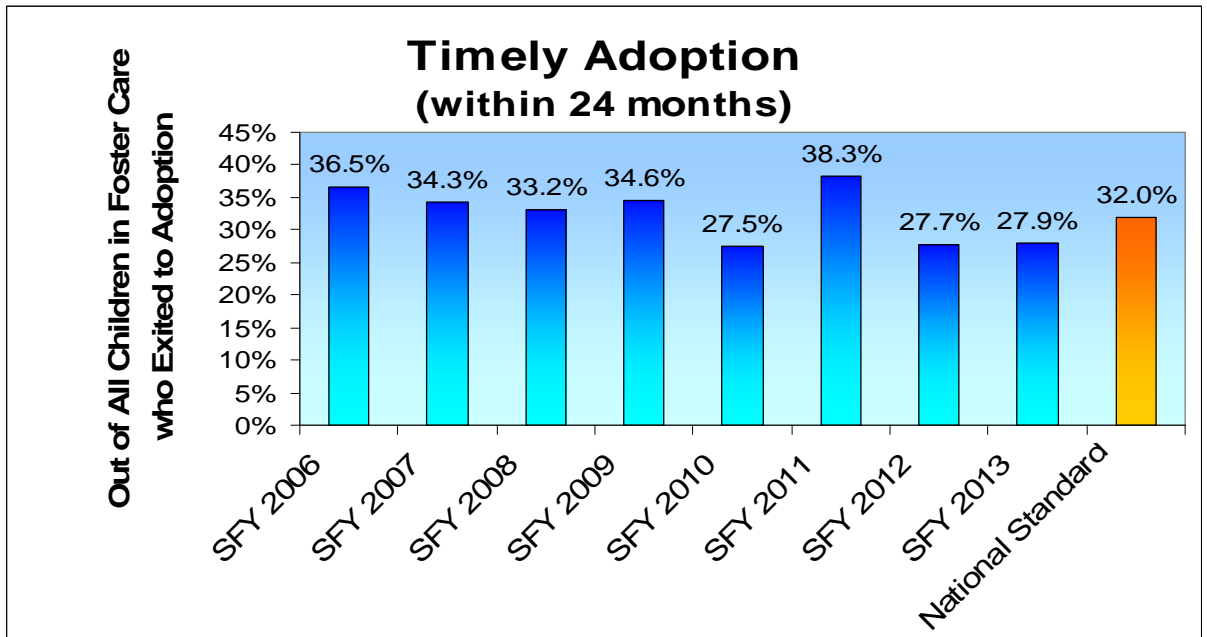
Data Source: DHS, Management Services Office; Statewide CWS Outcomes Report  
Please note: For this measure, *higher* percentages are desirable.



Data Source: UHMC-HCWCQI Project

The Achievement of Adoption Goals item is used to determine whether or not concerted efforts were made, or are being made, to achieve a finalized adoption in a timely manner, during the period under review.

The graph below reports on the same question as the CFSR chart immediately above, but the graph below includes aggregate data from each fiscal year. Each bar below shows for that year, what percentage of children who exited foster care to a finalized adoption, exited foster care within 24 months from the time of the latest removal from home



Data Source: DHS, Management Services Office; Statewide CWS Outcomes Report

## **Strengths**

- Reunification or guardianship were achieved or likely to be achieved timely in cases when there were quality monthly contacts with parents/caregivers and children,
- ‘Ohana Conferences
- Regular visits/‘ohana time made available for children and their parents.
- In most cases, services are provided as needed and referrals are made timely.
- Active efforts for concurrent planning.
- In cases where the child will not be able to reunify with his/her parents, but the parents have been engaging in on-going ‘Ohana Time, adoption will likely be expedited.
- Through ‘Ohana Time, the parents have likely already created a relationship with the potential adoptive parents, which may make any move toward Termination of Parental Rights (TPR) and adoption smoother and quicker; the parents know their child will be well cared for. Older children will also be less likely to fight adoption, if clarification is made upfront that TPR does not entail permanently severing connections with birth parents;
- The Court and DHS often agreed on the case goal;
- DHS is generally timely with service referrals
- Required documents are often gathered early
- Workers make efforts to place children in homes early in the case with their would be their adoptive placement;
- Early relative searches and contacts are made regularly

## **Challenges**

- Few worker face-to-face visits with parents;
- Some parents were not engaged in their case planning;
- Incarcerated parents with no involvement in reunification services;
- Parents not engaging in services;
- Lack of concurrent permanency goals identified;
- Special needs children in long term placement
- Obtaining legal documents;
- Child’s special needs make it difficult to find a suitable permanent caregiver;
- Suitable permanent caregivers for each child can be hard to identify
- Family finding searches were not done consistently;
- Multiple caseworkers assigned to case;
- Child’s hesitancy to being adopted;
- Permanency goal was not actively pursued;

## **Goal for the next 5 years:**

SFY 2016: Achieve 76% or higher on this item.

SFY 2017: Achieve 87% or higher on this item

SFY 2018: Achieve 92% or higher on this item.

SFY 2019: Achieve 95 % or higher on this item.



**Measurement Method:** Of all children who enter foster care in a 12-month period, what percentage is discharged to permanency within 12 months of entering foster care? Of all children in foster care on the first day of a 12-month period, who had been in foster care (in that episode) for 2 or more years, what percent discharged to permanency within 12 months of the first day? For the statewide aggregate measure, the proportion children reunified with their parents or caretakers within 12 months of the latest removal.

**Source of Data:** CFSR on-going review of cases; AFCARS; and CFSR data profiles; Management Services Office report on Timely Adoption within 24 months;

**Improvement Plans to include:**

- Tracking data and reinforcing increase of monthly worker visits with parents
- Increase collaboration with Department of Public Safety for services to enhance availability of services to incarcerated parents
- Use of Wrap Services or SPAW – Title IV-E Waiver services to address special needs children in long term placement.
- Use CQI and CIP to track and review procedures and documentation of concurrent permanency planning with CWS staff and with Court.
- Use of waiver intervention SPAW (permanency roundtable review) to remove barriers and expedite permanency
- Increase ‘Ohana Time from day one in placement to help parents with reunification or become more amenable to TPR and adoption.
- Engage youth, IL providers, CASA, in discussion of permanency case goal of adoption
- Address workload issues to minimize multiple case workers assignment.
- Use waiver intervention CRT – to initiate immediate family findings for placement/connections
- On-going review of all-in-care data and discussion with Section Administrators, CIP, Citizen Review Panel, ‘Ohana Conference, and other stakeholders.
- Increase ‘Ohana Time
- Use Title IV-E waiver intervention Wrap for children with special needs

**Permanency Composite 2**

<b>Hawaii’s Data Composites</b>	<b>FFY 2009</b>	<b>FFY 2010</b>	<b>FFY 2011</b>	<b>FFY 2012</b>	<b>FFY 2013</b>	<b>NATIONAL STANDARD</b>
Permanency Composite 2: Timeliness of Adoptions	120.4	130.6	151.6	142.9	138.4	106.4 or higher

Data Source: National Child Abuse and Neglect Data System (NCANDS)

Permanency Composite 2 measures the timeliness of adoption taking into account the following: (1) percentage children exiting to adoption within 24 months of entry into foster care; (2) median length of stay for all children who were adopted; (3) percentage of children in care 17 months or longer who were adopted; (4) percentage of children in care 17 months or longer who became

legally free for adoption; and (5) percentage of legally-free children who were adopted within 12 months of becoming legally free.

### Permanency Composite 3

Hawaii's Data Composites	FFY 2009	FFY 2010	FFY 2011	FFY 2012	FFY 2013	NATIONAL STANDARD
Permanency Composite 3: Permanency for Children and Youth in Foster Care for Long Periods of Time	119.8	121.6	124.3	135.9	130.0	121.7 or higher

Data Source: Adoption and Foster Care Analysis and Reporting System (AFCARS)

Permanency Composite 3 measures the extent to which permanency is achieved for children/youth in foster care for long periods of time and the extent to which there are children growing up in and emancipating from foster care.

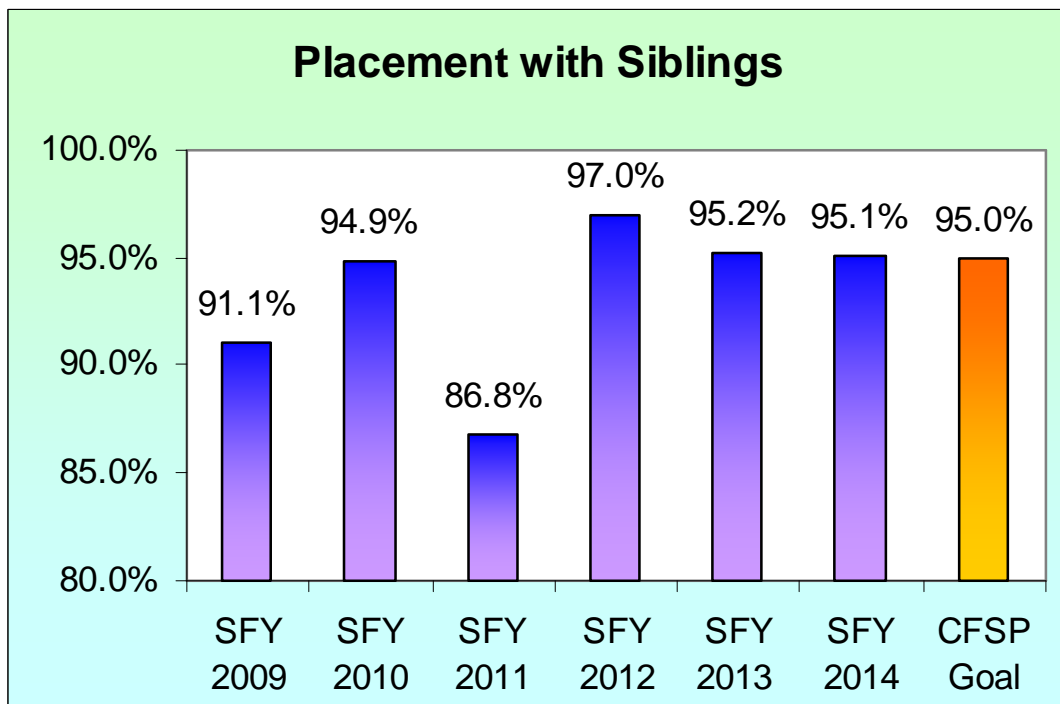
## 2. Permanency Outcome 2

*The continuity of family relationships and connections is preserved for children.*

### CFSR Item 7: Placement of siblings

*DHS will keep brothers and sisters together in foster care.*

State Fiscal Year CQI Data	Cases where siblings are placed together in foster care (out of all foster care cases involving siblings) <b>CFSP Goal: 95.0%</b>
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Data Source: UHMC-HCWCQI Project

This item is to determine if concerted efforts were made, during the period under review, to ensure that siblings in foster care are placed together, unless a separation was necessary to meet the needs of one of the siblings.

### **Strengths**

- Explicit policy and commitment to place siblings together in foster care
- Targeted recruitment of resource caregivers who are willing to house sibling groups
- Collaboration efforts on the issue of joint sibling placement with internal and external partners, such as faith-based community, cultural groups, parents advocate, resource families, CIP, CRP, and providers
- Use of 'Ohana conferencing with automatic referral and family findings
- When siblings are placed separately, it is usually due to special circumstances, such as high special medical or behavioral needs
- When siblings are placed separately, workers clearly document their efforts place siblings together.
- Regular sibling visits are established when large sibling groups are placed in separate homes.

### **Challenges**

- Lack of additional funding for resource caregivers who take in large sibling groups to offset the additional costs
- Lack of resource homes that are willing to house sibling groups, particularly larger groups
- Large sibling groups that are difficult to place together for practical reasons

**Goal for the next 5 years:** Maintain 95.1% or higher in this outcome.

**Measurement method:** Percentage of all foster care cases in which the child has one or more siblings who are (or were) also in foster care during the period under review in which concerted efforts were made to ensure that siblings in foster care are placed together unless a separation was necessary to meet the needs of one of the siblings.

Data Source: On-going CFSR case record reviews

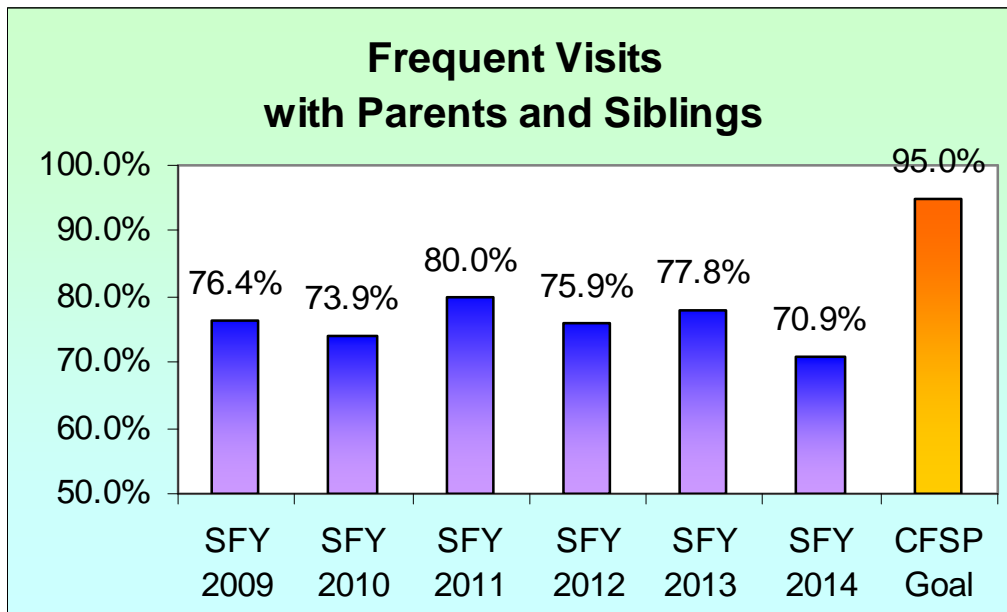
### **Sustainability plan includes:**

- Waiver intervention – CRT to do immediate search for relatives who could foster large group of siblings.
- Continue recruitment of resource homes that can care for large sibling groups
- Continue collaboration with Project Visitation (contracted provider who facilitates sibling visits) to allow for siblings placed in different homes to have ongoing contacts.
- Maintain emphasis on the importance of joint sibling placement
- Continue to present the information of the importance of joint sibling placement in CORE training (CWS new hire training)

## CFSP Item 8: Visiting with parents and siblings in foster care

*DHS will plan and facilitate visitation between children in foster care and their parents and siblings placed separately in foster care.*

State Fiscal Year CQI	<b>CFSP Goal: 95.0%</b>
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Data Source: UHMC-HCWCQI Project

This item is to determine if, during the period under review, concerted efforts were made to ensure that visitation between a child in foster care and his or her mother, father, and siblings is of sufficient frequency and quality to promote continuity in the child's relationship with these close family members.

As indicated on the chart above, Hawaii performed at about 75% during the last five years leaving Hawaii with lots of opportunities for improvement in the next five years.

### Strengths

- CWS policy mandates offering parents a minimum of three hours a week to visit with their children in foster care
- CWS has designated staff to provide transportation for the children in foster care for these visits.
- 'Ohana Time, i.e., the visitation is meaningful and supports the family bond

### Challenges

- Providing 'Ohana time for fathers;
- Providing 'Ohana time to incarcerated parents,

- Providing ‘Ohana time for domestic violence parents with mutual Temporary Restraining orders (TRO).
- Travel to and from visits
- Scheduling and organizing

**Goals for the next five years:**

SFY 2016: Achieve 76% or higher on this item.  
 SFY 2017: Achieve 87% or higher on this item  
 SFY 2018: Achieve 92% or higher on this item.  
 SFY 2019: Achieve 95 % or higher on this item.

**Method of measurement:** Percentage of foster care cases in which concerted efforts were made to ensure that visitation between a child in foster care and his or her mother, father, and siblings is of sufficient frequency and quality to promote continuity in the child’s relationship with these close family members.

**Source of Data:** On-going CFSR CQI review

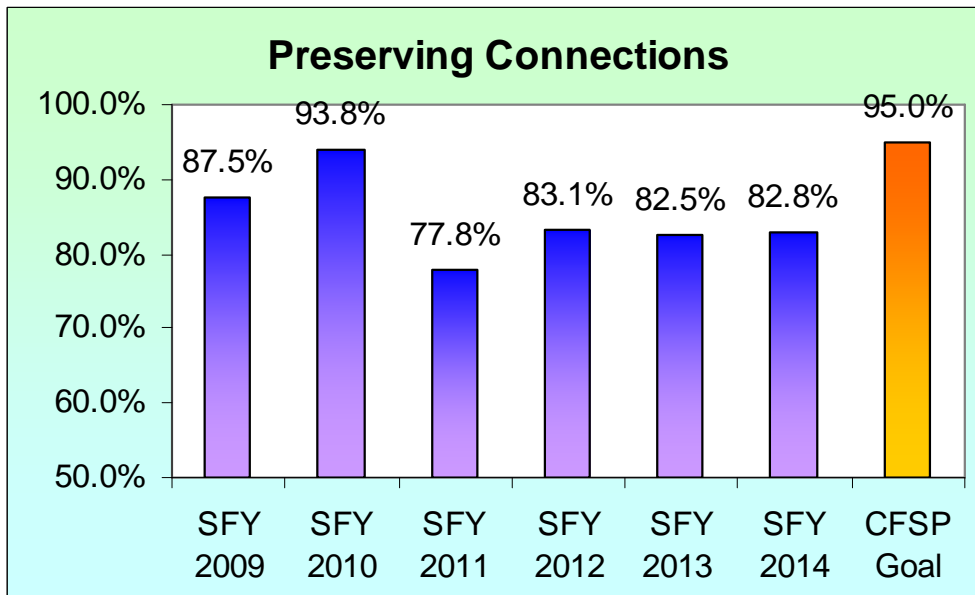
**Improvement plan includes:**

- Workers will continue to use the tools and techniques that they learned in the family engagement training
- Collaborate with Department of Public Safety to develop protocols and process to allow ‘Ohana time at prison for incarcerated parents
- Collaborate with CIP and TRO Judges to establish an understanding to allow ‘Ohana Time for DV parents with mutual TRO

**CFSR Item 9: Preserving connections**

*DHS will preserve important connections for children in foster care, such as connections to neighborhoods, community, faith, family, tribe, school, and friends.*

<b>State Fiscal Year CQI</b>	<b>Cases where a child’s important connections are preserved, while he/she is in foster care</b> (out of all foster care cases) <b>CFSP Goal: 95%</b>
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Data Source: UHMC-HCWCQI Project

This item is to determine whether, during the period under review, concerted efforts were made to maintain the child’s connections to his or her neighborhood, community, faith, extended family, tribe, school, and friends.

The chart above provides an overview of Hawaii’s performance during the last 5 years. Hawaii will need to continue its efforts to preserve child’s connections to extended family, neighborhood, tribes, friends and community.

**Strengths**

- Case reviews indicated that Hawaii had made efforts to maintain children in their community and connected to culture, school, family (including older siblings, grandparents, and cousins), sports, and friendships.
- Efforts were also made to maintain the child’s therapist until a higher level of care was needed
- Educational Stability Initiative
- ‘Ohana Time
- Workers investigated the child’s Hawaiian heritage for admission to programs with Queen Liliuokalani Children’s center (QLCC), Office of Hawaiian Affairs (OHA) and Kamehameha Schools

**Challenges**

- Native American tribal members were not consistently explored for connection with children of Native American ancestry.
- Legal and logistical complication in establishing paternity
- Difficulties partnering with the DOE for educational stability
- Locating family members to help provide the cultural connection

**Goal for next 5 years:**

SFY 2016: Increase performance to 85%

SFY 2017: Increase performance to 90%  
 SFY 2018: Increase performance to 93%  
 SFY 2019: Increase performance to 95%

**Method of measurement:** The proportion of applicable foster care cases in which concerted efforts were made to maintain the child’s connections to his or her neighborhood, community, faith, extended family, tribe, school, and friends.

**Source of Data:** Ongoing State CQI-CFSR review of cases

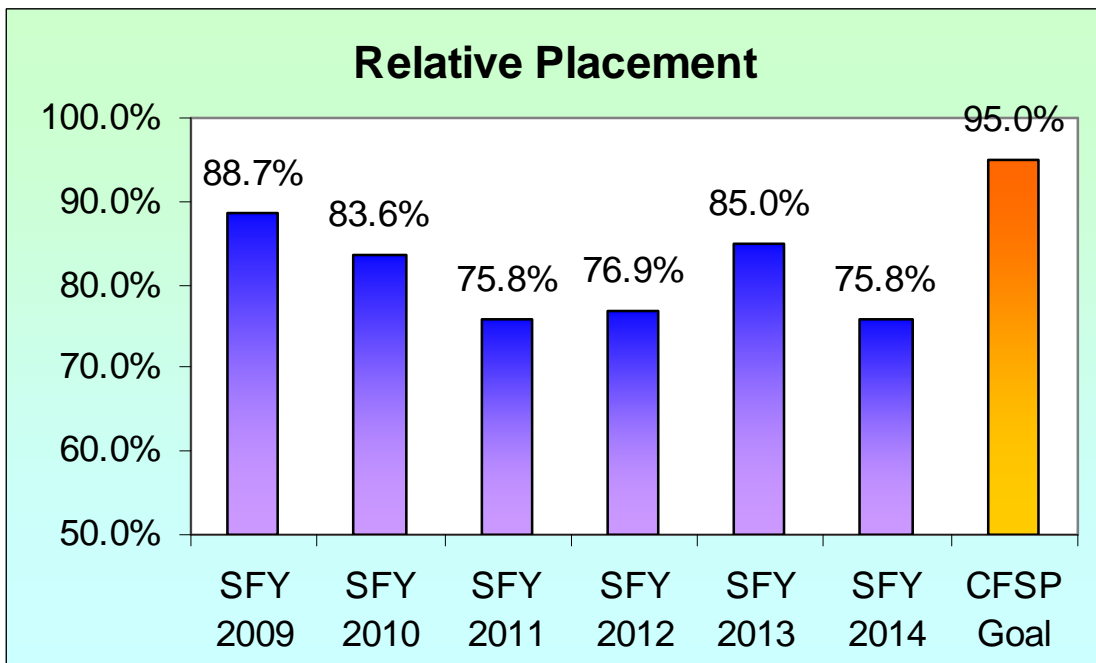
**Improvement plan includes:**

- Continue to engage mothers, legal fathers, siblings, using a wider range of techniques, based on information from CWS’ training on Family Engagement
- Use data to keep track of Native American children and making sure that appropriate follow-up and connections are set up with appropriate tribe.
- Ensure staff explores connections with paternal families in all cases, even if paternal families reside outside Hawaii.

**CFSR Item 10: Relative Placement**

*DHS will identify relatives who could care for children entering foster care and use them as placement resources when appropriate.*

<b>State Fiscal Year CQI</b>	<b>Cases where children were placed with in foster care with relatives, when appropriate</b> (out of all foster care cases) <b>CFSP Goal: 95%</b>
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Data Source: UHMC-HCWCQI Project

This item is to determine whether during the period under review, concerted efforts were made to place the child with relatives when appropriate.

### **Strengths**

- CWS long term, explicit commitment to relative placement
- Policies in place to promote relative placement
- Family Finding efforts
- Relative notification letters are sent out to family members of the child, when he/she enters foster care for connections and possible placement
- Family Connections
- Automatic referral to Ohana Conferencing
- Over time the percentage of relative placements has increased (Hawaii leads the nation in relative placement in foster care).

### **Challenges**

- Some attitudes among staff that it may not be safe to place children with relatives
- Relatives who are initially unable to care for the children
- Locating relatives
- Relative resource caregivers sometimes have difficulty completing all of the licensing requirements.

### **Goal for the next 5 years:**

SFY 2016:

SFY 2017:

SFY 2018:

SFY 2019:

Increase performance to 95%

**Method of measurement:** For the case record reviews, of the applicable foster care cases reviewed, the percentage of cases demonstrating that, during the period under review, concerted efforts were made to place the child with relatives when appropriate. For the CPSS statewide data, the proportion of (explain how you would compute it).

**Data Source:** Ongoing CFSR CQI review and CPSS statewide data

### **Improvement Plan includes:**

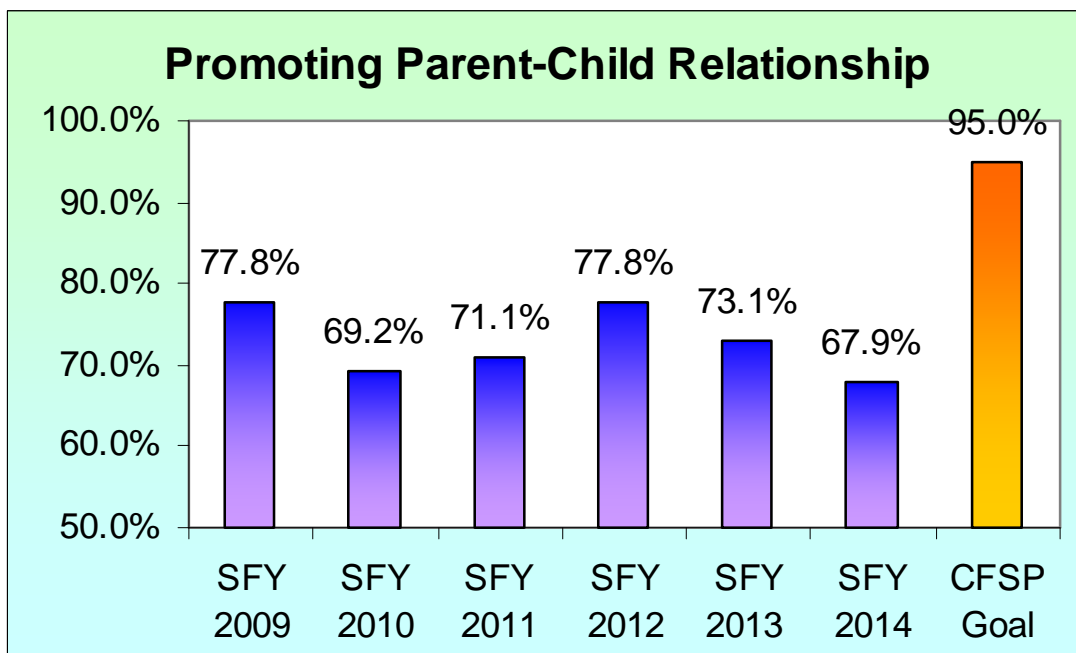
- Continue to engage EPIC agency in Family Findings Search
- Code and input data to identify/track cases to make sure that Family Findings were done and follow-up were completed with relatives found for all children who are placed in non-relative resource homes.
- Mandatory family findings with the use of crisis response team – (waiver intervention)



## CFSR Item 11: Relationship of child in care with parents

*DHS will promote or help maintain the parent-child relationship for children in foster care, when it is appropriate to do so.*

<b>State Fiscal Year CQI</b>	<b>Foster care cases where DHS made good efforts to promote the parent-child relationship, other than just arranging visitation</b> (out of all foster care cases) <b style="color: red;">CFSP Goal: 95%</b>
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Data Source: UHMC-HCWCQI Project

This item is to determine whether during the period under review, concerted efforts were made to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation.

Hawaii will continue to make efforts to promote, support and/or maintain positive relationships between the children and parents through activities other than just arranging for visitation.

### **Strengths**

Hawaii found that the use of the ‘Ohana Conferences were helpful to coordinate activities to maintain relationships with parents and children. Activities included children’s doctor visits, and family therapy, participation in extracurricular activities, helping with homework, and participation in therapy.

### Challenges

Hawaii found that some children did not have relationship established with their fathers prior to coming into foster care and in some cases, both parents were not readily available or efforts were not made to locate missing parents to be involved with their children.

**Goal for next 5 years:** Increase performance to 95%

**Method of measurement:** Of the applicable foster care cases, the percentage of which, during the period under review, concerted efforts were made to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation.

**Data Source:** Ongoing CFSR CQI review of cases

### Improvement plan includes:

- Increase engagement with fathers, even if fathers were not involved in child's life prior to CWS' involvement via support groups for dads, specially-planned activities for fathers and their children, and ongoing training to staff on methods to engage families
- Follow-up with locate actions – to locate missing parents, partnering with CSEA and using the Federal Parent Locator Service, among others
- Ensure workers and resource caregivers continue to invite and encourage mothers and fathers to participate in activities with their children (e.g., doctor visits, school events, etc.) even if the parent(s) is not following through on his/her case plan services
- Continue to ensure 'Ohana conferences are used to identify/commit to activities that promote parent/child engagement, in addition to visitation

## PART 3: WELL-BEING

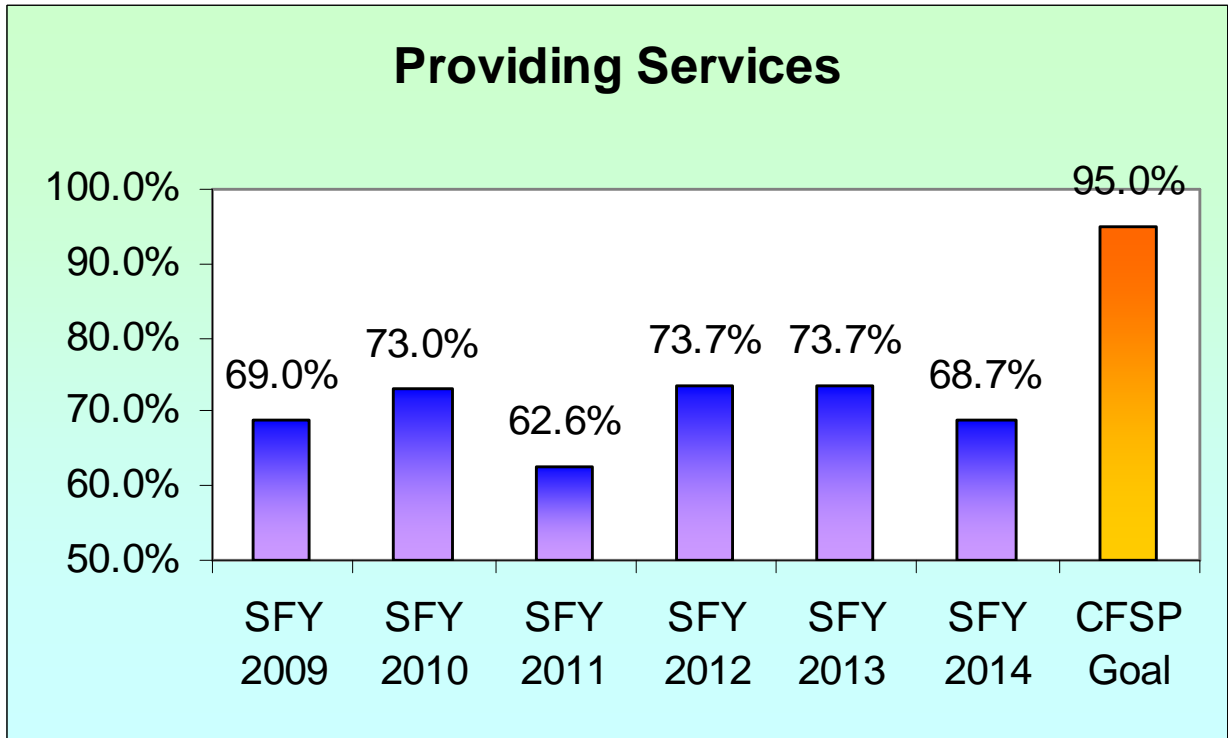
### CFSR Well-Being Outcome 1

*Families have enhanced capacity to provide for their children's needs.*

### Item 12: Services to Children/Youth, Parents and Resource Caregivers

*DHS will assess the needs of children, parents and resource caregivers, and will provide needed services to children in foster care, to their parents and resource caregivers, and to children and families receiving in-home services.*

<b>State Fiscal Year CQI Data</b>	<b>Cases where appropriate assessments were completed and the needed services were provided for children, parents, and resource caregivers</b> (out of all CWS cases, both in-home and foster care cases) <b>CFSP Goal: 95%</b>
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Data Source: UHMC-HCWCQI Project

This item is to determine whether, during the period under review, the agency made concerted efforts to assess the needs of children, parents, and resource caregivers (both at the child’s entry into foster care [if the child entered during the period under review] or on an ongoing basis) to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency’s involvement with the family, and provided the appropriate services.

Although performance has improved since SFY 2011, the State expects to make further improvements with the planned actions identified below.

**Strengths:**

- ‘Ohana Conferences, especially the automatic referrals to ‘Ohana Conferencing
- ‘Ohana Time trainings, procedures, and clarifications
- Collaboration with DOH, DOE, and other service providers

**Challenges**

- Lack of regular monthly contact resulted in inability to properly assess families’ needs and matching them with appropriate services.
- Lack of services to incarcerated parents
- Lack of ICPC
- Lack of interpreter services

**Goal for the next 5 years:** Meet the goal as stated above 95%

**Method of measurement:** Of all cases reviewed, percentage of cases in which, during the period under review, the agency made concerted efforts to assess the needs of children, parents, and foster parents (both at the child’s entry into foster care [if the child entered during the period under review] or on an ongoing basis) to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency’s involvement with the family, and provided the appropriate services.

**Data source:** Ongoing CFSR review of cases

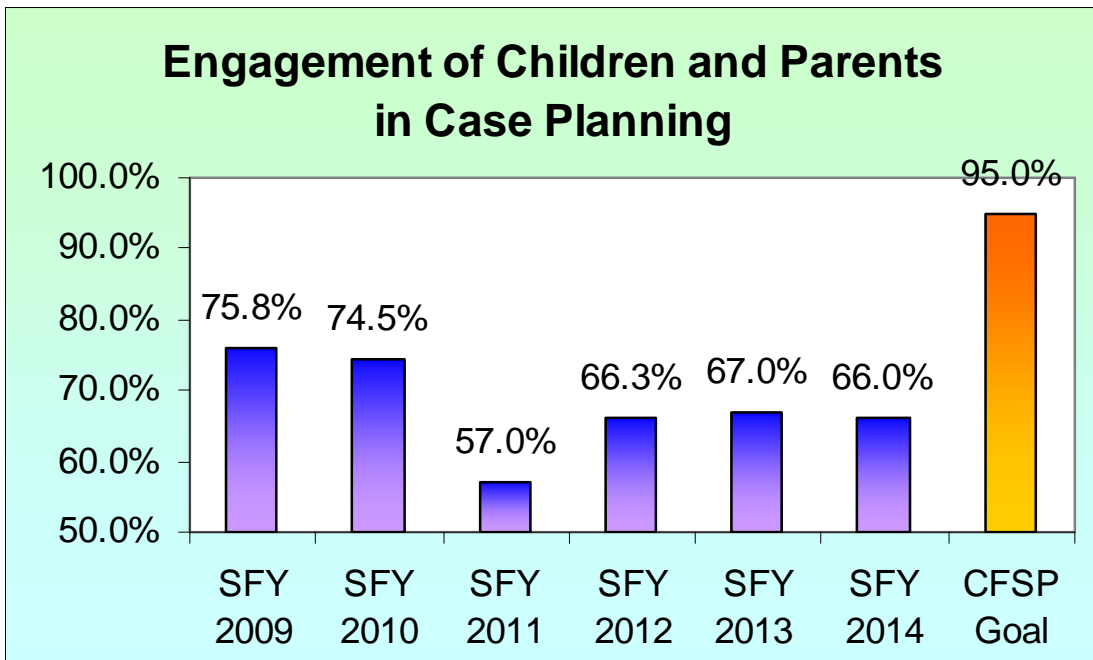
**Improvement plan includes:**

- Continue to use automatic referral to ‘Ohana Conferences for foster care cases
- Focus on tracking monthly caseworker visits with birth parents
- Refresher training on ICPC and interpreter services
- Collaborate with Department of Public Safety to reach an agreement on services for incarcerated parents
- Code, track and review data on incarcerated parents

**Item 13: Engagement of Child & Parent in Case Planning**

*DHS will involve parents and children in the case planning process.*

<b>State Fiscal Year CQI</b>	<b>Cases where parents and children were actively involved in the case planning process</b> (out of all active CWS cases, both in-home and foster care cases) <b>CFSP Goal: 95%</b>
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Data Source: UHMC-HCWCQI Project

This item is assessed to determine whether efforts were made to involve parents and children in case planning.

Since SFY 2011, Hawaii continues to make progress in this area and is hopeful that it will continue to make improvement in the next five years.

**Strengths**

The use of 'Ohana Conferencing continues to be an avenue for engaging families in developing their case plans. Monthly worker visits are seen as another avenue that allows families to express their feelings and voice their concerns and thoughts about their plan. Additionally, caseworkers actively encourage and support youth to attend court hearings. Caseworkers are continuously engaged in efforts to locate parents and children when they aren't readily available.

**Challenges**

Based on the case reviews, concerns were indicated around these areas; 1) infrequent contacts with families; 2) fathers were not included in case planning ; 3) incarcerated mothers and fathers were not engaged or contacted; 4) school-aged children were not engaged in case planning; 5) lack of interpreter to help family understand

**Goal for the next 5 years:** Increase performance to 95%

Method of measurement: Of the cases reviewed, the percentage in which, during the period under review, concerted efforts were made (or are being made) to involve parents and children (if developmentally appropriate) in the case planning process on an ongoing basis.

**Data Source:** Ongoing CFSR CQI reviews

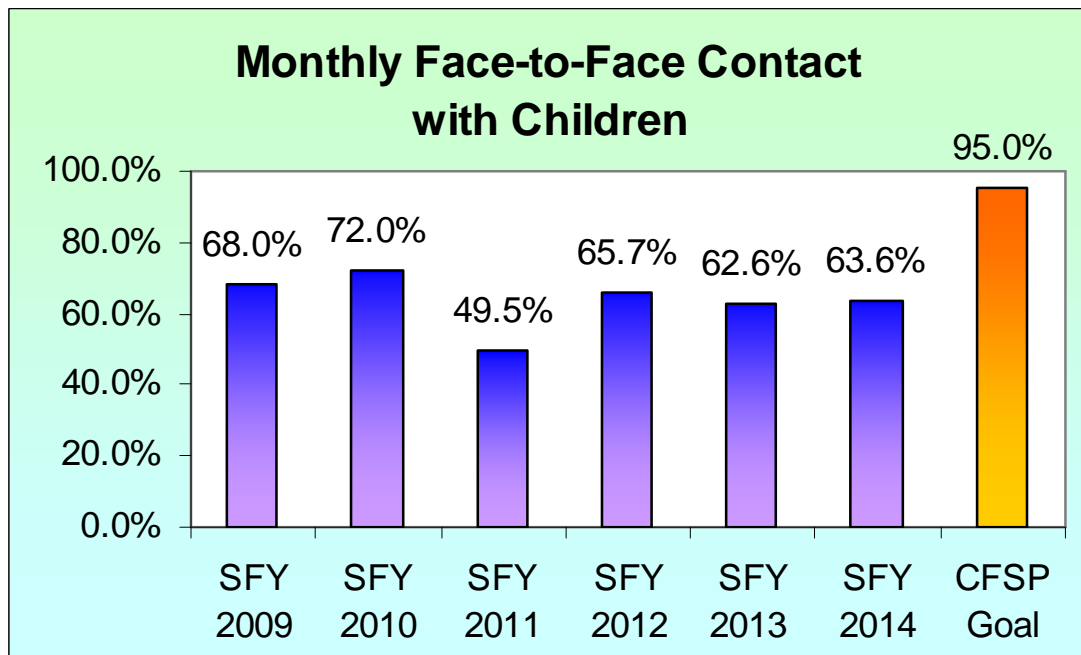
**Improvement Plans include:**

- Focus on and increase monthly worker's visit with parents and children with improved tracking
- Provide refresher training about engaging fathers, father's family and children
- Strengthen new worker Core training in the areas of family engagement
- Collaborate with Department of Public Safety regarding case planning with incarcerated parents
- Train CWS staff on how to properly access and work with interpreters

**Item 14: Face-to-face contact with Children**

*DHS will conduct face-to-face visits as often as needed, at least once a month with children in foster care and those who receive services in their own homes.*

<b>State Fiscal Year</b>	<b>Cases where children had live visits with their CWS case worker at least once a month, every month</b> (out of all CWS cases, both in-home and foster care cases) <b>CFSP Goal: 95%</b>
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Data Source: UHMC-HCWCQI Project

This item is assessed for the frequency and quality of contact with the child by the caseworker.

Hawaii is committed to improving in this area in the next 5 years. Hawaii strongly believes in the value of monthly face to face visits with children.

#### Strengths

- Caseworkers generally meet with children alone, as appropriate for their age and development, during their visits
- Caseworkers usually discuss safety, permanency and wellbeing in a way appropriate for that specific child.
- Caseworkers often build good rapport with the children/youth
- Caseworkers generally visit with children in a variety of settings—home, school, community, etc.
- Caseworkers often note observing interactions of the child with parents and/or siblings as part of their monthly contact.
- The majority of caseworkers are properly documenting their visits in the CWS data system.

#### Challenges

- Caseworkers' workload
- Scheduling problems
- Youth on the run
- Worker oversight
- Lack of documentation of visits
- ICPC issues
- Periods of time when a case is being transferred

**Goal for the next 5 years:** Increase performance to 95%

**Method of measurement:** For the case record reviews, the percentage of all cases (foster care and in-home cases) reviewed in which the frequency and quality of visits between caseworkers and the child(ren) in the case are sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals. For the Title IV-B monthly visit requirement, out of the total visits that would have been made if each child who was in foster care had been visited once per month, the percentage of visits that actually occurred, and, of the total visits made, the percentage of those visits that occurred in the child’s foster care placement.

**Data Sources:** Ongoing CFSR review and annual Title IVB worker visit survey

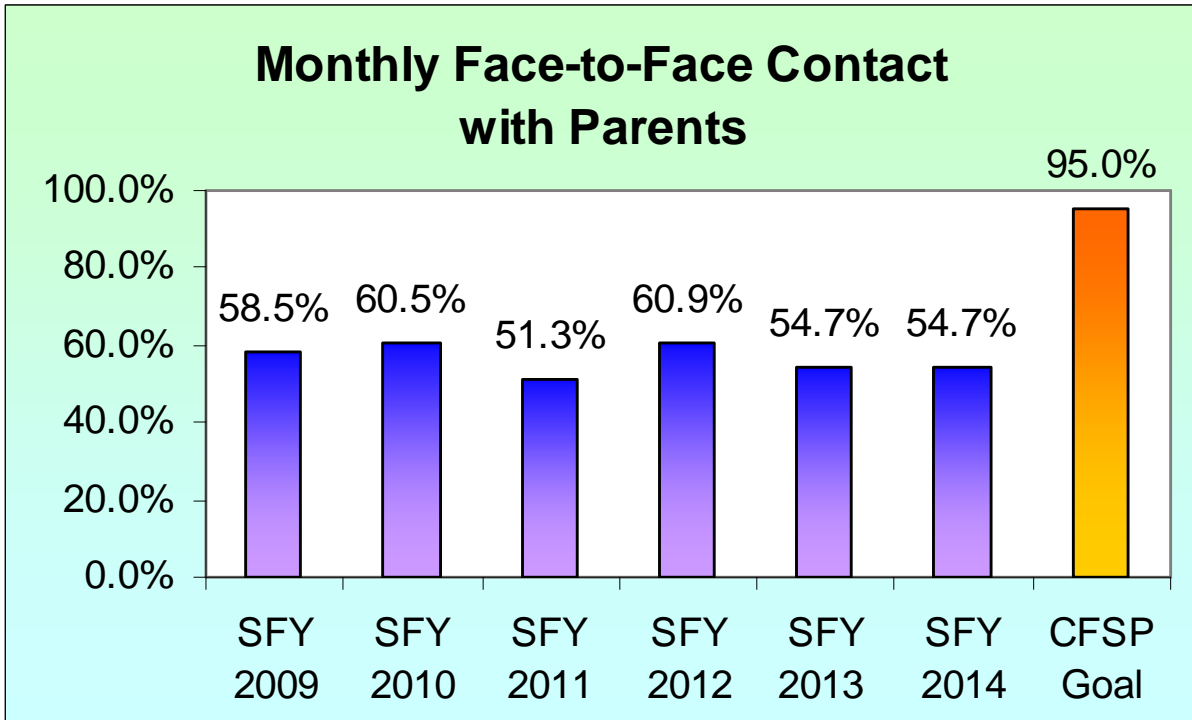
**Improvement Plans include:**

- System merging of data from SHAKA to CPSS and vice-versa using E-World partnership
- Monthly teleconference with Section Administrators to discuss barriers and improvements regarding worker’s visit including reminder of alone time with child, and visit @ location of child’s home.
- Runaway children – Establish clear procedures on efforts to locate runaway children; engaging birth parents, law enforcement; Attorney general office, human trafficking council on identification, location and documenting efforts.
- Developing stricter protocols regarding case transfers, including a mandatory visit by the transferring worker prior to transfer
- Using the new CPSS Worker Visit Tracking System
- Using SHAKA to track worker visits (or a sample of needed visits) with weekly statewide phone-calls with Section Administrators and Branch
- For ICPC cases, contracting with local social service agencies to do the monthly visits when a child is placed out of state, before the local CWS picks-up the case
- Developing stricter protocols regarding documentation of visits
- Supervisors regularly reinforcing the vital importance of monthly face-to-face contacts, and helping worker to prioritize visits and visit documentation

**Item 15: Face-to-face contact with Parents**

*DHS will conduct face-to-face visits as often as needed, at least once a month, with parents of children in foster care and parents of children receiving in-home services.*

<b>State Fiscal Year CQI</b>	<b>Cases where both parents had live visits with their CWS case worker at least once a month, every month</b> (out of all CWS cases, both in-home and foster care cases) <b>CFSP Goal: 95%</b>
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Data Source: UHMC-HCWCQI Project

This item is assessed for the frequency and quality of contact with the parents by the caseworker when parental rights are not terminated.

Hawaii will continue to work on this area.

#### Strengths

- Caseworkers schedule visits that accommodate parental work schedules.
- Caseworkers meet wherever is most convenient for the parents.
- Caseworkers' persistence in contacting parents monthly and using a number of avenues to solicit and/or maintain contact.

#### Challenges

- Lack of regular monthly contacts and lack of efforts to locate missing parent;
- Incarcerated parents – were not consistently contacted;
- Parent moving to another island without request for courtesy services on that island;
- Caseworker reported visits were done but there was no documentation available.

**Goal for the next 5 years:** Gradual increase performance in this area to 65% in 2015; 75% in 2016; 85% in 2017; 90% in 2018; and 95% in 2019

**Method of measurement:** For the case file reviews, the percentage of case reviewed in which, during the period under review, the frequency and quality of visits between caseworkers and the mothers and fathers of the children are sufficient to ensure the safety, permanency, and well-being of the children and promote achievement of case



goals. For statewide aggregated data, (explain how you calculate the percentage using your data from CPSS or SHAKA?)

**Data Sources:** Ongoing CFSR review; Data tracking/extraction from CWS database

**Improvement plan will include:**

- Hawaii Citizen Review Panel work focus on Engaging Fathers and Worker visits
- Monthly data review with Section Administrators to identify progress and barriers
- Engagement with Department of Public Safety re- incarcerated parents
- Refresher training on procedures re – Courtesy supervision cases
- Establish a systematic way of ensuring documentation of visits are completed

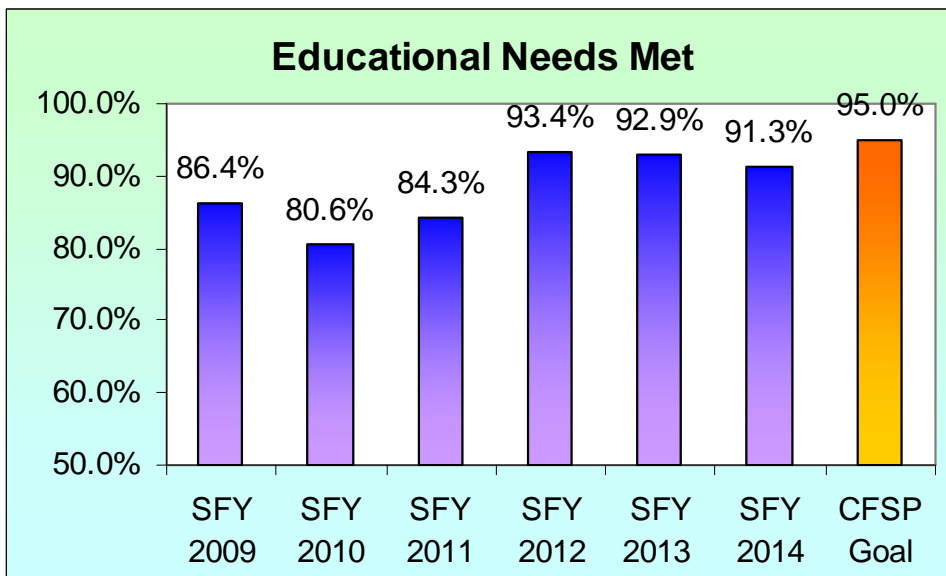
**CFSR Well-Being Outcome 2**

*Children receive appropriate services to meet their educational needs.*

**Item 16: Educational needs of the child**

*DHS will address the educational needs of children in foster care and those receiving services in their own homes.*

<b>State Fiscal Year CQI Data</b>	<b>Cases where children’s educational needs are met</b> (out of all CWS cases, both in-home and foster care cases) <b>CFSP Goal: 95.0%</b>
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Data Source: UHMC-HCWCQI Project

The purpose of this item is to assess whether, during the period under review, the agency made concerted efforts to assess children’s educational needs at the initial contact with the child (if the case was opened during the period under review) or on an ongoing basis (if the case was opened before the period under review), and whether identified needs were appropriately addressed in case planning and case management activities.

### **Strengths**

- Resource caregivers initiate and follow-up on much of the work needed to help meet the child's educational needs
- Increased partnering with DOE
- Educational stability efforts and agreements
- CWS caseworkers advocate for the educational needs of their youth

### **Challenges**

- Lack of monthly contacts which results in inability to assess child's needs
- Workers do not consistently follow-up on educational issues that are noted by the Guardian Ad Litem (GAL);
- Addressing youth's on-going truancy.

**Goal for the next 5 years:** Sustain the high performance and to meet the 95%

**Method of measurement:** Percentage of cases in which, during the period under review, the agency made concerted efforts to assess children's educational needs at the initial contact with the child (if the case was opened during the period under review) or on an ongoing basis (if the case was opened before the period under review), and whether identified needs were appropriately addressed in case planning and case management activities.

**Source of Data:** Ongoing CFSR CQI case reviews

### **Sustainability and improvement plan will include:**

- Continue engagement with DOE, Family Court, Legal Aid Society of Hawaii, and It Takes an 'Ohana, to further develop and implement Educational Stability agreement for foster children.
- Focus on ensuring worker monthly visits with children and follow-up with reports of educational needs.
- Engage with DOE and Family court to address the issues of youth's truancy
- Hawaii's SPC plans to work with public and private schools, including preschools, the DOE, and the State Judiciary to improve educational outcomes for children in foster care

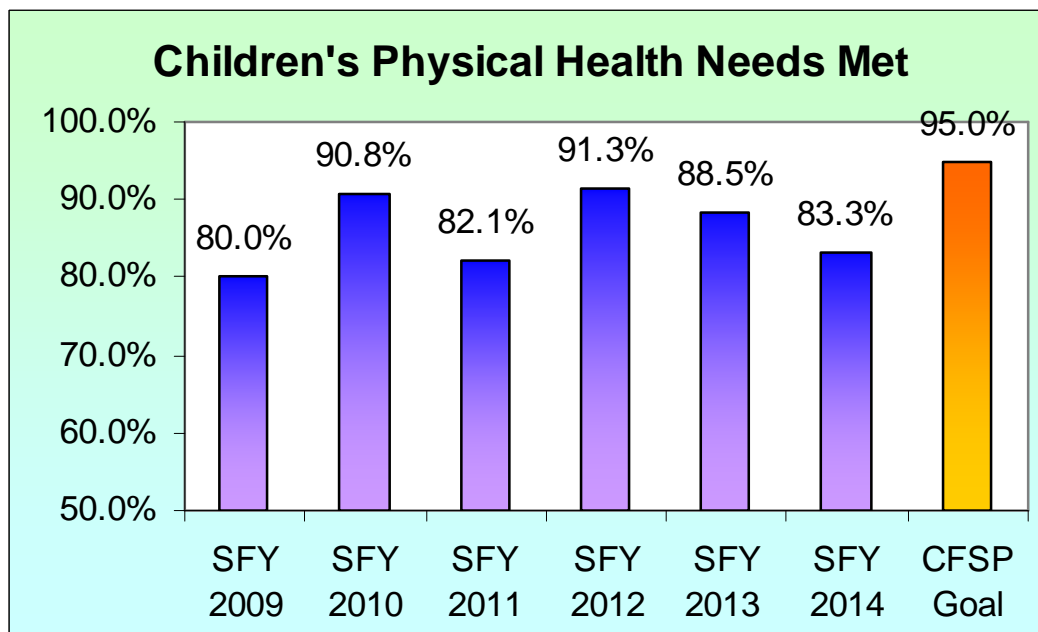
### **CFSR Well-Being Outcome 3**

*Children receive adequate services to meet their physical and mental health needs.*

#### **Item 17: Medical and Dental Health of Children/Youth**

*DHS will ensure that the physical health and medical needs of children are identified in assessment and case planning activities and that those needs are addressed through services.*

<b>State Fiscal Year CQI data</b>	<b>Cases where children’s physical health needs were met</b> (out of all CWS cases, both in-home and foster care cases) <b>CFSP Goal: 95%</b>
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Data Source: UHMC-HCWCQI Project

This item is assessed for all foster care cases *and* applicable in-home cases to determine whether the agency made concerted efforts, during the period under review, to assess the children’s medical and dental health needs upon initial contact (if the case opened during the period under review) and on an ongoing basis, and whether identified needs (including the need for routine care) were appropriately addressed.

Hawaii continues to perform well in this area as showed by chart above, and is committed to sustaining and improving as well. The case reviews showed these concerns: 1) in some cases there was no medical or dental appointment for the children after their initial appointment at the time of placement; one of these children was diagnosed as failure to thrive at the initial medical appointment; 2) lack of monthly quality contacts which may have helped to assure that the children’s medical and dental needs were met and 3) the child’s medical health needs were addressed but the dental health needs were not.

**Goals for the next 5 years:** Improve to 95% starting from 2015 and sustain at that level to 2019

**Method of measurement:** Percentage of case reviewed in which, during the period under review, the agency addressed the physical health needs of the child, including dental health needs.

**Data Source:** on-going CFSR review of cases

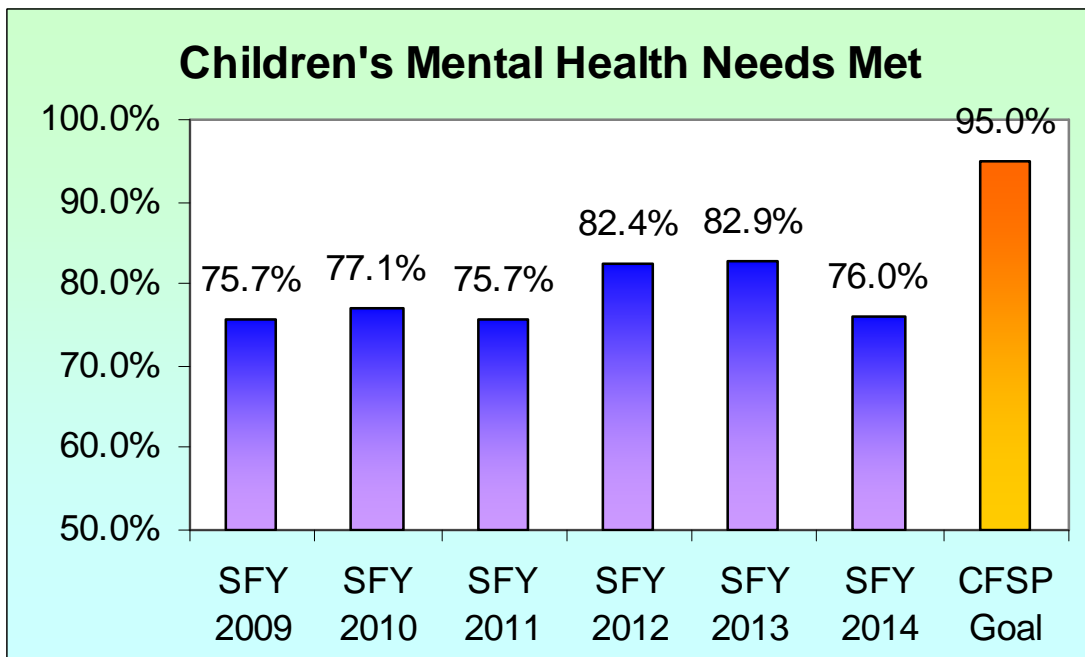
**Sustainability and improvement plan include:**

- Training – refresher training to reinforce procedures on pre-placement physical and follow-up appointments
- Use of quality monthly contacts and monthly review of worker visits with section administrators
- Standardize checklists for cases to include dental health record
- Strengthening of CWS' health care oversight plan, including the tracking system to ensure the EPSDT schedule is met for every child in foster care

**Item 18: Mental Health Assessments and Services for Children/Youth**

*DHS will ensure that the mental/behavioral health needs of children are identified in assessments and case planning activities and that those needs are addressed through services.*

<b>State Fiscal Year</b>	<b>Cases where children’s mental/behavioral health needs were met</b> (out of all CWS cases, both in-home and foster care cases) <b>CFSP Goal: 95%</b>
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Data Source: UHMC-HCWCQI Project

To determine whether, during the period under review, the agency addressed the mental/behavioral health needs of the child(ren).

**Strengths**

- Use of Monthly Worker Visit Tool, which reminds workers to discuss mental health issues and needs, as well as to monitor youth’s use of psychotropic medication

- All CWS staff statewide were trained in SFY 2012 on the meeting children’s mental health needs, which included how to refer for mandatory mental health assessments
- Data on the completion of mental health assessments is being captured by CWS’ database.

**Challenges**

- Occasionally, the need for mental health services is identified but referrals are not made;
- Lack of appropriate mental health providers in the more rural areas of the State
- Sometimes, referrals are made for therapeutic services and/or medication management; however, services are not provided;
- CWS Caseworkers are not consistently assessing and referring for mental health
- Unclear documentation of child’s needs;
- Lack of contact with mental health providers.

**Goal of improvement for next 5 years:** Improve performance to 95%

**Method of measurement:** The percentage of case review in which, during the period under review, the agency addressed the mental/behavioral health needs of the child(ren).

**Data Source:** on-going CFSR Review

**Improvement plan will include:**

- Continue engagement with DOH and its providers
- Cross training of DOH and DHS staff on referral process and services
- Increase of worker visits with child with clear documentation of child’s needs

**SYSTEMIC FACTORS**

**1. INFORMATION SYSTEM**

**Information System Goal:** DHS operates a statewide information system that, at minimum, can readily identify the status, demographic characteristics, location and goals for the placement of every child who is (or within the immediate preceding 12 months has been) in foster care.

Hawaii’s primary system of record is the CPSS system. Although CPSS has served Hawaii well for many years, there are many concerns about CPSS including these:

- Legacy system – based on old technology
- Does not take advantage of / allow newer technology [even such simple functions as spell check & word wrap)
- Need to have a system accessible remotely by both workforce and clients
- Not able to display data in dashboard or online alerts / “ticklers”
- Not web-based, no ability to capture real time data, unable to access from remote areas

- User interface – not user friendly
- Minimal context or situational help screens / function
- Transaction driven / Users find it difficult to navigate
- Multiple screens/transactions often needed to complete one process
- Hard for end users to obtain / use data in the system
- Data retrieval & Reports are: not real-time, often created as ‘ad hoc’ for specific situation and not incorporated into general report generation, cannot be created by end user without the intervention of IT or R&S Offices, standard hard copy v. excel or other easily manipulated format
- Input is table driven and provides range of useable codes. Input fields allow/ accept wide range of codes; allows inconsistency across workers
- No interfaces with other State / Federal agencies/programs
- No access by other stakeholders such as providers, youth, other agencies
- No guided decision making or Automated suggested decision making
- No automated determination of Title IV-E eligibility

Despite the listed concerns about CPSS, it also has its strengths:

- Allows & supports the full range of basic activities and data needs of the Branch, including: -Case management and payment
- Gathers an abundance of data
- System is data rich
- Report can be generated for any/all elements contained in the database
- Enables reporting for NCANDS
- Meets reporting requirements for AFCARS

In 2007, DHS contracted with Maui Community Colleges (MCC) for a new technology solution with plans to replace the existing CPSS. This new system named the “State of Hawaii Automated Keiki Assistance” (SHAKA) and the new solution would provide: A modern system to support Child Welfare Services (CWS) for the next ten years and beyond, to be available via web-based interface accessible from anywhere, to provide real time reporting and tracking, and to comply with the State Automated Child Welfare Information System (SACWIS) requirements. In 2009, other new requirements were added on this work based on results of our CFSR review in 2009, and with the development of our Program Improvement Plan 2 (PIP2).

In 2012, the SHAKA system was not completed and the department had shifted to a Family Partnership and Engagement Practice Model, which the SHAKA system was not designed or capable to support.

In 2013, the Hawaii DHS Executive Management engaged Gartner to conduct an assessment and develop a Strategic Technology Roadmap for the enhancement of CWS and Adult Protective Services (APS). The project scope and objectives: the identification of needed enhancements that can be made to the current CWS and APS processes and system(s), including the following:

**User Interface and Usability** – Enhancing the usability of the current SACWIS system by end users to improve system access and efficiency in supporting the business.

## **Reporting and Decision Support** – Improving reporting, alerts, and dashboards

**Identification of other technology support gaps** and the prioritization of near term information technology (IT) investments.

### **Objective 1: Continue work with SHAKA system and current CPSS until the implementation of Hawaii’s new system by 2019.**

The CPSS is the primary system of record for Hawaii, and SHAKA contributes a web-based system that is critical with Hawaii’s past and present operation. With the new Title IV-E Waiver activities and our new Voluntary Care to 21 (Imua Kākou), SHAKA will be instrumental in collection of real time data, in tracking and monitoring progress, and electronic storage of vital documents for youth.

## **CASE REVIEW SYSTEM**

**Case Review System Goal:** Hawaii is committed to ensure its case review system for each child receiving foster care under the supervision of the State is compliant with Federal and State requirements and supports child safety, permanency, and well-being.

### **Objective 1: Individualized case plan for each child**

#### **Focus will be on these:**

- Ensure that each child has a written case plan specifically designed to help child achieve permanency in a safe place, that is least restrictive, and in close proximity to the parents’ home, consistent with best interest and special needs of child
- Engage the child (as appropriate) and parents in developing their case plan
- Develop the case plan within 60 days of removal.

### **Objective 2: Timely Periodic Review**

Focus will be on ensuring periodic reviews are in place:

- No less frequently than once every six months by either the Family Court or by an Administrative review body
- During reviews-
  - Determine safety of the child in placement,
  - Assess continuing necessity for and appropriateness of the placement
  - Assess the extent of compliance with the case plan
  - Assess the extent of progress made toward alleviating the causes necessitating placement in foster care
  - Project a likely date by which the child may be returned to and safely maintained in the home or placed for adoption or legal guardianship

Monitoring and tracking of timeliness will be done via CPSS data printouts.

### **Objective 3: Timely permanency hearing**

Hawaii will continue:

Be in compliance with the Federal requirement 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 that the child entered foster care, and no less frequently than every 12 months thereafter.

Monitoring and tracking of timeliness will be done via our AFCARS data.

#### **Objective 4: Youth's Transitional Plan**

With the implementation of our Imua Kākou (Voluntary Care to 21) on July 1, 2014, DHS is committed to ensuring foster youth are prepared and able to transition smoothly and safely into the Imua Kakou program. During the 90-day period immediately prior to the child reaching age 18, Hawaii is committed engaging the child in developing a personalized transition plan that:

- includes specific options on housing, health insurance, education, local opportunities for mentors and continuing support services, and work force supports and employment services,
- includes importance designating another individual to make health care treatment decisions on behalf of the child if the child becomes unable to participate in such decisions and the child does not have, or does not want, a relative who would otherwise be authorized under State law to make such decisions, and provides.

#### **Objective 5: Child's Health, Education Record and other vital documents.**

DHS will continue its practice of making sure that resource parents are provided with a copy of the foster child's health and education record at the time of placement in a folder that is identified as the "Child Information Folder" (CIF).

For all foster youth, DHS will enhance its process to ensure foster youth who exits foster care by reason of having attained the age of majority under Hawaii's state law (18 yrs) is provided with originals of their birth certificates, social security card, State identification, medical insurance cards, health records and education records.

Hawaii is able to store copies of these documents in the youth's file in a SHAKA town's youth portal vault. If the youth loses or misplaces the original documents, copies can be accessed this storage vault to assist with application for document replacement.

#### **Objective 6: Credit Reports for Foster Youth 16 and above**

DHS continues to ensure all foster youth who has attained 16 years of age receives without cost a copy of any consumer report (as defined in section 603(d) of the Fair Credit Reporting Act) pertaining to the child each year until the child is discharged from care, and receives assistance (including, when feasible, from any court-appointed advocate for the child) in interpreting and resolving any inaccuracies in the report. Hawaii has implemented this policy and procedure for this task, and within the next 5



years, further enhancements is needed in designating specific staff in Units/Section to advocate and resolve credit problems.

**Objective 7: Extend Voluntary Foster Care to 21.**

In 2013 Hawaii passed legislation to Extend Voluntary Foster Care to 21 and Hawaii plans to implement this program on July 1, 2014 which will also extend adoption assistance and kinship guardianship assistance to youths who were adopted or kinship awarded at age 16 or older.

Strengths: With the establishment of these case review systems, Hawaii continues to have opportunities to enhance these systems based on feedback from its internal and external partners. Collaboration with the Family Court, Attorney General's office, Section Administrators, front line supervisors, and others have provided CWS with insight into its strengths and areas needing improvement. Until the desired outcomes are achieved, Hawaii is optimistic that collaboration and strong partnership will continue to ensure compliance with regulations as well as achieving best outcomes for children and families.

**QUALITY ASSURANCE SYSTEM**

**Foundational Administrative Structure**

Hawaii has developed and implemented standards to ensure that children in foster care placements are provided quality services that protect the safety and health of the children and is operating an identifiable quality assurance system as described below in this CFSP. Hawaii's QA system is in place for all areas where services are provided by CWS.

**. Data Collection**

Our primary system of record (CPSS) is an archaic system, it is able to collect and extract specific outcome data on a regular basis or as an ad hoc report. The primary collection of qualitative data is done through our case record review system as described above. In addition to a case review process based on the CFSR model, Hawaii's quality assurance system recently began to conduct site reviews of the contracted providers (Domestic Violence Shelters, Enhanced Healthy Start program) to evaluate the adequacy and quality of services provided to children and families.

The plan for the next 5 years includes on-going reviews of contracted services to ensure quality of services. Hawaii plans to review Purchase of Services contracts including: Independent Living Programs, Domestic Violence services, Comprehensive Services, ILP, Substance abuse services, and family strengthening services.

Collection of data will include SHAKA data on – 48 Hr Tracking information, investigation status reports, worker monthly face to face visits, caseload, investigation status, and permanency goals for foster children in care over 9 months.

### **Case Record Review data and process**

The onsite case reviews are conducted once every fiscal year in each of the seven Child Welfare Services Sections across the state. ROSES Systems Solutions, LLC, a consultant to the Department's Support Services Office, produces a random sample of cases corresponding to the identified sampling period. A sample of 12 cases (8 out-of-home placement and 4 in-home cases) is reviewed for each Neighbor Island section for different periods under review. A sample of 12-13 cases, with a similar breakdown of 9 out-of-home and 4 in-home cases, is reviewed for each Oahu section. The findings from each section are then aggregated to comprise the random sample of 100 cases for statewide review. 13 cases are being reviewed in each of the four (4) Oahu Sections and 12 cases in each of four (4) Neighbor Island Sections, for a total of 100 cases statewide. The review is a rolling review.

The Hawaii Child Welfare Continuous Quality Improvement Project at UHMCC coordinates and conducts the case reviews to determine what is actually happening to children and families as they are engaged in child welfare services and to enhance the agency's capacity to help children and families achieve positive outcomes.

For each CWS Section review, six teams are recruited, each pairing a DHS CWS social worker from another Section and a community stakeholder from the Section that is being reviewed. Reviewers participate in one-day training in preparation for the onsite review. Cases are rated based on actions that occurred during the identified period under review, which starts at the same time as the corresponding AFCARS submission period and ends on the first day of the onsite review.

In place of an Exit Conference, HCWCQI conducts a Results Conference/Training for each Section approximately one week after the onsite case review to provide feedback to the Section staff about the results of the review. The Section staff members are asked how they achieved their positive outcomes and whether they have any suggestions for further improvements. The staff members are also asked to identify areas of unmet needs. The community reviewers are invited to attend and participate in the Results Conference. This current fiscal year FY 2014 the section administrators are being asked for information on the caseload and the number of vacant positions for their respective Section.

### **Analysis and Dissemination of Quality Data**

UHMCC writes the review findings report and identifies needs related to training, supervision, and policy reform. All of the data that is collected is incorporated into a written report of review findings for each CWS Section.

Section administrators review the findings and develop an action plan to address outcomes that did not meet the 95% Substantially Achieved benchmark. The Section Administrators consider the findings of their supervisory review reports as well as their ratings on the national practice standard indicators as they analyze the areas of practice that need to be improve and devise appropriate strategies to address them.

Hawaii plans to re-establish and use the Statewide Continuous Quality Improvement Council (SCQIC) to review, analyze and make recommendations to DHS/CWS for improvements across the state. The Council monitored progress and made suggestions to DHS/CWS for modifications when results are not as expected. The Council was especially involved in tracking placement stability and foster-care reentry data and looking at ways to improve outcomes.

### **Feedback to Stakeholders and decision makers, and adjustment of programs and process**

The review results is shared broadly with administrators, front line supervisors and case workers during management meetings, unit staff meetings and with community partners in various work group meetings. Hawaii will focus more on its Citizen Review Panel (CRP)'s work in establishing specific areas to focus the CRP's work on based on data, and the needs of the children and families.

## **STAFF and Provider TRAINING**

### **Staff training:**

Hawaii is committed to its training program operated by our Staff Development Office with a staff of 3 trainers. All trainings are designed to further:

- Support Hawaii's goals and objectives as stated in this CFSP
- Address services provided under both subparts of title IV-B and the training plan under title IV-E of the Act
- Provide training for a broad range of staff with different responsibilities, such as those who provide family strengthening services, voluntary case management, child protective services, foster care services, permanency services, such as adoption and legal guardianship services, and independent living services, and continued case managements for the Imua Kakou young adults after they graduate from high school
- 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
- Provides training for current or prospective foster parents, adoptive parents

Hawaii plans to continue leveraging other trainings available through collaboration with community partners, including DOH, DOE, Resource Caregivers association, University of Hawaii, and many others community partners.

## **SECTION III: SERVICES**

### **SERVICE ARRAY**

Hawaii currently has an array of services in place to assess and address the strengths and needs of families in order to create a safe home for their children. Through the work of child welfare, our purchase of service contracts, coordinated services with other State departments, and partnerships with community-based agencies, Hawaii is able to provide a broad range of services that meets the family's needs, create a safe home for children, strengthen families to prevent removal, and expedite permanency, either via reunification, relative adoption, relative guardianship, or other permanent arrangement.

Hawaii currently provides these services via purchase of service contract.

1. Blueprint for Change/Neighborhood Places
2. Comprehensive Counseling and Support Services (CCSS) & Voluntary Case Management Services (VCM)
3. Criminal History Record and Background Check Services
4. Domestic Violence Shelter and Support Services
5. Enhanced Healthy Start (EHS)
6. Family Strengthening Services (FSS)
7. Hawaii Foster Youth Coalition (HFYC) Administrative Services/Support
8. Independent Living Program (ILP) Services (for Youths)
9. Infants/Toddlers with Special Health Care Needs aka Hale Malama
10. Interstate Compact on the Placement of Children (ICPC).
11. Intra-Familial Sexual Abuse Treatment and Services (SATS)
12. Lanai Integrated Services System (LISS)
13. Molokai Integrated Services System (MISS)
14. `Ohana Conferencing Services
15. On-Call Resource Facilities and Services for Children
16. On-Call Residential Assessment Center (Ma'ili Receiving Home also known as Ho'omalulu O Na Kamali'i)
17. Promoting Safe and Stable Families, Title IVB2: Upper Puna Family Center
18. Promoting Safe and Stable Families, Title IVB2: West Hawaii
19. Psychological Evaluation and Multi-Disciplinary Team (MDT) Services.
20. Resource Family Recruitment, Training, Home Study, and Support
21. Residential Substance Abuse Treatment and Services Facility for Women and their Children
22. Substance Abuse Assessment and Monitoring System (SAAMS)
23. Teen Dating Violence Prevention and Intervention

In the past few years, Hawaii has become more consistent with its comprehensive evaluation of its POS contracts. HCWCQI has led several reviews of contracts in Hawaii's service array. These reviews always lead to improvements in service delivery. For example, in October and November 2013, on-site reviews were completed at nine DV shelters across the State to monitor contract compliance and identify gaps in services to improve future procurements. In

conjunction with information gained through collaborative meetings and federal grant requirements, future services will be designed with emphasis on a trauma-informed approaches and ensure that services are available to underserved and special populations.

Based largely on what CWS has learned from the case record reviews, the POS on-site contract reviews, and feedback from stakeholders and CWS and provider staff, Hawaii has decided to focus on enhancing and establishing the following service areas over the next five years.

- 1) Accessible services to remote and rural areas, such as Lanai, Molokai, Kona, Hilo
- 2) Establishing APPLA procedures and services
- 3) Establishing services to foster children who have been in foster care 9 months or longer in order to expedite permanency.
- 4) Enhancing post-legal adoption/post permanency services to prevent disruption and to service children adopted from international countries.
- 5) Trauma-informed assessment and treatment to entire family who have experienced domestic violence.
- 6) Services to domestic violence non-offending parent (usually mother) to keep child safe without removal.
- 7) Services to domestic violence batterers to prevent and stop battering behaviors.
- 8) Assessment and services to address human trafficking and unaccompanied alien minors
- 9) Placement services for medically fragile children
- 10) Transportation for foster children to ensure educational stability

### **AGENCY RESPONSIVENESS TO COMMUNITY**

Through its ongoing collaboration and consultation with internal and external partners, Hawaii has engaged a wide range of individuals and organizations representing local/county agencies, including major stakeholders, cultural representatives, birth families, former foster youth, service providers, resource families, the family court, and other public and private child and family serving agencies. The annual progress services report is shared and made available publicly. The concerns and ideas of representatives from CWS' collaborations and consultations have informed the goals and objectives that are outlined in this CFSP.

Hawaii's plans for the next five years include enhancing collaborations with:

- Citizen Review Panel
- State Child Welfare Council
- State CQI Council
- Coordination of services with Family Court, Office of Youth Services, DOH and DOE
- Partnership with Parents Mentoring agencies
- Prosecutor, Police Department, Children Justice Center collaboration
- Youth Coalition
- Ethnic and Faith-based community organizations
- Domestic violence Coalition
- Family Juvenile Court for Cross-over Youth
- Military Family Advocacy Programs

### **Foster and Adoptive Parent Licensing, Diligent Recruitment, and Retention**

Hawaii has established and will continue to maintain standards for resource family homes, child care institutions and child placing organizations which are reasonably in accord with recommended standards of national organizations concerned with standards for such institutions or homes. Hawaii's standards are the same for relative and non-relative resource family homes.

Hawaii has established the standards and will continue to monitor the application of these standards to every licensed or approved resource family home or child care institution receiving funds under title IV-E or IV-B.

Hawaii will continue to comply with the safety requirements for foster care and adoptive placements in accordance with federal and State regulations. Compliance improvements will be made as the need is identified through internal monitoring and external audits.

Hawaii has in place an identifiable process for assuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State or tribe for whom foster and adoptive homes are needed. CWS has been largely successful in recruiting and retaining resource caregivers that reflect the ethnic make-up of the children in foster care in Hawaii, as can be seen in the figure below.

<b>Multi-Ethnic Report of Children in Foster Care &amp; their Resource Caregivers for SFY2013</b>			
<b>Ethnicity</b>	<b>Children in Foster Care</b>		<b>Resource Caregivers</b>
	<b>Count</b>	<b>Percentage</b>	<b>Percentage</b>
<b>Native American</b>	20	0.95%	1.00%
<b>Alaskan Native</b>	0	0.00%	0.00%
<b>Black</b>	46	2.18%	3.45%
<b>Cambodian</b>	0	0.0%	0.18%
<b>Chinese</b>	8	0.38%	1.18%
<b>Chuukese-Federated States of Micronesia (FSM)</b>	23	1.09%	0.00%
<b>Filipino</b>	163	7.75%	20.45%
<b>Guamanian/Chamorro</b>	0	0.00%	0.00%
<b>Hawaiian or Part-Hawaiian</b>	989	47.07%	43.81%
<b>Hispanic/Spanish Origin</b>	62	2.95%	6.73%
<b>Japanese</b>	20	0.95%	8.36%
<b>Korean</b>	3	0.14%	0.55%
<b>Kosraean-FSM</b>	0	0.00%	0.00%
<b>Laotian</b>	4	0.19%	0.27%
<b>Mixed (Not Part-Hawaiian/Not Part-Hispanic)</b>	339	16.13%	3.73%
<b>Marshallese-Republic of the Marshall Island</b>	17	0.80%	0.00%

<b>Other Pacific Islander</b>	38	1.80%	3.64%
<b>Palauan-Republic of Palau</b>	0	0.00%	0.00%
<b>Pohnpeian-FSM</b>	1	0.04%	0.00%
<b>Samoan—American Samoa &amp; Independent State</b>	56	2.66%	3.36%
<b>Tongan</b>	12	0.57%	0.00%
<b>Vietnamese</b>	7	0.33%	0.18%
<b>White/Caucasian</b>	273	12.99%	29.64%
<b>Yapese-FSM</b>	0	0.00%	0.00%
<b>Unable to Determine</b>	20	0.95%	2.73%
<b>Missing or Invalid</b>	0	0.00%	1.18%
<b>TOTAL</b>	2,101	100%	130.45%*

Data Source: DHS, Management Services Office

\*Please Note: Because resource families are often made up of more than one care-giving adult, and those adults are not necessarily of the same ethnic background, one resource family is sometimes counted in two different ethnic categories, thereby causing the total percentage to be more than 100%.

## SECTION IV PLAN FOR IMPROVEMENT

### GOALS

Hawaii is committed to a system of services that is well-coordinated, integrated, culturally relevant, family friendly, and truly reflects Hawaii’s CWS family partnership and engagement practice model values. Hawaii’s goal for the next 5 years will be to improve the lives of children and families, as evidenced by outcome based data that will reflect improved safety, permanency and well-being of children and families.

In the next 5 years, Hawaii’s delivery of services will be more comprehensive, effective, and tailored specifically to the needs, geographic location and culture of children and families.

### CFSP OBJECTIVES

Based on the data discussed in the section above, CWS chose the following priority objectives for the next five years.

- Increase safety of children
- Safely reduce entry into foster care
- Reduce time in foster care (with no risk to safety)
- Increase wellbeing of children in care
- Increase fathers’ engagement
- Enhance stakeholder collaboration and engagement
- Engage cultural groups in developing cultural approaches
- Increase collaboration with military
- Increase CWS Administration engagement with CWS line staff

Objectives	Interim Benchmarks	Long-term timetable
1. Increase Safety of children	SFY 2016 98% of cases reviewed will meet practice standard	SFY 2019 100% of cases reviewed will meet practice standard
2. Safely reduce number of children in foster care	SFY 2016 Number of children in care will be reduced by 10%	SFY 2019 Number of children in care will be reduced by 15%
3. Reduce time in foster care	SFY 2016 70% of children who enter foster care will exit to permanency within 12 months	SFY 2019 80 % of children who enter care will exit within 12 months
4. Increase wellbeing of children in care	SFY2016 95% of case reviewed will meet practice standard.	SFY2019 98% of case reviewed will meet practice standard



5. Enhance stakeholders collaboration and engagement	SFY2016 Set up expectations for interagency meetings and begin establishing an interagency council	SFY2019 the council is in full operation with firm, commitment from the members, helping to assess progress on CFSP goals/objectives, and making a difference in agency performance
6. Engage cultural groups in developing cultural approaches	SFY2016 Planning Phase –to Establish cultural connection in major areas –with monthly meetings, etc.	SFY2019 Establish a CWS Statewide Council for Cultural approaches with established meeting times etc.
7. Increase collaboration with military	SFY2016 Planning to enhance, establish connections with military FAP/monthly or Quarterly meetings.	SFY2019 Establish a Statewide Council for Military & CWS partnership With expectations, meeting times, set
8. Increase engagement and partnership with CWS workers	SFY2016 Plan to enhance current supervisor group	SFY2019 On-going Supervisory group established and functions as the liaison between PD/Branch and line staff. Line staff is fully informed of all initiatives and is active in providing feedback to PD/Branch.

In the next 5 years, part of Hawaii’s improvement plan is to focus more attention, through data collections, interviews with providers, and community partners, to these at-risk and underserved populations:

1. Lesbian, Gay, Bisexual, or Transgender (LGBT)
2. Individuals with limited English proficiency (LEP)
3. Children and families with disabilities, especially developmental disability
4. Homeless children and families that are known to CWS – looking at using of hotel/motel vouchers, safe homes, faith-based organizations, etc.
5. Children with trauma due to abuse, neglect and exposure to domestic violence

Hawaii will enhance the contracted work with service providers:

1. Expectation that all services must be culturally and linguistically appropriate to address LEP families

2. Including requirement to specifically describe in their proposals how services will be provided to these special populations.
3. Trauma informed services should be specified in all contracts to reduce the likelihood of re-traumatizing child and family, and to facilitate healing.
4. Service providers to demonstrate that trauma informed training has been provided to all staff and that trauma informed practices are integrated into its policies, procedures, and practices.
5. Programs to demonstrate their effectiveness through measurable outcomes. Outcome measures will be refined to reflect performance based criteria, and regular contract monitoring would be an effective program evaluation tool.
6. Establishing a resource directory for all services to be assessable to CWS workers and families
7. Establish a specific list of domestic violence resources to be provided to families E
8. Establish a resource list of resource to include non-CWS funded programs and culturally responsive programs such as for Native Hawaiian families and other ethnic groups

### **MEASURES OF PROGRESS**

Hawaii will measure its progress using quantitative data that are captured and extracted from its information system, both CPSS and SHAKA, and qualitative data from its on-going case record review system using the CFSR review tools.

Data reports from CPSS and SHAKA are extracted, printed or electronically shared with administration as well – on a weekly, monthly and quarterly basis.

The case record review is conducted by our contractor – University of Hawaii –Maui, with each Section on a yearly basis and the outcome is rated as strengths or needing improvement. Results conferences are set by UH Maui staff and corrective actions plans are established by unit and Sections, after discussion with the contractor.

Our budget meeting is done once quarter to review budget, expenditures, and including data on children in foster care, relative placements, expenditure on foster children etc.

Hawaii is currently developing its Child Abuse/Neglect System (CANS) tools specific to the Waiver with Dr. Lyons, who is the owner/developer of CANS. The CANS tool will be use to measure child's well-being for Hawaii's Safety, Permanency, and Wellbeing Roundtables (SPAW) and Wrap intervention projects.

### **STAFF TRAINING, TECHNICAL ASSISTANCE AND EVALUATION**

The Staff Development Staff (SDS) of the DHS Social Services Division is currently responsible for coordinating and providing uniform, competency-based, practice-relevant training to all new CWS child protective services specialists/ social workers/human service professionals.

The focus is on provision of on-going consistent baseline level training for all CWS new hires statewide and for contracted community-based DRS organizations in order to support achievement of the goals and objectives of this plan, which addresses both of the title IV-B programs and allowable IV-E programs.

The core curriculum will be revised to reflect IV-E eligibility PIP requirements, supervisory training, and other hot topics that Hawaii will explore within the next 5 years.

Allowable IV-E

This training activity falls under the following categories necessary for the administration of the foster care program: referral to services; preparation for and participation in judicial determinations; placement of the child; development of case plans; case reviews; and case management.

Training content also supports a cross-system coordination consultation with the Judiciary, Police or Military, DOH, DOE, Court improvement projects, and other necessary committees who are committed to the improvement of Hawaii child welfare service delivery programs

See ATTACHMENT B - Training Plan

**TECHNICAL ASSISTANCE AND EVALUATION**

Hawaii will continue leverage technical assistance provided by the Children’s Bureau training and technical assistance network to support its 5 year plan. Areas in which Hawaii will likely need assistance include the following:

- o Help to develop and implement an Intensive Home Based Services Model; an intervention included in Hawaii’s IV-E demonstration waiver project.
- o Continued support in implementing a new protocol for Assessing Safety/Protective Capacities with Unknown Perpetrators.
- o Continued support in using data and CQI processes to improve performance.

**CHILD AND FAMILY SERVICES CONTINUUM** (see ATTACHMENT B)

Hawaii has an array of services in place to assess and address the needs of children and families through CWSB caseworkers, the use of POS contracts, coordination with other State departments, and partnerships with community-based agencies. It has been an ongoing challenge to provide a sufficient array of service on all of the islands and in all rural areas.

**IVB-2 Service Categories, SFY 2012 Expenditures, & People Served**

Category:	Percentage:	Services	Location:	Amount:
Family Preservation Over spent \$9,183	20%	Upper Puna Family Center	East Hawaii	\$193,287
Family Support  Over spent \$496	25%	Family Centers	Kauai	\$45,897
		Substance abuse education	Leeward Oahu	\$35,812
		FSS	Kauai	\$98,752
		CCSS/VCM	Oahu	\$50,135
Family Reunification  Over spent:\$1,356	35%	Substance Abuse Counseling	Maui	\$44,603
		Comprehensive Counseling and Support Services	Maui	\$97,762

		Mental Health and Supportive Living	West Hawaii	\$181,172
Adoption Promotion	20%	Post permanency support services (CFS)	Oahu	\$66,048
Under spent \$88,760		Resource Family Support-Warm Line	Statewide	\$76,407 did not get expended
		Post permanency support services	West Hawaii	\$29,296
<b>TOTAL</b>	<b>100%</b>			<b>\$833,581</b>

Data source: SFY2012 fourth quarter Quarterly Activity Reports from IVB-2 Service Providers

(3) For each service described, the CFSP must include the following information, or it must be listed on the CFS-101, Part II:

### **SERVICE COORDINATION**

**Enhancing Collaboration-** Hawaii believes that ongoing collaboration is the key to the coordination and implementation of integrated services for Hawaii’s children and families. Child and family’s needs are identified during collaboration meetings, and actions steps taken to address such needs. For the next 5 years, Hawaii plans to take these actions steps in order to ensure best coordination and integration of services, which will translate to improved safety and wellbeing for children and families, as well as reduced time in foster care.

- Continue ongoing coordinated teleconferences with NRC Training/Technical Assistance partners.
- Continue consistent participation in interagency meetings with DOE, DOH, Judiciary (CIP) and Office of Youth Services (OYS).
- Establish Quarterly meetings with service providers such as domestic violence providers, substance abuse providers, comprehensive services contract, etc.
- Continue the ‘Aha meeting with cultural groups, Youth groups, and Resource caregivers
- Establish collaboration with Faith-Based organizations
- Review reports from providers to identify needs or problematic areas.

**Educational Stability** – In the past couple of years, Hawaii has been conducting an educational stability pilot project with Oahu sections only in collaboration with DOE, Court Improvement Project, University of Hawaii Law School, and Guardian Ad Litem/CASA office. Hawaii plans to continue to promote and support keeping children in their own home school whenever possible and when it is in their best interest, in order to ensure smooth transition of youth who enter foster care. Hawaii intends to take the following steps in FFY 2015 – 2019:

- Continue to educate DOE staff and schools on the Fostering Connections law;
- Continue the collaboration efforts with DOE, CIP, CASA, CWS staff to provide on-going guidance and resolve educational concerns
- Continue consistent participation in interagency meetings with DOE
- Develop memorandum of understanding (MOU) with DOE, UH law

- Propose new State laws regarding educational stability to Hawaii legislature by 2015
- Implement Educational Stability statewide by 2016
- Establish clear policy and procedures
- Provide training statewide for DOE principals and CWS staff
- Develop memorandum of agreement (MOA) for DOE to transport children with special needs outside their geographic area until DHS makes arrangement or purchase transportation services.
- Share data and link automated information systems among DOE, DOH and DHS

### **CFCIP Coordination**

CWS works to comprehensively coordinate the Hawaii's CFCIP with other federal and State programs for youth, especially independent living and transitional living programs, funded under Part B of the Juvenile Justice and Delinquency Prevention Act of 1974, STI and pregnancy prevention programs, public housing programs, and school-to-work programs, in accordance with section 477(b)(3)(F) of the Act. Hawaii also coordinates CFCIP with the Hawaii MedQuest to implement the provisions in the Affordable Care Act. CWS has worked with MedQuest (Hawaii's Medicaid) to automatically enroll all emancipating foster youth in MedQuest, so that they will have medical coverage until at least age 26.

All services or benefits under other federal or federally-assisted programs will be used to serve the children of Hawaii, including children with Native American heritage.

### **SERVICE DESCRIPTION**

#### **Title IV-B, subpart 2 service categories and FY2014 funding:**

The description of Hawaii's IV-B2 funded services can be found in Attachment B.

### **CAPTA**

CAPTA funding is provided only to for the Family Strengthening Services (FSS) to implement the Differential Response Initiative consistent with the goals and objectives of the CFSP. Funding the FSS program is consistent with the purpose of CAPTA grants as stated in Section 107(a) of CAPTA. Hawaii uses the CAPTA funds Statewide to fund FSS, a differential response intervention for children that have come to the attention of CWS, and who have been assessed with low risks and no safety factors. FSS' purpose is strengthening of families, minimize risks to children, increase support to families, and including linkage of families to other community services such Department of Health for mental health services, developmental disability services, and early intervention services, Department of Education for early educational services and to other providers accessible to the family in their own community.

#### **Differential Response System and Community-based Family Strengthening Services**

IV-B2 funding is continued for Oahu FSS.

#### **State Child Death Review (CDR)**

In December 2013, the Department of Health (DOH) who has the legal authority to conduct CDR for Hawaii was no longer able to provide these services due to budgetary constraints,

including work-force reduction; therefore the CDR Nurse Coordinator was no longer available from DOH. There was no final report provided after shutting down of this program. There are efforts to revive the panel, and DHS funds are designated to support the new Child Death Review Program.

### **Child Death Review for CWS Cases**

CWS has a process for reviewing death in CWS active cases, and death in cases that were closed within 90 days. Each death case is thoroughly reviewed by the Kapiolani Child Protection Multi-Disciplinary Team (MDT) for case planning and also by the CWSB Program Development Office to determine if any rules or CWS procedures required modification as a result of the deaths. There were two (2) deaths in SFY 2013 in active CWS cases or cases closed within 90 days, and none in SFY 2014.

In one case, the review team confirmed parental neglect, as the child was left in the bathtub with a 3 year old sibling. The other case was confirmed for physical harm by an unknown perpetrator, while in the care of parents. CWS is reviewing cases with unknown perpetrators and is collaborating with Family Court on drafting policies regarding case procedures to protect children better in these cases.

CWS program goals for FFY 2015 - 2017

- Reduce child death in open CWS cases and cases closed within 90 days
- Enhance contract with the MDT to be the designated reviewer for CWS cases.
- Clarify policy/procedures for Death Review of CWS cases
- Engage Citizen Review Panel in this process
- Collect and catalog data regarding child death
- Strengthen partnership with emergency services, police, medical examiner
- Provide annual training to staff and providers

CWS program goals for FFY 2018 -2019

- Engage Citizen Review Panel to partner with MDT in reviewing death cases Statewide
- Provide annual training on Sudden Unexplained Infant Death Investigation (SUIDI)

### **CAPTA Fatality and Near Fatality Public Disclosure Policy**

Currently, when information of a child fatality or near fatality is requested to be released to the public, and the harm was due to CWS-confirmed abuse or neglect, Hawaii generally provides:

- a. Age of the child;
- b. Gender of the child;
- c. Circumstances surrounding the incident;
- d. Information of previous reports of child abuse or neglect that is pertinent to the abuse or neglect that led to the child fatality or near fatality;
- e. Information describing any previous investigations pertinent to the abuse or neglect that led to the child fatality or near fatality;
- f. The results of any such investigation.

## **SERVICE DECISION-MAKING PROCESS FOR FAMILY SUPPORT SERVICES**

DHS continues to award multi-year contracts for community-based family support services throughout the State. Most of the contracts are scheduled to end June 2014. Before requests for proposals (RFP) are issued, DHS solicits community input on its plan for services. Hawaii has continued to use its public notice and public hearing process call “Request for Information” or RFI, to involve other State agencies, private organizations and other interested community members in information gathering, planning and monitoring. The process provides an opportunity for feedback during the development of RFP specifications, including the numbers to be served in each area, the service activities to be funded and the outcomes expected to be achieved.

The RFP process is a competitive process with a criterion for reviewing, rating and selecting proposals.

Some of the current contracts, which would have ended in June 2014, have been granted an extension for 6 months, to allow Hawaii to start and complete the RFI and RFP process for the next contract period around December 2014.

Depending on the availability of funds and needs of the target population, some contracts may be supplemented or adjusted.

## **POPULATION AT GREATEST RISK OF MALTREATMENT**

Data in the past years have shown a change in the ages of children in foster care reflecting the most vulnerable children and the population at greatest risk of maltreatment in Hawaii as these:

In 2006 – 2009 the highest percentage of children in foster care was the 12-18 age group  
In 2010 – 2013 more children ages 0-5 were in foster care, reflecting a change in ages of children at the greatest risk for child abuse and neglect.

Looking at the ethnic breakdown of the children in foster care in Hawaii, the highest percentages continue to be in the Native Hawaiian and Part Native Hawaiian population Based on this data, Hawaii’s most vulnerable population can broadly be defined as the youngest group of Native Hawaiian and Part Native Hawaiian children, aged 0-5.

These children and their characteristics and demographics are identified and reported out to staff monthly in various reports generated by CPSS. Supervisors and Section Administrators receive case listing, caseload listing, and listing of children in care.

For the next 5 years, Hawaii plans to:

- 1) Continue strengthening the partnership with schools and hospitals in order to ensure the immediate and proper identification of at-risk children through its existing protocols. Hawaii will continue to offer refresher training to school and hospital personnel on mandate reporting of child abuse and neglect.
- 2) The implementation of the SPAW and Wrap interventions of the Title IV-E Waiver Demonstration Project will help to reduce the length of time that young children under age five are in foster care without a permanent family.

## SERVICE FOR CHILDREN UNDER THE AGE OF FIVE

Target services – for children 0- 5 including the continuation of these services:

- a. **Enhanced Healthy Start** – Plan to expand services to include 0- to under age 5 by July 2015. Services will continue to consist of home visits me visits by a paraprofessional, an RN, and a clinical specialist to assess the relevant family issues, including mental health issues, substance abuse, early childhood development, violence-free family interactions, and parent-child attachment and bonding. Through EHS, the family is provided with counseling; therapeutic interventions; referral to a medical home and needed community services; identification, assessment, and monitoring of child health and developmental status and needs; and training on child development and parenting skills.
- b. **Hale Malama** – Expand services for 0 to under 5 for children in foster care who have specialized and/or serious medical needs are often placed in the Hale Malama program of Catholic Charities Hawaii or other vendors who could provide services for the seriously medically needy foster children.
- c. **Project First Care** – Expand the Project First Care to include 0 to under 5 by 2017. In response to the passage of the 2008 Hawaii State Legislature Act 199 which mandated CWS to demonstrate a preference to place foster children with an appropriate relative, Project First Care was developed by CWS, the Office of Hawaiian Affairs, and community partner agencies. This project provides specially-trained resource caregivers for infants and toddlers. The focus of this project is to provide on-call foster care for infants and toddlers on a short-term basis (generally 1-60 days) while CWS aggressively searches for an appropriate relative placement and works toward reunification with parents.
- d. **‘Aha** – Hawaii will continue partnering with Native Hawaiian community leaders, businesses, agencies, groups, and individuals to come together with law enforcement and family court representatives to focus on the common goal of creating and maintaining safe and healthy Native Hawaiian communities
- e. **Domestic Violence** – Hawaii plans to develop an assessment tool and trauma-informed treatment services to assess and treat trauma in children ages 0 to under 5, who have been exposed to domestic violence.

## SERVICE FOR CHILDREN ADOPTED FROM OTHER COUNTRIES

Hawaii continues its efforts to strengthen its post-permanency services to include all children, whether adopted from Hawaii, another state or another country. CWS has ensured that all of its post-permanency services are available to all adoptive families regardless of location of adoption. CWS has worked with its contracted community providers of these post-permanency services on identifying issues and figuring out how to address the unique needs of families who have adopted internationally. Over the next five years, Hawaii plans to obtain more information on best practices for serving families who have children that they adopted from other countries, and ensuring that CWS staff and post-permanency services staff are trained on these best practices.



In the next 5 years, Hawaii plans to develop and implement an automated system of capture data on this population, including children adopted from other countries that entered CWS' custody, reasons for entering CWS' custody, and the outcomes to the child and families. As of now, Hawaii manually keeps track of this data. Including in this population and services, will be unaccompanied minors, trafficked children, disrupted adoption, and re-homing children.

## **SECTION V**

### **Consultation and Coordination between States and Tribes**

Current CWSB procedures that comply with the Indian Child Welfare Act (ICWA) include identification, removal and adoption guidelines for American Indian children, as well as notification procedures, placement preferences, rights of the tribe, and guidance on the legal findings needed. ICWA training is a regular part of Core Training for new CWSB workers.

CWSB procedures require that caseworkers ask parents and relatives if the child may be or is of American Indian heritage. Workers also view the birth certificate, if possible. When there is reason to believe that the child may be Native American, the caseworker informs the Deputy Attorney General (DAG) assigned to the case. The DAG sends a registered letter to the tribe (if known) or to the Bureau of Indian Affairs. Most of the responses from the Bureau of Indian Affairs are that the child is not registered as an American Indian Child. In these situations, if it is appropriate, the caseworker encourages the family to register the child. When CWSB does receive a positive confirmation of registration, tribal rights are adhered to. Should the tribe wish to take custody of the child, CWSB relinquishes the child to the tribe and terminates jurisdiction in Hawaii. All necessary documents and information on the child including Title IV-E eligibility are handed over to the American Indian representative. CWSB staff works directly with the American Indian representative to aid in a smooth transition for the child. CWSB also exchanges with the tribe the most current CFSP and APSR.

Pursuant to Chapter 587A, Hawaii Revised Statutes (HRS), when a child enters foster care in Hawaii, DHS is required to identify the child's relatives and provide these relatives with information about the child's status, court proceedings, and becoming a foster parent for the child. These procedures are of course followed for all Native American children. The search for, identification of, and notifications to relatives are completed through CWSB's Family Finding Initiative and 'Ohana Conferences, which are offered by DHS-contracted provider EPIC 'Ohana, Inc.

Following ICWA provisions, if the family or the tribe requests to intervene in State proceedings and transfer jurisdiction of an American Indian child from the State of Hawaii to the jurisdiction of the tribe, the court must transfer jurisdiction to the tribe, unless there is sufficient good cause to not comply with the request. Since Hawaii has no federally-recognized or State-recognized tribes within its borders, the State child welfare agency is responsible for providing the protections under 422(b)(8) when American Indian children come to the State's child welfare agency's attention due to abuse/neglect, until jurisdiction is transferred to a tribe (if that transfer does occur).

Aside from facilitating transfer of jurisdiction to the tribe, another crucial piece of ICWA compliance is honoring the placement preferences of the tribe and the family for Native American children. Hawaii CWSB ensures this with consultation with tribal representatives whenever a child is identified as of American Indian heritage. During SFYs 2012 and 2013, CWSB staff consulted with tribal representatives from seven different North American tribes. Because these children were already placed with relatives the majority of the time, the tribes supported the placements.

Program Development is responsible for CWSB's established policies and procedures providing protections for tribal children in State custody. Staff Development is responsible for inclusion of ICWA training on protections for tribal children in Core and ongoing trainings. Sections and Units are responsible for application and implementation of CWS policies and procedures on protections for tribal children.

Hawaii's efforts with ICWA have increased over the past three years. In SFY 2012, more data was collected on Hawaii's ICWA population, through census reports. CWSB staff attended an ICWA training in July 2013, and more ICWA information has been added to new hire training to strengthen ICWA compliance and understanding.

Although CWSB's current procedures and practice for complying with ICWA are sound, improvement is needed in the area of tracking data and using data to monitor children with Native American heritage. This problem was brought to the attention of CWSB administration through the results of the CQI case reviews. The current CPSS system already has fields that capture ethnicity of American Indian and Alaska Native children. As part of CWSB's CFSP, DHS plans to extract these data on a quarterly basis for the purpose of monitoring compliance with ICWA regulations. CWSB also plans to partner more closely with Family Court on this matter to clarify roles and responsibilities with ICWA case filings, as well as to clear up any confusion about the requirements of ICWA. Additionally, CWSB plans to tap the tribal representatives and staff at the Bureau for Indian Affairs for information on how Hawaii can improve in serving Native American children and families.

## SECTION VI

### CHAFEE FOSTER CARE INDEPENDENCE PROGRAM (CFCIP) and EDUCATION and TRAINING VOUCHERS

#### A. Agency Administering CFCIP

Hawaii CWSB is the agency responsible for administering the CFCIP and education and training vouchers programs in Hawaii. Through these programs, CWSB provides supports and services for a successful transition to adulthood for youth who are likely to remain in foster care until age 18 and to young adults aged 18-21 who emancipated from foster care. Many of the services are provided by private agencies that CWSB contracts with through POS contracts. Five Independent Living (IL) POS contracts serve all the islands. The IL contracts primarily serve youth in foster care aged 12-17. Since July 1, 2014, Hawaii has offered extended voluntary care to young adults (aged 18-21) who aged out of foster care. In Hawaii, we call this program *Imua Kākou* (IK), which means “moving forward together” in the Hawaiian language. Similar to IL services, there are five contracts to serve these emancipated young adults, covering the entire State. CWSB also contracts Youth Circles for foster youth and former foster youth aged 14 and older. Youth Circles is a youth-centered group process which brings together the youth’s supporters who can offer support and encouragement and assist the youth with the creation and implementation of and his/her transition plan for successful adulthood. Youth Circles are described in more detail below in *Item D6*.

ETV is administered by DHS and DHS will continue to cooperate in national evaluations of the effects of the programs in achieving the purposes of the CFCIP.

The contracts are overseen by both POS and PD staff. POS staff monitors contract compliance, budgets, and overall performance, and PD works on any needed programmatic modifications and implementing policy changes.

#### B. Program Design

CWSB policy requires that every foster youth, age 16 and over, who is under DHS placement responsibility, have an independent living (IL) transition plan and services to help them prepare for and make a successful transition to young adulthood. Because DHS recognizes that youth benefit from problem solving and life skills development and preparation early on, particularly during the critical middle school years, it recommends that planning for independent living begin at age 12 and DHS-contracted services are utilized to support this

Contracted IL services and Youth Circles are available statewide to assist in IL transition plan development and linkage to services.

As of July 1, 2014, independent living and transition to adulthood services are available through CWSB’s contracted providers to eligible former foster youth.

### **C. Eligibility Criteria for CFCIP**

Youth who are eligible for CFCIP are those youth age twelve 12 or older for whom DHS has foster custody, youth who have been in foster care for two or more years, and those for whom parental rights have been terminated. The eligible population also includes youth who, after attaining 16 years of age, have left foster care for kinship guardianship or adoption. CWSB procedures and contracts currently allow service to this population when it is requested by the youth and authorized by the legal caregiver. Services are also available to otherwise eligible young adults who have emancipated foster care in Hawaii or another state.

Youth who are still in foster care are referred to the appropriate CFCIP services by their CWSB caseworkers.

For Imua Kākou, CWBS and community partners did targeted outreach to all former foster youth, who aged out of care in the past couple of years, and therefore may be eligible for IK services. As well, public awareness campaigns (videos on YouTube, radio ads, etc.) designed by young people, were implemented to find eligible young adults. These efforts have proved successful with over 100 applications received in the first two months of the program. Considering only 60-90 emancipate from foster care each year in Hawaii, these numbers are noteworthy.

### **D. Services**

Services are available statewide through purchase of services (POS) contracts in all counties. CWSB staff is procedurally required to refer youth 12 and older who are “likely to remain in care.” Referrals may also be accepted from the youth, foster parent or other agency and are cleared with DHS to ensure eligibility. DHS periodically provides ILP POS providers with lists of potentially eligible youth to facilitate the providers’ outreach to staff and eligible youth.

POS ILP contracts will be re-procured in 2014. During the planning and procurement phases input will be solicited/obtained from current and former participants and the Hawaii Foster Youth Coalition, as well as from the foster parent association, service providers, and staff.

#### ***1. Service Components***

a. For foster youth, age 12 – 15, under DHS placement responsibility, and who are likely to remain in foster care until emancipation, the focus is on age-appropriate and developmentally appropriate skills. Delivery is primarily through group sessions which focus on:

- Self image and self esteem
- Goal setting, problem solving and decision-making skills
- Communication and interpersonal skills

b. For the following youth, the focus is on skills needed for daily living:  
foster youth aged 16 and older under DHS placement responsibility who are likely to remain in foster care until emancipation  
youth who were in foster care and, after attaining 16 years of age, left foster care for kinship guardianship or adoption;

c. former foster youth, aged 18 to 21, who had emancipated from foster care, The services listed below are provided to these groups of young people through group and individual sessions:

- Individualized assessment (e.g., Ansel-Casey Life Skills Assessment) and service plan
- Educational support in high school and for higher education
- Employment readiness
- Develop individualized IL plan with youth
- Daily living skills
- Financial Literacy
- Linkage with community resources
- Housing assistance
- Supervised transitional IL apartments

In addition, beginning July 2004, group conferencing and decision-making services, Youth Circles, provided by EPIC through community facilitators, are available to help foster youth in developing their transition plan for independent living.

## ***2. Coordination and linkage with other federal and State programs***

The Hawaii Youth Services Network (HYSN) is the local Transitional Living Program grantee. DHS, as a member of the HYSN, receives updates and information from HYSN and provides the same to staff or other agencies. The Hawaii Foster Youth Coalition, as a participant of HYSN, provides input to HYSN and shares knowledge with youth obtained from HYSN. Hale Kipa, our ILP POS provider on Oahu, is also a member of the HYSN. The participation of these entities ensures that the youth voice is presented and that information they receive is shared with other youth.

The ILP POS contracts require that providers facilitate information sharing, referrals and participation in related and appropriate programs with other federal and State programs. Liaison with community resources and public agencies including:

- Providing referral/linkage to health and health-related programs, including Department of Health smoking, drug and pregnancy prevention, abstinence programs
- Providing assistance, information, referral, or linkage to services to assist in the completion of high school
- Providing assistance and linkage in obtaining housing after exiting foster care
- Providing referral/linkage to Workforce Investment Act (WIA) programs and other employment readiness program and assistance with development of and exploration of vocational/employment options

CWSB was successfully able to advocate for housing and combating homelessness for former foster youth by working along side other State agencies to create the Hawaii Homelessness Strategic Plan in 2013. One of the stated objectives in the State plan is: “Advance health and housing stability for youth aging out of systems such as foster care and juvenile justice,” and one of the related action steps recommends prioritizing this population for housing support.

## ***3. Medical coverage:***

The Affordable Care Act (ACA) provides that effective January 1, 2014, young adults who exit(ed) foster care at age 18 or later, and were enrolled in Medicaid when they aged out, are eligible for Medicaid until age 26. Hawaii’s MedQuest had been providing such coverage on a

sporadic basis but CWSB recently started working with MedQuest to identify all the young adults who should be receiving these benefits. Hawaii CWSB put procedures in place to ensure the continued medical coverage of all current foster youth who are transitioning to adulthood. As of January 1, 2014, all former foster youth are automatically covered by MedQuest when they reach 18, and the coverage extends until they turn 26.

In preparation for the youth's exit from foster care, CWSB sends the youth's name, address and employment information to the Med QUEST Division (MQD). MQD sends the youth a renewal application for continued medical coverage at the next eligibility period. Continued medical coverage for former foster youth is automatic as long as the young adult returns the forms. If there is a lapse, the young adult can contact the local MQD eligibility office to have the coverage reinstated.

#### **4. Trust Funds**

Hawaii does not use Chafee funds to create trust funds.

#### **5. "E Makua Ana" ("Becoming an Adult") Youth Circles –**

The Youth Circle (YC) is a facilitated 'Ohana Conferencing (family group decision-making) process that is available for foster youth and former foster youth, aged 14 or older. The circle's purpose is to celebrate the young adult's emancipation and bring together his/her supporters, family, friends, community members, teachers, and service providers who can help the young adult develop and enact a plan for his/her future independence. The circles are solution-focused and youth-driven. This service is provided by EPIC 'Ohana, Inc. and is funded by DHS. Youth Circles can help to:

- a. Reduce homelessness among emancipated youth;
- b. Connect youth to their circle of support, which may include the families from whom they were removed;
- c. Give youth the opportunity to gain more information about further education, training, financial assistance, housing options and other social services; and
- d. Encourage youth to dream big while giving them the tools and supports to achieve their dream.

Youth Circles are a major support for engaging youth in developing the Departmental-required independent living transition plans for youth in care aged 14 years and older. This is also the major venue for the development of the transition plan within 90 days preceding the youth's 18<sup>th</sup> birthday, as federally required. Youth for whom this transition plan is required are identified by SHAKA, which generates a list of foster youth approaching 18. This list is accessed by DHS social workers.

The YC is also one of the methods used to help the youth understand the importance of good credit through an exploration of the youth's own credit history, as revealed in credit reports from national credit reporting agencies.

"E Makua Ana" expanded so that 14 and 15 year-olds can participate in Youth Circles, as of 2013.

**6. Higher Education Board Allowance:** The State provides a *higher education board allowance* to former foster youth pursuing higher education. This program is 100% State-funded.

The benefit of \$529 per month (which is identical to Hawaii's foster board monthly payment) is available for a total of 60 benefit months between the young adult's 18<sup>th</sup> birthday and 27<sup>th</sup> birthday, if other eligibility criteria are met. Youth must apply before their 22<sup>nd</sup> birthday; attend an accredited institution of higher learning (academic or vocational); sign an application/agreement; provide documentation of enrollment, attendance, and grades; and make progress toward completing their chosen program. After the end of each academic session, the youth must provide grade reports and sign a new agreement for the next session. Youth must file the Free Application for Federal Student Aid (FAFSA). It is also recommended that they apply for scholarships and grants, including the local Bradley and Victoria Geist Scholarship.

### ***7. Hawaii CWSB Youth and Young Adult Advisory Board***

DHS profoundly values youth involvement in the development of CWSB initiatives such as the expansion of foster care to age 21. Until January 1, 2014, Hawaii Youth Foster Coalition (HYCF) served as the DHS youth advisory board. Starting in January 2014, the DHS youth advisory board has been the EPIC 'Ohana, Inc. (EPIC) HI HOPES (Hawaii Helping Our People Envision Success) Board.

The DHS contract with HFYC was concluding and through a procurement process for the next contract, EPIC was selected to provide the youth advisory board component provided by the HI HOPES Board and a peer outreach component to facilitate positive youth development for current and former foster youth. EPIC has subcontracted with Family Programs Hawaii (FPH) for the outreach and youth development piece. This contract is state funded.

EPIC is developing the youth advisory council by building on the established network of HI HOPES youth leadership boards on Oahu, East Hawaii, West Hawaii, Kauai and Maui. FPH, drawing on its programmatic expertise in working with this population, is developing the outreach and supportive services that will increase protective factors for current and former foster youth.

Along with the Casey Family Programs-funded Hawaii Youth Opportunities Initiative, EPIC supports the HI HOPES boards to provide the youth voice in advocacy, policy, systems improvement, services and legislative education. HI HOPES members are prepared and supported to respond to DHS requests for input and participation. HI HOPES members also increase public awareness about the foster youth population through outreach to other sectors in the community, including education, employment and housing.

FPH is developing a sustainable peer outreach and support network. The program will provide geographically-based youth outreach and engagement, group recreational activities, skill-building events, and social media communication supporting positive youth development and peer mentoring and support. Youth will actively participate in the development of the program and planning the activities.

### ***8. National Youth in Transition Database:***

Hawaii CWSB is pleased to report that the NYTD survey has been fully incorporated into SHAKATown, the youth portal for SHAKA. In SFY 2013, EPIC and HI H.O.P.E.S. partnered with DHS on the outreach to former foster youth to support their participation in the NYTD survey process. In March 2013, due to the dedication and engagement skills of one outstanding



HI H.O.P.E.S. staff person, CWSB had its highest NYTD survey response rate ever (over 92%) for the most recent cohort. HI H.O.P.E.S. continues to work with CWSB to locate and engage the next cohort for survey completion. Survey participants are offered a State-funded incentive of \$50 to complete the survey.

Purchase of Service ILP providers are also partners with the Department in NYTD compliance. Contractual requirements include their participation in collecting and sharing data regarding NYTD elements. Currently, the quarterly activity reports for the programs include aggregate data. In SFY 2012 and 2013, as part of the compliance with NYTD requirements, ILP providers were given the ability to input data regarding individual services provided to youth directly into SHAKA.

CWSB's partnership with the SHAKA technical and design team has been vital to Hawaii's increased ability to easily comply with NYTD requirements. SHAKA staff has taken the lead in understanding the NYTD requirements, guiding the data collection, and finally submitting the necessary data in the proper format.

### **E. Education & Training Vouchers (ETV) Program**

The Education and Training Voucher (ETV) funding is available in addition to the State-funded higher education allowance payment. The ETV Program is administered by the State. The amount of ETV funding is finite and all the students who are eligible may not be able to receive funding. The maximum ETV benefit payment any one student can receive in one academic year is \$5,000. CWSB staff evaluates the ETV applications, which include a budget, in order to determine the student's need and recommended award. This recommendation is approved or disapproved by the supervisor and/or section administrator. In advance of this approval process, a CWSB Administrator within Program Development determines how much is available for each section per semester.

Higher education benefits and ETV procedures and requirements are part of CWSB procedures and are shared with all CWSB staff, contracted IL providers, HFYC, It Takes an 'Ohana (a support organization for resource caregivers), and EPIC 'Ohana Youth Circles. The program eligibility and award criteria and procedures are established in accordance with federal guidelines and requirements regarding: age, CWS connection, academic performance, financial need, qualified institutions of higher education and ILTP/academic career planning. Specifically, in order to be eligible for ETV payments the young adult must meet all of the following:

- 1) have been in foster care, and
  - a) emancipated from care, or
  - b) was adopted after his/her 16<sup>th</sup> birthday, or
  - c) entered legal guardianship after his/her 16<sup>th</sup> birthday;
- 2) maintain a 2.0 GPA or higher;
- 3) complete the FAFSA;
- 4) receive determination from FAFSA;
- 5) be attending or accepted at an accredited institution of higher education, including vocational schools;
- 6) first apply for ETV when he/she is older than 17 and younger than 22; and
- 7) provide a budget which demonstrates financial need for education or training.

ETV information, eligibility and procedural requirements are shared with staff, youth, and community stakeholders and general public through established procedures, e.g. distribution of policy memos, and availability of application information and related policies in SHAKATown.

Information regarding eligibility and application procedures is available on-line at the Department's IL webpage and on the SHAKATown homepage. Youth can go to any of these organizations for assistance with completing the application. Support for youth in higher education is also available through contracted IL providers.

Perhaps the most important and effective recent accomplishment was the creation of the on-line application for higher education and ETV benefits in SHAKATown. With this advance, Hawaii CWSB is now able to issue the ETV benefits twice a year in concert with the higher education benefits. This has increased access and availability of the benefit, as well as efficiency in the application process since all documentation and review is on-line. Youth were involved in testing and refinement of the on-line application process and are overwhelmingly in support of this process.

Compliance with Federal guidelines as stated in 477(i) of the SSA is ensured through a multi-faceted approach: application, eligibility and procedural requirements shared and reviewed with staff, youth and stakeholder and are available on-line; youth are assisted during the application process by ILP POS providers, the Hawaii Foster Youth Coalition, resource parents association, DHS staff and others; applications are reviewed and award recommendation are made by line staff and administration with the final approval granted by program administration. Program supports are available throughout the process.

#### **F. CFCIP Plans for SFYs 2015 – 2019**

The Hawaii foster youth and former foster youth were active participants in the proposal and passing of the Hawaii's law to extend voluntary foster care to age 21 (Imua Kākou) in 2013. They continued to be very passionate and involved with development of designs, policy and procedures for implementation of Imua Kākou on July 1, 2014. They contributed to the workgroups and multiple presentations to stakeholders and community partners meetings. They will continue to play a significant role in the implementation and monitoring of the Imua Kākou program.

One important change for Hawaii's CFCIP, which will begin in Calendar Year 2015, is the launching of a new DHS-funded contract. The purpose of the new contract is to facilitate and organize meaningful collaboration and coordination of services among IL providers, IK providers, CWSB staff, and others providing services to our transition-aged foster and former foster youth.

Part of the work of the new contract will be to help the IL providers refocus their energy and resources to serve the 12-15 year olds. Although IL services have been available to this younger population for many years, because the demand for services from the older youth was/is so high (due to problems meeting their own basic needs), the younger teens have been serviced only minimally.

Hawaii CWSB has a vision of creating an evidence-based, trauma-informed comprehensive, youth-directed, continuum of services for young people in foster care and aging out of foster

care, which will help create true success for these young adults. Hawaii CWSB believes that this new contract is one important step toward achieving that vision.

## SECTION VII

### MONTHLY CASEWORKER VISIT FORMULA GRANTS & STANDARDS FOR CASEWORKER VISITS

Section 424(f) of the Social Security Act mandates monthly caseworker visit (MCV) with children in foster care. Pursuant to the National Standard, 90% of all foster children shall have MCV during the FFY. This mandate includes MCV with children in out-of-state placements and those on runaway status. For FFY 2014 and beyond, the standard is raised to 95%.

In addition to this, there is a federal standard for Visits in the Home (VIH) that requires States to show that at least 50% of all visits with foster children must occur in the child's residence.

In the past, Hawaii's information system was unable to capture and report worker visits for all children in foster care. Recent changes have been made, adding new computer codes to capture worker visits with child, parent, and resource caregivers. With the new coding, this data can now be extracted from CPSS beginning with FFY 2015.

#### Casework Monthly Visits with Children in Foster Care – Federal Survey

FF Year	National Standard Percentage of Actual Visits	Hawaii Percentage of Actual Visits	National Standard Percentage of VIH	Hawaii Percentage of VIH
2009	90%	62% Achieved	50%	69% Achieved
2010	90%	33% Achieved	50%	74% Achieved
2011	90%	37% Achieved	50%	68% Achieved
2012	90%	78% Achieved	50%	63% Achieved
2013	90%	82% Achieved	50%	69% Achieved
2014	95%	Unknown	50%	Unknown
2015	95%	95% CFSP Goal	Unknown	65% CFSP Goal
2016	Unknown	96% CFSP Goal	Unknown	65% CFSP Goal
2017	Unknown	97% CFSP Goal	Unknown	70% CFSP Goal
2018	Unknown	98% CFSP Goal	Unknown	70% CFSP Goal
2019	Unknown	99% CFSP Goal	Unknown	70% CFSP Goal

For the FFY 2013 Worker Visit Survey in Hawaii, the top 6 main reasons for no visits were:

- 1) Workload – 272
- 2) Missing Logs – 137
- 3) Scheduling conflicts-67
- 4) Youth is on run-away status -33
- 5) Child is placed in another State – No ICPC worker assigned yet -26
- 6) In process of transferring cases-26

Our CPSS system has been modified to enable supervisors to track monthly visits for each worker and unit. Our SHAKA system is in process of establishing a monthly randomly pull of foster children to be surveyed using the federal worker visit survey format and results to be reviewed by section administrators, Branch and program administrators. This effort will help Hawaii to stay on top of the issues that are getting in the way of workers completing their monthly visits, so that CWS can act quickly to implement any changes needed in policy or practice.

In SFY 2012 (12/20/11), CWS implemented the use of the Monthly Worker Visit Tool to help ensure quality visits between workers and children. Many workers make use of the guide, however, some do not. In an attempt to increase consistent use of the guide, Hawaii plans to incorporate it into its new SACWIS, where workers will be prompted to ask about particular topics, to be sure to view the child's bedroom, or to check with the resource caregiver about his/her need for respite care, as they are inputting their notes in the field, during the visit. CWS anticipates an increase in the quality of visits with this enhancement.

Hawaii CWSB continues to use its contracted providers to help conduct caseworker visits in certain geographic areas. Other plans for the near future include:

- i. Mandate designated documentation time for workers
- ii. Refine use of CWS' new caseworker visit tracking tool
- iii. Expect supervisors to do a status check mid-month to help make plans with workers to ensure that all children will be visited by the end of the month
- iv. Ensure CWS database access on laptops or tablets in the field to help with documentation
- v. Track the use of standardized log of contact form with check boxes for easy and quick documentation in the field
- vi. Increase efforts for contacting runaway youth
- vii. Enforce the practice of transferring worker completing visits until a case is fully transferred to the new worker
- viii. Promote the use of flex time for worker to be better able to meet with families during non-business hours
- ix. Contract with local service providers to complete visits in other states on ICPC cases where a local worker has not yet been assigned
- x. Assign support staff to help workers with documentation of visits
- xi. Increase support for supervisors to prioritize workload

## SECTION VIII

### ADOPTION INCENTIVE PAYMENTS

Any adoption incentive awards received during this plan period will be re-invested in enhancing adoption promotion and support services. Hawaii will ensure timely expenditure of these funds through monthly database monitoring.

Hawaii received federal adoption incentive funds for exceeding baselines in adoption finalizations during FFY 2009, 2010, 2011, 2012. These adoption incentive funds totaled \$517,081.

As in the past couple of years, the funds were used to pay for the services provided by FPH under the Hui Ho`omalu (Statewide Resource Family Recruitment) contract. The FPH portion of the contract provides support groups and ongoing trainings to DHS resource, permanent, and adoptive families.

Incentives earned in the future would continue to provide support services, such as these, which promote permanency and adoption. Also in the future, Hawaii may also use these funds to establish new or supplement our existing media contract to create new creative advertisements or purchase air time for television and radio advertisements to recruit prospective foster and adoptive families.

<b>Adoption Incentive Funds</b>			
<b>Performance Year</b>	<b>Funded Year</b>	<b>Amount</b>	<b>Use</b>
FFY 2009	FFY 2010	\$212,000	FPH permanency & adoption promotion services
FFY 2010	FFY 2011	\$40,000	FPH permanency & adoption promotion services
FFY 2011	FFY 2012	\$118,398	FPH permanency & adoption promotion services
FFY 2012	FFY 2013	\$146,683	FPH permanency & adoption promotion services

Data Sources: ACF website & DHS Fiscal Management Office

## SECTION IX

### CHILD WELFARE DEMONSTRATION ACTIVITIES

On October 2013, the Federal government approved Hawaii to implement its Title IV-E Waiver Project with October 1, 2014 as the target date to begin implementation. Hawaii proposed an ambitious project, which includes four primary initiatives to be piloted on the islands of Hawaii and Oahu. Hawaii views the Title IV-E Waiver Demonstration Project as an opportunity to build on, and enhance its CWSB programs and practices that have already been implemented successfully in Hawaii while using IV-E funds flexibly to support all children under its care.

The proposed demonstration project has two primary foci: reducing unnecessary entry into foster care and reducing the length of time children are in foster care. Hawaii arrived at these foci through data review, analysis, (local and national) research, and discussions with Hawaii's DHS with federal partners and consultants, DHS-internal discussions, and those involving stakeholders and community partners.

The innovations that are part of Hawaii's proposal include:

1) **Crisis Response Team (CRT)**

The proposed CRT will be staffed by trained CWS social workers who will quickly respond in-person within 1-2 hours, to new intakes of serious harm cases referred to CWS by police and hospitals. This social worker will be able to quickly assess the safety and risk factors and then appropriately refer the child/family to Intensive Home-Based Services (IHBS) to provide in-home services to prevent entry of child into foster care. If IHBS is not appropriate for the child/family, the police will take child into foster custody and case will be routed through regular CWS investigation routine. Hawaii anticipates that this **will** prevent the unnecessary entries of child into foster care.

2) **Intensive Home-Based Services (IHBS)**

When determined necessary by the CRT, specially-trained intensive home-based worker will respond to the family home within 4-8 hours to help create and implement a safety plan and short-term treatment plans that will stabilize the home in order to prevent removal of the child. Hawaii has chosen to use the Homebuilder's model for this intervention.

3) **Wrap Services**

For youth in foster care over nine (9) months, Wrap Services will be offered. This empirically-demonstrated model is family-driven and needs-driven, and brings together all of the agencies involved with a family to creatively find solutions and supports for the family. It is designed to better coordinate the existing services, come up with creative interventions, and eliminate duplication of services, thereby reducing family frustration with the CWS system and its partners, and decreasing the potential disengagement of families. This intervention will ensure

that CWS, its partners, the family and the community are making all necessary efforts to serve the child and family as creatively as possible, before making a determination to terminate parental rights.

4) **Safety Permanency and Wellbeing Roundtables (SPAW)**

Children, who have been in foster care for 9 months and longer, with poor reunification prognosis, will be eligible to receive SPAW services. SPAW uses the Casey Permanency Roundtable to be used as a case staffing system which aims at breaking down systemic barriers to permanency, while ensuring high levels of safety and well-being. SPAW meetings consist of service providers, other professionals involved with the child and family, consultants (cultural, medical, mental health, etc.), CWS caseworkers, and CWS administrators. The participants will have the authority to make decisions on behalf of their agencies. If systemic problems exist which are hindering the family's progress in reunification services or the Department's ability to move toward permanency, SPAW will intervene and work to resolve these problems.

5) **Use of Rapid Assessment Instruments (RAIs) and other assessment instruments**

Hawaii is exploring the use of these tools:

- AAPI – for IHBS to measure parenting skills in a pre and post test.
- NCFAS – to be used by IHBS to measure
- CANS – for SPAW and Wrap interventions to measure well-being.

The use of these tools will help to determine the protective factors of the parents that will possibly allow the children to stay safely in the home and prevent removal. These tools will also help identify when it is safe for a child to return home, thereby reducing time in foster care

**Implementation Timelines for the Title IV-E Waiver Demonstration Project:**

January 1, 2015 – SPAW and Wrap will begin in Honolulu County only

February 1, 2015 – CRT and IHBS will begin in Honolulu County only

October 2015 – CRT, IHBS, SPAW and Wrap will begin in Hawaii County  
(and continue in Honolulu County)



## **SECTION X**

### **TARGETED PLANS WITHIN CFSP**

1. TRAINING PLAN See attachment
2. DISASTER PLAN See attachment

#### IV-E Training Academy

*Hawaii Child Welfare Education Collaboration (HCWEC): Stipend Program for Master in Social Work Degrees (MSW)* This program ended in 2009 due to budgeting constraints when the State experiences economic downfalls which resulted in the closing of this program. In the next five years, depending on its economic recovery and stabilization, Hawaii with close collaboration with the University of Hawaii will explore reviving this program.

#### ***Development/Implementation of New Supervisory Core and Section Administrators' Core Training***

Hawaii will institutionalize a new supervisory core training for all new supervisors based on lesson learned from LAMM, and from the T/TA provided to Hawaii in the past few years and based on feedback from staff. Focus will be on building supervisory capacity to read/understand and make decisions based on data and feedback from internal and external partners.

For FY 2015 – 19, in addition to the core training, ongoing trainings for staff, supervisory, and upper management (SA) trainings will focus on these areas:

1. Crisis Response – IV-E Waiver Intervention
2. Intensive Home-based services – IV-E Waiver Intervention
3. Safety, Permanency, and Well-Being (SPAW) – IV-E Waiver Intervention
4. Wrap services – IV-E Waiver Intervention
5. Educational Stability
6. Unknown Perpetrators
7. Trauma-informed assessment & treatment
8. Domestic Violence
9. Title IV-E Eligibility
10. Monitoring Psychotropic medication
11. Human Trafficking
12. CFSR Round 3
13. Well-being of children & families
14. Permanency Options – OPPLA
15. Adoption Assistance
16. AFCARS
17. Independent Living Skills/assessment

## **SECTION XI**

### **FINANCIAL INFORMATION**

**1. Payment Limitation: Title IV-B, Subpart 1:**

No title IV-B, subpart 1 funds were expended for childcare, foster care maintenance and adoption assistance payments in FY 2005.

**Payment Limitation: Title IV-B, Subpart 1:**

No non-Federal funds were expended in FY 2005 as match for title IV-B, subpart 1 for foster care maintenance payments.