

State of Hawaii
Department of Human Services
Social Services Division



HAWAII
Annual Progress and Services Report (APSR)
Federal Fiscal Year 2025

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Contact Information:

For any questions or comments about this report, please contact:

Elladine Olevao
Child Welfare Services Branch Administrator
Social Services Division
Department of Human Services
State of Hawaii
1010 Richards Street, Suite 216
Honolulu, Hawaii 96813

(808) 586-5708 (office)
(808) 586-4806 (fax)
EOlevao@dhs.hawaii.gov

Website Information:

The approved final draft of this report that is not confidential information, 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/>

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Acronyms and Abbreviations

ABA	Applied Behavioral Analysis
ACF	Administration for Children and Families
ADAD	Alcohol and Drug Abuse Division (of the Department of Health)
AFCARS	Adoption and Foster Care Analysis and Reporting System
AIP	AFCARS Improvement Plan
ANI	Area in Need of Improvement
APCSB	Adult Protective Community Services Branch
APPLA	Another Planned Permanent Living Arrangement
APRN	Advanced Practice Registered Nurse
APSR	Annual Progress Services Report
ARP	FVPSA American Rescue Plan
AS	Adoption Savings
BIA	Bureau of Indian Affairs
BESSD	Benefit, Employment, and Support Services Division (of DHS)
BP	Birth parents
CAA	Consolidated Appropriations Act
CAMHD	Department of Health, Child and Adolescent Mental Health Division
CANS	Child and Adolescent Needs and Strengths Assessment Tool
CA/N	Child Abuse and/or Neglect
CAPTA	Child Abuse Prevention and Treatment Act
CASA	Court-Appointed Special Advocate
CBC	Capacity Building Center for States
CBCAP	Community Based Child Abuse Prevention
CCH	Catholic Charities Hawaii
CCSS	Comprehensive Counseling and Support Services
CCWIS	Comprehensive Child Welfare Information System
CDR	Child Death Review
CFS	Child and Family Services
CFP	Casey Family Programs
CFSP	Child and Family Services Plan
CFSR	Child and Family Services Review (case review system)
CHRI	Criminal History Record Information
CIP	Court Improvement Program
CJIS	Hawaii Statewide criminal history record information system
CM	Case Management
COOP	Continuity of Operations Plan
CPA	Child Protective Act
CPR	Cardiopulmonary Resuscitation
CPSS	Child Protective Service System (DHS' computer database system)
CQI	Continuous Quality Improvement

CRP	Citizens Review Panel
CRT	Crisis Response Team
CSA	Child Safety Assessment
CSEC	Commercial Sexual Exploitation of Children
CSSP	Center for the Study of Social Policy
CWCA	Child Welfare Contributing Agency (as federally defined)
CWS	Child Welfare Services
CWSB	Child Welfare Services Branch
DAG	Deputy Attorney General
DCMP	Disaster Case Management Program
DH	Hoomalu Detention Home
DHS	Department of Human Services
DICE	Data, IT, CQI, Evaluation
DOC	Difficulty of Care
DOE	Department of Education
DOH	Department of Health
DRS	Differential Response System
DV	Domestic Violence
DVAC	Domestic Violence Action Center
EA	Extended Assistance
EAP	Equity Action Plan
EBT	Electronic Benefits Transfer
ECAS	Early Childhood Action Strategy
EFC	Extended Foster Care
EIC	Equity Improvement Collaboration
EPSDT	Early Periodic Screening Diagnosis and Treatment
ESSA	Every Student Succeeds Act
ETV	Education and Training Vouchers
FASD	Fetal Alcohol Syndrome Disorder
FBI	Federal Bureau of Investigations
FCTC	Foster Care Training Committee
FEMA	Federal Emergency Management Agency
FFH	Family First Hawaii
FFPSA	Families First Prevention and Services Act
FFY	Federal Fiscal Year
FPH	Family Programs Hawaii (social service agency)
FPPEU	Federal Payment Programs Eligibility Unit
FRCs	Family Resource Centers
FSAC	Family Supported Arrangements Continuum
FSS	Family Strengthening Services (a program of Hawaii's Differential Response System)

FSVPS	Family Support and Violence Prevention Section (DOH)
FUP	Family Unification Program
FVPSA	Family Violence Prevention and Services Act
FYAH	Foster Youth Ask Hawaii
FYI	Foster Youth Independence
GAL	Guardian Ad Litem
HANAI	Hawaii Assures Nurturing and Involvement (resource caregiver training)
HAR	Hawaii Administrative Rule
HCAHT	Hawaii Coalition Against Human Trafficking
HCF	Hawaii Community Foundation
HCHTTF	City & County of Honolulu's Human Trafficking Task Force
HCJDC	Hawaii Criminal Justice Data Center
HCRP	Na Kupa Alo Ana O Hawaii Citizen Review Panel
HCTF	Hawaii Children's Trust Fund
HCWCQI	Hawaii Child Welfare Continuous Quality Improvement Project
HCWEC	Hawaii Child Welfare Education Collaborative
HE	Higher Education
HFA	Healthy Families America
HFCC	Hawaii Foster Care Connections
HFYYAAC	Hawaii Foster Youth/Young Adult Advisory Council
HIFASDAG	Hawaii Fetal Alcohol Spectrum Disorders Action Group
HI H.O.P.E.S.	Hawaii Helping Our People Envision Success (current and former foster youth organization)
HIPPA	Health Insurance Portability and Accountability Act of 1996
HI SYNC	Hawaii State Youth Network of Care
HI-SBIRT	Hawaii Screening, Brief Intervention Referral and Treatment
HMIHC	Hawaii Maternal and Infant Health Collaborative
HOSN	Hawaii Ohana Support Network
HP	Hooikaika Partnership
HPD	Honolulu Police Department
HPHA	Hawaii Public Housing Authority
HRS	Hawaii Revised Statutes
HSCDV	Hawaii State Coalition against Domestic Violence
HSVAA	Hawaii State Victim Assistance Academy
HT	Human Trafficking
HUD	Housing and Urban Development
HVS	Home Visiting Services
HYCF	Hawaii Youth Correctional Facility
HYSN	Hawaii Youth Services Network
HZTT	Hawaii Zero to Three Specialty Court
ICF	Internal Communication Form

ICPC	Interstate Compact for the Placement of Children
ICWA	Indian Child Welfare Act
IEP	Individualized Education Plan
IER	Interim Evaluation Report
IFSATS	Intra-familial Sexual Abuse Treatment Services
IHBS	Intensive Home-Based Services
IHI	Independent Living, Higher Education, and Imua Kakou Services
IK	Imua Kakou (voluntary extended care to age 21)
IL	Independent Living
ILC	Independent Living Collaborator
IMT	Implementation Management Team
IPP	Individual Program Plans
IVAT	Institute on Violence and Trauma (conference)
J.D.	Juris doctorate
JJIS	Juvenile Justice Information System
KAEC	Kauai Animal Education Center
KOLEA	Kauhale On-line Eligibility
KPO	Ka Pili Ohana
KS	Kamehameha Schools
LEAG	Lived Experience Advisory Group
LISS	Lanai Integrated Services System
LGBTQ	Lesbian, Gay, Bisexual, Transgender/Transsexual, Queer/Questioning
LGBTQIA+	Lesbian, Gay, Bisexual, Transgender/Transsexual, Queer/Questioning, Intersex, Asexual
LMS	Learning Management System
LT	Liliuokalani Trust
MAP	Makua Allies Program
MCCH	Missing Child Center of Hawaii
MDT	Multi-Disciplinary Team
MEO	Maui Economic Opportunity
MI	Motivational Interviewing
MISS	Molokai Integrated Services System
MLT	Management Leadership Team
MEDQUEST	State of Hawaii Health Insurance
MQD	MedQUEST Division
MOU	Memorandum of Understanding
MSO	Management Services Office
MTPR	Motion to Terminate Parental Rights
NCANDS	National Child Abuse and Neglect Data System
NCHCW	National Center for Housing and Child Welfare
NCMEC	National Center for Missing and Exploited Children

NP	Neighborhood Places
NYTD	National Youth in Transition Database
OC	Ohana Conferencing
OHA	Office of Hawaiian Affairs
OHCD	Office of Housing and Community Development
OJT	On the Job Training
OMS	Online Monitoring System
OSF	One Share Future
OT	Ohana Time
OWR	Governor's Office of Wellness and Resilience
OYS	Office of Youth Services
PACT	Parents And Children Together
PAT	Parents As Teachers
PD	Program Development
PDO	Program Development Office
PHA	Public Housing Authorities
PIDF	Partners in Development Foundation (social service agency)
PIP	Program Improvement Plan
PIP3	Third Program Improvement Plan
PL	Public Law
PONW	Pouhana O Na Wahine
POS	Purchase of Service & Grants Management Unit
PP	Parent Partner
PPDO	Program and Policy Development Office of MQD
PSA	Public Service Announcements
PSUD	Perinatal Substance Use Disorder
PSS	Permanency Support Services
PUR	Period Under Review
QA	Quality Assurance
QAR	Quarterly Activity Report
QIC	Quality Improvement Center for Research-Based Infant Toddler Court Teams
QIC-EY	Quality Improvement Center on Engaging Youth in Permanency
RAC	Resource Advisory Committee
RAP	Rental Assistance Program
RCGs	Resource caregivers
RCSAPS	Rape Crisis & Sexual Assault Program Services
REIC	Race Equity Improvement Collaborative
RFP	Request for Proposal
RFSS	Resource Family Support Services
RIF	Reduction in Force
RST	Rapid Screening Tool for Child Trafficking

SFHR	Safe Family Home Report
SFY	State Fiscal Year
SHAKA	State of Hawaii Automated Keiki Assistance (CWSB computer database system)
SHAKATown	Youth Portal to SHAKA (see above)
SME	Subject Matter Experts from Program Development
SNAP	Supplemental Nutrition Assistance Program
SPAW	Safety, Permanency and Well-being Roundtables
SPC	Strategic Planning Committee
SSA	Social Service Assistants
SSBG	Social Services Block Grant
SSD	Social Services Division
SSDA	Social Services Division Administrator
SSDO	Social Services Division's Staff Development Office
SSI	Supplemental Security Income
SWAT	Specialized Workload Assessment Team
SwSA	Statewide Self Assessment
TA	Technical Assistance
TANF	Temporary Assistance to Needy Families
THIC	Trauma and Healing Informed Care
TMM	Two Makua Meetings
TPR	Termination of Parental Rights
TVPA	Trafficking Victims Protection Act of 2000
UH	University of Hawaii
UHMC	University of Hawaii, Maui College
VCA	Voluntary Care Agreement (for Imua Kakou)
VCM	Voluntary Case Management (a program of Hawaii's Differential Response System)
WCCC	Women's Community Correctional Center
WIC	Women, Infants and Children
WQIT	Workforce Quality Improvement Team
WRAP	Family Wrap Hawaii
WVC	Worker Visits with Children
WVP	Worker Visits with Parents
WWK	Wendy's Wonderful Kids
YC	Youth Circle
YHDP	Youth Homelessness Demonstration Project
ZTT	Zero to Three (Ages 0-3)

Section I. STATE AGENCY UPDATES AND CHANGES

A. DEPARTMENT OF HUMAN SERVICES

The Department of Human Services (DHS) makes great efforts to provide programs and services aligned to the following guiding principles, vision statement, mission statement, and core values which are:

1. Guiding Principles

- Article IX, Section Three of the Hawaii State Constitution regarding public assistance,
- Section 5-7.5, Hawaii Revised Statutes (HRS), the "Aloha Spirit" statute, and
- Section 26-14, HRS, codifying Ohana Nui, DHS' multigenerational approach to delivering human services to reduce the incidences of poverty and to end poverty.

2. Vision Statement

The people of Hawaii are thriving.

3. Mission Statement

To encourage self-sufficiency and support the well-being of individuals, families, and communities in Hawaii.

4. Core Values

CWSB has a vision for the future. CWSB believes that all Hawaii residents can and will thrive. CWSB strives to reach this vision by fulfilling its mission to encourage self-sufficiency and support the well-being of individuals, families, and communities in Hawaii. CWSB is guided by its core values:

- (T) Team-oriented** – CWSB acknowledges that internal and external partnerships are critical to the success of DHS.
- (H) Human-centered** – CWSB develops strategies and makes improvements as necessary from the client's perspective.
- (R) Respectful** – CWSB recognizes the inherent value of each person and the diverse cultures of Hawaii.
- (I) Intentional** – CWSB is mindful of its decisions and actions in CWSB's collective work.

- (V) **Visionary** – CWSB strives to support its clients by co-creating generative, forward-looking strategies.
- (E) **Evidence-based** – CWSB makes decisions based on data and take actions that it knows will have sustainable outcomes.

Department Goals

With nearly 2,400 budgeted-positions in more than 80 offices state-wide, DHS now serves nearly 1/3 (38.9%) of Hawaii's population with one or more benefits or services. In addition, DHS manages an annual budget of over \$4.2 billion, of which more than 64% are federal funds. Notably, DHS distributes a vast majority of federal funds as benefits or services and can also access federal matching funds or seek federal reimbursement to pay for salaries and operations. To continue to serve Hawaii's residents efficiently and effectively, CWSB has the following strategic goals:

Goal 1: Improve the self-sufficiency and well-being of Hawaii's individuals and families.

DHS provides benefits and services to vulnerable individuals and families by assisting them with financial assistance and nutrition assistance, securing gainful employment toward economic self-sufficiency, supporting early childhood development and school readiness, providing access to health care, intervention, and prevention services that address abuse and neglect, and increasing housing stability.

Goal 2: Improve service integration and delivery to develop solutions for sustainable outcomes.

DHS programs and benefits support Hawaii's individuals, families, and communities, contribute to its local economy, and establish Hawaii DHS as a national human service delivery leader. CWSB is transforming its policies, processes, and systems to improve the self-sufficiency and well-being of Hawaii's individuals and families. CWSB aims to serve residents across programs and divisions with integrated eligibility and case management applications and a vision for the future that connects residents quickly to available resources.

- (1) Modernizing the DHS IT infrastructure,
- (2) Implementing its multigenerational Ohana Nui framework to end intergenerational poverty, and
- (3) Developing and implementing the department's strategic plan and performance measures.

With the onset of the COVID-19 pandemic, DHS staff pivoted rapidly to a hybrid work environment while maintaining and increasing safe access to benefits and services. Experienced and innovative leadership and dedicated staff executed the many pandemic programs and programmatic changes built on skills gained through its ongoing business processes and IT modernization efforts. IT investments during the pandemic continued to build on organizational changes DHS began when implementing the Affordable Care Act. With improved technology, staff are more able to provide services statewide and are not geographically limited to processing work on their home island. Supervisors and administrators are better able to redirect human resources when necessary.

During 2023, CWSB continued to support residents as DHS began to "unwind" federal pandemic program waivers and additional benefits and moved back to pre-pandemic eligibility determination processes. Sustaining increased caseloads with high vacancy and retirement rates has taken its toll on the human services workforce, leading to increasing error rates and compliance issues.

However, the devastating August 8-9, 2023, Maui wildfires immediately demanded that DHS shift its collective attention, efforts, and resources to respond to the immediate needs of residents and providers impacted by the fires. Now in the recovery phase, DHS is leading the State's Federal Emergency Management Agency (FEMA) Disaster Case Management Program (DCMP) and has several programs designed to assist Hawaii residents who are not eligible for federal disaster assistance to meet their housing and basic needs. Financial and human resources targeted for Maui are extraordinary, and CWSB anticipates the next biennium may impact "BlueSky" program and position cuts.

Goal 3: Improve staff health and development.

Like many human services agencies across the country, DHS faces high vacancy rates as higher-paying private and public sector jobs attract the available workforce. Findings from a recent wage equity study from the University of Washington School of Social Work found that:

1. "human services workers are systematically paid less than workers in non-care industries, with estimated pay gaps of 30% or more across different econometric models[,] and
2. "human services workers are paid less than workers in other industries or sectors whose tasks are rated as comparable through a systematic job evaluation process." See <https://socialwork.uw.edu/wageequitystudy>.

As such, in addition to continuing investment in the health and well-being of the DHS workforce and IT modernization that supports a flexible work environment to retain and attract workers to fulfill these demanding yet critical services for Hawaii's residents, CWSB needs to engage in a broad cross-sector dialogue to encourage and support human services workers.

Before the pandemic, CWSB provided staff time and opportunity to engage in mindfulness and other stress management courses. Throughout the pandemic, staff engaged in additional webinars and resources to address the stressors of working from home, withstanding a global pandemic, and caring for children and older relatives. By promoting its DHS workforce's health, well-being, professional development, and cross-sector collaboration projects, CWSB is better prepared to support each other and the individuals and families CWSB serves.

However, CWSB is concerned that an understaffed environment increases workplace stress and impacts morale. To sustain the staff, workload, and compliance requirements, CWSB needs to find more flexible ways to retool, reduce the pressure, and continue to support individual needs to maintain the staff's health and mental health.

B. CHANGES TO AGENCY PRIORITIES

DHS is actively involved in the Maui Wildfire recovery efforts. The Maui Wildfires of August 8-9, 2023, destroyed the historic town of Lahaina and also burned acreage and property in "upcountry" Maui. More than 100 residents perished in the fire and smoke, and thousands needed emergency shelter and housing. DHS staff and families located on Maui were directly impacted by the fires, yet staff continued to provide services to Maui residents. DHS was immediately activated to support mass care needs as part of the State's response, and DHS leadership and program staff from other islands were deployed to Maui to assist with emergency sheltering.

DHS Medical Director worked with Maui pediatricians and the Maui Food Bank to distribute needed infant formula and replace durable medical equipment. Staff worked with federal partners to pause Medicaid eligibility redeterminations and restored health care insurance coverage to Maui residents, modified childcare subsidies and worked with childcare providers to restore child care services, conducted a Disaster SNAP program to provide SNAP benefits to eligible survivors who did not already receive SNAP.

Currently, the major lines of recovery efforts include:

- FEMA-funded Disaster Case Management Program (DCMP)

- Implementing and overseeing the Maui Relief Temporary Assistance for Needy Families (TANF) Program with Maui Economic Opportunity (MEO) and the Hawaii Community Foundation (HCF), as of June 10, 2024, the program has issued \$9,421,298.63 to 1,569 households made up of 4,831 individuals. Households who are not eligible for federal assistance can receive funds for rent, mortgage, transportation, utilities, clothing, and other items.
- The Rental Assistance Program (RAP) provides up to 12 months of rental assistance for 275 households consisting of 759 individuals as of June 11, 2024; the total cost is \$16,919,957.24.
- Puuhonua o Nene is a field shelter for individuals who were experiencing homelessness prior to the fires and were not eligible to remain in the FEMA and state-funded non-congregate care program; the annual cost of this program is nearly \$5,000,000;
- DHS also leads a 450-unit interim modular housing project Ka la I ola for families who are not eligible for FEMA housing or rental assistance; and
- DHS continues to support the Emergency Support Function #6 on mass care and feeding

C. UPDATES AND CHANGES TO AGENCY ORGANIZATION

Over the past five years, CWSB created a temporary specialized support unit that could travel to offices that needed assistance; this unit is called the Specialized Workforce Assessment Team (SWAT). The success of the SWAT led to the development of a permanent unit in CWSB.

Statewide, Hawaii has struggled to fill staff vacancies, as staff retire or decide to move on to other endeavors. CWSB continually recruits and will be focusing on staff retention in Hawaii's new five-year plan.

As Hawaii moves closer to implementing its CCWIS, CWSB is working with several consultants and contractors, both technical and program management experts, including professionals from the Capacity Building Center for States to address the enormous effort to modernize the State's child welfare services data systems. The State released its RFP for a CCWIS vendor in the summer of 2023 and plans to have a new vendor on board by the end of FFY 2024. The CCWIS PMO Core Team has included in its comprehensive project schedule the analysis and preparation of CWSB legacy CPSS data for CCWIS data migration. The process will include coordination between CWSB and the technical vendor selected for the CCWIS project to ensure that all CPSS data required for the function of the CCWIS is migrated successfully and without interruption to CWSB services.

CWSB continues to focus on increasing and improving communication and collaboration among CWSB leadership, line staff, the Staff Development office, purchase of services, and Program Development staff to ensure efforts and projects are well-coordinated and include all relevant

perspectives. Also, CWSB has been working more closely with the Department of the Attorney General to ensure that CWSB practice aligns with State and Federal law and that contracts for purchased services include clear roles and responsibilities. During the COVID-19 pandemic, to support communication when so many DHS staff pivoted to a telework environment, CWSB began weekly huddles with administrators and section administrators and has continued the practice to share urgent information, solve complex problems, and discuss emerging practice and operational issues.

Director Ryan Yamane started his tenure as the Director of the Department of Human Services on May 9, 2024.

D. TARGETED PLANS

Revised targeted plans are being submitted as a part of Hawaii's 2025-2029 CFSP:

1. Foster and Adoptive Parent Diligent Recruitment Plan
2. Health Care Oversight and Coordination Plan
3. Disaster Plan
4. Training Plan

E. CHILD WELFARE WORKFORCE

To provide an accurate portrait of its workforce, CWSB conducts a survey of its staff members annually. Relevant data tables and charts can be found in the Data Booklet, Figures 88 – 95. Additional information can be found in Section VIII. C. CHILD WELFARE SERVICES WORKFORCE.

In addition to working to improve case and systemic outcomes, CWSB recognizes the importance of a strong and well-supported workforce. CWSB has identified "Workforce" as one of its CFSP 2025 – 2029 overarching goals.

SECTION II. CWSB STRATEGIC PLANNING

A. OVERVIEW OF HAWAII'S CHILD AND FAMILY SERVICES PLAN (CFSP)

1. Hawaii's CFSP and CFSR

Hawaii's CFSP is a strategic plan that describes Hawaii's vision for its child welfare system and the goals that must be accomplished to actualize that vision. A primary goal of the CFSP is to facilitate the integration of programs that serve children and families into a continuum of services that spans prevention and protection through permanency.

CWSB integrates the Child and Family Services Review (CFSR) process, the CFSP, and the Annual Progress and Services Report (APSR), to coordinate state efforts to determine and monitor the quality of performance. The target percentages for all CFSR goals are long-range goals that aim for very high standards of practice. In the APSR and CFSP, the percentages listed under each CFSR Item are statewide averages from Hawaii's onsite quality case reviews. The percentages indicate how many cases had this item rated as a strength out of all the cases reviewed to which the item applied.

The annual onsite case reviews are modeled after the federal CFSR. Through these reviews, CWSB can identify implementation successes and opportunities for clarification and revision on an ongoing basis. Updates and discussions on strategies are included in various sections of the APSR and CFSP. Efforts are also made to align strategies to effect positive change in multiple areas and streamline practice.

The CFSP for 2025-2029 integrates information from prior APSRs, statewide assessments, CFSRs, and PIPs to assist in planning and implementation for the next five years.

CWSB will integrate the information learned through the upcoming CFSR Statewide Assessment, federal CFSR, and Program Improvement Plan, if applicable, in subsequent APSRs. Goals may be revised or developed based on the ongoing continuous quality improvement process. Goals and strategies may also be adjusted or developed with changes in legislation, local and global circumstances, and as practice strategies and topic areas emerge to help meet outcomes and the needs of families, communities, partners, and the workforce. CWSB has made great strides despite the challenges of the COVID-19 pandemic and 2023 Maui wildfires to adapt its practice and response to meet the changing needs and circumstances of families and communities. Technological changes have allowed for greater collaboration and capacity to provide support to families, in addition to in-person contact.

2. Hawaii's APSR

Hawaii's APSR is an annual report on progress made toward accomplishing the goals and objectives of the CFSP. Due to the length of time it takes for State data to be made available for analysis, this APSR and CFSP will discuss data on activities and services provided through State Fiscal Year (SFY) 2023. The focus of this APSR is specifically on programs, services, and activities provided in Federal Fiscal Year (FFY) 2023 and planned programs, services, and activities for FFY 2024.

Fiscal year references in this report mean the following:

- SFY (N) = July 1, (N-1) – June 30, (N) e.g., SFY 2019 = July 1, 2018 – June 30, 2019
- FFY (X) = October 1, (X-1) – September 30, (X) e.g., FFY 2020 = October 1, 2019 – September 30, 2020

Generally, the APSR and CFSP provide data from SFYs 2019 - 2023. Where possible, more recent data is included, including from case reviews and federal reports.

This Final APSR Report and CFSP utilize data gathered over the last five years on practice and strategies as an opportunity to plan for future growth. This information helps provide a foundation for the CFSP to continue to implement current initiatives while creating new strategies with CWSB, families, stakeholders, and community partners.

3. Vision, Goals, and Objectives

CFSP Vision: Within their communities, children and families are safe, connected, nurtured, supported, and thriving.

Update: This vision was developed for the 2020 – 2024 CFSP through the All-State Team that included members from the Court Improvement Program, Family Court and Zero-To -Three Specialty Court on Oahu, the Hawaii Department of Health- Community-Based Child Abuse Prevention Program (CBCAP) and CWSB representatives. This vision continues to be the vision for the 2025 – 2029 CFSP, as CWSB works collaboratively with other agencies and community providers to support families in the context of their communities, cultures, and individual needs. The vision is shared and reviewed at various meetings with stakeholders as CWSB works together to support children and families throughout Hawaii.

a. **Overarching Goals for CFSP 2020-2024 Vision, Goals, and Objectives (APSR Final Report)**

Goal 1. Collaboration

Continuously collaborate with a variety of agencies, organizations, and stakeholders to evaluate, navigate, and enhance services to address the individual needs of children and families seamlessly across the continuum of intervention, beginning with prevention, to promote safety, permanency, and well-being.

Outcomes for Children and Families:

An enhanced, prevention-based child welfare system will be better able to identify and develop targeted initiatives, interventions, and services to meet the needs of children and families.

Collaboration – Objective 1: Based on the CFSP shared vision, develop a road map and process for CWSB to plan, evaluate, collaborate, coordinate, and implement strategies to promote outcomes related to prevention, safety, permanency, and well-being.

Outcomes for Children and Families:

An enhanced, prevention-based child welfare system will be better able to identify and develop initiatives, interventions, and services to meet the needs of children and families.

- Continue to evaluate, review, and revise the road map, guidebook for implementation, and guidelines for productive collaboration. (Measure: dates completed)

Update: CWSB is continuing to coordinate, align, and participate in strategies and collaborations that help achieve outcomes related to safety, permanency, and wellbeing. For example, CWSB continued to partner with the Hawaii Department of Human Services, Med-QUEST Division (MQD) to support youth in care to access medical services and have included a recent focus on receiving comprehensive and ongoing evaluations to determine children’s needs and to access services to meet their needs.

Collaboration – Objective 2: Promote a robust, effective, accessible service array and interventions for families with children ages 0-3 to strengthen families to prevent entry into child welfare services and prevent re-entry into child welfare

services through gaining sustained skills, supports, and resources within their community.

Outcomes for Children and Families:

An enhanced, prevention-based child welfare system will be better able to identify and adapt services and interventions to meet the needs of children and families with children ages 0-3.

- Review the needs identification process to determine if Hawaii will continue to utilize the same process to identify needs and strategies. (Measure: review and assessment of process to implement this objective)

Update: As part of the All-State Team, members continue to meet every other month to discuss the needs of families with children ages 0-5 and identify resources to meet their needs, as well as opportunities for collaboration. Shared information has provided members with information, strategies, connections, and new collaborations to support the families they work with. Awareness and access to resources can help tailor more individualized plans and approaches to support families.

Over the last year, the team received information/training on Fetal Alcohol Spectrum Disorder and Child-Parent Psychotherapy and learned more about related topics and resources in the community.

The team expressed that meeting together in this forum has been helpful for the partners in their work. Over the last five years, meetings have included discussions on the needs of families with children in the Oahu Zero-To-Three Specialty Court as well as other families with children in this age range. Shared information has provided members with information, strategies, connections, and new collaborations to support the families they work with. This was helpful during the pandemic to share updates and new resources and strategies to support families and the workforce.

The team plans to continue to meet as there is ongoing work to be done to identify the needs, supports, and resources for families with children ages 0-5 and opportunities for members to enhance relationships, share information on resources and trainings, and improve system collaboration.

The team will work to identify agenda items, topics for exploration, and other partners for future meetings to promote a robust, effective, accessible service array and interventions for families with children ages 0-5 and to strengthen

families to prevent entry into child welfare services and prevent re-entry into child welfare services through acquiring sustained skills, supports, and resources in their community.

Goal 2. Prevention

Partner in enhancing a prevention-based child welfare continuum of intervention to engage and support children and families early and in their communities.

Prevention Objective 1: Work with a network of partners to enhance prevention efforts related to Families First Prevention and Services Act (FFPSA).

Outcomes for Children and Families:

Children and families will have increased access to prevention services.

- Further expand pilot program and/or identify additional services to be included in the FFPSA plan. (Measure: date of expansion/additional services identified in plan)

Update: Family First Hawaii, Hawaii's FFPSA plan, has made significant systemic improvements over the years to enhance practice and engage and support families. For information on Family First Hawaii, see Section II.A.3. Family First Hawaii Overview.

Goal 3. Workforce

Actively nurture a robust, healthy workforce of CWSB staff and partner agencies and organizations through training, resources, and support.

Workforce Objective 1: Reduce the workload of supervisors and maintain the reduction.

Outcomes for Children and Families:

Children and families will receive increased contact and quality casework services.

- Continue to monitor supervisors' caseload and inactive cases. (Measure: caseload and inactive caseload data)
- Improve data dissemination and use. (Measure: data tools and monitoring process)

Update: CWSB continues to review information related to inactive cases on an ongoing basis. Some sections continue to have staffing challenges that affect supervisors' workloads. CWSB is utilizing different strategies to better manage the workload of supervisors and caseworkers. CWSB has worked to acquire a shortage differential pay for some caseworkers, supervisors, and administrator positions. This may support recruitment and retention that will ultimately support supervisors and their workload.

The census tract on Oahu may be adjusted to balance the workload based on section staffing as there is more than one section serving the island. Workload can also be adjusted in other sections to balance caseload based on staffing.

Data continues to be used in branch meetings and with section administrators and other meetings, such as information on children in foster care, initial response, and children in care that are ages 0-5 who are not placed with relatives to ensure family finding and ohana conferencing is completed. Information on inactive cases is also reviewed. The findings of the ongoing annual CFSR CQI case reviews are shared as a group to provide information on current practice and opportunities to learn from each other and strategize solutions.

Workforce Objective 2: Develop and implement guidelines and structure for supervision.

Outcomes for Children and Families

Children and families will receive increased quality casework services.

- Continue to evaluate and revise the supervisors support model for new supervisors. (Measure: revised model, if needed)
- Evaluate the plan for ongoing supervisor training/support. (Measure: evaluate and revise the plan, if needed)
- Revise plan for ongoing supervisor training/support. (Measure: revised plan, if needed)
- Evaluate and revise guidelines and tools for Section Administrators to use with supervisors. (Measure: revised guidelines, if needed)

Update: The supervisor's support model continues to be implemented. The current structure is working, which provides support to all new and ongoing supervisors as needed, through a nine-session model and additional support sessions for individuals and groups as needed. Modules are reviewed on an

ongoing basis and revised as needed. For example, supervision related to safety was integrated into the model as part of CWSB's Program Improvement Plan.

Feedback from workers related to supervision is utilized to review the model, topics, and support needed for supervisors. This information is connected and integrated into the modules and individual and group supports to reinforce and clarify the supervisor's role and actions that enhance support and retention. The full nine-session model or individual modules will continue to be available as an ongoing support for new and veteran supervisors.

Supervisors can access recorded sessions as needed and can access specific modules or the entire nine-session model. Supervisors can also receive individualized support.

Efforts are made to identify strategies and support for supervisors and to clarify the role of supervisors in implementing practice enhancements.

CWSB will review the supervisory tools when new initiatives are developed and implemented to strengthen and support practices and to achieve desired outcomes.

Other strategies continue to support supervisors, such as quarterly Management Leadership Team meetings with a specific day for supervisors to discuss practice and supervision, identify needs, and receive information and support.

CWSB recognizes the importance of supervisors and supervision to help the workforce better engage and partner with families to achieve positive outcomes. CWSB is committed to strengthening the workforce through ongoing support and efforts to improve recruitment and retention. Workforce has been identified as a specific overarching goal for the upcoming CFSP.

CWSB appreciates the many partners and CWSB workforce that have helped achieve the accomplishments in the CFSP 2020-2024 Vision, Goals, and Objectives over the last five years. The CFSP for 2025-2029 will focus on strengthening the workforce and safety practice, in addition to practice and systemic factors.

b. Overarching Goals for CFSP 2020-2024 Vision, Goals, and Objectives (APSR Final Report)

In addition to working to improve practice and systemic factors, the CFSP for 2025-2029 will focus on strengthening the workforce and safety practice as overarching goals.

Goal 1: Workforce

Understand and strategize workforce recruitment and retention efforts to sustain and enhance strategies to recruit, retain, and support the workforce.

Rationale

By addressing its vacancy rate, CWSB will improve outcomes for children and families, meaning children would be safer and permanency outcomes will be achieved sooner along with assisting the state to increase its IV-E penetration rate and draw down more federal funds to provide services.

Data

CWSB is currently experiencing a vacancy rate of 36% with 34% of staff leaving within a year of employment, which in turn impacts outcomes for children and families. There are also several positions that were filled, but due to a variety of reasons, such as being new or on extended leave, the staff are unable to perform all the duties of the position. CWSB is concerned about not having enough sufficiently qualified staff to do the work and would like support exploring the reasons why staff leave, why they stay, and what kind of people is CWSB looking for. Currently, workforce recruitment is dependent on Hawaii Department of Human Resources Development (DHRD). The Wikiwiki hiring program is utilized to support hiring and participate in recruitment fairs. CWSB also supports hiring through the Hawaii Child Welfare Education Collaborative (HCWEC) programs with the University of Hawaii. There are assumptions that staff leave due to low pay and wages, high workload, interpersonal conflicts, and lack of support. CWSB would like assistance to explore the characteristics of the people leaving and staying and to look at concerns with supervision and management in the office.

Outcomes for Children and Families

CWSB will respond timely to reports of abuse and neglect to ensure children are safe. More staff will allow staff to better assess and provide services to children and families to meet permanency goals.

Outcomes in Child Welfare Practice

With more staff, CWSB will be able to meet desired CFSR and other outcomes related to its IV-E penetration rate and Family First Hawaii (FFH) and be able to draw down more federal funds. Children and families will receive increased contact and quality casework services.

Desired Change During Work Planning Period

CWSB will have an identified Continuous Quality Improvement (CQI) team to monitor workforce projects and will have a targeted plan to decrease vacancy rates.

Year 1

Objectives/Strategies

- CWSB will convene a diverse team comprised of internal and external partners, including representation of youth and family voices and expertise, to support creation of a workforce development plan.
- Develop a Team Charter with clearly defined roles and responsibilities.
- Develop a comprehensive communication plan for internal and external stakeholders, including stakeholders and youth and family voices, to share information about the purpose of the workforce development plan, information about the workforce development plan, and the ultimate goal of how improving workforce will support achieving desired child and family outcomes.
- Develop an ongoing strategy for feedback loops to inform the work.

Measures

- Team convened
- Developed and documented team charter
- Developed and documented communication plan with feedback loops

Expected Outcomes

- Increased knowledge and capacity for teaming and communication planning

Objectives/Strategies

- Complete workforce data analysis:
 - Review Hawaii Department of Human Resources Development current processes for recruitment, retention, and data collection
 - What are the state-offered benefits?
 - What are the job educational requirements?
 - What are the job descriptions?
- Review current recruitment efforts in addition to the DHRD process
- Explore benefit options to enhance recruitment and retention
- Review current retention and strategies and supports
 - Supervisor training and support

- Workload support and management
- Collect and disaggregate turnover, retention, and workload data by frontline and supervisory positions and determine gaps in data collection.
 - Geographic location
 - Demographics
 - Educational background
- Utilize qualitative data, including data from surveys and focus groups, to assess agency climate, culture, and supports

Measures

- Documented data analysis to support creation of a workforce development plan

Expected Outcomes

- Increased ability to complete data analysis

Objectives/Strategies

- Utilizing a human centered approach, explore options for increasing supervisor supports
 - Partner with supervisors and hear what their needs are and what is working well
 - Based on supervisor recommendations, develop short term strategies to support supervisors and pilot strategies
 - Design activities for cohort sharing and develop a supervisor Community of Practice (COP)
 - Review current supervisor training, e.g., new supervisor training and ongoing training
 - Strengthen the voice of supervisors through different opportunities

Measures

- Supervisor COP developed and documented, including outlines for meeting notes and agendas

Expected Outcomes

- Increased capacity to build supervisor supports

Year 2

Objectives/Strategies

- Create a workforce development plan with defined strategies and action steps to decrease workforce vacancy:
 - Review data and trends from other states and territories
 - Explore and assess current recruitment and retention strategies being utilized, what's working, what isn't working
 - What are current arrangements with colleges and universities?
 - What are current job fair and advertising strategies?
 - Are there areas of low turnover and if yes, what strategies are being utilized?
- Develop the workforce development plan based on the data analysis conducted

Measures

- Workforce development plan finalized and with defined measurable steps

Expected Outcomes

- CWSB will have increased capacity to develop measurable strategies based on data to create a plan and decrease workforce vacancies

Year 3

Objectives/Strategies

- Implement the workforce development plan

Measures

- Plan implemented

Expected Outcomes

- Increase capacity to implement the workforce development plan

Year 4

Objectives/Strategies

- Review, evaluate, and revise the plan, as needed
- Continue sustainability planning

Measures

- Plan reviewed and evaluated
- Sustainability plan completed

Expected Outcomes

- Increased capacity to assess plan based on data and strategies and create a sustainability plan

Year 5

Objectives/Strategies

- Review and revise the plan

Measures

- Review and revision of the plan completed

Expected Outcomes

- Ongoing process to review and revise the plan

Goal 2: Safety

Continue to develop and implement a safety decision making framework to engage and support families in the assessment and decision-making process.

Rationale

CWSB is working to further enhance and revise its safety framework through an equity lens to ensure consistent utilization of the framework throughout all stages of a case. There is an identified need to update and/or develop new policies, tools, training, and procedures to ensure that application of the framework is practiced with fidelity and consistently across the islands and that line staff are prepared and supported and families are engaged and participate in the process.

CWSB has a safety decision making framework in practice and is working to improve the existing model in specific areas related to safety assessment and practice guidance, readiness for engagement in services, readiness for reunification, tools, training, policy and continuous quality improvement (CQI) to ensure consistent application of the model, definitions, and constructs to improve safety outcomes.

Data

CWSB has made significant progress in these items over the last five years and seeks to sustain and increase performance in these items. Item 2 strength ratings have been as follows: SFY 2019 - 31%, SFY 2020 - 28%, SFY 2021 - 70%, SFY 2022 - 82%, and SFY 2023 - 67%. Item 3 strength ratings have been as follows: SFY 2019 - 36%, SFY 2020 - 20%, SFY 2021 - 43%, SFY 2022 - 63%, and SFY 2023 - 51%.

Information, analysis, and plans related to these items can be found in SECTION III. PROGRAMS SUPPORTING SAFETY B. CHILD MALTREATMENT REPORTS AND DISPOSITION STATEWIDE AND PERFORMANCE ASSESSMENT 4. Safety in Child's Home

Measure of Progress

During this work planning period, CWSB will have clarified and defined safety threats/factors, clarified present/impending danger, and conditions for return.

Outcomes for Children and Families

CWSB will continue to implement, clarify practice, and support consistent application of its safety decision making framework and model so staff statewide can consistently, accurately, and timely assess child safety, risk of maltreatment, and family functioning and thereby improve safety, permanency, and well-being outcomes for children and families across the continuum of hotline/intake, investigations/assessment and case management/permanency.

Outcomes in Child Welfare Practice

CWSB will practice initial and ongoing assessments of threats of danger, child vulnerabilities, and parental protective capacities in order to build consistent decision making to promote child safety.

CWSB will have clarified and defined safety threats/factors, clarified present/impending danger, and conditions for return.

Year 1

Objectives/Strategies

- Enhance and revise the Child Safety Assessment (CSA) and associated processes utilizing an equity and cultural lens while infusing diverse representation of youth and family voice and expertise:

- Add and align a “minimum every six-month” CSA into tools, practice, policy, procedure, training, and CQI to align with six-month periodic and permanency court reviews.
- Revise the CSA process to incorporate a culturally responsive analysis of feasibility for an in-home, out-of-home, or combination safety/protective plan, which will also inform conditions for return and safe case closure practice.
- Define and develop conditions for return and ensure integration into tools, practice, policy, procedure, training, and CQI.

Measures

- The revised CSA is documented in policy (six-month revision)
- “Conditions for return” defined and documented

Expected Outcomes

- Increased ability to revise tools and align with policy and procedures

Year 1 to 2

Objectives/Strategies

- Begin to standardize confirmation/findings determinations for allegations of harm/maltreatment utilizing an equity lens and infusing diverse representation of youth and family voice and expertise
 - Develop disposition of allegations of harm/maltreatment guidelines, policy, procedure, training, tools, and CQI
 - Develop culturally responsive information supports, policy, procedures, training that clearly differentiates harm, safety, and confirmation/findings
 - Include guidance for fatality and serious harm cases

Measures

- Drafts for disposition of allegations of harm/maltreatment defined and documented
- Draft processes to monitor fidelity to definitions and consistent application of confirming maltreatment

Expected Outcomes

- Utilize guidance for consistent practice related to dispositions
- Increased ability to develop practice guidance and evaluation measures

Year 1, 2, and ongoing, as needed

Objectives/Strategies

- Enhance initial New Hire Training (NHT) and develop ongoing comprehensive, competency-based training and training plans to support fidelity to CWSB’s safety practice. Using information from objectives/strategies above:
 - Review and understand existing initial NHT training and assess for gaps and opportunities for enhancement
 - Incorporate and enhance NHT and other training materials to align with culturally responsive procedures, policy, practice expectations, use and application of tools, documentation and system enhancements, and supervisor oversight
 - Utilize adult learning theory and best practice training development approaches to include but not limited to interactive training structure, realistic case-based scenarios, involve skill development and application-based learning concepts, case studies, coaching, eLearning, instructor-led training, on-the-job/field-based training, computer-based training, bias training and impacts on decision-making.
- Develop enhanced safety-focused training for existing staff and ongoing training, e.g., topic-based booster trainings.
- Develop initial rollout training plan related to above objectives/strategies for line staff, supervisors, administrators, legal/court stakeholders
- Develop annual training plan that includes ongoing mandatory safety practice trainings delivered throughout the year to reinforce concepts and application, increase knowledge, and develop skills, and which is informed by case reviews, CQI, and other data

Measures

- New hire training updated through documented edits
- Training sessions scheduled and held
- Ongoing training plans developed and integrated into practice guidance

Expected Outcomes

- Training is revised on an ongoing basis to better support staff and to align with procedures, policy, tools, and practice expectations

Objectives/Strategies (Year 1, 2, and ongoing, as needed)

- Create a transfer of learning protocol and process to target strategies that improve understanding, application, training, practice fidelity, guidelines, and inter-user reliability to build internal capacity.
 - Identify and develop safety practice champions statewide to create a learning community and support knowledge transfer, learning, consistency in the application of constructs, and practice fidelity, including “lunch and learns” and supported learning groups (such as for assessment workers and conditions for return)
 - Design and incorporate a practice fidelity process to reinforce decision-making and consistency in applying concepts, and to increase understanding
 - Adapt supervisory guidance related to the safety practice
 - Create a coaching protocol for supervisors and champions related to safety practice, with resources and supports as needed, e.g., supervision tools and desk references and aids for use during supervision, coaching, and fidelity learning circles to reinforce transfer of learning, application, and quality supervisory reviews and oversight.

Measures

- Finalization and documentation of CQI process to assess fidelity and understanding of the consistent application of Child Safety Assessment
- Learning protocol and process developed and documented
- Coaching protocol for supervisors and practice champions developed and documented

Expected Outcomes

- Supervisors will have increased support and resources to utilize during supervision and coaching, and safety practice champions will be developed to support transfer of learning.

Year 2

Objectives/Strategies

- Develop safety threats/factors to align with the model, and define present and impending danger threshold applied against each safety threat into the tools, practice, policy, procedures, training, and CQI at the point of intake, assessment, and case management

- Develop a guiding document that defines present and impending danger aligned with each identified safety threat and include examples such as cultural considerations
- Clearly differentiate in tools, practice, policy, procedure, training and CQI the constructs in the assessment of safety (present and impending danger) with evidentiary-based confirmations/findings to inform a more equitable assessment process
- Revise the CSA process to incorporate a culturally responsive analysis of feasibility for an in-home, out-of-home, or combination safety/protective plan, which also informs conditions for return and safe case closure practice
- Define and develop conditions for return and integrate into tools, practice, policy, procedure, training, and CQI
- Incorporate the above constructs and information into assessment procedures and finalize

Year 3

Objectives/Strategies

- Review progress and practice change to identify areas for clarification/training and supervisory supports
- Identify additional areas to address based on the Statewide Self-Assessment and Program Improvement Plan, as applicable.

Measures

- Progress reviewed and areas for clarification/training and supervisory supports identified as needed
- Areas identified and documented in the APSR

Expected Outcomes

- Ongoing process to review and identify areas for clarification and supervisory supports

Year 4

Objectives/Strategies

- Continue to review progress and practice changes needed, and identify areas for clarification/training, and supervisory supports

- Areas identified and documented in the APSR
- Implement PIP strategies, as applicable

Measures

- Progress reviewed and areas for clarification/training and supervisory supports identified as needed
- PIP strategies implemented, as applicable

Expected Outcomes

- Ongoing process to review and identify areas for clarification and supervisory supports

Year 5

Objectives/Strategies

- Continue to review progress and identify areas for clarification/training, and supervisory supports

Measures

- Progress reviewed and areas for clarification/training and supervisory supports identified as needed
- Areas identified and documented in the APSR

Expected Outcomes

- Ongoing process to review and identify areas for clarification and supervisory supports

4. Family First Hawaii Overview

Overview

Family First Hawaii (FFH) officially implemented operations on October 1, 2021. Prior to implementation, planning and development phases spanned from 2019 to September 2021. Aligned with the planning and development stages, FFH's current organization and operations utilizes a structured approach with specialized workgroups dedicated to specific functions. The leaders of these workgroups are members of the Steering Committee, the primary decision-making body within FFH, and contribute information and provide insight to assist those who are driving the FFH initiatives by providing a comprehensive perspective on pertinent issues. This input reinforces FFH's team-based approach to decision-making and shared accountability. Additionally, workgroup leads and members often participate in more than one FFH workgroup. The intentional

overlap maximizes input from those with shared expertise and fosters a collaboration within FFH processes.

Despite the effectiveness of this structured team-based approach, due to challenges in data collection and staffing capacity, Hawaii has had to revisit FFH implementation timelines to ensure accurate data prior to the expansion of services. FFH leadership recognizes the necessity of corrective measures concerning data collection issues and remain actively engaged in resolving these issues. Concurrently, CWSB administration continues its efforts to tackle workforce staffing challenges.

Summary of the Past Five Years to Present

FFH Services is in its third year of implementation. The accompanying FFY 2025 Hawaii Data Booklet presents data from March 1, 2022 to August 31, 2022 for Home Visiting Services (HVS) where 77 families and 93 children were served, and from October 1, 2021 to June 30, 2022 for Intensive Home-Based Services (IHBS) where 37 families and 88 children were served. More recent preliminary data for HVS and IHBS services include:

- For Home Visiting Services from March 1, 2022 to February 27, 2024, a total of 162 families with 240 children were served. Below see the breakdown per island:
 - Oahu (PAT and HFA): 93 families, 147 children
 - East Hawaii (PAT): 21 families, 34 children
 - West Hawaii (PAT): six families, seven children
 - Maui (PAT): 27 families, 30 children
 - Kauai (PAT): 15 families, 22 children

- For Intensive Home-Based Services from October 1, 2021 to February 27, 2024, a total of 53 families with 126 children were served. Below see the breakdown per island:
 - Oahu: 31 families, 81 children
 - East Hawaii: 18 families, 32 children
 - West Hawaii: 4 families, 13 families

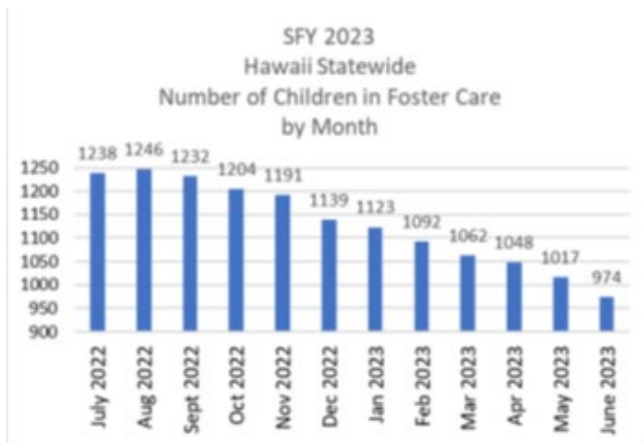
It is important to note that the IHBS provider in West Hawaii continues to face staffing challenges and is operating below full capacity. Consequently, fewer families in this geographical area are able to benefit from this essential service.

Currently, IHBS is available only on the islands of Oahu and Hawaii. Although IHBS contracts were awarded to a service provider on Maui and Kauai in July 2022, the provider has encountered difficulties in recruiting and hiring staff. Several possible factors might contribute to this challenge. First, there is a general shortage in the recruiting pool, specifically for individuals with the requisite IHBS work experience,

especially in areas where the service has not been previously available. Additionally, the intensity of the services required may not align with the compensation offered, making it challenging to attract qualified candidates. This mismatch in compensation and job intensity may be a significant barrier in recruitment efforts.

In response to IHBS staffing challenges, there has been an increased reliance on Crisis Counseling services as a temporary solution. While this workaround helps address immediate needs, it highlights the urgency of resolving the underlying staffing challenges to ensure the effective delivery of IHBS, especially for the islands of Maui and Kauai. CWSB has met with providers, as well as the model developer for IHBS, to understand the barriers to staffing, to review requirements, and to discuss opportunities for recruitment. Hawaii is hopeful that these efforts will result in more resources becoming available.

FFH services data indicates a notable underutilization of both HVS and IHBS services during the specified data collection periods (HVS: March 1, 2022, to expected February 27, 2024; IHBS: October 1, 2021, to February 27, 2024). Despite the low utilization rates for these preventative services, there has been a remarkable decline in the number of children in foster care, as evidenced by CWSB data. When comparing the average total number of children in foster care from SFY 2004 (5,207 children) to the number of children in foster care during SFY 2023 (1,959 children), CWSB has achieved the lowest count of children in foster care in two decades. *Refer to Figure 22 in the accompanying FFY 2025 APSR data booklet.*

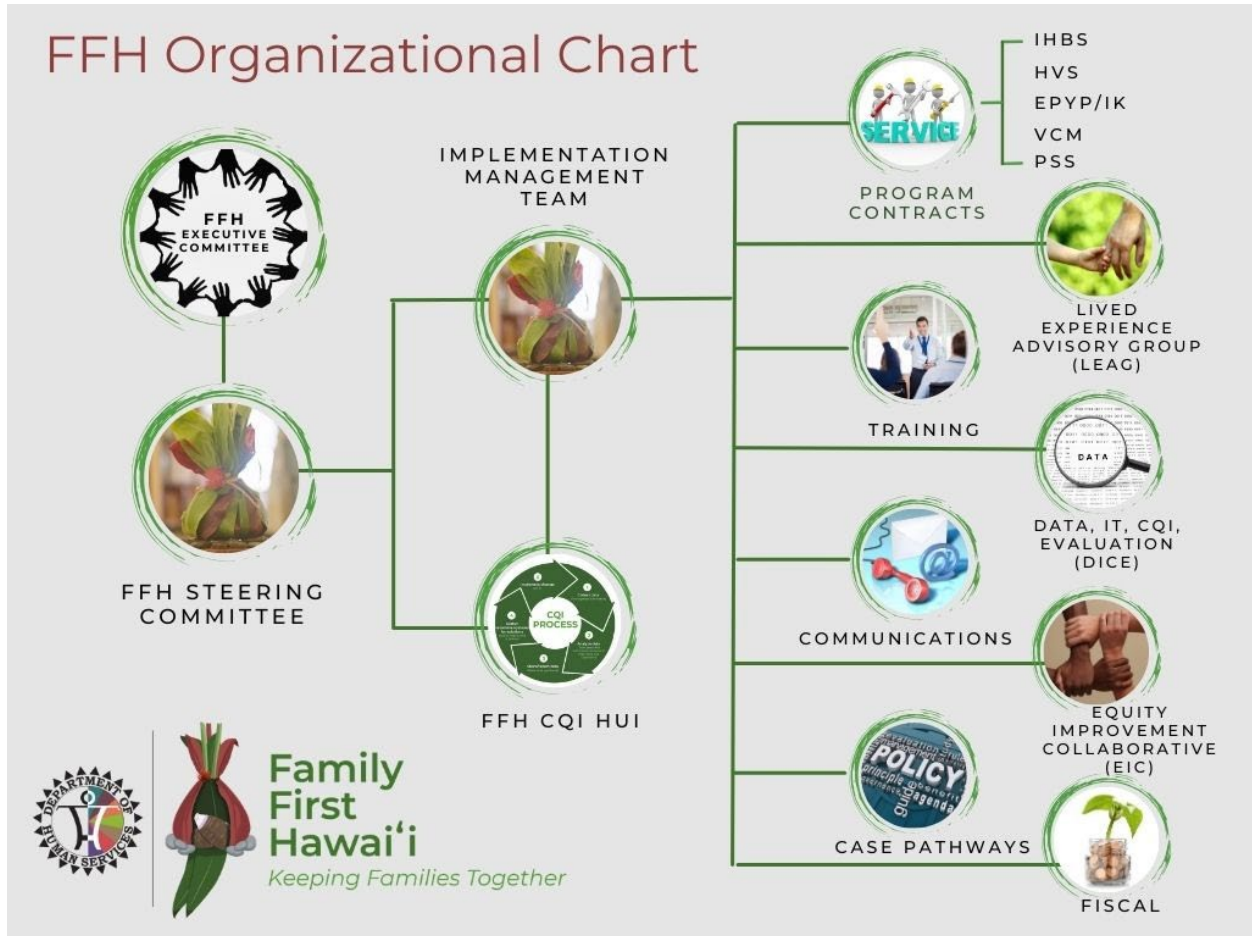


Additionally, CWSB had a notable 21% decrease in the number of children in foster care in SFY 2023, as depicted in the chart on the left. Although the exact causes for this substantial reduction are not fully understood at this time, DHS believes that it is in large part due to the tremendous efforts and dedication of CWSB staff applying the safety framework and safely preserving family units. This significant reduction in the number of children in foster care reflects a shift in mindset among staff,

possibly influenced by FFH efforts in combination with CWSB initiatives.

Revamped Organization Chart. A revised organizational chart tailored specifically to the FFH workgroups was created by the program manager to mirror FFH operations. See

APSR Attachment F: Family First Hawaii Organizational Chart. Departing from the traditional top-down hierarchical layout, the lateral format of the chart is reflective of FFH's team-based approach. A comprehensive explanation and overview of each workgroup is provided in the chart explaining each workgroup's role and function.



Workgroup Temperature Checks. The FFH program manager conducted workgroup self-assessments to gather insights into the functioning of each workgroup. The assessment focused on identifying strengths, barriers experienced, and strategizing short-term goals. Each member participated anonymously in an online survey for their respective workgroups. The findings from these assessments were used to enhance individual and collective workgroup functioning to achieve successful outcomes. The temperature check survey included the following eight topics:

1. **Membership:** Evaluated whether there were sufficient members in relevant areas in the workgroup to plan, organize, and execute tasks effectively.

2. **Frequency of Meetings:** Assessed whether meeting times were appropriately spaced to complete tasks and maintain momentum.
3. **Goal:** Ensured that each team member could articulate the group's purpose and goal.
4. **Work Plan:** Checked for the presence of a detailed plan outlining tasks, leads, and time frames.
5. **Leadership:** Assessed whether there was clear guidance from a lead and co-Lead within the workgroup.
6. **Capacity Building:** Evaluated whether leaders were committed to building capacity within the team.
7. **Internal Communication:** Ensured that team members felt safe to express opinions and assessed whether agendas and minutes were effectively keeping members informed and connected.
8. **External Communication:** Checked if workgroups were effectively linked for information sharing and collaboration, and if protocols were in place to address issues.

The survey also provided members with the opportunity to share any additional ideas, thoughts, or suggestions to improve workgroup functioning.

The results of the Workgroup Temperature Checks indicated several positive outcomes:

1. **Valued and Effective Leadership:** Workgroup leads were appreciated for their contributions and were seen as effective in driving progress forward.
2. **Team Cohesion and Safety:** Members experienced a sense of safety and connection within their teams which fostered positive teamwork.
3. **Diverse Representation and Voice:** Workgroups were incorporating diverse perspectives and voices which ensures inclusivity.
4. **Delegation of Tasks:** Following the temperature check, there was noticeable progress in the delegation of tasks within workgroups. Initially, it seemed that workgroup leads bore the brunt of responsibilities. While they continue to play a significant role, there has been an improvement in distributing workload among group members, leading to more effective task delegation within individual workgroups.
5. **Understanding of Group's Work Plan:** Members have a better understanding of the group's plan and how activities connect to the overarching FFH goals.
6. **Tracking and Monitoring:** Workgroups are actively tracking and monitoring progress towards FFH benchmarks.
7. **Improved Connections:** There is an improvement in connecting with other workgroups, facilitating collaboration and information sharing.

Additionally, the outcomes derived from the workgroup temperature check findings across different workgroups are summarized as follows:

- **Case Pathways:** Increase regular meetings furthering efforts to encourage staff input in procedures and continue collaborations with various workgroups.
- **Lived Experience Advisory Group (LEAG):** Focus on purposeful meetings with specific topics and increase lived experience representation in other FFH workgroups.
- **Equity Improvement Collaborative (EIC):** Adjust meeting cadence to facilitate finalizing and implementing the State CWS Equity Action Plan and explore new membership to enhance diverse perspectives.
- **Communications:** Increase member capacity by involving the entire group in the Public Service Announcement project and improve communication feedback loops.
- **Training:** Engage in various workgroups to better comprehend content for training.
- **Data, IT, CQI, Evaluation (DICE):** Added DICE mission and objectives to meeting agendas, delegated responsibilities among tri-leads, and developed a monitoring/tracking system for tasks as requested by its group members.

Overall, the results highlight positive advancements in workgroup dynamics and collaborative efforts. The comprehensive feedback garnered from the workgroup temperature checks has helped to improve workgroup functionality, thereby enhancing efforts towards achieving FFH goals.

Workgroup Accomplishments. Each FFH workgroup has demonstrated proactive efforts to implement FFH objectives while remaining responsive to staff needs. Below are some highlights from each workgroup.

Lived Experience Advisory Group (LEAG)

- **Continued Lived Experience Consultation and Guidance.** Over the past year, LEAG provided insights and guidance into developing CWSB policies, procedures, trainings, FFH Feedback Loops, and the CWS Equity Action Plan, ensuring a comprehensive and inclusive approach to FFH implementation.
- **Increased Participation in FFH Workgroups:** LEAG members began actively participating in FFH workgroups and the Family Supported Arrangements Continuum workgroup. The LEAG members participation is reflective of the importance that CWSB places on ensuring their voice is heard and indicating a deeper involvement in organizational initiatives and projects.

- **Facilitated Knowledge Exchange:** Engaged FFH service providers shared information about their services, creating valuable opportunities for LEAG members to enhance their understanding of existing FFH services and foster meaningful interactions with service providers.
 - Family Support Hawaii provided a presentation on HVS (Parents as Teachers model) and Catholic Charities Hawaii on the IHBS-Homebuilders model. Both presentations shared an overview of their respective services including eligibility criteria, services provided, available resources, and geographical areas served.

Equity Improvement Collaborative (EIC)

- **Equity Action Plan (ACF version) Completion:** Successfully developed a plan aimed at promoting equity within CWSB.
- **Building Connections for Equity Integration:** Proactively sought opportunities to integrate equity into all aspects of FFH.
 - Initiated efforts to include EIC representation in revising the Safety Framework and updating assessment procedures. This inclusion seeks to identify and rectify policies and practices that perpetuate systemic racism and also ensure that policies are approached through an equity lens.
- **Team Expansion:** Expanded the collaborative team by adding another line staff indicating potential growth and increased capacity for achieving equity-related goals.

Training

- **Standardized Training Development Approach:** Designed, tested, and implemented a new standardized approach and process for training development. This includes input from staff, Program Development Subject Matter Experts (SMEs), and Lived Experience Experts through the entire training lifecycle, from design to finalization.
- **Expectant and Parenting Young People (EPYP) Procedures Training:** Successfully designed, developed, and delivered training on EPYP in foster care.
- **Continued FFH Microlearning Trainings:** Maintained microlearning sessions across all CWSB sections, focusing on the Family Service Plan, FFH eligibility, and EPYP in foster care.

- **On-Demand Training Initiatives:** Implemented on-demand video training modules for various topics including EYP, Child Protective Services System (CPSS), FFH eligibility, FFH Service Action Code (SAC) entry, and Adoption and Foster Care Analysis and Reporting System (AFCARS) training.

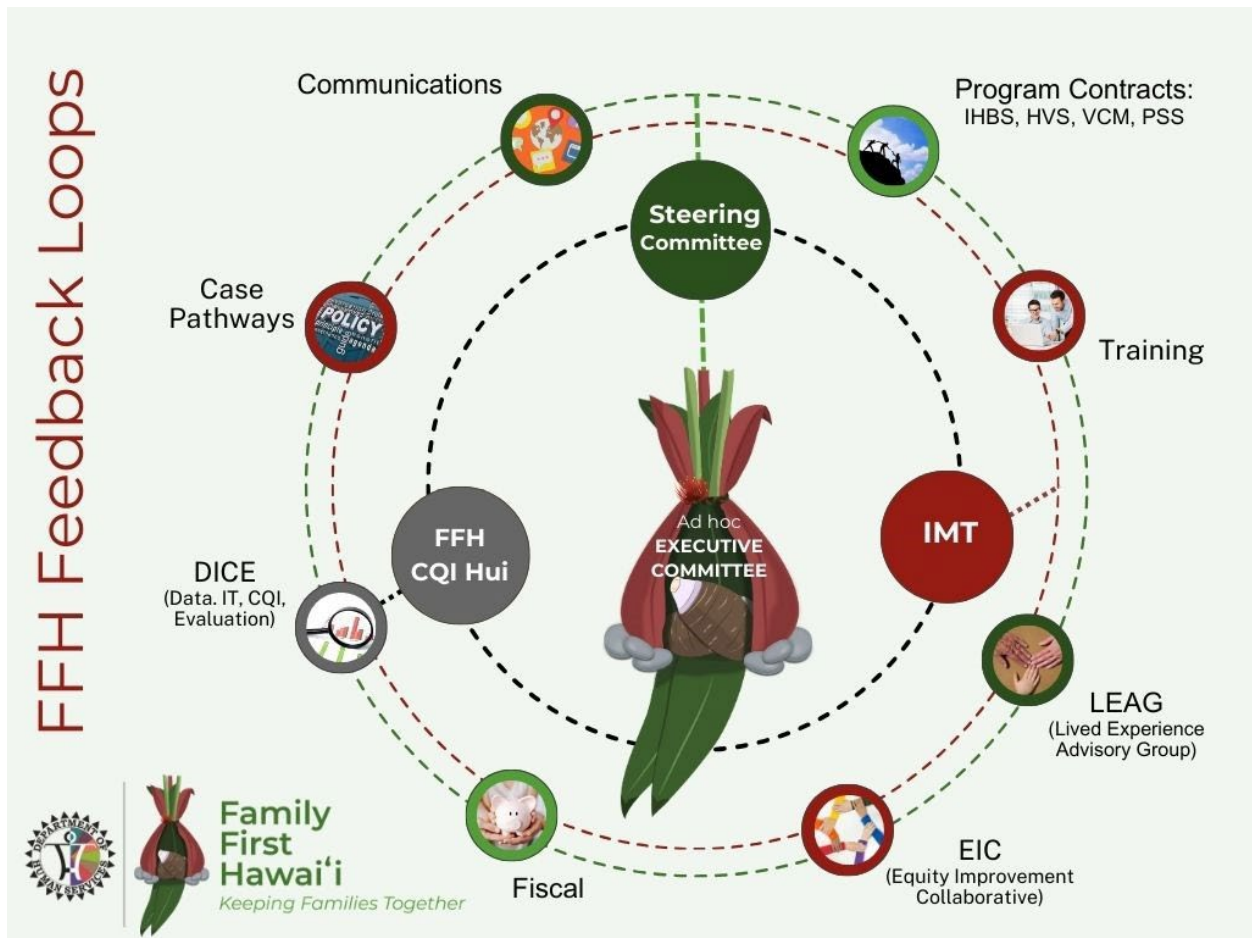
Data, IT, CQI, Evaluation (DICE)

- **Creation of FFH CQI Hui:** The Hui, co-led with LEAG, established an external Continuous Quality Improvement (CQI) workgroup focusing on specific topic areas or data sets, incorporating the CQI cycle for ongoing improvement.
- **Intensive Work on Data Quality:** Undertook sustained efforts to improve data quality, including regular production of error lists, development of systemic solutions for error reduction, and manual checking of individual cases and records. Please see the UH Evaluation Team Report in this section for a comprehensive overview of the challenges related to data quality.
- **System for Calculating and Reporting FFH Costs:** Developed a system to calculate and report FFH costs, including individual costs for each service per recipient each month.
- **Implementation of One FSP:** Created and implemented an enhanced Family Service Plan (FSP) to streamline service planning and data gathering processes.
- **Operational Process for FFH Eligibility Re-determination:** Established an operational process for re-determining FFH eligibility.
- **Data Submissions to ACF:** Submitted two (biannual) data reports to ACF including FFH costs and conducted manual verification to ensure cost data accuracy.

Communications

- **PSA Community Outreach Project:** Developed and aired two impactful Public Service Announcements (PSAs) to raise community awareness regarding the disproportionate representation of Native Hawaiian children in foster care and the ongoing reforms within CWSB through FFH.
- **Staff Awareness Presentations:** Conducted presentations for the CWS Management Leadership Team (MLT) and all CWSB sections to show PSAs and to deepen staff awareness regarding the disproportionality of Native Hawaiian children and families in CWSB.

- FFH Outreach:** Delivered FFH Overview presentations to various groups including Kauai CWSB, MedQuest Early and Periodic Screening, Diagnostic, and Treatment, Home Visiting Service providers, Hawaii Children’s Trust Fund, EPIC Ohana Conferencing staff, and CAMHD staff. Please refer to Section VI.F.31 Agency Responsiveness to Community for more details about the PSA Project, Staff Presentations, and FFH Outreach.
- Internal Communication Enhancements:** Finalized internal graphics including an implementation timeline, updated organizational chart, and workgroup feedback loops to optimize communication efficiency. Please see FFH Feedback Loops graphic below.



The communication pathways depicted in the FFH workgroup feedback loops graphic are color-coded to correspond with the respective primary FFH decision-making bodies (Executive Committee, Steering Committee, Implementation Management Team (IMT), and FFH CQI Hui). Dotted lines represent continuous back-and-forth communication flow

and networking between each workgroup and committee. The outer circle of FFH workgroups illustrate how they support and inform the inner circle of primary decision-making bodies and the inner circle makes decisions and recommendations that are implemented by the outer circle of workgroups. For reference, a copy of the FFH Feedback Loops and Workgroup Reporting Guidelines is provided as a part of this APSR report.

Case Pathways

- **Implemented EPYP in Foster Care Procedures:** Designed and developed collaborative procedures for EPYP in foster care with input from Branch, LEAG, DICE, and training.
 - Executed EPYP Support Plan including SHAKA development and roll-out. This process engaged all statewide CWSB sections for feedback and addressed and incorporated each comment and feedback or provided clarification, as necessary.
- **Sustained Ongoing Collaborations:** Case Pathways and Program Development SMEs are integral to design and development across all FFH implementation workstreams (policy and procedure, IT, evaluation, data, CQI, practice, lived experience, EIC, Communications, and Training).
- **Cultivating an Informed and Inclusive Safety Framework:** Enhanced workgroup to include lived experience membership and integration to ensure a voice within workgroups, introduced EIC membership within the Case Pathways workgroup, and integrated staff voice from various units, sections, and islands for a full scope of process across the State.
- **Collaborative Approach to Revising Assessment Procedures:** Conducted assessment procedures research, design, and initial draft development. Procedures were meticulously vetted line-by-line prioritizing staff input, equity inclusion, and lived experience feedback. The revised procedures underwent a comprehensive review with adjustments made accordingly. A final review focusing on equity and lived experience is planned before finalizing the procedures for training, possible piloting, and full implementation.

Progress: In the implementation of FFH, there have been different needs that have arisen and that have required clarification, problem solving, and modifications. Two primary areas include staffing capacity and data collection challenges.

Staffing Capacity: CWSB continues to face challenges with significant vacancies while meeting multiple demands and departmental requirements. The overwhelming

demands for a severely understaffed workforce continue to take its toll on CWSB sections with notably high vacancy rates. Although the vacancy levels of Assistant Program Administrators (APA), who constitute the majority of FFH leadership, do not reach the critical levels observed in some CWSB sections, the existing shortage of APAs has compelled APAs to shoulder additional workloads often conflicting with FFH priorities. This stretched bandwidth for APAs further impedes progress in FFH implementation.

Data Challenges: The primary challenge to FFH continues to be the inability to collect reliable, accurate data reports. The spectrum of data challenges ranges related to data entry and extraction. Efforts are made to identify and rectify data errors on an ongoing basis. DCWS continues to work to extract data to review and understand FFH implementation and plan for future growth. The following report authored by the University of Hawaii Evaluation Team delves deeper into the data challenges surrounding FFH.

UH Evaluation Team Report

While there have been many successes with Families First Hawaii, full implementation of FFH has been slowed by challenges with data systems and data collection.

The external evaluation of FFH is conducted by a team at the UH Center on the Family. As outlined in the Hawaii State Plan, this team extracts case data on all FFH cases every six months. The plan included for the evaluation team to produce a Process Evaluation Report in mid-2023, and an Outcome Evaluation Report in mid-2025. The Process Evaluation would detail how many families and children have been served by FFH, in what counties, and by what providers. Case data would indicate the types of maltreatment and precipitating factors experienced by those children referred for FFH services, as well as their demographic characteristics. Additional data from providers would outline what delivery of services looks like such as the percentage of families declining or dropping out of services, the typical length of services, the specific types of services provided, and family assessments by providers.

FFH services began in October 2021 with IHBS and March 2022 with Home Visiting cases. So far, the evaluation team has extracted case data four times: February 2022, August 2022, February 2023, and August 2023. This data comes from two State data systems and the FFH case data from providers. The expectation is that the evaluation team will merge case data from across systems to provide a complete picture of FFH clients and services.

Challenges: After each data collection period, the evaluation team has been unable to report on any of the above process characteristics due to significant amounts of

incorrect and missing data. The State is unable to identify with any precision how many families have been served by FFH.

The Effect on Implementation: The errors in case data in State systems have prevented the evaluation team from merging case data with provider data. Providers serve many families and are not certain which of their families are FFH clients and which are not. Therefore, they send case data on all families, and the evaluation team sorts out those that do not match up with State-identified FFH families. There has been no matching done thus far so providers have received no feedback to date on the information they are sending to the State.

Given the lack of reliable case data on how the implementation of FFH was progressing, the evaluation team instead conducted two surveys in early 2023 to inform the Process Evaluation. One survey was of 47 members of the Implementation Management Team, which includes CWSB administration, section administrators, FFH contractors, consultants, and those with lived child welfare experience. A second survey of 56 CWSB caseworkers asked about their experience with FFH services.

The survey of stakeholders used Implementation Science as a framework, and asked respondents questions to indicate the progress of FFH in developing Implementation Teams, Data and Feedback Loops, and Infrastructure to Support FFH. The most significant challenges to the implementation of FFH were in the area of Data and Feedback Loops. Respondents noted that current informational needs are hampered by antiquated IT systems, poor data quality, data entry mistakes, and little verification of data. All of this results in a lack of feedback on FFH case data in real time, which hampers implementation.

A preliminary Process Evaluation Report based on the survey results was submitted to CWSB for review. A final report is pending sufficient quantitative data with which to evaluate the progress toward implementation of Family First Hawaii.

Strategies to Improve Data Quality: Instead of reporting on case and service characteristics after each six-month data extraction, the evaluation team has instead provided several reports on data quality with detailed information about which data points have the most missing and/or incorrect data. The team has also identified where caseworker training might be developed or enhanced to reduce data entry omissions or mistakes.

Members of the DICE workgroup have formed into ad hoc data quality strike teams to review data files on a case-by-case basis. Where data is missing or appears to be illogical, individual reviewers go to the original case file to determine the correct data. This has been a time-consuming process, taking over a year, as new cases are

served, and new errors are identified. Along the way, these strike teams have identified broad categories of errors. Data Tip Sheets are being developed for caseworkers to help with training on when and where to enter critical case information.

The February 2024 data extraction is currently underway and will shed light on the success of these data improvement efforts.

Planning for the Next Five Years

In addition to providing CWSB staff with Data Tip Sheets and other supportive resources for accurate data entry, it is hopeful that the new Comprehensive Child Welfare Information System (CCWIS) will resolve current challenges related to FFH data extraction. With a CCWIS vendor selected and scheduled to commence work in the Fall of 2024, the goal is for CCWIS to be fully functional in 2026. There is optimism that the combined effect of accurate data entry and an updated database system will result in the production of quality, reliable data. This, in turn, will enable a comprehensive evaluation of FFH outcomes, thus providing valuable insights to inform decision-making for FFH leadership.

In the meantime, the DICE workgroup will continue to work on refining processes in data collection and management as well as ongoing efforts to streamline documentation and centralize case information for CWSB staff. The group also has future plans to develop a FFH data dashboard to provide ease of access and understanding in a user-friendly platform to track, analyze, and monitor key performance indicators to further support data-driven decision-making.

Current efforts are underway to revise the FFH Communications Plan to ensure consistent and ongoing messaging to both internal and external stakeholders. This will include enhancing communication feedback loops to gather valuable insights from stakeholders to enhance CWSB and community relationships, increase stakeholder engagement, and strengthen agency responsiveness to the community.

Other prioritized future developments for FFH involve developing processes to track FFH implementation and define benchmarks for success. This includes creating measurable outcomes and decision-making criteria to gauge the effectiveness of FFH initiatives. Additionally, FFH leadership will continue to proactively explore strategies to increase utilization of IHBS and HVS services. This includes fostering collaboration with IHBS service providers for the islands of Maui and Kauai to support the recruitment and hiring of IHBS staff. Further initiatives can include exploring alternative evidence-based preventative services that may be better tailored to meet the geographic needs for Maui and Kauai. By prioritizing such initiatives, FFH can better address the diverse needs of its communities and enhance the effectiveness of its preventative efforts.

B. DATA

1. Data Sources

CWSB collects and uses data in a variety of ways from a variety of sources. Listed below are the primary systems that Hawaii uses, which are referenced throughout this report.

a. On-site Quality Case Reviews

Hawaii has a robust quality case review system, modeled after the federal CFSRs. All units and sections that carry cases are reviewed once a year, using a randomly selected sample of cases and applying the CFSR instrument. The statewide average strength rating for each CFSR performance item is reported and discussed in *Sections III, IV, and V* of this report.

b. Federal Data Sources

Listed below are three federal data sources that aggregate and substantiate Hawaii's local data.

- i. Adoption, Foster Care Analysis and Review System (AFCARS)
- ii. National Child Abuse and Neglect Data System (NCANDS)
- iii. National Youth in Transition Database (NYTD)

c. Statewide Information Systems

Please see *Section VI. Systemic Factors, A. Statewide Information System* for a more complete description of Hawaii's information systems.

The following systems are the primary sources for Hawaii's data:

i. Child Protective Services System (CPSS)

In use since 1989, the CPSS electronic database is CWSB's official system of record. It contains information for required federal reports such as AFCARS and NCANDS. CPSS also houses Hawaii's Central Registry of all confirmed perpetrators of child abuse and neglect. CPSS is maintained by DHS Office of Information Technology (OIT) and a contracted provider.

ii. State of Hawaii Automated Keiki Assistance (SHAKA)

A web-based database, SHAKA is a user-friendly interface with CPSS for selected functions, such as entering logs of contact, viewing case information, and reviewing aggregate case lists and data. SHAKA is also

the primary database for NYTD, Education and Training Vouchers (ETV), higher education benefits, and Imua Kakou. SHAKA is maintained through a contract with the University of Hawaii, Maui College.

2. APSR FFY 2025 Data Booklet

Included with this APSR as Attachment A is Hawaii's APSR Data Booklet for FFY 2025. The Data Booklet contains all the graphs, charts, and tables that are referenced in the APSR narrative. *Note: the Data Booklet should be used alongside the relevant APSR narrative, as the data is further defined, described, explained, clarified, and given context in this report. Viewing and using the Data Booklet contents independent of the APSR is discouraged.*

C. COLLABORATION ON CFSP/APSR

CWSB values and includes the voices and perspectives of families, children, youth, young adults, courts, and other system partners in assessing agency strengths and areas needing improvement; reviewing and modifying goals, objectives, and interventions; and monitoring CFSP and Program Improvement Plan progress, when applicable.

As part of the CFSP development and APSR review and revisions to the CFSP and goals, data on outcomes is shared with stakeholders to align efforts and identify opportunities for collaboration to improve outcomes. Data and shared outcomes are reviewed in a variety of venues to discuss practice and develop with stakeholders shared strategies for improvement. The integration of voices of families, children, youth, and young adults; courts; and other system partners occur in many ways and are discussed throughout the CFSP and APSR. Some examples are included below.

The Lived Experience Advisory Group (LEAG) workgroup, consisting of parent partners (birth parents previously involved with CWSB), youth formerly in foster care, and support staff, continues to meet monthly and has provided valuable feedback in multiple areas of Family First Hawaii (FFH) planning and implementation. LEAG birth parents recorded a video of their experiences with CWSB, how they received their Family Service Plans (FSP), and how that made them feel. The video was specifically created for the Family Service Plan training for CWSB staff and parent partners were present during the trainings to answer any questions from CWSB staff. The overall feedback from CWSB staff regarding the birth parent video and question and answer sessions was very positive, with staff realizing the importance of not only how they share FSPs with families, but how they interact with families as part of case practice. A link to the video is: <https://www.youtube.com/watch?v=kYqjQT0wxwU&t=14s>. Parent Partners have valuable lived-experience with CWSB and/or other systems and provide specialized support to parents in a variety of ways, including enhancing parent voice in case planning, which promotes engagement and positive outcomes.

LEAG has continued to be a key partner in enhancing practice by providing insights and guidance on the development of policies, procedures, trainings, FFH Feedback Loops, and the CWS Equity Action Plan. LEAG participation in workgroups has expanded to include actively participating in FFH workgroups, Family Supported Arrangements Continuum workgroup, and workgroups to revise the safety assessment tool, instructions, and training curriculum. Their participation is reflective of the value that CWSB places on ensuring the voice of those with lived experience is heard and is indicative of their deep involvement in organizational initiatives and projects.

As part of the CFSP development, APSR review, and revisions to the CFSP and its goals, data on outcomes is shared with stakeholders to align efforts and identify opportunities for collaboration to improve outcomes. Data and outcomes are reviewed in a variety of venues to discuss with stakeholders CWSB practice and to develop shared strategies for improvement. The integration of voices of families, children, youth, and young adults; courts; and other system partners occur in many ways and are discussed throughout the CFSP and APSR.

The Child Welfare Advisory Committee's purpose is to inform positive system change toward the goal of improving outcomes for children and families. This Committee meets quarterly to share updates from CWSB and partners in each community on topics that affect children and families. In addition, CWSB data, including case review findings, is shared and discussed. The Committee's broad, statewide membership includes CWSB staff, contracted CQI staff, community social service providers, court staff, DOH representatives, youth representatives, resource caregivers, and family representatives. CWSB continues to share data, goals, and progress; outcomes; strategies; challenges; and to receive feedback from members who share perspectives on how things are working in specific locales. The group is continually exploring topics for discussion and opportunities for collaboration and feedback on shared goals. This group has enhanced working relationships among CWSB, providers, and other stakeholders. The meetings provide a venue for CWSB, contracted providers, and community and State agency representatives to share information and updates on activities and resources and to provide an opportunity for feedback on CWSB policies and procedures that may be later incorporated into revisions. Topics addressed in these meetings also include Child and Family Services Review outcomes and how providers and participants play a role in meeting the concrete needs of families, and ways to support the changing needs of families. Recently, CWSB shared information on the CFSP, APSR, CFSR, Statewide Assessment, and PIP to provide an overview of the outcomes it is working to collaboratively achieve and identified examples of how different stakeholders contribute to positive outcomes.

The All-State Team meets every other month with an array of participants from a variety of State agencies and community organizations to share information about resources and programs and identify needs/topics to learn more about supporting families with children ages 0 – 5 from prevention to permanency. These meetings will continue to meet on regular basis.

The collaboration with Court stakeholders, developed as part of a Program Improvement Plan, has been a positive strategy to identify shared goals and to work together to improve outcomes. These meetings continue to occur quarterly in each circuit and provide a place for connections and relationships to be made and sustained and opportunities to work together with court partners to achieve outcomes. Meetings include reviews of data on CFSR items 5 and 6, observations of workflow, information sharing, reviewing trends from data, discussing practice shifts regarding Family First Hawaii and other areas, efforts for placement prevention, and obtaining feedback from stakeholders and the court on areas needing improvement or more support. The focus on shared outcomes helps stakeholders to come together to create solutions in geographic locations.

CWSB continues to collaborate successfully with the Children's Justice Act (CJA) task force and its partners. The Statewide (Hawaii) Task Force is comprised of representatives from each of the four counties and who are individuals with experience/expertise in child abuse and neglect. They are responsible for approving the State's CJA budget(s) and monitor expenditures, including priorities for the system's response to cases of child abuse and neglect. The Statewide Task Force meetings are convened at least quarterly. Statewide Task Force partners with the Hawaii Judiciary's Children's Justice Centers (CJsCs) to improve interagency coordination, investigation, handling and prosecution of child sexual abuse, sex trafficking, serious child physical abuse cases, child fatalities and children who are witnesses to crime, by prioritizing and directing the use of CJA funds for its intended purpose.

Historically, Hawaii has utilized CJA funds for numerous trainings across the state. Over the next several years, funds will be expanded to help identify and implement strategies for underserved populations and communities, including equity for racial minorities, e.g., Native Hawaiians, other persons of color, LGBTQ, individuals with disabilities and those adversely affected by poverty or inequality. The goals of the funds include fostering collaboration among child welfare, legal, and judicial entities, including Court Improvement Program (CIP), related to court proceedings in child abuse cases to ensure improved, timely case resolution.

While there are no federally recognized tribes in the State of Hawaii, CWSB endeavors to engage and partner with tribes for children who are identified as potentially eligible for Indian Child Welfare Act (ICWA) at all stages of the case, including by focusing on the role of the caseworker at intake, at Family Court, with the Department of the Attorney General, and during the Interstate Compact for the Placement of Children (ICPC) process, if applicable.

Ka Pili Ohana (KPO) is a collaboration with CWSB, EPIC, Liliuokalani Trust (LT) and other community partners to support and foster the Two Makua ("Two Parent") relationship for Native Hawaiian families involved within CWSB. The project focuses on developing positive working relationships among birth parents, CWSB, and Resource Caregivers (RCGs), and strengthening parent and child relationships during visits with birth parents, children, RCGs, and CWSB. LT provides cultural guidance to the project and participants. KPO is currently being

offered on the island of Oahu in the East and West Oahu CWSB Sections, and on the island of Hawaii in the Kona and Hilo CWSB Sections.

CWSB primarily partners with EPIC Ohana to implement Two Makua Meetings (TMM), which are informal meetings between birth parents and the RCG designed to encourage the development of a positive relationship that fosters open communication between the child's caregivers. LT is integrated into these meetings by introducing the Native Hawaiian cultural component for Native Hawaiian families.

Na Kama a Haloa is a community-based network that was established in September 2018 to address the overrepresentation of Native Hawaiian children and families in the child welfare system. The group strives to integrate Native Hawaiian values, wisdom, and perspectives into every aspect of their work, extending this influence to systemic partners, particularly CWSB. Na Kama a Haloa fosters continued collaboration among Native Hawaiian-serving institutions, CWSB, service providers, communities, and individuals with lived experience in child welfare.

Malama Ohana is another example of community collaboration to support families involved with Child Welfare Services. Malama Ohana is a working group established during the 2023 legislative session and signed into law as Act 86 by Governor Josh Green on June 14, 2023. The concept of the working group originated as part of the work of the Na Kama a Haloa network, which consists of more than 30 organizations working collaboratively to improve the lives of Native Hawaiian keiki and ohana, especially those over-represented in the state's child welfare system. The Governor's Office of Wellness and Resilience oversees this working group, which holds listening sessions throughout the state and brings community partners and those with lived experience together to improve and transform the child welfare system. The child welfare system encompasses the Department of Human Services, government partners, provider partners, community supports, and lived-experience experts. A report is due to the Legislature for the next 2025 Legislative Session. The report will note what aspects of the child welfare system are working well and will offer suggestions for collaborative improvements. Listening and collaborating is critical for creating a healing system for some of CWSB's most vulnerable families and children.

CWSB appreciates its partnership with DHS Med-QUEST Division (MQD) in assisting CWSB staff understand current COVID-19 implications and guidance. Ongoing collaboration with MQD has helped in a variety of ways, including providing pandemic related training to CWSB and problem-solving to support children with medical or behavioral needs. CWSB and MQD are working together to ensure children in foster care receive federally required comprehensive health assessments (EPSDT) and any recommended services based on these assessments.

CWSB has also continued to strengthen its partnership with the DOH Child and Adolescent Mental Health Division (CAMHD) through regular meetings, identifying services, and collaborating to serve children with complex needs.

CWSB is a continuing member of the Hawaii State Youth Network of Care (HISYNC). CWSB is actively involved in HISYNC's strategic planning process with CWSB representatives from each geographic location participating and sharing the needs of youth, families, and the system from those specific locations.

CWSB appreciates the supportive partnership with ACF/CB to improve practice in many areas. Joint planning and consultation with ACF/CB have helped CWSB clarify requirements and develop procedures and strategies to better meet the needs and outcomes of children and families.

CWSB works to support and engage the workforce in a variety of ways. CWSB continues to utilize weekly "huddles" with section administrators to share information and respond to emerging needs. Also, monthly branch meetings with section administrators and quarterly Management Leadership Team meetings with statewide section administrators and staff development staff continue to provide opportunities to share, discuss, and refine CWSB practice and resources. All workers are part of the feedback process as practice is revised or developed. CWSB has also focused on supporting the wellness of staff through different strategies. Developing and nurturing a healthy workforce provides families and partners with optimal support, positive interactions, and increased collaboration. As noted earlier, workforce is an overarching goal of the CFSP 2024 – 2029.

These collaborations and strategies promote positive outcomes in multiple areas. Strong partnerships help CWSB to coordinate shared efforts, improve outcomes, and be responsive to families.

D. CWSB PROGRAM ASSESSMENT

1. Past Five Years

Over the past five years, CWSB has used the strategies described below to assess its programs' functioning and efficacy.

a. Statewide Case Reviews

The Department contracts with the University of Hawaii (UH) Maui College, Hawaii Child Welfare Continuous Quality Improvement Project (HCWCQI) to annually conduct formal case reviews of a random selection of cases from every region of the State, using the federal Child and Family Services Review (CFSR) tool. The case review results for each section provide an opportunity to highlight strengths in practice and areas for clarification and improvement. These reviews form the basis of action plans for each section. The information from the reviews is also shared in different fora with stakeholders to align efforts and

identify opportunities for collaboration to improve outcomes. This is the primary process CWSB uses to assess its practice.

b. Targeted Reviews

When CWSB leadership notices a pattern in the CWS data that they need to understand more fully, HCWCQI designs and conducts a review of CWS cases to target the issues to identify areas for improvement. Topics can be identified based on ongoing areas of focus, emerging needs, and as part of implementation of practice change. Case specific reviews are also included and available, as needs arise, to understand current situations and improve practice in relation to the performance items.

c. Expert Consultants

The Department continues to draw upon the wisdom and experience of child welfare experts to guide CWS work and ensure the best outcomes for children and families. These experts include representatives from the Child Welfare Capacity Building Center for States, the Center for the Study of Social Policy, Casey Family Programs, and ANSA. Consultants' work usually begins with an assessment of current Hawaii practice. Using the data from the assessment, Hawaii and the consultants collaborate to develop strategic plans to improve CWS practice, procedures, and tools.

d. CWS Advisory Committee

The Child Welfare Advisory Committee's purpose is to inform positive system change toward the goal of improving outcomes for children and families. The Committee meets quarterly to share updates from CWSB and partners in each community that affect children and families. In addition, CWSB data, including case review findings, is shared and discussed. The Committee's broad, statewide membership includes CWSB, contracted HCWCQI staff, community social service providers, court staff, Department of Health representatives, youth representation, resource caregivers, and family representatives. CWSB continues to share data, goals, progress, outcomes, strategies, and challenges, and then receive feedback from members. Committee members bring geographic perspectives on how to improve CWS functioning in their respective regions. The group is continually exploring opportunities for collaboration and feedback based on shared goals.

e. Lived Experience and Stakeholder Voices

In its workgroups, planning meetings, teams, councils, action strategizing, and similar groups and activities, Hawaii continues to seek out and incorporate the perspectives and opinions of people with lived experience in child welfare. Only through collaboration with stakeholders and community partners does CWSB make decisions and implement programs. Information on how stakeholders and partners engaged in assessing the State's performance towards meeting the goals of the CFSP/APSR is provided throughout this APSR. Voices of stakeholders have been an important part of implementation of Family First Hawaii.

EPIC Ohana Parent Partners with provide an important, supportive service to parents involved in Child Welfare Services that are participating in the Wraparound planning process called Family Wrap Hawaii. They also provide a key perspective to improving systems and practice. Parent Partners have valuable lived-experience with Child Welfare Services and/or other State systems and provide specialized support to parents in a variety of ways, including enhancing parent voice in case planning, and promoting engagement and positive outcomes. A panel of Parent Partners were part of the Family First Hawaii first year celebration conference. They provided both valuable concrete information about navigating CWS and emotionally resonant and honest perspective of their child welfare experience. They candidly shared about the impact that CWS has on families, the importance of genuine engagement, and how the system has progressed over time. Conference attendees commented that this panel was the highlight of the celebration.

Makua Allies has provided an instrumental service which reaches out to parents with substance use needs to support their access to and engagement in appropriate services. This outreach with lived experience expertise is helping to work with parents early on and prevent involvement with CWSB and possible entry into foster care.

2. Next Five Years

CWSB has identified goals to guide the next five years of Hawaii's efforts, which will be the focus of future program assessments. These goals are listed below.

- a. **Increase Equity**, focusing on disparities involving:
 - i. Race and Ethnicity
 - ii. Gender Identity and Gender Expression
 - iii. Sexual Orientation

- iv. Disabilities
 - v. Poverty
- b. **Improve Communication** among front-line staff, Branch, and Program Development through the following:
- i. Feedback System (from line staff to Program Development staff) for policy and procedure changes;
 - ii. Workgroups with broad representation;
 - iii. Microlearning sessions for line staff on new initiatives;
 - iv. Weekly huddles with Branch and section administrators;
 - v. Weekly workflow meetings with Branch and Program Development Administrators;
 - vi. Branch Administrator attendance at Weekly Program development meetings; and
 - vii. Quarterly Management Leadership Team meetings.
- c. **Improve Safety Framework** including the following to improve practice:
- i. Review and revise procedures, forms, and tools;
 - ii. Review and revise training curriculum;
 - iii. Provide support for supervisors; and
 - iv. Support for practice implementation from intake through permanency.

For more information about how Hawaii CWS assesses its programs, please see *Section VI.C. Quality Assurance (QA) System* of this report.

E. INTERVENTIONS & STRATEGIES

Past Five Years

The principles guiding the strategies and inventions that CWSB employed over the past five years emerged from CWS Family Partnership and Engagement Practice Model, originally implemented statewide in early 2010.

1. Interventions

Safety, permanency, wellbeing, family engagement, and youth transition are the center of CWS interventions and services. All CWS interventions and services work to promote successful outcomes for families. All interventions are:

- a. Based on an assessment of the family’s strengths and challenges;
- b. Tailored to the individual needs of each child and family;

- c. Designed using the strengths, problem-solving abilities, and unique capacities of each family and the family's community;
- d. Culturally sensitive;
- e. Respectful of family dynamics, routines, practices, and choices;
- f. Undertaken in a spirit of partnership and collaboration with all parties committed to strengthening the capacity of the family to make sound decisions for the safety and wellbeing of their children; and
- g. Developed with the family in a manner that nurtures, enhances, and sustains their community supports.

2. Strategies

The strategies CWSB uses to achieve its goals rely on:

- a. Collaboration that respectfully engage families to design their own solutions;
- b. Multidisciplinary approaches that include input from families, communities, and professionals from a wide range of fields and backgrounds;
- c. Creativity in addressing individual problems;
- d. Evidence-based, trauma, and healing informed care;
- e. Honest and earnest communication;
- f. Compassion and caring; and
- g. Strength-based support to build family and community capacity to ensure child safety.

3. Next Five Years

In the next five years, Hawaii plans to focus its interventions and strategies on Native Hawaiian projects and programs with two related goals in mind:

- a. Reduce Native Hawaiian disproportionality in the Hawaii child welfare system, and
- b. Serve Native Hawaiian families in a culturally-based, culturally-informed, culturally-appropriate, and culturally-sensitive manner.

CWSB has been collaborating with community partners, other State agencies, and social service agencies, such as Liliuokalani Trust, Kamehameha Schools, EPIC Ohana, Inc., and the State Office of Hawaiian Affairs, to achieve these goals. A sample of current efforts is discussed below.

In ancient Hawaiian culture, there was no significant distinction made among the adults in the family that cared for a child. Aunts, grandfathers, moms, uncles, dads, and

grandmothers were all referred to by the same Hawaiian word – *makua*. Building on this concept, a program has been created to bridge the gap between birth parents and resource caregivers, called *Two Makua*. In the *Two Makua* program, there is an initial facilitated meeting with the resource caregivers and the birth parents to introduce them to each other in a positive manner, and then ongoing assistance to promote mutual support and shared caregiving responsibilities. The *Two Makua* program embodies the CWS core intervention and strategy tenets listed above, such as: identifying and using the family strengths; tailoring care to the specific child; cultural sensitivity; respecting family lifestyle, dynamics, and choices; embracing the spirit of partnership; engaging families; utilizing creative approaches; and promoting honest communication and compassion.

CWSB has been collaborating with cultural consultants and leaders to address the topic of disproportionality of Native Hawaiian families and children involved in CWS. As part of the *Na Kama a Haloa*, a statewide collaboration, the *Hui Kauhale* is assisting CWSB with Hawaiian cultural messaging. *Hui Kauhale* helped create the Family First Hawaii (FFH) informational video and message, and enhanced CWS new hire training by infusing cultural understanding into the modules and rooting the curriculum in Hawaiian principles. Through this partnership, learning opportunities on culture are identified and integrated into other efforts. CWSB's continuous growth in embracing families' cultures and in grounding practice in Hawaiian values is developed with *Na Kama a Haloa* and Liliuokalani Trust, the Office of Hawaiian Affairs (OHA), Kamehameha Schools, and other partnerships.

CWSB continues to collaborate with Casey Family Programs (CFP) Annie E. Casey Foundation, EPIC Ohana, Liliuokalani Trust (LT), Kamehameha Schools (KS), DOH, DOE, and other community agencies to strengthen partnerships and best service children and families through a community approach. Frequency of these meeting and working groups varies, based on the mission and goals. For example, the Child Welfare Equity Improvement Collaborative (EIC) meets monthly and is creating statewide implementation plans for addressing racial disparities, as well as equity in other key areas, such as gender, sexual orientation, gender identity, gender expression, social class, disability, and age. Other workgroups meet quarterly, or more frequently, as needed. Across collaborations in CWSB, the overrepresentation of Native Hawaiian families is a high priority. Culture and values are frequently discussed when implementing new initiatives and revising ongoing practice.

The Child Welfare Equity Improvement Collaborative (EIC), formerly the Casey Family Programs Race Equity Improvement Collaborative (REIC), has identified Hawaiian children and families as their focus with the goal of ending Hawaiian disparity in CWS. See *VII.C.1 SPC Race Equity* for more information.

Throughout the implementation phase of Family First Hawaii (FFH), one of the primary foci has been to bring culture, equity, diversity, and family voice and experience to the forefront of new initiatives, policy, and practice. CWSB continues to explore programs and services that are culturally sensitive, include programs and services with a foundation of Hawaiian values and activities that incorporated Hawaiian practices. FFH aims to safely prevent children from entering foster care by identifying and referring to programs and services that best meet each family's need. FFH has also created space for the Lived Experience Advisory Group (LEAG) composed of family leaders – resource caregivers, parent partners, and young people with lived experience. LEAG has been critical to the development of policies and procedures to promote family-centered practice and lived experience voice.

CWSB participates in multiple community collaborations regarding Native Hawaiian culture and lived-experience partners. CWSB is an active member of *Na Kama a Haloa*, a statewide collaboration of community stakeholders and CWSB. The group has had five subworkgroups, each tasked with creating critical shifts in the child welfare system by addressing ethnic disparities and disproportionality, uplifting youth and family voice, training and supporting nurturing resource caregivers, and honoring sibling connections. *Na Kama a Haloa* has implemented a Hawaiian culture-based engagement training for CWSB New Hire Training and H.A.N.A.I. Training for resource caregivers. *Na Kama a Haloa* also introduced *Ho'o A'a*, a Hawaiian values training for CWS leadership. The first cohort began in 2022, with the cohort continuing *Ho'o A'a* part 2 in 2023. *Na Kama a Haloa* has reached the end of their five-year plan in 2022 and is in the process of developing new goals and working groups for the next phase of Hawaiian culture-based work.

Another Native Hawaiian collaboration on Oahu is *Ka Pili Ohana (KPO)*. It is a collaborative Liliuokalani Trust (LT) pilot project focused on strengthening parent-child relationships during visitations with birth parents, children, resource caregiver, and CWSB. LT provides the Native Hawaiian cultural guidance to the project and participants.

Please also refer to *Section IV.A.1. Reunification Efforts - J. Ka Pili Ohana, Two Makua, Na Kama a Haloa* for additional information.

SECTION III. PROGRAMS SUPPORTING SAFETY

A. PROGRAMS AND SERVICES SUPPORTING SAFETY OUTCOMES

Child Welfare Services Branch (CWSB) strives to provide services to families at the most appropriate and least intrusive level of intervention. Family preservation and support services include, but are not limited to, individual and/or family counseling, crisis intervention, case management, parenting skills training, homebased services, and family monitoring provided through home visits by CWSB caseworkers. The nature and extent of services provided to families depends on the needs of the families and the availability of services within the community. Services are provided, at no cost to families, either directly by CWSB staff or by other social service agencies that are contracted by DHS to provide services to CWSB families. Families may also be supported through other State resources and organizations in their communities.

The following CWSB programs and services support efforts to achieve desired safety outcomes for the children and families CWSB serves:

1. Risk and Safety Assessments,
2. Differential Response System (DRS),
3. Statewide CWSB Intake Hotline,
4. Child Welfare Services Branch (CWSB),
5. Voluntary Case Management (VCM) Services,
6. Family Strengthening Services (FSS),
7. Intensive Home-Based Services (IHBS), and
8. Crisis Response.

In addition to the services above, CWSB is implementing its approved plan to address Family First Prevention Services Act, i.e. “Families First Hawaii – Keeping Families Together.” This plan expands Hawaii’s efforts to assess and manage child safety and to strengthen families so that more children can remain safely at home with their parents and relatives.

Approved Family First Hawaii (FFH) in-home services include the Homebuilders Model for intensive home-based services, Parents as Teachers, and Health Families America, which strengthen the service array that address and mitigate safety concerns and, hopefully, allow children to remain in or return to their family homes.

Intensive Home-Based Services are available on Oahu, East Hawaii Island, and West Hawaii Island. CWSB is in the process of expanding this service to Kauai and Maui to enhance the service array in these geographic locations.

As part of FFH, CWSB is discussing circumstances related to removals and what supports, services, and resources are or could be helpful to prevent removal. FFH's commitment to

monitoring short-stayers, i.e., children placed in foster care for 30 days or less, originated from data analysis conducted during FFH's planning and development phases. This analysis revealed that 54% of children in foster care during SFY 2012 fell into the short-stayer category. This prompted a reevaluation of practices regarding the necessity of removing children from their homes for such brief periods. Efforts to reduce the number of short-stayers involve identifying systemic and practice-related barriers to preventing placements and devising strategies to mitigate barriers to keeping children safely with their families. This work and focus on safety aligns with two CWSB priorities that include keeping children safely at home whenever possible and exiting children from foster care as soon as safely possible. *See Section VI.F.31 Agency Responsiveness to Community, Family First Hawaii for details on Short-Stayer Monitoring and FFH CQI Hui Short-Stayer Action Priorities aimed at addressing barriers to placement prevention.*

Through other collaborations, initiatives, and partnerships CWSB is continually working to identify services and resources to address the needs of families within their communities, including those that meet concrete needs.

CWSB continues to enhance assessment tools and procedures to support practice and achieve positive outcomes for families. Over the last year, this effort has been supported through technical assistance from the Capacity Building Center for States.

Working with parent partners has been a critical enhancement to CWSB casework. Recently, parent partners have participated in meetings to review and revise safety tools and procedures and provided valuable insights on the perspectives of families to create positive changes in engagement and practice.

Planning For the Next Five Years

CWSB's work on safety aligns with two CWSB priorities that include keeping children safely at home whenever possible and exiting children from foster care as soon as safely possible.

Through other collaborations, initiatives, and partnerships, CWSB will continue to identify services and resources to address the needs of families within their communities, including those that meet concrete needs.

During the next five years, CWSB will continue to develop and implement the safety phases of change, which include requiring a timeframe for completing safety assessments, family engagement throughout the process, activities that support in and out-of-home arrangements, and ongoing clarification of the safety framework as well as continued technical assistance from the Capacity Building Center for States.

B. CHILD MALTREATMENT REPORTS AND DISPOSITION STATEWIDE AND PERFORMANCE ASSESSMENT

The topics in this section describe a variety of cross-cutting strategies that are helping to improve practice in the areas of safety, permanency, and well-being. CWSB strives to align the various aspects of case planning in its strategies and initiatives. CWSB recognizes the importance of mapping casework practice, forms, initiatives, and system functions to highlight and achieve desired outcomes. The coordination of important casework topics in training, practice, and documentation described in the topics below are examples of CWSB's work to promote outcomes related to prevention, safety, permanency, and well-being.

This section relates to calls that are received by CWSB Statewide Intake Hotline. Data Booklet, Figure 1: Statewide Intake Hotline Calls SFYs 2019-2022 summarizes the types of calls received by the Statewide Intake Hotline for SFY 2019 through SFY 2022. "No Intervention Required" calls include requests for information and those that do not meet criteria for CWSB intervention. Adjustments are being made to information collection in this area. This data on total calls for SFY 2023 uses a different source than prior years. Data for SFY 2023 is derived from the Intake call system.

"Assigned for Intervention" calls are calls deemed appropriate for some level of intervention and are assigned to CWSB or Differential Response System (DRS), i.e., Voluntary Case Management (VCM) or Family Strengthening Services (FSS), for action. See Data Booklet, Figure 1: Statewide Intake Hotline Calls SFY 2019-2023 for details. The total number of calls received has been somewhat steady, and the number and percentage of calls assigned for intervention has increased slightly in recent years as follows: SFY 2019 - 20,425 (4,706 or 23% assigned for intervention); SFY 2020 - 21,530 (4,907 or 23% assigned for intervention); SFY 2021 - 20,348 (5,001 or 25% assigned for intervention); and SFY 2022 - 20,603 (5,975 or 29% assigned for intervention). In SFY 2023, 14,057 (5,167 or 38%) assigned for intervention. As noted above, the data source for total calls in SFY 2023 has changed. Further review may be helpful to review if this impacts the percentage of calls assigned.

The number of calls assigned for intervention has increased overtime from SFY 2019 (4,706) to SFY 2023 (5,167), with a high in SFY 2022 (5,975). Refer to Data Booklet, Figure 2: Intakes Assigned to CWSB and DRS SFYs 2019 - 2023 to review the number of cases assigned to CWSB and DRS for action from SFY 2019 through SFY 2023. Intakes assigned to CWSB have increased over the last five years, from 2,579 in SFY 2019 to 2,988 in SFY 2023, with a high of 3,328 in SFY 2022. Referrals to VCM have increased slightly, from 1,503 in SFY 2019 to 1,541 in SFY 2023 and referrals to FSS have decreased slightly from 624 in SFY 2019 to 638 in SFY 2023. The data source for SFY 2023 has changed from CWS Intake Stats at a Glance to data collected from the SHAKA system, which identifies the disposition type entered by CWSB Intake staff.

The distribution of assignments to CWSB and DRS has changed over time. See Figure 3: Percentage of Intakes Assigned to CWSB, DRS/VCM and DRS/FSS, SFY2019-2023 [Chart] for a breakdown of calls assessed as appropriate for some level of intervention by CWSB investigation, VCM, or FSS.

Over the past five years, the percentage of cases assigned to CWSB has varied. The percentage of assignments to CWSB was as follows: SFY 2019 (55%), SFY 2020 (60%), SFY 2021 (61%), SFY 2022 (56%) and SFY 2023 2,988 (58%). The percentage of assignments to VCM has also varied slightly as follows: SFY 2019 (32%), SFY 2020 (29%), SFY 2021 (28%), SFY 2022 (33%) and SFY 2023 1541 (30%). Assignments to FSS has also varied slightly over the last five years, but has remain consistent in the last three years as follows: SFY 2019 (13%), SFY 2020 (11%), SFY 2021 (11%), SFY 2022 (11%), and SFY 2023 (12%).

CWSB continues to strive for accuracy and consistency in handling intakes. The increase in assignments to CWSB may be related to a procedure clarification issued in January 2020 regarding the recording of reports on open cases. Reports of new maltreatment require a new intake. Second complainants are limited to capturing information from callers reporting additional information on an existing report. Reports on open cases that do not meet the criteria for investigation are documented as “calls of concern.”

1. Confirmed Reports

An intake is a report of a child abuse or neglect incident that has been accepted for investigation and for which a determination of abuse or neglect has been made. An intake usually refers to a family unit and may involve the alleged maltreatment of more than one child. A confirmed intake means that at least one child reported in the intake was the subject of at least one abuse type that was confirmed or substantiated. A separate and unrelated incident may result in another intake for the same family or child. Refer to Data Booklet, Figure 4: Factors Precipitating Incident for Confirmed Victims SFY 2023 and Figure 5: Intake Disposition by County SFY 2023 for county-specific data.

A victim is a child in an intake who may have been maltreated. A confirmed victim is a child whose abuse(s) has been confirmed or substantiated. Refer to Data Booklet, Figure 6: Victim Disposition by County SFY 2023 for county-specific data.

In SFY 2023, 2,482 reports were assigned to CWSB for investigation (including reports assigned directly from intake and those returned to CWSB from VCM or FSS) with a disposition. 577 of the 2,482 reports were confirmed (23%). Of the 5,073 children in these reports, 982 (19%) were confirmed as victims of child maltreatment. Note: The variance in the data in Figures 1, 2 and 5 is due to the use of different data sources. Figures 1 and 2 are based on data from the SHAKA system, which identifies the

disposition type entered by CWSB Intake staff. Figure 5 is based on data from Management Services Office, which was extracted from the CPSS database.

Once a CWSB assessment worker is assigned a case, the worker has 60 days to complete a disposition of the child abuse and neglect (CA/N) allegations. The current definitions of the two possible dispositions are explained below.

- a. Confirmed: There was reasonable cause to believe that harm or threatened harm occurred.
- b. Not Confirmed (aka Unconfirmed): There was insufficient evidence to confirm that harm or threatened harm occurred.

The percentages of the types of maltreatment have remained somewhat consistent for the past several years. The base question for determining physical abuse/neglect is: did physical abuse/neglect occur? The corresponding question for “threatened harm” is: is there a reasonably foreseeable substantial risk of harm to a child? Refer to Data Booklet, Figure 15: Statewide Confirmed Maltreatment by Type SFYs 2019 – 2023 and Figure 16: Maltreatment Type SFYs 2019 – 2023 by Percentage for details on the types of reported maltreatment that were confirmed by CWSB during this five-year period. The percentage totals add up to 100% each year, representing the most serious alleged harm per case that was confirmed in that year. In comparing one year to another, a lower percentage in one type of harm means there should be a rise in at least one other type of harm, for a total of 100%.

There was a slight variation from 2019 through 2023 in the confirmation percentage of types of maltreatment. Medical neglect and psychological neglect represent lower numbers of confirmation type and have remained fairly steady. Medical neglect: SFY 2019 (0.7%); SFY 2020 (0.4%); SFY 2021 (0%), SFY 2022 (0.9%), and (0.3%). Psychological abuse: SFY 2019 (0.8%), SFY 2020 (1.1%), SFY 2021 (0%), SFY 2022 (0.5%) and SFY 2023 (1.1%). Physical neglect has varied somewhat over time: SFY 2019 (14.1%), SFY 2020 (18.3%), SFY 2021 (21%), SFY 2022 (13.8%) and SFY 2023 (13.8%). Physical abuse has declined over time. SFY 2023 indicates an increase in percentage, however, the total number of victims in SFY 2023 at 81 is less than the prior SFY at 94: SFY 2019 (8.7%), SFY 2020 (8.6%), SFY 2021 (7%), SFY 2022 (6.8%), and SFY 2023 (8.2%). Sexual abuse remained fairly similar over the years: SFY 2019 (5.3%), SFY 2020 (6.7%), SFY 2021 (5.0%), SFY 2022 (6.3%) and SFY 2023 (4.4%). Reporting on sex trafficking in this section of the APSR started in SFY 2019 and has varied slightly: SFY 2019 (1.1%), SFY 2020 (1.4%), SFY 2021 (2%), SFY 2022 (0.7%), and SFY 2023 (0.6%). Threatened harm has also varied somewhat: SFY 2019 (69.3%), SFY 2020 (63.4%), SFY 2021 (64%), SFY 2022 (71.0%) and SFY 2023 (71.5%).

Efforts to promote and support information gathering, assessing safety and risk, understanding the needs of parents and children, applying the safety threshold, and determining disposition will be ongoing through enhancing and revising procedures, tools, job aids, and training curriculum as needed.

CWSB continues to collaborate with a variety of partners and initiatives, including Hooikaika and Family Resource Centers to strengthen communities and families, identifying and connecting families to resources, advocating for the needs of families to prevent abuse and neglect, and supporting families to thrive in their communities.

2. Number of Children in Foster Care

Please view *Figures 21-26* of the Data Booklet to assist in understanding this discussion.

Past Two Decades and the Past Five Years

Hawaii's implementation of new systems and services, ACF policy and funding changes, national social and economic events, and the global pandemic all impacted the number of children in foster care over the past two decades.

a. Hawaii's Differential Response System (DRS)

When examining the changes in the number of children in foster care each year in Hawaii, it is wise to begin at the point in the time just before Hawaii implemented its Differential Response System (DRS). As part of Hawaii's DRS, intake workers determine the possible presence of danger and the level of risk of abuse and/or neglect to a child who is the subject of a hotline report. Cases with children assessed to be at moderate or low risk of harm are diverted to contracted community service providers for response. To understand the numbers of cases assigned to DRS as well as those DRS numbers in relation to the number of cases assigned to CWS for investigation, please see *Figures 2 & 3: Intakes Assigned to CWS and DRS*.

See *Figure 22: Total Number of Children in Foster Care in Hawaii SFYs 2004-2023*, and *Figure 23: Monthly Average Number of Children in Foster Care in Hawaii SFYs 2004-2023*. From SFY 2004 to SFY 2011, there was a dramatic and steady decline in the number of children in foster care, due to Hawaii's implementation of DRS in 2005. Moderate and low risk cases were no longer being investigated by CWS and therefore there were fewer children to potentially enter foster care. It took approximately six years, from SFY 2005 to SFY 2011, for DRS to be fully implemented and embraced by staff in Hawaii. After that point, the number of children in foster care remained low in SFYs 2011 through 2014.

b. Hawaii’s Title IV-E Waiver


In 2015, Hawaii implemented its Title IV-E Waiver Demonstration Project whose activities focused on reduction of children in care. Unfortunately, despite the introduction of these new services, following national trends, the numbers of children in foster care began to rise in SFY 2015, and continued to slowly climb in SFYs 2016 and 2017. Based on data from the Title IV-E Waiver Demonstration Project, Hawaii hypothesizes that the number of children in foster care would have risen much higher and faster than it did, if Hawaii had not implemented the Waiver services, especially Intensive Home-Based Services (IHBS) and the Crisis Response Team (CRT), which proved particularly successful in safely keeping children out of foster care.

The number of children in foster care remained relatively steady in SFYs 2017 – SFY 2020, with an encouraging descending trend in the past five years. Hawaii’s Waiver Demonstration Project ended in 2019, but three of the four services/programs that began during the Waiver continued – IHBS, CRT, and Family Wrap Hawaii. The one Waiver Demonstration project service that did not continue, Safety, Permanency, and Wellbeing Roundtables (SPAW), was modified and downsized into a different form becoming case staffings. CWSB wanted to ensure that it would maintain the progress made during the Title IV-E Waiver Demonstration Project period of improving its service array to keep children safely out of foster care and return achieve permanency timely.

c. Global Pandemic, Increase in Potential Victims, and Decrease in Confirmation Rate

When viewing *Figure 22: Total Number of Children in Foster Care in Hawaii SFYs 2004-2023*, one can see the incremental rise starting in SFY 2014 and ending in SFY 2019, with the numbers of children in foster care starting to drop again in SFYs 2020, 2021, and 2022. CWSB is pleased that this upsurge has appeared to have leveled off and has begun to decline. Considering the intense and continuing negative effects of the pandemic causing additional stress on families, Hawaii anticipated an increase in cases, both new families and previously CWS involved families with new incidents, in the next few years. There is another reason that Hawaii is not optimistic that this downward trend will continue. There has been an increase in cases and potential victims coming to the statewide Child Abuse and Neglect Reporting Hotline that are being referred to CWS for investigation. See the CWS row of *Figure 2: Intakes Assigned to CWSB and DRS SFYs 2019 – 2023*, and the green bars in *Figure 7: Statewide Intakes by Victim Count Assigned for CWSB Investigation and Confirmation Rate SFYs 2019-2023*. This increase began before the pandemic, but may have been

exacerbated by it. In looking at the bottom row in *Figure 8: Report Sources of Total Reported Intakes with Disposition in SFYs 2018 – 2022*, when comparing the total reported intakes with dispositions, one can see the increase over the past five years. It is important to keep in mind that these large increases in victims to be investigated by CWS and in case dispositions by CWS assessment workers has not corresponded with an increase in staff to take on this work. On the contrary, Hawaii CWS has fewer caseworkers now than it has had in more than a decade.

Although there has been a significant increase in cases and potential child victims assigned for CWS investigation, due to the continued reduction in confirmation rate, please see the blue line  which graphs this decline in *Figure 7: Statewide Intakes by Victim Count Assigned for CWS Investigation and Confirmation Rate SFYs 2019-2023*. The decrease in confirmation rate is far more dramatic, when looking back a little further. In SFY 2016, the confirmation rate was 40%. Every SFY since 2016, the confirmation rate has dropped an additional 2%-4%, ending with a confirmation rate of 19% in SFY 2023, which is the lowest rate in at least eight years. The reason for the decrease in confirmation rate remains unclear; Hawaii is investigating theories involving:

- i. changes in sources of report of potential harm,
- ii. modifications to assessment trainings and tools,
- iii. staffing patterns and vacancies,
- iv. increased supervision,
- v. CWSB leadership focus on reducing inequities,
- vi. enhanced Hawaiian cultural trainings,
- vii. clearer guidance to staff regarding how to assess and support low-income families, and
- viii. Impacts of CWS staff training on implicit bias.

d. Description of Recent Trends

See Data Booklet, *Figure 24: Percentage Change of Children in Foster Care*. From SFY 2022 to SFY 2023, there has been a 15.6% decrease in total annual number of children in foster care from 2,322 children in foster care to 1,959 children in foster care, and an 12.9% decrease in the monthly average number of children in foster care from 1,407 children in foster care to 1,225 children in foster care. SFY 2023 is the fourth year in a row where both the total number of children in foster care and the monthly average have decreased when compared to the prior year. Prior to SFY 2020, this hadn't happened since SFY 2012. Data from the beginning of SFY 2024 indicates that the monthly average number of children in foster care is continuing to decline. A graph of the past five years total annual number of children in foster care and the numbers of children that

entered and exited care for those years can be found in *Figure 21: Statewide Children in Foster Care, Entries, and Exits – SFYs 2019-2023*.

Data Booklet *Figure 26: Number & Percentage Change in Foster Care by Geographic Area SFYs 2019 to 2023* shows the number of children in foster care across regions over the same five year period, SFYs 2019 – 2023. The number of children in foster care for each year, statewide and in each geographic region is provided, along with the number and percentage rise over these five years. The percentages in this figure compare each region to itself, e.g., when comparing West Hawaii’s numbers in SFY 2019 to West Hawaii’s numbers in SFY 2023, there is a decrease of 49.3%. The greatest percentage change statewide for children in foster care can be seen in West Hawaii, with the largest numeric decrease on Oahu. The most modest change can be seen on Kauai, which is also the only region with an overall increase during these past five years, increasing by only four children in foster care (or 2.9%). During this five-year period, there was a statewide 29.6% decrease of the total number of children in foster care.

In the decade from SFY 2004 to SFY 2013, Hawaii’s total number of children in foster care had dropped by 60% from 5,207 children in foster care to 2,099 children in foster care due to DRS implementation. In the 33% increase from SFY 2013 (2,099 children in foster care) – SFY 2019 (2,784 children in foster care), Hawaii did not approach the elevated levels of the 2000s. See *Figure 22: Total Number of Children in Foster Care in Hawaii SFYs 2004-2023*. During the five-year period of SFY 2019 - 2023, there was a statewide 29.6% decrease of the total number of children in foster care. This most recent decrease has brought the total number of children in foster care in one year in Hawaii to the lowest it has been in over two decades. As noted above, Hawaii is relieved that the number of children in foster care has been declining, but CWSB is not confident that this number will continue to decline.

e. Family First Hawaii

Hawaii has been working on strategies to safely reduce the number of children in foster care, most notably through Family First Hawaii. After years of planning, Hawaii implemented Family First Hawaii (FFH), Hawaii’s enactment of the federal Families First Prevention and Services Act (FFPSA), on October 1, 2021 with its Intensive Home-Based Services (IHBS) on Oahu and Hawaii Island. IHBS uses the Homebuilders evidence-based model. On March 1, 2022, Hawaii added statewide Home Visiting Services to FFH, using the Parents As Teachers (PAT) and Healthy families America (HFA) evidence-based models. CWSB has been partnering with a range of State agencies and community social service agencies to implement FFH, which are listed below.

- i. Office of Youth Services
- ii. Department of Health (DOH), Maternal and Child Health Branch;
- iii. DOH Child and Adolescent Mental Health Division
- iv. DOH, Alcohol and Drug Abuse Division
- v. University of Hawaii (UH), Center on the Family
- vi. Family Court
- vii. Child and Family Service
- viii. Catholic Charities Hawaii
- ix. Parents and Children Together
- x. EPIC Ohana
- xi. Family Programs Hawaii
- xii. Sounding Joy
- xiii. Bobby Benson Center
- xiv. Salvation Army
- xv. A Family Tree (formerly known as Hawaii International Child)
- xvi. Healthy Mothers Healthy Babies Hawaii
- xvii. SAS Services
- xviii. Liliuokalani Trust

For more information on FFH, please see *Section VII.C.5. FFPSA Family First Hawaii* of this report.

Planning for the Next Five Years

As noted above, Hawaii is relieved that the number of children in foster care been declining, but CWSB is not confident that this number will continue to decline.

Hawaii CWSB is committed to:

- i. strengthening families and communities to safely care for their children;
- ii. keeping children safely out of foster care;
- iii. partnering with families to make decisions about children’s wellbeing and living arrangements;
- iv. creatively engaging extended families to care for children;
- v. exploring the resources of families and communities to support children’s safety and wellbeing;
- vi. maintaining regular connections with family and community, even when child is in foster care;
- vii. examining the child welfare system to identify and rectify problems;
- viii. identifying and eliminating bias within the child welfare system;
- ix. making data-based decisions; and

- x. using human and technological resources in creative and intelligent ways.

With these commitments, CWSB anticipates changes in the next five years that may not always result in reductions in the number of children in foster care but will work towards ensuring that the children in foster care are only the ones who truly need to be there.

3. General Safety

a. CFSR Safety Outcome 1

Children are first and foremost protected from abuse and neglect.

Refer to the 2024 Hawaii APSR Data Booklet, CFSR Items, Figure C1 Timeliness of initiating investigations of reports of child maltreatment for a chart of the SFY 2019-2023 five-year strength rating for this item.

CFSR Item 1: Timeliness of Initial Response of Investigations

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

42 Cases Reviewed

30 STRENGTHS, 12 AREAS NEEDING IMPROVEMENT

Purpose

This item is assessed for timely face-to-face contact with children who are reported as alleged victims of abuse and/or neglect or subjects of the reports during the period under review (PUR).

Summary

In 30 of 42 applicable cases (71%), response timeframes were met or sufficient efforts were made for contact. Responses were timely in 25 cases.

In five cases that were not timely, there were reasons for delays that were beyond the control of the agency.

Reports were assigned timely from the Intake units and to investigators in the units. Efforts were well-documented in most of these cases in CPSS and/or SHAKA.

12 cases (29%) were rated as needing improvement. The investigation or assessment was not initiated timely, and/or contact with the children was not made in accordance with State timeframes.

- In three cases, there was limited documentation as to efforts and the reason for the delay.
 - In two of these cases, the investigation was not initiated.
 - In one of these cases, face-to-face contact was not made with all children named in the report.
- In two cases, there were delays in the assignment of the courtesy worker.
- In two cases requiring contact within two business days, face-to-face contact was made on day three and day five.
- In five VCM cases, efforts were not evident.
 - In three of these cases, there were delays in face-to-face contact attempts due to scheduling and provider agency conflict of interest.
 - In two of these cases, the youth was in a mental health facility and the agency reported the protocol is to wait until the youth is discharged to make face-to-face contact.

Discussion

Over the past five years, CWSB has improved in this item from 59% in SFY 2019 to 71% in SFY 2023 with a high of 86% in SFY 2022.

Caseworkers and sections use the SHAKA tracker data as a tool to monitor timely response. Timely response to reports continues to be discussed at monthly branch meetings with section administrators to identify strategies that support contact as well as opportunities for improvement.

Discussions on timely response also occur at each section's and VCM's annual case review debrief meeting. This provides an opportunity to review practice, clarify procedures, and brainstorm solutions to achieve contact.

Planning for the Next Five Years

CWSB may review procedures to determine if revisions or clarifications are needed. CWSB will continue to track and monitor timely response to ensure that timely face-to-face contact is made with children who are reported as alleged victims of abuse and/or neglect or subjects. CWSB will also focus on enhancing the workforce to support workers and recruitment and retention.

4. Safety in Child's Home

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

Refer to the 2025 Hawaii APSR Data Booklet, Figure C2: Item 2 for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

48 Cases Reviewed

32 STRENGTHS, 16 AREAS NEEDING IMPROVEMENT

Purpose

This item is assessed for concerted efforts made to provide services to maintain the children safely in the home and to prevent children's entry into foster care or re-entry after reunification.

Summary

In 32 of 48 applicable cases (67%), concerted efforts were made to provide services to maintain children safely in the home and to prevent children's entry or re-entry into foster care, or a child in the family was removed without services because it was necessary to ensure their safety.

- In 19 cases, services were provided and the child(ren) was not removed.
- In six cases, services were provided and child(ren) was removed because of unmitigated safety concerns.
- In seven cases, services were not provided and the child(ren) was removed because this action was necessary to ensure safety.

16 cases (33%) were rated as needing improvement. In these cases, irregular caseworker visits with families and a lack of thorough assessments were factors in not ensuring that appropriate safety-related services were identified.

- In nine cases, concerted efforts were not made to provide appropriate safety-related services and the children remained in the home.
- In seven cases, removal may have been prevented, but safety services were not offered or explored.

Discussion

Hawaii has made significant progress over the last five years in this item, increasing from 31% in SFY 2019 to 67% in SFY 2023, with a high of 82% in SFY 2022.

Regular visits are necessary to complete safety assessments to determine if appropriate services are needed. When contact is not made regularly, it is challenging to assess for safety concerns and provide necessary services to prevent removal. Caseworkers continue to make efforts to respond, engage families, and to assess, plan, and monitor child safety. Family First Hawaii activities and meetings allow for regular discussion on preventing removals and identifying practice, opportunities for partnership with other systems, and resources needed to keep children safely at home or reunify as quickly as possible. Matching services to needs is also important to ensure safety. Focusing on regular visits, matching services to needs, and identifying services/resources available may help improve in this item. Intensive Home-Based Services (IHBS) using the Homebuilders model continues to be a service that supports maintaining children in the home and reunification, when appropriate.

Safety

CWSB continues to enhance assessment tools and procedures to support practice and achieve positive outcomes for families. Over the last year, this effort has been assisted through technical assistance from the Capacity Building Center for States. Revisions to the Child Safety Assessment tool will be implemented in phases. The first phase will add a minimum timeframe of six months to conduct assessments, add an “Other” category, and enhance incorporation of the family voice and perspectives in assessing and managing safety. Hawaii believes that requiring completion of the Child Safety Assessment tool at specified timeframes and circumstances may focus workers on reunifying families more safely and quickly. Completion of the revised Child Safety Assessment tool will also be integrated into the Family First Hawaii eligibility determination and redetermination processes.

Parent Partners have been a critical addition to the process of enhancing practice in different areas. Recently, parent partners have participated in meetings to review and revise safety tools and procedures and provide valuable insight on the experience and perspective of families to create positive change in engagement and practice.

In addition, representatives from the Equity Improvement Collaborative also provided valuable feedback on the revisions.

Future phases will align the work of the Family Supported Arrangements workgroup that is providing clarification on partnering with and supporting families through a variety of arrangements including in-home and out-of-home activities to support child safety.

Information on the planned phases of change have been shared at the branch meeting with section administrators and with all supervisors at the Management Leadership Team meeting to provide updates and obtain feedback. Drafts are shared with the Case

Pathways workgroup that includes caseworkers, supervisors, section administrators, Staff Development trainers, and the SHAKA team that provides support for the data system. As part of CWSB's implementation process, draft changes are shared with all workers for review and feedback for final draft development and implementation.

Training will be provided on each phase. Parent Partners will be involved in the curriculum development and possibly part of the delivery to provide their expertise on how to enhance practice with families.

Planning for the Next Five Years

CWSB will continue to review and enhance its work on safety in collaboration with families and partners and through technical assistance with the Center for States. In the next years, CWSB will continue working to develop and implement the phases of change that include the timeframe for completion of safety assessments, family engagement throughout the process, activities that support in and out-of-home arrangements, and ongoing clarification on the safety framework.

FAMILY FIRST HAWAII

Summary of the Past Five Years

Family First Hawaii (FFH) is focused on maintaining children safely with their families through evidence-based preventative services. During its planning and development phase, FFH established candidacy and eligibility criteria to guide staff in appropriately identifying FFH-eligible children and referring families to FFH services. These criteria encompass four categories of FFH candidates: child welfare-involved families with children who are able to remain safely at home with services; children and families in Voluntary Case Management (VCM) services; children and families in Permanency Strengthening Services (PSS) who are at risk of adoptive or legal guardianship placement disruption; and Expectant and Parenting Young People (EPYP).

To ensure effective prevention services, four evidence-based practices were selected based on robust data analysis during the FFH planning and development phases. Three interventions (Homebuilders, Parents As Teachers, and Healthy Families America) primarily focus on in-home parenting support services based on data analysis showing a significant need in this area. The fourth evidence-based service, Motivational Interviewing (MI), was selected to address substance use, which was identified as a major precipitating factor for child removal. As MI is commonly used by substance use service providers, the practice change under FFH pertains solely to billing and reimbursement procedures for substance use treatment providers. Development and implementation of the MI pathway is projected for the latter part of 2025 or early 2026.

Implementation of FFH services and candidacy pathways began with the Homebuilders model for Intensive Home-Based Services (IHBS) in October 2021, followed by Home Visiting Services (Parents As Teachers and Healthy Families America models) in March 2022, and procedures for Expectant and Parenting Young People in Foster Care in March 2023. Implementation for EPYP in Extended Foster Care is in progress, with plans to expand services to the VCM and PSS candidacy groups once infrastructure is in place. Although pathways for each FFH candidacy group and services are at varying stages of development and implementation, current data shows promising outcomes, with a significant 21% decrease of children in foster care from July 2022 to June 2023 (Source: SFY 2023 CPSS All in Care Reports).

Annual Update

Expanding Intensive Home-Based Services. IHBS: Homebuilders Model has the highest evidence-based rating of “well supported,” and is the most intensive level of service provided by CWSB in that service delivery is available 24 hours a day, 7 days a week, with families expected to engage for approximately 10 hours or more per week. Services are time-limited, typically lasting four to six weeks, and are tailored to individual family needs, goals, values, and capacities. This service also goes beyond therapy to provide concrete supports. IHBS serves as a crucial “last resort” intervention, especially when a child is at imminent risk of removal from their home. If IHBS is not accessible in such circumstances, CWSB will be compelled to place the child in foster care to ensure safety of the child.

IHBS is currently available on Oahu, Hawaii island, Maui, and Kauai; however, services have not begun because, while IHBS contracts were awarded to service providers on Maui and Kauai in July 2022, the provider agencies encountered challenges in staff recruitment due to stringent experience requirements and a limited pool of candidates. CWSB is working with the provider agencies on Maui and Kauai to identify barriers to hiring staff as well as brainstorming possible solutions to address these barriers. Maui and Kauai sections eagerly anticipate the rollout of IHBS on their islands as they are aware of the benefits of this service and the positive outcomes that were seen from the Title IV-E Waiver demonstration project.

Family Supported Arrangements Continuum. The Placement Prevention Project was initiated in 2023 to provide staff with comprehensive guidance in facilitating informal arrangements with families to prevent children from entering foster care while keeping them safely with their families. Guidance included establishing clear protocols to ensure the safety and well-being of children during these arrangements, while also offering support to the families involved. The project has several key objectives:

1. Enhancing case practice and documentation to ensure that staff make reasonable efforts.
2. Conducting monthly reviews of short-stayer data to identify barriers to placement prevention and finding solutions and support resources.
3. Identifying and utilizing existing community and state-based services as alternatives to removal.
4. Collaborating with the Lived Experience Advisory Group (LEAG) to incorporate their expertise in family engagement, particularly in involving extended family, friends, and other natural supports.
5. Prioritizing efforts to engage fathers, including establishing a father support network and creating father Parent Partners.

The project's scope necessitated breaking efforts into manageable segments, which evolved to encompass placement prevention to foster custody, and eventually led to the project being renamed Family Supported Arrangements Continuum (FSAC). The FSAC workgroup formed three subcommittees: Definitions, Safety Plan (now Protective Plan), and Decision Tree.

The Definitions subcommittee established definitions for placement options, assessment tools, and legal statuses. The Decision Tree subcommittee is developing a visual graphic to aid staff in placement decisions, and the Protective Plan subcommittee is revising safety planning documents to focus on family strengths and family engagement. Once completed, CWSB believes that this comprehensive guide will significantly enhance the capacity of staff to effectively keep children and families safely together.

Short-Stayer Initiatives. FFH leadership prioritized monitoring and intervention strategies to curb short-term foster care placements of children, defined as “short-stayers” (children placed in foster care for 30 days or less). This focus on reducing short-stayers emphasizes the priority CWSB places on continuously evaluating the necessity of short-term removals of children from their homes, especially for brief periods, e.g., five days or less.

To achieve the overarching goal of reducing short-stayer placements, a multifaceted approach was adopted. This included conducting a targeted CQI review to identify the primary causes for short-stayer placements; quarterly CWS reporting in FFH Implementation Management Team (IMT) meetings to identify and address systemic and practice-related barriers to family preservation; and the development of the FFH CQI Hui Short-Stayer Action Priorities through CQI processes.

These action priorities encompassed various measures, such as enhancing recruitment efforts for IHBS staff in Maui and Kauai, educating judges and court personnel on the

ramifications of mutual parental Temporary Restraining Orders, equipping CWS personnel with effective engagement strategies for parents in challenging circumstances, and developing working agreements with local law enforcement to ensure timely access to parents who are arrested. *Please refer to Section VI.F.31 Agency Responsiveness to Community, Family First Hawaii for detailed information on these short-stayer initiatives.*

Planning for the Next Five Years

Family Supported Arrangements Continuum. The hope is to fully implement the Family Supported Arrangements Continuum, which will serve as a comprehensive framework to guide staff in critical aspects of safety assessment and planning for child welfare-involved children and families. This continuum represents a strategic effort to ensure that staff are equipped with the necessary tools and guidelines to effectively assess safety and to develop individualized plans with families to address identified safety factors. By providing clear and comprehensive guidance across key areas of safety assessment and planning, the Family Supported Arrangements Continuum aims to enhance the quality and consistency of child welfare practice and service delivery for children and families involved in the child welfare system.

Short-Stayer Initiatives. FFH leadership is committed to continuing to monitor short-stayer placements and trends while striving for full implementation of Short-Stayer Action Priorities. FFH aims to achieve meaningful and sustainable improvements in mitigating child removals. This goal underscores FFH's proactive approach to enhance child safety and family preservation in the child welfare system.

Full implementation of Family First Hawaii. FFH leadership strives to achieve full implementation of all FFH services and candidacy groups within the next five years. This goal underscores a commitment to providing comprehensive support and resources to all FFH eligible children and families. By ensuring the availability and accessibility of FFH services across relevant sectors, FFH aims to enhance outcomes for children, families, and communities. This goal reflects a proactive approach to continuously improving and expanding services to meet the evolving needs of those served by the child welfare system.

Item 3: Safety & risk assessment and management

Refer to the 2025 Hawaii APSR Data Booklet, Figure C3: Item 3 for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

95 Cases Reviewed
48 STRENGTHS, 47 AREAS NEEDING IMPROVEMENT

Purpose

This item is assessed to determine whether concerted efforts were made to assess and address risk and safety for children in their own homes or while in foster care.

SUMMARY

In 48 of 95 applicable cases (51%), concerted efforts were made to assess and address risk and safety for children. Monthly or almost monthly face-to-face contact occurred, and thorough assessments were conducted. Formal safety assessment tools were completed, and safety plans were developed and monitored.

- Of the 37 cases opened during the period under review (PUR), the agency conducted an initial assessment that accurately assessed all risk and safety concerns in 30 cases (81%).
- Of the 93 cases that required ongoing risk and safety assessments, the agency accurately assessed all risk and safety concerns in 49 cases (53%).
- In 12 cases that required a safety plan, those safety plans were developed and monitored in five cases (42%).

47 cases (49%) were rated as needing improvement. Irregular monthly caseworker visits, including consecutive missed months of caseworker visits with families, significantly contributed to the lack of ongoing assessments. Assessments were not conducted at critical junctures, such as reunification, removal, and case closure. In addition, caseworkers did not conduct visits in the home and make efforts to see children alone.

- In seven cases, the agency did not conduct an initial assessment that accurately assessed all risk and safety concerns.
- In 44 cases, ongoing assessments were not conducted to accurately assess all risk and safety concerns.
- In five cases, there were maltreatment allegations that were not substantiated despite evidence.
- In three cases, when there were known concerns about safety and risk both in the family home and in foster care, sufficient action was not taken to address those concerns.
- In seven cases, safety plans were not monitored.

Discussion

CWSB has made significant progress over the last five years in this item, increasing from 36% in SFY 2019 to 51% in SFY 2023, with a high of 63% in SFY 2022.

Regular visits are necessary to complete initial and ongoing safety assessments to determine if appropriate services are needed and being monitored. When contact is not made regularly, it is challenging to assess for safety concerns, to provide necessary services to prevent removal, and to monitor child safety.

Caseworkers continue to make efforts to respond, engage families, and to assess, plan, and monitor child safety. Family First Hawaii activities and meetings allow for regular discussion on developing safety plans to prevent removals and to identify practice, opportunities for partnership with other systems, and resources needed to keep children safely at home or to reunify as quickly as possible.

Frequent and quality contact, engagement of relatives, engaging children and parents in case planning to develop and monitor safety plans, and quality relationships of the caseworker with the children, parents, and resource caregiver are sustained through additional forms of communication, including texts.

In general, workers are completing initial assessments that are accurate as noted in 81% of the cases reviewed. In some cases, initial assessments are not completed or may not be completed accurately or all family members were not assessed initially.

Ongoing assessments may not be completed when visits are not conducted regularly and at critical times, such as reunification and case closure, to assess safety and risk. Ongoing support and training for workers and supervisors continues, as well as efforts to clarify safety assessment and planning in practice.

Safety

CWSB continues to enhance assessment tools and procedures to support practice and achieve positive outcomes for families. Over the last year, this effort has been supported through technical assistance from the Capacity Building Center for States. Revisions to the Child Safety Assessment will be implemented in phases. The first phase will add a minimum timeframe of six months to conduct assessments, add an "Other" category, and enhance incorporation of the family voice and perspectives in assessing and managing safety. Completion of the Child Safety Assessment will also be integrated in the Family First Hawaii eligibility process.

Parent partners have been a critical addition to the process of enhancing practice in different areas. Recently, parent partners have participated in meetings to review and revise safety tools and procedures and provide valuable insight on the experience and perspective of families to create positive change in engagement and practice.

In addition, representatives from the Equity Improvement Collaborative provided valuable feedback on the revisions.

Future phases will align the work of the Family Supported Arrangements workgroup that is providing clarification on partnering with and supporting families through a variety of arrangements, including in-home and out-of-home activities to support child safety.

Information on the planned phases of change have been shared at a Branch meeting with Section Administrators and with all supervisors at a Management Leadership Team meeting to provide updates and obtain feedback. Drafts are shared with the Case Pathways workgroup, which includes caseworkers, supervisors, section administrators, Staff Development trainers, and the SHAKA team that provides support for the data system. As part of CWSB's implementation process, draft changes are shared with all workers for review and feedback before final draft development and implementation.

Training will be provided on each phase. Parent partners will be involved in curriculum development and, possibly, as part of delivery to provide their expertise on how to enhance practice with families.

Planning for the Next Five Years

CWSB will continue to support monthly contact with parents and children and to review and enhance its work on safety in collaboration with families and partners and the Center for States. In the next years, CWSB will continue to develop and implement the phases of change that include a timeframe for completion of safety assessments, family engagement throughout the process, activities that support in and out-of-home arrangements, and ongoing clarification on the safety framework.

5. Safety in Foster Care

National Standard for Safety Outcome 1

Of all children served in foster care, what percent were not victims of a substantiated or indicated maltreatment by a resource caregiver or facility staff member during the fiscal year?

Annual Update

At the rate of 99.5% in SFY 2023, CWSB is just below the national standard of 99.7%. Refer to the Data Booklet, Figure 50: Absence of Maltreatment in Foster Care for a chart of the SFY 2019 – SFY 2023 rates.

Discussion

Continued monitoring of data for CFSR reviews indicates that the frequency of face-to-face contact with children is improving. Face-to-face contact may help caseworkers

continually assess the safety of children in family homes and in resource homes. Face-to-face visits with children has improved from a strength rating of 49% in SFY 2021 to 67% in SFY 2022. Assessing needs and services for children also improved from a strength rating of 71% in SFY 2021 to 78% in SFY 2022. Increased worker contacts, assessment of needs, and the provision of services and supports for children may help strengthen the safety and stability of children in foster care.

Supports and training for resource caregivers also helps to maintain child safety in foster care. CWSB continues to review and revise procedures and enhance practice to ensure child safety in foster care.

Procedures have been revised and issued recently to support assessing convictions and history concerns to determine suitability of resource caregivers.

The licensing web portal module for general licensed resource caregiver applicants was launched in July 2021. This creates an electronic processing and storage system for applications. Applicants have the ability and responsibility to submit information through the licensing portal to initiate and participate in the application process. Workers, providers, and applicants can upload information in one consolidated location to streamline and expedite the process. This helps to address some barriers to delays in the licensing process. For example, references are now requested and processed through the licensing portal instead of via mail. The portal facilitates completing the licensure process within 90 days. Following implementation of this module for general licensed resource caregivers, a licensing web portal module was launched in October 2022 for child specific resource caregivers. At the same time, a renewal module was also launched for all unconditionally licensed resource caregivers.

Home Visiting Services for children ages 0-5 are included in the Family First Hawaii service array and are available to families with children in the home and in foster care. This service is available to parents as well as resource caregivers to promote consistency of care for the child and, if provided to resource caregiver and parents concurrently, potentially strengthen the relationship of the resource caregiver and parent.

Guidance was issued on safe sleep and certified play yards to promote a temporary safe space for sleep. In the process, CWSB collaborated with the Department of Health to qualify resource caregivers to receive certified play yards for children in foster care in their homes.

Revamped Pre-service HANA I training for all resource caregivers was revised in July 2022. The training requirements increased from 18 hours to 27 hours over a two-year

time span. In addition, ongoing training requirements also increased from six hours per licensed individual or couple to 13 hours per licensed resource caregiver.

Combined efforts of visiting, engaging, and addressing the needs of children with supports and training for resource caregivers enhances the effort to address child safety in foster care.

Section IV. PROGRAMS SUPPORTING PERMANENCY

A. PROGRAM AND SERVICE DESCRIPTION

Hawaii is committed to providing a variety of strategies and services that support CWSB's goal of timely permanency for children. Permanency goals are identified early and a variety of strategies and services are employed to appropriately identify permanency goals and achieve permanency timely. Permanency includes reunification, adoption, legal guardianship, and Another Planned Permanent Living Arrangement (APPLA).

Hawaii continues its strong collaboration with stakeholders, community partners, CWSB staff, and lived experience persons, to advance planning, development, training and implementation of strategies and services to enable children to achieve timely permanency goals.

Hawaii has continued to engage its partners in utilizing several permanency approaches, which were included in its CFSR Program Improvement Plan (PIP3), to support CWSB's permanency work. In September 2022, Hawaii successfully completed its CFSR PIP3. Hawaii continues to track and monitor its permanency outcomes to ensure positive outcomes in the area of permanency. CWSB continuously reviews outcomes and practice and makes strategic improvements to achieve cross-cutting outcomes in the areas of safety, permanency, and well-being. Some examples of strategies and services that support permanency are discussed below.

1. Reunification Efforts

a. Safety and Risk Assessment Tools

CWSB caseworkers utilize safety and risk assessment tools to assess child safety and develop safety plans when appropriate to mitigate safety concerns, prevent removals, and maintain child safety in the family home whenever possible. Ongoing assessment promotes a thoughtful, planned, timely, and safe return home.

CWSB continues to enhance assessment tools and procedures to support practice and achieve positive outcomes for families. Over the last year, this effort has been assisted through technical assistance from the Capacity Building Center for States. Revisions to the Child Safety Assessment tool will be implemented in phases. The first phase will add a minimum timeframe of six months to conduct assessments, add an "Other" category, and enhance incorporation of the family voice and perspectives in assessing and managing safety. Hawaii believes that requiring completion of the Child Safety Assessment tool within specified timeframes and circumstances may focus workers on reunifying families more safely and quickly. Completion of the revised Child Safety Assessment tool will also be integrated into the Family First Hawaii eligibility determination and redetermination processes.

Parent Partners have enhanced CWSB practice in several areas. Recently, Parent Partners have participated in workgroups to review and revise safety tools and procedures and provide insight on the experience and perspectives of families. This participation is creating positive changes in how CWSB workers engage families. Improved engagement includes utilizing strategies for working collaboratively with families in the safety assessment process and ensuring families understand all phases and actions in a case. Hawaii imagines that this more concentrated involvement of families in determining the path of their own cases may enhance efforts to achieve reunification.

In addition to parent partners, representatives from the Equity Improvement Collaborative also provided valuable feedback on revisions to ensure family safety is assessed through an equity lens.

Future phases of revisions to the Child Safety Assessment tool will align with the work of the Family-Supported Arrangements Continuum workgroup. This workgroup provides clarification on partnering with and supporting families in a variety of placement settings and family arrangements, including both in-home and out-of-home settings, to support child safety.

Information on the planned phases of change have been shared at a CWS Branch meeting with section administrators and with all supervisors at a Management Leadership Team meeting to obtain feedback. Drafts have been shared with the Case Pathways workgroup, which includes caseworkers, supervisors, section administrators, staff development trainers, and the SHAKA team, which provides support for CWSB's data system. As part of CWSB's implementation process, draft changes are shared with all workers for review and feedback before final draft development and implementation.

Training will be provided on each phase. Parent partners will be involved in curriculum development and, possibly, as part of implementation, to provide their expertise on how to enhance practice with families.

Planning For Next Five Years

CWSB will continue to support monthly contact with parents and children and review and enhance its work on safety in collaboration with families and partners and through technical assistance from the Capacity Building Center for States. In the next years, CWSB will continue to develop and implement the phases of change, which include the timeframe for completion of safety assessments, family engagement throughout the process, activities that support in and out-of-home arrangements, and ongoing clarification on the safety framework.

b. Crisis Response Team

The Crisis Response Team (CRT), initiated as part of Hawaii’s Title IV-E Waiver, continues its work on Oahu and Hawaii Island to provide a rapid response to situations where placement may be imminent and to employ creative strategies to prevent foster care placement whenever safely possible.

CRT members share their experiences in different settings to promote learning regarding positive practices and to identify opportunities to enhance collaboration and services that may prevent removal whenever safely possible.

Planning For the Next Five Years

The Crisis Response Team on Oahu and Hawaii Island will continue to provide response, assessment, and safety planning to prevent entry into and promote collaboration with families and partners to support families and maintain child safety. Representatives will continue to participate in workgroups to enhance practice.

c. Intensive Home-Based Services

As part of the Comprehensive Counseling and Support Services (CCSS) contract, CWSB continues to provide Intensive Home-Based Services using the well-supported evidence-based Homebuilders Model, which assists with safety planning and management. CCSS is funded through the Monthly Case Worker Visit formula grant. Service activities include assessment, referral, counseling, crisis intervention, parenting education, therapy, home-based services, and outreach to families that are at risk for child abuse and/or neglect. These services are available on Oahu, East Hawaii Island, and West Hawaii Island. The expansion of this service to Kauai and Maui Island is still in process as providers work to develop its workforce.

Additionally, IHBS is also available to provide intensive support, when needed, to reunify children with their families or as an effort to stabilize a foster care placement.

Planning For the Next Five Years

IHBS will continue to be a core service in the CWSB service array. Efforts will continue to initiate the service on Kauai and Maui.

d. WRAP

Wraparound – Family Wrap Hawaii, a Title IV-E Waiver service, continues to be available on Oahu and Hawaii Island. Family Wrap Hawaii works with families whose needs are the most complex and who are experiencing multiple barriers to achieving identified goals, often with only limited time remaining in the legal timeline. A defining feature of the Wraparound process is the unconditional support provided by the team. If the initial plan is not achieving desired outcomes, the team gathers to rethink the configuration of supports, services, and interventions to enhance success. The program has been instrumental in connecting families to community resources that meet their concrete and individual needs, identifying solutions to barriers, and expanding and enhancing families’ relationships and natural supports. Connections are individualized based on the specific and unique needs of each family. Services are provided both virtually and in-person.

Family Wrap Hawaii also continues to serve families to prevent entry into foster care, promote reunification, and support children and families to achieve other permanency goals.

Parent partners provide an important supportive service to parents who are participating in the Wraparound process. They also provide a key perspective to improve systems and practice. Parent partners have valuable lived experience with CWSB and/or other systems and provide specialized support to parents in a variety of ways, including enhancing parent voice in case planning, which is essential to promote engagement and positive outcomes. Parent partners have joined new CWSB workgroups, including the Family Supported Arrangements and Safety workgroups, to help lead and inform practice and system change.

Planning For the Next Five Years

Wraparound is planned to be a continuing service in the CWSB service array to support families through innovative and collaborative individualized planning. Parent partners will continue to be a key service provided to families involved in Wraparound, and potentially for other families not currently receiving Wraparound, to increase engagement and support.

e. Ohana Conferencing

Background

Ohana Conferencing (OC) is provided for all children in foster care. When a child is placed in foster care, an automatic referral is made to the contracted agency to arrange an OC for identified family members to discuss required services and to

expedite family finding efforts, especially if the child is placed with non-relatives. Timely automatic referrals have helped move cases faster and support early identification of relatives who may serve as placement resources or added support for the family. DHS successfully completed a PIP3 activity to routinely hold quarterly OCs to ensure family engagement, hear the family voice, participate in family decision-making, and progress in family planning.

Summary of Past Five Years (2020-2024)

Since SFY 2019, the number of OCs have continued to decline from 1,290 in SFY 2021, to 1,215 in SFY 2022 and most recently 1,000 in SFY2023. The initial decrease in the number of OCs coincided with court hearings, services, and other activities returning to in-person participation after COVID-19 was no longer declared a worldwide pandemic and restrictions eased, making it more challenging for social workers and families to schedule OCs. When court hearings and OCs were virtual, social workers were able to attend back-to-back virtual meetings more easily. EPIC Ohana, CWSB's contracted provider for OCs, anticipated this effect on the number of OCs being held. The continued decline in OCs may correspond with the ongoing decrease in the number of children coming into foster care and the multiple collaborative efforts through Hawaii's PIP3 strategies and implementation of Family First Prevention to enhance supervision and maintain children safely in their homes when possible.

Currently the total number of children in care is at the lowest it has been in the past 20 years. Since SFY 2020 the number of children in care has declined from 2,679 to 1,959 in SFY 2023. See Hawaii Data Booklet, Figure 22: Children in Foster Care: 20-Year Trend (Statewide).

In SFY 2023, EPIC Ohana sent out 16,423 Relative Notification Letters. This is a decrease from 22,703 Relative Notification letters in SFY 2022. The number of Relative Notification Letters decreased in 2023 due to the number of placements decreasing. See Hawaii Data Booklet, Figure 56: Children Placed in Relative and Non-Relative Foster Care Homes (Monthly Average).

Between SFY 2018 – SFY 2022, there was an increase of 2% in the number of children placed with relatives. SFY 2023 saw a drop in relative placements with 49% of placements with relatives, which may be attributed to the decline in the number of children in foster care and a focus on services and efforts to maintain children safely in the home. Despite the decline, Hawaii continues to rank among the top states in the nation for relative placements for children in care. Relative placement rates across the country are about 32% as reported by the AFCARS Report, FY 2016 data, as of October 20, 2017, No. 24. Hawaii will continue to monitor these changes

to determine whether the decline is related to or due to the overall decline in children coming into care.

Surveys from the families who have had OCs continue to note very positive feedback. Families feel that their voice is being heard and that holding quarterly OCs strengthen their engagement and participation in their case plans.

Planning for the Next Five Years (2025-2029)

Hawaii values the important role OCs serve in engaging families and helping to achieve positive outcomes in the areas of safety, permanency, and well-being. Ongoing efforts to explore how OCs can support and strengthen practice continue through CWSB's collaborations with EPIC, its contracted providers, court stakeholders, and families. Some ideas for the future include but are not limited to the following:

- **To further enhance family voice:** CWSB and EPIC are collaborating on the possibility of incorporating lived experience parent partner (PP) voices into OCs. It is the belief that PPs can offer much support to the birth parents based on insight they bring from their own experience with CWSB and their current work in other areas. PPs would provide support for birth parents and connections to direct casework, policies, and programs.
- **To strengthen efforts to maintain children safely within their families and to prevent entry into foster care:** At this time, OCs are generally held when a CWSB case is transferred to Voluntary Case Management (VCM). CWSB along with VCM and EPIC are discussing the potential benefits of expanding the use of OCs as a tool to enhance family preservation efforts.

f. Ohana Time

Background

“Ohana Time” (OT) refers to visits between children in foster care and their parents and siblings. CWSB calls this effort “Ohana Time” to embrace the Hawaiian cultural appreciation for connection and support. CWSB, the Judiciary, service providers, relatives, and resource families have maintained a strong collaboration to increase the frequency and improve the quality of OT. Collectively, these groups believe that OT is a time for families to interact, and not simply a time to visit. CWSB believes that regular, frequent, and quality OT increases the likelihood of successful reunification and timely permanency. To move forward with this perspective on OT, CWSB revised its procedures and forms with the assistance of a National Resource Center and national consultants. All CWSB staff are trained on OT during new hire

orientations. Resource caregivers (RCGs) are also trained on the importance and needed support for OT. Agencies are also contracted to provide OT and efforts are made to enhance contact through other opportunities such as doctor visits, family gatherings, and children’s activities.

Summary of Past Five Years (2020-2024)

Between SFY 2020 – SFY 2022, Hawaii made significant progress to ensure that OT between a child in foster care and his or her mother, father, and siblings was of sufficient frequency and quality to promote continuity in the child’s relationship with these close family members. In SFY 2020, Hawaii had a strength rating of 36% and increased to 66% in SFY 2021 and 2022. Hawaii dropped to a 40% strength rating in SFY 2023. Refer to the Hawaii Data Booklet APSR FFY 2025 – Figure C8 and item 8 for an analysis on Ohana Time.

During the pandemic, OT changed from being all in-person to virtual contacts. As the pandemic situation improved, and with court approval, in-person visits resumed with safety precautions in place. Despite the challenges that COVID initially presented, it also provided an opportunity for Hawaii to be creative with OT. The strategies implemented during COVID have continued to be used to augment and enhance in-person OT.

Through its ongoing collaborations, CWSB regularly looks at ways to increase and enhance its OT opportunities. Two strategies currently in place include: Liliuokalani Trust- Ka Pili Ohana and Two Makua Meetings. Refer to Section IV.A.1.h for further details on these initiatives. These collaborations have been instrumental in supporting frequent and quality OT. They promote the practice of building a “shared parenting” relationship between birth parents and resource caregivers (RCGs) and using culture as a healing component.

- **Ka Pili Ohana (KPO)** is a collaborative Liliuokalani Trust (LT) pilot project to help Native Hawaiian families involved with Child Welfare. The project focuses on developing positive relationships among birth parents, CWSB, and Resource Caregivers (RCGs), and strengthening parent and child relationships during visits with birth parents, children, RCG, and CWSB. LT provides cultural guidance to the project and participants. KPO is currently being offered on the island of Oahu in the East and West Oahu CWSB sections, and on the island of Hawaii in the Kona and Hilo CWSB sections.
- **Two Makua Meetings (TMM):** The Ka Pili Ohana program partnered with EPIC Ohana to pilot the Two Makua Meetings program (TMM) involving RCGs

and birth parents. “Makua” means “parent” in Hawaiian and thus, the project’s name refers to “Two Parents.” TMMs are informal meetings between the birth parents and the RCGs and are designed to encourage development of a positive relationship that fosters open communication between birth parents and the child’s current RCGs.

- **Better Together:** This program is designed to create safe and courageous spaces for caregivers and agency staff to engage in honest dialogues and actively participate in activities structured to foster experiential learning. The purpose of *Better Together* is to develop equal, mutually respectful partnerships between caregivers, child welfare staff, and community partners to improve services and the lives of child welfare-involved children and their families. Refer to Section VII.

Planning for the Next Five Years (2025-2029)

Hawaii recognizes the important role OT plays in supporting timely and successful reunification. Over the next five years, Hawaii plans to continue to monitor OT and increase the frequency and quality of contacts for children and their parents and siblings. Some strategies include, but are not limited to the following:

- Continue to support virtual contacts to supplement, not replace, in-person visits.
- Continue to support the concept of “shared parenting” and the collaborations that can enhance OT for children and families, especially through cultural engagement. In October 2022, EPIC Ohana, in partnership with Casey Family Programs, provided a three-day Facilitators’ Training Session on Better Together. Over the next five years, CWSB will continue to implement and support the concept of Better Together in practice. An informational video will be created, additional outreach efforts will be conducted, and more convenings will be held to enhance understanding of the goal and objective of Better Together and to promote collaboration.
- Continue to look at natural opportunities to increase contacts such as doctor visits, connection during service delivery, and children’s activities.
- Work with community partners to look for ways to increase and sustain its occurrence.

g. Relative Placement, Kinship Navigator, Resource Caregivers and Birth Parents

CWSB recognizes the importance of placement with relatives and maintaining and enhancing connections with relatives. CWSB continues diligent, upfront efforts to make the first placement the only placement through early Family Finding

searches and attempts to hold Ohana Conferences for every child entering foster care. *See Section IV.A.1.e Ohana Conferences for additional details.* CWSB continues to identify relatives and provide the revised relative notification letter to inform and engage relatives as supports and placement resources. Initial and ongoing Ohana Conferencing provides a venue to identify and include relatives to discuss placement options, including placement with relatives.

When removal is necessary, CWSB recognizes the importance of placement with relatives for maintaining and enhancing connections with extended family and culture. Placement with relatives often provides a more comfortable, less traumatic option than placement with non-relatives, who may be seen as caring strangers. In Hawaii, relative placement is explored before non-relative placement is made, and Family Finding efforts may continue throughout the life of a case. To identify relatives that may be a support to the child and a possible placement option, CWSB is diligently working on efforts to identify fathers early on since identifying fathers and their family members increases the pool of potential relatives available as placement options.

The relative RCG brochure has been translated into targeted languages to promote engagement, help relatives understand the importance of relatives as caregivers, and explain the process to become an RCG. Contracted support services also include targeted training and support groups for RCGs, adoptive parents, and legal guardians who are Marshallese or Chuukese. CWSB is also working to identify fathers early to promote engagement and identify paternal relatives that may be a support to the child and a possible placement option. This may help identify more relatives initially and increase options for placement.

Additional supports are also available for relative RCGs that may promote their availability and capacity to care for their relative in foster care. The Ohana Navigator Program focuses on helping to stabilize and maintain placement. There are two components of the Ohana Navigator Program. The first is to provide and establish a one-to-one supportive peer mentoring relationship between seasoned RCGs (peer navigators), and new relative RCGs. The second component of the Ohana Navigator Program is to coordinate and provide social events in various locations statewide. Ohana Navigators are available to support all RCGs.

Hawaii continues to encourage participation in Two Makua (two families) meetings. Initially designed to address the needs of Native Hawaiian families, the use of this two families model has been expanded to offer this support to all families working towards reunification. Two Makua works well to encourage resource caregivers and birth families to develop an engaged relationship that fosters mutual respect,

continued parent connection/bonding, and support for the child’s development and best interests.

Also, ongoing training opportunities promote greater connection for resource family networks and resources, recruitment, and peer navigator connections. These events are friendly, held in locations that are easily accessible, and at times that are convenient for RCGs. CWSB firmly believes that children can greatly benefit from placement with relatives and continues efforts to identify and support relatives as RCGs as well as non-relative RCGs.

h. Ka Pili Ohana and Two Makua Meetings

Summary of the Past Five Years to Present

Ka Pili Ohana

Ka Pili Ohana (KPO) is a collaboration between CWSB, EPIC Ohana, Liliuokalani Trust (LT) and other community partners to support and foster the Two Makua or “Two Parent” relationship for Native Hawaiian families involved within CWSB. The project focuses on developing positive working relationships between birth parents, CWSB, and resource caregivers (RCGs), and strengthening parent and child relationships during visits with birth parents, children, RCGs, and CWSB. LT provides cultural guidance to the project and participants. KPO is currently being offered on the island of Oahu in the East and West Oahu CWSB sections, and on the island of Hawaii in the Kona and East Hawaii CWSB sections.

Two Makua Meetings

The Ka Pili Ohana program partnered with EPIC Ohana to pilot the Two Makua Meetings program (TMM) involving RCGs and birth parents. “Makua” means “parent” in Hawaiian and thus, the project’s name means “Two Parents.” TMMs are informal meetings between birth parents and RCGs designed to encourage development of a positive relationship that fosters open communication for the benefit of the child. The pilot project started in June 2021 in the West Oahu CWS Section. During SFY 2022, TMM expanded to all Oahu CWSB Sections and to East Hawaii CWSB Section. Strengthening relationships between RCGs and birth parents have been demonstrated to increase the likelihood of reunification.

The CWSB case worker initiates the TMM process by explaining the program to birth parents and RCGs and scheduling a meeting for a mutually agreeable date and time. During TMM meetings, EPIC Ohana facilitates introductions, the exchange of information about the child in care, and the creation of an Ohana Time plan. For families with Native Hawaiian ancestry, LT continues to work with RCGs, birth

parents, and CWSB through Ka Pili Ohana (KPO) to build a trusting working relationship, and to expedite a safe and timely reunification. An Ohana Conference (OC) is scheduled for soon after the TMM meeting. One of the functions of Ohana Conferences is to foster the relationship with RCGs, birth parents, and CWSB. Refer to section, Ka Pili Ohana, for additional information on the program.

Between July 2022 and January 2023, there were 16 referrals and nine completed TMMs. In SFY 2023, there were 27 referrals for TMM with 14 first meetings held to help increase utilization. TMM providers have been collaborating with RCGs on outreach efforts to share information about the goals and purposes of the TMM program. This is an evolving process to support the practice of “Shared Parenting” between birth parents and RCGs. “Shared Parenting” will ultimately promote safety, timely permanency, and well-being of the child in care. This process also builds extended family relationships to support the child, parents, and the child’s entire ohana. EPIC Ohana has presented at various venues to promote awareness and utilization of TMM. EPIC Ohana recently presented at a Quarterly Licensing meeting with resource home licensing and contracted provider staff in attendance. Additional presentations are being scheduled to occur during a quarterly CWSB supervisors’ meeting and at all quarterly PIP Stakeholder meetings.

A Memorandum of Understanding (MOU) to address collaboration with EPIC Ohana, Liliuokalani Trust, and CWSB is being drafted. Currently, EPIC Ohana is taking the lead with TMM. When a family is involved in the Ka Pili Ohana Program (KPO), EPIC, with the family’s permission, invites the KPO worker to the TMM.

Planning for the Next Five Years

Surveys indicate that families find the TMM process helpful in creating partnerships with their case workers and RCGs, as well as in arranging consistent Ohana Time for families.

Over the next five years, Hawaii will continue to work to increase the number of TMMs by enhancing awareness of the resource among the CWSB workforce, RCGs, and birth families and by strengthening engagement of RCGs and birth parents. EPIC and LT are interested in collaborating with licensing staff and the current provider of RCG homes to better engage seasoned RCGs. This collaboration would expand the presentation on TMMs in HANAI trainings for new RCGs and with seasoned RCGs who are currently licensed with DHS. Hawaii would also like to expand KPO to all sections to promote integration of Native Hawaiian values and perspectives into CWSB practices, thereby ensuring that the needs of Native Hawaiian children and families are addressed in a culturally responsive manner.

New strategies to improve the tracking of referrals are also being considered. One possibility is to utilize the auto-referral process already in place for Ohana Conferences and Family Finding.

DHS administration and deputies attorney general will continue to work with EPIC Ohana and LT to finalize the MOU. This MOU will enhance collaboration among the different providers and, more importantly, enhance service delivery to CWSB involved families.

2. Most Vulnerable Populations

The largest percentages of children in foster care are children aged 0-5 and Native Hawaiian children. This has remained true for the past five years. LGBTQ+ youth and Native American children are also particularly vulnerable to abuse and neglect and are therefore also discussed in this section.

a. Services for Hawaiian families

Past Five Years

According to the U.S. Census American Community Survey 2021 estimates, Native Hawaiian children make up 34% of the general population of children in the State of Hawaii, but in SFY 2023, Native Hawaiian and part Native Hawaiian children made up 43% of the children in foster care statewide. Although this disproportionality is disturbing and must be addressed, it is important to note that there has been improvement over time, including over the past five years.

In looking at the middle table *Total in Foster Care in Figure 52: Hawaiian and Non-Hawaiian Children in Foster Care: Total and Percentage [Table]*, you can see that the percentage of Native Hawaiian and part Native Hawaiian children in foster care has remained relatively stable with a decrease of only 2% from SFY 2019 to SFY 2023. From SFY 2019 – SFY 2023, it is encouraging to see that the number of Native Hawaiian and part Native Hawaiian children in foster care has decreased each year, with 1,240 children in SFY 2019, 1,200 children in SFY 2020, 1,132 children in SFY 2021, 1,013 children in SFY 2022, and 845 children in SFY 2023. One can see this encouraging trend more clearly by going further back in time. Please see *Figure 54: Hawaiian and non-Hawaiian in Care 10-Year Trend [Chart]*. From SFY 2014 – SFY 2016, the green line (representing non-Native Hawaiian children in foster care) and the blue line (representing Native Hawaiian and part Native Hawaiian children in foster care) are almost on top of each other. In contrast, in SFYs 2017 – 2023, the green line rises, diverging from the blue line. This figure shows:

- From SFY 2014 – SFY 2016, the number and percentage of Native Hawaiian and part Native Hawaiian children in foster care was approximately the same as non-Hawaiian children in foster care.
- From SFY 2017 – SFY 2023, the number and percentage of Native Hawaiian and part Native Hawaiian children in foster care was lower than non-Hawaiian children in foster care.
- From SFY 2014 – SFY 2019, the total number of children in foster care increased each year.
- In SFYs 2020, 2021, 2022, and 2023, the total number of children in foster care decreased, as well as the number of non-Hawaiian children and Native Hawaiian and part Native Hawaiian children in foster care.
- From SFY 2016 – SFY 2023, the number of Native Hawaiian and part Native Hawaiian children in foster care remained steady, later decreasing.
- In the years SFY 2016 – SFY 2019, although the overall numbers of children in foster care continued to rise, Native Hawaiian and part Native Hawaiian children did not contribute to that rise.

See the first table *Entries of Figure 52: Hawaiian and Non-Hawaiian Children in Foster Care: Total and Percentage [Table]*. In SFYs 2019-2022, a higher percentage of Native Hawaiian children entered foster care (ranging from 40-42%) than exist in the general population (34%). Excitingly, in SFY 2023, only 33% of the children entering foster care were Native Hawaiian or part Native Hawaiian. Notably, there was no disproportionality here. One year of improved entry rates will not fix the disproportionality in CWSB, but it is encouraging. Hawaii hopes to continue this trend and is optimistic that with the implementation its Equity Action Plan, improvements may be sustained. Please see the section below *IV.A.2.b.ii. Next Five Years*.

Race and ethnicity are determined by CWS staff asking the children how they themselves identify. For children who are unable to self-identify, due to age, illness, or developmental/cognitive status, their parents or other family members identify their ethnicity. It is important to understand how CWS staff codes ethnicities. CPSS can hold up to five race codes and up to five ethnicity codes per child, and staff indicate a primary ethnicity for each child. If a child has multiple ethnicities and is not part Native Hawaiian, the child (or their family) will choose their primary ethnicity. If a child has multiple ethnicities and is part Native Hawaiian, they will be coded with Native Hawaiian as their primary ethnicity. This is done to ensure that CWSB does not undercount Native Hawaiian children, as historically formal State government has harmed, oppressed, and excluded Native Hawaiian people. CWSB wants to fully acknowledge and correct this history. CWSB's ethnicity coding protocols may result in an overcounting of Native Hawaiian and part Native

Hawaiian children in the CWS system (when compared to other systems and censuses), but it is vital to CWS equity and cultural efforts that all possible Native Hawaiian children are properly identified.

Distressingly, outcomes for Native Hawaiian and part Native Hawaiian children are worse than for other children in foster care. When comparing the percentage of Native Hawaiian and part Native Hawaiian children *in* foster care to the percentage of Native Hawaiian and part Native Hawaiian children *entering* foster care, the percentage of Native Hawaiian and part Native Hawaiian children *in* foster care is 3% to 10% higher than the percentage who entered each year. See the first two tables of *Figure 52: Hawaiian and Non-Hawaiian Children in Foster Care: Total and Percentage [Table]*. This means that Native Hawaiian and part Native Hawaiian children are staying in foster care longer than their peers.

Figure 55: Hawaiian and Non-Hawaiian Children: Discharge Type [Chart] displays that reunification rates for Native Hawaiian and part Native Hawaiian children are consistently and significantly lower than for the non-Hawaiian children (ranging from 4% lower in SFY 2020 to 18% lower in SFYs 2021 and 2022). As safe reunification is the best outcome for children are in foster care, Hawaii is examining the potential cause of this discrepancy. *Figure 55* also shows that Native Hawaiian and part Native Hawaiian children are adopted or enter legal guardianship at higher rates than non-Hawaiian children. This correlates to Native Hawaiian and part Native Hawaiian children reunifying at lower rates. CWSB staff's successful efforts to move children who had been in foster care over a year to adoption or legal guardianship may have contributed to the shift, as both the number and percentages of adoptions and legal guardianships increased from SFY 2020 to SFY 2021. See *Figure 44: Exit from Foster Care: Age Range in Years by Discharge Type [Table]*.

Figure 55: Hawaiian and Non-Hawaiian Children: Discharge Type [Chart], shows lower reunification rates, and higher adoption and legal guardianship rates for Native Hawaiian and part Native Hawaiian children each year compared to non-Hawaiian children, with the minor exception of SFY 2020 where the legal guardianship rate was the same at 18%. In SFY 2019 and SFY 2020, the emancipation rate for Native Hawaiian and part Native Hawaiian children was the same or lower than non-Hawaiian children. In SFY 2021, SFY 2022, and SFY 2023 this changed. Nine percent of Native Hawaiian and part Native Hawaiian children who exited foster care in SFY 2021 emancipated, and 8% of Native Hawaiian and part Native Hawaiian children emancipated from care in SFY 2022 and SFY 2023 compared to 6% - 7% of the non-Hawaiian youth for these years. DHS does not believe that this is the beginning of a trend, but Hawaii will keep a close eye on the situation regardless, as emancipation is this least desirable way for a child/youth to exit foster care.

While younger children are inherently at greater risk of maltreatment, poverty adds another risk factor. National studies have shown that poverty plays a key role in representation in foster care. According to World Population Review 2021 statistics, Native Hawaiians are living in poverty at more than twice the rate of the general population of the State. Native Hawaiians at 20.2% and the general population at 9.4%. CWS Native Hawaiian overrepresentation is sadly like disproportionality in social services and programs throughout the State including but not limited to those listed below:

- adult criminal justice,
- community mental health,
- juvenile justice,
- MedQuest (Hawaii's State-funded health insurance),
- probation,
- public housing,
- SNAP (Supplemental Nutrition Assistance Program),
- special education,
- substance abuse treatment,
- TANF (Temporary Assistance to Needy Families),
- Vocational Rehabilitation, and
- WIC (Women, Infants, and Children federal subsidy).

CWSB is concerned about this issue and is working to ameliorate this complex situation. Hawaii has implemented targeted efforts and programs to meet the cultural needs of Native Hawaiian families. Please see the two sections immediately below.

Planning for the Next Five Years

Hawaii's FFH Equity Improvement Collaborative (EIC) has created an Equity Action Plan (EAP) for Hawaii CWSB whose focus is reducing Native Hawaiian disproportionality. Through implementation of this plan, Hawaii hopes to reduce and eventually eliminate Native Hawaiian disparity in CWSB. Please see Section *VII.C.2. Race Equity* for more discussion of the EIC and its work.

Programs and Services

Na Kama a Haloa

Overview of the Past Five Years

Na Kama a Haloa is a community-based network that was established in September 2018 to address the overrepresentation of Native Hawaiian children and families in the child welfare system. The group strives to integrate Native Hawaiian values, wisdom, and perspectives into every aspect of their work, extending this influence to systemic partners, particularly CWSB. Na Kama a Haloa fosters continued collaboration among Native Hawaiian serving institutions, Child Welfare Services, service providers, communities, and individuals with lived experience in child welfare.

Through inclusivity and shared accountability, Na Kama a Haloa aims to improve opportunities and outcomes for Native Hawaiian children and families, with the goal of eliminating Native Hawaiian disproportionality in child welfare by 2030. Its initial focus included developing culturally relevant training, empowering birth parent voices, supporting sibling connections, facilitating shared parenting between birth parents and resource caregivers, and supporting RCGs, families, and community members in Hilo. Housed by EPIC Ohana, Na Kama a Haloa is a pivotal partner in addressing Native Hawaiian disproportionality within the child welfare system. Upon achieving many of its initial goals, the group has shifted focus to meet evolving trends and needs within the Native Hawaiian community.

Annual Update

Na Kama a Haloa has incorporated a strategic approach involving critical shifts and subcommittees, also called "hui" (groups), to address Native Hawaiian disproportionality in CWSB. New hui, such as the Hui Call to Action for Healing and Hui Ka Piko (the navel), have emerged to tackle evolving challenges, including addressing injustices and enhancing community empowerment. Additionally, the Hui Training was established to meet the growing demand for a Native Hawaiian perspectives training, aiming to integrate Hawaiian cultural values into working with families and communities. The Hui Pilina (Sibling Connections) ongoing work continues to address and overcome transportation barriers hindering sibling connections. With a diverse membership representing various stakeholders, Na Kama a Haloa is positioned to achieve meaningful and sustainable change in reducing racial disproportionality within CWSB.

Planning for the Next Five Years

Continued collaboration between Child Welfare Services and Na Kama a Haloa is essential to eliminate Native Hawaiian disproportionality within the child welfare system. This collaboration promotes the integration of Native Hawaiian values and perspectives into CWSB practices, ensuring that the needs of Native Hawaiian children and families are addressed in a culturally responsive manner. Through

ongoing communication, partnership, and shared goals, CWSB and Na Kama a Haloa can continue to make progress towards achieving equity and fairness for Native Hawaiian communities within the child welfare system. Please refer to Section VII.C.2 Strategic Planning Committee, Race Equity for more information on Nā Kama a Hāloa initiatives as well as details on the equity work by the FFH Equity Improvement Collaborative and the Hawaii CWS Equity Action Plan to disrupt inequities and end the disproportionality of Native Hawaiian children and families in child welfare.

Ka Pili Ohana

Ka Pili Ohana (KPO) is a collaboration between CWS, EPIC, Liliuokalani Trust (LT) and other community partners working together to support and foster the Two Makua or “Two Parent” relationship for Native Hawaiian families involved within Child Welfare. The project focuses on developing positive working relationships between the birth parents, CWSB and the Resource Caregivers (RCGs), and strengthening parent and child relationships during visitations with birth parents, children, RCGs, and CWSB. LT provides cultural guidance to the project and participants. KPO is currently being offered on the island of Oahu in the East and West Oahu CWS Sections, and on the island of Hawaii in the Kona and Hilo CWS Sections.

Two Makua Meetings

CWSB primarily partners with EPIC Ohana to implement Two Makua Meetings (TMM). They are informal meetings between the birth parent and the RCG designed to encourage the development of a positive relationship that fosters open communication between the child’s caregivers. LT is integrated into these meetings and engagement by introducing the NH cultural component for NH families. These collaborations provide for culturally based services for Native Hawaiian families and children.

Please also refer to IV.A.1. Reunification Efforts -J. KPO and 2Makua for additional information on services and future planning.

b. Services for Children Ages 0-5

Past Five Years

Infants and toddlers rely solely on their caretakers to meet their needs and have almost no capacity to protect themselves, therefore this population of children is at the highest risk for abuse and neglect worldwide. It is not surprising that this youngest cohort is also the largest cohort in Hawaii’s foster care system. One can see in the Data Booklet, *Figure 30: Number of Children in Foster Care by Age Group:*

SFY 2019 – SFY 2023, the number of children in foster care by age, over the past five years. Data Booklet, *Figure 29: Age Distribution of Children in Foster Care by Number and Percentage: SFY 2019 – SFY 2023* displays this age distribution as percentages of the total annual number of children in foster care for each of the past five years. During this period, the percentage of children in foster care who are age 0-5 has ranged from 38% to 42% of all children in foster care annually.

Targeted efforts and services for children aged 0-5 are in place. All children under age five, whether they are in-home, in a community-based setting, or in foster care are receiving these services. These services include access to subsidies for childcare and preschool, health insurance coverage through Medicaid, developmental screening through the Department of Health’s Early Intervention program, Head Start, directories such as Aloha United Way’s Keiki Central – 211, Executive Office of Early Learning’s Programs resource list, Department of Education’s Support for Parents, and Department of Health’s Sharing Our Ulu-resources for children age 0-5 years and their families. CWS partners with community agencies related to the services noted above to ensure access to appropriate services that address the developmental needs of vulnerable children under 5 years of age.

In addition to helping reduce a child’s length of stay in foster care, many of the services and interventions Hawaii employs also assist in properly addressing the developmental needs of children under age five. These services are discussed below and throughout this APSR.

Planning for the Next Five Years

When considering age group cohorts, Hawaii anticipates that children aged 0-5 will continue to make up the highest percentage of children in foster care, due to their complete reliance on caretakers to meet their basic needs and therefore their heightened vulnerability to abuse and neglect. Hawaii will continue to examine how CWSB is meeting the needs of this population and adjust, enhance, or develop services as needed.

Programs and Services

For information on the All State Team regarding children in foster care age 0-5, see *Section II.A.3 Family First Hawaii* and *Section II.C Collaboration on CFSP and APSR*.

Home Visiting Services (HVS)

Overview

Home Visiting Services (HVS) are long-term, voluntary services to help prevent child abuse and neglect, support positive parenting, improve maternal and child health, and promote child development and school readiness. Key activities of this service include home visits, child development and health screenings, parent assessments, support groups, and connecting to other services, supports and resources. Families engaged in HVS gain skills to reduce the safety and risk factors within the home, ideally reducing the length of time a child is in foster custody before being safely reunified. HVS also provides interventions to strengthen parenting skills to maintain a safe family home and prevent children from entering care.

HVS supports both children in-home and out of home (foster care). For children who are in-home, HVS helps to support the family maintenance while providing parenting education, skill-building, and support. For children in foster care, HVS supports timely reunification of children with their families by strengthening parents' parenting capacity.

The Past Five Years to Present

Home visiting services has been a part of Hawaii's service array for many years. In 2022, FFH expanded services to families of children from ages 0-3 to 0-5, and chose two evidence-based Home Visiting models, Parents As Teachers (PAT) and Healthy Families America (HFA), to provide parenting support services to address the needs of this vulnerable age group. Both models received "well-supported" ratings, which is the highest rating given by the Title IV-E Prevention Services Clearinghouse, indicating that these models, through scientific research, have demonstrated positive outcomes for children and families and were able to sustain efficacy of at least one target outcome for 12 months or more after services were completed.

To support the successful implementation of FFH-HVS, regular monthly meetings were arranged with providers statewide. The focus of these meetings was to:

- enhance referrals,
- clarify policies and procedures,
- address barriers and challenges to service delivery, and
- improve FFH data collection.

Since implementation, Hawaii has continued to support contracted HVS providers by continuing to hold monthly meetings. These meetings provide a standing opportunity for HVS providers, statewide, to strengthen connections and enhance services. During these meetings, providers share both challenges and successes that they have with service implementation to foster shared learning. In addition to

these meetings, CWSB maintains close contact via telephone and/or email to support providers with any direct questions or concerns.

CWSB began collaborating with the State of Hawaii Department of Health to merge Hawaii's Department of Health early home visiting programs with CWSB's early home visiting programs. Over the past several years, CWSB and the Department of Health (DOH) have collaborated in exploring the possibility of a seamless statewide home visiting program based on the Ohana Nui approach. This one program would serve both families at-risk for abuse and neglect (DOH's focus) and families with confirmed allegations (CWSB's focus). Currently, CWSB and DOH run separate, but very similar, home visiting programs. The key idea is to merge the two programs. With community input, CWSB and DOH compared their programs and identified common elements. Other collaborative efforts have included looking at how families with CWSB involvement can transition to DOH Home Visiting services once their case is closed and identifying the areas and criteria served by DOH so that CWSB can be aware of the continuum of services.

CWSB continues to explore ways to increase the use of statewide Home Visiting Services to support all CWSB families with children aged 0-5. CWSB's collaboration with the State of Hawaii Department of Health (DOH) and Child Health Branch continues with the shared goals to strengthen and support the maintenance of families. With the assistance of SHAKA, the Family Service Plans (FSP) now prompts caseworkers to add HVS to the FSP, when applicable, as follows:

1. When a caseworker is creating a FSP for any family with children aged 0-5, a prompt will appear on the screen to suggest that HVS be added.
2. SHAKA will calculate the children's ages based on the FSP initiation date and assume that any child(ren) listed in the CPSS case are relevant children for the FSP.
3. The caseworker may add HVS to the FSP by clicking the enter/add HVS button at the prompt. This allows for a quick and easy option for the caseworker to ensure that HVS are utilized for these families with children aged 0-5.

Planning for the Next Five Years

Hawaii is excited about the opportunities that the HI-THRIVE CCWIS project will provide to help improve the efficiency of service delivery. One exciting feature that is planned is to develop an automatic referral process for HVS. Ideally, CCWIS will allow data to be pulled for the referral, so caseworkers just need to click on a button to generate a referral. By streamlining this referral process, Hawaii hopes to see

more referrals for children aged 0-5. CWSB will continue share information about Home Visiting Services so that caseworkers can appropriately match families to the service, if it meets their needs, as part of individualizing a service plan based on a family's needs.

CWSB recognizes the important work that DOH provides in the area of prevention and appreciates its partnership. CWSB will continue its collaboration with DOH to develop a pathway for families who choose to continue with HVS after their CWS case closes to promote service continuity and continued engagement in services that meet the families' needs within their respective communities.

c. Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, Intersex, Asexual (LGBTQIA), and other Sexual and Gender Minority (SGM) Populations

CWSB is committed to promoting the equitable treatment of LGBTQIA+ children, youth, parents, resource caregivers, and CWSB staff. CWSB supports individuals' freedom to express and identify their gender and sexual orientation. CWSB has taken a firm stance on anti-discrimination under the State of Hawaii Child Welfare Services' Anti- Harassment and Non-Discrimination Policy and Procedures Regarding People who are Lesbian, Gay, Bisexual, and/or Questioning.

CWSB strives to ensure that LGBTQIA+ children, youth, and families have safe, supportive, and affirming homes, and that they are provided with affirming services by professionals and paraprofessionals who are trained and knowledgeable about the particular needs of the LGBTQIA+ community. All CWSB contracts include a mandate that contracted staff be trained on LGBTQIA+ issues by experts in the field.

Past Five Years

Over the past five years, CWSB has been involved in efforts to improve equity and safety for LGBTQIA+ people in Hawaii.

1. CWSB actively collaborated with DOH's Safe Spaces Committee to develop resources and support for children, youth, and families.
2. CWSB actively collaborated with DOH's Sexual and Gender Minority Workgroup composed of various statewide community providers and state agencies.
3. CWSB partnered with DOH in developing guidance regarding SGM identity for aligning data systems and data collection.
4. CWSB collaborated with DOH on improving policies and procedures related to LGBTQIA+ children, youth, and families.

5. CWSB has participated in and supported inter-agency collaboration focused on the strengths and needs of LGBTQIA+ populations with the goal of creating and improving integrated systems to best support children, youth, and families.
6. In collaboration with DOH, CWSB provided guidance on inclusive and affirming language and writing practices.
7. CWSB developed an educational video in 2023 that centered on youth's experience in care, raising awareness of LGBTQIA+ children, youth, and families.
8. CWSB tracked bills and legislation that impacts LGBTQIA+ children, youth, and families in CWS.

Planning for the Next Five Years

1. CWSB plans to continue the efforts listed immediately above in Section IV.A.2.c.i.
2. DHS will be updating its CWSB database to newly capture LGBTQIA+ data and plans to align this with how DOH captures identity data.
3. DHS plans to update its LGBTQIA+ policy to include current terms and the most up-to-date best practices, and to align with DOH, thereby ensuring continuity of systems of care.
4. CWSB will ensure that Hawaii meets Title IV-E and IV-B statutory requirements to appropriately serve LGBTQI+ children in foster care. CWSB is working to identify Designated Placement options for all children who identify as LGBTQI+

In order to be considered a designated placement for an LGBTQI+ child, the placement must satisfy three conditions, each of which goes beyond the general requirements that apply to all placements.

- First, the RCG must commit to establishing an environment that supports the child's LGBTQI+ status or identity.
- Second, the RCG must be trained in the appropriate knowledge and skills to provide for the needs of the child related to the child's self-identified sexual orientation, gender identity, and gender expression.
- Third, the RCG must facilitate the child's access to age or developmentally appropriate resources, services, and activities that support their health and well-being.

Note: CWSB will expand its new hire training to include this information and implement additional training opportunities for RCGs.

d. ICWA

Overview

While there are no federally recognized tribes in the State of Hawaii, CWSB makes active efforts to engage and partner with tribes for children who are identified as potentially eligible for Indian Child Welfare Act (ICWA) at all stages of the case by focusing on the role of the caseworker at intake, at Family Court, with the Department of the Attorney General, and during the Interstate Compact for the Placement of Children (ICPC) process, if applicable.

Hawaii's existing procedures provide direction and guidance to ensure ICWA compliance and include the following:

1. Information to be addressed when consulting the tribes;
2. Notification to Native American parents, tribes, and the Bureau of Indian Affairs;
3. CWSB's active efforts to prevent breakup of the Native American families;
4. Placement preferences for Native American children in foster care; and
5. The importance of tribal input at all stages of the case.

Ongoing collaboration and communication are important to addressing any challenges and barriers to meeting ICWA requirements. CWSB has regular meetings with its court partners through its PIP Quarterly Court Stakeholder meetings and has designated time at branch meetings for the attorney general's office to discuss any legal issues, which can include ICWA-related issues, including current processes, challenges, and needs.

Annual Update

In 2023, the Supreme Court upheld the constitutionality of ICWA in *Haaland v. Brackeen*. It ruled that Congress had the authority to enact ICWA under the Indian Commerce Clause. With the Supreme Court's ruling, Hawaii continues to follow its existing procedures to ensure ICWA compliance.

CQI case reviews are used to ensure that CWSB is complying with ICWA. The CQI review checks to see if ICWA status was identified appropriately at the beginning of a case and if there were sufficient inquiries made to determine whether the child is a member of a tribe.

In SFY 2022, there was one child who entered care and identified as Native American. Father was identified as a member of the La Jolla Band of Luiseno Indians. In compliance with ICWA, the tribe was consulted and chose not to

intervene in the case or assume jurisdiction. CWSB collaborated with the tribe on placement for the child and the tribe determined that it was in the child's best interest to remain in her non-relative placement with the goal of adoption.

In SFY 2023, there were 17 children of American Indian ethnicity in care and 2 of Alaskan Native ethnicity. These children made up approximately 1% of the total number of children in care.

In the Annual Summary Report, Case Reviews SFY 2023, data for item 9: Preserving Connections showed that in 50 out of 60 applicable cases or (83%), a sufficient inquiry was conducted to determine whether a child might be a member or eligible for membership in a federally recognized Indian tribe. In four of eight applicable cases, the Tribe was provided timely notification. Twelve cases (or 20%) reviewed were rated as needing improvement.

Of these 12 cases, in 10 cases concerted efforts were needed to determine whether the child was a member or eligible for membership in a federally recognized Tribe.

- In eight cases, documentation or case participant interviews did not indicate a sufficient inquiry was made.
- In two of these cases, both parents and or relatives were not asked.

In four of these cases, there was evidence of Native American ancestry for the child. Timely notification was not made to the Tribe.

- In three cases, the birth certificate indicates the child was Native American.
- In one case, the case participant interviews indicated an inquiry was not made, and the child is Native American.
- In two cases, a sufficient inquiry was made to determine the child was Native American, but steps were not taken to see if the child may be a member of or eligible for membership in a federally recognized Tribe.

Hawaii believes its ongoing efforts to ensure compliance with ICWA will help to address case review findings. Specifically, the work cited below in the Discussion section related to developing a more expedited process to secure birth certificates for children in care will assist in identifying Native American/Alaskan Native earlier in the case. In addition, the Parent Statement of Indian Ancestry Form will assist in ensuring clear documentation of efforts to identify Native American/Alaskan Native children have been made and is placed in the case file.

Discussion

Over the last five years, Hawaii has taken a variety of steps to enhance its compliance with ICWA. These enhancements have been made in collaboration and consultation with federal partners, CWSB, DAGs, SDO, and other state agencies. They include but are not limited to:

- Implementation of AFCARS 2.0 on March 28, 2023, which includes documenting required data elements for children under ICWA regulations.
- Revisions to the Safe Family Home report to support the strategy of improving permanency through concurrent planning. A key revision to the Safe Family Home Report was the inclusion of an ICWA section. The ICWA section ensures that upon initial contact, workers are asking both maternal and paternal family members whether they identify as Native American and if they are affiliated with a tribe. The ICWA section requires that a worker's inquiry and the family's response to ICWA questions are documented in the case plan. An "Other" option was added into the ICWA section of the Safe Family Home Report to allow caseworkers to provide a narrative for special circumstances that require further explanation. These revisions to ICWA are also mirrored in the Permanent Plan.
- Clarification to staff that the results from any notifications that the Attorney General's office sends to tribes or the Bureau of Indian Affairs are to be transmitted to the court and incorporated into the ICWA section of the Safe Family Home Report.
- Clarification on roles and responsibilities of those involved in complying with ICWA. When the applicability of ICWA is indicated at the time the petition is filed, the Deputy Attorney General's office automatically generates ICWA notices. Additionally, the attorney general's office reviews birth certificates for Native American/Alaska Native ancestry and written and oral reports of any claim of Indian heritage from the families. Responses are then received by the attorney general's office and forwarded to caseworkers. Caseworkers are responsible for notifying the attorney general's office of any Native American ancestry and incorporating any responses received into the case plan and transmitting those responses to court. Staff at the attorney general's office have been reminded of their ICWA responsibilities. Further amendments have been made to the practice guidelines for the Safe Family Home Report to ensure staff incorporate into the ICWA section any responses received from notifications that were sent out, as well as transmitting the responses to court.

- Significant progress in developing a more expeditious system for CWSB to obtain birth certificates of children in foster care. This work has involved collaboration with DAGs-HHS and DOH to draft procedures, training, and an MOU between CWSB and DOH Vital Records for a procedure for CWSB staff to obtain birth certificates timelier. The system involves each section or unit identifying a birth certificate point-of-contact who would be responsible for submitting all requests. A workgroup will be convened to finalize the draft procedures and training will be provided to all staff in collaboration with DOH Vital Records staff. Once implemented, this system will allow CWSB staff immediate viewing access of a child's birth certificate and, among other benefits, will assist in informing workers of Native American ancestry very early in a case.

Most recently, Hawaii and the DAGs-FLD have collaborated to implement the use of the Parent's Statement of Indian Ancestry form. This form was developed as a tool to assist in identifying an American Indian child as early as possible, a requirement of ICWA. It allows the DAG's office to provide proper notification to the tribe to ensure the rights of the tribe are met. The form is for parents to complete to support active efforts to identify a child's status as an American Indian child. The role of the caseworker is to provide the Parent's Statement of Indian Ancestry form to parents at initial contact but no later than at the time of removal. Caseworkers are to support parents in completing the form by explaining its purpose and providing any needed support to answer the questions in the document.

Planning for the Next Five Years

CWSB continues to explore and identify further enhancements that can be made to strengthen its compliance with ICWA. One additional avenue being explored is to include documentation of ICWA inquiries within the information gathering phase of a safety assessment. In 2023, Hawaii received technical assistance from CBC to revise its safety assessment and tools to include queries into a child's Native American/Alaska Native ancestry. Hawaii is fortunate that this support from CBC will continue through 2024-2025 as the work on safety is ongoing.

Additional plans include collaborating with the DAG office to streamline the process of providing notification to tribes when an American Indian child has been identified. The guidance will include clarification on roles and responsibilities of CWSB staff and DAGs.

Hawaii is aware of the Notice of Proposed Rulemaking to add and revise data elements to help support states in reporting more detailed information related to ICWA's procedural protections to AFCARS. These additional data elements are

aimed at providing a more comprehensive picture of Native American and Alaskan Native experience within the child welfare system. Hawaii is in the beginning phases of learning about these proposed changes and how Hawaii may use this data to help promote and support policy development.

In September 2023, the Cultural Specialist position that had been filled was vacated by a staff member who resigned. Active efforts are being made to fill this position, which promotes culturally informed practices with CWSB, including ICWA compliance. Currently the area of ICWA is temporarily assigned to Hawaii's Family First Program Manager to ensure Hawaii's continued compliance and provide support to staff in meeting the federal requirements of ICWA.

3. Relative Placement Efforts

Using the DHS mission "To encourage self-sufficiency and support the wellbeing of individuals, families and communities in Hawaii," as a guiding principle, the State of Hawaii supports keeping families together when it is safe to do so. Hawaii's foster care system seeks to prevent placement into foster care, and when safety concerns necessitate foster placement, foster care is viewed as a temporary arrangement with reunification to a newly equipped family in a safe home as the ultimate goal. When removal is necessary, CWS recognizes the importance of placing children with relatives to maintain and enhance connections with extended family and culture. Placement with relatives often provides a more comfortable and less traumatic option for children taken into care. In Hawaii, relative placement is explored before non-relative placement is made, and Family Finding efforts may continue throughout the life of a case. As of June 13, 2024, there were approximately 530 relative resource caregiver licenses statewide, including individuals and married couples, caring for approximately 865 related children in foster care.

CWS strives to make the first placement the only placement and continues upfront efforts to identify potential relative placements through early Family Findings searches and attempts. Through these searches, CWS identifies relatives and provides a relative notification letter to inform and engage relatives as support and placement resources. To identify as many relatives that may support and a possible placement option for a child, CWS is diligently working on efforts to identify fathers early in the case since identifying fathers and their family members increases the pool of potential relatives available as placement options. An Ohana Conference is held for every child entering foster care, and initial and ongoing Ohana Conferencing provides a venue to identify and include relatives to discuss placement options and care needs of the child in care. *Please see section IV.A.1.e. Ohana Conferences for additional details.*

Hawaii continues to encourage participation in Two Makua (two families) meetings. Initially designed to address the needs of Native Hawaiian families, the use of this two-families model has been expanded to offer this support to all families working towards reunification. Two Makua works well to encourage resource caregivers and birth families to develop an engaged relationship that fosters mutual respect, continued parent connection/bonding, and support for the child's development and best interests.

Services like the Ohana Navigator Program are available for relative resource caregivers to support their availability and capacity to care for their relative in foster care. The Ohana Navigator Program focuses on helping to stabilize and maintain placement for these families. There are two components of the Ohana Navigator Program. The first is to provide a one-to-one supportive peer mentor and establish the relationship between seasoned resource caregivers (Peer Navigators) and new relative resource caregivers. The second component of the Ohana Navigator Program is to coordinate and provide social networking events and ongoing training opportunities to promote a greater connection to resource family networks and resources, recruitment, and Peer Navigator connections.

The relative resource caregiver (RCG) brochure has been translated into targeted languages (Marshallese, Chuukese, Tagalog, and Ilocano) to promote engagement, and explain the importance of relatives serving as resource caregivers and the process to become a resource caregiver. Contracted support services also include targeted training and support groups for the resource caregivers, adoptive parents, and legal guardians that are Marshallese and Chuukese.

Planning for the Next Five Years

CWSB recognizes that placement with relatives provides a child taken into care with familiarity and continuity that positively impacts the child's wellbeing. CWSB will continue efforts to identify and support relatives as resource caregivers and possibly first placements.

4. Adoption and Guardianship Promotion and Support Services

Hawaii receives three funding sources to promote and support adoption and guardianship services. These sources include Title IV-B2 funds, adoption incentive awards, and adoption savings. Hawaii utilizes all three funding sources to facilitate the goals of adoption and legal guardianship.

Title IV-B2 funds support contracts that serve families who are pursuing or have achieved adoption of a child. The adoption and legal guardianship incentive awards that Hawaii receives support Hawaii's Permanency Support Services (PSS) contract, which includes Permanency Strengthening Services (PSS), also known as adoption and

guardianship strengthening/support services, that are available to families who are working towards permanency and for those who have achieved permanency.

Historically, Hawaii has used adoption savings funds to provide post-adoption and post-guardianship services that support children living with their adoptive parents or their legal guardians, and children who reunified with their families. Other services have focused on stabilizing reunification and placements, preventing disruption, and preventing re-entry to foster care. Over the next five years, Hawaii plans to use adoption savings funds to support its community-based prevention programs, including its differential response systems, e.g., its voluntary case management (VCM) for children assessed with moderate risk of harm and its family strengthening services (FSS) for children assessed with low risk of harm.

a. Adoption and Legal Guardianship as Permanency Options

The following goals (listed in order of priority) for children include the provision of timely legal permanence through:

- Maintenance with birth families [with services] in a safe family home;
- Reunification with birth parents in a safe family home within 12 months;
- Adoption by relatives within 24 months;
- Legal guardianship to relatives within 18 months;
- Adoption by non-relatives within 24 months;
- Legal guardianship to non-relatives within 24 months; or
- Another Planned Permanent Living Arrangement (APPLA).

Adoption is the preferred permanency goal when reunification is not appropriate. When parents have been unable to reunify with their child and adoption is deemed not to be the appropriate goal, legal guardianship may be considered as a permanent goal for the child.

Data and Discussion

Over the last five years, the number of children achieving reunification has decreased from 61% in 2019 to 54% in 2023. During the same period, adoptions increased from 16% to 21% and legal guardianships increased from 15% to 17%.

The overall reduction in the short stayer population from 2019 to 2023, may explain why reunification has decreased. Over the past year, Hawaii has been reviewing short stayer data and developing priority strategies to address the reasons for these children coming into care; based on these efforts, Hawaii has seen an overall decline in the number of “short stayers,” i.e., children in care for 30 days or less. Children who remain in foster care beyond 30 days, had an average length of stay of 18.7

months during SFY 2023. Hawaii's differential response system requires that cases with safety concerns are referred to CWSB; therefore, CWSB serves children and families with higher and more complex needs, which may lead to children remaining in care longer. For these children in care, Hawaii works to achieve permanency through reunification, adoption, or legal guardianship.

Over the past five years, Hawaii has implemented several strategies to support adoption or legal guardianship as the permanency option. In 2023, procedures were implemented to provide guidance to staff in selecting between the permanency goals of adoption and legal guardianship. This guidance identifies factors to consider when determining the best permanency goals, including the child's best interest, long-term needs in and beyond childhood, bonds to individuals in the child's life, and overall needs for safety, permanency, and well-being. The guidance includes regularly assessing the appropriateness of the permanency goal at least every six months.

One of the goals of Hawaii's CFSR PIP3 was to improve permanency outcomes. To achieve this goal, concurrent planning brochures were created for parents and youth. The purpose of the brochures was to provide full disclosure, to support engagement from the beginning of the case, and to support concurrent planning discussions. In addition, early and consistent quarterly Ohana Conferences (OCs) were implemented, and concurrent planning was added as an agenda item in OCs.

CWSB continues to collaborate with Wendy's Wonderful Kids (WWK) in locating "forever homes" for youth in foster care. To aid in finding permanent homes, the Wendy's Wonderful Kids (WWK) Program adoption recruiter from Family Programs Hawaii (FPH) engages with the child and individuals involved in the child's case, and collaborates with other agencies to promote permanency with relatives. The recruiter actively seeks potential permanent families for children in foster care, with CWSB demonstrating its commitment by referring cases and granting access to case records. Typically, the children involved are teenagers, children with special needs, and sibling groups for whom finding permanent placements is challenging. Since 2012, WWK has received 112 referrals resulting in 32 adoptions, 15 legal guardianships, and nine reunifications with the child's biological family.

Hawaii recognizes the value of WWK and will continue making referrals to the FPH WWK Recruiter to facilitate finding permanent placements.

Over the next five years, CWSB will, through implementation of FFH, continue to review its data and placement and prevention efforts and will make early referrals of families, as appropriate, to post-permanency support services as an ongoing source of support.

b. Permanency Support Services

CWSB recognizes the importance of providing supportive services to families who have achieved adoption and guardianship to help stabilize placements and enhance caregivers' skills when they are challenged with caring for children with special needs and/or who have experienced trauma. Hawaii's Permanency Support Services contract includes Permanency Strengthening Services (PSS), also known as adoption and guardianship strengthening and support.

The purpose of PSS is to enhance the stability of adoptions and legal guardianships for children and families in Hawaii. The goals of this work include:

1. Providing family support through community-based services designed to enhance child development; increase parents' competence and confidence in their parenting abilities; strengthen parental relationships; afford children a safe, stable, and supportive family environment; and increase family strength and stability.
2. Preserving families at-risk or in crisis through pre-placement preventive programs, e.g., intensive family preservation, to help children at risk of foster care placement remain safely with their families; provide follow-up care to families who have been reunified with a child after foster care placement; and improve parenting skills regarding child development, nutrition and health, budgeting, coping with stress, and other areas of need.
3. Promote and support adoption and legal guardianship through pre- and post-permanency services and activities to support and expedite the adoption and legal guardianship process and support adoptive families and legal guardianships.

Past Five Years to Present

In SFY 2023, fewer than 10 families statewide were referred to PSS; all received only information and referral services. Over the past five years, referrals have remained consistently low.

In addition to PSS, there are a variety of services available to families within their communities that they may be connected to while they are working towards permanency, as well as after case closure or as needs arise. In addition to these services, families can be connected to the WARM line, Hawaii's Kinship Navigator Program, and the Department of Health's Child and Adolescent Mental Health Division (CAMHD) for more targeted support. The WARM Line's target population includes legal guardianship, pre-adoptive, adoptive, and post-adoptive families. It

provides services to support and strengthen the bond between caregiver and child and enhances the caregiver's skills to meet the child's needs. Hawaii's Kinship Navigator program also assists caregivers in navigating available services by providing information and referrals and explaining eligibility requirements.

CWSB has developed a strong working relationship with community resources, such as CAMHD, to ensure that an array of quality services is available to support families with children with complex needs. Services include, but are not limited to, intensive case management services, additional resources through CAMHD contracts with private providers, and an array of mental health treatment services to meet a youth's specific needs.

Planning for the Next Five Years

CWSB is considering ways to promote awareness and increase utilization of PSS. One option under discussion is to make the current PSS brochure more engaging by collaborating with LEAG to develop more family friendly language. In collaboration with its contracted provider, CWSB is also developing a PSS training for CWSB sections to promote awareness and utilization of PSS.

In the past year, Hawaii reprocured its PSS contract. Through this re-procurement, PSS services will be enhanced by incorporating Hawaii's FFH plan and expanding the service array to include the use of evidence-based services. CWSB believes that by enhancing the service array, the needs of adoptive and legal guardianship families will be better served as many youth have complex needs.

c. Family First Hawaii

Hawaii's FFH implementation plan includes developing a pathway for Permanency Strengthening Services. Hawaii recognizes that there is a need to develop this pathway to better support the complex needs of youth who are in care.

CWSB is committed to supporting its children and families to achieve successful outcomes and recognizes that children involved with CWSB have experienced trauma that may manifest later in life. CWSB is therefore committed to ensuring that families have the adequate training, skills, tools, and resources to be successful permanent families at the time that permanency is achieved, or later as needs arise.

d. Inter-country adoptions

Over the last five years, there have been no children adopted from other countries who entered state custody because of a disrupted adoptive placement or the dissolution of their adoption.

Hawaii uses the code “DIA” (Disrupted/Dissolved International Adoption) to identify children who are adopted from other countries and enter state custody because of the disruption of a placement for adoption or the dissolution of an adoption.

Hawaii is aware of its responsibilities to work with the U.S. State Department and to ensure compliance with the Hague Convention on the Protection of Children and Cooperation in Respect of Intercountry Adoption.

If there is a report of suspected child abuse or neglect involving an inter-country adoption, CWSB would respond in the same manner it responds to any report of suspected child abuse or neglect. Per Hawaii Revised Statutes (HRS) §350-1, child abuse and neglect is defined as involving “any person, who, or legal entity which, is in any manner or degree related to the child, is residing with the child, or is otherwise responsible for the child’s care.” HRS §587A-11 mandates that the department investigate a report of suspected child abuse/neglect. In addition to birth families, these reports may include RCGs, pre-adoptive caregivers, adoptive caregivers, and legal guardians. Hawaii works with the family to help support and address their needs.

PSS services are available to those families who have achieved permanency through an inter-country adoption.

5. Adoption Savings

Hawaii continued to leverage its Adoption Savings funds to support services aligned with the vision of “The people of Hawaii are thriving” as implemented through services focused on stabilizing reunification and placements, preventing disruption, and preventing re-entry to foster care. These services and supports include community-based prevention programs like differential response systems, e.g., voluntary case management (VCM) for children assessed with moderate risk and family strengthening services (FSS) for children assessed with low risks.

Planning for the Next Five Years

Hawaii may expand the use of Adoption Savings to support post-adoption and post-guardianship services to support children living with their adoptive parents, legal guardians, or family.

B. UPDATES, GOALS, MEASURES, PROGRESS, AND ACTION STEPS

1. Permanency Outcome 1: Permanency and Stability

CFSR Item 4: Stability of foster care placement

Refer to the 2024 Hawaii APSR Data Booklet, Figure 62 for a chart of the SFY 2019- 2023 five-year rating for this item.

SFY 2022: 61 Cases Reviewed
51 Strengths, 10 Areas Needing Improvement

Purpose

This item is 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).

Summary

In 51 of 61 applicable cases (or 84%), children in foster care either remained in one stable placement during the period under review or changed placement to meet their needs for permanency and/or best interest. Placement with relatives and support to the resource caregiver (RCG) contributed to placement stability.

Ten cases (or 16%) were rated as needing improvement.

- In three cases, placement changes for the child were not for the purpose of achieving the child's case goals or meeting their needs.
- In eight cases, the child's current or most recent placement was not stable at the time of the review.
 - In six cases, the child was in an emergency shelter.

Discussion

CWSB continues diligent upfront efforts to make the first placement the only placement through early Family Findings searches and attempts to hold Ohana Conferences for every child entering foster care. From SFY 2019 to SFY 2023, CWS placement stability has fluctuated between 83.9% and 87%, with SFY 2023 at 84%. CWSB will work on developing and enhancing the Kinship Navigator Program by providing targeted support services to relatives and by assisting with the licensing process, which has been shown to contribute to placement stability.

CFSR Item 5: Appropriate and Timely Permanency Goal

Refer to the 2025 Hawaii APSR Data Booklet, Figure C5: Item 5 for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

Summary

60 Cases Reviewed

39 STRENGTHS, 21 AREAS NEEDING IMPROVEMENT

Purpose

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

In 39 of 60 applicable cases (65%), the child's permanency goal was identified timely and was appropriate to the needs of the child.

- In 51 cases (85%), the goals were established timely.
- In 49 cases (82%), the goals were appropriate to the child's needs and circumstances of the case.
- In 28 of 30 applicable cases (92%), the agency either filed or joined a termination of parental rights petition in a timely manner or an exception applied as documented in the Safe Family Home Report.

21 cases (or 35%) were rated as needing improvement. Factors that contributed to this rating were lack of contact with parents and/or efforts to locate and engage parents in services. Additionally, ongoing discussions with children and parents on permanency did not occur.

- In nine cases, the identification of concurrent goals for the child did not occur until more than six months after the child's removal and in other cases until more than a year had passed.
- In 11 cases, the goal in effect was not appropriate to the child's need for permanency and to the circumstances of the case.
- Reunification was still identified as the goal, despite the following factors: a lack of efforts by the caseworker to locate parents, infrequent caseworker contact with parents, and parents were not engaging in services. Additionally, reunification remained the goal even when not likely to happen, e.g., due to a parent's incarceration or when parents were facing criminal charges.
- In two cases, a TPR motion was not filed timely, an exception did not apply, or a compelling reason was not documented.

Discussion

CWSB practices that have contributed to a strength rating for this item include:

- Early identification of the concurrent goal within 60 days or up to several months after removal,
- The goal of reunification is always identified within a few days of removal,
- The tracking of timelines by the Court and/or CWSB ensures timely filing of TPR, and
- Clear documentation of goals in the Safe Family Home Report and/or court orders

Over the past five years, Hawaii has worked diligently to improve outcomes in this item with strength ratings increasing from 42% in SFY 2020 to 65% in SFY 2023. The highest rating of 81% was achieved in SFY 2022. Based on the increase since SFY 2020, Hawaii believes that the strategies implemented through its PIP3 are effective in supporting the goal of achieving timely permanency. Ongoing refresher trainings may reinforce the benefits of starting concurrent planning early in the case, if not from the first day of the case. In addition, continuing to include permanency as a regular agenda topic in meetings with court stakeholders will promote a shared understanding and responsibility for permanency outcomes, implementation of concurrent planning, and other related topics. Another successful PIP3 permanency strategy has been the development and implementation of a supervisory tool that prompts discussion and review of the child's permanency goal and its appropriateness for the child.

In the past, barriers to this item being rated an area needing improvement include staff are not sure when adoption rather than legal guardianship is the appropriate permanency goal, and the concurrent permanency goal is not activated—even when reunification is no longer appropriate--due to infrequent assessment of the permanency goal. Efforts to support staff in these areas have been initiated. In 2023, procedures were implemented to support staff when selecting between the permanency goals of adoption and legal guardianship. Guidance on these procedures identifies factors to consider when determining the best permanency goals for a child, e.g., the child's best interests, long-term needs during and beyond childhood, the child's bonds to other individuals, and the child's overall needs regarding safety, permanency, and well-being. The guidance also includes regularly assessing the appropriateness of the permanency goal at least every six months.

Plans for the Next Five Years

Hawaii is continually reviewing and assessing its practice to identify areas for improvement. One area CWSB continues to prioritize is ongoing face-to-face contact.

CWSB recognizes the important role that regular and meaningful contact plays in successful outcomes and casework practice. When parents are not seen or engaged, discussions about permanency do not take place to ensure the most appropriate current goal for the child.

To ensure discussions about permanency are occurring and that permanency is being pursued, strategies that target locating and engaging parents are key.

During Hawaii's PIP3, structured monthly supervision meetings between workers and their supervisors were implemented. Overall feedback on these meetings has been positive. CWSB has discussed revisiting this strategy so that supervision includes a review and discussion of efforts to locate parents and the occurrence of monthly caseworker visits.

In addition, a previously created document by the Hawaii Child Welfare Continuous Quality Improvement Project (HCWCQI) team on compelling reasons was developed to serve as a job aide during case reviews to assess the appropriateness of the permanency goal. CWSB will explore how this tool can be incorporated into casework practice and supervision.

Continued collaboration with the court promotes a shared responsibility for permanency and the court's role in supporting the assessment and identification of the appropriate permanency goal for a child.

Item 6: Achievement of reunification, guardianship, and adoption goals

Refer to the 2025 Hawaii APSR Data Booklet, Figure C6: Item 6 for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

61 cases Reviewed
25 STRENGTHS, 36 AREAS NEEDING IMPROVEMENT

Purpose

This item is to determine whether concerted efforts were made or are being made, during the period under review, to achieve reunification, guardianship, adoption, or another planned living arrangement (APPLA) in a timely manner.

Summary

In 25 of 61 applicable cases (41%), reunification, guardianship, adoption, or APPLA was achieved or was likely to be achieved timely. In these cases, when reunification was the goal, there were frequent and quality monthly caseworker visits with parents,

caregivers, and children. Relative placement and early concurrent planning were also evident in these cases.

36 cases (59%) were rated as needing improvement. In all cases, the goals of reunification, guardianship, adoption, or APPLA were not or would not be achieved within federal timelines; inadequate face-to-face contact with families was the main contributing factor.

- Of the applicable cases, at the time of the review or recent case closure, children were in foster care:
 - Less than 12 months: 26 children
 - 13 – 24 months: 19 children
 - 25 – 36 months: 9 children
 - 37+ months: 7 children
- In 14 cases, there was insufficient caseworker contact with the child, parents, and RCG, which served as a barrier to engagement and case planning. Meaningful discussions with parents regarding permanency occurred infrequently.
- In seven cases, there was a lack of urgency to achieve permanency. Children were residing in the same home for years, but ongoing discussions had not happened. Delays were noted in the ICPC process, completing the home study, establishing paternity, and filing a motion for TPR.
- In three cases, reunification could have been achieved earlier.

According to the Hawaii CFSR4 Data Profile, Hawaii ranks above the National Performance (NP) in achieving permanency between the 12-month to 23-month in foster care (53% RSP or Risk Standardized Performance compared to the NP of 43.8%). In addition, Hawaii is performing at the same rate nationally for achieving permanency in 12 months (35.3% RSP vs 35.2NP) or beyond 24 months (37.3% NP vs 40% RSP). Refer to the Hawaii CFSR4 Data Profile - AFCARS and NCANDS submissions as of 12-21-22.

Discussion

Although Hawaii's performance is similar to that of national performance, CWSB still looks for opportunities to improve on this item.

Over the past five years, Hawaii has implemented a number of strategies to support positive outcomes in this area. Some of the strategies were a part of Hawaii's PIP3 and others have served to further support positive outcomes. These include:

- Revisions to the Safe Family Home Report include adding information on activities that promote concurrent planning early on and throughout case

planning with the family, on ensuring clear documentation of the concurrent plan and efforts to achieve the concurrent plan, on safety assessment and decisions, and on identifying reasonable efforts.

- Development of a concurrent planning brochure for parents and youth to support engagement from the beginning of the case, full disclosure, and concurrent planning discussions.
- Revisions to the monthly caseworker visit form to include a section documenting the caseworker's discussion with each child and parent on the permanency options, preferences, and progress.
- Early and consistent quarterly Ohana Conferences (OCs) and the inclusion of concurrent planning as an agenda item in OCs.
- Ongoing collaboration with the Hawaii Department of Health (DOH) to develop a more expeditious system for CWSB to obtain birth certificates of children in foster care. This work has involved collaboration with Department of Attorney General's – Health and Human Services Division (DAG-HHS) and DOH to draft procedures, training, and a Memorandum of Understanding (MOU) between CWSB and DOH Vital Records establishing a procedure for CWSB staff to timely obtain birth certificates. These efforts ensure early identification of paternity and other child-related information, which support engagement and decrease barriers to achieving timely permanency.
- Continued collaboration between CWSB and the Department of the Attorney General, Family Law Division (DAG-FLD) have provided opportunities to discuss permanency, barriers, and strategies to increase positive outcomes.
- Implementation of the Parent's Statement of Indian Ancestry form. This form was developed by DAG-FLD as a tool to assist in identifying an American Indian child as early as possible, a requirement of ICWA. It allows the DAG-FLD office to provide proper notification to the tribe to ensure the rights of the tribe are met. The form, completed by parents, supports active efforts to identify a child's status as an American Indian child. The role of the caseworker is to provide the Parent's Statement of Indian Ancestry form to parents at initial contact, but no later than at the time of removal. Caseworkers are to support parents in completing the form by explaining its purpose and providing any needed support to complete the document.
- Restructuring of the Administrative Review Panel (ARP). The ARP is team comprised of representatives from CWSB leadership and Hawaii Child Welfare Continuous Quality Improvement Project (HCWCQI), who meet with the

caseworker and supervisor to discuss, review, and provide support when unusual or challenging situations arise in active cases. Many of the ARPs concern children placed permanently with a non-relative caregiver. Historically, the practice had been to bring these cases to an ARP when permanency is close to being finalized. If the ARP determined that additional efforts need to be made to locate relative placements, this could delay permanency. In recognition of the potential delays to attaining timely permanency, revisions to this practice were made so that these cases are reviewed earlier to help support timely relative placement.

- Implementation of monthly supervision and a structured supervision tool to support monitoring and tracking timelines to ensure permanency is being actively pursued.
- Development of an “efforts to locate checklist” that would serve as a tool for CWSB staff to engage parents who may not be actively involved in their case.

Planning for the Next Five Years

Hawaii continues to search for ways to improve on this item.

A key relevant practice area involves engagement of parents, children, and resource caregivers (RCGs) through quality monthly visits. Recent discussions have identified existing tools that can be expanded to improve outcomes in this item, as well as exploring new strategies to employ.

In 2020, CWSB revised its monthly caseworker visit form to improve the quality of caseworker visits. An electronic version of this form was piloted in the West Oahu CWSB section and there is consideration being given to expanding use of the electronic form statewide. Although there have been some challenges with the form in the field due to connectivity issues, a technology refresh is currently underway and a new supply of replacement computers is scheduled to arrive in 2024-2025; CWSB believes that this new equipment will support continued use of the electronic version of the form. In addition, the much-anticipated CCWIS system is expected to further address connectivity issues.

One of the goals of Hawaii’s PIP3 was to improve supervision through key activities including providing coaching training and developing and implementing supervision guidelines and tools. CWSB will look at revisiting this strategy to see how supervision can be strengthened. Through regular and consistent supervision, which includes tracking cases, monitoring the length of time in care, tracking monthly visits, and ensuring coverage of cases when staff are on extended leave, case direction can be influenced to ensure timely permanency is achieved.

Hawaii's New Hire Training includes an engagement module that focuses on concepts and skills to work with parents, children, and RCGs, and building relationships. In collaboration with Parent Partners, strategies on how to engage children from toddlers to teens and adults are covered, which provide the foundation for discussing concurrent planning and permanency through courageous conversations. Through the implementation of Family First Hawaii (FFH), Hawaii has learned the importance of providing ongoing refresher training and guidance to staff, as well as employing strategies to support the implementation of new tools and practices. Hawaii will consider reviewing how the concepts and skills covered in training are being applied in practice to see whether additional supports should be provided to strengthen CWSB workers' confidence in their ability to discuss concurrent planning and permanency. CWSB may also review various tools and job aides, e.g., the concurrent planning parent and youth brochures, to see how they are being used by caseworkers to support discussions on permanency and, if needed, to provide more guidance to caseworkers.

2. Permanency Outcome 2: Continuity of Family Relationships

CFSR Item 7: Placement of Siblings

Please refer to the 2025 Hawaii APSR Data Booklet, *Figure C7: Item 7 – Placement of Siblings* for a graph of the SFY 2019-2023 five-year strength rating for this item.

39 Cases Reviewed

36 STRENGTHS, 3 AREAS NEEDING IMPROVEMENT

Purpose

This item is to determine if, during the period under review, 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.

Summary Of Data

In thirty-six of thirty-nine applicable cases (or 92%), siblings in foster care were either placed together or siblings were placed apart due to special circumstances. In thirteen cases, siblings were placed together. When children were not placed together, circumstances for the separation included their specialized behavioral needs, treatment needs, specialized medical care, children's preferences, different fathers, and connections with relatives who were caring for them prior to entering care.

Three cases (or 8%) were rated as needing improvement. In two of these cases, siblings were initially placed apart due to a lack of available homes, and efforts to find

placements that could accommodate the sibling group were needed. In one case, placement together needed to be revisited after sibling behaviors stabilized.

Discussion

Past Five Years

In *Figure C7: Item 7 – Placement of Siblings*, one can see that Hawaii has consistently performed well on this item over the last five years. The lowest strength rating on this item in the past five years was 88% in SFY 2021, with the highest rating of 97% in SFY 2020. This superior performance is especially impressive when considering that families in Hawaii tend to have large numbers of children.

All CWS staff are trained on the importance of placing siblings together and of sibling connections more broadly. When recruiting resource families, Hawaii is always searching for families that are open to accepting large sets of siblings.

In the past couple of years, Hawaii has dedicated additional efforts to sibling connections, because children in foster care and youth and young adults formerly in foster care perpetually name sibling connections as the most critical issue to them. CWSB Administrators have been meeting monthly with leaders from two key community social service agencies that have a focus on sibling connections, EPIC Ohana (EPIC) and Family Programs Hawaii (FPH). The group has been developing a Guide to Sibling Connections for Hawaii CWS.

From July 2022 to June 2023, Hawaii was part of a national Data for Equity and Action (D4EA) Laboratory, sponsored by the Center for the Study of Social Policy, Casey Family Programs, Mathematica, and ACF. The purpose of the lab was to increase jurisdictions' capacity to use demographic data to increase equity within their CWS systems. In the D4EA, Hawaii decided to focus on sibling connections, based on its priority for youth in care.

Based on point-in-time data from December 2022, there were 277 sibling sets in foster care, representing 758 children. Of the 277 sibling sets, 163 had at least one sibling that was Native Hawaiian or part Native Hawaiian. The remaining 114 sibling sets consisted of non-Native Hawaiian children. In the group of non-Native Hawaiian sibling sets, 51% had all siblings placed together. In the group of Native Hawaiian sibling sets, 53% had all siblings placed together. This difference is not statistically significant. This seems to show that for this data set, there is no disproportionality. Native Hawaiian siblings are placed together and apart at approximately the same rates as non-Native Hawaiian children. However, the separation of siblings in foster care still affects Native Hawaiian

families disproportionately more for two reasons: 1) there are disproportionately more Native Hawaiian and part Native Hawaiian families involved in CWS and 2) Native Hawaiian families are more likely to have sibling sets and larger sibling sets than non-Native Hawaiian families.

The Hawaii D4EA Team continued to meet and worked on the issue through December 2023. The Hawaii D4EA Team was successful in:

- Creating and distributing a resource list and tips for line staff regarding sibling connections;
- Designing a data report to show siblings placed apart;
- Adding sibling visits/contact to Monthly Worker Visit Form and Supervisor Guidelines Form; and
- Mapping out steps for the creation and implementation of a sibling visits, contact, and connections policy.

To continue the efforts and complete the policy, the mapping mentioned in the last bullet above is being passed on to the group creating the Guide to Sibling Connections; this group continues to meet monthly.

Planning for the Next Five Years

CWSB Administrators, EPIC, and FPH will continue to meet to discuss this important issue. Hawaii plans to release the Guide to Sibling Connections within the next year. CWS will provide a new data report to its staff which will show where there are separated siblings and therefore connection efforts are needed. As CCWIS rolls out, tracking sibling placements will be easier. Within the next five years, Hawaii will implement policies regarding sibling connections to include requirements for weekly face-to-face visits for siblings placed apart. Resources are needed to successfully implement such a policy.

Item 8: Visiting with parents and siblings in foster care

Refer to the 2025 Hawaii APSR Data Booklet, Figure C8: Item 8 for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

47 Cases Reviewed

19 STRENGTHS, 28 AREAS NEEDING IMPROVEMENT

Purpose

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 mother, father, and siblings is of sufficient frequency and quality to promote continuity in the child's relationship with these close family members. (Only parents from whom the child was removed and with whom the child could be reunified are assessed for this item.)

Summary

In 19 of 47 applicable cases (40 %), the child in foster care was provided with opportunities for quality visits with parents and siblings to ensure that the child had continuity in relationships with family members. In many of these cases, visitation was facilitated by the resource caregiver, the DHS aide, or the contracted provider. The caseworker knew about the quality of visits because of documentation from the visitation supervisor or through discussions with the parent, child, or RCG.

28 cases (60%) were rated as needing improvement. Efforts were needed to locate parents, set up visitation, and monitor the frequency and quality of visits. Barriers to visits were not consistently addressed.

- In 17 cases, concerted efforts were needed to ensure sufficient frequency of visitation for mothers and their children.
 - In eight of these cases, the child did not have any visits with the mother.
- In 12 cases, concerted efforts were needed to ensure sufficient visitation for fathers and their children.
 - In eight of these cases, the child did not have any visits with the father.
- In seven cases, concerted efforts were needed to ensure sufficient visitation with siblings. In some cases, the visits were combined with parent-child visits and did not consistently occur if the parents did not attend.

Discussion

CWSB has made great efforts to improve its performance on this item, despite the competing demands of this work. CWSB understands and values the importance of ohana time (visitation) to maintain connections and to build relationships for the well-being of the children and family and to promote safe reunification. During the pandemic, CWSB followed all COVID recommendations and policies and worked with staff, resource caregivers (RCGs), providers, CWSB families, and young people to ensure meaningful connections among family members by implementing virtual ohana time

and safe in-person contacts. Notwithstanding these efforts, the following barriers may contribute to the decline in ratings:

- Infrequent caseworker contact with children and parents.
- Inadequate efforts to locate parents.
- Missed opportunities to provide sibling contacts. When parent and sibling visits are scheduled concurrently and parents are unable to keep their visit, the sibling visit is also cancelled.
- When RCGs coordinate and supervise ohana time, caseworkers often do not monitor the visit, which is a missed opportunity to develop case plans and assess case direction.
- Lack of ongoing assessments to determine appropriate conditions or level of ohana time, which may affect the frequency and kind of visits, e.g., unsupervised visits, necessary to support reunification.
- When children are in care for 30 days or less, visits between the child in care and their parents and/or siblings are often not arranged.

CWSB has noted some positive strategies, utilized in some CWSB sections, to promote frequent and quality visits, which are critical in supporting family reunification. CWSB meetings and Management Leadership Training meetings are venues that may be used to facilitate discussions on these effective strategies, which include the following:

- Increase consistent monthly contacts with children and parents through the use of tools, including but not limited to the Caseworker Monthly Visit Form and section trackers.
- Enhance efforts to locate parents through the use of the Efforts to Locate checklist for parents.
- Increase efforts to arrange ohana time or other forms of contact for incarcerated parents.
- Arrange and monitor the frequency and quality of ohana time and create a plan that all team members can follow to ensure ohana time occurs. Such plans can also provide structure and substance to ohana time and help parents appropriately engage with their children by providing opportunities to practice new skills and facilitate bonding.
- Engage relatives and resource caregivers to support ohana time and contacts. This can be accomplished through referrals to Two Makua and Ka Pili Ohana programs that promote “shared parenting.”
- Address barriers to ohana time, which may include lack of transportation, parent incarceration, and geographic separation. Possible ways to ameliorate barriers include securing financial resources to support use of public transportation, collaborating with institutions to develop processes that permit and/or

encourage ohana time in prisons, and using alternative means to maintain connections, e.g., through virtual resources or written communication.

- Increase documentation of quality and frequency of ohana time. When ohana time is adequately monitored and documented, caseworkers can ensure that it is of sufficient quantity and quality to support an appropriate case direction.
- Conduct frequent, regular assessments, which could support a decision to adjust the level and type of ohana time when there are no safety concerns and reunification is therefore appropriate.

Item 9: Preserving connections

Refer to the 2025 Hawaii APSR Data Booklet, Figure C9: Item 9 for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

60 Cases Reviewed

48 STRENGTHS, 12 AREAS NEEDING IMPROVEMENT

Purpose

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

Summary

In 48 of 60 applicable cases (80%), children were maintained in the same community and connected to culture, school, family (including adult siblings, grandparents, and cousins), sports, and friendships. In 50 cases (83%), a sufficient inquiry was conducted to determine whether a child might be a member or eligible for membership in a federally recognized Indian tribe. In four of eight applicable cases, the Tribe was provided timely notification.

12 cases (20%) reviewed were rated as needing improvement.

- In nine cases, concerted efforts were needed to keep the child's important connections. Often, connections were not identified or recognized by the caseworker.
 - In four of these cases, the child did not have connections to community/friends that were important to them.
 - In two of these cases, the child had prior relationships with extended relatives, and these connections were not maintained.

- In three of these cases, connections were not identified or assessed by the agency.
- In 10 cases, concerted efforts were needed to determine whether the child was a member or eligible for membership in a federally recognized Tribe.
 - In four of these cases, there was evidence of Native American ancestry for the child. Timely notification was not made to the Tribe.

The Past Five Years to Present

Over the past five years, CWSB has demonstrated a continued focus on strengthening and maintaining the critical bonds and connections in a child’s life while the child is in foster care. This commitment continues through today and is evident in CWSB’s partnerships with schools, Judiciary, UH law school, contracted and community partners, including but not limited to EPIC Ohana and Liliuokalani Trust, and many other community entities in the collaborative Na Kama a Haloa. Hawaii appreciates the voices of its lived-experience partners, including birth parents, relatives, and young people which have impacted the hearts and minds of the CWSB community and reinforcing the importance of connections and family.

Many of the programs that have been discussed throughout various sections of this report highlight the values of collaboration, ohana, culture, and relationships, all of which are integral to preserving connections. Two Makua and Ka Pili Ohana are two ongoing collaborations to strengthen the parent and Resource Caregiver (RCG) relationship and enhance cultural identity and healing. Na Kama a Haloa’s Hui Makua and Hui Fostering Connections collaborations focus on maintaining permanent connections for Hawaiian children in care. Hui Pilina in the Na Kama collaboration has a focus on sibling connections.

Between SFY 2020 – SFY 2023, Hawaii has improved from a 69% to 80% strength rating. Hawaii did experience a slight decline between SFY 2022 and SFY 2023 but continues to perform above the national average. The ongoing practice of automatic referral of families for Ohana Conferencing and Family Finding has contributed to Hawaii’s high performance in this area. Ohana Time’s goal of enriching connections with biological family members has greatly assisted Hawaii in reducing the amount of time a child spends in foster care and supporting the child’s emotional health.

Most recently, Hawaii and the DAGs-FLD have collaborated to implement the use of the Parent’s Statement of Indian Ancestry form. This form was developed as a tool to assist in identifying a Native American child as early as possible, a requirement of ICWA. It is believed that this form will assist in ensuring that concerted efforts are made to determine whether the child is a member or is eligible for membership in a federally

recognized Tribe (*Refer to Section IV.A.2.d for further information on the Parent Statement of Indian Ancestry form*).

Planning for the Next Five Years

CWSB continues to look for ways to preserve the child's connections to their neighborhood, community, faith, extended family, tribe, school, and friend.

Additional strategies that may uplift the practice and ratings include:

- Increasing and maintaining monthly contacts with children and parents.
- Enhancing assessment efforts of the child's important connections through authentic engagement (community, same school, friends, family, culture, Tribe, extended family).
- Identifying and maintaining the child's connections to family, school, activities, peers, culture, community, faith, and Tribe they had before entering care.
- Arranging contact with extended family members.
- Providing information and support to RCGs regarding the child's culture and needs.
- Helping to coordinate with RCGs to promote contact between siblings and other family members.
- Enhancing efforts for promote "Shared Parenting" between RCGs and Birth Parents through referrals to Two Makua and Ka Pili Ohana, as appropriate.
- Placing with relatives.
- Consulting with Parent Partner agencies to assist with connections and possibilities for contacts.

CWSB is collaborating with Department of Education (DOE) to provide a joint training to school and complex level foster care Points of Contact, and school principals, as well as CWSB staff, on educational stability, including the Best Interest Determination (BID) meeting process. There is also consideration to including CASAs and GALs in the training. Ensuring youth in care are able to remain in their school of origin is an important component of preserving connections.

Item 10: Relative Placement

60 Cases Reviewed

50 STRENGTHS, 10 AREAS NEEDING IMPROVEMENT

Purpose

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

Summary

In 50 of 60 applicable cases (or 83%), children were placed with relatives (34 cases), and concerted efforts were made to place children with relatives. The concerted efforts included: identification of relatives at the time of removal for immediate placement; relative searches through EPIC to identify and locate appropriate relative placement; and letters sent to relatives by EPIC informing them that the child(ren) were in foster care.

Ten cases (or 17%) were rated as needing improvement.

- In six cases, concerted efforts were needed to pursue maternal relatives for placement during the PUR.
 - In two cases, relatives were not identified.
 - In three cases, relatives were not informed.
 - In two of these cases, relatives were not evaluated for placement.
- In 10 cases, concerted efforts were needed to pursue paternal relatives for placement during the PUR.
 - In two of these cases, relatives were not identified.
 - In one case, the contracted provider did not conduct family findings because paternity was not established, and the department did not sufficiently conduct the findings.
 - In eight cases, relatives were not evaluated for placement.

Discussion

Although current data shows a decrease in relative placements from last year, Hawaii continues its efforts to make the first placement the last and only placement with preference given to relatives interested in providing care. As of June 13, 2024, there were approximately 530 relative resource caregiver licenses (includes individuals and married couples) statewide caring for approximately 865 related children in foster care. *Please see section IV.A.3. Relative Placement Efforts for additional information about relative placements.*

Item 11: Relationship of child in care with parents

Refer to the 2025 Hawaii APSR Data Booklet, Figure C11: Item 11 for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

34 Cases Reviewed

12 STRENGTHS, 22 AREAS NEEDING IMPROVEMENT

Purpose

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 mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation (Only parents from whom the child was removed and with whom the child could be reunified are assessed for this item).

Summary

In 12 of 34 applicable cases (or 35%), efforts were made to promote, support, and/or maintain positive relationships between the children and parents through activities other than just arranging for visitation. Ohana Conferences were helpful in coordinating activities to maintain relationships with parents and children. This was done by the caseworker informing and encouraging parents' participation in attendance at medical and dental appointments, school activities, sports activities, and after-school or community activities. Additionally, therapeutic interventions to help parents and child strengthen their relationship were offered. In six cases, the RCG (Resource Caregiver) played a significant role in supporting a positive relationship between parent and child. In three cases, transportation assistance was provided so the parent(s) could attend appointments and activities.

Twenty-two cases (or 65%) were rated as needing improvement. Parents were not encouraged or informed of opportunities.

- In 17 cases, efforts were needed to support the children's relationships with their mothers.
- In 11 cases, efforts were needed to support the children's relationships with their fathers.

Discussion

In the past five years, Hawaii has improved in this item going from a strength rating of 29% in SFY2020 to 35% in SFY 2023. Hawaii's strength rating peaked at 67% in SFY2022.

The improvements that Hawaii has been able to make in this item appear to align with the strategies that were implemented during the PIP3 on engagement. Concerted efforts were made to improve the frequency of monthly contact with parents using the monthly visit tracker tool which was reviewed in different settings and at different levels including but not limited to supervision and unit meetings and by CWSB. A focus was also placed on improving the use of Ohana Conferences by revising procedures to specify the frequency which they are held.

The COVID-19 pandemic also provided opportunities to be creative in promoting, supporting, and/or maintaining positive relationships between children in care and their parents or primary caregiver. The use of technology allowed parents to connect with their children virtually and continue activities such as reading books. It also promoted parents to write letters to their children. Hawaii recognizes that virtual contact does not replace in-person contact but it allowed for continued connections during the pandemic and has created additional opportunities that continue to be used presently to enhance contact and connections.

Frequent contact, awareness on the part of caseworkers and parents of opportunities outside of parent-child visitation and monitoring by CWSB when RCGs are primarily responsible for ohana time may support the parent child relationship.

Planning for the Next Five Years

CWSB will continue to review practice strategies and community partnerships to uplift and strengthen this item. Some of these activities may include:

- ensuring regular and quality monthly contacts with children, parents, and RCGs;
- expanding the use of the Caseworker Monthly visit form to assist workers and supervisors to maintain quality monthly contacts;
- expanding utilization of the locate parents checklist to improve efforts to locate parents
- offering and encouraging parent participation in activities beyond visitation including but not limited to appointments, school activities and conferences, community, sports activities, and hobbies;
- providing therapeutic opportunities to strengthen the relationship;

- increasing referrals to programs such as Two Makua Meetings and Ka Pili `Ohana (strengthens the Shared Parenting model and Cultural Engagement) to support parent - RCG relationships;
- encouraging RCG's to serve as mentors and role models;
- exploring strategies to improve documentation of efforts; and
- consulting with Parent Partner agencies for assistance in connections and other creative possibilities for ongoing contacts.

In collaboration with its contracted and community partners, as well as court stakeholders, Hawaii will continue to collaborate on projects and enhance and expand services that promote immediate connections and “shared parenting” between RCGs and parents, cultural engagement and healing, and partnerships with lived-experience experts and communities. These partners include Zero to Three (ZTT) Court, Project First Care, RCG support contract, EPIC Ohana “Two Makua/Two Parent” First meetings, Liliuokalani Trust’s Ka Pili Ohana, Na Kama a Haloa Hui Projects with birth parents and RCGs, and WRAP Parent Partners. All of the above-named partners have jointly contributed to strengthening the relationships between the children and their parents.

SECTION V. FAMILY ENGAGEMENT AND CHILD WELL BEING

A. PROGRAM AND SERVICE DESCRIPTIONS

1. Monthly Caseworker Visits

CWS staff understands the importance of monthly face-to-face visits with children and that frequent, quality contact between the worker and the child are key to successful casework and good case outcomes. Hawaii prioritizes monthly caseworker face-to-face visits with children.

Hawaii's CWSB procedures require caseworkers to have face-to-face contact with all children on their caseloads every month. These visits shall occur primarily in the home where the child is living. It is also important that some of the monthly visits with the child occur outside of the family home or resource home, so that the child has ample opportunity to candidly report any concerns about their caregivers and living situation. For all verbal children, during the monthly visit, the caseworkers shall meet with children alone, not in earshot of any sibling, caregiver, or parent to promote honest and private discussions. Each month, the caseworker shall address all of the following areas with the child, during their face-to-face time together:

- Child's physical health, including dental, vision, allergies, doctor's visits, medication, illnesses, conditions, and injuries;
- Child's mental health;
- Child's social needs;
- Child's educational needs;
- Child's daily routine;
- Child's relationships, visits, and contact with parents, siblings, relatives, caregivers, friends, teachers, and other key people in their life;
- Child's feelings of safety, comfort, and happiness in their current living situation;
- Permanency plans and child's desires regarding permanency; and
- Any service needs.

See Data Booklet, Figures 65-68 on the Worker Visit Survey. The data displayed in these four figures is from the annual federal Title IV-B Worker Visit Survey. In FFY 2019, due to limitations of Hawaii's data system, only a sample of children were reported in the survey; this sample was roughly 20% of the applicable children statewide. In FFYs 2020, 2021, 2022, and 2023, Hawaii reported on the entire applicable population of children in foster care.

Please note that the Worker Visit Survey data only includes children who were in foster care, whereas the CFSR Item 14 data includes children in foster care and children in in-home cases, including cases served by Voluntary Case Management (VCM), part of

Hawaii's Differential Response System (DRS).

The column titled “% of Visits” of *Figure 65: Worker Visit Survey Reporting Population, Months in Care, Caseworker Visits [Table]* and *Figure 66: Worker Visit Survey: Monthly Visits to Children in Care [Chart]* show Hawaii's continued struggle to meet the national standard of 95% monthly caseworker visits with children in foster care, over the past five years. It is encouraging to see that there appears to be sustained improvement from the 77.2% monthly case worker visits in FFY 2019 compared to 82% or higher in the four subsequent years. Some of the strategies outlined below and in *Section V.B.1. CFSR Item 14: Face-to-face contact with children* are responsible for the improvement and point toward continued progress. It is impressive that Hawaii has improved in this key performance area considering the high vacancy rate for caseworker positions, along with the rise in caseload. Vacancy rate and caseloads are discussed in *Section VIII.C. CWS Workforce*.

Hawaii has been more successful in consistently exceeding the national standard of 50% of caseworker visits with the child being in the home where the child is living. This data is shown in the column titled “% of In-Home Visits” in *Figure 65: Worker Visit Survey Reporting Population, Months in Care, Caseworker Visits [Table]* and in *Figure 67: Worker Visit Survey: Monthly Visits to Child's Home [Chart]*. Each year, Hawaii has exceeded the 50% standard, ranging from a low of 58% in FFY 2019 to a high of 72% in FFY 2021.

Figure 68: Worker Visit Survey: Reasons for Lack of Visit [Chart] provides the most useful data as it offers insight into the challenges caseworkers experience in visiting the children in their caseloads every month. Each year, when Hawaii gathers data for this survey, workers are asked for reasons why timely visits did not occur. The data in *Figure 68: Worker Visit Survey: Reasons for Lack of Visit [Chart]* is from caseworker self-reports. A more complete description of each coded reason is provided here.

a. No Documentation/Unknown

Reason for 796 (39%) missed visits out of a total of 2,039 missed visits in FFY 2023

For all missed visits that fall into this category, CWSB was unable to find documentation that a visit occurred or a documented reason for why the needed visit did not occur. In some cases, the caseworker who was assigned the case for the month(s) with the missed visit(s) in question no longer works for CWSB, so it was not possible to track down information. In other cases, where the caseworker is still working with CWSB, they could not find any notes and could not recall what happened that month. It is useful to note

that some of these visits likely occurred, but since Hawaii had no documentation to confirm a visit, it was marked as a missed visit.

In FFY 2023, 39% of missed visits fell into this category. The number and percentage of missed visits that fell into this category in FFY 2023 is less than in FFY 2021 of 49%, but significantly more than the 19% of missed visits in FFY 2022.

Through its last CFSR Program Improvement Plan (PIP3), Hawaii implemented two key strategies to help address this problem: 1) the Worker Visit Tracker and 2) structured monthly supervision meetings between workers and their supervisors. The Worker Visit Tracker in the SHAKA database allows caseworkers, supervisors, and administrators to easily view which required monthly face-to-face visits have and have not occurred each month. The Tracker pulls this data directly from the documented logs of contact in the CPSS database, thereby indirectly encouraging documentation of all visits. During structured monthly supervision meetings between caseworkers and their supervisors, the Tracker content is reviewed, and documentation challenges are addressed. Although the Tracker only monitors the occurrence of these visits, during the structured monthly supervision, supervisors also mentor caseworkers to improve the quality of their visits.

b. Workload

Reason for 529 (26%) missed visits out of a total of 2,039 missed visits in FFY 2023.

This encompasses all situations where the worker was aware of the needed visit, but could not make it happen that month, because of competing work demands, such as investigating a new intake, filing petitions, writing court reports, making referrals, developing case plans, attending Ohana Conferences, or visiting other children and parents.

The structured monthly supervision, mentioned above in *a. No Documentation/Unknown* helps caseworkers prioritize their conflicting demands, which directly addresses the workload problem. Also, caseworker vacancies and high caseloads contributed to this problem. Please see *Section VIII.C. CWS Workforce* for a discussion of both position vacancies and caseloads.

c. Scheduling Problems

Reason for 341 (17%) missed visits out of a total of 2,039 missed visits in FFY 2023

This category covers scheduling problems that arose for either the worker or the resource caregiver and child, examples include: caregiver not home at planned meeting time, worker is on sick leave or vacation, confusion about the time of the appointment, child is sick, child is truant, and worker and caregiver could not find a time that worked for both of them.

Use of the Worker Visit Tracker, in conjunction with structured monthly supervision, is helping to address this problem.

d. ICPC Issues

Reason for twelve (1%) missed visits out of a total of 2,039 missed visits in FFY 2023

When a child is placed in another state via ICPC, CWSB works to set up monitoring visits for that child in the new location with a local social worker. Unfortunately, the child is often placed in the new state without those arrangements being fully in place, and visits are then missed. Often during this gap period, the Hawaii caseworker will videoconference, call, and/or text the child to try to ensure their safety, but since the contact is not live face-to-face contact and the reason is not pandemic-related these are counted as missed visits.

One way that Hawaii has been working to address this problem is by workers more clearly expressing to judges their concerns about the judges prematurely ordering a child's placement in another state without visits being arranged in the receiving state to ensure ongoing safety.

e. Youth on the Run

Reason for 92 (5%) missed visits out of a total of 2,039 missed visits in FFY 2023

When a child in foster care runs away from placement, Hawaii follows a Missing Children protocol to work to find the child. Even if the caseworker is successful in having some contact with the child in a given month, if that contact was not face-to-face, this still counts as a missed visit. Hawaii surmises that this problem may be more pronounced in the State because the consistent warm weather allows people to live outside more easily.

With support from administration, caseworkers are learning and using a variety of social media platforms to track down and communicate with youth on the run in efforts to increase contact and ensure their safety. Additionally, staff are trained and mentored in engagement strategies and the use of trauma and healing informed care which Hawaii anticipates will aid in creating rapport between caseworkers and youth, thereby increasing communication and face-to-face visits, even when youth are living on the street.

f. Transfer or Courtesy Case

Reason for 84 (4%) missed visits out of a total of 2,039 missed visits in FFY 2023

This category includes cases where a case is moving from an assessment worker to a permanency worker, from one caseworker to another, or when the worker on one island is doing visits for a worker on another island. Problems of missed visits tend to arise here because of a lack of clarity regarding whose responsibility it is, along with a lack of ownership for the activities on a new case.

With increased structured supervision, Hawaii has seen improvement. In FFY 2020, there were 231 missed visits due to it being a transfer or courtesy case, which decreased to 140 missed visits for this reason in FFY 2021, decreased to 107 missed visits in FFY 2022, and further decreased to 84 missed visits in FFY 2023. Administrators and supervisors are also working to reinforce the practice of completing a face-to-face visit prior to any transfer and completing a face-to-face visit immediately upon receipt of a transferred case.

g. Worker Oversight

Reason for 174 (9%) missed visits out of a total of 2,039 missed visits in FFY 2023

Worker oversight is as it implies, that the worker made a mistake and forgot to see the child. Failure to remember important job responsibilities could be a symptom of overwork, and therefore the strategies in the discussion *Section V.B.1.a. CFSR Item 14: Face-to-face contact with children* may prove useful.

Although the missed visits due to worker oversight can be viewed as simple human error, and one can imagine that some percentage of missed visits is unavoidable, Hawaii is optimistic that this category of missing visits will disappear once the Worker Visit Tracker is fully integrated into daily practice statewide.

2. Psychotropic Medication Monitoring, Inappropriate Diagnoses, and Preventing Facility Placements

Past Five Years

Over the past five years, Hawaii has employed methods to monitor psychotropic medication use among youth and ward against inappropriate diagnoses and placements of children. This variety of approaches and resources helps to ensure appropriate diagnoses and when necessary, minimally restrictive placements.

a. Case Reviews

In the statewide annual case reviews, as cases are assessed for compliance with *Item #18 Mental health assessments and services for child/youth*, appropriate oversight of prescription medication for mental/behavioral health is examined and reported. In the SFY 2023 case reviews, in seven out of seven applicable cases, there was appropriate oversight of youth's psychotropic medications.

b. Psychotropic Medication Monitoring in Multidisciplinary Team (MDT) Contract

The MDT includes medical staff who have oversight of all youth in care for whom psychotropic medication is prescribed. They are tasked with reviewing each referred case for appropriateness, safety, and efficacy of the medication, and for bringing any concerns to the treatment team for further review. Consultation is also available for all CWSB-involved children with medical and mental/behavioral health needs.

c. Safe Family Home Report Enhancement

The enhancements made in 2020 to the Safe Family Home Report and monthly caseworker visit form help to prompt the review and documentation of children's mental/behavioral health needs.

d. Monthly Contacts with Worker

Quality monthly contacts between the CWS caseworker and the child help to provide appropriate oversight of prescription medication for mental/behavioral health needs. Monthly contacts help to ensure that assessments are completed, children are referred to and receive appropriate services, and that appropriate oversight of prescription medication for mental/behavioral health needs is provided.

e. CWS & MQD Comprehensive Exam Meetings

CWS and MQD administrators have been meeting to develop a system that will ensure that EPSDT appointments and comprehensive exams for children in foster care occur timely.

f. CWS New Hire Training

During CWS New Hire Training, the CWS module regarding use of psychotropic medications is explained to the caseworkers. The module emphasizes the importance of caseworkers properly monitoring psychotropic medication use to ensure that children are only taking the medications that they truly need for the conditions that they have been accurately diagnosed with and that the necessary ongoing medical monitoring is occurring.

g. Family Wrap Hawaii

CWSB provides Wraparound services for families involved with CWSB with complex needs. Wraparound, called Family Wrap Hawaii, works with families whose needs are identified as the most complex, and who are experiencing multiple barriers to achieving the identified permanency goal, often with limited time remaining in the legal timeline. Teams meet frequently and creatively to develop individualized plans to meet the family's underlying needs. The referral criteria have been expanded to provide Wraparound to prevent out-of-home placements and to serve youth with permanency goals of legal guardianship and adoption.

h. Mandatory Mental Health Assessment

CWS procedures require all children to undergo a mental health assessment within forty-five days of placement into foster care or within sixty days for in-home cases with a confirmation.

i. Partnership among State Agencies

CWSB has continued to meet monthly with the Department of Health, Child and Adolescent Mental Health Division (CAMHD), and the DHS Med-QUEST Division (MQD). The meetings serve as a platform to discuss needs related to systemic issues, policies, and services. Monthly meetings, as well as impromptu communication, help coordinate care and services for CWSB-involved children

placed in mental health facilities and children with complex, cross-system needs. Goals include preventing placement disruptions and facility placements, and effectively transitioning children from facilities back into their homes and communities as quickly and as safely possible. These meetings also help to identify special medical and behavioral health care needs and the available resources to meet those needs. These meetings also function in sharing the responsibility for the care and safety of these children.

j. Intensive Home-Based Services

CWSB has continued to provide Intensive Home-Based Services using the well-supported, evidence-based Homebuilders Model. Homebuilders' therapists work with families and children with complex needs to prevent out-of-home placements and/or placements in mental health facilities. This service is currently available on Oahu and Hawaii Island. At the beginning of SFY 2023, Hawaii contracted to provide the Homebuilders service on the islands of Maui and Kauai. As of March 2024, the staff recruitment process is ongoing, and the services have not yet begun.

k. Hale Malama

DHS contracts with a community social service agency who provides resource homes for infants and young children who have complex medical needs. The specially-trained resource caregivers partner with parents to ensure parents learn how to properly care for their medically fragile children, working towards the goal of reunification.

l. Pearl Haven

Pearl Haven is a residential facility on Oahu for girls who have been trafficked or otherwise severely traumatized. The facility offers an abundance of enrichment and therapeutic activities and opportunities. Staff are experienced and trained. The program ensures that the girls receive nurturing, education, and therapy in a safe and non-pathologizing environment.

m. Residential Crisis Stabilization Program

A multi-agency-funded residential crisis stabilization program called *Hiki Mai Ka La* is available to any youth, regardless of the youth's involvement in any State system. This short-term (up to 30 days) service includes case management, individual therapy, group therapy, safety planning, milieu-based programming,

family/caregiver(s) therapy, and individualized treatment plan. This positive addition to the spectrum of care successfully serves children, their families, and caregivers. Children involved with CWSB are receiving and continue to benefit from this service. *Hiki Mai Ka La* provides insight and support related to the child's needs, diagnosis, and medication. Although the program is located on the island of Oahu, it serves children from all the Hawaiian Islands.

Planning for the Next Five Years

Over the next five years, CWSB expects the efforts outlined above to continue, along with additional work described below.

a. Reinvalidate the Psychotropic Medication Monitoring in MDT Contract

There are currently plans to reinvalidate the Psychotropic Medication Monitoring in Multidisciplinary Team Contract described above in V.A.2.a.ii. by the contracted service provider regularly attending various section meetings and promoting the available services.

b. CCWIS Placement Tracking

The new database will be able to track placements more accurately and also be able to alert caseworkers, supervisors, and administrators to take action about facility placements that are too long or about to end.

c. CCWIS Medication Tracking

In the building of Hawaii's CCWIS, caseworkers will be able to easily note psychotropic medications in the database, along other medications, and diagnoses. The system will also contain logic to flag potentially concerning case situations for further review. The system will flag the following:

1. Five years old or younger on any psychotropics
2. Absence of DSM V diagnosis in medical record
3. Medication is inconsistent with diagnosis
4. Absence of appropriate initial assessment
5. Absence of a psychiatric summary/assessment within one year
6. More than three psychotropic medications total (including PRN meds, i.e., as needed)
7. More than two psychotropics for the same diagnosis (with an exception for short-acting plus long-acting stimulants)
8. More than one antidepressant/anti-anxiety medication

9. More than one antipsychotic medication
10. More than one mood stabilizer
11. More than one ADHD medication (with an exception for short-acting plus long-acting stimulants)
12. Absence of documentation of annual metabolic screening for those on antipsychotics
13. Dosage exceeds recommended dosage
14. Potential medication interactions

B. UPDATES, GOALS, MEASURES, PROGRESS, AND ACTION STEPS

1. CFSR Well Being Outcome 1: Capacity to provide for the children's general needs

Item 12: Services to children/youth, parents, and resource caregivers

Refer to the 2025 Hawaii APSR Data Booklet, Figure C12: Item 12 for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

95 Cases Reviewed

36 STRENGTHS, 59 AREAS NEEDING IMPROVEMENT

Purpose

This item is to determine whether, during the period under review, the agency (1) made concerted efforts to assess the needs of children, parents, and resource caregivers (both initially, at the child's entry into foster care if the child entered during the period under review and 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 (2) provided the appropriate services.

Summary

In 36 of 95 applicable cases (or 38%), concerted efforts were made to assess the needs of children, parents, and resource caregivers initially and on an ongoing basis. Concerted efforts were also made to identify and provide the services necessary to achieve case goals and adequately address the relevant issues. Caseworkers discussed needs and services during monthly visits, which allowed for ongoing assessment and monitoring of progress.

Fifty-nine cases (or 62%) were rated as needing improvement. Inadequate monthly caseworker visits and alternative communication, like phone calls, negatively impacted this performance item. Without some contact, the caseworker could not properly assess the clients' ongoing needs and progress in services. In most cases, the individuals

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were referred to some services, but ongoing assessments needed to be more evident to ensure the services met their needs and that progress was being made with those services toward case goals. *Please refer to Section V.B.1 item #12A, #12B and #12C for further information on these items over the past five years and future plans.*

Sub-Item 12A: Needs assessment and services to children

Refer to the 2025 Hawaii APSR Data Booklet, Figure C12A: Item 12A for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

73% Strength

27% Area Needing Improvement

95 Cases Reviewed

69 STRENGTHS, 26 AREAS NEEDING IMPROVEMENT

- In 69 of 95 applicable cases (73%), initial and/or ongoing comprehensive assessments were conducted that accurately assessed children's needs (75% Foster Care, 55% In-home, 86% VCM).
- In 41 of 62 applicable cases (66%), appropriate services were provided to children to meet their needs. In cases when youth were 16 or older, five of eight applicable youth were offered or provided with independent living services.
- In 26 of 95 applicable cases (27%), initial and/or ongoing comprehensive assessments were needed to accurately assess children's needs.
- In 21 of 62 applicable cases (34%), appropriate services were not provided, or monitoring of services to ensure the children's needs were being met did not occur.

Discussion

In the past five years, Hawaii has improved in this item from a strength rating of 55% in SFY2019 to 73% in SFY2023, peaking in SFY2022 at 78%.

The CFSR PIP3 strategies for tracking, supervision frequency and quality, case documentation, and strong collaboration among CWSB, CQI-UH Maui, and other external partners have contributed to maintaining positive movement in this area. Collaborations with community and cultural partners and providers, the Judiciary, the Department of Health (DOH), the Department of Education (DOE), and lived experience young people and families helped to create innovative approaches and resources to address the extraordinary challenges of the pandemic and beyond. Telehealth; virtual family visits; virtual court hearings; cultural connections with Liliuokalani Trust, Kamehameha Schools, and We are Oceania; and shared parenting between RCGs and

birth parents offered different and various opportunities, services, and resources for the children and young people.

Planning for the Next Five Years

CWSB recognizes the importance of regular worker visits in ensuring that children's needs are regularly assessed, and appropriate services are provided to meet those needs. To ensure staff capacity to manage cases and improve outcomes, CWSB has prioritized workforce support as an area for support in the 2024-2025 Capacity Building Center (CBC) workplan. The goals are to support recruitment and retention of staff by developing a targeted plan to reduce CWSB's vacancy rate and increase supervisory supports.

CWSB is also working to enhance efforts to develop Transition Plans prior to youth exiting care and Independent Living Transition Plans for all youth in care who are 16 and over. In collaboration with UH Law School and EPIC Ohana, CWSB has begun working on developing a template that workers can use to ensure each child in foster care is provided with assistance and support in developing a transition plan during the three months before their 18th birthday. Currently, Youth Circles serve as the primary venue for development of these plans. For those youth who opt out of a Youth Circle, a simple template form is being developed that can be used by the case worker or provider to help the youth develop their plan. A recent presentation at the monthly CWSB meeting provided an opportunity to review the federal requirements, share the draft form, and gather feedback to incorporate in the finalized document. Tracking methods have also been discussed to determine any needed revisions that could support completion of transition plans.

Additional strategies that may enhance improved outcomes in this area include:

- Continuing to support Youth Circle referrals, especially for all youth aged 16 and older.
- Continuing the QIC-EY pilot project work that will help improve permanency and case planning for youth in care. QIC-EY is currently being piloted in Hilo with the hope of expanding statewide. *Refer to Section IX.E.6. E Makua Ana (Becoming an Adult) Youth Circles for additional information on the QIC-EY pilot project.*

Sub-Item 12B: Needs assessment and services to parents

Refer to the 2025 Hawaii APSR Data Booklet, Figure C12A: Item 12A for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

34% Strength

66% Area Needing Improvement

83 Cases Reviewed

28 STRENGTHS, 55 AREAS NEEDING IMPROVEMENT

For mothers:

- In 34 of 73 applicable cases (or 47%), initial and/or ongoing comprehensive assessments were conducted that accurately assessed mothers' needs (40% Foster Care, 42% In-home, 71% VCM).
- In 30 of 67 applicable cases (or 45%), appropriate services were provided to mothers to meet their needs. Related to lack of ongoing contact or efforts to locate.
- In 39 of 73 applicable cases (or 53%), initial and/or ongoing comprehensive assessments were needed to accurately assess mothers' needs.
- In 37 of 67 applicable cases (or 55%), appropriate services were not provided to mothers to meet their needs, or there was a lack of monitoring and follow-up on services to ensure mothers' needs were being met.
- In 38 cases, the infrequency of visits or lack of efforts to contact and engage the mother impacted this item.

For fathers:

- In 28 of 70 applicable cases (or 40%), initial and/or ongoing comprehensive assessments were conducted that accurately assessed fathers' needs (34% Foster Care, 38% In-home, 62% VCM).
- In 22 of 63 applicable cases (or 35%), appropriate services were provided to fathers to meet their needs.
- In 42 of 70 applicable cases (or 60%), initial and/or ongoing comprehensive assessments were needed to accurately assess fathers' needs.
- In 41 of 63 applicable cases (or 65%), appropriate services were not provided to fathers to meet their needs, or there was a lack of monitoring and follow-up on services to ensure fathers' needs were being met.
- In 42 cases, the infrequency of visits or lack of efforts to contact and engage the father impacted this.

Discussion

Over the last five years, CWSB has made improvements in this item, increasing from 22% in SFY 2019 to 34% in SFY 2023, with a high of 50% in SFY 2022. There are similar trend ratings for caseworker visits with parents increasing from 17% in SFY 2019 to 35% in SFY 2023.

In general, when case workers meet regularly with parents, case workers are able to identify and meet parents' needs. Initial engagement by case workers is helpful to build relationships and establish connections and partnerships with parents. Further, case workers face-to-face contact with parents is important to establish and support ongoing engagement, communication, and assessment and identification of needs, and coordination of services to meet those needs. Worker changes can affect consistent contact and engagement. CWSB continues to develop strategies to support and enhance the workforce to build capacity to contact and provide services to families.

Planning for the Next Five Years

CWSB continues to identify opportunities to enhance practice and achieve outcomes with children and families. Some activities may include:

- Continue to utilize and develop additional strategies to support recruitment and retention of caseworkers;
- Enhance caseworker engagement with children, parents, and resource caregivers through trainings on cultural and family voice;
- Utilize and expand parent partner resources to support parent engagement;
- Utilize and expand resources such as contracted caseworker visits to enhance and increase contacts with parents; and
- Continue to support supervision of caseworks by supervisors to promote contacts with parents.

Sub-Item 12C: Needs assessment and services to Resource Caregivers

Refer to the 2025 Hawaii APSR Data Booklet, Figure C12C: Item 12C for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

85% Strength

15% Area Needing Improvement

55 Cases Reviewed

47 STRENGTHS, 8 AREAS NEEDING IMPROVEMENT

- In 48 of 55 applicable cases (88%), initial and/or ongoing comprehensive assessments were conducted that accurately assessed resource caregivers' needs.
- In 38 of 46 applicable cases (83%), appropriate services were provided to resource caregivers.
- In seven of 55 applicable cases (12%), initial and/or ongoing comprehensive assessments were needed to accurately assess resource caregivers' needs.

- In eight of 46 applicable cases (17%), appropriate services were needed to adequately care for the child but were not provided.

Discussion

Over the past five years, CWSB has made significant and sustained improvements in this item, from 57% in SFY 2019 to 85% in SFY 2023.

Face-to-face contact and additional communication methods such as texts, phone calls, and emails support assessing and addressing the needs of resource caregivers. Additional communication options allow for real-time information sharing check-ins as needed on a child's needs and services. Relative resource caregivers who are familiar with their family members are often able to provide support for children to address their needs and to access service.

Increasing ongoing contacts and sharing information on resources available could be beneficial strategies that support resource caregivers meet the needs of the children in their care.

CWSB continues to provide and enhance support to resource caregivers. Support groups, ongoing trainings, service referrals, and information sharing through a contracted provider offer ongoing consistent support and information to enhance resource caregivers' capacity to meet the needs of children in foster care.

On a Tuesday evening each month, the CWS Branch Administrator and a CWSB Program Development Administrator participate in a "Talk Story Tuesday" virtual session with resource caregivers (RCGs) facilitated by Catholic Charities Hawaii, the contractor for RCG support services. Talk Story Tuesdays provide an informal setting for information sharing and relationship building. Although there is an assigned topic for each session and CWSB Administrators come prepared to share on the designated topic, the discussions are flexible and often lead to problem solving of perceived issues a RCG is experiencing. This discussion flexibility in an informal setting has helped to build and repair relationships by improving understanding of the expectations and needs of the system and those living within it. These discussions can sometimes be difficult for CWSB as RCGs may voice their concerns and complaints, yet such candid RCG feedback has provided valuable information that can lead to actionable steps and opportunities to clarify information and enhance support for RCGs.

Home Visiting Services (HVS) continues to support children ages 0-5. Although HVS's focus is on parents and children, their services are also provided to children in foster care and their RCGs. HVS will engage with the RCG and children just as they do with parents and children, to promote consistency of care for the child and potentially

strengthen the relationship of the RCG and parent if the service is provided to them together. This helps support reunification with the parents and allows for the transition home to be as smooth and seamless as possible.

Permanency Strengthening Services

Permanency Strengthening Services (PSS) are services designed to support long-term successful permanency outcomes for children and families who are in the pre-permanency phase or post-permanency phase. Since the goal of the service is to help achieve and maintain permanent placement, the service is available to RCGs who have been identified as the child's permanent family. Services may include but are not limited to information and referrals, case management, counseling, and individual and group skill building. These services are provided to support the transition out of the child welfare system and into stabilization after legal permanency has been achieved. For more information on PSS, refer to Section IV.A.4.a Post Permanency – Adoption and Legal Guardianship.

Planning for the Next Five Years

CWSB continues to identify opportunities to enhance practice and achieve outcomes with children, families, and RCGs. Some activities may include:

- Continue to utilize and develop additional strategies to support recruitment and retention of caseworkers;
- Enhance caseworker engagement with children, parents, and RCGs through trainings that incorporate culture and family voice;
- Utilize and enhance supports for RCGs;
- Utilize and expand resources such as contracted caseworker visits to enhance and increase contacts with parents, children, and RCGs;
- HVS will continue to primarily target parents and their children and expand the use of services to RCGs to promote a continuum of care for the child;
- Continue to support supervision of caseworkers to promote contacts with RCGs; and
- Develop and identify strategies to identify and refer families to PSS prior to case closure.

Item 13: Engagement of child and parent in case planning

Refer to the 2025 Hawaii APSR Data Booklet, Figure C13: Item 13 for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

92 Cases Reviewed

37 STRENGTHS, 55 AREAS NEEDING IMPROVEMENT

Purpose

This item is assessed to determine whether efforts were made to involve parents and children (if developmentally appropriate) in case planning.

Summary

In 37 of 92 applicable cases (40%), concerted efforts were made to involve parents and children in the case planning process on an ongoing basis. Caseworkers discussed case direction in quality monthly visits through in-depth conversations, which allowed families to express their feelings and have a voice in their plan. Ohana Conferences were used in many of these cases as an avenue for engagement. Efforts to locate and engage parents and children contributed to strength ratings.

55 cases (60%) were rated as needing improvement. In many of these cases, the infrequency and low quality of contact did not allow the children and parents to be engaged in case planning. Parents and children in these cases were seen infrequently; in some cases, they were not seen for several consecutive months and lacked engagement and in-depth conversations. Ohana Conferences could have helped improve communication and facilitate case planning with the parents.

- In 40 of 71 applicable cases (56%), concerted efforts were not made to actively involve the child in case planning.
- In 30 of 69 applicable cases (43%), concerted efforts were not made to actively involve the mother in case planning.
- In 24 of 65 applicable cases (37%), concerted efforts were not made to actively involve the father in case planning.

Discussion

In the past five years, Hawaii has improved in this item from a strength rating of 34% in SFY2019 to 40% in SFY2023, with a low of 14% in SFY2020 and a high of 58% in SFY2022.

Over the past years, tools have been developed and enhanced to support staff in engaging parents and children. These tools include but are not limited to concurrent planning brochures for parents and youth, written notices of court hearings to parents and children, as appropriate, and the foster youth bill of rights. In 2022, the Family Service Plan (FSP) was revised to assist workers in engaging parents in their case plan. A practice guide was developed alongside the FSP to support staff in their conversations with families and provide families with clear and important information regarding their

service plan, purpose of the DHS involvement, how DHS assesses and measures progress, parent or caregiver responsibilities, DHS caseworker responsibilities, and other information regarding the concurrent planning process. It was also developed so that caseworkers can use it as a tool to facilitate difficult conversations related to full disclosure and parent or caregiver protective capacities.

Ohana Conferencing (OC) and Youth Circles continue to be a positive engagement tool to ensure family and youth voice and decision-making in case planning. Initial auto-referrals and quarterly OCs have enhanced the case planning processes. Family Finding, including defining a process to find relatives of alleged fathers, have increased father identification and support from relatives for parents in case planning.

Court stakeholders are critical to supporting engagement of parents in their case plan. The concurrent planning parent and youth brochure were created as a strategy for Hawaii's PIP3 to help reach permanency timely. These resources have been shared and reviewed with court stakeholders at quarterly stakeholder meetings and are available at the courthouses for parents' attorneys to use in their conversations with parents.

CWSB contracts and collaborative projects have increased family engagement in planning for the lives of their families and children and youth. Contracts such as WRAP utilize lived-experience partners, who are former CWSB birth parents, to promote reunification by providing support and helping current birth parents navigate the system and resources.

Other collaborations with EPIC Ohana and Liliuokalani Trust (LT) provide support and promote cultural engagement and healing in case planning. For example, Two Makua Meetings connect birth parents with RCGs and cultural enhancement. This "shared parenting" is critical in the evolution of the case. Another example of cultural healing, shared parenting, relationship building is the collaboration with LT regarding Ka Pili Ohana (KPO). It strengthens the relationship between the birth parent, children, Resource Caregiver (RCG), CWS and other critical parties.

Planning for the Next Five Years

Worker visits remain a key factor in ensuring engagement of child and parent in case planning. To strengthen recruitment and retention of the workforce, CWSB has prioritized workforce support as an area for support in the 2024-2025 Capacity Building Center (CBC) workplan. Goals of the plan include supporting recruitment and retention of staff by developing a targeted plan to reduce CWSB's vacancy rate and increase supervisory supports.

CWSB will continue to prioritize parent partners in its work. Hawaii believes that by utilizing parent partners early in the case, engagement of parents in case planning will

be enhanced. Parent partners are involved in workgroups focusing on casework practice and helping to inform and develop training.

Additional strategies that may support improved outcomes include:

- Continuing to support use of Ohana Conferencing throughout the life of the case.
- Continuing to promote the value of Youth Circles, especially for all youth aged 16 and older.
- Continuing the QIC-EY pilot project work. *Refer to Section IX.E.6. E Makua Ana (Becoming an Adult) Youth Circles for additional information on the QIC-EY pilot project.*
- Continuing to expand WRAP, Parent Partners, and Peer Partners and collaborate with Department of Health (DOH)-Makua Allies to support the voices and the case management work of lived-experience experts.

CFSR Item 14: Face-to-face contact with children

Please refer to the 2025 Hawaii APSR Data Booklet, *Figure C14: Item 14 – Caseworker visits with child* for a graph of the SFY 2019-2023 five-year strength rating for this item.

95 Cases Reviewed

52 STRENGTHS, 43 AREAS NEEDING IMPROVEMENT

Purpose

This item is assessed to determine whether the frequency and quality of visits between caseworkers and the child(ren) in the case are sufficient to ensure the safety, permanency, and wellbeing of the child(ren) and promote the achievement of case goals.

Summary

In 52 of 95 applicable cases (or 55%), the frequency and quality of visits between caseworkers and children were sufficient to ensure their safety, permanency, and wellbeing and to promote the achievement of case goals. In these cases, caseworkers met with children alone, as appropriate for their age and development, and discussed safety, permanency, and wellbeing in a way appropriate for that specific child. In many of these cases, caseworkers built good rapport with children and saw them in a variety of settings—home, school, community, etc. Caseworkers often noted observing interactions of the children with parents, resource caregivers, and/or siblings as part of

their monthly contact. In fifty-three cases, the frequency of visits was sufficient; in seventy-three cases, the quality was sufficient.

Forty-three cases (or 45%) were rated as needing improvement.

- In 43 cases, the frequency of contact with the children was less than monthly. Staff turnover/transfers and high caseloads appeared to account for several cases. In two cases, the children were never seen.
- In 20 cases, the quality of visits with the children was insufficient. In these cases, discussions with children did not sufficiently address safety, permanency, and wellbeing. In some of these cases, information from documentation and interviews did not describe sufficient quality, and the caseworker was unavailable for an interview.
 - o In 14 of these cases, visits lacked in-depth conversations, were brief or the location was not sufficient to engage the child as needed.

Discussion

CWSB recognizes that frequent and quality contact with children translates directly to improved outcomes.

Past Five Years

In *Figure C14: Item 14 – Caseworker visits with child*, one can see that, although Hawaii continues to struggle with completing quality monthly visits with all children, there has been improvement over the past five years. Although there was a drop in performance from SFY 2022 (67% strengths) to SFY 2023 (55% strengths), performance for the most recent three years (SFYs 2021, 2022, and 2023) improved from the prior two (SFYs 2019 and 2020).

A key activity of Hawaii's CFSR PIP3 had been to track and monitor frequency of face-to-face visits between caseworkers and children. The tracker for face-to-face visits between the workers and children was implemented as part of the PIP. Staff were initially slow to use the tracker regularly, but this improved with the implementation of structured monthly supervision. Statewide supervisors have been encouraged to review caseworker visits via the tracker with their staff at least monthly, and to steer their staff to manage work responsibilities to prioritize all children be seen monthly. Additionally, with the PIP3 focus on improved supervision, supervisors are better able to guide, coach, and support caseworkers in completing quality visits with children.

Performance on this item varies by section. CWSB administrators are working with section administrators every week, sharing strategies across sections to improve in this area.

Planning for the Next Five Years

Hawaii expects to see improvement in this item over the next five years, due to the planned actions and efforts listed below.

- a. Filling vacant positions,
- b. Keeping children out of foster care via FFH, which will eventually lower caseloads, freeing workers to complete frequent and quality visits,
- c. Sustaining improved supervision,
- d. Improve tracking of visits with CCWIS implementation, and
- e. Partnering with the community to support children and families, as outlined in the State's recently-developed Equity Action Plan, thereby lowering caseloads and freeing workers to complete frequent and quality visits.

Please see *Section V. A. 1. Monthly Caseworker Visits* of this report for more data and discussion about Hawaii's performance in this area.

CFSR Item 15: Face-to-face contact with parents

See Data Booklet, *Figure C15: Item 15 – Caseworker visits with parents* for a graph of the SFY 2019 - 2023 five-year strength rating for this item.

81 Cases Reviewed
28 STRENGTHS, 53 AREAS NEEDING IMPROVEMENT

Purpose

This item is assessed to determine whether the frequency and quality of visits between caseworkers and the mothers and fathers of the child(ren) are sufficient to ensure the safety, permanency, and wellbeing of the child(ren) and promote the achievement of case goals.

Summary

In 28 of 81 applicable cases (35%), the frequency and quality of visits between caseworkers and mothers and fathers were sufficient to ensure the safety, permanency,

and wellbeing of the children and promote achievement of case goals. In these cases, the mothers and fathers were contacted, involved, and engaged in case planning.

- a. For mothers, in 31 cases, the frequency of visits was sufficient, and in 42 cases, the quality was sufficient.
- b. For fathers, in 23 cases, the frequency of visits was sufficient, and in 40 cases, the quality was sufficient.

In 53 of 81 applicable cases (65%), the frequency and quality of visits between caseworkers and mothers and fathers were rated as needing improvement. According to supervisors and caseworkers interviewed, a combination of staff turnover and workload were factors in not seeing parents. Lack of efforts to locate parents contributed to the rating. In nine cases, one or both parents were incarcerated, and efforts were needed to make contact.

- a. For mothers:
 - In 39 of 69 applicable cases, the typical pattern of visits with the mother was not monthly. In seven of these cases, there were no visits with mothers.
 - In 19 of 61 applicable cases, visits with the mother were not of sufficient quality. Meaningful conversations with mothers did not occur, as issues related to case planning, services, and goal achievement were not discussed.
- b. For fathers:
 - In 37 of 65 applicable cases, the typical pattern of visits with the father was not monthly. In 12 of these cases, there were no visits with fathers.
 - In 12 of 52 applicable cases, visits with the father were not of sufficient quality. Meaningful conversations with fathers did not occur, as issues related to case planning, services, and goal achievement were not discussed.

Discussion

Past Five Years

In *Figure C15: Item 15 – Caseworker visits with parents*, one can see that although Hawaii continues to struggle with completing quality monthly visits with all parents, there has been improvement over the past five years. Although there was a drop in performance from SFY 2022 (49% strengths) to SFY 2023 (35% strengths), performance for the most recent three years (SFYs 2021, 2022, and 2023) has been better than the prior two (SFYs 2019 and 2020).

See the discussion section for Item 14 above, as many issues are similar. As part of the CFSR PIP3, Hawaii implemented a Worker Visits with Parents tracker, which has been helping staff, supervisors, and administrators ensure frequent visits with both mothers and fathers. The tracker also aids in identifying barriers to visits, e.g., incarceration or residential placement that can be addressed with supervisory support.

In PIP3, Hawaii focused on improving CWSB staff's engagement with parents. Hawaii recognizes that children achieve permanency faster (through reunification, adoption, or legal guardianship) and more safely when parents are actively involved with the case. Building rapport with parents is vital to their involvement.

Despite consistent improvement, Hawaii has been concerned about the deficient performance on this item. Branch administrators have made concerted efforts to impress upon section administrators the importance of promoting consistent, quality visits with parents. CWSB leadership and line staff have collaborated to identify strategies to address barriers to regular contact with parents. Identified strategies included:

- a. sending letters to all known addresses,
- b. talking to relatives and neighbors to track down parents,
- c. employing formal locator systems,
- d. meeting parents on evenings and weekends,
- e. creating regular monthly appointments with parents, and
- f. workers sharing their email addresses and work cell phone numbers with parents to encourage communication.

Planning for the Next Five Years

Hawaii remains concerned that performance on this item remains low. In the next five years, CWSB has plans to focus more on the engagement of fathers. CWSB also has started collaborating more intensely with parents who formerly had cases in CWSB to make changes throughout the system, which should assist in improving performance on this item. These efforts include:

- a. Parent Partners training staff on authentic parent engagement,
- b. Implementing Family-Supported Arrangements Continuum procedures and guidelines,
- c. Parent Partners joining as members and leaders of CWSB workgroups, and
- d. Developing plans to expand the use of Parent Partners for more families statewide.

2. CFSR Well Being Outcome 2: Providing for the children's educational needs

Item 16: Educational Needs of the Child

CWSB routinely collaborates with the Hawaii Department of Education (HIDOE) to strengthen and clarify procedures and processes for educational stability and determining the best interest of the child when making school placement change decisions. HIDOE and CWSB PD leads have provided case specific support to schools to help make educational stability decisions and advocate for a child remaining in his home school after removal to ensure continued connections to child's community, families, and friends. There is also a statewide collaboration with CWSB, DOE, the Judiciary, and HCWCQI to have discussions and make decisions that support efforts for foster youth to remain in their home school, after entering foster care or move to a school that can better accommodate their educational needs.

54 Cases Reviewed

43 STRENGTHS, 11 AREAS NEEDING IMPROVEMENT

Purpose

This item is to assess whether 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), whether identified needs were appropriately addressed in case planning and case management activities, and whether caseworkers had sufficient contact with children and their caregivers about the children's educational needs.

In 43 of 54 applicable cases (80%), children were assessed and provided services to meet their educational needs. Caseworkers had sufficient contact with children and their caregivers to address the educational needs. In some of these cases, resource caregivers are credited for initiating and following up on much of the work needed to meet children's education needs.

Eleven of the cases (20%) were rated as needing improvement. Consecutive missed months of face-to-face visits and a lack of in-depth conversations with the children and caregivers were factors.

- In 10 cases, initial and/or ongoing assessments of the children's educational needs were not completed.
- In nine cases, efforts were needed to address identified educational needs and provided appropriate services.
 - In three of these cases, enrollment assistance was identified as a need but not provided.

- In three of these cases, school attendance issues existed but were not addressed.
- In one of these cases, IEP was not monitored.

Discussion and Annual Update

CWSB's strength rating has decreased in this item from 86% in SFY 2022 to 80% in SFY 2023. Missed months of face-to-face visits were not completed consecutively, which resulted in a decrease in assessing and monitoring services to meet identified needs of the children. While the caseworker visits with children decreased over the last SFY, the monthly caseworker visit form was revised to support discussion and documentation of important information and items. The form outlines elements of a quality visit and provides an area for documentation, including education related topics such as school, grade, attendance, and academic performance.

CWSB and DOE also continue to partner to provide support to solve case-specific needs to achieve educational stability and success. In partnership with DOE, CWSB continues its efforts to assess and address the educational and learning needs of children placed in foster care. Collaborative workgroups that target the educational and developmental needs of children, including those with special needs, have led to the development of joint trainings and professional development opportunities for CWSB and DOE on educational stability for children in foster care. This joint learning environment offers an opportunity to network by connecting DOE Points of Contact with CWSB supervisors, and the opportunity to discuss the federal Every Student Succeeds Act, Hawaii Revised Statute related shared processes for DOE and CWSB.

CWSB continues to coordinate with DOE to provide lunch for children in foster care and those that reunify within the school year through the enrollment in the free lunch program. A MOU partnership between CWSB and DOE supports children in foster care by enrolling them in the Free School Lunches Program at their respective schools, as soon as identified as being in care. All elementary-aged children in foster care can be enrolled in a free after-school program, run by DOE, funded by the federal Child Care Block Grant.

CWSB routinely collaborates with the Hawaii Department of Education (HIDOE) to strengthen and clarify procedures and processes for educational stability and determining the best interest of the child when making school placement change decisions. HIDOE and CWSB PD leads have provided case specific support to schools to help make educational stability decisions and advocate for a child remaining in his home school after removal to ensure continued connections to child's community, families, and friends. There is also a statewide collaboration with CWSB, DOE, the Judiciary, and HCWCQI to have discussions and make decisions that support efforts for foster youth to

remain in their home school, after entering foster care or move to a school that can better accommodate their educational needs.

Planning for the Next Five Years

Looking toward the coming five-year plan, CWSB and DOE will continue to strengthen its efforts to assess and address the educational needs of children and partner with DOE to meet the educational needs of children involved with CWSB. Since the new CFSP includes a focus on “safety” as viewed through a Trauma and Healing Informed Care lens, lessening the trauma of the foster care experience and keeping the child connected to family and significant others in the child’s life will continue to be vital to determining best interest of the child. Hawaii will continue its work with DOE to ensure the educational needs and nutritional needs of children in foster care are being met in a school that can provide relationships, continuity, and appropriate educational support. CWS and DOE will continue to explore opportunities for joint professional development activities to strengthen relationship and expand staff knowledge and continue to collaborate to ensure educational stability for every child coming into care, changing residences while in care or returning home after exiting care.

There is currently a MOU regarding educational stability between DOE & DHS being reviewed by DOE & DHS AGs for approval and signatures which helps outline roles and responsibilities.

3. Children’s Physical and Mental Health Needs

Item 17: Medical and dental health of the child/youth

Refer to the 2025 Hawaii APSR Data Booklet, Figure C17: Item 17 for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

77 Cases Reviewed

60 STRENGTHS, 17 AREAS NEEDING IMPROVEMENT

Purpose

This item is assessed to determine if physical health, including dental health needs of the child, were addressed.

Summary

In 60 of 77 applicable cases (78%), children were assessed and provided with services to address their physical and dental health needs. Placement physical exams were common. Caseworkers had sufficient contact with children and their caregivers about

physical health needs. In some cases, resource caregivers, unit aides, and unit assistants are credited for initiating and following up on much of the work needed to meet children's medical and dental needs. In 15 foster care cases, the agency provided appropriate oversight of children's prescription medications.

17 of the cases (or 22%) were rated as needing improvement. Consecutive missed months and lack of in-depth conversations with the child and caregivers were factors.

- In 14 cases, assessments were not completed to determine the children's physical health needs.
- In 14 cases, services were needed to address the children's physical health needs, but were not provided.
 - In three of these cases, oversight/monitoring of the children's medical issues was needed.
 - In five of these cases, a PPE and routine physical health exams were needed.
 - In three of these cases, follow-up was needed on recommended services.
 - In one of these cases, medical coverage was needed.
- In 14 cases, assessments were not completed to determine the children's dental health needs.
- In 14 cases, appropriate services were needed to address the children's dental health needs, but services were not provided.
 - In four of these cases, routine dental exams/cleanings were not provided to children.
 - In two of these cases, monitoring of dental exams was needed.
 - In two of these cases, dental services were needed and not provided.
- In three foster care cases, appropriate agency oversight of the children's prescription medication(s) was needed.

Discussion

In the past five years, Hawaii has improved in this item from a strength rating of 62% in SFY2019 to 78% in SFY2023, with a low of 48% in SFY2020 and a high of 83% in SFY2022.

Regular monthly worker visits with the child, resource caregiver, and parent/caregiver are essential in ensuring the well-being of children. When visits occur regularly and are of sufficient quality, positive outcomes are achieved. Outcomes for item 14 (face to face contact with children) and item 15 (face to face contact with parents) declined between SFY2022-SFY2023. The decline in item 14 and item 15 may contribute to the slight decline in item 17, which aligned with SFY 2022 and SFY 2023. Some of the reasons for

the decline may be due to staff turnover and workload. To ensure staff capacity to manage cases and improve outcomes, CWSB has prioritized workforce support as an area for support in the 2024-2025 Capacity Building Center's (CBC) workplan. The goals are to support recruitment and retention of staff by developing a targeted plan to reduce CWSB's vacancy rate and increase supervisory supports.

Ongoing training, tracking, and supportive supervision are other essential components to staff recruitment and retention. To support CWSB, ongoing collaboration with partners, RCGs, and lived-experience experts remain essential.

In SFY 2022, CWSB continued its partnership with DHS MedQuest Division (MQD) to improve health outcomes for children in foster care. The focus of this collaboration has been on ensuring that comprehensive health exams are completed within 45 days of children entering foster care. CWSB has experienced challenges in determining outcomes in this area since Hawaii's current database doesn't track comprehensive health exams within the required timeframe. The upcoming CCWIS implementation will allow Hawaii to collect data in this area.

CWSB has looked at different strategies to monitor outcomes in this area. One strategy was to extract data directly from the MQD system, which presented various challenges and resulted in error reports. CWSB has since implemented a pilot project with three CWSB sections to focus on identifying children entering foster care and tracking health assessments. The pilot includes all five of the MQD health insurance plans that have assisted in scheduling children's comprehensive health assessment. Although there is limited data now, available data has shown that CWSB has been meeting timelines.

CWSB continues to work with MQD and the five health plans to have the health plans reach out to resource caregivers to schedule the comprehensive health exam within 45 days of children entering care. This pilot has since expanded to include all CWSB sections statewide. Monthly meetings are held to address strengths and challenges. Recently, a health plan expressed concern about the lack of consent to provide HIPPA information to resource caregivers and is in the process of amending procedures. CWSB hopes that with the new CCWIS system, it will enable the sharing of data between MQD and CWSB to streamline processes and be able to monitor health care of children.

Planning for the Next Five Years

Moving forward, Hawaii plans to continue to collaborate with MQD to ensure comprehensive health exams for youth in care are being completed timely and tracked to measure outcomes.

Clarifying requirements for dental needs and psychotropic medication to support staff in ensuring children's needs are met in this area are being discussed. Procedures may

require specifying how early children should be receiving their first dental cleaning, as well as guidance on monitoring prescription and psychotropic drugs.

Additional strategies that may help to improve outcomes in this area include:

- ongoing efforts to maintain regular worker visits;
- supporting the pilot project to have consistent comprehensive health exams;
- supporting Ohana Conferencing throughout the life of the case to support safety, permanency, and well-being; and
- expanding WRAP, Parent Partners, Peer Partners and collaboration with DOH-Makua Allies. CWSB believes lived-expert voices and Navigator Assistance can support the well-being of children and families.

Item 18: Mental health assessments and services for the child/youth

Refer to the 2025 Hawaii APSR Data Booklet, Figure C18: Item 18 for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

74 Cases Reviewed

53 STRENGTHS, 21

AREAS NEEDING IMPROVEMENT PURPOSE

This item is assessed to determine whether the agency addressed the mental/behavioral health needs of the child(ren).

Summary

In 53 of 74 cases (72% of applicable cases reviewed), children were assessed and provided with services to address their mental/behavioral health needs. Caseworkers had sufficient contact with children and their caregivers about mental/behavioral health needs. Resource caregivers contributed to scheduling appointments and transporting children. Appropriate oversight of prescription medication for mental/behavioral health was provided in seven of seven cases.

21 cases (28%) were rated as needing improvement.

- In 19 cases, assessments were not completed initially or ongoing to assess the child's mental/behavioral health needs to inform case planning decisions. Consecutive missed months of face-to-face visits and a lack of in-depth conversations with the child and caregivers were factors.
 - In 13 cases, ongoing assessments were not completed.
 - In six cases, assessments were needed due to trauma, domestic violence, and for medication.

- In 21 cases, appropriate services were needed to address the child's mental health.
 - In 12 of these cases, children were not provided services for identified mental health needs.
 - In six of these cases, identified services were delayed or linkage to mental health services was needed.
 - In three of these cases, ongoing therapy was not provided.
 - In three of these cases, there was a lack of monitoring the children's progress in services.

Discussion

CWSB has made and sustained significant improvement in this item over the last five years, from a strength rating of 42% in SFY 2019 to a strength rating of 72% in SFY 2023.

Monthly quality contacts help to identify needs, initiate referrals, and continue to monitor service provision and goals. In some cases, when there is not regular contact and in-depth discussions, needs may not be identified, referrals may not be made, and/or services may not be monitored/ determined to be appropriate to meet the child's needs. Strategies including engagement and relationship building with children, parents, and resource caregivers have promoted quality contacts to identify and address the mental/behavioral health needs of children.

Communication, such as phone calls and provider reports, in addition to monthly visits with the parent, resource caregiver, and child contributed to assessing and monitoring services for children.

The initial referral for assessments is an important step to start assessments and services and to create a structure for ongoing support and monitoring.

In addition to initial assessments, ongoing assessments are necessary to identify needs that were not present at the initial assessment or which were disclosed at a later time.

Monitoring is also important to support continued assessment of needs and participation in and outcomes of service provision. Services may be delayed when there are waitlists for services. There is a need to monitor connection to services and/or to explore other providers.

Ongoing monitoring can help to assess engagement in services, especially when children move or stop going to services. It also helps to identify challenges and develop solutions to access services to meet the child's needs.

Infant mental health is an area to expand referrals to assessments and services for children through contracted and community providers for young children.

Planning for the Next Five Years

CWSB continues to identify opportunities to enhance practice and achieve outcomes with children and families. Some activities may include:

- Enhance caseworker engagement with children, parents, and resource caregivers through trainings on culture and family voice.
- Promote referrals to Home Visiting Services to support infant mental health.
- Incorporate the use of the caseworker monthly visit form or topics that include mental health services and medication, in monthly contacts.
- Continue to collaborate with the Hawaii Department of Human Services – Med-QUEST Division, the Hawaii Department of Health - Child and Adolescent Mental Health CAMHD, and other community resources to identify health plans, targeted mental health, and community services and resources to address children’s mental health needs.

SECTION VI. SYSTEMIC FACTORS

A. STATEWIDE INFORMATION SYSTEM (CFSR ITEM 19)

1. Child Protective Services System

The Child Protective Services System (CPSS), Hawaii's legacy database system since 1989, has remained integral to the operations of both the Child Welfare Services Branch (CWSB) and the Adult Protective Community Services Branch (APCSB). Over the last five years, significant work has been made to enhance the functionality and compliance of CPSS with federal reporting requirements and to support the needs of Hawaii's child welfare and adult protective services. In the last quarter of 2022, a transition occurred from a single-person contracted vendor to a new five-person team. This change significantly improved the turnaround time for system modifications and enhancements, demonstrating a commitment to maintaining and improving CPSS's reliability and effectiveness. Key developments include:

System Modifications for Compliance: Efforts were concentrated on modifying CPSS to capture essential data for Family First Hawaii (FFH) and to meet the new AFCARS 2.0 reporting requirements. This has led to the successful submission of one full year of data to the Administration for Children and Families (ACF), marking a critical step towards federal compliance.

Data Entry Accuracy and Training Improvements: Significant changes were made to reduce data entry errors, including the addition of data validations and auto-population of data values. Concurrently, the training team developed new on-demand CPSS training videos and conducted in-person sessions, ensuring staff proficiency and compliance with updated system functionalities.

Transition to Electronic Reporting: Work commenced on converting CPSS paper reports to electronic reports, with a target completion date of October 2024. This transition aims to streamline reporting processes and enhance data accuracy and accessibility.

Preparation for CCWIS Transition: In anticipation of the new Comprehensive Child Welfare Information System (CCWIS), a thorough review and documentation of all CPSS data fields were initiated, focusing initially on federal reporting requirements. A data replication tool was also created to transfer data from the mainframe to a relational database, facilitating easier access for data conversion and quality analysis.

Planning for the Next Five Years

Looking forward, the State of Hawaii seeks to further enhance CPSS and ensure its alignment with federal regulations until the new CCWIS is fully implemented and

operational. Hawaii will persist in compliance efforts to ensure CPSS is compliant with evolving federal reporting requirements, including ongoing modifications to support FFH and other critical data reporting needs. Future initiatives include:

Enhancement of Data Accuracy and Reporting Capabilities: The focus will be on further reducing data entry errors and enhancing the system's reporting capabilities through continued system improvements and staff training initiatives.

Full Transition to Electronic Reporting: Completion of the transition to electronic reports by October 2024 will mark a significant milestone, with efforts continuing to ensure all reporting processes are fully electronic, efficient, and accurate.

Seamless Data Integration for CCWIS Transition: Preparation for CCWIS will involve meticulous data field reviews and utilization of data replication tools to ensure a smooth transition. Efforts will be made to ensure that CPSS data is easily accessible, accurate, and ready for integration into the new CCWIS.

Staff Training and Support: As CPSS undergoes further modifications and transitions, ongoing staff training and support will be critical. Developing additional training materials and sessions will ensure that staff are well-equipped to utilize the system effectively.

Once Hawaii's CCWIS is fully implemented (estimated to be in 2026-2027) the CPSS system will be retired.

2. State of Hawaii Automated Keiki Assistance System

Over the past five years, the State of Hawaii Child Welfare Services Branch (CWSB) has made significant progress in the development and enhancement of the SHAKA system, a web-based information system designed to support both child welfare and adult protective services. CWSB SHAKA provides a department-facing information system for caseworkers, supervisors, and administrators, as well as a youth-centered portal named ShakaTown. Notable progress include:

Family First Hawaii (FFH) Solutions: Early 2020 saw the initiation of solutions for FFH reporting and the Family First Prevention Services Act (FFPSA) reimbursement claims within SHAKA. A collaborative meeting tracking module was created to help aggregate FFH meeting participation for reporting purposes. Also, a standalone prevention and support plan facilitated the recording and processing of FFH-related client services, and transmitting crucial data including but not limited to plan initiation date and client eligibility date to CPSS for report generation. Additionally, a provider portal was launched for the submission of Monthly Expenditure Reports (MER) and Client Eligibility

Lists (CEL) to Department of Human Services (DHS) Purchase of Services (POS), further integrating with CPSS.

Electronic Family Service Plans (FSP): Development focused on a comprehensive solution for FSPs, incorporating FFH prevention plan elements. This initiative, guided by CWSB Program Development, resulted in a standardized electronic FSP that streamlines documentation of services and family goals, including a court-acceptable printable PDF plan.

Enhancements in Extended Assistance and Transitional Youth Programs: The SHAKA team continued its support and enhancements for programs like Imua Kakou (IK) and ETV/Higher Education, introducing court date tracking, email notifications, e-signature capabilities for voluntary care agreements, and modifications to accommodate COVID-19 era needs. ETV/Higher Ed workgroup meetings were held with CWSB PD and EPIC Ohana to discuss changes and enhancements to the application process, with the ultimate goal to have a single Extended Assistance application for IK and ETV/Higher Ed programs. Other support provided by the SHAKA team includes NYTD surveys and ILP biannual reporting for provider partners.

Monthly Visit Template: In 2022, a standardized template for recording monthly visits was piloted to improve the ease and accuracy of data entry. This effort is part of an ongoing process to compile annual visit data for ACF reporting.

Data Migration and System Improvements: Collaboration with the CCWIS Project Management Service team focused on documentation and planning for data migration efforts. Additionally, system improvements, particularly for intake tracking and support, were renewed to assist with the latest Program Improvement Plan. Enhancements included an updated tracking page to align with expanded CRT tracking needs and courtesy unit assignments.

Planning for the Next Five Years

Looking ahead, the following strategic initiatives are planned to enhance the SHAKA system and support Hawaii's child welfare and adult protective services:

FFH Program Completion: An emphasis will be placed on completing FFH program requirements before a CCWIS data freeze is implemented. This includes attending weekly FFH Program and Data meetings to address ongoing and final data needs for FFH reporting.

Electronic Greenbook/Procedures Management Tool: A proposal to create a fully electronic, updated, and auditable Greenbook/Procedures management tool is being revisited. This initiative aims to replace the outdated system with a modern solution

that is accessible electronically to CWSB Program Development (PD) and staff, ensuring that procedures are up to date and auditable.

Enhancements to Extended Assistance and Transitional Youth Programs: Continuous efforts will be made to enhance these programs, focusing on strengthening the partnership with providers and CWSB in managing cases together. This includes further development of support structures and systems to facilitate effective collaboration and support for youth in transition.

Once CCWIS is fully implemented, estimated to be in 2026-2027, SHAKA will be retired.

3. Comprehensive Child Welfare Information System

The State of Hawaii has made substantial strides in planning its Comprehensive Child Welfare Information System (CCWIS). After extensive planning, the CCWIS RFP was released in June 2023. The evaluation process was executed and the contract award for implementation services is expected to commence in the third quarter of 2024. The new system has been named HI THRIVE, reflecting the Department's commitment to promote the well-being and resilience of Hawaii's children and families. The name encapsulates the project and agency's mission to support and uplift the community through technological advancement and systemic improvement. Additional planning efforts include:

Project Management and Collaboration: Collaboration with the Center for Capacity Building (CBC) concluded in March 2024. The CBC's assistance was instrumental in establishing a robust project management framework, crucial for tracking progress and ensuring that project milestones are met efficiently. This framework has set the foundation for a structured approach to project execution.

Virtual Field Engagement and Data Discovery: Given the geographically dispersed workforce, the project initiated virtual field engagement activities to ensure agency-wide representation in the CCWIS configuration decisions and User Acceptance Testing (UAT). Additionally, the commencement of CPSS data replication for legacy data discovery is a critical step towards understanding the existing data landscape, informing the implementation strategy for HI THRIVE.

Data Interface Planning: The project has successfully completed Phase 1 of the Data Interface plan, which involves engaging field staff to understand their daily informational needs. The ongoing documentation of interface business rules and data elements, based on feedback from Phase 1, is paving the way for efficient data exchange with partner agencies, ensuring seamless integration and functionality of the new system.

System Modification Freeze: Executive leadership has approved a freeze on modifications to existing child welfare legacy systems and subsystems, effective from the CCWIS Technical Vendor Start Date in Q3 2024. This measure is essential to maintain data integrity and stability during the transition to HI THRIVE.

Planning for the Next Five Years

2024 – In the current year, the HI THRIVE CCWIS project has met the deadline for selecting the CCWIS Technical Vendor and will be finalizing the contract award by or before October 2024. Additionally, the IV&V Vendor has been selected and the contract awarded with a projected start date in Fall 2024, one month prior to the CCWIS technical vendor team onboarding. Field Engagement activities are in full execution. Statewide facilitated working sessions include each field office and all functional field offices teams. The Field Engagement tasks and deliverables include documentation and cross-analysis of all office service delivery processes. This effort will inform configuration of the State’s new CCWIS solution functional flow. Legacy data mapping and documentation of data interfaces are a significant effort in 2024. Legacy data maps support and inform development of the data conversion approach. By year end, discovery efforts documenting the validity and completeness of the legacy data will become a critical factor in selecting the legacy data conversion approach. The final component of 2024 HI THRIVE project efforts will be Organizational Change Management. The orchestrated planned efforts of Field Engagement and Organizational Change Management will create the agencywide environment for a successful CCWIS implementation.

2025 – Next year, the focus of the HI THRIVE CCWIS project plan will be configuration of the CCWIS solution. The functional phased approach, a hybrid of waterfall and agile, has proven to be successful for data system solutions of this size and complexity. Within the phases of CWSB case management, as each set of functional components is completed, selected state staff will participate in functional system reviews and user acceptance testing (UAT). Confirming the schedule will be a collaborative effort between the HI THRIVE team and the contracted technical solution vendor.

2026 – Through execution and monitoring of the CCWIS project plan, 2026 should bring the development, configuration, and UAT phases of the project to a successful conclusion by calendar year-end. Based on the collaborative scheduling and functional priorities, the full implementation and statewide training activities will overlap with the final components of configuration. Additionally, CCWIS report development and testing tasks will begin to move into the critical path of the project. Report development will include all Federal required reporting (AFCARS 2.0, NCANDS, NYTD, Families First) and the initial set of state identified reports. Based on functional phased approach of UAT, a Go / No Go decision will be made on the phased implementation of the production

system. Training of practice, process and policy changes will be delivered ahead of the functional components of the system releases. This method provides field staff the opportunity to adopt the practice and process changes before being required to learn a new system for data capture. The HI THRIVE team believes that the sequencing of these organizational improvements is critical to easing the burden of change on end-users.

2027 – This year, if all goes as documented in the HI THRIVE project plan, the project will be in post-implementation support mode. The HI THRIVE project team will identify a CCWIS product owner, the Field Offices will have identified super-skilled system users to participate in monthly system CQI teams, and the HI THRIVE Change Control Board will have been started by transitioning the CCWIS Steering Committee members into a new role of prioritizing, planning and budgeting for requested CCWIS updates. The CCWIS Data Quality Plan, required to be updated and submitted to CB State Systems team will become the project document that identifies the CCWIS project efforts and status going forward on a yearly submission status.

2028 – As stated above, the CCWIS Data Quality Plan will document maintenance and operations, any planned significant updates, budgets, and actual expenditures.

B. CASE REVIEW SYSTEM

1. CFSR Item 20: Written Case Plan (Family Case Plan)

The Family Case Plan, defined in Hawaii Administrative Rules (HAR) 17-1610-26 and Hawaii Revised Statutes (HRS) §587A-4, consists of the Safe Family Home Report (SFHR) and Family Service plan (FSP) or Permanent Plan.

Safe Family Home Report (SFHR)

The SFHR provides information concerning the family's current situation pertaining to the Safe Family Home Factors in HRS 587A-7. The SFHR includes present safety factors, in-home safety assessment, child placement, psychosocial information on the child and family, strengths and needs, case workers efforts, concurrent permanency plan, family services and progress, and the case worker's comprehensive assessment and recommendations.

Family Service Plan (FSP)

The FSP serves as a supportive strategy to enhance parents' or caregivers' protective capacities to resolve the present safety concerns, strengthen the family, and prevent the occurrence or reoccurrence of child abuse and neglect. It includes parent or caregiver strengths, needs and goals, Ohana Conferencing participation status, case plan goals and target dates, an overview of services and activities, services completed, and a

section on disclosures, roles, and responsibilities. An Ohana Time plan is also included as appropriate.

The HAR 17-1610-26 Case Plan requires that all children and families under the jurisdiction of the department who are assessed as needing ongoing child welfare casework services shall have a Family Case Plan. Hawaii's Family Case Plan procedures were revised as a strategy to improve permanency outcomes. The Family Case Plan must be individualized and include the family and age-appropriate child voice, culture, identity, and functional strengths to support family empowerment and self-determination. The Family Case Plan must be written and approved no later than 60 days after the date of the receipt of the report of abuse or neglect or for any out-of-home placement, no later than 60 days from the date the child was removed from the home, whichever is earlier.

For court cases, the Family Case Plan must be filed with the petition for jurisdiction within 72 hours after a child is removed from the home or placed in foster care, unless there is a voluntary agreement for placement signed by parents; and within 15 days before a scheduled return hearing, periodic review, permanency hearing, or termination of parental rights (TPR) hearing, pursuant to HRS §587A-18, unless otherwise ordered by the court.

Development of the case plan is to be done in partnership with the child and family, include and consider information from a variety of sources, and include the CWSB caseworker's assessment of the situation. The goal is to provide a clear, comprehensive, realistic, and achievable plan to address the safety issues in the home.

Permanent Plans

Permanent Plans (PP) are written to establish a permanency goal. These plans are often written when the goal is adoption or legal guardianship to an appropriate caregiver. Permanent Plans can help inform the parties of the permanency option that is in the best interest of the children. A PP is written to establish whether adoption is in the best interest of the child, or to present a compelling reason as to why legal guardianship is in the best interest of the child and adoption is not the goal.

Data

Item 20 Written Case Plan

Regarding parents' active involvement in case planning as defined in OSRI Item 13, CFSR case review data for SFY 2023 shows that:

- Of 36 applicable cases, concerted efforts were made to actively involve the mother in case planning in 13 cases (36%; CFSR Item Question 13b).
- Of 37 applicable cases, concerted efforts were made to actively involve the father in case planning in 11 cases (30%; CFSR Item Question 13c).

Regarding the joint development of case plans with parents, targeted review results show that:

- Of 54 applicable cases, 46 case files (85%) contained a current case plan (Safe Family Home Report) and eight cases (15%) did not contain a current case plan.
- Of 34 applicable cases, case plans were developed with the mother in 12 cases (35%)
- Of 36 applicable cases, case plans were developed with the father in 9 cases (25%)

Item 13: Engagement of child & parent in case planning

In SFY 2023, the following data has shown the level of engagement with children and parents in the Written Case Planning process. Of 92 applicable cases reviewed, 37 (or 40%) were rated as strengths while 55 cases were rated as areas needing improvement (ANI).

In 37 of 92 cases, concerted efforts were made to involve parents and children in the case planning process on an ongoing basis. Caseworkers discussed case direction in quality monthly visits through in-depth conversations, which allowed families to express their feelings and have a voice in their plan. Ohana Conferences were used in many of these cases as an avenue for engagement. Efforts to locate and engage parents and children contributed to strength rating.

- In 40 of 71 applicable cases (or 56%), concerted efforts were not made to actively involve the child in case planning.
- In 30 of 69 applicable cases (or 43%), concerted efforts were not made to actively involve the mother in case planning.
- In 20 of 65 applicable cases (or 37%), concerted efforts were not made to actively involve the father in case planning.

Refer to the 2025 Hawaii APSR Data Booklet, Figure C13: Item 13 Child and Family Involvement in Case Planning for a chart of the SFY 2019 - 2023 five-year strength rating for this item.

In SFY 2019, child and family involvement in case planning was at a 34% strengths rating. CWSB did see a significant decline in SFY 2020 to a strength rating of 14%. This may be attributed to COVID-19 when restrictions were put in place that made it challenging to engage with families. While CWSB saw significant increases in strengths ratings between SFY 2021 and 2022 (38% to 56%), progress was made in those SFYs through implementation of PIP strategies that were implemented to engage children and families in their own case planning. There has been a decline in SFY 2023 to a strength rating of 40%. The decrease is likely attributed to challenges with engagement with families and may be impacted by staffing shortages that CWSB is experiencing. Outcomes for written case plans correlate to engagement; better engagement with child and families lead to better written case plan results.

The Past Five Years

In the past five years, Hawaii CWSB has completed an overhaul of its Family Case Plan to support the goals of Hawaii's CFSR Program Improvement Plan 3 (PIP3) and implementation of Family First Hawaii.

Achieving permanency timely was one of the goals of Hawaii's CFSR Program Improvement Plan 3 (PIP3). Three main strategies were selected to ensure children reach permanency faster; one of which included concurrent planning, with revisions of permanency planning and concurrent planning procedures, the Safe Family Home Report (SFHR) and Permanent Plan with input from the Family Court.

Through collaboration with CWS supervisors, section administrators and staff from Child Welfare Program Development, Staff Development, and the Court Improvement Program, revisions to the new SFHR and PP were made.

The new SFHR and PP were updated with the following:

- Include information and activities that promote concurrent planning early on and throughout the life of the case in case planning with the family.
- Are important documents that include key activities and information related to assessment and strategies related to safety, permanency, and wellbeing and guide case decisions, service planning, and case direction.
- Were revised to ensure clear documentation of the concurrent plan, and efforts to achieve the concurrent plan, as well as safety assessment and decisions,

identification of reasonable efforts, parent engagement, and readiness assessment when moving from reunification.

In addition, procedures were revised to include the changes to the document and practice guidelines were created for both the SFHR and PP to provide staff with clear directions on how to answer each SFHR guideline and include narrative examples for reference.

The Hawaii Program Improvement Plan 3 (PIP3) and Implementation of Family First Hawaii (FFH): Keeping Families Together created opportunities to transform the child welfare system by improving practices and keeping families at the center of our work. In May 2022, as part of Family First Hawaii implementation, the Family Service Plan was revised to align with CWSB's values of family voice, culture, identity, and functional strengths to support family empowerment and self-determination. The FSP is intended to serve as a strategy to enhance parents' or caregivers' protective capacities to resolve the present safety concerns, strengthen the family, and prevent the occurrence or re-occurrence of child abuse and neglect. Hawaii utilized this opportunity to modernize its Family Service Plan by moving it online in SHAKA, which has allowed it to connect with the Child Safety Assessment (CSA) that is also completed in SHAKA and streamlines documentation.

As part of FFH implementation, prevention plans have been developed and implemented for families to prevent children entering care, and to support reunification. Prevention Plan elements have been incorporated into the Family Service Plan to streamline case planning, documentation, and practice. Prevention plans may be completed when FFH eligible families or EPYP will receive a FFH service. Expectant Parenting and Young People (EPYP) complete a Support Plan to allow for children born to current foster youth to remain together.

The prevention plan elements were embedded into the FSP with the requirement for completion at the point of FFH eligibility determination. This change was designed to help integrate FFH requirements with current practice and support compliance with written case plan requirements. CWS is working to support this shift in practice through various strategies including micro learning and discussions of this practice in management meetings.

There is ongoing CQI to ensure that the goals of the revised FSP continue to be achieved. To support staff with implementation, the Staff Development Office (SDO) has been providing micro learning sessions. The microlearning sessions are provided statewide and allow for each geographic section to meet through a smaller venue to share and discuss procedures and implementation. These sessions provide staff with hands on practice to create a Family Service Plan in SHAKA and provide feedback on data entry

and other areas of need. The feedback from these sessions has been shared in work groups and assisted in making continued improvements to the Family Service Plan.

In March 2024, enhancements were made on the Family Service Plan in SHAKA to support compliance with Case Plan requirements. The web-based process resulted in unintended consequences of having multiple, open, active FSPs. To address this problem, one FSP has been developed. The one FSP does not allow for multiple Family Service Plans to be made within the SHAKA web-based system. The one FSP has been developed to prevent confusion, improve efficiency, promote data integrity, and support effective monitoring and evaluation of FSPs and FFH data.

Planning for the Next Five Years

Hawaii continues to assess through case reviews whether each child has a Family Case Plan developed jointly with the parents, and whether efforts were made to engage both parents and each child, if developmentally and age appropriate, in the case planning process, through the following:

- The statewide CFSR case review process, and
- A targeted review process, as appropriate.

CWSB will continue to support utilization of existing tools, such as the monthly worker visit tool, to support engagement. Case workers will discuss case direction in quality monthly visits through in-depth conversations, which will allow families to express their feelings and have a voice in their plan. Ohana Conferencing has also been and continues to be a useful resource in supporting family engagement and allowing for meaningful conversations to occur regarding case planning.

Hawaii will continue to monitor the use of the FSP to ensure that it is completed in alignment with the CSA, which will ensure families are receiving the appropriate services to support timely reunification. The current FSP supports a more collaborative approach with the parent(s) as well as the children in the services that are being offered.

Work on enhancing the safety tools is also in process and is expected to help meet case plan requirements. Revisions are currently being made to the CSA to include the completion of a formal safety tool at 6-month intervals when a CSA has not been completed for other reasons. The addition of the six month time period aligns with periodic review hearings and can help ensure that the Family Case Plan is completed and provides a clear, comprehensive, realistic, and achievable plan to address the safety issues in the home.

CWSB will continue ongoing collaboration with court stakeholders through quarterly stakeholder meetings, CWSB meetings, and quarterly meetings with the DAG's office. CWSB will also continue to work with Attorney General's on revisions on the Permanent Plan template along with solidifying a process for review and submission to court. This will allow for more timely permanency outcomes for children in foster care.

University of Hawaii Law School in consultation with the Family Strengthening Center has begun to create an activity book for youth ages five years and younger in care to help them understand the foster care system and the role court plays in it. CWSB has provided feedback on the activity book and SDO will collaborate with Family Court and the UH Law School to develop training to help support its objectives.

2. CFSR Item 21: Periodic Review Hearings

In the SFY 2023 Annual Report on CFSR Systemic Items, a targeted review of 67 periodic review hearings in applicable cases found that all periodic review hearings were timely (100%). In these cases, the timing of the hearings was just under six months from the last periodic review or from the child's date of entry into foster care.

3. CFSR Item 22: Permanency Hearings

In the SFY 2023 Annual Report on CFSR System Items, a targeted review of 53 permanency hearings in applicable cases found that all permanency hearings were timely (100%). In these cases, the timing of the hearings was no later than 12 months from child's date of entry into foster care or from the last permanency hearing.

Discussion

Tracking of permanency and on-going six-month periodic reviews, as required by AFCARs, is monitored through data inputted by CWSB staff into the Child Protective Service System (CPSS), DHS's computer database system. Specific codes are entered to identify the type of hearing held. Recently CWSB PD provided clarification on the appropriate use of the codes to support accurate coding and data collection. The Staff Development Office (SDO) recorded Adoption and Foster Care Analysis and Reporting System (AFCARs) trainings that staff can use for refreshers. Additionally, SDO holds quarterly meetings with support staff who assist caseworkers with data entry, to ensure timely and accurate inputting of periodic review data into CPSS.

Over the past five years, Hawaii has demonstrated its continued ability to ensure that a periodic review hearing for each child occurs no less frequently than once every six months, and that a permanency hearing occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months

thereafter. Since SFY 2019, Hawaii has performed at 95% or above for periodic review hearings and 90% or above for permanency hearings.

This is an area of strength. Hawaii's PIP3 activities have helped support casework staff to develop a clear understanding of the importance of timely permanency and having the tools to track and monitor critical timelines for moving children through the process of court hearings to achieve permanency.

These activities include but are not limited to the following:

- The development of a monthly supervisory tool that includes a focus on timely permanency and concurrent planning;
- Revisions of concurrent planning procedures;
- Development and implementation of a checklist that includes activities that can help to ensure cases are moving towards permanency;
- A concurrent planning brochure for parents and youth that staff can use to support conversations on the importance of permanency;
- A visual timeline tracker to help staff be mindful of target dates; and
- Emphasizing the need for all to work towards moving foster care cases towards permanency and training of staff and court partners statewide in 2020.

The Deputy Attorneys General in the Family Law Division (DAGs) continue to be a part of CWSB meetings with section administrators and staff development administrators. This has provided an opportunity to address issues with case filings, hearings, court orders, and other legal matters and to collaborate on strategies to improve case practice within the legal system.

DHS and CIP continue to coordinate and facilitate quarterly meetings that bring together key partners, including CWSB, Family Court, legal practitioners, and DAGs. These meetings have helped to build relationships and foster shared common goals and to develop strategies that each entity can utilize to achieve these goals. The meetings have helped to reinforce collaboration with community partners to achieve goals and share CWSB outcomes in detail. The forums, including small breakout discussions, provide education and understanding and generate discussion on how partners can contribute to the achievement of positive outcomes. The meetings also help to support transfer of knowledge on different topics and support continuity in relationships and knowledge, when there is turnover within the court or CWSB, by providing a space where connection and learning can occur.

Planning for the Next Five Years

For the next five years, DHS and CIP will continue to coordinate and facilitate collaborative quarterly meetings to discuss permanency and other PIP initiatives for which CWSB and the Family Court have decision making authority, responsibility, and influence.

4. CFSR Item 23: Termination of Parental Rights

In the SFY 2023 Annual Report on CFSR System Items: Targeted Review, of 30 applicable foster care cases in which children had been in foster care at least 15 of the most recent 22 months, TPR motions were filed timely, or an exception applied, in 28 cases (93%).

- There were 16 cases in which TPR motions were filed timely.
- There were 12 cases with exceptions or compelling reasons for the 15/22 requirement.
 - Of these exceptions, 11 were relative placements.
- There were two cases in which TPR motions were not timely and there were no exceptions or compelling reasons for the 15/22 requirement.

Discussion

Of the 30 cases reviewed, TPR motions were filed timely in 16 cases (53%), and in 12 cases (40%) exceptions to TPR were noted for a total of 93% strength rating.

The timelines for filing a motion for termination of parental rights (MTPR) are set forth in section 587A-31, HRS, and section 17-1610-36, HAR.

Annual case review data for item 6: Achievement of Reunification, Adoption, and Guardianship goals shows that over the past five years (2019-2022), Hawaii has improved with a high of 70% strength rating in 2022, up from 25% in 2019. There has been a decline in this item in 2023 with a strength rating of 41%. Data on the length of time of children in foster care may correlate with this decline. There was a slight increase in the average length of time in care at 18.7 months for SFY2023 (refer to FFY2025 Hawaii Data Booklet, Figure 28).

Regular face-to-face contact with parents, timely and frequent hearings, and timely completion of adoption packets are key practice areas to ensure that MTPRs are filed timely. Hawaii believes that the activities and tools listed above in items 21 and 22 continue to help to support improved outcomes, at the same time regularly reviewing practice to identify additional areas for improvement. Strategies being considered included re-issuing the checklist to CWSB staff that was developed and implemented to ensure cases are moving towards permanency.

Planning for the Next Five Years

CWSB continues plans to enhance its capabilities to track timely filings of the MTPR by creating systems that will help support workers. One strategy is to create a unique code within CPSS, and in the future CCWIS, to document the filing dates for MTPRs. As part of the future CCWIS development, CWSB envisions a system designed to interface with the DAGs office and the Judiciary to further track and monitor children needing timely TPR, adoption, or legal guardianship. The new CWIS system will help to enhance tracking of permanency goals through the implementation of an automated process.

5. CFSR Item 24: Notice of Hearings and Reviews to Caregivers

Overview

Section 587A-14(b), HRS, requires that the child's current resource family be served written notice of hearings no less than 48 hours before a scheduled hearing and that a hearing shall not be held until the resource caregiver (RCG) and all other parties are given notice of the hearing or are served, as required by this section.

CWSB procedures guide staff to ensure compliance with statute and require that written notices of hearings, in the form of a letter, are sent by the assigned CWSB unit to resource caregivers and that a hard copy of the notice is placed in the case file. Caseworkers are to submit Confirmation of Notice Forms to court as evidence that the caseworker provided notice to the RCG. Judges across the various circuits are consistently making a finding whether notice was given to the RCG.

Section 587A-14(d), HRS, further states that the child's current resource family is entitled to participate in judicial proceedings to provide information to the court, either in person or in writing, concerning the current status of the child in their care. Resource caregivers are encouraged to either attend the hearing and/or submit a written update prior to the court hearing to share information on the status of the child in their care; they may also raise issues regarding the child during a court hearing.

Resource caregivers who attend Family Court (FCT) hearings are provided a copy of the related court orders, which provide notice of the next court hearing.

The HCWCQI project continues to conduct supplemental targeted reviews in conjunction with regularly scheduled Child and Family Services Review (CFSR) case reviews, including a review to determine whether written notices of court hearings were provided to RCGs and whether the RCGs attended court hearings.

Annual Update

The data tool for the State’s annual case review report collects information on whether copies of the notices of hearings to RCGs are in case files. Reviewers also ask RCGs during case review interviews if they recall receiving written notices of hearings. In SFY 2023, all hearing types were considered including periodic review hearings, permanency hearings, temporary foster custody (TFC) hearings, adjudication (return) hearings, and termination of parental rights (TPR) hearings. There was a total of 54 applicable foster care cases with 181 periodic review hearings. Of these 181 hearings, evidence of written notices to resource caregivers was identified for 72 court hearings (39%) and resource caregivers attended 44 court hearings (24%).

Findings included that only a few notices to RCGs for TFC hearings were found in the case file. CWSB has received confirmation from Family Law Division (FLD) DAGs that RCGs are to be served written notice of all hearings--from pre-adjudication to termination of parental rights--as required by statute. This information was discussed with the CWSB administration during CWSB meetings and made an agenda item in section “huddles” to ensure implementation occurs statewide.

Concurrently CWSB, FLD DAGs, and CWSB Program Development Office are collaborating to ensure that efforts to enhance procedures must consider feedback from neighbor islands on their practices for filing documents for a TFC hearing. Preliminary feedback from neighbor island circuits have noted the short turnaround times between petition filing and the notice of hearing date, which may create a challenge to meeting the 48-hour deadline to provide notice to RCGs. To address this challenge, the current written notice to RCGs will be reviewed to determine if any revisions are required or if a separate letter should be developed to explain the purpose of the TFC hearing and the potential challenge arising from the short timeframe to provide notice of the hearing. A workgroup will be established that is representative of practice across the state and will include members from the court and SDO. Training will be provided as part of implementation.

Discussion

Over the past five years, findings from CQI targeted reviews indicate that 39% of hearings included evidence of written notices to resource caregivers.

Case files lack consistent evidence of notification of hearings to RCGs. Refresher training on the statutory requirement and legal right of RCGs to receive notice of hearings will support improvements in this area. Different venues, including but not limited to CWSB meetings and “huddles”, may be utilized to review necessary procedures. Section administrators and supervisors may also utilize meeting times to

review procedures with staff and to address any concerns and/or barriers to meeting this requirement.

In 2022, the Family Court transmittal form was revised to include the notice of hearing to the resource caregiver, consistent with CWSB Family Case Plan procedures.

Planning for the Next Five Years

To improve outcomes in this area, CWSB collaboration with resource caregivers is critical. Surveys have been one tool to obtain feedback. Other avenues may include the existing monthly RCG “talk story” meetings.

Other initiatives being discussed include developing a court report form about the youth’s overall well-being, service updates, educational progress, and medical updates, for RCGs to complete prior to each hearing. The form will consider feedback and suggestions provided by RCGs. The goal for the form will serve multiple purposes, including ensuring that notifications to RCGs are provided in writing and that instructions are provided on submitting the form to the courts prior to the court hearing.

CWSB is also considering adding this item to the Monthly Supervision Tool as a way for supervisors to monitor and support caseworkers in providing written notification letters to RCGs about upcoming court hearings. The HANAI curriculum is another avenue being considered for CWSB to prompt RCGs to ask their caseworker about upcoming court hearings and to ask for written notification of the hearing.

C. QUALITY ASSURANCE SYSTEM

Past Five Years

Hawaii has had in place robust CWSB quality assurance (QA) and continuous quality improvement (CQI) systems that meet federal requirements, as described below in sections a. – e.

1. Operating where CFSP Services are Provided

a. Overview of Foundational Administrative Structure

Hawaii’s QA and CQI system is centrally-administered and operates in all jurisdictions of the State through a partnership between the DHS and its contractor, University of Hawaii, Maui College (UHMC) Hawaii Child Welfare Continuous Quality Improvement (HCWCQI) Project. HCWCQI Project’s work primarily includes:

- i. Quality case reviews modeled on the federal CFSR process,
- ii. Targeted reviews of and consultation on CWSB's procedures, practices, and services, and
- iii. Select case reviews.

b. Quality Assurance Process

Adherence to standards set by statute, rule, and procedure is monitored through quality assurance processes such as:

i. Meetings

Frequent meetings are designed to review, discuss, and track data/responses and to share information about case reviews, financial funding and expenditures, and aggregate data measures. The types of meetings include the following:

- 1) CWS Advisory Council (Quarterly)
- 2) CFSR Core (Bi-monthly)
- 3) CWS Branch (Monthly)
- 4) Family First Hawaii Steering Committee (Weekly)
- 5) Management Leadership Team (Quarterly)
- 6) Supervisors Team (Quarterly)
- 7) CWS Branch Huddle (Bi-Weekly, or as needed)
- 8) Family First Hawaii Implementation Management Team (Monthly)
- 9) Committee on Projections and Expenditures (Monthly)
- 10) CWS Sections (Quarterly)
- 11) CWS Unit Briefings (Daily – Weekly)
- 12) FFH Data, Information Technology, Continuous Quality Improvement, and Evaluation (DICE) Workgroup (Monthly)
- 13) FFH CQI Hui (three times a year)
- 14) Strategic Planning Committee (Quarterly)
- 15) Equity Improvement Collaborative (EIC) (Bi-Monthly)
- 16) Quarterly Statewide Licensing Meeting

ii. Reviews

Reviews include:

- 1) periodic court hearings observations,

- 2) statewide case reviews modeled after the Child and Family Services Review (CFSR),
- 3) select case reviews of specific cases with concerns,
- 4) targeted reviews of specific issues, and
- 5) Title IV-E eligibility reviews.

For topics addressed in targeted reviews over the past five years, see section c.iii. below.

iii. **Data Sharing**

CWSB Data Sharing includes sortable lists and graphs of children in foster care, potentially inactive cases, children under family supervision, Native Hawaiian families involved with CWSB, youth eligible for Independent Living Program (ILP) services, families eligible for Home Visiting Services, children under voluntary foster custody agreements, length of stay of children in foster care, children who may emancipate from care, position vacancies, workers' caseloads, and investigations without dispositions.

iv. **CWS Advisory Committee**

The CWS Advisory Committee includes a broad array of statewide participants such as CWSB staff, contracted CQI staff, social service providers, court staff, Department of Health representatives, current and former foster youth, resource caregivers, and family representatives.

As Hawaii moved forward with planning and implementing its Program Improvement Plan (PIP), the Continuous Quality Improvement Council transitioned to become the Child Welfare Advisory Committee in November 2018. The Child Welfare Advisory Committee's purpose is to inform positive system change to improve outcomes for children and families. The Committee meets quarterly to share updates in CWSB and in each community that affects clients and to review and discuss CWSB data, including case review findings. CWSB continues to share data, goals, and progress toward outcomes; successes, challenges, and strategies; and receive feedback from members who bring their geographic perspectives and experiences. Effective June 2020, meetings were moved online because of the COVID-19 pandemic.

v. CQI and QA Staff

CWSB has one full-time Program Development staff position assigned to perform CQI/QA duties. In addition, CWSB contracts with the UHMC HCWCQI Project to conduct case reviews to monitor the quality of practice and adherence to practice standards. HCWCQI serves all jurisdictions across the State. It also engages in other QA projects as needed and requested by CWSB. The Project currently has 14 Child Welfare CQI staff who engage in the following activities:

- 1) Project Direction
- 2) Program Management
- 3) Project Administration
- 4) Administrative Support
- 5) CFSR/CQI Case Reviews
- 6) Data collection, organization, and analysis
- 7) CWSB New Hire Training Evaluation
- 8) Targeted Reviews
- 9) Select Case Reviews
- 10) New Supervisor Training
- 11) Case Staffings
- 12) CWSB Exit Interviews
- 13) CWSB Staff Surveys
- 14) Family First Hawaii Quality Assurance
- 15) Family First Hawaii Data Management
- 16) Title IV-E Reviews
- 17) CWS Intake Quality Assurance
- 18) Licensing Compliance
- 19) CFSR PIP Development and Progress
- 20) Permanency Guidance Tools
- 21) Safety Guidance Tools

2. Standards to Evaluate the Quality of Services

This includes standards to ensure that children in foster care are provided quality services that protect their health and safety. CWSB has written procedures for all program areas from intake through permanency that are consistent with federal and State laws and administrative rules. Although procedures for case review, contract review, and targeted review processes were last updated in 2020, contracted CQI staff

utilize appropriate and current federal tools for reviews. Purchase of Services contracts include requirements that all providers establish ongoing standardized QA procedures.

3. Identifies Strengths and Needs of the Service Delivery System

CWSB identifies strengths and needs by conducting types of reviews that promote consistency in the quality of practice and adherence to practice standards. Data is shared and discussed internally with staff at all levels and externally with child welfare partners and stakeholders to identify progress in achieving goals. Family voice is vital to this process. The types of reviews include:

a. Administrative Review Processes

A team review is held when unusual and challenging situations arise in active cases. Beginning in late 2020, Administrative Review Panels (ARPs) have been required and held for cases in which a child may be placed permanently with a non-relative caregiver. The ARP team, comprised of representatives from CWSB leadership, a Program Development Administrator or designee, and CQI meet with the caseworker and supervisor to discuss, review, and support efforts to consider relative placement and support familial connections.

b. Implementation Reviews and Measures for New Programs, Services, and Initiatives

In 2019, the PIP Core team designed and implemented measurement strategies to gauge the success of various PIP activities, including a staff survey regarding monthly supervision, and Branch Meeting reviews of worker visit tracker data. The PIP Core team continues to meet two to three times each month to review implementation of procedures; discuss changes, strengths, and challenges in practice, workload, and systems; and strategize necessary adjustments and communication with the field.

c. Targeted Reviews

Targeted reviews gather data to address a specific need, issue, or problem. In the past five years, targeted reviews were conducted regarding:

- i. timely case closures,
- ii. short-stayers/removal and reunification decisions,
- iii. deaths/serious harms,
- iv. intake reporting and dispositions,
- v. Family First Hawaii fidelity,

- vi. identification and use of Another Planned Permanent Living Arrangement (APPLA),
- vii. CPSS data accuracy,
- viii. new hire training,
- ix. ongoing staff training,
- x. confirmed cases without court involvement,
- xi. timeliness of periodic and permanency hearings,
- xii. permanency, and
- xiii. notice of court hearings to resource caregivers.

Specific findings from targeted reviews are shared with supervisors, who incorporate the feedback into their supervision and coaching of the caseworker. Other findings were used to support revisions to forms and procedures, and to strengthen communication of desired child welfare practice with CWSB staff and partners.

d. Case Reviews

Case reviews are modeled on the federal CFSR process.

i. Overview

An onsite case review of each CWSB section is conducted once every fiscal year. In SFY 2024, Hawaii completed eight case reviews in all case-carrying sections, i.e., East Oahu, Kauai, Maui, Oahu Special, West Oahu, West Hawaii, Oahu Voluntary Case Management (VCM), and East Hawaii. Both CWSB and VCM cases, comprising foster care and in-home cases, are reviewed. The results of these reviews are embedded throughout this report. Strength ratings are shown at the end of the FFY 2025 Data Booklet in Figures C1-C18.

Since April 2020, reviews occurred remotely due to the COVID-19 pandemic instead of onsite in each geographic location. This method has required paper case files to be mailed and interviews to be conducted virtually or by phone. In-person case reviews resumed in May 2023.

ii. Reviewers

As of April 2020, the case review team was comprised of HCWCQI staff only because of travel and office restrictions and social distancing requirements related to the COVID-19 pandemic.

Beginning in May 2023, DHS staff were invited to participate as review partners with HCWCQI staff to form review teams. The HCWCQI staff continued to provide leadership, quality assurance, and support to the reviewers throughout the case review process. As of August 2023, all CQI staff reviewers had completed the training modules available in the CFSR Portal's E-Learning Academy.

iii. Case Preparation and Selection

Before the on-site review, HCWCQI staff select and prepare the cases to ensure that information, caseworkers, and interviewees needed for the review will be available during the review period.

iv. Including Stakeholder Input

As part of the case review process, parents, children, resource caregivers, CWSB and VCM caseworkers, and CWSB and VCM supervisors are interviewed. This is a key part of the review process. Cases may be rejected during the selection process if no parent or child is available for interview. The feedback provided by children and parents gives Hawaii crucial insight into both strengths and areas in need of improvement.

v. Collecting Quality Data and Documenting Findings

In SFY 2016, Hawaii began using the federal Child and Family Services Review (CFSR) Online Monitoring System (OMS) for CWSB quality case reviews. More effort and attention are being placed on capturing strategies used in cases that lead to strength ratings. Beginning August 2023, the updated Round 4 version of the OSRI will be used for case reviews.

vi. Sharing Findings and Making Improvements

Information gathered is shared with the section under review as well as with other sections. A general overview of preliminary results is offered to the section administrator on the last day of the review, as time allows. This data is also shared quarterly with a range of stakeholders at CWSB Advisory Committee Meetings.

Systematic practice issues identified in the case reviews are discussed at Branch meetings and Management Leadership Team meetings. These discussions often lead to adjustments in case

practice. If case reviews identify policies, procedures, and/or practice guidelines that may need to be modified, CWSB Program Development will be apprised and will take appropriate action. This action may involve creating a workgroup to explore the issue and then making any necessary changes to policies, procedures, and/or practice guidelines and tools. Membership of the workgroups usually consists of representatives from the following, as relevant:

- 1) CWSB leadership,
- 2) Program Development,
- 3) Staff Development,
- 4) CWSB caseworkers,
- 5) Community partners,
- 6) People with lived experience in the child welfare system,
- 7) Community services providers,
- 8) Family Court partners,
- 9) Law enforcement,
- 10) Cultural consultants, and
- 11) State agencies, such as DOE and DOH.

e. Select Case Reviews

Since SFY 2019, select case reviews have been modeled after the federal CFJR process. These reviews were added as a means of examining case practice when concerns about specific active cases are brought to the attention of CWSB.

- 1) Select case reviews are conducted on an as-needed basis across the State.
- 2) Reviewers are members of the HCWCQI staff.
- 3) Cases are identified by CWSB when they receive concerns from family members or if concerning, patterns of practice are discovered by administration.
- 4) Data from the select case review is captured through the federal Online Monitoring System (OMS). Information gathered from the review is shared with the CWSB section that oversees the selected case, as well as with CWSB.
- 5) If needed, adjustments to case direction, activities, or practice on the specific case that was reviewed are made with the leadership of the unit supervisor. As described above in section iv.6, if practice issues are identified in the case review that may affect other cases statewide, they

are discussed at Branch meetings and Management Leadership Team meetings. If the case review identified that policies, procedures, and/or practice guidelines may need to be modified, CWSB Program Development will be apprised and will take appropriate action, which may involve creating a workgroup to explore the issue and then make any necessary changes to policies, procedures, and/or practice guidelines and tools.

f. Ongoing Analysis of Process and Outcome Data

There are numerous meetings and forums where data trends are discussed, such as quarterly meetings with court partners, Management Leadership Team (MLT), Branch, Strategic Planning Committee (SPC), CWS Advisory Committee, and where teams develop plans to address emerging needs and build on agency and community strengths to adapt to the changing child welfare landscape. CWS Advisory Committee members include CWS-involved parents, relatives, and youth. At these meetings, findings of case reviews are shared, data is reviewed, feedback is sought, and improvements are planned. The feedback of individuals with lived experience is actively sought and incorporated into strategies.

4. Providing Relevant Reports

CWSB's openness with its data is evidenced by its posting of several data-rich reports, including the APSR and CFSP, on the Department of Human Services (DHS) website. In addition to making data publicly accessible in this way, CWSB administrators disseminate data to stakeholders and community partners at committee and workgroup meetings, and conferences, such as the CWSB Advisory Committee, Court Improvement Program Advisory Committee, PIP court stakeholder meetings, and Citizens Review Panel.

Reports to inform quality assurance and CQI processes are developed and distributed for internal and external use. Examples of reports include:

a. Case Review Section Reports and Annual Reports

Case review results are compiled and distributed by the HCWCQI Project for each section and compiled annually for the State. Case review results by section are shared internally and with the CWSB Advisory Committee. Annual case review results are aggregated and widely shared.

Data collected during on-site case reviews is incorporated into a written report of findings for each CWSB section that includes data specific to each section and

aggregate statewide data. The report identifies strengths, areas needing improvement, and needs related to training, supervision, and policy reform. The report's charts showing ratings over a period of time for each section provide a visual presentation of trends and growth or decline in each performance item.

b. CPSS Report of Investigations Without Dispositions

This tool helps supervisors work with their staff to meet deadlines and to identify cases with barriers that may need extra supervision, teamwork, or effort. This report is made available to internal staff via State of Hawaii Automated Keiki Assistance (SHAKA) – CWSB computer database system, which is updated weekly. This data is reported in NCANDS.

c. Children's Length of Stay in Foster Care

This list helps to guide supervisors in their work with staff to meet Adoptions and Safe Families Act (ASFA) guidelines, to move cases more quickly to permanency, and to help staff stay abreast of their cases. This data is shared with leadership when requested.

d. CPSS Data Report on All Children in Foster Care

This is a user-friendly monthly list of all children in foster care, containing multiple data elements that supervisors and administrators can manipulate to assist in managing practice within their units and sections. This data is disseminated monthly to all CWSB administrators and unit supervisors. Also, each month a version of this list is transferred confidentially to Department of Education, which uses the list to match children in foster care with free lunch programs at their schools.

e. Short Stayers in Foster Care

Beginning in August 2022, as part of Hawaii's FFH work to eliminate unnecessary entries into foster care, a monthly report is distributed to each CWSB Section, members of the FFH Steering Committee, and the FFH Implementation Management Team (IMT). This report includes a list of all children in the prior month who exited foster care within 30 days. The report shows the data broken down by geographic section, by child's age, by number of days in care, and by ethnicity. The data is also provided as a percentage of the total number of children who exited foster care that month. Each month's short stayer data is compared with short stayer data from prior months and years. Section administrators collaborate with their Unit Supervisors and caseworkers to gather

data regarding each month's short stayers. The data they gather about the reasons for the short stay in foster care and what factors may have preceded it are discussed at Branch and FFH IMT meetings.

f. Evaluating Programs

CWSB evaluates the success of its implemented program improvement measures through the CFSR, continual review of practice through case reviews, select case reviews, review of administrative data, and contract and targeted review processes. Regular workgroups, which include CWSB staff and community stakeholders, utilize data reports to assess performance and progress, and make modifications to initiatives according to the data, in consultation with DHS decision-makers.

Case review data is helpful to inform discussion and efforts towards system improvement with partners. For example, data on PIP3 activities related to safety, permanency, and wellbeing was reviewed and discussed in collaboration meetings with legal and judicial partners, including the Court Improvement Program (CIP). The use of data provides an opportunity for all system partners to see where they can contribute to positive interventions and practices that may lead to positive outcomes for children and families.

Based on case review findings and other available information, section administrators, with technical assistance from HCWCQI staff, develop action plans to address key areas needing improvement within 45 – 60 days after the section's case review. Within 30 days of the last day of the case review, a results conference is held with the section's staff, HCWCQI review team, and Branch administrators. The action plans and progress are overseen by Section Administrators and Branch Administrators. Challenges and successes in the action plans are shared with the CWS Advisory Committee.

As discussed above, the HCWCQI staff also designs and implements targeted reviews to gather data on new CWSB programs and initiatives. This data is then shared with CWSB staff and stakeholders to assist in adjusting practice direction and related policies.

Select case reviews give CWSB insight into specific cases that have been identified as having case practice concerns. The data from these specific case reviews are shared with CWSB staff and the sections to assist them in responding to concerns with increased objectivity.

1) Feedback Results – Guiding Collaborative and Administrative Efforts

CWSB administrators, who have the authority to make decisions about changes in policy and practice, regularly attend collaborative meetings where they can hear feedback directly from stakeholders, community partners, and other State agencies. CWSB ensures that the data, information, and feedback gathered are provided to those with the ability to create meaningful change and that those people take appropriate action; CWSB understands that this is essential to quality assurance. CWSB is a dynamic--not a static system--where the only constant is change. The feedback and adjustment loop is continuous.

The use of data and review of practice is also helpful to map and align initiatives to effect positive change across items.

When developing activities to improve practice, CWSB considers the array of related strategies and outcomes. Efforts are made to streamline change and minimize duplication. For example, revisions to the Family Service Plan were designed to meaningfully engage families in case planning, target services to needs, and address reasons for CWSB involvement. Engaging families in case planning and linking services to needs highlight two key outcomes that may be positively impacted by the revised Family Service Plan.

Another example of coordinating improvements and investments in practice includes the revisions made to the monthly caseworker visit form. The form was revised to support discussion and documentation of important information and many of the 18 CFSR practice items. Topics that define a quality visit are outlined and documented on the form. The development, use, and updates to the form help improve quality casework practice on key items as well as engage children, parents, and resource caregivers in important and meaningful discussions to support case planning and achieve permanency goals.

Connecting multiple outcomes can promote improvement in multiple areas, as well as synthesize casework practice to support families and caseworkers.

2) Program Improvement Program

Hawaii's third Program Improvement Plan (PIP) developed from CFSR Round 3 was successfully completed. ACF approved Hawaii's PIP on April

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16, 2019. The PIP period officially began on May 1, 2019. In December 2022, Hawaii received ACF approval of the successful completion of the plan.

At least twice a month, a core team of CWSB, CQI staff, and CIP staff oversaw implementation of the PIP, met weekly, communicated about progress with sub-committees and stakeholders, and reviewed completion of activities and trends in data. Monthly meetings were held with SAs and quarterly meetings were held with supervisors to discuss the application of new and revised procedures and practices. Although Hawaii does not have a current PIP, these meetings are continuing to discuss and plan for practice improvement, revisions or additions to procedures, and case review findings. CWSB also has continued to use these meetings over the past year to prepare for the upcoming CFSR, including submitting the necessary documents and information for Hawaii to lead its own case reviews, and planning for the Statewide Self-Assessment.

Planning for the Next Five Years

Hawaii plans to keep the current quality assurance and CQI systems in place throughout the next five years, while being open to modifications as needed to meet the ever-changing needs of Hawaii's families and the CWSB system. CWSB anticipates that much of CQI efforts in this upcoming period will be focused on the federal CFSR, as Hawaii's documents to conduct State-led case reviews are due to ACF in July 2024, Hawaii's Statewide Self-Assessment is due in February 2025, and other CFSR activities will ensue shortly thereafter.

Hawaii believes its CQI/QA system is strong, as described in the section above; Hawaii is able to assess and evaluate its programs and its practice. The enhancements that Hawaii is planning are largely around incorporating CQI/QA into the Hawaii CCWIS. Since Hawaii is so early in its CCWIS implementation process, it has not yet identified the trainings and supports that will be necessary.

Hawaii eagerly anticipates integrating its QA and CQI systems into the new CCWIS. CWSB anticipates improved data quality and reduced duplication, as staff are trained and begin to use the new database. Reviewing case records will also likely be greatly facilitated with the implementation of CCWIS. CWSB leadership as well as line staff and community partners will be able to more easily access both CWSB data and data from contracted service providers. This will promote transparency and allow for greater collaboration and community stakeholder input.

Evaluation and Research Activities

CWS is actively involved in numerous evaluation efforts, as well as a couple of interesting research projects. All of the activities described below are current and will continue for the next several years. This list is not comprehensive, but instead is a sampling of Hawaii's research and evaluation endeavors. These activities all relate to CFSP goals, as noted below.

a. Family First Hawaii External Evaluation (related to CFSP Prevention Goal)

The external evaluation of FFH is conducted by a team at the University of Hawaii (UH) Center on the Family. The FFH evaluation plan includes UH producing both a Process Evaluation Report and an Outcome Evaluation Report. For a fuller description of UH FFH evaluation work, please refer to *Section II: CWSB Strategic Planning, A. Overview of Hawaii's Child and Family Services Plan (CFSP) 4. Family First Hawaii Overview, UH Evaluation Team Report* in this APSR.

b. Comprehensive Medical Exams (related to CFSP Safety Goal and Collaboration Goal)

CWSB has been partnering with the Hawaii Department of Human Services, Med-QUEST Division (MQD) to improve the rates of timely, within the first 45-days of foster care, comprehensive medical exams for children in foster care. The team working on this issue has reviewed existing data on when comprehensive medical exams are performed on children in foster care. The evaluation of the data pointed to key areas for improvement, such as documentation, which are being addressed by the team. Early and Periodic Screening, Diagnostic and Testing (EPSDT) can be accessed through the child's Medicaid plan. These services are key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, developmental, and specialty services.

c. CCWIS RFP Evaluation (related to CFSP Collaboration Goal)

With the Capacity Building Center for States and the Project Management Services Team's support, CWSB issued its CCWIS RFP on June 26, 2023. Proposal deadline was August 21, 2023. An extensive evaluation period followed. The Notice of Award for Hawaii's CCWIS vendor was made on January 5, 2024, to Elixir Lab USA Inc. doing business as Cardinality. The contract is being finalized and the vendor is expected to begin work in the Fall of 2024.

- d. Quarterly Activity Reports (QAR) (related to CFSP Safety Goal and Prevention Goal)

All community service providers that have contracts with CWSB submit QARs which detail the number of types of individuals they served in the past quarter, what specific services these individuals received, and the outcomes of the service delivery. These QARs are reviewed and evaluated by SSD Purchase of Service (POS) Program Specialists and by CWS Assistant Program Development (PD) Administrators. When concerns arise during these evaluations, POS and PD staff work with the provider to adjust services to better meet the families' needs. Contracted services include maltreatment prevention services and safety promotion services.

- e. On-Site Contract Monitoring (related to CFSP Safety Goal and Prevention Goal)

CWS plans to schedule on-site monitoring of service contracts in the coming few years, as a mechanism to more closely evaluate the structure, model, process, and provision of services. Contracted services include maltreatment prevention services and safety promotion services.

- f. Independent Living Collaborator (ILC) (related to CFSP Collaboration Goal and Safety Goal)

Since October 2015, CWSB has contracted the services of an Independent Living Collaborator (ILC) to work with CWSB, service providers, young people, community stakeholders, and other partners to support an enhanced and seamless system of care. The ILC assists CWSB with collaboration; enhancing communications; workgroup development and facilitation; development of guidelines with best practice standards; providing and/or collaborating on trainings and conferences; evaluation and monitoring; ongoing CQI; and youth and young adult engagement.

- g. Disposition Consistency (related to CFSP Safety Goal and Workforce Goal)

With a goal of improving safety for children, CWSB has begun examining how consistently assessment workers are applying the relevant definitions of harm, when determining if maltreatment allegations should be confirmed or not. CWSB plans to work toward greater consistency in assessment workers dispositions of allegations through increased practice guidance.

h. Child Death Reviews (related to CFSP Safety Goal and Collaboration Goal)

Hawaii will sustain its collaborative and data-driven approach to improve the understanding and prevention of child maltreatment deaths statewide. The State will continue to utilize Child Death Review (CDR) meetings to ensure ongoing evaluation and enhancement of child protection policies and practices.

i. Psychotropic Medication Monitoring in Multidisciplinary Team (MDT) Contract (related to CFSP Safety Goal)

The MDT includes medical staff who have oversight of all youth in care for whom psychotropic medication is prescribed. They are tasked with reviewing each referred case for appropriateness, safety, and efficacy of the medication, and for bringing any concerns to the treatment team for further review. Consultation is also available for all CWSB-involved children with medical and mental/behavioral health needs.

j. Hawaii Wellbeing Reports (related to CFSP Collaboration Goal)

The Liliuokalani Trust Research and Evaluation team approached CWSB in late 2022 about sharing de-identified NYTD data outcomes. Through a short collaboration, CWSB was able to provide Liliuokalani Trust with the de-identified data. The data was brought before the Native Hawaiian Research Hui with researchers from Liliuokalani Trust, Kamehameha Schools, and the Office of Hawaiian Affairs. NYTD data outcomes were used to support additional Hawaii Wellbeing reports, which are available for review at <https://www.ksbe.edu/research/imi-pono-hawaii-wellbeing-survey>

k. Workforce Quality Improvement Team (WQIT) (related to CFSP Workforce Goal)

In the latter half of SFY 2024, CWSB began focusing on workforce recruitment and retention. A new CWSB workgroup has been formed, calling itself the Workforce Quality Improvement Team (WQIT). With support from the CBC, this team plans to intensify and improve CWS staff retention and recruitment efforts. The team plans to review and evaluate the current workforce data, including exit interview data, as it plans its strategies.

l. Casey Family Programs (CFP) Child Welfare Data Leaders (CWDL) Workforce Research (related to CFSP Workforce Goal)

Hawaii CWSB is contributing to a multi-jurisdictional, national research project regarding child welfare workforce. CFP CWDL is the lead agency/group for the project. The project hopes to identify effective child welfare staff recruitment and retention strategies.

m. FFH CQI Hui (related to CFSP Prevention Goal and Collaboration Goal)

This Hui is lead by CWSB Program Development staff and a staff member from EPIC Ohana who has lived experience as a parent in the child welfare system. This is an external CQI group, which consists of representative from CWSB leadership, CWSB line staff, community organizations, people with lived experience in child welfare, Department of Health, Department of Education, resource caregivers, and other stakeholders. The group reviews CWSB and FFH data three times a year and meets to discuss and evaluate it. The group passes on its recommendations for improvement to CWSB leadership for implementation.

n. Hawaiian Homestead Research Project (related to CFSP Prevention Goal)

CWSB is collaborating with UH School of Social Work on a project which is comparing the rate of child welfare involvement for Native Hawaiian children who live on Hawaiian Homestead land to Native Hawaiian children who live elsewhere in the State. The hypothesis is that there are protective factors within the Hawaiian Homestead community that keep children safe from harm. If the research is able to prove that the rates of maltreatment are indeed lower for Hawaiian Homestead children, the researchers will then work to identify the protective factors. Once identified, the research team plans to promote these protective factors in other communities to reduce child maltreatment statewide.

o. Malama Ohana (related to CFSP Collaboration Goal)

The Hawaii Office of Wellness and Resilience oversees the Malama Ohana working group. The group has begun holding statewide listening sessions to bring together community partners and those with lived experience to improve and transform the child welfare system. The group plans to evaluate the current child welfare system and make recommendations for improvement. Read more about Malama Ohana in this APSR in *Section VI. Systemic Factors, F. Agency Responsiveness to the Community, 1. CFSR Item 31: State Engagement and Consultation with Stakeholders pursuant to CFSP and APSR, Planning for the Next Five Years, Malama Ohana.*

- p. CWS New Hire Training Evaluation (related to Workforce Goal)

SDO, with support from HCWCQI, conduct formal evaluations of CWS New Hire Training for every cohort that completes the training series. These evaluations have led to improvements in the New Hire Training curriculum, like the inclusion of the Native Hawaiian Perspectives session.

D. STAFF AND PROVIDER TRAINING

See APSR Attachment E: SDO Training Plan 2024. All CWS staff and provider training continues to be virtual.

1. CFSR Item 26: Initial Staff Training

The current cycles of New Hire Training continue to be virtual. Since the last review period evaluations were developed and implemented by SDO, SDO continues to place a strong emphasis on engagement and ensuring staff participation, instilling culturally sensitive modules, such as Epic Ohana’s Kanaka Oihi and Micronesian Cultural Sensitivity, and an overall understanding of the module’s objectives. Upon request, the Kanaka Oihi training module was extended from a half day training to a full day training. SDO continues to involve the Live Experience Advisory Group (LEAG) to provide CWS staff and community partners with the client/parent perspective and the CWS and APCSB Child Protective Services System (CPSS) training expanded to include Basic and Payment training to CWS New Hire Training. CQI continues to conduct new hire group evaluations and meetings, virtually, at the end of all New Hire Trainings. SDO will continue to make appropriate changes to the New Hire curriculum as recommended by the CQI evaluations and Program Development recommendations, in consultation with the Capacity Building Center for States (CBC).

SDO is also working to establish an improved system of tracking CWS staff training to review whether staff meet the required training hours (15 hours). The current changes are being worked on with SHAKA staff to allow each section and unit secretaries, statewide, access to the SHAKA system to input their respective section and unit worker’s completed training hours into SHAKA. SDO will continue to seek improvements with the CWS tracking system to provide the ACF with accurate data.

2. CFSR Item 27: Ongoing Training

See APSR Attachment E: SDO Training Plan 2024.

3. New and Ongoing Training for Supervisors and Section Administrators

See Hawaii Child Welfare Services Strengths Based Supervision and Coaching in CWS Module Topics 2023/2024. Below is the training schedule for SFY 2024 New Supervisor Training:

- Module 1 – Friday October 27, 2023
- Module 2 – Friday November 9, 2023
- Module 3 – Friday December 15, 2023
- Module 4 – Friday January 5, 2024
- Module 5 – Friday February 2, 2024
- Module 6 – Friday March 8, 2024
- Module 7 – Friday April 12, 2024
- Module 8 – Friday May 3, 2024
- Module 9 – Friday June 7, 2024

SDO is still exploring options to create training specifically for CWS section administrators.

4. CFSR Item 28: Resource Caregiver and Adoptive Parent Training

There are multiple opportunities for resource caregivers (RCGs) to receive training and support. Training contributes to the stability of placement and Hawaii Assures Nurturing and Involvement (HANAI Training) provides a continuous assessment of RCG needs early on and throughout their time as a RCG. Training opportunities are available to RCGs, adoptive parents, and guardianship families. Through the COVID-19 pandemic, CWSB learned the value of virtual and on-demand training and has continued to offer virtual as well as in-person training opportunities through its contracted provider for RCG Support Services. Support services include training, assistance with problem solving, mentoring, and networking opportunities. Examples of specific support services include Pre-Service Training, Ongoing Training, special “child specific” trainings, various online training options (e.g.: www.fosterparents.com and www.fosterparentcollege.com), a RCB support line (known as a “warm line”), caregiver support groups and café’s, “talk story” Tuesdays, and the Kinship Navigator Program among other supports.

Support groups are available, including one for RCGs who are grandparents caring for their grandchildren, and one for RCGs who are caring for teenagers. The small support group idea was expanded to include an informal monthly “talk story” session with the CWS Branch Administrator and a Program Development Administrator to listen to issues, identify training and support needs, answer questions, receive feedback, and share updates.

Shared parenting is the mindset of a practice to support parents and children involved in foster care; Hawaii has implemented Two Makua as a way to facilitate RCGs and birthparent working together and sharing parenting for the best interest of the child(ren). *See section IV.A.1- Reunification efforts, Two Makua for additional details.* The foundation of the training curriculum uses a Trauma and Healing Informed Care lens, which may help RCGs understand the experience of children and families in foster care and better support their needs. It also provides an opportunity for a coordinated approach to help establish relationships and support pre-service training.

Planning for the Next Five Years

Hawaii will continue to identify training and support needs; customize and provide training opportunities for RCGs, adoptive families, guardians, and CWSB staff; support best practices pertinent to CWSB values; and contribute to achieving the vision of “The people of Hawaii are thriving.”

E. SERVICE ARRAY AND RESOURCES

Item #29 Service Array

CWSB is committed to ensuring that appropriate and effective services are available to families throughout the State. CWSB and Voluntary Case Management Service caseworkers assess family needs and identify appropriate services and supports to reduce risk of harm so children can safely remain in the family home or be reunified with parents when children are placed out of the family home. Services are tailored for each family with goals and strategies to support positive outcomes.

The Department supports appropriate and effective services statewide through the collaborative efforts among the Department, other State agencies, Purchase of Service providers, and the community. Department representatives receive ongoing feedback regarding services from CWSB staff, stakeholders, community members, and provider agencies through meetings, convenings, workgroups, councils, conferences, committees, and caucuses on various CWSB related topics throughout the State. Service array is discussed in different workgroups. As an example, the All-State Team meets to identify the needs of families with children 0 – 5 and resources that may be available within their communities such as childcare, legal services, and health services.

The contracted service array is reviewed and enhanced to meet the needs of children and families served by CWSB. Over the last five years, services have been enhanced and expanded as information is gained on successful strategies and the needs of families. As part of the prior

Statewide Self-Assessment, CWSB reviewed and described Hawaii’s robust array of services available to families through contracted and community providers. Examples of growth are included in the section on service array of prior APSRs submitted as part of the CFSP 2020 - 2025. In addition, services available to families are also described throughout the APSR in various sections including those that address vulnerable populations, supports for resource caregivers, and community collaborations.

Over the next five years, CWSB will continue to review the needs of families and work to adjust the service array to meet their needs. In addition, CWSB will work with providers and community partners to continually enhance efforts to incorporate culture, diversity, and trauma informed care into service delivery.

CWSB looks forward to the upcoming Statewide Self-Assessment as an opportunity to review the service array and identify area for growth to better meet the needs of families within their communities.

Item #30: Individualizing Services

Discussion

Information gathering is an important part of the assessment process and individualizing services. Over the past five years, CWSB has worked to enhance information collection as part of the child safety assessment. Information on strengths and needs helps to identify and individualize services and approaches.

As part of the All-State Team, members continue to meet every other month to discuss the needs of families with children ages 0 – 5 and identify resources to meet their needs as well as provide opportunities for collaboration. Shared information has provided members with information, strategies, connections, and new collaborations to support the families they work with. Awareness and access to resources can help tailor a more individualized plan and approach to support families.

Planning for the Next Five Years

CWSB will continue to work on enhancing the assessment process through form and procedure revisions as well as incorporation of the family voice and perspectives in assessing and managing safety. This work is currently supported through the Capacity Building Center for States and with key participation from parent partners. Collaboration and partnership with families will help to create an environment that allows for trust and openness to identify and celebrate strengths and areas to build on through safety strategies and individualized services.

The All-State Team plans to continue to meet, as there is ongoing work to be done to identify the needs and supports and resources for families with children ages 0 – 5 and opportunities for members to enhance relationships, share information on resources and trainings, and improve system collaboration.

The team will work together to identify agenda items, topics for exploration, and other partners for future meetings to promote a robust, effective, accessible service array and interventions for families with children ages 0 to 5 to strengthen families to prevent entry and re-entry to child welfare services through gaining sustained skills, supports, and resources within their community.

F. AGENCY RESPONSIVENESS TO THE COMMUNITY

1. CFSR Item 31: State Engagement and Consultation with Stakeholders pursuant to CFSP and APSR

Past Five Years

All State Team

This collaborative group was initially formed to develop the CFSP vision for 2020-2024. The group included members from the Court Improvement Program, Family Court and the Zero-To-Three Specialty Court on Oahu, the Hawaii Department of Health, Community-Based Child Abuse Prevention Program, and CWSB representatives. After completing the vision, the group agreed to continue working together and developed a CFSP goal to promote a robust, effective, accessible service array and interventions for families with children ages 0-3 to strengthen families to prevent entry to child welfare services and prevent re-entry to child welfare services through gaining sustained skills, supports, and resources within their community. Members continue to meet every other month to discuss the needs of families with children ages 0 – 5 and identify resources to meet their needs, as well as opportunities for collaboration. Additional members have joined this effort, including a representative from another Department of Health program that supports children and families, the Hawaii Department of Education, a resource caregiver, Liliuokalani Trust, and EPIC Ohana Inc.

The team expressed that meeting together in this forum has been helpful for the partners in their work. Over the last five years, meetings have included discussions on the needs of families with children in the Oahu Zero-To-Three Specialty Court as well as other families with children in this age range.

The team received information/training on different topics throughout the five year plan years, such as supports for families that have achieved guardianship and adoption, Na Kama a Haloa and the Network-Fostering Strong Connections Hui (strengthening

resource caregiver roles) that created a video through collaboration and a donation from Hawaii Medical Service Association (HMSA), “*Our Keiki, Our Kuleana: Weaving Ohana Together*”, legal services, child care, Fetal Alcohol Spectrum Disorder, Child-Parent Psychotherapy, and We Are Oceania, to learn more about these topics and resources in the community.

Shared information has provided members with strategies, connections, and new collaborations to support the families they work with. This was helpful during the pandemic to share updates and new resources and strategies to support families and the workforce.

Parent Partners in Planning

CWSB continues to enhance assessment tools and procedures to support practice and achieve positive outcomes for families. Over the last year, this effort has been enhanced through technical assistance from the Capacity Building Center for States.

Parent Partners have been a critical addition to the process of enhancing practice in many areas. Recently, Parent Partners have participated in meetings to review and revise safety tools and procedures and provide valuable insight into the experience and perspective of families to create positive change in engagement and practice. In addition, representatives from the Equity Improvement Collaborative also provided valuable feedback on the revisions.

Parent Partners will be involved in the curriculum development and possibly part of the delivery to contribute their expertise on how to enhance practice with families.

Hawaii State Youth Network of Care (HI SYNC)

In 2018, CWSB entered into a Memorandum of Understanding with other state entities to formalize the Hawaii State Youth Network of Care (HI SYNC) collaboration. HI SYNC focuses on crosscutting situations and allowing access to services in all state child-serving departments to ensure the best outcomes for youth with multiple challenges and/or multi-system involvement. Initial participants included the Hawaii Department of Health, particularly the Child and Adolescent Mental Health Division and Early Intervention Sections; Hawaii Department of Education; Judiciary; and CWSB. This collaboration has grown to include additional agencies and community providers to help meet the needs of youth.

Planning for the Next Five Years

The All-State Team plans to continue to meet as there is still work to be done to identify the needs, and supports, and resources for families with children ages 0 – 5, and

opportunities for members to enhance relationships, share information on resources and trainings, help to individualize services for families based on needs, and improve system collaboration.

The team will work to identify agenda items, topics for exploration, and other partners for future meetings.

CWSB plans to continue to include parent partners in efforts to improve practice and partnerships with families. Parent partners provide an important, supportive service to parents involved in CWSB who are participating in the Wraparound planning process called Family Wrap Hawaii. They also provide a key perspective to improve systems and practice. Parent partners have valuable lived experience with Child Welfare Services and other relevant systems and provide specialized support to parents in a variety of ways, including enhancing parent voice in case planning and promoting engagement and positive outcomes.

CWSB will continue to be an active member of the Hawaii State Youth Network of Care (HI SYNC) collaboration. The group has recently initiated strategic planning to identify areas of focus to support youth with complex and cross-agency needs. CWSB representatives from each geographic location participated in the planning process. CWSB continually identifies opportunities to collaborate with different groups within communities to help meet the needs of children and families.

Family First Hawaii

Overview of the Past Five Years

FFH's collaborative approach in direction, implementation, and decision-making resonates with the deeply rooted values of Hawaii's collectivist culture, embodied by the Aloha Spirit law, with its traits of **Akaiha** (kindness), **Lokahi** (unity), **'Olu'olu** (agreeableness), **Ha'aha'a** (humility), and **Ahonui** (patience). Coupled with the fundamental Hawaiian value of **Laulima** (many hands working together), these principles form the cornerstone of meaningful collaboration with all communities in Hawaii to achieve collective success.

As FFH progresses with its implementation, it strives to uphold these values as a standard for engaging stakeholders, including the CWSB workforce, service providers, persons with lived experience, community-based organizations, and representatives from various State departments to work together in safeguarding Hawaii's children and families.

From 2022 to 2024, FFH leadership prioritized strengthening internal communications and providing support for CWSB staff to enhance awareness and knowledge of FFH's

purpose and services. Recognizing the significance of change management processes, FFH leadership invested in fortifying internal structural supports to prepare staff for any changes in practice and procedures related to FFH. Additionally, policies and procedures were and are developed collaboratively with input from internal and external partners, including staff and persons with lived experience.

To bolster internal communications further, CWSB Section Administrators and Supervisors are encouraged to participate in monthly FFH Implementation Management Team (IMT) meetings. These meetings serve as a platform for being informed on FFH implementation activities and workgroup reports, making decisions on workgroup recommendations, and monitoring overall progress. IMT meetings also serve as a venue for gathering recommendations to address issues that hinder the effective implementation of FFH initiatives. Additionally, each Section Administrator provides updates on FFH service utilization, short-stayer data follow-up, barriers to implementation, successes, and needs within their respective geographic areas during these meetings. This inclusive approach ensures that CWSB staff and other stakeholders are actively involved and informed throughout the implementation process.

Annual Update

Enhancing External Communications: While internal communications and support for CWSB remains a priority, FFH leadership recognizes the need to expand engagement with external partners and the broader community. Understanding the significance of community involvement, FFH is transitioning towards a more proactive approach to informing and engaging with stakeholders beyond its immediate sphere. This strategic shift aims to foster deeper connections and collaboration to ensure the community is informed, involved, and supportive of FFH's mission and initiatives.

Public Service Announcement (PSA) Project. Through funding from Casey Family Programs, the FFH Communications workgroup produced two PSAs as a means of building community awareness and making meaningful connections with the Native Hawaiian community as well as the broader community. The inception of the PSA project stemmed from the collective desire to broaden outreach and to write a narrative that encompassed CWSB's and DHS' positive endeavors.

The Communications workgroup was involved in selecting the message and providing valuable feedback on the storyboards or scripts during the development phase of the PSAs. The group voted on four potential messages. The top choice was the message about the disproportionality or overrepresentation of Native Hawaiian children in foster care. This decision reflects a collective recognition of the need to address this injustice and underscores CWSB's commitment to achieving equity for Native Hawaiian children and families within its system.

The second choice was the message regarding how CWSB is transforming how it serves children and families through Family First Hawaii. Other PSAs shared the same call to action: It is not just the kuleana (responsibility) of CWSB to protect and care for the keiki (children) of these islands; it is a shared responsibility that extends to every member of the community.

The 60-second PSA about the disproportionality of Native Hawaiian children in foster care was meticulously crafted in consultation with Native Hawaiian cultural specialists from Na Kama a Haloa and in close collaboration with the Equity Improvement Collaborative (EIC) and Data, IT, CQI, Evaluation (DICE) leads. Guided by the expertise of Na Kama a Haloa, the PSA embraced a strengths-based approach to uplifting and shining a spotlight on the potential of Hawaiian children and families. It is with this spirit of aloha that CWSB strives to create a safer environment for all children within their families and communities, thereby safely reducing the number of children in foster care, especially Native Hawaiian children.

PSA Presentations. The PSA project involved conducting PSA presentations exclusively for staff, with a strong emphasis on highlighting Native Hawaiian disproportionality within CWSB. It was imperative that CWSB staff receive this information directly from FFH leadership, thus ensuring they were well-informed before the PSA reached a wider audience. This proactive approach was crucial, considering that many staff members most likely were not aware of the extent of the disproportionality. Ensuring that staff were the first to view the PSAs was a deliberate decision, emphasizing the importance of internal communication and transparency.

The purpose of these PSA presentations was multifaceted. First, it aimed to raise awareness about the issue of disproportionality within CWSB system by acknowledging its existence. Second, it provided insights into the steps being taken by the EIC to address this disparity. Lastly, it empowered staff with actionable steps they can take by utilizing a strengths-based approach when engaging Native Hawaiian families. These PSA presentations mark the beginning of what CWSB hopes will be an ongoing series of courageous conversations surrounding disproportionality and equity within the CWSB system. *Refer to Section VII.C.2 Strategic Planning Committee: Race Equity for more details on our ongoing efforts to achieve equity within CWSB.*

FFH Outreach. FFH outreach extends beyond staff presentations to various stakeholders and community-based organizations requesting information about FFH. CWSB embraces the opportunity to not only share information about FFH, but to build and nurture relationships with a diverse array of stakeholders. FFH presentations being considered for SFY2024 include Kauai CWS Section 8, MQD Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Stakeholder meeting, Home Visiting Services provider group, Hawaii Children's Trust Fund (HCTF), EPIC Ohana Conferencing staff, DOH Child and

Adolescent Mental Health Division (CAMHD) Central Oahu Family Guidance Center, CAMHD Leeward Family Guidance Center, and Hawaii Ohana Support Network (HOSN). FFH co-hosted a webinar with the DOH Neurotrauma Program on “The Impact of Brain Injury in Parenting and Child Welfare” and participated with Maui CWSB Section in manning a booth at the Hooikaika Partnership Ohana Fest to share information about FFH with the Maui community.

FFH maintains its commitment to keeping stakeholders informed by continuously distributing quarterly newsletters on implementation progress and other related initiatives. By engaging with external partners, FFH seeks to establish meaningful relationships to promote collaboration and facilitate the exchange of ideas, resources, and expertise to enhance the safety and well-being of children and families.

Lived Experience Voice. FFH is deeply committed to ensuring that the voices and perspectives of persons with lived experience are heard and validated. CWSB continues to seek guidance and consultation from the Lived Experience Advisory Group (LEAG) in key decision-making points, trainings, refining policies and procedures, and other FFH initiatives. FFH leadership has taken the uplifting lived experience voice even further by embedding LEAG members at the core of CWSB operations. Individual LEAG members are now part of various FFH workgroups such as the Steering Committee, Communications, EIC, FFH CQI Hui, and Family Supported Arrangements Continuum workgroups to inform practice on a more intimate level while enhancing their understanding and roles within FFH.

FFH leadership recognized that this level of involvement for LEAG members demands more than just having “a seat at the table” and requires additional support and resources to fully engage and empower lived experience voices. Recognizing this increased demand on LEAG members, FFH leadership sought technical assistance from the Capacity Building Center (CBC) for States to provide guidance on how to genuinely and effectively maximize lived experience voice and participation throughout FFH workgroups and overall FFH implementation. LEAG and FFH leadership are currently working with a CBC Family Consultant to develop a structured framework to ensure that CWSB’s approach to lived experience engagement is not only meaningful, but also sustainable. It is with this hope that CWSB is able to continue to improve its work with lived experience people to ensure that their voices are not just heard but actively shape child welfare practice and outcomes.

Short-Stayer Monitoring. During the FFH planning and development phases, data analysis revealed that approximately 15% of children in foster care during SFY 2014-2018 were short-stayers (children placed in foster care for 30 days or less). This percentage elevated short-stayers to a priority group in defining candidacy for FFH eligibility. It also prompted a critical examination of CWSB practices in questioning the

necessity of removing a child from their home if their foster placement was relatively brief, particularly if it lasted five days or less.

Figure 27 (Children in Foster Care One Month or Less) in the accompanying Hawaii Data Booklet APSR FFY 2025 tracks the number of short-stayers over a five-year period from SFY 2019 to SFY 2023. The percentage of short-stayers has shown minimal variation over the five-year period, with a slight uptick noted in SFY 2023 [13% in SFY 2019, 11% in SFY 2020, 11% in SFY 2021, 11% in SFY 2022, 14% in SFY 2023]. As a result, FFH remains committed to monitoring short-stayers with the goal of reducing their numbers by addressing systemic and practice barriers to family preservation.

Initially, Section Administrators (SA) provided verbal reports on short-stayers during FFH Implementation Management Team (IMT) meetings on a monthly basis. However, recognizing the potential strain this could have on SA participation in IMT meetings, the reporting frequency shifted to quarterly reports. This adjustment aimed to promote more meaningful engagement from staff leadership and foster a sense of "buy-in" towards FFH initiatives.

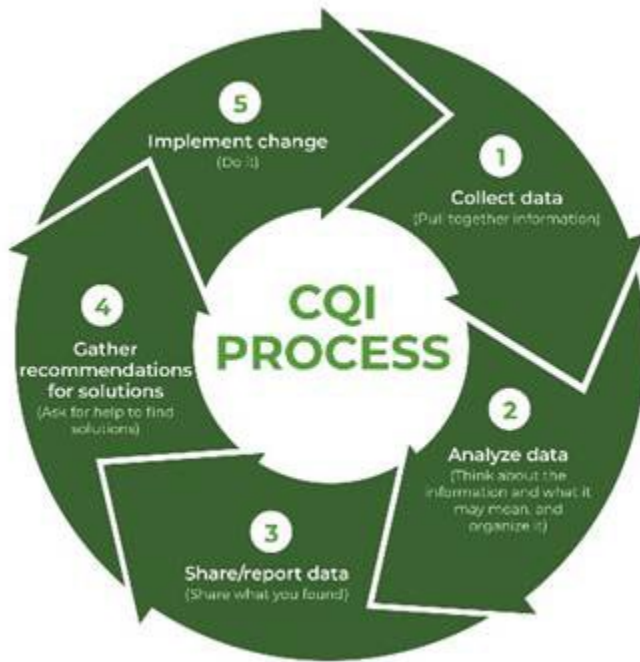
Targeted CQI Review on Short-Stayers. A targeted CQI review was conducted by HCWCQI to determine the primary causes for short-stayers and to identify recurring patterns in case practice contributing to these short-term foster care placements for children. The goal of the review was to gain insights that would guide the development of targeted interventions to mitigate unnecessary child removals. The findings highlighted several key factors contributing to short-stayer placements.

- Mutual Temporary Restraining Orders by parents
- Lack of respite care for parents, especially for challenging youth behaviors
- Lack of natural supports for families to care for children
- Parent(s) arrested
- Staff concerns about the safety of informal placements
- Lack of access to parent(s) for safety planning
- Lack of IHBS openings

FFH CQI Hui Short-Stayers Action Priorities. FFH's methodical approach to developing strategies to mitigate short-stayer placements reinforces the use of the FFH CQI cycle and underscores the significance of data-based decision-making. It also highlights the importance of analyzing and addressing significant issues through the critical lens of continuous quality improvement. This is exemplified by the Short-Stayer Action Priorities developed by the FFH CQI Hui (formerly known as One CQI Team), which illustrates the CQI cycle in action. The FFH CQI Hui is the external CQI workgroup consisting of CWSB representatives, contracted service providers, LEAG, cross-system partners, and community partners; the purpose of the hui is to support FFH

implementation, identify gaps in prevention services, and make recommendations for program, process, and system improvements.

In one of the 2023 triannual CQI Hui meetings, the group convened to address the pressing issue of short-stayers within CWSB. To initiate this process, the FFH CQI Cycle illustrated in the graphic below was followed.



Step 1: Data Collection

- **Quantitative Data:** The Hui began by gathering numerical data on short-stayers.
- **Qualitative Data:** Delving deeper, the Hui explored the underlying reasons behind short-stayers through a targeted review by the HCWCQI Team and insights from CWS supervisors and section administrators.
- **Identified Reasons:** Through this process, the Hui identified key reasons for short-stayers, including mutual Temporary Restraining Orders, lack of respite care for parents, absence of natural supports for families, parental arrests, concerns about the safety of informal placements, and insufficient access to parents for safety planning.

Step 2: Data Analysis

- The Hui analyzed the qualitative data to gain insights into the root causes of short-stayers.

Step 3: Data Sharing and Reporting

- The data was shared with relevant stakeholders, including CWSB Section Administrators, supervisors, FFH workgroups, and the FFH CQI Hui.

Step 4: Gathering Recommendations for Solutions

- The Hui solicited solutions during breakout sessions in one of the triannual meetings and prioritized these solutions through a survey.

Step 5: Implement Change

- Plans are underway to implement the proposed recommendations in collaboration with CWSB leadership.

Breakout sessions were conducted in the FFH CQI Hui meeting to brainstorm possible solutions, resulting in 12 recommendations. The top five priority recommendations or action priorities, chosen through group voting, were as follows:

1. Enhance and increase IHBS staff recruitment efforts on neighbor islands to address the lack of IHBS openings.
2. Create an improved method for approving and granting overtime for CWSB line staff to allow caseworkers the time needed to create successful informal placement arrangements and addressing staff concerns about the safety of informal placements.
3. Train judges and court staff on the impact of mutual stay-away orders, advocating for children to be included on orders only when there is evidence of harm or threat of harm based on past behavior or incidents.
4. Train CWSB staff to engage with parents in challenging circumstances to identify family members who can care for children and addressing the lack of natural supports, lack of respite care, and mutual TROs.
5. Develop a working agreement with local law enforcement to allow easy and early access to parents who are arrested.

Further Steps Taken:

1. IMT Work:

- The top five Short-Stayer Action Priorities, as determined by the Hui, were presented to the Implementation Management Team (IMT) in October 2023.
- Breakout sessions were conducted within the IMT meeting to develop strategies, identify champions, and establish timelines for each Action Priority.

- These priorities were then elevated to the Steering Committee for further refinement.

2. FFH Steering Committee Work:

- In a November 2023 meeting, the Steering Committee expanded on the Action Priorities and decided on the sequence of implementation based on feasibility.
- Notable achievements include:
 - The successful completion of Action Priority 2: Improving the process for approving overtime for CWSB line staff to facilitate successful informal placements.
 - Progress on Action Priority 3: Training judges and court staff on the impact of mutual stay-away orders.
 - Advancements in Action Priority 4: Training CWSB staff to effectively engage with parents in challenging circumstances.

Moving forward, ongoing discussions within the Steering Committee will focus on identifying leads for each action priority to drive progress and foster collaboration across relevant groups. Through this structured approach to problem-solving and implementation, CWSB is committed to effecting meaningful change in addressing short-stayers within the child welfare system.

Planning for the Next Five Years

Enhancing the Communications Feedback Loop. FFH has embraced the CQI cycle as the cornerstone of its communication feedback loop, affirming its commitment to advancing the quality of CWSB practice. As communication plays a vital role in its mission, CWSB acknowledges the necessity of strengthening processes for addressing staff and stakeholder inquiries and requests. In aligning with the CQI framework, FFH will make ongoing efforts to refine communications processes, recognizing that its ability to promptly address inquiries and requests is crucial for fostering trust, collaboration, and satisfaction among team members and stakeholders. To achieve this, FFH leadership will work on establishing transparent channels and protocols for receiving, prioritizing, and addressing inquiries and requests in a timely manner.

Furthermore, FFJ recognizes the importance of providing updates on FFH progress and soliciting feedback from both internal and external stakeholders to continuously evaluate and refine its implementation efforts. By actively seeking input on stakeholder experiences and expectations, it can identify areas for improvement and implement targeted interventions to address any gaps or inefficiencies. In enhancing its

communication framework, it will be able to elevate the quality of its interactions, thereby reinforcing its commitment to excellence and continuous improvement.

Enhancing Lived Experience Engagement. FFH leadership has proactively sought technical assistance to authentically and effectively amplify the voices and participation of persons with lived experience throughout its workgroups and broader FFH implementation efforts. Currently, LEAG and FFH leadership are collaborating with a CBC Family Consultant to create a comprehensive framework, ensuring that their approach to engaging lived experience is not only impactful but also sustainable. This includes developing onboarding documents with input and guidance from LEAG to facilitate a smooth transition into FFH workgroups, ensuring that persons with lived experience are equipped with the knowledge and tools needed for informed and meaningful engagement.

FFH is committed to finalizing and implementing a structured and sustainable framework for lived experience engagement and empowering individuals to contribute meaningfully to its initiatives. This framework will serve as a roadmap, guiding its interactions with lived experience individuals and uplifting their voices throughout every aspect of its work. By actively involving members with lived experience, FFH not only enriches its discussions but also inform its policies, procedures, and practices with valuable perspectives, ultimately fostering more inclusive and effective outcomes for all involved.

Through transparent communication, meaningful partnerships, and inclusive engagement initiatives, FFH is committed to building a strong and supportive network that extends beyond its organizational boundaries. This holistic approach not only amplifies the impact of FFH's work, but also cultivates a sense of shared responsibility and ownership within the community towards keeping children and families safely together.

Malama Ohana

Malama Ohana is another example of community collaboration to support families involved with Child Welfare Services. Malama Ohana is a working group established during the 2023 legislative session and signed into law as Act 86 by Governor Josh Green on June 14, 2023. The concept of the working group originated within the work of the Na Kama a Haloa Network, which consists of more than 30 organizations working collaboratively to improve the lives of Native Hawaiian keiki and ohana, especially those over-represented in the state's child welfare system.

The Hawaii Office of Wellness and Resilience oversees this working group to hold statewide listening sessions bringing community partners and those with lived

experience together to improve and transform the child welfare system. The child welfare system encompasses the Department of Human Services, government partners, provider partners, community supports, and lived-experience experts. A report is due to the Legislature for the next 2025 Legislative Session. The report will note what things are working well and suggestions for collaborative improvements. Listening and collaborating is critical for creating a healing system for some of CWSB's most vulnerable families and children.

Court Stakeholders

The collaboration with the Court stakeholders, developed as part of a Program Improvement Plan, has been a positive strategy to identify shared goals and work together to improve outcomes. These meetings continue to occur quarterly in each circuit and provide a place for connections and relationships to be established and sustained, and create opportunities for CWSB to work together with court partners to achieve positive outcomes. These meetings include multiple stakeholders including CIP, CWSB leaders, Family Court judges, DAGs, GALs, CASAs, parents' counsel, and other judicial partners. Agenda items in such meetings include reviews of data on CFSR items 5 and 6, observations of workflow, information sharing, review of trends from data, discussion of practice shifts regarding Family First Hawaii and other areas, efforts for placement prevention, and other topics that would benefit from collaboration. The focus on shared outcomes helps stakeholders come together to create solutions in their respective geographic locations.

The Child Welfare Law Update is an annual conference that is presented by CIP. Hawaii collaborates with its court stakeholders on this conference to share initiatives, accomplishments, and plans for the upcoming year as well as identify relevant topics to be highlighted at the conference. The conference allows court stakeholders, as well as state and community agencies to come together with the goal of moving practice forward.

2. CFSR Item 32: Coordination of CFSP Services with Other Federal Programs

CWSB continues to collaborate successfully with the Children's Justice Act (CJA) task force and its partners. DHS CWSB applies for and receives CJA funds on behalf of the Hawaii Children's Justice Statewide Task Force. DHS contracts with a nonprofit, Maui County Children's Justice Committee (MCCJC), which serves as fiscal agent for this grant. The Statewide Task Force is comprised of representatives from each of the four counties and are individuals with experience/expertise in child abuse and neglect. They are responsible for approving the State's CJA budget(s) and monitoring expenditures, including priorities for the system's response to cases of child abuse and neglect. They

are also assigned the task of completing the CJA Three-Year Assessment Plan. This plan was updated in May 2024. Statewide Task Force meetings are convened at least quarterly. Meeting minutes are retained. The Statewide Task Force partners with the Hawaii Judiciary's Children's Justice Centers (CJCs) to improve interagency coordination; investigation; and handling and prosecution of child sexual abuse, sex trafficking, serious child physical abuse cases, child fatalities, and children who are witnesses to crime by prioritizing and directing the use of CJA funds for its intended purpose.

Past Five Years to Present

Historically, Hawaii has utilized its funds for numerous trainings across the state. These trainings are important to ensure that professionals responding to child abuse/maltreatment have core knowledge and skills. With the onset of the COVID-19 pandemic, most training activities moved to virtual, online platforms after March 2020 through May 2022. There has been the transition to select in-person training and meetings starting in 2023. Trainings have focused on enhancing the following:

- the knowledge of professionals who are mandated reporters
- Hawaii's system response to child sex trafficking
- Hawaii's system response to domestic violence, child witnesses, serious physical abuse, and homicides
- the work of the GALs and CASAs who Represent Children in Child Abuse and Neglect Cases in the CPS/CWS Family Court Calendar, and
- minimizing vicarious and secondary trauma experienced by professionals who respond to child abuse cases.

CWSB and the Hawaii Department of Health continue to partner to support youth in foster care to remain in their home school, after entering foster care.

CWSB continues to partner with Child Care Subsidies through the Hawaii Department of Human Services (DHS), Benefits, Employment, and Support Services Division (BESSD) Child Care Programs to support access for eligible families involved in Child Welfare Services and resource caregivers to receive financial assistance for childcare. This partner agency has shared information with the All-State Team on two different occasions over the last five years and with the DHS Social Service Division this year to share information and support workers to assist families to create awareness and support to access this important resource.

Planning for the Next Five Years

In the next five years, the Statewide Task Force will focus on aligning its work with Hawaii's approved federal Family First Prevention Services Act (FFPSA) plan, "Family First Hawai'i: Keeping Families Together." Task Force members will continue to collaborate with DHS/CWSB to implement Families First strategies, which aim to transform the child welfare system by improving practices and keeping families at the center of CWSB's work.

CWSB will continue to collaborate with CJA on relevant activities, such as an array of services/programming, which includes prevention placement workgroups, monitoring implementation and evaluating outcomes, partnerships with community stakeholders, alternatives to out of home placement for children, and increasing family engagement, including involvement of fathers. "Lived voices" of former foster youth are encouraged.

CWSB and the Hawaii Department of Education are working together to provide a refresher training on Educational Stability to workers in the schools and CWSB.

CWSB will continue to partner with the Child Care Program and other federal programs to identify opportunities for collaboration and coordination to support families to access services to meet their needs.

In alignment with the federal Family First Prevention Services Act (FFPSA), Hawaii implemented its Family First prevention plan titled, "Family First Hawai'i: Keeping Families Together" in October 2021. Several CJA Task Force members are collaborating with DHS/CWS to implement Families First strategies which aim to transform the child welfare system by improving practices and keeping families at the center of CWSB's work. The focus is on preventing and minimizing children entering foster care. Work began in 2019 and continues with the implementation of evidenced-based services and the development of policies and procedures to support maintaining children in the home whenever safe and possible.

The array of services/programming activities initiated in 2022 will be continued. These activities include the prevention placement workgroups, monitoring implementation and evaluating outcomes, partnerships with community stakeholders, alternatives to out of home placement for children, increasing family engagement, including involvement of fathers. "Lived voices" of former foster youth are encouraged.

Hawaii will continue to collaborate with ACF to expend funds in alignment with the purposes of the grant. Over the next several years, funds will be expanded to help identify and implement strategies for underserved populations and communities, including equity for racial minorities, including Native Hawaiians, other persons of color,

LGBTQ, individuals with disabilities and those adversely affected by poverty or inequality. The goals of the funds will also work to foster collaboration between child welfare, legal and judicial entities, including Court Improvement Program (CIP) related to court proceedings in child abuse cases, resulting in improved, timely resolution.

Family First Hawaii

Overview of the Past Five Years

The Family First Hawaii (FFH) Title IV-E Prevention Plan was approved in August 2021, and began implementation on October 1, 2021 with the launching of I.H.B.S Homebuilders Model as a FFH service.

FFH has been receiving technical assistance from consultants from the Center for the Study of Social Policy (CSSP) and the Capacity Building Center for States (CBC). CSSP began working with CWSB in March 2020 and provided intensive technical assistance to the state during development of Hawaii's Title IV-E prevention plan. CSSP also supported the state in ensuring FFH reflected the state's commitment to advancing equity, serving families in communities, and reducing the surveillance of families; facilitated multiple work groups, e.g., developing the definition of candidacy, identifying evidence-based practices (EBP) that meet the needs of the community; developing appropriate case pathways; and developing/revising policy; and provided technical expertise during the writing phase. CSSP continued to provide technical assistance during the initial stages of implementation, including through supporting case pathways and LEAG.

CBC began its technical assistance in February 2021 through ACF funding. Except for the Fiscal workgroup, the technical assistance consultants are integrated into the different FFH workgroups, offering valuable guidance and support. *Refer to Section VII.C.1 Family First Hawaii for detailed information on the FFH workgroups.* CBC consultants also mentor the workgroup leads, enhancing their capacity and expertise. Additionally, consultants participate in Steering Committee and Implementation Management Team meetings, helping to address complex issues and barriers to FFH implementation. FFH leaders benefit from ongoing technical assistance, participation in Casey Family Programs Learning Collaborative meetings, and gaining insights from other states' Family First Prevention Services Act (FFPSA) implementations. The technical assistance has been crucial for developing infrastructure, strengthening leadership, and implementing FFH's five-year prevention plan.

Annual Update

CBC consultants comprise the majority of the technical assistance that Hawaii receives for FFH. The CSSP team lead and FFPSA technical expert continue to support and

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provide guidance to FFH at a high-level, with a focus on promoting equity. This consultant is an invaluable asset for FFH, having been involved since its planning and development stages, thereby bringing a wealth of historical knowledge and technical expertise. As FFH's implementation needs evolve, CBC adjusts its work plans and reassigns consultants to effectively address the current situation and requirements.

The 2023-2024 CBC workplan for FFH ended in March 2024. An on-site visit was held in February to review outcomes and develop a new plan. In the new plan, Hawaii selected to continue to receive support from CBC on FFH as it aligns with CWSB priorities to maintain children safely in the home. A kick-off meeting for the FFH work plan was held on May 10, 2024.

There are currently five CBC consultants providing support in key areas such as implementation management, training, lived experience engagement, data quality and CQI processes, and equity improvement. These consultants provide continued coaching, mentoring, facilitation, training, and consultation to support the following: authentically incorporating lived experience voice into FFH; expanding FFH prevention services; developing structures and procedures through an equity lens; co-developing FFH training and supporting the development of FFH champions; enhancing communication to promote buy-in from partners; improving FFH IT and CQI processes; and supporting progress towards full implementation.

The objectives in the current CBC FFH work plan are as follows:

- Support the expansion and implementation of FFH services and processes, develop tracking mechanisms for FFH implementation, and establish success measures.
- Create and implement a structure for diverse youth and family voices and expertise, along with internal and external partner engagement throughout CWSB.
- Strengthen training curriculum to effectively integrate the FFH framework into practice.
- Enhance the DICE Team's capacity to consistently collect, utilize, and maintain high-quality data regarding children and families referred to FFH services, including service uptake, completion, and outcomes.
- Facilitate the ongoing efforts of the Equity Improvement Collaborative to promote equity across the child welfare system, particularly within the Family First Hawaii (FFH) framework.

Desired changes in child welfare practice include improved case practice and safety monitoring focused on prevention and family engagement, better use of continuous quality improvement to drive practice, enhanced referral processes for prevention

services. Additional desired outcomes center on culturally-informed case practices, diverse lived experience representation, and advancing equity for child welfare-involved children and families.

Planning for the Next Five Years

The overarching goal is to achieve the full implementation of Family First Hawaii and the Hawaii CWS Equity Action Plan to transform the child welfare system. To achieve full implementation of FFH, CWSB is committed to creating and establishing the pathways for Voluntary Case Management (VCM), Permanency Strengthening Services (PSS), and Motivational Interviewing while continuously working on expanding the Homebuilders program to Maui and Kauai, ensuring that its benefits are accessible to more families in Hawaii.

Integrating and operationalizing the Hawaii CWS Equity Action Plan simultaneously throughout CWSB is equally important. This involves a comprehensive effort to embed equity principles into every aspect of the child welfare system, promoting fairness and inclusivity for all families, especially Native Hawaiian children, families, and communities.

Hawaii anticipates the need for ongoing support and consultation as CWSB engages in these transformative efforts. The coaching and guidance from the consultants will empower FFH leadership in developing the necessary infrastructure for successful and sustained implementation of FFH. Additionally, the technical assistance will support effective implementation of the Equity Action Plan, fostering equity and justice throughout the child welfare system. The invaluable guidance will strengthen infrastructure and build leadership capacity in creating a successful and sustainable framework to keep children and families safely together.

G. FOSTER/RESOURCE AND ADOPTIVE FAMILY RECRUITMENT AND RETENTION

1. CFSR Item 33: Standards Applied Equally

Overview

Licensing rules apply uniformly to all licensed and approved resource family homes and child caring institutions receiving Title IV-B or IV-E funds. HAR 17-1625 Licensing of Foster Family Homes for Children and HAR 17-1627 Licensing of Child Caring Institutions codify Hawaii's licensing requirements. CWSB does not permit safety waivers of these licensing requirements.

The Past Five Years

Waivers

While CWSB does not grant waivers or exemptions for a potential caregiver's criminal history, waivers for non-safety licensing standards for relative foster family homes may be authorized pursuant to section 471(a)(10)(D) of the Social Security Act. Waivers based on space or bed requirements, such as the size of a resource caregiver's home, the number of bedrooms and the number of beds, may be granted if the waiver does not compromise the health and safety of the child. Although waivers may be requested for all homes, space and bed waivers have recently been authorized only for relative placements. A waiver of the bed requirement is often resolved during the home study process, as the contracting agency and CWSB assist resource caregivers in obtaining additional beds if cost is an issue.

If a waiver is needed after a home study is completed, a request describing the circumstances and what is being done to resolve the situation may be sent to the CWSB licensing unit. The request is reviewed by the licensing unit supervisor and then the waiver request and the unit recommendation are reviewed and either approved or denied by the supervisor or section administrator based on the section.

Over the years, requests for waivers have been rare and are typically requested as space waivers to either maintain a sibling group together or to allow a child to be placed with a relative. Such waivers are authorized for relative placements only and can be requested by the placement worker and are approved by the supervisor or section administrator depending on the geographic area. A Resource Home Licensing Unit worker is also consulted prior to the approval to place into the home that will need a waiver approval.

Waiver requests are tracked by each section using various methods, including weekly meetings with licensing staff, use of the online licensing portal, and tracking adherence to the timelines for recertifying resources homes.

Training Requirements

In the past five years, Hawaii has revised its training requirements for resource caregivers.

The H.A.N.A.I. (Hawaii Assures Nurturing and Involvement) curriculum provides pre-service training to prospective resource caregivers. It is one of the licensing requirements of all prospective resource caregivers, along with ongoing training. These requirements are outlined in HAR 17-1625 Licensing of Resource Family Homes:

- 17-1625-17(c) The resource family and all adult household members shall show evidence of being well-adjusted persons and have sufficient ability,

training, and experience in caring for children and demonstrate the willingness and ability to work with the agency and other agencies and organizations.

- 17-1625-17(f) The resource family shall participate in required trainings provided or approved by the department or agency.

Between 2020-2022, the H.A.N.A.I. curriculum was reviewed and modified by a workgroup that consisted of contracted agencies, community partners and key stakeholders (including former youth in foster care, parents, resource caregivers, legal guardians, and adoptive parents) to better meet the needs of resource caregivers.

Pre-service training hours increased from 18 hours to 27 hours (14 hours in the first year and 13 hours in the second year). The first-year training provides caregivers with a strong foundation on key topics to serve and care for children and families. The second year provides opportunities to connect and apply principles and concepts in practice through their experience as resource caregivers. This model was implemented on April 1, 2022 for all new resource caregivers and those who had not completed the previous model.

Ongoing training requirements of resource caregivers were also amended in January 2023. Currently, licensed resource caregivers must complete a minimum of 13 hours of ongoing training annually. This is an increase from six hours per family to 13 hours per person.

Since implementation, resource caregiver applicants have experienced challenges in meeting these additional training hours. The increase in training hours, for example, has been a barrier that families have faced to being unconditionally licensed. These challenges have impacted the state's ability to claim IV-E funds. CWSB is in the process of evaluating its licensing rules and considering amendments to streamline the licensing process while still ensuring placements are safe.

Planning for the Next Five Years

Effective January 1, 2024, Hawaii's Title IV-E plan amendment associated with PI-23-10 was approved. This plan assured that licensed or approved relative or kinship foster family homes receive the same Foster Care Maintenance Payment as a licensed or approved non-relative/non-kinship family home. This requirement aligns with Hawaii's current FCMP policy and practice.

CB PI-23-10 allows different standards to be applied when licensing relative/kin foster family homes. Hawaii is currently reviewing its licensing rules and considering possible amendments to address barriers to unconditional licensure and streamlining

placements in relative and/or kinship foster family homes. Some barriers include the aforementioned waiver requests. While Hawaii will not allow waivers for potential caregiver(s) criminal history, it may be able to permit a process where space waiver requests are not required when keeping children with relative placements. This can expedite the placement of these children into homes where they are familiar and comfortable.

2. CFSR Item 34: Requirements for Criminal Background Checks

Overview

CWSB has procedures to ensure compliance with federal requirements for criminal background clearances related to licensing and approving foster care, and adoptive and legal guardianship placements. Procedures also include requirements for recertification of resource caregivers. Hawaii State Criminal Justice clearance is completed for each resource caregiver (RCG) and all adult household members annually or biennially depending on whether the resource caregiver home is licensed for one or two years.

Annual Update

In SFY 2023, an internal Title IV-E review was conducted. The goals of the review are to:

- a. Determine whether federal funds are appropriately expended for the support and care of Title IV-E eligible children and to ensure that their resource caregivers have met all the Title IV-E placement requirements in accordance with federal statute, regulation, and policy; and
- b. Provide timely and case specific feedback to the frontline case workers and managers responsible for ensuring the proper and efficient administration and implementation of the Title IV-E foster care maintenance payments programs.

A part of the review evaluated whether, during the period under review (PUR), there was documentation that the child's resource caregiver home was fully licensed or approved for the child's placement, even when the placement was in an out-of-state foster care setting.

It also evaluated whether, during the PUR, there was documentation that the resource caregivers met applicable safety requirements for the period for which the Title IV-E foster care maintenance payments are made on behalf of the child residing in the resource family home.

For both areas, background clearances must be completed in accordance with CWSB procedures and federal requirements for a placement to be considered fully licensed and to meet safety requirements.

Data

Of 65 cases reviewed, resource caregivers in 39 cases (or 60%) met both State and Federal criminal background clearance requirements. Criminal record checks were completed timely and were documented in the file, as required.

- Background clearances and printouts of CA/N, CJIS, NSO, and/or SSO checks were identified and completed timely in 39 cases (or 60%) which meets State requirements for background checks.
- Printouts or documentation of FBI fingerprinting clearances were identified in 63 cases (or 97%) which meets Federal requirements for criminal background checks.

Recommendations from the findings include but are not limited to the following:

- Caseworkers responsible for child-specific licensing of resources homes should be included in future practice improvement plans; and
- Ensure all workers understand that re-checks are to be completed prior to placement, on the date of the initial unconditional license is issued, and prior to or on the date the current license expires.

Hawaii Criminal Justice Data Center Audit

In May 2023, Hawaii CWSB underwent an audit through the Hawaii Criminal Justice Data Center (HCJDC). This audit ensures that Hawaii is compliant with HRS 846-2.7 to conduct state and national criminal history record checks for purposes that include but are not limited to the following:

- The Department of Human Services on operators and employees of child caring institutions, child placing organizations, and foster boarding homes as provided by section 346-17; and
- The Department of Human Services on prospective adoptive parents as established under section 346-19.7.

The audit had two parts:

1. On-line questionnaire for Non-Criminal Justice Agency operations and technical audit; and
2. Transaction reports for fingerprint submissions obtained by HCJDC based on individual account submission.

Hawaii was found to be compliant with both HCJDC's Non-Criminal Justice Operations and Technical Audit.

Discussion

Over the past five years, Hawaii has worked diligently to ensure compliance with federal requirements for criminal background clearances related to licensing and approving foster care, and adoptive and legal guardianship placements.

- In 2020, procedures were clarified to ensure timely completion of background clearances at renewal/recertification. Procedures were issued requiring CA/N, state criminal history checks, and state and national sex offender checks to be completed at three junctures:
 - Prior to placement of any child in the resource caregiver home;
 - On the date the initial unconditional license is issued; and
 - Every subsequent year from the date of the first unconditional license.
- In 2021, Hawaii launched BINTI, an online portal to modernize the licensing process for resource caregivers and help to match youth in care with the best resource family. BINTI rolled out in phases beginning with general licensing applications. In 2022, DHS expanded the online licensing portal to make it available to all current relative resource caregivers to renew their licenses and to relatives who want to apply to be considered as a placement option. The implementation of BINTI provided an opportunity to update forms to help expedite compliance with requirements. Forms that were updated included background clearance forms:
 - Background Clearance Record Check
 - Adam Walsh Child Protection and Safety Act Form
 - State and National Criminal History/Child Abuse and Neglect Record Check
- In 2022, Hawaii issued guidance to staff to provide support when assessing background information to determine that resource caregiver (RCG) applicants meet the safety requirements for provisional and unconditional licensing.
- In 2022, Hawaii purchased three Portable Live Scan Fingerprint machines that connect to the Hawaii Criminal Justice Data Center (HCJDC) to help ensure timely

processing of fingerprints of prospective resource caregivers and household members and to improve outcomes for Hawaii's children in foster care.

- Hawaii also procured a new fingerprinting contract with Fieldprint Hawaii which is the primary means by which individuals are fingerprinted.

Planning for the Next Five Years

The safety of children in foster care is the department's top priority and Hawaii continues to ensure that children in care are placed in safe placements by identifying areas that can be improved.

Review process for completing, document, and filing background clearances to ensure compliance.

a. Hawaii Administrative Rule

Hawaii is in the process of reviewing its guidance to staff on assessing background information to ensure it is in alignment with federal and state statutes. PD has been collaborating with DAGs-HHS and UH Law School to enhance the policy and procedures and incorporate the policy into HAR 17-1625 Licensing of Resource Family Homes for Children.

b. Federal Title IV-E Audit

Hawaii utilizes different CQI processes to review its practice to ensure compliance with state and federal requirements, as well as identify areas for improvement. Historically, Hawaii has used targeted reviews. The internal Title IV-E review is one tool that is used to clarify and enhance procedures, as needed, and provide trainings to strengthen staff knowledge. The findings are discussed to help with practice improvements. It also provides valuable information to CWSB as Hawaii prepares for its Title IV-E Federal Audit that is scheduled for January 2025.

In late 2023, ACF conducted a site visit to Hawaii in preparation for the 2025 Title IV-E audit. During the visit, ACF reviewed the requirements for the Title IV-E audit which allowed CWSB, CQI, PD, and licensing staff to share its current policies and procedures, its internal review process, and ask questions about the instrument.

c. Rap Back

Hawaii is considering plans to participate in RAP Back and will collaborate with the Hawaii Criminal Justice Data Center's (HCJDC) to onboard Rap Back

services. Rap Back is an extension of the fingerprint-based criminal history check process authorized by HRS §846-2.7. Progress will include completion of application and obtain training from HCJDC prior to implementing Rap Back Services. These efforts will include immediate notification to CWSB when a new criminal activity is reported on an individual after the initial processing and retention of fingerprinting transactions.

d. Portable LiveScan Machines

Since the implementation of the Portable LiveScan Machines, Hawaii has been gathering feedback from CWSB and licensing staff on the current policy and use of the machines. Based on feedback, revisions to the policy are being considered to achieve maximum benefit from the machines. One adjustment that was recently made was relocating the machine located on Molokai to Kauai to address challenges that licensing staff were facing with ensuring timely completion of fingerprinting. Additional revisions to the policy are being considered to expand their usage to help support timely fingerprinting.

3. CFSR Item 35: Diligent Recruitment of Foster and Adoptive Homes

Progress and accomplishments in implementing the State’s recruitment of foster and adoptive homes:

Diligent Recruitment Plan

Data for SFY 2024 is useful but continues to require reconciliation, which limits its value at this time for two primary reasons. First, the online portal continues to need IT updates to ensure data is captured as staff learn to use the system. Second, migrating existing homes into the online licensing portal and the Licensing Resource File (LRF) system have yielded inconsistent data on case status. All homes need to be entered into both the online licensing portal and the LRF in CPSS to make sure information is consistent. At times, the systems are not updated, resulting in inconsistent data.

For SFY 2024, the online licensing portal data states that Hawaii has 235 applications, including 44 approved and 32 renewals.

Individuals Interested in Becoming a General Licensed Resource Caregiver

Over the past year, recruitment events have been limited due to no single provider being responsible for recruitment. Efforts to recruit have continued through other means, including but not limited to the Quarterly Newsletter, “Talk Story Tuesdays,” and other virtual events.

Targeted Recruitment Efforts

Case workers and licensing workers have helped to recruit foster and prospective adoptive homes. At times, child specific homes have become placements for children who enter foster care. This recruitment effort has allowed children to remain in communities and with resource caregivers with whom they are familiar, which often supports reunification and/or facilitates better permanency outcomes.

CWSB continues to develop and refine its process to support targeted recruitment and streamline the application and licensing process to expand its resource of licensed homes and expedite unconditional licensure. CWSB data shows the characteristics of children for whom foster homes are needed. The current population needs are as follows:

1. Children of Native Hawaiian ancestry
2. Teen homes (aged 12-17)
3. Sibling groups (3 or more)
4. Children who identify in the LGBTQ+ community
5. Victims of sex trafficking

These populations have been included in Hawaii's Diligent Recruitment Plan. *See attached Diligent Recruitment Plan.*

Planning For The Next Five Years

CWSB is currently reprocurring its Recruitment Contract. The aforementioned foster care populations will be targeted. Hawaii has also worked to enhance recruitment by participating at community events to promote awareness of CWSB and its need for resource homes, and creating a marketing plan to inform the broader community about the benefits of being a resource caregiver and how to become a resource caregiver. The recruitment provider, along with CWSB, will become more visible in the community by participating in these efforts.

Hawaii's on-line general licensing website will continue to streamline the application process for new resource caregiver applicants. The website allows for document upload and storage, which will continue to support resource caregivers in ensuring they are up to date with all necessary documentation to maintain unconditional licensure. The Warmline will also continue to connect individuals who are interested in the application process. By maintaining these two methods, along with engaging in community events, information on how to become a resource caregiver will be more widespread in the coming years.

4. CFSR Item 36: State Use of Cross Jurisdictional Resources for Permanent Placement

a. Overview

Hawaii continues to have a statewide process for the use of cross-jurisdictional resources to facilitate permanent placements. Hawaii has been a party to the Interstate Compact on the Placement of Children (ICPC) since 1985 and continues to collaborate with other states when placing children from Hawaii and accepting children placed in Hawaii.

Hawaii's ICPC services are provided by a single contracted provider under the oversight of the Hawaii State ICPC Deputy Compact Administrator, a position within the CWSB Program Development Office.

b. Annual Update

Contract

In 2023, Hawaii procured a new contract for ICPC services. The current provider is Catholic Charities Hawaii (CCH). CCH has been a long-time provider of ICPC services for the state and is knowledgeable about the Compact, its articles, and the regulations that provide specific directions for processing ICPC requests.

Hawaii is constantly looking at ways to improve the efficiency and timeliness of ICPC services. In its most recent procurement, Hawaii expanded the service array to include conducting home studies for the islands of Molokai and Lanai and the full range of Imua Kakou (IK)-ICPC services. Historically, due to the low number of ICPC requests received for Molokai and Lanai, Hawaii CWSB staff assumed the responsibility of conducting home studies on proposed placements on these two islands; this created an added workload for CWSB staff. Similarly, for IK-ICPC services different activities were assigned to different contracts. The separation of duties posed challenges to communicating consistently, ensuring timelines were met, and collecting required documentation. To ensure efficiency and consistency, services have been streamlined with one provider completing all home studies across the state and the full range of IK-ICPC services.

ICPC Enhancements and Supports to Caseworkers

Hawaii and its ICPC provider are continually working together to provide guidance on ICPC to staff, clarify requirements, and streamline its process. This is done through regular meetings between the state and the provider, and with community

partners as appropriate. Over the past year, the Hawaii ICPC office, in collaboration with its ICPC provider, has developed and implemented several policies, procedures, and tools to enhance Hawaii's ICPC process. These include:

- Clarification to staff regarding the application of ICPC to parents, and a clear policy that aligns Hawaii with the Compact and informs staff that Hawaii no longer submits or accepts parent home studies on non-custodial, non-offending parents. Recognizing the importance of ensuring child safety, the policy and procedure also provides a path for staff and Compact members to request assessments on non-custodial, non-offending parents.
- The development of procedures on tracking incoming ICPC requests for Regulation 4 - Residential placements. A need for specific procedures was identified after Hawaii ICPC noticed an increase in Regulation 4 requests received upon the opening of Pearl Haven, a Special Treatment Facility licensed under the Department of Health to provide trauma-informed therapeutic services for youth with complex trauma or who are diagnosed with Serious Emotional and Behavioral Disturbances (SEBD) because of likely sexual abuse, sexual exploitation, or trafficking. Historically, the number of residential referrals to Hawaii has been low due to limited residential resources within the state. After Pearl Haven opened its doors in 2021, there has been an increase in Regulation 4 ICPC requests. Since Regulation 4 requests are made by different entities including but not limited to public or private agencies or by the child's own family, a clear and consistent process among all those involved was needed to track them. The purpose of the procedures is to ensure consistent tracking of youth placed in the state of Hawaii and who are being served in Hawaii's residential programs, as required by ICPC. The procedures identify the roles and responsibilities of the individuals and entities involved and specifies how parties are to communicate with one another when a request has been received and a placement occurs. These procedures were developed in collaboration with Hawaii's ICPC provider and Pearl Haven, which has received the majority of ICPC placements for residential treatment services. The procedures are applicable to any residential placement made through the Compact.
- An ICPC Basics document that consists of frequently asked questions and their accompanying answers. The format of the document allows staff to easily access basic information on the ICPC by clicking on a question and immediately being taken to the page with the answer.
- ICPC Referral and Placement Workflow Diagrams offer a high-level overview of the referral process and placements for outgoing requests, highlight the

roles and responsibilities of both the Sending State CWS worker and Provider and the Receiving State, and provide tips to ensure compliance with the Compact.

- Two separate lists have been compiled by Hawaii's ICPC Provider that identify Compact member states that accept Extended Foster Care (EFC) requests or complete parent home studies for both offending and non-offending/non-custodial parents, and those compact member states that conduct courtesy visits in lieu of a parent home study. These lists were compiled to support caseworkers when considering making an ICPC request. The lists make the submission of requests more efficient by eliminating inappropriate ICPC requests.
- Extended Foster Care (EFC) Cover Letter Template for EFC (Imua Kakou). In 2020, the Hawaii ICPC office implemented a standardized cover letter to ensure that necessary information is included in all ICPC requests, thereby minimizing delays in processing requests. The success with the standardized cover letter has led to its use with IK-ICPC requests. The cover letter template has been developed and implemented to capture critical information to support requests.

Training

In the past year, the Hawaii ICPC office, along with its contracted provider for ICPC services, has collaborated to develop innovative ways to train on the ICPC to staff and community stakeholders. Several different strategies were identified and led to the successful implementation of the ICPC Basics document that serves as a job aide to staff and is accessible through the web-based SHAKA system. In addition, the Hawaii ICPC office, its contracted provider for ICPC services, and SDO collaborated to incorporate ICPC into New Hire training. The training is now part of the Permanency Module and provides an overview of the ICPC and how it connects to casework practice.

Several trainings on ICPC were also provided to community stakeholders. In July 2023 the Hawaii Deputy Compact Administrator participated in a meeting that brought together various agencies including but not limited to the Hawaii ICPC office, the Hawaii IC-J office, Deputy Attorney General's Health and Human Services office, DHS, the Judiciary, Missing Child Center of Hawaii, and local law enforcement to address concerns that stemmed from runaway events involving minors placed in Hawaii through ICPC. The purpose of the meeting was to clarify the roles and responsibilities of the different agencies involved and to collaborate on how to best respond to these situations in a trauma-informed manner. In this meeting, the

Hawaii ICPC office provided training on the Compact. The meeting also allowed the Hawaii ICPC office to highlight its collaboration with IC-J and Pearl Haven and share the systems and procedures that have been developed and implemented to track youth placed in Hawaii and being served by Hawaii's residential programs, as required by ICPC.

In August of 2023, the Hawaii ICPC Deputy Compact Administrator, along with the Hawaii IC-J DCA attended a CSEC meeting and provided an overview of ICPC and IC-J. The purpose of the overview was to address similar concerns that stemmed from runaway events involving out-of-state minors placed in Hawaii. The purpose of the overview was to support agencies who work together by clarifying roles and responsibilities.

At the Annual Child Welfare Law Update in August 2023, the ICPC was part of a panel discussion on Placement Decision-Making: Key Actions Along the Foster Care Placement Continuum. The ICPC presentation focused on its role in permanency placements and its workflow, and highlighted key provisions of the Compact to ensure compliance and safe and timely placements. The workflow diagrams discussed above were developed to support this presentation.

c. Data

Outgoing

In SFY 2023, Hawaii received 103 requests for foster/relative/adoptive/private adoptions and residential placements in other states.

There was a total of 17 new placements of children under the custody of the State of Hawaii who were placed with resources in other states. Of the 17 Hawaii children, 14 are in a foster/relative/kinship placement and three are placed with a parent.

Incoming

During SFY 2023, a total of 61 families were referred for ICPC services. Of those requests, 38 families required home studies for foster/kinship/relative, parent, and adoption. Hawaii completed a total of 29 home studies for incoming ICPC requests. Of the 29 home studies, all were completed within the required 60 business days.

d. Discussion

Over the last five years, Hawaii has continued to make improvements in clarifying and streamlining its ICPC process to ensure the timely placement of children across

state lines and achieving permanency goals. Numerous job aides, procedure enhancements, template forms, and other resources, including but not limited to those listed in the annual update have helped to improve outcomes in the processing of outgoing requests. Between SFY 2021 – SFY 2023, the number of outgoing requests processed within three business days increased from 74%-89%.

e. Future Plans

Hawaii continues to be encouraged by the improvements it has made to its ICPC process and will continue to collaborate with the Compact, contracted provider, and other community stakeholders to identify opportunities for clarification, as needed. Some potential areas of clarification may include:

- guidance on childcare support for out-of-state placement resources,
- clarifying the provision of Medicaid benefits for youth placed across state lines in residential settings, and
- guidance on requirements for ICPC requests when children are under the custody of a state and a private adoption agency has completed a home study of the prospective caretaker.

SDO has begun recording its New Hire training modules and posting them on the Learning Management System (LMS) as an additional mechanism for offering training. The Hawaii ICPC office and its provider feel this resource could be useful in supporting staff with more complex ICPC processes. Discussions with SDO are occurring to see how the Hawaii ICPC office and its provider can best utilize LMS to train staff.

Hawaii continues to use NEICE – National Electronic Interstate Compact Enterprise to process incoming and outgoing ICPC requests. Its implementation in 2018 has helped to enhance ICPC outcomes. The State is currently working on developing its CWIS system and the Hawaii ICPC office looks forward to interfacing with its development to support the goals of ICPC.

f. Interisland Placements

Given Hawaii's unique geography and demographics involving multiple islands, Hawaii has implemented procedures and processes to facilitate interisland placements and placements between sections on Hawaii Island. This process covers all jurisdictions in Hawaii. A formal request for a "courtesy assessment" (equivalent to a home study) or "courtesy supervision" is created by the unit with jurisdiction and sent to the section where the child, parent, or relative resides or intends to

reside. The procedures require that the receiving section establish contact within 30 days of the date of request by the sending section.

For each jurisdiction in a courtesy assessment or supervision case, section administrators collaborate to address any challenges that cannot be resolved at the worker or supervisor level. The CWSB Program Development Office has an assigned Assistant Program Development Administrator to assist staff with any questions regarding such placements.

Past Five Years

Over the past five years, Hawaii's practice and procedures for inter-island placements has been consistent. CWSB staff have developed positive working relationships with one another that have helped support communication and collaboration between sections, which are key factors in meeting the outcomes of safety, permanency, and well-being for children and families across jurisdictions. MLT, CWSB meetings, and other statewide convenings have helped foster a community of support for administration and to build relationships to work together to implement shared processes and procedures.

Planning for the Next Five Years

Future plans include reviewing and enhancing, as needed, existing procedures on courtesy services; these efforts may include additional guidance on roles and responsibilities of workers for cases that involve more than one section. The ICPC procedures and contracted monthly face-to-face visits will help inform possible revisions to Hawaii's procedures on courtesy services.

SECTION VII. PROGRAM SUPPORT

A. TRAINING AND TECHNICAL ASSISTANCE FROM THE CBC

SFY 2023

1. Family First Hawaii (FFH)

In SFY 2022 and SFY 2023, CBC continued to support CWSB FFH implementation and ongoing FFH management. CBC representatives shared their expertise in all areas of FFH. They have significantly contributed to the successful functioning of the following FFH groups:

- Steering Committee,
- Communications Workgroup,
- Data, Information Technology, Continuous Quality Improvement, and Evaluation (DICE) Workgroup,
- Continuous Quality Improvement Hui (a group of internal and external stakeholders, community partners, and agency representatives who review FFH data and make data-informed decisions for system improvements),
- Equity Improvement Collaborative,
- Case Pathways Workgroup,
- Training Workgroup, and
- Implementation Management Team.

CBC representatives contribute information, knowledge, insight, and perspective to the process and products of the workgroups. CBC staff are also currently providing one-on-one mentoring to Staff Development and FFH management leadership. For information on FFH implementation progress, see *Section VI.E. Service Array and Resources* of this report.

2. Comprehensive Child Welfare Information System (CCWIS) and HI THRIVE (Hawaii's CCWIS)

Starting in late SFY 2022, CBC began assisting Hawaii with the CCWIS project by providing a technical consultant. The consultant introduced a standardized Project Management Framework to structure major components of the CCWIS project. Collaboratively, the consultant and the HI THRIVE team developed a project roadmap and the initial high-level project plan. The consultant provided examples of typical state data system project artifacts such as business case templates, procurement plan templates, and risk/issue tracking. The HI THRIVE team selected from the examples for the initial best fit for Hawaii, and then together modified and customized project

documents to meet Hawaii's unique needs. Additionally, in 2022, the consultant provided high-level contract management coaching on clearly defining requests to vendors to get required results and setting timelines to measure successful delivery.

In 2023, the Project Management Services team (Ansa Consulting) was procured to provide day-to-day detailed project management support services to the Hawaii CCWIS project. This required a shift in the CBC consultant services. The 2023 themes of technical assistance were focused on communications and field engagement to ensure that agencywide child welfare data needs would be met with the new system. The consultant continued to mentor the HI THRIVE team in deeper application of the project management framework, which came to life with the release of the CCWIS RFP. The concepts that were provided in 2022 were put to full utilization in 2023, creating knowledge transfer and applied learning to the Hawaii team. Beginning toward the end of 2023 and continuing into the first quarter of 2024, the CBC consultant executed a sustainability plan that transitioned the CBC out and brought the new Project Management Team into the CCWIS project. The CBC consultant introduced the Project Management Services team to a Child Welfare Practice framework, which includes the phases of casework from the first report of abuse/neglect through investigation, assessment, the cycle of service delivery, and closing a case. This framework links the practice to technology, ensuring that the Project Management Services Team makes technical decisions that are fully informed by child welfare practice and service delivery. The framework documents the intersections between service delivery and data capture. Understanding the child welfare practice framework provides technical staff an understanding of how data flows through the system.

With the CBC's and the Project Management Services Team's support, CWSB issued its CCWIS RFP on June 26, 2023. Proposal deadline was August 21, 2023. An extensive evaluation period followed. The Notice of Award for Hawaii's CCWIS vendor was made on January 5, 2024 to Elixir Lab USA Inc. doing business as Cardinality. The contract is being finalized and the vendor is expected to begin work in the Fall of 2024.

3. Safety Framework

In the third quarter of SFY 2023, Hawaii worked with the CBC to finalize a work plan in which the CBC will provide coaching, facilitation, and consultation to support Hawaii in assessing and implementing its Safety Decision Making Framework at all stages of practice. The CBC will help identify strengths and areas for growth in applying the safety framework in intake, investigation, case management, permanency, training, and policy.

Past Five Years

From SFY 2019 through the present, the CBC has provided support to Hawaii in the following areas:

- Family First Hawaii Implementation (created a governance structure with active workgroups covering lived experience voice, communications, CQI, project evaluation, IT, data, case pathways, training, implementation, fiscal matters, equity improvement, community engagement, and contracts)
- Enhancing CWS Line Staff Supervision (developed a supervisory practice model and tool, provided training and coaching to supervisors)
- Preparing for CCWIS Procurement
- Improving Safety Decision Making (assessed current model, identified areas for improvement, began modifying tools to promote best practice use)

Planning For the Next Five Years

The CBC's Hawaii workplan has been finalized for the coming year and it will include work on:

- Enhancing Hawaii's Safety Framework,
- Family First Hawaii Implementation and Expansion, and
- Workforce Recruitment and Retention.

Looking to the future, in the next few years, Hawaii anticipates possibly requesting CBC support in the following areas:

- CCWIS HI THRIVE implementation
- Social Media and Artificial Intelligence: creating necessary policies and understanding their effects on the CWS system and its work
- Equity
 - Mandated Reporters: shifting the role of mandated reporters to a role of Mandated Supporters
 - Native Hawaiian Disproportionality: implementing practice changes and collaborating with the community to safely reduce disproportionality.
 - Micronesian Population: partnering with the Micronesian community to evaluate and help address the needs of this growing population in CWSB.
 - Disabilities: creating the needed procedures and training to support staff to ensure the equitable treatment of CWSB families with disabilities
 - Gender-Affirming Care: promoting gender-affirming care throughout CWSB

- Gender-Neutral Language: implementing broad use of gender-neutral language throughout the child welfare system in practice, procedures, and policies.
- Poverty: addressing the interactions between CWSB intervention and poverty to eliminate unnecessary CWSB involvement

B. TRAINING AND TECHNICAL ASSISTANCE TO THE COMMUNITY

See APSR Attachment E: SDO Training Plan 2024.

C. STRATEGIC PLANNING COMMITTEE

Background

Since 2007, CWSB is fortunate to have an established successful relationship and partnership with Casey Family Programs (CFP) through the Strategic Planning Committee (SPC). Casey Family Programs is the nation's largest operating foundation focused on safely reducing the need for foster care in the United States. CFP's mission is to provide and improve and ultimately prevent the need for foster care.

The continued technical and financial support that CFP has provided to Hawaii on various CWSB programs and services have played a major role in the success of these specific programs and collectively contributed to the overall success of Hawaii's child welfare services. The SPC continues to collaborate with various organizations, including CWSB, through scheduled quarterly meetings to ensure successful implementation of programs, identify needs or barriers, and explore future programs that can be supported by the CFP.

CWSB and SPC have continued to focus on the collaboration's overarching goal of safely reducing the number of children in foster care. CFP's continued funding has helped Hawaii to:

- support and strengthen family engagement, and incorporate the voice of lived experience persons,
- collaborate and develop birth parents' leadership and advocacy skills,
- support racial and ethnic equity throughout child welfare,
- incorporate cultural values in CWSB practice and services,
- strengthen community-based partnerships, and
- integrate prevention efforts into CWSB practice.

Summary of Past Five Years

CWSB's Title IV-E Prevention Plan, Family First Hawaii: Keeping Families Together, was submitted to ACF in December 2020 and approved in August 2021. CWSB collaborated with

many partners, including CFP, the University of Hawaii (UH), community stakeholders, cultural guides, and those with lived experience to implement the FFH plan in 2021. Hawaii continues its collaboration with these stakeholders to ensure the success of FFH through various efforts, including but not limited to ongoing monitoring, expansion of its service array, and development of additional pathways.

Over the past five years, CFP and CWSB have collaborated on the following projects, with some continuing into the current calendar year:

- Race Equity,
- Family Engagement-Better Together,
- Community Collaboration-Hooikaika,
- SWAT,
- Family Resource Center Pilot,
- Ohana Is Forever, and
- Short-Stayers in foster care & Prevention of Removals

Presently, CFP has approved continued support of Better Together Trainings, Race Equity, Short-Stayers in foster care & Prevention of Removals, Hooikaika, as well as other community collaborations that have the goal of preventing entry into foster care and that promote equity (Na Kama a Haloa and Malama Ohana Legislation).

Planning for the Next Five Years

Casey Family Programs (CFP) approves projects with the states and its partners each calendar year. Each state works on a proposed plan and CFP reviews the proposals to ensure that they meet its overarching goal, i.e., to safely reduce the number of children in foster care.

Hawaii CWSB and partners have benefited from the technical and financial assistance from CFP to improve the lives of CWSB's children, families, and communities. CFP also shares in Hawaii's values, which include cultural engagement and healing, the power of lived-experience voices, and community collaboration.

1. Family First Hawaii

Overview

Casey Family Programs (CFP) has played a pivotal role in supporting and financing initiatives aimed at enhancing FFH implementation. In December 2021, CFP funded the creation of the FFH Puolo Metaphor video, designed to share the moolelo (story) and meaning behind the FFH logo and to illustrate FFH concepts in a culturally sensitive manner. This video was also crafted to engage and resonate with the Native Hawaiian communities on a deeper level, recognizing their unique cultural context and

perspectives within the broader FFH framework. The FFH Puolo Metaphor video was integrated into staff training sessions and made publicly accessible in February 2022.

In 2022, CFP facilitated two significant FFH projects: an internal marketing campaign and a statewide conference commemorating FFH's inaugural year. The internal marketing campaign addressed feedback from CWSB supervisors regarding the need to increase FFH awareness and engagement within the workforce. The campaign spanned from June to September 2022 and included the production of customized promotional items to promote awareness of FFH and presentations tailored to each CWSB section. Flight expenses for neighbor island travel were also covered by CFP.

The statewide FFH conference, held in October 2022, brought together CWSB staff, FFH workgroup members, State department partners, service providers, persons with lived experiences, and various stakeholders. This event served as a platform to disseminate FFH progress updates, enhance partnerships, and express gratitude for collaborative efforts in enhancing outcomes for children and families. Additionally, a family-focused brochure, jointly developed by the FFH Communications workgroup and the FFH Lived Experience Advisory Group, was introduced at the conference to share information about FFH in a manner that resonated with families and community members.

In SFY 2023, CWSB secured funding approval from CFP for two primary FFH projects. Firstly, the development of public service announcements (PSAs) aimed at broadening FFH awareness and engagement. Secondly, efforts to enhance placement prevention strategies which involved assessing current procedures, engaging frontline staff and individuals with lived experiences, and identifying realistic solutions to support families and prevent children from entering foster care. These initiatives underscore CFP's ongoing commitment to supporting FFH in preserving family units and ensuring children's safety and well-being.

Annual Update

Public Outreach. The PSA project continued from the latter part of 2023 to the earlier part of 2024. The 30-second and 60-second PSAs serve as vital tools in raising FFH awareness among staff and the broader community. The 30-second PSA underscores FFH's transformative impact on Child Welfare Services (CWS), emphasizing the commitment to keeping children safely within their families. The 60-second PSA addresses the disproportionate representation of Native Hawaiian children in foster care, acknowledging and confirming CWS' commitment to addressing this disproportionality.

Both PSAs feature a QR code directing viewers to the FFH section of the DHS website for interested individuals to access more information about FFH and to learn how to get

involved in CWSB's efforts to keep children and families safely together. The PSAs also have the same call to action, a call for a shared responsibility within the community to protect and care for CWSB's keiki (children) across the islands. This emphasizes the message that it is not solely the responsibility of CWS, but a collective effort involving every member of the community in fostering a safe and supportive environment for CWSB's children and families.

The PSAs were broadcast from December 2023 to the end of February 2024. The 30-second PSA received airtime on major local television stations and was also featured in select movie theaters. The 60-second PSA was aired during local television talk-shows; at the same time, DHS and CWS representatives were interviewed by talk show hosts. These interviews provided a platform to discuss the PSA and CWS' endeavors to ensure children remain safely with their families. Please refer to Section VI.F.31 Agency Responsiveness to Community, Family First Hawaii section for more details about the Public Service Announcement Project and subsequent PSA presentations for staff.

The PSA video links were distributed in April 2024 through an FFH newsletter highlighting the PSAs, to the FFH listserv comprising of over 600 members. Listserv members are encouraged to share the PSA newsletter with their networks in order to extend CWSB's reach. The PSA videos will be integrated into the FFH section of the DHS website, ensuring broader accessibility. Current efforts are underway to craft social media messaging for the PSAs for CWSB's internal and external partners to share on their social media platforms. This will amplify CWSB's PSAs across various social media platforms to engage a wider audience in CWSB's mission to safeguard children and families.

Contingent on available funding, CWSB is exploring the possibility of procuring another media package through CFP to rebroadcast the PSAs on major local television stations and their social media platforms. This will enhance CWS' outreach efforts and foster greater community involvement in CWS' mission to keep children and families together.

To further expand CWS' outreach efforts, the FFH Communications workgroup will spearhead the creation of FFH posters, strategically placing them in key locations such as public transportation hubs, medical facilities, community health centers, emergency rooms, police stations, family court buildings, family resource centers, and other public spaces frequented by families involved with or at risk of being involved with child welfare services. The aim is to heighten awareness of FFH among both families and community members, shedding light on the transformative efforts undertaken by CWS to keep children and families together. These posters will serve as educational tools, seeking to deepen understanding and foster active engagement among families and communities.

In addition, FFH brochures will be distributed alongside the posters at locations such as community health centers and family resource centers. These brochures will provide child welfare-involved families with information about FFH's purpose and services, empowering them with the knowledge to access FFH services. By offering both posters and brochures, CWS aims to enhance outreach efforts and support families with access to FFH information and initiatives.

Placement Prevention Project. The Placement Prevention Project was initially formed to offer comprehensive guidance to staff on safely coordinating informal arrangements with families, aimed at keeping children out of foster care. This guidance includes clear protocols and procedures to ensure the safety and well-being of the child throughout the informal arrangement, while also providing support to the families involved. This extensive project also included the following objectives:

1. Enhancing case practice and documentation to ensure that reasonable efforts are made by line staff.
2. Conducting monthly reviews of short-stayer data to identify obstacles to placement prevention and to identify potential solutions and support resources. Please refer to Section VI.F.31 Agency Responsiveness to Community, Family First Hawaii for details on Short-Stayer Monitoring, a Targeted CQI Review identifying the primary causes for short-stayers, and the FFH CQI Hui Short-Stayers Action Priorities -- recommendations to mitigate short-stayer placements.
3. Identifying and utilizing existing community and state-based services to provide alternatives to removal.
4. Collaborating with the Lived Experience Advisory Group (LEAG) to leverage their expertise in family engagement, particularly in involving extended family, friends, and other natural supports.
5. Prioritizing and expanding efforts to engage fathers, including the establishment of a father support network and the eventual creation of father Parent Partners.

Given the project's scope, it was broken down into manageable segments to align with CWS' current work capacity. Furthermore, its scope expanded from providing guidance for staff on informal arrangements to prevent placement to encompassing the entire spectrum from placement prevention to foster custody. To reflect this comprehensive approach, the project was renamed the Family Supported Arrangements Continuum (FSAC).

The FSAC workgroup formed three subcommittees: 1) Definitions; 2) Safety Plan, now called Protective Plan; and 3) the Decision Tree subcommittees. The Definitions subcommittee was tasked with establishing clear definitions for placement options, assessment tools and terminology, and legal statuses. The Decision Tree subcommittee is actively working on creating an at-a-glance visual graphic to aid staff in navigating placement decisions during assessment phases. The Protective Plan subcommittee is actively revising the Child Safety Assessment (CSA), Protective Plan, and accompanying instructions to enhance in-home, out-of-home, and combination safety planning with a focus on family strengths and supporting increased family engagement in the safety planning process. Notably, each subcommittee includes persons with lived experience, ensuring their valuable insights are incorporated to promote inclusivity and family-centered procedures.

The Definitions subcommittee has completed a draft of the definitions that will help support the work of the Decision Tree and Protective Plan subcommittees. The Protective Plan subcommittee will work to revise the safety assessment form and procedure to support staff with family engagement in assessment and family arrangement. Casey funding provides an opportunity to produce wall posters featuring the Decision Tree that can be displayed in each CWS unit. These posters serve as reference points and reminders for staff, offering guidance on placement decisions throughout the assessment phases. Smaller, laminated versions of the Decision Tree may also be created for staff to take with them while working with families out in the field.

Planning for the Next Five Years

Printed materials

In addition to producing wall posters for the Decision Tree, Casey funding will be allocated to produce wall posters featuring the CWS Prevention Case Flow graphic. This visual tool guides staff through the progression of a CWS case, from the initial face-to-face meeting with the family to case closure. The graphic highlights crucial data entry points within the CPSS and SHAKA database systems, facilitating accurate data collection to meet federal FFH data requirements.

The content and design of the Case Flow graphic have already been developed, pending finalization of revisions to the safety assessment procedures and the creation of procedures for redetermining FFH eligibility. Additionally, as SHAKA serves as the platform for FFH data entry via the web-based Child Safety Assessment and Family Service Plan, SHAKA developers will need to align programs with revised safety assessment and FFH eligibility redetermination procedures to incorporate specific FFH data from these processes.

Casey funding may also be allocated for printed materials such as FFH workgroup infographics and other documents to support onboarding persons with lived experience and other new members to FFH workgroups. This will further enhance lived experience and new member engagement. These materials will serve as tools in supporting active involvement of individuals with lived experience in all facets of FFH implementation. Under the guidance of a dedicated CBC Family Consultant, LEAG members and FFH leaders are collaborating to develop these infographics and onboarding documents with the goal of establishing a structured and sustainable framework for genuine engagement and empowerment of persons with lived experience, ensuring their voices remain at the forefront of FFH initiatives. *Please refer to Section VI.F.31 Agency Responsiveness to Community, Family First Hawai'i, Enhancing Lived Experience Engagement for more details about this FFH initiative.*

Maximizing Lived Experience Voice and Father Engagement

The Placement Prevention Project, now referred to as the Family Supported Arrangements Continuum, was subdivided into manageable segments to better match CWSB's internal work capacity. Related to, but separate from FSAC, are the following objectives outlined in the original Placement Prevention Project proposal that CWSB aims to address over the next five years. Among these objectives, a key priority for the FFH Program Manager is to enhance and promote father engagement.

1. Collaborating with LEAG to leverage their expertise in family engagement, particularly in involving extended family, friends, and other natural supports.
2. Prioritizing and expanding efforts to engage fathers, including the establishment of a father support network and the eventual creation of father Parent Partners.

Enhanced FFH Website

FFH would like to invest in enhancing the FFH website. The objective is to enlist the expertise of a skilled website designer or developer to revamp the site, to engage users with a user-friendly interface and visually appealing design. As FFH strives to foster broader community engagement, the website serves as a pivotal hub for disseminating information and encouraging family and community involvement.

With the recent PSAs directing viewers to the FFH website for further information and avenues for involvement, and as CWSB prepares to work on and disseminate FFH posters in public spaces alongside FFH brochures, it is imperative that the website undergoes improvements to effectively engage interested individuals. By investing in website enhancement, FFH aims to create an online platform that not only attracts but also sustains public interest, serving as a dynamic resource for those seeking information and opportunities to contribute to FFH initiatives.

2. Race Equity

Overview

Casey Family Programs (CFP) plays a vital role in supporting CWSB's efforts to advance race equity and cultural learning. This support includes hosting Race Equity Convenings, offering technical assistance, and providing supplemental funding to enhance equity initiatives within CWSB. CFP facilitated the establishment of Na Kama a Haloa, a key partner in addressing Native Hawaiian disproportionality within CWSB. Na Kama a Haloa (housed by EPIC Ohana) is a Native Hawaiian community collaborative that initially consisted of five hui or groups [Hui Kauhale: Developed Native Hawaiian Perspectives, a Native Hawaiian culture-based training curriculum for CWS staff and community providers. Hui Makua: Empowering Native Hawaiian birth parent voice. Hui Pilina: Supporting sibling connections. Hui Fostering Strong Connections: Services and strategies to support shared parenting between birth parents and resource caregivers (RCG). Hui Hilo: Hilo-based project to engage and support RCGs, families, and community members].

Trends in Disproportionality. Figure 54 (Hawaiian and Non-Hawaiian Children in Foster Care 10-Year Trend) in the Data Booklet APSR FFY 2025 depicts a rise and then fall in the overall number of children in foster care from SFY 2014 – SFY 2023. For Native Hawaiian and part Native Hawaiian children in foster care, their percentage in foster care also decreased from 50% in SFY 2014 to 43% in SFY 2023. However, even at 43% (a 7% decrease), the percentage of Native Hawaiian and part Hawaiian children in foster care is still higher than their percentage in the general population of children in the State (34%). CWSB acknowledges this disparity and is committed to taking action to eliminate this racial disproportionality and ensure appropriate support for Native Hawaiian children and families within the child welfare system.

Equity Improvement Collaborative. Following participation in the CFP Race Equity Convening in 2022, CWSB transitioned an existing race equity workgroup to the FFH Equity Improvement Collaborative (EIC) to receive technical assistance support from CBC. The purpose of the EIC is to promote and improve equity for *all* people who are involved with CWSB, while building on existing work and partnerships.

The EIC's current focus is to achieve racial equity for Native Hawaiian children, families, and communities by centering their experiences and aligning CWSB policies accordingly. This work has been determined a priority based on the data discussed above. Although the current focus is on Native Hawaiians, the EIC recognizes that the targeted actions to address the needs and challenges of Native Hawaiian children and families will simultaneously benefit other marginalized communities and society as a whole. Led by CWSB in collaboration with partners like EPIC Ohana, Liliuokalani Trust, and Na Kama a

Haloo, the EIC aims to end Native Hawaiian disproportionality in CWSB and achieve its vision through targeted actions and ongoing collaboration, with the overarching goal of safely reducing the number of children in foster care.

Annual Update

Disparate Outcomes for Native Hawaiian Children. Figure 52 from the Hawaii Data Booklet APSR FFY 2025 provides insight into trends regarding Hawaiian children in foster care from SFY 2019 to 2023. Notably, there was a decrease in the percentage of Native Hawaiian children entering foster care in SFY 2023 at 33%, as compared to the previous years, ranging between 40% to 42%. Despite this decline in new entries, the total proportion of Native Hawaiian children in foster care for SFY 2023 was at 43%, which is relatively consistent with the preceding years' rates of 44% to 45%. Even with a significant decrease in the number of children entering foster care, CWSB does not expect to see immediate effects regarding the decline in the number of Native Hawaiian children in foster care. This is because the current number of children in care reflects years of historically high entry rates for Native Hawaiian children. The emancipation rate among Native Hawaiian children in foster care for SFY 2023 remained relatively stable at 47% with the preceding years ranging from 38% to 54%.

According to the 2021 estimates from the U.S. Census American Community Survey, Native Hawaiian children constitute 34% of the state's child population while Hawaii Child Welfare data for SFY 2023 revealed that Native Hawaiian and part-Native Hawaiian children comprised 43% of the statewide foster care population. Furthermore, CWSB data for SFY 2023 showed a significant disparity in reunification rates between Native Hawaiian children and non-Hawaiian children. Specifically, only 45% of Native Hawaiian children were reunified with their families, compared to 60% of non-Hawaiian children. This highlights a gap in the effectiveness of reunification efforts for Native Hawaiian families and underscore the urgent need for targeted interventions and support for Native Hawaiian children and families in the child welfare system. Additionally, addressing this disproportionality requires robust support for Hawaii Child Welfare Services leadership and staff to effectively serve Native Hawaiian children, families, and communities. *Refer to Section IV.A.2 Most Vulnerable Populations, a. Hawaiian Families for more details and data on the disproportionality of and disparate outcomes for Native Hawaiian children and families in CWSB.*

Hawaii CWS Equity Action Plan. The EIC has been tasked with developing the Hawaii Child Welfare Equity Action Plan (EAP) to ensure equitable outcomes for all children and families involved with CWSB, with a current focus on ending the disproportionality of Native Hawaiian children and families in the child welfare system. To develop the Equity Action Plan, the EIC analyzed the impact of historical legacies of oppression and

contemporary systemic, explicit, and implicit biases, leading to disparate outcomes for Native Hawaiian children and families within the CWS.

The Hawaii CWS Equity Action Plan reinforces the core mission of the EIC, emphasizing, “The EIC seeks to enact change in partnership with community stakeholders to advance anti-racist practices and policies in the child welfare system that undoes existing systemic racism and colonialism and promotes equitable outcomes for Native Hawaiian children, families, and communities. The EIC’s current vision is to achieve racial equity for *kanaka o’iwi* (a multilayered Indigenous Native Hawaiian word describing the people whose ancestors were the original inhabitants of the Hawaiian archipelago). This means centering the experiences of Native Hawaiians and focusing on implementing solutions that specifically target the existing policies and practices that harm and oppress these children and families. The EIC is committed to decolonizing CWS policies and practices to achieve this vision.”

With the EIC vision in mind, the EAP was created to advance a paradigm shift where the strengths of families, children, and culture are always at the center of CWSB practice; families are trusted as experts of their own lives; families are full and equal partners in determining the best supports for themselves; and families are served within their communities. Implementing such a paradigm shift requires collaborative efforts with community stakeholders and persons with lived experience within the child welfare system. The EIC has and continues to foster strong partnerships with these stakeholders at every stage of the process, from team formation and strategy development to priority identification.

The EIC identified three key equity priority areas for the EAP that were crucial for supporting the paradigm shift. For the initial phase of this equity work, the EIC has chosen to focus on the three priority areas of Child Welfare Services Branch: prevention, reunification, and workforce support. The group identified multiple strategies for each of the three priority areas. In order to develop a pragmatic plan capable of timely execution while effectively addressing the disparities faced by Native Hawaiian children and families, the group prioritized two initial strategies for each priority area:

1. Strategy One: A short-term strategy, achievable within one year of finalizing the plan.
2. Strategy Two: A longer-term strategy, requiring more time for implementation but deemed essential in advancing the paradigm shift.
 - a. Additional strategies were incorporated for each priority area for future consideration. This underscores the importance of documenting these strategies to ensure they receive due attention in subsequent planning and implementation phases.

The strategies for each priority area are as follows:

1. Child Welfare Prevention
 - a. Strategy One: Enhance and increase Parent Partners.
 - b. Strategy Two: Invest in additional family support and prevention services to meet the needs of children and families.

2. Reunification
 - a. Strategy One: Increase Native Hawaiian culturally-based service availability.
 - b. Strategy Two: Concrete supports for families (Family Assistance Payments)

3. Workforce Support
 - a. Strategy One: Update Native Hawaiian Perspectives Training, Refresher, Policy Review.
 - b. Strategy Two: Strengthen supervisor practice to ensure that Native Hawaiian equity is centered in staff supervision.

Additionally, the EAP includes supplementary approaches categorized as "Phase Two" strategies for each priority area. These plans, earmarked for future equity initiatives, are documented in the appendix of the EAP, ensuring comprehensive coverage and sustained progress in addressing equity concerns. [NOTE: A condensed version of the EAP was submitted to ACF as part of Hawaii CWSB's commitment to advancing equity for children and families within the child welfare system. This abbreviated version does not include the detailed metrics and activities associated with each equity strategy, nor does it include the appendix containing the Phase Two strategies found in the comprehensive EAP.]

The EIC is actively working on enhancing the content of the comprehensive EAP by incorporating criteria for success and establishing target dates for achieving the overarching goal of eliminating disproportionality of Native Hawaiian children and families within the child welfare system. The group aims to finalize the comprehensive EAP by end of 2024 and move forward with implementation in early 2025.

While the current focus of the EAP centers on addressing and ending the disproportionality of Native Hawaiian children and families within CWSB, it is important to recognize the EAP as a living document. Continuous revisions are expected to ensure alignment with evolving trends and the evolving needs of marginalized communities.

Collaborative Efforts. The EIC proactively pursues opportunities for both internal and external collaboration. Internally, this has involved supporting the FFH Communications

workgroup's Public Service Announcement (PSA) Project, specifically in developing a 60-second PSA about the overrepresentation of Native Hawaiian children in foster care. Additionally, the EIC helped with subsequent PSA presentations for CWSB staff, aimed at raising staff awareness regarding the disproportionality of Native Hawaiian children and families within the child welfare system. *Refer to Section VI.F.31 Agency Responsiveness to Community; Family First Hawaii for more details about the Public Service Announcement Project and PSA Presentations.*

The EIC spearheaded efforts to embed EIC representation in the current efforts to revise the CWSB Safety Framework and update Safety Assessment procedures. This proactive involvement aims to identify and rectify policies and practices that perpetuate systemic racism, while ensuring an equity-driven approach to creating policy. Notably, the Na Kama a Haloa manager serves as a key member of the EIC and is participating as one of its representatives in providing input to revising the Safety Framework and assessment procedures.

The insights of the Na Kama a Haloa “Call to Action for Healing” document catalyzed the EIC's proactive collaboration with the FFH Case Pathways workgroup to ensure a comprehensive and culturally sensitive safety framework, one that addresses equity concerns and acknowledges cultural significance for families navigating the complexities of CWSB. The following section in the Na Kama a Haloa Call to Action for Healing served as the point of inspiration for EIC involvement in the revision of the CWSB Safety Framework and assessment procedures:

“We acknowledge that American child welfare practices and policies have harmed and contributed to the disruption of kanaka oiwī ohana in these ways:

- A definition of risk and safety may separate keiki from their ohana and lead to the loss of protective connections to living ohana, ancestors, place and community.
- An American concept of a family may ignore or underestimate the role of extended ohana as connections and resources for parents and children. Extended ohana connections may be thought to be against the best interest of the keiki and parents.
- Deep-rooted notions of manifest destiny have led to a failure to recognize and value the spiritual, cultural, and community aspects and to place connections for family support as opportunities for healing.
- There is often a focus on what an ohana may be lacking from an American perspective rather than identifying and highlighting the strengths of the ohana from a kanaka oiwī perspective.”

Na Kama a Haloa. As previously mentioned, Na Kama a Haloa is an essential partner in addressing and ending Native Hawaiian disproportionality in CWSB. The name itself holds cultural significance, as "Na Kama a Haloa" translates to "The Descendants of Haloa," referencing the ancient Hawaiian creation story where Haloa is the first Hawaiian and ancestor of the Hawaiian people. A self-description of Na Kama a Haloa is as follows:

“Na Kama a Haloa network is a community-based network that first came together in September 2018 to address the crisis of the disproportionate number of Native Hawaiian children involved in the child welfare system. We work to weave Native Hawaiian wisdom and perspective into the Hawaii child welfare community. We strive to share power among representatives of Native Hawaiian serving institutions; the state Child Welfare Services; contracted service providers; communities; and resource caregivers, birth parents and youth with lived experience in child welfare. Through inclusivity, our efforts improve opportunities and outcomes for Native Hawaiian keiki and ohana and address the overrepresentation of Native Hawaiians in the child welfare system, with the Na Kama a Haloa network goal of Native Hawaiian children no longer being disproportionately represented in child welfare by the year 2030.

Our Goal: By the year 2030, Native Hawaiian children are no longer disproportionately represented in child welfare.

Our Dream: We have reimagined and transformed child welfare so that it is grounded in Native Hawaiian culture and values and is sustained in deep positive relationships that heal and strengthen ourselves, our ohana, and our communities.”

Na Kama a Haloa developed a prioritized set of critical shifts essential for achieving their goals. These shifts consist of two-part statements, outlining the current state and the desired future state. Na Kama created subcommittees, small groups known as Hui, with each hui assigned to work on a specific critical shift in order to achieve the overarching goal of ending Native Hawaiian disproportionality in CWS. These hui convened regularly to strategize and implement next steps toward realizing their identified priorities.

The previous five Hui were mentioned in the Overview section of this report and played instrumental roles in creating the Native Hawaiian Perspectives training curriculum for CWSB New Hire Trainings; keeping siblings connected while in foster care; strengthening birth parent supports and lived experience voice; and fostering partnerships between parents and Resource Caregivers to maintain parent-child connections and enrich the lives of children in care.

Having successfully achieved numerous initial goals, Na Kama a Haloa has pivoted its focus towards new critical shifts, prompting the formation of new groups or hui tailored

to meet its evolving needs. One such group, the Hui Call to Action for Healing, was established in October 2022 with the purpose of creating a document addressing the injustices inflicted upon Native Hawaiian families within the child welfare system, along with strategies for effecting change. The Call to Action for Healing document was finalized at the end of 2023. Presently, this hui is actively exploring diverse avenues and methods for disseminating the document, including the identification of individuals, agencies, and communities with whom to share the document.

The Hui Ka Piko (the navel – where life begins) was formed in April 2023 with the primary focus of fostering community empowerment by bolstering prevention services and resource supports for families at every stage of systems involvement. This hui is currently in the process of assessing existing resources while simultaneously identifying the unique needs of each community.

The Hui Training was created in November 2023 to develop a “Train the Trainer” curriculum to address the increasing demand for the Native Hawaiian Perspectives training. The selected trainees are required to be current Na Kama a Haloa partners. Presently, the hui is exploring the potential of hosting a larger training or conference for the Native Hawaiian Perspectives training. This platform would also serve as an opportunity to not only share the Native Hawaiian Perspectives training, but to also share ways to integrate Hawaiian cultural values and practices into working with families and communities.

Of note, the sole hui continuing from the initial hui is the Hui Pilina (Sibling Connections). Presently, this hui is actively exploring ways to resolve transportation barriers hindering sibling connections and identifying a dedicated connector role to facilitate this endeavor. This hui is also engaged in providing input for CWSB policy and process reform to strengthen sibling connections while in care.

The Department is well-represented in Na Kama a Haloa with its current members ranging from the SSD administrator, CWS branch administrator, CWS section administrators and supervisors, CWS PD assistant program administrators, and CWS line staff representatives. Other Na Kama a Haloa members include representatives from Liliuokalani Trust, Kamehameha Schools, EPIC Ohana, Partners in Development Foundation, Family Court CASA program, Catholic Charities Hawaii, Family Programs Hawaii, Hale Kipa, Neighborhood Place of Waianae, Pua Foundation, Friends of the Children’s Justice Center Maui, Hooikaika Partnership, Geist Foundation, Hawaii Community Foundation, Consuelo Foundation, Family Court, DOH Children with Special Health Needs Branch, Office of Hawaiian Affairs, Youth Partners who experienced foster care, Parent Partners who experienced child welfare involvement, resource caregivers, Annie E. Casey Foundation, Casey Family Programs, CoCreative. This diverse

representation strengthens our efforts to effect meaningful and sustainable change in advancing equity and ending racial disproportionality within CWS.

Casey Funded EIC Projects

In-person Native Hawaiian Perspectives Training: The EIC has committed to supporting in-person Native Hawaiian Perspectives trainings for CWSB staff to foster genuine interactions, hands-on learning, and meaningful engagement to enhance deeper cultural understanding and sensitivity. Part of the Casey funding for Race Equity has been and will be allocated to cover travel expenses for Native Hawaiian Perspectives trainers to provide in-person trainings for CWSB sections on the neighbor islands, ensuring equitable access to this valuable training.

EIC In-Person Meeting. An in-person EIC meeting will be convened to finalize the comprehensive Equity Action Plan and strategize for its effective implementation. This face-to-face gathering will help to build stronger bonds among members while providing a venue for brainstorming approaches to implementing and monitoring progress for the EAP. Additionally, the in-person meeting can include planning sessions for the Race Equity Roadshow (see below), including developing the training curriculum. The current funds will cover travel and transportation costs for neighbor island members as well as food for the event.

Race Equity Roadshow. An in-person Race Equity Roadshow, designed for CWSB staff, will kick-off the implementation of the finalized Equity Action Plan (EAP). Its primary objectives are to enhance staff understanding of Native Hawaiian disproportionality within CWS, foster buy-in, and cultivate a sense of ownership towards the EAP. Notably, the direct involvement of the CWS branch administrator underscores the significance of this project.

The projected kick-off will be in December 2024 or early 2025. The EIC will work on finalizing the details of the roadshow months in advance of implementing the EAP. Current ideas for the Race Equity Roadshow include interactive workshops or activities aimed at educating and actively engaging staff. These activities include having each section or unit create a vision board, illustrating their role in advancing the EAP and its potential impact on families; using the Lokahi Wheel as a culturally sensitive assessment tool to ensure alignment with Hawaiian values and perspectives; and peer learning circles to provide a platform for participants to exchange insights, share challenges and successes, and glean best practices in working with Native Hawaiian families.

By integrating these elements into the roadshow, CWSB aims to foster a culture of equity, collaboration, and empowerment within CWSB, laying the groundwork for meaningful and sustainable change in our practices and outcomes.

Planning for the Next Five Years

EAP Implementation. A top priority for the EIC is the completion and implementation of the comprehensive Equity Action Plan. This entails formulating actionable activities aligned with the prioritized strategies within the EAP, enhancing quantitative metrics and qualitative benchmarks to effectively measure progress, incorporating criteria for success, and establishing target dates for achieving the goals of the EAP. Additionally, the EIC may need to conduct assessments to evaluate readiness for change within CWSB. These assessments will help to identify potential barriers and challenges to implementation. Consequently, the EIC may need to develop strategies to mitigate barriers to implementing the EAP which may include strengthening the organizational infrastructure by allocating resources for training, capacity building, and ongoing support for CWSB staff.

Expanding our Network. As CWSB moves towards completing and implementing the comprehensive EAP, CWSB recognizes the importance of collaboration across State departments and community organizations engaged in equity work in order to amplify our efforts. The EIC will seek to identify agencies that are actively engaged in equity initiatives, as well as those representing marginalized communities to foster collaboration. Its aim is to facilitate the exchange of knowledge, resources, and strategies for collectively advancing equity.

To broaden its network and extend its impact, the EIC may explore the possibility of organizing Asian and Pacific Island Equity Convenings in partnership with relevant stakeholders. This may involve forging partnerships with the UH East-West Center and similar organizations to leverage their wealth of expertise and resources. The rationale behind reaching out to Asian and Pacific Island countries and its supporting organizations stems from the unique diversity of ethnicities and cultures that shape Hawaiian society, distinct from the mainland U.S. context. Hawaii's communities of color possess distinct characteristics and experiences that differ from those on the mainland.

Recognizing these differences is crucial in developing effective equity initiatives tailored to Hawaii's specific cultural landscape. By engaging with Asian and Pacific Island countries, CWSB can gain valuable insights, exchange knowledge, and foster collaboration that is reflective of Hawaii's unique cultural context. These engagements can deepen comprehension of equity challenges within Asian and Pacific Island communities and collectively explore culturally appropriate strategies for promoting inclusivity and equity. By embracing and celebrating Hawaii's cultural diversity, these convenings can cultivate an environment where equity and inclusivity can thrive especially within its most impacted communities.

The EIC's commitment to completing and implementing the comprehensive EAP is reflective of its dedication to promoting equity and inclusion within the CWSB. By developing actionable strategic solutions, strengthening measurement metrics, and investing in internal capacity, the EIC is paving the way for meaningful and sustainable equity work within CWSB. Additionally, expanding its equity network and fostering collaboration are essential steps in its journey towards achieving meaningful and sustainable change. By sharing its equity efforts and connecting with key stakeholders, it is strengthening its collective ability to create more equitable and inclusive communities.

3. Family Engagement – Birth Parent Mentoring and Peer Support Programs

a. Better Together Trainings

Overview

Casey Family Program (CFP) developed the Better Together concept and trainings and funded a Better Together Training - Training of Trainers in Hawaii coordinated by EPIC Ohana. Better Together is designed to create safe and courageous spaces for caregivers and agency staff to engage in honest dialogues and actively participate in activities structured to foster experiential learning. The purpose of Better Together is to develop equal, mutually respectful partnerships between caregivers, child welfare staff, and community partners to improve services and the lives of child welfare-involved children and their families.

The Past Five Years to Present

In October 2022, EPIC Ohana, in partnership with CFP, provided a three-day Facilitators Training Session. As part of the three-day session, *Better Together* trainers met with CWSB leadership on October 10, 2022. At the end of the three-day training session, a total of fourteen individuals, consisting of six birth parents, three resource caregivers, and five agency support staff from Catholic Charities, Liliuokalani Trust, EPIC, and CWSB program development office, were trained and certified as trainers.

In 2023, additional training sessions with certified facilitators continued. Two “practice” sessions were held in June and August and the first official session was held on November 15 and 16, 2023. At the same time, an informational flyer on Better Together was developed and a logo created to help members and the community connect with the concept. Cultural adaptations for the the facilitator’s guide were further refined.

EPIC facilitated the November training session and has been conducting practice sessions. This has allowed EPIC Ohana to become much more comfortable implementing the model creating and holding the safe space for individuals who have never met before. Through sessions, trust is built and grounding done in a Hawaiian oli (chant) and pule (prayer). Often highlighted in sessions is the importance of “understanding perspective” and while each person’s journey is different, as human beings, everyone can feel deep emotion. There were stories about loss including the loss felt when children were removed from parents’ home and the loss felt when children left their RCG home after bonding with RCGs and other children in the home. There were also stories about the love for our kamalii (children) as the inherent theme woven through all roles and all experiences. These training sessions are incredibly precious times together and each person leaves being changed in some way for the better.

Planning for the Next Five Years

Over the next five years, Hawaii plans to continue to move the work of Better Together forward and further its concept of shared parenting through the following strategies:

- i. Convene and connect the larger group by using a networking directory of past attendees that has been created.
- ii. Create a 10–12 minute informational video to help CWS staff and community partners understand the goal and design of Better Together. The video may be used within CWS New Hire Training to help train CWS staff and incorporated into H.A.N.A.I training for resource caregivers.
- iii. Organize monthly huddles for trained facilitators to allow opportunity to connect to the modules, learn objectives, and enhance delivery style of the curriculum between sessions.
- iv. Search for additional funding to sustain Better Together.

Other considerations include:

- i. Connecting past participants with facilitators and champions of Better Together to further explore different frameworks such as shared parenting, integrating Native Hawaiian values and ideas into practice, and truth telling. Such exploration may lead to the development of a change model.
- ii. Training more facilitators and exploring the appointment of one or two “master trainers” to teach the curriculum.

- iii. Creating a curriculum video that incorporates some of the stories already shared, i.e. fathers perspective, race and culture, and using that video as a learning tool.

Since Better Together was launched in 2022, a cross section of individuals representing birth parents, resource caregivers, agency support partners, young people, and CWS staff have been trained. The specific numbers trained are as follows:

- i. Seven birth parents
- ii. Eight resource caregivers
- iii. 23 agency support partners trained
- iv. Three young people trained
- v. Two CWS staff trained

EPIC Ohana, Inc., in partnership with CWSB, continues to spread the word about Better Together and the concept of shared parenting with others in the community. In the first two quarters of the year, presentations were made to Na Kama A Haloa – Hui Hilo and Fostering Strong Communities Hui and EPIC managers. Future plans include considerations to offering quarterly information sessions and in-services with CWS community partners, including CAMHD, Catholic Charities Hawaii, and Hooikaika Partnership on Maui. Through these outreach efforts, EPIC and CWS want to share more broadly and encourage the community to connect with Better Together, Two Makua Meetings, and Ka Pili Ohana, all of which are centered around the importance of shared parenting. These collaborations will help further support the paradigm shift that honors kulana and kuleana that parents and resource caregivers play a vital role and have an important responsibility to support keiki and help ensure they thrive through their CWS journey.

4. Community Collaboration

a. Hooikaika Partnership

Overview

Hooikaika Partnership (HP) is a strong community collaboration on Maui to provide support, resources, and navigation services to CWSB, families, and the community. There is an average of 35 attendees at monthly general meetings representing seven or eight of its 10 Core Partners. There are three committees that meet monthly with an average of six participants.

The Past Five Years to Present

In April 2023, HP hosted its 2nd annual Ohana Fest to share information and concrete support with families served by partner organizations. A total of 314 people with 155 children were engaged, 54% identifying as Hawaiian or other Pacific Islander. About 90 agency staff and volunteers from 40 organizations participated; this tripled the number of partners in 2022. The 3rd annual Ohana Fest was held on April 6, 2024, bringing families together through live music, entertainment, and activities for keiki. Numerous community providers were on hand to share resources. CWS hosted a booth and shared its Family First Hawaii initiative with parents and the larger community. The festival allowed CWS and community providers to engage with families with some sharing about their successes in working with CWS. Many families expressed a desire to see more community events. The Ohana Fest is a positive community collaboration that celebrates community partnerships and promotes better outcomes when CWSB work together alongside our families.

HP continues to implement the strategic plan and is currently revising it based on partner feedback collected during a February 2024 meeting, the first in-person meeting since the pandemic. A draft charter and online application are complete and will be finalized after the conference in September 2024. A draft of the annual survey is in development, with assistance from an evaluation consultant.

HP has launched a public education campaign focused on the protective factors with key partners including the Boys & Girls Clubs of Maui, Maui Family Support Services Early Literacy Project, Child and Family Services (CFS)/Neighborhood Place of Wailuku, the Bookmobile/Wailuku Public Library and the national Talking is Teaching campaign coordinated by Kakou for Keiki. The campaign is working to develop products that include a children's book, bookmarks, activity cards, and magnets to help promote the organization's purpose as a means of increasing its utilization.

The Maui Wildfires of tragic events of August 8, 2023, that incinerated the town of Lahaina and burned nearly two dozen homes in Upcountry Maui was the latest issue that had superseded nearly everything else in Maui County since it occurred. Nearly all core partner organizations were involved in crisis response, to varying degrees. Two partner organizations lost childcare facilities to the flames. Additionally, the contractor serving as Hooikaika Partnership's web designer passed away. To say it's been a difficult time for the organization and the people of Maui is an understatement. Nonetheless, partners rallied. The HP Navigator teamed up with local mental health practitioners to provide concrete

support to fire victims. Partner organizations moved forward with community engagement such as the annual Stand for Children Rally organized by Maui Family Support Services where HP hosted a table. The major accomplishment during July to September 2023 was the annual conference. Rather than cancel, partners decided to move forward and focus on helping the workforce recover, heal, and build resilience for themselves and the families they serve. Tia Hartsock, director of the newly formed statewide Office of Wellness and Resilience, delivered the keynote. Two Maui County Councilmembers offered a “listening session” to hear from a dozen workforce representatives, and the HP Public Education Campaign team presented to 131 people on the creation of the children’s storybook Kalo Boy’s Adventure to Make Pono: He Huakai Ohana, a children’s book that educates both parents and children about the protective factors by supporting families through the challenges of parenting and helping children feel nurtured. 273 people registered, 167 checked in for the opening, and 104 completed the evaluation as of October 2, 2023.

October to December 2023 continued to be dominated by the early stages of recovery from the devastating wildfires. The annual conference revealed that providers were struggling with their own mental health and resiliency. Partners launched “Hooikaika Cares: Healing the Healers,” a monthly peer support group to provide a safe and culturally responsive space for healing and self-care. With the generous funding supplement from Casey Family Programs, HP also hosted an end-of-the-year, in-person gathering for partners to celebrate, talk story and relax. An additional 2,000 “Kalo Boy” books were printed and distributed to Hana, Molokai, Lanai and to children of fire survivors in partnership with the Kiwanis, an international service club. A new web designer was brought on board. This enabled HP to continue website updates and complete all the video editing from the Hooikaika 2023 annual conference.

Planning for the Next Five Years

HP is now positioned to take the next step in developing partner training modules that focus on protective factors, Hawaiian culture, trauma informed care and other key topics.

b. Family Resource Centers – Hawaii Ohana Support Network

Overview

The Hawaii Ohana Support Network (HOSN) provides support for a network of member Family Resource Centers (FRCs) across the State of Hawaii. Each member center operates as a stand-alone organization that provides a safe and

accessible place for families to receive support services and referrals. The HOSN provides membership options for existing FRCs, organizations interested in becoming an FRC, and support to communities seeking to establish an FRC.

The Past Five Years to Present

In November 2023, the Hawaii Ohana Support Network (HOSN) held one Standards of Quality for Family Strengthening & Support Certification training. Nineteen participants were certified, with 80% indicating they felt prepared or very prepared to apply the Standards. The three HOSN trainers all received an average score of 4.85 out of 5.

The HI Ohana Support Network (HOSN) continues to hold bi-monthly affiliate and advisory committee meetings and monthly executive committee meetings. The last affiliate meeting was on December 11, 2023 attended by 20 organizations, including Hawaii State Family Engagement Center, the Department of Human Services, the Department of Education, the Department of Health – Maternal and Child Health Branch, Liliuokalani Trust, Ko Education Center, Compassionate Koolauapoko, Department of Health – Child Welfare Services, Early Childhood Action Strategy, Department of Health – Kauai, Neighborhood Place of Kona, Waianae Neighborhood Place, and Ceeds of Peace. DHS attended meetings and has been invited to share about Family First Hawaii at an upcoming meeting in June 2024.

The HOSN executive and steering committees have finalized the following framework for their organization:

- Roles,
- Operational Guidelines,
- Membership Agreement,
- HOSN/FRC Network Expansion Survey, and
- Standards of Quality for Family Strengthening and Support – TA Resource Guide Development Form.

The HOSN compiled and shared its HOSN Newsletter for this SFY quarter released in November. Work has continued with the web developer to streamline and modify the HOSN website as its purpose and needs evolve.

The HOSN sent one of its advisory committee representatives to the Children's Trust Fund Alliance annual membership meeting. Other HOSN representatives were able to attend utilizing other funding. Attendees learned a lot and made many connections with other networks, family strengthening programs, and funders. A debrief was held, where there were deeper discussions around HOSN

and Hawaii Children’s Trust Fund (HCTF) collaborations and they began planning next steps.

Planning for the Next Five Years

As Hawaii continues to implement Family First Hawaii and begins exploring community pathways, CWS will look to connect with Family Resource Centers to enhance prevention efforts. This will include coordinating resources with Aloha at Home, Project Vision, and Hawaii Foodbank along with continued participation in the Coalition for Community Schools, One Shared Future, and NFSN meetings.

D. STRENGTHENING TITLE IV-E FOSTER CARE ELIGIBILITY DETERMINATION

The Hawaii Child Welfare Services Branch (CWSB) maintains an ongoing partnership with the University of Hawaii, Maui College through the Hawaii Child Welfare Continuous Quality Improvement Project (HCWCQI). This initiative oversees annual quality reviews of Hawaii's Child and Family Services Reviews (CFSR) and conducts internal audits of the CWSB to ensure Title IV-E funding eligibility determinations are accurate by examining child and parent case records, licensing files and FPPEU eligibility determinations. They compile an annual audit report detailing their findings, including identified errors in eligibility determinations, potential issues, practice concerns, and instances of ineligible payments. The report classifies these findings to highlight areas requiring improvement.

1. Audit Design

a. Geographic Sampling

In SFY 2023, all geographic areas of the State were audited by HCWCQI for Title IV-E eligibility determination compliance via random selection of Title IV-E eligible cases. The audit included a total of 65 Title IV-E children, with the following distribution:

- i. Oahu Special Section – Four children
(includes sex abuse cases, serious harm cases, unknown perpetrator cases, and the Oahu Crisis Response Team)
- ii. West Oahu Section – Nine children
- iii. East Oahu Section – Seven children
- iv. East Hawaii Island Section – 14 children
- v. West Hawaii Island Section – Five children
- vi. Maui County Section – 13 children
- vii. Kauai Section – Six children

b. Eligibility Criteria

Cases were reviewed by examining requirements in the following areas:

- i. Court-Ordered Removal
- ii. Voluntary Removal
- iii. Valid Removal
- iv. Ongoing Judicial Activity
- v. AFDC
- vi. Placement and Care
- vii. Placement in Licensed Foster Care Setting (Licensing)
- viii. Safety (in placement)

2. Findings

a. Errors and Concerns

In the eight areas listed immediately above in *VII.D.1.b. Eligibility Criteria*, for all 58 cases, no eligibility determination errors were found in seven of the eight areas. 19 errors were found only in the area of Safety in Placement Requirements. In addition to these errors, a total of 32 concerns were identified, as listed below.

- i. Court-Ordered Removal Requirements – One concern
- ii. Placement in Licensed Foster Care Setting Requirements – 17 concerns
- iii. Safety in Placement Requirements – 43 concerns

b. Summary

This report examines the Title IV-E eligibility of 65 children in the statewide sample. This review allotted three errors to be considered in compliance. There were 28 samples (cases) with errors found in this review. The summary below highlights the errors.

- Valid removals were done through a court order or signed voluntary placement agreement on all samples.
- Efforts were made to finalize a permanency plan for the Title IV-E eligible child on all samples.
- AFDC requirements were accurately assessed and documented on all samples.
- DHS was fully responsible for the placement and care of the Title IV-E eligible child for the period the child was in foster care on all samples.

- In 97% of the samples (63/65), children were placed in fully licensed or approved placement settings.
- In 60% of the samples (39/65), there were Title IV-E eligible children living in resource family homes that met the applicable safety requirements. Efforts were made to complete clearance checks at initial and renewal licensures, according to the Hawaii Administrative Rules (HAR) Licensing of Resource Family Homes for Children and Child Welfare Services (CWS) Procedures for licensing.

3. Plans for Improvement

The supervisor of the CWSB FPPEU is providing personalized instruction to her team and additional guidance based on the errors identified in this assessment. Plans are underway to develop tools within the new Comprehensive Child Welfare Information System (CCWIS) to automate as much of the Title IV-E eligibility determination process as possible and to guide FPPEU staff through the remaining required steps to ensure thoroughness. HCWCQI will continue to conduct quarterly internal reviews of FPPEU's eligibility, licensing, and parental case files. Cases will be randomly selected to verify correct eligibility determinations, documentation accuracy, and proper Title IV-E coding.

4. Planning for the Next Five Years

Over the next five years, the Hawaii Child Welfare Services Branch (CWSB) will enhance its partnership with the University of Hawaii, Maui College through the Hawaii Child Welfare Continuous Quality Improvement Project (HCWCQI) to ensure accurate Title IV-E funding eligibility. This initiative will conduct annual quality reviews and internal audits, focusing on child and parent case records, licensing files, and eligibility determinations. Despite recent findings showing minimal errors in eligibility determinations, significant issues were noted in safety requirements and licensed foster care settings. To address these, CWSB will provide personalized training to staff, develop automated tools within the new Comprehensive Child Welfare Information System (CCWIS) to streamline processes, and conduct quarterly internal reviews. These efforts aim to improve accuracy, documentation, and compliance, ultimately enhance the quality of care and services provided.

SECTION VIII. CHILD ABUSE PREVENTION AND TREATMENT ACT PROGRESS REPORT ON STATE PLAN

Hawaii has an approved CAPTA plan that continues to remain in effect. There have been no changes to Hawaii's state law or regulations that impact Hawaii's eligibility for the CAPTA State Grant. Hawaii appreciates the ongoing support of CAPTA funding. Over the last five years, CAPTA funding has helped to support Hawaii's CAPTA State Plan by supporting Hawaii's Differential Response System (DRS), which includes Voluntary Case Management (VCM) and Neighborhood Places services, consistent with the 14 program purposes of CAPTA and goals and objectives of the CFSP. One of the purposes of CAPTA is to improve legal preparation and representation. Hawaii has been working to see how CAPTA funds may be used along or in combination with other funds, such as title IV-E administrative claiming in this area. Discussions continue in stakeholder meetings to explore different opportunities that CAPTA state funds can support. Hawaii will continue to partner with existing legal services and identify areas for improvement and expansion.

CWSB continually assesses how the CAPTA state grant funds can help support the achievement of the state's CFSP goals and objectives and re-evaluates its needs on an ongoing basis. In addition to CAPTA funding, Hawaii uses other resources such as technical assistance from the Capacity Building Center to meet the needs of Hawaii's children and families to achieve the goals and objectives of the CFSP and the purposes of CAPTA.

As part of the American Rescue Plan, Hawaii was allotted \$406,701. The FY 2021 supplemental grant has a five-year project and expenditure period from October 1, 2020 September 30, 2025. The funding must be obligated by September 30, 2025 and liquidated by December 30, 2025. The CAPTA grant aims to improve child welfare systems across the nation. Hawaii supports the purpose of the grant and is continually working to improve its child welfare system.

Planning for the Next Five Years

Hawaii has allocated \$200,000 of the CAPTA supplemental funds towards updating its technology system to support child welfare. As of SFY 2024, Hawaii has expended \$92,852.34 for system improvement and support.

Hawaii continues to assess its needs and determine how to best support projects with goals that are in alignment with the purpose of the grant and the priorities of CWSB. At this time, Hawaii will explore funding prevention services and other projects that are in alignment with the CWSB and CFSP priorities, and in consideration of the following topics:

1. Developing and enhancing the capacity of community-based programs to integrate shared leadership strategies between parents and professionals to prevent and treat child abuse and neglect at the neighborhood level.

- Enhance parent partner services and supports for expecting or birthing parents with substance use concerns.
2. Expansion of Intensive Home-based Services as an effective safety service to prevent children from entering foster care.
- Utilize funds to support interventions and strategies that prevent children from entering foster care.

The State CAPTA Liaison Officer is Daisy Hartsfield. Her contact information is below:

Hawaii State CAPTA Liaison Officer
Daisy Hartsfield, SSDA Social Services Division
Department of Human Services
1010 Richards Street, Suite 216
Honolulu, HI 96813
dhartsfield@dhs.hawaii.gov

A. STATEWIDE CITIZEN REVIEW PANEL

SFY 2023

Na Kupa Alo Ana O Hawaii Citizen Review Panel (HCRP) continues to work collaboratively with Hawaii Child Welfare Services. HCRP has members from Honolulu, Maui, and Kauai counties. The Panel met 11 times during SFY 2023, through video conferencing and in person. In these meetings, HCRP established goals and discussed projects and issues related to Hawaii Child Welfare Services.

The HCRP focused on two projects during SFY 2023: recruitment to increase HCRP membership and CWSB staff wellness. The CWSB staff wellness initiative has been implemented to support and encourage health, safety, and resilience in the workplace.

The recruitment sub-committee continued to reach out to potential new members from Hawaii County, Kauai County, and Honolulu County who have backgrounds that are not currently represented in HCRP. HCRP's goal is to increase panel membership with people who have diverse life and work experiences, backgrounds, and education. In-person HCRP meetings on neighboring islands gives HCRP the opportunity to host open house events for interested parties to meet us, find out more about HCRP, and possibly partner in HCRP efforts. During the last state fiscal year, HCRP welcomed five new members to the Panel.

The staff wellness subcommittee also continued its efforts to replenish staff wellness items that were distributed in last state fiscal year. Distributing staff wellness baskets is an ongoing project under the Staff Wellness Initiative in which every CWSB section receives a basket of

items to promote wellness. In SFY 2023, HCRP added CWS Program Development to the list of wellness basket recipients.

Summary of Past Five Years

HCRP has worked on multiple projects over the past five years, including the Joy Ambassador/Pet Visitation program, proclamation signed by the Governor for Social Worker Appreciation Month, wellness baskets, open house for recruitment of HCRP members, and creation of the CRP brochure.

Planning For the Next Five Years

Looking ahead to further support wellness in the workplace, HCRP plans to create staff wellness areas in each CWSB section where staff can decompress during the day. HCRP is also drafting a survey to send to CWSB staff on strategies to support the current workforce. Data collected will be analyzed to support the workforce. HCRP will ensure that information regarding staff wellness is considered to improve overall wellness in the CWSB workplace.

HCRP will continue to consider ways in which HCRP can collaborate with DHS's Family First Hawaii program, e.g., creating fliers and banners to promote Family First Hawaii.

CSWB's continuing partnership and collaboration with HCRP will include ongoing discussions to promote safety, permanency, and wellbeing. Related efforts will include HCRP members participating in CWSB workgroups and meetings and bringing back information for discussion.

B. CHILD FATALITIES

1. Fatalities in CWSB Cases

a. Annual Update

Hawaii maintains its commitment to reporting data on child fatalities to the National Child Abuse and Neglect Data System (NCANDS) for the specified reporting period. In preparation for NCANDS reporting, the Child Welfare Services Branch (CWSB) staff, including the Program Development team, frontline caseworkers, and supervisors, collaborate closely with the Department of Human Services Information Technology (DHS IT) team to review and verify the accuracy of the data prior to submission.

b. Data

In State Fiscal Year (SFY) 2023, there were no child fatalities determined to be due to maltreatment. All child fatalities became known to Child Welfare Services

Branch (CWSB) after the child's death following reports of suspected maltreatment due to the nature of the injuries. There was one child fatality in SFY 2023, but a determination of maltreatment was not made until after the data extract was completed on October 31, 2023, which was outside of SFY 2023. For further details, see Data Booklet, Figure 87 Child Fatalities.

c. Quality Assurance

Hawaii continues to track all child fatalities reported to the Child Welfare Services Branch (CWSB) through its intake quality assurance (QA) process. The tracking process begins with the CWSB intake unit forwarding a copy of the child fatality intake report to a team comprising CWSB and Continuous Quality Improvement (CQI) Project members. This team follows the established QA process, which includes:

- i. Reviewing the intake report against CWSB procedures to confirm the accuracy of the screening disposition by examining CPSS screens and responding to clarifying questions from intake supervisors and administrators.
- ii. Entering case information into the internal child fatality database for tracking. The QA collaboration process has created opportunities to discuss specific cases, share observed themes, ask questions, and identify areas requiring clarification or expansion in policy. Participants have expressed appreciation for the CQI and Intake leadership meetings, which provide a supportive environment for understanding and learning about CWSB practices. In this setting, questions can be asked, and thoughts shared openly. Preliminary needs identified through this process include, but are not limited to, the following:
 - 1) Development of a standardized intake tool.
 - 2) Guidance on assessing risk and safety in cases involving co-sleeping fatalities.
 - 3) Clarification of intake procedures for specific types of cases, including child fatalities.

d. Multi-Disciplinary Team (MDT)

CWSB continues to utilize a contracted Multi-Disciplinary Team (MDT), which serves as a case conferencing tool providing diagnostic services for families and children and to assist staff with serious cases of child abuse and neglect, including cases of child death. It also offers consultative services to CWSB on medical, mental health, psychological, and legal issues related to intervention, planning, and service provision for families. An MDT is convened for every child death or serious injury in an active CWSB case. The team includes a clinical psychologist, medical doctor or pediatrician, registered nurse, and clinical social worker. For child death case, a staff member from the Program Development Office attends the MDT to determine if any rules, policies, or procedures of CWSB need modification as a result of the deaths.

The Program Development (PD) team will continue to collaborate with the State's contracted provider to review the multidisciplinary team (MDT) process for child fatality cases. The goal is to ensure time is used efficiently to assist staff in:

1. Assessing the treatment needs and goals of surviving siblings.
2. Making informed recommendations in complex situations and serious cases of child abuse and neglect.

Currently, Program Development is reviewing its procedures for using the MDT as a case conference tool in child death cases. Areas for clarification and improvement have been identified to better support MDT case conferences. These areas include, but are not limited to, identifying appropriate cases for the MDT and clarifying the purpose of these conferences. Suggestions will be shared with Child Welfare Services Branch (CWSB), Continuous Quality Improvement (CQI), and staff for discussion and feedback before finalizing the procedures.

2. Child Fatalities Statewide

a. Department of Health – Child Death Review

In Hawaii, the legislature has assigned the Department of Health (DOH), Family Health Services Division, Maternal and Child Health Branch, the responsibility of conducting comprehensive multidisciplinary reviews of child deaths. The purpose of these reviews is to identify risk factors and prevent future child and maternal deaths in Hawaii. These reviews involve representatives from relevant public and private agencies, including public health, law enforcement, Judiciary, emergency services (EMS, fire, and police), DOH Early Intervention Services,

Department of Education (DOE), and Department of Human Services (DHS) Child Welfare Services Branch (CWSB) Program Development staff.

An annual report is submitted to the legislature detailing the number of child fatalities, interagency collaboration efforts to understand the causes of these deaths, and the development of interventions to protect children and prevent future fatalities. The Annual Report on Child Death Review and Maternal Mortality Review Activities, prepared by DOH Family Health Services Division, Maternal and Child Health Branch, serves as Hawaii's comprehensive plan to prevent child maltreatment fatalities. This report can be found on the State of Hawaii's DOH Office of Planning, Policy, and Program Development website, which includes all reports submitted by DOH to the 2023 State Legislature.

<https://health.hawaii.gov/opppd/files/2022/12/2023-CDR-MMR-Legislative-Report.pdf>

Child Death Reviews continue to be conducted virtually, incorporating new and innovative practices developed during the pandemic. The use of virtual meetings has made it easier for Child Death Review (CDR) members to participate. The DOH CDR team compiles statewide data on child deaths from the State's Vital Statistics Department, CDR teams, law enforcement, and the Medical Examiner's Office. The DOH CDR reports classify child deaths into the following categories based on definitions provided by the National Center for the Review and Prevention of Child Deaths:

1. Child Abuse and Neglect
2. Homicide
3. Natural
4. Suicide
5. Undetermined
6. Unintentional Injury

In Hawaii, child deaths are reviewed one year after they occur. The review process, involving public and private community members, examines the circumstances surrounding a child's death to collect and review critical data and to establish recommendations for preventing future injuries or deaths. Interagency collaboration helps review team members understand the primary causes of death and contributing factors. This knowledge enables the team to focus on identifying and implementing prevention strategies, including the prevention of child maltreatment deaths.

CWSB uses information from the Child Death Reviews, along with its own case data and relevant research, to adjust practices accordingly.

Planning for the Next Five Years

Hawaii remains committed to reporting child fatalities to the National Child Abuse and Neglect Data System (NCANDS), with the Child Welfare Services Branch (CWSB) collaborating closely with the Department of Human Services IT team to ensure data accuracy. In SFY 2023, no child fatalities were determined to be due to maltreatment at the time, but subsequent reviews identified one case of maltreatment. Hawaii tracks all child fatalities through a rigorous intake quality assurance process, which includes reviewing reports, entering data into an internal database, and facilitating discussions for policy improvement. The Multi-Disciplinary Team (MDT) provides diagnostic and consultative services for serious cases, convening for every child death or serious injury in active CWSB cases. The Department of Health (DOH) conducts comprehensive multidisciplinary reviews, involving various public and private agencies, of child deaths to identify risk factors and prevent future fatalities. These reviews are conducted virtually, which has improve team participation, and the findings are compiled into an annual report submitted to the legislature, which details fatalities and preventive interventions. Over the next five years, Hawaii will sustain its collaborative and data-driven approach to improve the understanding and prevention of child maltreatment deaths statewide. The state will continue to utilize Child Death Review (CDR) meetings to ensure ongoing evaluation and enhancement of child protection policies and practices.

C. CHILD WELFARE SERVICES WORKFORCE

To provide an accurate portrait of its workforce, CWSB conducts a survey of its entire staff annually. The results of this survey, along with caseload data from CPSS and job position data from staff rosters are described in this section. Relevant data tables and charts can be found in the Data Booklet, *Figures 88 – 95*.

1. Staff Positions

Current

As of February 2024, CWSB had 383 funded positions, 267 employees, and 116 vacant positions. Based on these figures, CWSB is currently functioning with 70% of its allocated staff. Refer to the Data Booklet, *Figure 88: CWSB Staff Positions and Vacancies – 2019-2024*, for point-in-time details on data for the past 5.5 years, as well as *Figures 90 and 91: CWSB Staff Position Breakdown Filled & Vacant– February 2024*.

When looking at *Figures 90 and 91: CWSB Staff Position Breakdown Filled & Vacant– February 2024*, you can see that the positions with the highest vacancy rates are, unfortunately, also the positions with the greatest direct contact with children and

families. Aides have the highest vacancy rate at 43%. The primary work of aides is to supervise face-to-face visits between children and their parents and to transport children to necessary appointments. The position type with the second highest vacancy rate is caseworkers at 37%. Caseworkers include assessment workers, permanency workers, case managers, intake workers, crisis response team workers, and resource home licensing workers. Most experts in the field consider direct caseworker positions to be the most essential to child welfare work. Hawaii is currently attempting to do its work with only 63% of these vital positions filled statewide.

Although the CWSB job positions vacancy rate has slightly improved over last year at the same time – from 32% in February of 2023 to 30% in February 2024 – this change is not significant enough to indicate a trend.

In Hawaii, one set of CWS staff (intake workers) cover the statewide responsibilities of managing calls to the Statewide Child Abuse or Neglect Reporting Hotline and calls to the Statewide Child Trafficking Reporting Hotline, screening these calls, and then referring appropriate cases to CWS or contracted DRS providers for follow-up. Each region of the State has assessment workers who investigate cases referred from the intake workers. These assessment workers make determinations for each case regarding the potential confirmation of allegations of maltreatment. Please see Figures 90B and 91B to see the number of vacant and filled positions statewide for intake workers and assessment workers in February 2024. When comparing the vacancy rates in Figure 90 to those in Figure 90B, it is noted that the vacancy rate for assessment workers at 46% is significantly higher than for almost any other type of position. The next highest vacancy rate is for aides who primarily transport children in foster care to appointments and visits with their parents and supervise visits between children and their parents. The vacancy rate for intake workers at 17% is on the lower side of staff vacancy rates. The intensity of emotions that arise during a CWS investigation from parents and children, particularly when an assessment worker decides to take a child into foster care, can wear on a worker, making their job particularly stressful and therefore difficult to fill and retain.

Past Five Years

From May 2013 through January 2022, the CWSB statewide position vacancy rate varied, but always remained within a 10% range – with a high of 24% in May 2017 to a low of 14% in June 2021. Only in the past two years has the vacancy rate notably risen and stayed significantly higher than it has been in over a decade -- 32% in February of 2023 and 30% in February 2024.

CWSB is aware of a statewide shortage of social services employees. In addition to CWSB, three primary DHS-contracted service providers have been unable to fill key

positions. It appears this problem is not unique to CWSB or to Hawaii. Currently, there is a global labor shortage with multiple causes. According to the Netherlands-based, Human Resources company Randstad, in the United States in July 2023, there were 1.5 jobs per unemployed person in the country. A couple of factors that may be affecting CWSB are retiring staff and the mental health of millennials.

For the past five years, approximately half of the CWSB workforce has been 50 years old or older, which translates to staff retiring faster than they can be replaced. According to the World Health Organization, this trend of retirements outpacing hirings is likely to continue world-wide through 2029.

A recent survey in the United States showed that two-thirds of millennials who quit their jobs in 2021 cited mental health as the primary reason. The Children’s Health Council, a non-profit mental health service provider in California, has expressed concern that millennials are plagued by depression and loneliness. According to a November 2023 article by Media Culture, “nearly half [of millennials in the workforce are] feeling burned out due to the intensity and demands of their work environments. This has led to a notable turnover in organizations, as many millennials are leaving jobs due to workload pressure.” A 2022 article in *Business Insider* stated that 72% of millennials surveyed rated mental health as a priority in choosing a job. Child welfare work is notoriously stressful and may not seem an attractive career choice to a generation that both prioritizes and struggles with mental health.

Planning For the Next Five Years

In the latter half of SFY 2024, CWSB began focusing on workforce recruitment and retention. A new CWSB workgroup has been formed, calling itself the Workforce Quality Improvement Team (WQIT). With support from the CBC, this team plans to intensify and improve retention and recruitment efforts.

2. Caseload

CWSB has no policy regarding a maximum or minimum number of cases that a worker may carry. Section administrators and unit supervisors are responsible for ensuring manageable caseloads and equity in caseload across workers. Refer to the Data Booklet, *Figure 89: CWS Average Caseload by Region – 2020-2024* for details and a comparison of December 2019 through February 2024.

Current

Based on active case assignments in CPSS on March 1, 2024, the statewide average caseload per caseworker was 34 cases. Please note that this figure includes cases from

assessment workers, permanency workers, and hybrid (assessment and permanency) workers. In looking at the regional breakdown, Maui County (51 cases) and East Hawaii (49 cases) had distinctly higher average caseloads than the rest of the State. These high caseloads may be partially due to both sections tend to struggle more than other sections with closing inactive cases. In comparing February 2024 to February 2023, the average caseload per caseworker remained the same for Kauai, but went down for every other region. The most dramatic decline was for West Hawaii, which cut its average caseload in half – from an average caseload of 49 cases in February 2023 to 24 cases in February 2024. The reduction was not due to more caseworker positions being filled, but rather may be the result of more consistent supervision.

Please see *Figure 89B: CWS Assessment Workers' Average Caseloads by Region – February 2024*. As demonstrated in this Figure, the average number of cases for assessment workers statewide is high at 53 cases. On Kauai, all caseworkers are hybrid workers, with an average of 28 cases. For all other regions, the average caseload for an assessment worker is very high, ranging from an average of 48 cases on Oahu to an average of 80 cases in Maui County. These high average caseloads are due to an elevated vacancy rate among assessment positions, discussed above in Section VIII.C.1.a., and the challenge that assessment workers have in finding time to close inactive cases.

Past Five Years

Unsurprisingly, the rise in the statewide average caseload per caseworker that can be seen in *Figure 89: CWSB Hawaii Average Caseload* mirrors the rise in staff vacancies seen in *Figure 88: CWSB Staff Positions and Vacancies – 2019-2024*. In the years where vacancy rates were 21% or lower, the average caseloads statewide were in the mid-twenties. In the two most recent years, when vacancy rates were 30% and higher, the average caseloads statewide were in the mid- and upper-thirties. When there are more caseworkers, the cases can be distributed across more caseworkers, thereby lowering the average caseload per worker. The opposite is also true. When there are fewer caseworkers, the cases are spread across fewer caseworkers, thereby increasing the average caseload per worker.

Planning For the Next Five Years

In looking toward the future, Hawaii is considering best practice guidelines regarding caseloads. The Child Welfare League of America recommends caseloads of between 12 and 15 children per worker, which translates to six to eight cases per worker. The Council on Accreditation suggests a caseload maximum of 15 active cases. The most-often cited research on the issue suggests that a caseload of 16 cases is manageable (Yamatani, Engel, and Spjeldnes 2009).

There are two clear paths to achieve more manageable caseloads: 1) increase the number of caseworkers and 2) decrease the number of cases. Hawaii is pursuing both options concurrently.

a. Increase Caseworker Numbers

Regarding increasing the number of caseworkers, Hawaii is focusing both on efforts to ensure that current staff remain in their jobs and to hire more staff. WQIT is just beginning its work in these areas. Examples of strategies being considered are:

- Creating a peer mentorship program that would pair seasoned staff with new recruits,
- Offering professionally-facilitated support groups on a monthly or quarterly basis, where staff would have the opportunity to share work challenges and also learn more about secondary traumatic stress,
- Targeting recruitment efforts to specific populations of graduating college students, and
- Developing a video for potential job applicants to accurately demonstrate what CWSB work involves.

b. Decrease in Case Numbers

Hawaii's primary mechanism to reduce the number of cases coming into the system is FFH. FFH is a child abuse and neglect prevention project. If it is successful, there will be fewer CWSB cases. FFH strategies include implementing:

- Evidence-based services to families to keep children out of foster care,
- Training and guidelines for staff to support the shift to focus efforts on safely maintaining children in the family home,
- Concrete supports to families, and
- A statewide Equity Action Plan to reduce Native Hawaiian disproportionality in CWSB.

3. Gender

Current

In CWSB's February 2024 survey of its 267-person staff, 79% (211 people) self-identified as female, 17% (46 people) as male, and 4% (10 people) preferring not to state their

gender. The survey provided two additional options that received no response: “Non-Binary or Genderfluid” and “Other (please specify).”

Past Five Years

Over the past five years, the gender breakdown among CWSB staff has been relatively stable, with female ranging from 77% to 80%, male varying from 17% to 20%, and those preferring not to answer ranging from 2% to 4%. In no year has anyone chosen another gender, although the option has been provided for the entire period of time.

The gender discrepancy for CWSB is not surprising, as caring for children has been women’s responsibility, both culturally and historically. Throughout the nation, there are significantly more women employed in the field of social services than men.

CWSB wants to ensure that it includes the male perspective in its work and in its hiring processes. CWSB works to ensure that male applicants for positions within CWSB are treated fairly by consistently including men on interview and evaluation committees for hiring new employees. Also, CWSB believes it’s helpful that male applicants see that there are men employed in DHS.

Planning for the Next Five Years

Hawaii acknowledges the potential benefits of having both greater gender diversity and more men in its staff. Diverse experiences and perspectives are needed to help CWSB make the best decisions possible to improve the child welfare system. Fully engaging fathers to be active participants in their child welfare cases has been an ongoing challenge in Hawaii; employing more men may help to improve in this area. In working toward the goal of hiring more men and a more gender-diverse staff, WQIT plans to target its recruitment efforts accordingly.

4. Age

Current

See the Data Booklet, *Figure 92: Statewide CWS Staff: Age Range Distribution – February 2024*. In February 2024, all CWSB employees were over 20 and under 80 years old. The largest percentage of CWSB staff (29%) fell into the 50-59 age range, followed by the 40-49 age range (21%).

In February 2024, 49% of CWSB staff were age 50 or older. Hawaii has been concerned about its aging staff and upcoming retirements that could potentially cause institutional knowledge to be lost, especially when it is harder to fill vacant positions than in the past,

as discussed above in Section VIII.C.1.b. Fortunately, in the February 2024 CWSB staff survey, when asked about plans to retire or leave, 61% of the current staff indicated that they either plan to stay with CWSB or have no plans to leave within the next five years.

Please see *Figure 92B: Statewide CWS Intake and Assessment Workers: Age Range Distribution – February 2024*. This figure shows the age distribution of CWS assessment workers and intake workers, as gathered from the February 2024 Workforce Demographics Survey. Thirty-four percent of these workers are aged 30-39 years old; twenty percent of these workers are aged 40-49 years old, with another twenty percent aged 60-69; seven percent are aged 20-29, and one worker preferred to not share their age. This distribution contrasts with the general CWS staff age distribution shown in *Figure 92: Statewide CWS Staff: Age Range Distribution – February 2024*. Intake and assessment workers seem to skew lower than the broader set of CWS staff. The high vacancy rate of assessment workers (46%) implies a high turnover rate, which could partially explain why assessment workers would be younger on average than staff in other positions who tend to stay with CWS longer.

Past Five Years

The percentage of CWSB staff in each of the age categories (20s, 30s, 40s, 50s, 60s, and 70s) has varied by only 4% or less across the past five years. There do not appear to be any significant changes in the staff's age distribution during this period. Each year, the highest percentage has always been staff in their 50s, ranging from 28% – 32% of staff being this age. The second largest group has consistently been staff in their 40s, ranging from 21% - 25% of staff. Throughout all five years, there were no staff younger than 20 and no staff in their 80s.

Planning for the Next Five Years

More important than ensuring age diversity is filling vacant positions. Although WQIT plans to recruit to fill vacancies, another strategy to strengthen the workforce is to retain as many of the current staff as possible for as long as possible. WQIT will be working to identify which types of benefits and supports are most valuable to staff and correlate with longer tenure at CWSB, so that Hawaii can enhance those supports.

5. Education

For all CWSB staff positions, a minimum of a high school diploma or a GED is required. For caseworker positions (intake, assessment, case management, and permanency), a minimum of a bachelor's degree and experience in human services is required. Higher level caseworker positions require increased years of relevant professional experience

and a degree related to social work. CWSB supervisors must have a minimum of four years of professional experience in child abuse and neglect in addition to the formal education requirements for caseworkers. A master's degree in social work or a related field is not required but is preferred for higher level caseworker positions and supervisors.

Please see *Section VI. Systemic Factors, Item D. Staff and Provider Training* of this report for the training requirements for CWSB staff.

Current

Refer to the Data Booklet, *Figure 93: Highest Level of Education – ALL CWSB Staff – February 2024*. As of February 2024, 37% of CWSB staff have a bachelor's degree and an additional 31% also have a master's degree. As their highest level of education, 26% of staff have completed some college courses, with 43% of them having an associate degree. Approximately 5% of Hawaii CWSB staff have a high school diploma or a GED as their highest level of educational achievement. In February 2024, 43% of CWSB caseworkers and 77% of all CWSB supervisors and administrators had a master's degree.

Please see *Figure 93B: Statewide CWS Intake and Assessment Workers: Highest Level of Education – February 2024*. This figure shows that, as of February 2024, all intake and assessment Workers have a Bachelor's degree and that 52% of them also have a Master's degree.

Past Five Years

Over the last five years, the educational achievement of CWSB staff did not vary significantly.

- i. The percentage of staff with a GED or high school diploma ranged from 3% to 6%.
- ii. Staff with some college courses ranged from 22% to 26%.
- iii. Staff with a bachelor's degree varied from 35% to 38%.
- iv. Staff with a master's degree ranged from 31% to 35%.

Despite this overall stability, over the past five years, there was a change in which staff held master's degrees. In May 2020, 58% of caseworkers and 70% of supervisors and administrators had master's degrees, but in February 2024, the percentage of caseworkers with master's degrees had fallen to 43%, while the percentage of supervisors and administrators with master's degrees rose to 77%. It appears that this shift may be due to CWSB promoting caseworkers with advanced degrees to supervisor and administrator positions.

Planning for the Next Five Years

Hawaii plans to solidify funding and expand the Hawaii Child Welfare Education Collaborative (HCWEC) project, which is a partnership between DHS and the University of Hawaii at Manoa School of Social Work. HCWEC provides funding for graduate students pursuing their master's degrees in the field of social work in exchange for a commitment that the students work for Hawaii CWSB upon graduation. DHS has experienced challenges in securing stable funding for this project, which helps to ensure that well-trained and educated employees are regularly joining the workforce.

6. Ethnicity

Current

In the February 2024 staff survey, staff were asked to indicate their ethnic background with the following question: *“Which category best describes your ethnic background? Please choose one answer only. If you have multiple ethnicities and you are part Native Hawaiian, please indicate Native Hawaiian. If you have multiple ethnicities and are not part Hawaiian, please choose the ethnicity that you primarily identify with. (This may be the one that you list first when describing your background.)”* See the Data Booklet, *Figure 94: Statewide CWSB Staff: Primary Ethnicity (Self-Reported) - February 2024* for the ethnic breakdown of CWSB staff.

The largest percentage of CWSB staff are Native Hawaiian or Part Native Hawaiian, which reflects the prevalence of Native Hawaiian children who are in foster care in Hawaii. As of February 2024, over three-fourths of CWSB staff fell into the following four ethnic categories:

- 28% Native Hawaiian or Part Native Hawaiian,
- 19% Japanese or Okinawan,
- 18% Filipino, and
- 14% Caucasian or White, including Portuguese.

The remaining CWSB staff were of the ethnicities listed below, with each group representing less than 5% of the staff.

- 4% Samoan
- 3% Chinese
- 3% Latino/a or Hispanic
- 2% Black or African American
- 1% Tongan

- Less than 1% each: Korean, Guamanian or Chamorro, Native Alaskan, Native American Indian, Other Asian not listed, Palauan, Other Pacific Islander not listed, and Vietnamese

Four percent of CWS staff (12 employees) indicated that they preferred not to answer this question about their ethnicity.

Please see *Figure 94B: Statewide CWS Intake and Assessment Workers: Primary Ethnicity (Self-Reported) – February 2024*. This figure shows the ethnic breakdown of only CWS intake and assessment workers, which largely mirrors the pattern seen for all CWS staff in *Figure 94*. The main difference in the ethnic breakdown is that a higher percentage of intake and assessment workers are Native Hawaiian or part Native Hawaiian (41% compared to 28% of all CWS staff), and therefore the percentages of all other ethnicities are lower for intake and assessment workers than for all CWS staff.

Past Five Years

Hawaii recognizes that the cultural diversity of its staff enriches the work. Varied insights and perspectives are given full voice in determining policy and practice and have allowed CWSB to grow in exciting and innovative ways. Achievements that are reflective of a workplace community that gives weight to the range of cultural experiences and perspectives of its staff have included: Hawaii's Ohana Conferencing model, Hawaii's relative placement success, aha (community gatherings), and Hawaii's Ohana Time initiative.

Although the exact ethnic makeup of CWSB staff varies from year to year, in the past five years, the top four ethnic categories of staff have remained the same and in this order of prevalence:

- 1) Native Hawaiian or Part Native Hawaiian,
- 2) Japanese or Okinawan,
- 3) Filipino, and
- 4) Caucasian or White, including Portuguese.

One exception: in May 2020, there was a higher percentage of Caucasian staff than Filipino staff, but in every other year, there were more Filipinos.

Planning for the Next Five Years

CWSB's EAP, which describes CWSB's diversity and equity focus, will help to promote staff ethnic diversity.

7. Length of Employment with CWSB

Current

Refer to the Data Booklet, *Figure 95: Statewide CWS Staff: Length of Employment (Self-Reported) – February 2024* to see the current staff longevity with CWSB. CWSB is pleased to report that over 73% of its staff have been working with CWSB four years or more, and one third of the staff have been part of the CWSB team for 16 years or more. Even though Hawaii is proud of its retention rate, it is still continually working to recruit and retain superior employees.

Please see Figure 95B: *Statewide CWS Intake and Assessment Workers: Length of Employment (Self-Reported) – February 2024*. This shows what percentage of CWS intake and assessment workers have been with CWS for what length of time:

- 27% with CWS 6-10 Years
- 20% with CWS 4-5 Years
- 18% with CWS 1 Year or Less
- 11% with CWS 11-15 Years
- 5% each (or 2 workers each)
 - With CWS 2-3 Years
 - With CWS 16-20 Years
 - With CWS 31-35 Years
 - With CWS 36 Years or More

Past Five Years

Over the past five years, the length of employment pattern has remained reasonably stable, with small increases in the percentages of staff who have joined CWSB more recently, and corresponding small decreases in the percentages of staff who have been working at CWSB long term.

See the section above in *VIII.C.4. Age*, which addresses issues related to longevity and a likely increase in retirements.

Planning for the Next Five Years

Hawaii is optimistic that the efforts of WQIT to improve recruitment and retention will be successful. With additional support to line staff, Hawaii anticipates higher staff retention rates.

D. JUVENILE JUSTICE TRANSFERS

Past Five Years

See Hawaii Data Booklet, *Figures 96: Foster Youth in Detention Centers SFYs 2019-2023*, *97: Foster Youth in Detention Centers SFYs –2019-2023*, and *98: Frequency of Length of Stay in Detention Centers SFY 2023*. There has been a rise in the total number of unduplicated youth in detention centers (Detention Home – DH) and correctional facilities (Hawaii Youth Correctional Facility) who have also been in foster care in the past five years. The number was at its lowest in SFY 2021 with 18 youth and at its highest in SFY 2023 with 35 youth. It is useful to note that the total number of unduplicated foster youth in DH and HYCF in SFY 2018 was also 35. CWSB views the recent rise in numbers as part of a normal fluctuation rather than a concerning trend, especially because the youth are not remaining in detention for long periods of time.

In SFY 2023, 84% of foster youth in DH spent two months or less in the detention center. This is out of the total of 19 youth who were in DH.

The overall low number of cross-over youth is believed to be a direct result of better collaboration and services among CWSB, OYS, and DOH CAMHD. OYS and DOH CAMHD continue to support youth at risk of facility placement and in preparing youth to exit the facility through the WRAP program. CWSB has also implemented a policy and procedure to support youth in detention centers and correctional facilities by increasing communications and connections with the youth.

Planning for the Next Five Years

CWSB will continue to collaborate with the agencies listed above to ensure that youth who touch both the juvenile justice system and CWSB are being assessed for safety and provided with services to ensure their wellbeing and connections to their families and community. With CCWIS implementation, CWSB looks forward to improved tracking of juvenile justice cases in the CWSB database, as well as a longer-term future goal of sharing data electronically with the courts on juvenile justice cases.

E. DOMESTIC VIOLENCE

Domestic Violence Shelter and Support Services

DHS received FY 2023 Family Violence Prevention and Services Act (FVPSA) funds in the amount of \$989,725. DHS contracts with seven Domestic Violence (DV) shelters statewide to operate and provide 24-hour domestic violence hotline services that respond to crisis calls, provide information and referral assistance, emergency shelter services, outreach, assistance in developing safety plans, individual and group counseling, transportation, advocacy, community

education, and other supportive services to survivors and their children in the shelters. Shelter services also include transition planning, limited transitional housing, and follow-up services for DV survivors exiting the shelter. Transitional housing services continue to address the challenges many survivors face in securing permanent housing due to the prohibitive cost of housing in Hawaii, the financial limitations of single parent households, and poor rental history that may result from their frequent moves.

Five of the domestic violence shelters located on Oahu, Maui, and Hawaii Island are in urban areas, while Kauai and Molokai shelters are in rural areas. In SFY 2023, 1,209 clients were served in shelters, for a total of 40,206 shelter nights.

Other services for victims provided in the shelters include crisis intervention, victim advocacy, individual or group counseling/support groups, criminal/civil legal advocacy, medical accompaniment, and transportation services.

During SFY 2023, domestic violence shelters provided 163 children with crisis intervention services, 216 children with victim advocacy services, 132 children with counseling and support groups, and other supportive services. The domestic violence shelters provided 603 adults with crisis intervention services, 673 adults with victim advocacy services, 641 adults with counseling and support groups, and 295 adults with criminal/civil legal advocacy. Participants are only counted once per service, but because they may have received more than one service, the total served may include numbers that are unduplicated within a service but may be duplicated across services. See Data Booklet Figure 99: Domestic Violence Services SFY 2023 for details on provided services.

The shelters also provide supportive non-shelter services to clients. In SFY 2023, 271 clients were served by non-shelter services, which are supportive services for domestic violence that don't need shelter.

The shelters provided 173 community education presentations statewide for the public, with 3,742 participants in attendance. Presenters had to modify their way of providing presentations due to the COVID-19 pandemic. Virtual presentations were utilized as an alternative to in-person community education presentations.

The shelter programs also have access to resources for immigrant populations, including legal services contracted by DHS, a Bilingual Access Line on Oahu funded by the Office of the Prosecutor's Victim-Witness Program, and bilingual services made available at low cost through the National Coalition Against Domestic Violence. The HSCADV also translated DV brochures, which are accessible on their website, in multiple languages such as Olelo Hawaii, Chuukese, Ilocano, and Tagalog, to share about resources and information on healthy relationships.

DHS contracts with the Domestic Violence Action Center (DVAC) for Teen DV services. The Teen Alert Program (TAP808) provides supportive services that afford youth victims and perpetrators the opportunity to break the cycle of violence in their lives.

With the mission to promote healthy relationship and put an end to—"tap out"—teen dating violence, TAP808 provides:

- outreach education, workshops, talk-story, youth initiatives, and social media about teen dating violence, healthy relationships, and community intervention strategies; and
- individualized advocacy support for teens and young adults experiencing dating violence.

TAP808 advocacy services support anyone in Hawai'i between the ages of 12 and 21, who is experiencing, at risk for, or has been affected by relationship violence. TAP808 provides inclusive prevention education, outreach, and intervention services related to teen dating violence to all youth, regardless of gender identity, sexual orientation, ability, or other factors. These services are offered in schools and virtually.

Just in the last year (FY 2023), TAP808 visited schools and communities statewide and the program's Outreach Advocates delivered 107 presentations to 1,806 youth.

DHS contracts with the Hawaii State Coalition Against Domestic Violence (HSCADV) to provide training and technical assistance to DV shelter programs. The Coalition partners with DHS and shelter programs to address the needs and challenges found during the course of the needs assessment, listening sessions, and ongoing shelter meeting discussions. DHS continues to work with the Coalition and its members to develop and implement a plan to provide assistance to the shelters, including developing and sustaining an accessible, culturally relevant, and trauma-informed approach to services.

The needs assessments will encompass representation of HSCADV member programs as well as a variety of survivors and community programs that are diverse and representative of historically underserved communities including ethnic and minority populations, as well as people with disabilities. Representatives of underserved populations will be invited to participate in planning meetings, implementation of the needs assessments, and development of the strategic plan.

HSCADV held listening sessions with DV survivors, advocates, and other service providers statewide in FY 2023. HSCADV focused on Filipino and Native Hawaiian survivors, since these two groups have the highest rates of DV and DV-related fatalities in the state. The findings will be utilized to plan HSCADV training and technical assistance, as well as inform improved state response to DV. Themes from the listening sessions identified include advocate retention, ongoing professional development for advocates, the need for violence prevention efforts, DV

services that are responsive to the culture and language of survivors, and barriers for rural survivors to receive services.

In FY 2023, DHS also collaborated with Pouhana O Na Wahine (PONW), which is the Native Hawaiian Resource Center for Domestic Violence with the National Indigenous Women's Resource Center (NIRWC). The Pouhana O Na Wahine is a grassroots organization advocating for Native Hawaiian families who face challenges related to domestic violence and sexual assault, by exercising their inherent sovereign rights as indigenous people of Hawaii. PONW provides technical assistance and training; partners at the community level, statewide and national levels; and develops policies and cultural resources to stop, prevent, and eliminate domestic violence and help victims and their family members increase their safety.

HSCADV has been sharing Pouhana O Na Wahine's work and invites them to HSCADV membership meetings, events and trainings.

DHS collaborated with three other state agencies--DOH, Judiciary and the Department of the Attorney General's Office, Crime Prevention and Justice Assistance Division--and provided a statewide training on DV 101: *Fundamentals of Domestic Violence* webinar series in FY 2023. It was held weekly during Domestic Violence Awareness Month (October 2023). Local experts presented on the Dynamics of Domestic Violence, Interventions with Perpetrators of Domestic Violence, and Domestic Violence and Childhood Development.

The DV 101 trainings in-person was modified due to low attendance. From 2020, the plan was to provide one training on Oahu and another training for the neighbor islands on a rotating basis. However, due to the COVID-19 pandemic, the 2020 DV 101 training was provided via a three-part webinar series, which was attended by over 1,000 unduplicated attendees from across Hawaii as well as from other states including California, Alaska, and Florida. In 2021, an average of 224 attendees from across the state participated in the series. In 2022 attendance increased to an average of 255 participants. Approximately 400 people registered for the webinar series and an average of 80% were overall satisfied with the virtual training series this past fiscal year.

DHS continues to be part of the Victims of Crime Act (VOCA) working group led by the Department of the Attorney General, Crime Prevention and Justice Assistance Division. The Hawaii State Victim Assistance Academy (HSVAA) training was completed in 2022. The last session was videotaped and is available on the Department of the Attorney General

Crime Prevention and Justice Assistance Division website for VOCA recipients and HSVAA training committee members to view. No meetings were held this past fiscal year since the training academy was completed.

In 2023, DHS again was awarded and administers funds under the Family Violence Prevention and Services Act Grant to serve domestic violence victims and their families statewide. DHS

collaborates with the Hawaii State Coalition Against Domestic Violence, which has developed and implemented a needs assessment, listening sessions and facilitated statewide shelter committee meetings.

As a part of the continuous quality improvement process, CWSB has partnered with the University of Hawaii Maui College Hawaii Child Welfare CQI Project to review the domestic violence shelters and services contracts to ensure quality service delivery, contract adherence, and positive outcomes for adults and children. This contract review process has strengthened these federally funded services by adjusting resources to broaden the geographic availability and breadth of shelter services. Maui CQI is in the process of conducting reviews of all the shelter programs statewide in FY 2024. Discussions and feedback with the shelters will be conducted after the results of the review are completed.

DHS received FVPSA American Rescue Plan (ARP) funds in the amount of \$1,880,042.00. This supplemental fund provides one-time funding through September 30, 2025 for the purpose of supporting the FVPSA program that prevent, prepare for, and respond to COVID-19 with an intentional focus on increasing access to COVID-19 testing, vaccines, and mobile health units to mitigate the spread of this virus, and increase supports for domestic violence survivors. Supplemental funding will be expended to 1) prevent, 2) prepare, and 3) respond to the (COVID-19) public health emergency.

DHS has distributed the FVPSA ARP Act funds to its current contacted domestic violence providers. DV Shelters, DVSF, and TEEN DV continue to be responsive to this population's needs. Response plans have been developed that include activities such as counseling, mobile/legal advocacy, staff to provide services, financial assistance paid directly to a third party for housing, assistance with childcare, financial assistance for transportation, supplies, and equipment to assist in carrying out remote services, and enhancing their capacity to provide culturally and linguistically appropriate services.

DHS also received FVPSA Sex Assault ARP funds in the amount of \$1,140,011.00. This supplemental fund provides one-time funding through September 30, 2025, for the purpose of supporting the FVPSA program to prevent, prepare for, and respond to COVID-19 with an intentional focus on supporting survivors of sexual assault in 1) assisting with the transition to virtual/remote services for rape crisis centers, sexual assault programs, tribal programs, and culturally specific programs that provide crisis services, support services, and assistance to survivors of sexual assault, and 2) support the increased emergency needs of sexual assault survivors as a result of the COVID-19 public health emergency. Supplemental funding will be expended to 1) prevent, 2) prepare, and 3) respond to the (COVID-19) public health emergency.

DHS has distributed a portion of the FVPSA Sex Assault ARP Act funds to its current contacted Intrafamilial Sex Abuse Treatment and Human Trafficking providers for victims of sex assault

across the life span to conduct human services activities (services/supports) related to the COVID-19 pandemic. The other portion of the FVPSA Sex Assault ARP funds was distributed to DHS' new contract provider, Rape Crisis & Sexual Assault Program Services (RCSAPS), which provides direct intervention and related assistance and support services to victims/survivors of sexual assault inclusive of, but not limited to rape crisis centers, sexual assault programs, culturally specific programs, LGBTQ+ organizations, and such programs within underserved communities to survivors across a lifespan.

DHS will continue its ongoing efforts to combat domestic violence among its families. DHS will also continue its collaboration with the Hawaii State Coalition Against Domestic Violence on ongoing needs assessments and listening sessions for the FVPSA-funded domestic violence shelter programs statewide. The needs assessment includes a focus on the areas of training and technical assistance, service gaps and engagement of underserved populations, multidisciplinary collaborations, funding, and trauma-informed care policies and practices. DHS, HSCADV and Pouhana O Na Wahine, will continue to have discussions on current policies that are being worked on regarding DV and to advocate for collaborative efforts in policy and systems change to address the Native Hawaiian families affected by domestic violence.

F. SUBSTANCE EXPOSED INFANTS AND CHILDREN

Perinatal Substance Use Workgroup

Over the past few years, CWSB has been collaborating with the Early Childhood Action Strategy to engage in the Hawaii Maternal and Infant Health Collaborative (HMIHC) Perinatal Substance Use Workgroup. The Early Childhood Action Strategy (ECAS) brings together diverse stakeholders, including government and non-government organizations, to improve the system of care for Hawaii's youngest keiki, with the goals that more:

1. babies are born healthy,
2. children develop on-track,
3. children enter kindergarten school-ready, and
4. children are proficient learners by third grade.

The perinatal substance use workgroup meets monthly and includes Department of Health and providers and agencies from across the state. This workgroup meets to improve:

1. systems of care and support for perinatal people with a substance use disorder and their infants,
2. perinatal quality of care and community resources and supports, and
3. communication on partners' policy efforts that focus on disparities related to maternal and infant health.

CWSB's involvement in this workgroup allows for improved understanding of the risk and safety issues of substance exposed infants and children. It also identifies any gaps in resources and services that are available to these children and families. This helps to enhance the development of policies and procedures, as well as services to benefit this vulnerable population.

Makua Allies

Makua Allies Program (MAP) through EPIC Ohana is committed to the development and implementation of a robust and effective Peer Support Program for Perinatal Substance Use Disorder (PSUD) mothers. The Makua Allies Program was piloted in 2021 with a focus on serving individuals experiencing perinatal substance use disorder by employing parent peer supports who have lived experience. MAP is currently on Oahu and East Hawaii and serves women who have experienced PSUD and women who are currently battling substance use who recently gave birth to a child. The Makua Allies Program focuses on the following enrollment priority:

- Pregnant women with substance use disorder.
- Mothers who gave birth within the past 90 days and had their child removed and placed in temporary foster custody.
- Mothers who gave birth in the past 90 days and maintained Family Supervision case status.
- Mothers who are at risk of CWSB involvement.

Since its inception, MAP has served 30 cases, 26 of which were on Oahu and four in East Hawaii. Of these 30 cases, 21 babies were born in the program and nine were children whose mothers obtained MAP services after giving birth.

Makua Allies Program has assisted birth parents who are in the earliest stages of the CWSB involvement or are at high risk for entering the CWSB system upon delivery. CWSB has been able to partner with MAP in order to address the safety factors that are associated with PSUD. Makua Allies Program parent partners assist birth parents in navigating through the CWSB system by supporting them with three objectives:

- Create a relationship with birth parent(s) that supports growth and recovery with cultural humility
- Avoid CWSB involvement, or end CWSB involvement, with parents identifying desired permanency results, whether that be maintenance, reunification, guardianship, or adoption.
- Connect parents with community and cultural resources that help to sustain recovery and parenting efforts, including with any RCGs.

Makua Allies collaborates with community partners and CWSB to develop peer support across systems. MAP parent partners support mothers in creating their own safety plans; in turn this can assist in a CWSB assessment by allowing the birth mothers to have already taken the necessary steps to mitigate safety factors and manage risk factors.

Hawaii Zero to Three (HZTT) Court

HZTT is a specialty court that supports families with children ages 0-3 who are in foster custody. HZTT keeps the child(ren) at the center of the case and aims to make sure that the child is assessed and their needs are met in a timely manner. HZTT recognizes the importance of early intervention for this vulnerable population. HZTT children are often referred to home visiting services, early intervention, Family Strengthening Center for developmental assessments, Parent-Child Interactive Therapy, and Child-Parent Psychotherapy. While there is no single provider that is able to formally diagnose Fetal Alcohol Spectrum Disorder (FASD), HZTT does refer based on the history of parents and individualizes their service plan in order to best fit the needs of the children. CWSB supports and is willing to collaborate on efforts to continue to attempt to secure further services that support the Hawaii ZTT families, specifically with finding a provider who can provide a formal diagnosis of FASD and or developmental concerns that arise from substance exposure.

Plans of Safe Care

Plans for Safe Care for children who were exposed to substances in utero are incorporated into the CWSB Safe Family Home Reports and Family Service Plans. Through this process and inclusion in the CWSB reports, the children's needs and services are identified. Consultation and coordination with assessment and service providers, including hospital and home visiting services, and the child's medical health care providers assist with planning and service provision. Multi-Disciplinary Teams provide an opportunity to discuss needs related to substance exposure for the child and their caregivers. Referrals may be made to community providers for services for substance-exposed infants and affected family members and caregivers. Service provision is monitored through a variety of strategies including but not limited to monthly caseworker visits, communication with providers and provider reports, and team meetings. Services are revised as needed.

Hawaii has been working with its community partners to share information and expand services to children that have been exposed to substances and their caregivers and families. Through various venues, including the All-State Team and the Perinatal Substance Workgroup, the needs of children and families, available resources and gaps in services to address the health and substance use disorder treatment needs for any infant who has been identified as affected by the mother's substance use, and the treatment needs of the affected parent or caregiver are explored.

CWSB will continue to focus on this issue over the next five years to ensure proper identification of these children and provision of services to meet their needs.

Collaboration with community and service providers is an ongoing strategy to better meet the needs of children and their families in their communities. CWSB is also exploring a collaboration with DOH Public Health Nursing (PHN) Services to better support families. The expertise of PHN services is another way the development and health of children and families can be enhanced. CWSB meets monthly with MQD and will continue to meet and collaborate to ensure access to Early and Periodic Screening, Diagnostic and Testing (EPSDT) for those children and families eligible for Medicaid. These services are key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, developmental, and specialty services, including services for young children and those exposed to substances. CWSB will continue to identify opportunities for collaboration and training with its partners.

Planning for the Next Five Years

CWSB will continue to collaborate and participate in the perinatal substance use workgroup to build and strengthen its working relationships with agencies and providers to better ensure the overall safety and well-being of substance exposed infants and children.

Collaboration between CWSB and MAP will continue through CWSB New Hire Training and their engagement in multiple Family First Hawaii workgroups such as the Family Supported Arrangements Continuum Workgroup. The work done in these groups allows for collaboration in supporting families to remain together even after concerns of PSUD. CWSB is supportive of expanding MAP statewide and is exploring ways to enhance families and extend positive outcomes to more families.

CWSB is also exploring how it can collaborate with DOH Public Health Nursing Services to better support families. The expertise of PHN services is another way the development and health of children and families can be enhanced. CWSB continues to meet and collaborate with MQD to access comprehensive evaluations and services for all youth who enter foster care within the first 45 days, including young children and those exposed to substances. Early and Periodic Screening, Diagnostic and Testing (EPSDT) can be accessed through the child's Medicaid plan. These services are key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, developmental, and specialty services.

G. HUMAN TRAFFICKING

See Data Booklet, Figure 100 through Figure 114, for information on human trafficking reports and victims for the period March 1, 2023 to March 2, 2024. Highlights of this data include:

1. The majority of the human trafficking cases are located on Oahu.
2. The average age for these human trafficking victims is between 14 to 17.
3. 87% of the victims are female.
4. The majority of the human trafficking victims are of Hawaiian ethnicity.

Based on information from reports received, the statistically average victim of a confirmed report of commercial sex trafficking is a 16-year-old Hawaiian female with risk factors of drug involvement and runaway, who was referred by a service provider on Oahu.

The DHS contracted provider continued their services during the COVID-19 pandemic, made accommodations for services based on client availability, and provided services in person and remotely when access to services was limited.

The CWSB Program Development office continues to focus on updating information on program areas that include trafficking, domestic violence, and outreach to the community, and offering support and education regarding its response to human trafficking. CWSB collaborates with local communities to improve human trafficking strategies and to work with community partners to provide information and training to enhance awareness of the signs of human trafficking, how to report human trafficking, and how to appropriately access available community resources for those in need.

1. CWSB Staff Human Trafficking Training

Training on human trafficking is ongoing. Trainings have been conducted virtually and in person. CWSB Staff Development Office provides training on mandated reporting of human trafficking of minors and CWSB's human trafficking protocol during its new hire CORE training. Training for new hire staff includes the use of the Rapid Screening Tool (RST), the Commercial Sexual Exploitation of Children (CSEC) identification survey to use when a minor is identified or suspected of being a victim of human trafficking, and how to report human trafficking to the CWSB hotline. CWSB staff also participated in ongoing human trafficking training provided by other agencies throughout the year.

The current contracted service provider for human trafficking also provided training for CWSB New Hire Training, Catholic Charities Resource Caregiver program staff, Maui DOE Superintendent office staff, Parents And Children Together (PACT), Hale Kipa, DHS Resource Caregivers, Hilo Medical Center-Medical Professionals, EPIC Ohana's Ohana Conference staff, and Mililani Mauka Complex Elementary School Counselors. The contracted provider continues to provide ongoing training for the community at various venues.

Over the past several years, CWSB staff also participated in human trafficking training provided by other agencies.

CWSB Staff Development office continues to provide virtual and in-person training for the community on human trafficking for mandated reporters on reporting, the human trafficking hotline, and the human trafficking checklist. The human trafficking guide and checklist are available on the DHS website. Some community partners that received the training are the Honolulu Police Department (HPD) Training Academy for new recruits, HPD Criminal Investigations Division, Department of Public Safety-Law Enforcement Division new recruits, Hale Kipa staff, DOE Central District, Kailua Baptist Preschool, and Institute for Native Pacific Education and Culture.

2. Collaboration

CWSB continues to collaborate with the Commercial Sexual Exploitation of Children (CSEC) Steering Committee on Oahu to provide a coordinated system response in identifying and responding to child victims of sex trafficking. The Memorandum of Agreement with the Family Court of the First Circuit was renewed in the last fiscal year. This effort provides CWSB with additional opportunities to collaborate with other agencies to ensure that CWSB protocol fits an overall framework and to ensure a coordinated response to providing services for human trafficking victims statewide.

CWSB also collaborates with the City & County of Honolulu's Human Trafficking Task Force (HCHTTF) led by the Honolulu Department of the Prosecuting Attorney. This task force meets monthly. HCHTTF members participated in a Celebrate Safe Communities event last fiscal year. This event was planned for all participants' ages and provided informational and interactive booths and displays provided by numerous city, state, federal, military, and private organizations. Celebrate Safe Communities is intended to spotlight communities' crime prevention efforts, enhance public awareness of vital crime prevention and safety messages, and engage families and seniors in prevention activities that help keep neighborhoods safe from crime and prepared for any emergency. CWSB also participated in sign waving to raise awareness for sex-trafficking in Hawaii on Human Trafficking Awareness Day.

CWSB also supports efforts to increase trafficking education, training, and outreach efforts. CWSB and community partners provide statewide training on mandated reporting of human trafficking and CWSB Human Trafficking and Missing Children Protocols. Similarly, CWSB collaborates with the Department of the Attorney General's Missing Child Center of Hawaii (MCCH) regarding foster youth missing from care. CWSB ensures that reporting of missing youth in care to law enforcement and reporting to NCMEC, as required by the Preventing Sex Trafficking and Strengthening Families Act, Public Law 113-1-83, is properly reported and tracked. MCCH and CWSB collaborate with county police departments across the State to locate and recover missing foster youth at high risk of being trafficked.

In October 2020, the Department of the Attorney General and the DHS collaborated on a joint task force. The agencies worked with the Federal Bureau of Investigations (FBI), U.S. Marshals Service, U.S. Secret Service, Homeland Security Investigations, Honolulu Police Department (HPD), Susannah Wesley Community Center, Hale Kipa, National Center for Missing and Exploited Children, and National Child Protection Task Force on the recovery of endangered and runaway foster youth. The recovery operation resulted in the recovery of five children between the ages of 16-17.

In October 2021, CWSB also collaborated on another joint task force with HPD. The agency worked with HPD Narcotics/Vice/Morals Detail, HPD Juvenile Services Section, HPD District 3 CRU, Homeland Security Investigations, U.S. Marshals Service, Susannah Wesley Community Center, MCCH, and NCMEC on the recovery of endangered and runaway foster youth. The HPD Juvenile Rescue 8 Operation resulted in the recovery of 11 children (seven of whom were involved with CWSB) between the ages of 11-17.

CWSB has also collaborated for the last several years with the FBI Honolulu office, in partnership with HPD and Hawaii County Police on Hawaii Island, on Operation Cross Country. Operation Cross Country is a coordinated operation among the FBI, other federal agencies, state and local police, and social services agencies across the country to find and assist victims of human trafficking, particularly child victims. In 2022, seven child sex trafficking victims were found in Hawaii.

In 2023, FBI Honolulu office, along with state and local partners, conducted Operation Cross Country on Oahu, Maui, and Hilo on Hawaii Island. This resulted in the recovery of six missing children on Oahu and five missing children in Hilo. All but two recovered children were found in homeless encampments or living on the street. The various recoveries led to the identification of two possible child sexual exploitation cases, which were referred to the Honolulu Department of the Prosecuting Attorney.

3. Trends

Based on information from community and service providers, several root causes of human trafficking of minor victims include:

1. Substance abuse remains the highest risk indicator among minor victims.
2. The number of individuals involved in gang-controlled trafficking remains prominent.
3. The continued use of online (social media) platforms for human trafficking or dating arrangement apps.
4. Human trafficking in homeless encampments is still prevalent.

Emerging trends include:

1. Increase in homeless runaway youths using drugs for survival.
2. Running away or being kicked out of their homes increases the risk of being trafficked for minor victims.
3. Increase in the use of social media for online exploitation.
4. Increase in awareness of human trafficking among males.

Planning for the Next Five Years

The commercial sexual exploitation of minors in Hawaii continues to be a focus area to address. Collecting accurate statistics on the number of victims has been a significant challenge. The most current data from CWSB indicates an increase in reports in Hawaii. CWSB will continue to collect data regarding the commercial sexual exploitation of minors and to improve the accuracy of such data. CWSB will also continue to enhance existing partnerships and collaborations with federal, state, and nongovernmental organizations and advocates to increase ongoing efforts to combat human trafficking.

H. MARYLEE ALLEN PROGRAM

DHS has continued to focus on providing community-based family support, family preservation, family reunification, and adoption promotion and support services.

Community-based family support and family preservation services

CWSB continues to collaborate with the Hawaii Children's Trust Fund (HCTF) to support child abuse and neglect prevention efforts for all children in Hawaii. A CWSB representative is part of the HCTF Advisory Committee, which meets monthly to coordinate activities and trainings for the HCTF Coalition and the broader community.

HCTF's mission is "to ensure that Hawaii's children develop into healthy, productive, and caring individuals by promoting the advancement of community family strengthening programs to prevent child abuse and neglect." This mission closely aligns with the DHS Vision of "The people of Hawaii are thriving" and shared values.

In addition to working with the HCTF, Hawaii developed various family-centered, community-driven Neighborhood Places (NP), which provide a safe and healthy environment for Hawaii's children and families to learn about local resources that public and private agencies deliver. NPs locations are staffed by a contracted provider who assists families in need to ensure that children may be cared for, as much as possible, in their own home or in the home of relatives or other kin, and to promote the formation and maintenance of stable families through family strengthening initiatives and service referrals.

Neighborhood Places locations are designed to support:

- a. Families with children at risk of child abuse/neglect, who request services to support and strengthen their families and decrease the risk of child abuse/neglect,
- b. Families with children identified by Neighborhood Places to be at risk of child abuse/neglect, who are unknown to CWSB but need services to support and strengthen their families,
- c. Families assessed by CWSB as unconfirmed for child abuse/neglect but need supportive services to prevent child abuse/neglect,
- d. Families referred and not accepted by CWSB for investigation but assessed to need supportive services, and
- e. Families confirmed for child abuse/neglect but need no more than six months of supportive services after the CWSB case is closed.

Programs Supporting Reunification and Permanency

Resources, services, and supports are available to those families who have achieved reunification or permanency, which includes adoption and legal guardianship, and also to those families who have achieved permanency through an inter-country adoption. *Refer to Section IV.4. Adoption & Guardianship promotion (PSS) for more details.*

I. STEPHANIE TUBBS JONES

Stephanie Tubbs Jones Funded Supports

Hawaii utilizes Stephanie Tubbs Jones funding to support/improve safety outcomes in three main areas.

1. Domestic Violence (DV) Shelter & Transitional Housing Services
 - a. Services to adults with or without children who are survivors of or who have been exposed to domestic violence.
 - b. This support is provided through a combination FVPSA and Stephanie Tubbs funds.

Please refer to **Section VIII.E. Domestic Violence** for service details and plans for the next five years.

2. Human Trafficking (HT) Services
 - a. This service provides crisis response and comprehensive case management to victims of all forms of human trafficking up to age 21 using a trauma-informed

approach to promote victim safety and well-being, psychoeducation, and guidance is also provided to parents/guardians/caregivers to strengthen their relationship with the victims and to increase their ability to provide appropriate supervision and support.

Please refer to **Section VIII.G.- Human Trafficking** for service details and plans for the next five years.

3. Ohana Conferencing

- a. Ohana Conferencing (OC)- Service Activities: Coordinating and facilitating family conferences for families with children in foster care; coordinating and facilitating youth circle meetings for youth in foster care and their supports; searching for family members and making family connections for youth in foster care; and coordinating and facilitating meetings among specially trained foster parents, biological parents, DHS social workers, and youth as part of Project First Care.

Please refer to **Section IV.A.1.e. Ohana Conferences**, for service details and plans for the next five years.

J. CONTINUOUS GROWTH

CWSB Primary Prevention Efforts

Summary of the Past Five Years

Primary prevention aims to prevent child maltreatment by targeting the general population. In Hawaii, these efforts were crucial during the COVID-19 pandemic and involved utilizing community resources and neighbors to ensure child safety. CWSB adapted by learning about evolving local resources and ensuring that families had access to essentials, such as food and shelter.

Most primary prevention activities in Hawaii are carried out by nonprofit organizations and community initiatives funded through government contracts and private grants. Key statewide coordinators include the Hawaii Children’s Action Network and the Hawaii Children’s Trust Fund HCTF). These efforts are integrated into a statewide Child Abuse and Neglect (CAN) Prevention Plan that connects various resources and identifies gaps and proposes solutions.

Prevention strategies have included anti-bullying education, child injury prevention, family strengthening services, and public awareness campaigns. Home Visiting Services, though typically considered secondary prevention in Hawaii as it targets families in at risk communities and provides support to families with identified risk factors.

While CWSB focuses on secondary and tertiary prevention services for child welfare-involved families, DHS supports an enhanced prevention-based service continuum through community collaboration and training. Funding for these activities comes from a mix of federal, state, and private sources.

Specific initiatives include the Hooikaika Partnership on Maui, which emphasizes primary prevention through community education and support, and the Islands of Hope-Maui, which focuses on preventing families with risk factors from entering the child welfare system. Other notable programs include the Keiki to Career initiative on Kauai and Hawaii Early Childhood Action Strategy, which aims to improve care systems for young children statewide. The Department of Health - Child Death Review (CDR) in Hawaii is a multidisciplinary and multiagency review of child deaths. The purpose of these reviews is to understand risk factors, prevent future child and maternal deaths by helping communities understand why children die, and to equip families and stakeholders with effective preventable resources and supports to reduce future fatalities. CWSB is a member of the CDR and collaborates on each local CDR review to identify strategies and resources to prevent child fatalities in areas including, but not limited to safe sleep, suicide, and drowning. See Section VIII.B. Child Fatalities for further information on DHS Child Fatalities prevention efforts. Overall, Hawaii's approach to primary prevention involves collaboration with multiple organizations and funding sources to support a wide range of activities aimed at preventing child abuse and neglect and strengthening family systems.

a. Hawaii Childrens Trust Fund

i. Annual Update

The Hawaii Children's Trust Fund (HCTF) was established by State legislation in 1993 and codified in Chapter 350B, HRS, as a public-private partnership between State departments and private organizations. HCTF's primary purpose is to prevent child abuse and neglect throughout the State; its mission is "to ensure that Hawaii's children develop into healthy, productive, and caring individuals by promoting the advancement of community family strengthening programs to prevent child abuse and neglect."

CWSB continues to collaborate with HCTF to support child abuse and neglect prevention efforts for all children in Hawaii. A CWSB representative is a member of the HCTF Advisory Committee, which meets monthly to coordinate activities and trainings for the HCTF Coalition and the broader community. The HCTF Advisory Committee includes representatives from the public and private sectors. Current members include representatives from the Department of Health (the lead State agency for HCTF), the Hawaii Community Foundation (lead private agency), Department of Human Services (DHS), Department of Education

(DOE), Office of Youth Services (OYS), the Judiciary, and various child and family serving nonprofit agencies. The Advisory Committee is responsible for planning, policy development, and determining criteria and guidelines for HCTF grants to address prioritized areas of child abuse and neglect prevention as identified by the HCTF Coalition.

DOH has awarded several contracts to address various community needs, from mental health support and prenatal care to violence prevention and community engagement. Some initiatives already underway; these include:

- Bridges Training for Women with Mental Health issues at Correctional Facilities: Provides specialized training for women in the Women's Community Correctional Center (WCCC) who suffer from severe and persistent mental health illness, substance use, and a history of trauma.
- Family Resource Centers (FRC): Funding for coordinators to support, establish, and operate FRCs throughout Hawaii, enhancing access to vital support for families.
- Prenatal Care Education: Funding for a prenatal care education coordinator to partner with Healthy Mothers Healthy Babies Coalition of Hawaii. This partnership aims to strengthen families by providing parenting education and support services to low-income expectant parents and parents of newborns.
- Violence Prevention Training Event Coordinator: To plan, coordinate, and deliver training programs focused on enhancing family connections, parent education, and parent support. These programs aim to promote the wellbeing of women, children, and families through proactive prevention efforts.
- Seeking Safety Program at Women's Community Correctional Center (WCCC): To provide Seeking Safety, an evidence-based substance use treatment program for women diagnosed with severe and persistent mental illness, at WCCC.

HCTF is supportive of these programs and is actively exploring ways to collaborate with various agencies to enhance child abuse and neglect prevention efforts. Such initiatives include:

- Partnership with DOE: Integrating child abuse and neglect prevention into mandated reporter training for educators, and providing support for

DOE's sexual violence program, which includes guidance for parents on discussing sexual violence with their children.

- Collaboration with DOH Sexual Violence Prevention: Partnering with DOH's Sexual Violence Prevention program to support and enhance DOE's efforts to address sexual violence.
- Expansion of Family Resource Centers (FRCs): Supporting the establishment of more FRCs in schools. Blueprint for Change has been awarded federal funding to expand FRCs to ten new schools, and HCTF is exploring additional ways to support and expand this initiative.

ii. **Planning For the Next Five Years**

CWSB remains committed to building a strong partnership with HCTF to enhance programs dedicated to preventing child abuse and neglect, with a focus on nurturing the overall wellbeing of children, families, and communities. Potential avenues for collaboration with HCTF include:

- **Integration with the CWSB Equity Action Plan:** Exploring opportunities to align efforts with the CWSB Equity Action Plan, such as offering concrete supports for families in need and revamping the CWSB mandated reporter training curriculum. Additionally, coordinating implementation of these trainings in conjunction with partner agencies could significantly amplify outreach efforts for both CWSB and HCTF.
- **Transforming the Reporting Culture:** This is another strategy within the CWSB Equity Action Plan. Through partnering with HCTF, community discussions can begin to shift the language and mindset surrounding mandated “reporters” to mandated “supporters.” This shift in language can reframe reporting as a collective responsibility to provide support to vulnerable children and families, and emphasizes proactive intervention and community engagement to prevent child abuse and neglect and related CWSB involvement.

NEIGHBORHOOD PLACE SERVICES

DHS continues to work with contracted provider, Neighborhood Place Services, to provide a safe and healthy environment for Hawaii’s children and their families through a group of public and private agencies that deliver coordinated services to the target population.

Neighborhood Place Services are provided statewide. Neighborhood Place Services assist families in need so that children may be cared for, as much as possible, in their own home or in

the homes of relatives or other kin, and to promote the formation and maintenance of stable families through family strengthening initiatives. Neighborhood Place Services also helps families to access resources and support they need to thrive and raise their children in a safe, stable, and nurturing home.

The population who can access these services include families with children at risk of child abuse/neglect who request services to support and strengthen their families and decrease the risk of child abuse/neglect; families with children identified by Neighborhood Places to be at risk of child abuse/neglect and who are not known to CWBS but need services to support and strengthen their families; families assessed by CWBS to have unconfirmed findings of child abuse/neglect but who would benefit from supportive services to prevent child abuse/neglect; families referred to CWSB who are not accepted for CWSB investigation but are assessed to need supportive services; and families assessed by CWSB as confirmed for child abuse/neglect but who will need no more than six months of supportive services after the CWSB case is closed.

In the next five years, CWSB will continue to contract with Neighborhood Place Services to provide coordinated services that fit the needs of families who are at risk of child abuse and neglect and who need services to support and strengthen their families. CWSB will also work with other state and public agencies on the Family Resource Centers initiative across the state of Hawaii. Family Resource Centers will provide a safe, accessible place for families to receive supportive services and referrals.

SECTION IX. YOUNG ADULTS AND CHAFEE

Federal Chafee funds support services for current and eligible young people formerly in care through age 26. Hawaii state funds supplement contracts and programs that are required or needed to support Hawaii's young people. The contracts, programs and support services incorporate principles of Positive Youth Development (PYD).

Positive Youth Development (PYD) is an approach that aims to help young people achieve their full potential by providing them with opportunities, relationships, and support. Some of the principles of PYD include:

- Promoting bonding and supportive relationships among youth and adults
- Fostering resilience, self-efficacy, self-determination, and positive identity
- Promoting social, emotional, cognitive, behavioral, and moral competence
- Encouraging service and civic engagement
- Providing a safe, physical, and organizational environment

In January 2017, efforts began to provide a comprehensive integrated independent living (IL) system for current and former youth in foster care. CWSB awarded contracts that combined Independent/Interdependent Living (IL) Services Programs, Higher Education (HE), Education and Training Voucher (ETV) program, Young Adult Voluntary Foster Care Program aka Imua Kakou (IK), and Extended Assistance Programs. These integrated services are collectively referred to as an acronym, IHI. In Hawaiian, "ihi" means sacred or majestic. This collaboration of CWSB and community partners has helped to ensure that young adults who are or were in foster care develop long-term connections to family, community, and cultural supports, and that they receive education on local resources.

CWSB is committed to encouraging meaningful and active participation and leadership by young people. Young people have been critical in the development and maintenance of CWSB services and programs for current youth and young adults formerly in care, as well as with pertinent legislation, policies, and procedures. Young people have been key in advocating for important issues that impact them, such as:

1. Family finding and relative placement;
2. Enactment of §346-395, HRS, (effective July 2014) extending foster care to age 21, a program better known as Imua Kakou;
3. Normalcy and prudent parenting (Act 133, SLH 2016);
4. Enactment of §587A-3.1, HRS, (Act 105, SLH 2018), Rights of children in foster care;
5. Medical coverage to 26;
6. Self-advocacy;

7. Grievance process, named the Pono Process, for ensuring rights of children in foster care;
8. Case planning;
9. Consolidated Appropriations Act (CAA) pandemic funding; and
10. Developing, implementing, and continuously monitoring the quality of improvement processes of relevant programs and services.

Young people are active in statewide training for CWSB, Judiciary, service providers, community partners and stakeholders, and other young people. They have a well-respected advisory capacity, and their Advisory Council serves as a model for strengthening the voices of birth parents.

The IHI collaboration addresses past CFSP goals that focus on collaboration, workforce, prevention, and continuous quality improvement (CQI). The goals of Chafee include supporting youth and young people to successfully transition to adulthood are aligned with the state vision, *“Within their communities, children and families are safe, connected, nurtured, supported, and thriving.”* Chafee services include support to access a comprehensive array of services. Services provide support for the youth’s emotional, psychological, spiritual, physical well-being, understanding foster care, self-advocacy, cultural identification and diversity issues, communication, relationships, social capital, permanent and long-term connections, and goal setting. Trainings to improve support for youth as they transition to adulthood are collaborative with CWS, contracted providers, and community members including but not limited to IHI, EPIC, UH Law School, Court Improvement, and Catholic Charities Hawaii for support for Resource Caregivers.

Collaborative efforts will continue to focus on improving access to services and ensuring service delivery is culturally sensitive and utilizes a trauma-informed healing approach. With this integrated approach on independent living supports, CWSB is confident that positive outcomes will continue to be achieved by young people.

A. IHI (INDEPENDENT LIVING, HIGHER EDUCATION, ETC, IMUA KAKOU) CONTRACTS

1. Independent Living (IL) Services for Youth in Foster Care Ages 12-18

IL services must be customized by age and to meet an individual youth’s needs. Depending on the needs of the youth, planned services may involve more group activities and trainings or support groups rather than individual case planning and case management.

All youth in care aged 16 years and older must have an individualized Independent/Interdependent living transition plan. The transition plan should start

early and be organized into short-term, age-appropriate, and manageable goals that align with a youth's individual needs, hopes, and strengths.

All youth in care who are at least 16 years old must be encouraged and supported in developing a transition plan that will address their needs for housing, employment, education, mentors, continuing support services and health insurance. This plan must be developed during the 90-day period prior to the youth exiting foster care and developed by the youth with the assistance and support of the CWSB social worker and/or a Youth Circle before they exit care.

Services for youth between the ages of 12-18 must be geared to provide support for the youth's emotional, psychological, spiritual, and physical well-being; and enhancing the youth's knowledge about foster care, self-advocacy, cultural identification, diversity, communication, relationships, social capital, permanent and long-term connections, and goal setting. In SFY 2023, 95 youth in foster care in this age group in Hawaii participated in independent living services. *See Data Booklet, Figure 115: Youth & Young Adults Receiving Independent Living Services in SFY 2023 for details.*

2. Imua Kakou (IK)/Extended Foster Care for Youth Adults

The extension provided by Public Law (P.L.) 116-260, Division X of the *Consolidated Appropriations Act (CAA) 2021*, provided support for the distribution of supplemental resources and services to youth and young adults in and transitioning out of foster care who may have been impacted by the COVID-19 pandemic. It allowed young adults who turned 21 years of age from January 27, 2020, through September 30, 2021, to remain in or re-enter care. IHI providers conducted outreach to eligible young adults to restart services. This extension provided needed support to these young people. The collaboration of CWSB, the Judiciary, providers, and community partners provided a tremendous amount of "aloha."

IK/EFC resumed its ongoing structure, requirements, and support for young people post-CAA. The pandemic brought creative thinking and alternatives to broaden support for youth. Technology brought virtual alternatives to support in-person contact and to increase collaboration among partners, including interisland and national partners.

Imua Kakou services include:

1. Monthly financial support for the young people and their children living in their custody, at the current foster board rate;
2. Ongoing case planning and case management/support to attain case plan goals and objectives;
3. Monthly visits; and
4. Transition planning.

Imua Kakou case management address critical components that prepare young people for interdependent living, including:

1. Building strong social capital with family, friends, and life-long adult and cultural connections;
2. Health, including medical, dental, and mental health, and the well-being of the young adult's children;
3. Independent living skills, including sexual health, parenting, building healthy relationships, and financial education;
4. Parenting skills, if relevant;
5. Housing;
6. Education (completing high school or a GED; post-secondary education)
7. Employment; and
8. Permanency goals (Interdependent living, possible adult adoption, rebuilding positive family relationships).

In SFY 2023, 204 young adults in Hawaii participated in the IK program. *See Data Booklet, Figure 115: Youth & Young Adults Receiving Independent Living Services in SFY 2023 for details.*

See IX.D. Imua Kakou & Extended Assistance Programs for more information on the past five years and future plans.

3. Higher Education Stipend and Education and Training Vouchers

The DHS Higher Education Stipend program is governed by HRS §346-17.4, Higher Education Stipends for Students. The statewide program is entirely Hawaii state funded. Benefits under the program consist of a monthly stipend equivalent to the prevailing foster board rate for older youth in care and support services, including monthly case monitoring. Higher education stipends are provided to eligible former foster youth for a maximum of 60 benefit months, up to their 27th birthday. Initial eligibility requirements include:

1. Age: at least age 18 years, but less than age 27 years.
2. Placement: formerly under DHS placement responsibility pursuant to HRS Chapter 587A.
3. Discharge from foster care: by emancipation at age 18 or older; adoption at any age; or placement into legal guardianship facilitated by DHS at any age.
4. Institution of higher education: attending or accepted to attend an accredited institution of higher education in an academic or vocational program.

Priority for services is given to those who emancipated without legal permanency/families. Adoptive and guardianship families are to be the primary support for their young people; however, IHI providers can provide consultation and information, referrals, and resources.

Young people formerly in care may not concurrently participate in the Higher Education Stipend Program and Imua Kakou or Extended Permanency/Adoption Assistance Programs.

148 young adults who received Higher Education benefits in SFY 2023 also received IL supportive services. *See Data Booklet, Figure 115: Youth & Young Adults Receiving Independent Living Services in SFY 2023 for details.*

See IX.C. Higher Education & ETV for more information on the past five years and future plans.

4. Youth Who Emancipated from Foster Care (ages 18-27 and not in IK or HE)

Former foster youth who emancipated from foster care at age 18 or older may receive IL Support Services up to their 27th birthday. Priority is given to former youth in this category who are not currently receiving Imua Kakou or Higher Education Program services. Service providers support young people formerly in care by providing information and referrals, education, and outreach, including crisis intervention and independent living case management as needed, similar to, but not as comprehensive as that provided for Imua Kakou participants. Service providers also plan group activities for young people in this category that may also include Imua Kakou and Higher Education participants.

Hawaii's youth formerly in DHS care and living outside the State of Hawaii, or who were adopted or placed in legal guardianship by the DHS, or youth formerly in care from other states may receive information and referral services from IHI providers.

In SFY 2023, 193 young adults in this age group (young adults not in HE or IK) in Hawaii participated in independent living services. *See Data Booklet, Figure 115: Youth & Young Adults Receiving Independent Living Services in SFY 2023 for details.*

B. INDEPENDENT LIVING COLLABORATOR

Background

Since October 2015, CWSB has contracted the services of an Independent Living Collaborator (ILC) to work with CWSB, service providers, young people, community stakeholders, and other

partners to support an enhanced and seamless system of care. In a Casey Family Programs report that was based on statewide input from young people, CWSB, providers, and other stakeholders, an ILC was recommended to help improve services for the young people in or formerly in foster care. The ILC assists CWSB with collaboration; enhancing communications; workgroup development and facilitation; development of guidelines with best practice standards; providing and/or collaborating on trainings and conferences; evaluation and monitoring; ongoing CQI; and youth and young adult engagement.

A critical function of the ILC is to help CWSB manage the Independent Living, Higher Education, Education and Training Vouchers (ETV), and Imua Kakou (collectively IHI) contracts by supporting collaboration between CWS, provider agencies, community organizations, and young people. The ILC is key in coordinating and facilitating meetings, trainings, workgroups, and other projects. These meetings and events bring multiple providers together including CWSB Program Development administration and staff; CWSB social workers, assistants, and supervisors; DHS Federal Payment Programs Eligibility Unit staff; University of Hawaii, Maui College, SHAKA support team; University of Hawaii School of Law research staff; Court Improvement Program (CIP); Judiciary; contracted service providers; and young people. The ILC assists IHI providers with improving young people's transition out of care, identifying, and implementing strategies to eliminate waitlists, services and service delivery, and data collection and tracking. The ILC is also a member of several event planning committees, including Oahu Teen Days, Senior Graduation Celebration, the Ohana is Forever Conference, and the Pono Process/Case Planning Committee. Since its establishment, the ILC has played a key role in ensuring young people and their children receive the benefits to help ensure their successful transition to adulthood. During the COVID-19 pandemic, the ILC supported CWSB during one of its most challenging times and helped to ensure young people were supported.

Summary of Past Years to Present

In SFY 2021, the ILC hosted a series of core workgroup meetings to explore alternative ways to provide independent living services to young people in care beyond typical one-to-one case management. The overarching goal was to identify strategies to make independent living services more accessible to all young people ages 12 to 18 and to identify new ways of engaging this population. The importance of establishing connections between young people and providers was highlighted in helping to facilitate young people's transition into Imua Kakou and Higher Education services at time of eligibility. One of the ideas explored included cross-county collaboration on virtual groups or events for young people. It is still a challenge, but the ongoing ILC meetings help in developing positive working relationships to promote statewide IHI collaborations. Feedback from the core workgroup supported CWSB gathering information for the procurement and implementation of the 2022 IHI contracts.

In SFY 2022, the ILC began hosting a series of workgroup meetings focused on supporting case managers and strengthening youth engagement. The workgroup is open to all IHI case

managers statewide. Statewide convenings are also held with the young people, IHI case managers, and CWS staff. These convenings help promote communication and teamwork between CWS and the IHI Case Managers. Young people formerly in care are actively involved in planning the workgroup meeting agendas and in the facilitation of sessions and feedback from young people is used to identify areas to improve case management practice. Topics for the meetings and convenings have included the following: engaging young people through case planning, young people-friendly documentation, providing and receiving feedback, creative solutions to challenges, resources, possible needs, and trainings.

During the COVID-19 pandemic, EPIC Ohana, the ILC, and HFYYAAC (Youth Advisory Boards) were critical partners with CWSB in collaborating to quickly develop and implement plans to receive and expend the Consolidated Appropriations Act (CAA) award of Chafee funding in 2021-2022 to support eligible young people in foster care and those who transitioned out of foster care. The collaboration also included the UH Law School, service providers, Judiciary, and other partners, including national partners such as THINK of US, Youth Law Center, and Annie E. Casey. There were also concerted efforts by DHS fiscal, DHS Purchase of Services, and IT staff and contractors to identify and remove barriers, modify processes, and enhance service contracts to provide necessary support for the young people. CAA funding was shared with the ILC contract providers for direct disbursement of checks and pandemic care kits to young people in need. HFYYAAC providers also received CAA funds to hire lived experience young people to run the “Call Center” that was designed to engage young people, provide direct disbursements, and assist in securing other needed resources and supports. These collaborative efforts were critical in successfully identifying and coordinating the processing and funding of EFC, IK, ETV, and other benefits for eligible young people and allowed Hawaii to meet the goals and requirements of the Federal Government to provide for young people currently and formerly in care during the pandemic.

The following are some highlights of the ILC between SFY 2023 to SFY 2024:

- A Community of Practice series was introduced for IHI providers and CWS Imua Kakou staff to share best practices around topics identified by the group. This allowed participants to learn from each other and build a stronger collaborative.
 - The Community of Practice also incorporated an updated Dos and Don'ts for engaging young people. A document was developed by young people with lived experiences to support the engagement of young people.
- A project to create an IHI handbook has been initiated. The handbook will serve as a quick-reference guide for IHI case managers and cover topics including but not limited to case management, higher education, independent living, and Imua Kakou. The guide will also serve as a tool to support training new staff.

- A workgroup was initiated to improve communication, information dissemination related to options, benefits, and resources for young people, such as Higher Education benefits, Interdependent Living, Educational Training Vouchers, and Imua Kakou.
- A process was facilitated to update the Higher Education, ETV, and Imua Kakou applications with the goal of making it easier for young people to understand and be able to access services. This process was informed by the voices of young people who actively participated by providing feedback and recommendations.
- The ILC's ongoing support and CQI for case reviews and for program improvement for IK through:
 - Quarterly IK meetings with each county and statewide,
 - Assisting CWS answer providers' and stakeholders' questions, and
 - Planning a celebration for the 10-year anniversary of IK.
- The annual statewide convening of the IHI providers, CWS, young people, UH Law School, HI HOPES Initiative, Youth Circle, and Youth Partners was held. This gathering allows members to collectively reflect on their accomplishments, receive ongoing training, and hold a forum to promote best practices. The last statewide ILC convening was held on June 23, 2023, and included an IK Data Walk and a LGBTQIA+ training that was co-led by an expert with lived experience. The next convening is being planned for June 2024.
- The ILC worked closely with the Youth Circle program, the Youth Advisory Board, CWS, and other stakeholders to create a youth-centered process to engage young people in case planning while in foster care, a Case Planning Circle, pursuant to P.L. 113-183 Preventing Sex Trafficking and Strengthening Families Act. While the Youth Circle agenda focuses on transitioning and planning for the future, the Case Planning Circle will focus on what's happening currently in the young person's life and discussions will center on case direction, legal and relational permanency, promoting and supporting connections, culture, and well-being. The Case Planning Circle models itself on the nationally acclaimed Youth Circle model and is part of the Quality Improvement Center on Engaging Youth in Permanency (QIC-EY) project running from October 2021 to September 2026.
- The QIC-EY project is funded by the United States Department of Health & Human Services, Administration for Children & Families, Children's Bureau. Beginning in October 2021, the QIC-EY is charged with advancing child welfare programs and practice to ensure that they are authentically engaging and empowering children and youth in foster care throughout the U.S., especially in relation to permanency decisions. It is expected that the work of the QIC-EY will bring about systemic changes in how children

and youth are authentically engaged as reflected in intentional policy, practice, and culture shifts in the 6-8 pilot sites. It is believed ensuring that children and youth in care are authentically engaged, particularly as it relates to permanency, requires a paradigm shift in how the child welfare system understands and views their involvement in decision-making. Hawaii was highly sought after due to the nationally acclaimed work of EPIC Ohana and Jim Casey/Annie E. Casey Foundation – Youth Circles, HI HOPES Initiative (a site of Jim Casey Youth Opportunities Initiative).

Planning for the Next Five Years

Looking towards the future, Hawaii is committed to ensuring the success of its young people both while in care and as they prepare to move out of care by supporting and enhancing their permanency, well-being, and interdependent skills. A number of strategies are being considered in order to ensure the success of young people. These include but are not limited to the following:

- Continue the Community of Practice series for IHI providers and CWS Imua Kakou staff to share best practices around topics identified by the group to learn from each other and build a stronger collaborative.
- Continue the project of creating an IHI handbook and trainings that will serve as a quick-reference guide for IHI case managers and to support training for new staff.
- Continue the ILC workgroup to improve communication and information dissemination related to options, benefits, and resources for young people including Higher Ed, Independent Living, Educational Training Vouchers, and Imua Kakou.
- Continue the work with the Youth Circle program, the Youth Advisory Board, CWS, and QIC-EY project national team to create a youth-centered process to engage young people in case planning while in foster care pursuant to P.L. 113-183 Preventing Sex Trafficking and Strengthening Families Act.
- The QIC-EY project, which promotes permanency and youth empowerment, has approved the development of a Case Planning Process as a system change tool/project. Hilo has been chosen as the pilot site. Please refer to Section IX.E.6 E Makua Ana (Becoming an Adult) Youth Circles for additional information on the Case Planning Process.

C. HIGHER EDUCATION STIPEND AND EDUCATION AND TRAINING VOUCHERS

Higher Education

Overview

The State-funded Higher Education Stipend Program (HE) has been a tremendous success and benefit to young people formerly in foster care who exited foster care at age 18, or who were adopted or placed in legal guardianship through DHS at any age. With this additional support, many young adults have completed two-year and four-year degree programs, and a few have even obtained advanced degrees.

The Past Five Years to Current

In the 2023-24 school year, 212 students participated in the HE Program. During the school years 2019-2020 through 2023-2024, the students participating in this program were comprised of an average of 63 or 26% new students and 182 or 74% returning students. Refer to Data Booklet, Figures 121 and 122: Higher Education Stipends School Years 2019-2020 through 2023-2024 (Table) and (Chart), for detail and graphic representation.

The Higher Education stipend program remains a successful component of an array of services designed to help youth and young adults successfully transition from foster care. By entering Imua Kakou (Extended Foster Care to 21) at age 18, and then entering the State-funded Hawaii Higher Education Stipend Program after exiting Imua Kakou at 21, eligible young people have access to supportive and financial benefits from age 18 to age 27 while attending an institution of higher education.

Hawaii is proud to support students formerly in foster care achieve their educational goals. Hawaii's systems of financial assistance accommodate the reality that young people formerly in foster care often start on their higher education paths later than their same-age peers, and they often take longer to reach their goals. By participating in Imua Kakou from ages 18 to 21, and then the Higher Education Stipend program from ages 21 to 27, the young adult can receive nine years of financial support.

Planning for the Next Five Years

CWSB will continue to support sustaining the Higher Education program. It provides a tremendous benefit for young people transitioning out of care or who were adopted or attained legal guardianship. It also continues to offer the safety net after Imua Kakou to age 27, if higher education is a goal. The State of Hawaii extends generous fiscal support with Higher Education and Imua Kakou to these young people, beyond what most states provide.

Education and Training Vouchers (ETV)

Overview

The Chafee Education Training Vouchers (ETV) are a form of financial assistance provided to current and former foster youth to help them pursue post-secondary education or vocational training. The program aims to support these young people in their transition to adulthood by

providing them with resources to further their education and increase their opportunities for success.

The Hawaii ETV program receives and disburses federal funds in accordance with the John H. Chafee Foster Care Independence Program, Section 477 of the Social Security Act (42 U.S.C. 677 et seq.) to assist eligible former foster youth who are enrolled and participating in college, university, and vocational training programs.

The Past Five Years to Current

Over the past five years, Hawaii has remained committed to assisting youth to fully utilize Education and Training Vouchers (ETV) and higher education benefits. Hawaii's commitment is reflected in its partnerships and collaborations with young people, providers, and partners to discuss strategies and barriers to utilization. Ongoing meetings are held to discuss ways to increase utilization, as well as streamline processes. Beginning in Fall 2018, consistent with federal legislation, Hawaii extended ETV benefits to eligible former youth from age 23 to age 26. Between the 2016-2017 and 2020-2021 school year, there was a notable increase in the number of students receiving ETV awards from 25 to 44. This increase appears to have aligned with the extension of the age requirements.

For the 2021-22 school year, the additional Consolidated Appropriations Act (CAA)/Supplemental ETV funding and the flexibility of the requirements, resulted in an all-time high of 73 young people receiving ETV benefits. This provided much needed support for young people struggling to survive the pandemic and the chaos in their educational and living situations. When the COVID-19 pandemic no longer was thought to pose a worldwide threat, the flexibility of ETV requirements ended. This resulted in the number of young people receiving ETV benefits returning to a more typical number of awards of 45 for the 2022-23 school year. This number declined to 38 vouchers issued for the 2023-24 school year. Hawaii recognizes the decline and is working to understand the reasons for this change. One explanation is that young people do not meet the fiscal requirements to be deemed eligible. Many young people seem to be in a "catch 22" situation. By attending community colleges while living with family, friends, or former resource caregivers, young people are often able to keep their expenses to a minimum while they also receive either Extended Foster Care /Imua Kakou (IK) stipends or state-funded Higher Education stipends. Other states do not have Higher Education or have not opted into Extended Foster Care at all or for the Higher Education option. The unintended consequences of these lower costs have resulted in the young people sometimes not meeting the financial need criteria for ETV. In addition, some young people choose to participate in the EFC/IK program because it provides a broader safety net for them to explore employment before attaining the age of majority, rather than feeling pressured to attend higher education in order to receive support. For young people who are in foster care and become young parents, their children become their immediate priority, rather than attending higher education. Extending ETV eligibility to age 26 offers possibilities for more

young people to enter higher education at a later time in their lives. A positive factor of the decline in the number of children and young people coming into care may also contribute to the decline in awards issued and/or numbers needing financial support through ETV, HE, IK.

See Data Booklet, Figures 123 and 124: Education and Training Vouchers School Years 2019-20 through 2023-24 (Table) & (Chart) for detail and graphic representation of data on the ETV program.

Planning for the Next Five Years

CWSB will continue to work to maintain a consistent level of ETV applicants through collaborations with CWSB's IHI providers, CWS staff, and agencies supporting young people. At the same time, there is a need to balance the availability of Federal ETV Funds. The surge of applicants during the pandemic promoted a good awareness. At the same time, it led to a struggle in balancing the funds available through the Federal Award Grants.

D. EXTENDED FOSTER CARE (AKA IMUA KAKOU) AND EXTENDED ASSISTANCE PROGRAMS

Background

The Imua Kakou (IK) and Extended Assistance (EA) Programs completed nine years of implementation on June 30, 2023. During 2024, celebrations commemorating the 10-year anniversary of both successful programs will be held. The success of the programs is due in large part to the strong collaborations between CWSB, Judiciary, UH Law School, Court Improvement Project (CIP), young people, EPIC Ohana, community providers and partners, SHAKA, Casey Family Programs, Jim Casey Youth Opportunities Initiative, Annie E. Casey Foundation, ACF, and other national and local partners. EPIC Ohana's Independent Living Collaborator and the UH Law School have played a critical role in the ongoing support and CQI of cases, implementing federal and state laws into practice, supporting program improvement, and facilitating and maintaining trusted communication between all parties.

Summary of the Past Five Years to Present

Over the past five years, DHS has continued to collaborate with EPIC Ohana, UH Law School, Judiciary, SHAKA, Federal Payments Program and Eligibility Unit (FPPEU), Independent, Higher Education and Imua Kakou (IHI) Providers, young people, and others. Ongoing efforts to support young adults aging out of care include improving communication, expanding program services, and enhancing service delivery and trainings. CWSB is working to integrate with the Family First Hawaii Prevention Services to support this population by developing the pathway for Home Visiting services as an evidence-based service that can support EPYP to develop and

enhance their parenting skills. Efforts will include promoting awareness about the service and referral process.

1. Extended Assistance Programs

The Extended Assistance Program is a program for former foster youth who were placed at age 16 or older in legal guardianship or adoption, subject to an agreement between DHS and caretakers. In the past year, there have been no changes made to the program. Over the years, the numbers have continued to remain small. In SFY 2023, the monthly average was four youth receiving Extended Adoption Assistance. This number is down from SFY 2022 where the average was six youth but still more than SFY 2019-2021. In SFY 2023, there was an average of 10 youth per month with Extended Legal Guardianship/Permanency Assistance, as it is a permanency option for an older population. This is the same number of youth per month in SFY 2022. Please refer to the Data Booklet, Figure 125: Young Adults Receiving Imua Kakou or Extended Assistance Monthly Averages for SFYs 2019-2023, and Figure 126: Percentage of Title IV-E Cases for Imua Kakou or Extended Assistance for SFYs 2019-2023.

2. SHAKA Database and Imua Kakou Data Tracking

Imua Kakou cases continue to be documented, managed, and tracked in the SHAKA database, which is managed by University of Hawaii Maui College. There have been no changes to the basic processes.

3. Imua Kakou Applications

During SFY 2023, SHAKA logged 136 IK applications in various stages of completion. Of these applications, 70 applicants (51%) were determined eligible for Imua Kakou, 9 applicants (7%) were determined ineligible, 27 applicants (20%) were referred to other resources, and 30 applicants (22%) were new/incomplete, recently submitted, incomplete, or withdrawn.

Applicants were most often determined ineligible because the young adults were adopted or placed under legal guardianship before age 16. Those applicants which are determined ineligible are referred to other community services/benefits and resources. Please see Data Booklet, Figure 127: Imua Kakou Applications SFYs 2019-2023 and Figure 128 SFYs 2019-2023 Imua Kakou Applications – Reasons Why Ineligible.

4. Participant Demographics and Other Tracker Data

In February 2024, there were 230 Imua Kakou cases open in the SHAKA database. Based on the data, a “typical” Imua Kakou participant is a Hawaiian (60%) female (59%) who

emancipated from foster care while under CWSB placement responsibility (85%). She resides with relatives (30%) or is living in a resource caregiver home (15%) while maintaining eligibility through completing secondary education (39%) and was involved in developing her case plan.

Based on surveys of 52 young adults exiting Imua Kakou during SFY 2023, CWS identified trends. The young adult is exiting at age 21 (83% of cases), has a relationship with at least one adult that is trusting, supportive, and unconditional who will always be there (79%), has a Social Security Card (87%), birth certificate (88%), driver's license (44%) and other state identification (44%), and Hawaii's Medicaid program, Med-QUEST, is the major health insurance provider (81%).

Information on reasons for termination/closing indicates that most young people are working (60%), in an employment preparation activity (12%), are in post-secondary education (17%), or are not doing any activity (13%). Young people who want to continue post-secondary education can opt to enroll in the state-funded higher education program and young people who need continued support can receive Independent Living (IL) support services.

5. Case Management, Case Plans, and 90-Day Transition Plans

All young adults who participated in Imua Kakou services for at least 60 days after signing a Voluntary Care Agreement (VCA) and had an initial hearing, participated in the development of their case plan.

In some sections, case managers and young adults begin developing the case plan before the VCA is signed. In other sections, the case manager and young adult begin developing the case plan after the VCA is signed and after the court finds that extending voluntary foster care is in the young adult's best interest.

The Imua Kakou case plans for all young adults include the federal requirements of 90-Day Transition Plans, which are updated within the 90 days before the young adult exits foster care at age 21. The court monitors the case planning process by requiring that case plans be submitted minimally every six-month for permanency hearings and for termination hearings. The Epic Ohana Independent Living Collaborator (ILC) and UH Law School staff also review and monitor cases from each CWSB section/IK Teams and holds quarterly teleconferences to provide support to the IK Teams for the young people and to ensure that the federal and state requirements are being met.

Planning for the Next Five Years

Over the next five years, Hawaii will continue to support young adults aging out of care through improving communication, expanding program services, and enhancing service delivery and trainings through the following strategies:

- Continue the ILC Community of Practice series for IHI providers and CWS Imua Kakou staff to share best practices around topics identified by the group, learn from each other, and build a stronger collaborative.
- Continue the ILC project to create an IHI handbook/trainings that will be a quick-reference guide for IHI and IK case managers and to support training for new staff.
- Continue the ILC workgroup to improve communication, information dissemination regarding options, benefits, and resources for young people, including Higher Education, Independent Living, Educational Training Vouchers, and Imua Kakou.

E. OTHER INDEPENDENT/INTERDEPENDENT LIVING AREAS

1. Chafee Funded Housing Support

There are no changes in this area. As in prior years, IHI providers have not used Chafee funds specifically for housing support. Chafee funds are used solely to fund IHI contract programs for overall IL support, which includes housing support.

2. Coordination and Linkage with Other Federal and State Programs

Background

DHS participates in multiple collaborations with stakeholders, providers, and public agencies.

Summary of Past Five Years to Present (2020-2024)

- Hawaii Youth Services Network (HYSN) is the local Transitional Living Program grantee. As a member of HYSN, CWSB receives updates and information from HYSN and shares it with staff and other agencies. All IHI Providers (Hale Kipa, Hale Opio Kauai, Maui Youth and Family Services, and The Salvation Army - Family Intervention Services) and EPIC Ohana are members of the HYSN. The participation of these entities ensures that information is shared with youth and their voices are heard.
- IHI providers, youth circles, and HI H.O.P.E.S. Boards partner with CWSB to collaborate with youth and ensure that referrals are made to community resources and public agencies regarding health, education, housing, and employment. Examples include referrals to BESSD, Division of Vocational Rehabilitation, Med-QUEST, and City and County of Honolulu programs. *See also*

the next section on Youth Homelessness re: Housing Vouchers with C&C, Public Housing Authorities and HUD.

- CWSB collaborates with the UH Law School, Court Improvement Project (CIP), the Judiciary and with Lived Experience Experts and other partners to
 - coordinate trainings such as the Child Welfare Law Update, Ohana Is Forever, Teen Days at Court, and other related activities;
 - develop and implement programs and policies to address safety, permanency, and well-being of young people and their families; and
 - provide reviews, consultation and ongoing CQI of policies, procedures, laws, and programs.
- EPIC Ohana Youth Partners are primarily contracted with Department of Health's Child and Adolescent Mental Health Division (DOH-CAMHD) and provide mental health support to young people and also provide some support for young people in families under the CWSB WRAP contract. Youth Partners are primarily youth formerly in foster care and trained by HI HOPES Initiative or EPIC Ohana prior to becoming Youth Partners. This collaboration benefits both DOH and CWSB and all the young people and enhances the expertise of the Youth Partners in both foster care and mental health.
- Housing. CWSB, in collaboration with US Department of Housing and Urban Development (HUD), have been collaborating to pursue an amendment or waiver to allow the young people of Hawaii who are in Imua Kakou/Extended Foster Care to simultaneously have a HUD (Foster Youth Independence - FYI/Family Unification Program - FUP) Housing Voucher. CWSB has been consulting and advocating with DHS and State offices, local and national HUD offices, ACF, national and local partners, and young people to meet this need. Despite barriers and challenges, CWSB is committed to meeting this important need for our young people by "moving forward together" (Imua Kakou).
- National Youth in Transition Database (NYTD) CWSB continues to collect youth data for the Federal NYTD surveys through the state sponsored youth portal ShakaTown, in addition to Epic Ohana programs, i.e., Independent Living Collaborator (ILC) and the Youth Circle program, that work to locate and engage each cohort for survey completion. Survey participants are offered incentives to complete the survey. Increased communication about the importance of this program with groups such as HI H.O.P.E.S., CWSB staff, and services providers, has resulted in enhanced community support.
- Florida Institute for Child Welfare at Florida State University. EPIC Ohana did a Youth Circle presentation at the Chapin Hall (University of Chicago)-Selfless Love

Foundation-National Think Tank Convening. Their presentation of this nationally-acclaimed engagement, planning, and decision-making tool was well received. Florida Institute for Child Welfare has since requested that EPIC Ohana participate in a webinar series being held in 2024. The presentation will be on Youth Circles and will highlight the collaboration between young people, EPIC Ohana, providers, and CWSB.

- Quality Improvement Center on Engaging Youth in Finding Permanency (QIC-EY) is funded by the United States Department of Health & Human Services, Administration for Children & Families, Children’s Bureau. Beginning in October 2021, the (QIC-EY) is charged with advancing child welfare programs and practice to ensure that they are authentically engaging and empowers children and youth in foster care throughout the U.S., especially in relation to permanency decisions. It is expected that the components and impact of the QIC-EY will bring about systemic changes in how children and youth are authentically engaged as reflected in intentional policy, practice, and culture shifts in the six+ pilot sites. Hawaii CWSB is a pilot site. The QIC-EY is led by Spaulding for Children and is working in close partnership with four national partners.

Planning for the Next Five Years (2025-2029)

CWSB will continue to strengthen its successful collaborations with Federal and State partners, as well as with community partners and the voices of lived-experience. This will be done through numerous efforts, including but not limited to meeting the housing needs of young people and authentically engaging young people through implementation of the QIC-EY pilot project.

3. Youth Homelessness

Background

IHI (Independent Living, Higher Education, ETV, Imua Kakou) providers continue their relationship with the City and County of Honolulu Public Housing Authority to make Family Unification Program (FUP) vouchers available to former foster youth.

In 2016, Housing and Urban Development (HUD) increased the benefit period from 18 months to three years generating an increased interest among former foster youth. The short window in which applicants can apply for Section 8 services continues to be a challenge to voucher utilization. The Section 8 list may remain closed for years or may open for a few days each year, leaving few opportunities for young people to obtain and utilize the vouchers.

In some cases, the City and County of Honolulu office reclaimed the vouchers from former foster youth. This was extremely disappointing to youth and made it a challenge to utilize available vouchers. Hale Kipa and a CWSB representative now assist the City and County in improving youth access to vouchers and other resources. Through the Coordinated Entry System, the system identifies homeless youth ages 18-24 who spent time in the child welfare system.

In December 2019, CWSB and the Hawaii Public Housing Authority (HPHA), in collaboration with Hale Kipa, executed a memorandum of agreement that allowed young people transitioning from foster care to apply for a Foster Youth Independence (FYI) voucher from HUD through HPHA. The first voucher for Honolulu County was issued in January 2020. These vouchers utilize the same criteria as the FUP vouchers and are approved by HUD directly, but are not subject to the Section 8 waitlist. A maximum of 25 vouchers are available each year. A voucher may be renewed annually for up to five years, rather than three years provided in HUD's recent amendment. An added benefit is that the State Housing Authority has agreed to absorb these vouchers into its traditional Section 8 housing voucher program if the participating youth is not able to maintain full market rate housing and continues to need the housing subsidy at the end of the initial five-year voucher period.

The Past Five Years to Present

In November 2020, CWSB and the Hawaii County Office of Housing and Community Development (OHCD) executed a memorandum of understanding, in collaboration with Salvation Army, allowing young people transitioning from foster care to apply for a Foster Youth Independence (FYI) voucher from HUD through OHCD. HUD recently expanded its eligibility allowing Housing Authorities to provide both FUP and FYI vouchers. HUD is open to exploring a roll-out of this option statewide.

During CWSB's collaboration with young people, EPIC Ohana, HI HOPES, providers, the Public Housing Authorities (PHAs), and HUD barriers emerged to implementing access to FUP and FYI vouchers:

- a. The FYI program was thought to accommodate only single individuals or single parents with children, and that couples, married or unmarried, must rent a two-bedroom unit and obtain two separate rental agreements. This understanding was grounded in an interpretation of a HUD requirement. CWSB and the collaboration researched and contacted HUD, PHAs, ACF, and Annie E. Casey to obtain clarification. The National Center for Housing and Child Welfare (NCHCW) clarified with HUD that married or unmarried couples with children are allowed to rent a one- or two-bedroom unit in the same rental agreement.

- b. In 2021, HUD clarified that young people in Extended Federal Foster Care are not eligible to receive either FUP or FYI vouchers because EFC young people are considered to be in foster care and are thus ineligible for housing vouchers. The Hawaii collaboration has been working with HUD, ACF, PHAs, Annie E. Casey, CBCs, youth advocates, and others to resolve this issue. Hawaii is seeking options such as a waiver to allow provision of both EFC benefits and a Housing Voucher. One of the concerns about this proposal is the potential that states would opt to terminate EFC benefits if given the vouchers. Hawaii's young people were appreciative of the added support in navigating Hawaii's limited housing market. When HUD's clarification was issued and the housing voucher option was denied, this presented a major challenge to young people's ability to be successful and greatly increased their struggles, especially during the pandemic.

The young people are determined to reinstate the provision of both EFC and Housing Voucher benefits. Recently, the Governor's Office of Wellness and Resilience (OWR) reached out to the young people, EPIC Ohana, and CWSB on areas to better support young people formerly in care. One of the areas selected is the issue of the EFC and HUD Vouchers. OWR and the workgroup have drafted a letter for the Governor to send to Hawaii Senator Brian Schatz and Acting U.S. HUD Secretary Adrienne Todman to advocate for either an amendment or a waiver to this policy.

CWSB continues to assist Partners in Care, the Oahu Continuum of Care for homelessness, in its efforts to support Oahu's homeless population. HUD awarded \$3.8 million in the Youth Homelessness Demonstration Project (YHDP) to Partners in Care. These funds were then awarded to other non-profit collaborations to support a range of outreach efforts, Guide on the Side support services, and alternative housing to address homelessness of young adults through the age of 24. There is a special emphasis on locating young people, moving them into safe housing, helping them sustain housing, and preventing a reoccurrence of homelessness.

Refer to *Section VIII.G. Human Trafficking* for information on trafficking of youth in foster care.

Planning For the Next Five Years (2025-2029)

CWSB is committed to ensuring its young people have the necessary resources to accomplish a successful transition to adulthood. In collaboration with its community partners, CWSB will continue to explore ways to support its young people and advocate for necessary housing opportunities. Several strategies being pursued include:

- an amendment or a waiver to allow the HUD Vouchers for EFC young people.

- ongoing collaborations with OWR, the State Office on Homelessness & Housing Solutions, community partners, and young people to address barriers to housing and the issue of homelessness.
- supporting Hawaii Youth Services Network (HYSN) for the Department of Housing and Urban Development’s NOFO# FR-6700-N-96 Youth Homelessness Systems Change Grants. In 2024, DHS Social Services Division, Child Welfare Services Branch submitted a letter of commitment. This proposal provides Hawaii the opportunity to build a more collaborative, culturally relevant, trauma-informed, inclusive, innovative system of care that will address the needs of all homeless and at-risk youth statewide.

If funded, DHS will participate in meetings and other activities to

- Strengthen homeless youth assessment systems.
- Remove barriers to service access and delivery and address racial and gender disparities.
- Increase opportunities for youth voice and input, including young people with lived experience.
- Identify needs and gaps in resources, work collectively to increase resources for homeless and at-risk youth.
- Reduce workforce shortages.
- Increase awareness and support for reducing youth homelessness among policy makers and funders.

4. Medical Coverage

Background

CWSB continues to collaborate and partner with Med-QUEST Division (MQD) and EPIC Ohana to ensure that youth formerly in foster care continue to have medical coverage through age 26.

Summary of Past Five Years

Over the past five years, several strategies and resources have been utilized to meet the goal of ensuring medical coverage through age 26 to youth formerly in care. These strategies include, but are not limited to, the following:

- EPIC Ohana facilitated a successful collaboration between CWSB and MQD to address challenges regarding maintaining ongoing medical coverage for young people once they leave foster care. The collaboration:
 - identified issues and barriers;

- helped to improve documents, communication, and working relationships to better ensure that young people did not lose their coverage; and
 - developed a process to ensure that young people who were formerly in care are covered until age 26. The positive working relationships from the collaboration also address issues or problems that may occur with individual-specific situations for the young people.
- In 2022, CWSB attended national information sessions and collaborated with MQD to prepare for and support MQD’s implementation (effective January 1, 2023) of mandatory national Medicaid coverage of the former foster care children group, or FFCC group. This expanded coverage is for both those youth coming into Hawaii and those moving from Hawaii. These changes, which were made by the Substance Use-Disorder Prevention That Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act, Pub. L. No. 115-271, expand eligibility to individuals who were in foster care in other states and simplify eligibility determinations and enrollment processes for this population. CWSB has supported the implementation of national Medicaid coverage of FFCC by sharing with MQD data from providers for homeless populations and independent living programs to determine estimated numbers of young people formerly in care from other states. CWSB has been awaiting a formal announcement of the authorization and processes from MQD to disseminate the information to entities serving these young people. MQD has had a lengthy process of seeking full approval from CMS (Center for Medicare & Medicaid Services). During this time, CWSB, MQD, and EPIC Ohana have been working together to share this upcoming change with relevant entities, including but not limited to young people, especially those moving to other states.

Planning for the Next Five Years

CWSPD, MQD, and EPIC Ohana continue to collaborate through regular and ongoing meetings to monitor and ensure the provision of medical coverage to support the well-being of young people currently in and formerly in care.

CWSB was recently notified by the MQD Program and Policy Development Office (PPDO) that they have issued a Program & Policy Directive (PPD), dated May 3, 2023, to their staff that former foster care children who aged out of the system in another state are eligible for Medicaid in Hawaii. CWSB is in the process of working with MQD-PPDO to issue the same policy and related procedures to CWSB, partners, and young people.

5. E Makua Ana (Becoming an Adult) Youth Circles

Background

The Youth Circle (YC) is a facilitated family group decision-making process that is available for youth currently and formerly in foster care, aged 14 to 27. The purpose of a YC is to empower the youth or young adult and develop a transition plan with the support of the youth's team. A YC can bring together and develop connections between the youth or young adult's family, friends, community members, teachers, service providers, and related CWSB staff to assist in developing and implementing a transition plan. YCs are solution-focused and driven by the youth or young adults. This service is provided under a CWSB contract with a local non-profit agency.

Youth Circles can help to:

1. Increase the youth's self-advocacy skills;
2. Connect youth with their circle of support, which may include the families and relatives from whom they were removed, and strengthen their social capital;
3. Provide youth with the opportunity to acquire more information about resources for further education, training, employment, financial assistance, housing options, and other social services;
4. Support youth's well-being and healthy development;
5. Reduce homelessness among emancipated youth; and
6. Encourage youth to "dream big" while giving them the tools and supports to achieve their dreams.

YCs are a tool to engage youth in developing a CWSB required independent living transition case plans for youth in care aged 14 years and older, and federally required 90-day transition plan for youth who are likely to exit care on or after their 18th birthday.

Participants in the Imua Kakou Extended foster care to 21-program receive an Imua Kakou (IK) Circle when entering the program, as well as subsequent YCs when requested. The purpose of an IK Circle is to assist the young person in understanding the IK program requirements, develop a plan with their supporters, and successfully enter and meet the requirements for IK. If a youth had a recent YC before entering IK, that YC will be used to guide the creation of the IK case plan.

Summary of the Past Five Years To Present

When the global pandemic began in SFY 2020, YCs transitioned from in-person to virtual meetings to comply with community health and safety precautions. This change in format may have initially contributed to the lower number of YCs (293) and youth in

care between the ages of 14 and 21 (245). Refer to the Data Booklet, Figure 120: Youth Participants & Youth/Imua Kakou Circles SFY 2019 - 2023.

The increase in the number of YCs (332) in SFY 2021 may be attributed to the population's awareness of the change in format and their comfort with virtual platforms to hold conversations and gatherings. Many young people had adjusted to virtual classes and CWSB staff, providers, and supporters were largely accustomed to the use of virtual platforms. The initial challenges posed by transitioning to a virtual platform at the onset of the pandemic later identified some benefits. The virtual YC format helped minimize the time involved with coordination, reserving rooms, and travel time, while also creating opportunities to schedule more YCs. Additionally, some youth who delayed having a YC during SFY 2020 due to the uncertainty of the pandemic, but scheduled one in SFY 2021, may have helped increase the number of YCs in SFY 2021.

Between SFY 2022 – SFY 2023, there has been a continued decrease of youth in care. In SFY 2022, there were 245 youth in care between the ages of 14 and 21. In SFY 2023, that number slightly decreased to 240. Respectively, there were 292 youth/IK circles in SFY 2022 and 284 in SFY 2023. The continued decrease in YCs may be aligned with the ongoing decrease of youth in care. Refer to the Data Booklet, Figure 120: Youth Participants & Youth/Imua Kakou Circles SFY 2019 - 2023. In SFY 2023, 284 combined YCs and IKCs were provided for 240 youth.

The YC format will continue to be adjusted to best meet the needs of youth. Youth continue to share that YCs are very helpful in finding their voice and direction in life.

Planning for the Next Five Years

The Youth Circle program is working closely with others to create a youth-centered process to engage young people in case planning while in foster care (P.L. 113-183 Preventing Sex Trafficking and Strengthening Families Act). While the Youth Circle agenda focuses on Transitioning and Planning for the future, a Case Planning Circle will focus on what's happening in the present, including case direction, legal and relational permanency, connections, culture, and well-being. The Case Planning Circle models itself on the nationally acclaimed Youth Circle model.

Work to develop this Case Planning Circle model is part of the Quality Improvement Center on Engaging Youth in Finding Permanency (QIC-EY) project, from October 2021 to September 2026, which is funded by the United States Department of Health & Human Services, Administration for Children & Families, Children's Bureau. Beginning in October 2021, the QIC-EY is charged with advancing child welfare programs and practices to ensure that they are authentically engaging and empowering children and youth in foster care throughout the United States, especially in relation to permanency

decisions. It is expected that the work of the QIC-EY will bring about systemic changes in how children and youth are authentically engaged as reflected in intentional policy, practice, and culture shifts in the six to eight pilot sites. Hawaii was selected as one of the pilot sites and was highly sought after due to the nationally acclaimed work of EPIC Ohana and Jim Casey and Annie E. Casey Foundation – Youth Circles and HI HOPES Initiative, a site of Jim Casey Youth Opportunities Initiative. It is believed ensuring that children and youth in care are authentically engaged, particularly as it relates to permanency, requires a paradigm shift in how the child welfare system understands and views their involvement in decision-making.

6. CWSB Youth Advisory Board

The Hawaii Helping Our People Envision Success (HI H.O.P.E.S) Statewide Youth Boards

Background

The HI H.O.P.E.S. board consists of youth, currently and formerly in foster care, and represents the voice of youth across the state in areas of advocacy, policy, system improvement, services, and legislative education. Members often participate in and present at conferences attended by CWSB staff; Judiciary staff, including Family Court judges; community partners; and other CWSB stakeholders. The HI H.O.P.E.S. board helps to increase public awareness of youth in foster care through its outreach to other sectors in the community, including in the areas of education, employment, and housing. The HI H.O.P.E.S. youth boards are active on Oahu, Maui, Kauai, and East and West Hawaii.

The HI H.O.P.E.S. board continues to focus on raising awareness on the issues, rights, challenges, and strengths of young people in and formerly in foster care by coordinating and presenting at Teen Days, the Ohana is Forever Conference, the Annual Child Welfare Law Update, Family Court Symposium, and other court and CWSB sponsored events. The young people are always the highlight of the presentations and panels. Board members participate in a number of workgroups, committees and efforts to promote youth voice and to contribute to systems transformation.

Post-pandemic, the boards have continued to meet both online and in-person. In addition to monthly board meetings, they meet quarterly on neighbor islands and every other month on Oahu with their respective Community Partnership Hui (CP Hui). CP Huis are comprised of a family court judge, CWS administrator, Bank of Hawaii partner, community college administration representative, and a number of other partners from the community. CP Hui members act as ambassadors in their respective fields and often work with board members on advocacy matters and event planning.

The HI H.O.P.E.S. boards convene in-person as a statewide board twice a year for an annual retreat and to present at and attend the Ohana is Forever conference. Training, leadership development, and board planning takes place at the annual retreat. Throughout the year, each board plans for a number of activities and events that promote resources, education, self-advocacy and permanency for current and former foster youth. These include sibling connections events where sibling groups placed in different homes come together to celebrate the holidays or other special occasions. Each event is community-specific and is often organized, hosted, and promoted in partnership with community stakeholders.

Summary of Past Five Years

a. Pono Process

In 2020, youth and lead navigators were hired for the Pono Process Program (Grievance Process, pursuant to P.L.113-183 Sex Trafficking and Strengthening Families Act), in part because of their lived experience in Hawaii's foster care system. These youth collaborated with partners such as the Attorney General's office, Family Court, CWSB, guardians ad litem, service providers, and young people on the design and rollout process. In July 2020, the Pono Process was officially launched at an annual conference attended by over 300 adult professionals and young people.

The Pono Process is overseen by EPIC Ohana and utilizes a Pono Process youth navigator and lead. It is an avenue for youth in care to report grievances or make other related inquiries. Since its launch, the Pono Process team has handled a small number of grievances and inquiries about general foster care related topics from young people. Formal grievances are forwarded to the branch and assistant branch administrator, and section administrator, unit supervisor, and case manager.

Promoting self-advocacy for youth in care is an important part of the ongoing education to encourage youth voice, emphasize team communication, and elevate well-being.

In 2020, a self-advocacy curriculum and a related video were created to assist young people in understanding their rights while in care and to help them develop self-advocacy skills. Statewide self-advocacy training was initiated in March 2021 for young people in foster care in the 12–18-year age range. The Pono Process youth navigator and lead facilitate the trainings and work with CWSB and other partners to recruit eligible young people. Currently, the Pono Process team remains actively engaged in ongoing presentations, trainings and other types of education about the

Foster Youth Bill of Rights and the Pono Process for youth, social workers, GAL/CASA, judges, resource caregivers, and service providers.

b. Consolidated Appropriations Act (CAA)

During the COVID pandemic, the HI H.O.P.E.S. boards had to pivot to virtual platforms for their recruitment, engagement, and support activities; board meetings; and presentations at local and national forums. These strong young survivors creatively demonstrated excellence, resiliency, and flexibility as they modeled how to support young people in those trying times. Their creativity and advocacy did not wane during the pandemic. The voices and leadership of the young people guided government and community collaborations through the pandemic and beyond for the young people and families.

In 2021-2022, EPIC Ohana and HI H.O.P.E.S. Board members helped guide CWSB, Judiciary, and providers to maximize CAA funding. EPIC Ohana, Independent Living Collaborative (ILC), and Hawaii Foster Youth/Young Adult Advisory Council (HFYYAAC) partnered with CWSB to develop and implement plans to receive and expend the CAA award of Chafee funding. CWSB also collaborated with the UH Law School, service providers, the Judiciary, and other partners, including national partners such as THINK OF US, Youth Law Center, and Annie E. Casey. Concerted efforts by DHS fiscal, DHS purchase of services, and IT staff and contractors assisted in identifying and removing barriers, modifying processes, and enhancing service contracts to provide the support necessary for the young people. CAA funding was shared with ILC contract providers to support direct disbursement of checks and pandemic care kits for young people in need. HFYYAAC providers also received CAA funds to support the hiring of lived experience young people to run the “Call Center” designed to engage young people and provide direct disbursements and assistance of vital resources. The collaboration between CWSB and EPIC supported the ability to successfully identify and coordinate the flexibilities in processing and funding of EFC/IK, ETV, and other benefits—thus meeting the goals and requirements of the federal government to provide for young people in and formerly in care during the pandemic.

c. Case Planning “Hackathon”

In September of 2022, a Case Planning “Hackathon” was held at the Kapolei Courthouse on the last day of the annual Family Court Symposium. A panel of seven young leaders with lived experience in foster care presented on the importance of youth engagement in court and case planning. The leaders then co-facilitated breakout groups with 17 Family Court judges from across the State. Judges were educated about the hackathon process, which brings together key stakeholders,

programmers, and coders to develop creative technology solutions to real-world problems through software development. Rapid prototypes based on subject areas that included permanency, educational stability, health, housing/placement, and social/cultural needs were designed. These prototypes will aid in the development of a new case planning process for foster youth ages 14-18 in Hawaii. The Hackathon was a productive and powerful collaboration among all parties.

d. Quality Improvement Center for Engaging Youth (QIC-EY)

In 2022, Hawaii's DHS-Child Welfare Services was selected to participate in a five-year permanency and youth engagement effort with the QIC-EY. CWSB selected East Hawaii as the pilot site, with other sites serving as the comparison site. EPIC Ohana is the lead agency that has been hired to serve as pilot site lead and youth engagement lead positions. EPIC has assisted with training and will provide continued support to develop the pilot project.

In 2023, The Hawaii team assisted the national team in updating the existing curriculum to be more "Hawaii appropriate" and participated in training to CWSB staff alongside QIC-EY and EPIC staff. The kick-off event took place in July 2023 in Hilo, with over 50 participants from CWSB, Family Court, and community partners. The East Hawaii HI H.O.P.E.S board hosted and emceed the event and presented on a panel about authentic youth engagement. Initial assessments and training took place in 2023, and on-going assessments and coaching will be scheduled with the local and national teams.

e. Foster Youth Ask Hawaii (FYAH)

In July 2023, at the annual Ohana is Forever conference, FYAH (Foster Youth Ask Hawaii) was launched for young people in care to reach out via text, phone, email, or social media with foster care and resource related questions. Staff with foster care experience handle any incoming queries.

f. Case Planning Circle

In 2024, the QIC-EY team will work with CWS and the HI H.O.P.E.S. Board in East Hawai'i to launch a pilot of the Case Planning Circle, a model of permanency and case planning that is holistic in its scope, centers the young person (ages 14-17), and meets the case planning requirements outlined in federal and state law. This process will include detailed planning, approval by CWSB, and recruitment and piloting with foster youth in East Hawaii. The goal is to implement this model statewide after the test pilot; assessment and any necessary adjustments and approvals will be required to disseminate it statewide.

Planning for the Next Five Years

The HI H.O.P.E.S. boards look forward to the next five years with hope, excitement and an ongoing commitment to uplift youth voices and promote well-being. They will continue to strengthen and promote youth leadership, connect with youth, deepen relationships with CWSB and community partners, educate and advocate for issues that impact young people, and work with local and national stakeholders on efforts that impact policy and practice. Boards will work alongside CWSB to roll out the Case Planning Circles statewide. They will be engaged in a wide-range of impact areas, including but not limited to housing supports, Native Hawaiian disproportionality and race equity, ongoing efforts to increase peer support for youth in care, and participation in Malama Ohana. Malama Ohana is a legislatively formed working group that hosts public meetings and listening sessions statewide to address concerns and barriers, uplift best practice, and make recommendations for positive child welfare systems transformation. Select board members have been appointed by the Governor to the working group, and more will be able to serve on Permitted Interaction Groups.

The CWSB partnership with youth boards has been critical for hearing youth perspectives and obtaining youth input.

7. National Youth in Transition Database

Background

The National Youth in Transition Database (NYTD) collects information on youth in foster care and the outcomes of those youth who have aged out of foster care. States began collecting data in 2010, and the first data set was submitted in May 2011.

CWSB continues to collect youth data for NYTD surveys through the state sponsored youth portal, ShakaTown. CWSB collaborates with the EPIC Ohana programs, Independent Living Collaborator (ILC), and Youth Circles, which locate and engage youth in each cohort for survey completion. Survey participants are offered incentives to complete the survey. Increased communication about the importance of this program with groups such as HI H.O.P.E.S., CWSB staff, and service providers, has resulted in enhanced community support for the NYTD effort.

Summary of Past Five Years (2020-2024)

Hawaii does well in providing support services for young people transitioning out of care through its collaborations with contracted providers and community agencies that are supported by Chafee, IV-E, and state dollars. CWSB is appreciative of its partnership with SHAKA and EPIC Ohana. These collective efforts have supported compiling required information from young people and providers. SHAKA gathers aggregate

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agency information from Independent Living (IL) providers who service young people ages 12-26. EPIC Ohana conducts the NYTD surveys with the young people cohorts, whether or not they are connected with providers. The administration of NYTD surveys continues to be a challenge for cohorts of 19- and 21-year-olds, with the primary challenge being maintaining contact with the young people.

In SFY 2023, 13 (25%) of the 52 youth in the 17-year-old baseline group completed surveys as part of Cohort 5. Reasons why the other 39 youth (75%) did not complete the survey included:

- Two declined the survey,
- Two were incapacitated,
- Five were on the run, and
- 27 could not be located.

Finding young people who are not already connected to existing transitional programs such as IL programs, higher education, or Imua Kakou continues to be a challenge. ILC, SHAKA staff, and CWSB continue to explore ways to capture data from more youth before they exit foster care at age 18. Search efforts using social media and partnering with Med-QUEST and other youth serving agencies are being made and will be explored further.

Contracted IL service providers partner with DHS to ensure compliance with NYTD requirements. These providers assist by collecting and sharing data on NYTD elements and directly inputting data into SHAKA on individual services provided to youth. In 2023, there were 495 clients served during the first reporting period, and 525 clients were served in the second reporting period. These numbers have remained relatively consistent over the past decade.

CWSB's partnerships with the SHAKA technical and design team and EPIC Ohana have been vital to CWSB's ability to comply with NYTD requirements. Information received from NYTD surveys and other related data is used to inform CWSB and other partners about foster youth and young adult experiences in many areas, especially homelessness, parenthood and parenting, education, and ethnic disparities.

NYTD data is shared and discussed in varied settings with several partners, including ILC, Youth Circle staff, HI H.O.P.E.S. boards, and HI H.O.P.E.S. Community Partnership Hui. Summaries of collected data are also shared on DHS and SHAKA/ShakaTown websites. NYTD data is also reviewed and compared to data collected from other sources, such as the Jim Casey Youth Opportunities Initiative Opportunities Passport survey and Imua Kakou. This exploration is done in collaboration with the ILC provider and HI H.O.P.E.S.

The Liliuokalani Trust Research and Evaluation team approached CWSB in late 2022 about sharing de-identified NYTD data outcomes. Through a short collaboration, CWSB was able to provide Liliuokalani Trust with the de-identified data. The data was brought before the Native Hawaiian Research Hui with researchers from Liliuokalani Trust, Kamehameha Schools, and the Office of Hawaiian Affairs. NYTD data outcomes were used to support additional Hawai'i Wellbeing reports, which are available for review at <https://www.ksbe.edu/research/imi-pono-hawaii-wellbeing-survey>

Planning for the Next Five Years

CWSB reviews its efforts on an ongoing basis and is always looking for ways to increase transparency and collaboration. Several strategies that have been identified and which are being considered for future implementation for Cohorts 6 and 7 include, but are not limited to, the following:

- EPIC Ohana will attempt to enroll all NYTD survey respondents in the HI HOPES Match program after completing the baseline survey, which will provide participants with a matched savings account and promote more frequent contact to ensure updated information.
- EPIC Ohana will contact young people in NYTD cohorts during non-survey years to gather new information, assess whether youth could use help connecting to resources, and enhance engagement by providing youth with a gift card.
- EPIC Ohana will use funds through its ILC contract to provide small stipends to young people who participate in surveys, including short surveys to update contact information.

CWSB believes that through its ongoing collaborations and partnerships, the programs designed to serve youth and young adults will continue to be revised and enhanced to improve outcomes for Hawaii's youth and young adults.

8. Youth-In-Court Facilitation Program

Since approximately March 2015, the Youth-in-Court facilitation program has provided orientations and support to youth who attend court hearings and conferences with their judge in their child welfare cases; this role is unique to Hawaii and perhaps in only one other state. The current facilitator is a UH graduate and former foster youth and is the program's first Youth-in-Court Facilitator. The facilitator meets with youth in the court waiting area to distribute and review a brochure for youth regarding the CWSB court process to let youth know they can request a pre-hearing meeting to speak to the presiding judge while accompanied by the guardian ad litem (GAL). The brochure explains foster care and what can happen while in foster care, the roles and

responsibilities of the parties in the case, the various child protective hearings, and the Child Protective Act (CPA) Rights of Children in Foster Care. The guide also includes a list of resources geared towards foster youth who may be planning for life after foster care. The facilitator helps the youth prepare for their meeting with the judge, attends the court hearing if the youth request it and if approved by the judge, and helps the youth debrief after the meeting.

The facilitator also meets with young adults in the Imua Kakou program to answer questions about their services and obtain feedback about the young adult's court experience. During the pandemic, youth were not allowed to attend court hearings; thus, the responsibilities of the facilitator shifted to assisting youth apply for enhancements funds and other resources, ensuring youth have their vital documents, and participating in planning activities to support youth during the pandemic through virtual means. In early 2023, the Oahu Family Court resumed welcoming youth at court and strongly encourages youth to meet with their presiding judge virtually or in person as required by the Child Protective Act. The facilitator has thus resumed her original functions and continues to review the case files of older youth on Oahu to ensure they receive their vital documents and records when they attain age 18.

Planning for the New Five Years

The facilitator will continue her current work with youth at court hearings and conferences with the judge and ensure that youth have their vital records when they attain age 18. The facilitator is also part of a UH Law School team that recently began to create an activity book for young children (below age 5) in foster care to explain foster care and the roles of the adults involved in their case.

X. RECENT HAWAII LEGISLATION

A. STATE LEGISLATION IMPACTING HUMAN SERVICES & CHILD WELFARE SERVICES

The 32nd Hawaii State Legislature, 2024 passed bills impacting DHS and CWSB. The following brief describes pending changes in Hawaii law. (Note – as of 06/08/24, bills without Act numbers are not yet signed or will become law without Governor' Green's signature; these links will not work after December 2024.)

The major focus of the 2024 session of the Hawaii State Legislature was addressing the impacts of the devastating August 8 – 9, 2024, Maui wildfires. Significant appropriations were directed to meet the housing and other needs of wildfire survivors and Maui County. However, the Legislature also appropriated funds and passed a number of measures impacting children and families, including those served by the Department of Human Services and the Child Welfare Services Branch. The Legislature also passed several Department proposals that will change aspects of child welfare practice.

HB470 HD2 SD2 RELATING TO MINORS.

Description: Clarifies the definition of "provider" as it relates to the entities eligible to provide no-cost emergency shelter and related services to a consenting minor to include certain organizations that are not considered child placing organizations or child caring institutions. Sunsets 6/30/2029. (SD2)

The key point of this bill is that it amends section 346-17.6, HRS, authorizing providers who meet five conditions to provide no-cost shelter to no more than five minor children per day for up to 30 days, even if they are *not* child-placing organizations or child-caring institutions as defined in section 346-16, HRS, and authorized by DHS per section 346-17, HRS, to provide care and maintenance for children.

DHS acknowledges the need for additional youth shelters to address the needs of minors and youth who need emergency shelter due to familial dysfunction or housing instability. DHS strongly prefers that the organizations providing emergency shelter and care of minors be subject to health and safety standards per section 346-17, HRS. DHS is very concerned that, as drafted, any "organization" could provide "no cost" shelter for up to 30 days for no more than five minor children per day without having to attest to meeting any health or safety standards or be required to maintain minimum insurance.

Child Welfare Services Branch will need to review its administrative rules regarding licensing and consider whether a rule may be drafted to address these statutory changes. If not, DHS may need to propose additional legislation. Also, DHS will need to consult with the federal Administration on Children and Families (ACF) regarding any additional steps the agency must

take if a minor child, who is the subject of a child welfare case, seeks shelter at a no-cost shelter that DHS does not authorize. DHS will also need ACF clarification regarding steps that recipients of the Runaway and Homeless Youth Act grant funds must do to comply with that Act if the organization is not authorized by DHS per section 346-17, HRS, to provide care and maintenance of children.

HB1800 HD1 SD1 CD1 RELATING TO THE STATE BUDGET.

Description: Adjusts and requests appropriations for fiscal biennium 2023-2025 funding requirements for operations and capital improvement projects of Executive Branch agencies and programs. (CD1)

The Legislature appropriated funds to DHS that will add resources for families and children, including:

- Funds for the Medicaid program that increases payments for Applied Behavioral Analysis (ABA) services. ABA is a type of behavior modification service provided primarily for children with autism;
- Funds for Child Welfare Services to enhance permanency services to increase utilization;
- Increased special fund ceiling limit to support Family First Hawaii and services to address spouse and child abuse;
- Capital improvement funds to build the Comprehensive Child Welfare Information System; and
- Funds to the Office of Youth Services to support mental health services for youth in residential safe houses, LGBTQ+ youth, and youth who do not meet the program requirements to access services through the Department of Health's (DOH) Child & Adolescent Mental Health Division.

HB2042 HD1 SD1 CD1 RELATING TO MENTAL HEALTH.

Description: Appropriates funds for the Department of Health to contract for the provision of youth mental health and wellness services to address the mental health and wellness needs of youth in the State. (CD1)

The Legislature also appropriated additional funds to DOH for community-based mental health programs.

HB2425 HD2 SD2 RELATING TO THE CHILD ABUSE AND NEGLECT CENTRAL REGISTRY.

Description: Clarifies that a confirmed report of child abuse or neglect, harm, or threatened harm will result in the perpetrator's name being maintained in the central registry. Clarifies when a person's name may be expunged from the central registry and establishes a process for expungement upon request. Takes effect 7/1/2025. (SD2)

The Department proposed this measure to create processes for individuals and the Department to remove names from the State's child abuse and neglect (CAN) central registry. Currently, unless the confirmation of abuse is challenged at the outset of a case or at the point of confirmation, a person's name remains on the CAN registry indefinitely; there is no way for a person to be removed from the registry. Being on the CAN registry may impact possible employment in education, health, or human care industries and is considered in child adoption proceedings. Having an expungement process recognizes that people and circumstances can change over time. Expungement provides a way for young parents, often from vulnerable communities whose names are in the CAN registry, to be unburdened from their earlier life mistakes or inability to protect themselves or their children and be able to pursue more opportunities to improve their well-being. The Department also needs the authority to periodically purge files from the registry that are no longer relevant.

HB2426 HD2 SD2 RELATING TO RELATIVE RESOURCE CAREGIVERS.

Description: Clarifies when a relative seeking to be a resource caregiver for a child is entitled to an administrative appeal for the Department of Human Services' denial of a foster home license. (SD2)

The Department proposed this measure to clarify when a relative seeking to be a resource caregiver could seek administrative review. The law needed amendment to address situations where more than one appropriate relative applies to be a foster placement, and the Department can only place the child with one appropriate applicant and issue only one child-specific license. As the Department can only issue one child-specific license at a time, when the Department places a child with one appropriate applicant over another appropriate applicant, this decision is not a denial to issue a license for failing to meet licensing standards and, consequently, not subject to administrative review.

HB2430 HD2 SD1 CD1 RELATING TO SUMMER ELECTRONIC BENEFITS TRANSFER FOR CHILDREN PROGRAM.

Description: Establishes the Summer Electronic Benefits Transfer for Children Program. Appropriates funds. (CD1)

DHS proposed this measure to implement the new federal Summer EBT program aimed to reduce hunger and food insecurity for children who lose access to free and reduced-price meals through the National School Lunch Program and School Breakfast Program during the summer when school is not in session. This measure will assist DHS and DOE in implementing the Summer Electronic Benefits Transfer for Children Program (Summer EBT). The Consolidated Appropriations Act, 2023, P.L. 117-328, authorized a permanent, nationwide Summer Electronic Benefits Transfer for Children Program (Summer EBT) beginning in 2024. Summer EBT benefits for Hawaii is set at \$177 per child in public schools and public charter schools during the summer break. Last summer, during the 2023 summer break, DHS issued \$18,256,166 in P-EBT benefits to 122,334 students through a similar Pandemic-EBT program.

SB2245 SD1 HD2 RELATING TO THE CHILD PROTECTIVE ACT.

Description: Adds a definition for "exigent circumstances" and amends the definitions of "harm" and "imminent harm" under the Child Protective Act (Chapter 587A, HRS). Clarifies when the police may take protective custody of a child and when the Department of Human Services may assume temporary foster custody of a child when exigent circumstances are present. Creates a judicial process for filing a petition for an order for protective custody, including the circumstances where such an order may be issued without notice and without a hearing. Effective July 1, 2025. (HD2)

The bill was needed to update, clarify, and align child welfare definitions and practices. The HD1 inserted the contents of HB 2428 HD2, which was the amended version of the administration's measure. This clarifies when the police may take a child into protective custody without a court order, when the Department may place a child in temporary foster custody without a court order, and when the Family Court may issue an order for protective custody of a child. Three administration measures are aimed at improving child welfare practices and this is the most significant measure of the three as it is focused on the process of placing children into protective custody and judicial oversight.

SB2475 SD2 HD2 CD1 RELATING TO EDUCATION.

Description: Establishes a harm to students registry, for all early learning programs or schools and K-12 educational institutions within the State, which contains information on school employees, contractors, or volunteers for whom, as result of an investigation, a final finding has been issued that the individual has inflicted harm on a student. (CD1)

The bill establishes a harm to students registry to be maintained by the Department of Education. Private schools, public charter schools, and "early learning programs" are required to conduct investigations, ensure due process, and provide the names of individuals confirmed to have harmed children in early learning and K-12 settings. The final bill draft deleted

language authorizing the Department of Education from providing information in the registry to the Department of Human Services. As drafted, there is potential for individuals included in the Harm to Students Registry to continue to gain employment or volunteer in settings serving children, youth, and vulnerable individuals as access to the registry is limited to early learning and K-12 institutions.

SB3094 SD2 HD2 CD1 RELATING TO PEER SUPPORT SPECIALISTS.

Description: Establishes a Peer Support Specialist Working Group within the Office of Wellness and Resilience to develop and make recommendations for a framework for peer support specialists in the State. Requires the working group to submit a report to the Legislature before the Regular Session of 2025. Sunsets the working group on 6/30/2025. (CD1)

DHS supports this administration measure to increase peer specialists in health care settings, assist in breaking down the stigma that may keep someone from seeking health care services and improve communication between patients and their health care providers. Current programs at DHS include parent peers and youth peers in the child welfare context, and some of the health plans are engaging forensic peer specialists to work with the reentry population.

Consolidated Appropriations Act, 2024, P.L. 118-42 (Act). On March 9, 2024, President Biden signed the Consolidated Appropriations Act, 2024, P.L. 118-42 (Act), which included the Compact of Free Association Amendments Act of 2024. This Act restored federal benefits to citizens from Compact nations (the Republic of Palau, the Federated States of Micronesia, and the Republic of the Marshall Islands) residing in the United States, including TANF, SNAP, Supplemental Security Income (SSI), and authorized eligibility for FEMA disaster assistance. Access to federal benefits extends these safety nets and concrete supports to many Compact residents living in Hawaii.

Lastly, on April 30, 2024, ACF issued its final rule under Titles IV-E and IV-B for children in foster care who are LGBTQI+. The proposed rule was published on September 28, 2023. Federal law requires that state and tribal title IV-E and IV-B agencies (“agencies”) ensure that each child in foster care receives “safe and proper” care and has a case plan that addresses the specific needs of the child while in foster care to support their health and wellbeing. The rule becomes effective on July 1, 2024, and CWSB must implement the provisions on or before October 1, 2026.

XI. PAYMENT LIMITATIONS – TITLE IV-B

A. PAYMENT LIMITATIONS – TITLE IV-B, SUBPART I

1. In the past, the State of Hawaii has not used Title IV-B, Subpart 1 funds for childcare, foster care maintenance, or adoption assistance payments, and has no plans in the future to use those funds.
2. For FFY 2005, the State expended \$0.00 of Title IV-B, Subpart I funds for childcare, foster care and adoption assistance, and expended no State match for these funds for these services.
3. As of April 1, 2024, the State had not expended Title IV-B, Subpart 1 funds for childcare, foster care maintenance, or adoption assistance payments for FFY 2023.
4. The State of Hawaii has not used in the past and has no plans in the future to use non-federal funds expended for foster care maintenance as part of the State match for Title IV-B Subpart 1 funds. However, should this become an option, the Department will consult with its federal partners on any appropriate changes.
5. As of April 1, 2024, the State had not used non-federal funds expended for foster care maintenance as part of the State match for Title IV-B Subpart 1 funds in FFY 2024.
6. Refer to the Data Booklet, *Figure 129: Title IV-B, Subpart I Child Care, Foster Care and Adoption Assistance Comparison FFY 2005 and FFYs 2020 – 2024*, for the comparison between the Title IV-B, Subpart I funding and expenditures for FFY 2005, FFY 2020, FFY 2021, FFY 2022, FFY 2023, FFY 2024, and the planned expenditures for FFY 2025 for childcare, foster care and adoption assistance.
7. In the past, the State of Hawaii has not used more than 10% of the Title IV-B, Subpart I federal funds for administrative costs, and has no plans in the future to use more than that percentage. *Refer to current and prior forms, CFS-101, Parts I and II.*

B. PAYMENT LIMITATIONS – TITLE IV-B, SUBPART II

1. 1992

The base 1992 amount of State and local share expenditures for the purposes of Title IV-B, Subpart 2 was \$5,258,623.

2. FFY 2025

As a result of the revised statutory definitions of family support and family reunification, Hawaii does not plan to make changes in its use of Title IV-B, Subpart II funds, nor does Hawaii plan to change its service array. The percentage of funds for each service

category approximates at least 20% of the total grant. The funds allocated to each service category include only funds for service delivery. No funds are being requested or allocated for planning or services coordination. See the Data Booklet, *Figure 130: Title IV-B-2 Service Categories and FFY 2023 Funding* for information on Hawaii's use of Title IV-B, Subpart II for FFY 2023.

3. FFY 2022

For FFY 2022, the actual expenditures for Title IV-B, Subpart II in State funds was \$358,041.

For FFY 2022, the actual expenditures for Title IV-B, Subpart II in federal funds was \$1,074,125.

4. FFY 2024

Refer to the Data Booklet, *Figure 130: Title IVB-2 Service Categories and FFY 2023 Funding* for information on Hawaii's use of Title IV-B, Subpart II for FFY 2024, as it follows the same percentage pattern. Hawaii's plans for Title IV-B, Subpart II expenditures for FFY 2025 will follow the same pattern as FFY 2024 funding. These funding amounts, percentages, and areas of focus are based on Hawaii's continuous assessment of communities' unmet needs. These funds support essential services in the designated geographic areas.

C. EDUCATION AND TRAINING VOUCHERS (ETV)

For the number of ETVs awarded for the 2023-2024 School Year, see Attachment D: Annual Reporting of Education and Training Vouchers Awarded.

D. CFS-101

See Attachment B for CFS-101 Part I, CFS-101 Part II, and CFS-101 Part III in Microsoft Excel and PDF format.

E. FFPSA Transition Funds

Overview of the Past Five Years

Family First Prevention Services Act (FFPSA) Transition Funds. The State of Hawaii received \$1,955,441 in Family First Prevention Services Act (FFPSA) Transition Grant funding to support a successful systemic transition to Family First Hawaii (FFH) implementation. During FFY 2020 and 2021, no expenditures were charged to the FFPSA Transition Funds. In FFY 2022, Transition Funds were utilized to partially fund Home Visiting Services (HVS) that implemented the

evidence-based models Parents As Teachers (PAT) and Healthy Families America (HFA). Home Visiting Services are essential for enhancing positive parenting skills and protective factors, while preventing maltreatment in families with children ages 0-5. Partial funding was also provided for the FFPSA FFH evaluation contract with the University of Hawaii, Center on the Family.

A total of \$1,347,933.80 was expended in FFY 2022. In FFY 2023, \$259,645.90 was expended to continue support of Home Visiting Services and the FFPSA FFH evaluation contract. As of May 2024, the remaining Transition Funds of \$7,759.34 will be used to sustain the FFPSA FFH Evaluation contract until fully expended in this current fiscal year.

FFPSA Certainty Funds. The State of Hawaii was awarded a total of \$8,269,417 in FFPSA Certainty Funds across FFY 2022 and FFY 2023. In FFY 2022, no funds were expended while Hawaii assessed service needs and developed an expenditure plan. By April 2023, \$1,677,543 had been spent on supporting FFH services, namely Intensive Home-Based Services (IHBS) for East Hawaii and expanding IHBS to Kauai and Maui. This intensive service aims to preserve families by preventing out-of-home placements and supporting family reunification. The total expenditures of \$2,537,616,92 for FFY 2023 were utilized for statewide Home Visiting Services, IHBS contracts for East Hawaii, Maui, and Kauai, and Ohana Conferencing. Ohana Conferences are collaborative meetings that bring together families, friends, relatives, CWSB staff, service providers, and other support systems identified by the family. The model is strengths-based and solution-focused and the meetings help to create plans that strengthen the family while making decisions that are in the best interests of the child.

CWSB identified additional initiatives for 2023-2024. Continuous and ongoing assessment of CWSB needs has led to a shift in how the remaining Certainty funds will be expended. Refer to the Annual Update section below for further information.

- FFPSA FFH Evaluation Contract: Continuing funding for the FFPSA FFH evaluation contract to supplement Transition funds.
- IHBS Expansion: Expanding IHBS on Oahu and East Hawaii to address service gaps identified from data collected in calendar year 2022 on the number of families with IHBS referrals that were not served due to IHBS provider capacity.
- Crisis Counseling Expansion. Expanding Crisis Counseling services to ensure immediate support and prevent foster care placements. Crisis Counseling services, used by CWSB staff when IHBS is unavailable, are a 24/7 short-term intervention to ensure safety, stabilize the home, provide emotional support, and prevent foster care placement. FFH leadership will assess the need to expand these services.

- Parent Partner Expansion. Adding three full-time Parent Partners through the Family Wrap contract to provide early support to child welfare-involved parents, aimed at preventing foster care placement or to facilitate early reunification.
- Two Makua Expansion. Convening an additional 50 meetings to the current Two Makua Meeting service goal of 50 meetings per year. Two Makua Meetings are held within days of child removal to foster collaboration between birth parents and Resource Caregivers.
- Concrete Supports. Providing concrete supports for families at risk of child removal by developing or expanding contracts with agencies to distribute funds for essential needs.

Annual Update

FFPSA Certainty Funds. As of March 2024, a total of \$3,478,012.09 from the Certainty Funds has been expended on IHBS contracts for East Hawaii, Maui, and Kauai, statewide HVS, and Ohana Conferencing. The remaining Certainty Funds will continue to support these services, with additional allocations for sustaining the FFPSA FFH Evaluation contract.

Regarding the proposed Certainty Funds initiatives (listed in the above section), the following proposals have been addressed:

- Parent Partner Expansion and Concrete Supports. A supplemental contract under the Family Wrap contract for three full-time parent partners (PP) is scheduled for implementation in July 2024. PP have been identified as a useful resource in helping to support CWSB involved parents navigate the CWSB system and achieve positive outcomes. These PP will provide early support to non-Wrap parents during their initial involvement with CWSB, or prior to and during reunification. Services provided by these early onset PP include:
 1. Meeting and greeting parents early in a case, possibly at family court hearings.
 2. Providing “comfort calls” to parents early in a case, offering information and emotional support over the phone.
 3. Being available as a “warm line” to connect parents to services along the way.
 4. Co-facilitating Two Makua Meetings.
 5. Attending Ohana Conferencing with parents.

The supplemental contract also includes funding for concrete supports or flexible funding for families at risk of child removal to help meet essential needs, alleviate stressors contributing to risk and safety factors, and promote child and family well-being. Additionally, a part-time community navigator is included in this supplemental contract to assist with distributing these flexible funds and connecting families with

community resources. This \$273,484.00 supplemental contract is scheduled to be effective from July 1, 2024, through June 30, 2025.

- Two Makua Expansion. The initial proposal aimed to increase Two Makua Meetings by an additional 50 meetings per year. This goal has been difficult to meet due to various issues. CWSB has reassessed its needs and is shifting its focus to collaborating with EPIC to enhance CWSB staff communication with parents and RCGs and to build awareness of this service among all parties, highlighting the benefits of building and strengthening relationships. In addition, strategies are being discussed to increase referrals. Please refer to section IV.A.1.h for more information on Two Makua Meetings.

Planning for the Next Five Years

FFH leadership will continue to collect data and assess the need for the following proposed Certainty Funds initiatives: IHBS expansion for Oahu and East Hawaii and the statewide expansion of Crisis Counseling services. This assessment will involve gathering relevant data and holding meetings with geographic service providers to identify service needs and potential gaps. Through this collaborative approach, FFH aims to ensure that Certainty Funds are effectively allocated to address the most pressing needs and enhance service delivery across the state.

FFH leadership will also gather data from the Parent Partner Expansion and Concrete Supports supplemental Family Wrap contract to measure progress and evaluate successful outcomes for families who received these services. This outcome data will hopefully provide evidence to support the rationale for continued funding, demonstrating the program's effectiveness in achieving positive results for families.

CWSB aims to fully expend the FFPSA Certainty Funds by its lapse date of September 30, 2026.

F. MONTHLY CASEWORKER VISIT FORMULA GRANT

As of June 13, 2024, Hawaii had spent \$58,918.64 of this grant. This money paid for contracted assistance for caseworker visits to ensure that children in foster care are receiving monthly visits, particularly in situations where CWSB caseworkers have high caseloads. These visits help to ensure the child's physical and mental health and general wellbeing. During these face-to-face visits, the contracted caseworkers:

- complete safety assessments,
- check on physical and mental health needs,
- discuss social and educational issues,
- ensure the child is having regular contact with parents, siblings, and other key relatives, and
- make necessary referrals to services.

Hawaii plans to continue use of contracted caseworker visits in the next year and anticipates expending all formula grant funds by September 30, 2024.

G. STATE OF HAWAII CONTINUITY OF OPERATIONS PLAN

In May 2024, Hawaii updated its CWS Continuity of Operations Plan (COOP) to better address the recent wildfires that devastated Lahaina on Maui Island. Hawaii is submitting this updated plan with this APSR for FFY 2025. The State of Hawaii Emergency Management Agency partnered with the Department of Human Services to successfully ensure the continuity of CWSB crucial services through the Maui Wildfire crisis. Please read the description below about the effects on CWSB children in foster care and their resource caregivers and CWSB work during the crisis.

In early August 2023, the island of Maui was devastated by wildfires. The wildfires impacted both Maui upcountry and the Lahaina community, but most of the destruction occurred in Lahaina. Among the devastation, approximately ten CWSB resource caregiver families in the Lahaina community lost their homes. The fires impacted all phone lines, cellular towers, Wi-Fi signals, internet access, and satellite channels in the Lahaina community, making communication especially challenging during the early days of the crisis.

Maui CWSB staff completed a manual search and count of all children in foster care in the greater Lahaina region. All children under the placement responsibility of CWSB were located and determined to be safe.

Immediately following the initial day of fires, Maui CWSB staff were deployed to the War Memorial Stadium evacuation center to assist FEMA and the Red Cross in serving fire survivors. CWSB specifically assisted with helping families process paperwork to secure temporary housing through Airbnb and hotel shelters. In addition to tangible support at the evacuation center, using public and private funding, the Maui CWSB licensing worker arranged for gift cards to be given to those resource caregivers who no longer had homes and had current foster care placements.

The Associate Commissioner of ACF visited the island of Maui to observe federal, State, and local partnerships. A visit to the burn zone showed the overwhelming impact to the Lahaina community, and the day ended with a personal visit with six of the ten Lahaina resource caregivers whose homes were burned to the ground.

Throughout the Maui Wildfire horror and its aftermath, CWSB staff and resource caregivers worked together to keep all children in foster care safe, housed, clothed, and fed. CWSB staff has continued to partner with Hawaii Emergency Management Agency, FEMA, and community agencies to assist the resource caregivers whose homes were destroyed to access the supports and resources needed to ensure their safety and wellbeing.

H. FOSTER AND ADOPTIVE PARENT DILIGENT RECRUITMENT PLAN

The Past Five Years

Over the past five years, as part of Hawaii's Diligent Recruitment Plan, CWSB has collaborated with local contracted providers to specifically recruit for families able to foster children with the following characteristics:

1. Large sibling groups (3+ children)
2. Teens
3. LGBTQ+ community members
4. Native Hawaiian Ancestry
5. Micronesian ancestry
6. Special needs (medical, emotional, physical)

Highlights of recruitment efforts have included:

Native Hawaiian efforts

Native Hawaiian children continue to be overrepresented in foster care in Hawaii. The use of a Cultural Consultant through the Recruitment Contract assisted in connecting recruiters to key individuals in the Native Hawaii community, consulting on issues regarding cultural appropriateness and sensitivity, and translating collateral information into the Hawaiian language.

Community collaborations with groups specifically focused on serving the Native Hawaiian population have also supported recruitment in this area, in addition to providing a presence at events targeting the Native Hawaiian population and culture on each island.

Recruitment of LGBTQ+ resource families

Over the past five years, efforts to connect with open and affirming churches, to host information booths at LGBTQ friendly events, and to utilize open LGBTQ resource families to share their experiences at recruitment events have helped to identify potential resource caregivers for LGBTQ youth.

Child specific recruitment based on ethnicity

In addition to Native Hawaiian recruitment, other areas of focus included building and maintaining connections with the Micronesian community to assist in communicating the need for resource homes.

Teens

Hawaii continues to struggle to find placements for teens and children with special needs, especially those with high medical and/or mental health needs. CWSB has increased its efforts to collaborate with Department of Health specifically related to teens with mental health needs and medically fragile children and is meeting as often as possible to troubleshoot placement options for these children.

Annual Update

CWSB continues to develop and refine its process to support targeted recruitment and streamline the application and licensing process in order to expand its resource of licensed homes and to expedite unconditional licensure. CWSB data has shown the characteristics of children for whom foster homes are needed. The current population needs include:

1. Children of Native Hawaiian ancestry
2. Teen homes (ages 12-17)
3. Sibling groups (three children or more)
4. Children who identify in the LGBTQ+ community
5. Victims of sex trafficking

Recruitment Contract

As a part of this effort, CWSB is currently reprocurring its Recruitment Contract. The aforementioned foster care populations are to be targeted. Hawaii has also worked to enhance this service by participating at community events to promote awareness of CWSB and its need for resource homes, as well as developing a marketing plan to share with the broader community the benefits of being a resource caregiver and how to become a resource caregiver.

Over the past year, case workers and licensing workers have helped to recruit foster and prospective adoptive homes. At times, child specific homes have become placements for children who enter foster care. This recruitment effort has allowed children to remain in communities and with resource caregivers with whom they are familiar, which oftentimes supports reunification and/or resulting in a better permanency outcome.

Hawaii's Online General Licensing Website

Hawaii's online general licensing website continues to operate as the streamlined application process for all new resource caregiver applicants. Through the licensing portal, interested families and/or individuals can obtain information on becoming a resource caregiver as well as initiate an application for resource caregiver licensing. The website also provides available

resources to interested families and/or individuals to connect to community liaisons who can answer questions about becoming a resource caregiver in Hawaii.

In addition to the online licensing website, the Warmline continues to operate. Here, interested applicants can contact a provider to obtain information about becoming a resource caregiver, and connect to the online portal to begin the application process.

Planning for the Next Five Years

Over the next five years, CWSB hopes to continue to recruit foster and adoptive parent homes for children who enter care. CWSB will also continue to analyze the population of children that enter into care and ensure that the homes that are recruited meet the needs of foster youth. CWSB and its contracted provider will become more visible in the community by attending various community events to encourage families to become prospective foster and adoptive homes. Also, Hawaii's online general licensing website and Warmline will continue to operate and to provide prospective foster homes multiple avenues to begin the licensing process.

ATTACHMENTS

- A. DATA BOOKLET**
- B. CFS 101, PART I, II, AND III**
- C. CITIZEN REVIEW PANEL REPORT AND RESPONSE LETTER**
- D. ANNUAL REPORTING OF EDUCATION AND TRAINING VOUCHERS AWARDED**
- E. STAFF DEVELOPMENT OFFICE TRAINING PLAN 2024**
- F. FAMILY FIRST HAWAII FEEDBACK LOOP AND ORGANIZATIONAL CHART**
- G. CWSB TRAINING PLAN AND BUDGET FY 2024 TO 2028**
- H. MEMORANDUM REGARDING SOCIAL SECURITY ACT, TITLE IV-E SECTION 477
CERTIFICATIONS**
- I. STATE OF HAWAII CONTINUITY OF OPERATIONS PLAN**
- J. DEPARTMENT OF HUMAN SERVICES HEALTH CARE OVERSIGHT AND
COORDINATION PLAN**