

**2015 Annual Progress and
Services Report**
2015-19 Child and Family Services Plan

Submitted to: U.S. Department of Health and Human Services
Administration for Children and Families

Submitted by:
Colorado Department of Human Services
1575 Sherman Street
Denver, CO 80203

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COLORADO
Department of Human Services

Table of Contents

Table of Figures	2
Table of Tables	2
References	3
Glossary of APSR Acronyms	1
I. Introduction.....	4
II. Assessment of Progress	9
Systemic Factors	19
Program Service Description	44
Stephanie Tubbs Jones Child Welfare Services — Title IV-B, Subpart 1	44
Assessment of Specific Accomplishments	45
Promoting Safe and Stable Families Title IV-B, Subpart 2.....	65
III. Collaboration	68
IV. Program Support.....	76
V. Consultation and Coordination Between Tribes and States.....	80
Process Used to Consult with Tribes in the Past Year.....	81
VI. Health Care Services.....	87
Colorado’s Consultation with Physicians and Other Medical/Non-Medical Professionals	87
Youth Aging out of Foster Care and Options for Their Health Care Needs.....	89
VII. Disaster Plan	90
Procedures.....	90
VIII. Foster and Adoptive Parent Recruitment.....	91
IX. Monthly Caseworker Visit Formula Grants.....	96
X. Adoption and Legal Guardianship Incentive Payments	98
XI. Child Welfare Waiver Demonstration Activities.....	98
XII. Quality Assurance System	105
XIII. Services for Children Under the Age of Five	107
XIV. Child Abuse Prevention and Treatment Act (CAPTA) State Plan Update.....	108
Child Maltreatment Deaths	116
XV. Chafee Foster Care independence and Education and Training Vouchers programs.	117
Colorado Education and Training Voucher Program	128
XVI. Statistical and Supporting Information	133
XVII. Financial.....	134
XVIII. Appendices.....	135
Appendix A: Keeping Kids Safe and Families Healthy 2.0 Plan	136
Appendix B: Differential Response	137
Appendix C: List of Committees	138
Appendix D: Training Plan.....	140

Appendix E: Tribal Consultation Meetings Participants List	187
Appendix F: Foster Care and Adoptive Recruitment and Retention Plan	193
Appendix G: CAPTA CJA Grants	199
Appendix H: CAPTA Citizen Review Panel Reports.....	200
Appendix J: CFCIP Partners	206
Appendix K: Attachment E.....	207

Table of Figures

<i>Figure 1: Office of Children, Youth, and Families</i>	5
<i>Figure 2: Colorado’s Child Welfare Referrals</i>	6
<i>Figure 3: Child Victim Race and Ethnicity</i>	7
<i>Figure 4: Race Distribution of Children in Open Involvements</i>	7
<i>Figure 5: Hispanic and Non-Hispanic Ethnicity</i>	7
<i>Figure 6: Victim’s Age at Time of Abuse</i>	8
<i>Figure 7: Office of Children, Youth, and Families Stakeholder Involvement and Collaboration</i>	40
<i>Figure 8: State Volume Call Data from January 1 through April 6, 2015</i>	51
<i>Figure 9: State Call Volume: April 7 through May 12, 2015</i>	52
<i>Figure 10: Timeliness of Initial Response to Abuse/Neglect Assessments</i>	56
<i>Figure 11: Safety Assessment Forms Completed Accurately</i>	57
<i>Figure 12: Legally Freed Children Obtaining Permanency</i>	60
<i>Figure 13: The Safe Reduction of Children in Congregate Care</i>	60
<i>Figure 14: Colorado’s ICWA Compliance</i>	84
<i>Figure 15: A Community Social Marketing Model</i>	92
<i>Figure 16: Colorado’s CFCIP Services Array</i>	124
<i>Figure 17: Student Race Demographics</i>	130
<i>Figure 18: Student Gender</i>	130
<i>Figure 19: Student Use of ETV Funds</i>	132

Table of Tables

<i>Table 1: Child Victim Race/Ethnicity</i>	6
<i>Table 2: Victim’s Age at Time of Abuse</i>	8
<i>Table 3: Age Distribution of Children in Open Involvements</i>	9
<i>Table 4: ARD Review Questions for OOH and IH Services Used to Measure Performance</i>	23
<i>Table 5: Evaluation Summary of Trainers</i>	29
<i>Table 6: Workshop Content for Caseworkers*</i>	30
<i>Table 7: Workshop Content for Caseworkers*</i>	31

<i>Table 8: Workshop Content for Foster Parents*</i>	32
<i>Table 9: Caseworkers' Field of Study</i>	33
<i>Table 10: Highest Educational Level of Trainees (Foster Parents)</i>	34
<i>Table 11: Racial/Ethnic Background of Trainees</i>	35
<i>Table 12: Gender of Trainees</i>	36
<i>Table 13: Barriers to Youth Permanency</i>	59
<i>Table 14: Child Welfare Issues Identified in the Tribal Consultation Meeting</i>	83
<i>Table 15: Colorado FFY 2008-14 MCV Data</i>	96
<i>Table 16: Ages of Funded Students</i>	130
<i>Table 17: Academic Achievement</i>	131
<i>Table 18: Types of Schools Attended</i>	131
<i>Table 19: Length of Time to Earn Degree</i>	131
<i>Table 20: Types of Degrees Earned</i>	132

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GLOSSARY OF APSR ACRONYMS

ACF-CB	Administration for Children and Families, Children’s Bureau
ACHY	Advisory Committee on Homeless Youth
ADA	American with Disabilities Act
AFCARS	Adoption and Foster Care Analysis Reporting System
AIP	AFCARS Assessment Review Improvement Plan
APSR	Annual Progress and Services Report
ARCH	Applied Research in Child Welfare
ARD	Administrative Review Division
ASFA	Adoption and Safe Families Act
BOS	Balance of State
BHO	Behavioral Health Organization
BPCT	Best Practice Court Team
CAC	Child Advocacy Center
CANDRS	Child Abuse/Neglect Dispute Review Section
CAPTA	Child Abuse and Prevention Treatment Act
CASA	Court Appointed Special Advocate
CANS	Child and Adolescent Needs and Strengths
CAFAA	Colorado Association of Financial Aid Advisors
CCI	Colorado Counties Incorporated
CCR	Colorado Code of Regulations
CCR	Colorado Community Response
CCTF	Colorado Children’s Trust Fund
CCJTF	Colorado Children’s Justice Task Force
CDLE	Colorado Department of Labor and Employment
CDHS	Colorado Department of Human Services
CFCIP	Chafee Foster Care Independence Program
CFRT	Child Fatality Review Team
CFSP	Child and Family Services Plan
CFSR	Child and Family Services Review
CHSDA	Colorado Human Services Directors Association
CIP	Court Improvement Program
CJA	Children’s Justice Act
CMHC	Community Mental Health Center
CME	Care Management Entity
CMO	Central Management Organization
CMP	Collaborative Management Program
CPA	Child Placement Agency
CPM	Colorado Practice Model

CSFPA	Colorado State Foster Parent Association
CQI	Continuous Quality Improvement
C.R.S.	Colorado Revised Statutes
CRSP	Colorado Refugee Services Program
CTUG	Colorado Trails Users Group
CWAC	Child Welfare Allocation Committee
CWELC	Child Welfare Executive Leadership Council
CWTA	Child Welfare Training Academy
CWTS	Child Welfare Training System
DDHS	Denver County Department of Human Services
DIFRC	Denver Indian Family Resource Center
DCW	Division of Child Welfare
DDID	Division of Developmental and Intellectual Disabilities
DR	Differential Response
DYC	Division of Youth Corrections
DVP	Domestic Violence Program
ETP	Emancipation Transition Plan
ETV	Education and Training Vouchers
FAR	Family Assessment Response
FFTA	Foster Family-Based Treatment Association
FFY	Federal Fiscal Year (year starting October 1, ending September 30 th)
FTE	Full Time Equivalent
FY	Fiscal Year (calendar year)
HCPF	Health Care and Policy Financing
HB	House Bill
HC3	Hotline County Connection Center
HRA	High Risk Assessment
IGA	Intergovernmental Agreement
IART	Institutional Abuse Review Team
ICWA	Indian Child Welfare Act
ICPC	Interstate Compact on Placement of Children
IDEA	Individuals with Disabilities Education Act
IH	In-Home
LGBT	Lesbian, Gay, Bi-Sexual, Transgender
MCV	Monthly Caseworker Visits
MOU	Memorandum of Understanding
MPCWIC	Mountains and Plains Child Welfare Implementation Center
NCANDS	National Child Abuse and Neglect Data System
NFP	Nurse-Family Partnership
NFP-A	Nurse-Family Partnership-Augmentation

NYTD	National Youth in Transition Database
OBH	Office of Behavioral Health
OCYF	Office of Children, Youth, and Families
OEC	Office of Early Childhood
OES	Office of Economic Security
OJJDP	Office of Juvenile Justice and Delinquency Prevention
OPPLA	Other Planned Permanent Living Arrangement
OOH	Out-of-Home
OSRI	Onsite Review Instrument
PAC	Policy Advisory Committee
PAG	Practice Advancement Group
PIP	Program Improvement Plan
PMD	Performance Management Division
PSSF	Promoting Safe and Stable Families
P.L.	Public Law
QA	Quality Assurance
QPT	Quality Practice Team
RCHY	Rural Collaboration on Homeless Youth
RTAC	Regional Training Advisory Committee
RED Teams	Review, Evaluate, Direct Teams
RFA	Request for Application
ROM	Results Oriented Management
SACO	State Court Administrator's Office
SAMSHA	Substance Abuse and Mental Health Services Administration
SCC	SafeCare Colorado
SB	Senate Bill
SFY	State Fiscal Year (year starting July 1, ending June 30 th)
Sub-PAC	Subgroup of Policy Advisory Committee
START	State and Regional Team
TISOC	Trauma-Informed System of Care
Trails	Colorado's Statewide Automated Child Welfare Information System
T/TA	Training and Technical Assistance
TRP	Termination of Parental Rights
TTACC	Training and Technical Assistance Coordination Center
URM	Unaccompanied Refugee Minor
WIOA	Workforce Innovation and Opportunity Act

I. INTRODUCTION

The Colorado Department of Human Services (CDHS) is pleased to submit the 2015 Child and Family Services Annual Progress and Services Report (APSR). This report documents progress made in 2014-15 toward the goals and objectives in the 2015-2019 Child and Family Services Plan (CFSP) and describes the planned activities in Federal Fiscal Year (FFY) 2016. In State Fiscal Year (SFY) 2015, Colorado met many of its goals and objectives and made significant improvements in the delivery of child welfare services, such as the trauma-informed system of care and prevention initiatives. This 2015 APSR describes Colorado's accomplishments through the current SFY 2015.

The Colorado Practice Model (CPM) guides Colorado's child welfare services, a description of which can be found at www.COpracticemodel.com. CDHS has implemented evidence-based practices, used the Child Welfare Results Oriented Management (ROM) system to analyze the most recent data and to target program efforts, and have increased the Department's public engagement and transparency.

The report reviews Title IV-B Subparts 1 and 2, Child Abuse Prevention and Treatment Act (CAPTA), Adoption, Chafee Foster Care Independence (CFCIP), Education and Training Vouchers (ETV) Programs, Indian Child Welfare, Kinship Care, and Title IV-E and Non-IV-E Foster Care Programs. All requirements of 45 CFR 1357 are included within the report.

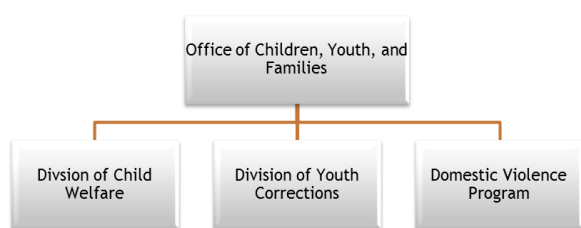
The 2015 APSR also updates the 2015-19 Child and Family Services Plan (CFSP) objectives and describes how federal IV-B, CAPTA, and CFCIP funds are used to accomplish the plan's priorities. The 2015-19 CFSP outlines Colorado's vision, mission, guiding principles, and programs/services that constitute the State's work with children, youth, and families. Additionally, the plan outlines goals, action steps, and baseline data to accomplish the outcomes of safety, permanency, and well-being for children and families in Colorado. Together, the CFSP and APSR contain the performance improvement planning elements of the Child and Family Services Review (CFSR). Information on state achievement of national performance standards and case-related outcomes are included in this APSR. The 2015-19 Child and Family Services Plan may be accessed at <http://www.colorado.gov/cs/Satellite/CDHS-ChildYouthFam/CBON/1251591217601>.

In accordance with 45 CFR 1355.53, CDHS utilized its Statewide Automated Child Welfare Information System (SACWIS), known as Trails, in developing the 2015 APSR along with data disseminated from performance outcome indicators derived by a Results Oriented Management (ROM) application and a CDHS performance management process called C-Stat.

CDHS is responsible for the program areas of child and family services, youth corrections, behavioral health, economic security, child care licensing, adult protection, veterans’ nursing homes, adult assisted living, and child care subsidy. CDHS is also the administering agency for Title IV-B, Title IV-E, the Child Abuse Prevention Treatment Act (CAPTA), Children’s Justice Act Grant, CFCIP and, the ETV Programs. Under CDHS, the Office of Children, Youth, and Families (OCYF) administers Colorado’s child welfare system.

OCYF is comprised of the Division of Child Welfare (DCW), the Division of Youth Corrections (DYC), and the Domestic Violence Program (DVP). Colorado’s child welfare system is state supervised and county administered. DCW oversees county departments of human/social services and contracted service providers. DCW provides policy guidance and leadership on child protective services, youth services, permanency services, and placement services. DYC

Figure 1: Office of Children, Youth, and Families



oversees the youth detention, corrections facilities, and parole. These facilities are state owned and operated, or state owned and privately operated as residential child care facilities. DVP oversees the domestic violence program fund, which is operationalized through 47 contract providers.

Colorado’s child welfare system is state supervised and county administered.

The state and federal government provide 80% of the funding for child welfare services. Counties contribute approximately 20% of the funding through local revenues. In accordance with statutory guidelines, the Child Welfare Allocation Committee has approved a funding allocation “Outcomes Model” that supports child welfare services in all counties. This “Outcomes Model” is based on seven drivers that include one-year child population estimates; one-year child poverty estimates; three-year-average congregate care days paid; adoption subsidy days paid; and three-year-average new adoptions. Two percent of the total child welfare block funding (nearly \$6.6 million dollars) is allocated based on three incentive-based performance goals: 1) 95% of children will achieve permanency; 2) 94.6% of children will not have a new substantiated report of maltreatment within six months of the original report; 3) 90% of child welfare assessments will be closed in 60 days or less. County incentives are distributed proportionally by child population on a quarterly basis.

Child Welfare Demographics

Colorado's child welfare demographics generally reflect Colorado's population trends, and have remained stable over time. The state population is 5,268,367, with 23.5% of the population under the age of 18. In SFY 2014, there were 83,305 calls referred to child welfare, of which 51,459 were screened out, and 31,846 were opened for assessment (investigation). The 31,846 assessments of families involved 54,895 children. Of these, 10,648 children were determined to be victims of child abuse and/or neglect. There were 32,330 open involvements (case opened for services); with 10,477 as new open involvements. Of the 32,330 total open involvements, 9,705 involved children in out-of-home (OOH) placements. Figure 3 and Table 1 illustrate the age and race/ethnicity composition for the 10,648 child victims in SFY 2014 assessments.

Figure 2: Colorado's Child Welfare Referrals

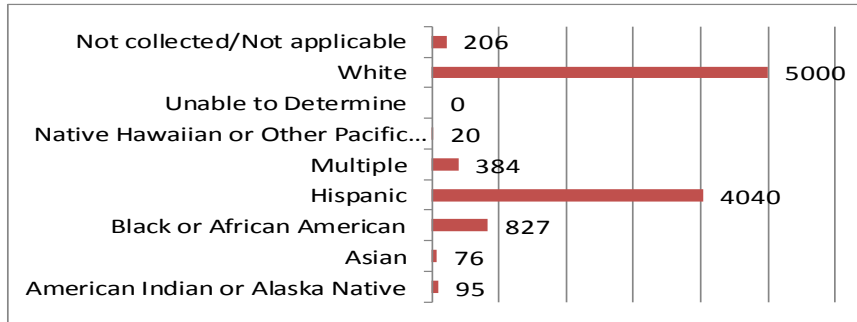


Race and ethnicity for the 32,330 children in open involvements are similar to previous years. Reports on race indicate that the majority of children are Caucasian (78.3%); followed by African American (10%), Native American (1.2%), Asian (0.5%), Hawaiian (0.2%), two or more races (6.1%), missing data (3.4%), declined to answer (0.3%), and abandoned child, race not determined, (<0.0%). Of these 32,330 children, 36.0% are Hispanic, 57.1% are Non-Hispanic, 4.3% are unknown, 2.5% are missing data, and 0.1% declined.

Table 1: Child Victim Race/Ethnicity

Victim Race/Ethnicity	Count
American Indian or Alaska Native	95
Asian	76
Black or African American	827
Hispanic	4,040
Multiple	384
Native Hawaiian or Other Pacific Islander	20
Unable to Determine	0
White	5,000
Not Collected/Not Applicable	206

Figure 3: Child Victim Race and Ethnicity



Figures 4 and 5 provide the race and ethnicity distribution for children in open involvements.

Figure 4: Race Distribution of Children in Open Involvements

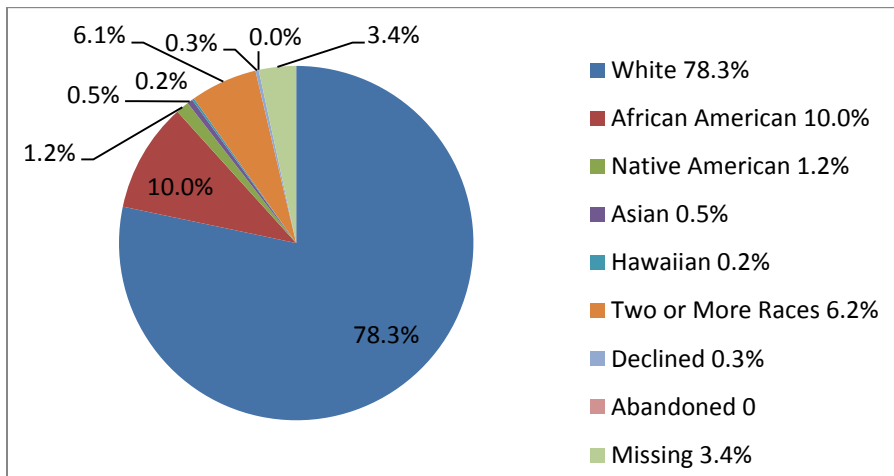


Figure 5: Hispanic and Non-Hispanic Ethnicity

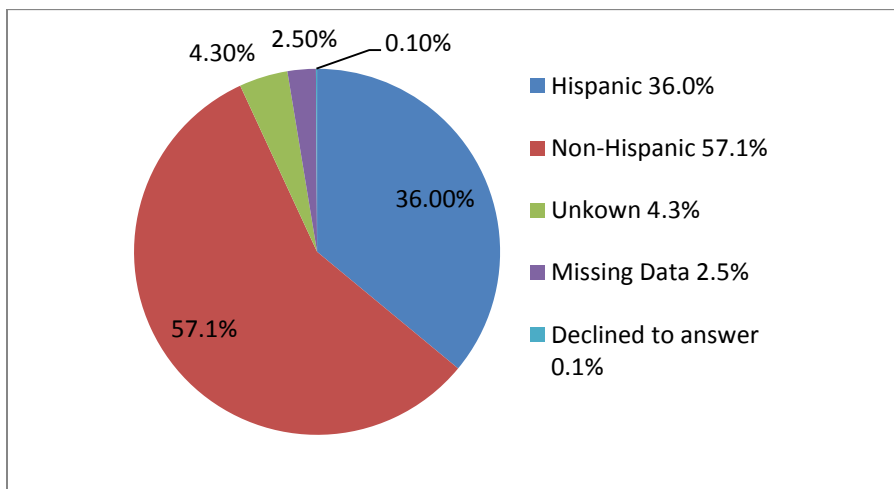
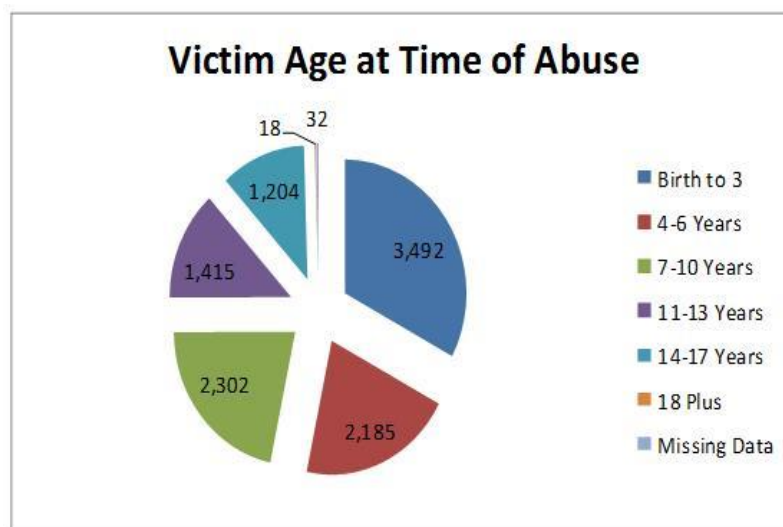


Table 2 and Figure 6 provide age information about Colorado’s child abuse and neglect victims.

Table 2: Victim’s Age at Time of Abuse

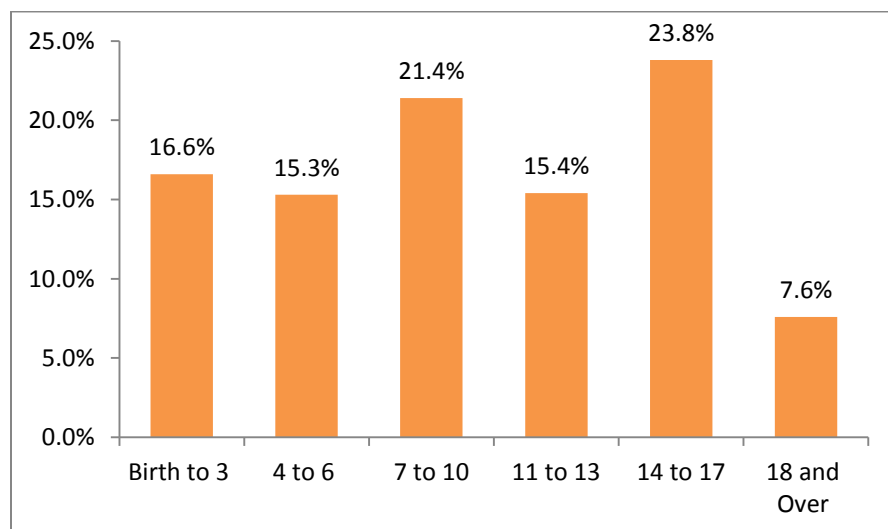
<i>Victim Age at Time of Abuse</i>	<i>Count</i>
<i>Birth to 3</i>	<i>3,492</i>
<i>4-6 Years</i>	<i>2,185</i>
<i>7-10 Years</i>	<i>2,302</i>
<i>11-13 Years</i>	<i>1,415</i>
<i>14-17 Years</i>	<i>1,204</i>
<i>18 Plus</i>	<i>18</i>
<i>Missing data</i>	<i>32</i>
<i>TOTAL</i>	<i>10,648</i>

Figure 6: Victim’s Age at Time of Abuse



Colorado’s gender distribution of children in open involvements is split almost equally, and Table 3 provides the age distribution.

Table 3: Age Distribution of Children in Open Involvements



II. ASSESSMENT OF PROGRESS

Colorado’s 2015-19 CFSP consists of goals and objectives that support safety, permanency and well-being outcomes for children, youth, and families. These goals and objectives integrate the child welfare initiatives that the State has begun over the last four years, and that will sustain the current progress. The following pages summarize the State’s progress on the CFSP’s three overarching goals:

- Goal 1: The services that Colorado’s children, youth, and families need are provided in their communities, at the right time.
- Goal 2: Youth and children remain safely at home with families.
- Goal 3: Institutionalize Colorado’s QA/CQI system.

The Measures of Progress for the goals follow narrative information regarding the progress on each goal and objective.

Intervention 1.4.2 “Implement trauma-informed assessments and services” in all counties has been modified to read “Implement trauma-informed assessments in all counties,” This modification is aligned with the goals developed for Colorado’s Title IV-E Waiver Demonstration Project.

Goal 1: The services that Colorado's children, youth, and families need are provided in their communities, at the right time.				
Objectives	Interventions	Progress and Accomplishments	Completed	Ongoing
1.1 Appropriately respond to child welfare reports and inquiries	1.1.1 Implement a statewide child abuse and neglect hotline	Colorado's Statewide Hotline was implemented January 2015.	X	
	1.1.2 Enhanced screening	Enhanced screening (now referred to as information gathering) has been implemented in all counties.	X	
	1.1.3 Refer to prevention services	Colorado's prevention programs are described in the Stephanie Tubbs Jones section.		X
1.2 Children are safe	1.2.1 Implement and monitor new safety and risk assessments	New Safety and Risk Assessment tool was implemented in 3-county pilot study.		X
1.3 Children and youth have timely permanency	1.3.1 Implement Title IV-E Waiver interventions of Family Engagement, Kinship Supports, and Permanency Roundtables in all counties	Each county is to implement at least one intervention by the end of the project.		X
	1.3.2 Develop and implement alternatives to congregate care	The Treatment Foster Care program has been developed and implemented via a pilot.		X
	1.3.3 Implement treatment foster care	The Treatment Foster Care program has been developed and implemented via a pilot.		X
1.4 Children and youth in OOH care have access to the physical and mental health services they need	1.4.1 Maintain collaborative efforts with HCPF to monitor psychotropic medications prescribed for children and youth in foster care	The Psychotropic Oversight Committee, a CDHS/HCPF collaboration, continues to monitor psychotropic medications for children and youth in foster care.		X

	1.4.2 Implement trauma-informed assessment in all counties	Trauma-informed screening has been implemented in eight Communities of Excellence.		X
Goal 2: Youth and children remain safely at home with families.				
Objectives	Interventions	Progress and Accomplishments	Completed	Ongoing
2.1 Children remain safely at home with improved child, youth and family assessments	2.1.1 Implement new safety assessment and statewide training	The Safety and Risk assessment has been implemented via a 3-county pilot.		X
	2.1.2 Accurately complete safety assessment forms	A C-Stat measure is used to monitor progress on a monthly basis.		X
Goal 3: Institutionalize Colorado's QA/CQI system.				
Objectives	Interventions	Progress and Accomplishments	Completed	Ongoing
3.1 Colorado's QA/CQI system is identified in all state and county practices and initiatives	3.1.1 Streamline communication between the DCW Research, Analysis, and Data Team, ARD, and other data systems and the counties	In 2014, the CQI Work group was revamped with an updated charter, and now reports to the Practice Advancement Group (PAG). The work group provides information on the research/analysis/data that is used to evaluate Colorado's progress on C-Stat, CFSR and CFSP goals. The work group uses Trails, ARD review findings, and ROM in its analyses.		X

Measures of Progress						
Goal 1: The services that Colorado's children, youth, and families need are provided in their communities, at the right time.	2014	2015	2016	2017	2018	2019
1. Colorado will meet 90% national goal for timeliness for three out of twelve months each year.	Colorado met the goal in the following months: •11/13: 90.2% •05/14: 92/5% •6/14: 90.8%					
2. Colorado will develop a baseline for the measurement of safety form accuracy for SFY 2015-16, increase 5% per year for SFY 2017-18 and will evaluate the safety and risk assessment and safety form accuracy in SFY 2019.			Baseline to be developed in 2016.			
3. The national standard for "absence of maltreatment recurrence" of 95% will continue to be met and maintained throughout the five-year period.	In SFY 2014, Colorado had an average performance of 95.5%					
4. The national standard of absence of child abuse and/or neglect in foster care (12 months) of 99.68% will be met nine of twelve months for each year of the five-year period.	In SFY 2014, Colorado had an average performance of 99.2%					
5. The median stay in OOH care prior to exit to reunification (Data Profile, Permanency Composite 1, Measure C1-2) will improve by 5% in 2017	Baseline (FFY 2013 AB) 5.9 Mos.					
6. The rate at which children/youth are placed in the most appropriate setting to meet their needs will improve by 1% annually for each of the next five years. Modification: The rate at which children/youth are placed in the most appropriate setting to meet their needs will be maintained at 98.4% to 99.4% annually for each of the next five years.	Baseline is established at 99.4%. %					
7. The rate of medical and dental examinations following placements will improve by 5% by 2018	In 2014, Colorado •Medical 66.8% •Dental 75.6%					

<p>By 2018, trauma-related activities will be as follows:</p> <ul style="list-style-type: none"> • 95% of children/youth will be screened by DCW for trauma • 90% of children/youth screened in for trauma by DCW will be assessed by OBH • 70% of children/youth assessed as traumatized will receive evidence-based trauma treatment 	<p>These measurements will be modified in 2015-16 to align with IV-E measures.</p>					
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Measures of Progress						
Goal 2: Youth and children remain safely at home with families.	2014	2015	2016	2017	2018	2019
1. The sample of screened out cases monitored by ARD will maintain the rate of 98% accuracy of decision-making	•9/1/2014: 97.2%					
2. Engagement of family members in case planning is enhanced as follows: •Youth: 99.9% engagement rate is maintained for nine out of twelve months for each year of the five-year period. •Mother: Engagement rate is base lined for SFY 2015-16, increased 5% per year for SFY 2017-18, and re-evaluated in SFY 2019.	Colorado's engagement of family members: •Youth 99.5% •Mothers 91.4 (baseline)% •Fathers 80.8% (baseline)					
Goal 3: Institutionalize Colorado's QA/CQI system.	2014	2015	2016	2017	2018	2019
1. Colorado's QA/CQI system will be evaluated by counties and CDHS to determine how the framework meets the CQI needs of DCW.	2014: Evaluation Process under discussion					

National Standards Data
Colorado's Statewide Performance

National Standard Measure	National Standard	Colorado's Performance	Data Period for National Standard
Permanency in 12 months for children entering foster care	40.4%	54.3%	11B, 12A, 12B, 13A
Permanency in 12 months for children in care 12-23 months	43.6%	45.5%	13B, 14A
Permanency in 12 months for children in care 24 months or more	30.3%	27.0%	13B, 14A
Re-entry to foster care in 12 months	8.3%	13.4%	11B, 12A, 12B, 13A, 13B, 14A
Recurrence of maltreatment	9.1%	4.2%	FFY2012, FFY2013
Placement Stability	4.12 moves per 1,000 days in care	Excluded due to data quality*	13B, 14A
Maltreatment in foster care	8.50 victimizations per 100,000 days in care	8.48 victimizations per 100,000 days in care	FFY2013 and 13A, 13B

*Colorado's placement stability data was excluded from the national standard analysis for the new CFSR Measures (Round 3). Colorado continues to improve the AFCARS reporting files submitted to ACF, but is still in the process of completing two items on the AIP: (1) identifying hospital stays that are less than 30 days/more than 30 days to indicate an acute vs. non-acute placement and (2) mapping the correct identifier for runaway status into the AFCARS file. Mapping the correct identifier for runaway status has been corrected as of the 2015A submission. Identifying acute vs. non-acute hospital stays is still in process, but scheduled to be corrected in the 2015B submission.

Systemic Factors

Systemic factors are Colorado’s child welfare operational systems that affect not only the experiences of the children, youth, and families served by the child welfare system, but also those who are responsible for serving them. Collectively, the systemic factors describe how the state child welfare system operates. There are a total of seven systemic factors, and each factor is comprised of one or more components that define the national standard, as established by the Administration for Children and Families (ACF):

1. Statewide Information System
2. Case Review System
3. Quality Assurance System
4. Staff and Provider Training
5. Service Array and Resource Development
6. Agency Responsiveness to the Community
7. Foster and Adoptive Home Licensing, Approval, and Recruitment

The data used to evaluate these factors lies outside the Adoption and Foster Analysis Systems; (AFCARS) and the National Child Abuse and Neglect Data System (NCANDS); therefore, the State’s qualitative and quantitative data are used to evaluate systemic functioning. A systemic factor is functioning if it is occurring, or is being consistently met on an ongoing statewide basis for all relevant populations.

The following section provides an overview of each systemic factor’s components and an evaluation of its functioning on a statewide basis.

1. Statewide Information System

The Statewide Information System is critical to maintaining information about Colorado’s children, youth, and families who are receiving child welfare services. The system contains a database of the children, youth, and families that are currently receiving services or have done so in the past. The system also ensures that placement information is readily available in the event of a geographical area or statewide disaster. The Statewide Information System is maintained and upgraded with state and federal funding.

The Statewide Information System is evaluated via the following component:

How well is the statewide information system functioning statewide to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or, within the immediately preceding 12 months, has been) in foster care?

Trails is Colorado’s certified state–county State Automated Child Welfare Information System (SACWIS) system. This comprehensive system has evolved considerably over its 14-year history. Since its implementation in 2001, Trails has been continually enhanced to address issues

and meet the changing needs of CDHS. The ACF has monitored SACWIS compliance since inception. Colorado addresses all issues identified by ACF through the AFCARS Assessment Review Improvement Plan (AIP), which consists of two documents: the General Requirement AIP and the Element AIP. The General Requirement AIP addresses overall data quality and system functionality, and the Element AIP addresses specific AFCARS elements. Colorado continues to work with ACF regarding outstanding AIP items, and submits quarterly responses to the AIP.

Trails contains the required user-facing windows and internal tables to collect demographic characteristics, location, permanency goals, and legal status of each child in the database. Children and youth served by county departments and youth sentenced to DYC are included in Trails. Trails integrates, with limitations, 11 data systems owned by other child and family serving state agencies. State and County users depend heavily on the approximately 1,000 structured and ad-hoc reports, which were developed from Trails to satisfy federal reporting requirements and to assess the performance and effectiveness of Colorado's child welfare services. In 2013–2014, Colorado enhanced Trails by adding the Results Oriented Management (ROM) System (accessible to Trails users) and the CDHS Community Performance Center, a public-facing child welfare e-data website. ROM is crucial to CDHS' ability to analyze performance and inform child welfare policy and practice improvements at the state and county levels.

Trails has been incrementally updated over the last fourteen years; however, the system is rooted in outdated technology and architecture. The system's interface is not reflective of modern technology and has limited mobility capabilities. In SFY 2014, OCYF contracted for an evaluation of the current system and received recommendations for potential system upgrades. The evaluation confirmed that a system overhaul is needed. Reinforcing the need for overhaul, the Colorado State Auditor's Office Child Welfare Workload Study Audit found that over 30% of county caseworker time is consumed by documentation within Trails, due to difficult navigation and time-consuming entry, but this does not delay data entry. In SFY2015, OCYF examined its options and determined that a modernization of the current system, built on the current database, is Colorado's best option. The Colorado Trails Modernization Project, legislatively supported by \$33 million over a three-year period, will roll out on July 1, 2015.

The Colorado Trails Modernization Project, led by the DCW Research and Data Unit, is overseen by the State-County Trails Modernization Work Group. The system's proposed interface will be built on a .NET platform system, facilitating authorized online access. The goals of the modernization are to:

- Improve usability for caseworkers;
- Improve reporting;

- Improve county case management;
- Integrate data to improve overall case management; and,
- Align with the CDHS Community Performance Center and the CDHS educational website and data center, which shares real-time data about the children, youth, and families involved in Colorado’s child welfare system.

2. Case Review System

The Case Review System is critical to the treatment services and the legal protections afforded children and youth in OOH care and their families. This systemic factor ensures that children and families are involved in the development of their case plans and that permanency is timely.

The Case Review Systemic Factor is comprised of five components:

1. *Written Case Plan: How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child’s parent(s) and includes the required provisions?*
2. *Periodic Reviews: How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every six months, either by a court or by administrative review?*
3. *Permanency Hearings: How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter?*
4. *Termination of Parental Rights: How well is the case review system functioning statewide to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?*
5. *Notice of Hearings and Reviews to Caregivers: How well is the case review system functioning statewide to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?*

Colorado’s case review system is administered by the Administrative Review Division (ARD). Independent from CDHS’ DCW and county departments of human/social services, ARD is aligned with CDHS’ larger quality assurance system within the Department’s Office of Performance and Strategic Outcomes. Since its inception in 1991, ARD has developed strong internal processes to ensure consistency across its reviewers. The division works collaboratively with DCW, DYC, and county departments to develop review tools and processes. Additionally, the division uses an instrument that includes the seven Systemic Factors and is mapped directly to the CFSR Onsite Review Instrument (OSRI).

The Case Review components are found in the following table, which provides an overview of the performance of Colorado's In-Home (IH) and out-of-home (OOH) services. The evaluation is based on SFY 2014 ARD Review data.

Table 4: ARD Review Questions for OOH and IH Services Used to Measure Performance

ARD OOH and In-Home Services Review Findings	
<i>1. Written Case Plan: How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child's parent(s) and includes the required provisions?</i>	
OOH #1713 Was the out-of-home provider engaged in case planning, during the review period?	Total cases reviewed: 6724 Yes: 6701 No: 23 N/A: 92 99.6%
OOH #1715 Was the child/youth engaged in case planning, during the review period?	Total cases reviewed: 3033 Yes: 3020 No: 13 N/A: 3783 99.5%
OOH #1717 Was the mother/guardian/kin engaged in case planning, during the review period?	Cases reviewed: 4255 Yes 3892 No 363 N/A: 2561 91.5%
OOH #1719 Was the father/guardian/kin engaged in case planning during the review period?	Cases reviewed: 3050 Yes 2467 No 583 N/A: 3766 80.8%
IH #6010 Was the child/youth engaged in case planning during the review period?	Cases reviewed: 492 Yes: 480 No: 12 N/A: 790 97.5%
IH #6012 Was the mother/guardian/kin engaged in case planning during the review period?	Cases reviewed: 1153 Yes: 1134 No: 19 N/A: 129 98.3%
IH #6014 Was the father/guardian/kin engaged in case planning during the review period?	Cases reviewed: 621 Yes: 572 No: 49 N/A: 661 92.1%

2. *Periodic Reviews: How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every six months, either by a court or by administrative review?*

ARD reviews all cases with children/youth in placement at six months and every six months thereafter, if the child remains in OOH care. ARD is under the Office of Performance and Strategic Outcomes and this review function is separate from the Office of Children, Youth, and Families.

3. *Permanency Hearings: How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter?*

IH #1703 If a child has been in care for 12 months or longer, is there a court order in the case file that was signed and dated within the last 12 months that contains reasonable efforts to achieve permanency language, and does not contain “nunc pro tunc” language?

Cases Reviewed: 4394
Yes: 4294
No: 100
N/A: 2422
97.7%

4. *Termination of Parental Rights: How well is the case review system functioning statewide to ensure that the filing of termination of parental rights proceedings occurs in accordance with required provisions?*

According to Trails data, Colorado filed 394 Termination of Parental Rights Motions in FFY 14. This number represents one filing per adult. ARD reviews cases with children in care 15/22 months who have not had a Termination of Parental Rights Motion filed and determines if the reason for not filing is compelling. The following question OOH #1762 addresses case practice.

OOH #1762 If a petition/motion to terminate parental rights has not been filed, and a compelling reason has been identified, in the reviewer’s opinion, is the compelling reason appropriate?

Cases Reviewed: 382
Yes: 269
No: 113
N/A: 6434
70.4%

5. *Notice of Hearings and Reviews to Caregivers: How well is the case review system functioning statewide to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?*

OOH #1708 Were all required parties invited to the review and given at least two weeks’ notice?

Cases reviewed: 6816
Yes: 6157
No: 659
N/A: 0
90.3%

Colorado is improving how treatment plans are completed and ensuring that the services provided are those that families need. Required parties are addressed in the plans and the objectives and action steps are clear in the expectations in order to achieve the permanency goal. Ongoing improvement is needed in the amendment of the plan or services to address barriers to progress. Colorado is improving the quality of treatment plans with the documentation of services that are directed at the areas of need identified through assessment.

Through its case reviews, ARD provides helpful information to CDHS, county departments, and caseworkers. The case reviews often highlight areas where additional training or technical assistance is needed. Analysis of data collected from ARD's review process identifies developing trends in Colorado's child welfare practice. OOH case reviews provide a forum for parents, providers, children, and youth to share their information and concerns. The efficacy of Colorado's case review process is supported by research that shows children whose cases were reviewed timely achieved permanency ten months sooner than those whose cases were not reviewed timely (Whitaker and Mackert, 2010).

ARD conducts a large number of reviews each year. In 2013, ARD conducted 7,700 six-month periodic OOH reviews, 1,300 reviews of cases receiving IH services, 2,200 reviews of assessments, and 1,712 reviews of screened out assessments. The Screened-Out Assessment Review data analysis indicated that 96.3% of the state's referrals were correctly screened out. IH, assessment, and screen-out reviews all rely on a random sampling methodology that provides data that are generalizable to county and state populations.

ARD's annual review of screened-out child abuse and neglect referrals assesses the consistency of county processes. The review involves caseworkers statewide who voluntarily participate in the review. The caseworkers are trained in the review processes, and they determine if cases have been screened-out appropriately.

ARD provides a data collection system that tracks and reports on other established indicators collected from case files, face-to-face interviews with required participants, written findings, and other data. ARD conducts case reviews using one of two instruments: 1) Out-of-Home Instrument or 2) In-Home Instrument. Each instrument closely follows the CFSR Onsite Review Instrument. Data collection measures comply with Titles IV-B and IV-E requirements, as well as program requirements. The ARD Steering Committee, which is comprised of county department administrators, state program staff, state court personnel, and members of the community, defines and develops reports that provide key stakeholders with relevant information that clearly identifies programmatic strengths and areas needing improvement.

ARD also assesses the quality of services delivered. Areas of focus include:

- Child safety;

- Special needs;
- Cultural needs;
- Health, behavioral health, and educational needs;
- Child and parents' progress in care;
- Visitation, compliance with the services plan;
- Progress towards alleviating the causes necessitating placement;
- Due process, appropriateness of the placement, barriers to permanency, appropriateness of the permanency goal, and reasonable efforts to achieve permanency; and,
- Whether additional or different services are needed.

Quality practice principles are reflected in the review protocol to help communicate to staff the type of case practice that is expected.

3. Quality Assurance System

The Quality Assurance System (QA system) is Colorado's evaluation and monitoring of its services system and outcomes. Colorado's QA system has not only improved since the 2009 CFSR, but the State and county QA systems are now aligned and integrated. Critically, state and county accountability for child, youth, and family outcomes has been strengthened.

The Quality Assurance System Systemic Factor is evaluated via one component:

How well is the quality assurance system functioning statewide to ensure that it is (1) operating in the jurisdictions where the services included in the CFSP are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures?

Colorado has implemented a dynamic quality assurance (QA) system that encompasses the activities of DCW, ARD, and the Performance Management Division (PMD), and the aims of initiatives such as the CPM, ROM, and C-Stat. Colorado's QA system engages all levels of state and county staff as well as the general public. Not only does the system provide tools for state, county, and community stakeholders to review statewide and county level performance, it also promotes individual as well as collaborative improvements in both state and county departments.

Four CPM components contribute to Colorado's QA system: 1) county Quality Practice Teams (QPTs); 2) the Practice Advancement Group (PAG); 3) the Promising Practices Work Group; and, 4) the Continuous Quality Improvement (CQI) Work Group. The QPTs are responsible for implementing CQI processes, with counties using CQI processes and tools to determine performance areas requiring improvement. The PAG guides Colorado's child welfare practice

and ensures that current and new practices meet the practice standards of the CPM base practice model. The Promising Practices Work Group, comprised of state and county members, determines if county-identified practice meets the threshold for a promising, evidence-informed or evidence-based practice that can be included in Colorado's Promising Practices Compendium. Finally, the CQI work group is a forum for QPT members to share their processes and to discuss new tools and resources that may be used both by the State and county QPTs in their CQI processes. Additionally, child welfare outcomes are scrutinized by the CQI Work Group to determine the individual practice that influences the outcome.

As discussed in the Statewide Information Systemic Factor (page 201), Colorado's ROM is primarily a performance management tool that allows state and county staff real-time data about state and county level performance on key outcome measures. Through the CDHS Community Performance Center website, the public-facing version of ROM, the public also has access to reports available in ROM. With increased access to real-time child welfare data and greater transparency with the general public, CDHS hopes to foster a better understanding of the policies, programs, and practices that are and are not working well within Colorado's child welfare system.

C-Stat is a highly collaborative initiative that involves CDHS' Executive Management Team, the DCW, ARD, the PMD, and county departments. PMD is primarily responsible for implementing and sustaining CDHS' C-Stat initiative. The separation between program (DCW) and review (ARD and PMD) is maintained through this productive and supportive working relationship. All three divisions work closely to ensure the focus is maintained on outcomes and data, along with accountability and action plans. ARD and DCW are routinely challenged to assess the efforts of their staff and ensure alignment with CDHS' strategic direction and the desired child welfare outcomes.

The three divisions also work closely with counties to discuss performance issues and provide technical assistance as needed. Collaboration between state and county staff is critical to the QA system's functionality. DCW has assigned subject matter experts to each county to provide program support and to support the county's CQI processes. The subject matter experts provide coaching and support through their ongoing working relationships with counties, providing timely resolution of practice issues and training needs. Using indicators drawn from Trails, DCW regularly reviews practices implemented by counties to improve CFSR and C-Stat outcomes. PMD staff routinely present C-Stat measures at county meetings and are available to counties for training and technical assistance. CDHS believes outcomes are more likely to be achieved when all stakeholders are invested in mutually-agreed upon practice values and outcomes. Moreover, frequent communication and collaboration between CDHS Executive Management Team, CDHS staff, county commissioners, county directors, and caseworkers

ensure Colorado's progress towards achieving the best outcomes for the children and families served by the child welfare system.

In addition to the initiatives listed above, ARD and DCW are engaged in other quality assurance activities that support Colorado's QA system. ARD manages County Foster Home Program Reviews and Child Fatality Reviews, as well as other reviews or requests, such as the reasons children and youth enter congregate care as a first placement. DCW conducts reviews of county programs, including the Adoption Subsidy Program, Title IV-E eligibility review, the counties' use of Trails, and other risk-based program reviews of county policies and procedures. DCW uses information from DCW program staff's reviews and ARD quality assurance efforts to evaluate if defined policy is supporting effective practice in service delivery to achieve child safety, permanency, and well-being.

4. Staff and Provider Training

Training ensures that caseworker and supervisory staff and foster care providers are provided the basic knowledge they need to perform their respective functions.

The Staff and Provider Training Systemic Factor is comprised of three components:

1. *Initial Staff Training: How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the CFSP that includes the basic skills and knowledge required for their positions?*
2. *Ongoing Staff Training: How well is the staff and provider training system functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?*
3. *Foster and Adoptive Parent Training: How well is the staff and provider training system functioning to ensure that training is occurring statewide for current or prospective foster parents, adoptive parents, and staff of state-licensed or approved facilities (that care for children receiving foster care or adoption assistance under Title IV-E) that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children?*

Colorado has made great strides in improving its training system as described in detail in Section IV, Program Support, on page 45. Key improvements have included: 1) the creation of a Training Steering Committee, comprised of community, state, and county staff, which provides recommendations on needed decisions to the Child Welfare Training Academy, and 2) the addition of four regional training sites. Colorado has a strong training system for staff and providers as well as inter-disciplinary groups. The training system offers courses for staff development as well as initial and ongoing training that includes the basic skills and knowledge required of all staff who deliver services pursuant to county practice.

The new structure allows for input from numerous stakeholders and vendors as well as increases accessibility throughout the state via regional training centers. The use of technology ensures the availability of training in all areas of the state. Counties may request to change their assigned regional center due to proximity to other sites or the frequency of particular courses offered. The accommodation to these counties is considered annually.

As Colorado has restructured its training system, it has developed a robust evaluation process. New caseworkers, supervisors, and foster parents evaluate every training session, with the purpose of providing feedback about the trainer and course content. The evaluation is intended to determine if training is providing the basic skills and knowledge needed to complete the functions required.

The aggregate data contained in the following tables show the detail of Colorado's current training evaluation of new caseworkers and foster parents for the time period of 7/1/13 to 6/30/14. Ongoing staff development courses are evaluated at each offering. The ratings in the tables do not add up to 100% due to slight rounding differences of +/-0.1%.

Table 5: Evaluation Summary of Trainers

Item	# of valid responses	Rating in each category (by numbers)				Average Rating
		Strongly Disagree (1)	Disagree (2)	Agree (3)	Strongly Agree (4)	
The trainer knew the subject area.	5395	2	7	917	4469	3.83
		0.0%	0.1%	17.0%	82.8%	
The trainer was well prepared and organized.	5393	4	52	1150	4187	3.77
		0.1%	1.0%	21.3%	77.6%	
The trainer related well to the group, answered questions, and responded to concerns.	5386	13	79	1041	4253	3.77
		0.2%	1.5%	19.3%	79.0%	
The trainer provided enough explanation and examples.	5386	6	75	1162	4143	3.75
		0.1%	1.4%	21.6%	76.9%	
The trainer gave me enough opportunities to practice skills. (if applicable)	5305	16	96	1395	3798	3.69
		0.3%	1.8%	26.3%	71.6%	
The trainer motivated me to want to try out the training ideas on the job.	5365	14	76	1366	3909	3.71
		0.3%	1.4%	25.5%	72.9%	
The trainer modeled cultural sensitivity.	5352	11	60	1308	3973	3.73
		0.2%	1.1%	24.4%	74.2%	

Table 6: Workshop Content for Caseworkers*

Item	# of valid responses	Rating in each category (by numbers)				Average Rating
		Strongly Disagree (1)	Disagree (2)	Agree (3)	Strongly Agree (4)	
The subject matter was at the right level of difficulty.	2249	8	57	843	1341	3.56
		0.4%	2.5%	37.5%	59.6%	
The workshop content was compatible with my agency's philosophy and policies.	2232	0	23	835	1374	3.61
		0.0%	1.0%	37.4%	61.6%	
My agency will support me in using this training on the job.	2216	0	17	752	1447	3.65
		0.0%	0.8%	33.9%	65.3%	
I learned specific job-related knowledge and/or skills.	2244	4	25	720	1495	3.65
		0.2%	1.1%	32.1%	66.6%	
I will use knowledge and/or skills from this training on the job.	2241	1	17	682	1541	3.68
		0.0%	0.8%	30.4%	68.8%	
I will be able to do my job better because of this training.	2235	3	35	727	1470	3.64
		0.1%	1.6%	32.5%	65.8%	
Families will benefit from my taking this course.	2230	2	26	770	1432	3.63
		0.1%	1.2%	34.5%	64.2%	

*Does not include New Worker: Modules 3 and 5, and most Foster Parent classes.

Table 7: Workshop Content for Caseworkers*

Item	# of valid responses	Rating in each category (by numbers)				Average Rating
		Strongly Disagree (1)	Disagree (2)	Agree (3)	Strongly Agree (4)	
The subject matter was at the right level of difficulty.	467	1	17	200	249	3.49
		0.2%	3.6%	42.8%	53.3%	
The workshop content was compatible with my agency's philosophy and policies.	466	0	2	209	255	3.54
		0.0%	0.4%	44.8%	54.7%	
My agency will support me in using this training on the job.	466	0	3	168	295	3.63
		0.0%	0.6%	36.1%	63.3%	
I learned specific job-related knowledge and/or skills.	466	0	8	156	302	3.63
		0.0%	1.7%	33.5%	64.8%	
I will use knowledge and/or skills from this training on the job.	466	0	5	139	322	3.68
		0.0%	1.1%	29.8%	69.1%	
I will be able to do my job better because of this training.	466	0	4	159	303	3.64
		0.0%	0.9%	34.1%	65.0%	
Families will benefit from my taking this course.	466	0	3	169	294	3.62
		0.0%	0.6%	36.3%	63.1%	
I was given sufficient time to practice using Trails.	465	11	36	161	257	3.43
		2.4%	7.7%	34.6%	55.3%	

*New Worker Modules 3 and 5 Only

Table 8: Workshop Content for Foster Parents*

Item	# of valid responses	Rating in each category (by numbers)				Average Rating
		Strongly Disagree (1)	Disagree (2)	Agree (3)	Strongly Agree (4)	
The subject matter was at the right level of difficulty.	659	2 0.3%	14 2.1%	215 32.6%	428 64.9%	3.62
The workshop content was compatible with my agency's philosophy and policies.	594	2 0.3%	4 0.7%	203 34.2%	385 64.8%	3.63
My agency will support me in using this training as a foster parent.	612	3 0.5%	8 1.3%	163 26.6%	438 71.6%	3.69
This class helped me with making my decision about being a foster parent.	630	10 1.6%	21 3.3%	180 28.6%	419 66.5%	3.60
I have more knowledge of what is required of me as a foster parent.	647	1 0.2%	7 1.1%	128 19.8%	511 79.0%	3.78
I will be a better foster parent because of this training.	633	3 0.5%	13 2.1%	133 21.0%	484 76.5%	3.73
I will use what I learned from this training as a foster parent.	646	3 0.5%	3 0.5%	128 19.8%	512 79.3%	3.78
Children will benefit from my taking this course.	650	4 1%	9 1%	159 24%	478 74%	3.71

**Only includes the following classes: Caring for Children who are Sexually Abused, Foster Parent Core, Healing Traumatized Children, Lifebooks, Mental Health & Medications, Nurturing Children with Special Health Care Needs, Sexual Health for Children in Foster Care, Strategies for Parenting Challenging Children, Teens Tweens & Everything In-between*

Table 9: Caseworkers' Field of Study

	# of valid responses	Social Work	Related Degree	Other
Adoption Options	143	55	70	18
		38.5%	49.0%	12.6%
Butler	799	295	409	95
		36.9%	51.2%	11.9%
Colorado State Foster Parent Assoc.	429	55	80	294
		12.8%	18.6%	68.5%
Colorado State University	33	13	16	4
		39.4%	48.5%	12.1%
Kempe	272	99	132	41
		36.4%	48.5%	15.1%
Metro State	158	55	76	27
		34.8%	48.1%	17.1%
Nat'l Assoc. for Counsel for Children	243	100	114	29
		41.2%	46.9%	11.9%
State of Colorado/DCW	140	47	63	30
		33.6%	45.0%	21.4%
Totals:	2217	225	305	373

Table 10: Highest Educational Level of Trainees (Foster Parents)

Provider		Highest Educational Level				
	# of valid responses	High School/GE D	Associate's Degree	Bachelor's Degree	Master's	Other
Adoption Options	144	1	2	77	62	2
		0.7%	1.4%	53.5%	43.1%	1.4%
Butler	803	1	2	433	358	9
		0.1%	0.2%	53.9%	44.6%	1.1%
Colorado State Foster Parent Assoc.	776	245	92	219	119	101
		31.6%	11.9%	28.2%	15.3%	13.0%
Colorado State University	35	2	1	19	13	0
		5.7%	2.9%	54.3%	37.1%	0.0%
Kempe	290	12	7	170	95	6
		4.1%	2.4%	58.6%	32.8%	2.1%
Metro State	169	7	5	90	61	6
		4.1%	3.0%	53.3%	36.1%	3.6%
Nat'l Assoc. for Counsel for Children	257	9	1	152	85	10
		3.5%	0.4%	59.1%	33.1%	3.9%
State of Colorado/DCW	150	8	8	88	41	5
		5.3%	5.3%	58.7%	27.3%	3.3%
Totals:	2624	263	108	493	296	114

Table 11: Racial/Ethnic Background of Trainees

Provider		Racial/Ethnic Background						
	# of valid responses	African American	Asian/Pacific Islander	Hispanic/Latino	Native American	Caucasian	Other	Mixed
Adoption Options	143	7	3	14	0	106	4	9
		4.9%	2.1%	9.8%	0.0%	74.1%	2.8%	6.3%
Butler	785	64	9	138	4	527	33	10
		8.2%	1.1%	17.6%	0.5%	67.1%	4.2%	1.3%
Colorado State Foster Parent Assoc.	768	68	9	107	5	542	26	11
		8.9%	1.2%	13.9%	0.7%	70.6%	3.4%	1.4%
Colorado State University	35	1	1	9	0	23	1	0
		2.9%	2.9%	25.7%	0.0%	65.7%	2.9%	0.0%
Kempe	287	29	0	50	1	195	8	4
		10.1%	0.0%	17.4%	0.3%	67.9%	2.8%	1.4%
Metro State	165	19	4	23	2	106	8	3
		11.5%	2.4%	13.9%	1.2%	64.2%	4.8%	1.8%
Nat'l Assoc. for Counsel for Children	225	11	6	40	1	159	4	4
		4.9%	2.7%	17.8%	0.4%	70.7%	1.8%	1.8%
State of Colorado/DC W	144	9	1	28	0	101	1	4
		6.3%	0.7%	19.4%	0.0%	70.1%	0.7%	2.8%
Totals:	2552	104	18	181	7	878	85	45

Table 12: Gender of Trainees

Provider	# of valid responses	Gender	
		Male	Female
Adoption Options	140	10	130
		7.1%	92.9%
Butler	779	121	658
		15.5%	84.5%
Colorado State Foster Parent Assoc.	752	275	477
		36.6%	63.4%
Colorado State University	35	4	31
		11.4%	88.6%
Kempe	278	28	250
		10.1%	89.9%
Metro State	161	26	135
		16.1%	83.9%
Nat'l Assoc. for Counsel for Children	239	31	208
		13.0%	87.0%
State of Colorado/DCW	145	23	122
		15.9%	84.1%
Totals:	2529	338	895

CWTS is expanding its evaluation process in SFY 2016 to include a post-training follow-up with caseworkers. While the initial follow-up will be focused on new caseworkers to evaluate how training adequately prepared them for their specific roles, the follow-up evaluation will evolve to include veteran caseworkers to evaluate more comprehensive components of training, such as the transfer of learning.

This “deeper dive” into evaluation is a critical CWTS strategy that will inform changes to training and ongoing staff development needs. Utilizing current research based on the transfer of training theory (Antle, Barbee, and van Zyl, 2008), CWTS will engage in a robust process to more comprehensively evaluate the effectiveness of new worker training. This comprehensive evaluation will include the transfer of training, which is directly related to the transfer of acquired skills, changes in attitudes, and prolonged retention of knowledge.

This focus on the transfer of training takes CWTS to the third level of Kirkpatrick’s (1959) training evaluation taxonomy by moving the CWTS evaluation process beyond the immediate reaction and knowledge increase of training, to the longer term effects of training on skill

enhancement and knowledge retention. Recent research (Antle, Barbee, and van Zyl, 2008) indicates that there are significant relationships between transfer of training and the educational level, personality type, and organizational/managerial support of case workers. As an example, “learning readiness” and organizational support were two of the strongest predictors of learning and transfer in this specific study. The post-training evaluation will facilitate the laying of the groundwork to collect these types of information, which will be used to inform CWTS curricula.

Participants in all CWTS trainings have expressed consistently high satisfaction across all aspects of the training experience, and that immediate knowledge gained through training is substantive and significant. The move to measure the effects of training beyond the end of the training day will further strengthen the effectiveness of CWTS, ensuring that the training system provides the most comprehensive and effective training possible to all caseworkers across Colorado.

5. Service Array and Resource Development

The service array and resources available to children, youth, and families are critical to the opportunity to achieve treatment goals and objectives in a timely manner. The service array and resource development are related to both State and local collaboration.

The Service Array and Resource Development Systemic Factor is comprised of six components:

1. *How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the CFSP?*
2. *Services that assess the strengths and needs of children and families and determine other service needs;*
3. *Servicers that address the needs of families in addition to individual children in order to create a safe home environment;*
4. *Services that enable children to remain safely with their parents when reasonable;*
5. *Services that help children in foster and adoptive placements achieve permanency; and,*
6. *Individualizing Services: How well is the service array and resource development system functioning statewide to ensure that services can be individualized to meet the unique needs of children and families served by the agency?*

Colorado is concentrating on the service areas that will improve safety, permanency, and well-being outcomes for children, youth, and families. A variety of data-driven, collaborative planning mechanisms have been used to identify areas and strategies for improvement. Current planning processes include:

- **Youth Services**

Colorado is making extensive changes in the area of youth services. Part of the planning process for these changes has been the coupling of a theoretical model of older youth development and needs, *The Colorado Theory of Change for Older Youth in Child*

Welfare, found in Colorado's 2015-19 CFSP (<http://www.colorado.gov/cs/Satellite/CDHS-ChildYouthFam/CBON/1251591217601>), with a youth services logic model that identifies universal practices for serving older youth and efforts to broaden and integrate services systems. This process, known as the Pathways to Success Initiative, has facilitated the identification of long-term goals and strategies that are based on an understanding of youth development. The work complements the legislatively required Statewide Youth Plan, the goals of which are to identify key issues affecting youth and align strategic efforts to achieve positive outcomes for all youth. The CDHS Pathways to Success initiative is being incorporated into the Statewide Youth Plan to address the needs of youth in OOH care. The Statewide Youth Plan process includes a committee of representatives from each youth-serving state agency and numerous county representatives that are charged with identifying gaps in the youth service system and making recommendations for reduced duplication and fragmentation. The Plan was submitted to State Legislators in September 2014, and was approved.

- **Identifying Service Gaps by Assessing and Aggregating Individual Case Needs**

As part of its continuum of care work, the Residential Care Collaborative, a Colorado county–state work group, developed a model for assessing and planning a continuum of care (prevention to post-permanency services) based on the needs of individual children, youth, and families. The model describes the status of the child welfare case, child/family characteristics, provider skill/performance expectation, and the needed service array. It was developed as a way to comprehensively identify overall current services, gaps in services, and service expectations at the various levels of care that are statewide expectations. For example, one of the service gaps identified was treatment foster care. This service was explored, and a Treatment Foster Care pilot was begun in October 2014 via phased implementation. The pilot will run for one year, at which time the pilot will be assessed for statewide implementation.

- **Colorado's Core Services Program**

A description of Colorado's services array is only complete with a description of the Core Services Program. This program, established in 1994, is statutorily required to provide strength-based resources and support to children and youth who are at imminent risk of OOH placement, in need of services to return home, or to maintain placement in the least restrictive setting possible. The program is supported with a combination of State, county and federal (TANF Maintenance of Effort) funds. In SFY 2014, a total of \$53,100,326 was appropriated for the program. This amount includes \$150,000 for program evaluation and \$25,000 each for the two federally-recognized Tribes.

The Core Services Program, overseen by the State, provides counties and the Southern Ute Tribe the opportunity to develop plans that are a unique mix of required and county-

designed services, resulting in a multi-faceted array of services. Required services include:

- After care services
- Day treatment
- Home-based intervention
- Intensive family therapy
- Life skills
- Mental health services
- Sex abuse treatment
- Substance abuse treatment services
- Special economic assistance
- County-designed services (optional)

These various planning mechanisms have led to the development/enhancement of a rich array of services and approaches to practice along the continuum of care. Through the utilization of collaborative committees several key initiatives impacting child welfare have developed, including preventive services, enhanced screening of referrals, RED Teams, Differential Response, a new safety and risk assessment (currently undergoing a three-county field test), a broad 2014 revision of safety rules, enhanced focus on children aged zero to five (0-5), and more services for older youth. Colorado's services under the 2015-19 CFSP are coordinated with services or benefits of other state and federally assisted programs serving the same population.

6. Agency Responsiveness to the Community

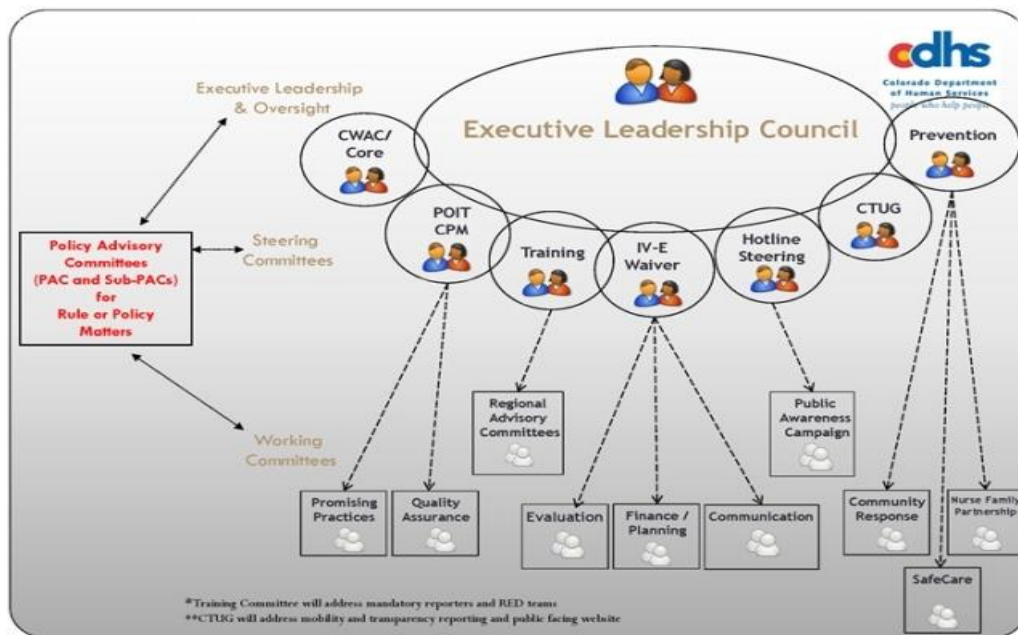
The agency responsiveness to the community speaks to the state and local stakeholder involvement and collaboration. The Agency Responsiveness to the Community Systemic Factor is comprised of two components:

1. *How well is the agency responsiveness to the community system functioning statewide to ensure that in implementing the provisions of the CFSP and developing related APSRs, the state engages in ongoing consultation with Tribal representatives, consumers, service providers, the juvenile court, and other public and private child and family serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?*
2. *Coordination of CFSP services with other federal programs: How well is the agency responsiveness to the community system functioning statewide to ensure that the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population?*

Colorado's collaboration and responsiveness was identified as a strength in the 2009 CFSR Onsite Review, and it continues to be a strength. Stakeholder involvement is a required

component of nearly every initiative, program, or project in which the State engages. Accordingly, CDHS recognizes that the State alone cannot resolve all the needs of children and families, and utilizes collaborative stakeholder groups to receive community feedback in both the identification of gaps and barriers as well as in crafting solutions to meeting those needs. As recognition of the legal dynamic involved in child and youth permanency, Colorado has maintained and deepened its collaboration with CIP. In addition to those committees listed in Figure 1: Office of Children, Youth, and Families Stakeholder Involvement and Collaboration, depicts Colorado’s robust stakeholder network. Stakeholder involvement and collaboration beings at the CDHS Executive Management Level, with Colorado Counties Incorporated (CCI) and the Colorado Human Services Director’s Association input and involvement throughout all collaboration. The Policy, Practice Advancement, and Funding areas of the chart are primarily comprised of various levels of State and county participants. The Leadership portion of the chart, starting with the Child Welfare Leadership Executive Council (CWELC) is comprised of state, county, and stakeholders. The Training, IV-E Waiver, Hotline, and Prevention areas are comprised of stakeholders with knowledge and experience in those areas. As examples, the Hotline Committee is comprised of county commissioners, county and State staff, and communications experts and a new Youth Education Subcommittee has been added. The Prevention initiative includes a prevention steering committee comprised of early childhood representatives.

Figure 7: Office of Children, Youth, and Families Stakeholder Involvement and Collaboration



7. Foster and Adoptive Home Licensing, Approval, and Recruitment

Colorado's foster and adoptive home licensing, approval, and recruitment is a multi-faceted system, comprised of county and state recruitment and licensing activities. The system is based upon state regulatory oversight of all licensing and certification activities and provides recruitment and retention guidance and support. Four components comprise the Foster and Adoptive Home Licensing, Approval, and Recruitment Systemic Factor.

1. *Standards Applied Equally: How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds?*
2. *Requirements for Criminal Background Checks: How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that the State complies with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements, and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children?*
3. *Diligent Recruitment of Foster and Adoptive Homes: How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide?*
4. *State Use of Cross-Jurisdictional Resources for Permanency Placements: How well is the system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?*

The evaluation of this systemic factor describes the collaboration of the DCW Placement Services Unit, ARD, and counties in ensuring the availability of safe child and youth OOH resources.

Two state-level entities oversee the foster and adoptive licensing and recruitment and retention efforts. The first, the Communications and Outreach Unit, aligns all communications related to the recruitment and retention efforts, and activities to raise the awareness of child abuse and neglect for the State and counties. The foster and adoptive recruitment activities are derived from the 2015-19 Colorado Foster and Adoptive Resources Recruitment and Retention Plan, ensuring the availability of adequate placement resources for children and youth needing OOH care.

The second state oversight entity, the Placement Services Unit, maintains all regulatory licensing and monitoring activities of 24-hour care facilities. This unit also performs a supervisory

function for county foster care and adoptive placement resources. ARD monitors county-certified foster and adoptive resources. As ARD identifies significant certification issues during the course of their monitoring, information is provided to the county and DCW, and appropriate action plans are developed.

The Placement Services Unit ensures that state standards are applied to all licensed or approved foster family homes and/or child care institutions, with its oversight extending to:

- Specialized group facilities;
- Child placement agencies;
- Day treatment facilities;
- Residential child care facilities and transition programs;
- Secure residential treatment centers; and,
- Homeless youth shelters.

The unit completes licensing visits on an annual and bi-annual basis, depending on the facility's licensing status. Ongoing monitoring of facilities includes additional visits as warranted by licensing complaints, allegation of child abuse and/or neglect, and follow-up on critical incidents. The unit partners with the DCW Child Protection Unit in overseeing the investigation and resolution of all Stage I and II investigations of facilities, and a licensing specialist is a permanent member of the Institutional Abuse Review Team (IART). In SFY 2014, the unit participated in 623 IART reviews.

The Placement Services Unit ensures the QA of foster and adoptive resources certified through child placement agencies (CPA) by reviewing an "Issue Certificate" form when a foster/adoptive home is deemed certification-ready. This form and its attachments are reviewed to ensure that all requirements and background checks are complete. The CPA is authorized to certify the resource upon the successful completion of the additional level of QA.

Prior to license renewal of the State's placement facilities, the licensing specialist makes an unannounced visit and pulls 10% of the facility's records to review background checks and other certification-related information. In SFY 2014, the Placement Services Unit completed 284 licensing visits. When an IART referral, complaint, or critical incident report is received, the unit's monitoring specialists follow up with the facility. The licensing specialist is also involved when there are licensing issues.

While the Placement Services Unit's licensing and monitoring functions are critical to maintaining safe OOH resources, the location of the unit within DCW ensures a broader focus on the safety, permanency, and well-being of children. With an emphasis on CQI, the unit is developing a plan to visit with facilities that are not up for licensing renewal or that have not had

any recent complaints. This is a proactive plan that involves the review of treatment planning and admission framework and philosophy. Additionally the use of restraints/seclusion will be reviewed. While more subjective in nature, this review will reveal the policies and practices that are working well in these agencies, or if additional training/resources are needed. This CQI process aligns with the division's efforts to increase child permanency and to reduce congregate care placements. This collaborative effort signifies that child safety, permanency, and well-being are ingrained in all divisions and units.

Counties, with state supervision and oversight, may certify their own resources and place children in foster care or adoptions. Counties collaborate with their local communities and other state-licensed entities to ensure the adequate availability of placement resources. Counties certify and monitor their own foster homes and maintain oversight over all child care licensing requirements. Additionally, there are three county placement consortiums in the state that facilitate the availability of cross-jurisdictional placements. ARD is responsible for conducting county foster home QA. Since the QA function moved from DCW to ARD in 2014, 22 counties have been reviewed. The reviews are conducted based upon population and include initial certification and re-certification of foster homes. ARD coordinates with DCW when certification/training issues are identified.

When children and youth must be placed outside the state, Colorado uses Cross-Jurisdictional Resources for Permanent Placements by engaging in the Interstate Compact for Placement of Children (ICPC). Colorado evaluates its ICPC system with a Trails-generated report and county program reviews. In FFY 2014, Colorado submitted 626 outgoing home study requests. Of these requests, 125 were requests for studies of parents, 294 were for relatives, 81 were for public adoptions, 122 were for foster homes, and 4 were classified as "other." These numbers are significant when compared to the 217 home study requests Colorado received from other states. Out of Colorado's 626 requests, 495 were not acted upon. Of the 131 requests that were acted upon, 58 were denied and 73 were approved. Of the 73 approved requests, 60 children were placed outside of Colorado.

Plan for Improvement

Colorado's plan for improvement integrates Executive and Legislative Branch supports with Title IV-E Waiver interventions and with the Governor's *Keeping Children Safe and Families Healthy 2.0*, and builds upon federal grants and awards to solidify a positive foundation for change that will continue to roll out statewide over the next four years.

Through these efforts, Colorado has the numerous parts it needs to ensure a successful child welfare system. Over the next four years, DCW along with its county, community, and other

state partners will continue its work to integrate these existing initiatives into a cohesive and comprehensive system that serves children in the home and community whenever possible. Specifically, Colorado will work to coordinate existing resources to ensure children and youth are served in the least restrictive setting possible and that children successfully achieve permanency as a result of coordinated family supports. This will be achieved by continuing and bolstering the work with continuum of care, wraparound services, and braiding of funds. Colorado will also continue its efforts to integrate data across systems to formulate a comprehensive understanding of the services provided to children as well as identifying any needs that have gone unaddressed. The work identified through the CDHS interoperability plan will accommodate the efforts of other state agencies that look to integrate children and youth case management and database systems.

The improvement process includes strong QA and CQI processes to ensure that Colorado is exercising best practices and adequately addressing the needs of its most vulnerable citizens. Specifically, Colorado will continue to enhance its ROM system as well as its public facing website, the CDHS Community Performance Center.

Program Service Description

Title IV-B, Subpart 1 is a federal block grant that is used for a broad range of child welfare services. The purposes of the program are to:

- Protect and promote the welfare of all children;
- Prevent the neglect, abuse or exploitation of children; support at-risk families through services that allow children to remain with their families or return to their families in a timely manner; and,
- Promote the safety, permanency, and well-being of children in foster care and adoptive families; and,
- Provide training, professional development and support to ensure a well-qualified workforce.

This section of the report describes Title IV-B Subparts 1 and 2.

Stephanie Tubbs Jones Child Welfare Services — Title IV-B, Subpart 1

The Colorado Services Continuum funded by Subpart 1 funds, described in the 2015-19 CFSP, includes a broad array of services that are supported and enhanced by community partnerships and collaborations. The continuum is available in varying degrees across the state depending on the resources of local communities and includes some or all of the following components:

- Prevention and family support services;
- Early intervention and family preservation services;
- Child protection services;

- Youth-in-conflict services;
- Foster care;
- Permanency; and,
- Aftercare and post-permanency needs.

In 2013, Colorado began expansion of its prevention and family support services, as part of Governor Hickenlooper’s *Keeping Kids Safe and Families Healthy Plan, 2.0*. This expansion of prevention and family support services, using State general fund dollars, is vital to the continuum of services due to its effect on the overall child welfare system. These services are critical to the well-being of families and to child permanency, as they aim to assist families prior to being referred, after a referral screen-out, after an assessment, or after case closure, and provide several opportunities for children and families to mitigate risks of child abuse and neglect.

As Colorado has broadened the access to preventive services, it has examined additional strategies to augment the effectiveness of its prevention efforts. Beginning in 2012, CDHS consulted with the Aspen Institute on the “Two-Generation” Approach. This approach, defined as the legacy of economic security and educational success passing from one generation to the next, focuses on creating opportunities for and addressing needs of both parents and children together. The Two-Generation approach uses a framework of economic supports, education, skills building, and social supports. CDHS is assessing how to best apply this approach to its programs, policies, systems, and research to break the cycle of social and economic problems being handed down from one generation to another. CDHS kicked off its Two-Generation planning with a department-wide conference April 28 and 29 May 1 through 3, 2015. DCW, OEC, and the Office of Economic Security (OES) are collaborating on gathering data on families served.

There are no changes anticipated to Colorado’s Services Continuum at this time. Information about Colorado’s services may be found under the next section, Assessment of Specific Accomplishments.

Assessment of Specific Accomplishments

Prevention Services

Governor Hickenlooper’s *Keeping Kids Safe and Families Healthy Plan, 2.0* recognized the importance of child abuse and neglect prevention. Under the plan, found in Appendix A, a group of cornerstone prevention programs were formed or expanded, including SafeCare Colorado, (SCC) Colorado Community Response (CCR), and Nurse-Family Partnership-Child Welfare Augmentation (NFP-A). These programs, along with the prior changes to the State’s rules and regulations, added flexibility to use child welfare funding, inclusive of the Core Services

Program, to offer prevention and intervention services. House Bill (HB) 13-1317 created the CDHS Office of Early Childhood (OEC) and aligned several prevention and early intervention programs, thus establishing the Department's first comprehensive prevention and early intervention continuum.

Colorado's prevention programs contained in *Keeping Kids Safe and Families Healthy Plan 2.0* were selected based on a recent review of Colorado's substantiated child abuse reports, which demonstrated that young children under the age of five (0-5) are at the greatest risk for child abuse or neglect. Additionally, many families with children 0-5 referred to the child welfare system are screened out, closed after assessment, or referred to community resources. While the child welfare system has a broad continuum of services that help families, they are typically not accessed until after a family is referred for maltreatment and a services case is opened.

Prevention services afford counties and their community partners with the opportunity to provide the right services at the time when families need them, rather than after an occurrence of

Colorado's prevention programs were selected based upon a recent review of Colorado's substantiated child abuse reports, which demonstrated that young children under the age of five (0-5) are at the greatest risk for child abuse or neglect.

maltreatment. Prevention services may not only prevent families from entering the child welfare system, but may also help them access community services after their case is closed, thus preventing new interactions with the child welfare system. SFY 2014 has been a year of active implementation of prevention and intervention services that enhance the capacity of counties and their community partners to assist families.

In 2014, Volume 7 rules were promulgated to allow counties to spend available child welfare funds on prevention and intervention services (formally referred to as Program Area 3 (PA3)). Counties are encouraged to look at their service

delivery continuum and determine if services could benefit a family prior to any involvement with the child welfare system. Currently, 42 county departments are approved to use Core Services Program funding to provide prevention and intervention services. Collectively, PA3 represents a group of prevention services, which allows for the blending of funding sources, and improves the frequency and quality with which the county outcomes data for these programs may be evaluated.

SafeCare Colorado (SCC)

SafeCare is a national, evidence-based home visitation program that helps parents improve their ability to keep their children safe and healthy and to enhance parenting skills. The program's services target families with children 0-5, and is being implemented by CDHS in partnership with the Kempe Center. SCC is a three-year pilot and is now in eight sites, comprised of 30 counties, and the Southern Ute Indian and the Ute Mountain Ute Tribes. SCC has been implemented as a 100% voluntary-based program. The program accepts referrals from public

health agencies, community partners, county departments of human/social services, and self-referring caregivers. The program serves families all along the prevention continuum including those:

- Referred by the community or self-referred with no child welfare involvement;
- Screened out from child welfare involvement;
- Currently involved in an open FAR or voluntary child welfare case; and,
- With a closed assessment, closed FAR or a closed child welfare case.

SCC began taking referrals in February 2014, and sites are actively involved in the SafeCareCO program marketing. Through February 2015, 1564 families have been referred to SCC. Of these families, 30% typically accept services. Over 50% of these families go on to complete at least one third of the curriculum. Within the field of voluntary service provision, these initial numbers are encouraging.

Colorado State University (CSU) is SCC's program evaluator. The evaluation is designed to measure the process (how the program is being implemented); outcomes (the impact of the program); and costs (average and marginal costs per family and cost effectiveness).

In May 2015, SCC moved from DCW to OEC, Division of Community and Family Support. This move provides SCC a great opportunity to further align programming with the other early childhood, home visiting, and child maltreatment prevention programs housed within OEC. Continued active partnerships with child welfare organizations remain a high priority for the success of the SCC program.

Colorado Community Response Program

The Colorado Community Response (CCR) program, a three-year pilot, targets prevention services to families who are either: 1) reported for alleged child maltreatment to child welfare, but are screened out from receiving an assessment; or, 2) reported for alleged maltreatment and are screened-in and assessed with a high risk assessment (HRA) or family assessment response (FAR) but without a case being opened. The CCR sites deliver services through county departments of human/social services agencies or external community providers. CCR's goals include reducing the likelihood of a family's entry or re-entry to the child welfare system, strengthening families' protective factors, assisting in improving their economic circumstances, and improving family functioning and well-being. CCR is currently being delivered in 12 sites covering 22 counties.

CCR's services are typically short-term and solution-focused. The initial need for services usually evolves from a family's crisis that is often economically based, such as a lack of food, shelter, childcare, employment, or a utility shut-off. The CCR response is swift, engaging the family in the problem identification and potential solutions. CCR staff assists families with

referrals to community resources. Vendor payments may be made on behalf of the family, but usually as a last resort or after community resources are exhausted. CCR services help stabilize families, and increase families' protective capacities by promoting individual, family, and community strengths. During 2014, 1,936 families were referred for services. Of these families, 837 (43%) accepted and received voluntary services.

CCR is supervised and coordinated by the OEC. The CSU Social Work Research Center and the Kempe Center are the evaluation team for the program, and will use a time series analysis to determine if CCR has impacted re-involvement into the child welfare system.

The Nurse-Family Partnership Child Welfare Augmentation

The Nurse-Family Partnership Child Welfare Augmentation (NFP-A) represents a larger systems approach to improving access to the Nurse-Family Partnership (NFP) program for families who are involved with the child welfare system.

NFP, available in 60 counties, is designed to provide care, support and resources to assist low-income, first-time mothers. The three outcome goals of the program are to: 1) support women in their efforts to complete a healthy pregnancy; 2) improve child health and development by assisting parents in providing responsible and competent care for their child; and, 3) help plan future pregnancies, continue their education, and find work. NFP is a voluntary program. To qualify for services, participants must be a first-time mother, low-income, and enroll in the program early and receive the first home visit by the end of the 28th week of pregnancy or 30 days post-partum. Mothers who meet these requirements and enroll in the program receive one-on-one home visits with a nurse home visitor throughout pregnancy and during the first two years of the child's life.

In the interest of expanding the program to families served by county human/social services departments, CDHS partnered with the University of Colorado in 2013 to implement NFP-A. NFP-A is intended to expand utilization of NFP and improve the ability of county staff that uses the NFP services, and to improve the NFP's ability to access economic assistance and child welfare supports when serving a specific family. The three primary goals of NFP-A are to:

- Increase collaboration between CDHS, with a focus on child welfare, and NFP;
- Increase nurses' knowledge and confidence in addressing risks for child abuse and neglect; and,
- Increase enrollment in NFP.

The work of NFP is scheduled to end June 30, 2015. The primary goals outlined in the NFP-A decision item will be evaluated and a summary of accomplished work will be published.

Safety

Colorado's overarching goal is to implement and sustain practices that improve child safety, permanency, and well-being. This goal was strengthened by Governor Hickenlooper's *Keeping Kids Safe and Families Healthy Plan, 2.0* which is comprised of key strategies to ensure that the State's children and youth have the same access to protection, regardless of where in the state they live. In striving to achieve this goal, Colorado analyzed its existing safety practices, statutes, and rule and determined that the reform of front-end safety practices was critical to improving safety, permanency, and well-being outcomes. As a result of this assessment, these safety initiatives were implemented or maintained in SFY 2015:

- Child Abuse Hotline Implementation and Public Awareness Campaign;
- Colorado Information Gathering and Referral Process;
- RED Team Implementation;
- Implementation of the new Safety and Risk Assessment Tool;
- Differential Response; and,
- Timeliness of Assessments.

Child Abuse Hotline Implementation

Child safety typically begins with a report to the local department of human/social services. According to stakeholder feedback, Colorado's county-based child abuse and neglect reporting system was reported to be somewhat difficult to access if the child's county of residence was not known or the call occurred during after-hours. To improve access, a statewide reporting hotline and a public awareness campaign were authorized by Colorado's Legislature in 2013. Following this legislation, the Hotline Steering Committee was formed and has continuously worked with DCW on the January 2015 implementation of Colorado's statewide child abuse hotline.

This statewide hotline is the first of its kind in Colorado. It offers Coloradans a single, easy-to-remember number to call (1-844-CO-4-KIDS) amid the state's current patchwork of phone lines, which can vary from county to county. All calls are routed to the county unless the caller does not know the county where the child resides or if the county is unavailable. Callers who are not sure of the county in which the child is located are directed to a certified call-taker in the Hotline

This statewide hotline is the first of its kind, and it offers Coloradans a single, easy-to-remember number to call (1-844-CO-4-KIDS.)

County Connection Center (HC3) located in Prowers County. HC3 assistance is also available to anyone who speaks a language other than English or Spanish, or is deaf or hard of hearing.

In working with the HC3, counties can select one of the three available resources: 1) call routing system; 2) answering service; or, 3) information gathering process and referral entry. HC3 provides counties with phone coverage when they may not have the staff to cover a county hotline full-time, thus providing the caller with a personal contact. The system's technology has the capacity to report

real time data, including, but not limited to, the call wait time, speed of answer, call abandonment, call duration, and the caller's language. The system's recording and cloud storage provides the State with the opportunity to assess the quality of calls, and to assess the need for additional training and technical assistance to state and county staff as needed.

The hotline implementation started with the passage of HB 13-1271 and a rule package for 12 Colorado Code of Regulations (CCR) 2509, Rule Manual Volume 7 (hereafter referred to as Volume 7) in July 2014, (updated in January 2015), followed by a county-by-county roll out in December 2014. The statewide hotline system opened and became operational January 2015. A public awareness campaign, following the opening of the hotline, was designed to coincide with National Child Abuse Prevention Month in April 2015. The public awareness campaign has two primary goals:

- Market the new statewide child abuse and neglect hotline to the general public and mandatory reporters.
- Educate mandatory reporters and the general public in all sixty-four counties as well as Colorado's two federally-recognized tribes, on how to identify and report suspected child abuse and neglect.

Additionally, the campaign set forth the following objectives for SFY 2014-15:

- Deliver 63.5 million impressions, with Spanish-language media representing 15-20% of that total;
- A steady increase in the number of certified mandatory reporters through the online training;
- A more balanced ratio of reports originating from the general public and mandatory reporters;
- An increase in awareness of 1-844-CO-4-Kids among the general public and mandated reporters; and,
- Fifty percent of calls reporting child abuse originating through 1-844-CO-4-Kids.

Of these objectives, initial data has shown the following:

- Expectations were drastically exceeded for impressions, with 97M web and broadcast impressions in April alone, not including paid media impressions.
- More than 18,000 mandatory reporters have completed the online training since it launched in February 2014, and training will continue to be promoted in year two of the campaign.
- Data is being closely monitored to determine whether calls from the general public have increased to create a more balanced report ratio, and have seen a slight increase.
- A survey will be conducted to gauge the increase in awareness of the statewide hotline in year two of the campaign.

- Calls directly to 1-844-CO-4-KIDS have increased from 7% of calls in January 2015 to 11% of calls in April 2015.

The analysis of the hotline call data indicates that the campaign was successful, with a spike in the State call volume from April 7 through May 12, 2015. The following figures illustrate the changes in State call volume as affected by the public awareness campaign. The following figure provides an analysis of State call data from January 1 through April 6, 2015 (before the campaign).

Figure 8: State Volume Call Data from January 1 through April 6, 2015

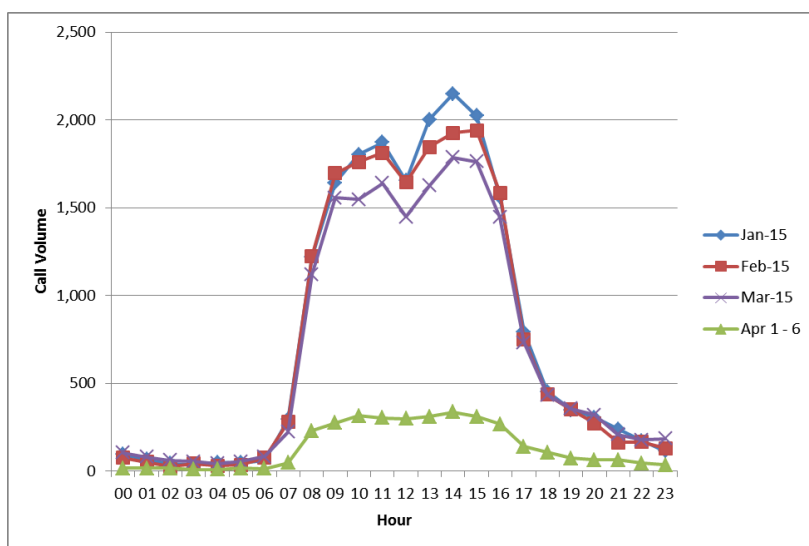
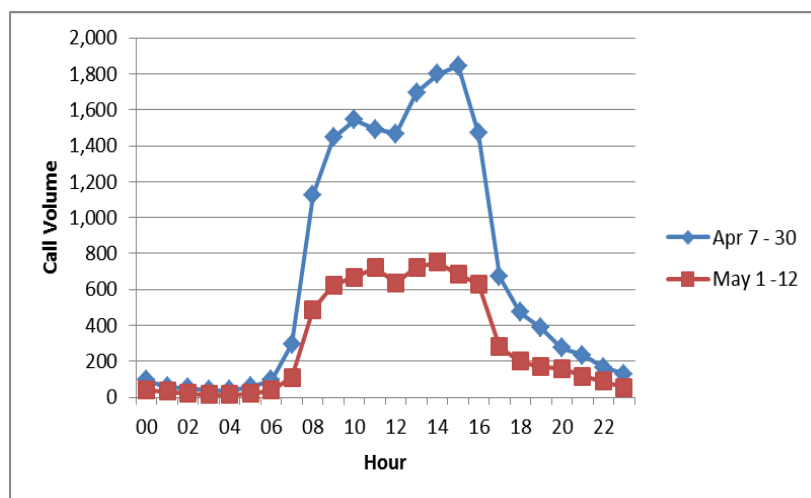


Figure 9 depicts call volume for the timeframe of the public awareness campaign.

Figure 9: State Call Volume: April 7 through May 12, 2015



Colorado Information Gathering and Referral Process

Beginning with the first call to the hotline or in-person contact with the county agency, the quality of the information gathering process is critical for engaging the referring party and in the gathering of pertinent information. As the State and counties collaborated to improve the quality of the information, it was determined that an enhanced screening process, adapted from Colorado’s Differential Response Model (DR), would improve the information gathering process, and provide statewide consistency. With the addition of the enhanced screening, the information gathering process in Trails provides guidance with which call-takers are able to obtain additional information about safety and family demographics as well as strengths and supports for the family, thereby “enhancing” the initial assessment.

With the implementation of the statewide hotline and Trails build, call-takers access the question prompts in the hotline application, and add information to identify the child’s county of residence. As the reporting party identifies their concerns, the call-taker has the capability to go to the specific relevant section and ask questions to elicit elaboration of the reported concerns. For example, if a caller is concerned about domestic violence, the call-taker may consult a list of questions that will help in the gathering of more detail about situations of which the reporting party is aware or has witnessed. There is also a prompt about the family’s identified strengths and protective capacities. As this initial activity encompasses more than screening, the process is now referred to as the Information Gathering and Referral process. The new Information Gathering and Referral process, and the requirement that call-takers were to be trained and certified, are contained in the Volume 7.

RED Teams

Determining the county agency's response to the information contained in the initial referral is the next critical task. In striving to standardize the initial response, the statewide implementation of Review, Evaluate, Direct (RED) Teams, an organizational process of DR, was initiated in 2014. This practice provides the opportunity to evaluate and organize information and check past child welfare and/or criminal activity prior to a caseworker becoming involved with a family

RED Teams provide an excellent forum for making a team-informed decision on how to proceed with a family when assessing for child abuse and/or neglect.

when there is not an immediate need for response. RED teams provide an excellent forum for making a team-informed decision on how to proceed with a family when assessing for child abuse and/or neglect. The teams also promote cross-training for new caseworkers and enhance shared decision-making responsibility. Guidelines and rules for RED Teams are included in Volume 7.

Implementation of the New Safety and Risk Assessment Tools

As soon as the initial referral is assigned to a caseworker, the agency focuses on timely contact with the child and family, to determine child or youth's safety. This initial decision-making is critical to determining a child's safety and whether to maintain a child or youth with their family with appropriate safety planning, and is one of the first decisions affecting a child or youth's permanency, as well as safety within the family or community.

Colorado implemented its first Safety and Risk Assessment Continuum in 1999. Due to increasing concerns about the age of the Safety and Risk Assessment tool, Colorado initiated a county-state work group to evaluate the tool. CDHS also contracted with CSU to evaluate the validity and effectiveness of the original assessments. Ultimately, the work group and CSU developed a new Safety Assessment Tool and a fully validated Risk Assessment Tool.

Implementation of the tool begins with two-day implementation training, starting with the supervisor's role. Upon completion of the first day of training, the supervisor is able to direct and guide caseworkers as they complete the safety and risk assessment tools with families, including an understanding of the instructions and requirements for when to complete the assessment tools. During the second day of training, supervisors apply their newly learned skills and work with their caseworkers. Both caseworkers and supervisors also complete an online training regarding the use of the new tools in Trails.

Implementation of the new safety assessment tool began in fall 2014 with a three-county field test, which is ongoing. Following completion of the three-county field test, statewide implementation of the tool will begin and will include new Trails functions, revised Volume 7 rules, training for both caseworkers and supervisors, and ongoing coaching and technical

assistance from DCW program staff. Due to the large number of caseworker and supervisor staff that needs to be trained throughout Colorado, the implementation of the use of the new safety tool will continue through SFY 2016. Upon successful completion of the three-county field test, the new safety and risk assessments will then be “turned on” in counties where caseworkers and supervisors have completed training. ARD will evaluate county performance using the new tools.

Differential Response Expansion

The DR Model, first implemented with a five-county pilot in 2010 and expanded to three additional counties in 2014, provides an opportunity for counties to shift their assessments of children and families to a more holistic and comprehensive approach. Through working with families and community partners, the goal is to build sustainable behavioral changes within a family that reduces risk and keeps children safe. DR is guided by seven organizational processes and seven social work practices, which can be found in Appendix B.

The integration of social work practice skills, safety and risk assessment tools, information framework tools, and critical thinking are used throughout the life of a child welfare case.

DR offers two tracks when responding to allegations of child abuse and neglect: the Family Assessment Response (FAR) and the High Risk Assessment (HRA). The goal of both FAR and HRA is to assess for child safety and risk through a comprehensive and thorough services assessment. HRA is the traditional and historical response to allegations of abuse and/or neglect, which is more of an investigative role, and requires that a finding be made. The FAR response does not require a finding as the goal is to engage the family. FAR is based on providing a comprehensive and proportional response to reports of alleged child abuse and/or neglect where there is a low or moderate risk of subsequent maltreatment.

DR informs safety and planning with children, youth, and families from the first contact throughout a county department’s involvement with a family. The integration of social work practice skills, safety and risk assessment tools, information framework tools, and critical thinking are used throughout the life of a child welfare case.

Based on research conducted by CSU (Winokur, Orsi, and Holmquist-Johnson, 2014)

CDHS is fully supporting the continued implementation of the Colorado Differential Response Systems Model into Colorado’s child welfare practice. CSU’s research found:

- FAR and HRA assessments show children are just as safe in both tracks;
- There is lower recidivism if a family’s first interaction with child protection is a FAR assessment;
- Families who participated in a FAR assessment reported being more engaged with child protection as compared to families receiving an HRA assessment;

- Caseworkers reported FAR families were more likely to have material needs and mental health needs met than were HRA families;
- FAR families were more likely to rate satisfaction with their caseworker as high;
- Caseworkers reported FAR families were more likely to show improvement in cooperation, receptivity to help, engagement, and a reduction in difficult behaviors; and,
- Caseworkers and supervisors reported a slightly more positive level of satisfaction concerning their child welfare jobs and reported that they are somewhat more likely to stay in the field because of the introduction of DR in Colorado.

Full research results can be found at:

<http://www.ssw.chhs.colostate.edu/research/swrc/consortium.aspx>

CDHS was required to submit an evaluative report for the DR program to the Legislature in January 2015. The report provided these recommendations:

- The sunset language in reference to DR is repealed;
- The State continues with the thoughtful and intentional implementation of the Colorado DR Systems Model;
- The State continues to support current and new counties around readiness and continued quality assessments of DR through training, technical assistance, mentoring and coaching; and,
- The State and counties work together to build community supports to help DR thrive and increase the practice throughout Colorado.

On May 14, 2015, Governor Hickenlooper signed HB 15-1358, making DR a permanent program option, and removing the pilot program language introduced in 2010. Counties, upon completing program implementation requirements and with the CDHS Executive Director's approval, may implement DR as a child welfare program, thus providing the opportunity to have greater flexibility in responding to families identified as being at low-to-moderate risk of child abuse and neglect.

Evaluating the Timeliness and Quality of the Initial Assessment

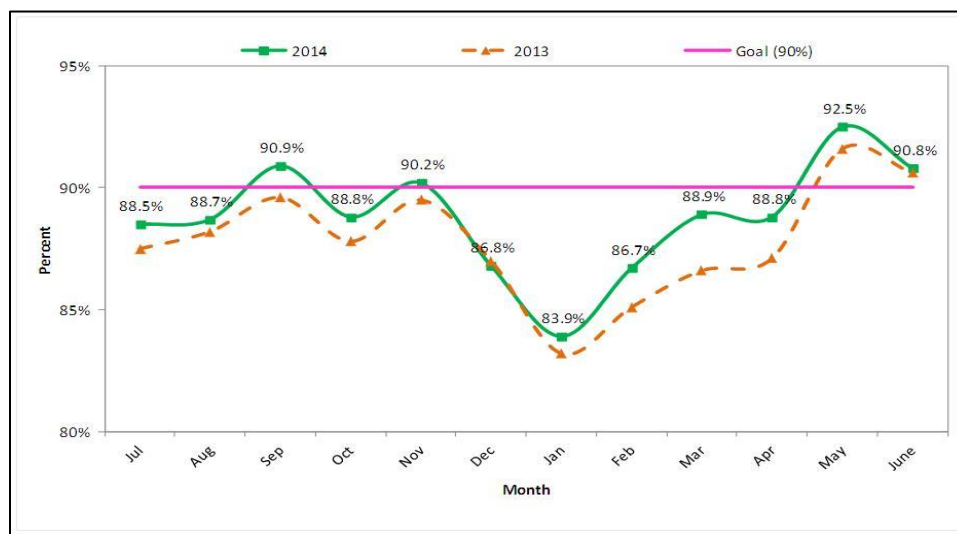
While Colorado used qualitative data analysis to determine that front-end safety practices needed reform, it continues to utilize quantitative data to evaluate ongoing performance. More specifically, two C-Stat measures are utilized to assess safety and are monitored by the CDHS Executive Team:

- The Timeliness of Initial Response to Abuse/Neglect Assessments
- The Accurate Completion of Safety forms

Timeliness of Initial Response to Abuse/Neglect Assessments is a measure of whether the initial contact with a child or youth victim was completed within the assigned timeframe. Volume 7

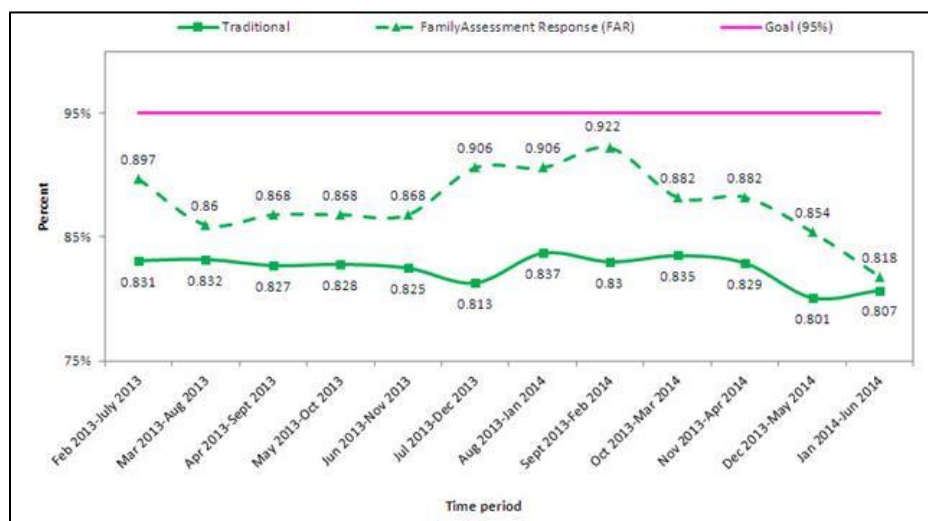
requires the assignment of an immediate, three-day, or five-day contact, depending upon the severity of the referral allegations. The performance goal for the measure is 90%. The 2014 performance has fluctuated between 83.9% and 92.5%. Performance on the measure improved over the previous year, with Colorado meeting the goal in four of twelve months. Figure 10 provides summary data for this measure.

Figure 10: Timeliness of Initial Response to Abuse/Neglect Assessments



Safety Assessment Forms Completed Accurately is a measure of whether safety assessment forms have been completed accurately, as determined by ARD case review findings. Performance is individually calculated for both FAR and Traditional assessments. The performance goal is 95%. The FAR performance varied from a low of 80.1% to a high of 83.7%, while the accuracy for Traditional assessments varied from a low of 81.8% to a high of 92.2%. Figure 11 provides information for this measure.

Figure 11: Safety Assessment Forms Completed Accurately



As the State strives to improve the timeliness and accuracy of front-end safety practices, the DCW's Child Protection Team liaisons are asked to reach out to counties if there is a performance decrease and identify any barriers to timeliness and/or accuracy. If the county department's performance does not improve, the county may be placed on a Performance Improvement Plan (PIP). Should this occur, the county department is required to submit a formal plan to DCW outlining the action steps they intend on completing to improve performance. The PIP is then monitored by DCW until the county department successfully meets the goal for three consecutive months. State-county working relationships, technical assistance, and ongoing outcomes evaluation are critical to Colorado's achievement of its goal to implement and sustain practice that improves child and youth safety, permanency, and well-being.

Permanency

Colorado's focus is on finding legal permanency for all children and youth who experience an OOH placement. To accomplish this, DCW is:

- Involving multiple stakeholders in assisting with the safe reduction of congregate care through the development of new services that reunite children and youth with their families or step down levels of care;
- Engaging county partners and stakeholders in the diligent recruitment and retention of foster and adoptive resources that meet the needs of children and youth in the counties' custody;
- Ensuring that youth have family and community connections before exiting foster care to prevent homelessness and promote their successful passage to adulthood; and,
- Conducting data analysis to identify the factors which place youth at the greatest risk of not achieving permanency and to prioritize services delivery to meet the most at-risk populations.

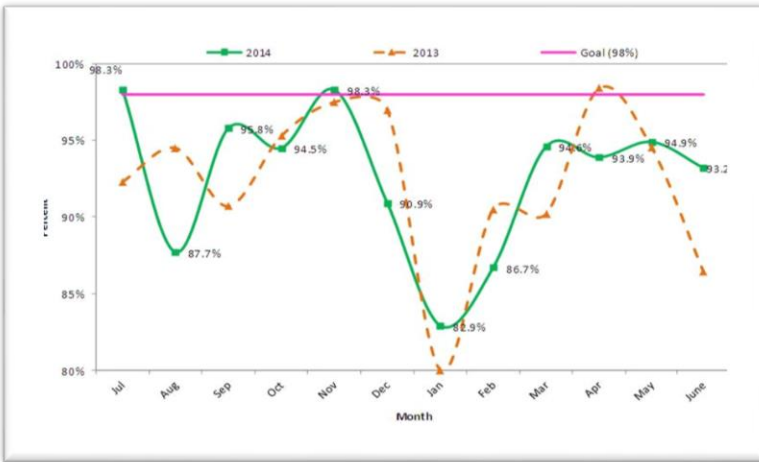
In 2011, the Annie E. Casey Foundation determined that Colorado had the second highest rate of placement in congregate care in the nation. DCW has increased efforts to safely reduce the use of congregate care. In 2012, Colorado focused its permanency efforts on older youth who have been legally freed and/or are in congregate care. Through C-Stat, DCW began to focus on legally freed youth who were approaching their 18th birthday within 12 months or less and had not achieved permanency. Using both quantitative and qualitative data, DCW, in collaboration with its county partners, developed individual profiles for these youth to understand their permanency paths. C-Stat continues to follow this group of legally freed youth, and has expanded its efforts to include 15 and 16 year olds at risk of not finding legal permanency. Table 13, on the following page, summarizes the identified barriers to permanency for legally freed youth, ages 15-18.

Table 13: *Barriers to Youth Permanency*

1. Youth Resistance to Adoption: Youth states they do not want to be adopted; may have had previous disrupted adoptions.
2. County Culture: May continue to embrace OPPLA and Independent Living/emancipation as the most appropriate plan for older youth.
3. Youth Behaviors: Youth may have history of runaway behaviors, substance abuse, mental health, violence.
4. Delinquency Issues: Youth may be on probation, awaiting DYC commitment, and may have sexual offenses.
5. Youth with Intellectual and Developmental Disabilities (IDD) Transition to Adult System: Adult host homes may not want to adopt; youth may still have connections to biological family.
6. Active Recruitment/No Identified Home: Youth's significant disabilities, complex needs and/or trauma history makes it difficult to identify an appropriate family.
7. Permanency vs. Benefits: When youth achieve permanency prior to age 18, may not qualify for benefits, such as Medicaid Extension to age 26, or Educational/Training vouchers.
8. Financial Issues: Adoption assistance is lower than foster care payments, but families may need additional resources to care for youth with high needs.
9. Placement out-of-state: Youth may be unable to build relationships with permanency options due to placement outside of Colorado.
10. Legal/Court Issues: Court/GAL may not agree to permanency plans; family criminal cases or restraining orders may complicate the permanency planning options.

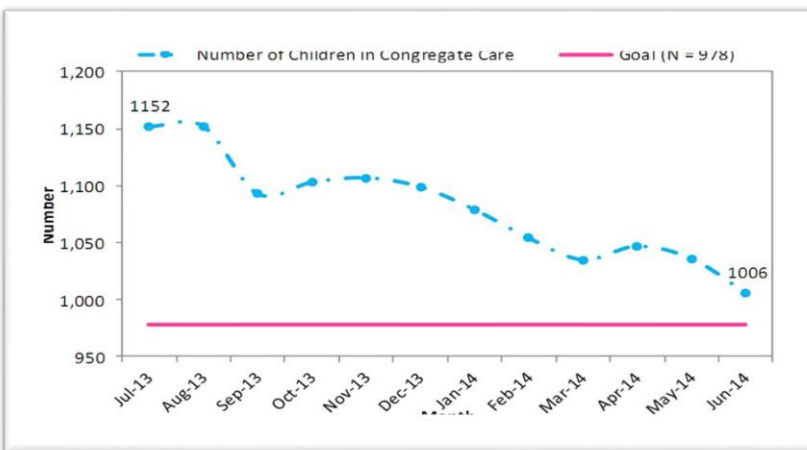
Figure 12 provides information about Colorado's legally freed children who have obtained permanency.

Figure 12: Legally Freed Children Obtaining Permanency



With the Annie E. Casey Foundation’s support, the State, counties, providers, and other stakeholders conducted a self-assessment of the state’s continuum of care. The self-assessment indicated that Colorado lacked a care component that could be used to prevent or step down residential care. As a result, Colorado began a pilot of treatment foster care providers in five counties and six CPAs. Additionally, DCW adopted the safe reduction of congregate care as their WIG (“Wildly Important Goal”) (McChesney, Covey, and Huling, 2012) for the safe reduction of congregate care. Figure 13 provides information about Colorado’s safe reduction of congregate care.

Figure 13: The Safe Reduction of Children in Congregate Care



Additionally, DCW adopted the safe reduction of congregate care as their WIG (Wildly Important Goal).

Another group, the Sub-PAC Permanency Task Group, comprised of state and county staff and other child welfare professionals developed a list of permanency barriers that could be addressed to reduce congregate care.

With the support of the Annie E. Casey Foundation, Casey Family Programs, counties, Judicial and other stakeholders, Colorado has made significant progress in its permanency efforts, and has accomplished the following:

- The Sub-PAC Permanency Task Force’s identification of the State’s permanency barriers;
- DCW, counties, and private child placement agencies are implementing a Treatment Foster Care Pilot to develop treatment foster care practice, and to determine what works statewide;
- Access to Intensive Family Finding tools is now available to smaller counties;
- The Colorado Legislature passed the Reinstatement of Parental Rights in July 2014; and,
- Systemic review of kinship and foster care training, certification, and review processes.

Identification of Permanency Barriers

The Permanency Task Group is a group appointed by the Child Welfare Sub-Policy Advisory Committee (SubPAC), a subcommittee of the Policy Advisory Committee (PAC), the policy-making body for CDHS. The Permanency Task Group’s role is to address issues of permanency, as directed by the Child Welfare SubPAC. The group has worked on reviewing rules for Reinstatement of Parental Rights and OPPLA, and has focused on the barriers to permanency for all children and youth from August 2013 to the present. During this process, county, state, and community stakeholders identified the issues that create permanency barriers, suggested solutions, and prioritized the barriers.

The Permanency Task Group prioritized the following barriers to permanency for all children:

Priority 1

- Intensive family finding; and,
- Lack of adequate trauma assessment

Priority 2

- Lack of understanding about adolescent development and how it affects attachment and contributes to disrupted adoptions;
- Resistance to permanency by youth; and,
- Insufficient post adoption/post guardianship (post permanency) supports correlation to caregivers’ reluctance to adopt

Priority 3

- Inconsistent information sharing

The Child Welfare Sub-PAC reviewed these priorities for new work/task/policy assignments, which involve the development of a project timeline and work plan. The Child Welfare Sub-PAC recommended that the Permanency Task Group focus on Disrupted and Dissolving

Adoptions. Through this process, additional counties, practice experts, and program specialists will become involved with the group as the project progresses. Child Welfare Sub-PAC will provide oversight and disseminate information, as the project requires.

Treatment Foster Care Implementation

Colorado's first Treatment Foster Care Program, piloted in November 2014 by five counties and six child placement agencies, is the newest component of Colorado's services continuum.

Colorado's Treatment Foster Care Program is a clinically-effective alternative to the residential treatment level of care that combines a trauma-focused, individualized, and intensive treatment approach with traditional therapeutic interventions within a nurturing, family environment, and with a focus on permanency. Numerous stakeholders, representatives from county departments, child placement agencies, residential child care facilities, provider organizations, the Colorado State Foster Parent Association (CSFPA), and state agencies representing child welfare, behavioral health, and Medicaid, collaborated to develop the program between the period of July 2012 and October 2014. The Foster Family-Based Treatment Association (FFTA) standards were adopted as part of the model, and guide Colorado's program:

A Treatment Foster Care program is a family-based, delivery approach to providing individualized treatment for children, youth, and families. Treatment is delivered through an integrated constellation of services with key interventions and supports provided by Treatment Parents, who are trained, supervised, and supported by qualified program staff.

Colorado's Treatment Foster Care work group incorporated the FFTA standards to ensure consistency of placement quality, stability and consistency for the model.

Information that is gained from the pilot will be incorporated into policy and procedures to implement, with fidelity, a statewide model consisting of components that are trauma-informed, family focused, permanency-driven with an emphasis on reunification (as appropriate). Program tracking includes these outcome measures:

- Absence of abuse/neglect 12 months from discharge;
- Timeliness of reunification;
- Median length of stay for reunification;
- Absence of reentry into OOH care in 12 months; and,
- Exits to permanency.

The Treatment Foster Care Pilot is being extended an additional year to May 2016. The pilot information will be used in developing Volume 7 and in the expansion of the initial implementation to areas of the state with a higher concentration of youth in OOH care, starting with the western slope (Mesa County and counties to the immediate south) in late 2015.

Expansion in other areas of the state will occur in collaboration with county departments that have identified the need for treatment foster care, and with child placement agencies that believe they are positioned to meet model requirements. DCW and the Treatment Foster Care Pilot group will continue to evaluate how to best expand treatment foster care that maintains fidelity to the model on a statewide basis, including consideration of a multi-county collaborative model in some of the rural areas of the state.

Access to Intensive Family-Finding Tools

Not all youth require a high level of care, and kin may be an appropriate placement resource. The county's capacity to locate kin is critical to a youth's permanency for initial and ongoing OOH placement as well as for permanency connections. Some counties do not have the financial resources to purchase the licenses for search engines or do not have enough cases to justify the purchase. To improve county access to resources that aid intensive family finding, Monthly Caseworker Visit funding supports a new Intensive Family-Finding project, developed to provide family-finding tools for the Balance of State (BOS) counties. The BOS counties are the 54 small and mid-sized counties, which when combined with the Ten Large Counties, comprise Colorado's child welfare workload. This project provides BOS counties, without access to search engines, with access to the Thomson Reuters CLEAR (Consolidated Lead Evaluation and Reporting) investigative platform to aid in their family-finding efforts.

The project provides access to records on three levels:

- At Intake, when caseworkers try to locate family and friends for initial placement, as well as to access criminal history of potential kin providers;
- For 30-day intensive family finding, all adult grandparents, all parents of a child's sibling, who have legal custody of the sibling, and other relatives are required to be identified, located and notified about the child; and,
- Ongoing intensive family finding every six months until the child or youth achieves permanency.

Reinstatement of Parental Rights

When legally freed youth have not achieved permanency, they may want to return to their family of origin with their parents/guardians. Colorado, like many other states, lacked a legal process for returning youth to their families. In August 2014, Senate Bill (SB) 14-062 was adopted, which allowed for the Reinstatement of Parental Rights through a legal process. Under Colorado's law, the Termination of Parental Rights is not vacated, but the child's permanency goal is changed to "reunification." This allows some youth, when it is found to be in their best interest and the parent has mitigated the reasons for termination, to reinstate a legal relationship with their biological parent(s). Rule changes are needed in Volume 7, but counties may reinstate parental rights prior to their adoption. Weld was the first county to reinstate a parent's rights in November 2014. Trails changes will be needed to track these actions statewide.

Systemic Review of Foster Care Curriculum, Requirements, and Review Processes

When relatives/friends are located and agree to provide placement for youth, they often require support in working with the child welfare system and other professionals involved in the case. In addition to support and case management, they may also require financial support and/or Medicaid/health insurance coverage for the youth. To aid in permanency and to ensure that the youth's placement remains stable, the State is assessing options for the strengthening of OOH placement resources.

Kinship Care

Colorado, like many other states is working to enhance the level of support for kinship providers, including both those who are uncertified or certified as foster parents. The State, in partnership with counties and other stakeholders, is taking an in-depth look at the needs of kinship parents. Under these efforts, the State plans to assess the need to update or change the way certified kinship parents are trained or become certified. In addition, the State will assess the needs of those kinship providers who choose not to become certified, and work with counties on the issues surrounding kinship diversion.

Foster Care

Colorado is reviewing its current curriculum and training requirements for foster parents. Under this effort, the CWTS is reviewing the foster parent training curriculum training gaps and new training delivery mechanisms. The ARD is also reviewing foster homes certified by the county with a new process that involves topics encountered by new foster families during the initial certification, as well as experienced foster parents during their recertification. ARD is developing a new review tool that is slated for piloting by July 2015.

Casey Family Programs Support and Technical Assistance

In addition to their support and technical assistance, Casey Family Programs awarded \$300,000 for Calendar Year 2014 to help remove barriers to youth who are in congregate care or at risk of being placed in this level of care. Counties are able to apply for funds of up to \$10,000 per child/youth to help support the plan. As of December 2014, 59 county applications had been received. In Calendar Year 2015, Casey Family Programs awarded \$80,000 as of May 31, 2015. Twenty county applications have been received and just over \$30,000 have been awarded. In September 2014, Casey Family Programs agreed to utilize some of the funding for more systemic approaches to the reduction of congregate care, including training. CDHS and Casey Family Programs developed the following work plan to guide this systemic work:

- Decrease reliance on congregate care;
- Enhance use of kinship care and use of subsidized guardianship;
- Finance reform and reinvestment of congregate care savings in resources with less restrictive levels of care and flexible services;

- Improve the well-being of children in foster care by improving service supports;
- Judicial engagement to increase safe reduction in expediting permanency;
- Prevention and community-based support;
- Strengthen system capacity to address full spectrum of system of care;
- Strengthen system capacity to support timely permanency; and,
- Workforce/leadership support and development.

Colorado's identification of permanency barriers, Treatment Foster Care Program, the Intensive Family-Finding tools, Reinstatement of Parental Rights legislation, the systemic review of foster care curriculum and requirements, and ongoing Casey Family Programs support and technical assistance aim to improve child and youth permanency. In addition to these efforts, Colorado will continue to use C-Stat measures, Trails, and ROM reports to evaluate child and youth permanency outcomes and to guide future programs and initiatives.

Promoting Safe and Stable Families Title IV-B, Subpart 2

Program Description

The Promoting Safe and Stable Families (PSSF) program helps keep children and youth safe from maltreatment, allows them to remain safely with their families, ensures safe and timely reunification for children in foster care, and provides support services for families who have adopted or are considering adoption. Colorado's PSSF program, administered by the OEC, seeks to:

- Secure permanency and safety for children by providing support to families in a flexible, family-centered manner through collaborative community efforts;
- Enhance family support networks to increase well-being;
- Prevent unnecessary separation of children from their families;
- Help reunite children with their parents, or provide other permanent living arrangements through adoption or kin; and,
- Support preservation efforts for families in crises who have children at risk for maltreatment or re-abuse.

There are thirty-two PSSF sites in Colorado serving forty counties and the Ute Mountain Ute Tribe. One adoption agency, The Adoption Exchange, provides post-adoption services statewide. The counties served are populated with 95% of Colorado's children ages 0-18. OEC and DCW are collaborating on a new Trails build to improve the tracking of PSSF services and outcomes in SFY 2016.

All PSSF site project components include:

- Collaborative Councils — Community advisory councils provide guidance to the local programs;

- Family Advocates — Staff members who engage family members to identify strengths and navigate systems as well as promote linkages between service providers;
- Partnerships — Focus on building strong collaborative relationships between local departments of human/social services, mental health, school systems and community-based organizations to provide comprehensive, non-duplicative services for families; and,
- Parent Involvement in System Improvements — Families are actively involved at every level, from sitting on the collaborative council, to working as advocates, providing support to other parents as mentors, and developing their individualized family service plans.

All PSSF sites promote partnerships between community-based organizations and county departments of human/social services. Collaborations may involve the following:

- Service agreements;
- Mechanisms for parent and professional partnerships and the provision of multi-disciplinary expertise;
- Strength-based assessments and treatment plans;
- Individualized treatment plans;
- Formal and informal supports and services for families from community-based networks;
- Flexible or pooled funding;
- Ongoing consumer input; and,
- Program flexibility that addresses changing community and family needs.

Each local PSSF program plan delineates the services that will be provided, the goals and objectives to be achieved, and a budget for the year. Local programs provide services in accordance with their community needs assessment. As a whole, the State is spending approximately 20% of funds in each of the four service categories that are required: family support, time-limited reunification, family preservation, and adoption promotion and support services.

Family Support

Voluntary preventative services include respite care, budget training, positive parenting, legal help, nutrition, education, family emergency funds, caregiver support groups, family engagement meetings, and case management. Innovative services provided by local programs include ongoing collaboration with community agencies for continued community service projects, forming partnerships to provide resources, and soliciting donations from local businesses to fill school backpacks and holiday stockings.

Family Preservation

Services are provided to families whose children are at risk of OOH placement because of abuse, neglect, or parental inability to care for their children. Services help to maintain the child in their own homes and to assist families with averting crises that may lead to OOH placements.

Time-Limited Reunification

Services to facilitate reunification are offered during the 15-month period beginning on the date that the child entered foster care. Services may include, but are not limited to:

- Family orientation meetings to help families understand the system;
- Individual, group, or family counseling;
- Inpatient, residential, or outpatient substance abuse treatment services;
- Mental/behavioral health services;
- Assistance to address domestic violence;
- Temporary child care/crisis nurseries; and,
- Transportation to or from any of the services.

Adoption Support and Promotion

The Adoption Exchange delivers post-adoption services through a contract with CDHS.

Services include, but are not limited to the following:

- Enhancing relationships between counties and private agencies to provide post-adoption services and reduce service duplication;
- Maintaining 24-hour access through email and a 1-800 hotline to respond to post-adoption inquiries in English and Spanish;
- Maintaining a website devoted to post-adoption resources;
- Providing bi-lingual support materials to help families with adoption-related paperwork;
- Enhancing existing resource lists to distribute to providers and adoptive families;
- Creating new and supporting existing post-adoption support groups;
- Training for mentors and respite providers;
- Conducting seminars for parents and service providers;
- Maintaining benefits information for families who have children with special needs; and,
- Publishing and distributing a semi-annual newsletter on post-adoptive services.

As an example of utilizing PSSF funds for prevention of adoption disruption, in spring 2015, CDHS, PSSF, and the Adoption Exchange began partnering with Douglas County to create a pilot program to provide services to identified families whose adoptions are at potential risk of “disrupting” or “dissolving.” An Adoption Exchange caseworker is working with these families to provide the supports needed for successful reunification and to decrease the need for OOH placement and/or ongoing services. The pilot results will be evaluated in 2016.

The SFY 2014 PSSF services numbers highlight the critical role PSSF has in keeping children safe in their own homes, improving permanency, and providing for the well-being of families. PSSF county sites and community agencies reported 8,341 children receiving one or more PSSF services, and of these:

- 87% of children served did not have a confirmed report of maltreatment.
- 97% of children receiving prevention services did not enter OOH placement.
- 5,805 children received family support services.
 - 97% of these services resulted in positive outcomes, such as increased parenting capacity, family stability, and self-sufficiency.
- 3,249 children were provided time-limited reunification services.
 - 66% of these children were reunited with family or kin.
- 302 children received adoption promotion and support services.
 - 37% of this group was adopted during the reporting period.
- 514 families received post-adoption services.
 - 96% of these children remained with their adoptive families.
- 15,988 one-time direct services were provided to Colorado families to help with basic needs for their children, improving the circumstances of the families and alleviating stressors.

Through its PSSF contract, The Adoption Exchange provided 4,717 Colorado families with post-adoption support services

III. COLLABORATION

Colorado's collaborations at the state and county levels are critical to providing services to children, youth, and families involved in the child welfare system. The collaborations are not only critical in the delivery of services, but are also key to ensuring the sustainability of efforts for the children and families served. Collaboration avoids splintering of efforts, creates unified treatment approaches, increases community support for best practice efforts, and increase local contribution to creating solutions for improving the lives of children and families. The following collaborations are highlighted due to their impact on the implementation of major initiatives. Additional collaborative information is available throughout this report.

Colorado Human Services Director Association

The Colorado Human Services Directors Association (CHSDA) is a non-profit association representing the human/social services directors from Colorado's counties. The Association promotes a human services system that encourages self-sufficiency of families and communities, and protects vulnerable children and adults from abuse and neglect. CHSDA works under the authority and direction of county commissioners. CDHS and CHSDA work closely together through various task groups and committees, including the Policy Advisory Committee and Child

Welfare Allocation Committee, to develop policy and advance best practices for child welfare. A comprehensive list of committees is found in Appendix C.

Child Welfare Executive Leadership Council

The Child Welfare Executive Leadership Council (CWELC) advises CDHS on policy, budget, and program issues that impact the safety, permanency, and well-being of Colorado’s children and families. Specifically, the council ensures that the direction and delivery of initiatives are consistent with the best interest of children and families in Colorado. The council consists of leadership from CDHS, other state agencies, non-profit foundations, state universities, provider associations, county human/social services, elected officials, community advocate associations, the Administration for Children and Families (ACF) Region VIII, and other key community stakeholders invested in the welfare of children.

Collaborative Management Program

The Colorado General Assembly created the Collaborative Management Program (CMP) in 2004 to encourage and reward collaboration among the local and state social service systems such as DCW, Health Care and Policy Financing (HCPF), probation, judicial, and local school districts, that serve children and families who are involved with these multi-agency systems. Typically, these are children involved in the most complex social services cases and, thus, are the most costly to serve. CDHS currently funds this program through divorce docket fees and the Child Welfare Services Block Grant. CMP counties are allowed to retain a portion of their under-spent Block Grant appropriation to reinvest in providing appropriate support to children and families who would benefit from collaborative management of treatment and services. No federal waivers were required to implement this program; however, the statute provides for waiving state rules as needed. Colorado’s Statute [Section 24-1.9-102 (1) (a), et seq., C.R.S.] establishes a framework for the CMP that is intended to create a “more uniform system of collaborative management” and accomplish the following four statutory goals:

- Reduce service duplication and eliminate fragmentation;
- Increase service quality, appropriateness, and effectiveness;
- Encourage cost sharing among providers; and,
- Lead to better outcomes and reduced costs for the services provided to the participants.

CMP requires the involved agencies to provide the family with a unified treatment approach as well as identify the best local resources to serve the children, youth, or family. Specifically, the program facilitates collaborative work such as:

- Creating incentives and minimizing disincentives to collaborative work;
- Information-sharing and legal avenues to share confidential information;
- Accessing, utilizing, and interpreting data to inform decision making;
- Strategic planning for multiple stakeholders;

- Developing common outcomes and performance-based measures that meet the integrity of the legislation and individual community needs;
- Developing capacity to deliver technical assistance;
- Balancing a unified approach with a desire to maintain flexibility at the local level; and,
- Ensuring family engagement and participation at the governance and operational levels.

CMP has increased its participants from six counties in FY 2006, to 40 counties, representing 33 county CMPs in FY 2015. County government agencies work collaboratively to serve the families and accept mutual accountability for the functioning of CMP and the quality of its outcomes. The non-legislated CMP state steering committee (composed of the mandatory state agencies, participating counties, family advocates, community agencies, and family members) advises the State on policy and governance oversight for CMP. The committee also works with the program evaluator to produce an outcome report that is distributed to executive directors of varying state departments, if deemed necessary by CDHS.

CMP rewards and strengthens collaboration at the local level. Communities, who possess a strong knowledge of their resources and the needs of their populations, are able to make better-informed, critical decisions for the families they serve. The strength of this local structure, with multi-agency representation, serves as an infrastructure for new initiatives, such as Colorado’s Trauma-Informed System of Care (TISOC). In 2015, the Colorado General Assembly voted to increase funding to CMP by \$3.2 M.

Trauma-Informed System of Care

Colorado’s Title IV-E Waiver trauma-informed interventions are being implemented through Colorado’s Trauma-Informed System of Care (TISOC). The vision of the TISOC is that “Colorado’s children with behavioral health challenges will reach their full potential through effective and efficient services and supports.” TISOC seeks to implement a trauma-informed child and family service system. As defined by the National Child Traumatic Stress Network, such a system involves parties who recognize and respond to the impact of traumatic stress on those who have contact with the system including children, caregivers, and service providers. Programs and agencies within the aforementioned system infuse and sustain trauma awareness, knowledge, and skills into their organizational cultures, practices, and policies. They act in collaboration with all those who are involved with the child, using the best available science to facilitate and support the recovery and resiliency of the child and family.

Building on the CMP structure, the TISOC involves the public mental health, child welfare, juvenile justice, and education systems. The goals of the TISOC are implemented in Colorado through a cohort community-based model, Communities of Excellence, which allows cohorts of communities to plan and implement TISOC together while also identifying possible local adaptations for the base TISOC services and supports. Currently, the TISOC supports 16

Communities of Excellence in 20 counties throughout the state. Future TISOC expansions will continue in the remaining CMP counties.

A statewide goal for the TISOC is to develop a sustainable infrastructure to coordinate and pay for services for families of children and youth with complex needs, many of whom are involved with child welfare. Each Community of Excellence receives funding to support wraparound facilitators, family advocates, infrastructure development, and flexible services for families. Currently, the 16 communities have 18 trained wraparound facilitators and 13 family advocates working with families. Based on the recommendations of a meta-analysis of Colorado reports and evidence from other states, Colorado is piloting the wraparound model through the care management entity (CME) in El Paso County. A CME is a centralized organization that blends funding, organizes services and supports, and ensures a consistent level of accountability across agencies. TISOC is supported by a cooperative agreement between CDHS and the Substance Abuse and Mental Health Services Administration (SAMHSA), and is administered by the Office of Behavioral Health (OBH) in partnership with OCYF.

Residential Care Collaborative

The Residential Care Collaborative is a committee led by CDHS and includes representatives from provider agencies, state and county child welfare departments, the OBH, HCPF, and a Behavioral Health Organization (BHO). The group, initiated in 2005 through House Bill (HB) 05-1084, has quarterly meetings open to the public, and guests in attendance primarily include residential care providers and county child welfare administrators. The group reviews current policy and practice to ensure that residential care placements are utilized as an appropriate service and not a permanent placement. Specifically, they review new initiatives, policies, and strategies that impact residential care to ensure providers, counties, and the state maintain the direction of best practice for the treatment and service of children and youth.

The Collaborative has a critical role in aiding Colorado's plan to "right size" congregate care over the next five years. The Department, with the support of the Annie E. Casey Foundation, facilitated two Provider Forums to meet with providers and counties to discuss expansion of the child welfare services continuum. During these forums, Colorado providers, as well as out-of-state providers, presented information about steps they have taken to expand their arrays of services. The forums produced rich discussions about the next steps required to make such an expansion feasible, and counties requested information from providers about current services. DCW will develop an information site where providers may enter program information that counties may access, and facilitate ongoing planning with the group that focuses on safely reducing Colorado's congregate care levels.

Court Improvement Program Collaborative

CDHS's collaboration with the Colorado Court Improvement Program (CIP) enhances interdisciplinary processes involving children, youth, and families involved in multiple systems. CIP was created as a result of the 1993 Family Preservation and Support Act. The Act required an original assessment on how Colorado handles its cases involving children, in particular dependency and neglect cases. The CIP is primarily concerned with improving the way the individual courts in Colorado handle dependency and neglect cases in order to improve the safety, permanency, and well-being outcomes for the children, youth, and families the court serves. As a result of the CIP, several initiatives were created, including:

- The Family Justice Information System (FAMJIS), Colorado's child welfare data exchange project. FAMJIS measures performance on specific items related to safety, timeliness, due process, and permanency, and is available to judicial officers and their staff.
- CIP and the Child Welfare Training system collaborated to develop and provide on-going collaborative training. This training assists multi-disciplinary Best Practice Court Teams (BPCTs) in building a foundation of core knowledge within each discipline or service area related to the outcomes of safety, permanency, and well-being.
- CQI systems were implemented within the Judicial Department that aligns efforts to improve permanency outcomes for children and youth. This work resulted in a Permanency Site Visit protocol and the training of stakeholders on CQI for the purpose of improving court practices and processes related to increasing permanency.
- BPCTs are convened to utilize CQI processes and tools in order to improve local court practice and outcomes collaboratively. Each team sets annual goals and applies lessons learned from the Permanency Site Visits.
- CIP promotes the expansion and sustained utilization of CQI for permanency goals. In SFY 2014, CIP obtained technical assistance from the ACF Children's Bureau to work with eight Colorado jurisdictions. The partnership included the Colorado CIP, CDHS, the National Resource Center for Legal and Judicial Issues, the Administration for Children and Families (ACF), Region VIII, the National Council of Juvenile and Family Court Judges, and the National Center for State Courts. The partnership built logic models and conducted CQI training for all jurisdictions and BPCT convenings. This training provides the foundation from which CIP and CDHS are collaborating to improve child and youth permanency. Each jurisdiction has established permanency goals, upon which the local BPCT focuses its work. The 2015 BPCT Convening focused on breaking barriers, and permanent homes for children and youth.
- In September 2014, the Judicial Department, in partnership with the OCYF, DCW, and OBH was awarded a two-year Family Drug Court Statewide System Reform Planning Grant offered by Office of Juvenile Justice and Delinquency Prevention (OJJDP). Collectively, this grant is viewed as an opportunity to update statewide substance abuse protocols that were developed in 2004. Specifically, accounting for the body of research

and evidenced-based practices that have developed over the past ten years in the areas of co-occurring disorders and to infuse family treatment drug court principles. In addition, the grant will further the practice shifts that are occurring in all three systems.

The primary goal of the grant proposal is to infuse the six common ingredients of Family Treatment Drug Court into the statewide systems that serve children and families enmeshed in dependency and neglect and juvenile cases: 1) System of identifying families; 2) Earlier access to assessment and treatment; 3) Increase judicial oversight; 4) Increased management of recovery services and compliance; 5) Responses to participant behaviors (sanctions and incentives); 6) Collaborative approach across service systems and Courts. The objectives of the two-year planning are: 1) Provide ongoing cross-systems training; 2) Increase the capacity of the state courts to intervene with adults with substance abuse and co-occurring mental health disorders; 3) Enhance the management information system (MIS) to track client progress and costs savings; and, 4) Align appropriate child welfare, substance abuse and juvenile court initiatives.

CIP and DCW are collaborating on the CFSP, APSR, and CFSR Round 3 with the following plan:

- CFSP: The State Court Administrator’s Office (SCAO) staff and CIP members participate in the ongoing implementation and evaluation of the plan through discussions at the CIP meetings. CIP will continue to align the CIP strategic plan with the CFSP to ensure alignment and maximum impact.
- APSR: The draft 2015 APSR is shared with the quarterly CIP committee and SCAO staff for review and feedback prior to submission. Required actions are discussed with the CIP Executive Steering Committee.
- CFSR Round 3: SCAO staff and CIP members participate on the CFSR planning team and review processes. SCAO will actively engage judicial officers and other key stakeholders in the CFSR process, including them to be part of the 2017 review process. The CFSR Round 3 will be discussed during quarterly CIP meetings.

The Department of Health Care Policy and Financing

The Department of Health Care Policy and Financing (HCPF) is Colorado’s Title 19 Medicaid agency. HCPF, OBH, and OCYF work collaboratively to address concerns with mental health services for Medicaid-eligible children and their families. Most of the youth and children in out-of-home (OOH) care receive Medicaid services through one of seven Regional Care Collaborative Organizations (RCCOs) in the state. The children are enrolled in the HCPF Accountable Care Collaborative, which provides coordinated health services through the RCCOs. Children’s health care services are tracked through the Medicaid/Medicare Information System.

Medicaid funds an FTE (full-time equivalent) position to assist with health care inquiries and program issues for children and youth in the child welfare system, and to maintain collaborative efforts with HCPF. OCYF and OBH jointly fund an FTE position to collaborate with HCPF in order to ensure services are effectively delivered to children and youth involved with child welfare or at risk for entering the system. This partnership has led to joint work on the definition of services and qualifications of staff that serve Medicaid-eligible child welfare children and families in the behavioral health contracts. In addition, private insurance carriers, obtained with the assistance of HCPF, cover children in OOH care who do not qualify for Medicaid. Discussions are continuing regarding how to assure continuity in the treatment team for a child and family served pre-placement, during placement, and post-permanency.

The Division of Intellectual and Developmental Disabilities (DIDD) resides within HCPF. DIDD oversees all developmental disability services (except the Children's Habilitative Residential Program) and closely collaborates with OCYF, via policy task groups, to improve the service delivery systems for children and youth with developmental disabilities. OCYF operates the Children's Habilitative Residential Program (CHRP) Medicaid Waiver on behalf of HCPF. HCPF funds an FTE to administer the waiver operations. Currently, many children with disabilities are served through county child welfare departments although they did not all enter care due to concerns of child abuse and neglect. DIDD and OCYF are working with OBH and community partners to create greater accessibility to services with a concurrent reduction of unnecessary government involvement in the lives of families and their youth. HB 14-1368, passed by Colorado's Legislature in 2014 is advancing these efforts. This legislation addresses youth served through DCW, ages 18 through 21, who have intellectual and developmental disabilities and will be transitioning to Adult Services for Intellectual and Developmental Disabilities. The bill requires that the State and counties identify these youth and that a transition plan be developed for youth who are within six months of becoming 18 or older until transition occurs. DIDD and DCW are collaboratively planning for these youth.

CDHS Inter-Office Collaborations

CDHS's programs touch the lives of Colorado's most vulnerable children, youth, and families. These programs are located in the Offices of Early Childhood, Behavioral Health, Economic Security, and Children, Youth, and Families, and are encouraged to collectively prevent maltreatment and improve the lives of children and families.

Office of Early Childhood

The Office of Early Childhood (OEC) was formed within CDHS in 2012. It is strategically partnering with OCYF in the State's child abuse and neglect prevention efforts. HB 13-1317 appropriated funding for OEC and aligned the State's early childhood programs. The legislation brings together ten programs from four CDHS divisions, the Department of Education, and the Department of Public Health and Environment that positively impact the lives of young children

and their families. OEC administers Title IV-B, Subpart 2, and PSSF, which aligns with Colorado's new child welfare prevention initiatives.

The OEC consists of four units: Child Maltreatment Prevention, Home Visiting, Early Intervention, and Child Care. OEC's programs include:

- Child Care Licensing
- Child Care Quality Initiatives
- Colorado Child Care Assistance Program
- Early Childhood Councils
- Early Childhood Mental Health Specialists
- Early Intervention Colorado/Part C
- Colorado Community Response Program (CCR)
- Maternal, Infant, and Early Childhood Home Visiting Program
- Nurse Family Partnership (NFP)
- Colorado Children's Trust Fund (CCTF)
- Family Resource Centers Program

Currently, an evaluation of coordination its programs and an assessment of ways to partner more effectively are in process, to extend its CCTF resources. OEC is also leading the state in the development of a Child Maltreatment Prevention Plan.

The OEC's "Inaugural Strengthening Colorado Families and Communities" Conference, September 15 and 16, 2014 in Keystone Colorado, served as a launching point for the "Colorado Child Maltreatment Prevention Plan." OCYF participated in the conference planning and provided Monthly Caseworker Visit funds for county scholarships for the event.

The OEC demonstrates the shared commitment of the CDHS administration and its stakeholders to improve early childhood education and intervention, which are associated with better child well-being outcomes. OEC and DCW are coordinating prevention and early intervention programs that will help prevent child abuse and neglect, as evident through programs such as CCR, home visiting programs, and CCTF's child maltreatment prevention. OCYF and OEC co-chair the Prevention Steering Committee, an interdisciplinary committee that provides oversight to child abuse prevention programs.

Office of Economic Security

The Office of Economic Security (OES) serves Colorado's most vulnerable populations, which include struggling families who need food, cash, and energy assistance to provide for their families. The OES economic assistance programs, which are designed to strengthen family self-sufficiency, may prevent families from entering the child welfare system. These programs are often a family's first contact with the county department of human/social services, and where they may receive a referral to a community resource. OES is a natural partner in OCYF/OEC

prevention initiatives, and the OES programs are an important asset in maintaining children and youth in their own homes or with kin, and in preventing child abuse and neglect.

The OES also operates the Colorado Refugee Services Program (CRSP). CRSP is responsible for the administration of all refugee programs including the Unaccompanied Refugee Minor Program (URM). A new position to oversee the URM Program was created and filled on June 9, 2014. The position is funded by the Office of Refugee Resettlement through CRSP and is located in the OCYF DCW. The URM Program Specialist works closely with CRSP to monitor the URM contract held by Lutheran Family Services of the Rocky Mountains. The URM Program Specialist ensures parity, paying close attention to Independent Living services and coordination with the Chafee Foster Care Independence and Education and Training Vouchers Program.

Office of Behavioral Health

Colorado's mental health and substance abuse treatment services are delivered through the Office of Behavioral Health (OBH). Community mental health services are delivered through contracts with seven specialty clinics and seventeen not-for-profit community mental health centers. The roles and functions of both community mental health centers and clinics are statutorily defined in Colorado Revised Statutes (C.R.S.) 27-1-201, et seq. There are four Behavioral Health Organizations (BHOs) responsible for implementing the Medicaid Mental Health Capitation Program through contracts with the Colorado Department of Health Care and Policy Financing. The BHOs operate managed care programs serving all of Colorado's 64 counties. Each BHO is responsible for managing the delivery of mental health services to Medicaid-eligible individuals in its assigned geographic service area. Each regional area has unique community resources.

Depending upon the treatment needs, children, youth, and families involved with the child welfare system may access services through the BHO. When the BHO does not have the treatment services the Medicaid-eligible child/family needs available within the community mental health setting, the BHO, upon request by the child's caseworker, is contractually required to procure the services through the local treatment network. Non-Medicaid eligible children and families may also access funding through the Core Services Program and community treatment resources.

IV. PROGRAM SUPPORT

One of the key elements of Governor Hickenlooper's *Keeping Kids Safe and Families Healthy Plan*, unveiled in 2012, called for modernization of Colorado's child welfare training program. This task required a change in organizational structure along with the implementation of competency-based training. This significant transformation of the State's child welfare training

is geared to better prepare county child welfare staff to ensure the safety, permanency, and well-being of the children, youth, and families they serve.

Redesign of Colorado's Child Welfare Training Academy

In 2013, CDHS formed the Training Steering Committee (TSC) to initiate and oversee the training redesign. The TSC is comprised of a broad representation of community partners including elected county officials, state and county department of human/social services staff, legal representatives, and other community stakeholders. The committee is charged with the advisement, oversight, and approval of changes to Colorado's child welfare training system. In addition, TSC is also responsible for:

- Monitoring current trainers and training;
- Reviewing regional training needs assessment results;
- Determining the topics to be added to existing training offerings;
- Approving major changes within the existing training contract;
- Communicating the contract changes to regions and counties; and,
- Approving structural changes to the Child Welfare Training Academy (CWTA)

The CWTA was established in 2009 to provide training for child welfare caseworkers, supervisors, and foster parents. Building upon the CWTA's accomplishments, the TSC redesign created a dynamic, fluid system that would facilitate the State's transition to a Competency-Based Training (CBT) system. The goal is to design a training program that allows the caseworker to demonstrate their ability to perform various aspects of casework practice and ensures that newly-trained caseworkers possess the requisite competencies. The child welfare training program was renamed the Child Welfare Training System (CWTS) in SFY 2013 as it encompasses the CWTA, in-service training for caseworkers and supervisors, Trails training, and pre-service and in-service training for foster, kin, and adoptive parents.

Establishing a New Management Structure

The redesign required a Central Management Organization (CMO) to manage the current training system while developing the transitional aspects. The Kempe Center and its partners were selected as the CMO in 2013 through a competitive bid process. Kempe's partners include other experts in the field of Child Welfare: the University of Denver Butler Institute for Families (Butler), the Colorado State Foster Parent Association (CSFPA), and Ridgewood and Associates (Ridgewood).

Each of the training partners contributes expertise and support in fulfilling the training needs of Colorado's child welfare staff, and foster, kin, and adoptive parents. Butler designed and implemented the curriculum for the Colorado New Worker Academy in 2010, continues to develop other in-service training offerings throughout the state, and trains child welfare staff with relevant and timely training content. Butler has also partnered with Kempe to provide

content-expert input and training services to the state's child welfare staff. The CSFPA provides expertise in training current and potential foster parents to understand and execute their crucial role within the child welfare system. CSFPA partners with Kempe to design responsive training about the issues affecting foster parents throughout the state. Ridgewood's role in the redesign is to deliver engaging, powerful, and user-friendly communications. Ridgewood partnered with Kempe to re-design the public face of the training offerings, and on January 1, 2014, transitioned the previous training website to a new, expanded, and improved website platform. The website, www.coloradocwts.com houses all information relating to community trainings (including the newly developed mandatory reporter training), caseworker, supervisor, and foster, kin, and adoptive parent trainings, hotline trainings, web-based trainings, and other training options. The website was developed to ensure greater ease of access to requisite information.

One of the first critical changes implemented by Kempe was the implementation of a regional training model that consists of four regional training centers in the state:

- Garfield County (West), Fremont County (Southeast), Larimer County (Northeast), and a permanent CDHS training center in Denver (Metro). All new caseworker and new supervisor pre-service trainings are held at these regional training centers. Many of the in-service trainings are held at these centers as well.
- The Regional Training Centers have a Regional Coordinator assigned, who meets with county staff, conducts Regional Training Advisory (RTAC) committees, and assesses regional training needs. The RTAC meetings are comprised of county staff, community partners, and stakeholders.

Transitioning to CBT

Regional and county input has been integral to the restructuring of child welfare training content and delivery. New caseworker training has been traditionally delivered through training cohorts, consisting of 13 weeks of classroom training, web-based training, and on-the-job training (OJT). The counties had expressed that due to the training format they felt challenged in balancing caseworker vacancies, new hires, and workload. Through ongoing discussion, the TSC approved decreasing classroom time with the addition of online classes and web-based training. The OJT was modified to include both required and county option tasks, and counties are able to customize those county option OJT tasks to reflect their own county practice.

Additional changes in 2014 condensed the classroom training to four weeks, supplemented by online classes, web-based training, and OJT. The length of time involved in caseworker certification, however, remained a critical factor for counties as new caseworkers are not permitted to be assigned as the primary caseworker on cases or assessments until they have completed the certification process. A provisional certification process was developed, which allows caseworkers to carry up to five cases and/or assessments at any given time while they are completing their OJT. The provisional certification, with its accompanying supervision/coaching

plan, is valid for 90 days and facilitates the caseworker's connection of training to their cases. This certification process is beneficial in many ways, as new caseworkers experience the responsibilities of case management; permanent caseworkers are protected from work overload; and, the county agency may more effectively retain experienced staff.

As a result of the ongoing evaluation of new caseworker training and county and stakeholder input via the TSC, Colorado has been determined to be ready to transition to CBT. Kempe presented its CBT plan in December 2014, with the anticipated implementation of July 2015, moving Colorado's training from a compliance-based system to one that will allow caseworkers to demonstrate their mastery of the required competencies. CBT is based on the premise that not all caseworkers have the same training needs. Supervisors and the CWTA will work collaboratively in the development of the individual's training plan and the evaluation of the caseworker's competencies.

The caseworkers in training will be required to demonstrate competency achievement. In an effort to allow counties the flexibility to hire caseworkers with less experience, and allow for an ideal training situation, a new "Social Caseworker Trainee" position was created to accommodate this training period, replacing the provisional certification. This position is allowed to carry up to five cases and/or assessments at any given time, as long as the county and the State agree on a supervision/coaching plan that will ensure proper oversight of the trainee. The transition from certified caseworker trainee to certified caseworker will occur after the supervisor has signed off on each required competency demonstrated by the caseworker. The trainee position certification may be held for up to one year.

Caseworker and Supervisor Training Requirements

Newly-hired caseworkers and newly-hired or promoted social services supervisors are required to successfully complete the respective CWTAs. Certified child welfare caseworkers and supervisors are required to complete at least 40 hours of ongoing in-service training per year. The in-service training is focused in content areas including, but not limited to:

- Assessment
- Interviewing
- Family engagement
- Legal issues
- Foster care and adoption
- Effects of child abuse/neglect on child development
- Principles of strength-based, family centered, culturally relevant case planning and management
- Sexual abuse issues
- Behavioral health issues
- Domestic violence issues

- Cultural disparity

At a minimum, 16 of the in-service training hours are to be focused in the area of the caseworker's primary job responsibilities. Additional topics for supervisors are worker safety, leadership, and management. Colorado's Child Welfare Training Plan is found in Appendix D.

Technical Assistance and Other Program Support

Colorado will request training and technical assistance (T/TA) as needed to implement the goals and objectives of the 2015-19 CFSP. Current technical assistance is being provided by the Casey Family Program and the Annie E. Casey Foundation for the safe reduction of congregate care.

When a T/TA request is generated by state staff or counties, the DCW training manager reviews the request for its alignment with the CFSP goals and objectives and then forwards the request to ACF Region VIII, for the processing of approval and selection of T/TA through the Children's Bureau Training and Technical Assistance Coordination Center (TTACC). DCW and counties coordinating T/TA projects maintain ongoing communication with the TTACC, participating in progress updates and ensuring that the activities are going according to the T/TA plan. At this time, Colorado does not have any open federal T/TA projects.

Research

Colorado accesses robust research to guide its child welfare practice. DCW and its county partners determine the issues to be researched with the Applied Research in Child Welfare (ARCH), a program of the Colorado State University (CSU) Social Work Research Center, within the School of Social Work. Since 2010, Colorado has also collaborated with Chapin Hall at the University of Chicago, to provide OOH placement and client data. The State and counties use Chapin Hall data for both cohort and longitudinal analyses. A collaboration of the State and 12 counties, including Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Jefferson, Larimer, Mesa, Pueblo and Weld financially support the collaborations with ARCH and Chapin Hall.

ARCH has conducted significant child welfare research over the past five years and has initiated a Youth Services Study at the request of the ARCH Steering Committee. Previous ARCH reports may be found at <http://www.ssw.chhs.colostate.edu/research/swrc/arch.aspx>. Colorado's research-based partnerships have been, and will continue to be, critical to informing child welfare training and practice.

V. CONSULTATION AND COORDINATION BETWEEN TRIBES AND STATES

This section describes Colorado's progress and accomplishments regarding the Indian Child Welfare Act (ICWA) and coordination of permanency provisions afforded to Native American children. There are two federally-recognized tribes in Colorado, the Southern Ute Indian Tribe

There are two federally-recognized tribes in Colorado, the Southern Ute Indian Tribe (1,408 enrolled members) and the Ute Mountain Ute (2,060 enrolled members.)

(1,408 enrolled members) and the Ute Mountain Ute Tribe (2,060 enrolled members), both located in the southwestern corner of the state. Members reside both on and off Ute Mountain Ute or Southern Ute Tribal lands. The Southern Ute Indian Tribe has an inter-governmental agreement (IGA) with La Plata County, which defines child welfare investigative procedures and the transfer of ongoing cases between the Tribe and the county. Montezuma County and the Ute Mountain Ute Tribe communicate on a case-by-case basis. Both entities have Community Evaluation teams under the CMP, and both entities have seats on the other's team, underscoring their collaborative working relationship.

In addition to the two federally-recognized tribes, over 56,000 American Indian/Alaska Native (AI/NA) people, and over 104,000 individuals who identify as AI/NA and other races, reside in Colorado. These individuals represent approximately 200 Tribes, with Navajo as the fastest growing tribe and Lakota as the largest. According to the Colorado Commission on Indian Affairs, most live in urban areas.

Process Used to Consult with Tribes in the Past Year

CDHS maintains an ongoing relationship with Colorado's federally-recognized Tribes through its participation in the Colorado Commission of Indian Affairs, Chaired by Colorado's Lieutenant Governor.

CDHS maintains an ongoing relationship with Colorado's federally-recognized Tribes through its participation in the Colorado Commission of Indian Affairs (CCIA), chaired by Colorado's Lieutenant Governor. In addition, a formal Tribal Consultation Agreement ensures regular, consistent communication and partnership with the Southern Ute and the Ute Mountain Ute Indian Tribes, and the Denver Indian Health and Family Services, Colorado's Urban Health Organization. The agreement represents CDHS' commitment to addressing ongoing and emerging social and human service concerns in an effective and beneficial way for Native American and Non-Native American people. CDHS maintains a liaison to the two federally-recognized Tribes and to the urban Indian community. In the past year, CDHS has consulted with both the Southern Ute and the Ute Mountain Ute Tribes during the 2014 formal Tribal Consultation Meeting.

CDHS, the Southern Ute, and the Ute Mountain Ute Tribes have committed to meeting annually to hold formal Tribal Consultations. In July 2014, CDHS held the first formal Tribal Consultation following the signing of the Tribal Consultation Agreement. The CDHS executive management team met with each Tribe and addressed concerns and issues ranging from child welfare to economic security programs to long-term care. A list of the 2014 Tribal Consultation Meeting participants can be found in Appendix E. The outcome and results of this Consultation

include a work plan that includes several child welfare issues, which are shown in Table 14, on the following page.

Table 14: Child Welfare Issues Identified in the Tribal Consultation Meeting

Topic	Action	Status
2015-19 Child and Family Services Plan	<p>CDHS committed to providing the plan to the Tribes for input prior to the ACF submission.</p> <p>The 2014 APSR and 2015-19 CFSP were provided to: Dr. Loren Sekayumtewa, Tribal Services Director, and Southern Ute Indian Tribe; and Constance Lehi, Tribal Services Director, Ute Mountain Ute Tribe. The 2015 APSR DRAFT was provided to both Tribes for review and comment in May, 2015.</p>	Completed September 2014, prior to submission to the ACF Children's Bureau
ICWA agreement	CDHS and both Tribes agreed to update the original (1981) agreement, which was signed only by the Southern Ute Indian Tribe.	Ongoing
DCW ICWA Coordinator	The Tribes agreed to participate in DCW's recruitment and selection process for this position. The Southern Ute Indian Tribe provided feedback on candidate resumes.	Completed December 2014
Jurisdictional issues regarding access to child welfare services	A future work group will address these issues.	Ongoing
Behavioral Health Services	OBH convened a meeting with the Tribes on April 17, 2015 to discuss crisis and ongoing behavioral health services. OBH presented information about the mental health and substance abuse block grants at the CCIA meeting in November, 2014.	Completed
IV-E Training	DCW provided IV-E training for the Ute Mountain Ute Tribe and will provide additional training upon request. In 2014, the DCW Training Division made child welfare training available to the Tribes at the DCW Rifle Regional Training Center located approximately 175 miles from the Tribes.	Completed September 2014
SafeCare Colorado	CDHS and the Kempe Center for the Prevention and Treatment of Child Abuse and Neglect are collaborating with the Tribes on the next steps for implementation of SafeCare Colorado services.	Ongoing

All activities are tracked using the “Tribal Consultation Action Log,” maintained and distributed by the CDHS tribal liaison. The log serves as a record of ongoing communication among the participants between formal Consultations. The Consultation participants suggested that future Tribal Consultations be held simultaneously with both tribes, if appropriate and agreed upon by CDHS and the Tribes. It was also proposed that future Tribal Consultation discussions may include Denver Indian Family Resource Center (DIFRC) and other consulting parties; however, this decision will be at the discretion of the Tribes. HCPF and the Colorado Department of Public Health and Environment (CDPHE) held formal Tribal Consultations, with attendance by the CDHS liaison, ensuring consistency and collaboration among the three state agencies around issues of health and human services. The HCPF Tribal Consultation was held September 15 and 16, 2014 and the CDPHE Tribal Consultation was held December 8, 2014.

The CDHS participation in formal Tribal Consultations, its participation in the HCPF and DPHE Tribal Consultations, and the Colorado Commission of Indian Affairs are representative of CDHS’ efforts to strengthen its consultation with the Tribes.

Level of Compliance and the Progress Made to Improve Compliance with ICWA during the Past Year

Level of Compliance

ARD is responsible for tracking statewide ICWA compliance. The ARD review instrument determines compliance with ten ICWA requirements. Over the past four years, Colorado’s ICWA compliance has declined from a high of 37% in 2010 to a low of 28.9% in 2014. Figure 14 summarizes the annual compliance.

Figure 14: Colorado’s ICWA Compliance



Colorado recognizes the need for improvement of its ICWA compliance due to the statewide decline in performance, and the following subsection details DCW’s efforts to improve ICWA compliance.

Compliance with Identification of Native American Children by County Departments

County departments document Native American children in out-of-home (OOH) care, and ARD is responsible for reviewing the child’s ICWA status. The review includes a series of ten

questions relevant to the inquiries of Native American heritage, court findings, and tribal notification of the child's placement and court proceedings. ARD statewide data for the first quarter of SFY 2014 indicates a statewide compliance rate of 28.9%. The data reflects the need for improvements in:

- Court orders determining that ICWA does NOT apply;
- Improved documentation of caseworker inquiry of Native American Heritage; and,
- Notification of the child's proceedings, sent to the child's identified Tribes and to the Bureau of Indian Affairs.

Improving Compliance

CDHS initially assessed that ICWA compliance is affected by the lack of training and a standardized curriculum, an absence of clear and consistent procedures and tools for all key stakeholders, and a low level of accountability for performance. Plans to improve each of these areas have been developed and include actions for the public child welfare agency, the courts, attorneys, and other key agencies.

Colorado has initiated an ICWA improvement process, and is engaging counties and stakeholders in the development of improvement strategies. The judicial system is a critical collaborator, and in 2013, at DCW's request, the Court Improvement Program (CIP) Steering Committee formed an ICWA subcommittee to focus on performance improvement. Subcommittee members include staff from DCW, the State Court Administrators Office, county departments, a county attorney, a judicial officer, DIFRC, and a Casey Family Programs Indian Child Welfare office representative.

The subcommittee utilized a CQI process to determine the reasons for the declining performance, and has identified two primary issues: 1) The need for alignment of ARD review instrument with the federal requirements; and, 2) The need for updated ICWA agreements that address the needs of children and youth in the federally-recognized Colorado Tribes and members of other Tribes elsewhere in the State. To address the first issue, the ARD is revising its review instrument to align its questions with federal requirements, which should improve review findings. The second issue is related to the fact that most children and youth affected by ICWA live in metro areas and are not members of Colorado's two federally-recognized Tribes. To address this issue, ICWA agreements are being updated with the assistance of the CCIA, using a two-phase process. The first phase focuses on updating agreements with the federally-recognized Colorado Tribes. The second phase involves conducting improved outreach to the additional Tribes that are represented in the metro area. These strategies are an integral part of Colorado's ICWA Compliance Action Plan, which the subcommittee will evaluate over the next two years. Future additions to this plan will include increasing training for judges and other court personnel on the importance of ICWA and the improvement of policy and accountability structures.

Based upon how ARD reviews ICWA compliance, the first opportunity to measure the success of the action plans will be January 2016. However, in partnership with DIFRC and Casey Family Programs, Colorado continues to improve its policies and case management system to ensure information is processed in a timely manner. In addition, Colorado is incorporating the identification of Native American children earlier on in the child welfare intake process, via enhanced screening/information gathering.

CDHS has also joined with DIFRC to promote ICWA best-practices across the state, particularly along the Front Range where approximately 90% of the Native American population resides. The Ute Mountain Ute and Southern Ute Indian Tribes are also engaged in this process. DIFRC, in conjunction with Casey Family Programs, has provided five ICWA trainings to state, local, judicial, and community agencies regarding the best practices and spirit of ICWA. It is anticipated that the partnership with DIFRC and Casey Family Programs will expand to include continued ICWA technical assistance to the counties regarding best practices in working with Colorado's Native American population.

Ongoing Efforts to Improve Compliance

Update the Goals and Objectives to Maintain Compliance with ICWA

The CIP ICWA subcommittee will evaluate the Colorado ICWA Compliance Action Plan and refocus strategies as compliance improves. Child Welfare Training Academy New Worker and in-service training will be evaluated by the Child Welfare Training System, in collaboration with DIFRC.

Notification of American Indian Parents and All Tribes of State Proceedings Involving Native American Children and the Right of the Tribe to Intervene

Each of Colorado's 64 counties is expected to notify Native American tribes about Native American children when a child becomes involved with the child welfare system. Most counties rely on their county attorneys to provide notification of proceedings.

Special Placement Preferences for Placement of Native American Children

Colorado has not negotiated a special placement preference for the placement of Native American children. Colorado seeks to comply with all provisions of ICWA, including order of preference. In its statewide recruitment campaign, CDHS encourages individuals of all cultures to consider becoming foster parents.

Active Efforts to Prevent the Breakup of the Native American Family

CDHS continues to set aside \$25,000 in Core Services funds for each Colorado Tribe for family preservation and reunification services. As required, the Southern Ute Indian Tribe submits a Core Services Plan (family preservation and reunification services) each year. Under this program, the Southern Ute Indian Tribe has an IGA with La Plata County to administer the funds and to enter required information into Trails on their behalf. The Ute Mountain Ute Tribe has made inquiries about the funds each year, but has not submitted a Core Services Plan. A Ute Mountain Ute Tribe representative is included in all Core Services communications. On May 13, 2015, the OCYF Director and key DCW program staff met with the Ute Mountain Ute to discuss funding opportunities and offer support and technical assistance.

In addition, CDHS has asked local county departments to direct county resources to culturally competent organizations, including those that work with Native American families. County departments in the Denver Metropolitan area and external to that area have contracted with DIFRC to extend the delivery of these services. These services are typically funded through Core Services and PSSF funds.

Use of Tribal Courts in Child Welfare Matters

At the county level, the requirements of ICWA and the Colorado Children's Code compliance are reinforced through caseworker and county attorney training on ICWA requirements.

VI. HEALTH CARE SERVICES

Children and youth who enter foster care often have numerous health care needs, due to the combination of their neglect, maltreatment, and/or existing health conditions. DCW relies upon its collaborative relationships with HCPF, OBH, and the Kempe Center to meet these needs, and is utilizing the following strategies to improve health care services for children and youth in foster care.

Colorado's Consultation with Physicians and Other Medical/Non-Medical Professionals

Consultation with physicians and other medical experts is critical in Colorado's efforts to maintain oversight of the health services for children and youth in foster care. The State accesses medical expertise through its collaboration with HCPF, as described in the State Collaborations section of this report.

CDHS enhances this collaboration with the location of two full-time employees (FTE), who serve as liaisons between the departments. The first FTE, located in the DCW Placement Services Unit, serves as the DCW liaison to HCPF to assist in the resolution of individual Medicaid issues arising for children and youth in OOH care. This liaison also serves on the

HCPF Children’s Advisory Committee, which affords DCW the opportunity to provide input on HCPF changes to children’s Medicaid policies. The second FTE is an OBH administrative-level liaison who collaborates with DCW and HCPF, and guides Colorado’s implementation of trauma-informed assessments and services, and other behavioral health issues.

This collective collaboration ensures additional opportunities for DCW input, such as providing feedback on the HCPF Accountable Care Collaborative (also known as “Coordinated Health Care Services”) and an open forum for addressing health care issues for children and youth in foster care. Children and youth who are Medicaid-eligible qualify for passive enrollment in the HCPF Accountable Care Collaborative (ACC), making them members of one of the state’s five Regional Care Collaborative Organizations (RCCO). RCCOs assist members with connecting to providers and specialists and ensure the overall coordination of health care. When caseworkers prefer that children not be enrolled in the ACC because they already have formed a significant health care relationship outside the RCCO, they simply remove them from the ACC enrollment and services continue with the current health provider.

In addition to the collaboration with HCPF, CDHS and counties may access The Kempe Center’s State and Regional Team (START), a multi-disciplinary team that provides consultation and training statewide. START includes expert input from a variety of disciplines, including, but not limited to: pediatric medicine, forensic psychology, law, social work, and law enforcement. Additional information about START and Pediatric Consultation is found in the Section XIV, CAPTA Report.

Seeking to improve the oversight of health care for children in foster care, in September 2014, the CDHS Executive Director appointed the CDHS OBH Deputy Director of Clinical Services as the first CDHS Medical Coordinator. The Medical Coordinator is performing the following duties:

- Reviewing and aligning pertinent policies and protocols across CDHS 24-hour child care facilities;
- Reviewing health- and medical-related audits, surveys, and reviews across all 24/7 facilities, and identifying common deficiencies and developing strategies to unify policy and practice where appropriate;
- Reviewing training and credentials of CDHS health practitioners, including contractors;
- Developing a plan for ongoing medical oversight and coordination, including staffing and budgetary resources required;
- Serving as General Counsel to the Executive Management Team on medical issues;
- In collaboration with the DCW and OBH, guiding the implementation of the recommendations outlined in Colorado’s *Psychotropic Medication Guidelines for*

Children and Adolescents in Colorado’s Child Welfare System — Solutions for Coordinated Care;

- Reviewing DYC vendor policies, procedures, and practices related to medical care and oversight, identifying and correcting deficiencies, misalignments, and inconsistencies;
- Developing and staffing a plan for comprehensive case review of selected DYC cases involving medical complexity, polypharmacy, and other concerns in order to ensure appropriate medical care and oversight of DYC youth; and,
- In collaboration with DYC, providing oversight of medical contractors.

In May 2015, CDHS, with the Colorado Legislature’s support, took the next step forward in hiring the first OCYF Medical Director. The OCYF Medical Director, with the support of four FTE, will be responsible for overseeing medical care for children and youth in the child welfare and corrections systems. This will include a plan that ensures that the State is meeting requirements of P.L. 110-351, the Fostering Connections to Success and Increasing Adoptions Act, P.L. 112-34, the Child and Family Services Improvement and Innovation Act, and the CFSR. The Medical Director will advise on complex medical issues for youth, including psychotropic medications in addition to oversight of the proposed medication management structure. The Medical Director and staff will also consult with state and county staff as well as the HCPF and DPHE, and work with the Trails Division to improve tracking of children/youth’s medical information and outcomes.

Colorado has developed two health care oversight documents, in collaboration with HCPF and other stakeholders, that guide the state and counties in ensuring that the health needs of children in foster care are met: *Colorado’s Health Care Oversight and Coordination Plan for Children in Foster Care* (Appendix F) and the *Psychotropics Medication Guidelines for Children and Adolescents in Colorado’s Child Welfare System — Solutions for Coordinated Care* <http://www.colorado.gov/cs/Satellite/CDHS-ChildYouthFam/CBON/1251644597356>.

Although DCW and the related steering committees reviewed the documents in 2014, and no modifications were made, it is anticipated that the Medical Director will review and revise the documents as needed and continue to implement the recommendations made in the documents.

Youth Aging out of Foster Care and Options for Their Health Care Needs

Federal legislation has aided the improvement of health care information for youth aging out of foster care. “The Fostering Connections to Success and Increasing Adoptions Act” (Public Law 110-351), passed in 2008, required the state to provide youth aging out of foster care with information concerning health insurance and advance care directives. In 2011, DCW collaborated with counties and stakeholders to develop Colorado’s policy, published in CDHS Agency Letter CW 1101. This law also required Colorado’s development of the *Health Care Oversight and Coordination Plan* for Children in Foster Care, implemented in 2011. The plan

was amended in 2013 to include the expansion of Medicaid coverage to former foster youth up to their 26th birthday, as required by the passage of “The Patient and Protection and Affordable Care Act” (Public Law 111-148) in 2010. “The Preventing Sex Trafficking and Strengthening Families Act” (Public Law 113-183), enacted in 2014, requires that youth aging out of foster care be provided with their medical records, which Colorado will address in SFY 2016, amending the *Health Care Oversight and Coordination Plan for Children in Foster Care* as appropriate.

VII. DISASTER PLAN

Colorado is a prime location for natural disasters; nearly half the state is flat compared to the mountainous areas of the Rocky Mountains, and the geography results in complex, extreme weather systems. In the last five years, there have been several disastrous wildfires, floods, and tornadoes that have affected several counties and their residents. When disasters hit, the state and counties work together to ensure continuity of all CDHS programs and operations.

Colorado did not have any disasters in SFY 2014-15; however, the state was struck by consecutive disasters in 2014, resulting in Governor Hickenlooper requiring that all departments update their Emergency Operations Plans. At CDHS, the Safety and Emergency Planning Manager updated the Continuity of Operations Plans (COOP) in May 2015.

The OCYF COOP is maintained with all county emergency plans which were developed by the county departments of human/social services and their emergency management departments. In the event of an emergency, the CDHS Executive Management Team initiates contact with counties affected by disasters to assess operational needs with the county director. The May 2015 COOP has updated information for staff contact and financial/accounting. Guided by the Safety and Emergency Planning Manager, OCYF also reviewed and modified the COOP’s procedures for maintaining communication with staff, prioritizing staff coverage, and tracking the location and status of children and youth under the State’s custody.

Procedures

During a disaster, the DCW utilizes a collection of procedures to ensure that: open cases with services continue, new child welfare cases are responded to in a timely manner, communication with staff is maintained, program records are preserved, and coordination of services and proper information sharing with other states. This five-point procedure is outlined below:

Identify, Locate and Continue Availability of Services under State Care or Supervision of Children who are Displaced or Adversely Affected by Disaster

The COOP identifies the activities, resources, and procedures required to restore/resume essential/critical OCYF services and functions. Under the plan, the OCYF Services

Business Continuity Team Members provide guidance to recovering/resuming critical functions during prolonged periods of interruption to normal operations.

Respond to New Child Welfare Cases in Areas Adversely Affected by a Disaster

During a disaster, counties will respond to new child welfare cases according to their county emergency plan, reviewed by CDHS, with assistance provided by the State as needed.

Remain in Communication with Caseworkers and Other Essential Child Welfare Personnel who are Displaced Because Of Disaster

The OCYF COOP provides for the initial notification by the Incident Commander/Command Center concerning the nature and magnitude of the disaster, disaster response, and evacuation procedures of child welfare staff and essential child welfare personnel. The OCYF Director then initiates a “Call Tree” to provide operations information and advises the OCYF Division Directors of status reporting procedures, such as when, where, and what to report. These reports could possibly include, but are not limited to, displaced/unaccounted for staff, equipment failures, and alternate work locations.

Preserve Essential Program Records

The Governor’s Office of Information and Technology oversees all of the State’s technological systems, which includes the CDHS system’s backup of essential program records. Program records are backed up on network drives and have failover capabilities between the data centers, which ensure that if one data center fails, the next center is automatically activated. Backup of CDHS information is achieved through a number of medium, such as magnetic tape, disk drives and cloud storage. In the event of an emergency and an inability to access the primary location, the DCW is assigned a secondary location that will have access to network files.

Coordinate Services and Share Information with Other States

Information is coordinated and shared with other states as needed, especially as it pertains to children under the Interstate Compact for Placement of Children, the Interstate Compact on Adoption and Medical Assistance, and children in kinship placements in Colorado who are under another state’s legal jurisdiction.

VIII. FOSTER AND ADOPTIVE PARENT RECRUITMENT

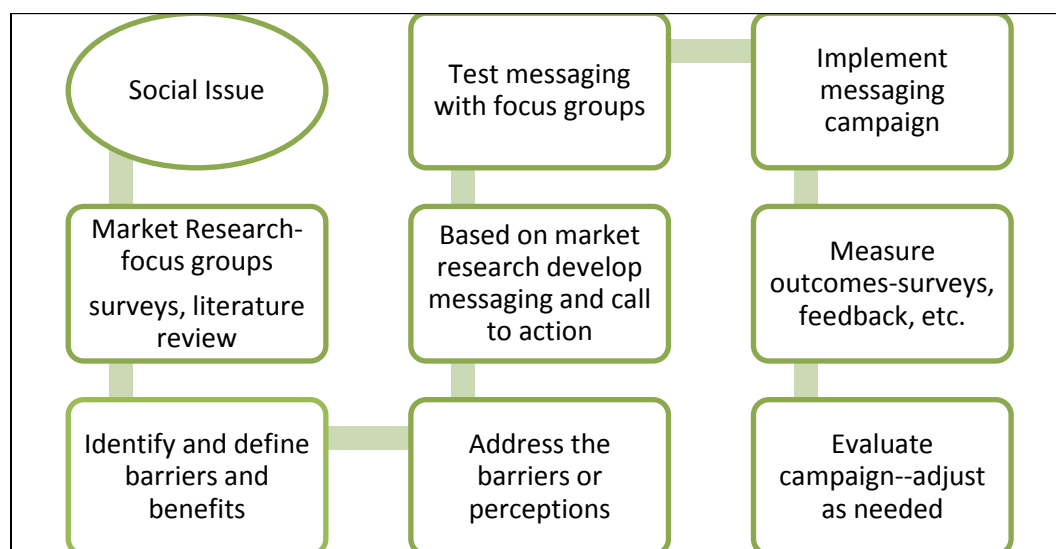
Colorado strives to maintain a system for the diligent recruitment of foster and adoptive families that reflects the ethnic and racial diversity of children and youth in the state for whom foster and adoptive homes are needed. Colorado’s recruitment efforts involve several levels of activity, with the 2015-19 Foster and Adoptive Parent Recruitment Plan guiding the State’s work with counties and other stakeholders (the plan can be found in Appendix G). In collaboration with their stakeholders, counties develop recruitment plans that target recruitment efforts within their communities. Private child placement and adoption agencies may target both local and statewide resources in their recruitment efforts. Additionally, the State, counties, private agencies, and

stakeholders collaborate on numerous efforts, with the goal that all parties ensure adequate resources for children and youth needing OOH care and adoption. The State may also access national TA resources with statewide recruitment efforts or at an individual county's request.

Recognizing the need for new and creative recruitment activities, in 2013 DCW adopted the Community-Based Social Marketing (CBSM) theory as the evidence-based platform for its new Recruitment and Retention Plan. CBSM, based on social science research, shows that providing information or education alone is not enough to encourage behavioral change.

Instead, CBSM proposes removing barriers and perceptions about an issue while promoting positive benefits that can influence change. Marketing/advertising efforts can inform and raise awareness and address perceptions, while efforts on local community levels can help further adaptations of the concepts (McKenzie-Mohr, 2011). Figure 15 provides information about this model.

Figure 15: A Community Social Marketing Model



Community-Based Social Marketing tools and techniques include:

- Focus groups and surveys to discover barriers and current perceptions;
- Calls-to-action that provide multiple ways to engage in the main concept or issue;
- Influence of social norms — making an idea or concept part of “normal community behavior”;
- Encouragement of social diffusion — creating multiple ways of spreading information (i.e., embracing a concept) across diverse communities; and,
- Evaluation — reviewing ongoing feedback through follow up surveys or focus groups.

Counties, state staff, and stakeholders have embraced CBSM theory and are engaging in creative new recruitment strategies. The new strategies tap into current cultural trends and reach new audiences. A prime example of such engagement was the discussion and book signing with *The Language of Flowers* author, Vanessa Deffenbaugh. In addition to having a full audience, the information reached new audiences, informing them about foster care and adoption.

Post-event surveys were conducted after the event, and more than two-thirds of the survey respondents were members of the general public and not engaged in the child welfare community as parents or professionals. Survey results indicated that 62% of respondents felt the information tables at the event were helpful and 77% of the respondents indicated that learning about the need for more Colorado foster and adoptive families to be an important part of the evening. Most of the survey respondents indicated they were not interested in foster care or adoption. However, anecdotally, partners reported a surge in foster care inquiries and attendance at foster care orientations since this event. The event was hosted through partnerships with Denver County Department of Human Services (DDHS) and The Adoption Exchange and held at the Cable Center in Denver. Information was also sent through book clubs, libraries, bookstores, Good Reads (an online book sharing website), CDHS social media, and community partners.

The CBSM framework has led to several extensive creative events in SFY 2014:

- **Closure** (May 7, 2014): The Denver Film Society, Sie Theater, Denver County Department of Human Services (DHS), the Collaborative Foster Care Program (Arapahoe, Douglas, and Jefferson County Departments of Human Services), Adoption Options, a child placement agency, and DCW collaboratively hosted the showing of *Closure*, the award-winning film depicting the story of an adolescent aging out of the foster care system. Information about the event was sent via a newsletter to all Denver Film Society patrons. More than 300 people attended the two-night event, selling out both nights. Those attending included foster, adoptive and kinship parents and individuals considering foster care and/or adoption.
- **Latino Summit** (May 31, 2014): Facilitated by the collaboration of Denver, Jefferson, Arapahoe, Douglas, and Adams County Departments of Human Services, Adoption Options, and DCW, this recruitment event targeted the Latino population and their engagement in fostering and adopting, featuring a Colorado Heart Gallery display of children with Latino heritage. The day's events, at the Suteatro Auditorium in Denver's arts and cultural district, featured a panel discussion involving foster/adoptive parents and youth, ethnic food, and music.
- **Pridefest** (June 20, 2014): DCW staff and several counties participated in Pridefest Activities that included hosting an information booth and marching in the annual parade to raise awareness about the need for foster care and adoptive homes for youth who are Lesbian, Gay, Bi-Sexual, Transgender, and Questioning (LGBTQ). Anecdotal

information indicated that the counties received several inquiries from the event. The Foster Care and Heart Gallery Facebook pages received a boost in “likes” due to posts during this time.

- **The Language of Flowers** (September 10, 2014): Book signing and discussion with book’s author, Vanessa Deffenbaugh, as aforementioned.
- **National Adoption Day Celebration** (November 6, 2014): Five of Colorado’s adoptive families were honored at the Colorado Governor’s Mansion Carriage House in November, in recognition of National Adoption Month. The event, attended by the CDHS Executive Director, honored the families and their children from around the state of Colorado including Denver, Thornton, Greeley, Rifle, and Kit Carson.

Colorado had a total of 588 statewide adoptions from January 1, 2014 through November 30, 2014. Of these adoptions, 112 occurred during National Adoption Month (November 2014) with 38 occurring on November 22, 2014, the 15th annual National Adoption Day. Many counties held recognition events to celebrate National Adoption Month.

Several new events highlighting adoption were scheduled for 2015:

Colorado Foster Care and Adoption Film Festival (January 24, 2015): A full-day film festival held at the Sie Theater featured foster and adoption topic films to attract prospective and current foster and adoptive parents. Counties and community partners were at the event, hosting information tables and answering questions. More than 400 people attended films throughout the day, yet publicity around the event increased the awareness about the need for more families. Denver Post’s Mile High Mama’s blogged before and after and the COFosterandAdopt.org website had more than 4,000 visits those weeks and Facebook boosts reached more than 100,000 Coloradans, and the press release showed more than 140 mentions in other Colorado publications about the event

- **2015 Colorado Heart Gallery Premier** (January 24, 2015): The 2015 Heart Gallery premiered during the Colorado Foster Care and Adoption Film Festival. The festivities included a reception during the festival to thank the volunteer professional photographers for their services. Additionally, the Heart Gallery was on display at the Film Festival and at various locations throughout the state, and was estimated to have been viewed by thousands of people.

Additional recruitment and retention projects and accomplishments include:

- **Celebrating Families Project:** This is an ongoing project featuring foster and adoptive families who were recommended by counties and child placement agencies as being exceptional. The families’ stories are captured on video and in professional photographs

and quotes and are used to normalize foster and adoptive families and recruit potential new foster care and adoptive families. Materials include: two- to three- minute videos, banners, postcards, flyers, bookmarks, social media memes, the COFosterandAdoption.org website, and by counties and child placement agencies.

- **COFosterandAdopt.org** and **COHeartGallery.org**: These are new websites that debuted in 2014 and continue to have increased in daily visits and engagement as new content is regularly added.
- **Social Media Engagement**: Facebook pages for CO Heart Gallery and CO Foster Care continue to reach more people each week with more than 4,000 “likes” and regular posts being seen by more than 800-1,000 people each time and up to 15,000 Coloradans when pages and/or posts are boosted with targeted paid posts.
- **The Retention Grant**: This is a yearly grant (currently in the third year) which provides funds to counties for the purpose of retaining foster parents. Counties apply for grants to use for various retention activities such as appreciation dinners, gift cards, respite care, weekends away, self-care, and other ways in which a county can show appreciation and support of foster families. Surveys completed by foster families indicate positive feedback from the families, such as how much they enjoyed the event/evening out, felt “refreshed” and appreciated connecting with other foster families and learning new information.
- **The Recruitment Grant**: This is a new project for SFY 2015 and is similar to the Retention Grant, but is an opportunity for counties to apply for funds specifically aimed at recruiting new foster and adoptive parents. Some examples of funding requests include booth rental fees and printed materials.
- **Marketing Research/Focus Groups**: DCW is seeking the involvement of professional marketing research companies, via the competitive bid process, to determine what the general public “knows and thinks” about foster care and adoption through focus groups and surveys. This information will direct future marketing efforts throughout the next four years.
- **Youth Visual Studio**: This is a pilot project developed to address the concerns of older youths’ lack of interest and/or willingness to participate in photographs and videos for recruitment through the Heart Gallery. The collaborative partnership involves The Adoption Exchange, Adopt Colorado Kids, with Metro State University facilitating the project. In 2015, five male youths participated in the project, and were paired with emancipated youth who attend Metropolitan State University of Denver to participate in a one day studio to learn about photography and videography. The day also involved team-building exercises and learning about college life. The youth used *Go-Pros* to create a video at the end of the studio which will be edited and may be used for future recruitment purposes.

While the year's foster care recruitment events have highlighted the needs of youth and children in foster care, new messages have been crafted for new audiences. The messages are a call-to-action at several levels to support foster children: becoming a foster parent; volunteering to support foster families; and mentoring foster children. The messages inform and promote a variety of ways to assist, benefiting children and youth in OOH care and awaiting adoption.

Recruitment and retention events for FFY 2016:

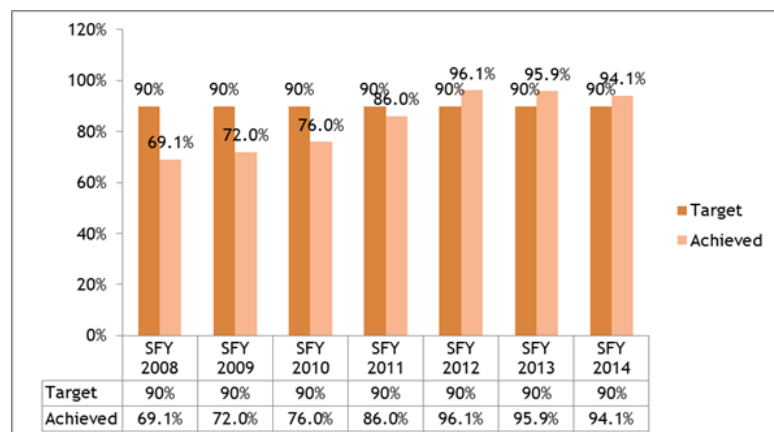
- **National Adoption Day:** November 21, 2015 events will be scheduled by the State and counties.
- **New marketing research:** New research, via State competitive bid, will help guide and shape future State and county recruitment and retention planning.
- **Colorado Heart Gallery:** Displays statewide will feature children and youth, including sibling groups, who are waiting for adoption.

IX. MONTHLY CASEWORKER VISIT FORMULA GRANTS

Caseworker visits with children and youth in OOH care are vital to their safety, permanency, and well-being. Caseworkers use visitation to maintain a relationship with the child or youth, assess their safety, provide information about their family's treatment progress, and obtain their input for case planning. In 2006, ACF reinforced the importance of Monthly Caseworker Visits (MCV) with children and youth, by setting a new national standard requiring that children and youth in OOH care be visited at least once a month, with 50% of the visits being completed in the child or youth's residence. States were required to meet the federal MCV goal of 90% by FFY 2011, and 95% by FFY 2015.

Colorado first achieved the federal 90% MCV goal in FFY 2012, and has exceeded the goal in each subsequent year. Historical MCV data is illustrated in Table 15.

Table 15: Colorado FFY 2008-14 MCV Data



Colorado evaluates county and state data using the County Scorecard, the *Year-to-Date Summary Face-to-Face Contact Compliance Report for Children/Youth in OOH Placement*, ROM reports, and ARD case review data. The quantitative data provided by the County Scorecard, the Trails Report, and ROM reports provides aggregated data used to assess state- and county-level performance. In addition, ARD also evaluates both the frequency and quality of caseworker visits utilizing case documentation. As part of this process, ARD maintains oversight of county performance and collaborates with the DCW Child Protective Services Team to provide support and technical assistance to counties as needed.

Colorado achieved an MCV rate of 94.1% for FFY 2014, demonstrating the state's commitment to meeting the needs of children and youth in OOH care. Colorado's FFY 2014 MCV report, filed with ACF on December 1, 2014, provides additional MCV detail:

- Total children in OOH care: 7,747
- Total visits required: 51,509
- Total visits completed: 48,451 (94.1%)
- Visits in child's residence: 41,834 (86.3% of completed visits)

Description of Colorado's Use of the Monthly Caseworker Visit Grant

Colorado is preparing for the increase of the MCV goal in FFY 2015. In addition to the ongoing evaluation of MCV data, DCW ensures that MCV funds are distributed to counties for the purchase of goods, services, programs, and technologies that support their efforts to ensure children and youth in OOH care are visited monthly. In 2014, DCW distributed a total of \$21,345 to counties through a Request for Application (RFA) process:

County/State	Award	MCV Funds Expenditures
Archuleta	\$1,213.00	White boards for RED teams
Denver	\$11,000.00	Promising Practices Symposium
Pueblo	\$4,875.00	Secondary Trauma Training
DCW	\$4,257.00	Strengthening Families Conference Scholarships

Continued Action to Ensure Performance Standards are Met

Colorado is committed to continuing to achieve federal MCV goals, as well as ensuring that through the casework relationship that children and youth are safe, achieve permanency and

well-being while in OOH care. The State will continue to use MCV funds and PSSF subset funds for county-specific needs and for staff development activities designed to improve caseworker retention, recruitment, and training. In addition, funds will be used to address areas of improvement identified through the county continuous quality improvement (CQI) processes and ARD case reviews. As Colorado strives to continue to meet the 95% MCV federal goal, DCW will evaluate county and state data and inform counties about progress via formal memos and the CDHS OCYF Director's "Child Welfare Newsletter."

X. ADOPTION AND LEGAL GUARDIANSHIP INCENTIVE PAYMENTS

The ACF Adoption Incentives program provides for the payment of incentive funds to eligible states and territories that increase the number of children adopted from public foster care. The program began in FFY 1998 as part of the Adoption and Safe Families Act of 1997, and has been reauthorized twice: as part of the Adoption Promotion Act of 2003 and as part of the Fostering Connections to Success and Increasing Adoptions Act of 2008.

ACF awarded Colorado \$64,000 in Adoption Incentives for FFY 2013. Incentives in the amount of \$10,500 were used in FFY 2014 for:

- Providing county adoption training to 19 counties across the state;
- Researching, via case mining, permanency resources for youth preparing to emancipate from foster care;
- Developing training videos for prospective adoptive parents; and,
- Funding professional photographers for events designed to recruit and retain current and future foster and adoptive parents.

In FFY 2015, the remaining \$53,500 in incentives will be used for two purposes. The first is to promote the development and expansion of statewide post-adoption and post-guardianship programs. This will be accomplished by the attendance of 18 state and county staff at the national Post Adoption Support and Preservation Conference in Nashville, Tennessee. Using information gained from this conference, Colorado will then develop its post-permanency program... The second is to support collaboration and partnerships with community organizations that provide adoption promotion and support, and assist with post-finalization support and family stability. All awarded moneys will be encumbered by September 30, 2015 and will be expended by December 30, 2015.

XI. CHILD WELFARE WAIVER DEMONSTRATION ACTIVITIES

Colorado's Title IV-E Waiver Demonstration Project (IV-E Waiver), awarded by the ACF Children's Bureau on October 23, 2012, and rolled out on July 1, 2013. The waiver consists of, on average, \$47.9 million per year, over five years, to promote funding reform and implement

new and expanded child welfare initiatives. As OOH care numbers have continued to decline, decreasing Title IV-E revenues, the waiver provides an opportunity for Colorado to re-align funding with practices that help children, youth, and families.

The IV-E Waiver is critical to Colorado's child welfare reform efforts to improve safety, permanency, and well-being outcomes for children and families. The IV-E Waiver supports state and county efforts to reduce OOH care and to strengthen the capacity of families to protect their children.

The IV-E Waiver builds on four initiatives already in place in Colorado counties: Differential Response (DR), Permanency by Design, the Colorado Practice Model, and the Collaborative Management Program. The IV-E waiver allows DCW to adopt five interventions to build on the aforementioned initiatives:

- Family Engagement;
- Kinship Supports;
- Permanency Roundtables (PRT);
- Trauma Informed Assessment (July 1, 2014 implementation); and,
- Trauma Informed Treatment (July 1, 2014 implementation)

Family Engagement and Trauma-Informed Assessment will be implemented statewide by the end of the five-year project (2018). Counties and regions may implement any and all interventions by applying annually for IV-E Waiver-funded resources.

Family Engagement

Colorado is striving to improve family engagement, throughout county involvement, from first contact through case closure. Although many counties implemented family engagement programs prior to the waiver, the IV-E Waiver's resources have afforded additional counties the opportunity to develop family engagement programs and expand existing county programs. Thirty-eight county departments implemented the Family Engagement intervention within the first two years of the project.

The Family Engagement implementation has brought the State and counties together to develop the first statewide model for facilitated family engagement meetings. The model improves consistency in statewide practice by including specific timeframes and ensuring the participation of key participants in the meeting. A newly developed Trails section facilitates the documentation of family engagement efforts and improves the state's ability to track child and family outcomes.

During the implementation, counties have encountered minor challenges. Counties may, at times, face an overlapping timing of facilitated family engagement meetings and PRTs. The county preference, at times, is to conduct the PRT in place of the facilitated family engagement meetings, when PRT meets the target population. This may affect the project fidelity, as it affects the timeframes for Family Engagement. The State preference continues to be maintaining both the facilitated family engagement meeting and the PRT interventions within the case. Additional implementation challenges may be experienced when, in spite of the county's best orientation and engagement efforts, some community partners, respondent attorneys, and guardians ad litem who are not familiar with family engagement concepts may be hesitant about the family and child's participation. Additionally, county staff turnover may affect the continuity of services and relationships with the family.

Preliminary findings from the Implementation Analysis indicate:

- An increase in the number and frequency of facilitated family engagement meetings;
- An increased capacity to serve Spanish-speaking families in several counties;
- Positive feedback from families about the process;
- Ongoing networking and support among the intervention counties; and,
- The provision of quarterly teleconferences with state staff for technical assistance and support.

Kinship Supports

The Kinship Supports intervention provides support and services to kinship families. Colorado selected this intervention as children and youth in kinship caregiving families who receive the needed supports are more likely to have stable placements, permanent connections, and are less likely to re-enter the child welfare system. The Kinship Supports intervention targets:

- Children and youth in out of home care, including those in congregate care, who can be stepped down or safely transitioned to a kinship caregiver with services and supports; and,
- Children and youth at risk of entry or re-entry into OOH that can be prevented through services and supports to the kinship placement or guardianship.

Thirty-five counties have selected to implement the Kinship Supports intervention within the waiver's first two years. The implementation started with the state and county development of a base model that consists of three components: 1) basic and consistent level of services to kinship families; 2) Kinship Needs Assessment to determine the family's current needs to sustain placement; and, 3) case management services and navigation. The base model also allows counties to provide the following services:

- Respite;
- Child care;

- Basic Needs (food, clothing, shelter, furniture, baby items);
- Transportation;
- Access to recreational activities; and,
- Therapeutic and educational needs not covered by private or public insurance or the educational system.

Challenges affecting Kinship Supports implementation include the issue of legal documentation status of kinship families and/or the children they are caring for, because the legal status may impact services eligibility. Additionally, quality childcare is a need of many kinship families because of the significant cost. Childcare also represents a large expenditure for counties because most kinship families do not meet the Colorado Child Care Assistance Program’s income limits (130% or less of the federal poverty guideline). Counties have found that kinship families may need more and/or repeated information about kinship family foster care versus non-certified kinship care.

Preliminary findings from the Implementation Analysis indicate the following about the Kinship Supports intervention implementation:

- Increased staff that specifically support kinship placements;
- Increased focus on assessing the needs of the family and the development of a support plan;
- Trails automation of the Needs Assessment for aiding in the tracking of outcomes, project evaluation, and performance management; and,
- The development of increased collaboration between county departments and their community agencies in support of kinship placements.

Permanency Roundtables

The Permanency Roundtables (PRT) intervention builds on the Casey Family Programs’ introduction of PRTs in Colorado. Colorado is one of six states implementing youth-centered Permanency Roundtables. The goal of the PRT process is to achieve legal permanency, but if it is not possible to attain legal permanency, the process is designed to improve relational permanency through increased permanency connections.

All children and youth with an “Other Planned Permanency Living Arrangement” (OPPLA) goal and/or who are in OOH care for 12+ months are prioritized for PRTs. These PRTs allow the youth to make the decision about the parties to involve in the process. Youth engagement is vital to success, and Colorado is engaging youth by providing the opportunity for them to have a voice in their own permanency.

Counties that have implemented PRTs have found the intervention to improve youth permanency outcomes by 80%. Forty-nine of Colorado’s counties have implemented PRTs across the state,

though only 25 are utilizing PRTs as an initiative under Year 2 of the waiver. In 2014, over 1,800 PRTs were conducted statewide. Long-term PRT outcomes are being measured through the use of a Legal Permanency Status Rating, a core element of the PRT process. The PRT intervention has been challenged by rural counties finding it difficult to recruit external consultants for the PRTs that do not have a pre-existing knowledge of the cases.

PRT Accomplishments include:

- The PRT training of collaborative agencies, such as the courts, probation departments, CASA, GALs, and community agencies that are vital to the larger comprehension of the importance of child and youth permanency;
- As of October 2014, an analysis of PRT data indicates that:
 - 58% of the youth that completed the PRT process achieved permanency;
 - 80% of the children youth participating in PRTs improved their permanency status rating;
 - 92% reported having a permanent connection at closure;
 - 61% of the children and youth reported still being in school upon discharge from the PRT process; and,
 - 38% of youth not achieving legal permanency through the PRT process was due to client decision.

Trauma-Informed Services

Trauma-Informed Assessment and Trauma-Based Treatment are the final two IV-E Waiver initiatives to roll out. Beginning in July 2014, DCW in partnership with OBH and HCPF, rolled out the trauma-informed screening, assessment and treatment intervention. A Memorandum of Understanding (MOU) between CDHS' OBH and OCYF with the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA) afforded Colorado to develop a Trauma-Informed System of Care (TISOC). CDHS, county child welfare departments, Community Mental Health Centers and BHOs from the eight "Communities of Excellence" pilot counties convened to formulate and operationalize the child welfare trauma-informed process. It is estimated that 51% of children/youth screened for trauma will continue to a trauma-informed assessment. Of the 51% assessed, approximately half will move on to trauma-informed treatment.

Counties screen children and youth on open services cases to determine if they ever have or are currently experiencing trauma, according to the populations defined in the individual county plan. The Southwest Michigan Children's Trauma Assessment Center's Screening Checklists are utilized to determine the need to refer children/youth/caretakers for a trauma-informed assessment. There are two checklists: (1) Screening Checklist: Identifying Children at Risk Ages 0-5 and (2) Screening Checklist: Identifying Children at Risk Ages 6-18. Based on the outcome of the trauma screening, the child or youth is referred for a trauma-informed

assessment. If a child is screened as being exposed to trauma and the trauma is negatively affecting their functioning, then the parent/caretaker may also be referred for assessment. Local community mental health centers have a menu of assessment tools and trauma-focused treatment modalities they may use, based on their available resources.

Initially, children, youth, and caretakers who are Medicaid-eligible will be referred based on eligibility to a Medicaid-approved behavioral health provider. Those not Medicaid-eligible may be referred to either the Community Mental Health Center (CMHC) or other qualified providers identified by the county department. Children, youth, and/or caretakers assessed to be in need of services will then receive evidence-based trauma-informed treatment. Depending upon the assessed need, a variety of interventions may be offered. The interventions are based on the developmental level of the child or youth and the nature and severity of the trauma experience.

The Trauma-Informed interventions implementation has been complex, involving the collaboration of two CDHS offices, and the development of a services delivery system that includes both child welfare and mental health services and their different practice approaches.

In preparation for the implementation, OBH provided “Core Concepts in Child and Adolescent Trauma” training between May 1, 2014 and June 20, 2014. The case-based interactive training course introduced participants to core concepts (general theory and foundational knowledge) underlying evidence-based treatment for traumatized children and adolescents. Six months of monthly consultation calls were held with faculty members to support the use of material introduced during training, case consultations and/or in supervision following the training. Initial implementation challenges involved determining a method for the documentation of treatment outcomes data after the child’s services case is closed, the confidentiality of Trails-generated referrals, and Medicaid payment for multiple assessments. Counties may be challenged with the limited number of trauma-informed-trained providers.

As the implementation challenges were resolved, it was determined that the state was in various stages of implementation readiness, and the ACF approved Colorado’s request for a “soft roll-out” with the eight “Communities of Excellence” (COE), which includes 12 counties. The COEs are Arapahoe, Chafee, Eagle, El Paso, Larimer, Montrose, Weld Counties, and the San Luis Valley Region (Alamosa, Conejos, Costilla, Rio Grande, and Saguache counties). All counties are currently operationalized, are entering data on completed trauma screens on children and youth, and referring them to the community mental health center when the need for an assessment is determined. The rollout of the trauma-informed intervention will continue as planned. The remaining counties will be surveyed annually with an implementation index to determine current activities supporting trauma-informed practices and the degree to which counties are implementing the core components of the intervention. Through this implementation, the following outcomes are anticipated:

- Increase in provision of trauma-informed treatment when an assessment indicates trauma is present and impacting a child, youth, or caretaker's life;
- Improvement in child, youth, or caretaker functioning;
- Increase in the likelihood that children and youth removed from their home achieve safe permanency through reunification; and,
- Decrease in the likelihood that children and youth requiring placement are placed in congregate care and with over-reliance on psychotropic medications for children and youth.

IV-E Waiver Oversight

The IV-E Waiver Executive Oversight Committee (EOC) oversees Colorado's Title IV-E Waiver. The EOC is comprised of CDHS child welfare staff, appointed county commissioners, state judicial representatives, mental health providers, and community stakeholders. Five subcommittees, each comprised of EOC members, as well as state and local volunteer members, in turn, inform the EOC. The five subcommittees include:

- Evaluation: Meets monthly to discuss project evaluation and results;
- Funding and Finance: Meets monthly, or as needed, to address fiscal issues and questions;
- Planning and Operations: Meets monthly, or as needed, to accomplish operational tasks, including the revision and oversight of the annual application;
- Communications: Meets at the discretion of the EOC; and,
- Judicial: Meets at the discretion of the EOC

Title IV-E Waiver Evaluation

The Human Services Research Institute (HSRI), who subcontracts with CSU and Chapin Hall, administers the Title IV-E Waiver evaluation. The basic thesis underlying the Colorado Waiver is that the Waiver interventions made possible through flexible use of Title IV-E funds will improve child safety, permanency, and well-being. The evaluation is comprised of three parts:

- 1) Process (site visits/implementation index);
- 2) Outcomes Analysis; and,
- 3) Cost Analysis.

In 2014, HSRI conducted and analyzed site visits, developed and analyzed the cost analysis baselines, administered and analyzed the Year 1 Implementation Index, and has begun the analysis of Trails data. Over the coming years, information regarding penetration rates and the Implementation Index will be released, informing the State and counties of the project's progress.

XII. QUALITY ASSURANCE SYSTEM

Colorado has implemented a dynamic Quality Assurance System that encompasses the activities of the Divisions of Child Welfare, Administrative Review, and Performance Management, and the aims of initiatives such as the Colorado Practice Model (CPM), Child Welfare Results Oriented Management (ROM), and C-Stat. Colorado's Quality Assurance System engages all levels of state and county staff as well as the general public. Not only does the system provide tools for state, county and community stakeholders to review statewide and county level performance, it also promotes quality improvements in state and county departments both respectively and collaboratively.

Four CPM components contribute to Colorado's Quality Assurance System: 1) the County Quality Practice Teams (QPTs); 2) the Practice Advancement Group (PAG); 3) the Promising Practices Work Group; and 4) the CQI Work Group. Counties use their QPTs along with CQI processes and tools to identify and address performance areas requiring improvement, and those that are going well, to identify positive practices that may be applied to other areas. The PAG guides Colorado's child welfare practice and ensures that current and new practices meet the practice standards of the CPM base practice model. The Promising Practices Work Group, comprised of state and county members, determines if county-identified practices meet the threshold for a promising, evidence-informed, or evidence-based practice that can be included in the State's compendium of best practice. The CQI work group is responsible for identifying and informing county and state leadership of the key outcomes, process, and/or data indicators that will be used to monitor performance relevant to Colorado's child welfare practice. The CQI workgroup, comprised of state and county program and data/research staff, evaluates the State's data to ensure that progress toward federal and state goals is continuing. The group's current work is focused on the safe reduction of congregate care. The group's data analysis is provided to the PAG, which oversees the State's child welfare practice, and to PAC, the State's policy advisory group. The revision of the 2015-19 CFSP goals has been informed by the State's QA-CQI system.

Colorado's Quality Assurance System provides real time data on C-Stat performance measures, AFCARS and CFRS measures, and demographic data that allows state and county staff to analyze performance in real time. Through the CDHS Community Performance Center website, the public also has access to reports available in ROM. With increased access to real time child welfare data and greater transparency with the general public, CDHS hopes to foster a better understanding of what is working well and what is and isn't working in the provision of child welfare services in Colorado.

C-Stat is a highly collaborative initiative that involves CDHS' Executive Management Team, the DCW and ARD, the Performance Management Division (PMD), and county departments. PMD is primarily responsible for implementing and sustaining CDHS' C-Stat initiative. The separation between program (DCW) and review (ARD and PMD) is maintained through this

productive and supportive working relationship. All three divisions work closely to ensure the focus is maintained on outcomes and data, along with accountability and action plans. ARD and DCW are routinely challenged to assess the efforts of their staff and ensure alignment with CDHS' strategic direction and the desired child welfare outcomes.

The three divisions also work closely with counties to discuss performance issues and provide technical assistance as needed. Collaboration between state and county staff is critical to the Quality Assurance System's functionality. DCW has assigned liaisons from the various programs to each county to provide program support and to support the county's CQI processes. Using indicators drawn from Trails, DCW regularly reviews practices implemented by counties to improve CFSR and C-Stat outcomes. PMD staff routinely present C-Stat measures at county meetings and are available to counties for training and technical assistance. CDHS believes outcomes are more likely to be achieved when all stakeholders embrace and are invested in agreed upon practice values and outcomes. Moreover, frequent communication and collaboration between CDHS Executive Management Team, CDHS staff, county commissioners, county directors, and caseworkers ensure Colorado's progress towards achieving the best outcomes for the children and families served by the child welfare system.

In addition to the initiatives listed above, ARD and DCW are engaged in other quality assurance activities that support Colorado's Quality Assurance System. ARD conducted 6,818 OOH case reviews and 1,282 IH case reviews in SFY 2014. An additional 2,175 Assessments were reviewed during the Screen-Out Review in September 2014. There are currently no plans to change the methodology for determining case reviews. Any increase or decrease in the number of reviews will be driven by changes in total population served within each of these areas. Assessments and IH reviews are based on a random sample using a 90% confidence level with a 10% confidence interval. The number in each county's sample is also determined based on its population at the time the sample is pulled.

ARD manages County Foster Home Program Reviews and Child Fatality Reviews, and the Child Abuse/Neglect Dispute Resolution (CANDRS) (as of July 2014), as well as other reviews or requests, such as the reasons children and youth enter congregate care as a first placement. ARD is using review instruments which have been created through a collaborative process that involves DCW and county input. As part of this development process, ARD uses a number of reference sources to create the questions, response sets, and instructions on how to answer each question. These include, but may not be limited to, state and/or federal statutes, federal policy manual responses and the CFSR Onsite Review Instrument (OSRI). Every effort is made to incorporate aspects of the OSRI into review tools and to map the review questions back to each of the areas (i.e., Safety Permanency, and Well-being) that align with the OSRI.

DCW program staff conducts reviews of county programs, including the Adoption Subsidy Program, Title IV-E eligibility reviews, the counties' use of Trails, and other risk-based program

reviews of county policies and procedures. DCW uses information from program staff's reviews and ARD quality assurance efforts to evaluate if defined policy is supporting effective practice in service delivery for achieving child safety, permanency, and well-being.

XIII. SERVICES FOR CHILDREN UNDER THE AGE OF FIVE

Colorado considers children under the age of five to be at the greatest risk of maltreatment, based upon an analysis of the State's child fatalities. The Prevention and Intervention services as described in Section II, Stephanie Tubbs Jones, Part 1, implemented in 2014, target families with children who are under the age of five. The services are designed to prevent entry or re-entry of families with children under five into the child welfare system by providing critical services that families need. When families do become involved with the child welfare system, the initial services involve engagement of the family and the family's available resources and supports to prevent the child's placement in OOH care.

In FFY 2014, there were 9,765 children in foster care during the year. Of these children, 2,742 were under five years of age at the end of the reporting period (28.1%). Of these children, 1,607 (58.6%) are still in OOH care; 1,125 (41.0%) exited to permanency; and, 10 (.4%) did not achieve permanency when they exited the system (consisting of five deaths and five transferred to other agencies).

When children under the age of five enter OOH care, the State has implemented initiatives that may reduce the length of time these children are without a permanent family and to ensure that the developmental needs of infants, toddlers, and children are met. Colorado utilizes the following services to address the permanency of children under the age of five:

- Colorado's new Safety and Risk Assessment Tool identifies children five and under as a population at greater risk;
- Supervisors approve all safety plans, the Family Service Plan, and conduct reviews every 90 days thereafter to oversee the child's safety and permanency;
- Young children who have been in OOH care for a year or more may have a PRT; and,
- In the IV-E Waiver counties, when it is part of the county's plan, children age five and under will be screened for trauma using a specialized protocol, *The Checklist: Identifying Children at Risk Ages 0-5*.

In addition to services, there are a collection of trainings for caseworkers, foster parents, and other child welfare professionals that are available through CWTA:

- *Attachment Implications for Multi-Disciplinary Professionals;*
- *Child Development and the Effects of Trauma;*
- *Developmental Consequences of Maltreatment;*

- *Effective Matching Practices: Matching Practices that Promote Permanency;*
- *Medical Aspects of Maltreatment;*
- *Maternal Substance Abuse;*
- *Promoting Health and Stability;*
- *Trauma-Informed Practices;*
- *Understanding Systems of Support for Children with Special Healthcare Needs;*
- *Failure to Thrive — Identification and Treatment;*
- *Attachment Theory in Child Welfare Practice;*
- *Treatment Needs for Physically Abused Children under Six Years of Age;*
- *Working with Families with Children/Parents with Developmental Disabilities;*
- *Community Collaboration Across the Child Welfare and Early Intervention Systems; and,*
- *Trails training: Early Intervention: Developmental Screening.*

As the State and counties focus on the permanency needs of children under the age of five, they are also addressing the developmental needs of children in this age group. Volume 7 rule requires children under the age of five who are victims of a founded case of child abuse and/or neglect to be referred for a developmental screening. Per CAPTA requirements, children under the age of three are referred to the Individuals with Disabilities Education Act (IDEA), Part C Early Intervention System. In Colorado, Part C is administered by the OEC. OCYF and OEC have a Memorandum of Understanding and an active work group to ensure a smooth referral process from child welfare to Part C. In addition, OEC and OCYF provide joint consultation and training to counties in working with their Community Centered Boards around referral processes and Early Intervention services. As Colorado analyzes the outcomes of prevention services, training, and the IV-E Waiver evaluation, there will be a continued focus on new ways to enhance the permanency and developmental services for children under the age of five.

XIV. CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA) STATE PLAN UPDATE

Overview

CAPTA is the key federal legislation addressing child abuse and neglect. The Act provides federal funding to the states in support of child abuse prevention, assessment, investigation, prosecution, and treatment activities and also provides grants to public agencies and nonprofit organizations, including Indian Tribes and Tribal organizations, for demonstration programs and projects. Originally enacted on January 31, 1974 (P.L. 93-247), the Act was amended several times and was most recently amended and reauthorized on December 20, 2010, by the CAPTA Reauthorization Act of 2010 (P.L. 111-320). During FFY 2014, Colorado remained in compliance with the CAPTA Requirements.

Colorado is focused on improving child safety and the consistency of casework practice. Several new initiatives, as described in previous APSR sections, are the guiding vision for this work: *Keeping Kids Safe and Families Healthy 2.0 Plan*; Differential Response; C-Stat; Colorado Practice Model; and, the 2015-19 Child and Family Services Plan. These initiatives support efforts to: 1) integrate safety intervention throughout the child welfare case process; 2) prevent maltreatment of children and the recurrence of maltreatment; and, 3) promote cross-system collaboration that enhances services to children and families. The CAPTA grant helped fund these activities and supported compliance with CAPTA requirements added with the 2010 CAPTA reauthorization. The grant also supported statewide activities to provide clarity and specificity to child welfare practice that aims to improve the quality and consistency in decision-making throughout the child welfare case process.

Substantive Legislative Changes

In 2014, there were no substantive legislative changes related to CAPTA.

Significant Changes to the Previously Approved CAPTA Plan

There were no significant changes to the previously approved 2011 CAPTA Plan.

Information on Child Protective Service Workforce

While Colorado has a statewide child protection workforce, the workforce is hired and maintained through county human resource systems. Colorado does not track statewide data on the supervisor to worker ratio, staff turnover, vacancy rates, or caseload size. Within the county-administered child welfare system, the size and population of each county impacts the local agencies' staff ratios, caseloads, and other workload management. Duties for the county workforce may vary based on the needs of the agency and community. For example, in a smaller county, the child welfare supervisor or caseworker is likely to have other child welfare program responsibilities in addition to child protection. Caseworkers in a larger county may be assigned to one specific child protection function rather than assume responsibilities across the entire spectrum of child protection. The 2015-19 Colorado Child Welfare Training Plan (Appendix F) submitted as attachments to this APSR contain information on the education, qualifications and other training required of caseworkers.

Strengthening Colorado's child protection workforce is a critical focus of Governor Hickenlooper's child welfare plan. To better assess the needs of the child welfare system and workforce, the Colorado Legislative Joint Budget Committee allocated funding for a Child Welfare Performance Audit and a Child Welfare County Workload study, to be conducted by the Office of the State Auditor (OSA) in 2013. The Child Welfare County Workload Study was contracted to ICF International Incorporated, in collaboration with Walter R. McDonald & Associates, Inc. via competitive bid process. The purpose of the study was to establish a

comprehensive picture of the estimated and actual child welfare workload and staffing levels for Colorado's counties. A four-week time study involving 54 counties and 1,300 child welfare caseworkers was conducted during February 2014. Key findings indicated that an estimated 574 additional caseworker FTE positions, plus 122 related supervisory positions were needed to handle the caseloads associated with the time study participants.

Colorado's Legislature has approved and allocated funding for the hiring of 100 new positions for 2015-2016. Counties will hire with a 90/10 funding match, with exception of Tier 1 and 2 tax base counties, which will be funded at 100%. Additional funding has been allocated for a caseload study, which will be completed to determine county caseload sizes and caseworker staffing needs, prior to allocation of funding FTEs.

The DCW Workload Study work group oversees the implementation of the study's findings, determines strategies for improved recruiting and retention methods, and advises the Child Welfare Allocation Committee (CWAC) on recommendations for FTEs.

The Colorado Child Welfare County Workload Study is found at:

[http://www.leg.state.co.us/OSA/coauditor1.nsf/All/E5214710B77C878487257D320050F29A/\\$FILE/1354S%20-%20Colorado%20Childrens'%20Welfare%20Workload%20Study%20Report%20August%202014.pdf](http://www.leg.state.co.us/OSA/coauditor1.nsf/All/E5214710B77C878487257D320050F29A/$FILE/1354S%20-%20Colorado%20Childrens'%20Welfare%20Workload%20Study%20Report%20August%202014.pdf)

The 2011 Colorado CAPTA Plan identified seven program areas of emphasis for this reporting period from CAPTA (42 U.S.C. 501 et seq.), section 106 (a)(1) through (14). The plan may be found at:

<https://drive.google.com/viewerng/a/state.co.us/viewer?a=v&pid=sites&srcid=c3RhdGUuY28udXN8Y2Rocy1kY3d8Z3g6ZTlmMjA0NjE2NDMwNDk5>.

CAPTA Program and Progress Report FFY 2014

The CAPTA allocation, managed by DCW, is used to provide training and technical assistance to counties and tribes administering child welfare programs. There were no significant changes in the seven program areas from the State's 2011 CAPTA plan. Throughout the following program sections, descriptions are provided regarding progress, activities, and continuing efforts that are occurring within each individualized service area.

During the past year, several areas continue to be the focus of child welfare initiatives using CAPTA funds. During FFY 2015 and beyond, Colorado intends to use the CAPTA state grant for a collection of initiatives that are designed to strengthen the child welfare system. The following information summarizes Colorado's 2014 activities as related to one or more of the 14 program areas delineated in CAPTA:

- 1) Improving Colorado’s Intake, Assessment and Screening;
- 2) The Role of Child Welfare Research in Improving Outcomes;
- 3) Improving the Skills and Qualifications of Caseworkers/Recruitment and Retention;
- 4) Improving the Use of Multi-Disciplinary Teams; and,
- 5) Improving and Sustaining Collaboration.

Improving Colorado’s Intake, Assessment, and Screening

CAPTA Program Areas (1) The intake, assessment, screening, and investigation of reports of abuse or neglect.

Enhancing the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols, including the use of differential response.

Colorado’s emphasis on front-end safety improvements, as outlined in the Stephanie Tubbs Jones/Safety Section II are supported by CAPTA and Children’s Justice Act (CJA) funding and include:

- Rewrite of Volume 7 Child Welfare Rules: Colorado’s Volume 7 has been amended multiple times, resulting in inconsistent language and lack of clear organization. To improve the usability of the Volume 7 rules, CAPTA funding was used to retain Rocky Mountain Children’s Law Center to review current rule and rewrite Volume 7 rules with the help of state program staff. Suggestions were given by community stakeholders and work groups, including county attorneys, county child welfare staff, and county directors. This rule re-write became effective January 1, 2015.
- Implementation of Colorado’s new Safety and Risk Assessment Tools: Several critical steps involved selection and testing of the new Safety and Risk Assessment tools. A workgroup comprised of county and state representatives created a new instrument to measure and assess safety and practitioners tested the risk and the new tools in 2013 across the state using live data in Trails to test for inter-rater reliability. Starting in 2014, the tools and training curriculum were field tested in three Colorado counties. This field test includes research conducted by CSU, as well as support from program staff to plan for implementation of the new tools, including data system needs, training, and quality assurance. The new Colorado Safety and Risk Assessment Tools began statewide implementation in January 2015 and will continue throughout 2015.
- Child Advocacy Center (CAC) Forensic Interview Training: In order to improve Colorado’s ability to assess and investigate reports of abuse and neglect, CJA funding was utilized to provide training for forensic interviewers throughout the State. Training curriculum was developed specifically for Colorado in 2013 and includes classroom and field experience components. Trainees included law enforcement agents, child welfare workers, and child advocacy center staff. In addition, the Southwest region and Pueblo County increased their number of forensic interviewers.

- DR Expansion: Colorado’s goal is to implement DR statewide. As counties request to become DR counties, CAPTA supports the training and implementation activities required prior to approval by the CDHS Executive Director.

Improving the use of Multi-Disciplinary Teams

CAPTA Program Area (1)(A) Creating and improving the use of multi-disciplinary teams and interagency, intra-agency, interstate, and intrastate protocols to enhance investigations; and (B) Improving legal preparation and representation;

Access to expert consultation on child abuse and neglect is critical for all counties. CAPTA funding was used to support the State and Regional Team (START), which is located at The Kempe Center for the Prevention and Treatment of Child Abuse and Neglect. START is a multi-disciplinary team that provides consultation and training throughout Colorado. The Team includes expert input from a variety of disciplines, including, but not limited to: pediatric medicine, forensic psychology, law, social work, and law enforcement.

Funding for START consultations is provided through both CAPTA and CJA funds. CAPTA funding generally supports START consultations for county departments of human/social services who are looking for expert input regarding investigation/assessment of child abuse/neglect, preparation for child abuse/neglect trials, and case and treatment planning. CJA funding generally supports START consultations for law enforcement agencies who are investigating child abuse/neglect cases.

Both CAPTA and CJA funding is also utilized to ensure that all counties have access to expert pediatrician consultation. These pediatricians are members of the Institutional Abuse Review Team (IART) and the CJA Task Force, and are available on an individual basis as consultants and trainers.

In addition to expert consultation, grants were provided for several other multi-disciplinary teams to enhance local practice, including CJA funding to Prowers County, Tu Casa, Ralston House, and SungateKids to support county-specific programming related to the recommendations of the CJA Task Force. A list of these grants can be found in Appendix G. CJA funding also supports participation in the Human Trafficking Task Force (HTTF). The goal of HTTF is to explore the collaborative child welfare response to child and youth trafficking in Colorado. Participants include DCW program staff, Judicial, representatives from county departments of human/social services, non-profit organizations, and child welfare service providers.

The Role of Child Welfare Research in Improving Outcomes



CAPTA Program Area (1) Case management, including ongoing case monitoring, and delivery of services and treatment provided to children and their families.

Child welfare research informs Colorado's child welfare practice, and is vital to the evaluation of outcomes. In 2014, Colorado's CAPTA funding supported both Chapin Hall and the Applied Research in Child Welfare (ARCH) Projects, as aforementioned in Program Support, Section IV. ARCH published a report in March 2014 titled, *Children Adopted in Colorado's Child Welfare System: A Study of Trends and Outcomes*, and the group is currently researching secondary trauma and caseworker retention, which is another of Colorado's CAPTA Program Areas.

In 2014, DCW began partnering with the University of Denver and the Kempe Center for the Prevention and Treatment of Child Abuse and Neglect to disseminate *Fostering Healthy Futures*, an evidence-based program for children and youth in OOH care. This two-year partnership will result in a cost-analysis, implementation at various county sites in the metro area, and adaptation of the model to accommodate for the particular needs of rural areas.

Improving the Skills and Qualifications of Caseworkers/Recruitment and Retention

CAPTA Program Area (6) Developing, strengthening, and facilitating training including:

- (A) Training regarding research-based strategies, including the use of differential response, to promote collaboration with families;*
- (B) Training regarding the legal duties of such individuals;*
- (C) Personal safety training for case workers; and,*
- (D) Training in early childhood, child, and adolescent development.*

CAPTA Program Area (6) Improving the skills, qualifications, and availability of individuals provides services to children and families, and the supervisors of such individuals, through the child protection system, including improvements in the recruitment and retention of caseworkers.

Training is essential in preparing caseworkers to work with children, youth, and families. The recruitment and retention of caseworkers is vital to family and child relationships and treatment progress. However, casework experiences may be difficult, or traumatic, which may affect caseworker retention. To support the ongoing work of child welfare caseworkers throughout the State, DCW contracts with a secondary trauma expert to provide support to the counties. This expert provides brief crisis support, as well as the ongoing development of self-care techniques and developing resilience to vicarious trauma. In addition, in the fall of 2014, a Request for Proposal (RFP) was released to increase Colorado's offering of secondary trauma support. Additional providers and two pilot programs started in December 2014.

CAPTA funds support DCW Program staffs' ongoing coaching and TA that support county caseworkers and supervisors. Staff is available by phone and in-person to provide assistance on the new safety/risk assessment tools, diligent search, and consulting on difficult cases. Additional training was provided for ongoing support of the CPM. State program staff worked with county departments of human/social services to implement the CQI/QA processes of the CPM and to identify promising practices and opportunities for improvement. Examples include increasing monthly face-to-face contact with youth in OOH, increasing worker retention, implementing a day treatment model, and preventing placement of youth in congregate care settings.

Improving and Sustaining Collaboration

CAPTA Program Area (13) Supporting and enhancing interagency collaboration among public health agencies, agencies in the child protective service system, and agencies carrying out private community-based programs:

- (A) To provide child abuse and neglect prevention and treatment services (including linkages with education systems), and the use of differential response; and,*
- (B) To address the health needs, including mental health needs, of children identified as victims of abuse or neglect, including supporting prompt, comprehensive health and developmental evaluations for children who are the subject of substantiated child maltreatment reports.*

Collaboration is important to DCW, to obtain the developmental assessments and health services that are needed by children in the child welfare system. Collaboration with OEC, OBH, and CDE has involved the following projects:

- An inter-agency work group was established in 2013 to ensure compliance with both Federal CAPTA regulation (P.L. 111-320 Section 106(b)(2)(B)(xxi)) and C.R.S. (26-5-108) that children under the age of five with founded instances of child abuse/neglect are to be referred to the appropriate agency for developmental screening. Work group participants include representatives from OEC, DCW, CDE, county departments of human/social services, and non-profit organizations. The group meets monthly to develop consistent policies, ensure accurate messaging, provide training as needed, and ensure accurate data collection regarding referrals to developmental evaluations. Projects have included integrating the referral process into Trails, and development of a *Frequently Asked Questions* document.
- OBH was awarded a federal grant to initiate a trauma-informed System of Care model in eight pilot counties, which was described previously in the Collaboration Section.
- Mile High United Way, CDHS, and CDE collaborate to ensure that children and youth in OOH care have all their educational needs met. The collaboration improves communication and collaboration amongst Child Welfare Education Liaisons, local

educational agencies, guardians ad litem, child welfare caseworkers, and other community members.

- CJA Funds were awarded for the development of the Pilot Caregiver Project with Rocky Mountain Children's Law Center to support kinship, non-relative, and foster families to improve the prompt and successful resolution of civil and criminal court proceedings involving children affected by child abuse and neglect.
- CJA Funds were awarded to develop print and electronic reference materials on the impact of substance use on children and families. The application fits well with the CJA goal of conducting training for personnel in law enforcement and child welfare, and creates a solid deliverable that can have an impact beyond this project.
- CDPHE Child Fatality Review: CJA funds supported the CDPHE review of child fatality prevention through September 30, 2013. The CJA Task Force has also been working with the Colorado Fatality Review Team (CFRT) since October 2014 to respond to CFRT recommendations.

CAPTA Citizen Review Panel Reports

In 2014, Colorado remained in compliance with CAPTA requirements for citizen review panels. The purpose of citizen review panels is to evaluate the extent to which States are meeting the goals of protecting children and their responsibilities to the CFSP. Members of the panels are broadly representative of the community in which the panel is established and include members with expertise in the prevention and treatment of child abuse and neglect. Colorado has three citizen review panels: Institutional Abuse Review Team, Child Fatality Review Team, and the CJA Task Force. All of the panels fulfilled CAPTA requirements regarding meetings, mission, and submission of annual reports. The Citizen Review Panel's Annual Reports, with a description of each panel's 2014 activities, and the current DCW responses to the panels' annual reports are included as attachments to this APSR, and are in Appendix H.

CAPTA Fatality and Near Fatality Public Disclosure Policy

CDHS is in compliance with CAPTA Section 106(b)(2)(B)(x), Fatality and Near Fatality Public Disclosure Policy. Colorado Revised Statutes (C.R.S.) requires the Department to notify the public in cases of child death, serious injury, and egregious incidents due to maltreatment or suspected maltreatment.

C.R.S. 19-1-307

(1)(a) **Identifying information – confidential.** Except as otherwise provided in this section and section 19-1-303, reports of child abuse or neglect and the name and address of any child, family, or informant or any other identifying information contained in such reports shall be confidential and shall not be public information.

(1)(b) **Good cause exception.** Disclosure of the name and address of the child and family and other identifying information involved in such reports shall be permitted only when authorized by a court for good cause. Such disclosure shall not be prohibited when there is a death of a suspected victim of child abuse or neglect and the death becomes a matter of public record or the alleged juvenile offender is or was a victim of abuse or neglect or the suspected or alleged perpetrator becomes the subject of an arrest by a law enforcement agency or the subject of the filing of a formal charge by a law enforcement agency.

C.R.S. 26-1-139

This statute creates and outlines the duties of the Child Fatality Review Team and requires that “a case-specific executive summary, absent confidential information, of each incident of egregious abuse or neglect against a child, near fatality, or child fatality reviewed. The team shall post the case-specific executive summary on the state department's web site” (CRS 26-1-139(4)(i)(III)).

Colorado State CAPTA Coordinator

Lorendia Schmidt, CAPTA Administrator
 Division of Child Welfare
 Colorado Department of Human Services
 1575 Sherman Street
 Denver, CO 80203-1714
 Phone (303) 866-4268
 Email: Lorendia.Schmidt@state.co.us

Child Maltreatment Deaths

Sources of Data on Child Maltreatment Deaths

To maintain a separation between program and review functions, the ARD, within the CDHS Office of Strategic Performance Outcomes, is responsible for Colorado’s fatality review process.

All child fatality reports that occur as a result of maltreatment are recorded by county departments in Trails and the National Child Abuse and Neglect Data System (NCANDS). In some specific instances (e.g., no surviving siblings in the home), law enforcement will investigate instead of county departments of human/social services. In those cases, investigation data is entered into Trails, and the findings are documented in the referral information. In these instances, these children are not included in the NCANDS Child File but are instead reported in the NCANDS Agency File.

Prior to 2011, the Colorado Child Fatality Prevention Act established two Child Fatality Review processes within the state, although the majority of the statutory authority in this Act explicitly

provided for the Colorado Department of Public Health and Environment's (CDPHE) child fatality review process. CDPHE's fatality team reviews all of Colorado's child fatalities, regardless of the cause of death, with the goal of developing prevention strategies. In contrast, the Child Fatality Prevention Act contained limited statutory authority for the provision of a child fatality review process within CDHS and in the counties.

During Colorado's 2011 legislative session, the passage of HB 11-1181 codified CDHS's Child Fatality Review Team (CFRT) and statutory authority through section 26-1-139 of the Colorado Revised Statutes. The statute outlines the objectives and duties of the county departments and CDHS, as well as the structure/membership of the CFRT and reporting procedures.

In 2012 the legislature passed SB 12-033, which amended statute to include the review and public disclosure of non-confidential information of near fatalities and egregious incidents of abuse or neglect. The statutory change creates greater alignment with the federal requirements under the 1996 Child Abuse and Prevention Treatment Act (CAPTA), which mandates that states adopt "provisions which allow for public disclosure of the findings or information about the case of child abuse or neglect which has resulted in a child fatality or near fatality", 42 U.S.C. 5106 § a(b)(2)(A)(x).

Colorado's contact for NCANDS, Adoption and Foster Care Analysis and Reporting System (AFCARS), and National Youth in Transition Database (NYTD) federal submissions is:

Linda Carlisle, Federal Data Analyst
 Colorado Department of Human Services
 1575 Sherman Street
 Denver, CO 80203
 303-866-2281
 Email: Linda.Carlisle@state.co.us

XV. CHAFEE FOSTER CARE INDEPENDENCE AND EDUCATION AND TRAINING VOUCHERS PROGRAMS

The CDHS administers Colorado's Chafee Foster Care Independence (CFCIP) and Education and Training Voucher (ETV) Programs, providing statewide services and support for youth currently residing in or exiting OOH care, in accordance with the John H. Chafee Foster Care Independence Program. This section provides an overview of the services provided for the period of October 1, 2013 to September 30, 2014.

In accordance with the John H. Chafee Foster Care Independence Program Section 477 (42 U.S.C. 677)(a) of the Social Security Act, Colorado defines youth otherwise eligible for CFCIP services in child welfare rules to include youth:



1. Currently in OOH care, 15 to 18 years of age, and in an OOH placement for a minimum of six non-consecutive months;
2. Age 16 to 21 who entered adoption assistance or relative guardianship assistance on or after their 16th birthday;
3. Age 18 to 21, who were in OOH care on their 18th birthday; and,
4. Youth in DYC community placement settings who otherwise meet one of the above eligibility criteria.

Distribution of Funds

Colorado's CFCIP offers services statewide through a county-administered system. Twenty counties across the state hosted dedicated CFCIP programs during this period. Nine of the host counties currently provide collaborative program support to youth in 20 additional counties and the Southern Ute and Ute Mountain Ute Tribes. A Balance of State Fund provides access and support to eligible youth needing CFCIP services in rural counties that do not host a program or have a service agreement with a host county. In total, 834 youth were served through CFCIP in FFY 2014.

In FFY 2016, Colorado will develop new Trails reports to aid in the identification of every child/youth, in the child welfare system, who is eligible for CFCIP services, revise the wait list protocol, and make changes to the CFCIP County Allocation methodology.

Colorado's CFCIP service population expanded during 2013-14 following the clarification of Volume 7 rule with ACF Region VIII, which allows services for youth living with non-certified kin providers when the county department retains placement and care authority. Continued efforts to improve alignment, coordination, and consistency of services to youth across the state through HB 13-1239, Statewide Youth Development Plan, and the Pathways to Success initiative will likely result in continued expansion of service populations.

Program Design and Delivery

To meet the purposes of the John H. Chafee Foster Care Independence Program, Section 477 (42 U.S.C. 677)(a), and as amended by P.L. 113-183, section 477(a)(1-8), Colorado utilizes a planning process for CFCIP host counties which requires counties to identify projected services and for identifying youth in each of the CFCIP eligible service populations, processes for outreach and increasing awareness of the program, and a description of the county's program design and plans to assist the youth in achieving self-sufficiency by:

- Supporting legal permanency and life-long connections to dedicated, supportive adults;
- Promoting well-being through the connection to physical, dental, mental, behavioral and sexual health strategies and resources, healthy relationship and lifestyle choices, and access to Medicaid and health insurance;

- Providing support to youth to help them obtain and maintain safe, stable, and affordable housing;
- Supporting completion of a high school diploma or GED;
- Helping youth prepare for, enter, and complete post-secondary training and education;
- Assisting youth in the exploration of career options, connection to services, and development of education, training, and skills necessary to obtain employment;
- Promoting financial stability through increasing knowledge of financial responsibilities and skills in personal household financial management;
- Encouraging successful transition into adult self-sufficiency; and,
- Ensuring that children who are likely to remain in foster care until age 18 have ongoing opportunities to engage in “age or developmentally-appropriate” activities.

As Colorado aligns CFCIP services with the program’s purposes, it additionally uses research-informed, targeted service delivery based on the characteristics and needs of four distinct sub-groups of youth making the transition to adulthood as identified in the *Midwest Evaluation of the Adult Functioning of Former Foster Youth* (Courtney, 2010). These sub-group characteristics include:

- **Accelerated Adults:** Members of this group were reported to be faring reasonably well. They primarily live on their own, are employed, and parenting children (if they had any). Members of this group have avoided the criminal justice system and have received a high school degree, and some continuing education.
- **Struggling Parents:** Nearly all members of this group have resident children, and they are most likely to be married or cohabitating. About equal numbers had their own place to live or lived with relatives, friends, or others. This group was least likely to have finished high school or to be currently enrolled in school. Only one-quarter was employed and reported the lowest levels of social support of any of the groups.
- **Emerging Adults:** This group is generally employed or in school, most have finished high school, and many have attended some college. This group is the second most-likely to be employed and the least likely to have experienced homelessness or “couch-surfing.” They have avoided trouble and are often relying on family or friends for a place to live and other forms of support.
- **Opportunity Youth (Troubled and Troubling):** Youth in this group are likely to suffer from mental and behavioral health problems and to have acquired limited social networks and resources. They may have children that they are not actively parenting and could be periodically or chronically involved in the criminal justice system.

County departments are required to address each of the four sub-groups in their planning by identifying targeted services to meet the population's unique needs. The State enlisted a multi-disciplinary group, comprised of members of representatives from the CDHS, Mile- High United Way/Bridging the Gap, Colorado Department of Local Affairs/ Division of Housing, CSU/Fostering Success Program, and CASA of Colorado to review county CFCIP plans. This team reviewed and provided constructive feedback to county departments about their proposed programs, gaps, and ways to increase support and connections for youth.

Additionally, Colorado's CFCIP focuses on services within each of the outcome areas of well-being, permanent connections, housing, education, and employment. This approach aligns with Colorado's Positive Youth Development Framework (HB 13-1239) and the Pathways to Success initiative. Through these initiatives, CFCIP has worked closely with other state agencies to improve the alignment of cross-system services, particularly in the areas of education, employment, and housing.

Youth Involvement in Agency Improvement Planning Efforts

Youth involvement is critical to the CFCIP and 16 youth advisory boards and councils are maintained across the State. The Colorado Youth Leadership Network Coordinators Peer Support and Technical Assistance Meetings, seven of which were held in 2014, support these efforts. The Colorado Youth Leadership Network Youth Advisory Board guides the youth advisory boards. Four teleconferences were conducted in 2014. The Youth Leadership Network Youth Advisory Board also engaged in the following activities:

- A foster care alumni has joined the CDHS Executive Child Welfare Leadership Council;
- The Pathways to Success initiative's Youth Advisory Committee was established and includes youth from Boulder, Fremont and Garfield Counties, Shiloh House, Mile High United Way, Colorado DYC, Colorado Division of Housing, DIFRC, and Urban Peak Denver;
- Sixty-five youth were trained in youth leadership, presentation and Independent Living skills; and,
- A Colorado Youth Advisory Board Summit was hosted on August 26, 2014 to encourage peer-to-peer youth-sharing about the structure and accomplishments of youth advisory boards.

Youth involvement is critical to the CFCIP and 16 youth advisory boards and councils are maintained across the State.

Colorado's planning efforts for maintaining and enhancing youth voice are focusing on increasing youth involvement through recruiting youth for all CFCIP committees, the Pathways to Success Initiative, and maintaining collaboration with *Colorado 9to25* to enhance youth opportunities and experiences.

Training and Program Support

Creating, identifying and facilitating the opportunity for ongoing agency and staff support is a continuous need throughout the state. Technical assistance is provided to counties by the State Coordinator on an ongoing basis via email and telephone consultation. Some of the most common requests for assistance include questions about appropriate CFCIP and ETV expenditures, assessments and transition planning for youth with disabilities, Independent Living plans, NYTD services documentation, outcomes survey completion, and creative ways on engaging older youth in services and the NYTD Survey. Additionally, State CFCIP support is provided through Chafee Quarterly Services meetings for county CFCIP caseworkers and supervisors, and through Adolescent Services Quarterly meetings for county caseworkers and stakeholders working with youth and young adults. Training and policy updates are provided in these meetings, and TA is provided as needed. In 2014, two NYTD webinars were provided to 12 caseworkers representing 10 counties.

Program Reporting

National Youth in Transition Database (NYTD)

The NYTD is a federal database that collects information about youth in foster care, including sex, race, ethnicity, date of birth, and foster care status. It also collects information about the outcomes of those youth who have aged out of foster care. Colorado's data collection began in 2010, and the State submitted its first data to ACF in 2011.

Using youth input, the mandatory NYTD questions were re-ordered to be trauma-informed.

Colorado completed NYTD baseline surveys with Cohort II 17 year olds this period, and the data can be found in Appendix I. NYTD data is shared with all collaborative stakeholders and at youth-focused events/trainings.

NYTD Program Planning

While evaluating its NYTD program, Colorado determined that the youth outreach methods needed improvement to obtain improved survey participation. Using youth input, the mandatory NYTD questions were re-ordered to be trauma-informed. After seeking additional input from multiple youth advisory boards, systems, and human trafficking, and trauma professionals, the Colorado Youth Experiences Survey (YES) NYTD enhancement was developed. The YES is being re-designed to improve state-level data related to homelessness and human trafficking, and will be implemented with Cohort II, 19-year olds in 2016. YES is expected to enhance state level data by improving information about the relationships youth have to the positive adult connections they identify in the NYTD survey.

As Colorado continued to assess ways to improve its NYTD youth response, new procedures were developed to guide the NYTD search and outreach, with identification of marketing tools for future NYTD outreach. A NYTD resource guide was distributed to all NYTD participants

and a new incentive structure was developed to encourage survey participation: \$10 for 17 year olds; \$25 for 19 year olds; and, \$50 for 21 year olds. Trails enhancements were also added that include automated caseworker notifications and initial email messages to survey participants, the addition of search and sort features, and increased CFCIP access to surveys coming due.

Colorado NYTD continues the development of enhancements, based on TA, in-state learning and promising practices gleaned from other states. In 2015, these improvements will include:

- Increasing efforts to maintain relationship with youth throughout non-survey periods;
- Re-working materials to be increasingly youth friendly based on feedback from youth;
- Incorporating strength-based survey engagement techniques;
- Better connecting youth to resources based on needs identified through survey responses;
- Providing ongoing training to county departments and NYC; and,
- Utilizing youth interns to assist with survey outreach and improvement efforts.

Data provided throughout this APSR was compiled using data from Trails, NYTD, and ETV forms and covers the period from October 1, 2013 through September 30, 2014. Each October, the State runs annual reports on the number of youth served and the type of services provided via the Trails system. Counties are required to enter information on the Independent Living page in Trails, indicating the type of services each youth receives with services start and end dates. Counties may also run Trails reports to be utilized for case monitoring, and county service delivery information, and caseload summaries, NYTD demographics, and tracking of Independent Living Plans and Emancipation Transition Plans. DCW State Program staff conducted TA calls with counties on May 30 and June 3, 2014 to provide training for CFCIP counties on the use of Trails reports to track youth that are at risk of aging-out of care and eligible for services in order to inform service planning and service delivery. Individual county consultation was also available following the calls.

In 2014, Colorado completed enhancements to the Trails Emancipation Transition Plan (ETP) functionality requiring supervisor approval for changes to the emancipation/discharge date and a selected reason for the change; keeping a historical record of changes to the ETP; and requiring ETP completion prior to closing services. Additional enhancements to Trails are being pursued to support CFCIP and ETV administration, and will include an expansion for NYTD, survey support and alignments to the Pathways to Success initiative outcome areas, and ETV wait-list tracking. A new Trails *Pathways to Success Eligibility Report* is in development and will indicate eligibility for multiple cross-system services in 2017.

Evaluation, Information Management and Quality Assurance

Colorado's CFCIP is evaluated using stakeholder input, Trails reports, year-end program services reports, and ARD review findings. ARD monitors counties for compliance with case planning services related to Independent Living and the CFCIP.

State Barriers

Colorado's CFCIP Manager participates in the Permanency Task Group to improve permanency outcomes for all youth. As aforementioned, barriers to permanency and youth services were identified by the SubPAC Permanency Task Group. These barriers apply to all youth who are in OOH care or under the care and supervision of the county departments.

Coordination with Tribes

Colorado's CFCIP offers services to youth from the Southern Ute Indian and Ute Mountain Ute Tribes through the La Plata County CFCIP Program. No services were requested this period. La Plata County has actively engaged the Tribes regarding provision of services. In October 2014, the County met with Southern Ute Indian Tribe representatives to review the purposes of the CFCIP, including the different types of support available to youth who are or have been in OOH care. The two entities developed a draft Southern Ute Indian Tribe-La Plata County Letter of Agreement which would allow the CFCIP to be provided to tribal youth who live within the exterior boundaries of the reservation. The draft remains under review with the Southern Ute Indian Tribal Council, and has not yet been finalized.

In March 2015, staff from both the Southern Ute Department and the Ute Mountain Ute Departments of Social Services joined La Plata County staff in a training entitled, "Understanding and Helping Troubled and Troubling Foster Children."

Both La Plata and Montezuma Counties utilize the services of the CDHS County Liaison regarding more effective ways they can outreach to the Tribes. CDHS provides technical assistance and support to La Plata County and the Tribes, as requested, during service negotiations.

2014 CFCIP Goals and Progress

Colorado's CFCIP is focused on five goals, which are aligned with the 2015-19 CFSP goals, to improve CFCIP outcomes. These goals are:

- Focus on preventing homelessness among youth who leave foster care;
- Increase the percentage of youth with Medicaid or other health insurance after leaving foster care;
- Increase the percentage of youth who report receiving a high school diploma, GED, vocational certificate/license, college, or graduate degree; improving education and employment;
- Increase the percentage of youth who complete a Youth Connections Scale annually to identify and strengthen permanent connections; and,

- Increase the percentage of youth who are employed or in employment training after leaving foster care.

In meeting these goals, Colorado uses a services array that is summarized in Figure 16.

Figure 16: Colorado's CFCIP Services Array



The progress and activities of Colorado's CFCIP goals are summarized below:

Goal 1: Reduce instances of homelessness among youth who leave foster care.

Striving to improve this outcome, Colorado worked with the CDHS Division of Housing to expand eligibility for Youth Family Unification Housing Vouchers (FUP) and to align processes to better forecast the housing needs of youth exiting child welfare and youth corrections. After implementing a rapid determination process to speed-up the child welfare verification of FUP applicants, an average of 10 referrals for the FUP are currently being processed weekly. County year-end CFCIP data indicated that the CFCIP program served eight identified victims of human trafficking, 24 youth who were homeless at some point during the year, and four youth who spent time in a shelter.

Goal 2: Increase the percentage of youth with Medicaid or other health insurance after leaving foster care.

Colorado implemented an expansion of Former Foster Care Medicaid, (previously referred to as Emancipation Medicaid) for individuals under age 26 who were in foster care under the State's or Tribe's responsibility and were receiving Medicaid when the individual reached the ages of 18-21. DCW coordinated with HCPF to extend Medicaid coverage to those youth who left the system prior to the expansion.

Goal 3: Increase percentage of youth who report receiving high school diploma, GED, vocational certificate, vocational license, college, or graduate degree.

Through its collaboration with Colorado Department of Education (CDE), CDHS, Mile High United Way, University of Northern Colorado (UNC), and the Morgridge Family Foundation, expanded state-level CFCIP data on the education of foster care youth, and the 2012-13 data underscores the importance of education for youth in OOH care:

- The graduation rate for Colorado's OOH care youth is 27.5 %, indicating that 72.5 % of students in OOH care did not graduate in four years with their class.
- Students in OOH care have a "mobility rate" of 42.8 %. A student is considered mobile any time he or she enters or exits a school or district in a manner that is not part of the normal educational progression. This represents the highest mobility rate among unique student populations, including homeless and migrant. The statewide mobility rate for 2012-13 was 16.2 %.

Further highlighting educational concerns, Dr. Elysia V. Clemens at the UNC College of Education and Behavioral Sciences, concluded a five-year trend study examining the graduation rates and dropout rates of these students. The study revealed that:

- Fewer than one in three Colorado students who were in OOH care during high school graduated within four years of entering ninth grade;
- Approximately one in eleven students in OOH care dropped out one or more times;
- Students in OOH care dropped out earlier in their educational careers than other unique populations; and,
- One in three students in OOH care was identified as having a disability and eligible for special education services.

To fully ensure the educational success of every child, every time, Colorado has embraced the Legal Center for Foster Care and Education's cornerstone publication, the *Blueprint for Change: Education Success for Children in Foster Care* as a tool for change, and has engaged other state agencies and stakeholders to develop a shared action plan for system-level reform.

Colorado has also improved access to post-secondary education and facilitated improved access to financial aid for youth by partnering with the Colorado Association of Financial Aid Advisors (CAFAA), the CIP, CDE, Colorado Department of Higher Education, and Mile High United Way, representatives from several colleges and universities, and community providers. The collaboration developed a "Confirmation of Foster Care Dependency" form to streamline the

determination of independent status, and the new form has been adopted as a Best Business Practice by the CIP and endorsed by CAFAA. Continued efforts to align service access using this form are being pursued and will likely result in streamlined access to other systems and services in 2016.

Year-end reports from county CFCIP show 46% of CFCIP-connected youth were enrolled in some level of education with 18% having completed an educational goal during the period. Colorado's CFCIP continues to align itself with federal priorities and with the five aforementioned outcome areas. The program is also increasing and aligning state and county data systems that support program and policy direction, achieving improved outcomes for older youth and educational goals during the period.

Goal 4: Increase the percentage of youth who complete a Youth Connections Scale annually to identify and strengthen permanent connections.

2014 was the first year county departments were asked to report their use of the "Youth Connections Scale" with youth in the CFCIP. Baseline data indicates that 143 youth completed the scale while receiving CFCIP services, which represents 17% of the CFCIP population. Counties are encouraged to increase their use of the scale annually to maintain a focus on permanency and lifelong connections. It is expected that elevated use of the scales will lead to higher rates of youth permanency and improved long-term outcomes.

Goal 5: Increase the percentage of youth who are employed or in employment training after leaving foster care.

DCW has worked closely with the Colorado Department of Labor and Employment (CDLE) to improve workforce services designed to increase employment among foster care youth. The CFCIP presented at the 2013 "Think Big" conference for workforce professionals about improving coordination of services for CFCIP youth. CDHS has been actively involved with CDLE with a focus on re-aligning and enhancing services for OOH care youth in response to shifting funding priorities of the Workforce Innovation and Opportunity Act (WIOA). The continuing focus on workforce is anticipated to result in streamlined eligibility determination for youth in foster care entering workforce programs.

Collaboration with Public and Private Agencies

As illustrated in the above CFCIP goals, collaboration is critical to improving youth outcomes. During 2014, Colorado's CFCIP developed and maintained strategic partnerships to support core outcomes and enhance the CFCIP and Independent Living support for youth at-risk of emancipating from foster care and those who have aged out of foster care. The State CFCIP has strengthened involvement in a number of multi-systems and community collaborative workgroups with overlapping goals and focus on transition-age youth. This section highlights collaborative partnerships with a focus on five statewide, multi-systemic workgroups that bring

together key organizations in the community to focus on each of the outcome areas. Additional detail concerning the partnerships can be found in Appendix J.

Housing Outcome Area Partnerships

The following partnerships describe Colorado's efforts to prevent youth homelessness:

- **Advisory Committee on Homeless Youth (ACHY):** This committee is the strategic planning and action body focusing on preventing and addressing youth homelessness in Colorado. Committee members advise the Office of Homeless Youth Services and work collaboratively to carry out Colorado Homeless Youth Action Plan activities.
- **Rural Collaborative on Homeless Youth (RCHY):** A collaborative of state agencies, county departments, and community providers focused on improving the delivery of services and supports to youth in rural communities who have little or no connection to stable housing and family situations.

Education Outcome Area Partnerships

Colorado's educational partnerships are critical to improving youth educational outcomes, and include the following:

- **College in Colorado:** This organization is a key partner involved in improving educational outcomes for youth by hosting a comprehensive package of web-based tools and supports that assist youth to prepare for and navigate college.
- **CDE:** Partners with DCW on educational stability.
- **Colorado Department of Higher Education:** Provides assistance with admission procedures.
- **Pathways to Success Educational Opportunities Workgroup:** This workgroup has identified incremental steps to improve access and outcomes for youth pursuing post-secondary education in Colorado. The group includes a broad membership of schools, state entities, and community partners who have an interest in post-secondary success for youth who have had prior involvement in the foster care system.
- **College Connect:** This multi-day college experience held on July 15-18, 2014, brought together 50 youth from 12 counties on the Pingree Park Campus of CSU. Youth experienced living in a dorm environment, eating in a cafeteria, attending college level courses, Question and Answer sessions with students currently attending college, college-prep activities, and programs designed to build connections and relationships with peers. This event is being re-designed in 2015 to serve a greater number of youth while aligning with key outcome areas and needs. The new format will connect youth to key knowledge, resources and supports in each of the five outcome areas. The educational component will expand to incorporate trade, career, and technical options.

Employment Outcome Area Partnerships

Employment partnerships connect youth with the assistance they need to enter the workforce, and consist of the following:

- **CDLE Workforce Centers:** These Centers provide a variety of free services to assist job seekers, such as job listings; computer/internet access; and, career counseling and training.
- **State Youth Council:** This Colorado group focuses on youth initiatives and how they can best receive training, education, and workforce assistance through the workforce development system. The Council connects local youth councils to the resources necessary to help youth find meaningful employment and gain the experience necessary to compete in Colorado's global economy.

Well-Being Outcome Area Partnerships:

The following partnerships focus on youth well-being, which includes, but is not limited to behavioral health and youth sexual health:

- **Under 26 Workgroup:** This workgroup is a sub-committee of Colorado's Behavioral Health Transformation Council, whose mission is to develop an effective, culturally responsive, community based, integrated and accessible system of care for transition age youth and young adults age 14-25.
- **Youth Sexual Health Team:** This collaborative team is focused on parent and family engagement, education, and connectedness regarding youth sexual health.
- **Trauma Informed System of Care:** CFCIP program staff participates in is collaboration, previously described in the Title IV-E Waiver, Section XI.

Permanency Outcome Area Partnerships:

Several organizations have partnered to focus on improving permanency outcomes:

- **LGBT Resource Family Outreach Partnership:** This year, Colorado partnered with the Lesbian, Gay, Bisexual and Transgender Community Center of Colorado (The Center), Raise A Child, the Human Rights Campaign, and Denver County to host an event designed to introduce members of the LGBT communities to opportunities for foster care and adoption, as aforementioned in the Recruitment and Retention Section.
- **Permanency Task Group:** This workgroup is comprised of county and state representatives and is focused on improving permanency outcomes for youth, as described in Stephanie Tubbs Jones, Part 1.
- **The Adoption Exchange:** Assists youth with information about adoption and permanency.

Colorado Education and Training Voucher Program

Colorado's ETV program is intended to serve youth who are likely to remain in foster care until age 18, and supports self-sufficiency by providing financial support, coaching, and guidance to youth pursuing post-secondary educational goals through accredited colleges, universities, or

career and technical schools. Youth may qualify for up to \$5,000 in vouchers per year to assist with their educational goals.

Colorado's ETV Program has been administered by Foster Care to Success since academic year 2003-2004. This program maintains individual contact with youth, monitoring progress and providing individualized coaching and guidance to help youth navigate their academic and social environments. Additionally, Foster Care to Success provides youth with care packages and access to additional scholarships and internship opportunities.

Colorado has increased efforts to connect youth receiving ETV support with county CFCIPs and school or community based resources. Local programs receive notification in October and February of all youth receiving ETV support attending schools in their county to improve outreach and support. Eligibility for ETV mirrors eligibility for Colorado's CFCIP.

Colorado has continued efforts to expand the use of ETV by cultivating strategic partnerships to educate high school guidance counselors, colleges, universities, career and technical schools, other state agencies and CASA volunteers about how to assist older youth planning to pursue post-secondary education. In addition, Colorado expanded efforts to connect the youth receiving ETV with community scholarship opportunities. These efforts were so successful that the previously under-utilized Helen M. McLoraine Scholarship for "Foster Care and Emancipated Youth," offered by the Denver Foundation, was fully utilized.

Program guidance received from the ACF, Region VIII supports the extension of ETV support to youth as young as 15 years of age who are currently in out-of-home care when special circumstances warrant early GED attainment and alternative educational goals that meet the needs and learning style of the youth.

Information about Youth Participating in Colorado's 2013 ETV Program

Grant amounts were determined by careful analysis of each student's cost of attendance, financial aid package and budget, and determination of unmet need as per the Higher Education Act. Colorado's CFCIP youth awarded ETV are comprised of the following numbers:

- 229 Colorado ETV Vouchers awarded in FY 2013
- 152 students funded
 - 40 students began college / career and technical school for the first time
 - 74 students were previously funded
 - 74 students who received ETV funds were also connected to a county CFCIP.

The following tables and figures provide additional information on Colorado's youth receiving ETV:

Table 16: Ages of Funded Students

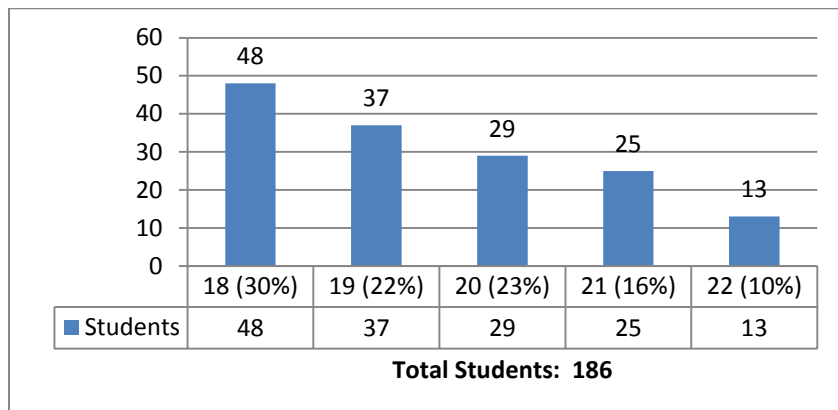


Figure 17: Student Race Demographics

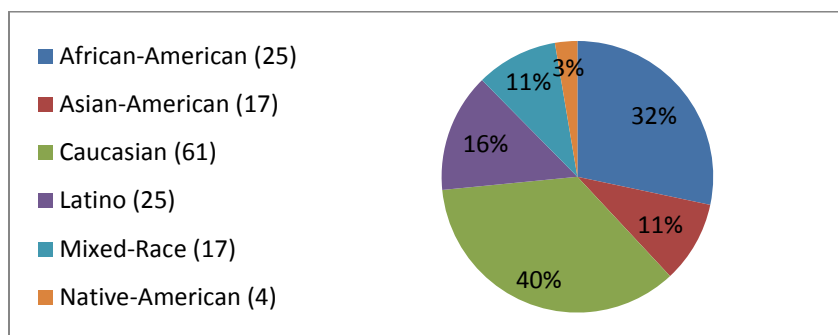
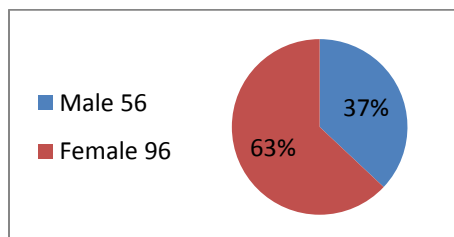


Figure 18: Student Gender



Note: Colorado follows trends in higher education that show young men are not attending college at the same rate as young women.

The following tables (17-20) provide information about the number of credit hours students earned, the types of schools attended, and degrees awarded:

Table 17: Academic Achievement

Credit Hours Earned	# of Students	%
None reported	39	26%
1 – 14	19	13%
15 – 29	22	14%
30 – 44	21	14%
45 – 59	21	14%
60 – 74	13	9%
75 – 89	10	7%
90 – 104	4	3%
105 – 119	0	0%
120 or more	3	2%

Table 18: Types of Schools Attended

School Type	Number of Students	% of Students
2 Year Schools	88	58%
4 Year Schools	53	35%
Career and Technical	11	7%

Table 19: Length of Time to Earn Degree

Years to Earn Bachelors	Percentage	Years to Earn Associates	Percentage
2	2.38%	1	7.69%
3	2.38%	2	19.95%
4	11.90%	3	23.08%
5	33.33%	4	10.26%
6	19.05%	5	20.51%
7	14.29%	6	10.26%
8	14.29%	7	5.13%
9	0%	8	2.56%
10	2.38%	9	2.56%

Table 20: Types of Degrees Earned

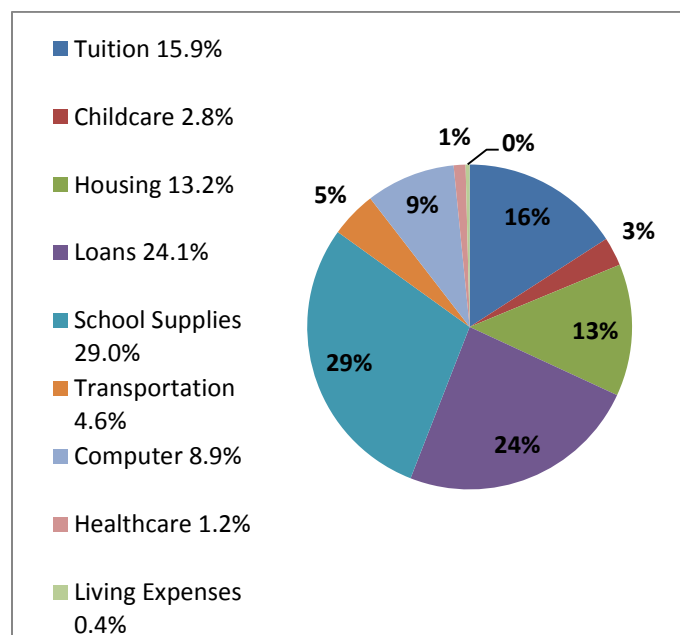
Degrees Earned	Percentage
A.A.	32%
B.A.	35%
M.A.	3%
Certificate	30%

Student Parents

Of Colorado's students receiving ETV, 16% (25 students) reported being a parent. These 25 students have been identified as needing additional support in order to achieve educational goals. County CFCIPs focus on providing targeted supports for pregnant and parenting youth connected to local programs, and specialized support from a Parent Liaison may be available through the Foster Care to Success Program.

Foster Care to Success has identified that parenting students may be vulnerable to proprietary schools that promise fast access to professional certifications or degrees but often at a much higher cost. These parenting students also may face unique barriers involving transportation, child care, self-management, and financial literacy, particularly with regard to the cost of borrowing. Figure 19 provides additional detail about expenditures these students may encounter:

Figure 19: Student Use of ETV Funds



Collaboration

To increase the awareness and utilization of ETVs, Colorado has strengthened and developed partnerships with several key organizations:

- College in Colorado: This organization provides a comprehensive, one-stop resource to help students and parents plan and pay for college. ETV is now listed in the site's scholarship search tool, and the outreach and access coordinators are trained in ETV eligibility and supports. College in Colorado is also engaged in efforts to identify and reduce barriers to post-secondary education.
- DYC: Supervisors are now trained on ETV availability and eligibility and assist their case managers in providing ETV vouchers to eligible youth.
- Educational Opportunities Workgroup: This multi-system workgroup is focused on identifying barriers to post-secondary access and success using a quality improvement strategy to identify realistic incremental steps to change, and includes representatives from several organizations that are found in Appendix K.

Program Planning

The CFCIP continues its efforts to increase awareness of ETV through outreach, collaboration and training of community partners and those who provide education and support services to ETV eligible youth. The program will strengthen partnerships with post-secondary programs in order to improve the identification of students who have had foster care involvement and their connection to supportive services and funding options. Colorado will also increase efforts to connect youth who respond to the NYTD with ETV and other available funding and support, and is exploring options for supportive services through College in Colorado and connection to Colorado's Opportunity Scholarship Initiative.

XVI. STATISTICAL AND SUPPORTING INFORMATION

This section provides the statistical and supporting information required in ACYF-CB-PI-15-03, issued March 31, 2015. Information that has been reported in the relevant APSR section will not be repeated here, but a link is provided for a connection to the information and the page location. Information not previously reported is provided in this section.

Education and Training Vouchers

Information concerning Colorado's ETVs is found in Attachment E, Appendix K, page 206.

Inter-Country Adoptions

The CDHS does not have a role in Inter-Country Adoptions, but services are provided to families with an Inter-Country adoption by county departments of human/social services when a report of

maltreatment or youth-in-conflict is received. These families are screened-in or -out for assessment. Upon completion of the assessment, the case may be closed with referrals made to community resources or opened for ongoing services. According to Trails data, in 2014, there were ten families with “non-Trails” adoptions determined to be Inter-Country adoptions that were provided services by counties. One of these adoptions was classified as disrupted. There were no dissolutions. The child in the disrupted adoption is currently in county foster care and the department is working with the child on permanency planning.

In calendar year 2014, there were 99 Inter-Country Adoptions:

China	27	Mexico	1
Colombia	5	Niger	1
Ethiopia	24	Taiwan	1
Haiti	10	Uganda	6
Korea	17		

The State and counties are actively working with their partners to ensure the availability of post-adoption services for all adoptive families in the state, to prevent potential human trafficking of children and youth, re-homing (giving an adopted child to a stranger), and adoption dissolution.

CAPTA Annual State Data Report Items Information on Child Protective Service Workforce

Information on Colorado’s Child Protection Workforce is found in CAPTA, Section XIV, page 106.

Juvenile Justice Transfers

There were 139 Juvenile Justice Transfers in FFY 2014 from DCW to DYJ. Both Divisions enter child information into the Trails system, from which this information is drawn.

XVII. FINANCIAL

Colorado’s CFS-101, Parts I, II, and III are submitted in a separate file.

XVIII. APPENDICES

**2015 Annual Progress and Services Report
Appendices**

Appendix A: Keeping Kids Safe and Families Healthy 2.0 Plan

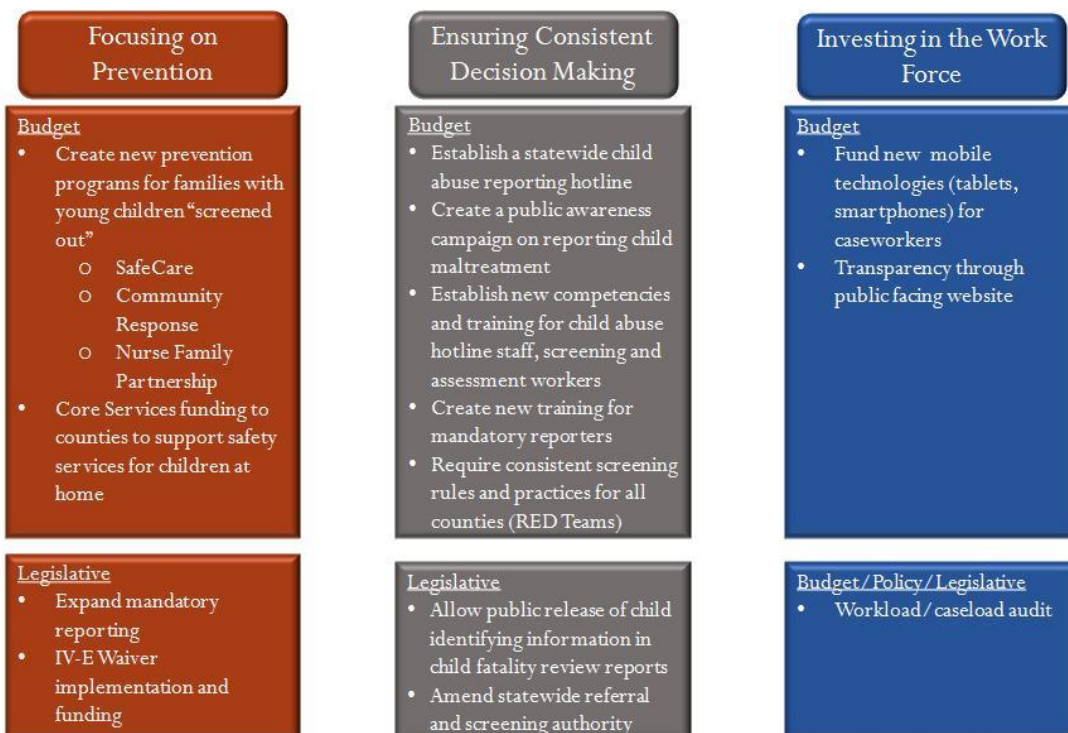
Governor Hickenlooper's child welfare strategic plan, *Keeping Kids Safe and Families Healthy* has significantly reformed Colorado's child welfare system. In 2012, the first plan introduced broad reforms to Colorado's child welfare system:

- Implementation of C-Stat
- IV-E Waiver application
- Expansion of Differential Response
- Training Academy Design

Keeping Kids Safe and Families Healthy 2.0, introduced on February 6, 2013, expanded the initial plan's key reforms, building upon Colorado's strong child welfare framework, enhancing existing services and introducing new best practices:

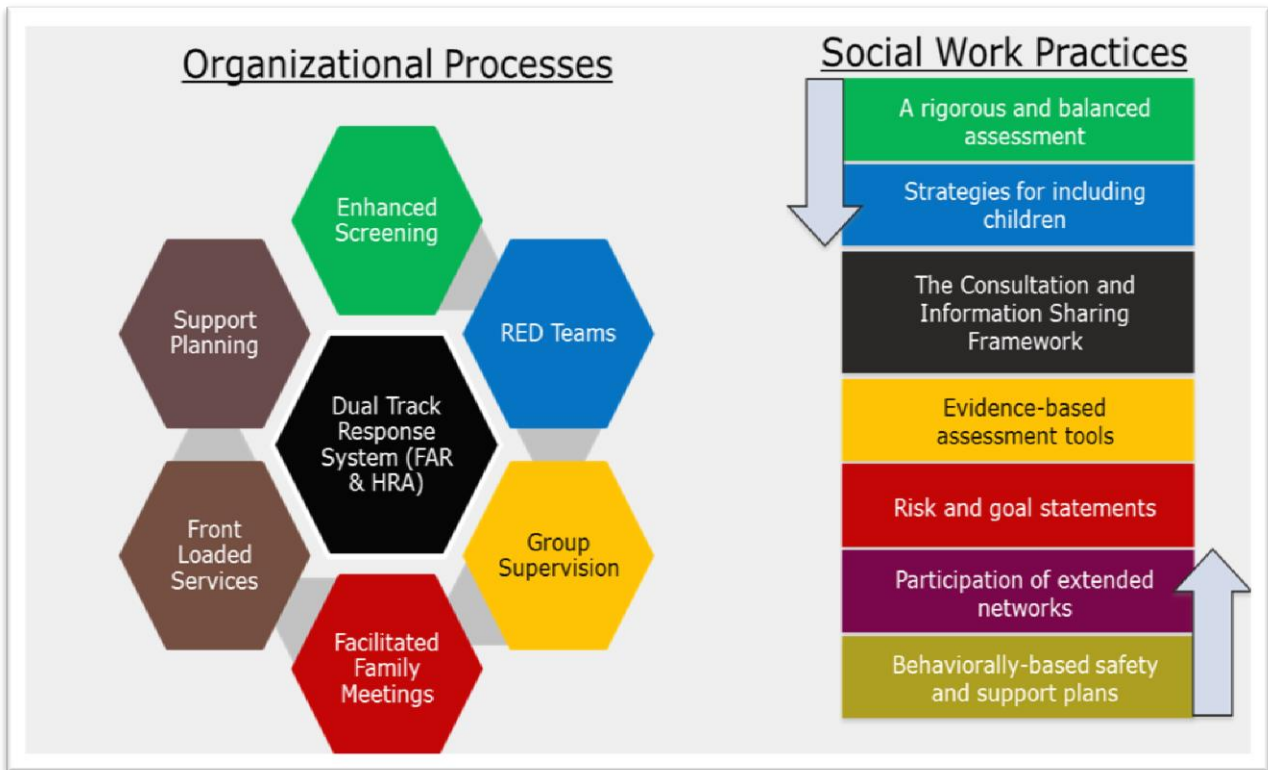
- Statewide child abuse and neglect hotline
- Increased prevention and intervention services for families with children under the age of five--two new programs
- Broadened work force development
- Implementation of the IV-E Waiver Project Demonstration
- Increased public transparency and public engagement

Keeping Kids Safe and Families Healthy 2.0



Appendix B: Differential Response

Colorado's Differential Response Model



Appendix C: List of Committees

Stakeholders also provide input through various committees and task groups that focus on child welfare policy and practice. Almost all of the communities include CDHS and county members, and most include additional community stakeholders. The following are many of the existing committees and groups in which child welfare is involved:

County/CDHS Specific

- Policy Advisory Committee (PAC)
 - Economic Security subPAC
 - Finance subPAC
 - Child Welfare subPAC
 - Child Protection Task Group
 - Kinship Task Group
 - Permanency Task Group
 - Provider Rates Setting Task Group
 - Continuum of Care–Level of Care Tool Task Group
 - DIDD/DCW Task Group

Child Welfare Specific

- Training Steering Committee
- Hotline Steering Committee
- Psychotropic Committee
- Title IV-E Waiver Demonstration Project Oversight Committee
- CMP State Steering Committee
- CDHS Prevention Steering Committee
- Child Welfare Allocation Committee
- Mitigation Committee
- Licensing Advisory Committee
- Affordable Care Collaborative Quality Sub-committee
- Colorado Post Adoption Resource Center (COPARC) Advisory Committee
- Project Operations and Implementation Team (POIT; CQI/CPM oversight committee)
 - Promising Practices Work Group
 - CQI Work Group
- Differential Response Leadership Council
- Program Area 3 Work Group
- Treatment Foster Care Work Group
- Educational Stability Grant Executive Team
- Permanency Roundtable Advisory Board
- Adoption Intermediary Commission
- Children's Justice Act Task Force
- Grandfamilies National Partnership and Advisory Group Convening
- Oral Health Collaborative

Multi-disciplinary Purpose with Child Welfare Involvement

- Children’s Advisory Committee
- Colorado Interagency Coordinating Council
- Juvenile Justice and Delinquency Prevention Council
- Commission on Criminal and Juvenile Justice
- Bridges Adolescent Substance Abuse Grant Steering Committee
- Developmental Diagnostic & Capacity Work Group
- Trauma Informed Systems of Care Work Group
- Sex Offender Management Board
- CHSDA Human Trafficking Taskforce
- DATA Human Trafficking Public Policy Group
- Substance Abuse Task Force
- State Youth Council
- Pathways to Success Steering Committee
- Advisory Committee for Homeless Youth
- Colorado Behavioral Health Transformation Council, Under 26 Workgroup
- Colorado Youth Sexual Health Team
- Tony Grampas Youth Services Program Board
- Colorado Youth Leadership Network
- Colorado Hosting Program Advisory Committee
- Refugee Youth Provider Forum
- Bridging the Gap at Mile High United Way Community Partnership Meetings
- Casey Family Programs Older Youth Learning Collaborative
- CSEAC Committee

Appendix D: Training Plan

State of Colorado Training Plan

Program Support

Colorado's Child Welfare Training System (CWTS) is operated by a consortium of four providers under a contract with CDHS and under the direction of DCW. The consortium members are the Kempe Center Children's Center (Aurora, Colorado), which serves as the Central Management Organization. The Kempe Center sub-contracts with three partner organizations, all of which are established experts in the field of child welfare: the Butler Institute for Families at the University of Denver, Graduate School of Social Work; the Colorado State Foster Parent Association; and Ridgewood and Associates. Each of the training partners contributes expertise and support in fulfilling the training needs of Colorado's child welfare staff.

The CWTS is structured to include a Training Steering Committee, made of county representatives, charged with the advisement, oversight, and approval of changes to the system. The CWTS has four Regional Training Centers (RTC), each of which is staffed with a Regional Training Center Coordinator and part-time Administrative Assistant. The RTC's are located in Garfield County (West), Fremont County (Southeast), Larimer County (Northeast) and Metro Denver. Each RTC has established a Regional Training Advisory Committee including local community stakeholders and county staff who convey county needs and provide system feedback regarding regional training needs. The regional model is well-suited for meeting Colorado's child welfare learning needs. Colorado's 2015-19 Training Plan reflects enhanced training programs, as approved by the Training Steering Committee, and training delivery through the regional sites.

All child welfare training is evaluated, as described in Section C, Systemic Factors. Evaluation ensures that training is current and relevant to the State's programs and initiatives. The Central Management Organization conducts an annual training needs assessment to determine new and ongoing training needs.

Initial Training for New or Reassigned Employees							
Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
New Worker Pre-Service Training Adcademy	This training consists of seven modules in which participants learn about the foundations of child welfare and receive an orientation to CDHS, its mission, and principles. The modules include: technical instruction relating to child abuse and neglect; caseworker safety; child interviewing; permanency; the legal aspects of child protection; attachment; the effects of trauma on child development; cultural responsiveness; family engagement, and diligent search.	Combination of web-based and classroom	Kempe Center CWTS Staff and the Butler Institute for Families	108 hours	20 Offerings in all training regions at least once a year, with multiple cohorts in the Metro region. Cohort 1 Metro Cohort 2 NE Cohort 3 Metro Cohort 4 SE Cohort 5 West Cohort 6 Metro Cohort 7 Metro Cohort 8 Metro Cohort 9 Metro Cohort 10 Metro Cohort 10 NE (CWTS) Cohort 11 West Cohort 12 Metro Cohort 13 SE Cohort 14 Metro Cohort 15 NE Cohort 16 Metro Cohort 17 Metro Cohort 18 SE Cohort 19 West Cohort 20 Metro	New child welfare caseworkers and supervisors	Preparation for and participation in judicial determinations, case management and supervision, development of case plan, case reviews, screening and assessments, permanency planning
Estimated Total Cost of this Training Type	\$548,642.33						

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
FY 2014-15 New Supervisor Pre-Service Training Academy	New supervisor training consists of four modules: 1. Administrative supervision; the supervisor as leader and manager. 2. Educational supervision; the supervisor as a coach and educator. 3. Clinical supervision; the supervisor as clinician and consultant. 4. Supportive supervision; the supervisor as team leader, staff motivator.	Classroom	Butler Institute for Families	55 hours	6 Offerings in the Metro and other regions Cohort 1 Metro Cohort 2 SE Cohort 3 Metro Cohort 4 NE Cohort 5 Metro Cohort 6 West	New child welfare supervisors	General Supervisory skills (50%)
Estimated Total Cost of this Training Type	\$117,566.21						
<i>Foster and Adoptive Parent Training</i>							
Foster Parent Core Training	This training provides introductory-level information needed to successfully become a foster/kinship/adoptive parent. Topics include: legal process, how families and children become involved with child welfare, and services provided to support families. Participants will gain an understanding of how to work alongside child welfare agencies and the family of origin, while providing a nurturing and therapeutic environment for children and youth.	Classroom	Colorado State Foster Parent Association	2 days	36 Offerings in multiple Regions 7/18/14 Metro 7/25/14 NE 8/1/14 West 8/8/14 Metro 8/15/14 SE 8/22/14 Metro 9/19/14 Metro 9/26/14 SE 10/3/14 Metro 10/10/14 West 10/17/14 SE 10/24/14 NE 11/7/14 Metro 11/14/14 NE 11/14/14 SE 12/5/14 West 12/19/14 Metro 1/9/15 Metro 1/16/15 SE 1/23/15 NE	Foster/kinship/adoptive parents	Recruitment and licensing of foster home and institutions

					1/30/15 West 2/6/15 Metro 2/27/15 SE 3/6/15 NE 3/13/15 Metro 3/20/15 West 3/27/15 SE 4/10/15 Metro 4/17/15 SE 4/24/15 West 5/1/15 NE 5/15/15 Metro 5/15/15 SE 5/29/15 West 6/12/15 SE 6/19/15 Metro		
Estimated Total Cost of this Training Type	\$154,944.00						
Cost Allocation Methodology: Initial training activities for new or reassigned employees, and foster and adoptive parent training are allocated by applying Social Services Random Moment Surveys (SSRMS) to IV-E eligible training activities, weighted by the caseload penetration rate and are eligible for federal matching at 75%.							

<i>In-Service Training Offerings</i>							
Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
The 411 on Adolescents	This training covers normal adolescent development and factors that influence development, such as substance abuse, trauma, hormones, and mental health disorders. Additionally, strategies are provided for caseworkers' interactions with adolescent clients, assessment techniques and case planning.	Hybrid	Metropolitan State University	2 hours WBT + 2 classroom days	2 Offerings Metro, SE	Caseworkers and other child welfare and legal professionals	Case management and supervision, development of the case plan, communication skills, screening and assessments
Adolescents who Commit Sex Offenses	Training provides an overview of the assessment, management, and treatment of adolescents who commit sex offenses.	Classroom	Metropolitan State University	1 day	4 Offerings Metro, West, NE	Caseworkers, case managers, direct service providers and other child welfare professionals	Case management and supervision
Adolescents with Developmental Disabilities	Presentation of an intervention model to decrease mild to moderate problem behaviors in adolescents with mild intellectual and developmental disabilities. Specific topics include the lack of healthy social development in the areas of identity, sexuality and positive peer relationships.	Classroom	Metropolitan State University	1 day	4 Offerings Metro, West, NE, SE	Caseworkers and other child welfare professionals	Case management and supervision, child development and well-being, cultural competence

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Advocating for the Educational Needs of Children and Youth in Out-of-Home Care for Caseworkers and Supervisors	Training consists of the presentation of strategies for collaborating with the education system on behalf of children and youth in foster care.	Classroom	CWTS	1.5 days	2 Offerings Metro, NE	Caseworkers, supervisors, administrators, and child placement agency (CPA) staff	Referral to services, development of the case plan, case management and supervision
Advocating for the Educational Needs of Children and Youth in Out-of-Home Care for Foster, Adoptive, and Kinship Parents	Training provides an overview of the advocacy role of the caregiver in support of educational success of children and youth in the child welfare system.	Classroom	Colorado State Foster Parent Association	2 days	2 Offerings Metro, NE	Foster/kinship/adoptive parents, group home/center parents and staff and CPAs	Recruitment and licensing of foster homes and institutions
Attachment Implications for Multi-Disciplinary Professionals	Presentation of attachment processes, dynamics, and patterns. Experienced foster care parents and professionals will provide examples of past experiences with children in out-of-home placement.	Classroom	Child Welfare Training System (CWTS)	1 day	10 Offerings Metro, West, NE, SE, and 5 TBD	Foster parents, caseworkers, and supervisors	Referral to services, development of the case plan, case management
Being a Resilient Worker	Worker resiliency and its relationship to compassion fatigue, secondary trauma, and burnout. Strategies for mitigating risks and increasing job satisfaction are included.	Classroom	Butler Institute for Families	1 day	10 Offerings Metro, West, NE, SE, 1 TBD	Child welfare caseworkers and case aides	Case management and supervision, development of case plan, case review, worker retention (50%), stress management training (50%)

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Building a Resilient Workforce	<p>Child welfare work continually strains one’s ability to feel compassion for and engage families in a consistent and warm manner, despite the commitment and enthusiasm to help. Supervisors and their caseworker staff face the most challenging situations, confront anger every day, and often feel beleaguered by the hectic pace of heavy workloads. This course addresses how supervisors can maintain their sanity and buoy their caseworkers in this difficult work environment. Additionally, this training provides important knowledge and skills to help supervisors build their resilience and that of their caseworkers.</p>	Classroom	Butler Institute for Families	1 day	2 offerings Metro, SE	Supervisors	Case management and supervision, development of case plan, case review, worker retention (50%), stress management training (50%)

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Building Partnerships with Families: Practical Interventions for the Para-Professional	Participants will learn and engage in culturally-responsive ways to work with children and families. This includes the process and skill building activities which strengthen the practice and skills associated with helping relationships; addressing challenges to supervising parenting time with difficult populations; and promoting skills that can be used with clients in their homes and in parenting centers.	Classroom	CWTS	2 days	1 Offering Metro	Case aides	Case management and supervision, development of the case plan, referral to services, relational and cultural competence
Building Safety When Parents Use Substances	Training consists of an overview of parental substance abuse, its impacts on children, and safety assessment and planning.	Classroom	Colorado Alliance for Drug Endangered Children	1 day	8 Offerings Metro, West, NE, SE	Case aides, caseworkers, supervisors, and administrators	Case management and supervision, protective factors, general substance abuse
Caring for Children Who Have Been Abused	Training provides a presentation of the impact of sexual abuse on children, managing child victim behaviors, and the parenting of sexual abuse survivors.	Classroom	Colorado State Foster Parent Association	1.5 days	4 Offerings Metro, West, NE, SE	Foster/ kinship/ adoptive parents	Recruitment and licensing of foster homes and institutions, trauma training

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Child Development and the Effects of Trauma	This online course, available for all child welfare professionals, provides learners with a foundational understanding of typical childhood development, including sexual development, and offers insight into the developmental effects of abuse, neglect and trauma.	WBT	CWTS	WBT	WBT	Caseworkers, case aides, supervisors, foster/kinship/adoptive parents	
The Invisible Conversation: What it Takes	Understanding a family's cultural story and appreciating how it influences their perspectives, decisions, justification of	Hybrid: web-based and classroom	CWTS	1 day/15 hours	2 Offerings Metro	Caseworkers, supervisors, case aides, foster	Development of the case plan, cultural competence

<p>to Make Culturally Responsive Practice Visible in the Work</p>	<p>decisions, the creation of their identities and social values is essential to the success of building essential and effective working relationships with families. This one-day course offers learners the opportunity to increase awareness of self and others; cultivate insight; and facilitate courageous conversations with families and with each other.</p>					<p>parents, and other child welfare professionals</p>	
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Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Confidentiality	This training provides an overview of state and federal privacy laws, confidentiality rules and legal requirements in responding to information requests and the procurement of consent forms.	Hybrid: web-based and classroom	National Association of Counsel for Children	1 day/15 hours	6 Offerings Metro, West, NE, SE	Caseworkers, supervisors, and legal professionals	Ethics Training, State agency personnel policies and procedures (50%)
Continuous Quality Improvement (CQI)	This training consists of a presentation of CQI in the context of child welfare practice, at all levels of the agency/system, including children, youth, families, and stakeholders.	Classroom	CWTS	1 day	4 Offerings Regions/dates TBD	Caseworkers, supervisors, and other child welfare professionals	Case review, related to data collection and reporting, State agency personnel policies and procedures (50%)
Data-Informed Supervision	This training focuses on the interpretation of child welfare data sources (e.g., Trails, ARD, C-Stat, CFSR, NCANDS); and provides strategies for data-informed decision-making in supervision of staff.	Classroom	CWTS	1 day	4 Offerings Regions/dates TBD	Child welfare supervisors and administrators	Case management and supervision, related to data collection and reporting, state agency personnel policies and procedures (50%), job performance enhancement skills (50%)
Developmental Consequences of Child Maltreatment	This course covers normal and abnormal child development, including: research findings on the developmental consequences of physical and sexual abuse and emotional neglect; theoretical models for understanding consequences of maltreatment; intervention strategies and their effectiveness; the relationship between developmental consequences of maltreatment and treatment planning. Learners, especially foster parents, will gain the following skills: the ability to conceptualize how a child's history contributes to current functioning; the ability to identify the shaping of behaviors the interplay of developmental tasks and experience; and, the ability to devise care-giving experiences that provide a corrective developmental experience for the child.	Classroom	CWTS	1 day	4 Offerings Metro, West, NE, SE	Caseworkers, supervisors, and foster/ kinship/ adoptive parents	

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Digging Deeper than Deadlines: Strengthening Practice through Supervision	Training provides an overview of supervisory skills development that will help caseworkers improve their practice. Information is provided on the use of probing questions, assessment, reflective and discussion-oriented supervision, and the use of group supervision as a clinical tool.	Classroom	Butler Institute for Families	2 days	4 Offerings Metro, West, NE, SE	Supervisors	Development of the case plan, case management and supervision, case review
Placement Stability, Compatibility, and Support: Making the Best Decisions (previous title: Disclosure and Information Sharing)	This interactive session is facilitated by an experienced child welfare professional. Training participants will discuss the relevant strategies and considerations child welfare and child placement agency professionals must use in making the most appropriate placement decision for children/youth. These decisions often integrate support safety and placement stability, involve the assessed needs of the child/youth, and the skills and preferences of the foster and adoptive parents. The professional must balance the recommendations, the needs of the children and youth, and guides efforts to sustain placements for “less than perfect” compatibility. This training’s comprehensive content includes: evidence-based and trauma-informed assessments; strength-based engagement of the children/youth, and foster/kinship/adoptive families; and, the assessment, selection, and support of prospective caregivers that support good outcomes and practice.	Classroom	CWTS	2 days	4 Offerings Metro, West, NE, SE	Caseworkers, case aides, and supervisors	Strategies for child welfare professionals working with child placement agencies to make effective, collaborative decisions about placement and supporting safety and placement stability.
Building Safety with Families Impacted by Domestic Violence	Complex issues challenge families involved with child welfare. The co-existence of domestic violence in these families requires effective intervention for domestic violence (DV), using current information and resources, and working with DV agencies.	Hybrid: web-based and classroom	CWTS	1 day/15 hours	10 Offerings All Regions TBD	Caseworkers, case aides, and supervisors	Referral to services, screening, and assessments

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Effective Matching Practices: Matching Practices that Promote Permanency	This training addresses matching practices for foster and adoptive children with special needs. An exploration of the personal beliefs and biases that may affect matching processes is included, in addition to an overview of parental/family paradigms in relation to meeting the child's needs.	WBT	CWTS	3 hours	WBT	Child welfare supervisors, caseworkers, and foster/ kinship/ adoptive parents	Referral to services, placement of the child, recruitment and licensing of foster homes and institutions
Engaging Families (This course is being developed to become part of the newly revised New Worker Academy)	This training focuses on engaging families through assessing the family's story. This process helps with the identification of strengths, and the use of tools and techniques in establishing the balance between cultivating partnerships and achieving safety.	Classroom	CWTS	3 Days	Offered as part of the revised new worker academy starting July 2015	Caseworkers and supervisors	Referral for service, development of the case plan, case management, and supervision
Effective Family Engagement with Kin: Maintaining Connections for Children and Youth	This training focuses on increasing knowledge and application of effective family engagement with kin, and working collaboratively with extended families to maintain connections for children and youth.	Classroom	CWTS	1 ½ days	4 Offerings Metro, West, NE, SE	Caseworkers, CPAs, guardians ad litem, and community agency staff who work with families	Referral for service, development of the case plan, case management
Enhanced Screening and RED Team Development	This training is an overview of the framework for enhanced screening and the RED Team process.	Classroom	CWTS	2 day	This course will be offered as part of the New Worker Training Academy starting July 2015	Caseworkers and supervisors	Referral to services, screening and assessments

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Ethics and Liability	This training addresses the issues of ethics and liability. It includes discussions on risk management, the ethics of social work, and child protection standards. Learners will be provided with a basic understanding of the law as it relates to real-life situations. Confidentiality will also be addressed, drawing from the Colorado Children's code, the Social Services Code, and the confidentiality section of the Professions and Occupation Code.	Classroom	NACC	1 day	4 offerings Metro, West, NE, SE	Caseworkers, case aides, and supervisors	
The Art and Heart of Facilitation	This training introduces learners to the principles and practices behind a successful facilitated meeting process. A facilitated meeting process seeks to harness the wisdom, ideas, and perspectives of a group while promoting trust and encouraging critical thinking and creativity with any team, group or organization. This facilitation skills training will prepare learners to successfully facilitate RED Teams, family engagement meetings, and group supervision. Learners will gain hands-on experience in the classroom that exposes them to effective facilitation techniques that changes the culture of the way we communicate with one another, with families, and about families.	Classroom	CWTS	2 days	5 Offerings Regions/dates TBD	Caseworkers, supervisors	Referral to services, development of case plan, case management and supervision, case review

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Family Reunification	This training covers decision-making and planning skills involved in family reunification. Training topics include a family readiness assessment, planning and monitoring family visiting, and developing case plans for maintaining reunification.	Classroom	Butler Institute for Families	2 days	4 Offerings Metro, West, NE, SE	Caseworkers, case aides, and legal professionals	Referral to services, development of the case plan, case review, case management and supervision
Foster Parents Helping Youth Transition Successfully into Adulthood	Training provides an overview of the critical role foster, kinship and adoptive families have in working with youth to develop permanent connections and the successful re-establishment of connections with the youth's biological family.	Classroom	Colorado State Foster Parent Association	1 day	3 Offerings Metro, West, SE	Foster/ kinship/ adoptive parents, CPA staff	Development of the case plan, case management and supervision, recruitment and licensing of foster homes and institutions, child development, resilience skills, relational competence
Group Supervision for Supervisors	Building on the knowledge gained through the New Supervisor Pre-Service Training Academy, this training provides learners with the knowledge, skills and abilities necessary to effectively facilitate group supervision. This training assists learners in the exploration of the purpose of group supervision as compared to individual supervision. Learners will come to understand how group supervision benefits families, learn facilitation strategies to meaningfully engage caseworkers in consultation, and strategies for managing challenges to the group supervision process. Learners will leave this interactive training prepared to initiate group supervision with their staff or to enhance their group supervision practices.	Classroom	CWTS	1 day	6 Offerings Multiple regions/dates TBD	Supervisors and administrators	Case management and supervision

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Group Supervision for Caseworkers	This training builds on the knowledge gained through the New Worker Pre-Service Training Academy, providing caseworkers with the additional skills necessary to effectively prepare for, and participate in, group supervision. Learners will explore how the Consultation and Information Sharing Framework may enhance their critical thinking, facilitate the development of effective Risk and Goal Statements, as related to rigorous assessment, and the benefits of group supervision.	Classroom	CWTS	1 day	6 Offerings Multiple regions/dates TBD	Caseworkers	
Guided by the Law: ICWA, ADA, ASFA	This training is an overview of child protection legal bases including the Adoption and Safe Families Act (ASFA), ICWA, Americans with Disabilities Act (ADA), and other federal laws that determine placement practice for foster care and adoption; issues of trans-racial, and inter-jurisdictional placements.	Classroom	National Association of Counsel for Children	3 hours	4 Offerings Metro, West, NE, SE	Child welfare professionals, and foster/kinship/adoptive parents	Referral for services, preparation for and participation in judicial determinations, placement of the child, negotiation and review of adoption assistance agreements
Helping Children Cope: Reducing Trauma during Placement Moves	This training addresses child trauma related to foster care placement and removal, including multiple, emergency, and planned moves. Tools and techniques are provided that will enable caseworkers to help children understand the placement process, reducing their fears and anxieties.	WBT	CWTS	WBT	WBT	Child welfare and foster/adoption caseworkers, supervisors, administrators, and CPA staff	Placement of the child, development of the case plan, case management and supervision, child development, resilience skills, effects of separation

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Hotline Certification Training for Workers and Supervisors	Colorado's implementation of a new statewide child abuse hotline includes the certification standards for hotline workers, screeners, and those who conduct assessments. This training includes how the information that is gathered, upon which informed decisions are made throughout the screening and assessment process. Additionally, this training includes linking the information to the evaluation of child safety to new reports of suspected abuse or neglect. Additional topics include protocols and decisions, the role of RED Teams in determining whether the county will intervene, and if so, in what prescribed time-frame.	Hybrid: web-based and classroom	CWTS	13 hours classroom + 2 hours web-based	32 Offerings Metro, West, NE, SE	Hotline workers, caseworkers, and supervisors	Screening and assessments, related to data collection and reporting, communication skills, child abuse and neglect issues, job performance enhancement skills (50%)
Recognizing and Identifying Human Trafficking	This human trafficking course is designed for building safety for survivors of trafficking, creating an awareness of the issue of human trafficking, and promoting positive systemic changes that may occur through a collaborative and transparent process for assisting human trafficking victims.	WBT	CWTS	WBT	WBT	Caseworkers, supervisors, case aides, legal and mental health professionals, and other child welfare professionals	Referral to services, child abuse and neglect issues, communication skills, ethics training
Impact Becoming a Foster Family has on YOUR Family	This training prepares participants for anticipating and understanding the impact of fostering/adopting upon one's family, including exploration of issues, tools, and strategies for addressing dynamic familial relationships.	Classroom	Colorado State Foster Parent Association	1/2 day	2 Offerings Metro, West	Foster/ kinship/ adoptive parents	Recruitment and licensing of foster homes and institutions

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Building Safety When Parents Use Substances (previous title: Integrating Child Welfare and Substance Abuse)	The intersection of child maltreatment and parental substance use is a statewide concern. This interactive training offers advanced skill-building for both new and experienced caseworkers and supervisors by combining dyadic material with the sharing of successes, challenges, and practical experiences concerning substance abuse. This course informs and enhances safety-building practices with families who are substance-involved. The course structure is a dual-track model for supervisors and caseworkers, and units are invited to come as a team. Participants are encouraged to bring case examples to the training.	Classroom	Colorado Alliance for Drug Endangered Children	2 day	5 Offerings Regions/dates TBD	Child welfare caseworkers, supervisors, and substance abuse professionals	Referral to services, development of the case plan, case management and supervision, communication skills, cultural competence, ethics training
Intensive Family Finding	This training provides an overview of family finding for children and youth in foster care. Topics include increasing awareness and motivation in finding family connections through the use of websites, search engines, and databases. In addition, trainers will provide family engagement techniques to involve parents in the understanding of permanent connections and the location processes.	Classroom	CWTS	1 day	6 Offerings Metro, West, NE, SE	County family finder specialists, caseworkers, supervisors, administrators, and CPA staff	Placement of the child, case management and supervision, permanency planning, communication skills, activity to preserve, strengthen, and reunify families, relational competence
Inter-disciplinary Case Conflict Management	This training facilitates an understanding of interpersonal, inter-professional and interagency conflict resolution and its application to child protection.	Classroom	CWTS	1 day	2 Offerings NE, Metro	Caseworkers, supervisors, foster/kinship/adoptive parents, and case aides	Development of the case plan, case management and supervision, communication skills
Intervention Skills for Case Aides	This training provides an overview of the responsibilities of paraprofessionals who provide child welfare intervention. A review of techniques includes the establishment of client rapport, active listening, and the techniques for the de-escalation of hostile/angry clients.	Classroom	CWTS	2 days	1 Offering Metro	Case aides	Referral to services, development of the case plan, communication skills

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Intervention Strategies and Service Provision for Adolescents (see the 411 on Adolescents)	Training requires completion of the prerequisite course, “Adolescent Development” and “Adolescent Assessment & Case Planning.” Treatment and intervention strategies for each of the behavioral problems identified in the prerequisite training are provided, using the criteria for implementation of therapeutic and placement interventions.	Classroom; advanced	Metropolitan State University	2 days	2 Offerings Regions/dates TBD	Caseworkers and other child welfare and legal professionals	Referral to services, placement of the child, development of the case plan, case management and supervision, screening and assessment
Leading from Two Steps Behind: Solution-Focused Supervision	This training provides supervisors with information about Focused Supervision and Motivational Interviewing to help caseworkers build problem solving and critical thinking skills.	Classroom	Butler Institute for Families	2 days	4 Offerings Metro, NE, SE	Supervisors	General Supervisory (50%)
Leading Positive Change in a Shifting Environment	This training provides an overview of the dynamics and stages of change, the development of coping strategies for managing the unit, and individual reaction to change.	Classroom	Butler Institute for Families	1 day	4 Offerings Metro, West, NE, SE	Supervisors	General Supervisory (50%), team building and stress management training (50%)
Legal Preparation 201: Expert Testimony	This course assists participants with skill development in the areas of testimony, establishing and maintaining credibility, and understanding legal strategy.	Classroom	National Association of Counsel for Children	1 day	8 Offerings Metro, West, NE, SE	Caseworkers, case aides, supervisors, directors, and county attorneys	Preparation for and participation in judicial determinations
Legal Preparation for Caseworkers	This course provides techniques and strategies for preparing for dependency and neglect court processes. Topics include information about the levels of evidence, qualifying as an expert witness, and direct and cross-examination.	Classroom	National Association of Counsel for Children	2 days	7 Offerings Metro, West, NE, SE	Caseworkers, case aides, supervisors, directors, and county attorneys.	Preparation for and participation in judicial determinations

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Legal Preparation for Foster Parents	This survey course is a review of the laws that impact foster parents, including the substance and scope of a foster parent's rights, tips for participating in court proceedings, and strategies for navigating the child welfare system.	Classroom	National Association of Counsel for Children	1 day	9 Offerings Metro, West, NE, SE	Foster/kinship/adoptive parents	Preparation for and participation in judicial determinations
Life Books	This course is about creating and maintaining life books for children in foster care that help them preserve their past and understand their current situation.	WBT	CWTS	WBT	WBT	Caseworkers, foster/kinship/adoptive parents	Child social and emotional development and well-being
Marijuana, Children, and Families	Colorado is one of only two states in the nation to have enacted laws allowing for both medical and recreational marijuana use and cultivation. These laws have created confusion statewide and have garnered national attention. It is critical that professionals working in the child welfare system understand the laws and possible hazards to children, in order to make informed decisions regarding safety of and risk to children. This course will present a factual overview of marijuana and its effects on children, youth, and families, including: discussion of what research currently is available; review of Colorado's marijuana laws and regulations; exploration of risks to children associated with marijuana use and cultivation.	Classroom	DEC	1 day	3 Offerings Metro, West	Caseworkers, case aides, and supervisors	
Medical Aspects of Child Maltreatment	This course reviews the more common medical aspects of each form of child maltreatment (physical abuse, neglect, and sexual abuse.) Additional topics include the effective communication with medical practitioners and the inclusion of medical information in the Family Services Plan.	Classroom	CWTS	2 days	4 Offerings Multiple Regions/Dates TBD	Caseworkers, supervisors, foster/kinship/adoptive parents	Referral to services, development of case plan, case management and supervision, related to data collection and reporting, communication skills, evidence-based practice

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Maternal Substance Abuse	This training is a review of the medical and legal issues associated with substance abuse prenatal effects, prevention, treatment, and the multidisciplinary approach to maternal substance abuse.	Classroom	CWTS	1 day	4 Offerings Metro, SE 2 TBD	Caseworkers, supervisors, and foster/kinship/adoptive parents	Development of case plan, case management and supervision, general substance abuse
Meeting the Mental Health Needs of Children	This training reviews how to identify and meet the mental health needs of children in foster care. Additional topics include medications and therapeutic interventions, such as body awareness and calming techniques.	Classroom	Colorado State Foster Parent Association	2 days	5 Offerings Metro, NE, SE, 1 TBD	Foster parents/kinship/adoptive parents, caseworkers, and supervisors	Referral to services, development of the case, case management and supervision, communication skills, facility security training (50%)
Navigating Effectively Throughout the Child Welfare System	This training explores the process of defining one's role in the child welfare system, in the context of the system's structure, complexities, roles and perspectives.	Classroom	Colorado State Foster Parent Association	1 day	4 Offerings Metro, West, NE, SE	Caseworkers, supervisors, other child welfare professionals, and foster/kinship/adoptive parents	Worker retention and worker safety (50%), team building, and stress management training

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Nuts and Bolts: Family Foster Care Home Certification, Recertification, Recruitment, and Retention	This is a specialized training for new foster care coordinators and resource caseworkers. It consists of an overview of agency certification requirements, the SAFE home study, and Trails documentation.	Classroom	CWTS	1 day	4 Offerings Metro, SE, 1 TBD	Foster care resource, kinship, and child welfare caseworkers, supervisors, administrators, and CPA staff	Recruitment and licensing of foster homes and institutions, home studies, state agency personnel policies and procedures (50%), job performance enhancement skills (50%), general supervisory (50%)
Outcome-Focused Supervision	During this training, supervisors will gain an understanding of staff that under-perform, through the identification of performance issues. Techniques are provided for eliciting positive change that improves outcomes for families.	Classroom	Butler Institute for Families	1 day	4 Offerings Metro, West, NE, SE	Supervisors	General supervisory (50%), team building and stress management training (50%)
Parents with Mild Cognitive Impairments	Training participants will receive an overview of mild cognitive disabilities and ADA requirements for agencies providing services. Course material addresses the accommodation of parental learning styles and cognitive/behavioral strategies that support goal attainment.	Classroom	Metropolitan State University	1 day	4 Offerings Metro, West, SE	Caseworkers, supervisors, case aides, and other child welfare professionals	Development of the case plan, case reviews, case management and supervision, communication skills
Parenting Children with Challenging Behaviors	This course instruction addresses some of the difficult behaviors of foster/adopted children. Training topics include the effects of maltreatment and prenatal substance exposure on brain development and techniques for managing challenging behaviors.	Classroom	Colorado State Foster Parent Association	2 days	8 Offerings Metro, West, NE, SE	Foster/ kinship/ adoptive parents	Development of the case plan, case management, recruitment and licensing of foster homes and institutions

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Placement Stability, Compatibility, Support: Making the Best Decisions (this content will be covered in the classroom Placement Stability course)	Course content provides relevant strategies and considerations for child welfare and CPA professionals when making placement decisions for children and youth that include trauma-informed assessments and the selection of caregivers.	WBT	CWTS	WBT	WBT	Foster parents, caseworkers, supervisors, CPA staff	Development of the case plan, recruitment and licensing of foster homes and institutions
Promoting Health and Stability	Course content addresses the effects of abuse, neglect, and trauma on child development. Techniques are provided for promoting child emotional health and stability.	WBT	CWTS	WBT	WBT	Foster/ kinship/ adoptive parents	Case review, case management and supervision, child abuse and neglect issues, trauma training,

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Promoting Placement Stability: Using Home Visits to Prevent Foster Care and Adoption Disruption	This course explores the use of effective post-placement supportive and treatment services with the resource family to prevent placement disruptions.	WBT	CWTS	WBT	WBT	Foster care/adoptive caseworkers, supervisors, and CPA staff	Development of the case plan, case review, case management and supervision, recruitment and licensing of foster homes and institutions
Recognizing and Managing Behavior in Children with ADHD	This training focuses on practical interventions with children with behavioral disorders, and will increase awareness and understanding of these disorders: ADHD; Post-Traumatic Stress; Oppositional Defiant; Conduct; Bi-Polar; and, Depression, with current information regarding: symptoms, causes, associated problems, and treatment of the disorders. Learners will enhance their skills for helping families learn effective behavioral management strategies, and learners will practice specific behavioral intervention strategies for use with their with families.	Classroom	MSU	2 days	1 offering 3/26/15 – 3/27/15 Metro	Case aides	

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Colorado Safety and Risk Assessment	This course is an overview of the foundational knowledge necessary to comprehend the complexities of safety and risk.	Hybrid: web-based and classroom	CWTS	13 hours classroom + 2 hours web-based	10 Offerings Metro, West, NE, SE	Caseworkers and supervisors	Referral to services, child abuse and neglect issues, communication skills, screening and assessment
Specialized Interviewing Skills for Latency-Aged Children	This is training for interviewing latency-age children. Participants will use a protocol with a step-by-step framework, are provided with techniques for gathering evidence, and attending to the child's state of anxiety regarding child abuse and neglect allegations.	Classroom	Butler Institute for Families	3 Days	4 Offerings Metro, West, NE, SE	Caseworkers, supervisors, and law enforcement	Communication skills, evidence-based practices, worker retention (50%)
Solution-Focused Practices to Enhance Engagement	Training participants will gain recognition of solution-focused thinking, as differentiated from problem-focused models. Training features six solution-focused interventions and five concrete tools.	Classroom	Denver Center for Solution Focused Therapy	1 day	4 Offerings Regions/dates TBD	Caseworkers and supervisors	
Supervising for Permanency	This course provides models and strategies for permanency planning discussion during staff supervision.	Classroom	CWTS	1 day	16 Offerings Metro, West, NE, SE Other offerings TBD	Supervisors	Development of case plan, permanency planning, general supervisory skills (50%)
Supporting Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ) Youth While They are in Foster Care	Training participants will learn about the ways to ensure that LGBTQ youth, who are involved in the child welfare system, receive appropriate and supportive services while Training topics include development of "safe spaces", and unique challenges faced in the home, school, and community, including caregiver rejection.	Classroom	Contractor	1 day	11 Offerings Metro, West, NE, SE	Caseworkers, supervisors, and foster/ kinship/ adoptive parents	Development of case plan, case review, case management and supervision, ethics training, cultural competence

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Trainer Skills Institute 101	This specialized training reviews techniques for facilitating a room full of learners in an engaging, energized, and purposeful way.	Classroom	CWTS	1 day	8 Offerings Regions/dates TBD	All professional training facilitators who currently train, or wish to train, on behalf of CWTS, its Partner Trainers, and Training Pool. Trainers have first priority seating in this training, and other child welfare professionals are welcome to attend on a “space available” basis.	
Trainer Skills Institute 201	Course instruction aids participants in building the skills with which they will effectively facilitate participative learning experiences utilizing Action-Based Learning methods such as Problem-Based Learning.	Classroom	CWTS	1 day	2 Offerings Metro	All professional training facilitators who currently train or wish to train on behalf of CWTS, its Partner Trainers, and Training Pool. Trainers have first priority seating in this training. Other child welfare professionals are welcome to attend on a “space available” basis.	
Trauma-Informed Practices	Training topics include the nature of acute and chronic trauma on children, traumatic environments, the mitigating influence of consistent and supportive caregivers, and effective trauma interventions.	Hybrid: web-based and classroom	CWTS	2 day	4 Offerings Metro, West, NE, SE	Caseworkers, supervisors, and foster/ kinship/ adoptive parents	Case management and supervision, recruitment and licensing of foster homes and institutions, communication skills, trauma training
Transitioning Through	This course provides information about the transition from temporary care to	Classroom	Colorado State Foster Parent	1/2 day		Foster/ kinship/ adoptive parents	Placement of the child, case management,

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Adoption: From Foster to Adoptive Parenting	permanency, via adoption. Training topics address the impacts on family dynamics, grief and loss issues, the use of supports, and the preservation of family connections.		Association				recruitment and licensing of foster homes and institutions, recruitment of adoptive homes, permanency planning, effects of separation, grief and loss

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Treatment Planning for Abused and Neglected Children and their Families	Course participants will receive an overview of treatment planning from a developmental and ecological perspective. Training covers types of therapy, the role of visitation, family reunification and termination of parental rights.	Classroom	CWTS	1 day	4 Offerings Metro, West, NE, SE 1 TBD	Caseworkers and supervisors	Development of case plan, case management and supervision, child development, visitations, resilience strategies
Understanding and responding to the impacts of Marijuana: How does it affect the safety, permanency and well-being of children, youth and families?	This course provides caseworkers and supervisors with the knowledge and skills to understand marijuana, its medical uses, abuses, and its impacts on parenting and child safety.	Classroom	Colorado Alliance for Drug Endangered Children	1 day	5 Offerings Metro, West, 1 TBD	Caseworkers and supervisors	Case review, case management and supervision, general substance abuse
Understanding Systems of Support for Children with Special Healthcare Needs	This course helps learners create and sustain a support system for children with special health care needs. Training topics include children who are medically fragile or developmentally delayed, obtaining services, and developing collaborative relationships with service providers.	Classroom	Colorado State Foster Parent Association	1 day	4 Offerings Metro, West, NE, SE	Foster/ kinship/ adoptive parents	Referral to services, development of case plan, case management and supervision, recruitment and licensing of foster homes and institutions, child development

Updates at Noon Webinar Series							
Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Responding to Children's Sexual Behaviors	This training focuses on the methods for distinguishing between normal, problematic, and abusive sexual behaviors of children. Additional course content includes a presentation of the development of goal-oriented responses to children.	Updates at Noon Video Conference	CWTS	1.5 hours	Upon request	Caseworkers, supervisors, legal professionals, and other child welfare professionals	Development of case plan, case review, case management and supervision, child abuse issues, child development
Domestic Violence and Child Abuse Co-Occurrence: How Can We Effectively Intervene?	This training provides information about the intervention in situations with allegations of DV child abuse. Additionally, the content includes assessment guidelines regarding child exposure to DV.	Updates at Noon Video Conference	CWTS	1.5 hours	Upon request	Caseworkers, supervisors, DV providers, other child welfare professionals	Referral to services, screening and assessments, development of case plan, case management and supervision, general domestic violence issues
Overcoming the Odds: Discovering/Building Resilience in Vulnerable Children and Families	Participants learn how to develop strengths and build resilience in children and families who have experienced domestic violence and identify protective factors within the child, family, and community.	Updates at Noon Video Conference	CWTS	1.5 hours	Upon request	Caseworkers, supervisors, DV providers, and other child welfare professionals	Development of the case plan, case management and supervision, general domestic violence issues, resilience skills
Failure to Thrive Identification and Treatment	Training participants learn how to differentiate between non-organic and organic failure to thrive cases. Topics include parent-child dynamics, healthy and unhealthy parent/child interactions, and providing structure and safety for infants who are identified as exhibiting failure to thrive symptoms.	Updates at Noon Video Conference	CWTS	1.5 hours	Upon request	Caseworkers	Referral to services, development of the case plan, case management and supervision, child development, communication skills

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Preparation for Termination Hearings	This course provides a review of the Colorado Statutory and Case Law criteria for terminating the parent-child legal relationship. Specific topics include preparing a case for termination that is based on an understanding of the psychological basis for Colorado's law for freeing children for adoption after they have been adjudicated as dependent and/or neglected. Additionally, appeal information is provided, including how to avoid the situation of refusal by the court to uphold a termination and the overturning, on appeal, of a trial court termination.	Updates at Noon Video Conference	CWTS	1.5 hours	Upon request	Caseworkers, supervisors, and county attorneys	Development of the case plan, case management and supervision, preparation for and participation in judicial determinations
Attachment Theory in Child Welfare Practice	Training participants learn to recognize the four attachment styles via observation of parent-child relationships. Additionally, techniques are provided for designing treatment goals to rehabilitate disturbed parent-child relationships.	Updates at Noon Video Conference	CWTS	1.5 hours	Upon request	Caseworkers	Development of the case plan, case management and supervision, protective factors, screening and assessment skills
Treatment Needs for Physically Abused Children Under Six Years of Age	Course information includes the treatability of parents and the identification of identifying risk for fatal or serious physical injury among infants and preschooler-aged children.	Updates at Noon Video Conference	CWTS	1.5 hours	Upon request	Caseworkers	Development of the case plan, case management and supervision, child abuse issues, DV issues
Therapeutic Relationships with Involuntary Clients	Participants learn about building effective working relationships with clients involved in child protection services by identifying the client's avoidance and resistance and implementing appropriate strategies.	Updates at Noon Video Conference	CWTS	1.5 hours	Upon request	Caseworkers	Development of the case plan, case management and supervision, communication skills

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Using Psychological Assessment Information in Child Welfare Case Planning	Course content provides an overview of psychological testing at key case decision points, the distinction between objective and subjective approaches, and specific tests and assessments used to be used with children and youth.	WBT	CWTS	WBT	WBT	Intake and ongoing caseworkers, case aides, mental health, and legal professionals	Development of the case plan, case management
What Makes Them Tick	This training informs participants about the factors contributing to the underperformance of child welfare staff and the effects on the supervisor, unit, and families. Supervisory techniques for improved performance are included.	Classroom	Butler Institute for Families	1 day	4 Offerings Metro, West, NE, SE	Supervisors	General supervisory skills (50%), State agency personnel policies and procedure (50%), team building and stress management (50%)
Working with Families with Children/Parents with Intellectual and Developmental Disabilities	This course provides information about the strengths and strains experienced by families with children with intellectual and developmental disabilities. Additionally, trainers review disabling conditions, cultural response, statewide resources, safety and risk, and intervening with parents with intellectual and developmental disabilities.	Classroom	Metropolitan State University	1 day	4 Offerings 11/10/14 Metro 2/23/15 SE 4/6/15 NE 6/1/15 West	Caseworkers, case aides, supervisors, legal, early intervention, public health, and community centered board professionals	Case management and supervision, screening and assessment

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Working with Families of Origin	This course reviews the complexities associated with forming partnerships with biological families that impact children and youth. Strategies and tools are provided.	Classroom	Colorado State Foster Parent Association	1/2 day	2 Offerings Metro, SE	Foster/ kinship/ adoptive parents	Development of case plan, case management and supervision, recruitment and licensing of foster homes and institutions
Estimated Total Cost of this Training Type	\$584,767.20						
Cost Allocation Methodology: In-Service training activities are allocated by applying Social Services Random Moment Surveys (SSRMS) to IV-E eligible training activities, weighted by the caseload penetration rate and are eligible for federal matching at 75%.							

<i>Trainings Provided by DCW</i>							
Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
IV-E Training	Training enables eligibility staff to utilize Trails, the IV-E module, and income verification screens from other systems. Annual training includes updates to module, policy, and procedure.	Classroom	DCW	1 day annual 2 ½ days New Worker training	Annual: 8 statewide sessions Metro region	County, DYC, and Tribal staff	Eligibility determinations and re-determinations, Title IV-E policies and procedures, related to data collection and reporting
Children's Habilitation Residential Program (CHRP) Waiver Training	This training provides caseworkers with knowledge of assessments, the BUS system, and Trails documentation that are critical in effectively serving children and youth with intellectual and developmental disabilities.	Class room Teleconference	DCW in partnership with DIDD and HCPF	1 day	4 Quarterly meetings— Metro Region and additional meetings in each region once a year	Caseworkers, supervisors, providers, and community centered board staff	Development of the case plan, case management and supervision, related to data collection and reporting, screening and assessments
Indian Child Welfare Act (ICWA) Training	This course explores the cultural and statutory foundations of ICWA, culturally-relevant parenting techniques, and foster care recruitment and retention.	Classroom	Contract trainers	1 day	Three trainings per year	Caseworkers, community, and family members	Recruitment and licensing of foster homes and institutions, cultural competence

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Permanency Roundtable Training	This training provides an overview of permanency, permanency roundtable skills and youth-centered permanency roundtables.	Classroom	DCW	1 day	Each region/twice a year	Caseworkers, CASAs, guardians ad litem, community partners, and external consultants	Development of the case plan, case review, screening and assessments
Understanding Human Trafficking	This course consists of an overview of the definitions, dynamics, and laws regarding human trafficking and the strategies to assist children and youth victims.	Classroom	Contracted trainers	1 day	Annual	Caseworkers, all Placement Services Unit staff and, supervisors	Development of the case plan, screening and assessments, effects of abuse
Colorado Practice Model	Course is available to provide training and ongoing support of county cohorts in implementing and sustaining CPM.	County on-site training, over the shoulder coaching, webinars, printed materials	DCW and other contracted trainers	1 day	Upon request	County directors, local judicial district court staff, community partners, and stakeholders	Case management and supervision, related to data collection and reporting
Intensive Family Finding	This training builds on the Intensive Family Finding entry-level training. Topics include the use of family engagement during family meetings, permanency roundtables, case mining, and other activities.	Classroom	Contracted	1 day	5 trainings Multiple regions	County and CPA staff, family finders, family engagement meeting facilitators	Development of the case plan, case review, case management, permanency planning, communication skills
Credit Record Retention	This training provides volunteers with skills to assist youth in resolving the inaccuracies in their credit records before the youth's exit from foster care.	Classroom	Contracted	1 day	2 Trainings 2 Regions	Caseworkers and community organizations and partners	Development of the case plan, case management and supervision, permanency planning, child development

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
CANS and Treatment Foster Care	Child and Adolescents Needs and Strengths Assessment (CANS) training for counties planning to implement a 12-month Treatment Foster Care pilot.	Classroom	Contracted expert	4 days	3 Trainings	County, CPA, and mental health staff	Development of the case plan, screening and assessments
Differential Response	This training is an overview of Differential Response and changes to the agency's organizational process upon implementation of the dual-track response.	Classroom	DCW	1 day	Upon request	Administrators, supervisors, and caseworkers	
Social Security Administration (SSA) and Child Welfare Funding	Course content includes an overview of SSA policy and procedures, and Colorado's rules and regulations governing the application for, and maintenance of, SSI and RSDI trust accounts.	Classroom	DCW	4 hours	Multiple regions	County staff, Social Security Liaisons, and financial management supervisors/clerks	Referral to services, case management and supervision
Pathways Guide	This training provides information about the development of the Trails Navigation Modules that align with federal priorities, HB 13-1239, the Statewide Youth Plan youth development goals.	Classroom	DCW	1 day	Multiple regions	Youth caseworkers	Related to data collection and reporting
Community Collaboration Across the Child Welfare and Early Intervention systems	This training brings child welfare and early intervention professionals together for learning and discussion about the intersection of their systems.	Classroom	DCW	1 day	8 Offerings All regions	Child welfare and early intervention professionals	Development of the case plan, screening and assessments

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Secondary Trauma Workshop for Child Welfare Supervisors: Building Resiliency and Responding to Secondary Trauma in Workers	This training enhances the supervisory understanding of primary, secondary, and vicarious trauma. Additionally, techniques are provided to assist supervisors with the challenges of meeting administrative responsibilities while promoting staff autonomy and providing emotional support.	Classroom	DCW	1 day	4 Offerings All regions	Child welfare supervisors	General supervisory skills (50%), State agency personnel policies and procedures (50%), team building and stress management (50%)
Estimated Total Cost of this Training Type	\$183,689						
Cost Allocation Methodology: State-provided training activities are allocated by applying Social Services Random Moment Surveys (SSRMS) to IV-E eligible training activities, weighted by the caseload penetration rate, and are eligible for federal matching at 75%.							

Trails (SACWIS) Training							
Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Child Welfare 2-Day Navigation Prerequisite: Trails Child Welfare 2-Day Navigation class or Training Academy Modules 3 and 5.	This training guides the Trails user through general understanding of Trails functions that include comprehensive searching and general casework processes troubleshooting.	Classroom	Trails staff	2 days	Monthly	Caseworkers, supervisors, CPA staff	Related to data collection and reporting, job performance and enhancement skills (50%)
Academy Module 3/5	Trails instruction for new caseworkers, provided during the New Worker training.	Classroom	Trails staff	3 days each module	CWTS schedules	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)
Supervisor Trails Instruction	Trails instruction for new supervisors.	Classroom	Trails staff	3 hours	CWTS schedules	Supervisors	Related to data collection and reporting, job performance and enhancement skills (50%)

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
DYC Basic Navigation	Mandatory basic course for Trails users that includes practice, individual, group activities, and self-paced exercises.	Classroom	Trails staff	1 day	Monthly	DYC staff	Related to data collection and reporting, job performance and enhancement skills (50%)
SB-94 Navigation	This class is a SB-94 staff member's basic Trails training. Course content covers SB-94 screening, case management, service authorization, and DYC admissions for those performing these that job functions.	Classroom On-line option available	Trails staff	4 hours	Monthly	DYC staff	Related to data collection and reporting, job performance and enhancement skills (50%)
Understanding Child Welfare Resource	Class instruction covers the basic and intermediate concepts in the Resource area of Trails. This training is appropriate for beginning provider (or generalist) workers and has value for more experienced workers who desire a review of basic Trails Resource procedures.	Classroom On-line option available	Trails staff	4 hours	Bi-monthly	Child welfare staff	Related to data collection and reporting, job performance and enhancement skills (50%)
Service Provision Refresher Training	Training participants are guided through different types of Removals, including required entries. Service authorizations are reviewed, including Runaway Service.	Classroom	Trails staff	3 hours	Upon request	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
CPA Provider	Specialized training for CPA caseworkers who are new to Trails. Topics include an overview of basic design and use of Trails and the tasks that may be required, such as recording a new foster home service, and critical incident entry.	Classroom Including online option	Trails staff	4 hours	Upon request	Caseworkers, CPA staff	Related to data collection and reporting, job performance and enhancement skills (50%)
CW Core Enhancements and Functionality	Training participants will gain a general understanding of Trails Enhancements and Functionality for the Core Services Program. Topic areas include Trails enhancements, services authorizations, general processes, and contract management. Additional topics include Medicaid eligibility screens, Yes Pay/No Pay functionality; substance abuse screens, helpful hints, and troubleshooting.	Classroom	Trails staff	4 hours	Upon request	Caseworkers and supervisors	Related to data collection and reporting, job performance and enhancement skills (50%)
ICPC	Trails ICPC is a specialty class that describes the changes to Trails ICPC functionality with the 2012 build, which now records both sending and receiving information.	Classroom	Trails staff	4 hours	Upon request	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Child Welfare Adoption	Course content consists of an overview of the adoption process, the important and mandatory fields required for AFCARS, and strategies for obtaining a clean, complete adoption.	Classroom	Trails staff	4 hours	Upon request	Caseworkers	Negotiation and review of adoption assistance agreements, home studies, related to data collection and reporting, contract negotiation, job performance and enhancement skills (50%)
National youth in Transition Database (NYTD) 101	Colorado is required to assist youth in care (age 17), to complete NYTD baseline surveys on the services they are receiving. This information is used nationally and locally to evaluate and improve services to youth.	Classroom	Trails staff	4 hours	Upon request	CFCIP and youth caseworkers and supervisors	Related to data collection and reporting, job performance and enhancement skills (50%)
CW Merge Training (by request)	This training provides child welfare caseworkers with instruction for the process to merging duplicate client IDs in Trails. A discussion of the Trails windows that affect client merges are covered in detail.	Classroom	Trails staff	4 hours	Upon request	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
CW supervisor	This is specialized training for child welfare supervisors that provide a demonstration of common problem areas and a walk-through of common supervisor tasks, including Assign/Transfer and Supervisor approvals.	Classroom	Trails staff	4 hours	Upon request	Supervisors	Related to data collection and reporting, job performance and enhancement skills (50%), general supervisory skills (50%)
DYC Client Manager	This training assists DYC client managers in learning the locations and procedures for documenting their casework in Trails. The training content includes Commitment, DCP, Service Provision, and other client manager tasks.	Classroom	Trails staff	4 hours	Upon request	Supervisors	Related to data collection and reporting, job performance and enhancement skills (50%)
CDHS – Client ID and State ID Research	This training covers the issues regarding client ID duplication across different systems.	WBT	WBT	< 4 hours	WBT	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)
CIR – DYC	Course content covers all aspects of Critical Incident recording in DYC.	WBT	WBT	<4 hours	WBT	DYC staff	Related to data collection and reporting, job performance and enhancement skills (50%)

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Court	Course content covers the Court area in Trails, specific to child welfare.	WBT	WBT	<4 hours	WBT	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)
Colorado Address Confidentiality Program	Course trains participants in the steps for recording information correctly when address confidentiality is required.	WBT	WBT	<4 hours	WBT	Caseworkers and DYC staff	Related to data collection and reporting, job performance and enhancement skills (50%)
Critical Incident – Child Welfare	Course content covers Critical Incident recording in child welfare.	WBT	WBT	< 4 hours	WBT	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)
CW Security/Org	This training provides a walk-through of tasks in the Security/Organization area of Trails (CW).	WBT	WBT	< 4 hours	WBT	Caseworkers and supervisors	Related to data collection and reporting, job performance and enhancement skills (50%)

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Early Intervention: Developmental Screening	Course content covers Developmental Screening steps.	WBT	WBT	< 4 hours	WBT	Caseworkers	Development of the case plan, case management and supervision, screening and assessments, job performance and enhancement skills (50%)
IV-E Adoption Eligibility Determination	IV-E module training on adoption eligibility.	WBT	WBT	< 4 hours	WBT	Caseworkers and eligibility staff	Development of the case plan, case management and supervision, screening and assessments, job performance and enhancement skills (50%)
IV-E Redetermination	IV-E module training on redeterminations.	WBT	WBT	< 4 hours	WBT	Caseworkers, supervisors, and eligibility staff	Eligibility determinations and re-determinations, Title IV-E policies and procedures, job performance and enhancement skills (50%)
National Youth in Transition Database – Independent living	Training provides instruction on the steps required for NYTD compliance in Trails.	WBT	WBT	< 4 hours	WBT	CFCIP and youth workers	Eligibility determinations and re-determinations, Title IV-E policies and procedures, job performance and enhancement skills (50%)

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Relative Guardian Assistance Program	Training provides instruction for completion of the steps required for Relative Guardian Assistance.	WBT	WBT	< 4 hours	WBT	Caseworkers	Eligibility determinations and re-determinations, Title IV-E policies and procedures, job performance and enhancement skills (50%)
Trails – Alerts WBT	Training for working with Alerts in Trails.	WBT	WBT	< 4 hours	WBT	Caseworkers and supervisors	Eligibility determination and re-determination, development of the case plan, Title IV-E policies and procedures, permanency planning, guardianship assistance, job performance and enhancement skills (50%)
Trails – Beginning Colorado Trails	Course content covers introduction to Trails for child welfare caseworkers.	WBT	WBT	<4 hours	WBT	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)
Beginning Colorado Trails – DYC	This is an Introductory course on Trails for DYC case managers.	WBT	WBT	< 4 hours	WBT	DYC staff	Related to data collection and reporting, job performance and enhancement skills (50%)
Trails – Cognos (CFSR)	This training provides instruction on the steps involved in using the Cognos interface to retrieve CFSR data.	WBT	WBT	< 4 hours	WBT	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Trails – Core Contracts	This training provides instruction for completing a Core Services contract in Trails.	WBT	WBT	< 4 hours	WBT	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)
Trails – DYC Breakouts	This is specialty training for DYC facility staff.	WBT	WBT	< 4 hours	WBT	DYC staff	Related to data collection and reporting, job performance and enhancement skills (50%)
Trails Child Welfare ICPC	This training involves instruction on completing ICPC documentation in Trails.	WBT	WBT	< 4 hours	WBT	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)
Trails Family Service Plan	This training provides a review of all Family Services Plan windows in Trails.	WBT	WBT	< 4 hours	WBT	Caseworkers and supervisors	Related to data collection and reporting, job performance and enhancement skills (50%)
Trails ILP/ETP	This training provides instruction on the Trails ILP/ETP window.	WBT	WBT	< 4 hours	WBT	All youth and CFCIP caseworkers CFCIP	Related to data collection and reporting, job performance and enhancement skills (50%)
Trails IV-E Initial Determination	This course provides IV-E module training specific to initial determination.	WBT	WBT	< 4 hours	WBT	Caseworkers	Related to data collection and reporting, job performance and enhancement skills (50%)

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
Trails MOE Determination	This course provides instruction on the MOE documentation steps in Trails.	WBT	WBT	< 4 hours	WBT	Caseworkers and eligibility staff	Related to data collection and reporting, job performance and enhancement skills (50%)
Trails – Beginning Colorado Trails for CPA workers	This training provides an introduction to Trails for CPA staff.	WBT	WBT	< 4 hours	WBT	CPA staff	Related to data collection and reporting, job performance and enhancement skills (50%)
Trails - Fiscal	This training provides instruction on the Fiscal processes in Trails, including recoveries.	WBT	WBT	< 4 hours	WBT	Administrators, casework staff, and fiscal staff	Related to data collection and reporting, job performance and enhancement skills (50%)
Estimated Total Cost of this Training Type	Trails training costs are contained in the SACWIS costs for Colorado.						
Cost Allocation Methodology: SACWIS training activities are allocated by applying the weighted caseload penetration rate and are eligible for federal matching at 50%.							

Conferences and Summits							
Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of Hours/Days	Frequency/Duration	Audience	Title IV-E Administrative Functions
2015 Colorado Convening on Children, Youth and Families	Statewide conference for Best Practice Court Teams, representing human services and judicial staff working collaboratively on judicial district permanency goals.	Beaver Creek Hyatt Beaver Creek, Colorado	State Judicial	April 26-29, 2015	Yearly	Caseworkers, supervisors, administrators, judges, attorneys, guardians ad litem, and CASAs	Fair hearings and appeals, referral to services, preparation for and participation in judicial determinations, placement of the child, development of the case plan, case reviews, case management and supervision, permanency planning, communication skills, state agency personnel policies and procedures (50%), job performance (50%)
Estimated cost of this Training Type	\$30,000						

<i>Training Under Development</i>							
Program Area 3 (PA3)/ Promoting Safe and Stable Families (PSSF) Training	Training provides overview of PA 3 prevention services and PSSF.	WBT	WBT	WBT	WBT	Caseworkers, supervisors	Referral to services, placement of the child, development of the case, case reviews, case management and supervision, permanency planning, activities designed to preserve, strengthen, and reunify and family, job performance (50%)
Training cost estimation and cost methodology to be established.							

Appendix E: Tribal Consultation Meetings Participants List

ATTENDEES AND CONTACT INFORMATION

UTE MOUNTAIN UTE TRIBE

Name Organization Email Address

Councilwoman Priscilla Blackhawk-Rentz	UMUT Councilwoman	pblackhawk@utemountain.org
Ms. Constance Lehi	UMUT Tribal Services Director	clehi@utemountain.org
Ms. Priscilla Bancroft	BIA Office of the Superintendent	priscilla.bancroft@bia.gov
Officer Karla Ross	UMUT Tribal / BIA Officer	kross@utemountain.org
Officer Kurt Holman	BIA Officer	kurt.holman@bia.gov
Ms. Marissa Maxwell-Kaime	UMUT Public Health Director	mmaxwell-kaime@utemountain.org
Mr. John Trochek	UMUT Health and Human Services Director	jtrochek@utemountain.org

Mr. Peter Ortego	UMUT General Counsel	portego@utemountain.org
Mr. Troy Ralstin	UMUT Executive Director	tralstin@utemountain.org
Mr. Reggie Bicha	CDHS Executive Director	Reginald.bicha@state.co.us
Ms. Mary Anne Snyder	Director, CDHS Office of Early Childhood	maryanne.snyder@state.co.us
Ms. Julie Krow	Director, CDHS Office of Children, Youth & Families	julie.krow@state.co.us
Ms. Viki Manley	Director, CDHS Office of Community Access and Independence	viki.manley@state.co.us
Dr. Lisa Clements	Director, CDHS Office of Behavioral Health	lisa.clements@state.co.us
Ms. Nikki Hatch	CDHS Deputy Executive Director, Operations	nikki.hatch@state.co.us
Ms. Dee Martinez	CDHS Deputy Executive Director, Office of Enterprise Partnerships	dee.martinez@state.co.us

Ms. Melissa Wavelet	Director, CDHS Office of Performance & Strategic Outcomes	melissa.wavelet@state.co.us
Ms. Susan Beckman	Director, CDHS Office of Administrative Solutions	susan.beckman@state.co.us
Ms. Levetta Love	Director, CDHS Office of Economic Security	levetta.love@state.co.us
Mr. Ernest House, Jr.	Executive Director, Colorado Commission of Indian Affairs AmeriCorps VISTA,	ernest.house@state.co.us
Ms. Chantalle Hanschu	Colorado Commission of Indian Affairs	chantalle.hanschu@state.co.us
Ms. Emily Wengrovius	CDHS Liaison	emily.wengrovius@state.co.us
Ms. Kristina Mueller	CDHS Liaison	kristina.mueller@state.co.us

ATTENDEES AND CONTACT INFORMATION

SOUTHERN UTE INDIAN TRIBE

Name Organization Email Address

Councilwoman Pathimi GoodTracks	SUIT Councilwoman	pgoodtracks@southernute-nsn.gov
Councilman Aaron Torres	SUIT Councilman	atorres@southernute-nsn.gov
Mr. Monte Mills	SUIT General Counsel	mmills@southernute-nsn.gov
Ms. Bobbie Rosa	SUIT Vocational Rehabilitation	brosa@southernute-nsn.gov
Ms. Shelly Thompson	SUIT Vocational Rehabilitation	sthompson@southernute-nsn.gov
Ms. Loren Sekayumptewa	SUIT Tribal Services Director	lsekayumptewa@southernute-nsn.gov
Ms. Mary Trujillo Young	SUIT Behavioral Health Center	myoung@southernute-nsn.gov

Mr. Matthew Nyberg	SUIT Division Social Services	mnyberg@southernute-nsn.gov
Mr. Robert Ortiz	SUIT Southern Drum Reporter	rortiz@southernute-nsn.gov
Ms. Ann Hale	SUIT Social Services Director	ahale@southernute-nsn.gov
Mr. Reggie Bicha	CDHS Executive Director	reginald.bicha@state.co.us
Ms. Mary Anne Snyder	Director, CDHS Office of Early Childhood	maryanne.snyder@state.co.us
Ms. Julie Krow	Director, CDHS Office of Children, Youth & Families	julie.krow@state.co.us
Ms. Viki Manley	Director, CDHS Office of Community Access and Independence	viki.manley@state.co.us
Dr. Lisa Clements	Director, CDHS Office of Behavioral Health	lisa.clements@state.co.us
Ms. Nikki Hatch	CDHS Deputy Executive Director, Operations	nikki.hatch@state.co.us

Ms. Dee Martinez	CDHS Deputy Executive Director, Office of Enterprise Partnerships	dee.martinez@state.co.us
Ms. Melissa Wavelet	Director, CDHS Office of Performance & Strategic Outcomes	melissa.wavelet@state.co.us
Ms. Susan Beckman	Director, CDHS Office of Administrative Solutions	susan.beckman@state.co.us
Ms. Levetta Love	Director, CDHS Office of Economic Security	levetta.love@state.co.us
Mr. Ernest House, Jr.	Executive Director, Colorado Commission of Indian Affairs AmeriCorps VISTA,	ernest.house@state.co.us
Ms. Chantalle Hanschu	Colorado Commission of Indian Affairs	chantalle.hanschu@state.co.us
Ms. Emily Wengrovius	CDHS Liaison	emily.wengrovius@state.co.us
Ms. Kristina Mueller	CDHS Liaison	kristina.mueller@state.co.us

Appendix F: Foster Care and Adoptive Recruitment and Retention Plan

	Project	Description	SFY 14	SFY 15	SFY 16	SFY 17	SFY 18	SFY 19	Targeted Audience	General, Targeted, or Child Specific Recruitment	Potential Outcomes & Measurements
1	Foster Family Celebration Event	High profile celebration event at Governor's mansion.	x	x	x	x	x	x	Current/potential foster families	General	Attendees and media mentions
2	Adoption Celebration Event	High profile celebration event at Governor's mansion.	x	x	x	x	x	x	Current/potential adoptive families	General	Attendees and media mentions
3	Heart Gallery (Ongoing Displays) & Heart Gallery Event	Premiere celebration of the annual Heart Gallery photos and videos of children in foster care waiting for an adoptive family.	x	x	x	x	x	x	Local media, CDHS staff, photographers, community partners	General, Targeted, & Child Specific	Media mentions, number of attendees at the event, website analytics, Facebook followers
4	LGBT Events	Collaborative efforts with child placement agencies and counties, specifically targeting the LGBT community (includes PrideFest events).	x	x	x	x	x	x	LGBT community	Targeted	Attendance at events, follow-up to determine number of families that attend specific information nights and begin certification process
5	Website Maintenance	Maintain website throughout the year, which will include county contact information and website links.	x	x	x	x	x	x	Broad-based outreach information	General	Continued website analytics

	Project	Description	SFY 14	SFY 15	SFY 16	SFY 17	SFY 18	SFY 19	Targeted Audience	General, Targeted, or Child Specific Recruitment	Potential Outcomes & Measurements
6	Heart Gallery Digital Tower	Development of a digital Heart Gallery recruitment tool, including the purchase of display towers to supplement the physical photo displays. Will re-evaluate annually to stay current with technology.	x	x	x	x	x	x	Community members, locations, businesses	General, Targeted, & Child Specific	Number of videos, number of location placements for each digital tower
7	Heart Gallery Foster Parent Tower	Expand the mission of the Heart Gallery to include the recruitment of foster families. This would include the development of foster family photos, stories, and videos to be included as an ongoing part of the Colorado Heart Gallery.	x	x	x	x	x	x	Potential foster parents	General & Targeted	Number of photos and location placements of the gallery, website analytics
8	Foster and Adoptive Family Stories	Gather foster and adoptive parent recommendations from county partners to use for development of foster and adoptive parent stories to use for various recruitment and retention purposes. Families will be photographed and videoed, when appropriate, and their stories and images will be shared through various media forms, including the internet.	x	x	x	x	x	x	Potential foster and adoptive parents	General & Targeted	Number of photos and videos of family stories, website analytics
9	Market Research	Use a market research firm to create focus groups and survey tools of new targeted groups (e.g., LGBT, African American, Latino, foster care alumni, adult adoptees, current adoptive parents, empty nesters) to gather new data to inform future recruitment and retention efforts.	x	x				x	Potential adoptive/foster parents, county partners	Targeted	Suggestions and direction about how to outreach to potential parents in targeted markets

	Project	Description	SFY 14	SFY 15	SFY 16	SFY 17	SFY 18	SFY 19	Targeted Audience	General, Targeted, or Child Specific Recruitment	Potential Outcomes & Measurements
10	New Statewide R&R Materials	Using focus group data, new statewide recruitment materials will be created. Material development will be based on market segmentation and focus group data to create a specialized series of ads and promos (using various media forms), which can be used by counties as well as the state, to provide a comprehensive campaign throughout the state. The new materials would expand outreach to specific targeted populations and will be updated and translated to address linguistic barriers annually as needed.	x	x	x	x	x	x	Counties across the state, specific ads to specific groups, same look	General & Targeted	Usage by counties across the state, website analytics
11	Printed Materials	Various printed materials and packets, which are coded for tracking purposes, and could include media kits for use with businesses, community partners, and school outreach, as well as other recruitment and retention materials as necessary. The new materials would expand outreach to specific targeted populations and will be updated and translated to address linguistic barriers annually as needed.	x	x	x	x	x	x	Businesses and community partners (determined from focus groups and market research) and schools in targeted recruitment areas	General, Targeted, & Child Specific	Number of new businesses, schools, and community partners engaged
12	Marketing Outreach for Targeted Groups	Using the data from the market research, determine potential targeted groups (e.g., LGBT, African American, Latino, current adoptive parents, empty nesters) for new recruitment efforts using various media forms suggested by the market research firm.	x	x	x	x	x	x	Targeted groups determined from market research	Targeted & Child Specific	Media exposure, social media, and website analytics

	Project	Description	SFY 14	SFY 15	SFY 16	SFY 17	SFY 18	SFY 19	Targeted Audience	General, Targeted, or Child Specific Recruitment	Potential Outcomes & Measurements
13	Social Media Marketing Fund	A fund to boost Facebook posts on both Facebook pages to encourage additional engagement, including around targeted times during the year, such as May and November and family-based holidays. Boosts would also include targeted web advertising to drive traffic to the social media pages, and child-specific boosts for Colorado's longest waiting children or children who need additional recruitment efforts.	x	x	x	x	x	x	All Coloradans who use social media, potential adoptive/foster parents, specific targeted demographic groups	General, Targeted, & Child Specific	Website analytics, number of likes, shares and responses
14	Social Media Tool Kit/TA	A social media online tool kit to assist counties in developing their own social media presence for recruitment and marketing. This tool kit/TA will be updated as social media changes.	x	x	x	x	x	x	All Colorado counties that wish to implement social media recruitment	General, Targeted, & Child Specific	Number of counties using the program or requesting more TA
15	Business/Community Partner Program	Development of a program of outreach to local/statewide businesses to support adoption/foster care/kinship/older teens/etc. Provide a menu of options for businesses to help support and expand R&R outreach to their employees through lunch talks and booths.	x	x	x	x	x	x	Businesses and community partners (determined from focus groups and market research) not currently engaged with CDHS	General & Targeted	Number of new businesses and community partners engaged
16	Foster Parent Business Discount Program	Agreement with businesses statewide to offer discounts or special pricing for foster families. Accessible online or through a phone app, this would be part of the new website development.	x	x	x	x	x	x	Foster parents retention and business development	NA	Website analytics and feedback from families and businesses

	Project	Description	SFY 14	SFY 15	SFY 16	SFY 17	SFY 18	SFY 19	Targeted Audience	General, Targeted, or Child Specific Recruitment	Potential Outcomes & Measurements
17	Foster Parent Retention Grant	Mini grants for county departments for approved activities supporting the retention of currently certified foster homes. Grant ends in April. Grant would continue in SFY 2015 and possibly increase, depending on outcomes from SFY 2014.	x	x	x	x	x	x	Current foster parents	NA	Feedback forms from counties; data will be compiled and summarized
18	Nationally Known Foster Care/ Adoption Speakers	Through community and business partnerships, host adoption/foster care speakers. This event would be for both recruitment and retention and could be broadcast through webcam across the state.	x	x	x	x	x	x	Broad-based outreach with partners to reach specific target populations	General & Targeted	Number of people attending event, social media engagement about the event, media mentions, website analytics
19	Community Collaboration Recruitment Grant	Mini grants for county departments for supporting recruitment efforts/ events that foster collaboration among counties, CPAs, and other community organizations. Must be available to statewide participation and marketing. Potential target markets include LGBT, African American, Latino, Native American, previous adoptive parents, etc.	x	x	x	x	x	x	Broad-based outreach with partners to reach specific target populations	General & Targeted	Feedback forms from counties; data will be compiled and summarized
20	Community Booths & Outreach	With community partners and counties, R&R booths will be located at targeted events throughout the state as a form of general and targeted recruitment efforts. Examples might include Cinco de Mayo, PrideFest, Black Arts Festival, Pow Wow, etc.	x	x	x	x	x	x	Specific targeted groups at events	General & Targeted	Count from events, social media engagement pre/post event, direct conversations, website analytics

	Project	Description	SFY 14	SFY 15	SFY 16	SFY 17	SFY 18	SFY 19	Targeted Audience	General, Targeted, or Child Specific Recruitment	Potential Outcomes & Measurements
21	The Adoption Exchange (TAE) Recruitment & Response Team (RRT) & Membership	Information sessions for potential adoptive families, response to inquiries from AdoptUSKids, tracking and follow-up of inquiries, child-specific and general recruitment, matching and referral services, website profiles of waiting children, communication with counties about waiting children.	x	x	x	x	x	x	Potential adoptive families	General, Targeted, & Child Specific	TAE maintains a database of all children profiled on the website and the recruitment efforts and inquiries for each child, website analytics
22	Professional Development	Additional professional development related to social marketing and media outreach, including work with diverse communities for foster care and adoption recruitment and retention specialists.	x	x	x	x	x		Professional skill development	NA	New methods and best practices for R&R social marketing

Appendix G: CAPTA CJA Grants

- **Child Advocacy Center (CAC) Forensic Interview Training:** In order to improve Colorado's ability to assess and investigate reports of abuse and neglect, CJA funding was utilized to purchase a forensic training that was adapted specifically for Colorado law and rule. CJA funding was also utilized in 2013 to begin training forensic interviewers throughout the State of Colorado.
- **CJA Grant to Dolphin House:** While waiting for the development and implementation of the Colorado-specific Child Advocacy Center (CAC) Forensic Interview training, CJA funds were utilized to support the completion of a separate forensic interviewing training through Dolphin House, a CAC in the Southwest region of Colorado. In addition, this Southwest region is on the list for 2014 to receive the new Colorado-specific training.

Appendix H: CAPTA Citizen Review Panel Reports

The CDHS Institutional Abuse Review Team

The CDHS Institutional Abuse Review Team (IART) meets monthly to review investigations of abuse and neglect in 24-hour out-of-home licensed and certified childcare settings. These settings include foster homes, child placement agency foster and group homes, residential child care facilities, DYC juvenile facilities, and OBH institutions for children. IART is mandated to ensure that the counties' investigations comply with the State statute requirements, and additionally, reviews the county's involvement and coordination with community agencies and related state entities (Licensing, Placement Services Unit).

During the monthly review, IART identifies areas of concern needing to be addressed and makes both county-specific recommendations and those that are applicable to other community agencies, licensing, the Placement Services Unit, and other state agencies. These recommendations are then reviewed by the County and other state entities. These recommendations are then reviewed by the county and other state entities, which may result in the changing of a finding or the development of a corrective action in regard to the licensed/certified facility.

County investigations require coordination with many state and community agencies. IART's composition mirrors this coordinated approach, with members representing the various entities that may be involved in the investigation, such as:

- Community representatives;
- Medical professionals;
- State and county staff with experience in the area of institutional abuse investigation;
- Placement Services Unit staff and,
- Attorney General's Office staff.

IART reviews over 600 reports each year. In FFY 2014, IART reviewed 623 reports, averaging 52 reports per month. Review information is utilized to make recommendations about training needs and to identify areas requiring remediation to ensure the safety and well-being of children and youth in OOH care. IART's future plans include inviting additional child placement agency, residential, and DYC facility staff to become IART members. In 2014, investigative trends were tracked and analyzed, and this analysis will be reviewed by the IART to determine how best to disseminate the information and how it might guide policy and practice.

2013 Child Maltreatment Fatality Review Report



EXECUTIVE SUMMARY

The 2013 Colorado Department of Human Services Child Fatality Review Report focuses on identifying commonalities and making recommendations for improvements in the Child Welfare system based on the information from 76 substantiated child maltreatment fatalities, near fatalities, and egregious incidents that occurred in 2013. This report includes demographic information for the children in the 76 substantiated incidents, and more specific recommendations made as a result of the 15 incidents fully reviewed by the Child Fatality Review Team (CFRT) and posted to the public website.

In order to determine systemic issues, information about children from 23 substantiated fatalities is combined with data regarding all child maltreatment fatalities occurring in Colorado over the past five years, as well as data at a national level and from research conducted within the child welfare field. Recommendations are provided that address the policy findings, gaps, and deficits identified during the CFRT process.

Child Characteristics

The majority of child maltreatment fatality, near fatality, and egregious incident victims in Colorado in Calendar Year 2013 were White (46%), closely followed by Hispanic (29%). Two-thirds of the victims were male (67%). 39% of children in these incidents were age one or younger. 86% were age five or younger.

Family Characteristics

The enactment of HB 13-255 required more detailed information about family characteristics. Though income level and education level of legal caretakers proved difficult to gather, information on services to families indicated that in 24 incidents fully reviewed by the CFRT team under the new statute, 16 families received some type of supplemental benefit, with Medicaid and the Supplemental Nutrition Assistance Program (SNAP) being the most common programs. Family structure was also gathered in 2013, based on recommendation from the 2012 report. 48% of fatal incidents occurred in families with two biological parents. Likewise, 66% of egregious incidents occurred to children in families with two biological parents.

Other Family Stressors

Information on additional family stressors was available and these characteristics were found in a substantial portion of cases, including substance abuse (20%), domestic violence (38%), and mental health (32%). Prior history was examined and compared to the past years.

Prior History with Child Protective Services

The number of fatalities where the family has prior history with child protective services has ranged from 35% to 55% over the past 5 years. In 2013, 35% of fatal incidents had prior involvement.

Perpetrator Relationship

New analysis for 2013 about perpetrator type found fathers acting alone were the most common perpetrator in all substantiated incidents (25%).

Review Findings and Recommendations

The CFRT highlighted 45 systemic strengths across 15 reports completed and posted in 2013. The most commonly acknowledged asset was child welfare practice. The CFRT also identified 30 systemic gaps and deficits across the child welfare system, which resulted in recommendations for county agencies and CDHS. Similarly, in the 15 reports, 87 policy findings were noted in prior history and current involvement, with the majority of these (37%) directed to the safety and risk assessment. 66 recommendations resulting from gaps, deficits, and policy findings that were indicative of areas for practice and system improvement are contained in Appendix C of this report.

This report also includes joint recommendations with the Colorado Department of Public Health and Environment and the follow-up status of 13 outstanding recommendations from the 2012 annual report.

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Appendix I: NYTD Data

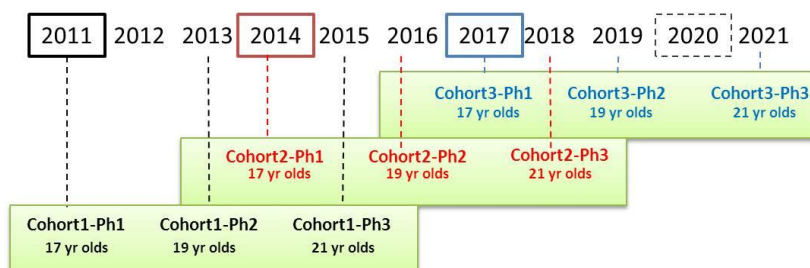
Surveying Youth

Surveys are conducted with youth to examine certain well-being, financial, and educational outcomes as they get older. Data from a survey on outcomes for a cohort of youth is provided every other year beginning with FFY 2011 (October 1, 2010 through Sept. 30, 2011). There are three phases of outcome date for a given cohort:

Phase One: Baseline Survey during the year of the youth's 17th birthday.

Phase Two: Follow-up Survey at age 19.

Phase Three: Follow-up Survey at age 21.



New cohorts will be established every three years (2014, 2017, 2020....) after the initial one in FFY 2011. Colorado completed Phase One with Cohort 1 in 2011, Phase Two with Cohort 1 in 2013, and Phase One with Cohort 2 in 2014.

NYTD Follow-Up Survey Data – Homelessness:

Baseline: 17 Year Old Youth (In Care)	Follow-Up: 19 Year Old Young Adults (Discharged)
Have been homeless	
14.37%	21.34%

- Additionally, year-end reporting by county Chafee programs shows that the Chafee program served eight identified victims of human trafficking, 24 youth who were homeless at some point during the year and four youth who spent time in a shelter.

NYTD Follow-Up Survey Data – Medicaid / Health Insurance:

Baseline: 17 Year Old Youth (In Care)	Follow-Up: 19 Year Old Young Adults (Discharged)
Reported having Medicaid or another type of health insurance	
92.61%	82.22%

- Of those students who received Educational and Training Vouchers (ETV), only 67% reported having health insurance. It is expected that continued outreach by CDPHE and

efforts to inform youth about the Medicaid expansion will result in an increase in the number of enrolled youth.

NYTD Follow-Up Survey Data – Education:

Baseline: 17 Year Old Youth (In Care)	Follow-Up: 19 Year Old Young Adults (Discharged)
Reported being enrolled and attending school	
93.84%	52.96%
Received a vocational license, certificate or college degree	
N/A*	2.37%

Benchmark Comparisons:

- 30.9% of young people, no longer in care, were currently enrolled in school in the Midwest Study—Wave 2 (Chapin Hall)
(*This question was not asked in the baseline survey of 17 year olds.*)

NYTD Follow-Up Survey Data – Permanency / Connection to Adults:

Baseline: 17 Year Old Youth (In Care)	Follow-Up: 19 Year Old Young Adults (Discharged)
Reported having a current positive connection to an adult	
97.33%	90.12%

Benchmark Comparisons:

- Nearly 30,000 youth nationally ‘age out’ of foster care annually without a connection to a family or supportive adults (Juvenile Law Center, Permanency and Transition to Adulthood).

NYTD Follow-Up Survey Data – Employment:

Baseline: 17 Year Old Youth (In Care)	Follow-Up: 19 Year Old Young Adults (Discharged)
Reported current part-time or full-time employment	
13.55%	37.55%
Reported receiving employment-related training in the past year	
15.4%	37.95%

Benchmark Comparisons:

- 40% of young people in the Midwest Study – Wave 2 were employed (Chapin Hall)
- 21% is the average national unemployment rate for 18 to 19 year olds (Bureau of Labor Statistics, 2013)

Appendix J: CFCIP Partners

Well-Being Outcome Area Partners:

- Cooperative Innovation Consultants
- Office of Behavioral Health
- Division of Vocational Rehabilitation
- Colorado Disability Benefits Support Program

Permanency Outcome Area Partners:

- Permanency Task Group
- The Adoption Exchange

Housing Outcome Area Partners:

- Department of Local Affairs, Division of Housing/Family Unification Program (FUP) for former foster youth.
- Urban Peak Denver
- Mile High United Way / Bridging The Gap
- United Way of Weld County
- Shiloh House
- Matthew's House

Education Outcome Area Partners:

- Colorado Department of Higher Education
- Colorado Department of Education
- Forward Steps
- Colorado Association of Financial Aid Administrators
- Metro State University
- Community College of Denver
- Colorado State University / Fostering Connections
- University of Colorado Boulder / Guardian Scholars
- Denver Foundation / Helen M. McLorraine Scholarship for Foster Care and Emancipating Youth

Employment Outcome Area Partners:

- Workforce Innovation and Opportunities Act (WIOA) / Workforce Centers / Department of Labor and Employment
- State Youth Council

Appendix K: Attachment E

Annual Reporting of Education and Training Vouchers Awarded

Colorado

	Total ETVs Awarded	Number of New ETVs
Final Number: 2013-2014 School Year (July 1, 2013 to June 30, 2014)	229 (152 students funded)	40
2014-2015 School Year* (July 1, 2014 to June 30, 2015)	254 (160 students funded)	44

Comments: * The ETV figures for the 2014-2015 school year are estimates.