



**COLORADO**

**Office of Children,  
Youth & Families**

Division of Child Welfare

# 2020 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

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    APPENDIX B: 2018 Institutional Abuse Review Team Report

    APPENDIX C: 2017 Child Maltreatment Fatality Report

    APPENDIX D: 2019 Children's Justice Act Report

    APPENDIX E: SFY 2016-19 Foster and Adoptive Parent Diligent Recruitment and Retention Plan - Revised May 2018

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## I. INTRODUCTION

The Colorado Department of Human Services (CDHS) is pleased to submit the final Annual Progress and Services Report (APSR) on the 2015-2019 Child and Family Services Plan (CFSP).

### *Collaboration*

Accomplishing the goals and objectives outlined in the CFSP is a collaborative effort. Colorado is a state-supervised, county-administered human/social services system; therefore, CDHS partners with county departments of human/social services to ensure Colorado's child and family services are efficient, effective and elegant. CDHS and county staff frequently work together through collaborative workgroups to develop or revise rules in the Code of Colorado Regulations, oversee implementation of initiatives and improve practice, programs and the system as a whole through continuous quality improvement (CQI) efforts. In addition to county departments, other State of Colorado agencies, service providers and community stakeholders collaborate with CDHS to coordinate services and programs that serve Colorado's children, youth and families. Representatives from these groups serve on many of the workgroups referenced above. The updates in this report reflect the efforts and feedback of stakeholders who routinely collaborate with CDHS to implement the CFSP's goals and objectives.

This final report and the activities described represent ongoing and meaningful engagement with our partners, colleagues and families through conferences, consultations, and workgroups.

While not an inclusive list of all collaborators, the following partners and committees are referenced frequently in the 2020 APSR and are instrumental in Colorado's efforts to accomplish the goals, objectives and initiatives outlined in the CFSP:

- The **Administrative Review Division (ARD)** serves as an independent third party review system under the auspices of CDHS. ARD is the mechanism responsible for the federally required Case Review System and a portion of the Quality Assurance System for both the Division of Child Welfare and the Division of Youth Corrections.
- **Colorado Department of Education (CDE)** oversees school districts and educational programs that intersect with CDHS, provides CAPTA referrals, initiating contacts, screenings and evaluations.
- **Colorado Department of Public Health & Environment (CDPHE)** oversees the child fatality prevention system, a multi-disciplinary team that reviews child fatality trends and identifies cross-system prevention strategies.
- **The Continuous Quality Improvement (CQI) Workgroup** brings together state and county child welfare practitioners on a monthly basis to examine statewide and specific counties' performance on key outcome indicators, identify strengths and opportunities in practice, and explore areas of practice that are in need of further research.
- **The Court Improvement Program (CIP)** is a program through Colorado's Supreme Court that works to improve the way individual courts handle dependency and neglect cases, thereby promoting the safety, permanency and well-being of children and families served by Colorado's courts.
- **The Department of Health Care Policy and Financing (HCPF)** administers Colorado's Medicaid program (Health First Colorado), Child Health Plan Plus (CHP+), and other public health care programs.
- **The Policy Advisory Committee (PAC)** is a state-county collaborative committee that develops and addresses statewide human services policy issues. Membership includes county human/social services directors from various regions of the state, CDHS Office Directors and a representative from the Colorado Department of Health Care Policy and Finance (HCPF).
- **The State Board of Human Services (SBHS)** promulgates rules for various CDHS program areas including those related to the child welfare system. Membership includes county commissioners and community partners. Members are appointed by the Governor and confirmed by the Colorado Senate for four-year terms. Rules adopted by the State Board are included in the Code of Colorado Regulations.
- **The Child Welfare Policy Advisory Subcommittee (CW Sub-PAC)** is a subcommittee of the PAC and deals specifically with policy issues related to Colorado's child welfare system. Membership includes regional county representatives, a HCPF representative and staff from various CDHS divisions.
- **U.S. Department of Justice, Office for Victims of Crime (VOC)** funds work to combat juvenile human trafficking through partnerships between child welfare and law enforcement across Colorado.

Additional program and initiative specific collaborations are described throughout the report.

In September 2017, the Children's Bureau (CB) and CDHS collaborated to conduct an onsite visit for Colorado's Child and Family Services Review (CFSR). The CFSR reviewed Colorado's child welfare programs and practice to identify strengths and areas needing improvement with regard to safety, permanency and well-being outcomes of the children and families served by Colorado's child welfare system. The review included the Colorado statewide assessment (submitted in August 2017), on-site case reviews (September 2017) and meetings with stakeholder groups (September 2017).

The CFSR found many strengths in Colorado; however, Colorado was not in substantial conformity with any of the seven outcome measures. Colorado was in substantial conformity in two of the seven systemic factors. A Program Improvement Plan (PIP) is in development to achieve all of the state’s goals. Colorado has identified five overarching themes for practice improvement including parent engagement, the timely achievement of permanency, service array and resource development, national standards (maltreatment and re-entry), and ongoing assessment of safety and risk. Targeted strategies in these areas are outlined in the Final PIP submitted to ACF in May 2019. As of this writing, the PIP has not yet been approved by the Children’s Bureau.

Over 25,000 stakeholders including state and county staff, interagency partners, service providers, foster parents, Colorado’s federally recognized tribes and organizations serving Colorado’s American Indian communities were sent the 2020 APSR draft for their review and feedback. A copy of the approved report will be sent to both of Colorado’s federally recognized tribes. Stakeholders were encouraged to submit their feedback to CDHS’ Division of Child Welfare (DCW).

This report incorporates the feedback CDHS received from stakeholders and will be publicly available on the CDHS website (<https://www.colorado.gov/pacific/cdhs/publications-reports>) by September 30, 2019, or when final approval is received from the Children’s Bureau, along with previous reports.

**Trails Modernization**

The objective of the Trails Modernization project is to keep the concept of Trails as an enterprise-wide Human Services application using more modern technologies to meet current and future needs of CDHS, the counties, and children and families of Colorado. This three-year project transitions the current Child Welfare system to a web-based application with 45% new functionality identified by the Trails user communities such as Counties, Division of Child Welfare, Administrative Review Division and Division of Youth Services.

*Table 1: Trails Project - Detailed Timeline*

*(source: Governor’s Office of Information Technology)*

Module	Original Start	Actual Start	Original Development End	Requested Development End (Adjusted from 12/31/18)	Requested O&M Support End (Adjusted from 6/30/19)
Intake & Resource	07/01/16	07/05/16	07/31/17	06/09/19	11/30/19
Assessment & Commitment	04/03/17	04/20/17	09/30/17	06/09/19	11/30/19
Case	04/03/17	04/20/17	06/30/18	06/09/19	11/30/19
Fiscal	07/03/17	07/26/17	06/30/18	06/09/19	11/30/19

Note 1: Enterprise Service Bus (ESB) (Being funded, built, and integrated through the State Interoperability project. Scheduled to be completed by September 30, 2019.

Note 2: Original Development Date had six months of additional schedule to accommodate six months of post-production support included in capital funding. This IAPD is requesting that five months of Tier 4 support shift into and OAPD approved O&M support model.

- The project has deployed four releases on September 2017, November 2017, March 2018 and July 2018. The final deployment date is to be determined. The Child Welfare Training Site and Trails Portal have user information and training materials for each of these releases. More extensive materials are being produced for the final release supporting DCW, DYS, ARD and other end-user communities
- Training occurred for each of the releases. Communications are including weekly newsletters and status reports, as well as need-based formal and information communications

This project uses the existing Oracle database with table modifications and data conversions being driven based on user-defined requirements. Existing reports have been updated to Crystal Reports 13. Report modifications and new reports have been defined based on application changes and business needs. Reports align with releases and the majority of reports will be made available with the final release. Based on lessons learned feedback after the July 2018 release, the data and report validation testing process has been modified to increase pre-deployment validation efforts.

Post-deployment bugs have had data, metrics, and report impacts. Bug fixes have addressed functionality however timeliness measures and other impacts may still persist. The majority of impact was seen with the July, 2018 release. Thus, the data/reports from July 2018 to December 2018 should be interpreted with caution.

Trails is interfaced with 13 systems. The Trails Modernization project team is partnering with technical teams from each of the interfaced systems to ensure data transfers continue to work as designed.

## II. UPDATE ON PROGRESS MADE TO IMPROVE OUTCOMES

**Goal 1: The services that Colorado's children, youth and families need are provided in their communities, at the right time.**

### Objective 1.1 Appropriately responds to child welfare reports and inquiries.

- *Intervention 1.1.1 Implement a statewide child abuse and neglect hotline:* Colorado's Child Abuse and Neglect Hotline went live on January 1, 2015. In CY 2016, the hotline system received 206,107 calls. In CY 2017, the hotline system received 211,544 calls. In CY 2018, the hotline system received 221,969 calls. County departments of human/social services were provided the opportunity to have the state-contracted Hotline County Connection Center (HCCC) take hotline calls and make a report of suspected abuse or neglect on behalf of the county. The county retains all responsibilities for review, assessment and disposition of the report. Forty-four counties (38 full-time and six after-hours only) have chosen to have the HCCC take their calls and submit the report on their behalf. More information about the ongoing operations of the statewide child abuse and neglect hotline is in the *Update on Service Description* section of this report.
- *Intervention 1.1.2 Enhanced Screening:* Through the use of Colorado Results Oriented Management System (ROM), CDHS staff routinely monitor counties' information-gathering practice and provide coaching, as needed, to improve counties' fidelity to the guidelines outlined in the Code of Colorado Regulations. CDHS has engaged state groups in identifying necessary technical fixes for the Trails Hotline Application to support efficient call taking.
- *Intervention 1.1.3 Refer to prevention services:* Colorado continues to see increases in referrals and participation in prevention programs. Program Area 3 (PA3) is composed of programs that direct services to children, youth and families who are at risk of involvement or further involvement with the child welfare system. The number of prevention/intervention services available to families who do not have an open child welfare case has expanded. Many Colorado's county departments of human/social services refer eligible families to SafeCare® Colorado (SCC) and Colorado Community Response (CCR). In SFY 2018, 9,186 families were referred to the SCC and CCR programs. This includes families who self-referred or were referred to SCC through community-based organizations. Of those, 2,347 families voluntarily agreed to participate in SCC and CCR services. Information about Colorado's prevention services is in the *Update on Service Description* section.

### Objective 1.2 Children are safe.

- *Intervention 1.2.1 Implement and monitor new safety and risk assessment:* Colorado's revised Colorado Family Safety and Risk Assessment tools were fully implemented in January 2017. Additional rule revisions were promulgated in January 2018 and effective in March 2018 to provide further clarity in the use of the tools. A report to monitor the timeliness of completion of the Colorado Family Safety Assessment was developed and is distributed to counties on a monthly basis. All counties have been trained on the use of the tools and additional training and technical assistance has been provided to county staff as needed. Training on the use of the tools is included in the new worker training through the Child Welfare Training System (CWTS). Review to the accuracy of the safety and risk assessments began in April 2018. Ongoing assessment of safety, including appropriate use of the tool, is addressed in the PIP submitted in June 2018. Continuation of the use of this tool will be an activity monitored through the PIP.

### Objective 1.3 Children and youth have timely permanency.

- *Intervention 1.3.1 Implement Title IV-E Waiver Interventions of Family Engagement, Kinship Supports and Permanency Roundtables in counties:* In SFY 2019, 52 counties are implementing facilitated family engagement practices through Colorado's IV-E waiver demonstration project; however, all 64 counties utilize family engagement strategies in case planning and administering services to families involved in the child welfare system as part of practice. Sixteen counties are practicing permanency roundtables, and 29 counties have implemented kinship supports interventions. More information about Colorado's IV-E waiver demonstration project is in the *IV-E Waiver Project Demonstration Activities* section. Although the IVE Waiver has been completed, timely achievement of permanency and engagement of families continues to be a value for Colorado and IV-E waiver has been a springboard for strategies monitored through the PIP.
- *Intervention 1.3.2 Develop and implement alternatives to congregate care:* Timely achievement of permanency and engagement of a child/youth's family and placement providers were issues identified in the 2017 CFSR, and strategies to address this for children/youth in congregate care are incorporated into the PIP submitted in June 2018. Colorado has expanded the out-of-home (OOH) continuum by modifying certification and licensing requirements to increase the number of children/youth in a foster home from 4 to 6. Treatment Foster Care (TFC) was identified as a gap in Colorado's OOH continuum. [See Intervention 1.3.3 for updates regarding TFC].
- *Intervention 1.3.3 Implement treatment foster care:* TFC rules were promulgated in December 2017 and went into effect on February 1, 2018. Under the rules, TFC services for county departments of human/social services or child placement agencies (CPA) are approved by the staff on the DCW Ongoing Services Unit and/or licensing staff in the

DCW Placement Services Unit within CDHS. TFC services include requirements related to staffing, capacity in the treatment foster care home and training. County departments and CPAs that provide these services must have sufficient infrastructure to meet the rigor of the program. Currently six agencies have been approved to provide treatment foster care services in Colorado; the next year will be an opportunity for growth of TFC services. The Care Coordinator and clinical staff, required through the rules now in-house or through behavioral health organizations, in the future through Regional Accountability Entities (RAE), provide treatment foster parents with ongoing support to meet the needs of the child/youth in the treatment foster home. The TFC home rate was established in February 2019.

Objective 1.4 Children and youth in out-of-home care have access to the physical and mental health services they need.

- *Intervention 1.4.1 Maintain collaborative efforts with the Department of Health Care Policy and Financing to monitor psychotropic medications prescribed for children and youth in foster care:* Colorado’s Office of Children, Youth & Families (OCYF) Medical Oversight team successfully collaborated with the University of Colorado to develop a project utilizing the ECHO (Extension for Community Health Outcomes) learning collaborative around safe psychotropic prescribing. In addition, the OCYF Medical Oversight team and HCPF jointly produced the 2017 statewide Psychotropic Prescribing Guidelines for Youth in Foster Care. Along with this, both groups continue to co-chair the Psychotropic Steering Committee, which consists of numerous community stakeholders that meet regularly to discuss concerns regarding safe psychotropic prescribing for foster youth in Colorado.

The OCYF Medical Oversight team continues to collaborate with HCPF and the Drug Utilization Review Committee to refine the content and style of review letters sent to prescribers in cases of psychotropic medication polypharmacy. These letters are intended to alert the prescriber to the unusual combination of medications, to identify opportunities to reduce or optimize the medication regimen. The OCYF Medical Oversight team is assisting with ways to ensure that the letters are clear and lead to meaningful change. See the Health Care Oversight and Coordination Plan section of this report for more information.

- *Intervention 1.4.2 Implement trauma-informed assessment and services:* In SFY 2019, 16 counties have implemented or are in the process of implementing both of the trauma-informed interventions through Colorado’s IV-E waiver demonstration project. Colorado has also added a trauma screening tool into Trails for all caseworkers to use. More information about the trauma-informed interventions is included in the *IV-E Waiver Demonstration Project Activities* section of this report.

Goal 1 Measures of progress

1. *Colorado will meet the 90 percent national goal for timeliness of response three out of twelve months for each year of the CFSP.*

A review of data available in the ROM system indicates Colorado met or exceeded the timeliness of initial response goal 12 out of 12 months during CY 2017. As a result of statewide performance meeting or exceeding the 90 percent national goal, this goal was modified in October 2017 to 95 percent.

Table 2: Timeliness of response goal

(source: ROM, Timeliness of Initial Response, 2/24/19)

CY 2015	CY 2016	CY 2017	CY 2018
Feb., June, Sept., Nov., Dec.	Feb. - Dec.	Jan. - Dec.	Jan. - Dec.
Months at or above 90%: 5 of 12	Months at or above 90%: 11 of 12	Months at or above 95%: 12 of 12	Months at or above 90%: 12 of 12

2. *Colorado will develop a baseline for the measurement of safety form accuracy for SFY 2016, increase 5 percent per year for SFY 2018 and will evaluate the safety and risk assessment and safety tool accuracy in SFY 2019.*
  - The Administrative Review Division (ARD) modified the Assessment Review Instrument to include questions based on the current rule requirements related to the Colorado Family Safety and Risk Assessments. Reviews began in April 2018.
3. *The national standard for "absence of maltreatment recurrence" of 95 percent will continue to be met and maintained throughout the five-year period.*
  - This measure is replaced by the new CFSR Round 3 statewide data indicator Recurrence of Maltreatment.

Nationally, 9.1 percent of children who were victims of substantiated reports of maltreatment during a 12 month period were victims of another substantiated allegation within 12 months of their initial report. In CY 2018 Colorado did not perform better than the national standard. The recurrence of maltreatment is addressed in Colorado's PIP.

Table 3: Recurrence of maltreatment

(source: ROM, Recurrence of Repeat Maltreatment 2/24/19)

CY 2015	CY 2016	CY 2017	CY 2018
6.9%	8.0%	8.9%	8.8%

4. The national standard of absence of child abuse and/or neglect in foster care (12 months) of 99.68 percent will be met nine of twelve months for each year of the five-year period.
- This measure is replaced by the new CFSR Round 3 statewide data indicator Maltreatment in Foster Care. The new indicator looks at all children in foster care during a rolling 12 month period, and the national standard is less than or equal to 8.5 incidents of maltreatment per 100,000 days of foster care. In CY 2018 Colorado performed better than the national standard; its rate of maltreatment was 8.23 incidents for the twelve month period.

Table 4: Maltreatment per 100,000 days of care

(Source: ROM, Maltreatment in Out-of-Home Care 2/24/19)

CY 2015	CY 2016	CY 2017	CY 2018
9.05 incidents	10.44 incidents	8.18 incidents	8.23 incidents

5. The median stay in OOH care prior to exit to reunification (Data Profile, Permanency Composite 1, Measure C1-2) will improve by 5 percent in 2018.
- Median length of stay remained unchanged from CY 2017 to 2018.

Table 5: Median stay in OOH care

(source: ROM, Median Length of Stay at Foster Care Exit, 2/24/19)

CY 2015	CY 2016	CY 2017	CY 2018
7.1 months	6.7 months	7.0 months	7.0 months

6. The rate at which children/youth are placed in the most appropriate setting to meet their needs will be maintained at 98.4 percent to 99.4 percent annually for each of the next five years.
- In FFY 2018, Colorado decreased its performance according to the CFSP baseline.

Table 6: Rate of placements in most-appropriate setting

(source: ARD 3/4/19)

FFY 2015	FFY 2016	FFY 2017	FFY 2018
99.4%	99.0%	96.4%	95.4%

7. The rate of medical and dental examinations following placements will improve by 5 percent by 2019.

- As part of the administrative case review process, ARD assesses whether children and youth receive timely medical and dental examinations following initial placement. Per the Code of Colorado regulations, medical exams are to be conducted or scheduled within two weeks of placement and dental exams within eight weeks of placement. Colorado improved its performance since FFY 2016.

The Office of Information Technology (OIT) and HCPF, CDHS created a time-limited Medical Eligibility Subcommittee to develop recommendations for process changes around data entry in the CCWIS (Trails) and outreach when a child enters OOH care. Data links were examined and created between HCPF data systems and Trails to send notifications to the HCPF Healthy Communities Family Health Coordinators (FHC) of children entering OOH care so that the FHC’s can provide outreach and support to OOH providers in scheduling initial medical and dental appointments. Timely data entry into Trails is necessary to ensure timely notifications are sent allowing for appointments to be scheduled within the required time frames. Efforts through Trails Modernization are underway to make the Health Passport within Trails more user-friendly for county caseworkers.

Table 7: Rate of timely medical and dental examinations

(source: ARD 3/4/19)

FFY 2015	FFY 2016	FFY 2017	FFY 2018
<p>Medical: 64.2%</p> <p>Dental: 68.8%</p>	<p>Medical: 61.7%</p> <p>Dental: 65.4%</p>	<p>Medical: 63.7%</p> <p>Dental: 67%</p>	<p>Medical: 66.6%</p> <p>Dental: 68.6%</p>

8. *By 2019, trauma-related activities will be*

- 95 percent of children/youth will be screened by CDHS for trauma,
- 90 percent of children/youth screened in for trauma by CDHS will be assessed by the Office of Behavioral Health (OBH), and
- 70 percent of children/youth assessed as traumatized will receive evidence-based trauma treatment.

**Goal 2: Youth and children remain safely at home with families**

Objective 2.1: Children remain safely at home with improved child, youth and family assessments.

- *Intervention 2.1.1 Implement new safety assessment and statewide training:* All trainings through the CWTS that include safety assessments have been updated to incorporate the family focused philosophy that is the basis of the Colorado Family Safety and Risk Assessments. CDHS staff developed a monthly report to monitor timely documentation of the safety assessment tool. Since developing the report, statewide performance improvements have occurred. CDHS staff continues to provide coaching to counties on the functionality of the tool.
- *Intervention 2.1.2 Accurately complete safety assessment forms:* Measuring statewide and county performance on the accurate completion of the safety assessment tool is measured through the department’s qualitative case review system. The ARD has reviewed and revised the relevant case review instrument questions based on rules that were effective January 1, 2017. The ARD did not begin capturing data related to the accuracy of the completion of the Safety Assessment and Risk Assessment tools until April 2018, due to continued collaborative pilot review projects.
- *Intervention 2.1.3 All counties utilize RED teams:* In July 2014, Colorado completed implementation of RED (Review, Evaluate and Direct) teams in all counties, and rules guiding practice were effective January 1, 2015. Based on feedback from county child welfare staff, reviews, CQI processes, and ongoing analysis of the RED team process, modifications were made to the RED team rules went into effect March 1, 2018.

Objective 2.2: Counties implement Family Engagement principles and processes.

- *Intervention 2.2.1 All counties have an identifiable Family Engagement program:* The Code of Colorado Regulations requires counties to engage in family engagement strategies; CDHS has collaborated with county departments participating in the facilitated family engagement IV-E Waiver intervention to improve the consistency and quality of meetings. The Colorado Facilitator forum and a CDHS lead teleconference each meet quarterly to provide training and networking opportunities and to promote the development of facilitated family engagement programs. Training topics covered in SFY 2019 included engaging with Respondent Parents’ Counsel, engaging with youth, the principles of family group conferencing, DANSR and facilitation, culture and facilitation, and engaging LGBTQ youth. In the 2nd quarter of SFY 2019, 49 counties held facilitated family engagement meetings and a total of 5,250 meetings were held. CDHS also began offering new facilitation training through the

CWTS and an online facilitator community as available to facilitators as of April of 2019. Additional initiatives that utilize family engagement principles include the Dependency and Neglect Reform (DANSR) project and the Collaborative Management Program (CMP). Engagement of families, especially fathers, was identified as an area needing improvement in the CFSR. Strategies to improve are included in the CFSR Round 3 PIP.

Goal 2 Measures of progress

1. *The sample of screened out referrals monitored by ARD will maintain the rate of 98 percent accuracy of decision-making.*
  - o ARD completed a Screen-Out Review in September 2018. The weighted statewide performance for CY 2018 did not meet the goal for accuracy of the screen-out decision. 97.3 percent of screened out referrals were screened out appropriately, as the referrals did not meet the Volume 7 criteria for assignment.

Table 8: Accuracy of screened-out referrals

(source: ARD 2/15/19)

CY 2015	CY 2016	CY 2017	CY 2018
98.04%	n/a	96.8%	97.3%

2. *Engagement of family members in case planning will be enhanced as follows:*
  - o Child/Youth: The engagement rate will be maintained at 99.9 percent for three out of four quarters each year of the five year period.
  - o Mother: The engagement rate’s baseline, 91.4 percent, will be maintained for FFY 2015.
  - o Colorado will increase engagement by 5 percent every year through FFY 2018.
  - o Father: The engagement rate’s baseline, 80.8 percent, will be maintained for FFY 2015.
  - o Colorado will increase engagement by 5 percent every year through FFY 2018.
  - This measure of progress was revised in FFY 2016 in order to align with federal fiscal year time frames and the way qualitative case review data are reported. The ARD assesses whether efforts were made to engage youth and parents in case planning during qualitative case reviews. In FFY 2018, Colorado did not meet the goal for youth engagement. Caseworkers made efforts to engage youth in case planning in 99.3 percent of cases, and overall, youth participated in 99.3 percent of cases.
  - Colorado did not meet the FFY 2018 goals for engagement of mothers and fathers. In FFY 2018, caseworkers made efforts to engage 90 percent of mothers, with 79% percent of mothers participating in case planning. Efforts were made to engage 76.1 percent of fathers, with 61% percent of fathers participating in case planning.
  - Current efforts to improve engagement of mothers and fathers in treatment planning include providing on-demand technical assistance to county departments of human/social services to assist with engagement strategies around treatment planning as well as writing effective, family-centered goals and objectives.
  - Family engagement is a consistent theme in the PIP strategies. A Parent Engagement PIP sub group was developed to help address parent engagement needs in Colorado. The group was comprised of county staff, state staff, and community stakeholders and met regularly to analyze data related to parent engagement and craft strategies aimed at promoting engagement. The PIP outlines several strategies to improve engagement with fathers, including developing training aimed at caseworker engagement skills, expanding services available to fathers, and improving statistics around face-to-face contact with fathers. The use of family engagement meetings will also be expanded to include parents further in case decision making points such as treatment planning, planning for return home and planning for case closure.

Family engagement will also form steps taken to help promote the quality of facilitated family engagement meetings in Colorado. Facilitators are now able to take part in an online community developed to improve communication across counties. This community will allow facilitators and supervisors to communicate easily with facilitators across the state in a secure environment. Facilitators will also benefit from the introduction of an area of specialization in facilitation that will be available throughout the Child Welfare Training System. This area of specialization will increase the supervision expectations regarding facilitation and promote the observation of other facilitator in the field.

Table 9: Engagement of family members in case planning

(source: ARD 2/15/19)

FFY 2015	FFY 2016	FFY 2017	FFY 2018
Youth: 99.3%	Youth: 99.3%	Youth: 99.6%	Youth: 99.3%
Mother: 95.8%	Mother: 93.6%	Mother: 90.1%	Mother: 90%
Father: 89.8%	Father: 82.9%	Father: 78.8%	Father: 76.1%

**Goal 3: Institutionalize Colorado’s quality assurance (QA)/continuous quality improvement (CQI) system**

Objective 3.1: Colorado’s QA/CQI system is identifiable in all state and county practices and initiatives.

- *Intervention 3.1.1 Streamline communication between the CDHS Research, Analysis and Data Team; ARD; other data systems; and the counties:* Colorado has worked to streamline communication between these groups through the Continuous Quality Improvement (CQI) Workgroup, which is composed of CDHS staff and representatives from county departments of human/social services.
- During the 2018 Child and Family Services Review, Colorado received an overall rating of Strength for Item 25 (Quality Assurance System) based on information from the statewide assessment and stakeholder interviews. The following is from the final CFSR report:

*Information in the statewide assessment and collected during interviews with stakeholders confirmed that the state has developed and implemented an effective quality assurance system with standards to ensure that children in foster care are provided quality services that protect their safety and health. The QA system, which encompasses ARD reviews, fatality reviews, egregious incident reviews, and C-STAT reports, identifies the strengths and needs of service delivery, provides relevant reports, and evaluates implemented improvement measures. The Division of Child Welfare provides technical assistance to the counties when deficiencies are identified.*

- DCW intermediary staff is assigned to each county and provide support for CQI processes.
- *Intervention 3.1.2 Ensure regular and identifiable stakeholder involvement in an oversight capacity of Colorado’s child welfare practices:* Colorado continues to seek stakeholders’ input and involvement in monitoring and improving the state’s child welfare practices. CDHS maintains several committees and workgroups to advise and/or oversee work related to child welfare programs and initiatives. Noteworthy examples include the Child Welfare Executive Leadership Council, Child Welfare Sub-PAC, Hotline Steering Committee, the IV-E Waiver Oversight Committee, Child Protection Task Group, Permanency Task Group, Administrative Review Steering Committee, Adoption Steering Committee, CQI Workgroup and Training Steering Committee.

When Colorado received the CFSR report, the CFSR Oversight Committee transitioned to oversight of the PIP. The CQI Workgroup was instrumental as Colorado prepared the PIP: the group has facilitated CQI processes related to PIP items, identified measures of performance in areas in need of improvement and supported counties in utilizing CQI processes as appropriate. In addition to the committees convened by CDHS, staff participated in committees and workgroups hosted by interagency and community partners that align with the Department’s work.

Goal 3 Measures of progress

The CFSP notes that Colorado’s QA/CQI system will be evaluated by county departments of human/social services and CDHS to determine how the framework meets the CQI needs of CDHS. This evaluation happens formally and informally on an ongoing basis across many existing collaborative committees. CDHS continues to be open and responsive to feedback from its stakeholders regarding the state’s QA/CQI system.

### III. UPDATE ON SERVICE DESCRIPTION

The Stephanie Tubbs Jones Child Welfare Services Program provides grants to States and Indian tribes for programs directed toward the goal of keeping families together. These funds are an integral part of states' human/social service systems for families who need assistance in order to stay together. These funds, often combined with State, county and private funds, are directed to accomplish the following purposes:

- Protect and promote the welfare of all children;
- Prevent the neglect, abuse or exploitation of children;
- Support at-risk families through services which allow children, where appropriate, to remain with their families or return to their families in a timely manner;
- 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.

Colorado's child welfare services and related principles, guidelines and practice expectations are defined in CCR 2509-, Volume 7. Volume 7 begins as follows:

Child Welfare Services constitutes a specialized set of services that are intended to strengthen the ability of families to protect and care for their own children, prevent involvement or continued involvement in the child welfare system, minimize harm to children and youth and ensure permanency planning. The goal shall be to support the intactness of families, when appropriate, through the provision of services aimed at stabilizing the family situation and strengthening the parents/guardians in fulfilling their parental responsibilities to their children. Intervention shall be guided by respect for the family's integrity, knowledge of the legal base for action and sound social work practice.

Children and youth who are at risk of being maltreated, who have been harmed and/or who live in situations where there are safety concerns present are eligible to receive child welfare services. The table below details the number of children who are served by Colorado's child and family services continuum. Data related to prevention and early intervention services are reported in the following section.

Table 10: CY 2018 Child Welfare Services Data

(source: ROM 2/12/19)

	CY 2018
Number of calls to Colorado's child abuse and neglect hotline reporting system:	221,969
Number of referrals:	112,964
Number of referrals accepted for assessment:	38,699
Number of children involved in child welfare services during the reporting period:	21,615
Number of children entering new involvements with child welfare services:	10,165
Number of children who entered foster care during the reporting period:	1,389
Number of children discharged to reunification (parents, relatives, & guardianship):	3,534
Number of children discharged to adoption:	783
Number of children discharged to emancipation:	212

Colorado's child and family services continuum is outlined in the CFSP (pages 47-67). The CFSR Statewide Assessment highlights areas where Colorado's child and family services continuum is achieving positive outcomes, areas that require improvement and efforts CDHS and its partners are taking to either sustain or improve performance. The following sections provide updates on any changes and additions to the CFSP services continuum since the submission of last year's APSR.

## *Prevention and Early Intervention Services*

### *Program Area 3 (PA3)*

In 2014, a new child welfare program area, PA3, was created to

- Provide services for children and families who do not have an open child welfare case, but who are at risk of involvement with child welfare;
- Provide services with a family support plan in closed child welfare involvement with no safety concerns; and
- Provide services and support to families with children and youth in a preventative manner.

Since the introduction of PA3, Colorado's county departments of human/social services have used local, state and federal funds to provide and account for prevention/intervention services to children, youth and families. Counties are required to submit a PA3 services delivery plan as an addendum to their annual Core Services Program Plan. In SFY 2019, 60 county departments of human/social services were approved to use Core Services Program funds for PA3 services.

### *Core Services Program*

The Core Services Program was established within CDHS in 1994 and is statutorily required to provide strength-based resources and support to families when children and youth are at imminent risk of OOH placement, in need of services to return home, or in need of services to maintain a placement in the least restrictive setting possible.

The statewide Core Services Program is built to address four clinical emphases:

- Focus on family strengths by directing intensive services that support and strengthen the family and protect the child/youth;
- Prevent OOH placement;
- Return the child/youth in placement to their own home or unite the child/youth with their permanent families; and
- Provide services that protect the child/youth.

These objectives are addressed by family preservation services, which are short-term, family-based services designed to support families in crisis by improving parenting and family functioning while keeping children and youth safe. There are ten designated types of family preservation services.

1. **Aftercare Services:** include any of the services provided to prepare a child for reunification with his/her family or other permanent placement and to prevent future OOH placement of the child.
2. **County-Designed Services:** services tailored by individual counties to prevent the OOH placement of children, facilitate reunification or achieve another form of permanence.
3. **Day Treatment:** includes comprehensive, highly structured services that provide education to children and therapy to children and their families.
4. **Home-Based Intervention:** is an array of services provided in the home of the client that may include therapeutic services, concrete services, collateral services and crisis intervention directed to meet the needs of the child and family.
5. **Intensive Family Therapy:** includes therapeutic interventions with family members to improve family communication, functioning and relationships.
6. **Life Skills:** include services provided in the home that teach household management, parenting techniques, family conflict management and strategies to effectively access community resources.
7. **Mental Health Services:** include diagnostic and/or therapeutic services to assist in the development of the family services plan and to assess and/or improve family communication, functioning and relationships.
8. **Sexual Abuse Treatment:** includes therapeutic interventions designed to address issues and behaviors related to sexual abuse victimization, sexual dysfunction, sexual abuse perpetration, and to prevent further sexual abuse and victimization.
9. **Special Economic Assistance:** includes emergency financial assistance of not more than \$2,000 per family per year in the form of cash and/or vendor payment to purchase hard services.
10. **Substance Abuse Treatment Services:** include diagnostic and/or therapeutic services to assist in the development of family service plans; to assess and/or improve family communication, functioning and relationships; and to prevent further abuse of drugs or alcohol.

CDHS allocates Core Services Program funds to all 64 counties and Colorado’s two federally recognized tribes on an annual basis. Each jurisdiction designs a plan with a unique mix of required and county-designed services, resulting in a multifaceted array of services. Since 2011, with the implementation of the Flexible Funding for Families legislation (HB 11-1196), Core Services funding may also be utilized to provide PA3 services.

Currently, there are several on-going focus groups that include members of HCPF and DCW that continue to work to improve efficiency and ensure that Core Services Program funds are used for individuals and families who do not have access to Medicaid, private insurance, or other funding sources.

The Core Services Program is evaluated by the Social Work Research Center in the School of Social Work at Colorado State University. Evaluation reports are due to the Colorado General Assembly, Chief Justice of the Colorado Supreme Court and the Governor by October 1st of every year. The most recent report, published October 1, 2018, covers CY 2017 program services and activities.

Based on data reported in the CY 2017 evaluation report, the Core Services Program served 29,578 individuals during the reporting period. This represents an increase of .01 percent in non-duplicated clients served from CY 2016. Overall, 55 percent of the individuals were children/youth directly receiving services, and 45 percent were adults receiving services on behalf of a child/youth. Despite an increase in volume, the Core Services Program recorded positive outcomes for the fifth straight year.

According to the CY 2017 evaluation report, there were 33,332 service episodes open at any time; representing .02 percent decrease in service episodes from CY 2016. County-designed services represent 31 percent of all episodes statewide. This is unsurprising given that this general category encompasses an array of specific services that are identified by each individual county to meet unique needs in the community. The CY 2017 evaluation report presents the Core Services Program’s performance on various outcome measures that are being tracked by caseworkers in Trails. These outcome measures include short-term service effectiveness, service goal attainment and subsequent child welfare involvements for children with a closed case in CY 2016. The CY 2017 evaluation reported the following findings.

Table 11: Core Services goal attainment

(source: 2017 evaluation report)

Service episodes closed with “successful” or “partially successful” service outcome	80% <sup>1</sup>
Service goal: remain home	89% attained
Service goal: least restrictive setting	75% attained
Service goal: return home	69% attained

Without the Core Services Program, it is estimated that Colorado counties would have spent an additional \$39 million in CY 2017 on OOH placements for children and youth. Over the past five calendar years, an additional \$241 million would have been spent by county agencies statewide if OOH placements had been provided exclusively instead of a combination of Core Services and OOH placements.

The evaluator concluded the Core Services Program is working as designed. The program is serving the population targeted by the legislation and is providing the appropriate levels of support as evidenced by the findings that less than 5 percent of children and youth had a subsequent placement after receiving or benefiting from Core Services. At involvement closure, 99 percent of children and youth who received PA3 services remained home. The key implication is that the Core Services Program is an essential component of the continuum of care in Colorado. Future evaluation efforts will look across the prevention and early intervention service continuum to identify common metrics of outcome, cost and process effectiveness. This effort commenced with the collection of baseline outcomes in the CY 2016 report and continues in the annual Core Services Program evaluations with the analysis of follow-up outcomes for children/youth who received PA3 services in the prior year.

In CY 2017 and CY 2018, CDHS staff provided topic-focused training through statewide “Open-Mic” teleconferences for counties. Topics included the Core Services Program Plan, PA3, Maximizing Medicaid Funding, and Utilizing Trails Data to Enhance Core Services Program Performance, Trails Modernization and the Core Services Program and new child welfare program guidance published through CDHS’ memo series. Ongoing training and technical assistance is provided by CDHS’ Core Services Program Administrator as requested.

**SafeCare® Colorado**

SafeCare® is a nationally recognized, evidence-based, in-home parent education program that provides direct skills training to parents and caregivers in the areas of parenting, home safety and child health. SafeCare® is being implemented in Colorado as a voluntary service for families in an effort to prevent entry or re-entry into the child welfare system. The program is designed for families with children ages 0 to 5 who are at risk of abuse or neglect. The program typically takes 18-20 weekly sessions to complete, and each session lasts one to one and a half hours. SafeCare Colorado is delivered by

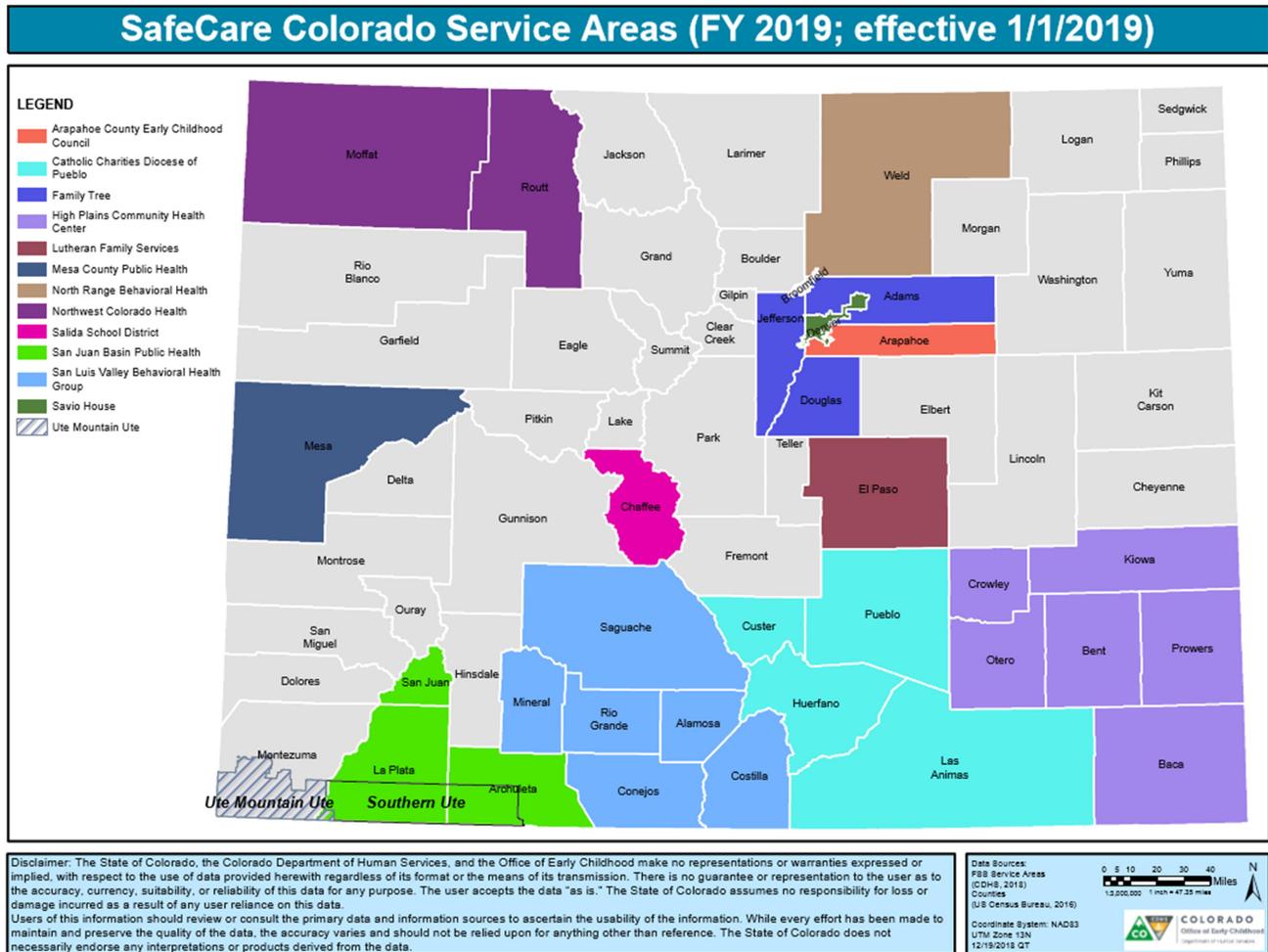
<sup>1</sup> highest rates seen for “remain home” service goal, PA3 services and county-designated service

trained providers in a parent’s home or another convenient location and is offered in both English and Spanish across the state. Families are referred to SafeCare Colorado by child welfare and other organizations such as WIC, TANF, other home visiting programs, schools, churches, other community groups, public health agencies, family resource centers and medical providers. Parents and caregivers can also refer themselves directly to the SafeCare program. Eligible families include:

- Families who have not been referred to the child welfare system;
- Families who were indicated in a screened-out child welfare referral;
- Families who are participating in open, non-court involved child welfare involvements; and
- Families whose child welfare involvements have closed.

The SafeCare program is funded through CDHS’ Office of Early Childhood and is implemented in partnership with The Kempe Center. The FY 2019 appropriation for SafeCare programming is \$5,483,230. Sites are selected through competitive procurement solicitations. Currently, 13 sites are providing SafeCare Colorado programming to residents of 30 Colorado counties and two American Indian Tribes. Figure 1 details the 13 regions and agencies that provide SafeCare® services.

Figure 1: Map of SafeCare® Colorado service areas (July 1, 2018, through June 30, 2019)



The Social Work Research Center in the School of Social Work at Colorado State University is the independent evaluator of the SafeCare Colorado program, measuring the implementation process, program outcomes and costs. From the evaluation period of July 1, 2017 through June 30, 2018, 1,805 total families participated in services, across 13 sites serving 41 counties and two tribes. During this same time period, home safety hazards decreased, knowledge of child health increased, and there was an improvement in the observed quality of parent infant/child interactions for participating families.

Between May and August 2016, three programs funded through the Child Maltreatment Prevention Unit were added to the Division of Community and Family Support Data System through multiple enhancement projects: SafeCare Colorado, Colorado Community Response and Promoting Safe and Stable Families. In addition to a web-based program specific user

interface, the enhancement projects included the development of a mobile application to support providers with the collection of form/assessment data while working with families in the field. Over 225 providers have been trained and are utilizing the new technology. In SFY 2019, ongoing maintenance and enhancements continue to the system, as well as work to finalize interoperability between the new information system, the state CCWIS system and an Effort to Outcomes data system used by the network of family resource centers.

In SFY 2018, the SafeCare Colorado program contributed dedicated funding to the Colorado Child Abuse and Neglect Public Awareness Campaign to promote the SafeCare Colorado program. These funds were focused on Digital Paid Media promotion in March and May 2018. Leaning into the use of behavioral economics to improve program implementation, SafeCare ran two different versions of a call to action on the digital banners during March 2018. In SFY 2019, the program again contributed dedicated funding to the campaign. The three key activities this year include: 1) Capture authentic and culturally relevant photos of Ute Mountain Ute Tribe families that will then be used to update the Ute Mountain Ute Tribe SafeCare Program marketing materials, 2) Drive awareness of the 13 SafeCare sites by creating a content toolkit that is localized for each site, and 3) Digital Paid Media promotion.

In 2016, Colorado was approached to become involved in a small pilot project of the PATSCH program, an integration of components of SafeCare and Parents as Teachers (PAT) in a home-based curriculum of Home Safety and Child Health topics. Two existing PAT sites in Colorado were selected to deliver the PATSCH program as part of an affiliated research study at Georgia State University. Between July and December of 2016, five parent educators at these two sites delivered the PATSCH program to 18 families. Colorado's participants reported significant growth in all areas of the PATSCH curriculum, had a significant decrease in the number of hazards in their home and significant improvement in identifying illness and choosing a course of treatment. They also showed improvement in the number of injuries and doctor visits reported at follow-up. Finally, the Colorado participants showed significant improvement in the use of positive parenting techniques and parental supervision.

Through a partnership between the PAT State Intermediary Office, CDHS, Colorado State University (CSU) and private foundation funding, a second phase of PATSCH was implemented in Colorado during 2017. An additional six PATSCH parent educators were trained and delivered PATSCH services at a total of four sites.

Colorado PATSCH partners are working with the National SafeCare Training and Research Center and Parents as Teachers National Center offices to design the next Colorado PATSCH Pilot, which will include modifications based on recommendations from national and Colorado evaluations. The second pilot was launched in October 2018. Two rounds of PATSCH parent educators and a PATSCH coach have been trained. Data collection for the second pilot will run through March 2020, and CSU will complete the evaluation report by June 2020.

### ***Colorado Community Response***

Colorado Community Response (CCR) is a program that provides community-based services to families who are at risk of child maltreatment through a combination of case management, service linkages and community supports. Program objectives include preventing child neglect using a two generation approach while promoting individual, family and community strengths; increasing economic security; and providing access to needed services. The program targets families who are referred to county child welfare, but are either: (1) screened-out from receiving a response because the referral does not rise to the level of requiring CPS involvement; or (2) screened-in and assessed (under either the high-risk assessment (HRA) track or family assessment response (FAR) track) and have their assessments closed without the provision of CPS services.

The CCR model is intended to be a short-term (12-20 weeks) family support program. Participation in the program is voluntary and family driven. The services are tailored to the individual needs of the family. There are seven components of the program.

- Outreach and family engagement begins within 48 hours of receiving a referral and is consistent over a two-week period. During this time CCR workers are required to make two phone calls, send a letter and attempt a home visit as a mechanism to engage a family.
- Collaborative goal-setting allows families to reflect on their situation, set goals and measure progress toward achieving their goals. Sites utilize the Colorado Family Support Assessment 2.0 to measure growth in family functioning over time.
- Case management, direct services and resource referrals are components of a collaborative process to assess, implement, monitor and evaluate options to meet the identified needs of the family and assist in the attainment of the goals.
- Home visits enable CCR workers to provide services in families' own homes or other locations convenient for the individual family. A minimum of two home visits are required.
- Financial decision-making assistance and coaching are services provided to help families overcome credit problems, pay off debt, prioritize bill payment, avoid financial risk and create sustainable saving plans. Site budgets include a subscription to the Financial Health Institute which provides ongoing training, support and tools to the providers.

- Flexible spending funds address a primary focus of CCR, assisting families with economic stressors. CCR staff utilizes flexible funding and financial coaching to engage families in a meaningful discussion on economic stability. Flexible funding is the payer of last resort and should be used on goods or services that align with CCR's program goals or one of the following outcomes:
  - reduce financial hardship;
  - increase safety;
  - increase education;
  - maintain or secure employment;
  - maintain secure housing; and
  - maintain quality childcare environment.
- Strengthening Families Protective Factors, and social capital, are enhanced by families in the program. This process includes increasing relationships in the community based on reciprocity, trust and cooperation to help families meet their needs.

The program is state-funded in CDHS' OEC. Sites were selected through competitive procurement solicitations, and the chosen sites are primarily collaborations between county departments of human services and local family resource centers. In SFY 2018, CCR served 1,241 families in 24 sites providing services in 36 counties.

The Social Work Research Center in the School of Social Work at Colorado State University and the Kempe Center for the Prevention and Treatment of Child Abuse and Neglect recently completed an independent evaluation of CCR. According to the evaluation, 64 percent of families successfully met their individualized goals and remained engaged with program services, nearly 90 percent of all participants reported the program strengthened relationships within their family, and 86 percent directly attributed improved conditions for their children to the CCR program.

The key findings were:

- Protective factors, known to decrease child maltreatment, increased at a statistically significant level for participating families in the domains of resilience, social support, concrete support, nurturing and attachment, and child development/knowledge of parenting.
- Family functioning increased, from pre-test to post-test on the CFSA 2.0, in all domains when a caregiver had identified a readiness to change and set goals in that domain.
- Significantly more families reported accessing income or benefits<sup>2</sup> at the time of CCR case closure than they had at intake from various public assistance programs, which would be expected to enhance their overall financial stability. Utility assistance and food pantry use saw the largest increases, with a five percent or greater increase in the proportion of families receiving each of these services.
- A majority of caregivers expressed high levels of engagement with their CCR worker as well as satisfaction with the program and the services they received (89 percent of families reported being better off as a result of their participation in the program; 91 percent reported receiving all the help they needed; 98 percent indicated they would call CCR if needing help in the future).
- Rates of subsequent founded assessment were lower for families who completed CCR (5 percent) than for a matched comparison group of families who were not offered CCR (9 percent), with the positive difference approaching statistical significance ( $p=.09$ ).

Colorado Community Response has two C-Stat measures which are analyzed monthly. One measure looks at families showing positive movement between entry and exit scores on the Economic Self Sufficiency scale from the Colorado Family Support Assessment v2.0 (CFSA v2.0). The other measure looks at Families who have an ESS related goal recorded within one month of completing the CCR assessment

Starting in December 2018, CCR began conducting an 18 month randomized control trial (RCT) in partnership with the Governor's Office and the Colorado Evaluation and Action Lab (Colorado Lab). The purpose of the RCT is to determine whether in fact CCR reduces future incidences of child welfare involvement, thereby establishing an evidence base for the program to inform future expansion and funding decisions. The evaluation will also look at the impact of goal setting and positive movement in family economic security.

### ***Maternal, Infant and Early Childhood Home Visiting and Nurse Family Partnership Program***

Colorado's MIECHV program funds voluntary evidence-based home visiting programs in 12 of Colorado's highest risk

<sup>2</sup>Benefit areas reported: health insurance, free/reduced school lunch, SNAP, EITC, food pantry, utility assistance, public housing, Colorado Child Care Assistance Program, rental assistance and emergency assistance.

communities, which include Adams, Alamosa, Clear Creek, Costilla, Crowley, Denver, Gilpin, Mesa, Morgan, Otero, Pueblo and Saguache counties. These communities were selected based on federal guidance that instructs states to identify “at-risk communities” by the following indicators:

- Percent of premature birth;
- Percent of low-birth-weight infants;
- Infant mortality rate;
- Infant death rate due to neglect or abuse,
- Child death rate;
- Percent of women with three risk factors (unmarried, under age 25 and no high school diploma);
- Percent of children in poverty;
- Proportion of individuals living below the federal poverty level;
- Juvenile crime arrest rate;
- Overall crime rate;
- Percent of high-school dropouts;
- Percent of unemployment; and,
- Overall child maltreatment rate.

In making the selection, CDHS also grouped counties by population size (frontier, rural and urban) in order to compare levels of risk in like-sized counties.

Colorado’s MIECHV provides a continuum of home visiting programs with the goal of ensuring that all vulnerable families can find a program that fits their needs and eligibility. Programs include Healthy Steps, Home Instructions for Parents of Preschool Youngsters (HIPPY), Nurse Family Partnership (NFP) and Parents as Teachers (PAT). Altogether, they serve families from the prenatal stage to kindergarten entry. The programs are administered by 16 local implementing agencies, and the following table provides information about the geographic distribution of the programs and their approximate caseloads.

*Table 12: Number of counties where MIECHV programs are available and their approximate caseloads in FFY 2019*

Program	No. of counties	Caseload
Home Instructions for Parents of Preschool Youngsters (HIPPY)	5	374
Nurse Family Partnership (NFP) <sup>3</sup>	2	445
Parents as Teachers	12	866

Colorado was awarded the MIECHV Innovation grant, Working Together, for \$949,664 for the funding period of December 2016 to September 2019. Working Together applies a two-generation focus to support families enrolled in evidence-based home visiting to increase self-sufficiency. The project impacts caregiver access to and completion of the GED, short-term college certificate programs, workforce training and financial literacy education. While caregivers are working toward their goals, their young children simultaneously receive quality care and support services to optimize development. Working Together is an innovative approach, based on theory and research, which streamlines and augments existing programs that support vulnerable families. The goal is to provide wraparound services to 110 families who reside in Alamosa, Saguache and Costilla counties. One hundred and twenty-one families have been served so far, with nearly 60% of families making progress in gaining education or finding or improving their employment. Additionally, nearly 60% have measured increases in financial literacy.

#### ***Colorado Nurse Home Visitor Program***

The Colorado Nurse Home Visitor Program (Nurse Family Partnership or NFP) provides state funding for home visiting service to first-time, low-income parents in all 64 counties in Colorado. NFP is a relationship-based program that partners highly

<sup>3</sup> Unlike the other three programs, NFP is funded on the state fiscal year; therefore, NFP data reflect the period beginning July 1, 2017 and ending June 30, 2018.

trained professional nurses with vulnerable first-time mothers and their babies. The following are the program's goals:

- Support women in their efforts to complete a healthy pregnancy;
- Improve child health and development by assisting parents in providing responsible and competent care for their child; and
- Help families to become more self-sufficient by helping parents develop a vision for their own future, plan future pregnancies, continue their education and find work.

Eligibility requirements include voluntary participation, being a first-time mother, low-income at intake and enrollment in the program no later than 30 days post-partum.

Mothers who enroll in the program receive one-on-one home visits with a nurse home visitor throughout pregnancy and the first two years of the child's life. The program is currently administered by 22 agencies across the state, including public health departments, community health centers, community nursing agencies and hospital systems. In SFY 2019 CDHS' Nurse Home Visitor Program is contracted to serve approximately 3,079 families.

### ***Services for Children Under the Age of Five***

Children ages 0 to 5 years continue to be the population at greatest risk of maltreatment. This population represented 38 percent (3,984 children) of all new child welfare involvement in CY 2018, and 82 percent of children in this population were served in-home. Of the children ages 0 to 5 who were in foster care on the last day of CY 2018, 61 percent had been in care for less than 12 months. The following table represents the length of time in care for this population.

*Table 13: Length of time in foster care for children ages 0 to 5 who were in care on the last day of CY 2018  
(source: ROM, Length of Time in State Involvement by Type of Involvement, 2/24/19)*

<b>Length of time in foster care</b>	<b>CY 2016</b>	<b>CY 2017</b>	<b>CY2018</b>
Total number of children in age group	1,729	1,903	1,781
Less than 6 months	44% Count: 764	42% Count: 810	29% Count: 521
6 - 11 months	25% Count: 440	26% Count: 487	32% Count: 573
12 -23 months	25% Count: 437	25% Count: 475	29% Count: 509
24 - 25 months	5% Count: 79	6% Count: 116	9% Count: 153
36 months or more	1% Count: 9	1% Count: 15	1% Count: 25

Consistent with Colorado's efforts to expand prevention and early intervention services in the state's child and family services continuum, CDHS supports a number of programs that seek to prevent this population from entering the child welfare system. These programs include but are not limited to the following:

- The Family Resource Center Program (FRCP) is dedicated to creating stronger Colorado families by providing support to vulnerable families through statewide family resource centers. FRCP uses training, technical assistance and grants to establish and maintain family resource centers across Colorado. In FFY 2019, 10 family resource centers receive state funding to provide comprehensive case management and parent-driven goal setting. More than twenty additional family resource centers work to make these services available with private funding. These centers are supported by a state model intermediary, the Family Resource Center Association.
- The Incredible Years Parenting Programs focus on strengthening parent-child interactions and attachment, reducing harsh discipline and fostering parents' ability to promote children's social, emotional and language development. The programs are designed to work jointly to promote emotional, social and academic competence and to prevent, reduce and treat behavioral and emotional problems in young children. The Incredible Years Parenting Programs were supported by federal, state, and private funding sources during this reporting period. These programs are supported by a state model intermediary, Invest in Kids.
- The Nurturing Parenting Programs are designed to build nurturing parenting skills as an alternative to abusive and neglecting parenting and child-rearing practices. The long term goals are to prevent recidivism in families receiving social services, lower the rate of multi-parent teenage pregnancies, reduce the rate of juvenile delinquency and alcohol abuse and stop the intergenerational cycle of child abuse by teaching positive parenting behaviors. PSSF will support sites in offering Nurturing Parenting and Nurturing Fathers classes.

- PAT is designed to ensure that young children are healthy, safe and ready to learn. Parent educators aim to increase parent knowledge of early childhood development, provide early detection of developmental delays and health issues, and prevent child abuse and neglect and increase children's school readiness and school success. Parents as Teachers Programs are available statewide with funding from multiple public and private sources. The programs are supported by a state model intermediary, Parent Possible.
- Stewards of Children Child Sexual Abuse Prevention Training is an evidence-informed prevention training that increases knowledge, improves attitudes and promotes prevention behaviors. Training seminars utilize childhood sexual abuse survivors, experts and stories to provide attendees with tools necessary to protect children and prevent child sexual abuse. The Colorado Children's Trust Fund supports offering training across the state.
- Nurturing Healthy Sexual Development is an in-person community training that helps participants better understand the sexual development of children and how to respond to children's sexual behaviors and questions in ways that promote healthy development. The curriculum is designed to increase promotion of sexual health, reduce barriers to parents and providers discussing sexual behaviors, and prevent child sexual abuse through identification of concerning behavior in victims and potential perpetrators. The intended audience includes child care providers, school personnel, health and mental health care professionals and parents of children under age 8. The Colorado Children's Trust Fund supports offering this training across the state and released an online self-directed course for early childhood professionals in April 2019.
- Healthy Steps is a program embedded in the medical system that pairs trained behavioral health or early childhood specialist with parents experiencing multiple stressors. The Healthy Steps specialist provides enhanced well child visits that provide guidance on common challenges such as feeding, behavior, sleep, and adapting to life with a young child. The program also provides additional screening for families and connects them to resources such as mental health services, domestic violence advocacy services, food programs and subsidized housing. State funding supports 6 Healthy Steps sites in 7 counties and provide services to approximately 1,500 families.
- Head Start and Early Head Start programs provide comprehensive developmental services for low-income children from birth to entry into elementary school. The program is child-centered, family-focused, comprehensive and community-based. Head Start services are designed to address developmental goals for children, employment and self-sufficiency goals for adults and support for parents in their work and child-caring roles.

For the children in this age group who interface with Colorado's child welfare system, the services are consistent with the activities outlined in the CFSP and past APSR. These efforts and requirements include:

- SafeCare Colorado, CCR and Nurse Family Partnership target families with children under the age of 5. Eligibility for services varies across the three programs. Refer to the preceding program sections for details.
- The Colorado Family Safety and Risk Assessment tools have been revised, and all caseworkers and supervisors have been utilizing the new tools since January 1, 2017. ARD began reviewing use of the tool in April 2018 the CPS Unit will continue to support county workers and supervisors in reviewing performance data and providing ongoing technical assistance to address barriers and steadily improve performance over the next two years.
- Supervisors approve all safety plans and placements when children are removed from their homes. Supervisors also approve the Family Service Plan and conduct reviews every 90 days thereafter to oversee the child's safety and permanency.
- Volume 7 of the Code of Colorado Regulations requires children under the age of five who are involved in a substantiated report of maltreatment to be referred by the county department to the appropriate state or local agency for developmental screening within 60 days of the incident. Current data shows timely compliance with this requirement 99 percent of the time. Missed referrals are due to missing or inaccurate information.
- CAPTA funds were used to provide technical assistance and outreach to increase the number of developmental screenings for children who are involved in a substantiated report of maltreatment.
- Young children who have been in foster care for 12 months or more may have a Permanency Roundtable.
- In counties that are participating in the trauma-informed interventions as part of child welfare waiver demonstration, specific identified children under age six will be screened for trauma using a specialized protocol, The Checklist: Identifying Children at Risk Ages 0-6.
- New and ongoing training for child welfare caseworkers and foster parents address child development, the impact of maltreatment on child development, attachment and bonding of infants and caregivers.

#### ***Community-Based Child Abuse Prevention Grants (CBCAP)***

In July 2018, 15 communities submitted local child maltreatment prevention plans to CDHS that align with the Colorado Child Maltreatment Prevention Framework for Action. Each community had formed a leadership team including parents, developed a community profile to examine existing data, cataloged available resources and services and solicited new feedback from families through a survey and focus groups. The communities identified and prioritized strategies to meet the needs of families and prevent child maltreatment. The resulting plans were used by local communities to respond to

government and philanthropic funding solicitations to support the implementation of the strategies. In fall 2018, Federal Community Based Child Abuse Prevention (CBCAP) funds were awarded, through a competitive solicitation, to ten communities proposing to implement child maltreatment prevention strategies in their local plans. The identified strategies fall across all levels of the social-ecological model. In 2019, five additional communities received CBCAP funding to work on developing their local child maltreatment prevention plans. Process evaluation on community planning was completed by November 2018. At that point, 93% of these initial sites had secured new resources to start implementing at least one of the prevention strategies in the local plan.

The Biennial Strengthening Colorado Families and Communities Conference was held in September 2018 utilizing CBCAP resources. Over 600 multi-disciplinary professionals from 57 counties attended the child abuse prevention conference representing county human services, community-based organizations, county public health, education, medicine, mental health, and early childhood. 99% percent of the attendees reported they would be able to apply new learning to their practice. In addition, 95% were satisfied with the networking opportunities and the quality of the 60 breakout sessions.

Collaboration with stakeholders is a fundamental part of Colorado's delivery of prevention and early intervention services. The Colorado Children's Trust Fund (CCTF) was created by Colorado statute in 1989 and exists to prevent the abuse and neglect of Colorado's children. The Colorado Children's Trust Fund Board is governed by a nine-person advisory board of directors, appointed by the Governor, with unique backgrounds to support and guide the work supported by the trust fund dollars. Membership includes representation from the Colorado Department of Public Health and Environment (CDPHE), the Colorado Department of Education (CDE), CDHS and a parent representative. It acts as the advisory body for all primary and secondary prevention efforts including the CBCAP investments.

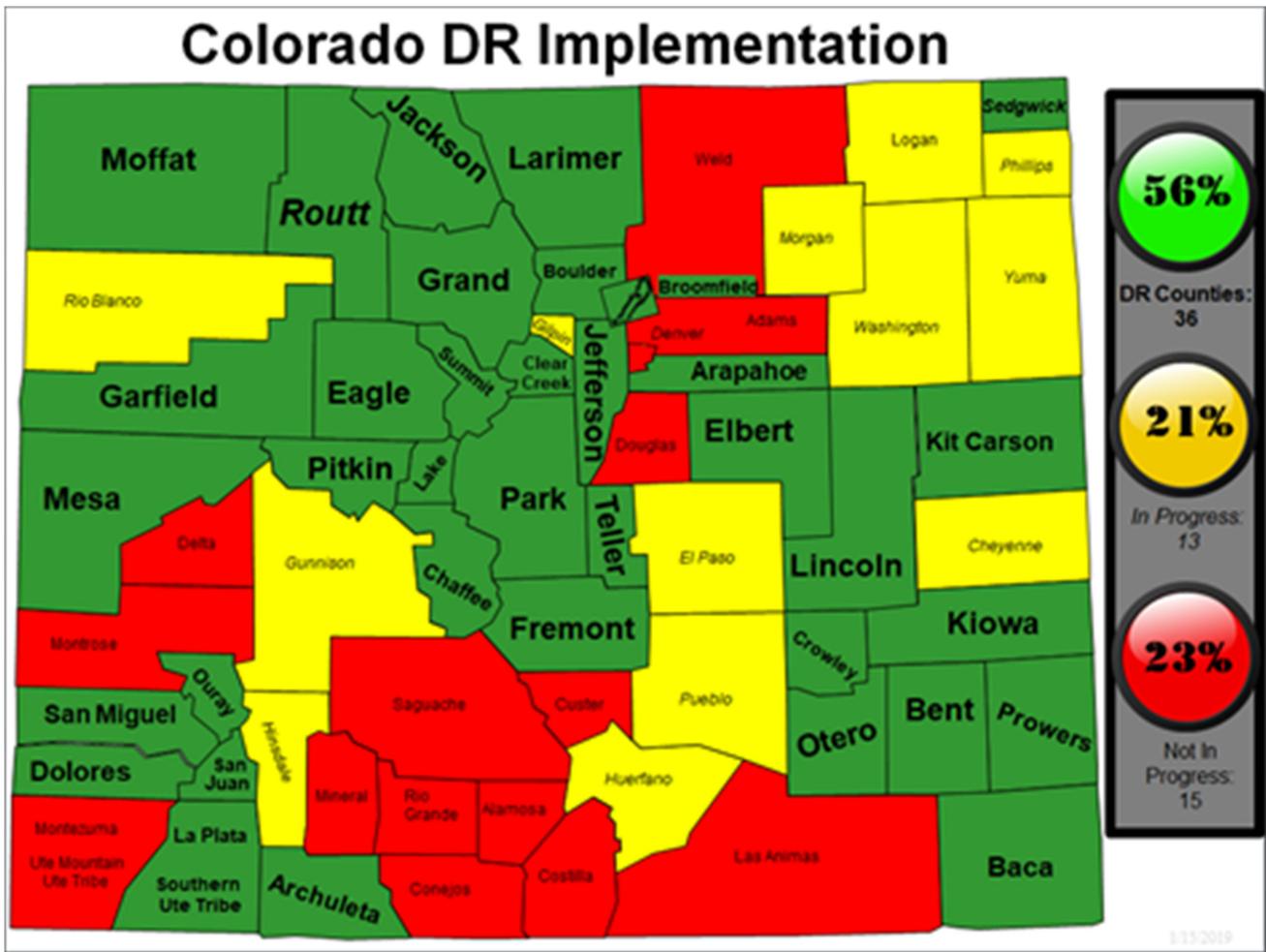
### ***Child Protective Services (CPS)***

Since January 1, 2015, Colorado has required most reports of child maltreatment to be screened through the RED team process. With extensive analysis through CQI process and stakeholder input, new rules governing RED teams went into effect on March 1, 2018. The modifications to rules are expected to better align with county capacity and increased fidelity to the RED team model.

Differential Response (DR) is an innovative system reform that allows child protective services to address screened-in reports of child maltreatment in different ways. Within the DR model, the traditional investigative approach is utilized for high risk reports, and a Family Assessment Response (FAR) may be utilized for low to moderate risk reports. In addition to assessing the incident of maltreatment, FAR evaluates the environmental context and broader issues of family well-being through solution-focused, family-centered practice. The labels of "perpetrator" and "victim" are removed, and a finding, or substantiation, of child maltreatment is not required. Upon completion of specific program implementation requirements and receipt of CDHS' Executive Director's approval, counties may practice DR. In CY 2018, DR counties conducted 12,786 FARs.

As of February 2018, Colorado currently has 37 DR counties, 12 counties that are in progress to become DR counties and 15 counties who have not started DR. The Division of Child Welfare has partnered with The Colorado Child Welfare Training System (CWTS) to offer DR training and coaching to all counties who are practicing or in progress. Colorado also offers an opportunity for county leaders to join Differential Response Leadership Council (DRLC) to work on the process or needed changes to DR as it becomes a statewide practice. Colorado has also started a Differential Response Learning Forum (DRLF). All county staff are invited to join monthly online web based meetings that have been structured to discuss areas of child welfare practice. The agenda items for DRLF were set up a year in advance and determined by County, State and Training Staff.

*Figure 2: Map of CY 2019 DR counties (as of 4/18/19)*



The CFSP included changes to Colorado’s Family Safety and Risk Assessment tools. As of January 1, 2017, all county departments have fully implemented the new Colorado Family Safety and Risk Assessment tools. CDHS staff continues to monitor counties’ use of the tools to ensure fidelity and quality. More information about the tools is detailed in the *Update on Progress Made to Improve Outcomes* sections of this report.

Colorado continues refining the process for assessments of alleged child maltreatment that occurs in a foster home, licensed facility or in a kinship placement while the child/youth is in the custody of the county. The Institutional Assessment Review Team (IART), in partnership with community stakeholders, utilized a CQI process to review statutes, rules, policies, training, guidance, technical assistance and quality assurance activities that are related to institutional assessments. The purpose is to: identify modifications that can improve assessments of abuse and/or neglect in institutional settings; provide feedback and recommendations to providers and governing agencies to reduce maltreatment while children are in OOH placement; and, analyze placement data to help county partners in their placement decision-making processes. CWTS also developed a learning series related to the improvement of institutional abuse assessments and the creation of a tool and process to review county institutional referrals that are not accepted for assessment in partnership with ARD. The review process evaluates compliance with the Code of Colorado Regulations and the Colorado Children’s Code, as well as the identification of areas in need of improvement. The 2018 legislative session passed a bill to expand the jurisdiction of counties to assess allegation of maltreatment for youth 18-20 who are placed in OOH care and who remain in the custody of the county.

CDHS reviewed and revised the policies and practices to ensure compliance with recent federal legislation, namely the Comprehensive Addiction and Recovery Act (CARA), Preventing Sex Trafficking and Strengthening Families Act and Justice for Victims Act. In July 2016 the CARA Act, Public Law 114-198, was signed into law to address the country’s opioid epidemic. The legislation authorizes grant programs which would expand prevention and education efforts while also promoting treatment and recovery. Substance use has a significant impact on Colorado’s child welfare system; parental substance abuse was indicated as a removal reason in approximately 44 percent of all new removals in CY18.

CDHS believes the current statute and policies are adequate to ensure full compliance with CARA. CDHS staff, partnering with multidisciplinary community partners, and led by the Colorado Attorney General have established a steering committee for all substance-exposed newborns which has six individual task groups reporting to it. One of those task groups is developing a community response for plans of safe care for substance-exposed newborns. The work of this

multidisciplinary team is to ensure health care providers, early care professionals, law enforcement and treatment providers are identifying consistent protocols for responding and intervening at critical points to ensure caregivers and children receive support and treatment for their substance use disorders. This task group has created a standard plan of safe care for Colorado. This plan has been endorsed by The National Social Workers Association-Colorado, CDHS, and the Colorado Nurses Association. This plan will be distributed to 17 Colorado birthing hospitals which represent about 48% of live births a year in Colorado. This plan will also be adapted to be used by child welfare case workers and will be shared with primary care physicians, treatment providers, and other community providers.

A number of modifications are being made to the SACWIS system. Questions CDHS asked to be added to be asked during the initial referral to gather the following information:

- The number of infants identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder;
- The number of such infants for whom a plan of safe care was developed; and
- The number of such infants for whom a referral was made for appropriate services, including services for the affected family or caregiver.

The promulgation of the Preventing Sex Trafficking and Strengthening Families Act, Public Law 113-183, and the Justice for Victims of Trafficking Act, Public Law 114-22, necessitated changes to Colorado's policies and practices in response to juvenile sex trafficking.

During the 2016 legislative session, Colorado passed House Bill 16-1224, which requires a statewide, uniform screening tool for children and youth who may be at risk for sex trafficking and extends the definition of child abuse and neglect to include minor sex trafficking. In addition, HB 16-1224 delineates both the child welfare and law enforcement responses to juvenile sex trafficking. In order to be in compliance with the new requirements, in 2016, CDHS formed the Human Trafficking Task Group (HTTG) to develop rules, training, Trails enhancements and guidance related to the new requirements:

1. The Code of Colorado Regulations was revised to include rules related to children and youth who are at-risk, or are victims, of sex trafficking. The rules include requirements for county departments to use a screening tool to identify children and youth who may be at risk for sex trafficking and report suspected child sex trafficking to local law enforcement agencies.
2. CDHS and county departments implemented a high-risk sex trafficking screening tool. Since January 1, 2017, all counties are required to use the tool. We are currently monitoring counties on their compliance with this requirement.
3. Training is available to the staff of county child welfare agencies, foster parents and community partners. Trainings available through the CWTS include:
  - a. Recognizing and Identifying Human Trafficking: a web-based introduction to human trafficking available to all caseworkers, supervisors, foster parents and other members of the community interested in learning more about human trafficking (updated in October 2018)
  - b. Screening for Sex Trafficking: a web-based training available to all county staff that providing guidance on identifying and screening in children and youth who are at-risk of or are victims of sex trafficking
  - c. Child Welfare Response to Child and Youth Sex Trafficking: a classroom training that provides intermediate-level guidance to caseworkers, supervisors and foster parents
4. As of January 1, 2018, OIT, in collaboration with CDHS, completed Trails enhancements to ensure caseworkers can meet documentation requirements related to sex trafficking.
5. In January 2017, CDHS issued an operational memorandum that provided guidance to county departments on how to respond to sex trafficking incidents.

The Human Trafficking Specialist successfully collaborated with the Colorado Human Trafficking Council (CHTC) to apply for and be awarded the Improving Outcomes for Child and Youth Victims of Human Trafficking: A Jurisdiction Wide Approach grant through the Department of Justice. These funds are being utilized to better support training on trafficking, enhance collaboration with law enforcement, develop a statewide service array and pilot regional "navigators" to help communities centralize response to youth trafficking. The grant is funded for three years with a total amount of \$1.4 million.

### ***Foster Care Services***

Colorado's child welfare practice prioritizes serving children and youth in their own homes whenever it is safe and appropriate to do so; however, the state strives to provide high-quality foster care placements for those cases that require OOH care. Placement resources include traditional foster care homes, receiving homes, non-certified kinship homes, specialized group homes, group center facilities, treatment foster care homes and residential child care facilities (RCCF). The number of foster care homes remains stable throughout Colorado. Efforts are underway to increase the number of foster homes across the state in order to increase the number of children/youth served, as well as increase the skill set of

foster parents to serve more children/youth that could be diverted from congregate care (RCCF, group home or group center).

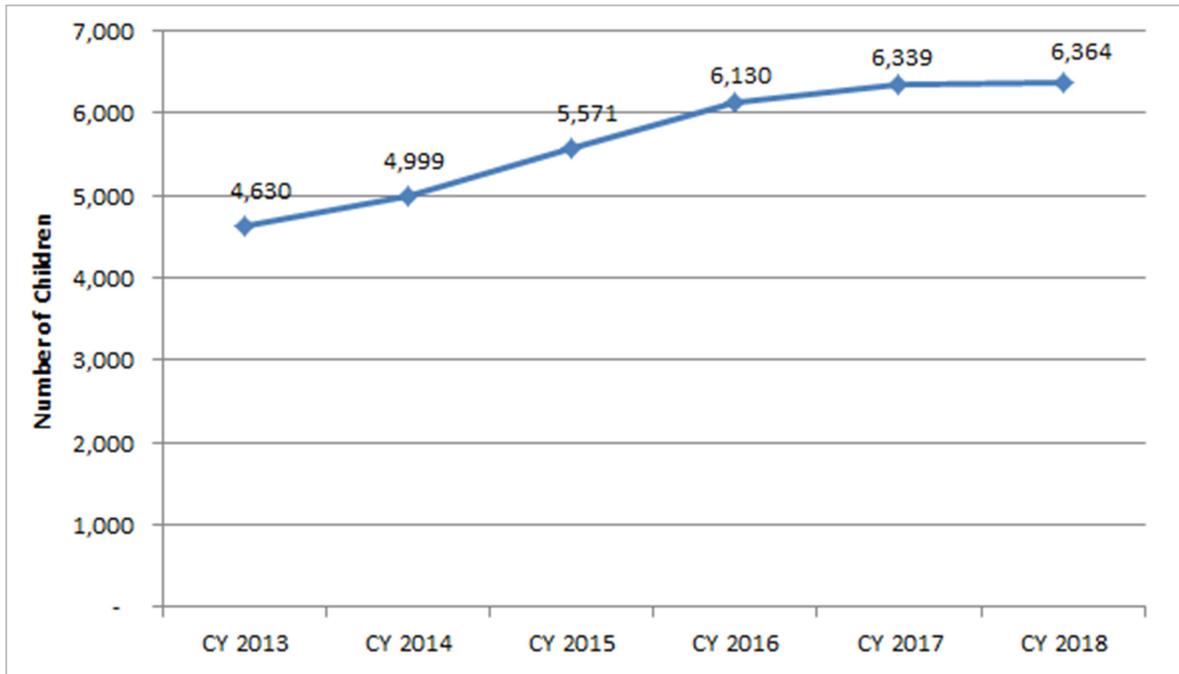
During CY 2017, CDHS made concerted efforts to increase focus and implement steps to support foster parents. The Child Welfare Executive Leadership Council (CWELC) requested that CDHS develop a foster parent steering committee to give guidance around barriers and challenges for foster parents as it relates to providing care and navigating systems. The steering committee began meeting in October 2017 and is composed of foster parents, county and state staff, networking group representatives and the Colorado State Foster Parent Association (CSFPA). Three time-limited subcommittees were formed: best practices for foster care; the institutional abuse assessment process; and, alternatives to respite/consistent application of the reasonable and prudent parent standard.

An internal workgroup including stakeholders from the medical community and HCPF have begun researching components needed for a medical foster care program. A group of foster parents with medically involved children/youth have provided information about accessing services, gaps in services, supports and challenges. The group has continued to meet during SFY 2019.

Rule changes made by the Office of Early Childhood allow foster parents to apply for Colorado Child Care Assistance Program (CCCAP) as part of a county option through the protective services category provided they meet income eligibility (foster care reimbursement is excluded). County departments also have the option to fund child care through their child welfare child care allocation. Increasing the use of kinship/extended family placements continues to be an area of emphasis since the implementation of the child welfare waiver demonstration. In SFY 2017, CDHS renewed its contract (with an option of annual renewal for five years) with Thomson Reuters for use of their web-based CLEAR investigation software, which assists balance-of-state counties to complete exhaustive searches for family search and engagement and background checks prior to placing with family or extended family.

As reported in the *Update on Progress made to Improve Outcomes* section, 29 counties are implementing kinship supports through Colorado’s child welfare waiver demonstration project. Kinship supports include an assessment of needs that are necessary to sustain kinship placements and the provision of an array of services that may include respite care, child care, basic needs, transportation, access to recreational activities and therapeutic and educational needs not covered by insurance or the educational system. The net result of all of these efforts can be attributable to the increase in kinship placements. The figure below illustrates the growth in kinship placements since CY 2013.

Figure 3: Number of children and youth placed in certified and non-certified kinship homes (KFSTR) from CY 2013 through CY 2018  
(Source: Trails/CYFF, 3/29/19)



Another effort to promote consistency in kinship care practice across the state is the development of a quality assurance case review process specific to non-certified kinship care placements. The kinship care review process examines county department practices related to the completion of background checks, the application process to provide care, home inspection procedures, kinship care evaluations, certification and/or support services and IV-E Waiver supports. Associated

timeframes are also reviewed to ensure that all appropriate activities are completed within required timeframes. County departments' non-certified kinship care cases are eligible for review every three years. The review process was developed collaboratively with county departments. County staffs were invited to provide input on draft protocols and a series of stakeholder teleconferences regarding the review process were held. The final version was approved by CDHS in November 2016. Sixteen kinship reviews were completed in CY 2017. Counties that did not pass were given immediate training and technical assistance, and improvements have been made statewide. A total of 29 kinship reviews were completed in CY 2017-2018. An additional 12 reviews were scheduled, but those county departments did not have kinship placements within the sample period. In CY 2019, there are 22 reviews scheduled. These reviews are showing improvement in timeliness of required background checks, with an overall statewide compliance rate of 86% through the end of CY 2018.

Colorado continues efforts to reduce congregate care usage throughout the state. Updates regarding CFSP interventions related to congregate care are included in the *Update on Progress Made to Improve Outcomes* section of this report. CDHS has collaborated with counties through the CW Sub-PAC to agree to a 6.1 percent threshold, meaning no more than 6.1 percent of the average daily population of children and youth with open child welfare involvements will be served in congregate care settings. By the end of CY 2018, 16 percent of the out of home placement population was served in congregate care settings down from 18 percent.

A CDHS Congregate Care Workgroup focused on children under age 12 in RCCF care as the target population to research. CDHS is contracted with an individual to conduct a data review of 130 children who were in RCCF from January 1 to June 30, 2017. The intent was to identify practices or interventions that reduce a child's need for an RCCF level of care. Of 99 children under the age of 12 in RCCF, 76% were exposed to domestic violence and/or sexual abuse. The number of out-of-home placements for these children ranged from 1-22. Through the life of these cases, there were 2,202 referrals (inclusive of all family members). Of these, 1,355 were screened out. 426 or 19% of the referrals specific to these children was related to abuse and/or neglect. Four counties that made progress in reducing the use of congregate care shared some of the steps taken that have been helpful. These counties shared their strategies in IM-CW-2019-0016, *Strategies and Alternatives Implemented to Reduce Use of Congregate Care*. Following completion of the data analysis, the workgroup developed recommendations for strategies and collaborate with county departments of human/social services to implement protocols. One hundred children under the age of 12 were identified as unduplicated. Those still in care in November 2017 (numbering 30) were prioritized for analysis. The remaining 70 have also been analyzed, and further targeted analysis by the contractor was completed on June 30, 2018. Factors being assessed include:

- Intellectual/Developmental Disabilities (IDD), and who is on the Children's Habilitation Residential Program (CHRP) waiver;
- Reasons for initial level of care and ongoing concerns;
- Delinquencies;
- Custody status;
- Discharge planning (including step down plan at the time of admission) and treatment planning;
- Permanency goal;
- Length of stay;
- Trends observed by county;
- Progress assessment;
- Levers driving sustained placement in congregate care;
- What has been tried and what needs to be tried to get them out of congregate care; and
- Breakdown of all short term (<90 days) and long-term (90 days).

CDHS worked with stakeholders through the Permanency Task Group to identify barriers to reducing congregate care placements. Based on the discussion, the group identified several needs including but not limited to the following:

- Diligent recruitment strategies for recruiting foster homes that are willing to take children between ages 12-17;
- Improved collaboration between judicial partners to better identify alternatives to congregate care; and
- Training for caseworkers regarding placement decision-making and alternatives to congregate care.

In order to meet these needs, CDHS is: encouraging county departments to diversify their contracts with Core Services Program providers and utilize their Core Services Program funding to provide supports to maintain children safely in their own homes; tracking statewide and county specific congregate care usage data during monthly C-Stat meetings and assigning subject matter experts (SMEs) to counties with high congregate care usage; working with county departments to engage stakeholders (i.e. GALs, pre-trial coordinators and probation officers) to establish philosophical alignment on congregate usage; and providing targeted training and collaboration with counties to identify barriers and solutions to improve performance. All counties submit an annual diligent recruitment plan for review and approval by CDHS.

CDHS and its partners are engaged in efforts to increase the well-being of children and youth in foster care. Colorado's performance on measures associated with the federal well-being outcomes highlights areas needing improvements, and the *CFSR Statewide Assessment* documents Colorado's efforts specific to the individual outcomes. For Colorado youth and young adults with current or prior child welfare involvement, the overall goal is to improve upon the following fundamental outcomes:

- Permanent connections
- Safe and stable housing
- Health and wellness
- Education
- Career development.

*HB18-1319 - Concerning the Extension of Services for a Successful Adulthood for Former Foster Care Youth who are between the ages of eighteen and twenty-one years*

To further guide the process of improving outcomes for former foster care youth, HB 1319 was passed in 2018 legislative session and was signed by the Governor in May of 2018. The legislation provided clarification for the use of CORE service funding for youth who are 18 to 21 and section 26-5-114, required that CDHS create the Former Foster Care Youth Steering Committee (FFCYSC), and publish a report with recommendations by January 2020. According to the legislation the steering committee would create a report of consensus driven recommendations that would address the following elements:

- Develop an implementation plan that allows former foster care youth to receive services for a successful adulthood.
- Provide assistance in returning to placement as well as alternatives to returning to a placement after reaching 18.
- Develop recommendations relating to the operation, evaluation, and sustainability of the implementation plan.
- The report with its recommendations will be provided to the Executive Director of CDHS, Governor, the Joint Budget Committee, the Senate Health and Human Services Committee, the House Public Health and Environment Committee, and any other successor committees.

The steering committee convened on October 4, 2018 with 32 members from the other state departments, county department of human/social services, runaway and homeless youth providers, local youth serving nonprofits, legal representatives, and members of certified placement agencies (CPA). The steering committee held 10 meetings along with three different youth panels to obtain youth voice centering on the barriers that they encountered while in the foster care system as well as providing feedback on the direction of the recommendations created by the committee. Two of the youth panels were located in the Denver metro area and the other one was hosted by the Pueblo County Department of Human Services pulling youth from the neighboring counties of El Paso and Fremont. The last meeting ended on March 15, 2019 with a report that contained recommendations centering on two major areas, Foundations of Successful Adulthood and Pillars of Practice. Within the Foundations of Successful Adulthood specific recommendations were identified under the umbrella of the following goal statements:

- All foster youth will have permanent connections.
- All foster youth will have safe and stable housing.
- All foster youth will earn a high school credential.
- All current and former foster youth will have access to the post-secondary education and training they need to succeed in their chosen career path.

For the Pillars of Practice specific recommendations were brainstormed to address the following goal statements:

- All foster youth will create individualized, developmentally appropriate case plans inspired by their own hopes and dreams.
- All current and former foster youth will experience normal adolescence, including the opportunity to succeed and make mistakes.
- The John H. Chafee Foster Care Program for Successful Transition to Adulthood will provide effective services to eligible youth statewide.

The FFCYSC approved the report using a consensus based model of agreement. With the finalization of the report, specific work plans are being created to implement the recommendations that were approved. Work plans will rely on continued statewide collaboration throughout implementation. According to the legislation the recommendations are not required to become operational unless adequate state and federal funding is available.

Two additional efforts include Colorado's Pathways to Success (Pathways) and a pilot of two well-being assessment tools in

several counties.

Pathways is a collaborative effort focused on improving well-being outcomes for youth in foster care. The Pathways project has developed a system of care that support youth in developing skills and supports for long-term success in five “pathways”: housing, health/well-being, education, job skills and permanency. The initiative is composed of two interconnected efforts focused on aligning services and systems for transition-age youth and young adults in order to improve outcomes and decrease experiences of homelessness, crime and human trafficking.

The first effort is the development of a model intervention for youth with child welfare involvement who are at risk of homelessness. The model intervention within Colorado’s Pathways program is comprised of one key component, a person delivering intensive case management (Pathways Navigator) while utilizing the “Engaging Youth in a Coach Like Way” model of engagement. Additionally, the Pathways Navigator uses an array of tools to create and implement a plan that is driven by the youth’s voice, and supported by their community. These additional tools may include:

- Permanency strategies using the Permanency Roundtables Practice Model;
- Enhanced independent living skills planning, which builds skills and supports needed to ensure the youth always has a safe and stable place to live regardless of how they exit foster care; and
- Individualized services array which may include mentoring, transitional living/housing, sexual and relationship health training and other supports tailored to each youth’s needs and strengths.

Three community collaborations representing urban, suburban and rural areas of the state are implementing the model. They are the Denver Collaborative, Boulder Collaborative and the Rural Collaborative—the latter covering Weld and Morgan counties. Each collaborative consists of a county department of human/social services and a federally funded runaway and homeless youth provider.

The target populations served were adjusted in FFY 2017, in order to provide the most appropriate services possible for each population.

- Target population 1: youth age 14-17 who are new to out-of-home placement;
- Target population 2a: youth age 17-21 who are in out-of-home placement;
- Target population 2b: youth age 17-21 who are no longer in out-of-home placement and not homeless; and
- Target population 3: youth under age 21 who were formerly in out-of-home placement and are not homeless.

As part of the process, youth currently go through two screening processes: 1) a brief, initial screening with a county caseworker, and 2) a follow-up questionnaire with Pathways staff to gather more in-depth data. Usability testing has been completed on the screening tools, and the project is continuing to use the screens initially developed.

In FFY 2018, CDHS enrolled approximately 50 new youth in Pathways. All youth who meet the eligibility requirements and are screened into the program, receive support through a navigator. The navigator works with each youth to develop and implement an individualized plan that will cover each of the five “pathways.”

The navigators have received specialized coaching training through the CWTS, “Engaging Youth in a Coach-Like Way.” This training is intended to help navigators better understand youth’s needs. Testing has shown that training and the model of youth engagement are the key components of the Pathways intervention. Maintaining fidelity to the engagement model is included in the formative evaluation plan. Between July 1, 2016, and March 28, 2019 188 young people were screened for Pathways and 114 have received services through a Pathways system navigator and 33 have graduated from the intervention.

The second effort is focused on aligning systems and services, and reducing barriers in order to improve outcomes for all youth in foster care. These efforts have resulted in strong multi-system partnerships. Key successes and partnering agencies include the following:

- Maintenance of the “Milestones of Foster Care” resource map of key opportunities, resources and eligibility for youth ages 9 to 26 (Rocky Mountain Children’s Law Center);
- Development of the “Confirmation of Foster Care Dependency” form to streamline proof of foster care involvement for the purposes of financial aid (Educational Opportunities Workgroup);
- Modifications to the Family Unification Program (FUP) youth housing voucher process to speed housing resources to youth who are at risk of, or experiencing, homelessness. (Mile High United Way, Division of Housing); and
- Development of a Human Trafficking 101 training for caseworkers, an advanced “Child Welfare Response to Sex Trafficking” training, and a web-based training on using the Colorado Sex Trafficking Screening Tool (CWTS).

Additionally, several Colorado counties are piloting new well-being assessment tools to better individualize services for children and families with open child welfare involvement. With funding provided through Colorado’s IV-E waiver demonstration project, eight counties used one of two different tools to identify what interventions are necessary for a child or youth’s treatment: the Treatment Outcome Package (TOP) tool and the Child & Adolescent Needs & Strengths

(CANS) tool. Both tools provide a holistic look at a child/youth's well-being for the purpose of improved case-planning.

Participating counties are exploring the uses of the tools and their efficacy in individualized service planning. Both tools have been associated with positive outcomes. A propensity score matched trial administered in the one county using the CANS found that use of the tool led to decreases in multi-disciplinary staffing, as well as decreased lengths of stay for services and OOH placements. Colorado continues to maintain the goal of integrating the level of need tools into Trails while giving the counties discretion on which tools they utilize in their practice. Timelines for this goal will need to be tailored in coordination with Colorado's Trails modernization project, and in alignment with Family First Prevention Services Act requirements.

### ***Permanency Services***

The *CFSR Statewide Assessment* highlights CDHS and its partners' efforts to sustain or improve performance on the federal permanency outcomes. To complement those efforts, CDHS created a time-limited Permanency Specialist position within CDHS to consult with county departments and other partners on permanency issues, including the permanency-related IV-E waiver demonstration project interventions.

Research was conducted by CDHS in 2014 to identify distinct factors affecting the permanency of children and youth within specific age groups. Data regarding legally free children/youth was gathered from the state automated child welfare system (Trails) from January 2008 through August 2014 to identify predictive variables. The study identified distinct factors impacting permanency specific to age groups, ethnicity, gender, permanency goal and length of stay. Using the predictive factors, an algorithm was created to calculate the risk of emancipation. CDHS has developed a formalized process to identify and intervene in the cases of children and youth who are at highest risk of emancipating without legal permanency. Every quarter, the list of at-risk children and youth is refreshed. Children and youth who have achieved permanency are removed from the list, and new at-risk children and youth are added. The list is provided to a team within CDHS. The group meets monthly to

- Review the list of identified children and youth
- Identify child welfare practice trends, themes or systemic barriers,
- Select cases for targeted interventions,
- Determine what supports are needed and,
- Identify if a need of service for child specific recruitment.

The Permanency Specialist works with county partners and OCYF recruitment and retention staff on ten selected cases. The ten cases remain highlighted until permanency is achieved and other child/youth are selected for further support. Every quarter, CDHS Executive Management Team reviews and provides feedback on CDHS' progress with the cases selected for intensive supports. In addition, CDHS contracted with IMPAQ International to examine potential changes to the predictive analytics algorithm. These efforts lead CHDS to expand the list to identify children/youth who not only exhibit a high risk score but also an elevated risk score. The adaption allowed for CDHS staff to identify children/youth at risk of emancipation earlier in the life of the case. Since the inception of this process, 177 children/youth have been identified, 24 children/youth have received direct case support and seven youth have achieved permanency. CDHS anticipates that this process will help increase children and youth quicker exits to permanency.

Colorado's Relative Guardianship Assistance Program (RGAP) is available to assist children/youth in achieving legal permanency when reunification and adoption are not appropriate permanency goals. RGAP provides financial assistance and case services to relatives and certain non-relatives who have assumed legal guardianship or allocation of parental responsibility of children/youth whom they previously served as relative and non-relative foster parents. Case services are purchased program services that meet the needs of the child/youth in the assistance agreement for services that are not covered by the RGAP financial assistance or Medicaid (i.e., specialized therapies, respite care).

RGAP has continued to grow steadily. Currently 26 counties have guardianship assistance agreements through RGAP for one or more children/youth. In the current year (July 2018 - March 2019), 178 children/youth are served in RGAP. The RGAP Administrator provides training and technical support to county departments of human/social services onsite and through teleconferences.

### ***Post-Permanency Services***

In SFY 2018, CDHS awarded a contract to the Adoption Exchange through an RFP to provide post-permanency services using Adoption Savings and Adoption/RGAP incentives funding. In 2018, these services began in the rural areas of the state which included 24 counties. In 2019, 55 counties will be included in the post-permanency services and support program. By the year 2020, all Colorado counties will be served. The purpose is to improve equity in service array, preserve stable permanency for families who were served in child welfare and achieved permanency through guardianship, reunification (parents or relatives) and adoption.

The services being phased in include:

- Trauma-informed/evidence-informed Trust Based Relational Intervention (TBRI) training for families and

professionals;

- In-home coaching to assist TBRI-trained families in successfully implementing the parenting model;
- Implementation and connection groups on a regional basis to provide ongoing support, learning opportunities and natural points of connection for families;
- Access to a pool of TBRI-trained families and/or individuals to provide respite care as needed for program participating families;
- Online directory of mental health professionals available to offer crisis intervention and ongoing therapeutic services for families;
- Resource navigation and referral for post-permanency families; and,
- Specialized in-person and web-based training for families and professionals.

Following training in TBRI, in-home coaching and consultation is available for participants. Respite services are being developed in the specific regions, with initial focus on the Northeast. Navigation services and web-based training are available to all families.

### ***Promoting Safe and Stable Families***

CDHS' Office of Early Childhood oversees Colorado's Promoting Safe and Stable Families (PSSF) program. The overarching objectives for Colorado's program include:

- 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;
- Reunite children with their parents or provide other permanent living arrangements through adoption or kin; and
- Support preservation efforts for families in crisis who have children at risk for maltreatment or re-abuse.

These objectives are addressed through the provision of services in four service categories of family support, family preservation, time-limited family reunification and adoption promotion and support. CDHS expends approximately 20 percent of PSSF funding in each of the four service categories.

In Colorado, these services are administered by county departments of human/social services and eligible American Indian Tribes through awarded grants. Sites develop local PSSF program plans that delineate the goals and objectives to be achieved, services to be provided and an annual operating budget. Additionally, sites should participate in existing or develop community committees that facilitate collaboration within the communities, enhance PSSF service delivery and decrease duplication of services.

Prior to receiving PSSF services in any service area, families' needs are identified through an intake process that includes family input on services they feel would be beneficial. The family sets goals they would like to work on with the service provider, and the relationship is one that fosters family engagement and buy-in. Many sites provide family engagement meetings during the service provision period. PSSF sites work closely with community service providers to help provide resources for the family. Families are provided individualized services based on the family's identified needs. There are 23 sites that provide PSSF services to 36 counties and both of Colorado's federally recognized tribes.

PSSF is currently funding the following seven priorities:

1. Intensive Case Management
2. Family Team Decision Making
3. The Incredible Years Parenting Program
4. Nurturing Fathers and Nurturing Parenting Programs
5. Respite Care
6. Post-Adoption Permanency Supports
7. Colorado Community Response Program

PSSF sites were also able to select a "county design" option to provide services. However, if the site selected another evidence based model through the county design option, the outcomes are required to have high relevance to child abuse prevention and child welfare programs and must address the needs of the target population.

Beginning in FFY 2018, PSSF is strengthening the services provided to support adoption through scanning existing services, reviewing recommendations drafted by the state's Adoption Steering Committee and gathered during the "permanency listening tours" conducted by OCYF, and evaluating the effectiveness of interventions provided. PSSF sites providing post-adoption support services will help guide the strategies selected to improve the long-term outcomes of adoptive families.

Contracts were extended by method of contract amendment for the time period October 1, 2017 through September 30, 2018, with three additional one year extensions. CDHS anticipates PSSF services in FFY 2019 will be available throughout the state with a similar number of sites and in communities like those currently being served.

Figure 4: Map of FFY 2019 PSSF sites

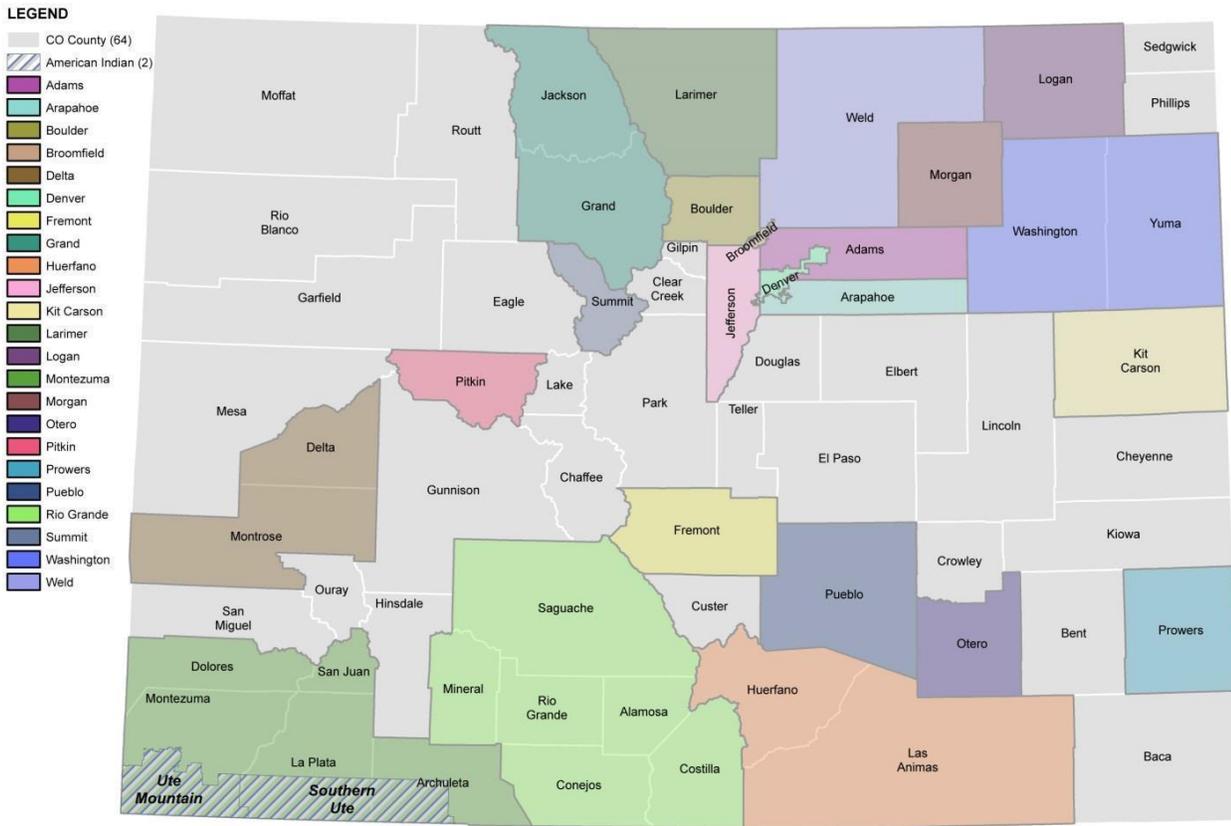


Table 14: FFY 2018 Individuals served by Colorado’s PSSF program

(source: PSSF database, 2019)

<i>PSSF Service Area</i>	<i>Number Served - FFY 2017</i>	<i>Number Served - FFY 2018</i>
<i>Family Preservation</i>	2,942	599
<i>Family Support</i>	4,558	1,553
<i>Time-limited Reunification</i>	1,182	526
<i>Adoption Promotion and Support</i>	792	416

Colorado’s numbers served in PSSF have decreased significantly in the last year. The decrease is due to the changes in practice resulting in increases in evidence based practice/programming and less one time actions/supports with families. Services include a deeper commitment of time with families and an extended engagement period resulting in a greater impact to affecting PSSF goals.

Colorado has limited its “one-time” direct services and instead provides needed concrete supports to individuals already participating in a PSSF evidence based or priority program. The PSSF program has limited the focus of concrete supports to aid those working through PSSF services to obtain a family driven goal.

In the past fiscal year the program realizes that there are current activities that are supportive to the PSSF services that are not currently being captured as part of the array of activities being provided in the local sites or at the State level.

Events that involve larger numbers of attendees, such as an adoptions support event where individual family level data may not be gathered but yet still important in providing a clear picture of community support, social connections, and educational/training opportunities will be captured in a new module in the database in the next fiscal year.

PSSF is unable to report complete numbers about preventative services for children separately, as the database did not separate parents and children. We are currently building reports that will enable our ability to report this measure.

CDHS provides training to PSSF sites through multiple venues including sites visits, webinars and informational sessions held at annual conferences. In FFY 2019 training topics include:

- Implementation science;
- Incredible Years parent group facilitators;
- High Fidelity Wraparound facilitator training and coaching;
- Intensive Case Management training and monitoring;
- Nurturing Parents facilitator training;
- Nurturing Fathers facilitator training;
- Adoption support services training;
- Colorado Family Support Assessment Tool;
- Motivational interviewing;
- Children's safety;
- Financial empowerment;
- Legal support and training for post-permanency and adoptive families;
- Family engagement; and
- Strengthening Families Protective Factors.

Training needs continue to be identified and addressed through site visits from the Program Manager and through site reports. PSSF will continue to provide technical assistance to county departments and other subcontractor agencies. The PSSF Program Manager collaborates closely with state and county child welfare staff to keep PSSF efforts aligned with priorities identified in the CFSP.

#### ***Collaboration with Colorado Judicial Branch***

##### *Prevalence of Substance Use Disorder in Colorado Child Welfare and Juvenile Courts*

According to a 2015 statewide survey of Colorado juvenile court, family treatment drug court, and child welfare professionals, 83% of dependency and neglect cases involve parental substance abuse as an identified issue. A review of data from the Colorado Judicial Department case management system shows that more than 60% of Expedited Permanency Planning cases and more than 30% of non-expedited cases allege substance use in the petition. CDHS data shows that the rate of substance-related removals for SFY 16 and the first half of SFY 17 is 30.3%. This excludes Division of Youth Services children.

##### *DANSR Approach to System Reform*

In October 2014, Colorado became one of five states to receive an Office of Juvenile Justice and Delinquency Prevention Statewide System Reform Program (SSRP) award. The statewide system reform program's purpose is to integrate effective family drug court practices into the larger dependency and neglect court system. Now known as Colorado's Dependency and Neglect System Reform Program (DANSR), this federal initiative has a three-year planning phase and a potential three-year implementation phase.

The DANSR program is based on the extensive research findings that show Family Treatment Drug Court (FTDC) programs yield more positive outcomes for families than traditional court processes. The hypothesis is based on key elements that show promise for improving outcomes in non-FTDC cases. The DANSR approach and principles incorporate several of those key elements that have been proven to generate better outcomes in dependency and neglect cases involving substance use disorders.

FTDC research shows:

- Parents are more likely to attend and complete drug and alcohol treatment;
- 90% of children stay with their families;
- 91% percent of children are reunited with their families; and,
- 98% of children were not maltreated within six months of case closure.

An Implementation Guide assists cross-systems collaboration and reform efforts at the state and local levels by outlining an approach and principles for improving the handling of dependency and neglect cases with substance use or co-occurring mental health disorders. The guide provides expectations and direction, while also allowing for flexibility and choice to implementing sites. There is an understanding that it may take time to implement all six principles and that all six may not initially be implemented at the same time.

This guide was developed and piloted, in part, by DANSR teams in Fremont County; Huerfano County; Jefferson County; Montezuma County; Prowers, Cheyenne, Kiowa and Baca Counties; Denver County; Arapahoe County; and Boulder County.

The National Center for State Courts (NCSC) was contracted to review the planning phase of the DANSR process and provide feedback on implementation and next steps (October 2014 - September 2017). Denver Health was contracted to conduct a qualitative study to examine parent/caregiver and professional thoughts and input regarding the dependency and neglect system. NCSC, Denver Health, pilot site, and other stakeholder feedback helped inform the current version of this guide and will help inform the implementation phase of the program (October 2017 - September 2018). The implementation phase of the program could extend to September 2020 based on availability of federal funding and Colorado's performance in SSRP. The guide and appendix will continue to be revised as needed throughout the implementation phase. During implementation, the goal is for all judicial districts and stakeholders to receive training based on the content contained in the guide.

## IV. PROGRAM SUPPORT

Programs that serve the Colorado's children, youth and families are supported by an extensive and robust system composed of:

- Comprehensive training;
- Outreach and technical assistance; and
- Research and evaluation.

CDHS provides training to county departments of human/social services, interagency partners, Colorado's federally recognized tribes and community stakeholders primarily through the Child Welfare Training System (CWTS). Time-limited and initiative specific technical assistance is offered in collaboration by the DCW Training Unit and program staff. Research and evaluation activities are conducted by CDHS staff as well as independent third party evaluators with whom CDHS contracts through competitive procurement processes. This section provides updates on all three of these program supports.

The *Systemic Factors - Staff and Provider Training* section in the CFSR Statewide Assessment focuses primarily on information and data on:

- Compliance with training certification for initial and ongoing child welfare staff and foster parents;
- Evaluation of quality of training; and,
- CWTS' continuous quality improvement efforts.

The following CWTS section focuses on its management structure, training methodologies and curriculum. An updated Training Plan is included in Appendix F.

### ***Child Welfare Training System (CWTS)***

CWTS provides training to over 7,000 child welfare professionals, service providers and foster families each year, in four geographical regions. Standardized training includes:

- Pre-Service Training for new caseworkers and new supervisors;
- Transfer of Learning (TOL) activities that new learners complete for new worker and supervisor certification;
- An online Learning Management System (LMS);
- Practice and organizational coaching services;
- Web-based training;
- Non-traditional learning opportunities;
- An expanded selection of in-service trainings; and
- Semi-automated recertification system.

In addition, four regional training centers (RTC) are located in Garfield County, Larimer County, and Denver County. CWTS is currently seeking a new location for the fourth RTC. Training is provided at the RTCs, in specific counties and at other locations throughout Colorado as needed.

Finally, CWTS is engaged in continuous quality improvement (CQI) activities to ensure that all curricula is up-to-date, courses meet the statutory and rule alignment and the needs of learners, training and coaching is provided at all four RTCs, and new training platforms, such as learning collaborative, coaching and web-based trainings, are being utilized to expand professional development opportunities. Training and certification requirements, training needs and curriculum development are vetted through the Training Steering Committee (TSC), composed of representatives of CDHS, county departments, county commissioners, foster parents, the judicial system, youth, and other partners.

All new county child welfare caseworkers and supervisors are required to attend pre-service training for their respective roles. New county caseworkers attend the Fundamentals of Colorado Child Welfare Casework Practice, which takes approximately seven weeks to complete with an additional one to four weeks needed to complete the TOL experiences. The Fundamentals training series incorporates web-based training components and a practice simulation experience that allows new county caseworkers to demonstrate their newly developed competence, while being supported by a facilitator and assessed by their leader in a controlled environment. New county caseworkers have the opportunity to obtain a trainee certification, which allows the new county caseworker to carry up to five assessments and/or cases as a primary worker. In order to obtain this certification, the new county caseworker must have completed the Fundamentals courses, the Casework Simulation course and Legal Preparation course—with only the TOL activities remaining for their full certification. This certification is valid for up to one year. In order to request a Trainee Certification, the county must submit a

supervision plan for the new county caseworker. This plan should outline who is supervising the new county caseworker and how long the worker will be on the Trainee Certification. This certification allows counties to help relieve caseload burdens on regular, certified county caseworkers while also helping new caseworkers transition to the county.

New county supervisors attend the New Supervisor Training Academy series. Using case-based scenarios, the academy was recently modernized with a keen focus on the unique and influential role of Colorado's county casework practice supervisors. Stakeholder feedback has been incorporated into an enhanced version of the academy now being delivered. A supervisor is fully certified after completion of the pre-service training and successful completion of TOL activities.

Caseworkers and Supervisors must complete 40 hours of in-service training annually. At a minimum, 16 of the required 40 in-service training hours need to align with the caseworker's or supervisor's primary job responsibilities.

CWTS offers more than 140 courses in its in-service library and actively offers approximately 60 of those at any given time. These courses are offered at the RTCs and are often delivered within county and community locations to best serve local learning needs. Additional training needs are identified by CDHS' DCW, the Training Steering Committee and regional training advisory committees. New trainings often align with goals, objectives and interventions outlined in the CFSP. CWTS continues to work on improving the foster parent training program, including foster parent core and in-service courses available for foster, kin and adoptive families. The foster parent core was fully revised in 2018. While covering all topics required by federal and state laws and rules, the curriculum also incorporated aspects required by FFPSA, as well as topics on trauma, grief and loss, LGBTQI/SOGIE topics, and partnership with child welfare workers.

CWTS will continue driving competency-based learning programs for Colorado's children, youth and family serving professionals by launching an Individualized Learning Needs Assessment (ILNA) framework to support the ongoing professional development of workers and supervisors. The purpose of the ILNA is for supervisors and workers to assess their competency and develop a training plan that builds on their strengths and addresses areas needing improvement. This framework was built on a foundation of various competencies related to caseworkers, supervisors and foster parents. ILNA will be used by learners and leaders to assess individual worker competence and subsequently address learning needs through participative interaction with CWTS. The ILNA for caseworkers was piloted in 2018 and CWTS will be expanding the use of the ILNA in 2019, while also developing an ILNA for supervisors. Technical Assistance and Oversight

CDHS program staff frequently provides technical assistance to county departments and other stakeholders through one-on-one site visits, telephone consultations, stakeholder meetings, collaborative workgroups and webinars. Technical assistance is often topic-specific and aligns with specific programs or initiatives. Other forms of technical assistance target counties that are underperforming on important measures. The *Colorado Statewide Assessment* describes training and technical assistance efforts related to the federal safety, well-being and permanency outcomes. Program- and initiative- specific examples of training and technical assistance are included in relevant sections throughout this report. For instance, the *Update on Service Description* section (page 25) describes the training and technical assistance CDHS provides to counties as they implement the required sex trafficking screening tool. In FFY 2019, CDHS will continue to offer county departments and other stakeholders training and technical assistance to strengthen implementation of initiatives and to improve outcomes for individuals and families served by Colorado's child welfare system.

### ***Technical Assistance***

CDHS requests system level training and technical assistance as needed to implement the goals, objectives and interventions of the CFSP. Currently, technical assistance is being provided by the Capacity Building Center for States and Casey Family Programs.

In addition to their support in developing strategies to improve educational outcomes for children and youth in foster care, Casey Family Programs assists in coordinating conferences that are convened to foster consistent, effective statewide practice of the child welfare waiver demonstration interventions.

### ***Research and Evaluation***

Information about child and family services related research, evaluation, information systems and quality assurance systems are covered in relevant program and initiative sections throughout this report. Noteworthy examples include:

- CDHS' kinship care quality assurance review process is described in the *Update on Service Description* (page 27).
- Research related to children and youth who are at risk of emancipation and CDHS' predictive analytics algorithm is described in the Permanency Services section of the *Update on Service Description* (page 30).
- Improved interoperability between Trails and Colorado's Medicaid claims information system is described in the Updates to Targeted Plans in the CFSP section (page 60).
- Updates to Trails as part of the Trails Modernization Project are included in the *Systemic Factors - Statewide Information System* section of the CFSR Statewide Assessment.
- Findings from evaluations of SafeCare® Colorado, the Core Services Program and the child welfare waiver demonstration are included in their respective sections.

## V. CONSULTATION AND COORDINATION BETWEEN CDHS AND TRIBES

CDHS continues to consult, collaborate and coordinate with both federally-recognized tribes within the state, as well as with Colorado-based organizations that serve the state's American Indian urban communities. There are two federally-recognized tribes with land bases in Colorado. The Southern Ute Indian Tribe (SUIT) is located primarily in La Plata County and includes approximately 1,510 enrolled members, according to data from the Colorado Commission of Indian Affairs (CCIA). The Ute Mountain Ute Tribe (UMUT) is located primarily in Montezuma County with another community in White Mesa, Utah and includes approximately 2,143 enrolled members. The 2010 Census Bureau reports that 56,010 people who identify as solely American Indian/Alaska Native live in Colorado. Of this population, 46,395 live in urban areas, largely concentrated in the Denver metro area and Colorado Springs. The 2010 Census Bureau also shows there are 104,464 people in Colorado who identify as American Indian/Alaska Native in combination with one or more races. These population numbers are up 35.3 percent since the 2000 Census, and Census estimates anticipate an upward trend to continue.

In addition to the two federally recognized tribes, CDHS partners with organizations such as the CCIA, Denver Indian Family Resource Center (DIFRC) and Denver Indian Health and Family Services (DIHFS) to address ongoing and emerging human services concerns for the state's American Indian urban populations. In order to facilitate communication and collaboration, CDHS employs a Tribal Liaison, an Indian Child Welfare Specialist, and a Behavioral Health Tribal Liaison who are responsible for nurturing and strengthening the department's relationship with the tribes and organizations that serve the state's American Indian urban communities.

In 2012, CDHS entered into the State of Colorado's formal Tribal Consultation Agreement to ensure consistent communication and partnership with the two federally-recognized tribes and DIHFS. In December 2018, CDHS signed a renewed State-Tribal Consultation Agreement. CDHS and the Tribes continue their commitment to meeting annually to hold formal tribal consultations. In September 2018, CDHS' leadership team and tribal liaisons visited with both tribes to address action items from the 2017 CDHS Tribal Consultation and to discuss new issues. Representatives from Montezuma County and La Plata County also participated in the consultation.

The September 2018 consultation with the Ute Mountain Ute Tribe (UMUT) generated the following action items related to child welfare:

- CDHS will work with UMUT to streamline child abuse and neglect background checks;
- Have a meeting to address changes to child welfare as result of Families First Prevention Services Act (FFPSA);
- CDHS will continue to provide TA for UMUT to administer the child welfare contract;
- CDHS will hold a meeting with UMUT leadership and staff about all CDHS funding currently available to UMUT;
- CDHS will provide CDHS-Tribal relationship orientation for new Tribal Council Members. UMUT will also provide CDHS leadership with orientation about UMUT.

The consultation with the Southern Ute Indian Tribe (SUIT) generated the following action items related to child welfare:

- Have meeting to address changes to child welfare as result of Families First Prevention Services Act (FFPSA)
- CDHS will continue to provide TA for SUIT to administer the child welfare contract;
- CDHS will hold a meeting with SUIT leadership and staff about all CDHS funding currently available to SUIT;
- CDHS will provide CDHS-Tribal relationship orientation for new Tribal Council Members. SUIT will also provide new CDHS leadership with orientation about SUIT.

Since the consultation, CDHS has worked with each of the tribes to address the issues raised by the tribal representatives. A large part of the 2018 CDHS-Tribal Consultation focused on improving the processes through which CDHS and the tribes communicate and coordinate. A large part of the consultation with UMUT also focused on increased collaboration with Montezuma County. Both Tribes also requested orientations about the CDHS-Tribal relationship and current projects for their new Tribal Council members as well as an orientation about tribal issues for CDHS leadership. CDHS sets aside funding from various sources for each Tribe, and CDHS leadership offered to host meetings with each tribe separately to talk about how state and federal funding could help support existing tribal programs or initiatives. The three CDHS tribal liaisons met with each tribe - including Tribal Council members, tribal department leadership and staff - in October 2018. Both Tribes reflected that better understanding how the dollars can be used, what the reporting requirements are, and how the dollars can support existing tribal initiatives was immensely helpful. CDHS will plan on holding similar forums in the future if requested by tribal representatives. Another avenue for increased coordination is the CCIA Health and Wellness Committee, which was established in 2018. The Committee has representatives from CDHS, other state agencies, both Ute Tribes, and organizations serving American Indian/Alaska Native people in urban areas.

During the 2016 CDHS-Tribal Consultation, CDHS staff and tribal representatives highlighted opportunities for more coordination and collaboration specifically in the areas of early childhood family support programs and training for staff of the tribes' departments of human/social services. CDHS' Office of Early Childhood (OEC) compiled information identifying each of the programs or resources/technical assistance available to the tribes (through CDHS directly or through contractors) and the points of contact at CDHS, giving tribal representatives an overview of CDHS so that they can pursue

opportunities in accordance with the goals of their respective tribe. Examples include SafeCare® Colorado and PSSF.

In the past, SafeCare Colorado was available to both tribes through Montezuma County Public Health Department, which has operated as a SafeCare site since January 2014. While tribes may still access this program, UMUT now houses their own tribal home visitor to serve UMUT families who are in need of services. SFY 2017-2018 was the first year the tribe has had a home visitor on staff, and Southern Ute will be able to utilize this service in the future once capacity has grown. The UMUT SafeCare Coordinator recommended having culturally relevant parenting classes available to families on the UMUT reservation because parenting classes would nicely complement the SafeCare program. CDHS and UMUT leadership agreed to decreasing the SafeCare contract and adding a contract with UMUT for Promoting Safe and Stable Families, which would provide adequate funding for the current SafeCare coordinator to also administer parenting classes while continuing the SafeCare program.

All training through CWTS is open to staff of the Tribes' departments of human/social services. Additionally, CDHS reimburses all travel expenses to support tribal staff's access to these trainings. CDHS continues to work with the tribes to reduce barriers to receiving further training from CWTS. CDHS created a one-pager to help guide tribal staff on how to enroll in courses and seek reimbursement.

The tribes are primarily focused on maximizing funding through the \$950,000 child welfare contract. In the past, the Colorado General Assembly directed the Department to hold \$950,000 each year to reimburse tribes for OOH placements for children; however, the majority of this was not utilized due to limitations placed on the funding. In order to improve utilization of funds, CDHS worked to allow the tribes more flexibility in spending the \$950,000 appropriation. During the 2016 legislative session, CDHS and Governor Hickenlooper advocated for passage of a budget proposal, which the Colorado General Assembly later approved, that allows the tribes to use the holdout for the provision of all CDHS approved child welfare services for American Indian children. Changes to the eligibility requirements will now allow tribes the flexibility to utilize the funds not only for OOH placements, but also for any in-home services aligned with those approved by any county department. This flexibility supports the tribal human/social service agencies with maintaining children in their home while allowing for the provision of child welfare services. SUIT and UMUT both have separate contracts with CDHS in order to access this funding. The CDHS Tribal Liaison and CDHS Indian Child Welfare Specialist continue to field questions the staff of both tribes about allowable expenditures. Both tribes are billing CDHS for prevention and intervention services related to child welfare.

In addition to the \$950,000 in funding, each tribe is allocated \$25,000 annually to provide Core Services in their communities. CDHS and the tribes have continued discussions related to Core Services Program implementation, specifically the various ways in which Core Services Program funding may be used. Both tribes are evaluating which services would be most useful for their community and will contact CDHS to move forward with implementation.

With the passage of the Family First Prevention Services Act (FFPSA), tribes will also be able to draw down IV-E funding for prevention services. Currently neither UMUT nor SUIT have and IV-E plans or IV-E agreements with CDHS. CDHS and both Tribes have expressed interest in holding a consultation about the impact of the FFPSA. The main group in Colorado focused on child welfare overall including the FFPSA is the Delivery of Child Welfare Services Task Group. UMUT requested that a UMUT representative be a voting member of this Task Group, and so CDHS appointed the UMUT Social Services Director to serve in that role. Between a separate consultation about implementing FFPSA and the representation on the Task Group, CDHS hopes to fully consider the impacts on FFPSA on tribal nations.

In addition, the 2018 CDHS-Tribal Consultation identified a continued need for behavioral health services, specifically for people struggling with substance abuse and for youth. In the spring of 2017, CDHS' Office of Behavioral Health applied for the Substance Abuse and Mental Health Services Administration (SAMHSA) State Targeted Response to the Opiate Crisis and was awarded a two year grant; out of this grant, UMUT used \$60,000 for a needs assessment. The second year of the grant allocated \$125,000 for UMUT and \$152,330 for SUIT. Additionally, CDHS was also granted a State Opioid Response (SOR) grant through SAMHSA, in which UMUT received \$52,083 and SUIT received \$63,471 through April 2019 and \$125,000 for UMUT and \$152,330 for SUIT for the next federal fiscal year to help fund long term planning initiatives and services. These grants aim to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment and recovery activities for opioid use disorder (OUD) including prescription opioids as well as illicit drugs such as heroin. The CDHS Behavioral Health Tribal Liaison is working with both Tribes on allowable ways to invest those dollars. Outside of the annual formal consultation meetings, CDHS staff routinely meets with tribal representatives to work through program and/or initiative specific issues.

CDHS worked with staff from county departments of human services, a child place agency and employees of organizations that serve the American Indian community in the Denver metro area to develop shared messaging to support the recruitment of American Indian foster families. The goal for the shared messaging project was to develop a message bank that is culturally sensitive and respectful of the historical and current experiences of the American Indian community and which state, counties, child placement agencies and community partners can utilize as they develop strategies and tactics to recruit American Indian foster parents. The shared messaging also helps to lay the groundwork for future communications recruitment strategies and tactics.

Community outreach is an integral part of Colorado's recruitment strategy, and given the need for American Indian foster families, CDHS and its partners hosted a foster care information table at the Denver March Pow Wow in March 2019. Over

the course of three days, CDHS, county and CPA staff shared information about Colorado’s recruitment needs and the process for becoming a foster parent. The Denver March Pow Wow attracts attendees from several neighboring states and Canada. Given this reach, CDHS shared the booth space with representatives from the Cheyenne & Arapaho Tribes from Oklahoma as well. CDHS considers it a success to raise awareness at a significant community event, develop partnerships with Tribal representatives and to build upon our presence at the Denver March Pow Wow.

Lastly, CDHS staff continued to work with the tribes to ensure they have access to supports and services through the Chafee Foster Care Program for Successful Transition to Adulthood (the Chafee program). Youth from both tribes are able to access supports and services through La Plata County’s Chafee program. SUIT reports the Chafee Program as adequately serving their members.

**Compliance with the Indian Child Welfare Act (ICWA)**

CDHS monitors compliance with ICWA as part of its case review quality assurance system. The ARD conducts case reviews using a review instrument that includes ten questions regarding American Indian heritage, court findings and tribal notification of the child’s placement and court proceedings. In August 2016 the Colorado Judicial Branch began collecting data related to ICWA. Data points include “active effort” findings, documentation of inquiry of Native American heritage and if notification was sent to all required parties. The judicial Dependency and Neglect Data Integrity Workgroup implemented this measurement plan to be able to assess the courts’ compliance with ICWA and better focus the branch’s tribal engagement efforts. Information collected through ARD’s case reviews, however, continues to be the primary source of data that CDHS uses to assess statewide ICWA performance. As indicated in the following table, compliance with ICWA is an area requiring improvement for Colorado.

Table 15: FFY 2015 through FFY 2018 ICWA compliance

(source: ARD, 2/15/2019)

Measure	CFSP Goal	FFY 2015 Performance	FFY 2016 Performance	FFY 2017 Performance	FFY2018 Performance
Preserving Connections: Were the ICWA requirements met?	95%	29.7%	22.9%	19.6%	20.7%

To address ICWA compliance and improve outreach to the tribes, in 2018 CDHS hired an Indian Child Welfare Specialist as a full-time member of the Division of Child Welfare. This role will be crucial to improving relationships with the tribes and increasing ICWA compliance statewide.

Three areas of improvement are listed in the CFSP:

- Court orders determining that ICWA does NOT apply;
- Documentation of caseworker inquiry of American Indian heritage; and,
- Notification of the child’s proceedings sent to the child’s identified Tribe(s) and to the Bureau of Indian Affairs.

CDHS and the Colorado Judicial Branch continue to collaborate and address areas for improvement. CDHS participates in the ICWA Subcommittee of Colorado’s Court Improvement Program (CIP). The subcommittee is charged with:

- Establishing best practices for courts to implement in order to comply with the Indian Child Welfare Act and §19-1-126, C.R.S., based upon the recently revised Bureau of Indian Affairs guidelines; and
- Coordinating ICWA training for judicial officers and other stakeholders in collaboration with CDHS.

Rule related to ICWA in the Code of Colorado Regulations was revised to align with the new federal regulations.

CDHS solicited and obtained feedback regarding the proposed rule from the following organizations and collaborative committees: DIFRC, Denver Indian Center (DIC), Permanency Task Group and CIP ICWA Subcommittee. Staff also hosted two statewide, community stakeholder teleconferences for the same purpose. In January 2017 CDHS met with the UMUT and SUIT to discuss the new federal regulations, implementation guidelines and the proposed revisions to Colorado’s rule. Tribal feedback on the proposed rule revisions included expanding the definition of child eligibility to include whether the child “may be” eligible for membership or citizenship, requesting to use the federal definition of “tribal court,” and requesting that the expectations of case coordination during a transfer of jurisdiction be clarified. All stakeholders’ feedback was considered, and the final version of the proposed rule was revised and presented to the SBHS. The revised rule was effective July 1, 2017.

To support county departments’ implementation of the new rule, CDHS staff provided presentations and training on the new ICWA federal regulations to county staff including adoption supervisors, foster care supervisors, Interstate Compact on the Placement of Children (ICPC) coordinators and recruitment and retention staff. Through feedback from participants, six major categories were identified as areas of opportunity including communication/relationships, training (discussed above), documentation, foster families/placement, services and logistics/practice. CDHS is currently working on several of the

recommendations. A time-limited ICWA workgroup has also been convened through the CW Sub-PAC during the calendar year 2018 and provided the following recommendations: create an ICWA section in the Trails database; hold quarterly meetings for caseworkers and tribes to discuss ICWA; integrate ICWA training in the Caseworker Fundamentals training; make ICWA training mandatory; provide cultural administration of assessments and to include ICWA training for foster parents. Additionally, the workgroup developed a Declaration of Non-Indian Heritage, Family Ancestry Chart and Notification of Tribes forms.

On the judicial side, opening briefs in dependency and neglect proceedings are now required to include a statement of compliance with ICWA, with citations as to where compliance is demonstrated in the record. The new requirement went into effect July 1, 2016, and was based on the recommendations of a subcommittee of the Colorado Judicial Branch's Appellate Rules Committee. Per the revised rule, statements of compliance must contain:

- each date when the court made an inquiry to determine whether the child is or could be an American Indian child and a statement of any identified tribe(s) or potential tribe(s);
- copies of ICWA notices and other communications intended to provide such notice that were sent to the child's parents, the child's American Indian custodian(s), the BIA or the child's tribe(s) or potential tribe(s);
- the postal return receipts for the ICWA notices;
- responses from the parents or custodians, the BIA and the child's tribe(s) or potential tribe(s);
- additional notices that were sent to the non-responding tribe(s) or the BIA; and
- date of any rulings as to whether the child is an American Indian child.

The judicial branch's Rules of Juvenile Procedure Committee that was assessing whether changes to court rules are required to comply with the new federal ICWA regulations is no longer meeting. This committee was combined with the Court of Appeals workgroup, which has begun work as of May 2018 to review, correct, update and improve the Colorado Rules of Juvenile Procedure. An update on their work will be included in the 2020 APSR.

The new federal regulations and related revisions in the Code of Colorado Regulations may necessitate changes to ARD's case review instrument questions related to ICWA.

The second need identified by the CIP ICWA Subcommittee is the need for updated ICWA agreements. While there is not an existing agreement with the UMUT, there is an ICWA agreement with the SUIT that was executed in 1981. In March 2017, CDHS staff met with SUIT representatives and reviewed a crosswalk of the existing agreement, the new federal and state ICWA regulations and identified gaps that needed to be addressed. CDHS and the SUIT are making efforts to revise the agreement. CDHS and the SUIT are making efforts to revise the agreement. At the time of the 2018 CDHS/Tribe consultation, formal ICWA agreements were not a priority. Since then, meetings continued with new Tribal Social Services Tribes and both the UMUT and SUIT would like discussions on updating and creating an ICWA agreement with CDHS.

Additionally, CDHS and Navajo Nation are in the process of formulating guidelines to assist Colorado caseworkers and Navajo Nation case workers when working with an ICWA case involving both agencies.

CDHS and UMUT representatives also agreed that there's a need for an ICWA agreement; however, UMUT representatives expressed concerns about protocols for serving children who are not eligible for UMUT enrollment but who live within the UMUT's jurisdiction. CDHS staff and UMUT representatives continued to work through these issues in FFY 2017 and updated ICWA agreements remain in discussion as of May 2018. The new UMUT Social Services director has since then expressed the desire to create an ICWA agreement with CDHS and UMUT.

CDHS and the Colorado Judicial Branch continue to make progress in addressing ICWA requirements. A best practice manual and associated bench cards are being developed. The manual will provide best practices for caseload management of ICWA cases, and the bench cards will guide judicial officers through specific inquiries and relevant guidelines to follow at court hearings throughout the life of a case. CIP anticipates drafts of the bench cards will be completed by August 2018, and CDHS discussed the possibility of a limited pilot before full implementation in all judicial districts.

Another potential source of ICWA best practices for Colorado will be Denver County Juvenile Court's ICWA Court, which commenced in January 2017. It is the third such court in the United States and was carefully planned and implemented with the input of multiple stakeholders including the tribes. Prior to the launch of the ICWA Court, Denver County Juvenile Court and Casey Family Programs collaborated to deliver an ICWA Court Training in October 2016 for judicial staff, judicial officers, attorneys, caseworkers, GALs and CASAs. The purpose of new ICWA Court is to streamline the ICWA process by establishing clear policies and procedures governing ICWA cases. Denver Juvenile Court anticipates the new court will clear confusion that attorneys, judges and judicial officers may have regarding ICWA cases. Adams County also began an ICWA court in September 2017.

CDHS and its partners provide formal and informal ICWA related training and guidance. The CWTS offers full day training on ICWA as well as another course specifically related to the changes in federal and state regulations. The target audience for these trainings includes judicial and legal partners. Separately, the DIFRC facilitated several trainings in 2017. These trainings addressed:

- the continuing impact of historic events and intergenerational trauma on Indian children, parents and families;
- a legal overview of ICWA focusing on jurisdiction, notice, active efforts to reunify families, standards of proof, expert witness requirements and invalidation of actions for ICWA violations; and
- best practices for achieving permanency and better outcomes for American Indian/Alaska Native children, including tools and resources that aid in ICWA compliance.

During 2018, CWTS engaged the ICWA Task Group to begin revisions of the ICWA training. The revised training will be available in 2019.

Informally, CDHS' ICWA and Kinship Care Program Administrator has been available to provide onsite, webinar and/or teleconference training and technical assistance to individual counties or regions. Support continues to be available through the new Indian Child Welfare Specialist and the ICWA and Kinship Care Program Administrator.

The CIP ICWA Subcommittee is also coordinating a multidisciplinary ICWA training specifically for judicial officers and legal counsel. CDHS and the CIP have been emphasizing the need for improved ICWA compliance; other stakeholders such as OCR, ORPC and county attorneys have provided ICWA trainings to their constituencies. OCR conducted two ICWA trainings for GALs during this reporting period. ORPC also delivered two trainings for their attorneys, and the fall 2016 County Attorney Conference included an ICWA training session. The court of appeals is reviewing processes and practices to improve timeliness and compliance with Federal laws. ICWA, adoption and other issues related to child welfare will be included in the reviews and analysis.

OCR conducted two ICWA trainings for GALs during this reporting period. ORPC also delivered two trainings for their attorneys, and the fall 2016 County Attorney Conference included an ICWA training session. The court of appeals is reviewing processes and practices to improve timeliness and compliance with Federal laws. ICWA, adoption and other issues related to child welfare will be included in the reviews and analysis.

## VI. MONTHLY CASEWORKER VISIT (MCV) FORMULA GRANTS

Caseworker visits are central to the provision of child welfare services as they provide an opportunity for child welfare staff to spend time with the children and families served by the agency, build and maintain relationships, and assess the safety and well-being of the children. The ACF requires that children in foster care be visited at least once every month and at least 50 percent of the visits must occur in the child's residence. For FFY 2015 and each federal fiscal year thereafter, states are required to meet or exceed the goal of 95 percent for monthly caseworker visits.

In FFY 2019, Colorado met the federal goal: 95 percent of monthly caseworker visits were completed, and 85 percent of those visits occurred in the child's residence. CDHS ensures Colorado meets the MCV performance standards by intensive monitoring efforts. CDHS partnered with the Governor's Office of Information Technology to develop a monthly report related to MCVs. Staff monitors the report every month. Any county that falls below the goal is contacted by CDHS staff to discuss reasons for noncompliance and any supports the county needs to improve performance.

### *Colorado's Use of the Monthly Caseworker Visit Grant*

In addition to the ongoing evaluation of MCV data, CDHS distributes MCV funds to organizations for the purchase of goods, services, programs and technologies that support efforts to ensure children and youth in OOH care are visited monthly. In FFY 2019, a memo was sent to eligible organizations to inform them of grant funding opportunities through MCV in order to increase the frequency and quality of caseworker visits with children and youth in OOH. In response, funding was provided for conference scholarships to the annual Family Engagement Conference and the Sex Offender Management Board Conference. There was a decrease in the number of county applications received and approved for funding from FY 2018. In FFY 2019, CDHS distributed a total of \$222,265 to counties and affiliated agencies through a competitive procurement process. CDHS had \$219,341 in MCV funds available; the remaining \$2,809 was funded through CAPTA. The following table highlights several organizations that received MCV Grant funds.

Table 16: FFY 2019 Distribution of MCV Grant funds

(source: CDHS staff, 2019)

County/Agency	Award	MCV Funds Expenditures
<i>County agencies served: Pueblo</i>	\$13,383	Staff recruitment and retention, technology, training
CSU/Summitstone	\$11,100	Applied Research in Child Welfare (ARCH)
Maple Star CO	\$81,448	Secondary trauma services; supervisor training on secondary trauma
Regents of the University of Colorado	\$39,193	Secondary trauma services; resilience and secondary trauma prevention training
<i>County agencies served: Adams, Broomfield, Jefferson, Boulder, Denver, El Paso, Lincoln, Logan, Phillips, Montrose, Prowers, Rio Grande, Teller, Gilpin, Morgan</i>	\$5,051	Sex Offender Management Board Conference Scholarships
Thomson Reuters <i>County agencies served: Alamosa, Park, Fremont, Phillips, Clear Creek, Elbert, Bent, Archuleta, Chaffee, Yuma</i>	\$72,091	CLEAR Software

CDHS used MCV funds to expand access to specific tools and services throughout the state. In October 2018, CDHS renewed its agreement with Thomson Reuters to provide access to a web-based investigation software called CLEAR to caseworkers

in Colorado's balance-of-state counties. The service is expected to increase family finding and diligent search capacity of caseworkers in small- and medium-sized counties. Previously, child welfare staff in small- and medium-sized counties had limited access to such technology. In FY 2019, there was high demand from county agencies to expand secondary trauma services across the state. CDHS increased availability of these services through MCV funding, which directly impacted staff retention and staff efficacy in providing services to children and youth in OOH care. CDHS also contracted with two providers to expand access to secondary trauma services and consultations to all counties. This included providing training to child welfare supervisors on implementing trauma-informed practice and providing these supports to their staff.

MCV funds also continue to be utilized for Applied Research in Child Welfare (ARCH). ARCH's ten-year collaboration between Colorado State University's Social Work Research Center, CDHS, and Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Jefferson, Larimer, Mesa and Pueblo counties continues to support applied research on child welfare interventions in Colorado. MCV funds have previously been utilized to carry out longitudinal analyses utilizing data from Chapin Hall, which MCV also funds. For example, ARCH is currently concluding a study on recruitment and retention of Colorado's county caseworkers. In addition, ARCH is studying what risk factors may impact a higher likelihood of youth re-entering foster care after permanency has been achieved. Results are not yet available.

Any of Colorado's 64 counties may apply to receive MCV funds; CDHS continues to oversee applications and distribution of funding for FFY 2020.

## VII. FY 2018 KINSHIP NAVIGATOR FUNDING

Colorado was awarded \$310,745 to develop, enhance and/or evaluate a Kinship Navigator Program. These funds are being used to build on the capacities and use lessons learned from the Title IV-E Waiver Demonstration Project Kinship Supports Intervention and other existing state and county kinship programs and community partnerships to develop, manualize, implement and rigorously evaluate a kinship navigator model. Our three-pronged approach includes family search, facilitated family engagement and kinship supports in order to provide a more thorough approach to supporting families. This is an activity that is included in the PIP.

All awarded funds will be encumbered by September 30, 2019 and expended by December 31, 2019. CDHS does not anticipate any challenges or issues in spending the funds timely. Expenditures may include:

- Flexible funds for county departments to implement the new strategies;
- Stipends for kinship caregivers and youth to participate in program design;
- Manualization of the navigator model; and,
- Evaluation costs.

## VIII. ADOPTION AND LEGAL GUARDIANSHIP INCENTIVE PAYMENTS

The ACF's Adoption and Legal Guardianship Incentive Payments program awards incentive funds to eligible states, or other Title IV-E agencies, which improve performance in finding permanent homes for children and youth in foster care. Colorado was awarded \$55,589 in FFY 2017 and \$503,995 in FFY 2018. These funds are used according to the plan outlined in the CFSP, with a focus on funding post-permanency services across the state. The *Update on Service Description* section describe CDHS' outreach to stakeholders to better understand the types of post-permanency services that are most needed statewide. The total annual estimated cost for statewide implementation of post-permanency services is \$750,000. While this amount vastly exceeds Colorado's incentive award, CDHS will use other available funding sources to pay for services not covered by the incentive award. CDHS is using the Adoption and Legal Guardianship Incentive and Adoption Savings funds for the following:

- **Post-permanency services:** CY 2019 contract is \$857, 561 and provides for maintenance of 24 counties rolled out in CY 2018 and for implementation of a minimum of 26 additional counties by Dec 31, 2019. TBRI training is the foundation and has been a well-used resource. TBRI in-home coaching has been provided upon request. The original plan for respite was a challenge. The agency now contracts with an organization that provides breaks/respite. In November, daytime breaks were provided for 101 kids in 3 regions. A searchable resource database was developed and is available to all families. Six staff were hired and are assigned to specific regions that are in active or implementation status. Connection groups have been established and are being accessed in the regions.
  - Trauma-informed/evidence-informed Trust Based Relational Intervention (TBRI) training for families and professionals is completed in Phase 1 regions, and the first TBRI trainings in Phase 2 regions will be completed by June 2019;
  - In-home coaching to assist TBRI-trained families in successfully implementing the parenting model is offered in all counties in Phase 1 and Phase 2 once TBRI training is completed by families;
  - Implementation and connection groups on a regional basis to provide ongoing support, learning

- opportunities and natural points of connection for families. This is offered in all counties following their TBRI® trainings;
- Access to a pool of TBRI-trained families and/or individuals to provide respite care as needed for program participating families. A contractor provides this service under the PPSS contract. It is available in Phase 1 and Phase 2 regions;
  - Online directory of mental health professionals available to offer crisis intervention and ongoing therapeutic services for families is available to all 64 counties;
  - Resource navigation and referral for post-permanency families is available to all 64 counties; and,
  - Specialized in-person and web-based training for families and professionals is available to all 64 counties.
- **Interstate Compact on Adoption and Medical Assistance (ICAMA):** CDHS has a three-year membership with ICAMA. This membership allows CDHS to utilize agreements between and among its member states that enables coordination of provisions of medical benefits and services to children receiving adoption assistance in interstate cases. ICAMA prevents and/or eliminates geographic barriers that may delay or deny the provision of medical assistance and post-adoption services to families who have adopted children with special needs. This membership cost is \$5,000 which is funded through the FFY 2017 award.
  - **Voice for Adoptions:** CDHS has a two-year membership with the Voice for Adoptions organization. This organization is a bipartisan task force that provides accurate information on national adoption issues, common problems facing children who are awaiting adoption, and advocacy for policies that support adoption. CDHS pays \$3,000 for the two-year membership.
  - **North American Council on Adoptable Children (NACAC):** CDHS has a three-year membership with NACAC, which costs \$1,500. NACAC works with policymakers, administrators and grassroots advocates to reform the foster care system and improve outcomes for children and youth. They disseminate information that will help child welfare professionals and adoptive families' better support vulnerable children.

All awarded funds will be encumbered by September 30, 2019 and expended by December 31, 2019. CDHS does not anticipate any challenges or issues in spending the funds timely. CDHS will use incentive funds according to the plan outlined in the CFSP, but again with a special focus on increasing permanency and post-permanency supports. Expenditures may include:

- Provision of post-permanency supports and services statewide; and
- Training to county child welfare staff regarding how to provide post-permanency supports for families in their jurisdictions, what existing resources available are statewide and within their jurisdictions and how to support the development of post-permanency programs in their local communities. DCW staff continues to provide information about PPSS to counties. Counties are encouraged to provide information about PPSS for families that are achieving permanency through adoption, guardianship, and other forms of legal permanency (legal custody and reunification). To maintain visibility, in May 2019, the contractor presented information about PPSS to DCW county-facing staff who are assigned intermediaries to counties, to have information to encourage counties to network with the contractors, families, and community agencies.

## IX. COLORADO IV-E WAIVER DEMONSTRATION PROJECT ACTIVITIES

The ACF's Children's Bureau approved Colorado's Title IV-E waiver demonstration project (IV-E Waiver) on October 23, 2012, and the state began implementing the project in participating counties on July 1, 2013. Colorado's Title IV-E Waiver, which amounts to an average of \$49.5 million per year, has allowed Colorado to implement interventions that increase in-home services and supports; promote use of kin placements or less restrictive settings when OOH placements are necessary; and positively engage families and youth throughout the process of addressing safety concerns. As a result of participation in the Title IV-E Waiver, Colorado has not had a federal IV-E review since 2012. Colorado did pass the 2012 review without issue. In the state plan submitted to ACF in April 2018, Colorado has extended Title IV-E eligibility for young adults in foster care to age 21.

Colorado's IV-E Waiver interventions include:

- Facilitated family engagement meetings - a model that improves family engagement through regularly scheduled meetings held at specific timeframes with key participants and a neutral facilitator;
- Kinship supports - an assessment of kinship needs to sustain placements and the provision of an array of services to meet those needs. Services may include respite care, child care, basic needs, transportation, access to recreational activities and therapeutic and educational needs not covered by insurance or the educational system;
- Permanency Roundtables - a formalized permanency planning model that includes youth, case managers and other key participants for the purpose of achieving legal permanency or increased permanent connections for youth;
- Trauma-informed screening - a screening model, developed by Western Michigan University's Children's Trauma Assessment Center, that is a brief, focused inquiry to determine whether a child or youth has experienced specific traumatic events or reactions to trauma; and,
- Trauma-informed assessment and treatment - a more in-depth exploration of the nature and severity of traumatic events, the impact of those events, current trauma-related symptoms and the provision of evidenced-based treatment strategies for children, youth and their families.

The IV-E Waiver is well integrated in the CFSP. Interventions, detailed in Colorado's plan for improvement, align with the state's demonstration project. The interventions include:

- Intervention 1.3.1 - Implement IV-E Waiver interventions of family engagement, kinship supports and Permanency Roundtables in counties; and
- Intervention 1.4.2 - Implement trauma-informed assessment and services in all counties

The above *Update on the Plan for Improvement* and *Update on Progress Made to Improve Outcomes* sections of this report document updates to the CFSP and Colorado's progress in implementing each of the CFSP interventions. This section provides updates on the ongoing implementation of the demonstration project.

A collaborative advisory committee, the IV-E Waiver Oversight Committee, oversees Colorado's demonstration project. Membership includes CDHS and county child welfare staff, appointed county commissioners, Colorado Judicial Branch representatives, mental health providers and community stakeholders. In 2018, the committee was consulted to review and approve the state's extension request, as well as the intervention funding allocation for the demonstration project in the extension period.

CDHS also convened workgroups for each demonstration project intervention to support participating counties' implementation through coaching and peer learning. CDHS staff serves as leads for each of the demonstration project interventions, and they provide technical assistance to participating counties as needed. The intervention specific workgroups meet at least once per quarter.

The target population for the facilitated family engagement meetings intervention includes families who are involved in the child welfare system due to reports of:

- Child maltreatment;
- Youth beyond the control of the parent;
- Child/youth is a danger to self or others; and
- Youth at risk of delinquency.

In 2018, 52 counties were implementing facilitated family engagement with 11,075 families. Colorado anticipates a comparable number of meetings will be held in FFY 2019.

The target population for the kinship supports intervention includes:

- Kin caregivers who are currently caring for children/youth and who would benefit from services and supports to prevent foster care placement or re-entry to foster care; and,

- Kin caregivers who would be willing to care for children/youth who are currently in a more restrictive level of care.

In 2018, 29 counties were funded to implement kinship supports, and estimated 3,500 kinship families received an approximately 17,000 services. Colorado anticipates this intervention will serve a comparable number of counties and individuals in FFY 2019.

According to the final evaluation report, during the 5-year IV-E Waiver Demonstration Project Kinship Supports Intervention, 10,000 children were placed in kinship homes that received the Intervention. The final evaluation report showed positive outcomes for children and youth whose kin caregivers did receive the intervention including:

- More likely to be placed and remain with kin during their cases;
- Had longer stays in kinship care and were more likely to have subsequent placements in kinship care;
- More likely to achieve permanency; and
- Less likely to have subsequent child welfare involvement due to a subsequent substantiated report of abuse and/or neglect.

In addition, children and youth whose kin caregivers received kinship supports and whose families received facilitated family engagement meetings with higher levels of adherence were more likely to reunify with their parents at case closure.

The target population for the permanency roundtables intervention includes:

- All youth with other planned permanent living arrangement (OPPLA) as a permanency goal; and,
- All youth who are in the custody of county departments of human/social services for 12 months or more.

In 2018, 16 counties implemented Permanency Roundtables (PRT) and 2,699 PRT's were held. Colorado anticipates a comparable number of meetings will be held in FFY 2019.

The target population for the trauma-informed interventions varies by participating county. Most participating counties include children who are receiving child protection services. Some counties have broader or narrower target populations. In 2018, 16 counties were implementing one or both of the trauma-informed interventions, and 2115 children/youth were screened for trauma.

Implementation of the trauma-informed interventions highlighted opportunities for improved assessment and services as is related to trauma exposed children and youth. Seven of the 16 participating counties are utilizing expanded versions of the interventions. Some of these expansions include:

- Use of an enhanced trauma assessment package, as developed by Dr. James Henry of the Child Trauma Assessment Center;
- Use of an enhanced provider reporting practice, detailing specific recommendations as related to roles in the case;
- Repeated administration of a well-being assessment tool, to track client and provider progress; and
- Use of trauma-informed professionals to support kin and foster care providers.

CDHS and county staff utilize data reports to support CQI efforts, monitor county performance and facilitate decision making with regard to the demonstration project.

The overall demonstration project has been evaluated by the Human Services Research Institute (HSRI) in collaboration with CSU's Social Work Research Center and Chapin Hall at the University of Chicago. The evaluation had three main components, including a Process Study, an Outcome Study and a Cost Study. The evaluation examined how the availability of flexible IV-E Waiver funds enables CDHS and county departments of human/social services to alter expenditure patterns and make changes in service delivery to improve the safety, permanency and well-being of child welfare-involved children/youth.

The Process Study documents the full range of state and county activities associated with the demonstration project; the related services and supports that children, youth, families and kinship caregivers receive; differences among the counties in how the demonstration project is implemented; and the evolution of the demonstration project over time, including successes and challenges experienced throughout the implementation process.

The Outcome Study includes an interrupted time series that examines the overall impact of the demonstration project on county OOH care use and historical matched case comparisons that examine the impact of the demonstration project's interventions on child and youth outcomes.

The Cost Study examines the effect of the demonstration project on child welfare expenditures in participating counties and the intervention services' costs.

The final report for the independent evaluation will be included with the 2020-2024 CFSP.

The State intervention allocation has decreased by 40% in each of the final two years of the demonstration project. The

intention of this is to gradually shift the cost burden of the interventions to county flexible budgets (block allocations, Core Services Program budgets). Simultaneously, counties will enjoy the cost benefits of an improved OOH placement mix, driven, in part, by sustaining Waiver interventions. Lastly, the State and counties are working together to align practice with the Family First Prevention Services Act, to maximize future federal reimbursement.

## X. JOHN H. CHAFEE FOSTER CARE PROGRAM FOR SUCCESSFUL TRANSITION TO ADULTHOOD

Colorado's Chafee Foster Care Program for Successful Transition to Adulthood (the Chafee program) provides an array of supports and services to youth as young as 14 who are likely to emancipate out of foster care and to young adults between the ages of 18-21 who have left foster care. The Chafee program services are offered statewide through county departments of human/social services. In FFY 2018, 32 counties had access to the Chafee program supports and services through 16 host counties, and in FFY 2019, 33 counties had access to the Chafee program services. In addition, a portion of the Chafee program funding is set aside to provide services to eligible youth in counties that do not host a program or have a service agreement with a host county. As a result, all eligible youth in Colorado have access to the Chafee program supports and services.

Host counties submit the Chafee program plans annually that provide a description of the county's program design, the process by which eligible youth will be identified, supports and services to be offered and outreach efforts to increase awareness of the program. The supports and services offered through Colorado's Chafee programs align with the federal program objectives outlined in section 477(a) of the Social Security Act.

FFY 2019 represented a thorough re-working of the annual Chafee plan template to help prepare the Chafee programs for the expansion to 23. The re-worked plan allowed the counties to differentiate between what independent living services were being provided through the caseworker and what supplemental services the Chafee program is responsible for. Additional details can be found on page (46).

At the outset of participating in the program, the Chafee program staff work with youth to develop individualized Chafee plans that identify the youth's goals for independence and if those goals can be worked on individually or in a group format. Additionally, county Chafee programs facilitate social opportunities and workshops for youth that provide age appropriate information and recreational activities. Some of these activities include yoga classes, art classes, "Book and Latte" afternoons to promote literacy, permanency dinners to support lifelong connections and a ropes course to obtain leadership skills.

CDHS and the Chafee program host counties have integrated policies and practices to support and affirm the sexual orientation and gender identities of youth served by the program. CDHS requires Chafee program counties to address in their annual plans how the program will support the cultural and linguistic needs of youth with varying racial and ethnic backgrounds, sexual orientations and gender identities. If available in their communities, the Chafee program counties refer their youth to nonprofit, community agencies that serve these populations and will accompany youth to the agencies to assist with introductions. In the Denver metro area, a key resource is the GLBT Community Center of Colorado. In some Chafee program counties, youth who are struggling with questions regarding their sexuality and gender identity are referred to therapists who specialize in such issues.

CDHS continues its work on best practices for working with lesbian, gay, bisexual, transgender and questioning (LGBTQ) youth through an internal work group that meets regularly. This work group continues to update and disseminate resources and best practices for the Division.

These initiatives are part of DCW's work in pursuing the Human Rights Campaign "All Children All Families" Seal of Approval. DCW continues to work towards the Seal of Recognition as an "Innovator in Supporting and Serving LGBTQ Youth and Families" anticipated April 2020. In pursuing the seal of approval, DCW's objectives are to follow best practices for LGBTQ inclusion, publicly demonstrate values of inclusion, and encourage other youth-serving agencies and counties in Colorado to pursue the seal of approval. Benchmarks at this level also require agencies to look outside their own policies and practices and demonstrate leadership in areas like policy advocacy or organizational partnerships.

Trainers from DCW and CWTS have been certified to provide *An Introduction to LGBTQ Competency for Child Welfare Professionals*, statewide for practitioners across Colorado. This training is now offered through CWTS and all DCW staff have attended the training. Additionally, CWTS incorporated LGBTQ topics into the revised Foster Parent Core curriculum and is in the process of reviewing all training to see where this additional examples and skills can be incorporated.

Agencies that seek to achieve the seal of approval work to meet benchmarks of LGBTQ cultural competency. These benchmarks include:

- Establishing non-discrimination policies;
- Staff training to support the transfer of policy into practice;
- Sending an explicit message that LGBTQ children, youth and families are welcome;
- Ensuring LGBTQ parents feel included are recruited and all parents are provided information on caring for LGBTQ youth;
- Removing policy and practice barriers faced by LGBTQ youth to ensure they are safe, affirmed, and supported to achieve permanency;
- Support strategies that build internal capacity for long-term and sustainable LGBTQ inclusion efforts;

- Share lessons learned through serving as a leader on the local, state and national level for LGBTQ inclusion.

In FFY 2018, 806 youth were served through the Chafee program. Colorado anticipates this number is likely to expand slightly in FFY 2019 due to an additional county coming online and will be looking at serving approximately 815 youth with Chafee services.

CDHS continues to redesign the state's Chafee program to provide more robust services to transition-aged youth to better prepare them for adulthood. Over the past five years CDHS has explored a number of approaches to connect youth with resources that meet them where they are. There has been a significant focus on leveraging technology work on the "I'm Into" mobile phone application for youth that will connect young people to targeted resources in their communities and provide a social network to connect with other young people with similar barriers. CDHS is currently piloting this project and expects to have data to report in FFY 2019.

During FFY 2019 CDHS' Chafee program continues to work with county departments of human/social services, stakeholders and youth advisors to update program guidance. The task group identified the main concern area as the updating the assessment that Chafee programs utilize gauge the services that are needed to prepare youth for a successful transition to adulthood. The updated assessment questions have been finalized and re-working the score sheet is close to completion as of the date of this report. As part of the redesign effort, requirements for county Chafee program plans have been expanded to target areas of need identified by CDHS and its partners. Specific requirements include the following:

- Host counties are now required to include in their annual Chafee program plans an array of individualized services for each "Pathways to Success" (Pathways) initiative outcome area. These outcome areas include Permanent Connections, Safe and Stable Housing, Health and Wellness, Education, and Career Development.
- County Chafee program plans are required to increase focus on educating young people about the Former Foster Care Medicaid benefit and provide assistance to former foster care youth who are not aware of and/or not receiving the benefit.
- Each of the Pathways content areas of the report is broken into 3 separate populations (youth 14 to 16, youth 16 to 21, and aftercare youth that are 18 to 21 and no longer in foster care) that need to be addressed to ensure that programs are offering services that are age and developmentally appropriate. The plans have now shifted to identifying specifically what independent living services will be provided by the caseworker and the supplemental services that are being provided by the Chafee worker.
- County programs were also asked to provide how youth voice will be integrated into each of the Pathway areas of the report.
- County Chafee program plans are required to increase referrals to local workforce programs and coordinate services to locate and support work opportunities and experiences for youth and young adults served by the Chafee program.
- County Chafee programs will continue to update their FFY 2019 annual plan to address the requirements of P.L. 118-183 in regards to reporting to law enforcement the victims of sex trafficking.
- County Chafee program plans for FFY 2019 also require an explanation of efforts to address the prudent parenting standards as defined by the Code of Colorado Statutes (12 CCR 2509-1 (7.000.2)).

In order to supplement the work being done by county child welfare programs, CDHS staff also worked with representatives from county Chafee programs to improve program guidance. For example, in response to outdated and inconsistent documentation practices among the county Chafee programs, CDHS continues to fine-tune updates to the Chafee referral form, the Chafee independence plan and the Chafee assessment. These changes will ensure that questions are relevant to issues that youth will encounter and will also ensure consistency of documentation and services across the county programs. Once draft copies of these forms are created, CDHS plans to seek input from existing Chafee clients and youth advisory boards with the intent to achieve effective/meaningful updates for the recipients of these services.

Starting in FFY 2018, CDHS staff implemented a revised Chafee program funding methodology for the county programs. The updated funding methodology takes into consideration the number of youth that are served by county programs in relation to the total number of youth that are served in the state. The continued use of this funding methodology is working to rearrange the county based funding to those programs that are efficiently using their allocation and creating movement to ensure that all the available funds are expended.

All of the policy and program updates highlighted in the preceding paragraphs have been vetted through CDHS' statewide quarterly Chafee program meetings. These meetings allow county Chafee program staff to engage in training, discuss practice and program implementation and identify areas of need in the program. CDHS also utilizes these meetings to provide updates on any changes made on the federal level that may affect program implementation.

CDHS continues to partner with stakeholders to address systemic issues that impact youth and young adults through the Pathways Initiative's State Inter-Agency Team (SIAT). SIAT is made up of representatives of several state agencies that provide services to transition-aged youth to ensure alignment of statewide initiatives address barriers and gaps in services and identify opportunities for improved data sharing related to youth in foster care. In FFY 2015 Colorado was one of six

sites to be awarded funding from the Children’s Bureau to test a package of services designed to reduce experiences of homelessness among youth emancipating from foster care. Colorado’s grant funds the Pathways work to promote system alignment and coordination and to test services that reduce instances of homelessness.

CDHS’ Chafee program continues to partner with the Colorado Department of Local Affairs’ (DOLA) Division of Housing (DOH), Mile High United Way, Urban Peak Denver, county departments of human/social services and local housing authorities to provide Family Unification Program (FUP) vouchers to youth emancipating from the foster care system who are experiencing homelessness or inadequate housing.

Individual Chafee programs work with these and other transitional housing programs by providing financial assistance of up to 30 percent of their Chafee budgets in order to provide access to room and board. CDHS collaborates with DOH to verify youth’s eligibility for FUP vouchers. In many cases, county Chafee programs provide housing deposits, apartment start-up funds and case-management for youth using FUP vouchers. Currently, FUP vouchers are used in El Paso, Mesa, Pueblo, La Plata, Adams, Arapahoe, Broomfield, Jefferson, Denver, Douglas, Weld and Fremont counties.

In addition to the state’s FUP, Colorado was chosen to be a Family Self Sufficiency (FSS) demonstration site. FSS extends the time that foster care youth can receive housing vouchers and works to decrease the percentage of former foster care youth who experience homelessness after emancipation. The new voluntary program will allow youth that are nearing the end of their FUP voucher to roll into the 5-year FSS voucher, which will provide ongoing housing support while youth pursue employment and educational goals. This demonstration project enables youth to have an interest-bearing escrow account that is based on increased earned income, and FSS funds become available to them when they successfully complete the program.

An additional CDHS collaboration around housing involves the Advisory Committee on Homeless Youth (ACHY) and the Rural Collaborative on Homeless Youth (RCHY). ACHY is a strategic planning and action body that advises DOLA’s Office of Homeless Youth Services and oversees implementation of the Colorado Homeless Youth Action Plan. The RCHY is a collaborative of state agencies, county departments and community providers that is 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.

CDHS and its partners are working to improve data collection regarding youth who are experiencing homelessness. Currently, the annual Point in Time (PIT) count, which is required by federal Department of Housing and Urban Development (HUD), measures the number of people experiencing homelessness in the state. The data is then aggregated and collated into the Annual Homeless Assessment Report. Historically, youth who are experiencing homelessness are undercounted and underrepresented in the annual PIT count. As a result, resources for that population are nominal. In FFY 2017 ACHY members collaborated with DOLA’s Division of Housing to create a Youth Supplemental Survey with the intent on capturing more youth who are experiencing homelessness in Colorado. Due to the narrowness of the annual PIT count’s definition of homelessness, the supplemental survey was developed to include youth who are experiencing housing instability but who do not meet the HUD definition. Data collected through the Youth Supplemental Surveys will give a more accurate picture of rates of youth homelessness in Colorado and will be used to aid local nonprofits in applying for grants.

CDHS participates as a governor-appointed member of the Colorado Human Trafficking Council, created in 2014 by House Bill 14-1273, to develop recommendations for improving Colorado’s response to all forms of human trafficking. In addition, CDHS convened the Human Trafficking Task Group (HTTG): Collaborative Child Welfare Response to Sex Trafficking to assist in the development of new regulations to meet state and federal requirements related to sex trafficking. Both state and county Chafee program staff participate in the task group and have been instrumental in identifying the vulnerability of the Chafee program youth to human trafficking.

The task group supported the development of two trainings related to human trafficking that are delivered through the CWTS. The first training, *Recognizing and Identifying Human Trafficking*, instructs child welfare workers and community partners in recognizing cues or indicators that a child or youth is experiencing human trafficking; strategies that can be used with children, youth and families to identify those who are most at risk for being trafficked or who are currently being trafficked; and next steps to take once a child or youth has been identified as having involvement, or potential involvement, in trafficking situations. The second training, *Screening for Sex Trafficking*, is an interactive web-based training that supports caseworkers in completing the statewide sex trafficking screening tool and reviewing rule and guidance around how and when to fill out this tool. All Chafee program staff have been encouraged to complete the CWTS training.

In response to shifting funding priorities related to the Workforce Innovation and Opportunity Act (WIOA), CDHS continues to partner with the Colorado Department of Labor and Employment (CDLE) to re-align and enhance services for youth who are in or have emancipated from OOH care. CDHS’ appointee to the Colorado Workforce Development Council’s State Youth Council advises on the implementation of WIOA and initiatives impacting youth in Colorado and how they can best receive training, education and workforce assistance through the workforce development system. At the county level, the Chafee program counties continue to work closely with their local workforce centers to ensure youth have access to adequate employment. The Chafee program staff help youth register with local workforce centers, demonstrate how to access workforce services, and engage with the workforce personnel. For example, Jefferson County’s Chafee program partners with the American Job Center WIOA program. Youth participate in paid internships at the Jefferson County government

campus, and opportunities range from working with the juvenile court to assisting with the Head Start Program.

Improving educational outcomes for youth and young adults served by the Chafee program continues to be a priority for the program. In June 2019, CDHS hosted the 21st Annual Celebration of Educational Excellence. The Front Range celebration recognized the academic achievements of graduates who were previously or currently in foster care. Prior to the ceremony a resource fair was held with community programs relevant to the graduates including post-secondary programs, on-campus support service programs and scholarship programs that focus on youth who have experienced foster care. Graduates also will receive a new tablet as graduation gifts to promote continued and lifelong learning. CDHS also helped coordinate the fourth Annual Western Slope Celebration of Educational Excellence in Mesa County, which honored additional graduates.

CDHS has partnered with the Colorado Department of Education (CDE) in the maintenance of a Foster Care Education Coordinator, employed by the CDE, which provides guidance and technical assistance to school districts in their support of students in foster care. This work is done on site through the districts' Child Welfare Education Liaisons (CWELs). The focus is on K-12 students in foster care. Colorado is also one of the few states in the nation to have a data sharing agreement with the CDE that tracks outcomes for students in foster care with relation to graduation rates, student achievement and student mobility. This data sharing allows for continued collaborative efforts to ensure interventions and programming are continually developed and adapted to support students in foster care. Throughout 2018, CDHS and CDE held regional meetings with county and school district partners to provide training and technical assistance as local agencies implement school stability protections of the Fostering Connections Act, the Every Student Succeeds Act and Colorado law. Colorado regulations (12 CCR 2509-4, 7.301.241), which went into effect on February 1, 2017, require county departments of human/social services to initiate and facilitate a best interest determination process prior to any school move resulting from a foster care placement change. The school district CWELs support the participation of an educator who knows the student and can give meaningful input into the decision of whether a student should remain in their school of origin. Most counties and school districts are in the final stages of negotiating and drafting local memorandums of understanding regarding school stability for children and youth in OOH placement. These agreements detail communication expectations between the local agencies as well as systems-level plans for how transportation to maintain children and youth in their schools of origin will be provided, arranged and funded.

CDHS' efforts to improve educational outcomes for youth are also documented in the 2017 CFSR Statewide Assessment in the well-being outcomes section. Efforts specific to postsecondary education are documented in the following *Education and Training Vouchers* section.

CDHS has collaborated closely with the Colorado Department of Higher Education (CDHE) in multiple ways to better support Educational and Training Voucher (ETV) students in attaining their post-secondary educational goals. Shortly after completing the data sharing agreement the Colorado Challenge (COCH) the funding source for the program was discontinued and it has been phased out.

The second major focus with CDHE was creating a position through College in Colorado (which is being rebranded as M Colorado Journey), which is under the umbrella of CDHE. The position is an intermediary between the student, the school, Foster Care to Success (the entity distributing ETVs) and potentially the Chafee program worker or caseworker. The focus of the role is to reduce systemic barriers encountered by these students, increase retention and increase certificate and degree completion. The Educational Coach has worked with universities around the state to help establish a better method of communication between Single Points of Contact (SPOCs) on each campus and to develop a list of resources available on each and every campus which is currently in development. The Educational Coach position has expanded to integrate more macro level approach for former foster care youth. The position has a voting representative of the Colorado Department of Higher Education (CDHE) for the Former Foster Care Youth Steering Committee and was responsible for ensuring that the recommendations aligned with CDHE priorities and had the support of their administration. College in Colorado is changing their online platform to better serve the state of Colorado and this position has been instrumental in integrating the needs of current and former foster care youth into the new online tool. The previous online tool

Colorado's Chafee programs have also incorporated educational programming related to pregnancy prevention and sexual health. Host counties are required to address in their annual plans how they will integrate comprehensive sexual health education into their programming. Many counties bring in community agencies regularly to provide educational workshops on sexual health. These agencies include county health departments, medical professionals and nonprofit agencies. Youth are referred to these agencies if ongoing services are required.

At the state level, CDHS' Chafee program continues to coordinate with the Colorado Sexual Health Initiative (SHI) and the state's Personal Responsibility Education Program (PREP) to provide evidence-based trainings on comprehensive sexual health curricula to county Chafee program staff, caseworkers and other stakeholders. COSHI has organized a statewide training of the "Power through Choices" curriculum on April 30 to May 2nd, 2019. Additional funding will be provided to counties that would like to integrate the curriculum into their programming. COSHI can facilitate the trainer curriculum to those counties that are interested to ensure that enough staff has been trained to counteract workforce instability.

Changes made by the Family First Prevention Services Act (FFPSA) to the Chafee program and to the ETV program impact future services in Colorado. CDHS has submitted the extension certification letter to expand both Chafee and Educational and Training Voucher (ETV) eligibility. CDHS is moving ahead with the process of changing the rules that dictate child welfare practice in the state to extend Chafee services to the age of 23 and expand ETV to the age of 26. A task group was assembled and is meeting in April 2019 to gather stakeholder feedback in changing the eligibility rules that dictate Chafee

services and ETV provision in the state.

In support of the Chafee program goals and objectives, CDHS provides training to help stakeholders understand and address the issues confronting youth who are preparing for independent living. In 2018, Colorado's CWTS added multiple youth-focused courses. In 2019, CWTS will be making revisions as needed for these courses, while continuing to develop learning opportunities for Chafee program staff and other youth-serving professionals. Training will address

- Youth engagement strategies and working with youth in a coach-like way;
- Family engagement strategies including trauma-informed outreach practices, re-building ties for youth and addressing barriers to family engagement;
- Resource navigation;
- Use of PYD strategies and coach-like engagement in the development of plans for a successful adulthood;
- Use of the Youth Connections Scale as a tool to identify and engage positive connections; and
- Youth support and advocacy in the Permanency Roundtable process.

As a result, the training entitled *Engaging Youth in a Coach-Like Way* was rolled out in the fall of 2016 to the Pathways navigators, who provide services and support to youth enrolled in the Pathways program. This training teaches navigators to help youth identify their own needs through a coaching model. This model of engagement relies on the voice of the youth and the youth's professional team to build a plan that will ensure their needs are met. *Engaging Youth in a Coach-Like Way* has become a focal point of the Pathways evaluation and a key component of the model intervention.

In addition to trainings offered through CWTS, CDHS' Chafee program staff collaborates with stakeholders to develop and deliver specialized trainings for targeted audiences. In August 2018 the Chafee program staff led a session at the Think Big 2018 State Workforce Conference to introduce workforce professionals to the unique experiences and needs of youth in foster care and how to improve collaboration with child welfare agencies.

### ***Youth Involvement***

The involvement of youth and young adults is critical to CDHS' efforts to improve systems that serve youth. CDHS' Chafee program facilitates the Colorado Youth Leadership Network (CYLN), which is composed of 8 youth advisory boards. The CYLN provides feedback to state and county departments on policy and practice issues that impact youth. CDHS, CDE, the Colorado Department of Public Health and Environment (CDPHE) and Colorado Judicial Branch regularly engage youth from CYLN. Coordinators from each of the youth advisory boards meet quarterly to discuss upcoming state initiatives, youth training opportunities and partnerships with adults.

In addition to the CYLN, youth advisors are appointed to various State of Colorado committees including the Child Welfare Executive Leadership Council, Tony Grampas Youth Services Board and the CIP. In FFY 2017, the CFSR Oversight Committee actively recruited to fill a membership vacancy allotted for a youth advisor. Pathways maintains an active group of youth advisors, and a youth partner is on the Pathways project management team. Youth advisors who are engaged in work with CDHS receive compensation for their contributions, either through gift cards or cash.

In addition to the committee work referenced above, specific examples of youth involvement since the submission of last year's APSR include the following:

- CDHS in collaboration with the Metro Youth Alliance (MYA), and local non-profits coordinated the Youth Day on the Hill which took place on April 26, 2018. Foster care youth were brought from throughout the state and given the opportunity to learn about the legislative process in the state as well shadow legislators while congress was in session.
- CDHS, CWTS and the Kempe Center staff are currently seeking youth advisory board input on how best to integrate the youth voice into the new caseworker training curriculum.
- CWTS is creating Youth Advisor positions on the Training Steering Committee (TSC) and the four Regional Training Advisory Committees (RTACs). These paid positions will receive formal supervision and coaching, and will provide feedback and input on CWTS activities. Additionally, the TSC and RTACs have received training and will continue to receive consultation on how to meaningfully include youth in decision-making.
- Youth input was instrumental in developing the youth mobile "I'm Into" app.
- Utilizing Casey Family Foundation funds, a youth advisor position was created in 2017 to help coordinate and facilitate the Metro Youth Alliance (MYA). CDHS and the counties participating in the board have picked up some of the funding to ensure the work of this board can continue. This part-time paid position continues to provide youth voice in coordinating the metro-wide youth advisory board and reports directly to the advisory board coordinator, which is a position hired through Shiloh House.
- Youth boards provided input and feedback to the OCR concerning improving legal services provided to youth from the Guardian Ad Litem.

- Youth boards participated in civic activities by creating care packages for women and homeless youth shelters.
- Youth boards supported a clothing drive for homeless youth.

### ***National Youth in Transition Database (NYTD)***

NYTD is a federal database that collects information about selected youth in foster care and the outcomes of young people who have emancipated from the foster care system. Colorado's NYTD data has been used to inform improvements in the development and implementation of initiatives such as Pathways to Success and Colorado's Statewide Youth Development Plan.

CDHS and Utah co-founded a communication network with other Region 8 states. The goal of this network is to develop and share resources designed to increase the federal response rates of youth participating in the NYTD survey. The states that participated in the initial January 2018 phone call were North Dakota, South Dakota, Montana, Wyoming, New Mexico, Utah and Colorado. The states agreed to share tools and technical support. In addition, states requested from the federal government access to the NYTD portal and national outcomes.

CDHS continues to make improvements in NYTD data collection. In 2015, CDHS held focus groups with youth from the CYLN to solicit their feedback on barriers to NYTD data collection and potential modifications to the Colorado Youth Experiences Survey to improve data collection. Based on their feedback, CDHS revised its communication strategy related to the survey, completed a redesign of the survey and expanded accessibility. As a result of these changes, CDHS saw an increase in survey responses and in the completion rate for NYTD surveys. For the remainder of FFY 2018 CDHS will continue providing training to DYS staff in order to improve survey response rates from their youth.

In FFY 2018 marketing materials are continuing to be created (e.g., brochures and flyers) and distributed to agencies serving youth. In addition to traditional media, CDHS expanded its outreach efforts to social media, and the survey itself was redesigned.

In addition to the improvements suggested by the youth focus groups, CDHS continues to collaborate with interagency and community partners to share data and better locate youth who are scheduled to complete the NYTD survey. CDHS has an existing agreement with HCPF to access Medicaid enrollment information from the Medicaid Management Information System (MMIS) and coordinates with partners who have separate information systems to help locate youth. These partners include the Department of Motor Vehicles, DOLA's Division of Housing, HCPF's Division of Intellectual and Developmental Disabilities and local runaway and homeless youth providers. CDHS also coordinates internally across all programs to ensure that all eligible youth are located.

Colorado CDHS is continuing to prepare for the NYTD Review as a date has not been scheduled for the review. CDHS staff are being proactive by reviewing all available information pertaining to the review. CDHS is also reviewing its process and procedures for NYTD surveys to assess potential vulnerabilities in advance of the review. An informational memorandum providing initial information about the review was distributed to county departments, tribal representatives and community stakeholders on July 27, 2017.

In January 2017 CDHS staff presented information about the NYTD Review to the Chafee Services Quarterly and Youth Services Quarterly meetings and it has been a topic at all the quarterly meetings that followed. As Colorado prepares for the review, CDHS will continue to engage and inform stakeholders through these venues. Additionally, CDHS is planning a series of focus groups with Youth Advisory Boards throughout the state to solicit youth feedback and engage youth representatives who may be able to participate in the review.

CDHS continued to provide technical assistance to Chafee Workers, County Caseworkers and Division of Youth Services, Client Managers in preparation for the 21-year old cohort. CDHS continues to provide technical assistance to Chafee Workers and County Caseworkers statewide through quarterly meetings. NYTD was discussed at the Chafee Quarterly meetings on January 25, 2018, April 26, 2018, July 26, 2018, October 25, 2018, January 24, 2019, and April 25, 2019. NYTD was also discussed at the Youth Services Quarterly meeting on February 9, 2018, and May 11, 2018. Traditionally, the 21 year old population is the most difficult to locate and survey. The result of this effort: Colorado doubled its previous response rate of 24% for 21- year olds. Colorado achieved a response rate of 57% (One youth shy of the mandatory to meet the response rate) for the fall group and 67% for the spring group for the cohort in FFY 2018.

### ***Consultation with Tribes***

The Chafee program supports and services are available to youth from the Southern Ute and Ute Mountain Ute Tribes through La Plata County's Chafee program. In order to ensure that both tribes are aware of the benefits available to their youth, both tribes are included in an informational memorandum that contains the planning package for the annual Chafee plan and are eligible to apply for federal funds. La Plata county staff also continually attempt to maintain contact with both tribes regarding the Chafee program supports and services.

As a requirement of accepting Chafee funds the state is responsible for outreaching and coordinating with the tribes in its state. The Chafee outreach to both the Southern and Mountain Ute tribes has been accomplished through a couple of different avenues. The opportunity to apply annually for the Chafee program is sent out to all the county directors including directors of the Tribal department of human services. As of the writing of this the tribes have chosen not to apply for the funding.

During the 2017 semi-annual meeting with the directors of the tribal departments of human services CDHS was told that they did not have the capacity to take on the program and they would continue to utilize their existing avenue for Chafee services. Currently eligible tribal youth are served through a memorandum of understanding (MOU) with the La Plata county Chafee program. CDHS will continue to regularly consult the tribes to see if they have the capacity to take on the program themselves but until then the existing relationship with La Plata County is enabling their youth to be served by the program. The Indian Child Welfare Specialist through the Division of Child Welfare is scheduled to meet with both the Mountain Ute and Southern Ute tribes during the week of April 15, 2019 and will check-in to see if they would like to pursue their own program.

#### Education and Training Voucher (ETV) Program

Colorado's ETV program serves young people who have emancipated from foster care and those who are likely to remain in foster care until age 18. Eligibility for the ETV program mirrors eligibility for Colorado's Chafee program. The recent change in lower age limit to be eligible for the Chafee program extends to the ETV program: youth as young as 14 years of age who are currently in OOH care are eligible for ETVs when special circumstances warrant early GED attainment and alternative educational goals that meet the needs and learning style of the youth.

The ETV program supports self-sufficiency by providing financial support, coaching and guidance to youth who are pursuing postsecondary educational goals through accredited colleges, universities or career and technical schools. Youth may qualify for up to \$5,000 in vouchers per year to help finance their educational goals. CDHS partners with high school guidance counselors, colleges, universities, career and technical schools, other state agencies and CASA volunteers to disseminate information about the ETV program and other resources to assist eligible youth who are planning to pursue postsecondary education.

Colorado's ETV Program has been administered by Foster Care to Success since academic year 2003-2004. This program maintains individual contact with youth, monitors their progress and provides individualized coaching and guidance to help youth navigate their academic and social environments. CDHS opened up the bidding process and created a request for proposals this year, and Foster Care to Success maintained the contract. Youth are provided with care packages and information about additional scholarship and internship opportunities. In an effort to facilitate outreach and support, Foster Care to Success also connects youth with county Chafee programs and community or school based resources. County Chafee programs receive notification every October and February of all youth receiving ETV support who attend schools in their county in order to maintain connections and ensure every student in the program is getting the support and services they need.

For FFY 2019 CDHS has also integrated collaborations with CDHE to supplement the work being done by Foster Care to Success and assist ETV students with additional wraparound services that are discussed on pages 53-54 of this document. The following table includes the number of youth who have been served through Colorado's ETV program.

Table 17: Annual reporting of ETVs awarded

(source: CDHS staff, 2019)

	Total ETVs Awarded	Number of New ETVs
2013-14 School Year (July 1, 2013 to June 30, 2014)	152	62
2014-15 School Year (July 1, 2014 to June 30, 2015)	154	75
2015-16 School Year (July 1, 2015 to June 30, 2016)	160	77
2016-17 School Year (July 1, 2016 to June 30, 2017)	138	66
2017-18 School Year (July 1, 2017 to June 30, 2018)	103	40
Estimate: 2018-19 School Year (July 1, 2018 to June 30, 2019)	115	50

## XI. UPDATES TO TARGETED PLANS WITHIN THE 2015-19 CFSP

Colorado submitted four plans as discrete sections of the CFSP:

- Foster and Adoptive Parent Diligent Recruitment Plan
- Health Care Oversight and Coordination Plan
- Disaster Plan
- Training Plan

The following sections provide updates on each of the plans. The Training Plan has been modified; please see appendix X. All other plans may be referenced in the June 2018 APSR.

### ***Foster and Adoptive Parent Diligent Recruitment Plan***

Colorado has made significant progress toward the implementation of projects outlined in the 2015 - 2019 Foster and Adoptive Parent Diligent Recruitment and Retention Plans. In FFY 2019, CDHS staff focused efforts on providing additional assistance with the refinement of localized diligent recruitment plans to county departments and child placement agencies. With Colorado's county administered and state supervised structure, successful diligent recruitment of foster and adoptive parents occurs at the local level. Consequently, an operational memo was issued on February 27, 2018, requesting an annual update to county and child placement agencies' diligent recruitment plans. In 2018 CDHS requested additional strategies to be included in the plan updates to focus on recruitment of families for youth in congregate care, retention of current foster families, strategies focused on customer service and the support of educational stability for youth in care. CDHS is anticipating diligent recruitment plans from counties and Child Placement Agencies by the end of the summer 2019. CDHS staff has provided trainings to CPAs and counties to support local recruitment efforts and staff provides ongoing guidance at quarterly foster coordinators, adoption supervisors and recruitment and retention quarterly meetings. Trainings and outreach further the understanding of diverse cultural, racial and economic communities through the use of "The Invisible Conversation" (available through CWTS), "Road to Poverty" or other culturally related training and resources.

On or before May 1, 2019, county departments of human/social services must provide the Division of Child Welfare (DCW) with an update to their 2018 diligent recruitment plans identifying actions that will be taken to demonstrate efforts to reflect the diversity of the communities from which children and youth are removed. The plans should address recruitment efforts for 2019 based on 2018 calendar year data and should be submitted to the Foster Care and Adoption Recruitment and Retention Specialist. On or before June 1, 2019, CPAs must provide the Division of Child Welfare (DCW) with an update to their 2018 diligent recruitment plans identifying actions that will be taken to demonstrate efforts to reflect the diversity of the communities from which children and youth are removed. The plans should address recruitment efforts for 2019 based on 2018 calendar data and should be submitted to the Foster Care and Adoption Recruitment and Retention Specialist.

CDHS partners with the counties and The Adoption Exchange to coordinate the Colorado Heart Gallery photo listing to assure procedures for a timely search for prospective parents for a waiting child. In addition to being posted on [coheartgallery.org](http://coheartgallery.org), the photos are also used on the Adopt US Kids national photo listing, The Adoption Exchange's online children's gallery and by county staff. Through The Adoption Exchange's contract to manage the Colorado Heart Gallery, CDHS utilizes the Colorado Heart Gallery website ([COHeartGallery.org](http://COHeartGallery.org)) and physical photography displays for general and child-specific recruitment. County caseworkers are also able to utilize professional photographs and videos of a waiting child in support of their child-specific efforts.

In CY 2018, 128 of the 278 children and youth whose primary or secondary goal is adoption were photographed for the Heart Gallery and other online child-specific recruitment platforms. The website was visited by 84,000 visitors who viewed more 1.8 million pages. Additionally, during this reporting period, child-specific videos, available on the Colorado Heart Gallery website, The Adoption Exchange website and county websites were viewed more than 190,000 times. In CY 2018, the Colorado Heart Gallery traveling photography displayed was used to raise awareness in 34 public locations throughout Colorado. Venues included public libraries, churches, LGBTQ community organizations and events, media events, the Colorado State Capitol and county celebrations of National Adoption Day.

CDHS recognizes that adoption recruitment is an integrated process, with staff utilizing multiple tactics, one of which is the Colorado Heart Gallery. In CY 2018, the adoption of 29 youth who had been on the Colorado Heart Gallery were finalized, seven youth were placed with families who had taken guardianship or permanent custody, and 47 children and youth were placed or matched with a pre-adoptive family.

Colorado uses two Facebook pages (Colorado Heart Gallery and Colorado Foster Care) to raise awareness about the need for foster and adoptive families and to share Colorado Heart Gallery pages about waiting youth. CDHS used paid promotions to increase the reach of waiting youth on the Colorado Heart Gallery Facebook page. In CY 2018, promoted posts for specific

children reached an average of 5,964 individuals. Unprompted posts about a specific child reached an average of 2,105 individuals. General adoption and foster care recruitment reached another 61,642 Colorado adults on Facebook. CDHS and select counties have identified Latino, African American and LGBTQ individuals as important audiences for foster care recruitment. Given this, Facebook ads developed specifically to reach these audiences are planned for the remainder of SFY 2018, with an estimated reach of 30,000 unique impressions among these three communities.

CY 2018 marked a turn in CDHS's social media communication strategy. In addition to maintaining two Facebook pages, the Department began to use Facebook Live and lead-generating digital advertising campaigns to educate the public about foster care and adoption. By using digital ads to solicit contact information from interested users, CDHS was able to ensure timely phone and email follow-up by a local individual ready to support people in beginning the certification process. Key digital advertising and awareness efforts in CY 2018 include:

- May 2018 Supporting Emancipating Youth Facebook Live - 1,369 views during live event
- June 2018 LGBTQ Foster Care and Adoption Facebook Live - 2,396 views during live event
- September 2018 Adoption 101 Facebook Live - 1,468 views during live event
- November 2018 - #ColoradoFamilies come in all shapes and sizes Facebook photo competition - 157,595 Coloradans reached
- November 2018 FosterMore foster care advertising campaign in Larimer County - total reach 58,239; leads generated 65.
- November -December 2018 - Adoption awareness campaign - 500,181 impressions; 83 leads generated

The use of photos and stories from current foster and adoptive families is a key element of the recruitment and retention plan. For example, during CY 2018 CDHS produced 10 new family videos that address some of the key barriers and benefits of fostering and adopting Colorado's foster kids. When selecting families to feature, CDHS considers the families' race and ethnicity, experience, dedication to fostering and adoption, and unique story. Additionally, CDHS produced a four-part video series in which foster parents spoke about issues that are known challenges of foster parenting, including grief, working with biological family members, working with caseworkers and self-care.

These videos are shared online at CO4Kids.org, Facebook, and they are made available to counties and CPAs. In addition to sharing stories through videos, CDHS continued two blogs to normalize fostering and adoption and to support recruitment and retention. The Community blog focuses on positive parenting, the community's role in preventing child abuse and neglect, and foster and adoptive family stories. CO4Kids.org also hosts the Parent Partner blog, which provides a space for adoptive parents, foster families and nontraditional families to share their experiences raising children and youth who have experienced abuse and neglect. The blog seeks to create an online platform to elevate the authentic voices of families involved in child welfare. CDHS publishes a monthly foster, adoptive and kinship parent email newsletter that aggregates the blog posts and provides additional information from the child welfare field. In CY 2018, the newsletter has an average open rate of 26.4 percent.

Community outreach is an integral part of Colorado's recruitment and retention plan. In FFY 2018-2019, CDHS collaborated with county departments of human/social services, child placement agencies and community partners to participate in community events that identified targeted outreach populations. The events include:

- Denver March Powwow (March 2019)
- Cinco de Mayo (May 2019)
- Denver PrideFest (June 2019)
- Juneteenth (June 2019)
- Pueblo Chile and Frijoles Festival (September 2019)

In addition, CDHS awarded \$150,000 in recruitment and retention grants to 30 county departments of human/social services and CPAs. The grants are administered through the CDHS Recruitment and Retention Local Innovation Fund, which provides short-term funds for efforts or activities that align with each county or organization's diligent recruitment plan. In previous years, requests for funding far exceeded the grant requests, so CDHS increased the total program budget. As a result, the average award amount was \$5,000, compared to \$1,708 the year prior.

Finally, appreciation is a key element to Colorado's recruitment and retention strategy. CDHS hosts annual celebration events during National Foster Care Month and National Adoption Month to recognize families for their contribution to the community. During the National Adoption Month luncheon at the Governor's Mansion in November 2018, CDHS Executive Director Bicha recognized five families from across the state for their commitment to provide permanent homes to children. Further, in May 2019 the Department recognized five families as part of National Foster Care Month. These families represented several Colorado counties and were honored for their dedication to Colorado's children in foster care. At each event, honorees were presented with plaques in recognition of their exceptional dedication to foster care and adoption, and videos showcasing the families were shown during the ceremony. Each event is attended by approximately 100 guests, including elected officials, CDHS representatives, county caseworkers and family members. These events and

the families are leveraged to earn media coverage. In CY 2018, coverage of CDHS's recognition events garnered 10 news stories.

### ***Health Care Oversight and Coordination Plan***

In FFY 2018 Colorado's progress in implementing the 2015 - 2019 Health Care Oversight and Coordination Plan focused on the following goals:

- Improve the accessibility and continuity of health care services for children and youth in OOH care;
- Effective and continuous oversight of psychotropic medication prescribing to our youth, while exploring alternative therapies; and
- Development of the current best evidence-based physical and mental health practices, including use of the latest technology, making Colorado a leader in the healthcare field for youth in OOH care.

The Well-Being Outcomes section of the 2018 CFSR Statewide Assessment included information about CDHS' continuous quality improvement efforts related to initial and ongoing physical and mental health care for children and youth in foster care.

The Medical Oversight Unit assisted various counties that were having difficulty finding appropriate OOH placements for several youth with acute mental and behavioral health issues, including youth with a DD/IDD diagnosis. In all cases, the youth were successfully placed after periods of time ranging from one to several meetings within a month. These meetings involved representatives from HCPF, DCW Placement Services Unit, OCYF Medical Oversight Unit, county supervisors, county caseworkers, hospital leadership, doctors and social workers, teachers, occupational therapists, counselors, parents, treatment facility supervisors and others involved with these youth. Unfortunately, most of these placements resulted in more expensive out-of-state care due to in-state residential placements refusing to admit these youth. Based on this, the OCYF Medical Director connected with experts from other states to help form a plan for finding incentives for in-state facilities to provide acute-level treatment care, and keeping the youth near family and within their home communities as much as possible while potentially saving millions of dollars for CDHS.

The passage of HB 18-1328 on April 30, 2018 approved the transfer of the Children's Habilitation Residential Program (CHRP) to HCPF, effective July 1, 2018. This transfer is a partnership between CDHS and HCPF and will continue to offer children/youth that have developmental disabilities and extraordinary needs services without having to come into the child welfare system. In addition, SB 18-254 Child Welfare Reforms provided a legislative mechanism to develop an in-state placement for youth with DD/IDD needs.

In FFY 2018, the OCYF Medical Oversight Unit, under the guidance of the OCYF Medical Director, principal author, HCPF Chief Medical Officer & Client & Clinical Care Office Director, with input from the Psychotropic Medication Steering Committee members, Community Behavioral Health, the Ministry of Children & Youth Services in Ontario, Canada, Correctional Health Partners (CHP), current and former foster parents, DCW leadership and the DCW Adoption supervisors, published the updated 2017 Colorado Guidelines for Psychotropic Medication Use for Children and Adolescents in Colorado's Child Welfare System which reflect:

- More detailed data on psychotropic prescribing, such as trending prescribing patterns over time;
- Decision aids for obtaining mental health services;
- New guidelines and treatment algorithms; and
- Progress made pursuing nationally-recognized standards for appropriate prescribing of psychotropic medication.

Psychotropic prescribing increased overall for all Medicaid youth in Colorado between 2012 -2013 and 2015 - 2016, but increased at a lower rate for youth in foster care. This update also showcases decision aids for obtaining mental health services for children and youth in OOH care and for obtaining consent to treat for mental health. Treatment algorithms for common forms of mental illnesses have been adapted from Seattle Children's Hospital, as have standardized side effect rating scales from the Ministry of Government Services in Ontario, Canada. The 2017 guidelines include best prescribing practices, show instances of prescribing patterns that are likely to trigger a review and prior authorization from Medicaid, and discuss prescribing practices that may in the future be considered for prior authorization.

The 2017 guidelines discuss a number of developing initiatives aimed at providing improved mental health access and prescribing practices, such as ECHO modules to train pediatricians about safe prescribing, a child psychiatric consultation hotline to aid the informed consent process and telehealth to increase access to care.

### ***Disaster Plan***

Colorado was not affected by a statewide disaster during this reporting period.

### ***Training Plan***

All updates to the Training Plan are documented in the *Child Welfare Training System* section of this report. The updated Training Plan is attached; see Appendix F.

## XII. STATISTICAL AND SUPPORTING INFORMATION

This section reports statistical and supporting information that is required by the ACF's program instruction related to the 2019 APSR (ACYF-CB-PI-19-02).

### *Information on Child Protective Service (CPS) Workforce*

As a state supervised, county administered child welfare system, Colorado's CPS workforce is hired and maintained through the state's county departments of human/social services. Education and training requirements for the state's CPS workforce are outlined in Volume 7 of the Code of Colorado Regulations. In order to meet the minimum educational requirements of a human behavioral science degree, the applicant must have a degree with major coursework (equivalent to 30 semester hours or 45 quarter hours) in either development of human behavior, child development, family intervention techniques, diagnostic measures or therapeutic techniques such as social work, psychology, sociology, guidance and counseling and child development. The Child Welfare Training Unit reviews credentials and experience as part of the caseworker certification process and ensures Volume 7 requirements are upheld.

As of July 1, 2015, the initial child welfare training program is called the Fundamentals of Child Welfare Casework Practice. All new county caseworkers are required to complete a 5-course series and transfer of learning activities along with a simulation exercise that allows them to interact with hired actors in a family environment mimicking an initial in-home visit. This allows the opportunity for self-evaluation as well as the opportunity for facilitators and county staff to evaluate their competencies and areas for growth when engaging with families and assessing for safety.

The 2019 APSR program instruction requests information on the education, qualifications and training requirements established by the state for child protective service professionals, including requirements for entry and advancement in the profession, including advancement to supervisory positions; data on the education, qualifications and training of such personnel; and demographic information of the child protective service personnel. CDHS does not currently maintain this specific information about county departments' workforce. The Trails Modernization project, however, will allow CDHS to track more information on the demographics of the state's CPS personnel. Modernized Trails will require users to input their gender and date of birth. Users may also choose to input information on their level of educational attainment. This information will not be required at the state level, although counties may choose to require their staff to input this information. As modernized Trails implementation is continued statewide throughout CY 2018, more information about the state's CPS workforce will be available for reporting.

CDHS does collect demographic information about new caseworkers who are completing the Fundamentals of Child Welfare Casework Practice training requirements. In particular, CDHS will continue to use information on the race and ethnicity of new child protective services personnel and educational degree type from the Child Welfare Training System. Oversight of this data is now managed by CWTS through a contract with the Kempe Center. The following tables provide information about learners who were enrolled in the *Fundamentals Practice Simulation* course in CY 2018.

*Table 18: Calendar Year 2018 Trainees - Gender*

*(source: CWTS, March 2019)*

Response	Frequency	Percent
Female	4201	73%
Male	1508	26%
Gender Nonconforming	14	0%
I prefer not to answer	46	1%
Grand Total	5769	100%

*Table 19: Calendar Year 2018 Trainees - Race/Ethnicity*

*(source: CWTS, March 2019)*

Response	Frequency	Percent
White	4556	80%
Black or African American	386	7%

Asian	95	2%
Native American or Alaska Native	65	1%
Native Hawaiian/Pacific Islander	28	0%
Other	144	3%
I prefer not to answer	455	8%
Grand Total	5729	100%

Response	Frequency	Percent
Hispanic or Latino	886	15%
Non-Hispanic or Latino	4445	77%
I prefer not to answer	434	8%
Grand Total	5765	100%

Table 20: Calendar Year 2018 Trainees - Education Type

(source: CWTS, March 2019)

Response	Frequency	Percent
Social Work	1041	24%
Related Degree (e.g., psychology, counseling)	1553	36%
Other	1777	41%
Grand Total	4371	100%

Table 21: Calendar Year 2018 Trainees - Educational Level

(source: CWTS, March 2019)

Response	Frequency	Percent
High School or GED	951	16%
Associate's Degree	405	7%
Bachelor's Degree	2479	43%
Master's Degree	1584	27%
Other	361	6%
Grand Total	5780	100%

In addition to demographic information about Colorado's CPS personnel, the 2019 APSR program instruction requests information on the caseload or workload requirements for such personnel. There are no formal caseload or workload requirements in Colorado; however, CDHS contracted with ICF International and Walter R. McDonald & Associates, Inc. to conduct a caseload study and recommend caseload standards as a follow-up to their 2014 Child Welfare County Workload Study. The final report was issued in March 2016, and the table below includes their recommendations. CDHS, in collaboration with the Child Welfare Allocation Committee (CWAC), is using these recommendations to allocate new child welfare caseworker positions approved by the Colorado General Assembly to counties with the greatest staffing needs. CWAC has also conducted a salary survey to gather information on each county's workforce numbers and will use this information, in addition to the caseload study, to determine allocation of additional caseworker positions. In SFY 2017, 84 new caseworker positions were allocated to 15 counties and in SFY 2018, 67 new caseworker positions were allocated to 15 counties.

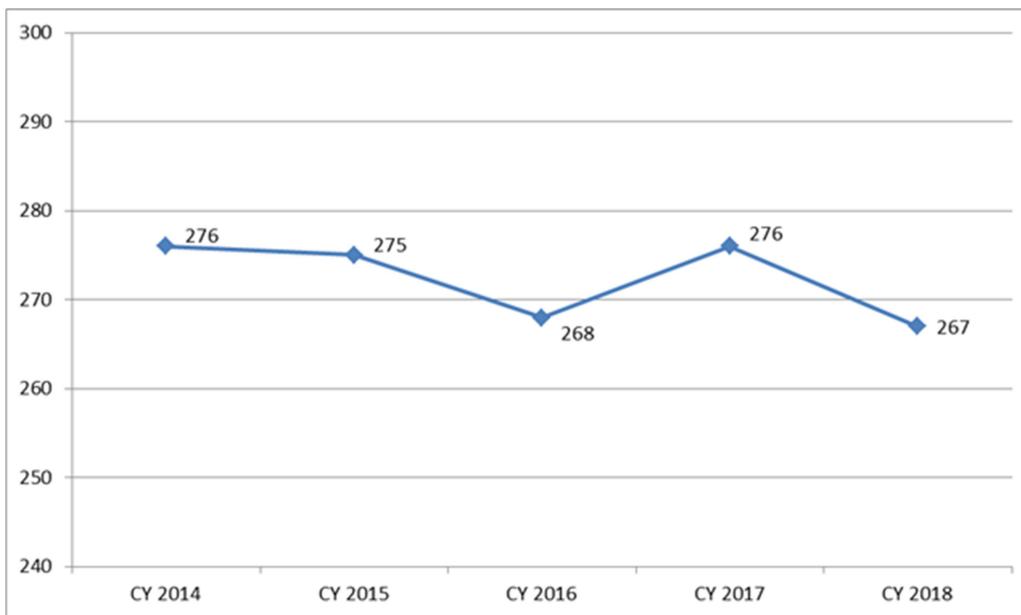
*Table 22: Division of Child Welfare Caseload Study - caseload recommendations by service type  
(source: caseload study, March 2016)*

Service Type	Colorado Caseloads per Worker	
	2014 Time Study Results	Recommended per SMEs
Screening	42	36
Family Meetings	28	12
High Risk Assessment	22	15
Family Assessment Response	29	13
Ongoing, In-home	21	14
Ongoing, Out-of-home	16	8
Visitation	19	8
Adoption	24	9
Licensing	23	10

### ***Juvenile Justice Transfers***

Between January 1 and December 31, 2018, there were 267 children/youth in the State of Colorado who had custody transferred from the local county department of human/social services to the state juvenile justice system. This information is documented in Trails, which is used by both the child welfare and juvenile justice systems. CDHS counted all children and youth who were being served in an OOH placement by county departments and were subsequently committed to DYS during CY 2018. These data may include delinquent youth who were court-ordered to Title IV-E eligible community placements. The following figure provides juvenile justice transfers data from CY 2014 to CY 2018.

*Figure 5: Number of children and youth transferred from CDHS to DYS (source: Trails, 2/13/2019)*



#### **Sources of Data on Child Maltreatment Deaths**

The annual NCANDS submission consists of two data files: the child file and the agency file. Data for the child file are pulled directly from Trails. Fatality data for the agency file are collected from the Child Fatality Review Team (CFRT), which is housed in CDHS' ARD. The CFRT provides data on child fatalities not reported in the child file. CDHS' NCANDS liaison is tasked with reconciling and providing commentary regarding any differences between the list provided by ARD and what is reported in the child file.

In addition to the CFRT, the Colorado Department of Public Health and Environment (CDPHE) maintains a child fatality review process through the Colorado Child Fatality Prevention System (CFPS) that is broader in scope than CDHS' process. The CFPS looks at all preventable fatalities of children ages 0-17 that occur in the state, while CFRT focuses only on child abuse and neglect cases known to county departments of human/social services. Both agencies collaborate to share data from each system and make joint recommendations for systemic improvements based on their findings.

#### **Education and Training Vouchers**

The number of youth who received ETV awards is reported in the *Chafee Foster Care Independence Program* section of this report on page 58.

#### **Inter-Country Adoptions**

All children, youth, and their families who are indicated in reports of child maltreatment, regardless of their familial status or countries of origin, are eligible for child welfare services. The Code of Colorado Regulations requires county caseworkers to ask if children involved in reports of child maltreatment are adopted; however, there is not a requirement to ask if the children were adopted from other countries. As a result, CDHS does not have reliable data on children who were adopted from other countries and entered Colorado's child welfare system. Efforts to address this gap in data collection include a change in the statewide database to create a mandatory data field to capture this information.

#### **Monthly Caseworker Visit Data**

Monthly caseworker visit data for FFY 2019 will be reported separately and submitted by the December 2019 due date.

### **XIII. FINANCIAL INFORMATION**

Colorado's CFS-101, Parts I, II, and III are submitted with this report as separate files. CDHS included on the forms information regarding number of individuals, families, population, and geographic areas to be served wherever possible; however, data for some services/activities are not readily available. Title IV-B, subpart 1 are allocated to Colorado counties through a block allocation that also includes Title IV-E and state funds; therefore, it's not possible to parse out the number of individuals, families, population, and geographic areas served through those funding streams. CAPTA funds are allocated to CDHS and are used for interventions and programs at the county level. CAPTA funds are available to be used by all 64 Colorado counties. However, because CAPTA funds cannot be used for direct client services there is no way to determine the number of individuals or families served by the funds.

As noted in the Update on Service Description section, CDHS continues to work to improve data collection related to the

title IV-B, subpart 2 PSSF grant. There are multiple methods of collecting data, and data related to one-time services may include duplicate counts of individuals served in other PSSF service areas. It is anticipated that enhancements through the Trails modernization project and implementation of the new OEC information system will resolve these issues. As a result, more reliable data will be available to report on future CFS-101 forms.

As PSSF sites are determined through a competitive procurement process, it's not possible to anticipate the geographic areas where services will be available until after the procurement process is completed. This information is included on line 6 of the CFS-101, Part III form which covers FFY 2014. An estimate for FFY 2020 is not available.

Lastly, CDHS is not able to separate out foster care maintenance expenditure estimates between foster family and relative foster care and group/institutional care at this time. The data sharing between Trails and the state's financial information systems complicates attempts to cleanly separate expenditures between the two categories. For this submission, the expenditure estimates for both categories are reported on line 7 (a) of the CFS-101, Part II form.

Also per the program instructions, FFY 2015 state and local share expenditures for the purposes of Title IV-B, subpart 2, amount to approximately \$1,342,279.85.

The CFS-101 Part II form references Population A and Population B in *column (k) - Population To Be Served*. For the purposes of this form, Population A includes all children and youth in foster care, while Population B includes all children and youth who are eligible for funds per rules in Volume 7 of the Code of Colorado Regulations.