State of Wisconsin
2015-2019
Child and Family Services Plan

June 30, 2014

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Documents Sent Under Separate Cover:

**Targeted Plans within the CFSP as per Program Instructions, Page 38, targeted plans to be sent separately.**

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

**CAPTA State Plan Updates**

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Midwest Child Welfare Implementation Center Project Report
GLOSSARY OF ACRONYMS

Act 109 = 2001 Wisconsin Act 109 enacted in July 2002 that provided additional state statutory direction for implementation of AFSA and federal Title IV-E requirements.

AFCARS = Adoption and Foster Care Analysis and Reporting System. The Federal foster care data system, where states submit information, is a source of permanency and placement data.

ASFA = Adoption and Safe Families Act, particularly the ASFA requirement to pursue termination of parental rights after a child has been in out-of-home care for 15 months.

BMCW = Bureau of Milwaukee Child Welfare in the Division of Safety and Permanence in the Department of Children and Families, the state-operated child welfare agency for Milwaukee County.

BITS = Bureau of Information Technology Services in the Division of Management Services (DMS).

BPOHC = Bureau of Permanence and Out-of-Home Care that coordinates the state adoption program, provides technical assistance on foster care, out-of-home care, and independent living services, and licenses child welfare facilities.

BPM = Bureau of Performance Management in the Division of Management Services responsible for Continuous Quality Improvement, Performance Review and Evaluation, and Research/Program Evaluation.

BRO = The Bureau of Regional Operations in the Division of Management Services works with local agencies administering DCF programs, including child welfare, child care subsidy, child support, and W-2 financial assistance.

BSWB = Bureau of Safety and Well Being in DSP, the state unit responsible for child welfare program policy and practice standards.

CFSR = Federal Child and Family Services Review.

CFS 40 = DSP form used to collect information on child abuse and neglect investigations previously used by Wisconsin to collect data for NCANDS purposes.

Ch. DCF 43 = DSP administrative rule on child welfare staff training.

Ch. DCF 44 = DSP administrative rule on reasonable efforts and permanency planning.

Ch. DCF 56 = DSP administrative rule on foster home licensing.

Chapter 48 = Wisconsin Children’s Code.

Chapter 938 = Wisconsin Juvenile Justice Code.

Child Welfare State Professional Development Council = a decision making Executive Committee that consists of representatives from DSP, Counties, BMCW, and Tribes that coordinate child welfare
professional development activities through the Wisconsin Child Welfare Professional Development System.

Child Welfare Professional Development System = University-based, regional child welfare training providers operating under the State’s Professional Development Council.

Counties = County human or social service departments providing child welfare services.

COKC = Court-ordered Kinship Care placements for which providers receive a monthly payment.

CPS = Child protective services.

CY = Calendar Year (January – December).

DCF = Department of Children and Families. The new Department was created in July 2008 and includes child welfare services, including prevention, Temporary Assistance for Needy Families (W-2), child care regulation and licensing, and child support.

DCFS = Former Division of Children and Family Services in the Department of Health and Family Services. In July 2008, the Division moved in its entirety to the new Department of Children and Families and its name was changed to the Division of Safety and Permanence. In addition, child welfare programming originally coordinated by DCFS was spread out amongst several Divisions/Offices in the new Department.

DHCAA = Division of Health Care Access and Accountability in the Department of Health Services, the state Medicaid agency in Wisconsin.

DHFS = Former Department of Health and Family Services. Prior to July 2008, child welfare services were part of the Department of Health and Family Services.

DHS = Department of Health Services. Department that coordinates health services for the state of Wisconsin, including Medicaid, mental health and substance abuse services, and the Food Share program.

DMS = Division of Management Services. Division that is responsible for budget, finance, human resources, information technology, performance management, and regional operations.

DSP = Division of Safety and Permanence in the Department of Children and Families, the state child welfare agency in Wisconsin.

FAST = Families and Schools Together. An approach to serving children and families in a comprehensive way that actively engages parents.

FFY = Federal Fiscal Year (October – September).

Foster Care and Adoption Resource Center = Statewide resource center that provides information and materials on foster care and adoption.

GPR = General Purpose Revenues from state tax revenue.

Kinship Care = Payment program to support children living with relatives.

NCANDS = National Child Abuse and Neglect Data System. The Federal child abuse and neglect data system is a source of safety data submitted by states.

Ongoing Services Standards = The 5 Child Protective Services Standards and Practice Guidelines issued by DSP that establish program standards for ongoing child welfare services.

OYS = The Office of Youth Services was created in 2012 to help youth in the child welfare system and other vulnerable youth excel in school, obtain job skills and opportunities and learn healthy lifestyle behaviors. OYS is responsible for the Chafee Programs, Brighter Futures Initiative, Title V Abstinence Education Grant, Runaway Programs and other youth development initiatives.

OOHC = Out-of-home care including children placed under court order in foster care, group homes, residential care centers and kinship care. This is equivalent to the federal definition of foster care.

PACE = Partners in Alternate Care, now Foundations Training, which is a competency-based pre-service training curriculum for foster and adoptive parents.

PARC = Post-adoption resource center.

PIP = Wisconsin Program Improvement Plan for Round 2 of the federal CFSR.

PIP Implementation Team = Statewide multidisciplinary group for implementation of the PIP.

Rate Regulation = Payment system that ensures that providers are licensed to provide a certain level of care, based on the types of services they offer, and receive a pre-defined amount for providing those services to a child who needs them.

SNAP = Special Needs Adoption Program operated by DSP.

TPR = Termination of parental rights.

eWiSACWIS = Wisconsin Statewide Automated Child Welfare Information System (SACWIS system).

eWiSACWIS Project Team = Staff supporting operations of eWiSACWIS system.

WICWA = Wisconsin Indian Child Welfare Act.
D1. General Information

a. Programs Included
b. State Agency administering the program

Programs Included in the Child and Family Services Five Year Plan

Activities supported through Titles IV-B Subparts 1 and 2, Adoption, Chafee and Education and Training Vouchers, Indian Child Welfare, Kinship Care and Title IV-E Foster Care programs and CAPTA are described in this plan. All requirements of 45 CFR 1357 are included within this plan. The plan also includes objectives for the Adoption Program and priorities for coordinating with the 11 federally recognized tribes in Wisconsin on Indian Child Welfare services. The plan further describes the collaborative planning, compliance with ICWA and consultation between the state and tribes relating to the Chafee Foster Care Independence Program.

The plan is based on the findings of Wisconsin’s last Child and Family Services Review and includes stakeholder feedback. Information on state achievement of national performance standards and case-related outcomes are included in the report.

Data Sources

In accordance with 45 CFR 1355.53, Wisconsin utilized its Statewide Automated Child Welfare Information System (eWiSACWIS) in developing the 2015-2019 Plan. In addition, the following data sources were used by the Division to evaluate Wisconsin’s child welfare performance and activities:

- Quality Services Review (QSR) Database and Qualitative Review Feedback
- Children’s Court Improvement Project (CCIP) Review Data
- Information and reports from counties, tribes, and others, primarily related to program evaluation and analysis
- Data from DCF KidStat Performance Measurement Process

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The Wisconsin Department of Children and Families is the state agency dedicated to promoting the social and economic well-being of Wisconsin’s children, youth and families. The Department is committed to protecting children, strengthening families and building communities. The Department has responsibility for the human service program areas of child and family services, child welfare, child care subsidy, child welfare and child care licensing, Temporary Assistance for Needy Families and child support. The Department organizational chart is available at: [http://dcf.wisconsin.gov/org_structure.htm](http://dcf.wisconsin.gov/org_structure.htm)

**Organizational Structure**

*Division of Safety and Permanence*

Children, youth, and family services are located in the Division of Safety and Permanence (DSP), the unit within the Department responsible for Title IV-B Subpart 1 (Child Welfare Services), IV-B Subpart 2 (Promoting Safe and Stable Families), Title IV-E (Foster Care and Adoption Assistance), Child Abuse Prevention and Treatment Act (CAPTA), Chafee Foster Care Independence Program (CFCIP) and Chafee Education and Training Vouchers (ETV).

The DSP is responsible for supervising Wisconsin’s child welfare system. Services are delivered through county- and tribal-administered child welfare programs, except Child Protective Services in Milwaukee County and for the Special Needs Adoption Program (SNAP), which are operated by the state through DSP.

The Bureau of Safety and Well Being (BSWB) within DSP provides policy guidance and statewide leadership on child protective services, including matters related to CAPTA. The BSWB also manages statewide prevention programs for the Department, including Promoting Safe and Stable Families (IV-B Subparts 2), domestic violence programs and the Wisconsin Trauma Initiative. BSWB staff also collaborate with the Department of Health Services (the State Public Health Department) to manage the Maternal Infant and Early Childhood Home Visiting Programs (MIECHV).

The Bureau of Permanence and Out-of-Home Care (BPOHC) within DSP is responsible for oversight and licensing of child placing agencies, group homes, shelter care facilities, residential care centers for children and youth and provides policy guidance and statewide leadership on foster care and kinship care programs. BPOHC also administers the special needs adoptive program, and the adoption search program, and the Interstate Compact on the Placement of Children (ICPC). BPOHC also administers the Permanency Roundtable program and the initiatives related to health outcomes for children involved in the child welfare system.
The Bureau of Milwaukee Child Welfare (BMCW) within DSP delivers child welfare services in Milwaukee County, the state’s most populous county. The state-administered services in Milwaukee County are delivered using DSP staff for intake and initial assessment functions. Contracted service providers provide in-home safety services, ongoing case management, adoption and foster home placement and licensing, and post-reunification services. BMCW delivers child protection, foster care, adoption, kinship care and independent living services in accordance with state policies established by the BSWB and BPOHC.

The Program Operations Section within DSP is responsible for federal data reporting, program outcome monitoring, Title IV-E eligibility, and administration of the Title IV-E demonstration project.

The Office of Youth Services (OYS) was created by the Department in 2012 to bring a stronger and more coordinated program and policy focus to youth in the child welfare system and other vulnerable youth. The Office directly oversees the, the federal Chafee Independent Living Program, Educational and Training Vouchers Program (ETV), the Wisconsin Brighter Futures Initiative, Title V Abstinence Education Grant, the NYTD program, Runaway Programs, the ACF Children’s Bureau, Planning Grant to Develop a Model Intervention for Youth/Young Adults At-Risk of Homelessness and other youth development efforts.

**Division of Management Services (DMS)**
Administration of the eWiSACWIS, the state child welfare data system is located in the Bureau of Information Technology in the Division of Management Services (DMS). The Bureau of Budget and Policy, Finance, Human Resources, Regional Operations and Performance Management are also located in DMS.

Quality improvement activities, including the review of county child welfare agencies and the BMCW, are undertaken by the Bureau of Performance Management.

Bureau of Regional Operations staff are also involved in child welfare program quality assurance on behalf of DCF.
Outcomes

We will operate with a goal of achieving the following outcomes for all children, youth and families who are touched by our system:

- Children are cared for in safe, permanent, and nurturing families who have the necessary skills and resources to provide for their physical and mental health, behavioral and educational needs.

- Through effective intervention, parents, caregivers and families improve their ability to develop and maintain a safe, stable environment for their children.

- Children, youth and families who we encounter are supported to achieve equitable outcomes regardless of race, ethnicity, socioeconomic status, tribal status, or geography.

- Children are safely maintained in their own home, families and communities with connections, culture, and relationships preserved and established. When it is necessary to place children in out of home care, it is a safe, short and stable experience.

- Wisconsin’s public child welfare staff is a diverse, professionally competent team that uses family-centered practice and demonstrates inclusiveness at all levels.

- These outcomes are achieved through partnerships involving Wisconsin’s public child welfare system, the state’s children, youth and families as well as the communities in which they live and work.

Values and Principles

To achieve the outcomes identified above, we are committed to, and guided by, the following values and principles:

**Safety:** Child safety is paramount and best achieved by supporting children and families within their community.

**Permanence and Stability:** Children and youth need and have the right to lifelong nurturing and secure relationships that are provided by families who can meet their specific needs. Efforts to identify and secure permanency are continuous and integrated into all stages of involvement with children, youth and families.

**Fostering Connections for Youth:** As youth transition to adulthood, they benefit from services that promote healthy development, academic success and safe living conditions, as well as establish connections to caring adults who will commit to lasting supportive relationships.

**Well-Being:** Children’s well-being is dependent upon strong and developing families and communities who are meeting their physical, mental, behavioral health, educational and cultural needs.
**Family Centered:** Families are the primary providers for children’s needs. The family is meaningfully involved with the child welfare system throughout the life of the case in a respectful and responsive manner that builds upon its strengths.

**Respectful Interactions:** Children, youth and families are best served when we educate them regarding the child welfare process, actively listen to them and invite participation in decision making, and empower them to meet their unique and individual needs. Agency practices, service delivery, communications and actions are easily understood and mutually developed.

**Cultural Responsiveness:** Cultural responsiveness is achieved through understanding and serving children, youth, and families within the context of each unique family and community. This includes, but is not limited to, families’ beliefs, values, race, ethnicity, history, tribe, culture, religion and language.

**Partnership:** Families, communities, and the child welfare system are primary and essential partners in creating and supporting meaningful connections for children and youth in safe and nurturing environments.

**Organizational Competence:** Wisconsin’s child welfare agencies will perform as high quality organizations, guided by a clear mission, priorities and resource allocation, with committed, qualified, trained and skilled staff, management, leadership and providers.

**Accountability:** Wisconsin’s child welfare system holds itself accountable to the highest standards of practice. We recognize our responsibility to children, youth, families and other stakeholders to assess and manage our performance, self-correct, innovate and enhance our ability to achieve positive outcomes through continuous improvement efforts. We manage our resources efficiently, because we value good stewardship of the public trust. We also recognize the need for our practices, service delivery and performance to be easily understood, evaluated, and open to feedback from our stakeholders.
Wisconsin has a strong structure and culture of cross-system and public-private collaboration. To assure effective and comprehensive delivery of service, Wisconsin will build on and reinforce its collaborative efforts and partnerships over the next five years. When the new department was created in 2008, DCF became the home for the child welfare, child care program, the Temporary Assistance to Needy Families Program and the Child Support programs. The creation of the new Department heightened the attention and focus on children and families, and stimulated policy alignment and coordination among these child and family-serving programs that has streamlined communication and collaboration with these critical programs. In addition, DCF collaborates closely with other state agencies, local public partners, and private sector stakeholders. Stakeholder groups are provided and encouraged to review and assess state data, agency strengths and challenges and were key partners in shaping the Child Welfare Practice Model that serves as the core of the state’s plan for improvement. This was accomplished through multiple mechanisms as described in this section. This valued input will continue in the implementation of goals and monitoring of progress over the next five years and is also described in this section.

Comprehensive Councils

The Secretary of the DCF has established an Advisory Council on Child Welfare that convenes key leaders in child abuse prevention and protective services from across the state to provide advice and counsel to the Department on matters related to protecting vulnerable children and strengthening the child protective services system, including issues related to current and former foster youth and at-risk youth. The Council meets quarterly and is composed of county and tribal representatives, private sector service providers, advocates, representatives from the mental health and correctional systems, former foster youth, and foster parents. The purpose of the Secretary's Council on Child Welfare is to advise the Department’s Secretary regarding policy, budget and program issues that impact the safety, permanence and well-being of Wisconsin's children and families.

As noted above, DCF directly administers the child welfare system in Milwaukee County, the state’s largest county. The Milwaukee Child Welfare Partnership Council is a broad-based advisory body, established by statute in 1998, which advises the Department on its administration of the child welfare system in Milwaukee County. The Partnership Council meets six times per year and is composed of state legislators, county elected officials, members of the judicial and legal systems, health care and child welfare service providers, the birth to five system, advocates, community members, representatives from the K-12 educational system, and representatives from the mental health and alcohol and other drug abuse (AODA) system. The Partnership Council is charged with recommending policies and plans for the improvement of the child welfare system in Milwaukee County, recommending measures for evaluating the effectiveness of the child welfare system in Milwaukee County, including outcome measures, and recommending funding priorities for the child welfare system in Milwaukee County.

Collaboration on Policy and Practice Initiatives

The Division engages in ongoing consultation with local agencies, tribes and key stakeholders that are part of the state’s child welfare program, mainly through the implementation of specific policy or program initiatives. Collaborative broad-based workgroups chaired by the DCF include Casework and OHC/Adoption Committees, Rate Regulation Advisory Committee, Title IV-E Waiver Advisory Group, PATHS (federal youth homelessness grant) Advisory Group, and other workgroups. In addition,
Department Regional Office staff hold regular meetings for local child welfare agency foster care coordinators, child welfare program supervisors and fiscal managers to update them on policy and procedures and provide a forum for discussion of current child welfare issues for both state and local child welfare agencies.

The Department regularly works with groups representing key constituencies in the child welfare program to identify and resolve issues. These groups include, but are not limited to, the Wisconsin County Human Services Association, the Wisconsin Foster/Adoptive Parent Association, the Wisconsin Association of Family and Children's Agencies, the Great Lakes Inter Tribal Council, the Children’s Court Improvement Project, the Children’s Trust Fund, the Early Childhood Advisory Council (ECAC) and other state agencies. The Wisconsin Department of Children and Families also supports a Youth Advisory Council (YAC) for current and former foster youth. The statewide YAC meets quarterly and is composed of thirteen members. In addition, local YAC groups have been established in four counties across the state. Local YACs meet monthly to influence policy change and to educate communities and the DCF about youth experiences in foster care. The Youth Advisory Council set as its current priority reaching out to and advocating for children currently in the foster care system and eliminating the stigma attached to being a foster child.

Priority items for the Department in its collaboration with stakeholders include: implementing trauma-informed care principles in systems serving children and families; increasing parental engagement of fathers, teen moms and incarcerated parents; ensuring developmentally appropriate care for the youngest children in the child welfare system; strengthening efforts to prevent abuse and neglect; advancing post-permanency supports for children; focusing on reunification; developing a coordinated and comprehensive approach in health services for foster children through the Care for Kids medical home model; improving educational stability and success for foster children; and, supporting coordination efforts with the child care delivery system.

**Cross-Systems Collaborations Targeted to Well-Being Outcomes**

**Health**

As described more fully in the appendix, the DCF and DHS have been collaborating closely to improve the quality, access, and timeliness of health care services to children and youth in out-of-home care through the development of a Medicaid medical home service delivery model called Care4Kids. The Care4Kids program provides comprehensive, coordinated care for children and youth in foster care tailored to each child’s individualized needs. Other collaborative health projects include: the Children’s Behavioral Health Project, which encourages appropriate utilization of psychotropic medications for Medicaid children and youth, and the use of Coordinated Service Teams to coordinate care for children and youth in multiple systems of care.

**Trauma**

A bi-partisan, public-private collaborative called Fostering Futures was formed in the summer of 2011 to promote the integration of trauma-informed practices in all systems affecting children and families. Fostering Futures is an interdisciplinary partnership composed of ten members representing nine organizations, including the Office of the First Lady, the Wisconsin Department of Children and Families (DCF), the Wisconsin Department of Health Services (DHS), Casey Family Programs, SET Ministry community organization, Fostering Hope community organization, Fresh Start child welfare
provider, St. Aemilian-Lakeside mental health and child welfare provider, and Children’s Hospital of Wisconsin medical provider.

As part of the Fostering Futures project, a broad-based statewide Policy Advisory Council has been established to identify and eliminate barriers and establish state policies that support cross-systems collaborative trauma-informed work at the state and community levels. The Council has a total of 14 members composed of the following: executive managers from the five state agencies serving children and families—the DCF, DPI, DHS, Department of Workforce Development (DWD), Department of Corrections and Economic Development and the Governor’s Office; four state legislators, one representative from a Tribal Nation, two judges and the director of the Children’s Court Improvement Project, a former foster youth, and two service provider representatives. The Policy Advisory Council will focus on coordinating and integrating the work of the executive, legislative, and judicial branches.

Education

DCF has an extensive collaboration underway with the state education agency and the court system to improve the educational outcomes of children and youth in the child welfare system. As part of this collaboration, the Departments and judicial system updated a number of policies to promote educational stability, facilitate access to extra-curricular school activities, and promote credit transfers across schools for children and youth in out-of-home care. Under a federal grant, DCF and the DPI are currently engaged in data sharing and other collaborative efforts to strengthen communication and coordination between local schools and local child welfare systems.

Since 2001 DCF has had a cross-system collaborative workgroup to promote the enrollment of former foster youth in post-secondary education. The Foster Youth to College (FYC) advisory group is composed of professionals from child welfare, private colleges, technical colleges, the state university system and the DPI.

Early Childhood

The DCF Secretary and the Superintendent of the Department of Public Instruction, the state education agency, co-chair the Early Childhood Advisory Council (ECAC). The ECAC is a high level stakeholder comprised of public and private leaders that provides advice on the strategic direction for the state’s efforts to promote early childhood development. The ECAC has developed a cross-system agenda that has the overall goal that all young children are safe, healthy and successful. The Division Administrators for the Division of Early Care and Education and Safety and Permanence serve on the Early Childhood Advisory Council.

Employment

DCF is engaged in collaboration with other state agencies and external stakeholders to promote the employment of youth with disabilities who are on the Supplemental Security Income (SSI) program. Led by the DWD, the collaboration successfully applied for and is now implementing the PROMISE federal demonstration grant from the Department of Education, which is designed to increase the education, career, and income outcomes of children and youth with disabilities receiving SSI and their families.

Other Cross-System Collaboration
The DCF Secretary or Secretary’s designee serves on additional statewide Councils and Workgroups that promote cross-system collaboration and coordination including: the State Council on Alcohol and Other Drug Abuse; the Wisconsin Council on Mental Health, the Council on Offender Reentry, and the Criminal Justice Coordinating Council.

**Citizen Review Panels**

Wisconsin has well-functioning Citizen Review Panels that provide local stakeholder input to the child welfare system. As of 2014, citizen review panels are in place in the following counties: St. Croix, Jefferson, Polk, Marathon, Milwaukee and, Outagamie counties and the Youth Advisory Council. In addition to monitoring the performance of the local child welfare agency, the citizen review panels meet collectively and undertake a annual statewide projects. In 2014, the role of guardian ad litems is the focus of the statewide project.

The Department makes regular reports accessible to stakeholders via the Department’s website related to the following program areas:

- Child and Family Services Plan and Annual Progress and Services Report
- Annual and monthly child abuse and neglect reports
- Annual and monthly out of home care caseload reports
- Semi-annual reports of BMCW performance
- Dashboards providing information by county on access, child permanency, caseworker visits, provider outcomes, and other measures

**Court System Collaboration**

The Department and the Wisconsin Director of State Courts Office (DSCO) have a long-standing, strong collaboration to support the jointly-held goal of improving the safety, permanency and well-being of children, youth and families in our state. The DCF Secretary serves as a member of the Wisconsin Commission on Children, Families and the Courts, which is a broad-based stakeholder advisory body that provides input on court improvement projects and child welfare related policies and activities. The Children’s Court Improvement Project (CCIP) was actively involved in the state’s child welfare Program Improvement Plan (PIP), developed in response to the Child and Family Services Review (CFSR) conducted in April 2010, both through its development in 2010 and implementation during the 2011-2012 PIP period. The CCIP is participating as a leader or member of a number of cross-system PIP workgroups working on PIP-related legislation and other legal issues.

The DSCO and CCIP continue to provide valuable contributions and feedback related to the Child and Family Services Plan (CFSP), Annual Progress and Services Report (APSR), the CFSR process and to the Department’s title IV-E program improvement initiatives, including the successful federal Title IV-E Eligibility Determination Review conducted in August and September 2011.

With the support of the Casey Foundation, DCF and CCIP collaborated on developing a video entitled *Children in Court: In Their Own Words*, which highlights the court experiences of ten former foster youth. The video was used as a training tool in judicial district trainings throughout the state in 2012 to emphasize the importance to judges of achieving permanency for children and youth in the foster care system, and engaging youth in decisions involving their permanency.
The Department values and is committed to strong collaboration with the judicial branch and the CCIP. The Department will continue to include CCIP representatives as part of CFSR and Title IV-E activities and the development of the CFSP and APSR, and also shares AFCARS and eWiSACWIS administrative data with CCIP on an ongoing basis with the court system.

Additional collaborative efforts with foster youth and the Tribes are described in detail in the Chafee and Tribal information sections of this report. In addition to the consultation process, representatives from the Department and the Division, as well as CCIP, regularly meet with the directors of the tribal child welfare programs for each of the 11 tribes to work on Indian child welfare issues.

The Department and CCIP have developed a continuous quality improvement review process to improve adherence to the Wisconsin Indian Child Welfare Act (WICWA) in the circuit court and child welfare systems. The project also aims to increase collaboration among the circuit courts, tribes, county child welfare agencies, attorneys, and other stakeholders. WICWA, which was enacted in 2009, protects the best interests of Indian children while promoting stability and security of Indian tribes and families.

As part of the WICWA Continuous Quality Improvement project, onsite reviews are conducted in the counties with the greatest number of circuit court cases subject to WICWA. The onsite reviews consist of three data collection methods: court file review, focus groups, and surveys. The findings from each review are presented in the form of a written report and summary presentation approximately three months after the onsite review. Technical assistance is provided to the circuit court after the onsite review in an effort to implement practice enhancements. Wisconsin will continue to collaborate when possible with CCIP and WICWA joint review of counties when schedules permit. Joint reviews have occurred in Shawano, Milwaukee, Bayfield, and Jackson Counties during 2013. Both CCIP and DCF are planning joint reviews Forest, Brown, Ashland, and Vilas Counties in calendar year 2014. Court and agency personnel from these counties will be contacted with additional information about the onsite review.

In May 2012, a partnership was established among the Milwaukee County Children’s Court, the National Council of Juvenile and Family Court Judges (NCJFCJ) and CCIP to initiate the Milwaukee Model Court Project to improve outcomes for children and families. NCJFCJ established the Model Court Project to assist states in bringing together judges, attorneys, social workers and other professionals to identify impediments to the timeliness of court events and delivery of services for families with children in out-of-home care, and then design and implement court- and agency-based changes to address these barriers. Key values of the Model Court Project include judicial leadership, court oversight and due process, multi-system collaboration, child-focused outcomes, and system accountability.

The first step Milwaukee County took toward becoming a Model Court was to assess local practice in relation to the evidence-informed bench book Resource Guidelines: Improving Court Practice in Child Abuse and Neglect Cases.

After reviewing the assessment findings, a multi-disciplinary advisory group, titled the Milwaukee Model Court Collaborative Team, began working toward the following three goals:

- Reduce the number of children entering out-of-home care.
- Increase court case processing efficiency.
Empower social workers in court, which includes establishing a common understanding and definition of safety decision-making based on the publication, *Child Safety: A Guide for Judges and Attorneys.*

The Milwaukee Model Court Project is now co-led by two circuit court judges and the Deputy Director of the BMCW and is premised on the importance of collaboration. Collaborative lessons learned will be shared over the next five years to help inform other communities.

The Children’s Court Improvement Program and judges from Milwaukee County partnered to submit a grant proposal to the National Council of Juvenile and Family Court Judges for Milwaukee County to become a Project ONE demonstration site. Project ONE stands for *One* Family/One Judge, *No* Wrong Door, and *Equal* and Coordinated Access to Justice. Project ONE seeks to develop a holistic approach to addressing the needs of children and families in the court system no matter which jurisdictional “door” of the courthouse – family law, child welfare, domestic violence, juvenile justice, etc. – they enter.

Milwaukee County was selected to be one of six jurisdictions from across the country to assess current practice and pilot new approaches that maximize judicial coordination across case types to promote positive outcomes and prevent unnecessary court involvement. The court system is working closely with BMCW as part of a multidisciplinary advisory committee that is mapping the current case management process in CHIPS, family, and domestic violence cases.

In February 2014, Wisconsin was selected as one of eight Casey Family Programs Judicial Engagement states. The goals of this initiative are to engage judicial systems to support children remaining safely in their homes, timely exits to permanency, full consideration of well-being, and ICWA compliance. The court system will benefit by receiving technical assistance in the following areas: judicial and legal representation best practices, court/agency data integration and analysis, docket management, and Court Improvement Program continuous quality improvement (CQI) standards. A team of consultants from the National Center for State Courts, National Council of Juvenile and Family Court Judges, and the ABA Center on Children and the Law will provide program support. DCF will collaborate with Casey Family Programs and the judicial system on this project over the upcoming years.

**Collaboration across the Three Branches of Government**

The Department has led collaborations across the executive, legislative, and judicial branches of government through participation in two National Governor’s Association (NGA) Three Branch Institutes. In recognition of the unique challenges faced by vulnerable youth, Wisconsin applied for and was accepted to participate in the 2011 National Governors Association Three-Branch Institute on Improving Outcomes for Adolescents in the Child Welfare system. The eight-person core team attending the Institute included the Secretary and members of DCF, senior manager from DOC, state legislators, and members of the judiciary. After attending the Institute, DCF expanded this team to include other stakeholders involved in serving youth, including representatives from the educational system, mental health system, county human service agencies, private sector providers, members of the legal system, former foster youth, and additional representatives from the state child welfare and juvenile justice systems.

In recognition of the profound and lifelong negative impact of adverse childhood experiences, Wisconsin applied for and was accepted to participate in the 2013 National Governors Association Three Branch Institute on Child Social and Emotional Well-being. The core team attending the Institute included the Wisconsin First Lady, the DCF Secretary, the Deputy Secretary of DHS, the CEO of a
community-based family-serving organizations, state legislators, and members of the judiciary. Wisconsin is using this Three Branch Institute to support and advance the work of the Fostering Futures initiative, which is an initiative to strengthen the use of trauma-informed approaches in the state that extends into the upcoming five-year period.
Wisconsin is improving on 10 of the 23 CFSR performance items, holding steady on 11 of the items, and declining on 2 items. Through several mechanisms, such as posting this plan for comment and highlighting the plan at stakeholder meetings, in addition to posting and receiving feedback on federal and state reports that provide both qualitative and quantitative information through stakeholder meetings and communication, DCF receives feedback on the state’s performance with respect to performance items. Many of these efforts are described in 1d., Collaboration. The chart below summarizes Wisconsin’s overall trends on federal CFSR performance items. Each measure is examined in more detail in the sections below. With regard to specific data and specific outcomes, please note that Wisconsin is including case review data in this analysis only when there are no other data to demonstrate trends. As noted later in the systemic factors analysis section following, Wisconsin’s is redesigning its CQI system to measure quality improvement more effectively in the future.

<table>
<thead>
<tr>
<th>Performance Item</th>
<th>CFSR Round 2 Finding</th>
<th>Performance Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 1: Timeliness of CPS investigations</td>
<td>Needs improvement</td>
<td>Improving</td>
</tr>
<tr>
<td>Item 2: Recurrence of maltreatment</td>
<td>Strength</td>
<td>Improving</td>
</tr>
<tr>
<td>Item 3: Services to prevent removal</td>
<td>Needs improvement</td>
<td>Steady</td>
</tr>
<tr>
<td>Item 4: Risk of harm to child</td>
<td>Needs improvement</td>
<td>Improving</td>
</tr>
<tr>
<td>Item 5: Re-entry into out-of-home care</td>
<td>Needs improvement</td>
<td>Steady</td>
</tr>
<tr>
<td>Item 6: Stability of out-of-home care placements</td>
<td>Strength</td>
<td>Steady</td>
</tr>
<tr>
<td>Item 7: Permanency goal for child</td>
<td>Needs improvement</td>
<td>Improving</td>
</tr>
<tr>
<td>Item 8: Reunification, guardianship, and placement with relatives</td>
<td>Needs improvement</td>
<td>Steady</td>
</tr>
<tr>
<td>Item 9: Adoption</td>
<td>Needs improvement</td>
<td>Steady</td>
</tr>
<tr>
<td>Item 10: Other planned living arrangements</td>
<td>Needs improvement</td>
<td>Steady</td>
</tr>
<tr>
<td>Item 11: Placement proximity</td>
<td>Strength</td>
<td>Improving</td>
</tr>
<tr>
<td>Item 12: Placement with siblings</td>
<td>Needs improvement</td>
<td>Steady</td>
</tr>
<tr>
<td>Item 13: Visiting with parents and siblings</td>
<td>Needs improvement</td>
<td>Improving</td>
</tr>
<tr>
<td>Item 14: Preserving connections</td>
<td>Needs improvement</td>
<td>Steady</td>
</tr>
<tr>
<td>Item 15: Relative placement</td>
<td>Needs improvement</td>
<td>Steady</td>
</tr>
<tr>
<td>Item 16: Relationship of child in care with parents</td>
<td>Needs improvement</td>
<td>Improving</td>
</tr>
<tr>
<td>Item 17: Need/services of child, parents, and foster parents</td>
<td>Needs improvement</td>
<td>Improving</td>
</tr>
<tr>
<td><strong>Item 18:</strong> Child/family involvement in case planning</td>
<td>Needs improvement</td>
<td>Improving</td>
</tr>
<tr>
<td><strong>Item 19:</strong> Worker visits with child</td>
<td>Needs improvement</td>
<td>Improving</td>
</tr>
<tr>
<td><strong>Item 20:</strong> Worker visits with parents</td>
<td>Needs improvement</td>
<td>Steady</td>
</tr>
<tr>
<td><strong>Item 21:</strong> Education needs of child</td>
<td>Needs improvement</td>
<td>Declining</td>
</tr>
<tr>
<td><strong>Item 22:</strong> Physical health of child</td>
<td>Needs improvement</td>
<td>Declining</td>
</tr>
<tr>
<td><strong>Item 23:</strong> Mental health of child</td>
<td>Needs improvement</td>
<td>Steady</td>
</tr>
</tbody>
</table>

Safety Outcome SI: Children are first and foremost, protected from abuse and neglect.

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

**Description:**
How effective is the agency in responding to incoming reports of child maltreatment in a timely manner?

**Federal Data Profile:** N/A

**State Data:**

![Figure 1](image)

As seen in Figure 1, based on eWiSACWIS data, the percent of timely responses has increased overall and for each response category from 2010 through 2012. Timeliness is strongest on urgent (i.e., same day and 24-48 hour) cases. Given the higher risks associated with urgent response cases, it is a positive outcome that these cases are addressed in the most timely manner.
Ancillary:
In addition to the standard that all families with screened in cases be contacted within a designated timeframe, s. 48.981(3)(c) Wis. Stats., requires Wisconsin counties to complete all initial assessments within 60 days of receipt of a screened-in child protective services report. As seen in Table 1, below, Wisconsin did not meet this standard in 2010 through 2012. Wisconsin has made significant improvement in the past three years, however, as the State has gone from 45.7 percent compliance to 66.7 percent compliance.

Table 1:
Initial Assessment Timeliness: CY 2010 through CY 2012

<table>
<thead>
<tr>
<th>Year</th>
<th>Initial Assessments Completed On Time</th>
<th>Total Completed Initial Assessments</th>
<th>Percent Initial Assessments Completed On Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>11,470</td>
<td>25,122</td>
<td>45.7%</td>
</tr>
<tr>
<td>2011</td>
<td>13,202</td>
<td>26,415</td>
<td>50.0%</td>
</tr>
<tr>
<td>2012</td>
<td>17,496</td>
<td>26,241</td>
<td>66.7%</td>
</tr>
</tbody>
</table>

Performance Trend: As seen in Figure 1 and Table 1, Wisconsin has made significant improvements in meeting both the timeliness of the first contact with the family, as well as completing the initial assessment on-time. Wisconsin will continue to undertake efforts to improve both timeliness measures.

Item 2: Absence of maltreatment recurrence

Description:
How effective is the agency in reducing the recurrence of maltreatment in children?

Federal Data Profile:
The figures below represent the number of victims during the first six-month period and the number of these victims who were recurrent victims within six months.

<table>
<thead>
<tr>
<th>Child Safety Profile</th>
<th>FY2011</th>
<th>FY2012</th>
<th>FY2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>VI. Absence of Recurrence of Maltreatment [Standard: 94.6% or more]</td>
<td>95.4%</td>
<td>95.6%</td>
<td>96.0%</td>
</tr>
<tr>
<td>XII. Recurrence of Maltreatment [Standard: 6.1% or less]</td>
<td>4.6%</td>
<td>4.4%</td>
<td>4.0%</td>
</tr>
</tbody>
</table>

State Data:

Figure 2:
Absence of Maltreatment Recurrence within Six Months: CY 2010 through CY 2012
Federal measures require that at least 94.6 percent of children involved in CPS experience no repeat maltreatment within six months of the original maltreatment substantiation. While performing slightly below the federal benchmark in CY2010, Wisconsin improved its performance and surpassed the measure in CY2011 and CY 2012 at 94.88% and 95.03%, respectively.

Table 3:

Ancillary: N/A

Performance Trend:
As seen in Table 2, both the overall maltreatment substantiation rate and recurrence of maltreatment substantiation rate have decreased from 2010 through 2012.
Safety Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.

Item 3: Services to family to protect child(ren) in the home and prevent removal or re-entry into foster care

Description:
How effective is the agency in providing services, when appropriate, to prevent removal of children from their home?

Federal Data Profile: N/A

State Data:

Table 4:
Unduplicated Child Removals to OHC during Initial Assessment (IA): CY 2010 through CY 2012

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Child Removals</th>
<th>Number of Children Assessed in IA</th>
<th>% of Child Removals for IA Performed</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>2,567</td>
<td>33,436</td>
<td>7.7</td>
</tr>
<tr>
<td>2011</td>
<td>2,731</td>
<td>32,083</td>
<td>8.5</td>
</tr>
<tr>
<td>2012</td>
<td>2,578</td>
<td>33,289</td>
<td>7.7</td>
</tr>
</tbody>
</table>

As seen in Table 4, the number of children removed from their homes during initial assessment and placed into out of home care increased from 2,567 children in 2010 to 2,731 children in 2011 and then decreased to 2,578 children in 2012. Similarly, as a percentage of the total number of children that were included as alleged victims as part of an IA, the percentage of child removals of the children who were subjects of an IA increased in 2011 from 2010 and then decreased again in 2012. Please note that Table 4 details the number of unique children removed to out of home care, and does not count the number of actual removals, which may be more.

Ancillary:

Wisconsin has undertaken actions to strengthen its capability and service array to support children in their own homes, whenever possible. Specifically, in 2012 Wisconsin initiated an in-home safety services pilot program in interested non-Milwaukee counties and in July 2013 redesigned the in-home safety services program in Milwaukee to improve its effectiveness.

Performance Trend:

QSR practice indicators show improvements in this item between pre CFSR Round 2 and post CFSR Round 2 case reviews.

Item 4: Risk assessment and safety management

Description:
How effective is the agency in reducing the risk of harm to children, including those in foster care and those in their own home?
Federal Data Profile: N/A

State Data: N/A

Case Review Data:

In QSR reviews, item 4 was rated as follows:

<table>
<thead>
<tr>
<th></th>
<th>2006 - 2009</th>
<th>2010 - 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rating</td>
<td>69.0%</td>
<td>68.8%</td>
</tr>
</tbody>
</table>

Ancillary: N/A

Performance Trend:

QSR practice indicators remain steady in this item between pre CFSR Round 2 and post CFSR Round 2 case reviews. While Wisconsin did not achieve its minimum improvement target for this performance item by the conclusion of the CFSR Round 2 PIP period, improved performance was demonstrated in all but Quarter 12 of that period as demonstrated in its final submission for the PIP closeout.
B. Permanency

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

Item 5: Foster care re-entries

Description: How effective is the agency in preventing multiple entries of children into foster care?

Federal Data (CFSR Round 2):

<table>
<thead>
<tr>
<th>Re-entries to foster care in less than 12 months (measure C1.4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lower score is preferable</td>
</tr>
<tr>
<td>Of all children discharged from foster care to reunification in the 12-month period prior to the year shown, what percent re-entered foster care in less than 12 months from the date of discharge?</td>
</tr>
<tr>
<td>9.9%</td>
</tr>
</tbody>
</table>

State Re-entry in 2013 by Case Type:

Of the statewide children in Wisconsin that discharged to Reunification or Living with a Relative, the following chart displays re-entry (percentages and actual numbers):

<table>
<thead>
<tr>
<th>Re-Entry w/in 12 months</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>21.9% (744/3,399)</td>
<td>20.0% (646/3,222)</td>
<td>20.9% (657/3,146)</td>
</tr>
<tr>
<td>Re-Entry w/in 13-14 months</td>
<td>4.0% (135/3,399)</td>
<td>4.5% (145/3,222)</td>
<td>N/A</td>
</tr>
<tr>
<td>Performance Trend:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Re-entry within 12 months continually hovers between 19-20% statewide. BMCW has dropped from 19% in 2011 to 14% in 2013, likely due to the implementation in January 2012 of post-reunification supports for each child and family for 12 months after reunification. To address the high re-entry rate, Wisconsin initiated in 2014 the Post-Reunification Supports Title IV-E demonstration project which establishes in non-Milwaukee counties services and supports for children and their families in the initial 12 months after reunification.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Re-Entry w/in 25+ months</th>
<th>4.5%</th>
</tr>
</thead>
<tbody>
<tr>
<td>(153/3,399) N/A N/A</td>
<td></td>
</tr>
</tbody>
</table>
**Item 6: Stability of foster care placement**

**Description:** Was the child in a stable placement at the time of the onsite review, and were any changes in placement that occurred during the period under review in the best interest of the child and consistent with achieving the child’s permanency goals?

**Federal Data (CFSR Round 2):**

<table>
<thead>
<tr>
<th>Measure</th>
<th>National 75th Percentile</th>
<th>FFY 2010</th>
<th>FFY 2011</th>
<th>FFY 2012</th>
<th>FFY 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Placement Stability in 12 months</td>
<td>86.0%</td>
<td>86.3%</td>
<td>86.6%</td>
<td>83.9%</td>
<td>86.2%</td>
</tr>
<tr>
<td>(Measure C4.1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Placement Stability in 12-24 months</td>
<td>59.9%</td>
<td>68.1%</td>
<td>66.7%</td>
<td>68.0%</td>
<td>67.0%</td>
</tr>
<tr>
<td>(Measure C4.2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Placement Stability in 24+ months</td>
<td>33.9%</td>
<td>43.4%</td>
<td>45.4%</td>
<td>46.0%</td>
<td>46.4%</td>
</tr>
<tr>
<td>(Measure C4.3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Performance Trend:**

Wisconsin is meeting the placement stability benchmarks for all cohorts and is significantly exceeding the placement stability benchmarks for the 12-24 month and over 24 month cohorts.
Item 7: Establishment of an appropriate permanency goal for the child in a timely manner

**Description:** How effective is the agency in determining the appropriate permanency goals for children on a timely basis when they enter foster care?

**Federal Data (CFSR Round 2):**

<table>
<thead>
<tr>
<th>PERMANENCY PROFILE</th>
<th>FFY 2011ab</th>
<th>FFY 2012ab</th>
<th>FFY 2013ab</th>
</tr>
</thead>
<tbody>
<tr>
<td>FIRST-TIME ENTRY COHORT GROUP</td>
<td># of Children</td>
<td>% of Children</td>
<td># of Children</td>
</tr>
<tr>
<td>III. Most Recent Permanency Goal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reunification</td>
<td>1,085</td>
<td>71.1</td>
<td>1,195</td>
</tr>
<tr>
<td>Live with Other Relatives</td>
<td>26</td>
<td>1.7</td>
<td>12</td>
</tr>
<tr>
<td>Adoption</td>
<td>32</td>
<td>2.1</td>
<td>44</td>
</tr>
<tr>
<td>Long-Term Foster Care</td>
<td>23</td>
<td>1.5</td>
<td>11</td>
</tr>
<tr>
<td>Emancipation</td>
<td>15</td>
<td>1.0</td>
<td>13</td>
</tr>
<tr>
<td>Guardianship</td>
<td>39</td>
<td>2.6</td>
<td>32</td>
</tr>
<tr>
<td>Case Plan Goal Not Established</td>
<td>298</td>
<td>19.5</td>
<td>334</td>
</tr>
<tr>
<td>Missing Goal Information</td>
<td>7</td>
<td>0.5</td>
<td>14</td>
</tr>
<tr>
<td>POINT-IN-TIME PERMANENCY PROFILE</td>
<td>FFY 2011ab</td>
<td>FFY 2012ab</td>
<td>FFY 2013ab</td>
</tr>
<tr>
<td># of Children</td>
<td>% of Children</td>
<td># of Children</td>
<td>% of Children</td>
</tr>
<tr>
<td>III. Permanency Goals for Children in Care</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reunification</td>
<td>3,814</td>
<td>57.5</td>
<td>3,839</td>
</tr>
<tr>
<td>Live with Other Relatives</td>
<td>211</td>
<td>3.2</td>
<td>177</td>
</tr>
<tr>
<td>Adoption</td>
<td>944</td>
<td>14.2</td>
<td>959</td>
</tr>
<tr>
<td>Long Term Foster Care</td>
<td>544</td>
<td>8.2</td>
<td>439</td>
</tr>
<tr>
<td>Emancipation</td>
<td>107</td>
<td>1.6</td>
<td>114</td>
</tr>
<tr>
<td>Guardianship</td>
<td>338</td>
<td>5.1</td>
<td>298</td>
</tr>
<tr>
<td>Case Plan Goal Not Established</td>
<td>602</td>
<td>9.1</td>
<td>596</td>
</tr>
<tr>
<td>Missing Goal Information</td>
<td>77</td>
<td>1.2</td>
<td>93</td>
</tr>
</tbody>
</table>

**State Data:**

**2011-2013 Children in OHC receiving PRTs**

All children in out of home care receive permanency consultations in Milwaukee. In non-Milwaukee counties, children who have been in care for 15 of 22 months receive permanency round tables (PRT). The chart below shows the number of proportion of children in the non-Milwaukee (Balance of State) counties who have received a PRT.

<table>
<thead>
<tr>
<th></th>
<th>With PRT</th>
<th>Balance of the State OHC Total</th>
<th>Percent of Children with PRT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cases</td>
<td>827</td>
<td>8,815</td>
<td>9.40%</td>
</tr>
<tr>
<td>Children</td>
<td>1,292</td>
<td>12,392</td>
<td>10.40%</td>
</tr>
</tbody>
</table>

**Ancillary Content:** N/A

**Performance Trend:**
Wisconsin’s performance in this item has improved since prior to CFSR Round 2. While Wisconsin did not achieve its minimum improvement target for this performance item by the conclusion of the CFSR Round 2 PIP period, significant improvements were seen in performance across the PIP period as demonstrated in Wisconsin’s final submission for the PIP closeout.

In addition, federal data indicate a decrease in the percentage of children in OHC between FFY2011-FFY2013 with non-legal permanency goals, i.e. LTFC or emancipation, however, at a practice level there are increased occurrences of a “missing permanency plan goal” and cases where the permanency plan goal may not have been established in a timely manner.
Item 8: Reunification, guardianship, or permanent placement with relatives

**Description:** How effective is the agency in helping children in foster care return safely to their families when appropriate?

**Federal Data (CFSR Round 2):**

<table>
<thead>
<tr>
<th>Description</th>
<th>National 75th Percentile</th>
<th>FFY 2010</th>
<th>FFY 2011</th>
<th>FFY 2012</th>
<th>FFY 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exits to reunification in less than 12 months (Measure C1.1)</td>
<td>75.2%</td>
<td>67.4%</td>
<td>72.2%</td>
<td>68.7%</td>
<td>68.9%</td>
</tr>
<tr>
<td>Exits to reunification, median stay (Measure C1.2)</td>
<td>5.4 months</td>
<td>7.1 months</td>
<td>7.1 months</td>
<td>7.9 months</td>
<td>7.2 months</td>
</tr>
<tr>
<td>Entry cohort reunification in less than 12 months (Measure C1.3)</td>
<td>48.4%</td>
<td>46.1%</td>
<td>47.2%</td>
<td>43.4%</td>
<td>44.3%</td>
</tr>
</tbody>
</table>

**Ancillary Content:** N/A

**Performance Trend:**

Wisconsin falls somewhat below the federal standards on federal measures related to reunification.
**Item 9: Adoption**

**Description:** How effective is the agency in achieving timely adoption when that is appropriate for a child?

**Federal Data (CFSR Round 2):**

<table>
<thead>
<tr>
<th>Measure Description</th>
<th>National 75th Percentile</th>
<th>FFY 2010</th>
<th>FFY 2011</th>
<th>FFY 2012</th>
<th>FFY 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exits to adoption in less than 24 months (Measure C2.1)</td>
<td>36.6%</td>
<td>26.6%</td>
<td>30.4%</td>
<td>29.9%</td>
<td>34.7%</td>
</tr>
<tr>
<td>Exits to adoption, median length of stay (Measure C2.2)</td>
<td>27.3 months</td>
<td>31.8 months</td>
<td>32.1 months</td>
<td>32.7 months</td>
<td>30.7 months</td>
</tr>
<tr>
<td>Children in care 17+ months, adopted by the end of the year (Measure C2.3)</td>
<td>22.7%</td>
<td>21.2%</td>
<td>20.5%</td>
<td>23.3%</td>
<td>26.5%</td>
</tr>
<tr>
<td>Children in care 17+ months achieving legal freedom within 6 months (Measure C2.4)</td>
<td>10.9%</td>
<td>10.5%</td>
<td>13.0%</td>
<td>12.4%</td>
<td>15.0%</td>
</tr>
<tr>
<td>Legally free children adopted in less than 12 months (Measure C2.5)</td>
<td>53.7%</td>
<td>75.4%</td>
<td>75.2%</td>
<td>74.0%</td>
<td>74.5%</td>
</tr>
</tbody>
</table>
State Data:

<table>
<thead>
<tr>
<th>Statewide Aged out Youth</th>
<th>Total number</th>
</tr>
</thead>
<tbody>
<tr>
<td>CY 2010</td>
<td>460</td>
</tr>
<tr>
<td>CY 2011</td>
<td>496</td>
</tr>
<tr>
<td>CY 2012</td>
<td>414</td>
</tr>
<tr>
<td>CY 2013</td>
<td>369</td>
</tr>
</tbody>
</table>

Ancillary Content: N/A

Performance Trend:

Wisconsin surpasses the 75th percentile for 3 of the 5 adoption related composite measures, with improving performance trends over the last three FFY periods. In addition, the number of youth aging out of care declined significantly in CY2013 compared to previous years and was less than 400 for the first time in CY 2013.
Item 10: Other planned permanent living arrangement

**Description:** How effective is the agency in establishing planned permanent living arrangements for children in foster care, who do not have the goal of reunification, adoption, guardianship, or permanent placement with relatives, and providing services consistent with the goal?

**Federal Data (CFSR Round 2):**

<table>
<thead>
<tr>
<th>Exits to permanency prior to 18th birthday for children in care 24+ months (Measure C3.1)</th>
<th>National 75th Percentile</th>
<th>FFY 2010</th>
<th>FFY 2011</th>
<th>FFY 2012</th>
<th>FFY 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>29.1%</td>
<td>31.7%</td>
<td>31.4%</td>
<td>33.1%</td>
<td>36.2%</td>
</tr>
</tbody>
</table>

| Exits to permanency for children with TPR (Measure C3.2) | 98.0% | 96.7% | 96.4% | 95.9% | 98.1% |

| Children emancipated who were in foster care three years or more (Measure C3.3) | 37.5% | 39.9% | 38.0% | 47.3% | 38.4% |

**State Data:**

[Image of State Data]
Ancillary Content:

<table>
<thead>
<tr>
<th>Of those who aged out, how many had discharge placement of a GCC or RCC?</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secure Facility</td>
<td>3.6%</td>
<td>2.7%</td>
<td>5.15%</td>
</tr>
<tr>
<td>Home-based setting Non-Relative</td>
<td>43.1%</td>
<td>44.4%</td>
<td>47.7%</td>
</tr>
<tr>
<td>Home-based relative</td>
<td>15.1%</td>
<td>15.5%</td>
<td>11.65%</td>
</tr>
<tr>
<td>Group Home/RCC</td>
<td>21.8%</td>
<td>23.2%</td>
<td>17.07%</td>
</tr>
<tr>
<td>Other</td>
<td>16.3%</td>
<td>14.3%</td>
<td>18.43%</td>
</tr>
</tbody>
</table>

Performance Trend:

Wisconsin exceeds the federal standards for these measures. Section D6 provides additional information related to Wisconsin’s independent living program and the services available to youth eligible for this program.
Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.

Case Review Data:

In QSR reviews, items 11-16 were rated as follows:

<table>
<thead>
<tr>
<th>Item</th>
<th>2006-2009</th>
<th>2010-2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 11: Proximity of foster care placement</td>
<td>70.1%</td>
<td>70.8%</td>
</tr>
<tr>
<td>Item 12: Placement with siblings</td>
<td>82.5%</td>
<td>87.1%</td>
</tr>
<tr>
<td>Item 13: Visiting with parents and siblings in foster care</td>
<td>46.1%</td>
<td>50.4%</td>
</tr>
<tr>
<td>Item 14: Preserving connections</td>
<td>70.1%</td>
<td>69.4%</td>
</tr>
<tr>
<td>Item 15: Relative Placement</td>
<td>74.2%</td>
<td>73.0%</td>
</tr>
<tr>
<td>Item 16: Relationship of child in care with parents</td>
<td>42.6%</td>
<td>46.3%</td>
</tr>
</tbody>
</table>

Performance Trend:

**Item 11**: Wisconsin continues to work on this measure. Implementation of the Geographic Placement Resource System (GPRS) provides a tool for workers to place children as close as possible to their families and current schools. QSR practice indicators remain steady, with a very slight improvement in performance for this item between pre CFSR Round 2 and post CFSR Round 2 case reviews.

**Item 12**: Wisconsin continues to place siblings together whenever possible. QSR practice indicators show improvements in this item between pre CFSR Round 2 and post CFSR Round 2 case reviews.

**Item 13**: QSR practice indicators show improvements in this item between pre CFSR Round 2 and post CFSR Round 2 case reviews.

**Item 14**: QSR practice indicators remain steady, which is a very slight decline in performance for this item between pre CFSR Round 2 and post CFSR Round 2 case reviews.

**Item 15**: QSR practice indicators remain steady, which is a slight decline in performance for this item between pre CFSR Round 2 and post CFSR Round 2 case reviews.

**State Data**:

<table>
<thead>
<tr>
<th>Home based Placement settings as of December 31st</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relative</td>
<td>33%</td>
<td>32%</td>
<td>40%</td>
</tr>
<tr>
<td>Non-Relative</td>
<td>67%</td>
<td>68%</td>
<td>60%</td>
</tr>
</tbody>
</table>

**Item 16**: QSR practice indicators show improvements in this item between pre CFSR Round 2 and post CFSR Round 2 case reviews.
C. Child and Family Well-Being

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

Case Review Data:

In QSR reviews, items 17-20 were rated as a strength for both in-home and out-of-home placement cases, were as follows:

<table>
<thead>
<tr>
<th>Item</th>
<th>2006-2009</th>
<th>2010-2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 17: Needs and services of child, parents, and foster parents</td>
<td>50.0%</td>
<td>55.9%</td>
</tr>
<tr>
<td>Item 18: Child and family involvement in case planning</td>
<td>52.2%</td>
<td>55.7%</td>
</tr>
<tr>
<td>Item 19: Caseworker visits with child</td>
<td>68.1%</td>
<td>71.9%</td>
</tr>
<tr>
<td>Item 20: Worker visits with parents</td>
<td>51.4%</td>
<td>52.3%</td>
</tr>
</tbody>
</table>

Performance Trend:

Item 17: QSR practice indicators show improvements in this item between pre CFSR Round 2 and post CFSR Round 2 case reviews.

Item 18: QSR practice indicators show improvements in this item between pre CFSR Round 2 and post CFSR Round 2 case reviews.

Item 19: QSR practice indicators show improvements in this item between pre CFSR Round 2 and post CFSR Round 2 case reviews. While Wisconsin did not achieve its minimum improvement target for this performance item by the conclusion of the CFSR Round 2 PIP period, significant improvements were seen in performance across the PIP period as demonstrated in Wisconsin’s final submission for the PIP closeout.

As the administrative data shows below, Wisconsin’s performance on timeliness of caseworker visits has improved dramatically over the past five years. In the two most recent years, Wisconsin achieved 97% of monthly caseworker contacts, which is significantly higher than the federal benchmark of 90%.

State Data:
Item 20: QSR practice indicators show improvements in this item between pre CFSR Round 2 and post CFSR Round 2 case reviews.
Well-Being Outcome 2: Children receive appropriate services to meet their educational needs.

**Item 21: Educational needs of the child**

**Description:** How effective is the agency in addressing the educational needs of children in foster care and those receiving services in their own homes?

**Fed Data:** N/A

**State Data:**

**Out of Home Care School-Aged Children Analysis**

DSP has conducted analysis related to school and early care enrollment and educational performance for children in out of home care. In the spring of 2012, DCF and DPI initiated a pilot data exchange to directly link educational and out of home care data. The data set included all children in out of home care between the ages of 7 and 18 who were removed in the 2008-9 school year and in OHC for at least 3 months.

The analysis found that children in OHC have worse educational outcomes than the general school age population in virtually every measure of educational success as seen in the chart below.

<table>
<thead>
<tr>
<th>Measure</th>
<th>OHC kids (1351)</th>
<th>General Population</th>
<th>Milwaukee OHC (206)</th>
<th>Milw General Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance (% of days attended in the school year)</td>
<td>85%</td>
<td>96%</td>
<td>78%</td>
<td>88%</td>
</tr>
<tr>
<td>Retention - Current Year</td>
<td>6%</td>
<td>2%</td>
<td>9%</td>
<td>8%</td>
</tr>
<tr>
<td>Retention - Ever</td>
<td>16%</td>
<td>Not available</td>
<td>36%</td>
<td>Not available</td>
</tr>
<tr>
<td>Mobility (% of students served by more than one school)</td>
<td>44%</td>
<td>Not available</td>
<td>38%</td>
<td>Not available</td>
</tr>
<tr>
<td>Suspension - K-5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>342 OHC kids</td>
<td>17%</td>
<td>4%</td>
<td>41%</td>
<td>19%</td>
</tr>
<tr>
<td>Suspension - 6-8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>330 OHC kids</td>
<td>43%</td>
<td>8%</td>
<td>68%</td>
<td>49%</td>
</tr>
<tr>
<td>Suspension - 9 - 12</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>670 OHC kids</td>
<td>44%</td>
<td>10%</td>
<td>67%</td>
<td>56%</td>
</tr>
<tr>
<td>Suspension - All Grades</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expulsion - K - 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>342 OHC kids</td>
<td>N/A</td>
<td>0.0%</td>
<td>N/A</td>
<td>0.1%</td>
</tr>
<tr>
<td>Expulsion - 6 to 8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>330 OHC kids</td>
<td>1.5%</td>
<td>0.2%</td>
<td>2.0%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Expulsion - 9 - 12</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>670 OHC kids</td>
<td>3.8%</td>
<td>0.3%</td>
<td>2.9%</td>
<td>0.6%</td>
</tr>
<tr>
<td>Expulsion - All Grades</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.3%</td>
<td>0.2%</td>
<td>1.5%</td>
<td>0.5%</td>
</tr>
</tbody>
</table>
### Out of Home Care Early Care Children’s Analysis

The table below provides data on foster children enrolled in Early Head Start and Head Start. Foster children are categorically eligible for Early Head Start and Head Start. These programs provide high quality early childhood education.  

<table>
<thead>
<tr>
<th>Measure</th>
<th>Milwaukee OHC kids (1351)</th>
<th>General Population</th>
<th>Milwaukee OHC (206)</th>
<th>Milw General Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children with an Individualized Education Plan</td>
<td>43%</td>
<td>15%</td>
<td>29%</td>
<td>19%</td>
</tr>
</tbody>
</table>

#### Testing Proficiency

<table>
<thead>
<tr>
<th>Grade level</th>
<th>Minimal</th>
<th>Basic</th>
<th>Proficient</th>
<th>Advanced</th>
</tr>
</thead>
<tbody>
<tr>
<td>Third grade reading - OHC (75 kids)</td>
<td>17%</td>
<td>33%</td>
<td>27%</td>
<td>13%</td>
</tr>
<tr>
<td>Third grade reading - General Population</td>
<td>6%</td>
<td>15%</td>
<td>34%</td>
<td>45%</td>
</tr>
<tr>
<td>Third grade math - OHC Kids (75 kids)</td>
<td>40%</td>
<td>11%</td>
<td>27%</td>
<td>13%</td>
</tr>
<tr>
<td>Third grade math - General Population</td>
<td>14%</td>
<td>9%</td>
<td>41%</td>
<td>35%</td>
</tr>
<tr>
<td>Eighth grade reading - OHC kids (141 kids)</td>
<td>21%</td>
<td>21%</td>
<td>36%</td>
<td>12%</td>
</tr>
<tr>
<td>Eighth grade reading - General Population</td>
<td>6%</td>
<td>9%</td>
<td>42%</td>
<td>43%</td>
</tr>
<tr>
<td>Eighth grade math - OHC population (141 kids)</td>
<td>28%</td>
<td>18%</td>
<td>40%</td>
<td>5%</td>
</tr>
<tr>
<td>Eighth grade math - General Population</td>
<td>8%</td>
<td>13%</td>
<td>49%</td>
<td>29%</td>
</tr>
</tbody>
</table>

In October of 2012, DCF and DPI received an educational grant which has funded the following activities:

- Further data analysis;
- A mechanism for social workers to have direct access to children’s educational status through a “portal” into the child’s K-12 data;
- A protocol for better communication between schools and social work staff; and
- Development of policies, procedures, and practices to increase the educational success of children and youth in Out-of-Home Care.

#### Milwaukee Balance of State Statewide

<table>
<thead>
<tr>
<th></th>
<th>Milwaukee OHC</th>
<th>Balance of State</th>
<th>Statewide</th>
</tr>
</thead>
<tbody>
<tr>
<td>OHC Children Enrolled in EHS/HS</td>
<td>145 (11.5%)</td>
<td>315 (10.8%)</td>
<td>460 (11.0%)</td>
</tr>
<tr>
<td>OHC Children Not-Enrolled in EHS/HS</td>
<td>1,116 (88.5%)</td>
<td>2,589 (89.2%)</td>
<td>3,705 (89.0%)</td>
</tr>
</tbody>
</table>
As seen in the chart above, approximately 11% of young children in OHC in Wisconsin are enrolled in this program.

**Performance Trend:**

Approximately 11% of foster children are accessing Head Start and Early Head Start. Wisconsin is undertaking efforts to increase participation of foster children in Head Start and Early Head Start.
Well-Being Outcome 3: Children receive appropriate services to meet their physical and mental health needs.

Item 22: Physical health of the child

Description: How does the State ensure that the physical health and medical needs of children are identified in assessments and case planning activities and that those needs are addressed through services?

Fed Data: N/A

State Data:

In 2014, the state initiated the Care4Kids Medicaid program in the six southeast counties of the state. The Care4Kids program provides comprehensive and coordinated care for children in out-of-home care that is trauma-informed and addresses the child’s individualized needs. It is projected that by the end of Calendar Year 2014, approximately 3,300 children in out-of-home care in the six participating counties, will be enrolled in the Care4Kids program. The state plans to expand the program statewide over the coming years.

Total Projection CY 2014

<table>
<thead>
<tr>
<th>Month</th>
<th>Jun-14</th>
<th>Jul-14</th>
<th>Aug-14</th>
<th>Sep-14</th>
<th>Oct-14</th>
<th>Nov-14</th>
<th>Dec-14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Projection</td>
<td>888</td>
<td>1281</td>
<td>1638</td>
<td>2030</td>
<td>2431</td>
<td>2844</td>
<td>3267</td>
</tr>
</tbody>
</table>

The above chart depicts the percentage of children who entered into Care4Kids eligible removal placements between January 1, 2014-March 31, 2014. The Care4Kids program utilizes the Child and Adolescent Needs and Strengths tool to identify whether the child has been assessed as having mental health needs that require a screening by a mental health professional.
Ancillary:
In the spring of 2013, a team of graduate students from the Robert M. La Follette School of Public Affairs at the University of Wisconsin-Madison analyzed Medicaid data provided to them by the Department of Health Services, in partnership with the Department of Children and Families. The data included all children on Medicaid in Wisconsin from 2009 to 2011. The analysis identified the health status and needs of children in OHC compared to the general Medicaid child population.

<table>
<thead>
<tr>
<th>Chronic Health Conditions</th>
<th>Out-of-Home Care</th>
<th>Medicaid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asthma</td>
<td>21%</td>
<td>11%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>1%</td>
<td>0.5%</td>
</tr>
<tr>
<td>Cystic Fibrosis</td>
<td>0.7%</td>
<td>0.4%</td>
</tr>
<tr>
<td>Epilepsy</td>
<td>2%</td>
<td>1%</td>
</tr>
<tr>
<td>Refraction Disorder (Eyesight)</td>
<td>31%</td>
<td>19%</td>
</tr>
<tr>
<td>Nutritional Symptoms</td>
<td>14%</td>
<td>8%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mental Illness</th>
<th>Out-of-Home Care</th>
<th>Medicaid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Mental Illness (Primary Diagnosis)</td>
<td>39%</td>
<td>11%</td>
</tr>
<tr>
<td>Autism</td>
<td>2%</td>
<td>0.8%</td>
</tr>
<tr>
<td>Conduct Disorder</td>
<td>19%</td>
<td>4%</td>
</tr>
<tr>
<td>Attention Deficit and Hyperactivity Disorder</td>
<td>27%</td>
<td>9%</td>
</tr>
<tr>
<td>Emotional Disturbance</td>
<td>18%</td>
<td>3%</td>
</tr>
<tr>
<td>Adjustment Reaction</td>
<td>30%</td>
<td>5%</td>
</tr>
<tr>
<td>Behavioral Problems</td>
<td>17%</td>
<td>2%</td>
</tr>
<tr>
<td>Neurotic Disorders</td>
<td>15%</td>
<td>5%</td>
</tr>
<tr>
<td>Developmental Delays</td>
<td>14%</td>
<td>3%</td>
</tr>
<tr>
<td>Mental Retardation</td>
<td>0.4%</td>
<td>0.2%</td>
</tr>
<tr>
<td>Other Psychological Symptoms</td>
<td>0.1%</td>
<td>0.1%</td>
</tr>
</tbody>
</table>

The above table provides information regarding the prevalence of chronic physical health conditions and mental illnesses in Wisconsin’s Out-of-Home Care and Medicaid child populations from 2009 to 2011. The table indicates the proportions during the 3-year prevalence period, meeting the diagnosis criterion at least once. The findings from the data show that children in out-of-home care in Wisconsin have a higher incidence of almost all physical and mental health conditions, compared to the general child Medicaid population in Wisconsin.

Performance Trend:
Wisconsin now has baseline data which indicates the extent to which OHC children have more complex physical and behavioral health needs than the general Medicaid population.
Item 23: Mental/behavioral health of the child

**Description:** How does the State ensure that the mental/behavioral health needs of children are identified in assessments and case planning activities and that those needs are addressed through services?

**Fed Data:** N/A

**State Data:**

Data as of March, 2014.

**Ancillary:** N/A

**Performance Trend:**

Wisconsin child welfare workers administer the Child and Adolescent Needs and Strengths (CANS) assessment tool to all children entering out-of-home care, at a change in placement, and every six months the child is in out of home care. Child physical wellbeing performance showed improvements between pre CFSR Round 2 and post CFSR The Department has continued to implement and train workers on utilizing the CANS as a tool to evaluate and assess the needs of the children and families served.
A. Management Information System

The Wisconsin SACWIS system, known as eWiSACWIS, is operated by the Department and is used by all county child welfare agencies, BMCW, and SNAP, which includes statewide use of the application across all program areas. The application is used to support the full range of the State’s child welfare program, including child protective services, ongoing case management, foster care, independent living, and adoption, and readily identifies the status, demographic characteristics, location and goals for the placement of every child in placement, including current and historical data related to child placement in foster care. The eWiSACWIS system is the source of information for federal reporting, as well as for state child welfare data reporting purposes and supports state and local financial processes.

Users of eWiSACWIS are required to follow Wisconsin CPS practice standards for timeliness and casework process requirements. The system has built in ticklers and other edit check functionality based on the creation of certain required documents that remind workers and supervisors of work that needs to be documented and approved. Considerable user input is sought to assist in eWiSACWIS maintenance and enhancement efforts. These efforts include regional user groups which meet on a quarterly basis to provide technical assistance and review of upcoming application changes, annual conferences to present and discuss program and technical changes to the application, annual one to one consultation between local child welfare agency representatives and the assigned eWiSACWIS business analyst staff, and involvement of users in the design and testing of application changes. The system’s responsiveness continues to be augmented and numerous technical enhancements have been made to the application to reduce duplicative data entry, reducing the time it takes to enter into and manage cases within the application.

Several external entities have limited access to eWiSACWIS including:

- Eleven tribes who have read-only access;
- Private group home and residential facility agencies who can enter case notes to document child contacts as authorized by local child welfare agencies;
- Contracted private providers who deliver independent living services to young adults as authorized by local child welfare agencies; and
- Contracted health provider for the Medicaid Care4Kids program who has read-only access.

The Division has also granted limited access to data related to child placements for economic assistance and child support staff to enable child support collection and program eligibility determinations. Finally, specific staff within the Department’s Division of Early Care and Education has been given access to eWiSACWIS to do child care licensing background checks under the state’s caregiver law.

eWiSACWIS includes an application called eWReports, which supports state and county access to a range of reports used to assess service data and monitor performance. Over 200 corporate levels reports support state and local program and fiscal monitoring and management activities. Service data reports include summary and detailed information related to critical child welfare service activity and practice requirements, such as CPS reports, CPS initial assessment decision making, and OHC placement, including client characteristics, location of services/placement, etc. Additional reports are used to support local and state level fiscal management and payment activities and to manage provider-related responsibilities such as licensing and foster home rate setting.

Since October 2008, the Division has implemented several enhancements to the data warehouse, referred to as eWiSACWIS, which included the addition of data related to OHC placements, pre-finalized adoptions, OHC providers, Child and Family Services Review (CFSR) Round 2 outcome measures, CPS access, child and adolescent needs and strengths (CANS) information, and title IV-E eligibility and claiming data and reports. Technical enhancements to the data warehouse have included the automation of data repository naming conventions, development of an audit tracking report to support statewide implementation, and evaluation of data management and design documentation tools. Currently, the Division is expanding CPS access and initial
assess data warehouse information and developing related business intelligence performance monitoring reports. Beginning in October 2014, the Division will begin designing and developing a child welfare ongoing case management data warehouse and related performance monitoring reports.

To further supplement and advance use of the above technical and reporting functionality, the Division has produced several interactive dashboards which are available to the public via the Department’s website. These same dashboards are available to eWiSACWIS users with additional data to promote the use of the dashboards at the county agency and BMCW levels to support local analysis, monitoring, and data-driven decision-making. The dashboards currently address the following program areas:

- CPS Access;
- CPS Initial Assessment;
- CANS Assessment;
- Child Permanency and placement related outcomes;
- Caseworker Contacts with children in OHC; and
- Provider performance based measures.

**Brief Assessment of Strengths and Weaknesses**

Wisconsin has established a user-friendly and robust system that supports technology needs in an effective manner. Challenges for the system include high need priorities that sometimes compete for time and resources meaning that some application enhancements and report development initiatives are not able to be completed as quickly as would be ideal. Wisconsin continues to make eWiSACWIS enhancements to meet new reporting data elements and improved data quality associated with NCANDS, AFCARS and NYTD.

**B. Case Review System**

**Case Review**

Wisconsin has a comprehensive case review system, required by state statutes and standards, to establish case plans for children served in the family home and for children placed in OHC. Key aspects of child welfare case planning process referred to as “permanency plans” in Wisconsin’s Children’s Juvenile Codes, Chapters 48 and 938, include the following factors: thorough identification and analysis of factors affecting child safety and risk of future harm; development and implementation of case plans and ongoing progress evaluations with families and key collateral contacts to the family to address factors affecting child safety and future risk of harm; and, for all children placed in OHC, use of the case plan, referred to as the child’s Permanency Plan, and results of subsequent progress evaluations as a basis for conducting permanency plan reviews, assessing compliance with federal ASFA requirements, and modifying the permanency goal, as necessary.

For CPS cases and cases where one or more children are placed in OHC, the case planning practices are prescribed by the state’s Ongoing Services Standards, recently updated and enhanced as part of the state’s CFSR Round 2 Program Improvement Plan. A child’s case plan or permanency plan identifies specific goals and objectives, describes the services or resources needed to achieve those goals and objectives, and defines family and provider responsibilities in the case planning process.

When children are placed in OHC, the case plan and case plan progress evaluations support the identification or modification of the permanency goal and permanency planning efforts. For JJ cases, Chapter 938 governs permanency plan goal development, permanency plan review requirements, and court determinations regarding child, family and agency efforts to achieve the permanency goal. State policy and statutes also specify requirements under the federal ASFA law to pursue termination of parental rights (TPR) for children who have been in out-of-home care for 15 of the most recent 22 months.

The state’s eWiSACWIS system supports permanency planning and the federal ASFA practice requirements and documentation and the application has been modified to synthesize and streamline some documentation.
functionality related to assessment and planning. In addition, reports based on permanency planning and ASFA are available to state and local child welfare agencies to monitor monthly performance related to these requirements.

Based on this eWiSACWIS data, as of December 2013, of the 5,862 children in OHC for more than 60 days, 93% of the children had a permanency plan and goal documented, and 7% did not have a permanency goal documented as required by statutes and state policy. Also, ASFA compliance performance for children in out of home care for the 15th of the last 22 months and in placement in as of 12/31/13 was as follows:

<table>
<thead>
<tr>
<th>Months in Care-OHC</th>
<th>Children in Care</th>
<th>Documented Exceptions</th>
<th>TPR Referred</th>
<th>TPR Filed</th>
<th>Percentage Compliant</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>Statewide</td>
<td>169</td>
<td>140</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>BMCW</td>
<td>50</td>
<td>43</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>BOS</td>
<td>119</td>
<td>97</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

In addition to DCF data, DCF works closely with the Children’s Court Improvement Project to share data to improve services for families served in both systems. Following is data that demonstrates functioning on periodic review, permanency hearings, the WICWA CQI project, termination of parental rights.

**Periodic Review and Permanency Hearings**

In Wisconsin, the majority of jurisdictions use an administrative panel for the six month review. Although a few jurisdictions have the court commissioner or a judge conduct the six-month review, the approach to periodic reviews are not distinguished as a periodic (six-month) review or an annual permanency hearing. If it is conducted by a judicial officer on the record, the court record event is a Permanency Hearing regardless of the time interval.

CCIP is currently working with the University of Wisconsin Institute for Research on Poverty (IRP) to assist with third-party matching of children’s juvenile court records from the Consolidated Court Automation Programs (CCAP), the judicial branch’s automated system, and data from eWiSACWIS to enable CCIP to report on five timeliness measures required under the federal Court Improvement Program grant, including the time to the first permanency hearing and the time to subsequent permanency hearings.

It must be noted that while a limited sample was used for the following figures which includes children who reached permanency in 2011, the following who were most recently removed from the home in 2010 or 2011. The data provided below was reported in the CCIP FFY 2013 Program Assessment Report submitted December 2013. Given the limited nature of the test data available (court records for all juvenile-related case types filed in a Wisconsin circuit court between January 1, 2010 and December 31, 2011), resulting estimates presented here are valid only for the truncated sets of cases that appear in this data and cannot be extrapolated to the full set of children for whom the proposed methodology was intended. However, the methodology will be employed to complete a similar analysis for the larger set of data for reporting in December 2014.

Wisconsin does collect this data in eWiSACWIS currently but fixes are needed to improve the system to show trends over time, this will be tracked in the future.

**Significant efforts to improve data entry must be implemented over several years before a baseline can be identified, meaningful benchmarks created, and improvement targets established.** Preliminary data was compiled in 2013 showing the mean length of time for the permanency hearing timeliness measures as follows:
Timeliness Measure #1: Time to First Permanency Hearing

**Measure:** Number of days from most recent removal to the first permanency hearing  
**Sample:** Children reaching permanency in 2011 who were most recently removed from home in 2010 or 2011 and who experienced a permanency hearing in a court case filed in 2010 or 2011. In addition, time to a hearing is examined among the subset of children for whom a permanency hearing is expected to have been required: those in an out-of-home placement for at least 180 days.  
**Sample size:** 775 children. Of these, 720 were out of home for 180 days or more.  
**Estimate:** Mean Time to First Permanency Hearing=200 days (Median=174 days)  
**Estimate for those in OHP over 180 days:** Mean=202 days (Median=175 days)  
**Notes:** This sample excludes all children who were in OHC for greater than two years. Longer spells would present the opportunity for longer delays in having a hearing, but it could also be that courts and caseworkers would recognize that these longer cases were likely to require a permanency hearing and would schedule these earlier. It is difficult to predict whether the above estimates would be shorter or longer than those generated on the full court record data.

Timeliness Measure #2: Time to Subsequent Permanency Hearings

**Measure:** Number of days from each permanency hearing to the next permanency hearing  
**Sample:** Children reaching permanency in 2011 who were most recently removed from home in 2010 or 2011 and who experienced at least two permanency hearings in a court case filed in 2010 or 2011.  
**Sample size:** 344 children. Of these, 90 experience a third permanency hearing, 17 a fourth, 6 a fifth, and 4 a sixth.  
**Estimate:** Mean Time from First to Second Permanency Hearing=153 days (Median=168 days)  
Mean Time from Second to Third Permanency Hearing=134 days (Median=165 days)  
Mean Time from Third to Fourth Permanency Hearing=78 days (Median=56 days)  
Mean Time from Fourth to Fifth Permanency Hearing=57 days (Median=47 days)  
Mean Time from Fifth to Sixth Permanency Hearing=34 days (Median=19 days)  
**Notes:** Similar to Performance Outcome #1, this sample is limited to children in OHc for less than two years. Estimates generated on the full set of court record data would contain many more children with several permanency hearings, and it is likely that time between those hearings would be longer.

Between August and October 2012, the Wisconsin Children’s Court Improvement Program (CCIP) sponsored a series of nine, multi-disciplinary training sessions titled, *The Clock is Ticking: Making Permanency Hearings Meaningful.* The training was created in response to a 2010 CFSR finding that Permanency Hearings in
Wisconsin are often perfunctory, brief, and lack a substantive discussion about the child and parents. CCIP and DCF worked together to develop the training curriculum. The materials are described below.

- **Children in Court: In Their Own Words Video** – With support from Casey Family Programs, CCIP staff collaborated with DCF and the University of Wisconsin, Division of Information Technology (DoIT) to produce an unscripted video in which 10 young adults who were placed in foster care as children candidly reflect on experiences they had in court. The video was used at the beginning of each training session to emphasize the importance of giving youth a voice in the court process. [www.wicourts.gov/courts/programs/ccip.htm#1](http://www.wicourts.gov/courts/programs/ccip.htm#1)


Before the content was delivered, attendees were asked to rate their reactions to eight statements as “strongly agree,” “agree,” “neutral,” “disagree,” or “strongly disagree.” The statements were based on key learning points that the training was designed to address. Although responses could not be traced to an individual, participants were asked to identify their professional title (e.g., judge, social worker, tribal attorney, etc.) so that answers could be analyzed by discipline. At the conclusion of the three-hour program, participants were asked to respond to the same questions to measure changes in attitudes and beliefs.

The pre- and post-assessment responses showed favorable movement overall on all eight questions, with some judicial districts showing minimal changes and others showing significant shifts in their views.

Wisconsin statutes require that the child’s foster parent, relative caregiver, or other physical custodian be provided with notice of and a right to participate in all of the child’s hearings in a CHIPS or TPR case. See ss. 48.27 and 48.42. Furthermore, notice of any permanency review or permanency hearing must be provided not less than 30 days prior to the review/hearing along with an advisement that the physical custodian and other case participants have an opportunity to be heard at the review/hearing by participating in it or submitting written comments not less than 10 working days prior to the review/hearing. See ss. 48.38(5) and (5m).

A circuit court form, Notice of Permanency Hearing (JD-1700) has been created to provide this requisite notice and advisement: [www.wicourts.gov/formdisplay/JD-1700.pdf?formNumber=JD-1700&formType=Form&formatId=2&language=en](http://www.wicourts.gov/formdisplay/JD-1700.pdf?formNumber=JD-1700&formType=Form&formatId=2&language=en). In addition, the Wisconsin Department of Children and Families has a guide and form available for the child’s physical custodian to provide written comments at Permanency Reviews, Permanency Hearings, and other court hearings: [http://dcf.wisconsin.gov/forms/doc/dcf_f_2474_e.doc](http://dcf.wisconsin.gov/forms/doc/dcf_f_2474_e.doc).

**Termination of Parental Rights**

According to the CCAP Age at Disposition Summary Report, the median length of time between filing the TPR petition and disposition in 2013 was 29 days for voluntary TPR cases and 108 days for involuntary TPR cases.

The Children’s Court Improvement Program (CCIP) is currently working with the University of Wisconsin Institute for Research on Poverty (IRP) to assist with matching juvenile court records from the Consolidated Court Automation Programs (CCAP), the judicial branch’s automated system, and child welfare data from DCF’s electronic Wisconsin Statewide Automated Child Welfare System (eWiSACWIS) to enable CCIP to report on
five timeliness measures required under the federal Court Improvement Program grant, including the time to filing of a termination of parental rights (TPR) petition and time to TPR.

The data provided below was reported in the CCIP FFY 2013 Program Assessment Report submitted December 2013. It must be noted that a limited sample was used for these figures, as it only included children who reached permanency in 2011 who were most recently removed from the home in 2010 or 2011. While the methodology for producing the timeliness measures reported below has been clearly defined and applied by IRP, the data reported below is not a fully accurate representation of practice given the small sample size. Given the limited nature of the test data available (court records for all juvenile-related case types filed in a Wisconsin court between January 1, 2010 and December 31, 2011), resulting estimates presented here are valid only for the truncated sets of cases that appear in this data and cannot be extrapolated to the full set of children for whom the proposed methodology was intended. However, the methodology will be employed to complete a similar analysis for the larger set of data for reporting in December 2014.

Significant efforts to improve data entry must be implemented over several years before a baseline can be identified, meaningful benchmarks created, and improvement targets established. Preliminary data was compiled in 2013 showing the mean length of time for the permanency hearing timeliness measures as follows:

**Timeliness Measure #4: Time to Filing of a TPR petition**
- **Measure:** Number of days from most recent removal to the first filing of a termination of parental rights (TPR) petition
- **Sample:** Children reaching permanency in 2011 who experienced a TPR filing in a court case filed in 2010 or 2011.
- **Sample size:** 526 children.
- **Estimate:** Mean Time to TPR Filing=672 days (Median=539 days)
- **Notes:** This sample definition excludes children who experience a long period of time (more than two years) between the actual filing of the TPR petition and final permanency. It is difficult to predict if these excluded cases would have longer or shorter times before the petition is filed, and therefore difficult to predict if estimates on the full sample would be longer or shorter. Of these children, 30 had additional TPR filings after their first TPR filing. These may be because separate TPR petitions were issued for each parent, or because the initial petition failed.

**Timeliness Measure #5: Time to TPR**
- **Measure:** Number of days from most recent removal to the child’s first TPR order
- **Sample:** Children reaching permanency in 2011 who were issued a TPR order in a court case filed in 2010 or 2011.
- **Sample size:** 502 children
- **Estimate:** Mean Time to First TPR Order=788 days (Median=678 days)
- **Notes:** As in Performance Outcome #4, this sample definition excludes children who experience a long period of time (more than two years) between the filing of the TPR petition and final permanency. It is likely these would include cases with longer times between the petition filing and the order, so we would predict that estimates on the full sample would be longer. Also, one of these children had an additional TPR order after the first. This may be because a separate TPR order was issued for each parent.

**Data collected by Wisconsin under the Adoptive and Safe Families Act through eWiSACWIS shows that:**
Of the 6813 kids in care on 12-31-2013, 3046 had been in care for 15 out of the last 22 months. Of those 2665 had completed ASFA documentation. Of those with no documented exception, 120 do not have a referral for TPR noted; 261 have a referral requested. Of those with ASFA documentation 1699 have not been referred to TPR, 966 have been referred for TPR. Of the group referred for TPR 537 have been filed and 429 have not.

**Notice to Court Parties**
In 2013, CCIP developed the Wisconsin Indian Child Welfare Act (WICWA) Continuous Quality Improvement Project, which is designed to improve adherence to WICWA requirements in the circuit court system. CCIP staff conducted onsite reviews in the following four counties in calendar year 2013: Shawano County, Milwaukee County, Bayfield County, and Jackson County.

One of the items measured as part of the reviews is whether the tribe receives written notice of Permanency Hearings as required by WICWA. In 66 of the Child in Need of Protection or Services (CHIPS), Juvenile in Need of Protection or Services (JIPS), and Termination of Parental Rights (TPR) cases that were reviewed, the circuit court file contained documentation that written notice of the most recent Permanency Hearing was sent to the tribe in 97% of the cases.

In addition, the CCIP WICWA Continuous Quality Improvement Project reviews whether the active efforts finding and placement preferences are documented on Permanency Hearing Orders. The findings from the reviews conducted in 2013 are displayed below. Please note that this information is collected through a file review and only reports what is documented in the court case file.

In addition, development of case review systemic factor compliments with the state’s new CQI case review system will also add valuable and needed information related to these performance areas.

**Brief Assessment of Strengths and Weaknesses**

Wisconsin's strong history of collaboration with the court system is a strength that will prove helpful in addressing the future activities planned to improve data collections. The data analysis that is underway with the Institute for Research on Poverty will provide useful feedback on timeliness measures that will help the CCIP target technical assistance resources effectively to improve court case processing outcomes. Challenges the court system will continue to address include data entry consistency and potential system enhancements to CCAP.

**Quality Assurance**

**Data and Information on Current System**

**Overview:**

For the prior five years, the Department had the following CQI system in place to address the areas outlined in the Children’s Bureau memo ACYF-CB-IM-12-07.

**Foundational Administrative Structure**

Wisconsin has a county-administered and state-supervised child welfare system. The DCF/Division of Management Services (DMS)/Bureau of Performance Management (BPM)/Continuous Quality Improvement (CQI) Section conducts child welfare quality services reviews at the county child welfare agencies and BMCW. The Division of Safety and Permanence (DSP) is responsible for all policies, procedures, and requirements for all Title IV-E programs administered by the State and operated by county child welfare agencies, including the Bureau of Milwaukee Child Welfare (BMCW), which is state operated. The state has well-documented protocols and tools in place for the existing Quality Service Reviews (QSR) process that was in place through February of 2014. State reviewers completed classroom training on the CQI protocol and participated in coaching and mentoring with a certified reviewer which ensured CQI process reliability. Review results were monitored by CQI staff for quality and consistency.

**Staffing**
Current State CQI staff consists of a section chief and five state staff positions. In the past, CQI staff has also included 8 contracted staff and peer reviewers. In 2014, the state staff are focused on developing the state’s new, comprehensive CQI process and assisting with ad hoc reviews. DCF uses its KidStat performance management system to track administrative data with Department leadership, identify issues, and hold programs accountable for results; and has developed an internal CQI Project Steering Committee of key managers and leaders to provide strategic direction, oversight for the future development of CQI activities.

Data Collection on Quality and Performance Measures

Qualitative and quantitative data is collected to document and capture process and outcome measurements related to reports of child maltreatment and investigation and/or assessment, and experiences of children in foster care through the Adoption and Foster Care Analyses and Reporting System (AFCARS), National Child Abuse and Neglect Data System (NCANDS), and National Youth in Transition Database (NYTD) data. This data is used in the review process across all counties including the BMCW. The DSP’s Program and Operations Section identifies and addresses data quality issues that impact the validity of data being utilized within the CQI process. Data quality issues and the State’s plans to resolve them are also shared with the Children’s Bureau. DSP partners with the DCF Bureau of Information and Technology (BITS) to evaluate data reliability. Improvements to eWiSACWIS to better support case practice and enhance the quality of data retrieved from the system; and regular data on key performance metrics is pulled monthly via eWiSACWIS.

Case Record Review Data and Process

The CQI Section has the responsibility for conducting child welfare reviews in counties. Up until February 2014, the CQI Section used the Quality Service Review (QSR) protocol. The case review was held on site in the county and required extensive interviews with key stakeholders (courts, families, youth, caregivers, contract providers, informal supports and others). QSR reviewers completed classroom training of the QSR protocol and participated in coaching and mentoring with a certified reviewer to ensure CQI process reliability. The existing QSR case review process included interviews with the child, parents, caregivers, the caseworker and supervisor, any service providers including mental health, substance abuse counselors, school personnel and legal as a part of the review process. Comprehensive manuals, outlining the existing review process, were provided to all reviewers. The manuals include instructions regarding the completion of the tool. The State conducts all record and onsite reviews regarding serious injuries and egregious incidents related to child maltreatment and provides specified reviews at the request of the state or county agency. The State ensures no conflict of interest exists when selecting reviewers.

Analysis and Dissemination of Quality Data

The Department monitors key performance metrics through its KidStat process, which involves meetings every other month with the Secretary and senior managers of the agency to review performance data. The State’s eWiSACWIS tracks case specific information and results over time regarding safety, permanency and well-being outcomes and services. The State provides web-based information on the performance of the child welfare system in the form of dashboards and annual reports, made available to stakeholders and the public. Qualitative data is collected (in the past the QSR was used) and analyzed statewide to better understand practice trends.

The Department is assessing the effectiveness of the current continuous quality improvement system. This assessment will include a review of the ability of the current instrument and ratings to identify practice trends across the State. Several methodologies to share data externally, including standard reports accessible via the Department’s website; dashboards; data is provided to community partners, including the courts, foster parents, youth, and tribal partners. A process has been developed that uses internal subcommittees and some external input to solicit and gather feedback to inform the agency.

Feedback to Stakeholders and Decision-makers and Adjustment of Programs and Process

The State presents data to internal and external stakeholders, including county and state partners, tribes, the
courts, and other stakeholders. The results of the QSR review process are shared with internal stakeholders and include planning around any policy or practice issues identified during the review. Information is used to inform changes to statewide policy, training, automated system development as well as technical assistance needs.

**Brief assessment of strengths and concerns and proposed future activities**

In response to the August 27, 2012 Children’s Bureau (CB) Information Memorandum ACYF-CB-IM-12-07 on establishing and maintaining a continuous quality improvement system, the State of Wisconsin, Department of Children and Families (DCF) has begun the process of redesigning our continuous quality improvement (CQI) system. For this redesign, the DCF has developed the following: a CQI Steering Committee which includes key internal stakeholders charged with oversight of the change process and an Advisory Committee composed of representatives from county child welfare agencies, private child welfare agencies in Milwaukee, the courts and tribal nations, who provide feedback on the proposed changes to the system.

**Future CQI System Under Development**

DCF has outlined an operating model consistent with Continuous Quality Improvement mission, vision and core principles that will guide the change process that is responsive to current system strengths and challenges. This approach will analyze both administrative data and quality data. Quality data will come from the case review process. Administrative data will come from eWiSACWIS. A sampling strategy will be developed that addresses size of county, types of cases and capacity for review. The sampling strategy will include a minimum number of cases per county to ensure that all counties work is reviewed annually. Additionally administrative data gathered from all counties will be used in conjunction with the sample to ensure that the analysis includes the full universe of practice. The sampling strategy will be in accordance with Federal ACF Memo-IM ACYF-CB-IM-12-07.

**Quality Data Collection**

Reviews will include all areas of practice including access, initial assessment, ongoing in-home cases and ongoing placement cases. A plan for conducting reviews that includes analysis of service array data including accessibility and capacity to individualize services is being developed. The long-term goal of this strategy is to engage county staff in collecting much of the quality data needed for the overall assessment. This will improve worker and supervisor understanding of the various ways to assess data in order to improve practice and how data links to daily casework practice. It will be structured in accordance with Federal ACF Memo-IM ACYF-CB-IM-12-07.

All quality data collected will be housed in a central database within DCF. The quality data will be combined with administrative data and other relevant sources of data to provide a full understanding of the strengths and weaknesses of Wisconsin’s statewide child welfare system. This comprehensive data will be translated into an easily understood dashboard which will provide both statewide data and data by county. This will allow counties real-time information about performance. It will also enable DCF to identify areas in need of improvement to address through the improvement project process.

The Dashboard will be reviewed and analyzed by CQI staff. CQI staff will generate a statewide report that includes statewide trends and identifies key issues (both areas of concern and areas promise). The report will also identify where key issues are occurring (statewide, in a particular region, in a particular size agency, etc.).

The improvement project process will be used to further understand areas in need of enhancement. This review will use a range of review techniques depending on the question at hand to further understand the root cause and potential solutions of the identified area of need. Potential review tools include but are not limited to additional case reviews with more in-depth questions, focus groups, interviews, surveys, and more in-depth analysis of existing data.

Each local child welfare agency involved in an improvement project will have a detailed action plan and will receive support from DCF with the implementation of that plan. DCF, in coordination with the local child welfare agencies reviewed, will monitor the results of the action plan. The lessons learned from the improvement projects will be shared widely and will influence state-level decision-making including changes to policies and procedures. A system to provide training and technical assistance will be used to transfer learning from the State to local child welfare agencies on how to conduct continuous quality improvement projects.
Staff Training

Training developed will be uniform and consistent and the process that will qualify individuals to collect quality data will be available to both staff and stakeholders conducting CQI reviews. Internal policies and procedures will be clarified and updated based on the new data collection process. These will include policies that protect against reviewer conflict-of-interest and promotes third-party review of cases; Periodic evaluation and modification of the data collection will occur to ensure continuity and consistency of efforts over time to safeguard the functionality of CQI. DCF will develop inter-rater reliability procedures including refining and updating policies, written manuals and instructions to assist in standardizing completion of the instruments and implementation of the case review process. This process will include an audit mechanism that can verify that the process is consistent across counties and across reviewers.

Internal and External Feedback

Ongoing feedback loops will be established to both internal and external stakeholders (through Advisory groups and data availability) in order to continuously improve all areas identified including systemic issues as well as case practice issues. This feedback loop would provide the necessary data to improve policies, procedures, training and technical assistance as well as eliminate or modify systemic barriers to success (both at the state and county level). These include but are not limited to; developing a web page for dashboard results, and reports from targeted reviews, relevant presentations about CQI findings from regional meetings, and presentations to stakeholders such as the courts and tribes.

D Staff Training

Data that demonstrates functioning

DCF contracts with the Wisconsin Child Welfare Partnership Development System (PDS) to conduct training for child welfare workers and foster parents in Wisconsin. PDS is an organizational unit within the School of Social Work at the University of Wisconsin-Madison. PDS delivers training through four UW institutions—UW-Milwaukee, UW-Green Bay, UW-Madison, and UW-River Falls located in different regions of the state.

The majority of the data utilized in the preparation of this report was gathered from the training system learning management system, PDS Online. This system has been operational since December of 2012 and the numbers utilized reflect what has occurred in the 16 months since that time. Prior to the implementation of PDS Online the training system did not have a statewide database that would accurately reflect the number of trainings or attendees so trends or comparisons prior to that time are unavailable.

Current limitations of the data utilized include the inability to differentiate the role of each individual worker within the system. At this time there are 3 categories of user profiles indicated within the PDS system which are worker, foster parent and private provider. The data reflected in this section pertains to anyone in the system identified as a worker which can include job functions other than child welfare. These job duties may include juvenile justice, adult protective services, support staff, etc. Additionally, PDS Online is also not currently utilized to deliver web based trainings. The data indicated for the number of workers completing pre-service modules was gathered from hand counts from each individual regional training partnership institution.

The chart below reflects the overall number of workers currently active within the PDS Online system as well as the overall number of trainings and sessions offered. Additional training numbers for specific course work can be found in the state’s training plan attached to this document.

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<th>Active Workers Currently in Training System Database</th>
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<tr>
<td><strong>Cumulative Number of Trainings Titles Offered by Training System</strong></td>
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<tr>
<td>County Name</td>
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Training requirements for child welfare workers are specified in Wisconsin administrative rule DCF 43. Currently, efforts have been made to allow the professional development system to track worker attendance at the foundation course level and enhancements are being made to include pre-service completion within that process. The planned enhancements will also include the ability to identify worker roles to promote more accurate reporting of initial, foundational and ongoing training requirements. In addition, the Partnership Development System is working on a modification of the data currently imported into PDS online from the state eWISACWIS system. There is a need to be able to disaggregate the worker category into more specific job functions, not only for data gathering, but also to assist in determining IV-E reimbursement. It is anticipated that in the future a certification module will be created to assist workers and supervisors in understanding compliance with the training requirements. Additionally, it is anticipated that future work will enable the learning system to track web based trainings resulting in a more comprehensive profile of training attendance for child welfare workforce.

Statewide Foster Parent Training

In addition to establishing a single licensing code, the 2009-11 biennial budget allocated funding to mandate foster parent training throughout the State of Wisconsin. DSP worked with the statewide Foster Parent Training Committee (created as a result of Wisconsin’s CFSR in 2006) to establish foster parent training requirements and certifications for each Level of Care, develop core curricula and provide statewide training for agency staff.
In 2010, DCF worked with the child welfare training system to establish a foster parent training system that will support foster parent training statewide. This includes curriculum development and maintenance, provision of training, and feedback to licensing agencies. As a result of a mandate for statewide training requirements in effective as of January 1, 2011, an on-line pre-placement course was also developed during 2010 and is accessible to foster parents statewide at no cost. The on-line training is located at: http://wcwpds.wisc.edu/foster-parent-training/. The child welfare training partnerships provide the Foundation courses for foster parents licensed by counties. Private Child Placing Agencies were also provided training in the curriculum and the financial support to implement training is included in the administrative rates for foster care placements.

The Regional Child Welfare Training Partnerships also provide some on-going training opportunities for foster parents. The Foster Care and Adoption Resource Center is required to provide up to six webinars a year for foster parents. These webinar trainings have an interactive capacity to give foster parents an opportunity to ask questions and provide input during the training. County agencies also provide foster parent training supported financially by DSP providing Title IV-E pass through funding. County agencies can access this funding for mileage reimbursement, child care, materials costs and other allowable costs related to the training. This can be used for pre-placement, if provided face-to-face, foundation training to support attendance at the training and for ongoing trainings. DSP also provides financial support to the Wisconsin Foster and Adoptive Parent Association for a spring and a fall conference for foster parents.

Youth Handbook for Foster Care

In 2009, DSP began exploring raising awareness and the youth voice in out-of-home care experiences. By suggestion of the Wisconsin Youth Advisory Council, DSP partnered with youth to create a youth handbook about foster care. The youth handbook was completed in December 2011 and distributed in 2012. The handbook includes information on expectations of foster parents, how they can be involved in their case planning and court decision making, information on Independent Living programs and how to get assistance or file a child welfare complaint.

Adoption Training Program

Wisconsin statute 48.837 specifies training required for first time parents participating in the Special Needs Adoption Program. DCF requires 18 hours of training to be completed including child specific training if needed. Training is required in sixteen competency areas articulated in DCF 51.10. Training may be provided by a licensed child welfare agency, a licensed private adoption agency, a state funded foster care and adoption resource center. A minimum of two hours of orientation is required.

Training is required in 16 core competencies that include: adoption and its impact on parenting and family dynamics, issues all children face during adoption, loss and grief for the adopted child and the adoptive family, attachment issues in adoptive placement, support and resources for adopted child and families, cultural sensitivity, effects of abuse and neglect in adoption, legal issues related to adoption, issues related to children being adopted from an institutional setting, educational issues, and information specific to the child that is being adopted.

The SNAP recognizes that there are a number of options for families to get adoption training and gives credit where possible to limit the number of extra hours of training that a family may need to complete. Consideration is given to any family that has completed training through another program, state, county
or tribe. After reviewing documentation the family provided regarding completed training, a decision is made on what additional training, if any, the family may need to complete.

The adoption program brought together international and domestic adoption agency staff to discuss issues related to adoption at a statewide conference in May 2013. The conference combined the SNAP, domestic/international and foster care adoption to address common themes and training topics.

*Post Adoption Resource Centers*

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*Post Adoption Resource Centers*

The IV-B Subpart 2 funds received by the Adoption Program are used to support the post-adoption resource centers (PARCs) and the Special Needs Adoption Program contracts. The adoption contracts have made it possible to increase the number of adoption staff providing adoption services resulting in high quality adoptions and the ability to change the focus of the state adoption caseworker to that of state permanency consultant.

DSP contracts with six service providers to operate Post Adoption Resource Center (PARC) services in Green Bay, Stevens Point, Milwaukee, Madison, Eau Claire and La Crosse. PARC services are funded by federal IV-B, Subpart 2 funds and are available to all adoptive families, including parents of children who are adopted through domestic and international adoption programs.

The focus of the six Post Adoption Resource Centers is to:

- Provide education, support activities and services to adoptive families living in the identified service area;
- Improve community awareness of adoption; promote a positive image of adoption; and an increased understanding of the unique issues facing adoptive families, especially among public and private human service providers, schools and medical care providers;
- Increase the availability of services for adoptive families by providing referral services such as respite care, crisis intervention, day care, after-school care, legal help, family counseling, support groups related to adoption, Title XIX service providers and planning for the transition of an adopted child to adulthood; and
- Establish collaborative efforts among public and private organizations and the general public to address the needs of adoptive families in the PARC area.

The names of all families who enter into an adoption assistance agreement are shared with the respective PARC, unless the family opts not to have their address shared.

**Brief overview of Key Services Provided and potential measures or benchmarks for showing progress**

The Wisconsin Child Welfare Professional Development System (WCWPDS) is a partnership involving DCF county child welfare programs, tribal child welfare programs, BMCW and Special Needs Adoption Program (SNAP) and the University of Wisconsin (UW) system. Under this partnership, DCF contracts with the Wisconsin Child Welfare Professional Development System Central Training Unit staff at UW-Madison School of Social Work to coordinate child welfare training in Wisconsin through a regional delivery model. Training is delivered on a regional basis through the following four UW institutions located in the following regional areas UW-Milwaukee, UW-Green Bay, UW Madison, and UW-River Falls.
The staff within the central training unit work with DCF, the counties and the regional university training sites to coordinate training for over 4,000 public and tribal child welfare workers throughout the State of Wisconsin. In 2013, a reorganization of the professional development system was initiated and a revised governance structure was created. An Executive Committee was established to oversee the training functions and coordinate and integrate the training provided by the regional sites and other training provided by DCF. A number of sub-committees were created to address areas of need including: a curriculum committee, a trainer standards committee, an evaluation and research committee and a financial committee. These committees are each chaired by a director of one of the regional child welfare training sites. Ad hoc committees were also created to address specific priority issues. The executive committee itself is composed of representatives from DCF, BMCW, training system staff and the Wisconsin County Human Services Association.

Frequency of Training

Wisconsin’s Child Welfare Professional Development system is a partnership involving the Wisconsin Department of Children and Families (DCF), county child welfare programs, tribal child welfare programs, the Bureau of Milwaukee Child Welfare (BMCW) and Special Needs Adoption Program (SNAP) and the University of Wisconsin system. Central administrative support to the training system is provided by the University of Wisconsin-Madison School of Social Work under contract to DCF to conduct training for child welfare workers and foster parents in Wisconsin. WCPDS subsequently delivers training through four regions, each headquartered in a UW institution: UW-Milwaukee, UW-Green Bay, UW-Madison, and UW-River.

Training needs are subsequently identified regionally through various surveys and through collection of new worker data. A Research and Evaluation Committee is currently exploring strategies to better leverage these data sources to help inform those regional annual plans. These yearly training plans, then, are designed to be responsive to both DCF and county needs and priorities and are presented on an annual basis through the WCPDS Executive Committee.

Quality of Training

In 2012, safety foundation courses employed pre- and post-tests / learning evaluations designed to measure a trainee’s growth and competence development through enrollment in a workshop. Results are reviewed regularly by a research and evaluation committee, which informs changes to both curriculum, to learning activities, and trainer development. The WCPDS Research and Evaluation Committee has been charged with developing similar pre- and post-course evaluations for our entire foundation curriculum. This is a timely charge, as in 2014, the training system launched an effort to build an entirely new curriculum wrapped around a competency model, which will eventually touch the entire spectrum of our curriculum from pre-service through advanced foundation. As foundation courses are changed and developed through this process, pre- and post-tests will be included as a learning activity for each course. We expect this to dramatically improve the data and feedback that we get well beyond the present Level 1 course evaluations we currently employ.

Similar efforts are being made to better evaluate and develop trainers. The Wisconsin Child Welfare Professional Development System designates a standing committee to provide ongoing responsibility for issues related to Trainer Development and Support. Because we are committed to providing training that is relevant, research-based, reflective of best practice, compliant with state standards and statutes as well as designed specifically for adult learners, activities of the Trainer Development and Support Committee are intended to assure that the qualities and expertise of the trainers themselves help WCPDS meet this commitment. The duties of the Trainer Development and Support Committee are to:

- Establish and keep current standards for trainers who are hired and developed by any of the training units within WCPDS.
Establish and keep current the tools necessary to assure compliance with the Trainer Standards. These include, but are not limited to:

- Guidelines for the selection of trainers
- An initial development self-assessment form for aspiring/new trainers
- Guidelines for the preparation and development of trainers
- An assessment form to be used for the on-going development of trainers
- Establish and maintain consistent reimbursement rates for system trainers

Work is already underway on both of these initiatives, which we expect to substantially inform and improve trainer development over the next five years.

Strengths and key challenges going forward

WCWPDS is developing a set of core practice competencies, which will serve as the basis for developing new worker foundation and advanced foundation trainings. The competencies are expected to have a range of uses; they will be used in the continued development of pre-service and foundational courses, quality improvement measurements, social work curricula, job descriptions, staff development, and performance evaluations.

The competencies are being developed through an inclusive process. As the first step in the development process, hundreds of Wisconsin child welfare workers and supervisors participated in a task analysis of their work responsibilities. An ad hoc committee composed of county, state, training system and university personnel was formed and developed a process for building competencies. The committee developed and solicited input from stakeholders on draft core competencies. After receiving input from these stakeholders, seven work groups made up of county, DCF, training system and university personnel were formed to develop in more detail each competency using the lens of best practice, state statutes and child welfare standards.

In response to the development of a set of core competencies it is likely that a number of the current foundational course offerings will be significantly modified or replaced within the foreseeable future. Once the competency project is completed, the list of competencies will be utilized to develop a group of learning objectives supporting those competencies. The competencies and learning objectives will then be grouped as part of foundational course offering learning objectives. Current foundational courses will then be assessed to determine whether or not the current curricula are aligned with the defined worker competencies. Courses will be modified or replaced, as needed.

As part of the restructuring of the professional development system, the role and responsibilities of the Central Training Unit (CTU) were clarified. The responsibility for foundational curriculum development and revision is explicitly included in the scope of the CTU functions. WCWPDS initiated a contract with Worldwide Instructional Design Systems (WIDS) to work with current staff on developing the necessary skill set. WIDS has an extensive background in the development of curricula and has developed a model template that will be utilized in child welfare training design moving forward. It is anticipated that WIDS staff members will work with CTU staff for the duration of 18 months assisting with development of curricula during that time.

In May 2010, the Wisconsin Child Welfare Professional Development System (WCWPDS) released a request for proposals to conduct child welfare training evaluation. Specifically, the main purposes of the project were to:

1) conduct formative evaluation of the Safety, Initial Assessment, and Access Foundations trainings and 2) develop pre and post knowledge assessments for Safety and Initial Assessment. The University of Nebraska–Lincoln, Center on Children, Families and the Law (UNL–CCFL) was awarded the contract in September 2010 and began work in October. The contract was subsequently extended for 2012 and 2013; an additional deliverable was developed to conduct a job task analysis for Access, Initial Assessment, and Ongoing child protection workers in the state of Wisconsin.
The projects completed by the University of Nebraska–Lincoln during the evaluation process included an evaluation of the Safety, Initial Assessment, and Access Foundation trainings, development of a demographic information tool for training participants, implementation of a trainee ID code for linking evaluation information, development of knowledge tests for Safety and Initial Assessment Foundations trainings, identification of additional evaluation needs, regular collaboration and communication with stakeholders through meetings and reports, completion of a job analysis to develop a comprehensive description of the essential job tasks and competencies required of Access, Initial Assessment, and Ongoing child protection workers in the State of Wisconsin. The job task analysis is one of the primary documents currently being utilized to inform the child welfare core competency project noted above.

In 2013, the training system centralized safety trainers statewide to increase efficiency, statewide consistency, and responsiveness to changing statutes and standards.

In the past year, the PDS Safety Coordinators have worked on the development of new safety trainings including Safety Overview for Non CPS Staff, Confirming Safe Environments and safety trainings related to the DCF In-Home Safety Services grant. Multiple sessions of these trainings were provided. Work is currently continuing on the development of a new Supervising Safety curriculum based on the Supervising Safety Decision Making (SSDM) curricula. Module one of this curricula was completed in late 2013 and was presented to pilot groups starting in early 2014. Currently work is underway on a second module with a target release date of early fall 2014.

The Professional Development System implemented the PDS Online Learning Management System (LMS) in 2012 for worker utilization in registering for trainings and maintaining records of those trainings. This LMS, provided by “Cornerstone on Demand”, will eventually house all e-learning events, serve as a tracking and compliance system for administrative rules on training and will allow for the workforce to have instant access to a comprehensive training transcript. The implementation of this learning management system will give DCF and the professional development system a greater capacity to track and monitor requirements of DCF 43, the administrative rule specifying child welfare worker training. As partners in this process the PDS continues to work collaboratively with the DCF and the contracted LMS vendor to refine and implement new features and enhancements as they become available. As discussed earlier in this report, modifying the data feed from eWISACWIS into PDS Online over the next year will allow for a more robust reporting system resulting in greater accuracy.

Work continues with PDS in regards to the Organizational Effectiveness (OE) initiative which has been underway in the past 2 years. The OE project is a systemic and systematic approach to continuously improving an organization's performance capacity and client outcomes. In Wisconsin this program is offered to Human Service agencies to assist in facilitating the adoption of best practices in child welfare. Within the current structure counties are selected based on a referral process which includes the counties identifying the topic area or change needed. The referrals are then reviewed jointly by DCF and the professional development system and 4-5 counties are chosen to participate each year. As this program continues to be refined it is anticipated that other avenues to access this service will be created and will likely include recommending counties based on the outcomes of a critical incident review or the results of a CQI review. Emphasis is placed on building internal capacity at both the state and county levels.

Wisconsin is integrating trauma informed principles into its training system utilizing the model developed by the National Child Traumatic Stress Network (NCTSN). It is the goal of the training system that through this integration, workers will understand the importance of integrating trauma concepts into their daily practice leading to improvements in child and family outcomes. Concepts have been and continue to be imbedded within the pre-placement and pre-service curricula and are being taken into account as the foundation courses are restructured to align with the new core practice competencies discussed earlier. Over the past year, a number of face to face trainings have been offered on this topic with approximately 675 case workers and foster parents completing a training on trauma.
Service Array

Brief assessment of Strengths and Needs

The Ongoing Services Standards, implemented as part of the state’s PIP in January 2013, inform caseworkers, supervisors and contracted staff of requirements for when services should be implemented and guidance on when they may be implemented to address issues regarding a child’s safety, permanence and well-being.

Ongoing Services Standards require that the child welfare caseworker gather and document information pertaining to child and caregiver needs and strengths, to develop a case plan to identify goals and corresponding services needs to support safe case closure, and to routinely monitor goal achievement to ensure adequacy of service provision and desired change. This must be done within six months after development of the initial case plan and every six months thereafter.

The CPS Safety Intervention Standards detail policy and provide additional guidance to workers on how to assess the safety of children who are living in their familial homes or have been placed in out-of-home care. They address situations where a child welfare caseworker must determine whether a child can safely remain in his or her familial home or must be removed from the home for reasons of safety. They further provide guidance with measures that may allow a child to remain in his or her familial home, such as developing a protective plan or in-home safety plan that identifies services that will control for or manage threats to safety. Additional guidance includes how services may be used to manage impending danger threats as part of an in-home or out-of-home safety plan.

As a state-supervised, county administered system, many services are available statewide to families at-risk of or involved in the child protective service system. However, counties have developed individualized service strategies based on the needs of the population and the availability of service providers. Local service arrays, therefore, are highly dependent on the degree to which local tax levy is used to fund local services. In general, service arrays vary from county to county. Often, larger, more urban counties contract with outside agencies to provide services that meet the needs of families. Smaller, more rural counties have fewer options and tend to administer services within their own child welfare agency or rely on the child welfare caseworkers to perform the service themselves.

Wisconsin continues to assess and improve the extent to which services are available and equitably distributed across the state and has undertaken major initiatives to address findings in the 2010 CFSR that there was a lack of available resources and sufficient services available to children and families in close proximity to where they live. The department works with counties to design individualized case plans and identification of services to meet the unique needs of each child and his/her family through the use of case planning tools and flexible funding mechanisms.

Over the last five years, the state has implemented universal use of the CANS assessment tool for children entering out-of-home care to better understand children’s needs and match children with appropriate services. The use of this assessment with all children in out-of-home care allows Wisconsin to pinpoint needs and identify services that will meet the range of needs of all children. Wisconsin continues to strengthen and expand training regarding use of the CANS assessment to identify child and family needs, to support case plan goal development and prioritization, and to best match children and their family members to needed services and service provider. Please also see section 4a and b for a
more detailed description of Wisconsin’s service delivery system and how it is designed to provide a continuum of services.

Further, over the next five years, Wisconsin will be supporting Coordinated Services Teams in all counties across the state. This approach provides a family driven, cross-system, collaborative approach engaging key players in a family’s life to develop a plan of services to improve the family’s well-being and assure a child’s safety.

Three efforts described below provide additional examples of Wisconsin’s efforts to ensure the availability and accessibility of comprehensive high quality service array that Wisconsin is implementing to better meet the identified needs of children and families.

Specific initiatives that have been undertaken throughout the last two years that will be built upon over the next year are detailed in the next section and include the Medicaid Care4Kids health program, the Wisconsin Trauma Project, and the Child Psychiatry Consultation Program.

Medicaid Care4Kids Foster Care Medical Home Initiative

The Wisconsin Department of Children and Families (DCF) and the Department of Health Services (DHS), the state Medicaid agency, are committed to improving the quality, access, and timeliness of health services to children in the out-of-home care system through the implementation of a medical home delivery system model. Following two and a half years of collaboration and planning by DCF and DHS, in consultation with health care professionals and other external stakeholders, the foster care medical home program, called Care4Kids, began on January 1 in six counties in southeast Wisconsin: Kenosha, Racine, Waukesha, Ozaukee, Washington, and Milwaukee Counties. The state is contracting with Children’s Hospital of Wisconsin to provide the Care4Kids program in this area of the state. This area accounts for half of the total number of children statewide in out of home care. Wisconsin requested and received approval in July 2012 from the federal Centers for Medicare and Medicaid Services for a section 1937 Medicaid state plan amendment to establish a Foster Care Medical Home. DCF and DHS intend to expand the program statewide over time.

Care4Kids provides comprehensive and coordinated health care for children in out-of-home care in a way that reflects the unique health needs and trauma experiences of these children. The program provides children with primary care physicians who are trained in the needs of children in Out-of-Home Care, and also creates a team of professionals who coordinate care for the child.

The team of health professionals collaborates with the child welfare caseworker, birth parents and foster parents to develop a comprehensive health plan for each child that meets the child’s individualized needs.

Care4Kids includes a number of benefits designed to meet the unique needs of children in out-of-home care, including:

✓ An Out-of-Home Care Health Screen within 2 business days of entering care
✓ A Comprehensive Initial Health Assessment within 30 days of entering care
✓ A mental health evaluation (if needed)
✓ All Medicaid-covered benefits
✓ Dental and Vision care
✓ Ongoing routine check-ups at the increased periodicity recommended for foster children by the American Academy of Pediatrics
An electronic medical record
A Health Care Coordinator
Preferred access to Child Advocacy Centers and Centers of Excellence
A Comprehensive Health Care Plan tailored to the child’s individual health needs
Ongoing Health Care for an additional 12 months after discharge from out-of-home care

The Departments will monitor quality of the Care4Kids program through an External Quality Review Organization (EQRO), as required under Medicaid, and through outcome measures, such as the utilization of psychotropic medications and utilization of in-patient hospitalization.

Children in out-of-home care will receive transitional planning and follow-up services necessary to assure continuity of health care after achieving permanency or aging out of foster care. To achieve continuity of care, children/youth will be eligible to remain in the Care4Kids program for twelve months after leaving out-of-home care, contingent on continued Medicaid eligibility. The Care4Kids program will coordinate with other systems providing health and developmental services to the child, including the local school system, the state’s IDEA Part D program for children with developmental disabilities and Medicaid home and community-based waiver programs for children with long term care and mental health needs.

The Care4Kids program represents the state plan for ongoing oversight and coordination of health care services for children in foster care. The full Care4Kids contract is included as an appendix to this report. More information about the program is available at the following link:

http://www.dcf.wi.gov/children/foster/care4kids/default.htm

The DCF Trauma Project

The DCF Trauma Project is a Three Tiered approach in response to identified trauma and mental health needs in the child welfare population. By including Trauma Focused Cognitive Behavior Therapy (TFCBT) in the service array, Wisconsin is taking very important steps to better meet the needs of its children and families. The DCF Trauma Project supports child and family well-being outcomes by providing families with enhanced capacity to provide for their children needs and ensuring children receive appropriate services to meet their mental health needs. Research has shown that children who receive TFCBT experience fewer disruptions and are less likely to run away than those who did not receive TFCBT. Further, the resource trauma training educates foster and biological parents on childhood trauma, how to create a safe home environment and how to respond and manage trauma symptoms. This results in safe, stable and more nurturing placements.

Tier One of the training introduces and implements a trauma screening and assessment tool and an evidence-based trauma treatment into the child protective service array for therapists who treat children in the child welfare system, as identified by county child welfare agencies. Tier two implements a trauma workshop for resource and biological parents where caregivers learn about childhood trauma and how to recognize and respond to trauma triggers to maximize child safety, stability and well-being. Child welfare staff also complete the training to better support caregivers in using a trauma-informed parenting approach. Tier three provides for on-going, system-wide training and collaboration to enhance the system’s ability to respond sensitively and effectively to its consumers as identified by the county or tribe. Stakeholders trained have included: school staff, law enforcement, and court personnel.
The DCF Trauma Project was piloted in two counties and one tribe in 2012, and has since expanded to a total of 12 counties and one tribe. Moving forward, the project plans to use mentoring and partnering of current and former sites to guide implementation, provide ongoing support and consultation, and to continue capacity building and sustainability planning. A data platform to better track the project will be implemented in 2014.

Child Psychiatry Consultation Program

Insufficient access to child psychiatry is a problem for most of the children in Wisconsin as well as the rest of the nation. In many areas of Wisconsin, waits of four weeks for psychiatric appointments are common with much longer waits in rural areas. Children in the state’s child welfare system are particularly impacted by this shortage of child mental health services. Support and training for primary care clinicians treating children’s behavioral health challenges is also needed, as many primary care clinicians have limited experience and training in treating psychosocial and mental health problems and children’s primary care providers are often the most frequent contact for mental health concerns. They perform this role but have relatively little training to do so. In addition, they are less likely to have established referral relationships with psychiatrist and mental health clinicians than other specialists. This speaks to the need for additional support and training for primary care providers in behavioral health issues and the need for the provision of outreach, training, support and referral for these primary providers.

In recognition of these gaps and needs in mental health services for children in Wisconsin, in February 2014, Governor Walker signed into law 2013 Wisconsin Act 27 which establishes a psychiatry consultation line for health care professionals.

The consultation includes:

(a) Support for participating clinicians to assist in the management of children and adolescents with mental health problems and to provide referral support for pediatric patients.
(b) A triage–level assessment to determine the most appropriate response to each request, including appropriate referrals to other mental health professionals.
(c) When medically appropriate, diagnostic and therapeutic feedback.
(d) Recruitment of other practices in the regional hub’s service territory to the provider’s services.

As noted earlier, The CANS assessment must be done upon entry into care, at changes in placement and every six months the child is in out-of-home care. This entails defining each child and family need and ensuring that a service is provided to that family to address the need. Please see section D9, page 108 for a description of the PS waiver program that has been designed to better understand how to be more responsive to the service array systemic factor.

E. Agency Responsiveness – See Collaboration Section, starting on page 11, for description of how this systemic variable is being addressed and describes the system’s strengths and weaknesses.

F. Foster and Adoptive Parent Licensing and Recruitment

Standards for foster homes and other institutions was rated as a Strength because the State had standards for foster family homes and residential care centers for children and youth that are in accord with recommended national standards; because licensing standards are being applied to all licensed or approved foster family homes or child care institutions receiving Title IV-E or IV-B funds; and because the state generally enforces the provisions of criminal background checks to ensure that clearances relating to licensing or approving foster care and adoptive placements addressed the safety of foster care and adoptive placements for children.
Licensing

The availability and quality of licensed out-of-home care placement providers in the State of Wisconsin are supported by a variety of laws, administrative rules and procedures. The Division of Safety and Permanence develops regulatory policies and standards for licensing foster care homes; and generates and enforces standards for group homes, private child placing agencies, shelter care facilities and residential care centers for children and youth. Regular regional and statewide updates are provided for foster home licensors regarding changes to licensing requirements, policies and state/federal laws.

The regulatory aspects of ensuring the safety of children and the quality of providers are specified in state statute and administrative rules as follows:

Wisconsin’s Children’s Code, Chapter 48
1. Placement Authorization
2. Criminal Background Check Requirements
3. Independent Investigations of Maltreatment Allegations Against Licensed Providers
4. Notice to Foster Parents and Other Physical Custodians of Legal Proceedings

Administrative Rules for Department of Children and Families (DCF) and the Department of Health Services (DHS)
1. DHS 12 - Caregiver Background Checks
2. DCF 37 - Information To Be Provided to Foster Parents
3. DCF 50 – Facilitating the Adoption of Children with Special Needs
4. DCF 51 – Adoption of Children with Special Needs
5. DCF 52 - Residential Care Centers for Children and Youth
6. DCF 54 - Child Placing Agencies
7. DCF 55 – Subsidized Guardianship
8. DCF 56 - Foster Home Care for Children
9. DCF 57 - Group Foster Care for Children
10. DCF 58 – Eligibility for the Kinship Care and Long-Term Kinship Care Program
11. DCF 59 – Shelter Care Facilities
12. DHS 94 – Patient Rights and Resolution of Patient Grievances

Draft revisions to Chapter DCF 37, “Information for Foster Parents,” were made in 2008, including information to agency staff and foster parents regarding a child’s need for further assessment/treatment and crisis response planning. DCF is revising the draft due to a number of different law and other rule changes. The authority to modify the rule was granted by the Governor’s Office and changes to the rule will be filed with the legislature in 2014.

Beginning in 2010, DCF staff have provided numerous trainings and technical assistance opportunities for foster care licensing staff across the state. An on-line training for foster care licensing staff was developed in 2012 and was made available to staff statewide in 2013. The training will also serve as a resource to experienced licensors when questions arise. The training is free of charge and is available on PDS on-line.

There are seven webcasts available that review the changes that occurred to licensing code in 2010 and 2011. Staff also continue to provide additional technical assistance to agency staff during monthly call-ins, through Advanced 56 topic trainings, and as requested by agency staff.
Effective April 2011, Wisconsin implemented the Child and Adolescent Needs and Strengths (CANS) tool, a national validated assessment tool, for all children in out-of-home care. The training on use of the CANS was completed using different approaches to cover the tool and policy. Statewide training on the tool was provided to agency staffs by the author, Dr. John Lyons, in May 2010 through June 2011. DCF also announced the release of the on-line CANS tool training on October 12, 2011 in DSP Info Memo 2011-12, making it available for all new workers and as a resource for existing staff. Since that date thousands of users have accessed the training either as a new user or for re-certification process. The On-Line CANS Tool Training Resource is published at: http://wcwpds.wisc.edu/related-training/. In 2012, updates were made to the on-line training and certification process to further support the use of the CANS tool in the state. Wisconsin is also participating with consortium through a grant received by Northwestern University to further inform trauma based treatment planning using the CANS tool. New training resources were provided during 2013 and will be expanded in 2014 and over the next five years.

DCF continues to provide technical assistance and create resources that assist practitioners in the implementation of the CANS.

Statewide Foster Parent Training

In addition to establishing a single licensing code, the 2009-11 biennial budget allocated funding to mandate foster parent training throughout the State of Wisconsin. DSP worked with the statewide Foster Parent Training Committee (created as a result of Wisconsin’s CFSR in 2006) to establish foster parent training requirements and certifications for each Level of Care, develop core curricula and provide statewide training for agency staff.

In 2010, DCF worked with the child welfare training system to establish a foster parent training system that will support foster parent training statewide. This includes curriculum development and maintenance, provision of training, and feedback to licensing agencies. As a result of a mandate for statewide training requirements in effective as of January 1, 2011, an on-line pre-placement course was also developed during 2010 and is accessible to foster parents statewide at no cost. The on-line training is located at: http://wcwpds.wisc.edu/foster-parent-training/. The child welfare training partnerships provide the Foundation courses for foster parents licensed by counties. Private Child Placing Agencies were also provided training in the curriculum and the financial support to implement training is included in the administrative rates for foster care placements.

The Regional Child Welfare Training Partnerships also provide some on-going training opportunities for foster parents. The Foster Care and Adoption Resource Center is required to provide up to six webinars a year for foster parents. These webinar trainings have an interactive capacity to give foster parents an opportunity to ask questions and provide input during the training. County agencies also provide foster parent training supported financially by DSP providing Title IV-E pass through funding. County agencies can access this funding for mileage reimbursement, child care, materials costs and other allowable costs related to the training. This can be used for pre-placement, if provided face-to-face, foundation training to support attendance at the training and for ongoing trainings. DSP also provides financial support to the Wisconsin Foster and Adoptive Parent Association for a spring and a fall conference for foster parents.

Youth Handbook for Foster Care

In 2009, DSP began exploring raising awareness and the youth voice in out-of-home care experiences. By suggestion of the Wisconsin Youth Advisory Council, DSP partnered with youth to create a youth
handbook about foster care. The youth handbook was completed in December 2011 and distributed in 2012. The handbook includes information on expectations of foster parents, how they can be involved in their case planning and court decision making, information on Independent Living programs and how to get assistance or file a child welfare complaint.

**Diligent Recruitment**

**Child and Foster Home Characteristics and Demographic Data** - Statewide, Milwaukee and Balance of State demonstrate that Wisconsin has performed well in matching children of like backgrounds with foster families.

**Children’s Demographic Information**

As of December 31, 2013 the State of Wisconsin had 6,514 children in out-of-home care, of those children 106 or 1.6% were placed in Pre-Adoptive Home settings. Data regarding pre-adoptive placement settings is comparable to the total out-of-home care population. The below information is for all children in out-of-home care on 12/31/2013.

<table>
<thead>
<tr>
<th>Gender</th>
<th>Children in Care 12/31/13</th>
</tr>
</thead>
<tbody>
<tr>
<td>MALE</td>
<td>FEMALE</td>
</tr>
<tr>
<td>Statewide</td>
<td>3559</td>
</tr>
<tr>
<td>Milwaukee</td>
<td>1129</td>
</tr>
<tr>
<td>BOS</td>
<td>2430</td>
</tr>
</tbody>
</table>
As of December 31, 2013 the State of Wisconsin had 3,543 licensed foster homes and of those homes they consisted of a total of 6,511 parents. The below information is for those foster home providers whose license was open as of 12/31/2013:

### Provider Characteristics and Demographic Data

#### Level of Certification

<table>
<thead>
<tr>
<th>PROVIDER COUNTY</th>
<th>LICENSED PROVIDERS</th>
<th>LOC 1/2</th>
<th>LOC3</th>
<th>LOC4</th>
<th>LOC5</th>
</tr>
</thead>
<tbody>
<tr>
<td>STATEWIDE</td>
<td>3543</td>
<td>2878</td>
<td>443</td>
<td>209</td>
<td>13</td>
</tr>
<tr>
<td>Milwaukee</td>
<td>537</td>
<td>534</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>BOS</td>
<td>3006</td>
<td>2344</td>
<td>441</td>
<td>208</td>
<td>13</td>
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</tbody>
</table>

#### Children in Care 12/31/13

<table>
<thead>
<tr>
<th>Ethnictiy</th>
<th>HISPANIC</th>
<th>NOT IDENTIFIED HISPANIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statewide</td>
<td>731</td>
<td>5783</td>
</tr>
<tr>
<td>Milwaukee</td>
<td>287</td>
<td>1899</td>
</tr>
<tr>
<td>BOS</td>
<td>444</td>
<td>3884</td>
</tr>
</tbody>
</table>
Child Count and Relative Placement Settings

### Child Count and Relative Placements 12/31/13

<table>
<thead>
<tr>
<th></th>
<th>Total Child Count</th>
<th>FH Non Relative</th>
<th>FH Relative</th>
<th>Kinship Care</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Statewide</strong></td>
<td>6514</td>
<td>3232</td>
<td>1299</td>
<td>903</td>
</tr>
<tr>
<td><strong>Milwaukee</strong></td>
<td>2186</td>
<td>1057</td>
<td>380</td>
<td>353</td>
</tr>
<tr>
<td><strong>BOS</strong></td>
<td>4328</td>
<td>2175</td>
<td>919</td>
<td>550</td>
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</table>

Marital Status

### Licensed Foster Homes 12/31/13

<table>
<thead>
<tr>
<th></th>
<th>MARRIED COUPLE</th>
<th>UNMARRIED COUPLE</th>
<th>SINGLE FEMALE</th>
<th>SINGLE MALE</th>
<th>MARITAL STATUS UND</th>
<th>LEGALLY SEPARATED</th>
<th>MARITAL STAT NOT DOC</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Statewide</strong></td>
<td>2339</td>
<td>204</td>
<td>895</td>
<td>90</td>
<td>12</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td><strong>Milwaukee</strong></td>
<td>286</td>
<td>38</td>
<td>194</td>
<td>12</td>
<td>6</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td><strong>BOS</strong></td>
<td>2053</td>
<td>166</td>
<td>701</td>
<td>78</td>
<td>6</td>
<td>2</td>
<td>0</td>
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</table>
**Gender**

**Licensed Foster Homes 12/31/13**

<table>
<thead>
<tr>
<th></th>
<th>FEMALE</th>
<th>MALE</th>
<th>GENDER NOT DOCUMENTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>STATEWIDE</td>
<td>3748</td>
<td>2734</td>
<td>29</td>
</tr>
<tr>
<td>Milwaukee</td>
<td>584</td>
<td>347</td>
<td>3</td>
</tr>
<tr>
<td>BOS</td>
<td>3164</td>
<td>2387</td>
<td>26</td>
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**Race**

**Licensed Foster Homes 12/31/13**

<table>
<thead>
<tr>
<th></th>
<th>WHITE</th>
<th>AFRICAN AMERICAN</th>
<th>ASIAN</th>
<th>AMERICAN INDIAN</th>
<th>ALASKAN</th>
<th>NATIVE HAWAIIAN</th>
<th>RACE UNABLE TO DETERMINE</th>
<th>RACE NOT DOCUMENTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>STATEWIDE</td>
<td>5381</td>
<td>915</td>
<td>29</td>
<td>118</td>
<td></td>
<td>8</td>
<td>60</td>
<td>0</td>
</tr>
<tr>
<td>Milwaukee</td>
<td>577</td>
<td>327</td>
<td>6</td>
<td>5</td>
<td></td>
<td>3</td>
<td>16</td>
<td>0</td>
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<tr>
<td>BOS</td>
<td>4804</td>
<td>588</td>
<td>23</td>
<td>113</td>
<td></td>
<td>5</td>
<td>44</td>
<td>0</td>
</tr>
</tbody>
</table>

**Ethnicity**

<table>
<thead>
<tr>
<th>Provider Ethnicity</th>
<th>HISPANIC ETHNICITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>STATEWIDE</td>
<td>147</td>
</tr>
<tr>
<td>Milwaukee</td>
<td>53</td>
</tr>
<tr>
<td>BOS</td>
<td>94</td>
</tr>
</tbody>
</table>
Strategies to Reach all Parts of the Community

Wisconsin has a process for and is committed to recruiting foster and adoptive parents that reflect the racial, ethnic and cultural diversity of the children in out-of-home care. Local child welfare agencies, including the state’s BMCW and SNAP programs, counties, and private child placing agencies are responsible for recruiting families for the children living in out-of-home care. The Division continues to increase resources to all licensing and placing agencies to support their efforts to recruit foster and adoptive parents who reflect the children in our care.

State Permanency Consultants work with counties to identify children needing targeted recruitment efforts so that these children can also move to permanence in a more timely fashion. To help facilitate the timely movement of children to permanence, the Division required all adoption agencies working with the public child welfare system and supported counties, tribes, and private agencies in using the Structure Analysis Family Evaluation (SAFE) foster and adoption family assessment format so that the completion of an adoptive home study is not a barrier to a timely adoption. DSP supports a SAFE training each year for new licensors in the field.

Recruitment and Retention

Wisconsin Statewide Recruitment Goals

In collaboration with counties and tribes, DSP works with public, private and tribal agencies to develop a pool of waiting families to meet the diverse needs of children in out-of-home care (OHC). Specific strategies that are used include the following:

- A consistent, statewide recruitment campaign with materials that can be used by local agencies to build on the recognition gained from the statewide activities. During 2012, billboards were released to support recruitment of foster homes for Indian children through collaboration with Wisconsin tribes. In 2013 a new general campaign was released in May and the billboards to support foster homes for Indian children were continued.
- Continue to improve use of recruitment and retention data to enable agencies to make program improvement decisions based upon current and accurate data concerning family recruitment and retention. DCF is implementing a Geographic Placement Resource System (GPRS) Project to target recruitment and better identify areas in need and where foster children are removed. Being able to visualize on a map where foster children come from and where they are placed will improve the identification of areas in need of recruitment efforts by local agencies. The GPRS will display the race, ethnicity, relationship status, level of care certification and provider characteristics. GPRS became available to agencies in 2013.
- Promote Permanency Consultants (PC’s) work with counties, tribes and private agencies to facilitate timely, quality permanence for children.
- Collaborate with counties, tribes, and private agencies to develop policies and procedures to increase the identification of relatives as placement resources.
- Provide support and training to counties, tribes and private agencies to improve community and cultural responsiveness to recruitment and retention activities, including access to services.
- Implement a dual licensing process (SAFE) to help facilitate quality, timely permanence by having studied and approved foster/adopt families as resources for children in need of permanence.
The Foster Care and Adoption Resource Center (FCARC) produces a variety of recruitment resources for agencies to use at the local level. Resource Center brochures and information are also being used by local agencies to connect with families. In addition, the Resource Center has supported the recruitment and retention of foster and adoptive families through a pre-conference summit before the annual foster care coordinators’ conference. In 2012, the focus of the pre-conference summit was recruitment of foster homes with Denise Goodman. In 2013, the focus of the pre-conference summit was recruitment of foster homes with Michael Sanders. The Division is committed to assisting local agencies with targeted and child-specific recruitment. Beginning in 2010 and continuing through the present, the FCARC created new resources for relative caregivers, especially those who become licensed families due to changes in Wisconsin’s foster care licensing rules. FCARC created a resource guide to assist workers for working with relative caregivers and DCF approved the guide for issuance in 2013.

Staff at the Resource Center continue to operate a 1-800 toll-free recruitment line and have enhanced their web site to accept electronic inquiries regarding foster care and adoption. FCARC will continue to meet with local county and tribal agencies to gather information and ideas about how to expand services to meet the needs of local agencies throughout 2013 and beyond.

The 09-11 and 11-13 biennial budgets included funding for a public foster care campaign in which the Department committed to raising public awareness about the need for additional foster parents for the children in care. A campaign was created to counter the negative images of foster care and redefine what it means to be a foster parent in Wisconsin. This public awareness campaign was launched in April-May 2011 in celebration of National Foster Care Month and continued during these months annually through 2014. As a result of the latest launch and media attention, DSP is seeing a substantial rise in requests for information about foster care.

DSP also supports the Wisconsin Foster and Adoptive Parent Association through funding and technical support for a statewide newsletter created by foster parents and the Foster and Adoptive Support and Preservation Program. The support includes foster parents who are trained to respond to concerns by other foster parents specifically around circumstances of allegations of abuse and neglect. DSP staff also meet quarterly with foster parents from across Wisconsin in the Foster Parent Advisory Committee to gather input on pending policies and legislation and to allow foster parents to bring forward concerns they are hearing from other foster families.

Adoption Training Program
The SNAP recognizes that there are a number of options for families to get adoption training and gives credit where possible to limit the number of extra hours of training that a family may need to complete. Consideration is given to any family that has completed training through another program, state, county or tribe. After reviewing documentation the family provided regarding completed training, a decision is made on what additional training, if any, the family may need to complete.

The adoption program brought together international and domestic adoption agency staff to discuss issues related to adoption at a statewide conference in May 2013. The conference combined the SNAP, domestic/international and foster care adoption to address common themes and training topics.

Post Adoption Resource Centers
The IV-B Subpart 2 funds received by the Adoption Program are used to support the post-adoption resource centers (PARCs) and the Special Needs Adoption Program contracts. The adoption contracts have made it possible to increase the number of adoption staff providing adoption services resulting in
high quality adoptions and the ability to change the focus of the state adoption caseworker to that of state permanency consultant.

DSP contracts with six service providers to operate Post Adoption Resource Center (PARC) services in Green Bay, Stevens Point, Milwaukee, Madison, Eau Claire and La Crosse. PARC services are funded by federal IV-B, Subpart 2 funds and are available to all adoptive families, including parents of children who are adopted through domestic and international adoption programs.

The focus of the six Post Adoption Resource Centers is to:

- Provide education, support activities and services to adoptive families living in the identified service area;
- Improve community awareness of adoption; promote a positive image of adoption; and an increased understanding of the unique issues facing adoptive families, especially among public and private human service providers, schools and medical care providers;
- Increase the availability of services for adoptive families by providing referral services such as respite care, crisis intervention, day care, after-school care, legal help, family counseling, support groups related to adoption, Title XIX service providers and planning for the transition of an adopted child to adulthood; and
- Establish collaborative efforts among public and private organizations and the general public to address the needs of adoptive families in the PARC area.

The names of all families who enter into an adoption assistance agreement are shared with the respective PARC, unless the family opts not to have their address shared.

3. Plan for Improvement

Wisconsin’s plan for improvement over the next five years is driven by the data shared in section 2, the CFSR Service Principles, and strategic initiatives that are aligned with the Child Welfare Practice Model. Goals and objectives are informed by the last five years of experience and are coordinated with overall objectives of the Department of Children and Families strategic plan.

The Department’s goals and objectives to improve the child welfare system are described in this section. For each specific objective, the corresponding federal CFSR performance items, national data standards, and/or systemic factors it addresses is noted. In addition, objectives have been selected because there is an evidence base for their effectiveness or they are considered to be promising practices.

**Goal 1 - Safely reduce the number of children in out-of-home care by: supporting more children safely in their homes rather than being placed in out-of-home care, moving children as expeditiously as possible to permanency; and by preventing re-entry into the out-of-home care system**

*Objectives:*
1A. Implement performance-based contracting, focusing on permanency performance measures, for residential out-of-home care providers: Addresses federal performance items 6, 8, 21 and 22.

To track progress on meeting this objective, Wisconsin will:

- Track and measure findings related to established criteria for Wisconsin child caring institutions using the public dashboards that have been created.
  - Beginning in June 2014, the Department is publishing on an annual basis dashboards on performance based measures for: Child Placing Agencies (CPA), Group Homes (GH), and Residential Care Centers (RCC). The reporting period for each dashboard is the previous calendar year, plus the following 3 month period. During the reporting period, the experience of children placed through the Wisconsin child welfare and juvenile justice system is tracked and rated, based on the following benchmarks:

<table>
<thead>
<tr>
<th>Optimal</th>
<th>Child has reached legal permanency through reunification, adoption or guardianship.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Favorable</td>
<td>Child has moved to a family placement with a relative caregiver, including a trial reunification.</td>
</tr>
<tr>
<td>Favorable</td>
<td>Child has moved to a less restrictive setting from previous provider, however not in a placement with a relative caregiver.</td>
</tr>
<tr>
<td>Unfavorable</td>
<td>Child has moved to a placement that is of the same type as previous placement; however is a different physical placement provider, or the child has aged out of care for discharge reason.</td>
</tr>
<tr>
<td>Very Unfavorable</td>
<td>Child has moved to a placement that is more restrictive from previous provider type.</td>
</tr>
<tr>
<td>Poor</td>
<td>Child is missing from out of home care, has moved to placement in a hospital, detention, corrections or has discharged from care as missing from out-of-home care or to corrections.</td>
</tr>
</tbody>
</table>

- The dashboards also display the following information: the number of placements during the reporting period, median length of stay with each provider during the reporting period, the percentage of children who sustained favorable outcomes for a period of at least 3 months, and the initial Child and Adolescent Needs and Strengths (CANS) results for children placed with the provider. The CANS information is provided at the domain level and the indicator level.

- Training and implementation supports for this initiative will include: outreach by the Department to counties and stakeholders to build their understanding and use of the provider performance based measures. It is important to note that currently Milwaukee County and state Juvenile Justice youth are not tracked in eWiSACWIS. DOC and the Office of Youth Services have been discussing possible future ways to address this data gap.

- The rationale for selecting this objective is to enhance transparency and accountability of provider outcomes with children involved in the child welfare and juvenile justice system.
Tying performance-based measures to reimbursement will establish incentives for providers to achieve quality outcomes for children.

- **Timeline**: DCF will publish updated data annually in the spring of each of the next five years and future years. In addition, DCF expects to tie payment levels to child welfare providers beginning in 2017 and will continue to track the performance of agencies, prior to and following that time.

### 1B. Implement the family finding strategy statewide, which includes finding fathers and paternal relatives: Addresses Performance items 5, 7, 12, 14, 15 and 20.

- **Measures** will include: (a) the number of counties adopting the strategy; (b) the number of children placed with relatives, and (c) the permanency outcomes of children who exit relative placements.

- **Training and implementation supports**: Beginning in 2015, the Wisconsin Child Welfare Professional Development System will implement a training series for counties on best practices in family finding. WI will be contracting with the current and only vendor that has the proprietary rates to the software. The WI training system, PDS, will also provide interactive and supportive case specific consultations intended to address obstacles and challenges unique to each case, community and agency. Details of this training are articulated in the training plan (Attachment D).

- The **rationale** for selecting this objective is that placing children with familiar, supportive relatives will reduce the trauma experienced by children and promotes and preserves the child’s family connections. Evidence suggests that impairing the healthy brain development, childhood trauma results in short and long-term negative social, emotional and health consequences.

- **Evaluation**: DCF intends to evaluate the success of this program over time and has established baseline measures. In addition, DCF is evaluating the best use for State Permanency Consultants that are focused on support the counties achieve improved outcomes with permanency.

- **Timeline**: Within the target population for this effort, DCF expects to see an increase in the number of permanent connections a child has over the next five years; in addition, DCF expects to see an increase in the number of connections made between youth and biological fathers over the next five years.

### 1C. Implement the in-home safety services (IHSS) pilot in selected counties and expand to other parts of the state to enable counties to serve more children safely in their homes: Addresses Performance Items 3, 4 and 18 and the Service Array Systemic Factor

- **Measures** for this objective include 1) the number of children who are not victims of subsequent maltreatment 2), the number of children who successfully avoid entry into out-of-home care
while participating in this program; and, 3) the number of children re-entering the child welfare system after completing the program.

- **Training and implementation supports:** In conjunction with DCF, the WCWPDS has developed, and will continue to deliver, training to support the In-Home Safety Services grant. Training will focus on the needs and learning objectives of the first round of pilot counties. The Bureau of Safety and Well-Being (BSWB), in conjunction with WCWPDS, revised and implemented two separate one (1) day Safety Training for each county and combined consortiums. Trainings included county staff and contracted In Home Safety Service Providers and covered the foundational component process of safety implementation and Wisconsin’s Safety Model. Supports will also include quality technical assistance consultation by DCF staff with counties. Implementation supports will include possible enhancements to existing reports to monitor program outcomes. These enhancements are currently in the process of completion and will be able to evaluate the measures indicated above. Supports will also include quality technical assistance consultation by DCF staff with counties. Implementation supports will include possible enhancements to existing reports to monitor program outcomes. Evaluation of the fidelity to this approach will also be measured.

- **Timelines:** Although training is an ongoing component of IHSS, all initial Safety trainings will be completed by 1st Quarter of 2015. BSWB completes quarterly case presentation meetings, provides monthly and quarterly technical assistance and policy consultation; and conducts annual program meetings with all participants of the IHSS program initiative. The enhancements will be completed by 4th Quarter of 2015. If the program demonstrates success, the Department plans to consider expanding the program beginning in CY 16, subject to available funding.

- Evaluation of the fidelity to this approach will also be measured. BSWB continues to evaluate cases for fidelity to this approach quarterly and an initial measure of the fidelity to approach to be completed by 4th Quarter of 2017.

- The *rationale* for this objective is that it reduces trauma experienced by children by preventing children from being separated from their family, home, and possibly community. By impairing the healthy brain development, childhood trauma results in both short and long-term negative social, emotional and health consequences.

**1D. Implement the Post Reunification Support (P.S.) Title IV-E demonstration project to provide 12 months of support to children and families after reunification, tailored to meet the individualized needs of the child and family: Addresses: Performance Items 5, 22 and 23, and the Service Array Systemic Factor-)**

- **Measures:** The Division is tracking current referral and enrollment counts and is using enrollment data to track payment amounts on a regular basis. The Division has also developed a report to be used by state and local county child welfare agency staff and supervisors to monitor compliance with program requirements including caseworker contacts and completion of critical practice requirements such as updating the child and caregiver CANS assessment and case plan.
Outcome measurement methods to be used during the course of the program’s evaluation include monitoring the program’s impact on maltreatment recurrence and re-entry into out-of-home care, changes in child and caregiver functioning based on the required completion of the Child and Adolescent Needs and Strengths (CANS) assessment, and use of other state agency data related to child educational, mental health and physical health outcomes.

Additional tracking systems have been implemented to gather information that will be used to establish baseline information on treatment and comparison child, caregiver and family functioning, as well as Monthly Family Service Report Survey completion, which will be used to quantify services received by the enrolled child(ren) and family member(s) caregiver(s) designed to assist the family to achieve the goals established in the family’s case plan.

Training and implementation supports for this effort include formal training related to case planning provided by the state’s Child Welfare Professional Development System and will include regularly regional consultation and shared learning collaborative events. These sessions will be focused on topical areas to promote cross-system engagement and peer learning.

Timelines: Implementation of the P.S. Program began in January 2014. For the period of the five-year demonstration project, the Division will issue applications for additional counties to begin implementation for each remaining calendar year period. The Division continues to implement core components of the federally approved evaluation plan, including development of the second year Re-enty Prevention Model (RPM) which was finalized and issued in September 2014 to be used in Year 2, which begins in January 2015. The Division will continue to report on program implementation and evaluation efforts as part of the Semi-Annual Progress Reports, with the next report due in November 2014. The department is planning to expand the program to additional counties in CY 15, CY 16, CY 17, CY 18, and future years subject to available funding. In September 2014, the Department issued an application for interested counties to apply for participation in CY 2015.

The rationale for this objective is that 12 months of post-reunification support will reduce the likelihood of re-entry of children into the out-of-home care system and improve outcomes for these children and their families.

1E. Evaluate the Alternative Response (AR) approach, to determine if/when future expansion should take place: Addresses Performance Item 3 and 18.

Measures include: (a) the number of counties implementing AR; (b) the number of cases handled through AR versus traditional response; (c) the number of AR cases that go into out-of-home
care; and (c) the rate that AR cases are re-reported or have subsequent child maltreatment substantiations in the child welfare system.

- **Implementation** supports for this objective include an evaluation that focuses on fidelity to the AR approach. Once fidelity has been established, an evaluation of the program outcomes will be completed. Both evaluations will inform statewide rollout plans.

- **Training** will be needed to assure fidelity with the model and high quality service delivery. In conjunction with DCF, the WCWPDS will begin to build internal capacity to train and support the alternative response model in the state of Wisconsin. In conjunction with the regional partnership sites, WCWPDS will develop a core foundation and advanced AR curriculum, which will be delivered throughout the state over the next several years. Specific training objectives are included in Attachment D.

- **Timeline:** BSWB will begin partnering with WCWPDS in Q1 2015 in order to start building internal capacity to train and support the AR model in the state of WI. Technical assistance will be provided to practicing counties in order to build fidelity beginning in Q1 2015 and continuing. Efforts will include: regional quarterly meetings and bi-annual meetings. Additionally, information gathered from the evaluation of AR practice fidelity (completed by Q4 2016) will inform the development of core foundation and advanced AR curriculum (completed by Q4 2017). BSWB will begin offering training in Q1 2015 in order to build fidelity of practice. Fidelity will be measured by Q4 2016 and will inform on-going training and technical assistance. Core foundation and advanced curriculum will be developed by Q4 2017. An outcomes evaluation will be complete by Q4 2020.

- **Evaluation:** BSWB will complete an evaluation of AR practice fidelity by Q4 2016, information gained will inform statewide rollout plan (specifically the development of training curriculum). BSWB will complete an outcome evaluation in Q4 2019, including the number of AR cases that go into out-of-home care and the rate AR cases are reported to have subsequent maltreatment substantiations in the child welfare system.

- The **rationale** for this objective is that AR uses a strong collaborative, family engagement model that has been shown to be effective in other states in stabilizing families and preventing re-entry into the child welfare system.

1F. **Expand the use of the Geographic Placement Resource Service (GPRS) to stabilize placements of children in out of home care settings:** Addresses Performance Items 6, 11, 14 and 22.

- **Measures** include: (a) placement stability for children in out-of-home care; (b) school mobility of children in out-of-home care.

- **Training and implementation** supports include: information technology upgrades as needed and outreach to ensure that key staff are using this technology appropriately and effectively.
• The rationale for this approach is that educational and placement stability for children in out of home care strengthens a child’s educational, social and emotional well-being. Research has shown that movement between schools leads to declines in a child’s academic performance.

• **Timeline and outcomes**: Over time, DCF expects to see outcomes improve because of more precise information available, including improved recruitment and placement of children, fewer children experiencing school disruptions, fewer out of county placements and more cross-jurisdiction adoptions. In 2015, capacity will be upgraded to provide matching capacity so that children with particular needs can be matched with parents that have the skill set to provide for them.

• Evaluation - none planned

1G. **Expand the use of trial reunification to improve successful and stable reunification of children with their families:** *Addresses Performance Item 5 and 8*

• **Measures** include (a) the number of trial reunifications; and (b) the re-entry rate of cases that utilized trial reunification.

• **Implementation and training supports** will include disseminating information to counties and courts regarding the appropriate use of trial reunification.

  **Timeline and outcomes**: Subsidized guardianship became effective in August, 2011. Over the next five years, DCF believes this will improve overall recruitment and placement of children, we anticipate a steady drop in the re-entry rate of children to the foster care system, beginning at 19% in 2015, dropping to 17% in 2016 and 15% in 2017.

• The rationale for this approach is that trial reunification enables the child and family time and support to transition into reunification; thereby increasing the probability that the reunification will be stable, safe, and nurturing for the child.

1H. **Implement a supervisory safety decision-making model state-wide to improve supervisors’ understanding of the conceptual foundations of safety and to assist supervisors to provide key tools and support to their staff:** *Addresses performance Item 4 and the Service Array and Training Systemic Factors.*

• **Measures** of this objective include: finalization of the curriculum, and a statewide implementation plan that includes number of individuals completing the training and an internal capacity building plan by Q4 of 2015.

• **Training** supports will include finalizing in quarter four of 2015 the Supervising Safety curriculum based on the former Supervising Safety Decision Making (SSDM). DCF will also develop an infrastructure to support trainers that includes peer support and coaching. Training
will support several learning objectives articulated in state’s training plan attached to this document.

- The rationale for this approach is to promote a more comprehensive and effective decision-making system for supervisors. The improved system will help supervisors better support employees working with families, and reduce the risk of child abuse and neglect after families enter the child welfare system by identifying properly safety risks and developing effective safety plans.

- Timeline: Module one of this curriculum was completed in late 2013 and was presented to pilot groups starting in early 2014. Additional timelines include making adjustments based on participant and trainer feedback collected in Q4 of 2014 through Q4 of 2015. DCF is also working on building internal capacity to offer this training by working with staff in the DCF Bureau of Regional Operations, Bureau of Safety and Well-Being and CQI to complete the training and become prepared to train others by Q4 2017 identified internal staff from the three sections will have received both modules of training and also trained a module.


- Within 30 days of enrollment in home visiting, and based on client self-report information and other information often received during the referral process, home visiting programs measure and document each enrolled client/caregiver’s relationship to the following federally identified Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program priority populations:
  - low income;
  - tobacco users in the home;
  - at risk for low academic achievement;
  - pregnant woman under age 21;
  - history of child abuse, neglect, or interactions with child welfare as a child or parent;
  - history of substance abuse;
  - have a child with developmental delays;
  - in a family with individuals serving or formerly served in the Armed Forces.

- Timelines and deliverables: The State’s goal, which is written into grantee agency contracts, is for at least 60% of enrolled households to be members of three or more priority populations. During the period 10/01/13 through 03/31/14, the enrolled households with three or more of the priority populations was 60.7%. The goals is to maintain a minimum level of at least 60% meeting this criteria. This will continue to be monitored at least two times annually using information from the Maternal, Infant and Early Childhood Health Data System known as SPHERE.

- Training and implementation supports will include: ongoing training of new home visiting staff; home visiting Communities of Practice and Mentor-Protégé program pairings, that may choose family engagement as a topic for additional work/focus; continuous quality improvement
projects that may focus on initial family engagement, as well as family retention; and analysis of “program refusal survey” results, which may help to better understand who declines service and why they decline services. The program refusal survey is ongoing with continuing analysis of reasons for declining services with the objective of improving program performance and the ability to meet program targets for serving these vulnerable populations.

- The *rationale* for this objective is that evidence indicates that serving families with risk factors as early as possible can prevent families from experiencing higher stress levels that could lead to abuse and neglect. Further, Wisconsin requires all programs that receive funding for home visiting to use evidence-based models.

**Goal 2: Support children and their families in the child welfare system to reach their full potential.**

2A. **Implement the Wisconsin Educational Collaboration for Youth in Foster Care Grant partnering with DPI, Dane County Child Welfare and Madison Schools to improve educational outcomes for children in out-of-home care:** Addresses Performance Item 21 and Systemic Factor: Agency Responsiveness and Service Array.

- *Measures* include: improved data accessibility between schools and child welfare systems through implementation of the education portal; and educational outcomes, in the areas of high school graduation, attendance, expulsion, and academic reading and math scores on standardized tests for children in out-of-home care.

- *Training and implementation supports* will include information technology upgrades needed for the portal; passage of state legislation to allow for data exchanged; and policies and procedures to be developed and issued regarding collaboration between the K-12 and child welfare systems.

- The *rationale* for this objective is to provide more targeted, real time information exchanges between schools and child welfare so that schools can be better prepared to meet the educational needs of children in out of-home care.

- **Timeline and evaluation:** The ultimate measure of success for this project is improved communication between school and social work staff, with greater access to educational information leading to educational needs being met in a more timely manner.
  - By the end of 2014, DCF will have sample MOUs for use across the state.
  - By mid-2015, DCF will have desk guides created for social workers and school personnel outlining the collaboration expectations for social workers and best practices for both parties.
  - By the end of 2015, there will be a widely available training for teachers to better understand the needs of children in foster care.
  - By the end of 2016, at least three locations including Madison and Milwaukee will have access to an automated portal to access student information electronically.

- Measures of this performance item include: the number of children in out of home care participating in Early Head Start and Head Start and the number of OHC children participating in higher star level programs in Wisconsin’s YoungStar Quality Rating Improvement System.

- Implementation supports will include building on the data connections made through the Educational Collaboration for Youth in Foster Care and possible information technology upgrades to receive data on OHC children in Wisconsin’s 4K programs.

- The rationale for this objective is the evidence that quality early childhood education promotes social and emotional development, contributes to closing the academic achievement gap, and has a strong economic “rate of return”.

- Timelines and evaluation: Over the five years, DCF anticipates that there will be more children in OHC enrolled in 4 and 5 star programs, and more child welfare agencies entering into formal agreements or MOU’s with Head Start to more systematically identify, enroll and support children in Head Start Programs.

2C. In collaboration with the Department of Health Services (DHS), implement the Medicaid Care4Kids medical home initiative to provide coordinated and comprehensive medical, dental, and behavioral health services, including trauma-informed care, to children in out-of-home care: Addresses Performance Items 22 and 23 and the Service Array and Agency Responsiveness Systemic Factor.

- Measures of this initiative include: number of enrollees; timeliness of 2-day initial health screen and 30-day health assessment, and 60 day comprehensive health plan; timeliness of well child check-ups and dental exams; immunization rates; lead blood testing; use of psychotropic medications; emergency room and hospital utilization. It is anticipated that Wisconsin will see an improvement in these outcomes for children utilizing services over the next five years. Further, all children in Out of Home Care in the six counties in Southwest Wisconsin (Milwaukee, Kenosha, Racine, Waukesha, Washington and Ozaukee) will be enrolled in the program by December, 2014. DCF and DHS will start planning in 2015 for the rollout for the rest of the state.

- Training and implementation supports will include: training, development of codes in the management information system to track outcomes over time, continued collaboration with health care providers, foster parents and birth parents, and others to communicate about the program.

- The rationale for this approach is that foster children, in general, have more complex physical and behavioral issues than other children; and therefore need access to a medical services system that is coordinated and reflects the unique needs of foster children.
2C. Promote the adoption of trauma-informed principles in all areas in the child welfare system and in other systems serving children and families through participation in the Fostering Futures project, the NGA Three Branch Institute on Social and Emotional Well-Being, coordination with the new Office of Children’s Mental Health and expanding the DCF Trauma project that provides training and technical assistance to counties: Addresses Performance Items 17 and 23, and Systemic Factors of Agency Responsiveness and Service Array.

• Measures of this initiative the DCF Trauma Project will include continuing to expand and tracking: the number of new counties, individuals and mental health providers participating in trauma training; the number of children that are screened for trauma and referred for services to meet their needs across the state; and, continuing to measure and track participant outcomes for providers and other training participants as a result of receiving training through the DCF Trauma Project.

The DCF Trauma Project started in 2012 and by the end of CY 2014 approximately 200 Master’s level therapist will have been trained in Trauma-Focused Cognitive Behavioral Therapy (TFCBT) in a year-long learning collaborative in 8 counties and 2 tribes. Both the therapy and the training approach are evidenced-based. TFCBT is for children, ages 5-18 years. Since 2012 over 400 children have been screened for trauma using the North Shore UCLA PTSD index and 95-98% of these participate in TFCBT. A base, mid and completion screening is done and outcomes show 90-95% of the children completing TFCBT have reduced PTSD.

• Timelines and milestones:
  o The trauma project will continue to expand to at least 3 new sites annually and will provide TFCBT training to approximately 90 Master’s level therapists annually.
  o It is anticipated that 300 new children will be screened for trauma annually in the new sites.
  o DCF will continue to track and measure outcomes for the children participating in TFCBT and anticipate continuing to achieve outcomes of 95-98% reductions in PTSD for those completing the therapy.

• Training integrates Trauma Informed Care principles into the training system utilizing the model developed by the National Child Traumatic Stress Network (NCTSN). It is the goal of the training system that workers will understand the importance of integrating trauma concepts into their daily practice leading to improvements in regards to child and family outcomes. Concepts have been and continue to be imbedded within the pre-placement and pre-service curricula and are being taken into account as the foundation courses are being re-structured to align with the new core practice competencies.
Additionally, Tier 2 of the DCF Trauma Project includes three sessions of the 16 hour NCTSN training and includes 15-20 parents in each workshop, as well as case workers, juvenile justice workers and others involved with the child welfare system and support of the children and families. A pre and posttest is administered at each workshop with 90% of more of the parents reporting changes in parenting approaches.

Goals:
- Continue to hold at least 3 sessions of the 16 hour NCTSN training at each site.
- Continue to administer the pre and posttest with anticipated responses of change in parenting approaches of 90% or more as a result of the training.

Implementation supports will also include outreach to encourage individuals to participate, and outreach with community partners to increase the number of caregivers and professionals in child and family-serving systems who are trained in trauma-informed approaches. In 2015, changes will be incorporated within the Tier 2 NCTSN training, which will expand its appropriateness for training caregivers/parents of children ages, 0-5 years. This work is part of a collaboration between DCF and DHS and includes $20,000 in IV-B, Subpart I funding to expand capacity for training parents of younger children as part of the Early Childhood Comprehensive Systems (ECCS) grant.

Goals:
- Collaborate with DHS to modify the 16 hour NCTSN training to make it more appropriate for caregivers/parents of children and ages, 0-5 years; and pilot the training at a DCF Trauma Project Site in 2015 as part of the Tier 2 Workshops.
- Continue to collaborate with DHS as they roll out the ECCS project, which will provide training to therapists in an evidence-based trauma therapy for children, ages 0-5 years.

The rationale for this approach is that scientific research has shown that childhood trauma impedes the healthy development of the brain, leading to short and long-term negative social, emotional, and physical and behavioral health outcomes. Treating children and youth in a trauma-informed manner can help them heal.

**Goal 3: Strengthen outcomes for youth and other vulnerable populations**

3A. Develop and seek passage of legislation to extend out-of-home care to age 21 for youth with an individualized education program and plan for implementation:
Addresses Performance Item 21

- Measures will include the number of youth using the extension, and education, employment and housing outcomes of youth using the extension versus those who do not.
- Training and implementation supports will include training on how to apply the new policies, and technical assistance to counties in providing effective supports for this population.
• The rationale for this objective is that youth aging out of care are able to improve their educational, employment and other outcomes if they continue to access support from the child welfare system.

• Timelines: The provision became effective statewide in August, 2014.
  o By January 1, 2015 DCF will have the ability to track eligible youth and the uptake rate for eligible youth.
  o By January 1, 2016 DCF will understand and be able to report on youth who access the foster care extension and those that do not, either through a voluntary agreement or a court ordered extension.

3B. Through the federal grant to reduce youth homelessness, implement the PATHS initiative to improve housing, academic, employment, and socio-emotional outcomes for youth, including the redesign of the independent Living Program, implementation of youth-focused Permanency Round Tables, and other programs: Addresses Performance Item 21 and Systemic Factors of Service Array and Agency Responsiveness.

• Measures include development of a theory of change implementation plan by early spring of 2015; and application for a federal implementation grant; the number of youth aging out of care; employment rate for youth in and aged out of out-of-home care; high school graduation rate and post-secondary enrollment of youth aged out of out-of-home care; and homelessness rate of youth aged out of out-of-home care.

• Training and implementation supports will be defined in the PATHS implementation plan developed in 2015.

• The rationale for this approach is that a more comprehensive coordinated system for youth that utilizes evidence-based and promising practices will better support their needs and result in better outcomes.

• Timelines and benchmarks
  o PATHS pilots will be accepting youth beginning in October 2014.
  o Data analytics on the three target populations will be complete by January 2015.
  o A predictive risk model will be created and tested by January 2015, identifying the highest risk target populations and the risk factors that are predictive.
  o Pending the receipt of the second round grant in 2015, a detailed timeline of work for the following 5 years will be created.

Goal 4: Strengthen and improve the infrastructure support to the statewide child welfare training system.

4A. Strengthen overall child welfare practice throughout the state by identifying and developing support for workers and supervisors through leadership
training/development, TA/consulting, evaluation, resource identification for worker support and integration of eWiSACWIS training with corresponding practice training: Addresses Systemic Issues of Training, Information Systems and Quality Assurance.

- **Measure**s of this initiative include the development of curriculum; the number of individuals completing training course; and evaluation of the knowledge gained in the training courses.

- **Training** includes a regular schedule of planned offerings to ensure training is available as needed by child welfare staff.

- **Implementation supports** will include necessary upgrades to eWiSACWIS to accommodate new training courses, data and potential metrics.

- The **rationale** for this approach is that better trained and supported staff will provide a higher quality level of service for the families and children they serve.

- Timelines and deliverables for meeting these objectives are that by 2016 eWiSACWIS training will be integrated into the foundation course and all foundation courses will be up to date and incorporate all current policies practices and standards. In addition, the Supervising Safety training has established a schedule for ensuring that supervising safety training in key areas will be offered twice a year for the next five years to build capacity of staff to improve safety practices.

4B. **Redesign the state Child Welfare CQI process and structure: Addresses Systemic Issue Quality Assurance**

- See CQI systemic issue description for details on how this process has been designed, how it will be evaluated and measured and implemented and the rationale for redesign.

4C. **Develop infrastructure and capacity for predictive analytics and dashboards/reporting (Addresses systemic issue: information systems and quality assurance)**

- **Measures** of this objective will include, development of new and more targeted dashboards, utilization of development of predictive analytic models

- **Implementation and training supports** will include upgrades to information systems, information/technology investments and training on the use of predictive analytic models.

- The **rationale** for selecting this objective is more robust and accessible data will inform and strengthen the Department’s use of data to support policy development, decision-making and program monitoring.
• Timelines and milestones: Beginning in November 2014, DSP will be implementing two new dashboards that provide timeliness performance and analytic data related to CPS initial assessment. These dashboards will be based on related data that will be included in dWiSACWIS, the Division’s child welfare data warehouse. Shortly following implementation of the above performance management reporting tools for CPS initial assessment, the Division will begin working on incorporating data related to ongoing child welfare services, including data related to both in-home and out-of home cases, into dWiSACWIS. Production of initial ongoing services data is expected to be completed by July 2015, with related program reporting tools, including performance-based dashboards, to be designed by beginning August 2015. Development of subsequent reports, dashboards, and other predictive analytics models will be based on program priorities and needs.
4. Services - Child and Family Services Continuum and Service Coordination

Wisconsin’s Continuum of Services and Coordination of the System

The child welfare system in Wisconsin is a county-operated, state-supervised system with the exception of child protective services in Milwaukee County and the statewide adoption program for children with special needs, which are administered by the department. The state oversees child welfare practice and provides policy direction and funding to county human or social service departments. Counties also contribute local funding to support child welfare services. Tribes provide child welfare services directly and may also have written agreements with county agencies.

Wisconsin offers a continuum of services beginning with prevention services that aim to keep children and their families out of the child welfare system. Prevention services include a home visiting program, efforts focused on promoting quality early care and education, the Families and Schools Together (FAST) family engagement strategy, and others which are described in the goals and objectives and the birth to five section. Intensive in-home safety services are offered to families who enter the child welfare system, but whose children can remain safely at home, with the appropriate safety services in place. Policies and procedures are established for cases where a child must be removed and placed in the out of home care system for safety reasons. Case management and other services help children in out of home care, foster parents and birth parents work toward reunification or other permanency options, if reunification is not possible; and promote the well-being of children while in out-of-home care. Wisconsin’s Post-Reunification Supports (P.S.) program established under the auspices of the state’s Title IV-E demonstration waiver project, provides services and supports to children and families most at risk of re-entry in the initial 12 months after reunification to help preserve the family’s stability, avoid a recurrence of abuse or neglect, and strengthen the well-being of the child and family. Wisconsin’s Post Adoption Resources Centers provide supports to families who adopt children.

DCF tracks data and establishes policies and procedures to provide oversight to county agencies and other service providers, such as community-based organizations, that provide a range of services to children and families. These services include programs designed to strengthen families, reduce the risk of child abuse and neglect, and support and preserve families affected by abuse and neglect.

Child protective services include the investigation of child abuse and neglect, in-home services and the removal of children from the home where necessary to protect child safety. Chapter 48 of Wisconsin Statutes, also known as the Children’s Code, governs abuse and neglect reporting and protective services and codifies federal CAPTA requirements and the federal requirements found under the Indian Child Welfare Act. In addition to state statutes, CPS requirements and guidelines are described in the CPS Access and Initial Assessment Standards, CPS Safety Intervention Standards and the CPS Ongoing Services Standards and Practice Guidelines. Additional statewide policies are established through policy memos issued by the Division of Safety and Permanence.

The assessment and treatment of abuse and neglect and the removal of children from their homes are performed by child welfare agency staff based on statutory requirements and state standards. Children enter foster (out-of-home) care through two primary avenues: child protective services and juvenile justice. Out-of-home care placements include temporary shelter care, family foster care, group homes and residential care centers and other secured facilities such as youth detention and correctional facilities for children and youth.

While children are in out-of-home care, child welfare and juvenile justice agencies are responsible for
permanency planning. Permanency goals include reunification where possible and appropriate, adoption or guardianship. Children in out-of-home care who are eligible for adoption during which time the child’s adoption, generally via the foster parents, is finalized through the termination of parental rights are referred to the state special needs adoption program where they are matched with adoptive parents. Adoption assistance payments are made to persons who adopt children with special needs.

Wisconsin's Independent Living Program is designed to help youth transition from out-of-home care to self-sufficiency. The Wisconsin follows the requirements of the federal Chafee Foster Care Independence Act of 1999. The BMCW, counties and tribes receive Chafee funds, including Education and Training Vouchers to operate local service programs. Independent Living services focus on helping youth learn daily living skills, achieve a basic level of safety and well-being that includes employment, housing, education, and remain connected to caring adults and their communities for ongoing support. Program eligibility guidelines target youth aged 15-21 who have been in out-of-home care placement (e.g., foster home, group home, residential care center or court-ordered Kinship Care) for at least six months after age 15 years or older, or adopted through the Special Needs Adoption Program (SNAP) after age 15. Eligibility for Independent Living services ends when the youth turns 21 years of age.

The Kinship Care program is a child welfare program funded under the Temporary Assistance for Needy Families (TANF) Block Grant. The BMCW, counties and tribes all operate Kinship Care programs. The Kinship Care program enables children to remain living within their extended family structure. Kinship Care may be used to fund voluntary living arrangements with relatives as well as child welfare placements with relatives where the court has found a child to be in need of protection or services. As of 2010, the Levels of Care Initiative requires that Foster Care licensure be pursued for all court-ordered Kinship Care cases.

Coordination Process and Engagement of Stakeholders

Efforts to engage feedback from and coordinate with stakeholders are described with respect to each of the programs articulated in this plan. Broader coordination efforts across all programs are described in the collaboration section.
4 Service Description - IV-B, subpart 2

Children and Family Aids

In Wisconsin, Subpart 1 funds are used to help meet requirements for services provided to young children, health care coordination, and oversight for children in foster care. Funds are also used to support the county allocation of Children and Family Aids, Youth Aids, and Runaway and Homeless Youth Programs.

How funding is distributed:

Children and Family Aids

Resources are distributed through the Children and Family Aids (CFA) funding mechanism to provide county human and social services with funds to support child welfare services. The largest single funding source for Children and Family Aids is state General Purpose Revenue (GPR). Along with the state GPR, the following funding sources are combined in the CFA: IV-E foster care reimbursement earned based on expenses incurred by the state and counties, the Social services Block Grant (SSBG), Temporary Assistance to Needy Families (TANF) transferred to SSBG and Title IV-B, Sub-Part 1, Child Welfare Services. CFA funds can be used for child protective services, other child welfare services, including prevention services, and community based services to the juvenile justice population. Counties are required to provide a local match to the CFA program. Counties have the flexibility to use CFA in ways that best meet local needs. Services delivered with these combined resources are monitored through client reporting from counties through the eWiSACWIS system.

Homeless and Runaway Youth Funding

Federal IV-B, subpart 2 funds also support the state’s network of 22 runaway and homeless youth service providers that provide preventive and crisis counseling, temporary shelter and referrals. Homeless and runaway services are intended to help youth and young parents secure a safe housing alternative if returning home is deemed unsafe. Program services are available on a walk-in basis or through 24 hour crisis hotlines. Programs also include those focused on strengthening families, preventing family dissolution, promoting self-sufficiency, and assuring safe, stable and supportive homes for youth, young parents and their children.

Through the Wisconsin Association of Homeless and Runaway Youth, the state’s runaway and homeless providers recently carried out strategic planning. As a result of this effort, the agencies adopted a statewide proposal that helped to use resources more effectively and reduce duplication of efforts, with some member agencies agreeing to merge and the closing of two agencies. Under the new Hub delivery model, 80% of the target population is located within 40 miles of a program. In addition there is a high level of coverage for youth in the highest need areas.
Preserving Safe and Stable Families

Wisconsin’s Promoting Safe and Stable Families program (PSSF) is administered by the Division of Safety and Permanence (DSP) and has four components: family preservation, family support, time-limited-reunification services and adoption promotion and support. Each of these components receives at least 20% of funds for service delivery. Planning and service coordination amounts are described in the CFS 101 documents attached to this plan. Services in the first three components are primarily delivered by 70 county agencies. The Bureau of Milwaukee Child Welfare and Menominee County do not receive annual PSSF allocations. In Menominee County, the tribal agency receives PSSF grant funds directly from the federal government and Milwaukee County does not receive an allocation because DCF operates the child welfare system. Adoption promotion and support services to the counties are provided at the state level through the Special Needs Adoption Program (SNAP). A portion of the federal award is also used to fund regional or statewide family preservation, family support and time-limited activities (including funding programs for Wisconsin’s 10 remaining tribes and the Bureau of Milwaukee Child Welfare).

Title IV-B, Subpart 2 funds are allocated to counties for the operation of local PSSF programs. In order to build on local collaboration and community-wide planning efforts, PSSF program service delivery involves various stakeholders within each county. Strong collaboration at the local level is critical in ensuring that the populations at greatest risk of maltreatment are identified, supported and served in a timely and effective manner. Coordination of training and direct service efforts at the community level further assists community stakeholders, including child welfare, law enforcement, education and community-based providers in identifying and targeting services to those with the greatest needs. This coordination and collaboration will continue to guide the use of PSSF over the next five years.

Adoption Incentives

Wisconsin received adoption incentive funds in the amount of $214,000 for FFY 2014. Wisconsin will continue to ensure timely expenditure of funds. The following activities will be continued over the next five years with future funding.

- Support Permanency Roundtables statewide to enhance movement towards timely child permanence
- Provide administrative support to reduce the adoption records microfilming backlog and eliminate the scanning and microfilming backlog of adoption child and administrative files and ICPC records
- Sponsor the combined SNAP and Domestic/International Adoption Conference
- Purge the Adoption Search files
- Conduct trauma informed training for DSP staff
- Update the eWiSACWIS system to support the ICPC federal pilot project
- Update the SAFE materials
Overall Adoption Program

Increasing the total numbers of special needs adoptions, adoptions of children over the age of nine and increasing the timeliness of adoption finalizations continue as priorities for the Special Needs Adoption Program (SNAP). Increasing the timeliness of adoptions has been challenging, but ongoing implementation and use of the SAFE foster/adopt home study has improved the timeliness of adoption finalizations.

DSP continues to focus attention on assigning potential adoptive cases earlier in the out-of-home care experience so that more children can move to permanence within the federal adoption performance standard. Particular emphasis is placed on improving the timeliness of foster home conversions as over 85% of SNAP adoptions are foster home conversions in Wisconsin. Other plans and priorities include:

- Continued utilization of a comprehensive and sustained recruitment campaign that interfaces with the AdoptUSKids recruitment campaign;
- Continuing to partner with counties and tribes to more diligently search out relatives for children in out-of-home care;
- Continued utilization of the Casey Permanency Roundtable model to assure timely movement of children to permanency Continue utilization of the SAFE study to facilitate foster home conversions
- Continue post adoption service planning partnerships with families, counties, tribes and other stakeholders to identify practices that are most effective;
- Continue involvement in the ICPC federal pilot of the Neice Project moving ICPC cases to a paperless system.

International Adoptions

DSP has a limited role in international adoptions. Adoption assistance is not available for international adoptions under Wisconsin or federal administrative code. Parents adopting children internationally are able to access services through their County Department of Human Services, through their private insurance, and the six PARCs.

Kinship Care Program

The Kinship Care program supports children who are at-risk or currently involved in the child protective services system to live with extended family members. The Kinship Care program is funded under the Temporary Assistance to Needy Families (TANF) Block Grant.

Kinship Care is used to fund voluntary living arrangements with relatives; or court-ordered living arrangements with relatives where the child or juvenile has been determined to be at risk of or is currently in need of protection or services (CHIPS or JIPS). The basic program eligibility requirements are as follows:
1. The basic needs of the child can be better met with the relative than with the parent;
2. The placement with the relative is in the best interests of the child; and
3. The child currently or would potentially meet the requirements for court jurisdiction as being in need of protection or services, if the child were to remain with his or her parent(s).

The Kinship Care program is administered locally by county child welfare agencies, the Bureau of Milwaukee Child Welfare, and ten tribes. Agencies determine initial and ongoing eligibility, and make monthly payments to eligible children and caregivers in the amount of $226 per child/month (as of 1/1/2014 and will increase to $232 as of 1/1/15).

Like foster care, Kinship Care support is available for youth up to 18 or 19 years of age, if they are attending school, are in good academic standing and are expected to receive a diploma.

Goals for FFY 2015-2020
Policy Training on Wisconsin Administrative Code DCF 58 (the Kinship Care administrative rule) will continue to be offered annually. During 2015-2020, the statewide Kinship Care Coordinator will continue to facilitate regional training sessions regarding Kinship Care policy and issues regarding the Levels of Care Initiative.
D4c. Services available in certain areas, mis-matches and data gaps (cross-reference D2)

DCF continually examines data at the state level to determine service gaps. DCF works with partners at the local level, such as the Wisconsin County Human Services Association (WCHSA), tribes, contractors and other stakeholders to address service mis-matches. See also the service array systemic factor for description of significant efforts underway to expand services. Gaps in services as identified by the federal performance review are being addressed to the extent feasible by the new established goals and objectives articulated in Section 3, starting on page 60.

D4d. Service Decision Making Process for Family Support services

Child welfare services in Wisconsin are delivered by county agencies in counties other than Milwaukee. The non-Milwaukee counties have the discretion to secure family support services through contracting, and many do so. It is expected that counties meet all state policy guidance and rules in arranging for and procuring services and seek to have needed services available to children and families.

For the Bureau of Milwaukee Child Welfare, which the state operates, the following contracting procedures are used:
- A competitive bid process is developed that sets criteria for service delivery
- An objective review process is undertaken
- Contracts are established with key deliverables for service delivery and performance requirements

For the state-operated Special Needs Adoption Program in the balance of the state are provided by private Child Placing Agencies (CPA’s). The agency selection process for these services is determined through a competitive bid process on a five year cycle. The initial contract awarded for two years and three on year extensions may be granted. Outcome measured are applied annually for these extensions.

D4e. Services - Population at greatest risk of maltreatment

Under s. 48.981(9), Stats, Wisconsin provides annual report to the Governor and the legislature on child abuse and neglect, the Wisconsin Child Abuse and Neglect Report. Information included describes which populations are at the greatest risk of maltreatment, as identified by substantiated maltreatment. Information concerning identification and services to at risk populations is also included in each program section of this report. The report can be found at: [http://dcf.wisconsin.gov/cwreview/reports/CAN/2012CANReport.pdf](http://dcf.wisconsin.gov/cwreview/reports/CAN/2012CANReport.pdf).
D4f. Services for Children Under the Age of Five

Services for children under five to reduce the amount of time in foster care and developmentally appropriate services for children under the age of five.

Over the next five years, DCF will build on recent past efforts to strengthen the services available for children under the age of 5. As of June, 2013, there were 2,692 children ages birth to five in out of home care.

Key efforts that will be built upon for the population include:

Geographic Placement Resource System

DCF will continue to emphasize the goals of the GPRS system to improve placement matching. Further refinements of the GPRS system continued into 2013 to incorporate more information on providers and child specific data including results of the CANS tool to improve placement matching. Agencies are able to see resources statewide to improve cross-jurisdictional placements and when available placement resources can meet the needs of a specific child needing placement. The system will also assist in targeted recruitment efforts.

Activities Targeted To Addressing the Developmental Needs of Young Children

To address the developmental needs of children under the age of five who receive services under the title IV-B or IV-E programs, Initial Assessment and Ongoing staff will continue to be provided 2 days of training on the effects of maltreatment on child development. Participants actively explore the developmental needs of infants, children, and toddlers and the consequences of child abuse and neglect in children from birth to adolescence and establish a framework for the early recognition of developmental problems, enhancing the professional’s ability to formulate appropriate family service plans.

Wisconsin’s Foster Parent training also addresses the developmental needs of children:
The foster parent pre-placement training includes:
- An Overview of Foster Parenting
- Expectations of Foster Parents
- Caring for Children in Foster Care (including the developmental needs of infants, children and adolescents)
- Developing and Maintaining Family Connections
- Foster Family Self Care

The foster parent Foundation training includes:
- Attachment
- Cultural Dynamics in Placement
- Dynamics of Abuse and Neglect: Contributing Factors
- Dynamics of Abuse and Neglect: Signs and Indicators
- Effects of Fostering on the Family
- Guidance and Positive Discipline
- Impact of Trauma on Child Development
- Maintaining Family Connectedness
Improving Support for Foster and Adoptive Parents

The Department also recognizes the critical linkages between the success of children served within the child welfare system and the supports provided to those who care for them to ensure that their development needs are met. Through increased foster care reimbursement, continued work of the Foster Care and Adoption Resource Center, and revisions to training for foster families, DSP will continue to support foster families to meet the developmental needs of the children in their care. Through the Child and Adolescent Needs and Strengths assessment tool (CANS), cases where a foster parent whose Level of Care certification is lower than the child’s assessed Level of Need are identified and a plan of support and/or services is put in place to support the placement of that specific child with that provider. The CANS assessment must be done upon entry into care, at changes in placement and every six months the child is in out-of-home care.

Health Care

Through the Medicaid Care4Kids program, children in out-of-home care receive coordinated and comprehensive health care that reflects their unique needs as foster children. Under the Care4Kids program children receive well child check-ups at increased frequency at every age level, as recommended by the American Academy of Pediatrics for foster children. The Care4Kids program is described in more detail in the attached Health Oversight plan.

Collaboration with Early Care and Education to Improve Quality of Early Learning Experiences

The state has already had success in strengthening connections between children in out of care and high quality early learning experiences outside the home, such as the Head Start program, and child care programs with higher ratings in Wisconsin’s Quality Rating Improvement System, YoungStar. The rationale for strengthening these connections is the growing evidence about the long-term positive impact of investment in early childhood education. Recently released research from the Abecedarian Project now shows lasting physical health benefits as a result of a quality early childhood education. Nearly twenty MOU’s are already in place between counties and Head Start grantees. In the next five years, DCF will seek to expand the number of counties with formal relationships between Head Start and counties so that young foster children can be quickly identified and to the extent possible enrolled in Head Start programs. Wisconsin’s policy that foster children be placed in 3 star or above settings has also helped to improve the likelihood that children in OHC will receive higher quality early education. Wisconsin has an extensive and growing network of 4K programs. In the next five years, DCF will collaborate with the state education agency to develop strategies to maximize the participation of foster children in 4K programs.

Home Visiting Services

Wisconsin’s home visiting programs work with families with young children who may be at risk of abuse and neglect. Specific efforts to work with high risk young families are detailed in the Plan for Improvement starting on page 4.

FAST Program
The Families and Schools Together (FAST) program is a research-based model that provides intensive supports to young families to strengthen their parenting skills and assist them in accessing and getting connected to community supports. Two pilot projects are in operation; DCF will monitor their implementation and consider expanding should funding become available.

Early Childhood Advisory Council

The Early Childhood Advisory Council (ECAC) is a high level stakeholder group chaired by the State Superintendent of Public Instruction and the Secretary of the Department of Children and comprised of public and private leaders that provides advice on the strategic direction for the state’s efforts to promote early childhood development. The ECAC has developed a cross-system agenda that has the overall goal that all young children are safe, health and successful. The ECAC has helped to promote the importance of home visiting, and is developing stronger connections between child welfare and early childhood systems. The Division Administrators for the Division of Early Care and Education and Safety and Permanence serve on the Early Childhood Advisory Council. The most recent annual report of the ECAC is published at the following website: http://dcf.wisconsin.gov/ecac/pdf/ECAC_2013_Annual_Report_web.pdf

Zero to Three Policy Institute

As a result of a successful application by Wisconsin to participate in the Zero to Three Policy institute, Wisconsin is developing a policy agenda focused on the birth to 3 population in the state and the services and supports needed to optimize their development. The early planning on this policy agenda has focused on home visiting as well as improving connections between systems to best serve children in the child welfare system.

Wisconsin will build on these collaborations over the next five years and will also explore stronger connections to Wisconsin’s Race to the Top Early Learning Challenge grant to maximize opportunities for children at risk of entering OHC or in OHC benefiting from quality early learning and family support.
International Adoptions

DSP has a limited role in international adoptions. Adoption assistance is not available for international adoptions under Wisconsin or federal administrative code. Parents adopting children internationally are able to access services through their County Department of Human Services, through their private insurance, and the six PARCs.
D5. Consultation and Coordination Between States and Tribes

The Wisconsin Indian Child Welfare Act passed in 2009 and specifies the responsibilities of the state and counties regarding tribal children in the child welfare system and specifies the protections whether they are under state or tribal jurisdiction – the law can be found at: [http://docs.legis.wisconsin.gov/statutes/statutes/48/1/028](http://docs.legis.wisconsin.gov/statutes/statutes/48/1/028) The Department has a strong commitment and procedures for consulting with the Tribes located in Wisconsin. DCF provides limited child and family service (child welfare, child care, domestic violence) funding directly to the Tribes through a consolidated Family Services program, which combines a number of funding streams. Additionally, Tribes, at their option, receive TANF funding to operate the Kinship Care program. The Department also provides opportunities for tribal input in other areas of the Department such as Early Childhood, TANF and Child Support.

**Tribal/State Intertribal Child Welfare Committee and Policy & Law Workgroup**

The Department child welfare staff meets with the child welfare directors of the eleven Tribes every other month as the Intertribal Child Welfare (ICW) Committee to discuss child welfare-related issues. In addition, child welfare and legal staff of the Department and Tribes, along with professionals from related organizations (e.g., Children’s Court Improvement Program, Wisconsin Judicare/Indian Law Office) meet every other month as the Tribal/State Child Welfare Policy & Law (PALS) Workgroup to discuss policy and legal issues. These workgroups discuss a full agenda of items, including:

- Interpretation of and answers to questions re: ICWA and WICWA;
- Strategies to increase recruitment of tribal families to serve as foster families for tribal children;
- The authority of Tribes to license foster homes off/near reservation/trust land;
- The relationship between Wisconsin’s infant relinquishment law and the Indian Child Welfare Act;
- Notification of Tribes in voluntary child custody proceedings;
- Title IV-E funding agreements between the Tribes and the State and the Tribes and the Federal Government; and,
- The intersection of tribal authority to perform child welfare functions and county responsibility under state statute.

**Payment for Indian Children in Out-of-Home Care**

Wisconsin continues to use the “161 Agreements” with certain counties and tribes to support Indian children placed in out-of-home care by Tribal courts. The original intent of the 161 Agreements was to recognize the jurisdictional authority of Tribal courts and to provide a mechanism that would permit county payment for out-of-home care placements made by tribal courts. The state statutory language creating these agreements is permissive and counties are not required to enter into a 161 Agreement. Some of the agreements, at the recommendation of the Department, have since been expanded to include support for and services to Indian children in care and their families, IV-E eligibility determinations, permanency planning requirements, independent living, and in some cases, additional agreements related to child protective service investigations and removals.

Ten (10) of the eleven (11) federally-recognized Tribes in Wisconsin have tribal courts that exercise jurisdiction in child welfare cases. The Oneida Tribe does not currently have a tribal court, but is considering the establishment of one.

**Tribal State Title IV-E Agreements**
In response to interest by Tribes, the Department held a “Title IV-E Agreement Summit” in March 2012 to discuss options and structures for federal and state Tribal Title IV-E agreements. Representatives from each of the eleven tribes, as well as Department officials, participated in the day-long conference, which included presentations from National and local experts on state and federal Tribal Title IV-E agreements. The Department engaged in follow-up discussions with six Tribes that were interested in exploring the possibility of a State/Tribal IV-E agreement for administrative activities. The first Wisconsin state/tribal Title IV-E agreement, covering administrative claiming, was concluded with the Bad River Tribe and became effective October 2013. The Department is currently engaged in discussions with the Lac du Flambeau Tribe regarding a Title IV-E agreement. The Department will continue to work with interested Tribes on follow up issues raised by the Tribes.

**Wisconsin Indian Child Welfare Act**

In December 2009, Wisconsin established in state statute the principles and requirements of the federal Indian Child Welfare Act. The process of developing and passing the Wisconsin Indian Child Welfare Act is shown in the following documentary video that demonstrates the collaborative spirit in passing the law: [http://www.youtube.com/watch?v=tS8WkekywV8&list=UUSyVF06NlpLZXVYAfhTg-Sg&feature=c4-overview](http://www.youtube.com/watch?v=tS8WkekywV8&list=UUSyVF06NlpLZXVYAfhTg-Sg&feature=c4-overview).

**Midwest Child Welfare Implementation Center Project (MICWC)**

The Department applied for and received a grant from the Midwest Child Welfare Implementation Center (MCWIC) to implement the Wisconsin Indian Child Welfare Act. The activities under the four year grant, which ran from 2009-2013, were developed and implemented collaboratively between the Department and the Tribes. Key deliverables from the grant were:

- Training for child welfare workers on WICWA;
- Training for legal partners on WICWA;
- Technical Assistance to counties in the implementation of WICWA;
- Development of policy guidance to implement WICWA; and
- Development of a Continuous Quality Improvement protocol.

The final report from the MCWIC project is attached.

**Training Collaboration**

The Child Welfare Professional Development Training System in Wisconsin and the MCWIC Project worked collaboratively to incorporate the WICWA requirements into the foundation curriculum taken by all new child welfare workers. Several eWiSACWIS trainings were added as a result of workers entering ICWA information fields to capture compliance with the state and federal Indian Child Welfare Acts.

Over the next five years, the department will continue to work collaboratively with the tribes to identify and offer technical assistance to counties and Tribes on the implementation of WICWA through the Department regional and program staff.

**Policy Development**
As part of the MCWIC project, policy guidance was developed in two key areas of the WICWA law. Policy guidance on the use of Qualified Expert Witness was developed by a sub-committee of the WICWA Advisory Board and issued in October 2013 and is available at the following link: http://dcf.wi.gov/memos/num_memos/DSP/2013/2013-05.pdf

Guidance on the active efforts requirement was developed by another sub-committee of the WICWA Advisory Board and was issued in December 2013 and is available at the following link: http://dcf.wisconsin.gov/publications/pdf/464.pdf

In collaboration with the Department and other stakeholders, the Director of State Courts developed and issued a number of court forms for use by circuit courts to implement WICWA requirements. These requirements will be followed and expanded, as needed, over the next five years.

**Quality Oversight**

Drawing on the protocols from the Department’s overall Quality Service Review process, the Department developed a WICWA-specific tool to assess the quality of WICWA compliance through case reviews. Tribes were consulted throughout the development of the tool during the Indian Child Welfare Director’s meetings from September 2012 to April 2014. The tool was piloted in the spring of 2013. The Department began undertaking WICWA reviews in selected counties with higher populations of children subject to WICWA in May 2013. As of June 30, 2014, the WICWA practice in six counties has been reviewed. These reviews have been undertaken with the Children’s Court Improvement Program (CCIP) of the Office of Court Operations, which conducts joint focus groups with the Department with tribes, legal partners, and county child welfare agencies to discuss practice strengths and challenges in regard to compliance with WICWA. After the completion of the review process, feedback is given to the tribes and other stakeholders through a summary presentation in conjunction with CCIP and a final report is distributed to the county agency and tribes.

**Consultation with Tribes**

Consultation with the 11 federally-recognized Tribes is governed by Wisconsin Executive Order #39, which details the consultation purpose for all departments in Wisconsin state government with the Tribes. In addition, each agency, including the Department of Children and Families, has issued a Department consultation policy which is published at the following website: http://dcf.wisconsin.gov/tribal_relations/pdf/consultation_policy.pdf

The DCF consults with the Tribes through tribal chairpersons or presidents or other elected officials, as the official representatives of the Tribes, and tribal social services and Indian Child Welfare Directors. The contact list for Tribal Officials is located at the following web address: http://witribes.wi.gov/docview.asp?docid=19085&locid=57

The primary mechanism for group conversations with tribal leaders is through the annual consultation meetings between the Secretary and Division Administrators of the Department and elected Tribal officials. The purposes of the consultation sessions are to:

- address issues or concerns regarding Department policies, implementation plans, services and challenges;
- enhance the overall relationship between the Department and the Tribes; and
- identify actions that will improve conditions of and services for Indian children and families.

The most recent DCF/Tribal annual consultation meetings was held in May 2014. In addition, DCF disseminated a draft of the 2010-2014 report and the 2015-2019 state plan draft to DCF tribes for
comment on June 11, 2014. DCF has exchanged copies of the final CFSP, the Five Year Final Report and APSRs with the Tribes. The state will continue to ensure this exchange occurs in the future through regular established meetings and communications with the Tribes Annual DCF/Tribal consultations will continue over the next five years. Between meetings, the Tribes are kept informed through written communication, frequent and ongoing meetings with DCF staff (as described above), tribal delegates serving on tribal/state committees and direct reporting on certain issues through established mechanisms.

As directed by the federal Administration for Children and Families, the Department is developing a policy committing the Department to good faith negotiations with Tribes and tribal consortia on child and family-related issues. Consistent with the DCF/Tribal consultation policy, the Department is developing this policy in consultation with the Tribes.

Wisconsin coordinates and consults with Tribes as described above in the development of its Child and Family Services Plan (CFSP) and Annual Progress and Services Report (APSR). The Department invited Tribes to provide input on this 5 year plan.

**Tribal Child Welfare Priorities**

The Tribes and DCF worked collaboratively to develop a formal document consisting of eight tribal priorities designed to improve child welfare services for Indian children and families. This document has provided the long range blueprint that has guided the work of the DCF, ICW Committee, and the PALS workgroup. The Tribal priorities are:

1. Identifying children as Indian children
2. Training on WICWA, Tribal Codes and Ordinances and Cultural Issues
3. Adoptions
4. 161 Agreements
5. Foster Home Placements and Resources
6. Safety of Children in Their Own Homes and in Out-of-Home Care
7. Title IV-E or Other Funding for Tribes
8. Institute an Indian child welfare communication model within the DCF Structure


The Department maintains a Tribal Relations website which contains a wide range of information for various audiences, including the Tribal Consultation Policy and Consultation Implementation Plan. The home web page for this site can be found at: [http://dcf.wisconsin.gov/tribal_relations/default.htm](http://dcf.wisconsin.gov/tribal_relations/default.htm)

**Chafee Foster Care and Independence Act/Educational and Training Vouchers (Tribal)**

(See the Chafee Foster Care Independence and Education and Training Vouchers Program Section for information relating to Tribal consultation, eligibility for benefits and services, and ensuring fair and equitable treatment for Indian youth under the Chafee Foster Care Independence Act and ETV).
Wisconsin's Independent Living (IL) and Education and Training Voucher (ETV) Programs ensure statewide life skills development opportunities and support for youth currently in out-of-home care (OHC) and transition support for those exiting OHC at age 18 or older in accordance with the John H. Chafee Foster Care Independence Program. This plan addresses both Sec. 477 (42 U.S.C. 677) (a) of the Social Security Act and Wisconsin’s progress on the Children and Family Services Plan (CFSP) goals.

Administration
Wisconsin is a state supervised/county administered system with the exception of Milwaukee, where the child welfare system is administered by the state through the Bureau of Milwaukee Child Welfare (BMCW). Currently county child welfare, BMCW and tribes receive CFCIP funding and are responsible for providing services to youth from age 15 to 21. Wisconsin currently allocates funding to all 72 counties for the purpose of providing IL services. Currently all 72 counties provide at least some services to their eligible youth, although the quality and quantity of services varies by jurisdiction. DCF is actively engaged in a collaborative process with the counties to create greater uniformity in services statewide.

Description of Eligibility, Continuum of Services and Linkages to Other Services:
Wisconsin's IL and ETV Programs target activities for youth aged 15-21 years, who have been in an OHC placement setting for at least 6 months any time after the age of 15 while they are in care, and up to their 21st birthday for those youth that exit OHC at age 18 or older, including juvenile justice youth living in and aging out of an OHC placement setting.

Youth who exit care after age 16 due to adoption, subsidized guardianship (s. 48.977, Stats.) and court ordered long-term kinship care will continue to be eligible for certain IL services limited by the Chafee Act. These young people as well as their parents/guardians are provided information on how to access CFCIP/ETV services and are provided the application for the DCF Scholarship (supported by ETV funds). Discussions take place with youth, adoptive parents and guardians along with other pertinent topics during the transition to their permanency. The state IL Coordinator also provides training at the state adoptions conference and supervisory meetings to clarify eligibility and how to access services on a semi-annual basis.

County and tribal child welfare agencies will continue to ensure safety, permanency and well-being for older youth in OHC ages 15-18 through the development of the skills, knowledge, and connections to caring adults needed to prepare and assist young people to transition successfully to adulthood when the time comes. However, DCF is creating a shift in thinking from “Independent Living” (IL) as a program that youth “have to complete”, to its original intention of ensuring youth are receiving life skills development opportunities, as part and parcel of their OHC planning and continued support through their transition from OHC to independence in order to achieve positive outcomes as adults) Strength-based child welfare practices (e.g., empowerment, collaboration, teaming, community involvement) recognizes the youth as the “driver” in case-planning activities and in identifying their goals for adulthood and receiving support in achieving those goals. Local child welfare agencies will continue to create the permanency plan and include the IL Assessment, IL planning goals, activities and adult supports for older youth in OHC as described in Ch 48 and 938. This includes youth placed out of state through Interstate Compact for the Placement of Children (ICPC).
The assessments used by child welfare agencies to determine the level of life skills development is the Casey Life Skills Assessment and Daniel Memorial Assessment. The Child and Adolescent Needs and Strengths assessment (CANS), required of all Wisconsin children in OHC provides further information on level of overall functioning, impact of trauma, and youth strengths, needs, etc. Many agencies will also use information from a youth’s Special Education Transition Assessment (if they have one) to inform decisions around appropriate activities.

Community resources normally relied on to support life skills development opportunities outside of school are currently lacking in many parts of the state. DCF is committed to ensuring that more consistent linkages are created in all communities and that targeted opportunities are developed and made available for youth while in OHC and after leaving OHC due to adoption, guardianship or aging out at age 18. At age 17 ½, the caseworker and youth create the Independent Living Transition to Discharge (ILTD) plan and complete the required activities in the 90 days prior to a youth exiting OHC as required under the federal Fostering Connections and Increasing Adoptions act as well as Wisconsin statutes 48.39 and 938.38.

**Philosophy and goals**

The goal of DCF is for life-skills development and the activities related to successfully transitioning from OHC to adulthood be provided in a timely, flexible, coordinated, and developmentally appropriate way building on the strengths of youth, families, the community and cultural groups, and utilizing the expertise within the home, school and community; as indicated throughout this report.

It is expected that the bulk of life-skills development occurs in the natural setting of the home, school and community as foster parents create teachable moments in the home, encourage involvement in extracurricular activities and meet with the youth and school counselor for career and college advising, etc. For youth in group and residential settings, life skills development should be provided by the group care provider or social worker, as agreed upon by the agency, provider and youth.

For those young people who never achieve permanence, it is critical that significant transition activities and supports are available to meet the individualized needs of youth exiting care to adulthood and throughout the time of transition to age 21, and that outreach to this population is ongoing. The overarching goals of the Wisconsin CFCIP are for youth who age out of care at age 18 or older to achieve the following outcomes by age 21:

1. Sufficient economic resources to meet their daily needs (whether through employment or public assistance);

2. Safe and stable place to live;

3. Academic or vocational/educational goals that are in keeping with the youth’s abilities and interests;

4. Connectedness to persons and community;

5. Avoidance of illegal/high risk behaviors;

6. Postponed parenthood until financially established and emotionally mature;
7. Understanding of their physical and mental health needs, decision making and access services.

DCF applied for and received the Youth at Risk of Homelessness planning grant in 2013. Under the PATHS grant (DCF’s Youth at Risk of Homelessness grant), DCF is working with the National Council on Crime and Delinquency to develop a predictive risk model that will help DCF to understand factors that contribute to a youth likely to age out of OHC and/or become homeless. This information will be used to trigger Youth Centered Permanency Round Table discussions and Mobility Mapping as tools to assist these youth at high risk for aging out of the system achieve permanency.

Policies, Procedures and Array of Services

The Wisconsin CFCIP Continuum:

1) At the point in which the IL Assessment and plan are required through state policy, an electronic notification is sent to the youth’s case worker through eWiSACWIS, alerting them that a youth has reached the eligibility threshold and that the IL Assessment and Plan must be completed within 90 days.

2) The case worker ensures completion and documentation of assessment and creation of goals and life skills development plan, through engagement with the youth, foster parents, school and community and/or others identified through CW team. Life skills development activities over time will include:

   a) Activities that help identify personal strengths and increase self-awareness, values, decision making and problem solving.

   b) Basic life skills development activities such as: development of savings plan; budgeting allowance; introduction to and participation in community resources; practicing nutrition and purchasing groceries and safely preparing meals; practicing making appointments; practicing laundry, clothes repair, home maintenance; driver’s education; etc.

   c) Ensure opportunities for career exploration through activities such as: Job shadowing, internships, Workforce Investment Act (WIA) or other employment programs;

   d) Ongoing discussions ultimately resulting in the development of career plan that includes interests, strengths, vision for future career and personal life;

   e) Planning for academic success related to high school credit accumulation, career and postsecondary goals

   f) Explore significant safe and healthy relationships for youth related to: family, friends, neighbors, mentors and others as identified by youth.

   g) Obtaining documents over the time in care (that will be needed in adulthood and providing to older youth upon discharge: State ID Card, SS card, Permanent Green card (or citizenship), Court order for name change, adoption record, etc.);
3) Information is entered into the IL section of the youth’s permanency plan and is reviewed and updated every six months while the youth is in OHC.

4) Once a youth in OHC reaches age 17½, the case worker is notified electronically through eWiSACWIS that the Independent Living Transition to Discharge (ILTD) plan must be completed and implemented in the 90 days prior to youth’s aging out of care, per the federal Fostering Connections and Increasing Adoptions act. At this time if not earlier, the regional or lead transition agency must be invited to participate in the transition planning in order to facilitate the transition from care.

5) Once a youth ages out of care, the regional or lead agency builds on the ILTD; providing the services a youth may need up to the age of 21. The services they will provide include but are not limited to:

   a. Connections to employment and job training agencies and programs;

   b. Accessing safe and stable housing by:

       1) Assisting in finding housing and arranging a lease and accessing apartment furnishings,

       2) Assisting with teaching housekeeping, budgeting, paying bills,

       3) Forming connections to housing agencies and subsidized housing programs;

   c. Accessing postsecondary institutions;

   d. Accessing legal services and other community and faith based organizations;

   e. Assisting with connections to health and medical providers and those serving special needs populations;

   f. Provide youth with emotional support;

   g. Teach/assist with navigation of “systems”; 

   h. Assist youth in obtaining transportation;

   i. Creation of professional resume;

   j. Signing of Health Care Proxy once youth is of legal age;

   k. Financial assistance for:

      • education

      • child care

      • housing deposits, utilities and start-up costs
• transportation

• room and board – defined by Wisconsin as security deposit and rent. Wisconsin is a state-supervised, county administered state, County and Tribes have discretion as to whether or not to use a portion of their allocation to provide room and board for youth who age out of care at age 18 or older up to their 21st Birthday, and may not exceed 25% of their Chafee allocation.

6. Completion of NYTD at age 19 and 21

Services and Outcomes Data

Over the next five years, DCF will provide services information as documented in eWiSACWIS, as well as data related to targeted outcomes and comparisons between populations in order to identify gaps in services, successful interventions, and any trends related to housing, education, employment, public assistance, at-risk behavior and access to health care. As part of the PATHS homelessness prevention planning grant, DCF is completing an extensive analysis of services, outcomes and trajectory for 14-17 year olds in care, aged out youth, and homeless 18-21 year olds with foster care history. This analysis will inform future data collection efforts and outcomes measures. DCF will further cooperate with ACF in any national evaluations of the effects of the programs in achieving the purposes of CFCIP.

DCF has begun working to create opportunities for data sharing between DCF and DOC, DPI, DHS, Credit Reporting Agencies and Homeless shelters. These exchanges will yield robust data, beyond NYTD, to shed light on the experiences of youth after leaving out-of-home care. DCF continues to survey all 17-year-olds, every year with the NYTD survey and follow up at 19- and 21 with all youth. With a more robust data collection strategy to find more youth at 9- and 21, DCF anticipates having a bank of more than 700 youth surveys per year in the near future. In the long run, DCF will be able to add additional policy-relevant questions and outcomes of interest to the survey on an annual basis to maximize the NYTD process. DCF plans to share data from NYTD and other sources with a broad range of stakeholders including other Departments, tribes, youth and local service agencies.

DCF has three overarching goals related to data collection and analysis:

• The first goal is to ensure proper documentation in eWiSACWIS;

• The second is increased numbers of youth participating in the NYTD baseline and follow-up surveys at age 17, 19 and 21. DCF has enlisted the assistance of the University of Wisconsin (UW) Survey Center to ensure that youth complete the surveys accurately and on time.

• The third goal is to complete analysis between the served population while in OHC and outcomes. Analysis will also be completed regarding youth with special needs, those who achieve permanency and those who do not, tribal youth, etc.

A current strength of the program is the number of youth receiving services while in OHC. An identified weakness is the disproportionate drop in services once youth age out of care and the minimal funding used for housing. It is not clear if the services that the youth are receiving are effective. For this reason, DCF will be focusing on outcome data in the next five years.
DCF does not yet have baseline data on this population, but will begin to collect data and provide baseline information related to the following in the 2015 report:
   1) how many remain in extended at their 18th birthday and under what conditions;
   2) how many return to care after initially opting out, etc.;
   3) the type of placements settings are they living and appropriateness to their developmental needs; and,
   4) under what circumstances they leave extended care before age 21; and the services and supports young adults 18-20 receive; the services available for special needs populations; and how a youth’s educational goals are supported.

DCF will cooperate in any national evaluation looking at the effects of the program on achieving the purposes of the CFCIP. The state currently has no statutory barriers to serving youth. Currently DCF allocates small amounts of funding to all counties. This is a challenge because of the rural nature of many parts of the state with only a couple of eligible youth and potentially small allocation amounts. DCF is working with counties to refine how we allocate funding to better support rural youth.

**IV-E Foster Care Assistance After Age 18:**

Wisconsin recently passed legislation to extend foster care for youth who have not graduated from high school, who have an active IEP and are full-time students. This legislation is effective August 2014. The new legislation will not impact the CFCIP program, except that there will be a small number of youth previously served as aged out youth served as in-care youth. All costs related to the extended OHC placement for youth will be paid for with state and county dollars, with matching IVE funds as applicable. Life skills development and practice opportunities will continue to be made available, with young people taking on increased responsibilities commensurate with their age and developmental abilities. DSP is seeking to expand the use of supervised Independent Living placements where youth are able to remain after they leave care. Significant refinement to the Supervised Independent Living program design and payment is under development.

**Coordination and Consultation with Stakeholders:**

To bring a stronger, more coordinated and comprehensive focus on the needs of youth, DCF created the Office of Youth Services (OYS) in 2013. The new office is expanding linkages between DCF and the Department of Public Instruction (DPI), Department of Workforce Development (DWD) and Department of Health Services (DHS) to develop coordinated and effective strategies for supporting and increasing the likelihood of success for vulnerable youth. Additional linkages will be developed between Wisconsin’s Department of Administration (DOA) to address housing for youth who age out of care, Homeless and Runaway Programs, postsecondary institutions, and the Department of Corrections.

This coordination will expand options to child welfare agencies, many of whom already have a history of linkages with local community resources such as University of Wisconsin Extension offices, school districts, health centers, Medicaid offices, Aging and Disability Resource Centers and employment search and training centers.

CFCIP collaboration takes place at various levels of family services, government, educational systems, and individuals in the youth’s life, as indicated throughout this report. DCF uses NYTD data and other
state level data to inform stakeholders. Compliance rates for NYTD in the most recent month for 17-year-olds indicate that between 65% and 90% of all 17-year-olds in the five DCF regions have taken the 17-year-olds NYTD survey. The OYS has additional collaborative efforts underway at this time which include:

1) Completion of the Organizational Effectiveness (OE) process by bringing together county, management, youth, DCF OHC unit and stakeholders to identify strengths and weaknesses of the current Independent Living program;

2) The PATHS grant initiative brings together stakeholders to build a more effective continuum of services and avenues for collaboration related to permanency, education, training and employment, housing and social emotional well-being for older youth in care as well as those aging out of the child welfare system.

3) DCF will seek opportunities for greater collaboration with Homeless and Runaway programs, transitional housing programs as well as mental health transition programs in order to identify and meet the housing needs and gaps of transitioning youth.

4) In order to address human trafficking issues related to youth transitioning to independence, DCF has begun to explore the prevalence and issues related to trafficking in Wisconsin with stakeholder groups such as the Homeless and Runaway programs, transition agencies and those currently serving the aged out population.

5) DCF is developing a “Youth Centered Permanency Roundtable” process for youth who come into care ages 14-17, who have OPPLA as a permanency goal, in order to improve permanence outcomes for older youth.

The Wisconsin Youth Advisory Council (W-YAC) is the primary youth stakeholder group that DCF consults with on issues related to OHC and CFCIP. During 2014-2019 efforts for expanded youth involvement will include:

1. Technical assistance from the NRCYD in summer 2014 to complete a needs assessment begun in 2013 and discuss opportunities to increase diverse youth involvement across the state.

2. Quarterly W-YAC meetings and monthly local meetings.

3. YAC members will continue involvement as a Wisconsin Citizen Review Panel under Child Abuse Prevention and Treatment Act (CAPTA), attending the National Conference annually and making recommendations to DCF.

4. DCF will sponsor three Wisconsin foster youth alumni for participation in the Foster Club All-Star Internship. Interns return to Wisconsin and become an active member of YAC (if not already), and serve as a mentor to peers regarding advocacy, outreach and leadership. Young people will participate in the development of two trainings (at minimum): Online training for foster parents on IL and an online training for educators on working with foster youth and collaborating with child welfare agencies. YAC members have voiced a desire for DCF to create training on IL and transition planning for CW personnel.

5. YAC will actively participate in conferences, trainings, stakeholder surveys as well as regional and state-wide YAC meetings.
6. DCF will sponsor three Wisconsin foster youth alumni for participation in the Foster Club All-Star Internship. Interns return to Wisconsin and become an active member of YAC (if not already), and serve as a mentor to peers regarding advocacy, outreach and leadership.

7. Young people will participate in the development of two trainings (at minimum): Online training for foster parents on IL and an online training for educators on working with foster youth and collaborating with child welfare agencies. YAC members have voiced a desire for DCF to create training on IL and transition planning for CW personnel.

8. “Transition agencies” will be required to incorporate Positive Youth Development into their program by sponsoring a local YAC in their region; expanding YACs influence state-wide.

9. Wisconsin will take the steps necessary to sponsor a youth conference for all youth in and who have aged out of care prior to 2020. In addition to providing excellent information and activities for youth, the conference will also offer an opportunity for youth to provide feedback on policy and new initiatives.

10. Collaboration with DCF Out of Home Care Section on updated Ongoing standards to be in line with extension of foster care and CFCIP restructure.

**Coordination and Consultation with Tribes:**

Three tribes, the Ho Chunk, Lac du Flambeau and Lac Courtes Oreilles, have consistently requested and receive CFCIP/ETV allocations directly from DCF, using the statewide formula for the provision of IL services to tribal youth. Tribal youth in Wisconsin who are not able to access IL services directly through their tribe are able to receive services through the child welfare agency in their resident county. DCF requires counties and tribes to collaborate on IL services for tribal youth, and requires counties to submit annual work plans describing collaborative activities with area tribes. All county agencies serving tribal children report collaborative efforts with local tribes.

Tribes receiving CFCIP funds directly from DCF participate in training and regional IL roundtables held throughout the state annually to discuss policy/programming initiatives and issues, and to provide technical assistance and consultation to agency IL Coordinators.

In 2013 DCF met with all tribal child welfare managers to review allowable services and how to access them as well as how to apply for direct funding. DCF is not aware of any tribes planning to apply directly to ACF for funds. All tribes, whether they receive funding directly from DCF or services from the county agency, are made aware of IL policies and procedures, including eligibility through the DCF policy and informational memo process.

Over the next plan period, tribes will continue to have the opportunity to request CFCIP funds directly from the state or ACF. DCF will continue to provide outreach to tribes in order to ensure ongoing awareness of resources and how to access them, through state/tribal meetings, trainings, and policy memo distribution.

**Health Care Coordination for Youth Aging Out-of-care:**

Local Child Welfare agencies work with youth prior to exiting care in order to ensure they understand their medical needs, get signed up for Badger Care Plus and understand how to get recertified for health care annually. Discussions regarding health care proxy take place during the transition from OHC to
independence beginning when the ILTD is developed and again once the youth ages out of OHC. DCF collaborated with the DHS to ensure proper implementation of the provision of the Affordable Care Act relating to former foster youth. Youth will be able to sign up electronically or over the phone or by filling out a paper enrollment form. Child welfare agencies and local DHS entities are available to assist former foster youth in the process. DCF and DHS also worked toward an agreement allowing all youth who aged out of care in another state and subsequently move to Wisconsin health care coverage under this provision. The Medicaid Care4Kids program provides coordinated and comprehensive physical, behavioral and dental care during the period a youth is in out-of-home care and for a year after a youth leaves care, thus providing continuity of care and the benefit of a health coordinator for youth who age out of care.

**Education and Training Vouchers (ETV) Program**

The ETV Program is administered by DCF. ETV funding is available to all youth meeting current Wisconsin independent living eligibility criteria (youth that exit out of home care at age 18 or older or those that exited care after age 16 due to adoption, or guardianship), for costs associated with postsecondary attendance and participation. Eligibility may be extended to youth up to 23 years of age who were participating in the voucher program on the date they attained age 21, as long as they are enrolled in a full-time postsecondary program and are making satisfactory progress toward the completion of that program.

Wisconsin's ETV programming is discussed with local agencies, the FYC advisory group and youth. Stakeholders have consistently shared that the flexibility to use funding for a broad range of institutions both in and out of state, as outlined in the Promoting Safe and Stable Families Act of 2001 to meet the various needs of youth is important for their success. However, recently there has been concern that for-profit institutions should not be included as youth success appears to be minimal at those institutions. DCF plans to evaluate whether or not tuition for for-profit institutions should continue.

DCF uses the majority of ETV funds to fund the DCF Scholarship program for youth in Out of Home Care. The scholarship pays for tuition, fees and books at an institution up to $4,000. Under the new service model, regional or lead agencies will also receive a portion of ETV funding to meet day to day postsecondary needs of local youth related to such things as transportation, day care, tutoring and one-semester certificate programs such as Certified Nursing Assistant. In order to meet the requirements under section 102 of the Higher Education Act of 1965, Wisconsin institutes the following requirements:

- Combined scholarships and local ETV assistance will not exceed the lesser of $4,000 per year or the total cost of attendance as defined in section 472 of the Higher Education Act.
- The DCF Scholarship Program may provide funding for any direct costs (i.e., tuition, books, and fees) associated with attending an institution of higher learning.
- Local agencies will use ETV funds for the purchase of technical equipment or assistance to include, but not be limited to: computers, calculators and supplies associated with coursework.
- ETV and DCF Scholarship funds may not be used to pay for post baccalaureate education.

In order to ensure that the total amount of educational assistance does not exceed the total cost of attendance and to avoid duplication of benefits under this and any other federal or federally assisted benefit program, the DCF Scholarship administrator and local agencies document the funding provided
on the youth’s IL service page in eWiSACWIS. DCF also notifies postsecondary institutions of the DCF Scholarship funding that youth receive. If possible, agencies work with financial aid offices to ensure that all factors that relate to a foster youth are included in calculating the cost of attendance. State and local agencies partner with secondary and postsecondary institutions and each other to increase awareness of the educational challenges faced by youth aging out of out-of-home care and the ETV Program through collaborations with DPI and local school districts.

**Training**

Efforts focused on training to support older youth include ongoing efforts to utilize the Wisconsin Child Welfare Professional Development System to create training for county Child Welfare agencies, foster parents, and contracted providers on the topic of life skills development, transition planning and opportunities for collaboration. Foster parent on-line training related specifically to life skills development and transitioning older youth will be available in 2014. DCF supports the efforts of the FYC advisory group in their efforts to provide training at conferences and through webinars on preparing youth for and assisting them in accessing postsecondary education. Convening and/or training of new lead or regional agencies regarding: state policy, eWiSACWIS documentation, roles and responsibilities and outcomes measurement and processes/opportunities all provide opportunities for collaboration. The Office of Youth Services will sponsor a conference focused on transitioning youth which will provide opportunities for stakeholders to learn more about best practices related to transitioning youth.
DCF will continue to monitor performance on the practice requirement established as part of the Child and Family Services Improvement Act of 2006 that require states to report data on caseworker visits with children in out of home care. These contact rates have steadily improved. In FFY13, monthly caseworker visits were achieved for 96.95% of children that are subject to this measure, significantly exceeding the federal benchmark of 90%. Of this total, 88.89% were made with the child in the home of the placement provider. DCF will continue to monitor performance in this practice requirement.

Over the next five years, DCF intends to continue the effective practices that have resulted in Wisconsin achieving this standard and will move focus of CQI case reviews to better understand and support performance. Measurement will focus on performance as it relates to regular visits that are planful, meaningful and used to advance case plan goals for children and their families.

We anticipate continued funding of the Coordinated Services Team Initiative (CST) in partnership with the Division of Mental Health and Substance Abuse Services at DHS. The CST approach promotes a system change in the way services are delivered to children and families involved in the child welfare, juvenile justice, mental health, and substance abuse systems. Through other resources, this approach is being expanded throughout the state. This funding of training and technical assistance are provided to counties to maximize the use of existing resources that support collaborative efforts resulting in a clear vision, meaningful structural change and measurable outcomes for children and their families across systems.

DCF will continue to fund a state training positions as well as ongoing evaluation and analysis of the Child Welfare Professional Development System in an effort to continuously provide quality improvement to the child welfare training curriculum. Funds are currently used to support a field trainer with counties following a comprehensive service review where specific issues were identified. Training included but not limited to interviewing, teaming and engaging, mentoring, family find and permanency. The PDS system supports a staff to assist with developing/leading/delivering child protective service safety training including topics such as present danger, safety assessment, intervention and planning. A Curriculum Coordinator facilitates workgroups identifying core competencies that are derived from the knowledge, skills and abilities needed to perform competent child welfare work and providing a framework for updating worker foundation training beginning in late 2014. Additional training that supports improving the quality of timeliness and quality of caseworker visits includes support for managing/facilitating Organizational Effectiveness workgroups in Wisconsin that impact case workers. This includes performance management for child welfare units, integration of child welfare and juvenile justice utilizing evidence based practices with a trauma focused approach and teaming within child welfare practice.
D8. Adoption Incentive Payments

- The following activities will continue.

- Support Permanency Roundtables statewide to enhance movement towards timely child permanence

- Provide administrative support to reduce the adoption records microfilming backlog and elimination of the scanning and microfilming backlog of adoption child and administrative files and ICPC records

- Primary sponsorship of the combined SNAP and Domestic/International Adoption Conference

- Purging of the Adoption Search files

- Trauma Informed training for masters level clinicians participating in DSP’s Trauma Project by local and national expert, Jennifer Wilgocki

- Update of the SAFE materials

Efforts to ensure the timely expenditure of funds will continue and include regular communication, monitoring of billing and communication with accounting and others.
D9. Child Welfare Demonstration Activities

Wisconsin received federal waiver authority in 2012 to operate a demonstration project to reduce re-entry into out of home care placements by enhancing post-reunification support services for children and their families after a child returns from a temporary out-of-home care stay to his/her family. Under the Post Reunification (P.S.) program, the child welfare agency will support children and their families during the initial 12 months after reunification through services and supports that are tailored to meet the child’s and the family’s unique needs.

Results to date include:

- P.S. Program went live on January 21, 2014 with 16 counties participating in Phase 1 of the first year of the program
- The remaining 19 Phase 2 counties for the first year of the program went live in April 2014
- Program is funded to serve slightly over 500 children in the first year of this five year demonstration project, about 1/3 of the children and youth who reunify with their families in a given year

In order to best target the program resources, program eligibility is being directed toward those children and their families who present the greatest statistical likelihood of re-entering into out-of-home care within 12 months of their reunification using what is called the Re-entry Prevention Model (RPM) developed with the University of Illinois, Children and Family Research Center.

As of June 2014, approximately 80 children and their families are enrolled in this program. The Division is tracking current referral and enrollment counts and is using enrollment data to track payment amounts on a regular basis. The Division has also developed a report to be used by state and local county child welfare agency staff and supervisors to monitor compliance with program requirements including caseworker contacts and completion of critical practice requirements such as updating the child and caregiver CANS assessment and case plan.

Outcome measurement methods to be used during the course of the program’s evaluation include monitoring the program’s impact on maltreatment recurrence and re-entry into out-of-home care, changes in child and caregiver functioning based on the required completion of the Child and Adolescent Needs and Strengths (CANS) assessment, and use of other state agency data related to child educational, mental health and physical health outcomes. DCF will monitor Parent Baseline Survey completion, which will be used to establish baseline information on treatment and comparison child, caregiver and family functioning, as well as Monthly Family Service Report Survey completion, which will be used to quantify services received by the enrolled child(ren) and family member(s) caregiver(s) designed to assist the family in achieving the goals established in the family’s case plan.

See also plan goals and objectives on pages 59-60 for more detail on PS Program Title IV-E Waiver Demonstration Project. Please note that he waiver terms and conditions authorize Wisconsin to implement the demonstration project via a capped allocation associated with Title IV-E foster care administration and maintenance funds; no Title IV-B funds will be used combination with the funds to support the demonstration project.
SECTION E. FINANCIAL INFORMATION

1. Payment Limitations – Title IV-B, Subpart 1:

- In FY 2005, Wisconsin did not spend any IV-B subpart 1 funds on child care, foster care maintenance or adoption assistance.
  - Child Care: $0
  - Foster Care Maintenance: $0
  - Adoption Assistance: $0

- Non-Federal funds that were expended for foster care maintenance payments in Wisconsin were not used to match title IV-B subpart 1 funds in FY 2005.

- In FY 2014, Wisconsin did not expend any non-Federal funds for foster care maintenance payments that were used to match title IV-B subpart 1 funds, and thus did not exceed the amount of FY 2005 level. Other allocated state and local funds are used for matching purposes.

- Wisconsin plans to spend less than ten percent of title IV-B, subpart 1 Federal funds for administrative costs (section 424(e) of the Act) in FY 2013.
Section E Financial Information

2. Payment Limitations – Title IV-B, Subpart 2

- Each of the four service categories of PSSF, family preservation, community-based family support, time-limited family reunification, and adoption promotion and support services, had a minimum of twenty percent of the total title IV-B subpart 2 funds allocated to provide services in each category. The amounts allocated to each service category are specified in the CFS-101, Part II.

- Wisconsin plans to spend less than ten percent of Federal funds for both PSSF and Monthly Caseworker Visits under title IV-B, subpart 2 for administrative costs in FY 2013.

- Wisconsin’s accounting and reporting procedures and processes do not support the classification of child welfare costs financed with state and local county funds into categories that align themselves with subpart 2 programs for a complete comparison of state and local share spending for subpart 2 programs when comparing FY 2011 costs to the FY 1992 base year.

The Community Aids program in Wisconsin was established in 1980 and provided state and federal funding to counties to use for social, mental health, alcohol/drug abuse, disability and child welfare services. These funds were distributed to counties in the form of one general unrestricted block grant that could be used for any local social service and child welfare activities. Such services included, at each county’s discretion, subpart 2-type services.

In 1992, counties reported spending $149,380,000 on child abuse and neglect services and services for children and families. This included a mix of federal funds, state general purpose revenue funds, and local tax levy.

As part of the creation of the new Department of Children and Families in 2008, the Community Aids GPR funds were divided into two separate allocations. DCF was provided with $28,959,400 GPR for child welfare services and the new Department of Health Services was allocated GPR for local social services, AODA, developmental disabilities and mental health services.

In 2012, counties reported spending a total of $180,268,400 on child abuse and neglect services and services for children and families. These expenditures were supported by $30,403,900 in state general purpose revenue funds for the Children and Families Allocation to counties to support local child welfare costs. In addition, counties reported expenditures of $93,912,400 on the abused and neglected children and Children and Families target groups from local funds. This increase in expenditures from 1992 to 2011 was greater than the change in federal funds received for child welfare services, resulting in the state/local share accounting for a greater proportion of the total expenditures. The proportion of these State and local funds used for IV-B subpart 2 services is estimated to be at least $1,800,000.

Wisconsin does assure that subpart 2 funds provided to the State will not be, and have not been, used to supplant Federal or non-Federal funds for existing services and activities which promote the purposes of subpart 2.
Wisconsin also funds family support services through programs administered by the Children’s Trust Fund (Wisconsin Child Abuse and Neglect Prevention Board). Those programs are summarized below.

CHILDREN’S TRUST FUND PROGRAMS (SFY 2013)

<table>
<thead>
<tr>
<th>Program</th>
<th>Category of Service</th>
<th>Funding</th>
<th>Geographic Distribution</th>
<th>Target Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Resource Center Networks</td>
<td>Prevention/Support Services</td>
<td>$1,350,000</td>
<td>9 programs in 15 counties</td>
<td>Families at risk of child maltreatment</td>
</tr>
<tr>
<td>Community Based Programs</td>
<td>Prevention/Support Services</td>
<td>$569,800</td>
<td>10 programs (2 statewide and the others cover 6 counties)</td>
<td>Varies with each program</td>
</tr>
<tr>
<td>Access and Visitation</td>
<td>Support and Visitation Resources</td>
<td>$160,000</td>
<td>6 programs in 6 counties</td>
<td>Children and non-custodial parents – primarily fathers</td>
</tr>
</tbody>
</table>

General data for Family Resource Center Networks, Community Response, Project GAIN and Access and Visitation:
Number of adults served: 4,643
Number of children served: 6,957
Summary of adult:
Race/ethnicity: 73% white, 10% African-American, 5% Hispanic/Latino, 4% American Indian, 2% Asian, 1% multi-racial, 4% did not respond, 1% other
Employment: 47% working (full-time or part-time), 38% unemployment, 15% unknown,

CHILDREN’S TRUST FUND PROGRAMS (SFY 2014)

<table>
<thead>
<tr>
<th>Program</th>
<th>Category of Service</th>
<th>Funding</th>
<th>Geographic Distribution</th>
<th>Target Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Resource Center Networks</td>
<td>Prevention/Support Services</td>
<td>$1,350,000</td>
<td>9 programs in 16 counties</td>
<td>Families at risk of child maltreatment</td>
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<tr>
<td>Community Based Programs</td>
<td>Prevention/Support Services</td>
<td>$582,650</td>
<td>10 programs (1 statewide, 1 research and the others cover 6 counties)</td>
<td>Varies with each program</td>
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<tr>
<td>Access and Visitation</td>
<td>Support and Visitation Resources</td>
<td>$184,929</td>
<td>6 programs in 6 counties</td>
<td>Children and non-custodial parents – primarily fathers</td>
</tr>
</tbody>
</table>

General data for Family Resource Center Networks, Community Response, Project GAIN and Access and Visitation from (July 1, 2013 – December 31, 2013)*:
Number of adults served: 2,687
Number of children served: 3,288
Summary of adult:
Race/ethnicity: 75% white, 9% African-American, 6% Hispanic/Latino, 3% American Indian, 2%
Asian, 2% multi-racial, 2% did not respond, 2% other
*year end reporting is due July 15, 2014

State Match Requirements
The Title IV-B program requires a 25% state match for Subpart 1 and 2 funds. The Chafee program
requires a 20% match for CCFCIP and ETV funds. No match is required for CAPTA funds. The state
match for Title IV-B and Chafee is described in the following budget sheets.
# Title IV-B, Subpart 1 - Child Welfare Program Services
## Proposed FFY 2014 Budget

### Administration

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Staff</td>
<td></td>
</tr>
<tr>
<td>Staff salaries (2.0 FTE)</td>
<td>$100,745</td>
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<tr>
<td>Fringe (41.45%)</td>
<td>49,808</td>
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<tr>
<td>Supplies and Services</td>
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<tr>
<td>Indirect (0.35% of salary)</td>
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<tr>
<td><strong>Subtotal Administration</strong></td>
<td>$220,826</td>
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### Program Services

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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</thead>
<tbody>
<tr>
<td>Children and Families Allocations to Counties</td>
<td>$3,078,800</td>
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<tr>
<td>Children and Families Allocations to Tribes</td>
<td>187,000</td>
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<tr>
<td>Youth Aids Allocated to counties</td>
<td>893,764</td>
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<tr>
<td>Runaway Program Allocated to local programs</td>
<td>422,429</td>
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<tr>
<td>Special Projects</td>
<td>286,770</td>
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<tr>
<td><strong>Subtotal Program Services</strong></td>
<td>$4,868,763</td>
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</tbody>
</table>

**TOTAL** $5,089,589

Note: The FFY 2014 budget is based on the actual FFY 2012 grant award.

### Title IV-B, Subpart 1 - Child Welfare Program Services
## State Match Calculation

Required State Match: 25% of total expenditures = $1,696,530
Total IV-B Subpart 1 Program Funding = $6,786,119
Sources of Match: County child welfare agency expenditures of state funds provide through Children and Families Allocation (Community Aids) and local tax levy funds for child protective services and in-home services to families.
Title IV-B, Subpart 2 – Promoting Safe and Stable Families Budget
Proposed FFY 2014 Budget

<table>
<thead>
<tr>
<th>Administration</th>
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</thead>
<tbody>
<tr>
<td>Program Staff (2.2 FTE)</td>
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<tr>
<td>Salary</td>
<td>$118,819</td>
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<tr>
<td>Fringe (49.44%)</td>
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<tr>
<td>Supplies and Contracted Services</td>
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<tr>
<td>Indirect (0.35% of salary)</td>
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<tr>
<td><strong>Subtotal Administration</strong></td>
<td><strong>$252,979</strong></td>
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<table>
<thead>
<tr>
<th>Program Services</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Family Preservation</td>
<td>$1,197,900</td>
</tr>
<tr>
<td>To local agency PSSF programs</td>
<td></td>
</tr>
<tr>
<td>Family Support</td>
<td>1,197,900</td>
</tr>
<tr>
<td>To local agency PSSF programs</td>
<td></td>
</tr>
<tr>
<td>Time-Limited Reunification</td>
<td>1,197,900</td>
</tr>
<tr>
<td>To local agency PSSF programs</td>
<td></td>
</tr>
<tr>
<td>Adoptions</td>
<td>1,063,700</td>
</tr>
<tr>
<td>To state adoption program services</td>
<td></td>
</tr>
<tr>
<td>Other Services: (*)</td>
<td>286,358</td>
</tr>
<tr>
<td>Family Foundations Technical Assistance</td>
<td>75,000</td>
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<tr>
<td>Adverse Childhood Experiences (ACE) Study</td>
<td>15,000</td>
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<tr>
<td>UW-Continuing Studies Home Visiting Certificate Program</td>
<td>15,000</td>
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<tr>
<td>Special Projects</td>
<td>181,358</td>
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<tr>
<td><strong>Subtotal Program Services</strong></td>
<td><strong>$4,943,758</strong></td>
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</tbody>
</table>

**TOTAL**                        | **$5,196,737**

Note: The FFY 2014 budget is based on the actual FFY 2012 grant award.

* These expenses are shown as support, preservation or reunification in the CFS Parts 1, 2 and 3 forms.
### IV-B Subpart 2 - Promoting Safe and Stable Families
#### State Match Calculation

<table>
<thead>
<tr>
<th></th>
<th>IV-B Funds</th>
<th>State Match</th>
<th>Total Program</th>
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</thead>
<tbody>
<tr>
<td>Family Preservation</td>
<td>$1,197,900</td>
<td>$450,000</td>
<td>$1,647,900</td>
</tr>
<tr>
<td>Family Support</td>
<td>1,197,900</td>
<td>450,000</td>
<td>1,647,900</td>
</tr>
<tr>
<td>Reunification</td>
<td>1,197,900</td>
<td>450,000</td>
<td>1,647,900</td>
</tr>
<tr>
<td>Adoption</td>
<td>1,063,700</td>
<td>450,000</td>
<td>1,513,700</td>
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<tr>
<td>Other Services</td>
<td>286,358</td>
<td>N/A</td>
<td>286,358</td>
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<tr>
<td>Subtotal, Program Services</td>
<td>$4,943,758</td>
<td>$1,800,000</td>
<td>6,743,758</td>
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<tr>
<td>State Administration</td>
<td>252,979</td>
<td>N/A</td>
<td>252,979</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$5,196,737</strong></td>
<td><strong>$1,800,000</strong></td>
<td><strong>$6,996,737</strong></td>
</tr>
</tbody>
</table>

#### Notes on State Match:

The majority of IV-B funds are allocated to counties and tribes to operate the family support, preservation and reunification portions of the program. Counties and tribes are also allocated funds for other activities with the requirement that these funds be used for the family support, preservation and reunification activities. Local program administration is limited to 10% of the local allocation and included in the Other Services category. Match funds are provided by counties agencies using state funds provided through the Community Aids of Children and Families Incentive programs along with local tax levy funds. The estimated match amounts are based on local agency expenditures as reported to DCF. The actual amount of local agency expenditures exceeds the minimum match required for the Subpart 2 program.

The IV-B funds for adoption program services are used in conjunction with state funds and adoption incentive funds. The estimated match for the adoption services portion of the Subpart 2 program is based on local agency expenditures for post-adoption services provided to families adopting special needs children.

No state match is provided for other services or state administration. The match amounts for other Subpart 2 program components are calculated based on the total state match needed for the program.
<table>
<thead>
<tr>
<th>Administration</th>
<th></th>
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<tbody>
<tr>
<td>Supplies and Contracted Services</td>
<td>$21,112</td>
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Subtotal Administration $21,112

<table>
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<tr>
<th>Program Services</th>
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<tbody>
<tr>
<td>State Trainer – Training System Contract</td>
<td>$ 99,700</td>
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<tr>
<td>Coordinated Service Teams</td>
<td>100,000</td>
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<tr>
<td>Child Welfare Training Projects</td>
<td>107,193</td>
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Subtotal Program Services $307,193

TOTAL $328,305

Note: The FFY 2014 budget is based on the actual FFY 2012 grant award.
Child Abuse Prevention and Treatment Act (CAPTA)
Proposed FFY 2014 Budget

<table>
<thead>
<tr>
<th><strong>Administration</strong></th>
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<tr>
<td>Program Staff (1.50 FTE)</td>
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<td>Training and technical assistance</td>
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<td><strong>Subtotal Program Services</strong></td>
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**TOTAL** | **$470,845**

Note: The FFY 2014 budget is based on the actual FFY 2012 grant award.
### Chafee Foster Care Independence Program (CFCIP)
#### Proposed FFY 2014 Budget

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**Subtotal Administration** $320,218

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<td>Counties and BMCW</td>
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<td>Tribes</td>
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**Subtotal Program Services** $1,829,350

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<tr>
<td></td>
<td>$2,149,568</td>
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Note: The FFY 2014 budget is based on the final FFY 2012 actual grant award.

Required State Match: 20% of total expenditures = $537,392

Total Program Funding = $2,686,960

Sources of Match:
County child welfare agency expenditures of state funds provide through Community Aids and local tax levy funds for child protective services and in-home services to families.
# Chafee Education and Training Vouchers (ETV) Program
## Proposed FFY 2014 Budget

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<th>Program Services</th>
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<tbody>
<tr>
<td>Independent Living Program Allocations</td>
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<td>DCFS Scholarship Program</td>
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<td><strong>Subtotal Program Services</strong></td>
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**TOTAL** | **$716,756**

Note: The FFY 2014 budget is based on the FFY 2012 actual allocation amount.

Required State Match: 20% of total expenditures = **$179,189**

Total Program Funding = **$895,945**

Sources of Match:
- County child welfare agency expenditures of state funds provide through Community Aids and local tax levy funds for child protective services and in-home services to families.
Attachment A: Midwest Child Welfare Implementation Center Project Report
I. Executive Summary

a. Describe the intervention

The Wisconsin Department of Children and Families (DCF) and MCWIC collaborated with Wisconsin’s 71 county child welfare agencies, the Bureau of Milwaukee Child Welfare (BMCW) and the eleven sovereign tribes in Wisconsin to improve outcomes for Indian children. The project included developing child welfare practice principles, training materials, and standardized case practice tools designed to effectively implement the recently enacted Wisconsin Indian Child Welfare Act (WICWA). This collaboration required increased communication and coordination between all internal and external stakeholders responsible for the welfare of Indian children in Wisconsin. DCF requested MCWIC assistance in facilitating this new partnership, which effected systemic integration of the philosophical underpinnings of WICWA.

b. Describe the scope of the implementation (e.g., statewide, transformation zones, etc.)

This project engaged in a statewide implementation of the WICWA. The law became effective in December, 2009, at the beginning of the implementation project. Training and technical assistance was offered to all counties, and over the course of the three year project, was received by nearly every county.

c. Provide a summary of the project goals

During the project planning process, DCF and MCWIC jointly created a logic model and a work plan designed to inform the implementation project. Wisconsin identified the following long-term outcomes:

- Federal and pending WICWA requirements incorporated into state child welfare regulations, standards, and policies
- To strengthen the working relationships between state, county, tribal child welfare agencies, adoption agencies, and state and tribal courts
- The child welfare system in Wisconsin will have increased understanding of the history and purpose of WICWA
- Increased identification of ICWA-eligible children
- Increase formal notices to tribes
- Increase placement preferences
- Increase in completion of ICWA compliance documentation

d. Describe the areas targeted for capacity development

There were a number of areas targeted for capacity development in this IP, including: improved working relationship between the State, Tribal, and County child welfare agencies
and external stakeholders (courts, adoption agencies, e.g.); the development of an ICWA training curriculum and training assessment process; to enhance agency capacity to engage in strategic, focused, sustained planning and implementation strategies; to facilitate development of rules to support implementation of WICWA; and train DCF staff about historical need for the ICWA, tribal sovereignty, application of the ICWA.

**e. Describe the primary activities/interventions planned to develop capacity and ensure fidelity**

The activities and interventions identified are listed in the Wisconsin Best Outcomes for Indian Children Implementation Project logic model, as Products/Outputs (see Appendix). The primary interventions planned to develop capacity and ensure fidelity were the WICWA trainings and accompanying training evaluation; targeted technical assistance provided to counties to help with ICWA compliance; DCF policy changes; and the development of a WICWA-specific CQI process and tool.

**f. Describe the desired outcomes**

The desired outcomes of the Wisconsin implementation project included the following system impacts and child and family outcomes:

**System Impacts**
- Wisconsin will establish a uniform interpretation and consistent application of the Indian Child Welfare Act (ICWA)
- Wisconsin’s child welfare system will reflect integrated policies and standards that incorporate requirements of ICWA
- Strengthen partnership between DCF and the eleven tribal nations
- Improve understanding of the tribal role in child welfare service delivery
- County Agency child welfare practice reflects understanding of tribal codes
- DCF case practice will reflect the best interest of the Indian child

**Child and Family Outcomes**
- Improved outcomes for Indian children in the state child welfare system, including:
  - Increased percentage of cases with active efforts
  - Increased number of cases maintaining tribal connection
  - Permanency outcomes founded in tribal social and cultural standards

**g. Describe any collaborative partners involved in implementing the project and their role(s).**
Several collaborative partners were actively and consistently involved during the implementation of the Best Outcomes for Indian Children implementation project in Wisconsin:

- Cyrus Behroozi was the DCF Division Administrator at the beginning of the project. Mr. Behroozi was a key member of the original implementation team, provided leadership support within DCF, and chaired the project Advisory Board.
- Fredi-Ellen Bove replaced Mr. Behroozi as DCF Division Administrator. Ms. Bove was a key member of the implementation team from the time she replaced Mr. Behroozi until the completion of the project, provided leadership support within DCF, and chaired the project Advisory Board.
- John Tuohy was the DCF Regional Administrator. Mr. Tuohy co-authored (with Loa Porter and Mark Mitchell) the application for an implementation project, actively participated in the development of the logic model and work plan, provided leadership, was a liaison with the DCF Regional Offices (an important role that ensured state-wide consistency in DCF’s approach with the county agencies), and was a member of the project Advisory Board.
- Mark Mitchell was DCF’s Tribal Liaison and a member of the Project Advisory Board. Mr. Mitchell was an integral member of the DCF team that helped forge and maintain the Tribal/State/county partnership that advocated for and drafted the WICWA. He also had decades of experience within DCF working with Tribes prior to the WICWA effort. His understanding of that history and political intricacies of tribal/state/county relationships in Wisconsin was invaluable to the success of the implementation project.
- Mary Husby, Jean Ann Day and Rhonda Toussey were Directors of Tribal Child Welfare agencies, and had been active participants in the process of drafting WICWA, forging and maintaining the tribal/state/county partnership crucial to that effort. As members of the State Advisory Board, they provided historical context for the necessity of WICWA, helped guide the project’s interactions with the eleven sovereign tribes in Wisconsin, and represented the tribal perspective during all phases of the implementation project. Their experience and wisdom was invaluable to the success of the project.
- Carolyn Grzelak (St. Croix) and Starlyn Tourtillott (Stockbridge-Munsee) were attorneys who worked for tribal child welfare agencies. Their tribal legal perspective assisted the Advisory Board’s understanding of the unique substantive and procedural challenges confronting tribes both internally and in their relationships with non-tribal agencies when seeking compliance with WICWA.
• Alton Sonny Smart (Bad River) was a Tribal Court judge who provided insight regarding the complexity of inter-jurisdictional (between Tribal Courts and State Courts) coordination and interaction. Mr. Smart also participated in the effort to enact WICWA, and his perspective regarding that history was also very helpful to the Advisory Board and contributed significantly to the success of the implementation project.

• Terri Yellowhammer was MCWIC’s Tribal Relations Consultant, and a consultant of the Project Advisory Board. Ms. Yellowhammer had years of experience in Minnesota working in its state child welfare agency to facilitate compliance with its state ICWA. Ms. Yellowhammer worked in Minnesota when its ICWA was first enacted, and provided perspective from another county administered, state funded jurisdiction regarding implementation of a state ICWA and lessons learned from that experience. The Advisory Board found Ms. Yellowhammer’s experience and insight to be very helpful. She was invaluable as an advisor to MCWIC.

• Bill Orth and Judy Putnam were county child welfare agency directors, and members of the project Advisory Board. They provided the county perspective during project planning and progress assessment activities through the Advisory Board, and communicated with other county child welfare agency directors to facilitate state-wide communication with county agencies.

• Mary Sowinski and Sara Scullen represented the Milwaukee County District Attorney’s Office, which is responsible for prosecuting child protection cases in Milwaukee County (the largest jurisdiction in Wisconsin, and the only county which is state-administered). Ms. Sowinski and Ms. Scullen provided input regarding project efforts from the prosecutor’s perspective, which was a critical piece for guiding efforts regarding notification to tribes, complying with placement preference requirements, and other issues for which prosecutors’ offices are responsible during the implementation of the WICWA. Ms. Martha Johnson, Section Chief of the BMCW, represented that entity on the project Advisory Board.

• Amy Smith and Chris Sieck represented the Wisconsin Child Welfare Professional Development System, which is a partnership involving the Wisconsin Department of Children and Families (DCF), county child welfare programs, tribal child welfare programs, BMCW, Special Needs Adoption Program (SNAP), and the University of Wisconsin system. Training County Child Welfare professionals regarding proper application of the WICWA was a vital element of the implementation project. Ms. Smith and Mr. Sieck facilitated project coordination with the existing training system.
• Kristi Dietz was the Project Manager for the Wisconsin Department of Corrections, and a member of the Advisory Board. Ms. Dietz contributed her expertise and experience regarding her department’s response to implementation of WICWA, as well as the effects of WICWA on her department as pertaining to status offenders.

• Bridget Bauman is the Director of the Wisconsin Court Improvement Project and was a member of the project Advisory Board. Ms. Bauman facilitated communication with the Wisconsin Court System, including the coordination of training for Court System personnel. As the courts are ultimately responsible for the implementation of many aspects of WICWA, Ms. Bauman’s active participation was vital to the success of the project.

• James Botsford was the Director of Wisconsin Judicare’s (Wisconsin Judicare is more fully described later in this report) Indian Law Office. Mr. Botsford has decades of experience in advocating for tribal interests in state and federal courts, and possesses an intimate understanding of the history of Indian Child Welfare in Wisconsin. He made the resources of his agency available in a number of ways that furthered the goals of the implementation project. Mr. Botsford’s active participation on the Advisory Board was vital for the success of this implementation project.

Summarize process and outcome evaluation findings (implementation findings; outcome findings; significant barriers to implementation; and lessons learned)

One significant barrier to implementation, at least early on in the project, was the considerable delay in hiring project staff needed to perform the duties essential to the advancement of the work in Wisconsin. The delay was caused by the difficulty of locating qualified staff who met the approval of all relevant stakeholders. This resulted in project work being delayed several months.

Another significant barrier to project implementation was the determination that the project’s WICWA Facilitators were not able to provide case-level technical assistance for county case managers. This was primarily due to statutory and policy confidentiality requirements that prevented county and tribal child welfare personnel from discussing specific cases with project staff. None of the many stakeholders who participated in the development of the project logic model and work plan anticipated this issue would constitute such a prohibitive barrier. Though non-disclosure agreements were considered a possible remedy, drafting such agreements to meet the needs of eleven sovereign tribes, 72 counties, the state, and the federal government proved unfeasible, at least given the time constraints of the implementation project.
A number of factors facilitated the successful implementation of the Wisconsin Best Outcomes for Indian Children implementation project, including:

- A dedicated Advisory Board with a clear mission, vision and values for the project
- Support for the IP from Wisconsin’s legislature, DCF leadership, county staff, and tribes, and a shared desire among stakeholders to improve and meet the requirements of ICWA
- A high level of organizational and individual capacity for systemic change
- Availability of required capital and human resources, including organizational project structure and staff

These facilitators, along with the process evaluation and other capacities developed in conjunction with the implementation project, led to the achievement of the specific outcomes identified by the jurisdiction.

As part of our process evaluation, interviews were conducted with both state and tribal leadership, including members of the WICWA advisory board, WICWA trainers, and WICWA subcommittee members at approximately the mid-project point. These interviews were conducted to evaluate the progress made towards the three long-term outcomes associated with the implementation project: (a) strengthen the partnership between DCF and Wisconsin’s eleven federally recognized tribes; (b) improve understanding of the tribal role in child welfare service delivery; and (c) strengthen the working relationships between state, county, tribal child welfare agencies, and state and tribal courts. These interviews showed that the IP was making progress on these long-term outcomes, but also highlighted specific areas that needed to be addressed to ensure successful outcomes (i.e., the QEW and active efforts components of WICWA, and sustainability).

Our outcome evaluation indicated that the targeted system impacts and child and family outcomes were successfully achieved. The training evaluation component of the project evaluation provided evidence of statistically significant increases in the awareness, knowledge, and understanding of WICWA for those in the child welfare system. In addition to having front-line workers and supervisors complete the WICWA training, there were a number of other WICWA-focused trainings that were delivered to other key stakeholder groups, including DCF’s administrative and staff members, staff from the Department of Corrections, legal partners, and tribal workers.

Additionally, data extracts from the WI DCF administrative data system allowed for the analysis of the specific child and family-level outcomes identified by the jurisdiction. These data, which tracked ICWA-eligible children in out-of-home placements over a four-year period, showed an increase in the identification of ICWA-eligible children, along with increases in the numbers of
notices to tribal representatives documented in eWiSACWIS, placements with tribal providers, and placements with relatives.

Although it was not originally included in the IP’s logic model and work plan, MCWIC’s collaboration with DCF’s CQI department led to the development of a WICWA-specific case file review tool and enhanced efficiencies in the CQI review process. Results of the WICWA case file reviews conducted during the project period indicated that the majority of individual case files reviewed were in compliance with WICWA documentation requirements.

Lessons Learned

The process of assessing readiness for a systemic change is incredibly complex and requires time. As noted in more detail later, a readiness assessment must be tailored to the specific context and environment in which implementation will occur. Working in a county-administered, state-funded jurisdiction with multiple tribal governments, a contracted training system, and an extensive negative working history with an attendant lack of trust requires the dedication and active engagement of many stakeholders. The importance of understanding the working environment, identifying key stakeholders, having strong leadership committed to the change (and understanding the effort required to effect the change) and seeking multiple perspectives to inform the project early are all necessary for successful implementation. Though particularly important when working with tribal child welfare systems, we found that establishing trust among stakeholders and with project staff is essential, and requires time, patience and empathy.

Our experiences with this and our other three implementation projects have also taught us there are multiple activities, tasks and products requiring on-site management and monitoring. Implementation Center (IC)-based project managers are necessary, but inherently do not have the scope of access to agency leadership and staff that an on-site, agency-affiliated project manager can provide. The on-site Project Coordinator and Facilitators in this project were critically important resources, without whom the success of the project would have been severely jeopardized. We strongly recommend that implementation project partners designate a full-time on-site project manager, whose sole responsibility is to, in coordination with IC staff, ensure timely and proper execution of the project work plan. This on-site project manager would also serve an important role in terms of promoting the project from within the agency, consulting with internal and external stakeholders, communicating with agency leadership and with implementation project adjuncts, such as project workgroups and advisory committee, when the IC was not physically on-site. In this project the Project Coordinator (Park Zink) served as the on-site project manager, and also supervised the two Project Facilitators.
It is very important that the autonomy of the IC-based and the agency-based project staff be protected to allow accurate assessment of project progress. Each partner needs to have an effective advocate for their perspective of the process. When the on-site and MCWIC project managers jointly assessed the implementation process (using our Implementation Process Quality Review (IPQR) instrument) we obtained a more accurate picture of that process than when they used the instrument separately.

Finally, the importance of using data to measure progress and fidelity cannot be overstated. State, Tribal and county child welfare agencies have experience using data to inform their child welfare practice, but may lack capacity to use data in an implementation project. However, our experience was that agencies are able to increase that capacity and generally welcome technical assistance designed to build that capacity when they understand its utility beyond a specific project. Increased capacity to measure fidelity and process outcomes will support child welfare agencies as they seek to implement new approaches designed to improve child and family outcomes.
II. Introduction and Overview
   A. Overview of the Jurisdiction, Organization, and Problem

Describe the jurisdiction (State/Tribe/County) involved with the IP. Describe any environmental or contextual factors that significantly impacted project implementation or outcomes

This implementation project was requested by the Wisconsin Department of Children and Families. In Wisconsin, the Department of Children and Families (DCF) is the state agency primarily responsible for administering child welfare services. It also directs the Bureau of Milwaukee Child Welfare, which is the only county in Wisconsin to have its child welfare system operated directly by the state. As noted below, DCF is a cabinet level unit of the executive branch of Wisconsin’s state government. The Secretary of DCF is appointed by, and directly responsible to, the Governor.

Wisconsin is a state-supervised, county-administered child welfare system with 71 county child welfare agencies and the Bureau of Milwaukee Child Welfare (BMCW), which is currently administered by the state. There are currently eleven federally-recognized tribes in Wisconsin that receive IV-B funding. At the time of the IP application, there had been concerns with inconsistency in adhering to ICWA provisions across the state, as well as systemic failure to provide the county and private agencies, along with the courts, the knowledge and procedures necessary to effectively meet the ICWA requirements. There was little to no guidance from the state for the child welfare system to adhere to the requirements of the law or assist in the daily work the law necessitates. The results of this inconsistency were shown in the Wisconsin Statewide Automated Child Welfare Information System (known as eWiSACWIS) with a large number of children having documentation of tribal identity listed as “unknown” and important functions of ICWA such as formal notice to tribes, placement preference and active efforts left as “incomplete” within the reporting data. The Wisconsin Director of State Courts also conducted reviews of circuit courts to assess compliance with the ICWA and discovered, in a review of 30 counties, an active effort finding was made in only 8 of 32 cases.

Concurrent to this application, Wisconsin was pursuing codification of the ICWA requirements into state statute. The codification efforts officially began in 2007 with the formation of a codification workgroup aimed to draft language that would incorporate the ICWA requirements into state law known as the Wisconsin Indian Child Welfare Act (WICWA). The workgroup designed to draft this language consisted of tribal social services directors and Indian child welfare staff, tribal and DCF attorneys and DCF staff. After many drafts of the bill, a final draft bill was proposed for the 2009 legislative session and was unanimously approved by both houses of the Wisconsin legislature and signed into law by Governor Doyle on December 7, 2009.
With the passage of the WICWA and the known problems with following the federal ICWA, Wisconsin saw the work between MCWIC and Wisconsin to assist in systematically changing the way Wisconsin works with the tribes to achieve positive outcomes for Indian children in the foster care system. There was a need for policies, practice standards, training, and case management tools to assist the 71 counties and BMCW to work towards providing the best outcomes for Indian children in Wisconsin.

Describe the organization/agency that is implementing the IP (e.g., State Child Welfare agency, Tribal Social Services Agency) including important contextual information that influenced how the project was implemented (e.g., staffing, changes in political leadership, etc.)

This project was a partnership between DCF, the eleven sovereign tribes in Wisconsin and the 71 counties in Wisconsin. Wisconsin has 72 counties, but the Milwaukee County child welfare system has been integrated into DCF as part of its Division of Safety and Permanence.

A change in DCF’s administrations during the second year of the project resulted in increased (over an already very strong) leadership support of the project. The newly appointed Secretary of DCF voiced strong support for the project at Advisory Board meetings, and committed the resources necessary to effectively support the project. Fredi-Ellen Bove was appointed Administrator of the Division of Permanence and Safety. Administrator Bove continued the tradition of chairing the project Advisory Board, assuming a very “hands on” approach and clearly stating her commitment to the success of the project.

A number of environmental and contextual factors impacted the implementation of the project. One strength of this project was the already well-established identification of stakeholders dating back to the work regarding the codification of the ICWA. Wisconsin has an Intertribal Child Welfare (ICW) committee with representatives from each of the eleven tribes and DCF meeting bi-monthly to discuss child welfare concerns within the state, county and tribal child welfare agencies. This group, in collaboration with DCF, was the primary source of information and support for the work that went into the IP application. The ICW committee continued to meet bi-monthly, incorporating this IP project into their two-day meetings.

An area of concern was the inconsistencies in the practice of child welfare work across the 71 counties and BMCW. For example, in some counties, the court system sends out notice of hearings whereas in other counties the caseworkers themselves prepare this work. Counties where the courts send out the notice do not have access to eWiSACWIS and therefore cannot enter this documentation in the system, but rely on workers to do this. This was not happening consistently.

There were also varying levels of trust between the counties and the state in this jurisdiction that needed to be addressed prior to, and during, the project. Some counties were not able to
see the potential for assistance in improving their case practice regarding ICWA, but instead saw the project as an inconvenience or criticism of their current practice.

Another concerning factor was the considerable delay in hiring project staff needed to perform the duties essential to the advancement of the work in Wisconsin early on in the project. This resulted in project work being delayed several months.

A point of concern that developed into an area of strength was agency’s plan for staffing the project. DCF’s original IP application proposed subcontracting with one of the eleven tribes located in Wisconsin for the hiring and immediate supervision of IP project staff. It was essential that all eleven tribes agree on the tribe best suited to contract with DCF for this project. The tribes collaboratively selected the Ho-Chunk Nation for this role. This selection ultimately contributed to the success of the project through Ho-Chunk’s strong support and commitment to the goals of the project.

During the life of the project there was administrative turnover with the election of a new Governor. Although there were concerns that this would result in setbacks in the project timeline, the new administration was able to provide even more clarity and commitment to the project, advancing the work of the project significantly.

A major strength was the regularly scheduled communication between DCF and the tribal nations of Wisconsin. There is the ICW meeting which occurs bi-monthly, along with the Policy and Law Workgroup (PALs) which occurs on the opposite months. This group is made up of attorneys and judges, both state and tribal that work on policy and standards including the WICWA.

A final strength of this IP was the creation of an Advisory Board to monitor, modify and support attainment of the goals and objectives of the project. The Advisory Board represented the diverse community of Wisconsin child welfare practitioners, including tribal child welfare directors and attorneys, county child welfare agencies, the BMCW, Wisconsin’s state court system, DCF, private agencies and attorney-based agencies. The Board’s members were committed to successful implementation of WICWA and took an active role in making recommendations for cross-jurisdictional actions necessary to achieve true system-wide change.

*Describe the larger context within which the IP is being implemented— how does the IP relate to other initiatives (e.g., CFSR, PIP, settlement agreements, other T/TA initiatives)*

At the time of this IP application, Wisconsin’s compliance with the Indian Child Welfare Act (ICWA) had been inadequate as reflected in the 2004 CFSR findings, specifically: Permanency Outcome 2-Item 14: Preserving Connections. Areas found to be “Needing Improvement” in the
CFSR were: notification to the tribes in a timely manner and maintaining connections to extended family and, if the child is Native American, to the tribe. Unfortunately, in the April 2010 CFSR, no American Indian cases were reviewed; however Permanency Outcome 2-Item 14 was still found to be needing improvement with inconsistencies in ICWA compliance and timelines for notification.

Wisconsin anticipated the ability to comply with this area of the CFSR to improve over time, as the implementation project directly addressed these areas shown to need improvement within the CFSR as well as many areas beyond the review process. Notification and involvement of the tribe was addressed not only through training, but through tools that the workers in Wisconsin now possess, workgroups that are in place with tribal, county, and state representatives, along with trainings and tools that have been developed for the attorneys, judges, GALs and private agencies throughout Wisconsin.

Describe the problem that the IP seeks to address. What was the need for the IP?

Like other states, Wisconsin has historically not fully complied with the federal Indian Child Welfare Act (ICWA). Prior to the passage of the ICWA in 1978, witnesses testified during Congressional hearings that Indian children in Wisconsin were 1,500 times more likely than non-Indian children to be involuntarily placed out of their homes (Association on American Indian Affairs [AAIA], 1977). Wisconsin had the fourth-highest rate of Indian children in out-of-home placements (AAIA, 1977): “The underlying premise of the [federal] ICWA is that Indian tribes, as sovereign governments, have a vital interest in any decision as to whether Indian children should be separated from their families” (Carleton, 1997, p. 27).

Over thirty years later, the disproportional removal of Indian children in Wisconsin continued: A study published by the National Council of Juvenile and Family Court Judges (2011) compared disproportionality rates in Wisconsin from 2004 to 2009. The study found Wisconsin in the top seven of all states for the disproportional foster care placement of Native American children in 2009, an increase in disproportion since 2004. This disparity was a driving force for the need to codify the ICWA into Wisconsin law.

To address this state of affairs, Wisconsin enacted its own Indian Child Welfare Act, referred to as “WICWA,” in 2009. Passage of this statute was the result of years of inter-jurisdictional and inter-agency collaboration of historic dimensions. Dedicated professionals from the eleven Wisconsin sovereign tribes and from state, county, and private agencies were involved in the unprecedented effort to achieve better outcomes for Indian children.

As early as the fall of 2005, the Wisconsin Department of Health and Family Services’ Division of Children and Families (DCF) began initial discussions with tribal representatives to design legislation to codify the federal Indian Child Welfare Act into state law. A workgroup of tribal
social services directors and Indian child welfare staff, tribal and DCF attorneys, and DCF staff began the arduous process of drafting the legislation. The workgroup met monthly and performed in-depth legal research and analysis of ICWA cases from state and federal courts to learn about areas of conflict that consistently appeared in appellate court decisions. The workgroup also examined the Indian child welfare laws of other states to identify statutory provisions that seemed difficult for practitioners and courts to interpret and apply. Attempting to clarify those areas, the workgroup completed several drafts of the bill, and in May 2007, submitted a consensus draft to various stakeholders for comment and responses. The stakeholders identified a number of specific issues requiring further discussion and refinement. Consensus was reached on a final draft bill, which was unanimously approved by both houses of the Wisconsin legislature in October, 2009. Soon after, the bill was signed into law by the governor and the law became effective in December, 2009.

In the summer of 2009, in hopeful anticipation of the bill passage, and in response to MCWIC’s Request for Applications, with the support and guidance of the Wisconsin Intertribal Child Welfare Committee, DCF developed an application for an implementation project. The committee consisted of tribal social service directors, Indian child welfare directors, and social workers from all eleven federally recognized tribes in Wisconsin. It is difficult to overstate the historic significance of the state/tribal partnership that resulted in both the passage of the WICWA and the design of this project.

Wisconsin’s project application identified four major areas necessary for positive and sustainable systemic change: 1) incorporate the WICWA into regulations, policies, and practice; 2) strengthen the working relationships between tribes, state, and county child welfare stakeholders; 3) increase the knowledge of practitioners in state and county child welfare agencies of the intent, purpose and history of the ICWA; and 4) increase the identification of Indian children covered by the WICWA. The key long-term result of successfully implementing the WICWA will be improved outcomes for Indian children in the state child welfare system, including permanency outcomes founded in tribal social and cultural standards, increase percentage of cases with active efforts, and maintain tribal connections. That outcome will require uniform and consistent application and interpretation of the Act, establishment of policies and standards integrating the Act, and implementation of consistent case practices reflecting the best interests of Indian children and an understanding of tribes’ child welfare role. Stakeholders agreed that successful implementation of the Act would require significant attention and resources and thus sought MCWIC support.

B. Overview of the Implementation Project Structure

Describe the structure/organization of the IC’s T/TA Team (attach org chart)
The Midwest Child Welfare Implementation Center (MCWIC) is administratively located within the University of Nebraska-Lincoln’s Center on Children, Families and the Law (CCFL). CCFL is a multidisciplinary center focused on research, training, and public service, and employs a diverse group of faculty, staff and students from a number of disciplines pertinent to issues of child and family services. As such, MCWIC designed a project staffing structure that utilized subject matter expertise from relevant resources available within CCFL and the University of Nebraska-Lincoln. An organizational chart depicting Implementation Center personnel involved in the Wisconsin project follows. The MCWIC technical assistance team for this project consisted of the IC Director (Ells) and Associate Director (Graef); a Project Manager with experience in the direct delivery of child welfare needs (Gebhardt); and an in-house team of faculty and staff (Chambers, Dietrich, and Williams), and MCWIC’s Tribal Outreach consultant (Yellowhammer). Additional specific evaluation assistance was contributed by a nationally recognized child welfare evaluation consultant (Parry). Dr. Parry was retained by MCWIC to evaluate and report on the information collected with the Wisconsin eWiSACWIS automated data system. In addition, MCWIC contracted with a 30-year veteran of the Wisconsin Child Welfare system and former Tribal Liaison for the Department of Children and Families (Mitchell), to provide consultation to the agency’s CQI unit in the development of a tribal case review tool.

Additional administrative support to the project in the areas of travel logistics and financial management was provided by the MCWIC Project Coordinator (Hansen) and Financial Administrator (Ristow). All MCWIC personnel were housed in a common office suite at CCFL, which facilitated communication, team-building, and problem-solving between project staff involved in administration, TA delivery, and evaluation.
Wisconsin was approved as a project on November 23, 2009. Prior to this approval, the project was designated as a “selected site” by the Children’s Bureau, enabling MCWIC staff to expend resources on intensive on-site work with the jurisdiction to refine the project plans. A MCWIC T/TA team comprised of Ells, Graef, Gebhardt and Chambers conducted an on-site visit to the jurisdiction to begin relationship-building, informally assess readiness, and collaboratively develop the project work plan, logic model, and evaluation plan with key Wisconsin personnel. After formal CB approval of the project, the MCWIC project manager (Gebhardt) began on-site visits approximately twice per month with telephone contact weekly.

MCWIC utilized its Tribal Outreach Consultant (Yellowhammer) in the Wisconsin IP. Ms. Yellowhammer was the ICWA Program Specialist in MN when we hired her as consultant. Ms. Yellowhammer also had experience as a tribal court judge. Like Wisconsin, Minnesota is a county-administered, state-funded child welfare system. Minnesota also had a state ICWA statute (the Minnesota Indian Family Preservation Act, enacted in 1985). Ms. Yellowhammer had considerable experience forging and maintaining state/county/tribal working relationships in a context quite similar to Wisconsin’s, as well as training child welfare practitioners about the Indian Child Welfare Act. Her background equipped her to provide extremely helpful guidance to the MCWIC project manager and staff regarding the complexities of the interrelationships.
between the various political entities, as well as the differences and similarities between tribal and state child welfare systems and practice. Ms. Yellowhammer provided technical assistance at initial PALS meetings regarding those issues, and she was a contributing participant in Advisory Board meetings, helping MCWIC facilitate when appropriate, and serving as a subject matter expert. She was also the lead interviewer for tribal and Advisory Board stakeholder interviews which were a part of our project evaluation process. Last, but definitely not least, she acted as a mentor to Patina Park-Zink, the on-site Project Coordinator.

Prior to WICWA’s enactment, core stakeholders recognized that child welfare practitioners would require significant targeted supports to enable them to uniformly and consistently implement WICWA. Therefore, provision of technical assistance to practitioners regarding the intended purposes of WICWA, as well as its proper application, was an early planning priority. The implementation project included funding for the creation of three key on-site staff positions devoted to providing technical assistance—a Project Coordinator (Park Zink) and two regional Project Facilitators (Pauliot and Smart, later replaced by Blackdeer). These project staff positions were responsible for: establishing working relationships with counties within their assigned region (Eastern or Western half of the state); attending regional supervisor meetings; proactively reaching out to counties to identify county-specific WICWA needs; developing technical assistance modules to address those needs; and delivering training and technical assistance necessary to address those needs.

Our experiences with this and our other three implementation projects have taught us there are a myriad of activities, tasks and products requiring on-site management and monitoring. IC-based project managers are necessary, but inherently do not have the scope of access to agency leadership and staff that an on-site, agency-affiliated project manager can provide. The on-site Project Coordinator and Facilitators in this project were critically important resources, without whom the success of the project would have severely jeopardized. We strongly recommend that implementation project partners designate a full-time onsite project manager, whose sole responsibility is to, in coordination with Implementation Center staff, ensure timely and proper execution of the project work plan. This on-site project manager would also serve an important role in terms of promoting the project from within the agency, consulting with internal and external stakeholders, communicating with agency leadership and with implementation project adjuncts, such as project workgroups and advisory committee, when the IC was not physically on-site.

Recognizing the importance of tribal involvement in the project, DCF decided to subcontract with a tribe to provide the administrative infrastructure to support these three positions. With the support of the other ten Wisconsin tribes, the Ho-Chunk Nation accepted the subcontract. It was also important to maximize the accessibility of the implementation staff to facilitate
direct contact with county and tribal child welfare agencies. Thus, office locations for these staff were established at the St. Croix Chippewa of Wisconsin in the northwest area of the state, the Stockbridge-Munsee Band of Mohican Indians in the northeast, and the Ho Chunk Nation in west-central Wisconsin.

Additionally, all parties recognized the importance of tribal membership as a requisite for these professionals. There is a history of miscommunication and mistrust between the Wisconsin tribes and the state/county governments, as in many states with Native American populations. These implementation project staff needed to understand this history to assist in achieving the project’s goals of improving communication and cooperation between tribal and state/county child welfare agencies and practitioners.

Describe the structure/organization of the jurisdiction’s implementation team(s) (attach org chart)

At the beginning of the project, the DCF team consisted of Cyrus Behroozi, Administrator; Reggie Bicha, Secretary; John Tuohy, Deputy Administrator; Mark Mitchell, Director of Tribal Relations; and Loa Porter, Indian Child Welfare Consultant. With the support of Secretary Bicha, Mr. Behroozi chaired the Project Advisory Board until there was a change of the gubernatorial administration in 2011. Their leadership was a critical component to the project’s strong start. John Tuohy was instrumental in the collaborative effort to develop the project’s logic model and work plan. Mr. Tuohy was named director of DCF’s Bureau of Regional Operations (responsible for ensuring compliance with program compliance and stakeholder relations) towards the end of the project. This new role, combined with his commitment to the success of the project, greatly enhanced sustainability, as Mr. Tuohy worked with local agencies to achieve project goals. Mr. Mitchell was an active member of the Project Advisory Board until his retirement in 2011. He and Ms. Porter also served as agency representatives during the drafting and passage of the WICWA. After his retirement, Mr. Mitchell continued to work on the project, as a MCWIC consultant, focusing on developing CQI processes and instruments to inform the Advisory Board and other stakeholders about the achievement of project goals and outcomes. Ms. Porter was also very active on the Project Advisory Board, was the agency liaison to MCWIC and immediate supervisor for the Project Coordinator and Facilitators.

As of February 5, 2010, an Advisory Board consisting of 20 external stakeholder members with expertise in the area of Indian child welfare and members representing various disciplines associated in the continuum of the child welfare case process began meeting quarterly to discuss the WI project. The Advisory Board was responsible for monitoring, modifying and attaining the goals and objectives in the WI project and the relation to Wisconsin’s ICWA law. This Advisory Board met quarterly from February 5, 2010 until August 21, 2013. As noted previously, a DCF administrative change occurred in February of 2011, at which time Fredi-Ellen
Bove became the new Administrator of the Division of Safety and Permanence, and assumed chairmanship of the Advisory Board.

As the project advanced, there was a need for formation of multiple subcommittees of the Advisory Board to address specific sub-areas of the project. The multiple subcommittees were filled with members from the Advisory Board as well as other external persons that had expertise in a given area. The multiple subcommittees created during the project were: Curriculum Subcommittee, Qualified Expert Witness Subcommittee, Active Efforts Subcommittee, Legal Curriculum Subcommittee, and WICWA Practitioners Manual Subcommittee.

The efforts of the Advisory Board and the multiple subcommittees are reflected in the integrated policies and incorporation of the WICWA into all levels of child welfare practice from front line workers to the judges overseeing these cases. Along with this work has also been a strengthening of the partnership between the Department of Children and Families and the eleven Tribal Nations.

*Figure 2.* Structure and organization chart of DCF’s Implementation Team for Wisconsin’s Best Outcomes for Indian Children Implementation Project.
C. Overview of the Evaluation

*State the key evaluation questions and describe the evaluation (research design)*

The evaluation of the Wisconsin Department of Children and Families Best Outcomes for Indian Children implementation project was designed collaboratively by MCWIC and Wisconsin DCF project leadership after completion of the implementation logic model and work plan.

The evaluation design included evaluating system impacts and child and family outcomes resulting from the project, as follows:

**System Impacts**

- Wisconsin will establish a uniform interpretation and consistent application of the Indian Child Welfare Act (ICWA)
- Wisconsin’s child welfare system will reflect integrated policies and standards that incorporate requirements of ICWA
- Strengthen partnership between DCF and 11 tribal nations
• Improve understanding of the tribal role in child welfare service delivery
• County Agency child welfare practice reflects understanding of tribal agency codes
• DCF case practice will reflect the best interest of the Indian child

Child and Family Outcomes

• Improved outcomes for Indian children in the state child welfare system, including:
  o Increased percentage of cases with active efforts
  o Increased number of cases maintaining tribal connection
  o Permanency outcomes founded in tribal social and cultural standards

With input from the Advisory Board, MCWIC developed a primary evaluation design consisting of a combination of semi-annual reviews of eWisACWIS administrative data; interviews with key stakeholders; and training evaluation measures; administered pre- and post-implementation for both system and child and family outcomes. In addition, data from a small number of CQI case file reviews conducted over the course of the IP were made available to MCWIC to supplement analyses of the administrative data. The MCWIC Implementation Process Quarterly Review (IPQR) tool, which was conducted by the project manager with program staff and stakeholders and reviewed by MCWIC project and evaluation staff every four months of the project, assessed the progress of implementation and served as a primary evaluation tool in the assessment of implementation process. The IPQR utilized the project logic model/work plan to delineate progress in each of the NIRN implementation driver areas. Finally, the IC’s “Implementation Capacity” focus group was conducted with key agency personnel at the conclusion of the project.

System Impacts Design

Wisconsin will establish a uniform interpretation and consistent application of the Indian Child Welfare Act (ICWA). This system impact was evaluated on an annual basis by reviewing DCF child welfare regulations, standards and policies, and DCF Legal Division change (action) logs with the implementation project staff and the project’s Advisory Board.

1,2 Both of these outcomes were removed at the request of DCF implementation project staff. The outcome related to tribal agency codes was removed fairly early in the project when it was realized that this was not a focus of the implementation project and was not going to be addressed by the WICWA specialists. The outcome related to best interest was removed due to concerns of how to define, operationalize and measure the outcome.
Wisconsin’s child welfare system will reflect integrated policies and standards that incorporate requirements of ICWA. MCWIC annually tracked DCF’s revision of existing and administrative rules and program standards to ensure that they integrated WICWA. Interviews were conducted mid-project with key informants in child welfare, courts, and tribes regarding consistent application of ICWA.

Strengthen partnership between DCF and 11 tribal nations. At the project’s mid-point, MCWIC’s Tribal Consultant conducted in-person interviews with key tribal child welfare informants and DCF administration.

Improve understanding of the tribal role in child welfare service delivery. This system impact was evaluated using a pre-post web-based survey of county child welfare staff and DCF administrators who participated in the WICWA training. We also conducted two follow-up surveys with training participants, one week following training, and three months later, to assess their perceptions of the extent to which “training transfer” (i.e., the extent to which training participants apply the concepts and skills learned in training to their work) occurred. MCWIC also conducted interviews with DCF regional service area managers to evaluate their understanding of the tribal role in delivering child welfare services.

Child and Family Outcomes Design

MCWIC received bi-annual downloads of Wisconsin’s Child Welfare Information Systems data (eWiSACWIS) to evaluate the child and family outcomes listed above. These data downloads and subsequent analyses allowed us to track changes in the number of Indian children removed, active efforts made with a child’s tribe, and the number of child welfare cases that maintained tribal connection. The administrative data also allowed us to track the number of ICWA-eligible children, and evaluate the impact of WICWA training on case plan outcomes for children.

MCWIC also partnered with DCF’s Continuous Quality Improvement (CQI) Section to create a case file review tool to use for annual case file reviews of ICWA-eligible cases. This tool was also used to evaluate the extent to which permanency outcomes for Indian children are founded in tribal social and cultural standards. Data from the CQI reviews conducted between 2010 through 2013 were made available to MCWIC for analysis.

Discuss any noteworthy problems encountered in the implementation of the evaluation plan

The evaluation plan originally proposed the use of MCWIC evaluation staff to conduct case file reviews to evaluate the impact of the WICWA training and technical assistance provided by the WICWA specialists. However, during the course of the IP, a concurrent initiative emerged within the Wisconsin DCF Quality Improvement Section to examine Indian child welfare outcomes
through a continuous quality improvement process. Rather than design a separate, additional case file review process specific to the MCWIC implementation, MCWIC evaluation staff worked with the Wisconsin DCF Quality Improvement Section to provide technical assistance to help Wisconsin design their new ICWA CQI review and also collect data specific to the MCWIC evaluation. This process of design, development, testing, and data collection required significantly longer time than the original case file review assessment specified in the evaluation plan. However, the tool that resulted from this process will be used by Wisconsin DCF moving forward and also allowed MCWIC to obtain some of the information originally called for the evaluation plan but on a more limited scale. After the development of the ICWA- specific tool, MCWIC also provided on-site technical assistance to conduct a sample of the case file reviews in partnership with staff from the CQI Section.

We encountered issues with the eWiSACWIS administrative data we received from DCF. In project Year 4, DCF learned of a potentially systemic issue with the eWiSACWIS data. Because of this, DCF instructed that we not present our findings on the outcomes tracked through eWiSACWIS until the department was able to identify and remedy the issues within the data system. In order to resolve these issues, MCWIC evaluation and project staff met with DCF Information Technology staff, project staff, and DCF leadership to assist in the identification of system data issues and the appropriate use and analyses of the data provided to MCWIC. Once these issues were resolved, MCWIC resumed presentations to the Advisory Board regarding our analyses of data, and DCF made modifications and adjustments to their analyses and reporting.

III. Description of Implementation of the Change Initiative

A. Readiness

Describe how readiness was assessed

MCWIC assessed Wisconsin’s organizational readiness for change formally and informally. The formal aspect of the assessment was conducted as part of our external (to MCWIC) review process. MCWIC’s external review process required review of each project proposal by several external reviewers: a paid consultant with relevant expertise, Regional Office personnel, a T/TA Network representative, our FPO and members of the CFSR Unit in the Children’s Bureau. These outside reviewers used a common assessment instrument. External reviewers generally found that Wisconsin had a high degree of organizational readiness for the change it proposed.

Our “informal” readiness assessment included an internal review of project proposals, as well as internal review of other relevant information: prior and on-going utilization of the TA
network, as reflected in TATIS (predecessor TA database to One Net); CFSR reports; information provided by ACF Regional Offices during teleconferences; and state-specific documents such as strategic plans. Discussions with key agency stakeholders were also part of the informal readiness assessment process.

Describe facilitators and barriers to readiness

Based on the entire readiness assessment process, we identified the following facilitators and barriers to readiness for change:

Facilitators to readiness included the already-existing relationship between DCF and the eleven tribes in Wisconsin. DCF and the tribes had worked together for several years to obtain passage of a state ICWA statute. The strength of this relationship is reflected in the historical and unanimous passage of the WICWA codification by the Wisconsin legislature in 2009. It was also very helpful that the statute was enacted immediately prior to project start, while there was still a strong focus on WICWA. This was an important foundation which led to critical support of the implementation project from tribes, other external stakeholders, and the state, including executive level support from DCF’s leadership. The project was also integrated with the state’s PIP and CFSR plans.

Although there were a number of facilitators to readiness for this implementation project, there were also barriers to readiness that we encountered. Wisconsin is a state-funded, county-administered system with 72 counties which can make state-level mandates and systems change efforts difficult without a positive relationship between the state and county. In Wisconsin, there was also a history of mistrust between tribes, counties and state, which was compounded by a history of non-compliance with the federal ICWA law. In 2008, the Department of Children and Families was created as Wisconsin’s first cabinet level agency devoted exclusively to helping and protecting children and families. Cabinet status provided unification of more than thirty services previously divided between separate departments, and gave children and families a “stronger voice” in the state’s government. The new structure was designed to improve outcomes for children and families by providing seamless, integrated and family-centered services in an accountable, result focused manner. DCF committed significant resources—more than 500 employees and a budget exceeding $1 billion—to achieving those outcomes.

We leveraged readiness facilitators by working to ensure broad external stakeholder representation on the project’s Advisory Board, and subcontracting with the Ho-Chunk Nation to hire and supervise key project personnel and provide office space.

MCWIC and DCF worked to address the readiness barriers by insuring meaningful stakeholder engagement through membership on the project advisory board—counties, tribes, courts and
other state agencies (including the BMCW) were represented in the advisory board. In collaboration with these stakeholders, we also helped develop training (WICWA Training) to support the knowledge and skills necessary to successfully implement WICWA at the case practice level, and insured that it was accessible to practitioners across the state. This new training was designed to complement existing training, which provided an introduction to the federal Indian Child Welfare Act, the history of Wisconsin Tribes, culturally sensitive case practice and working with tribes. The new training was more in-depth and statute-focused, and was designed to help child welfare practitioners apply the new state law in their daily job duties and tasks. Finally, the barriers described above required county-specific technical assistance to respond to their unique needs, and to ensure the consistent application of the WICWA statewide. MCWIC staff—the Project Coordinator and Facilitators—attended these training sessions to provide consistent answers to questions and to assess what additional training might be necessary.

Describe how T/TA supported the readiness of the jurisdiction to implement the project.

Upon receipt of the state’s initial project application, MCWIC personnel began an intensive process to engage with state leaders to understand the jurisdiction’s needs and project objectives. Through a series of conference calls and two on-site visits over the span of several months, members of the MCWIC team (Project Directors, Evaluator, and Project Manager) worked closely with DCF project leadership to discern the overall vision for the project, build relationships, propose effective strategies and timeframes for implementation, and develop the project logic model and evaluation plan. It was through these discussions that MCWIC was able to identify strengths and potential barriers to implementation in the jurisdiction, and offer suggestions for strategies to address these barriers. Designation of the state’s application as a “selected site” by the Children’s Bureau (rather than immediate acceptance of the IP proposal as an “accepted project”) afforded MCWIC and DCF the opportunity to continue the planning and readiness assessment stages for a longer period of time (approximately three months) than would have been the case if the IP were accepted immediately. In hindsight, this extended preparation period was a benefit, as it resulted in a stronger foundation for implementation, which contributed to the overall success of the project.

In addition to the supports noted above, MCWIC’s Tribal Consultant (Yellowhammer) had extensive experience working as a state Indian Child Welfare Consultant in state-supervised, county-administered system which has had a state Indian Child Welfare Act for several years (i.e., Minnesota). Her intimate familiarity with the process of implementing consistent application of the statute and the complexities of state/tribal/county working relationships was a valuable resource to stakeholders in Wisconsin. Particularly in the context of advisory board meetings, Ms. Yellowhammer facilitated the collaborative development of a strength-based
approach to implementing specific activities and tasks necessary for attainment of project goals as identified in the project work plan. The technical assistance provided by Ms. Yellowhammer built upon the substantial existing competencies we found in Wisconsin in an adaptive manner by providing an external perspective that Wisconsin stakeholders highly respected.

Reflection on lessons learned about Readiness Assessment

MCWIC’s experience across its four implementation projects reinforced our commitment to conducting readiness assessments that are tailored to the context and environment of our partner agencies, including the intervention we would be helping them implement. For instance, readiness to install a technical intervention in a state-administered child welfare system, with no Tribal governments as potential partners, is not the same readiness to implement a project that addresses an historical failure to effectively achieve the outcomes for Indian children, their families and communities expected from the passage of the federal Indian Child Welfare Act of 1978, in a state-supervised, county-administered jurisdiction with eleven sovereign Tribes as partners.

Engaging in a readiness assessment presupposes the existence of an appropriate, feasible intervention that can be readily applied when an organization or pockets of an organization or system are found to be “unready.” As the WI project progressed, our informal readiness assessments indicated that some components of the child welfare system were more open and accepting of the proposed change than others. Delays and challenges to project implementation resulting from a lack of systemic readiness for change commanded a significant portion of the time and attention of the MCWIC and DCF project managers. Generally, issues were successfully addressed as they emerged.

B. Design/Selection of the Intervention

Describe how the intervention was designed/defined, including: Theory of Change, including logic model and rationale on how outcomes will be achieved; Adaptations to the intervention, both in the beginning, and throughout the project period.

The original proposed intervention was designed by DCF and included in their application to the IC. Subsequently, the MCWIC project team worked with DCF leadership to develop the project logic model and the interventions were adapted over the course of this iterative process. The logic model was revised several times over the course of the project; the final version is included in the Appendix.

Primary Implementation Components
The plan for implementation of WICWA was focused on a number of essential interventions: training for multiple levels of practitioners; technical assistance to county and tribal child welfare agencies; development of resources, tools, rules, and policies; and data system modifications. A more detailed description of each of these activities and tasks is set forth below. Together, these components provided the systemic supports child welfare practitioners needed in order to carry out the provisions of the law.

**Training for Multiple Levels of Practitioners**

Training was a critical component of this implementation project, and was an essential intervention in multiple formats for a variety of audiences.

Immediately upon enactment of the WICWA legislation, DCF conducted a series of introductory informational roundtable sessions with external stakeholders, to provide an overview and background information on the passage of the WICWA law and its provisions. A total of eleven half-day sessions were held at venues around the state. More than 600 participants were involved, representing a variety of roles in the child welfare system, including caseworkers, supervisors, attorneys, tribal agency workers, managers, directors, and trainers.

The primary training intervention was the development and implementation of a set of three training curricula, targeted to different audiences: 1) a comprehensive WICWA training curriculum, focused on application of the law to social workers’ job responsibilities; 2) a modified version of #1, with the addition of instruction on relevant eWiSACWIS functions for case documentation; and 3) a WICWA legal curriculum, in which the original WICWA training curriculum was adapted and enhanced specifically for attorneys, judges, and guardians ad litem. Development of the original curriculum took almost a year, including pilot training, an extensive review by an Advisory Board subcommittee, and the integration of revisions representing tribal, legal, and practitioner perspectives. The original WICWA curriculum consisted of eight interactive and engaging modules, with lecture, small and large group activities, videotape segments, and fictional case examples. The focus was on participant involvement, and trainees had multiple opportunities to apply the material to their current cases, through discussion and activities. Before the project concluded, the WICWA curriculum was integrated into the state’s existing core training program for new workers to ensure sustainability.

Delivery of training using the new WICWA curriculum began in May 2011 at multiple locations in Wisconsin, and continued through April 2013. Training was originally delivered as a 1.5 -day session. With a target audience of approximately 2,800 state and county social workers in the state of Wisconsin, providing meaningful training in a manner that fosters learning retention was a challenge, and thus, additional strategies for training delivery were conceptualized,
including provision of training at regional meetings. After some time it became apparent that a barrier to effective training was some workers’ lack of knowledge about the eWiSACWIS system, and so training was adapted to incorporate information about the eWiSACWIS “tab” in the system, using co-trainers skilled in the system. Another barrier to effective spread of training was the two-day length of the curriculum, and thus some activities and information were eliminated, to reduce the training to a one-day session. However, each of the eight modules that comprised the curriculum could be presented as a stand-alone session, either in a classroom or webinar (asynchronous) format, so that delivery could be customized to the needs of the audience; in particular, the modules on Qualified Expert Witness, Active Efforts, and eWiSACWIS were the most often requested “stand-alone” training topics. Trainers also began intensive outreach to areas of the state that were not immediately sending staff to the training sessions offered thru the regional training centers. They devised a plan to offer the training on-site in local offices, which significantly improved participation.

Training participants included a broad range of staff involved in the delivery of child welfare services; this included front-line workers, supervisors, DCF administration and staff, personnel from the Department of Corrections, and legal partners. In total, 1,502 individuals participated in a WICWA-focused training; specific curricula varied to some extent depending on the needs of the audience. A map of coverage or “spread” of this intervention is included below (Figure 3). WICWA caseworker training was delivered to 821 front-line and direct supervisor staff in 51 training sessions held between May 25, 2011 and April 25, 2013. In addition, specialized WICWA trainings (e.g., condensed WICWA training, WICWA eWiSACWIS Tab Training) were delivered to 343 participants in 15 training sessions between February 13, 2012 and April 24, 2013. WICWA training was also presented to 98 DCF administrative and staff members in three trainings: February 17, 2012; March 2, 2012; December 13, 2012; and 18 Department of Corrections staff on July 9, 2012. WICWA legal training was delivered to 222 legal partners in 13 training sessions scheduled between July 13, 2012 and September 6, 2013.

Figure 3. WICWA Training Participation by County at the End of the Implementation Project.
Note. This map represents the data known to MCWIC project staff, as accessed from training evaluation data.

The WICWA training delivery model featured co-training by teams of two trainers specifically selected for their expertise: a tribal trainer who currently works for a tribal social service agency and a non-tribal trainer with both county and tribal social service work experience. The trainers were encouraged to share their personal perspectives to enhance the training. The use of co-trainers was a targeted strategy designed to effectively model the cooperative communication that can occur between county and tribal social services, and which was deemed to be an essential prerequisite for successful implementation of WICWA.

Technical Assistance to County and Tribal Child Welfare Agencies

In addition to the initial WICWA training, stakeholders identified a need for county and tribal child welfare agencies to receive ongoing, individualized technical assistance to enhance and build upon concepts presented in training, to provide more in-depth specialized knowledge, and to provide a forum for within- or cross-agency dialogue on local implementation issues. In
this project, technical assistance was an element of two NIRN implementation components—
training and coaching. The focus of this intervention strategy was on providing social workers
and other local practitioners (judges, attorneys, providers) with the information they needed
regarding the new law and how to effectively apply WICWA in their work.

At the beginning of the project, one of the primary roles of the three on-site dedicated project
implementation staff was to solicit and respond to requests from the field for technical
assistance, which would be delivered via email, telephone, or on-site sessions, individualized to
the needs of the requestor agency. Project staff developed an electronic request form for social
workers to ask specific practice-related questions and to request technical assistance. This
instrument was to be located in the eWiSACWIS system to maximize its accessibility to
practitioners across the state. Early requests from county child welfare agencies indicated
interest in this customized technical assistance: out of eight of the initial WICWA training
sessions held in early 2011, six resulted in requests for additional technical assistance or follow-
up training sessions.

As the project progressed, legal staff for DCF advised project staff there were issues regarding
confidentiality that prevented that model of technical assistance. Thus, the role of the
coordinator and facilitators evolved to reflect those requirements. For instance, the WICWA
two-day training curriculum was modified to a one-day curriculum and delivery was focused
more on local, rather than regional venues, to respond to agency needs. In 2012 and 2013, the
on-site project staff delivered an increasing level of customized training and TA at local county
or tribal offices. At the conclusion of the implementation project, these three project staff had
provided more than 530 hours of training and technical assistance to local county child welfare
offices, and more than 560 hours of training and technical assistance to other audiences within
the state on WICWA topics.

**Development of Resources, Tools, Rules and Policies**

Another critical source of support (or facilitative administration) for WICWA implementation
has been the development of resources, tools, policies, and administrative rules to support
desired practice. Providing tangible materials—desk aids, handouts of presentations, and
supplementary WICWA material such as historical information about Indian child welfare—
encourages practitioners to reference these materials in their everyday case practice, which is
particularly helpful to reinforce newly learned skills. Promulgation of new administrative rules
or policies is an essential step in assuring that expectations are clarified and sustained.

The *WICWA Desk Aid* is a laminated, four-page reference guide that was created to succinctly
summarize the requirements of WICWA at each step of Wisconsin’s child welfare continuum. It
includes a listing of contact information for Indian child welfare departments in all eleven
tribes. More than 9,000 copies of the desk aid were disseminated to social workers and other stakeholders across the state, at national conferences, and it was also made available on the DCF website. Response to this tool was encouraging; anecdotal data indicated that after the desk aid was disseminated across the state, several tribes reported an increase in the receipt of WICWA-required notices. Specifically, comparisons of the eWiSACWIS data for the time period of July-December 2010 versus January-June 2011 indicated that the percentage of notifications to tribes documented in eWiSACWIS increased from 8% to 23%. Notice to tribes that an Indian child had been placed in out-of-home care was an area of concern identified by the Child and Family Service Review (Children’s Bureau, 2004), and the Children’s Court Initiative review (Children’s Court Improvement Program, 2011).

A number of other resources and tools were developed, including: laminated WICWA case flowcharts for judges and attorneys; a revision of the WICWA Desk Aid that included information on how to determine if a family qualifies for a public defender; an eWiSACWIS Desk Aid; a list of “frequently asked questions” (FAQ) on WICWA on the DCF website; guideline policies for Qualified Expert Witness (QEW) testimony at particular stages of judicial proceedings; Active Efforts policy; a Worker Resource Manual; a WICWA CQI tool; a Legal Practitioners’ Manual for attorneys and judges; and a video entitled “WICWA Legacy Legislation” which details the historic collaborative efforts leading to enactment of the WICWA legislation. In addition, the state integrated WICWA into its administrative rules and program standards.

**Data System Modifications**

A final essential component of successful implementation (the decision support data systems component) of WICWA lies in the integration of indicators of desired practice changes into the agency’s administrative data systems. Within the first year of WICWA enactment, DCF established new data collection fields within relevant sections of eWiSACWIS, and required social workers to enter evidence of compliance with the new law. For example, if a child is identified as Native, the system requires entry of the name of the tribe; relevant supporting and notice documents are then automatically generated by the system. The system also provides aggregate summary data regarding Indian children placed in out-of-home care in Wisconsin, and data is exportable into excel spreadsheets for ease of viewing and reporting.

In subsequent years of the project, the WICWA training was modified to incorporate instruction on the use of the eWiSACWIS system to document case activities associated with compliance with provisions of the law.

Describe the facilitators and barriers to specifying the intervention, both at the beginning of the project, and throughout the project period.
As originally proposed, the intervention included a potentially overwhelming number of training events that the system might not have been able to deliver or utilize effectively. MCWIC worked with DCF and other stakeholders to revise the plans to make the training logistics achievable and manageable. Also, the original plans were predicated on a relatively quick hire of the three on-site project personnel; in fact, it took nearly a year to get these three positions created and filled, which significantly delayed the development and delivery of training and technical assistance to local practitioners. The first training did not occur until May, 2011, a full year after the original target. This initial delay, along with other factors, resulted in a need to extend the project for an extra year, through Sept 2013. While the process took longer than anticipated, the extra time was required to insure the hires were both technically competent and acceptable to the stakeholders.

Another barrier was MCWIC’s limited familiarity with the structure of the Wisconsin training system (the Wisconsin Child Welfare Professional Development System) and its unique processes. A more comprehensive understanding of that system (there is a university based coordinating entity for six training partners, one of which is the Intertribal Training Partnership) would have been beneficial for identifying potential challenges in advance. In retrospect, both MCWIC and DCF initially underestimated the political and organizational complexities of the system, which delayed effective integration of project training efforts into the existing training environment.

A key facilitator to specifying the intervention was the recent historical collaboration between DCF, other state agencies, and the eleven sovereign tribes in Wisconsin. In 2006, a remarkable coalition was formed to develop and promote the Wisconsin Indian Child Welfare Act (WICWA), the necessity of which was precipitated by bad stories and statistics indicating persistent and systemic problems with implementing the federal ICWA. The coalition was comprised of tribal attorneys, tribal social services directors, other Indian rights advocates and representatives from the state, primarily from what is now the Department of Children and Families (DCF). What made this coalition remarkable was the tenacity and commitment that stretched continuously over a period of years in pursuit of WICWA. For many participants, it was the most sustained and cogent collaboration of tribal and state efforts in which they have ever participated.

There were obstacles to overcome, some anticipated (private adoption attorneys) and some not (Children and the Law Section of the Wisconsin State Bar). There were also numerous competing interests to reconcile or overcome. One of the problems with the federal ICWA is that it contains several significant ambiguities. The coalition addressed them by including language in WICWA to clarify those ambiguous clauses in a respectful way consistent with the spirit and intent of the original ICWA. Going that extra mile had the effect of increasing the
adversarial obstacles to enactment. These issues were met and addressed finally in a culminating long and moving state legislative hearing.

Due to the persistent and long-term efforts of the coalition, WICWA passed unanimously. The result is a law designed to overcome the vagueness of some provisions of the federal act and to provide a state-specific mechanism to achieve better outcomes for Indian children, their families and their communities. That lengthy collaborative process has created a level of trust and respect allowing the frank and open discussion necessary to specify the intervention needed to achieve those improved outcomes WICWA is designed to attain.

Another facilitator to specifying interventions was the continuous feedback process, ownership/investment and good communications established through the structure of the project Advisory Board, all of which was the result of the process described in the preceding paragraph. The Board had representatives from all major stakeholder groups, and members were active participants in reviewing and providing feedback on all proposed project activities. Thus, drafts of all tools, policies, and curricula were reviewed and implementation was monitored over the course of the entire project.

*Reflection on lessons learned about how T/TA can support the intervention selection and/or development.*

We previously described how MCWIC supported the intervention selection and development for this project. Those activities and processes were effective due to the hard work that preceded our involvement, and in part because MCWIC staff has extensive experience in curriculum development and training evaluation, interdisciplinary team building and group facilitation and working with child welfare practitioners, managers and administrators to formulate and institute policies designed to support new interventions. We also had a tribal consultant with years of experience in a similar context. Another T/TA provider working with a different jurisdiction to implement a new state ICW statute, or improve compliance with an existing law will require access to similar knowledge, skills and abilities.

However, while those resources are necessary for a task such as this, in this sort of environment, they are not sufficient. A provider must also be able to facilitate dispute resolution, recognizing the disagreements arise from a very long history of mistrust. This facilitation might require the provider to provide a framework in which the partners are able to use their own expertise to find their own way through the conflict and to reach their goals.
C. Drivers (NIRN+)

Describe which drivers were most salient during the progression of the project

MCWIC assessed the implementation process through MCWIC’s Implementation Process Quality Review (IPQR) tool at 4-month intervals during the course of the implementation project. The IPQR is guided by the implementation project logic model, work plan, and NIRN drivers. Completion of the IPQR is a collaborative effort between the MCWIC Project Manager, the jurisdiction’s on-site project manager (or similar position), and other key participants from the jurisdiction.

Using the project’s logic model and work plan, the IPQR assessment identifies the products and outputs developed for each intervention in the project, and link each to the relevant implementation driver. The MCWIC project manager completes the IPQR with the key jurisdiction stakeholders (on-site project manager, etc.), tracking ongoing progress with each product/output, rating the salience of the driver associated with those products/outputs during the rated period, and assessing implementation progress during the time period. The completed IPQR is then reviewed by the MCWIC Project Manager, MCWIC Directors, and MCWIC Evaluators. The MCWIC internal review of the IPQR identifies implementation efforts by the jurisdiction and IC to successfully meet the goals of the implementation plan to generate recommendations for the jurisdiction, to identify needed T/TA supports, and to assign driver salience and installation ratings. The salience of each project driver is rated on a 3-point Likert scale, where 1 = Low Salience, 2 = Moderate Salience, and 3 = High Salience. The installation of each driver is rated on a 4-point Likert scale, where 1 = Not Yet initiated, 2 = Initiated or Partially in Place, and 3 = Fully in Place. Average salience and installation ratings for each driver across the full term of the Best Outcomes for Indian Children implementation project are displayed below.
Five implementation drivers were identified as highly salient throughout the implementation of this implementation project. These drivers include: Shared Vision, Mission and Values; Leadership; Facilitative Administration; Stakeholder Engagement; and Cultural Responsiveness. These drivers were identified as highly salient for each of the seven IPQR periods, including the initial design period over the four-year project.

It is also important to note, however, that all implementation drivers were rated as “highly salient” at least once during the project period. This reflects the value of the IPQR process as it gauges the progression of driver salience throughout the project period.

Describe facilitators and barriers to driver installation

A continuity of strong, vision and mission-oriented leadership with engaged stakeholders was a key facilitator of the implementation driver installation. The jurisdiction had also just unanimously approved codification of WICWA concurrent to the implementation center grant, and WICWA was signed into law on December 7, 2009. Due to this, there was already a well-established identification of stakeholders, along with an Intertribal Child Welfare (ICW) committee. The jurisdiction saw a strong need for this project, particularly given the known problems with following the federal ICWA legislation, and the leadership was in place to
identify and support the implementation of policies, practice standards, training and case management tools to assist the state counties and BMCW to work towards best outcomes for Indian children.

The leadership, shared mission, vision and values, and stakeholder engagement drivers were further facilitated by the creation of an Advisory Board and identification of sub-workgroups early on in the project. The Advisory Board was actively involved in the project’s initiatives and outcomes. As noted previously, there was a relationship built on mutual respect, however, historical mistrust necessitated discussion of relationships at many Advisory Board meetings. These discussions were sometimes quite heated, but other times, Advisory Board members calmly reminded each other of the historical reasons and need for the statute. The strength of the relationship was reflected in the respectful way the discussions occurred, whether they were heated or calm.

These driver facilitators were particularly important when potential barriers to installation occurred throughout the project. For example, mid-project leadership changes could have derailed the project or created significant barriers to installation of some or all of the drivers. However, the transition was smooth and Fredi Bove’s (DCF Division Administrator) leadership of the Advisory Board helped address real and potential barriers that frequently arise when leadership changes.

Another potential barrier was created when Mark Mitchell (DCF Director of Tribal Relations) retired from service mid-project. The DCF ICWA Consultant (Loa Porter) replaced him in this position, and the ICWA Consultant position remained vacant. That vacancy was perceived by the tribes as a broken promise and was a source of concern and reignited some mistrust. However, the administration respectfully listened to the concerns; expressed understanding stated its commitment to the success of the project and achievement of its goals. This event could have had serious negative consequences for the project, but the partners did not permit that to happen.

One significant barrier was lack of a common understanding regarding the WI Professional Development System structure and process for training development, delivery, and evaluation of training. In an effort to expedite curriculum development, a process was used that did not conform to existing protocol, which resulted in significant effort and time to revise the curriculum. Responding to the perceived need to deliver the curriculum quickly in a culturally acceptable manner, existing protocol was again not followed. This presented challenges to the delivery of the WICWA training in an efficient and effective manner. At the time of the training implementation, the WI system had not yet developed a consistent and effective process for collecting training evaluation data. Some representatives of the professional development
system seemed resistant to the idea of knowledge testing. The system had not developed the capacity for rigorous pre-and post-testing, including safeguards for preserving data integrity. Thus, MCWIC developed and maintained the tests, and developed a process for pre- and post-test administration. By the conclusion of the project, a level of understanding and trust had developed, such that MCWIC worked with system representatives to develop mechanisms to sustain the training curriculum and training evaluation protocols.

A second barrier was that the DCF CQI system was not well-suited to evaluate WICWA cases regarding compliance with the new statute. MCWIC collaborated with DCF to create a new review tool and provided consultation on conducting effective and useful case file reviews.

A third, and significant barrier, was a change to the state data system, eWiSACWIS, with the incorporation of the WICWA tab. This change to the data system required a change in practice for users, thus MCWIC worked with DCF data systems staff to develop internal agency capacity to effectively use the WICWA tab within eWiSACWIS.

Reflections on lessons learned about strengthening/installing drivers through T/TA

In general, we believe that it is very important that the autonomy of the IC-based and the agency-based project staff be protected to allow accurate assessment of project progress. Each partner needs to have an effective advocate for their perspective of the process. When the on-site and MCWIC project managers jointly assessed the implementation process (using our IPQR instrument) we obtained a more accurate picture of that process than when they used the instrument separately.

Specifically to this project, we feel that T/TA providers must approach tribal partners in a manner that respects their history, accounts for the lack of trust towards non-tribal governments, and recognizes their deep connection to their children and families. Implementation will not move from exploration unless and until trust is established, and that may be a long and difficult process. Establishing a relationship of trust is absolutely critical.

T/TA providers involved in implementation projects with tribal partners must understand that implementation science terminology—stages, drivers, components, readiness, evidence-based practice—may not immediately resonate with those partners. However, tribes were implementing innovative child welfare practices long before implementation science was identified as a discipline.

Providers must also recognize that tribal communities often distrust data/numbers/statistics. There are many (and varied) historical reasons for this skepticism, but it can be a barrier to installation of drivers unless recognized and addressed.
A potential cultural facilitator for installation of drivers is that many Native Americans view the world in a holistic way, which can support an implementation framework in which drivers are seen as integrated and compensatory. Another potential facilitator is that many tribal child welfare practitioners understand that change takes time, and time may be measured in a different manner than providers are accustomed to.
IV. Project Outcome Evaluation
   A. Implementation Outcomes

As described in section C (below), nearly every county in the state participated in WICWA training. The training map (Figure 3 in Section IIB) illustrates the spread of this intervention.

Section C also presents data suggesting that training participants intended to utilize what they had learned in training in their subsequent practice on the job. A complete assessment of the extent to which case practice did in fact change was beyond the capacity of the project evaluation; however, MCWIC did partner with the DCF CQI Department to design a tool to conduct ICWA case reviews, and participated in a sample of reviews in conjunction with DCF staff. MCWIC analyzed data from a sample of 85 CQI case reviews that were conducted between July 2010 and October 2013. Descriptive results from these reviews suggest that the majority of individual case files reviewed during the project period were in compliance with WICWA documentation requirements. See further description of results in Section C below.

An additional, unintended, implementation outcome that resulted from MCWIC’s work with Wisconsin’s CQI team was a more comprehensive and more efficient CQI process for WICWA-eligible families. Two types of reviews are now conducted: “Full WICWA reviews” provide more complete feedback to the counties and focus on the practice strengths and opportunities observed during the review process, and “WICWA Basic reviews” allow the CQI team to more efficiently review WICWA requirements and address documentation performance issues. This improvement in efficiency was evidenced by the volume of reviews; the CQI team was able to complete more reviews in 2013 than they had in the previous three years combined. In 2013, 44 reviews were completed in 14 counties. In the years 2010 through 2012, only 41 reviews were completed in 11 counties.

B. Implementation Capacity Outcomes

The IC Implementation Capacity focus group was conducted as part of the project closing activities. The focus group was conducted to assess perceptions of the implementation process for the project; and specifically the role that MCWIC played in that implementation. The protocol questions focused on the development of implementation capacities or drivers, what worked well, what challenges were encountered, and what suggestions participants had for additional technical assistance, or other supports that might have been helpful. The focus group protocol was developed jointly by the five Implementation Centers and Children’s Bureau. Participants were asked to comment on the capacities that were in place prior to the implementation project, which new capacities were developed or existing capacities expanded as a result of the implementation project, and which capacities were developed or expanded during the same timeframe that were not related to the project. Participants were provided
with a copy of the focus group protocol prior to the session, along with the project’s logic model for reference. Definitions were provided in this document for each of the capacities/drivers. This was done to clarify the topics to be discussed and allow participants to reflect on the project prior to the group discussion. It was also viewed as a way to save time during the focus group by cutting down on the need to clarify what was included in each area.

The focus group was conducted by a consultant to MCWIC who had not been involved with the project previously. It was felt that participants might feel more comfortable speaking to someone with whom they had not previously interacted. The focus group was not audio or video recorded. Notes were taken by a MCWIC staff member.

Findings

Eight individuals who were key participants/leaders in the project participated in the focus group. A summary of their responses follows.

Existing Capacities:

A majority of the responses in this area centered on the existence of a shared mission, vision, and values, as well as commitment on the part of a broad range of stakeholders to the WICWA project, prior to MCWIC involvement. Participants mentioned support for the project from DCF leadership, county staff, and tribes, and a shared desire among stakeholders to improve and meet the requirements of WICWA. One participant added that the legislature was strongly supportive of the project, noting that “we had unanimous support out of both houses of legislature, so even with a change in leadership, the strength of support for the project didn’t waiver with change of administration; that was really important for this project”. Participants also mentioned that DCF had existing relationships with tribes and the courts, developed through various workgroups, and that these were helpful when implementing this project.

Capacities Enhanced in Conjunction with the Project:

Participants described the project as enhancing the existing commitment to meeting the requirements of WICWA by providing concrete tools to operationalize that commitment. They mentioned that MCWIC and the implementation project’s Advisory Board structure further enhanced existing relationships, expanded county representation, and allowed for the inclusion of more stakeholders or experts in specific project activities (e.g., recruitment of Native American foster homes, Continuous Quality Improvement of ICWA cases, etc.). They felt the implementation project also helped to bring together leaders from state, county, and tribal agencies, and that the training process helped to reinforce the commitment of frontline workers in the counties. One participant commented that the training led to more enthusiasm for the project, as well as baseline knowledge of WICWA, stating that “…workers want to do
better; I had a good feeling working with workers about a real energy, about wanting to do a
good job for children subject to WICWA”.

**New Capacity Built in Conjunction With the IC Implementation Project:**

Participants also described the development of new capacities as a result of the WICWA project
and MCWIC involvement. These capacities fell in the areas of training, cultural competence,
selection, systems intervention, and data systems.

WICWA-specific training was seen as both a major focus of the implementation project and a
major benefit from the project. Participants commented that although shared values existed
before the project, specific WICWA training did not. One participant stated that prior to the
project, there were limited training opportunities, particularly for attorneys and judges: “one of
the major strengths that we received from the MCWIC project was the training, particularly the
judicial training, but also the county training.” Another commented on the need for continued
training, stating that “not all counties understand ‘best interest of the child vs. [best interest of
the] Indian child’ so there is still a need for more training and awareness.”

A number of those interviewed described how the training increased their understanding of
Native American culture. In the words of participants:

- “The actual specific values of the Native American culture was such a learning
  experience for me, and that came out of the training”; 
- “That (training) was a huge focus of the project, understanding tribes and their beliefs;
  for example, not terminating parental rights. It highlighted and helped us understanding
  some of the challenges we had before.”
- “In (the) adoption field, (there is) so much struggle with adoption and termination of
  parental rights with tribal cases, but I felt a greater sense of ease by having a better
  understanding of tribes and cultural issues”; 

Participants described selection as another area in which capacity was developed, specifically in
contracting with a tribe and staffing the project. They stated that early in the project it was
necessary to identify and subcontract with a tribe to carry out specific aspects of the project,
and this added complexity to implementation. One participant observed that “The majority of
this project revolved around the project staffing and working with the agencies. We chose a
more complicated staffing model because we wanted them to be employees of the tribe. (We)
had trouble finding a tribe to volunteer; it took a while for getting all of this in place.”

Participants also described changes to the system that were put in place as a result of the
implementation project. In addition to instituting WICWA-specific training, they described
putting in place new forms and processes in the courts, changes in Wisconsin Department of
Children and Families policies to support WICWA, and enhancements to the eWiSACWIS data system to better capture ICWA compliance. One person went on to say that these might not have occurred without the implementation project, or if they did, not as well or as quickly. They also talked about the importance of continued support for the implementation and commented that they were looking for ways to sustain and support the work internally. They noted that one agency in the state has been struggling with documentation, engagement, and qualified expert witness requirements and is planning to institute a WICWA unit. The intent of this unit will be to provide specialized services in an environment where front line staff typically have few ICWA cases, and thus little opportunity to build on knowledge from previous cases.

With respect to data systems, participants remarked that “the project greatly enhanced our ability to use the data. We had a report before, but no one really paid attention to it. The project shed light on this, and now we collect better data”. Participants also mentioned the development of the eWiSACWIS tab, a screen in the SACWIS system that prompts staff to input information required for an ICWA case. One noted that they would have developed the ICWA tab and forms regardless, but that having the implementation project and Advisory Board, as well as MCWIC funding to make laminated copies of the WICWA judicial checklist, helped to facilitate feedback for these mechanisms, as well as to expedite the development and institutionalization of them within the Department and across the state.

**Capacities Developed That Were Not Part of the Original IC Project:**

When asked about this area, participants described a number of parallel efforts and their connections to the WICWA project. These efforts and connections included work on recruitment of Native American foster families, continuous quality improvement (CQI) projects, updating Departmental standards, and sharing expertise about ICWA codification with other states.

In discussing connections between these efforts and the WICWA project, participants pointed out that the recruitment of foster homes complemented the work being done in the WICWA project around ICWA placement preferences. They also mentioned connections to the CQI projects that both the Department and the courts were engaged in during this time. One observed that it was helpful to get input from the Advisory Board for these efforts. Another described incorporating ICWA into the review process, noting “CQI for court improvement was more than just ICWA. (It) focused on all child welfare cases, but now we’re doing a focus on WICWA compliance in reviews.”

A third area discussed was an update to Departmental standards. One person noted that although this process and the WICWA implementation were “different tracks”, a conscious effort was made to incorporate WICWA when writing new standards.
Participants also discussed providing assistance to a neighboring state regarding codification of ICWA and working with the courts. They felt that the expertise developed during the project was an asset as other states were now looking to Wisconsin as an expert in this area.

**Supports That Helped Build Capacities:**

A number of supports were described by participants related to information sharing; the model used by MCWIC to provide assistance; expertise and flexibility of staff; and provision of evaluation data.

In the area of information sharing, participants commented specifically on the helpfulness of MCWIC evaluators and consultants related to the development of indicators for a quality service review tool, as well as more general access to information. In the words of one participant “We borrowed a lot of information from other states. The MCWIC project manager was really helpful in collecting this information and getting research about what others are doing; other states have been referred to MCWIC and we’ve shared everything we know.”

Participants also appreciated the model used by MCWIC for providing assistance, mentioning work early in the project to develop a logic model, the amount of time spent on site, and provision of coaching and specific tools and desk aides. Participants offered the following comments about MCWIC’s orientation to providing assistance:

- “Very helpful working with MCWIC staff early on to develop logic model. [It] forced some discipline for us”;  
- “The MCWIC staff came with us on CQI reviews and WICWA reviews and that was helpful that they were able to share their expertise; they participated and partnered with us in the reviews,”  
- “MCWIC provided a lot of coaching”;  
- “The individual tools have been very helpful” (the participant went on to mention desk aides, as well as documents on reasonable efforts and the qualified expert witness, and the importance of the qualified expert witness information to the courts);  
- “The model MCWIC used was great—the project manager was able to spend a lot of time on-site and that was really helpful”; and,  
- “I appreciated that the curriculum was focused on what the law requires.”

In addition to the model used to provide technical assistance, participants mentioned the expertise, attitudes, and flexibility of the staff they interacted with as supportive of the implementation project. People conducting the trainings were described as “flexible, accommodating, and knowledgeable” and the project manager was described as “enthusiastic and engaged” and “wanting to see the project succeed.”
With respect to evaluation, participants appreciated receiving data related to the impacts of training. In the words of one participant, “One thing we benefited from was having a rigorous evaluation of the training to know that it was having a significant and positive effect [on case managers’ work].” Another mentioned an appreciation of MCWIC’s willingness to share qualitative and compliance data. Participants also talked about the fact that the implementation project helped to surface some issues with data integrity that are currently being addressed.

Other supports that would have been helpful: (time, clarity around match requirements and nature of grant, clarity around ICs vs. NRC, earlier awareness of data issues-maybe this is a lesson learned)

Focus group participants mentioned that additional information about working with the Implementation Centers would have been helpful early on. Participants described the process as different from a typical grant where “DCF was simply given money,” and felt that the differing expectations were a bit confusing at the beginning of the project. One person added that there was also confusion regarding in-kind match, saying “there was never any procedure for that so we didn’t collect it” and that with more information they would have done this differently. There was some disagreement within the group regarding what was done to introduce MCWIC services. One person stated that he/she didn’t understand what MCWIC could offer beyond the logic model and plan; adding “maybe they had a whole range of services available that we didn’t know (about). There wasn’t enough information about what MCWIC and the [Training and Technical Assistance] Network could do for us.” However, another pointed out that “early on, MCWIC went to do outreach. They went to tribes and states and had regional forums to talk about everything they could provide to states.” This individual went on to say that while that information was there initially, it would have been helpful to have had it provided annually; “it was only done once and early on, so if you were not at the initial meeting, you never would have gotten that message.”

One participant expressed a desire for more resources and information on the implementation of ICWA in general. The participant noted that expertise on implementing ICWA is lacking across the country, and that in response to calls seeking information, he/she would be referred back to Wisconsin for advice.

Participants also commented that they would like assistance for a longer time period and expressed uncertainty about how to obtain long-term assistance in the future. One commented that “I’m still not sure what the long term relationship will be between the Implementation Centers and the National Resource Centers (NRCs). He/she went on to express concern for when the relationship with MCWIC is over, particularly since the state acknowledged that it doesn’t “have much of a relationship with the NRCs. (I’m) just not sure where do we go from
here?” Participants also felt that more NRC involvement and coordination between NRCs and ICs might be helpful.

Other areas where participants would have liked additional assistance dealt with facilitation of the project activities. One participant stated that more timely input and feedback from MCWIC would have been helpful as various tools were being developed. Participants also described feeling like they were “spinning their wheels” at various points in the process of developing tools such as the desk aids. They described MCWIC as “very hands-off and respectful of how we decided to do our process.” Although they stated that their process worked, they wondered if it might have been helpful for MCWIC to point out when they were repeating something that had already been discussed.

A final point raised was related to frustration with the states’ automated child welfare tracking system, eWiSACWIS. One of the participants expressed the belief that “there should be a system that more accurately keeps track of compliance at the local level” and that such a system would be best run by the courts. This participant went on to say that he/she felt that data issues resulted in tensions with the tribes who felt that cases were being missed, and that this was an area where the IC might have been helpful had the data issues been identified earlier on.

**Lessons Learned:**

Participants stated that the Advisory Board structure was very helpful. In the words of one participant “I would do this again and think about having a similar structure”. This person added that having a broad stakeholder base helped maintain support for the implementation and provide ongoing guidance and monitoring. The Advisory Board structure was seen as facilitating communication among several entities and in keeping implementation on track, ensuring that all pieces of the project (e.g., developing a qualified expert witness policy, the eWiSACWIS tab, the CQI process) were progressing and being coordinated.

Participants also discussed the importance of broad representation of the tribes. One remarked that he/she would have liked to have seen representation from all eleven tribes and was not sure what was done to invite participation or if more could have been done. A second clarified that participation was open to all tribes and that all were asked to designate someone to be on the Advisory Board. He/she added that although not all tribes took advantage of the opportunity, there was good communication among the tribal representatives who participated. Broad representation of tribes was also discussed in terms of its importance to the development of culturally appropriate procedures and tools, specifically in relation to Milwaukee county efforts to recruit Native American foster homes. This participant emphasized
that it is important to get input and also not to take it personally if other community members provide different input, adding that you “have to continue to make efforts to make it right.”

**Significant Challenges:**

Challenges were identified in relation to scheduling and attendance at meetings, hiring staff, accuracy of data, and the process of creating training and tools.

With respect to meetings, participants identified challenges related to being able to physically attend all meetings given conflicts, distances involved, and sequestration impacts on funding. Participants also identified challenges with the timing of meetings. One participant explained that Advisory Board meetings were held quarterly, but that these did not always align with subcommittee meetings. He/she felt that scheduling challenges made it difficult to maintain a working knowledge of all the issues and to remember what had been done, saying “there was a lot of wheel spinning with trying to review what was done and what was discussed.” He/she felt that it would have been easier if meetings were scheduled in a more concentrated timeframe.

Participants also described challenges related to hiring. One participant stated that they “struggled a little to hire people and get staff on board.” He/she went on to offer the thought that, although challenging, this may have been a normal consequence of creating a two-level structure to administer the project.

A third area discussed related to the challenges involved the creation and implementation of WICWA training and tools; despite these challenges, participants felt that they had been successfully overcome through the project. One participant characterized the development of training and project tools as “an endless process and stream of review and chipping away at some of the issues.” Another emphasized the difficulty involved in getting the tools fully implemented, stating that “getting those tools implemented throughout the counties is always a challenge. You try to get information out in a variety of ways, but you can’t ensure that all of the information is getting out to absolutely everyone who needs it.”

A final comment from one of the participants concerned the challenges associated with the data; “I would add that the data was, for me, an infuriating part of this. It was so frustrating that we felt at the local level we were doing everything right, but then to be hit with that you’re only meeting 15% [of the indicators; referring to eWiSACWIS data].” He/she reiterated feeling that data issues created needless animosity among project stakeholders. Another participant pointed out that identification of these issues was not simply a problem, saying that “The silver lining is that we identified these data issues and that was important,” acknowledging that it was an opportunity for correction and learning.
Approach to Other Systems Change Efforts:

Participants observed that the state had engaged in several systems change projects and was currently involved in rolling out the IV-E waiver and engaging in permanency roundtable discussions. They commented that this project was “fundamentally the same” but also went on to identify some differences, notably, that it was “more complex because it involved so many different stakeholders across many different levels and branches.” One participant identified a key difference in regards to how they were thinking about sustainability; “what struck me about this project compared to others is that we were really thoughtful about the sustainability of this project, considerably before the project end-date.” This person went on to say “we knew we wanted training to continue in long run so we put in deliberative effort to ensure that it would continue” and stated that he/she felt that they would apply this planning to other projects.

Discussion in this area also involved description of an organizational effectiveness process being used in the Bureau of Milwaukee with the help of Casey Family Foundation, utilizing compressed planning processes. Participants saw this process as working well on a smaller scale and more focused projects (e.g., at the county level). They were not sure, however, if it would have been possible to implement a project like WICWA within a compressed planning framework, particularly because the implementation project was on a large scale systemic change that “literally went from top to bottom of state, and included stakeholders from all over the state and different levels.” However, they appreciated the compressed timeframe of the organizational effectiveness approach, and wondered if there were pieces within the WICWA project that might have benefitted from compressed planning.

Final Additional Remarks:

Participants described the partnership with MCWIC as “seamless”. They described having a plan for the implementation project but that “… partnering with MCWIC gave us extra energy and gave us a broader vision. We did most of it, but having them at the table gave us a slightly different vision.” They also observed that in Wisconsin “it's really important for the state and tribes to have a good relationship. MCWIC helped to foster that positive relationship and communication between state and local governments and the tribes.”

C. Organizational and/or system outcomes

Organizational and system-level outcomes were assessed through three methods: 1) the evaluation of WICWA and related trainings that were conducted for various groups of participants; 2) CQI case file reviews of WICWA cases; and 3) interviews conducted with key stakeholders at approximately the mid-point of project implementation. Results obtained via each method follow.
Outcomes Assessed Through Training Evaluation:

Training was developed to increase the awareness, knowledge, and understanding of WICWA for those involved in the child welfare system. More specifically, training aimed to address the following short and long term outcomes:

1. Improve understanding of the tribal role in child welfare service delivery
2. Child welfare workers will have increased understanding of the history and purpose of ICWA/WICWA
3. County child welfare staff are trained on WICWA
4. Child welfare system stakeholders are trained on WICWA

Training participants included a broad range of staff involved in the delivery of child welfare services; this included front-line workers, supervisors, DCF administration and staff, Department of Corrections personnel, and legal partners. In total, 1,502 individuals participated in a WICWA-focused training; specific curricula varied to some extent depending on the needs of the audience. WICWA caseworker training was delivered to 821 front-line and direct supervisor staff in 51 training sessions held between May 25, 2011 and April 25, 2013. In addition, specialized WICWA trainings (e.g., condensed WICWA training, WICWA eWiSACWIS Tab Training) were delivered to 343 participants in 15 training sessions between February 13, 2012 and April 24, 2013. WICWA training was also presented to 98 DCF administrative and staff members in three trainings: February 17, 2012; March 2, 2012; December 13, 2012; and 18 Department of Corrections staff on July 9, 2012. WICWA legal training was delivered to 222 legal partners in 13 training sessions scheduled between July 13, 2012 and September 6, 2013.

MCWIC provided consultation to DCF on drafts of the curriculum, and conducted all of the training evaluation activities. MCWIC-funded (three on-site project staff, funded through IC resources) personnel worked on the curriculum and were the lead trainers for the WICWA training.

Training evaluation was organized according to Kirkpatrick’s (1994) four levels: 1) Reaction, 2) Learning, 3) Behavior, and 4) Results. Reaction-level data was collected to assess to what degree participants reacted favorably to the training experience. Learning was assessed using a pre-/post-test design to measure to what degree participants acquired the intended knowledge based on their participation in training. Behavior-level data was collected through a follow-up survey that assessed to what degree participants applied what they learned during training after returning to their jobs. Finally, Results were examined by analyzing administrative data to assess to what degree targeted outcome occurred as a result of training efforts. Results from
analyses of eWISACWIS administrative data are presented in another section of this report. A brief overview of the first three levels of training evaluation findings follows.

**Training Evaluation Results**

**Level 1: Trainee Reactions to Training**
Averages presented in the summary report were weighted to account for the number of participants at each training session. Summary reports were received from the Wisconsin training partnerships for 36 of the 51 WICWA caseworker trainings that were delivered. The total number of respondents in these summary reports was 550. The table below shows the ranges of average ratings for the WICWA training content, trainers, and outcomes. For example, the first vertical line (on the left) represents the range of averages for Content; the lowest question average was 4.30 and the highest question average was 4.71. Detailed results for each question can be found in the Appendix.

*Figure 5. Average Question Ratings of Training Content, Trainers, and Outcomes*

<table>
<thead>
<tr>
<th>Average Question Ratings</th>
<th>Content</th>
<th>Trainers</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>4.30</td>
<td>4.67</td>
<td>4.33</td>
</tr>
<tr>
<td></td>
<td>4.71</td>
<td>4.81</td>
<td>4.70</td>
</tr>
</tbody>
</table>

**Level 2: Trainee Knowledge Gains**
Pre- and post-test answers were input into SPSS and graded against the answer key to calculate each participant’s scores. Average scores and percentages were then calculated for both tests across training sessions. The average pre-test score was 25 out of 39 items, or 64%, and the average post-test score was 31 out of 39 items, or 79%. Due to scheduling conflicts, some individuals that intended to attend training were unable to do so, and other individuals participated in training sessions without completing the pre-test. The pre-test was completed by 727 participants and the post-test was completed by 750 participants. An independent sample t-test was conducted to compare test scores. There was a significant difference
between scores on the pre-test ($M = 25, SD = 3.98$) and post-test ($M = 31, SD = 4.12$), $t(1475) = 28.07$, $p = .00$, indicating significant knowledge gains as a result of participating in the WICWA caseworker training. The graph below shows the distribution and average scores for the pre- and post-test. The full report on the training evaluation includes information on the psychometric properties of the pre- and post-test.

*Figure 6. Comparison of the Average Pre- and Post-test Training Evaluation Scores*

![Average Pre- and Post-test Scores](image)

**Level 3: Trainee Application of Knowledge/Skill to Job Performance (Transfer of Learning)**

*WICWA post-training and 3-month transfer surveys*

To assess participants’ perceptions of the extent to which they utilized what they’d learned in training in their work with families, they completed follow-up surveys shortly after and 3-months post-training. Because we had not originally anticipated a need for a follow-up survey, these surveys were not implemented until April 2012 (nearly 1 year after the training sessions started). This is why the number of respondents is lower than the total number of training participants. For the immediate post-training transfer survey, the response rate was 66%, and it declined somewhat to 49% for the 3-month post-training transfer survey. The graphs below show the overall percentages of responses to each survey. Detailed results for each question can be found in the full training evaluation report.

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The majority of the survey items were rated “Strongly Agree” or “Agree”. This indicates that overall participants experienced very few barriers to learning transfer. However, when examining individual items on the full post-training transfer survey, the 5 lowest rated items indicated areas where potential improvements could be made to pre-training motivation and preparation (i.e., promoting WICWA training, encouraging participation, increased support from supervisor). Furthermore, when examining differences between the two surveys, item averages were lower (many of them were significantly lower). This may have been due to an inability to apply training, as 83% of respondents reported having 0-1 WICWA case within the last 3 months since training (12% reported having 2-3 WICWA cases and 4% reported more than 4 WICWA cases in that same time period).

**Specialized training follow-up survey**

This survey was also implemented in April 2012. However, delivery of the specialized training sessions began later, so the majority of participants were able to be included in the survey. The response rate for this survey was nearly 98%. The graph below shows the overall percent of responses. Detailed results for each question can be found in the full training evaluation report.
The majority of the survey items were rated “Strongly Agree” or “Agree,” indicating favorable reactions and intentions to use the information gained during training after returning to work. The internal consistency of this 5-item survey was comparable to the original measure from which it was adapted, $\alpha = .86$.

Implications of Training Evaluation Findings

Level 1: Trainee Reactions to Training
The majority of participants who attended the WICWA caseworker training sessions indicated favorable reactions to the training. Participants viewed the WICWA caseworker training to be a valuable experience and gave positive feedback regarding the instructors, training topic, materials, and presentation.

Level 2: Trainee Knowledge Gains
There were significant gains in participants’ understanding of WICWA knowledge as a result of attending WICWA caseworker training. Participants knew significantly more information about WICWA after participating in training than they did before attending training; meaning training was a successful intervention for increasing awareness and understanding of WICWA. Additionally, assessment of the test itself revealed the measure to be psychometrically sound. However, at the end of the project the WICWA caseworker training was being merged with an
existing training on Case Practice with American Indian Tribes. Unfortunately, this curriculum was not finalized or made available prior to the end of the project. Therefore, we were not able to align the test to the new curriculum (i.e., creating new test items to cover additional material or dropping items that are no longer a part of training).

**Level 3: Trainee Application of Knowledge/Skill to Job Performance (Transfer of Learning)**

Participants reported very few barriers to training transfer. Therefore, it is likely that on-the-job behavior will change as a result of WICWA caseworker training. However, the extent of training transfer may be limited due to the infrequency of WICWA cases. Because WICWA-applicable cases are less frequently a part of worker’s caseloads, workers have less exposure and familiarity with daily practice and application of WICWA practice. Most participants indicated limited ability to apply training knowledge within 3 months after attending a WICWA caseworker training session. There may be opportunities to support pre-training motivation and preparation, but a more practical recommendation is to support the work with desk references and conduct refresher or just-in-time trainings. Assessment of these survey measures replicated those established by the original surveys and confirmed their psychometric values.

**Overall Implications**

Training was developed to increase the awareness, knowledge, and understanding of WICWA for those working in the child welfare system. According to the first three levels of the WICWA caseworker training evaluation, the training was essentially successful at each level. Based upon the results of the first three levels of the training evaluation, it is likely that meaningful improvement in case work practice should be observed due to the implementation of WICWA caseworker training. Relevance to specific outcomes targeted through the “Best Outcomes for Indian Children” implementation project is as follows:

*Improve understanding of the tribal role in child welfare service delivery*

The WICWA caseworker training outlined the legal requirements of WICWA, but also stressed the cultural perspective and meaning behind the law to better influence caseworker practice. This was reflected in the training’s learning objectives and subsequent test items, allowing for direct measurement. Understanding of the tribes’ role in child welfare service delivery was enhanced through the development and delivery of the WICWA caseworker training as evidenced by the pre- and post-test measure of worker’s knowledge.

*Child welfare workers will have increased understanding of the history and purpose of ICWA/WICWA*

Part of addressing the cultural perspective and meaning behind WICWA was a review of the many acts and laws directed at American Indians throughout our nation’s history. One module of the training was solely focused on this subject; however, the history and the effect of this
interaction over time were woven throughout training. This was one of the training’s learning objectives and was assessed through the pre- and post-test. According to these data, understanding of the history and purpose of ICWA/WICWA was enhanced through the development and delivery of the WICWA caseworker training.

County child welfare staff are trained on WICWA
Training participants included a broad range of staff involved in the delivery of child welfare services. Moreover, specific trainings were developed to address the needs of these staff (e.g., WICWA eWiSACWIS tab training). The evaluations of these training efforts reveal that training was well received and successful at increasing participant’s knowledge. In total, 821 front-line and direct supervisor staff participated in the WICWA caseworker training. Additionally, 313 of these staff participated in a specialized WICWA training, such as eWiSACWIS tab training.

Child welfare system stakeholders are trained on WICWA
In addition to front-line workers and supervisors, WICWA-focused training was delivered to other key stakeholder groups, including DCF’s administrative and staff members, Department of Corrections staff, legal partners, and tribal workers. The evaluation of these training efforts reveals favorable reaction to the training and intentions to use the information learned in training on the job.

- Outcomes Assessed Through Evaluation of WICWA Case File Documentation:

MCWIC worked with the Wisconsin Department of Children and Families’ (DCF) Continuous Quality Improvement (CQI) team to develop and implement a WICWA case file review protocol. Initially a WICWA compliance tool was developed to review practice changes specific to WICWA’s statutory compliance requirements. Later, a more comprehensive WICWA review protocol was developed to not only assess statutory compliance, but also a variety of other case practice indicators. The newly developed WICWA CQI protocol mirrors the ongoing protocol regularly used by the CQI team for non-WICWA cases. Specifically, these reviews aimed to address the following short and long term outcomes:

1) Modify child welfare case practice with Indian children
2) Increase formal notice to tribes
3) Increase placement according to placements preferences
4) Increase completion of ICWA compliance documentation

Several of these outcomes were also assessed through MCWIC’s analyses of DCF administrative data (see next section of report); however, one of the limitations of using administrative data for outcome evaluation is that these datasets may contain inaccuracies due to caseworker data entry errors or omissions. The CQI review process supplements our review of eWiSACWIS
administrative data by providing additional information obtained through a review of the physical case file and interviews with key individuals related to the case. This process allows for a hands-on and in-depth view of the practice and quality of work behind the data.

**Participants**
During the course of the IP, 85 CQI reviews on WICWA cases were conducted by the DCF CQI team, between July 2010 and October 2013. One hundred and thirty nine individuals participated in the CQI reviews during that time. This included 50 case managers and/or supervisors, 32 IA workers, 7 focus children, 10 parents, 6 substitute caregivers, 1 GAL, 10 tribal case managers, and 7 cases included other key persons involved with the child or family (e.g., teacher, probation officer, service provider). The prior, compliance-focused, CQI review tool was used for reviews done in 2010 through 2012. In 2010, 13 reviews were completed in three counties; in 2011, nine reviews were completed four counties in 2011; and in 2012, 19 reviews were completed in four counties. The newly developed WICWA CQI review protocol began to be used in 2013 and 44 case file reviews were completed in 14 counties that year.

**CQI tool development**
The CQI team began implementing WICWA reviews in July of 2010. At that time, they were using a compliance tool that focused on the statutory requirements associated with WICWA. This tool specifically focused on the compliance aspects of the law and did not include other practice indicators connected to the child or family. In 2012, at the request of the CQI team, MCWIC partnered with them and to develop an enhanced WICWA CQI protocol.

MCWIC first contacted several T/TA Network entities (NRCs) to obtain information about current national practices and tools in use in other states to review ICWA cases. Unfortunately, there was a lack of information available through the Network about current best practices, and so MCWIC conducted an independent search for ICWA CQI practices and tools. We contacted the ICWA specialists and quality improvement staff in all states, requesting information on their ICWA quality assurance or performance assessment tools. Thirty-eight states responded to this inquiry. Some states indicated that they did not currently use any form of an ICWA review tool; however, for states that do apply some form of a quality measure or review process, this information was used to help develop Wisconsin’s WICWA review protocol.

The Wisconsin DCF CQI team was interested in developing a WICWA case review tool that was more similar to their regular ongoing protocol. Using the information gained from MCWIC’s research, along with the ongoing protocol currently being used by the CQI team, we were able to jointly develop a full WICWA review protocol that assesses a variety of case practice indicators along with compliance questions specific to WICWA cases.
MCWIC and the CQI team also discussed the use of a variety of methodologies to complete these reviews more efficiently. These efforts resulted in 2 review formats: 1) WICWA full review and 2) WICWA basic. The full reviews mirror the ongoing protocol regularly used by the CQI team and include eWiSACWIS documentation review, case file review, interviews, and assess a broader range of practice indicators. The WICWA basic reviews are an abridged version of the WICWA full reviews and may include eWiSACWIS documentation review, case file review, and interviews. The WICWA basic reviews are completed on-site with the full reviews and also through desk reviews. Desk reviews include a CQI worker reviewing the eWiSACWIS data and then following up with the county worker to gain additional information about missing documentation. The WICWA basic reviews do not assess the broader practice indicators, but more specifically focus on compliance with WICWA requirements. The new review protocol was first implemented in 2013 and continues to be used by DCF to review WICWA cases.

Results
The result of MCWIC’s work with Wisconsin’s CQI team was a more comprehensive and more efficient CQI process for WICWA-eligible families. Full WICWA reviews provide more complete feedback to the counties and focus on the practice strengths and opportunities observed during the review process. Additionally, the WICWA basic reviews allowed for the CQI team to more efficiently review WICWA requirements and address documentation performance issues. This improvement in efficiency was evidenced by the volume of reviews; the CQI team was able to complete more reviews in 2013 than they had in the previous three years combined. In 2013, 44 reviews were completed in 14 counties. In the years 2010 through 2012, only 41 reviews were completed in 11 counties.

Because the number of reviews completed in years 2010-2012 was so small, we are unable to draw conclusions about changes in performance over time or link these data to the administrative data report. However, looking at all the data collected from 2010 to 2013, it does appear that most of the WICWA-specific documentation is being completed. The item “Screen for Child’s Status as Indian” was documented 70% of the time, “Child’s Biological and Family History” was completed 63% of the time, “Request for Confirmation of Child’s Indian Status” was done in 62% of the cases, documentation from the tribe(s) confirming the child’s eligibility or membership was included in 80% of the cases, “Notice of Involuntary Child Custody Proceeding Involving an Indian Child” was included in 51% of the cases (this is sent by a legal party in some counties; however, best practice is to include documentation in the case file), and placement preference considerations (or good cause documentation for why placement preferences could not be followed) were documented for 75% of the cases.

MCWIC was able to integrate the WICWA training attendance records with these CQI data, in order to examine the potential impact of training on case managers’ performance. For those
individuals that participated in a WICWA training prior to having a case reviewed through the CQI process, it appears that their performance was enhanced. In other words, individuals who participated in a WICWA training performed better (as evidenced in CQI case reviews), on average, than those individuals who had not participated in a WICWA training. Unfortunately, only one-third of the individuals included in these reviews (28 out of 85) had attended a WICWA training. Due to the small sample size this increase in performance was not statistically significant, but it is meaningful to note the positive trend observed between training and performance.

Implications of CQI Case Review Findings

Modify child welfare case practice with Indian children
The process of CQI case reviews is in itself a method for modifying and improving practice, such that practice is examined and constructive feedback is given regarding the observed performance. During the review process, practice strengths and opportunities are reviewed. At the end of the review, these strengths and opportunities are discussed with the county. Individual case managers participating in the reviews receive personalized feedback about their case performance. Additionally, patterns in practice or barriers to compliance are summarized at the county level. This is valuable feedback for the counties participating in reviews and helps to reinforce standard expectations for practice across the state.

Increase formal notice to tribes
Documentation of the “Notice of Involuntary Child Custody Proceeding Involving an Indian Child” was only included in 41% of the cases reviewed between 2010 and 2012. This increased to 56% in 2013, which was not a statistically significant increase, but is trending in a positive direction. Additionally, the new CQI review protocol looks at additional important requirements regarding notice, specifically those requirements that notice be sent out 10 days before a hearing and sent by registered mail. In 2013, 48% of the cases reviewed included documentation that notice had been sent out 10 days before a hearing. Only 22% of the cases reviewed in 2013 included documentation that notice had been sent by registered mail. While these percentages are low, it appeared that biggest barrier surrounding these requirements was the division of responsibility, which varied by county. In some counties it is the responsibility of the case worker to send out notice, in other counties this is the responsibility of a legal party. Best practice is that the case worker obtains copies of this documentation to verify compliance with these requirements.

Increase placement according to placement preferences
The former CQI compliance tool examined whether or not placement preference considerations were made by reviewing documentation notes in the out of home safety plan. For these reviews, placement preference considerations were documented for 55% of the cases between
2010 and 2012. The new WICWA review protocol examines whether or not placement preferences have been followed. However, it is unclear if this measure is specific to documentation (vs. practice) like it was in the old review tool. If placement preferences were not followed, then the reviewer should look for good cause documentation. However, there appears to be inconsistency in the entry of these data. It does appear that the percentage of cases following the order of placement preferences increased to 86% in 2013. This is a significant increase from previous years. However, it is unclear from these data whether the same construct is being measured.

*Increase completion of ICWA compliance documentation*

Because these reviews were not completed prior to the implementation of WICWA there is no preliminary performance measures to which we can compare these data. Also, because there were so few reviews completed during the years 2010-2012, there is insufficient data for us to draw conclusions about changes in case performance over time. However, it does appear that the majority of individual case files reviewed during the project period were in compliance with WICWA documentation requirements.

**Outcomes Assessed Through Stakeholder Interviews**

Interviews were conducted to gain a more complete understanding of the projects’ successes and challenges thus far. More specifically, information was collected to evaluate the progress made towards three long-term outcomes associated with the Wisconsin implementation project: (a) strengthen the partnership between DCF and Wisconsin’s 11 federally recognized tribes; (b) improve understanding of the tribal role in child welfare service delivery; (c) strengthen the working relationships between state, county, tribal child welfare agencies, and state and tribal courts.

**Participants**

Participants included members of the WICWA Advisory Board, WICWA trainers, and WICWA subcommittee members. In total, 27 individuals participated in the interviews, involving 15 non-tribal and 12 tribal members. Interviews were conducted November 7, 2011 through March 7, 2012, approximately half-way through the implementation project. This allowed participants enough time to review past actions, while still being able to use these data to strategize future project activities.

**Interview Protocol**

Prior to conducting interviews, MCWIC obtained express written approval from the legal counsel of each tribe in Wisconsin from which participants were selected. Each tribe’s legal counsel reviewed the study protocol and indicated that Tribal Institutional Review Board (IRB)
submission was not required. Additionally, the University of Nebraska’s IRB approval was obtained.

To complete the interviews, the MCWIC Tribal Outreach consultant and Project Coordinator conducted interviews in-person and over the phone. All participants were assured that their responses would be kept confidential, allowing them to give candid and sincere responses. Additionally, these interviews were semi-structured to facilitate open discussion about whatever topics the respondents found to be most important. However, all participants were asked a standardized set of key questions.

**Analysis of Interview Data**

Responses were noted during the interviews. The notes were then transcribed to electronic documents and a separate reviewer conducted the qualitative data analysis using MAXQDA software. All interview responses were read over and major content themes were identified. For large themes, subthemes were created for clarity. Once all themes were identified, individuals’ responses were coded accordingly. Statements were unitized by the individual respondent, such that frequency ratings indicate the number of individuals whose responses are associated with that theme. Not all statements were coded (i.e., statements that did not fit any theme), and a small number of statements were coded as representing more than one theme.

**Results of Stakeholder Interviews**

From the interview data, nine major content themes were identified: Relationships, Outcomes, Training, Attitudes, Law, Awareness, Project, Sustainability, and Finances. For added clarity, subthemes were identified for five of the major content themes: Relationships (positive comments, issues to be discussed), Outcomes (Identifications, Notifications, Placements, QEW, Tools/eWiSACWIS, Active Efforts, Issues to be discussed), Training (positive comments, issues to be discussed), Attitudes (positive/changing attitudes, negative attitudes), and Law (positive comments, clarification provided, issues to be discussed). Awareness, Project, Sustainability, and Finances have no subthemes. Those most relevant to project system outcomes were as follows.

**Relationships**

The process of implementing WICWA has improved relationships between DCF, tribes, and counties through focused and sustained collaboration. However, after WICWA became law, these efforts were perceived to have dropped off and a resurgence of effort in this regard was needed to get back to the relationship and collaboration seen previously.
Outcomes
WICWA was seen as having affected several outcomes for Indian children, specifically: identifications, notifications, placements, qualified expert witnesses (QEW), tools/eWiSACWIS, and active efforts. Overall, some encouraging outcomes have been observed, but further efforts are needed to gain more positive and consistent outcomes. As workers familiarize themselves with WICWA tools/eWiSACWIS screens, it appears that documentation of WICWA compliance is becoming easier. It appears more Indian children are being identified, tribes are receiving increased notification, and greater efforts to follow placement preferences are being observed; however, discrepancies are being observed between counties and more resources are needed to keep children in Native homes. Additionally, QEW and active efforts must be applied consistently.

Attitudes
Discussion regarding attitudes (e.g., understanding, appreciation, value) about WICWA, the Department, and tribes indicate changing attitudes, with greater enthusiasm for compliance and understanding of WICWA. However, there is still some defiance and lack of understanding that needs to be remedied.

Law
The praises of WICWA as law were apparent throughout the interviews, as it brings additional clarity to ICWA and displays a model for child welfare law. However, after its enactment, several issues have been identified with existing statutes that do not acknowledge WICWA and additional legal clarifications that need to be made to WICWA itself.

Awareness
Overall, stakeholders are observing an increased awareness of WICWA.

Overall Implications
Overall, these interview data revealed similar comments amongst stakeholders, displaying agreement about what successes have been observed and identifying further improvements that need to be made. Three areas in particular were highlighted for attention during the second half of the implementation project:

• Strengthen the partnership between DCF and Wisconsin’s eleven federally recognized tribes. Throughout the interviews, positive comments were made regarding the collaboration and unprecedented relationship built during the WICWA codification process. However, it appears that collaborative efforts have pulled back after the initial implementation. Recognizing that some time was needed before the situation could be adequately evaluated and addressed, these interviews suggest the need for greater
administrative support, further training of front-line and legal personnel, and a robust sustainability plan.

- Improve understanding of the tribal role in child welfare service delivery. Respondents stated increased identification of Indian children, more notifications being sent to tribes, and greater efforts from workers to consult tribes for placement. However, further efforts are needed to generate more positive and consistent outcomes, including state-wide training to increase understanding of (and the reasoning behind) WICWA’s unique requirements, like active efforts and QEWs.

- Strengthen the working relationships between state, county, and tribal child welfare agencies, and state and tribal courts. Participants mentioned that they now have more contacts, observe more frequent communications between tribes and workers, and see quicker responses. With continued training and understanding of the tribal role in child welfare, it’s likely that more connections will be made and that working relationships will continue to improve.

D. Child and Family-Level Outcomes

Data extracts from the Wisconsin DCF administrative data system, eWiSACWIS, were provided to MCWIC every six months, for analysis of child and family level outcomes targeted by the implementation project. What follows is an excerpt from the final evaluation report of these analyses, which is included the Appendix.

The following tables were developed from eWiSACWIS data on children in out of home placement for calendar years 2009, 2010, 2011, and 2012, and January through June of 2013. They are intended to illustrate changes in ICWA compliance over time. Data are presented by 6 month period. A child is included in a 6 month period if his or her most recent placement episode ended within that time frame\(^3\). Numbers and percentages in this report are based only on the most recent placement episode\(^4\) in order to provide an unduplicated count of children. Information is shown in the tables for “tribal count”, “ICWA child”, “ICWA notice”, “tribal provider” and “relative placement.”

Variables shown in the tables are defined as follows. Tribal count includes all children identified in eWiSACWIS as American Indian based on race/ethnicity, tribal membership, or placement

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\(^3\) The end of a placement episode is identified by a value of “yes” on the eWiSACWIS discharge flag. Children whose most recent placement episode is still open are not included in the tables.

\(^4\) A small percentage of American Indian children (8.0%) had multiple episodes of care ending within the study period. For these children only the most recent episode of out of home care is represented in the tables. Where earlier episodes were dropped, comparisons showed no difference in identification as an ICWA child from earlier to later episodes of care.
with a tribal provider. ICWA child counts include all children who are members of a tribe or eligible for membership. ICWA notice is the number of children for whom tribal representatives were notified and notification was documented in eWiSACWIS. Tribal provider is a count of children placed with licensed tribal providers, and relative placement includes children with placement types in eWiSACWIS of “kinship care-court ordered”, “relative-unlicensed”, “foster family home-relative”, “foster family home-relative-court ordered”, and “treatment foster home-relative.” All tables in this report related to identification of children subject to ICWA, and compliance with ICWA notification requirements and placement preferences, are based only on children who are first identified as American Indian in the tribal count variable.\footnote{Concerns have been identified regarding the appropriate documentation of ICWA children and provision of notice in eWiSACWIS. After consultation with eWiSACWIS staff, it was determined that the approach taken in these reports is adequate to address concerns regarding proper identification of children who are potentially subject to ICWA. The issue of undercounting of notifications to tribal representatives is being addressed by eWiSACWIS but could not be resolved prior to this reporting period. Thus, tables should be viewed as showing trends over time and not as an accurate representation of the actual number of notifications made.}

Figure 9 below summarizes ICWA compliance information statewide for 2009 through June 2013. Figures 10 through 19 provide additional detail for the counts presented in Figure 9. Trends in tribal count, children identified who are subject to ICWA, notifications to the tribes, and placement\footnote{Placement information reflects the most recent placement only.} in accord with ICWA preferred options are shown as both numbers and percentages.

**STATEWIDE ANALYSIS:**

*Figure 9. Summary of Wisconsin’s ICWA Compliance over a Four-Year Period.*
As shown in Figure 9:

- On average, numbers of children identified as American Indian in the tribal count have risen slightly since the ICWA tab was instituted in the second half of 2010.
- Numbers of children identified as subject to ICWA began to increase in the last half of 2010 and children subject to ICWA have continued to be identified at higher levels in subsequent time periods.
- Since the latter half of 2010 there have been small increases on average in numbers of notices to tribal representatives documented in eWiSACWIS, placements with tribal providers, and placements with relatives.
As shown in Figure 10, the number of children in care identified as American Indian in the tribal count has risen slightly since the ICWA tab was instituted in the second half of 2010.

Figure 11 shows that the percentage of all children in out-of-home care represented by Indian children also been slightly higher on average since the introduction of the ICWA tab; increasing from an average of 5.9% to an average of 6.8%.
Figure 12. Number of Children Identified as Meeting Federal ICWA Guidelines.

Figure 13. Percentage of Children Identified as Meeting Federal ICWA Guidelines.

- Figure 12 shows that the number of American Indian children identified as subject to ICWA increased markedly beginning in the latter half of 2010. Indian children have continued to be identified as subject to ICWA at higher levels in subsequent time periods.
- Percentages of American Indian children identified as subject to ICWA also increased markedly after the ICWA tab was implemented. Percentages decreased in the first half of 2013; however, at this time it is unclear whether this represents a trend toward decreasing identification of ICWA children, a random fluctuation in the data, or an

7 Of those first identified in the tribal count variable as American Indian.
artifact of the timing of when data were pulled from eWiSACWIS for this report. Despite this, percentages remain high compared to percentages observed prior to introduction of the ICWA tab.

Figure 14. Number of Notifications.

![Number of Notifications to Tribal Representatives](image1)

Figure 15. Percentage of Notifications.

![Percentage of ICWA Children for Whom Tribal Representatives Were Notified](image2)

- As shown in Figure 14 the number of notifications to tribal representatives began to increase in the latter half of 2010. Numbers have fluctuated somewhat since that time but have remained higher than numbers observed prior to the introduction of the ICWA tab.
- Figure 15 shows that the percentage of ICWA children for whom tribal representatives were notified has also risen since the ICWA tab was implemented.

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8 Data for January through June 2013 were pulled on July 23rd, making this the only time period in which at least a full month had not gone by between the end of the 6 month time period and the time the data were extracted from the system. It is possible that workers are still updating information on these children in eWiSACWIS and that a report generated at a later time period might show differences in numbers of ICWA children.
• It should be noted that these figures reflect documentation of notice on the ICWA tab in eWiSACWIS. Notifications that are not generated using eWiSACWIS or entered by the worker (if notification is made by the court or through some other means) will not be captured.

*Figure 16. Number of ICWA Children Placed with a Licensed Tribal Provider.*

![Figure 16](image)

*Figure 17. Percentage of ICWA Children Placed with a Licensed Tribal Provider.*

![Figure 17](image)

• As shown in Figure 16 the number of IWCA children placed with licensed tribal providers is higher on average since the ICWA tab was put into place, but numbers have fluctuated by time period.

• Figure 17 shows that when considered as a percentage of ICWA children, these placements have not shown a pattern of increases over time.

• ICWA legislation specifies placement with relatives as the most preferred placement option, and placements with licensed tribal providers should be considered in concert
with information about relative placement. In some cases licensed tribal providers are also relatives and these placements are considered as placement with relatives in this report\(^9\). Moreover, it is reasonable to expect that placements with tribally approved providers will vary with the availability of tribally approved placement options.

*Figure 18. Number of ICWA Children Placed with Relatives.*

![Bar chart showing the number of children subject to ICWA in placement with a relative from January 2009 to June 2013.]

*Figure 19. Percentage of ICWA Children Placed with Relatives.*

![Line chart showing the percentage of ICWA children placed with a relative from January 2009 to June 2013.]

- Figure 18 shows an overall increase in number of ICWA children placed with relatives beginning in the second half of 2010 after the ICWA tab was implemented.

\(^9\) 19 children statewide were indicated as both placed with tribal providers and as placed with relatives under “placement setting” eWiSACWIS. These children were counted as relative placements for purposes of this report in line with the order of ICWA placement preferences that specifies placement with family as the most preferred option.
However, like percentages for placements with a licensed tribal provider, percentages of ICWA children placed with relatives have been variable over time and have not shown clear increases.

As part of the WICWA project a change was made to eWiSACWIS in the latter part of 2010 to generate an ICWA tab to be completed for any child believed to be potentially subject to ICWA requirements. Prior to that time the tab did not exist; however, workers are trained that it is best practice to go back to complete this information for all American Indian children in out of home care. Figure 20 shows the number of ICWA records generated/completed from January 2009 through June 2013 by 6 month intervals. As shown in Figure 20, there has been a steady increase in the number of ICWA records completed since the inception of the tab.

Figure 20. Number of ICWA Records Created in eWiSACWIS.

Additional analyses for the counties with largest native populations and by county are included in the separate evaluation report (see Attachments).
V. Sustainability

Describe what is currently in place to support sustainability of the changes that have been achieved.

Starting in fall 2012, the Wisconsin implementation project Advisory Board began discussions of how to sustain project initiatives. The Advisory Board created a “Sustainability Planning Document” which covered four major areas of the IP: Policy/Standards; Curriculum/Training/Staffing; Technical Assistance; and the Advisory Board itself. Within each of these areas, long and short-term outcomes were identified, along with activities, products, and action steps to meet the outcomes.

Under the Policy/Standards area, the project was able to build sustainability of WICWA throughout various legal areas. For example, Access/IA standards were reviewed, including the addition of 15 new references were added to incorporate the new WICWA. The changes are reflected in the Desk Aid, and WICWA statutes were referenced in Access/IA. A “Qualified Expert Witness” policy draft was written and completed in July 2013, and 21 Circuit Court forms regarding WICWA were revised and made available through DCF’s website. MCWIC partnered with the Continuous Quality Improvement Unit of DCF to create a WICWA tool to be used for CCI/CQI reviews.

In terms of Curriculum/Training/Staffing, two WICWA training curricula were created to provide new workers with information on how to implement WICWA. This training curriculum will continue to use the training evaluation system used throughout the IP to measure knowledge gained from the training, along with the transfer of learning from training to practice over time. DCF has asked the Bureau of Regional Offices (BRO) to consider creating a WICWA training curriculum specifically for supervisors. The project staff also worked with Wisconsin’s Court Improvement Program to create a legal curriculum and tools for attorneys and judges to use in WICWA cases. The Wisconsin State Bar co-sponsors the Legal Curriculum training. DCF has also committed to continue working with the Regional Office staff and the ICW Specialist to answer and update frequently asked questions about WICWA on the Department’s website.

Within Technical Assistance, the IP worked with the BRO staff to increase their capacity to respond to WICWA-related questions from workers in the counties. BRO staff were mentored by and regularly met with the IP staff, and also participated in the WICWA trainings and CQI reviews. For the future, the BRO staff will assume the role of technical assistance providers to the field regarding WICWA implementation.

The implementation project also created a WICWA Desk Aid and the WICWA eWiSACWIS Desk Aid with the help of the Advisory Board, IP staff, and Wisconsin’s ICWA Specialist. The WICWA
Desk Aids are available on the DCF website, and the ICW Specialist will continue to update the Desk Aids as needed. DCF is working to also have the Desk Aids posted on the Professional Development website.

Wisconsin Judicare, Inc. will play an integral role in project sustainability. Judicare is a non-profit law firm dedicated to providing equal access to justice for northern Wisconsin residents. The State Bar of Wisconsin organized Wisconsin Judicare in 1966 as a program funded by the Office of Economic Opportunity to provide legal services to low-income persons. Wisconsin Judicare, Inc., is the civil legal service provider for Wisconsin’s northern 33 counties and eleven federally recognized Indian tribes. From its inception, Wisconsin Judicare has emphasized the utilization of the private bar to represent low-income persons in conjunction with on-staff attorneys. Judicare will support sustainability in two key areas.

First, they will house and maintain the statewide Workers’ Resource Manual to provide information on culturally-appropriate tribal services regarding the eleven sovereign tribes in Wisconsin and a few outlying tribes in Minnesota and Michigan. Judicare has committed to house and maintain the manual on their website, as well as to help disseminate it through DCF memos, regional director meetings, trainings, and possibly on flash drives to share with individual county agencies. Second, Judicare agreed to be the lead agency for the development and maintenance of the Legal Practitioner’s Manual, which provides a guide to WICWA-specific practice for lawyers, judges and guardians ad litem, and is available on their website.

The Advisory Board was established early on in the implementation project, and included a variety of stakeholders, including DCF staff, tribal liaisons (i.e., tribal attorneys, tribal social service directors, and tribal case workers), legal representatives (i.e., attorneys, judges, and the state’s public defender’s office), and regional office staff. The AB committed to meeting quarterly to review and make recommendations on WICWA implementation standards and policies to DCF, as well as to recommend adjustments to the Training and Technical Assistance components, as needed. At project completion, the AB dissolved, but members are all active on different committees where they can continue to implement WICWA.

Describe the next steps planned by this jurisdiction to sustain the project goals, activities, accomplishments

Given the extensive work done by the IP to build sustainability in the final year of the project, most of what is needed to sustain and continue to implement WICWA is in place—both within the Department of Children and Families and the Wisconsin tribes. WICWA trainings will continue to take place (under the direction of the Professional Development System of DCF), the CQI team will continue to conduct case file reviews of WICWA cases, and many members of
the advisory board are continuing to serve on different child welfare and Indian child welfare committees to discuss and continue to implement WICWA.

Describe how CB, Regional Offices and T/TA network providers might support the jurisdiction’s efforts

During the Implementation Capacity Measure focus group at the end of the project, participants noted a number of needs that they hoped would be available through the Training and Technical Assistance Network. For example, when Wisconsin decided to apply for MCWIC support to implement WICWA, they felt that there were limited resources available through the Network on how to do this. With few available resources, the jurisdiction had to do much of the work on their own, but stakeholders now hope that the resources, manuals, and guides they’ve created will be able to be shared broadly with other jurisdictions.

Participants also commented that they would like assistance for a longer time period, and expressed uncertainty about how to obtain long-term assistance in the future. One commented that “I’m still not sure what the long term relationship will be between the Implementation Centers and the National Resource Centers (NRCs).” He/she went on to express concern for when the relationship with MCWIC is over, particularly since the state acknowledged that it doesn’t “have much of a relationship with the NRCs. (I’m) just not sure where do we go from here?” Participants also felt that more NRC involvement and coordination between NRCs and ICs might be helpful. The ACF Region V staff will be integral to facilitate further discussion with the state as needs emerge.

Facilitators to sustainability

Facilitators to sustainability include a well-thought out Sustainability Planning Document that was reviewed at each Advisory Board meeting to determine progress and keep the project goals at the forefront. DCF leadership and middle managers have buy-in to the goals of the project, so that as funding and technical assistance from MCWIC cease, many of the goals and activities of the IP will continue to be addressed through the mechanisms put in place through the sustainability planning document. For example, the state’s Intake (“Access”), Initial Assessment, and Ongoing services standards were completely revised during the time period concurrent with the IP, which facilitated the integration of practices specific to WICWA into state policy standards. In addition, the DCF Tribal Liaison (Porter) continues to be a strong advocate for the goals of the project.

Challenges to sustainability

Given the support of the WICWA implementation project and the number of goal and activities achieved through it, there are many facilitators to sustainability. As with many states, however,
Wisconsin’s Department of Children and Families has a number of current projects (i.e., Alternative Response, IV-E Waiver funds) that are resource heavy in terms of staff, attention, and time. Many staff involved with the WICWA project have already been pulled into these different projects, so there is a challenge to maintain WICWA as a focus with other projects and Department initiatives.

This challenge would be compounded when and if DCF experiences a change in administration. Child welfare departments are susceptible to leadership changes, and with that, may come changes in projects that take priority. Even outside of leadership changes, there is often turnover and changes in child welfare staff which will require the Department to continue to focus on the training aspects of WICWA to ensure that the goals of the project are continued with new workers.

Wisconsin also needs to prioritize the hiring of a new ICWA Specialist. The current ICWA Specialist has transitioned into a new position as the state’s Tribal Liaison, and has been juggling both positions. While the two roles are complementary, it is imperative that the state advertises and hires a new ICWA Specialist who can put sole focus into the role, and thus also, help to ensure sustainability of WICWA.

In addition, through the sustainability planning work of the IP, intensive efforts were made to integrate the WICWA training curriculum into the existing “Case Practice with American Indian Tribes” module of the state’s Core training offered by the Professional Development System, prior to the close of the project, to ensure ongoing sustainability of the training. However, as of the close of the project, this combined curriculum had not been finalized or made available to MCWIC for review and to ensure that the training knowledge test aligned with the new curriculum. So while the evaluation of the WICWA caseworker training illustrates a positive path for the training’s impacts, it’s unclear if this impact will continue.

Lessons learned about how to deal with challenges in sustainability

The primary lesson learned was the importance of beginning discussion and planning for sustainability early in the implementation process. MCWIC staff initiated a process for ongoing discussion and development of a formal, written sustainability plan more than a year prior to the end of the project. The original draft plan was based upon the key implementation elements (e.g., training, facilitative administration supports) and posited questions for leadership to contemplate and discuss. Over a period of many months, MCWIC and WI agency leadership, and the project advisory board engaged in focused discussion and planning to ensure that anticipated potential barriers to sustainability were considered and addressed. This process was highly successful in attracting stakeholder attention to issues and resulted in
creative solutions to potential problems. By the time the project came to a close, there was consensus that most of the major sustainability barriers had been addressed.
VI. Conclusions and Recommendations

Describe the overall impact of the IP on the child welfare organization, and system, as well as children and families (if applicable) in the jurisdiction

Codification of WICWA, and its effective implementation, grew out of recognition that in Wisconsin, the purposes of the federal Indian Child Welfare Act were not being achieved. The premise of WICWA’s design is the need to protect Indian children in a new way. The history leading to its passage reflects the political position of tribal sovereigns in Wisconsin. Systemic integration of WICWA is dependent on the structure of the state child welfare system, and requires that practitioners within that structure understand and appreciate not only the text, but also the spirit and intent of the law. The intent and spirit of WICWA was determined by a community of stakeholders, including social workers from counties and tribes, private, public and tribal attorneys, judicial officers, and tribal, public and private service providers. The three branches of state government also participated in determining the spirit and intent of WICWA: the legislature, as it unanimously passed the WICWA; the judicial branch, by holding judicial WICWA training seminars, creating WICWA-specific court documents, and ensuring the provision of the act’s procedural protections; and the executive branch, the Department of Children and Families, by supporting the achievement of the goals identified by the community of stakeholders.

The state and its partners have undertaken a lengthy and arduous journey to achieving best outcomes for Indian children in Wisconsin. It is a journey well worth taking, and deserving of the commitment and sacrifices of all the dedicated practitioners involved with it. The measurement of long-term success requires intervals beyond the length of funding allotted for this project, and will be measured not only in improved compliance with the requirements of the statute, but in strengthened inter-jurisdictional relationships, deeper understanding of the historical dynamics which created the need for Wisconsin’s Indian Child Welfare Act, and, ultimately improved child and family outcomes for Indian children in Wisconsin.

Present recommendations to administrators of future projects, T/TA providers, project funders, and the general field

A number of specific recommendations and lessons learned emerged as the project progressed. Though it is possible that some of these lessons are unique to this project, they likely have implications for most cross- or inter-jurisdictional systems change efforts. We present a list of the most significant aspects of what we have learned from this project:

- Information does not travel through an organization, or across jurisdictions, in the expected manner. Messages may be ignored, not transmitted, corrupted/degraded/ or
misinterpreted. Therefore, communication plans must anticipate these events, and build in sufficient flexibility to permit rapid response to an evolving environment.

- Child welfare practitioners may not recognize the utility of available technical assistance, for a number of reasons: they are rarely involved with Indian child welfare cases; have heavy caseloads; or they lack exposure to or understanding of available data. While project staff “cannot lead a horse to water,” they must learn to “salt the hay.” In other words, practitioners need to see the need for, and want to access, available technical assistance. Establishment of personal relationships, clear and objective presentation and explanation of data, and easy access to technical assistance are all important precursors to the actual delivery of technical assistance.

- Unresolved but unrecognized or unstated historical inter-agency disputes/contention resulting in mistrust obviously creates a serious barrier to the collaboration necessary to effectively implement systemic change. Change agents must create environments for frank discussion, which then must be channeled into energy and motivation for positive change. Overcoming long-standing suspicion is a process, not an event, and must be carefully planned and managed.

- Implementation projects have a finite life span. To accomplish sustainable positive systemic change, stakeholders must clearly identify, articulate, and prioritize desired outcomes and impacts. Collaboratively designed work plans and logic models are important tools for this process. Stakeholders and project staff must recognize these tools are dynamic, which requires frequent, regular and honest review. Evaluation plans should provide mechanisms for data-informed recommendations for necessary adjustments.

- Systemic change takes time, measured in years rather than months. Project staff and stakeholders must protect each other, and themselves, from losing heart, wearing out, or becoming cynical. Burnout prevention should be honestly discussed, built into the work plan, and not taken lightly.

- It takes time for people to accept and trust each other, because stakeholders have distinct and diverse perspectives, based on their professional focus, their personality and their history. Patience, persistence, identification of common goals, acceptance of differences, and willingness to face and resolve conflict are all traits required to accomplish systemic change.
VII. Appendixes

A. Wisconsin’s Best Outcomes for Indian Children Implementation Project Logic Model
B. Wisconsin’s Best Outcomes for Indian Children Implementation Project Staffing and Auxiliary Support Tables
<table>
<thead>
<tr>
<th>Inputs</th>
<th>Products / Outputs</th>
<th>Short Term Outcomes</th>
<th>Long Term Outcomes</th>
<th>System / Child and Family Impacts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staffing / Training</td>
<td></td>
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<tr>
<td>State advisory board formed</td>
<td></td>
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<td></td>
<td>Wisconsin will establish uniform interpretation and consistent application of the WI-CWA</td>
</tr>
<tr>
<td>State advisory board quarterly implementation meeting</td>
<td></td>
<td></td>
<td></td>
<td>Wisconsin’s child welfare system will reflect integrated policies and standards that incorporate requirements of WI-CWA</td>
</tr>
<tr>
<td>Ongoing feedback from project coordinator / facilitators</td>
<td></td>
<td></td>
<td></td>
<td>Strengthen partnership between DCF and 11 tribal nations</td>
</tr>
<tr>
<td>County level WI-CWA consultation meetings</td>
<td></td>
<td></td>
<td></td>
<td>Improve understanding of the tribal role in child welfare service delivery</td>
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<tr>
<td></td>
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<td>Project staff hired</td>
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<td>Project staff trained</td>
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<tr>
<td>Training</td>
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<tr>
<td>DCF Division of Safety &amp; Permanence reviews / recommends standards and policy changes</td>
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<tr>
<td>County Child Welfare Staff TA training delivered</td>
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<tr>
<td>County Child Welfare Staff TA provided by facilitators</td>
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<tr>
<td></td>
<td></td>
<td>County child welfare system stakeholders are trained on WI-CWA</td>
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<td></td>
<td></td>
<td>Child welfare system is improved</td>
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<tr>
<td></td>
<td></td>
<td>Child welfare system is improved</td>
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<td></td>
<td></td>
<td>DCF Case practice will reflect the best interest of the Indian Child</td>
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<td></td>
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<td>Increased outcomes for Indian children in the state child welfare system</td>
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<tr>
<td></td>
<td></td>
<td>1) Increased percentage of cases with active efforts 2) Increased percentage of cases maintaining tribal connections</td>
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<tr>
<td>Technical Assistance</td>
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<tr>
<td>T/T/A roles defined</td>
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<tr>
<td>T/T/A procedures are developed</td>
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<td></td>
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<tr>
<td>Stakeholders identified and contacted on WI-CWA requirements</td>
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<tr>
<td></td>
<td></td>
<td>DCFmanaged web page created</td>
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<tr>
<td>Communication / Coordination</td>
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<tr>
<td></td>
<td></td>
<td>Tribal child welfare code case management grid used in County Agencies</td>
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<tr>
<td></td>
<td></td>
<td>Federal and pending WI-CWA requirements incorporated into state child welfare regulations, standards, and policies</td>
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<tr>
<td></td>
<td></td>
<td>Strengthens the working relationships between state, county, tribal child welfare agencies, adoption agencies and, state &amp; tribal courts</td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td>Child Welfare System will have increased understanding of the history and purpose of WI-CWA</td>
<td></td>
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</tr>
</tbody>
</table>
Appendix C. Wisconsin’s Best Outcomes for Indian Children Implementation Project Staffing and Auxiliary Support Tables

Wisconsin Implementation Project Staffing

CB and the ICs have expressed an interest in better understanding differences in the structure and operation of IP-supported staff and teams. In order to gain a better understanding of the roles and level of effort devoted to different projects and to investigate whether the IP’s staffing structure and allocation of resources (e.g., use of IC-funded staff in jurisdiction, % time of staff, staff turnover) influenced project outcomes, please provide information on the staffing for the IP. Please include both current and former staff involved with the IP, both staff employed or contracted by the IC and project-funded staff at the jurisdiction. Provide the following information:

**IP Staff Name:** Provide the last name of each Project-funded staff member who worked on the IP since its initial selection or approval, both current and former. Include both project and evaluation staff.

**Role:** Enter the role of the staff person on the IP.

**Location:** Note if the staff member is on-site at the jurisdiction or off-site.

**Organization/Affiliation:** Indicate whether the staff is employed or contracted by the IC or is employed by the jurisdiction.

**% FTE:** Estimate the percentage time staff was involved with the IP.

**% FTE IC Funded:** Indicate the percentage time the staff member was financially supported by IC funds.

**Turnover:** Indicate if the IP-supported staff member left the project prior to completion.

<table>
<thead>
<tr>
<th>Project-funded Staff Last Name</th>
<th>Project Role</th>
<th>Location (On/Off-Site)</th>
<th>Organizational Affiliation (IC or Jurisdiction)</th>
<th>Average annual % FTE Devoted to IP</th>
<th>% FTE IC Funded</th>
<th>Turnover Y/N</th>
</tr>
</thead>
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<tr>
<td>Ells</td>
<td>MCWIC Project Director</td>
<td>Off-site</td>
<td>MCWIC</td>
<td>20%</td>
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<tr>
<td>Graef</td>
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<td>Gebhardt</td>
<td>Project Manager</td>
<td>Off-site</td>
<td>MCWIC</td>
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<td>100%</td>
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<td>Spohn</td>
<td>Evaluator</td>
<td>Off-site</td>
<td>MCWIC</td>
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<td>100%</td>
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<td>Chambers</td>
<td>Evaluator</td>
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<td>MCWIC</td>
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<tr>
<td>Anderson-Knott</td>
<td>Evaluator</td>
<td>Off-site</td>
<td>MCWIC</td>
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<tr>
<td>Dietrich</td>
<td>Graduate Research Assistant/Evaluator</td>
<td>Off-site</td>
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<td>100%</td>
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</tr>
<tr>
<td>Sullivan</td>
<td>Undergraduate Student Research Assistant</td>
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<td>Stephenson</td>
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<tr>
<td>Parry</td>
<td>Evaluation Consultant</td>
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<td>MCWIC</td>
<td>6%</td>
<td>10%</td>
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<tr>
<td>Hansen</td>
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<tr>
<td>Name</td>
<td>Organization/Title</td>
<td>On-Site/Off-Site</td>
<td>Jurisdiction/Resource</td>
<td>Support from IC or Other Organization (Name)</td>
<td>Auxiliary Support</td>
<td>Description</td>
</tr>
<tr>
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<td>--------------------------------------------</td>
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<td>-----------------------------------------------</td>
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<tr>
<td>Donnelson</td>
<td>MCWIC/CCFL Financial Administrator</td>
<td>Off-site</td>
<td>MCWIC</td>
<td>3%</td>
<td>10%</td>
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</tr>
<tr>
<td>Weisz</td>
<td>MCWIC/CCFL faculty (consultant)</td>
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<td>MCWIC</td>
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<tr>
<td>Yellowhammer</td>
<td>Consultant</td>
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<td>MCWIC</td>
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<td>Mitchell</td>
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<td>Park-Zink</td>
<td>MCWIC Project Coordinator</td>
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<tr>
<td>Blackdeer</td>
<td>MCWIC Project Facilitator</td>
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<td>100%</td>
<td>100%</td>
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<tr>
<td>Pauliot</td>
<td>MCWIC Project Facilitator</td>
<td>On-site</td>
<td>Jurisdiction</td>
<td>100%</td>
<td>100%</td>
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</tr>
</tbody>
</table>

**Implementation Auxiliary Supports and Resources**

In order to have a more complete understanding of the level of support necessary to implement the IP, please describe any significant, additional resources the IC or other organizations (e.g., Casey Family Programs) provided to the jurisdiction above and beyond training and technical assistance to support implementation. Only include those resources not already mentioned previously in this report. These additional resources may include website development/support, meeting and travel support, curriculum development, etc. Support for staff at the jurisdiction should be noted in the above section, Implementation Project Staffing.

<table>
<thead>
<tr>
<th>Support from IC or Other Organization (Name)</th>
<th>Auxiliary Support</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>MCWIC</td>
<td>Financial support</td>
<td>Funds for development of video documenting the ICWA codification process; funds to support project closeout celebration with external stakeholders</td>
</tr>
<tr>
<td>Judicare</td>
<td>Resources</td>
<td>Developed legal guidebook and agreed to host/maintain this document and the Resource Manual on their website after conclusion of MCWIC involvement in the project</td>
</tr>
</tbody>
</table>