

CHILD & FAMILY SERVICES PLAN

South Dakota
Department of Social Services
Division of Child Protection Services

2025-2029



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I. Vision & Collaboration

State Agency Administering the Programs

Organizational Structure Overview

The South Dakota Department of Social Services, Division of Child Protection Services (CPS) is the Division designated to administer the Title IV-B and IV-E programs, Child Abuse Prevention and Treatment Act grant, John H. Chaffee Foster Care Program for Successful Transition to Adulthood, and the Community Based Child Abuse Prevent Program. The Department of Social Services is led by the Department Cabinet Secretary. Under the Department of Social Services, the Division of Children and Family Services was created.. There is a Chief of Children and Family Services who oversees the Director of CPS. CPS is a state administered and state supervised child welfare system. The CPS Division Director oversees the statewide provision of CPS programs and services. There are two Assistant Division Director's, one who oversees field services and one who oversees program areas, both are under the direct supervision of the Division Director. There are two Program Administrators, one who oversees Continuous Quality Improvement and Outcomes and one who oversees Services to Families, both are under the direct supervision of the Division Director. State Office of CPS Program Specialists serve as advisors and consultants to the Division staff in specific program areas and are involved in the administration of funding, promotion, and evaluation of those programs. CPS is divided into seven geographical regions. Each Region is led by a Regional Manager who is directly involved with the management of staff in the Region and responsible for overseeing the region-wide provision of services in all program areas. CPS has nineteen offices statewide that provide CPS services. Each office within a Region has a supervisor or supervisors who provide clinical and direct supervision to Family Services Specialists and Social Services Aides that provide services in the program areas.

The core components of CPS and functions within those components include:

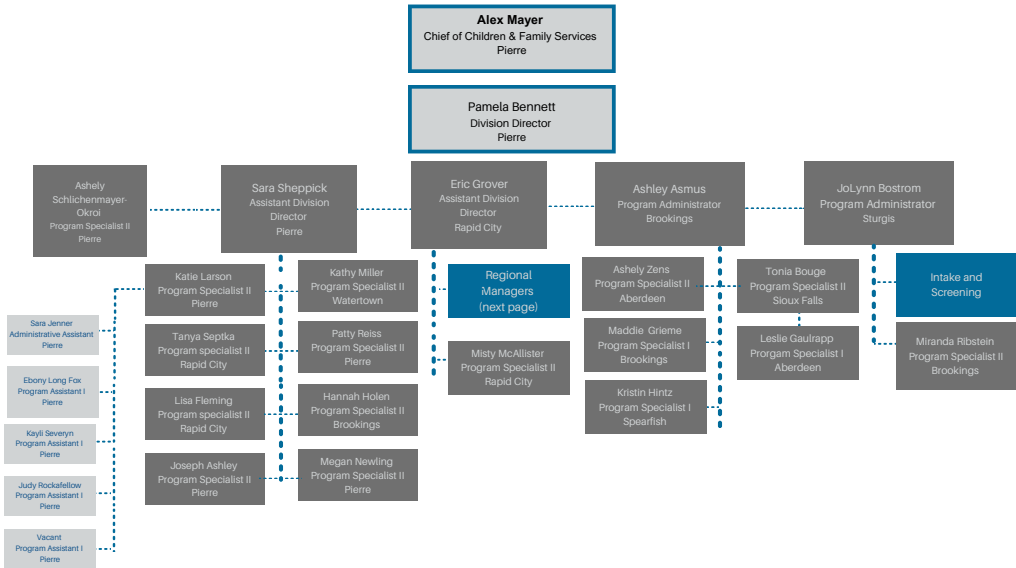
- Intake – receipt of child abuse and neglect reports Request for Services (RFS') including collateral contacts prior to screening and assignment for an Initial Family Assessment (IFA).
- Initial Family Assessment – process used to assess threats to danger and maltreatment in assigned child abuse and neglect reports through interviews with children, parents, and through other information sources.
- Ongoing Services – Protective Capacity Assessment (PCA) case planning and evaluation, and services provided for in-home and foster care cases where there are threats to child safety.
- Permanency Planning Services – providing placement resources, permanency planning, independent living and supports for children placed in out-of-home care.
- Adoption Services – placement of children who have a goal of adoption when parental rights are terminated and post-adoption services for children in adoptive placement.
- Licensing – licensing and regulation of child welfare and child placement agencies that provide placement services to children with emotional and behavioral needs was moved to the Office of Licensing and Accreditation January 2021. CPS provided these services prior to the creation of the Office of Licensing and Accreditation.
- Title IV-E Prevention Plan – development and implementation of the Prevention Plan and requirements as outlined in the Family First Prevention and Services Act.
- Administration of the Parenting Education Partners network.

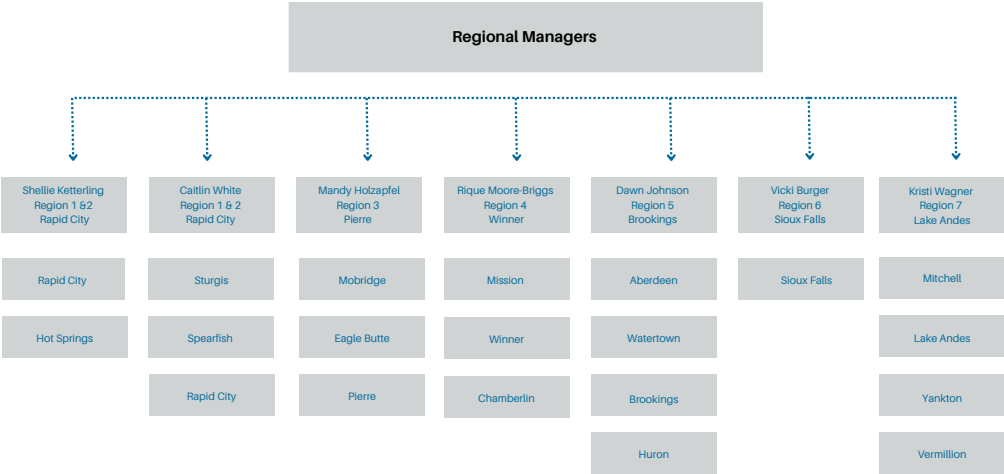
CPS directly provides child protection services for five of the nine South Dakota tribes. The tribes directly served by CPS are the Rosebud Sioux Tribe, Cheyenne River Sioux Tribe, Crow Creek Sioux Tribe, Lower Brule Sioux Tribe, and Yankton Sioux Tribe. The four tribes that provide their own full array of child welfare services are Flandreau Santee Sioux Tribe, Sisseton Wahpeton Oyate Tribe, Standing Rock Sioux Tribe, and the Oglala Sioux Tribe. CPS has Title IV-E agreements with these four tribes.

Each of the tribes have tribal courts and tribal law enforcement. There are several similarities with protocols of the courts and law enforcement for the five tribes compared to non-tribal law enforcement and courts. The similarities include the option for joint investigations, provisions for law enforcement to take emergency custody, and abuse/neglect (A/N) actions through the court with the court being able to give custody, care, and placement responsibility to CPS. The Federal Bureau of Investigation (FBI) and U.S. Attorney's Office also have jurisdiction to investigate and prosecute criminal child abuse on reservations.

A more detailed description of each of the Department's Divisions and the programs each provides can be found on the Department's website.

CPS State Office Organization



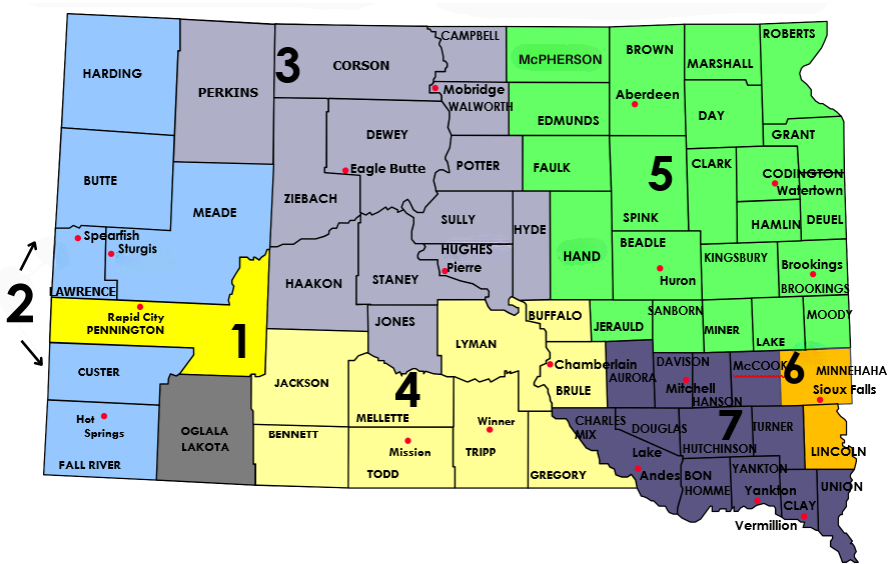


Vision Statement

Families are engaged with a child welfare system which honors and uplifts their values and resilience through the empowerment of families involved within the system.

Mission Statement

South Dakota welfare’s mission is to engage parents, youth, and partners in a shared vision, to empower all involved to lead systemic change.



Public Access to the 2025-2029 Child and Family Services Plan (CFSP)

The Child and Family Services Plan (CFSP) is on the State’s website on the CPS page.

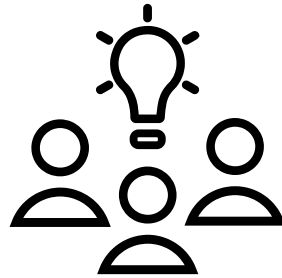
Questions about the availability of the CFSP can be directed to:

Pamela Bennett
Division Director
Department of Social Services / Child Protection Services
700 Governors Drive
Pierre, SD 57501
Phone: 605-773-3227
E-mail: Pamela.Bennett@state.sd.us



Collaboration

To create a shared vision across the broader child welfare system to support prevention and better outcomes for children and families, CPS collaborates consistently with the internal and external partners in the development, assessment, modification, and monitoring of the CFSP, as well as the progress reported in subsequent APSRs. These collaborative efforts are not seen as an event, but an ongoing process to continually identify more efficient and effective ways to improve outcomes for children and families who encounter the child welfare system.



Internal Collaboration

The Department of Social Services Strategic Plan for 2021-2025 was presented to all staff via electronic correspondence in January of 2022. The plan development included staff from across the state from every division and at various levels of the agency. The strategic plan places value on staff input and the customer experience. Every step in the development of the plan looked very deliberately at what it would mean for employees and South Dakota customers. South Dakota's DSS Strategic Plan will be the basis for progress and the measure of success will be the work completed to meet the goals. The Strategic Plan goals center around creating a culture that includes recognition, innovation, and opportunities for growth.

The following sources provide for internal collaboration within the South Dakota Department of Social Services and CPS. Due to the structure of the department inter-department and inter- agency collaboration occurs on a consistent basis.

Source	Members	Purpose
DSS Executive Team	Department Cabinet Secretary, Deputy Secretary, Chief Financial Officer, Chief of Children and Family Services, Chief of Legal Services, Chief of Behavioral Health, Division Director for Medical Services, and the Administrator of Communications	The Executive Team was created by the Cabinet Secretary in April 2020 and meets twice a month to discuss department initiatives at a high level.
DSS Management Team	Department Cabinet Secretary, Deputy Secretary, Chief Financial Officer, Chief of Children and Family Services, Director of Legal Services, Chief of Behavioral Health, Division Directors for CPS, Child Care Services, Medical Services, Economic Assistance, Child Support, Behavioral Health, Human Services Center Administrator, and the Human Resources Manager	The DSS Management Team meets monthly to discuss department and division initiatives, staffing, legislation, budgets, integration of services, and to identify successes, challenges, and solutions.
CPS Supervisory Team	Division Director, Assistant Division Directors, Program Administrators, Program Specialists, Regional Managers, and all Supervisors	The team meets twice a year and focuses on the status of current initiatives, topic specific skill enhancement, education, and planning. The group discusses and has input in the CFSP and the APSR.

Source	Members	Purpose
CPS Management Team	Division Director, Assistant Division Directors, Program Administrators, Program Specialists, and the Regional Managers.	The CPS Management Team meets every quarter face to face. The team has continued to meet weekly since March 2020 via Zoom meetings. Agenda items include the status of each region and program area as standing agenda items; ongoing progress evaluation of current initiatives; and discussion, selection, and planning of new initiatives accepted by the team.
CPS Program Specialist Team	Child Protection Services Program Specialists	The team meets every month during their CQI Core Team meetings. Program Specialists are the subject experts at the State Office level of CPS. One of the agenda items is an analysis of the Permanency, Safety and Well-Being Regional Reviews to determine if there are gaps in policy and procedure or a need for additional staff development. The CPS Program Specialist Team also tracks the progress of the agency's Program Improvement Plan (PIP), CFSP, and APSR.
CPS Comprehensive Safety Intervention (CSI) Workgroup	Assistant Division Directors, Program Administrators, Program Specialists, Regional Managers, Supervisors and Family Services Specialists	The CSI Team focuses on the State's safety model by the review of policies and trends to make recommendations to the CPS Management Team. This team includes case fidelity reviews to ensure practice is implemented as intended.
CPS Intake Team	Intake Supervisors, Lead Intake Family Services Specialists, Intake Family Services Specialists	Each year a mandatory Intake Specialist meeting is held to update the Intake Specialists and the Intake Specialist Screeners on policies and procedures and to discuss practice. Prior to the Intake Specialist meeting, questionnaires are sent to the Family Services Specialists and Supervisors on topics they would like to discuss and review. This gives the Intake Family Services Specialists, Screeners, and Supervisors input on the agenda items at the annual training. The agenda includes gathering, identifying danger threats, peer reviews, and team building activities.
Supervisor Advisory Group (SAG)	Supervisors across the state	The team meets monthly to address topics as presented to them by the field, or by the Continuous Quality Improvement (CQI) Core Team.

Source	Members	Purpose
Regional Managers and Program Specialists	Child Protection Services' Program Specialists and Regional Managers, Division Director, Assistant Division Director	Meet to discuss gaps in policy and practice that are causing less optimal outcomes following their respective Region review. The Program Specialist and Regional Managers meet weekly via Zoom and bi-annually in person where these gaps can be discussed. This might include adjusting a current policy or practice, developing new practice guidelines or policy, providing additional training, making additions or changes to the Family and Child Information System (FACIS), or collaborating with another agency in the community to improve outcomes. Regional Managers have also started monthly meetings via phone calls to discuss these issues more in depth with the Division Director and Assistant Division Director.
Certification Training Faculty	Program Specialists, Supervisors and Family Services Specialists who guide and provide insight on how training topics are implemented in work practice at the local level	Faculty meets with their training colleagues one to two times a year to plan for and assess the training needs of new Family Services Specialists. Adjustments to enhance the training is based on the Regional Reviews, and the CSFR, as well as updates to policy and practice. Faculty offers training at least twice a year in the areas of Permanency and Well-Being, Foundation, Initial Family Assessment, Protective Capacity Assessment, and Trauma Informed Care.
ICWA Capacity Building	The workgroup is made up of representatives from the seven regions in CPS, the ICWA Program Specialist, CQI Program Specialist, and FACIS Program Specialist.	This workgroup is not only responsible for completing ICWA compliance reviews but also a capacity building process with training and awareness of ICWA trends locally and nationally. Casey Family Programs has expressed support for the workgroup and offered to schedule presenters for the group. The members from each region are able to bring back knowledge from this workgroup and serve as subject matter experts within their regions.

Multi-Disciplinary Teams Collaboration

The following describes the collaborative efforts of CPS through the facilitation and support of multiple multi-disciplinary teams. Each of these collaborations are utilized in all aspects of the CFSP/APSR, including, but not limited to, development, assessment of agency strengths and areas of improvement, review and modification of goals, objectives, and interventions and monitoring of progress. When collaborating, the CPS team ensures diversity of families and young adults being served who have been historically underserved or marginalized, and those adversely affected by persistent poverty and inequality in the child welfare system.

CPS asked partners of the child welfare system to participate in a survey to learn more about the awareness and use of community supports and resources to help parents care for their children. Information is collected from child welfare partners on accessibility of services, significant barriers to access mental health resources, significant barriers to access substance abuse services, how their agency supports families, what are the most sufficient resources in their community to prevent child abuse and neglect, what is the least sufficient resource to prevent child abuse and neglect, what are the reasons they see children enter the foster care system, and what are the reasons they see children remain in the foster care system. This survey is implemented statewide on a yearly basis in conjunction with an office’s CQI meeting with community partners.

The Family First Program Specialist has identified a group of parents, caregivers, and youth with lived experience to help provide feedback to CPS representing the perspectives of parent, caregiver, and the child. The purpose of this process is to gather information to help improve the CPS provision of services. Parents have the opportunity to voice what their expectations were in working with CPS and to share if those expectations were achieved. This allows CPS to determine quality of services and areas where quality can be enhanced. This advisory group has provided feedback on the data collection process of parenting education partners, as well as assessing quality of parenting education classes in the past year. The meetings are not set at a specific frequency, rather when opportunities arise where the input of these valuable partners is sought, the group will meet to provide input at those particular meetings/events/projects. Those members who are also involved in Family First Plan development through the Prevention Team meet at the frequency in which those meetings occur, which were largely monthly throughout the past calendar year, and will likely be quarterly ongoing through implementation. Some members are also involved in the CBCAP Advisory Board and those meetings are held twice annually.

Child Protection Services (CPS) surveys youth in accordance with the National Youth in Transition Database (NYTD) regulations at age 17 for children in foster care & and follow-up surveys at age 19 and 21. Additionally, CPS surveys all 17-year-old youth in foster care each year, not just in Federal NYTD Baseline years. CPS reviews the survey results and uses the information in the CFSP and subsequent APSRs.

Independent Living Surveys are completed by youth who are transitioning from care. The surveys are used to assist in assessing services to youth and to help Child Protection Services (CPS) n looking at and enhancing service delivery. The results of the exit interviews are presented to the CPS Management Team and provided to staff during ongoing and Certification training. The information gained from the surveys was utilized in the development of the CFSP and subsequent APSRs; information will continue to be used to measure progress and make any needed adjustments in independent living services.

The Office of Licensing and Accreditation, under the Department of Social Services, prepares for the annual relicensing onsite visit to group care centers for minors and residential and intensive residential treatment facilities by surveying residents and staff. The resident survey includes a range of questions on topics such as how the resident is treated; whether the resident feels safe; what contact they have with their family and supervising staff; and how they are engaged in the development of their treatment plan. The staff survey includes questions pertaining to program policies and procedures, training, treatment planning, and services offered by the program. The information is shared with the individual agencies while in the review process as an element of the renewal review.



The Children with Disabilities Education Act 2004 requires the establishment of a special education advisory panel to provide suggestions and advice to the State Department of Education on critical issues regarding special education services throughout South Dakota. The South Dakota Advisory Panel on Children with Disabilities (SDAPCD) meets, at minimum, four times a year. The membership of the SDAPCD must consist of members appointed by the Governor. The membership is representative of the State population and composed of individuals involved in or concerned with the education of children with disabilities, including a representative from the State child welfare agency responsible for foster care.

While developing the State Prevention Plan as outlined by the Family First Prevention Services Act (FFPSA) a teaming structure was developed including a Core Team to drive planning efforts, a Prevention Team to help navigate efforts, and a Fiscal Team to plan braiding and blending of funding streams for greatest impact. The teams typically meet monthly. Meetings are a hybrid of virtual and in-person for maximum participation. The Core Team is comprised primarily of CPS and DSS leadership and program staff, along with the experience provided by a tribal ICWA Director, and two tribal child protection leads. The Prevention Team involves a broad range of participants representing urban, tribal, rural, and even frontier perspectives in South Dakota. There is a prominent and diverse tribal aspect with a variety of representatives involved, young adults with lived experience participate, a grandmother who is a Common Sense Parenting trainer and is parenting her grandchildren represents her tribal affiliation, many community and state agencies with leads from varying levels of structure are included, and federal partners are involved.

Weekly Zoom meetings of a sub-workgroup from the main Oglala Sioux Tribe (OST) Task Force occurs. The main task force meets every Monday, and the sub-workgroup meets every Friday. The discussion is focused on improving the challenges faced by the OST's -Child Protection Program. CPS ICWA Program Specialist will continue to meet with the both groups and bring back any questions, updates, or requests to DSS-CPS leadership.

One of the overarching goals of the 2020 - 2024 Plan was to improve communication between partners of the child welfare system, these efforts will continue in the System Outcomes Section of the 2025-2029 CFSP. This includes stakeholders as reviewers, a survey to them, and CQI meetings with the stakeholders. Information that will be used at the CQI meetings with the stakeholders is data collected and presented in the Regional Assessments.

Source	Members	Purpose
Kinship Workgroup	CPS Director of Field Services, CPS Program Specialists, CPS Regional Managers, CPS Supervisors, CPS Kinship Specialists, CPS Family Services Specialists, external members including a youth with lived experiences, a kinship resource with lived experiences, the Rosebud Sioux Tribe ICWA Director, the Standing Rock Sioux Tribe ICWA Director, Sicangu Child and Family Services Family Developers, Lutheran Social Services (LSS) Kinship Home Study Specialists, LSS Kinship Supervisor, and LSS contracted Kinship Locators.	The Kinship Workgroup meets monthly to enhance engagement of children and families regarding relative searching and relative placement for families involved with the child welfare system.

Source	Members	Purpose
Independent Living (ILS) Young Voices Youth Groups Four communities: Sioux Falls, Rapid City, Mitchell, and Aberdeen	Independent Living Services Program Specialist and Community Resource Persons	Young Voices continues to provide youth another means to share their views and experiences in foster care and provide input into how the system can improve independent living services and transition support. The CRPs attend the virtual and in-person meetings and provide updates to the CPS ILS Program Specialist on the Young Voices work and recommendations. The CRPs also cover Young Voices topics and feedback through worksheets during the CRPs individual meetings with these youth. Recommendations from Young Voices are used in the development of the CFSP and subsequent APSRs. The input of youth will continue to be used to measure progress and make any needed adjustments in independent living services.
GRIT Calls	Representatives from each group care facility and each Psychiatric Residential Treatment Facility (PRTF) comprise the South Dakota Association of Youth Care Providers (SDAYCP), CPS staff, CPS Supervisors, CPS Regional Managers, and CPS State office	GRIT is an acronym outlining the following values for the group: G - Guts, to bring it to the think tank, and dig into the guts of what the youth needs R - Resilience, of the youth, and of the team providing care I - Identification of the needs and the resources appropriate or needed T - Treatment steps for crisis, further crisis prevention and following the crisis follow-up The GRIT calls occur weekly to discuss youth with high acuity needs who are in need or placement. The SDAYCP and CPS discuss the youth's strengths, needs, previous placements, and level of care needed in attempt to problem solve and keep the youth in South Dakota, rather than having to be placed out of state. These youth are discussed on the weekly calls until a placement is found.
State Review Team (SRT)	Representatives from the Divisions of CPS, Medical Services, and Behavioral Health in addition to representatives from the Departments of Human Services, Education, and Corrections	The SRT meets weekly to review referrals of children and youth for inpatient treatment at residential and intensive residential treatment facilities. The SRT submits recommendations for psychiatric level of care to the South Dakota Foundation for Medical Care, formerly known as PRO (Peer Review Organization). The Foundation for Medical Care utilizes child psychiatrists and psychiatric nurses to determine medical necessity for psychiatric level of care and if the case meets criteria, the Foundation for Medical Care approves placement for a specific period of time not to exceed six months with a process to review requests for continued stays. If the case does not meet criteria, a less restrictive level of care is recommended by the SRT with suggestions from the Foundation for Medical Care.

Source	Members	Purpose
Community-Based Child Abuse Prevention Board	Statewide network of parenting educators, parents, and stakeholders	Board meets at least two times per year to assess the effectiveness of the Common Sense Parenting and Positive Indian Parenting classes and make recommendations regarding parenting program approaches, techniques, and accommodations for populations with special needs. The Parenting Education Partners work with tribal agencies to improve efforts toward serving tribal areas. Input from the Advisory Board is used to enhance parenting education training for parents in the development of the CFSP and subsequent APSRs. The input from the Advisory Board will continue to be used to measure progress and make any needed adjustments in the Parenting Education Program.
Justice for Children Committee (JCC)	Membership includes those required by the grant: law enforcement, Criminal Court Judge, Civil Court Judge, prosecuting attorney, defense attorney, attorney for children, CASA representative, health professional, mental health professional, Child Protection Services agency personnel, an individual experienced in working with children with disabilities, a parent, an adult former victim of child abuse/neglect, and an individual experienced in working with homeless children and youth.	Established to meet the requirements of the Children's Justice Task Force Grant and the Child Abuse Prevention and Treatment Act Grant. Review of the broader systems involved with child welfare and policy and recommendations for enhancement and improvements are ongoing functions of the JCC. The JCC report is included in the Child Abuse, Prevention and Treatment Act (CAPTA) Plan. The recommendations and action steps established by the JCC for the Children's Justice Act Grant are also included in the APSR. The JCC is consulted regarding CPS policy, practice and training related to responding to child abuse and neglect, including sex trafficking of children.
State and Private Adoption Agency Collaboration	Staff from licensed private adoption agencies and CPS program staff	The team meets to discuss the opportunity to work collaboratively with the State on several topics. Plans are underway to survey members on what projects to focus on first. Collaboration ideas suggested by the group include post adoption services, adoptive parent training and education, matching opportunities, and resource sharing. The group will be meeting every two months initially. This year the Department of Social Services collaborated with the private Adoption Agencies in discussing adoption competent services for South Dakota families. The National Training Institute presented to the group information about the Adoption Competency training for mental health professionals and the training for caseworkers. The private agencies were encouraged to use this free training to enhance their adoption programs. The Department also engaged this group in a focus group about post adoption services in preparation for the release of the Post Adoption RFP that came up for publication at the beginning of the year.

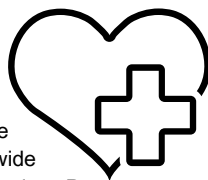
Source	Members	Purpose
Independent Living Services (ILS) Advisory Workgroup	Representatives from Department of Social Services Child Protection (CPS), , Independent Living Preparation Program representatives, Department of Corrections, Housing, Economic Assistance, Unified Judicial System, CASA, group and residential facilities, Community Resource Persons (CRP), tribal representative, and youth who are in foster care or have exited foster care.	The ILS Workgroup meets at least twice per year and advises CPS on the biannual teen workshops and annual teen conference, program development, and service delivery to youth. Data on NYTD and Youth Independent Living Surveys are provided at the meetings. The ideas and input provided during the meetings are used in the development of the CFSP and subsequent APSRs. The input of the workgroup will continue to be used to measure progress and make any needed adjustments in Independent Living Services.
Stronger Families Together Initiative	The Governor's Office, Tribal Relations, DSS (CPS, OLA, Communications), South Dakota Kids Belong, Tribal child welfare programs (Sisseton-Wahpeton Oyate, Oglala Sioux Tribe, Sicangu and BIA from Crow Creek), ICWA specialist (Rosebud Sioux Tribe), foster and adoptive parents, foster care alumni, business leaders, faith-based organizations, private adoption agencies, and child placement agencies	The Stronger Families Together initiative is a call for action to recruit, prepare, and support foster and adoptive families within their own communities based on the following four principles: All children deserve to grow up in a family where they are loved and protected; Foster families are needed to care for children and support their families when they are experiencing challenges that cause the children to be unsafe; Encouragement, support, and services are needed for parents, kinship families, foster families, and adoptive families to provide the best care possible for children; Families are needed to provide children a safe, stable, and permanent forever family if they cannot return home. The initiative highlights the needs for more foster families to provide care for Native American children, sibling groups, older youth, children who require specialized care due to behavioral, mental health, or medical needs, and families who are willing to partner with the child's family to help achieve reunification and/or to maintain connections.

CPS Team Members, Committees and Groups Collaboration

CPS team members participate in the following teams, committees, and groups to continue to foster collaboration across the child welfare system. Each team promotes the child welfare system and informs the development, assessment, modification, and monitoring of the CFSP, as well as the progress reported in subsequent APSRs. When collaborating, the CPS team ensures diversity of families and young adults being served who have been historically underserved or marginalized, and those adversely affected by persistent poverty and inequality in the child welfare system.

Parenting Education Partners hold peer reviews of local Parenting Education providers biannually. The information from the reviews is used in the APSR to improve parenting education and other prevention services. The input gained from the Peer Reviews is used for the development of the CFSP and subsequent APSRs and will continue to be used to measure progress and make any needed adjustments in the Parenting Education Program and prevention services.

The Department of Health is in the early stages of developing a South Dakota Preventable Death Review Team. This team will collaborate with law enforcement, medical examiners/coroners, and the Vital Statistics Office to create and implement a plan to collect timely and comprehensive data on all child deaths. The Preventable Death Review Team will initially focus on the two largest counties, Minnehaha and Pennington, and then will expand statewide within the next two to four years. The Assistant Director and the Protective Services Program Specialist are on the Review Team.



CPS and the Department of Education continue their collaboration related to the implementation of Title I of Every Student Succeeds Act. Procedures for staff in CPS and local school districts were developed, as well as an MOU between the Departments of Social Services and Education to enhance educational stability for children and a process to address issues as they arise.

The Center for Prevention of Child Maltreatment is located at the University of South Dakota under the School of Health Sciences. The Center has six major goals and 48 supporting objectives that address a 10-year comprehensive approach toward ending child sexual abuse in South Dakota. The objectives of the 10-year plan will increase the State's capacity to address all forms of child maltreatment. The six goals of the plan include: Statistics and Benchmarking; Public, Private and Tribal Health; Mandatory Reporting; Criminal Justice and CPS Response; Infrastructure; and Public Awareness. The Center has an advisory board with multi-disciplinary representation including the Division Director for CPS. The advisory board provides direction, guidance, and oversight of the 10-year plan. The objectives of this Plan will increase the State's capacity to address all forms of child maltreatment.

CPS and the University of South Dakota are partnering together on an Adverse Child Experiences (ACE) study. With early intervention and prevention efforts, the impacts of ACEs can be mitigated. Child Protection Services is partnering with the University of South Dakota (USD) to recognize ACEs as part of a family's environment to better understand behavior and provide appropriate supports. The data collected will identify populations and regions that are experiencing child adversity and therefore are at risk for poor health and well-being. This information can be used to identify existing supports and areas of need to promote resiliency in these communities. It can also be used to inform policy that supports protective factors (safe school environment, positive adult and peer relationships, and high cognitive skills). Specifically, this data will support service providing agencies to train their staff to address ACEs and promote resiliency within the families and children they serve.

In October 2023, the Foster and Adoptive Care Recruitment and Retention team of Stronger Families Together, Region 1 (Rapid City), initiated a collaborative effort in Pennington County. This partnership seamlessly integrates the principles of Stronger Families Together with the objectives of the Foster Parent Recruitment/Retention Collaborative aimed at bolstering the recruitment and retention of foster and adoptive families in the Rapid City area. Originally, the Foster Parent Recruitment/Retention task force comprised five public and private adoption agencies in Pennington County. Following the integration of Stronger Families Together, this collaboration now encompasses a broader spectrum, including five public

and private adoption agencies, foster families, tribal representation, and community involvement through a local church. The participating private and public agencies comprise Catholic Social Services, Lifeline Children's Services, Children's Home Society, Lutheran Social Services, and the Department of Social Services.



Other participants include a community representative from a local church, foster families, and a representative from the Rosebud Sioux Tribe. The beginning of the Foster Parent Recruitment/Retention collaboration dates back to late 2015, with the primary objective of augmenting the pool of adoptive and foster families in South Dakota, particularly addressing the pressing need in western South Dakota.

The Protective Services Program Specialist is a member of the steering committee for Project SCOPE (Supporting Children of the Opioid Epidemic). Project SCOPE is a national training initiative intended to build nationwide provider capacity and confidence in applying evidence-based practices in screening, monitoring, and interdisciplinary support for children and families diagnosed with Neonatal Abstinence Syndrome (NAS), Neonatal Opioid Withdrawal Syndrome (NOWS), or who are suspected of being impacted by opioid use, trauma, or related exposure. The purpose of this national initiative is to train interdisciplinary teams on emerging knowledge and evidence-based practices in screening, monitoring and interdisciplinary care for children impacted NAS, trauma, or related exposure. Core curriculum will include current research on brain development, developmental outcomes of prenatal exposure to opioid and other substances, trauma informed care, provider secondary trauma stress, and strategies to support caregivers. This initiative is intended to improve outcomes by linking research to practical application in local communities, providing opportunities to share knowledge and findings with national networks and federal agencies, and providing recommendations for future interventions. The Center for Disabilities at the University of South Dakota Sanford School of Medicine is partnering with the University of Wyoming Institute for Disabilities and the Nisonger Center at the Ohio State University and the University of Cincinnati Center for Excellence in Developmental Disabilities for this project. This initiative will build upon the effective ECHO virtual training model and is a pilot supported by the U.S. Department of Health and Human Services Administration on Intellectual and Developmental Disabilities. This initiative will also support Plans of Safe Care.

The ReNew Program through Bethany Social Services starts at prenatal care and continues to age five. This program provides a case manager to assist the family with resources to overcome any barriers they may be facing, though they specialize in past and present substance abuse. This program began in Region 1 and Region 6. The Regional Manager in Region 6 participates on the advisory group.

In 2020, the CPS Division Director was appointed to serve on the Behavioral Health Advisory Council (BHAC). The Council advises the Division of Behavioral Health with the planning, coordination, and implementation of the State's behavioral health services plan. BHAC members assist with the establishment of goals for the State Plan while also monitoring and reviewing fiscal and programmatic information to evaluate the adequacy of services for individuals with behavioral health needs. The BHAC also provides input toward potential services and/or funding expansion.

South Dakota is in the midst of a methamphetamine epidemic, while at the same time experiencing a growing opioid problem. Volunteers of America, Dakotas (VOAD) serves pregnant, parenting and postpartum women whose children have been removed or are at-risk of being removed from their custody due to substance use. VOAD's New Start Residential Program and its primary partner, CPS, propose to address the need for formal coordination mechanisms among family serving agencies to respond to the rising rate of children in out-of-home placements due to parental substance abuse. VOAD's New Start Program is one of only two residential treatment facilities in the state where mothers can live with their children during recovery. VOAD is located in Sioux Falls, SD but serves families from across the entire state. Mothers may have their children with them from ages 0-8 years old and a total of two children. The Regional Manager from Region 6 is the primary child welfare partner for the Regional Partnership Grant (RPG). Currently VOAD New Start has the capacity to serve a total of 30 women in their residential program.

CPS has been engaged as a partner with South Dakota Unified Judicial System’s Dual Status Youth Initiative. The term “dual status youth” refers to juveniles who come into contact with both the child welfare and juvenile justice systems and occupies various statuses in terms of their relationship to the two systems. A growing body of research has consistently confirmed that, in comparison to juveniles without such cross-system involvement, dual status youth present a range of important challenges. The challenges and costs associated with dual status youth strongly suggest the need to devise and implement innovative ways to manage these difficult cases. The Robert F Kennedy (RFK) National Resource Center will use its four-phase framework to provide technical assistance and consultation in partnership with the South Dakota Unified Judicial System to positively impact outcomes for youth involved in both the juvenile justice and child welfare systems. Enhancements and improvements in policy and routine practice realized through this project will focus on strengthening practices, programs, and services for various systems of care on behalf of the South Dakota Unified Judicial System for their identified target. The initiative was previously active in several counties however is currently active in Pennington County. Pennington County is located within CPS’ Region 1. A Family Services Specialist Supervisor from Region 1 attends the monthly meetings. The Regional Manager from Region 6, located in Minnehaha County, attends their local meetings, although they have not met within the past year. The Initiative in Davison County, within Region 7 has disbanded and has not met within the past year.

The Learning and Development Program Specialist is working in collaboration with Call to Freedom, an advocacy center for Human Trafficking to deliver training to Child Protection Services Family Services Specialists on identification and risk factors for youth who come to the attention of CPS. These trainings are delivered twice yearly.



South Dakota desires to collaborate and bring together cross-agency partners to develop, implement, and monitor Plans of Safe Care for all infants affected by substance use, not just those infants who meet the criteria for child welfare intervention. South Dakota desires to collaborate and bring together cross-agency partners to develop, implement, and monitor Plans of Safe Care for all infants affected by substance use, not just those infants who meet the criteria for child welfare intervention. To continue this initiative, South Dakota State University received a HRSA grant related to Plans of Safe Care. The BIRTH-SD-AIM (Bridging Information and Resources to Transform Health of South Dakota parents - Assessing need and Implementing Maternal health safety bundles) was received in September 2023 and the grant period is for four years. Over those four years, the goal is to implement sets of patient safety standards in birthing hospitals across the state and the first set of standards that is being worked on is for pregnant individuals with substance use disorder.

Lutheran Social Services received a family stabilization grant and is implementing the CARES model in Watertown and Sioux Falls areas. This evidence-based model is geared towards prevention of families in the child welfare or juvenile justice system by identifying families early and providing a case manager and family advocate to walk alongside them through their at-risk situation. This program started receiving referrals from the Watertown and Sioux Falls school district in January 2022. Lutheran Social Services has collaborated with CPS throughout the process of securing the grant through implementation. There are ongoing discussions regarding data sharing and metrics to help measure outcomes for the program.

The National Association of State Foster Care Managers (NASFCM) is a platform that enables State Foster Care Managers to collaborate and share their knowledge to enhance the well-being of children and youth who are placed in out-of-home care, as well as their families. Through this organization, members can exchange information and expertise about issues that impact the safety, permanency, and overall welfare of these children. The Executive Board convenes once a month to address organizational matters. Currently, the board’s president is a member of SD CPS.

CPS is collaborating with the Center for the Prevention of Child Maltreatment, which contracts with the Black Hills Special Services Cooperative, to coordinate a parent’s advisory group. CPS has presented to the coordinators of this group to inform on CPS services and supports overall throughout the state and developing a feedback loop related to prevention services. CPS outlined for the group opportunities to provide input in more detail to help enhance parental feedback in planning. Through the Community Based Child Abuse Prevention Board Meetings, parenting education partners are in the process of identifying representatives from each area served (statewide coverage is assured by the group of these providers) to participate in future board meetings to share feedback and assist in planning. As development of the parenting education focus on fatherhood continues to expand, champions of fatherhood who are fathers (or other male caregivers such as grandparents and uncles) with lived experience related to involvement in CPS are being sought. An infrastructure of trainers who are fathers is in progress and community education partners are in place to begin delivering fatherhood parenting education; when the champions of fatherhood are identified this program area will kick-off.

To help inform services and supports as a whole and provide feedback on prevention services in the state, CPS Family First Program Specialist has met with the Young Voices group as led by Lutheran Social Services (LSS) program coordinator. Youth participating in the meeting were assisted by LSS Community Resource People (CRP) during the meeting to help relay and record information. At upcoming opportunities, a group of youth advisors from Young Voices are committed to participation to share perspectives as youth with lived experience related to services and supports and prevention efforts. A CRP from the Aberdeen area has volunteered to lead the effort of enhancing involvement from youth advocates in these focus areas and will attend meetings as arranged with the youth.

Source	Members	Purpose
Birth to Three Interagency Coordinating Council (ICC)	Employees of the Department of Education, and the CPS Protective Services Program Specialist	The council has the purpose of advising and assisting the Department of Education on identifying appropriate services for children ages birth to three who have a disability or developmental delay. Information is exchanged between CPS and the ICC to further services for the children in the target population. The Council meets four times per year and the Program Specialist provides input regarding keeping the children safe and provides data on the number of Birth to Three children who have been victims of abuse and/or neglect. The ICC is mandated by federal law and appointed by the Governor to advise and assist the Lead Agency to implement the requirements of Part C of the Individuals with Disabilities Education Act (IDEA). The 2021 child count numbers for children served by South Dakota’s Part C Birth to Three Program was 1,018.

Source	Members	Purpose
Pre-Kindergarten-12th grade and Youth Serving Organizations (PK-12YSO)	The Center for the Maltreatment of Child Prevention and CPS Protective Services Program Specialist	The task force began in November 2018 to surround a community's infrastructure, particularly schools and youth serving organizations, with the tools and education necessary to know of, respond to, and prevent child maltreatment. Four focused objectives of the task force are: offer all school district personnel mandatory reporter training; develop a platform and infrastructure for virtual support services of counseling, behavioral health and social work in K-12 schools; launch a coordinated effort to teach prevention to students in school systems as well as their parents/guardians; and launch a coordinated effort to teach child sexual abuse prevention efforts in youth serving organizations and faith-based organizations.
State/Tribal Child Welfare Consultation (STCWC)	Representatives from tribal child welfare programs, ICWA programs and DSS-CPS	The team meets to facilitate coordination and information sharing between CPS and the Tribes. Items related to the CFSP and APSR continue to be discussed at each of the meetings. The group created its second strategic plan entitled, "Strategic Plan for Unified Advocacy and Action" which has two targets for the group's collective work: "Disproportional Entry Rates of Native American Children into Custody" and "Determine What Prevention Efforts Are Needed.", however, as discussions progressed it was decided that while these are still very important targets, they needed to be broken down into more realistic steps that would strengthen the targets in the long run. Details can be found in the Tribal Collaboration section of the APSR.
South Dakota Youth Care Providers Association	Representatives from the Department of Social Services (CPS, Auxiliary Placement, and Behavioral Health) and the Department of Corrections	Discuss areas related to children placed in group and residential care such as admissions, denials, discharges, seclusion and restraints, placement numbers, out of state placements, and efforts to improve the system for youth placed in upper levels of care.

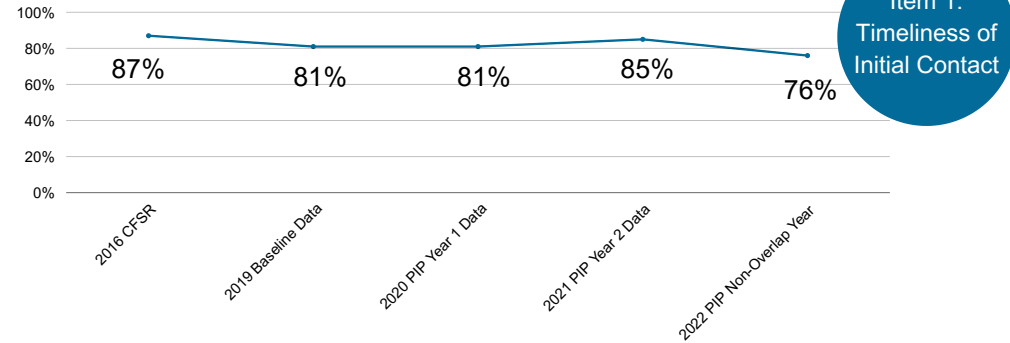
Source	Members	Purpose
REACH (Respond, Educate, Advocate, Counsel, Heal) Team	local law enforcement, Division of Criminal Investigation (DCI), medical providers, forensic interviewers, child protection, mental health providers, victim advocates and prosecutors	The team was established in 2017, is headquartered in Watertown and serves 13 surrounding counties. This multidisciplinary team is designed to help victims and their families navigate the criminal justice system. Once child abuse is alleged, the victim comes to the center, where they meet with the team, allowing the family to receive next step information from all specialties on the team. The team approach allows the child and family to get all information from one place, so the team can create a plan of action together.
Court Improvement Program (CIP) Committee	Six representatives from CPS	The CIP Committee focuses on areas that relate to the CFSR safety, permanency, and well-being outcomes, the case reviews system, and the CFSP/APSR. Please see pages 17,31, 88, 109 for details of collaboration.
Juvenile Detention Alternatives Initiative (JDAI)	Regional Mangers from Regions 1 (Rapid City) and 6 (Sioux Falls) are members of the JDAI committees in their service area. Aberdeen, Brookings, Watertown, Mitchell, and Pierre CPS supervisors	A program intended to provide alternatives to detention for youth in the juvenile corrections system.
Child and Family Services Interagency Workgroup	Department of Health employees and the CPS Protective Services Program Specialist	The workgroup meets quarterly. Areas of focus are family planning; newborn screenings for hearing and metabolic diseases; the Women, Infants, and Children (WIC) program that provides supplemental nutrition for women, infants, and children; and For Baby's Sake that provides information and resources to help women have healthy pregnancies and healthy babies, and access to oral health. The Protective Services Program Specialist provides input regarding safety of children, as well as education regarding child welfare in South Dakota.

Source	Members	Purpose
Prevention and Support Collaboration	DSS-CPS Management Team, Pennington County State's Attorney Office, South Dakota ICWA Coalition, and the Great Plains Tribal Chairmen's Health Board.	This project encourages partnership amongst local agencies to reduce the rate of children entering the welfare system by enhancing family support and prevention strategies. The focus is on identifying families at high risk of future child welfare intervention and offer voluntary support services with the goal of decreased risk of future involvement with child welfare and preserving family integrity.
National Child Welfare Anti-Trafficking Collaborative	State, county, and tribal child welfare agencies all over the United States	Work to initiate or strengthen strategies to address human trafficking and the commercial sexual exploitation of children. The collaboration was formed to provide child welfare professional the space to discuss efforts and share resources. The collaboration meeting bimonthly to hold targeted conversations on how different states are addressing tracking within child welfare agencies.
School-Based Child Abuse Prevention Program	CPS, Behavioral Health, Yankton School District, and Lewis and Clark Behavioral Health in Yankton, SD	This program will benefit families who require intervention; however, do not meet the criteria for CPS intervention. The goal is to reach families and provide services prior to a family experiencing a crisis which prevents them from safely caring for their child. In researching evidence-based models and considering the resources already in the Yankton community, Systems of Care was selected as the model for this program. Additional steps included data collection, education around mandated reporting, screening criteria of the school, and Lewis and Clark Behavioral Health educating CPS on services offered through the school and community. Collaboration continues around development around criteria and the screening protocols. Data review is planned for Summer of 2024.

II. Assessment of Current Performance in Improving Outcomes

Child and Family Outcomes

Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect.



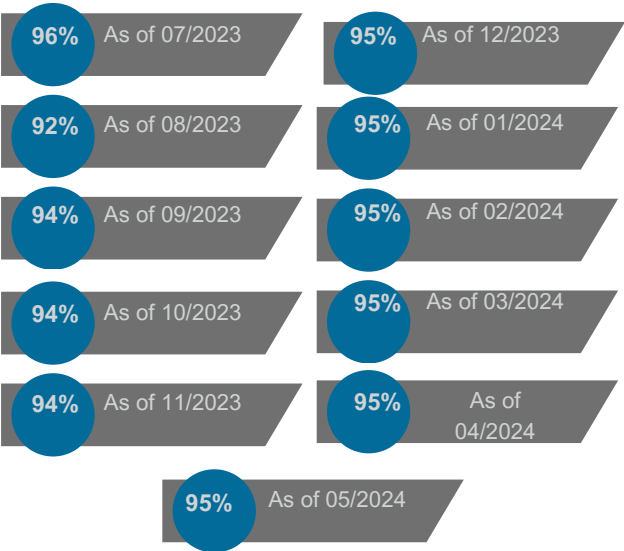
Initial contact is completed when the Family Services Specialist (FSS) has face to face contact with the alleged child victim(s). There may be circumstances where contact cannot be made with all the alleged victims within the designated initial contact time frame; however, diligent efforts must be made to meet the time frame in order to ensure present danger is assessed in a timely manner. Diligent efforts are defined as persistent, relevant attempts to have face to face contact with the alleged child victims. Types of diligent efforts would include:

- Contacted Law Enforcement for contact information (phone call to the jail/prison);
- Family visited on multiple occasions during different times of the day/evening;
- Contacted the referent regarding current family whereabouts;
- Contacted school for information of where child is registered or home address;
- Contacted housing/landlord regarding family whereabouts;
- Contacted Child Care Services for day care information;
- Collateral with EA and/or SSPA regarding family address;
- Contacted last known employer;
- Contacted family members for address.

The Family Services Specialist documents all diligent efforts to locate the family and/or children in the contact section of the Initial Family Assessment. The final determination of the sufficiency of the attempts to locate alleged child victim is determined by the Family Services Specialist Supervisor

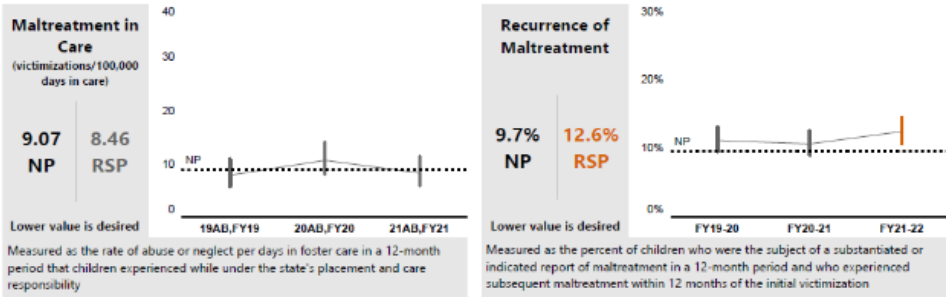
The time frame for when initial contact is made is based on danger identified in the Request for Services (RFS). When present danger is identified, face to face contact with all the child(ren) in the household must be on the same calendar day. When impending danger is identified, face to face contact with the child must be within 3 calendar days, including the Request for Services date. Time frames initiate on the date CPS receives the RFS. At initial contact, the Family Services Specialist needs to immediately assess for any indication of present danger and if identified, respond with the development and implementation of a Present Danger Plan.

South Dakota has consistently met a 95% performance of meeting initial contact timeframe with diligence considered for the past 6 months.



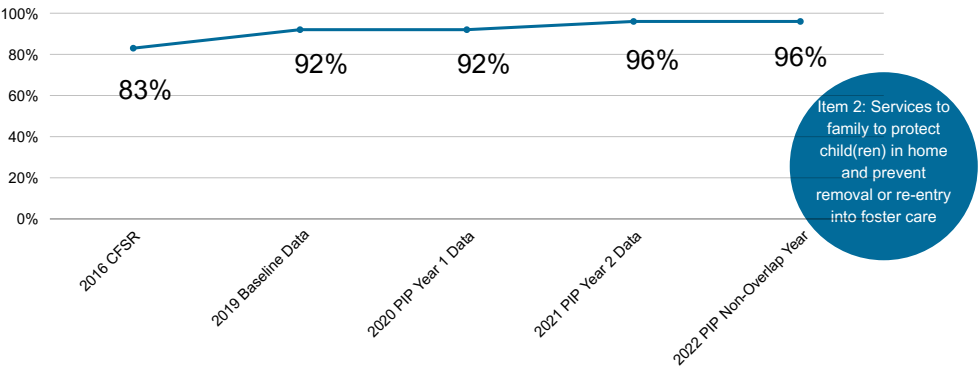
South Dakota's Data Profile for February 2024 identified Maltreatment in Foster Care as statistically no different than National Performance and Recurrence of Maltreatment as worse than National Performance.

Safety Outcomes



Child Protection Services in South Dakota strives to continue to improve outcomes for children and families to ensure children are, first and foremost, protected from abuse and neglect. CPS accurately collects data in their Comprehensive Child Welfare Information System (CCWIS) to show performance in meeting initial contact with diligence. This data is collected and analyzed each month by the Data Analysis Program Specialist and shared with the Protective Services Program Specialist. South Dakota remains steady at a 95% strength performance, which is target performance by the Children's Bureau. South Dakota has not identified any improvement goals for timeliness of initial contact and oversight will continue. South Dakota has determined a need for further analysis on recurrence of maltreatment. Safety Outcome 2 outlines strategies to improve safety outcomes for children as it encompasses prevention of entry/re-entry in foster care and risk and safety assessment. Please see Safety Outcome 2 for strategies to decrease recurrence of maltreatment.

Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate

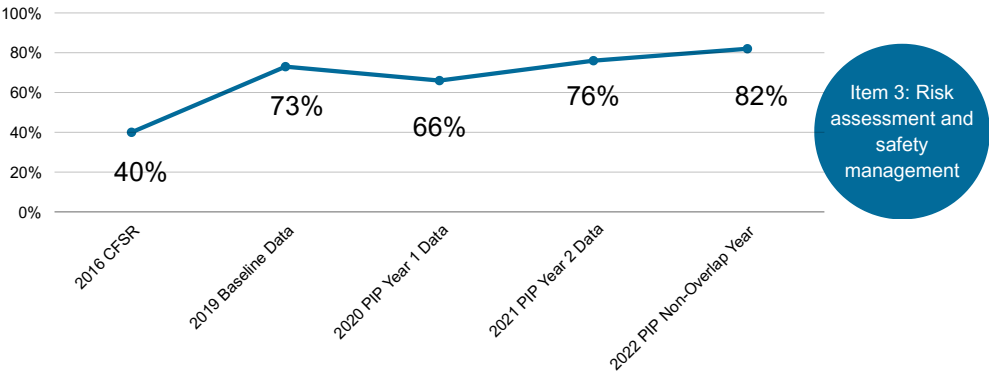


The Division of Child Protection Services' first phase of the Comprehensive Safety Intervention Model is Intake Assessment. The Intake Assessment provides the point of contact for the community to express concerns about children who may be in need of protection. The Intake Assessment launches the safety intervention process whereby children in need of protection and families in need of Child Protection Services are identified and served. The Initial Family Assessment is the second stage of the Comprehensive Safety Intervention Model. The Initial Family Assessment is a neutral approach for gathering information in response to a report of suspected child abuse and neglect. The Initial Family Assessment gathers information through interviews, observations, and reviewing documents.

The Initial Family Assessment includes:

- Making a determination about the validity of the allegations in the report;
- Determining whether or not there are any other abuse or neglect allegations;
- Making a determination about present danger; and
- Determining impending danger to the child through the identification of justification of standardized impending danger threats.

The Protective Capacity Assessment is the third stage of the Comprehensive Safety Intervention Model. The Protective Capacity Assessment is fundamentally an interpersonal intervention process that highly values and emphasizes collaboration between the agency and caregivers. The Protective Capacity Assessment is a family centered approach to case planning that intentionally and actively seeks caregiver involvement in safety management and the development of the case plan.



Child Protection Services in South Dakota strives to continue to improve outcomes for children and families in order to prevent entry or re-entry in foster care and to ensure safety is managed for children and families who are served by the child welfare system. CPS has strategically identified the following initiatives/projects to support positive outcomes.

- Intake Coaching
- CSI Policy enhancement and training
- In-Home Safety Plan Recruitment
- Family First Prevention Plan



Intake Coaching

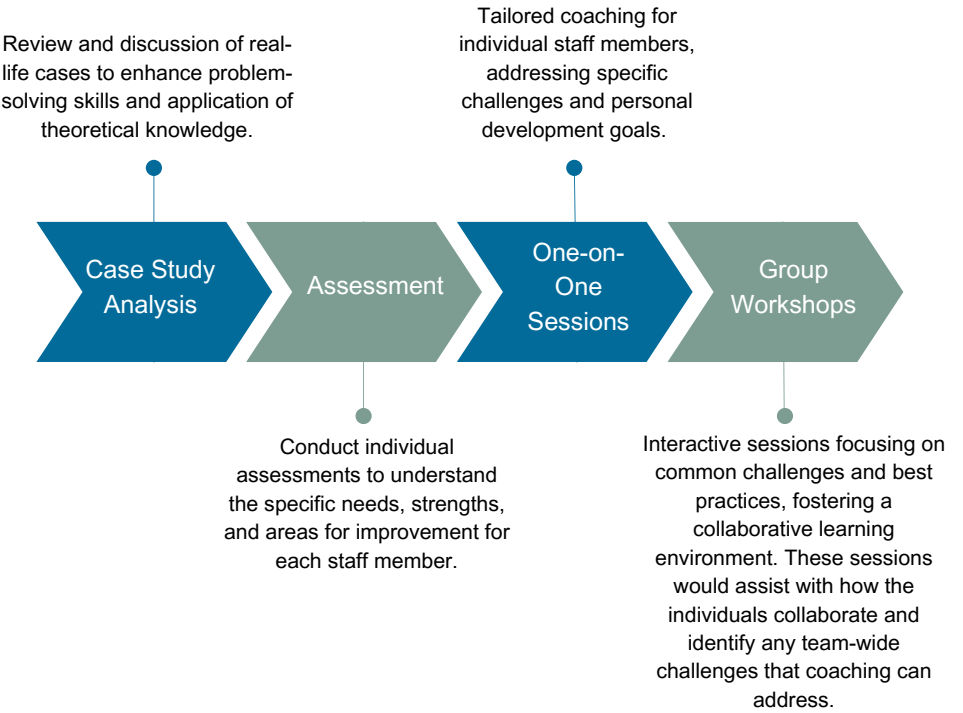
South Dakota state law requires reports of abuse and neglect to be made to Child Protection Services, the county State’s Attorney, or law enforcement. The county State’s Attorney and law enforcement are required to inform Child Protection Services about reports they receive. Child Protection Intake Supervisors and Intake Family Services Specialists receive these abuse and neglect reports. It is essential the staff are responsive to community members regarding concerns of abuse or neglect. Information collection and decision-making must be prompt, highly focused, and criteria based. The Intake Specialist must gather specific and sufficient information from the reporting party to determine the safety of the child(ren) and the next steps for the agency.

To continue to enhance South Dakota’s practice, Child Protection Services is contracting with Action for Child Protection to coach Intake Supervisors and Family Services Specialists to increase competency, effectiveness, and efficiency while continuing to adhere to fidelity to the agency’s Comprehensive Safety Intervention practice model. In doing so, this in-person coaching is needed to support the child protection workforce by reinforcing knowledge and skills, connecting Supervisors and Family Services Specialists to the agency practice model, and supporting professional development to ensure staff are more effective in their roles. The staff are located in Rapid City, Sioux Falls, and Aberdeen and the coaching will include observation of the current practice, joint planning to establish goals and expectations, skill building and problem-solving, modeling behaviors, and providing feedback.

Key areas of focus for coaching includes:

- Communication Skills: Improving communication skills, including active listening, empathy, and clear articulation of information. This is particularly important when working with families and stakeholders.
- Crisis Interventions: Providing tools and strategies for effective crisis intervention, helping staff remain calm, make informed decisions, and ensure the safety and well-being of children.
- Application of Agency Practice Model: Ensuring that all actions and decisions align with the agency’s mission, values, and best practices in line with the agency’s practice model.
- Development of Adaptive Skills: Emphasis on critical thinking, decision-making under pressure, and handling complex and sensitive cases with empathy and professionalism.
- Professional Development: Personalized coaching plans focusing on individual strengths and areas for improvement, including career advancement opportunities within the agency.
- Self-Care: Emphasize the importance of self-care, stress management, and resilience-building strategies to help staff cope with the challenges of their role.

The coaching methodology includes:



The desired outcomes of the coaching process includes:



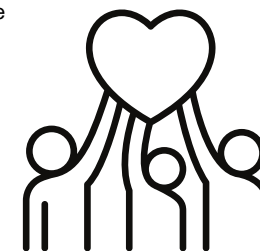
The Division of Child Protection will then utilize the coaching program, assessments, feedback, and development plans to assist in establishing a program to support continual learning within the team. This would include periodic refresher courses and updates on policy and practice.

Out of Home Safety Plan Without Custody and Modified Family Assessment Policy

The Division of Child Protection Services partnered with an outside consultant, Action for Child Protection, to review and refine the Out of Home Safety Plan Without Custody and Modified Family Assessment Policy. This collaboration allowed for a fresh perspective and expertise to be brought in, potentially identifying areas for improvement or clarification that might not have been apparent internally. Action for Child Protection recommended a safety plan meeting must occur to implement the safety plan to review safety services and considerations such as family time with the caregivers. The revisions to the policy will be implemented and staff will receive training, along with the updates to the Initial Family Assessment policy. Fidelity reviews of the Protective Capacity Assessment will occur each year in July and then Initial Family Assessment will occur each year in January. These reviews will also encompass the Out of Home Safety Plans Without Custody and Modified Family Assessment. Findings of the reviews and any modifications made to policy or training will be captured on the Annual and Progress Services Reports that follows the 2025-2029 Child and Family Services Plan.

Community-Based Recruitment of In-Home Safety Plan Providers

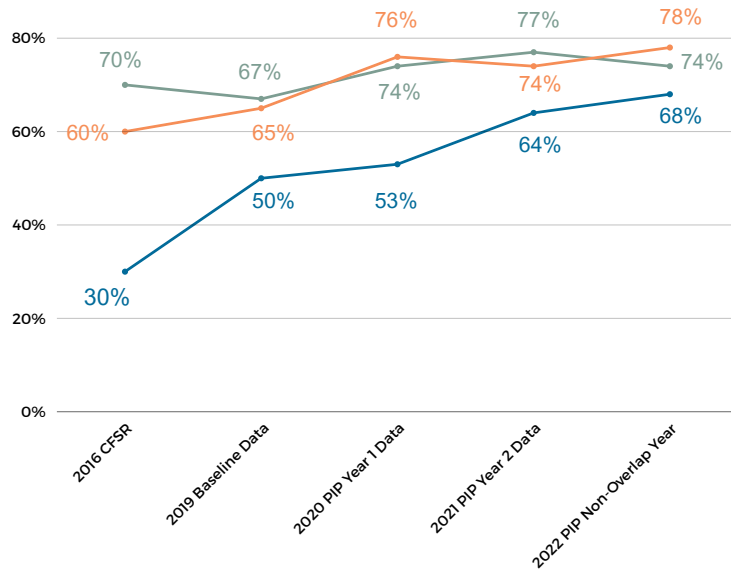
At the conclusion of the Initial Family Assessment, CPS completes a Safety Plan Determination (SPD) for children who are found to be in impending danger. When the SPD indicates the necessity of an out of home Safety Plan (placement), Conditions for Return are developed. Conditions for Return are written statements of specific behaviors, conditions, or circumstances that must exist before a child can return and remain in the home with an in-home Safety Plan. The Conditions for Return are directly connected to the specific reasons why an in-home Safety Plan could not be put into place. Often the lack of resources within the family, community, and agency to develop a sufficient in-home Safety Plan are identified as a condition requiring the child to be placed out of the home. Children deserve to be in their home, whenever it is safe to do so. CPS believes there are potential resources in local communities to build safety networks around children and families. South Dakota identified the Community-Based Recruitment of In-Home Safety Plan Providers in their 2019-2024 Child and Family Services Plan as a pilot in Region 5 (Aberdeen, Brookings, Huron, Watertown). The communities of Aberdeen, Brookings, and Huron have implemented this program. Region 5 has the highest number of in-home cases in South Dakota, with having 65% more in home cases than the second highest Region. South Dakota's next steps to implement this program statewide is to finalize policy, develop an implementation plan, and monitor and measure progress statewide. Progress of the Community-Based Recruitment of In-Home Safety Plan Providers will be tracked through the Annual and Progress Services Reports that follows the 2025-2029 CFSP.



Family First Prevention Plan

The Family First Prevention Plan will allow child welfare to be equipped to provide children and families with evidence-based prevention services. With these well-supported prevention services available, the goal is to reduce entries into foster care by allowing families to access services prior to the need for out-of-home placement. South Dakota's Prevention Plan is in development, and has focused on the areas of mental health, substance use, and parenting education. The Prevention Plan will be finalized following the Child and Family Services Plan, allowing for progress, and outcome tracking to be captured in Annual and Progress Services Reports that follows the 2025-2029 CFSP.

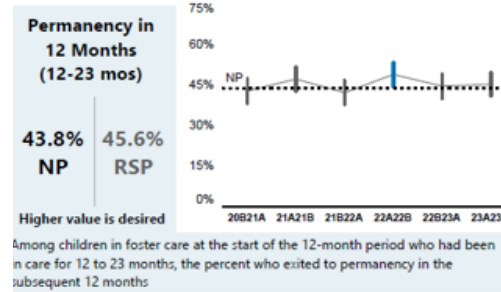
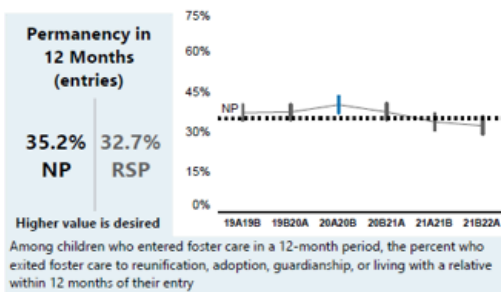
Permanency Outcome 1: Children have permanency and stability in their living situations



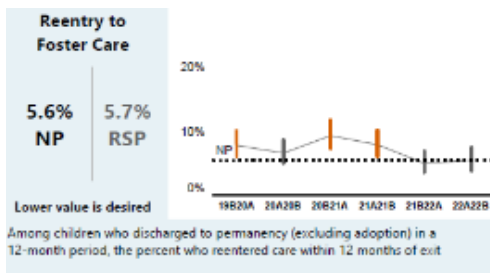
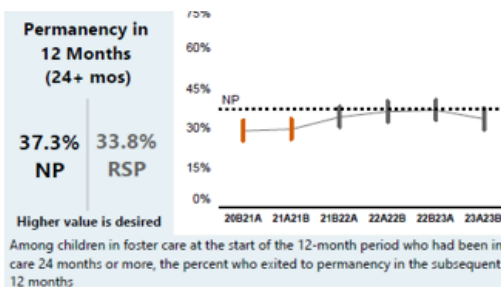
Item 4:
Stability of
Foster Care
Placement

Item 5:
Permanency Goal
for Child

Item 6: Achieving
Reunification,
Guardianship,
Adoption, or Another
Permanent Planned
Living Arrangement
(APPLA)

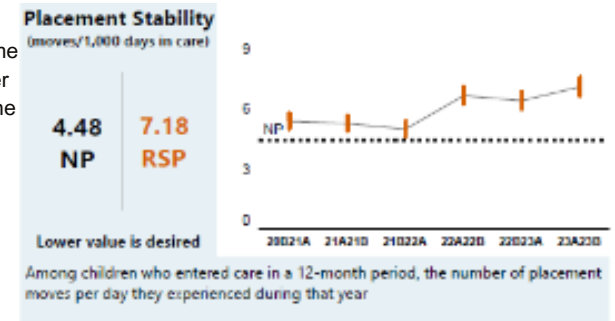


Permanency Outcomes



CPS has consistently exceeded the national average or has shown it is not statistically different than the national average for the following permanency outcomes, permanency in 12 months (entries), permanency in 12 months (12-23 months), permanency in 12 months (24+ months) and reentry to foster care. South Dakota has identified the area of need related to placement stability.

Targeted efforts and initiatives to improve performance in this outcome include increasing the pool of foster homes that can accurately match the need of the children in foster care, and enhanced matching of children to resource providers. Further information about these initiatives can be found in the Diligent Recruitment Plan.



Office of Licensing and Child Protection Services Licensing Process Redesign

Child Protection Services and the Office of Licensing and Accreditation (OLA) have worked collaboratively on recruitment, licensure, placement, and foster parent support for several years. Child Protection Services, due to the need to have coordinated efforts to enhance and improve placement stability, has worked with OLA on a Business Process Re-Design. The team is utilizing CQI methods to determine what processes are going well and what processes can be enhanced to achieve even better outcomes for children and families, including specific goals to increase placement stability. This includes large scale systemic changes, as well as smaller incremental changes that can be put into practice in the more immediate future. The full project is discussed in detail in the Foster Parent Outcome Section of the CFSP. Progress will be captured in the Annual and Progress Services Reports that follow the 2025-2029 Child and Family Services Plan.

Stronger Families Together

Recruitment and retention of foster homes is vital to ensure placement stability for children. A child's needs must be matched to a foster family's strengths and areas of expertise in caring for children. To sufficiently match the needs of a child who is in foster care, there must be a sufficient number of all types of foster homes. When improper matches are made, the placement is in jeopardy of disrupting.

In May 2021, the Stronger Families Together initiative was launched to recruit and support foster parents in South Dakota. The initiative includes a focus to recruit foster parents who can support family connections and reunification efforts. It is the fourth year of the Stronger Families Together initiative and the following principles continue to be the focus.

- All children deserve to grow up in a family where they are loved and protected.
- Foster families are needed to care for children and support their families when they are experiencing challenges that cause the children to be unsafe.
- Encouragement, support, and services are needed for parents, kinship families, foster families, and adoptive families to provide the best care possible for children.
- Families are needed to provide children a safe, stable, and permanent forever family if they cannot return home.

The following entities across South Dakota continue to work together for Stronger Families Together: Governor’s Office, DSS, CPS, OLA, South Dakota Kids Belong (SDKB), Tribal child welfare programs, foster and adoptive parents, foster care alumni, business leaders, faith-based organizations, private adoption agencies, and child placement agencies.

CPS and OLA continue to collaborate with child placement agencies and private adoption agencies to facilitate recruitment and retention activities all across South Dakota. However, there are targeted recruitment and retention groups in Region 1, 3, and 4 due to the disproportional of foster home to children in custody.

Number of Foster Homes vs. Children in Care- As of 05/31/2024						
Region	# of Foster Homes	# of Children in Care (does not include Trial Reunification)	# of Children in care excluding T.R./group/residential/Independent Living	# of Children in Kinship Care (%) *Kinship + Foster Family Rel + Foster Family Fictive	# Children in licensed Kinship Care (%) *Foster Family Rel + Foster Family Fictive	
Region 1	104	541	503	200	35	5 times as many children as foster homes
Region 3	66	167	136	43	6	2.5 times as many children as foster homes
Region 4	36	186	163	37	0	5 times as many children as foster homes

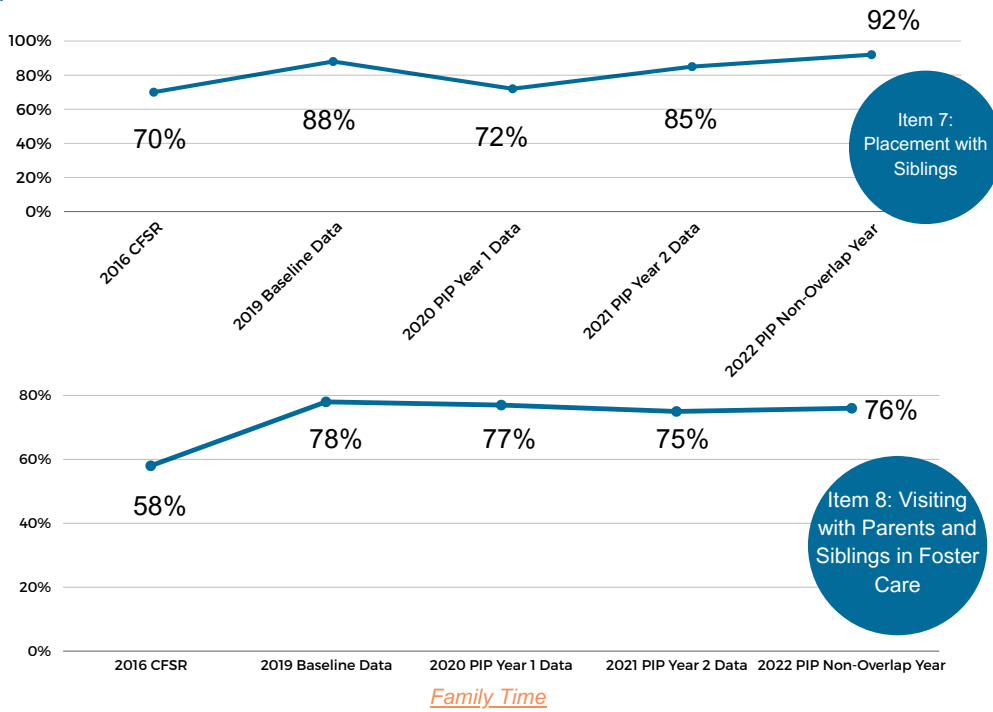
Successes and barriers of the recruitment and retention and the impacts on placement stability will be captured on the Annual and Progress Services Reports that follow the 2025-2029 Child and Family Services Plan.

Court Hearing Observation Project

The Court Hearing Observation Project was captured in South Dakota’s Round 3 Program Improvement Plan, which was finalized in March 2019. This initiative was delayed due to the Covid-19 Pandemic, therefore, did not get implemented until March 2023. The overall goal of the Court Hearing Observation Project is to get a baseline of how the child welfare system is operating and to better understand the strengths and opportunities to improve the system’s handling of child welfare cases. This is not a sole assessment on the Judge or the Unified Judicial System (UJS), the observation is of the child welfare system as a whole. The counties selected for the observation are Brown, Codington, Minnehaha and Pennington. Brown and Codington Counties have been completed; Minnehaha County is not supportive of court observations at this time. Pennington County is willing to allow this project in the court room, however, a new Judge was just appointed to Abuse and Neglect cases, therefore, UJS wanted to wait on observations. Hughes County was then selected due to their location and having a more diverse caseload. UJS and Action for Child Protection finalized their contract and surveys and observations started in April 2024. After Hughes County is completed, the team will reassess if Pennington County is ready for this project, or if another jurisdiction will be selected. South Dakota CPS and UJS acknowledges the importance of this project to ensure children and families receive quality court hearings to achieve appropriate and timely permanency, therefore, committed to continue this project through the 2025-2029 Child and Family Services Plan. At the request of the Chief Justice, findings from the observations are not being released until the observations are completed and will be released as statewide trends.



Permanency Outcome 2: The continuity of family relationships and connections is preserved for children

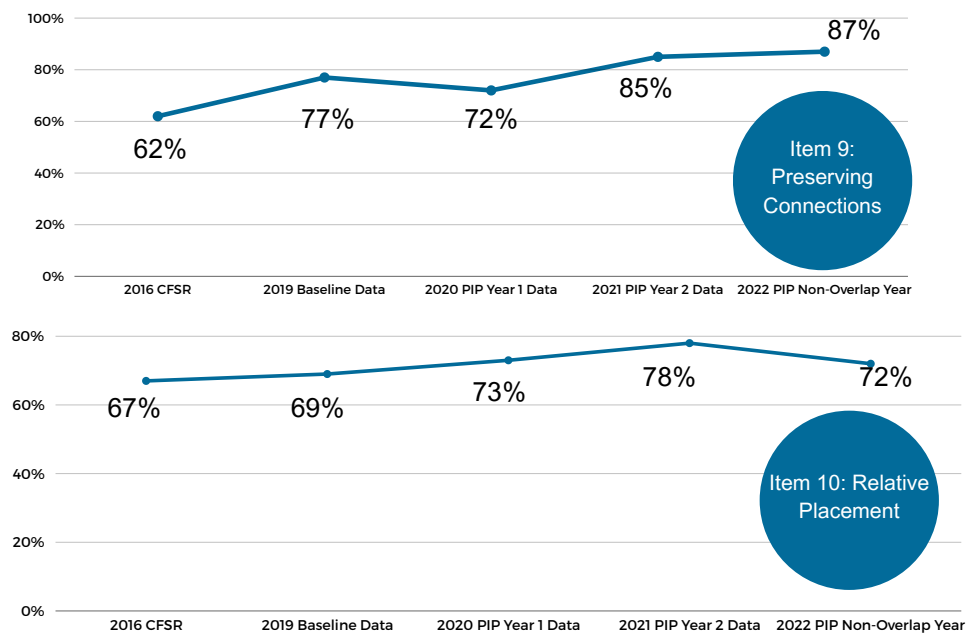


In response to the Children’s Bureau’s recommendations regarding “Family Time and Visitation” CPS researched guidelines other states have incorporated and developed policy. This policy captures family time with parents, siblings, and extended family members. CPS staff statewide received training on the revised policy as well as the Permanency and Well-Being Certification Training was updated to capture the new policy. The Family Time Policy was implemented December 2022 and the Permanency Program Specialist provided technical assistance to CPS staff and stakeholders since implementation. The first fidelity reviews for family time and siblings separated are scheduled for November 2024 and are scheduled to be completed annually thereafter. The Supervisor Advisory Group (SAG) along with the support of the CQI Team, will review the findings of the fidelity reviews and make recommendations to the Permanency Program Specialist and CQI Core on any modifications to the policy to better support frequency and quality family time. Findings of the reviews and any modifications made will be captured on the Annual and Progress Services Reports that follow the 2025-2029 Child and Family Services Plan.

Stronger Families Together: Birth Family

Stronger Families Together is described in Permanency Outcome 1 as a way to support placement stability through recruitment and accurate placement matching. However, this initiative also has a component that supports birth families and reunifications. The Stronger Families Together recruitment messaging purposely recruits foster families who are willing provide care and support to the children in foster care and their birth families, to partner in reunification efforts. When the foster families are involved in wrap services, this can also provide additional support to the birth families to assist them in pre and post reunification.

Some of the ways wrap families support birth families is by becoming safety plan providers to assist in managing the in-home safety plan, providing transportation, occasional day care, meal prep, or assisting with other identified needs. Supporting birth families through Stronger Families will be monitored and measured on the Annual and Progress Services Reports that follow the 2025-2029 Child and Family Services Plan.



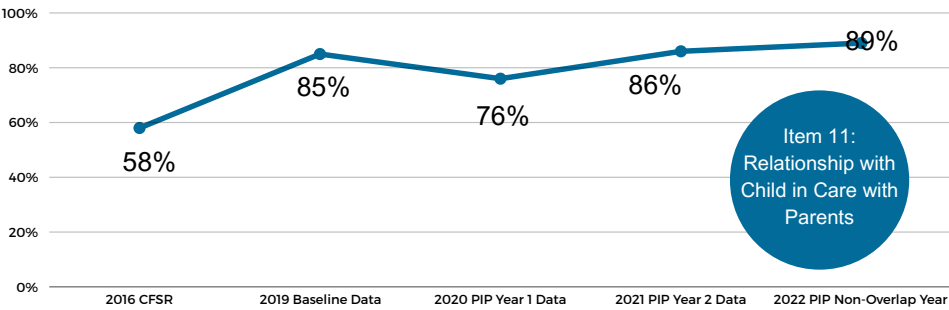
Relative Engagement and Support

A Kinship Workgroup was created in December 2021 to develop a statewide CQI plan to enhance the areas of improvement regarding relative searching. This workgroup aims to enhance engagement with children and families regarding relative searching statewide. Using the CQI process, the Workgroup identified two overall goals:

- 1. Streamlining and having a consistent statewide kinship practice; and
- 2. Establishing criteria regarding the assessment of kinship providers.

The CQI Team completed a case review of children who have been in care from July 1, 2022, through June 30, 2023, who have been in care for at least 6 months and whose initial placement was not in kinship care. A sample was calculated by utilizing a 95% confidence level with a 5% margin of error. This review was completed in May 2024. A review is scheduled in September 2024. The Kinship Workgroup along with the support of the CQI Team reviews the findings of the fidelity reviews and makes recommendations to the Permanency Program Specialist and CQI Core on any modifications to the policy to better support frequency and quality family time. Due to the close timeframe between the two fidelity reviews, the findings of both will be compared and reviewed together, and any modifications made will be captured on the Annual and Progress Services Reports that follow the 2025-2029 Child and Family Services Plan.

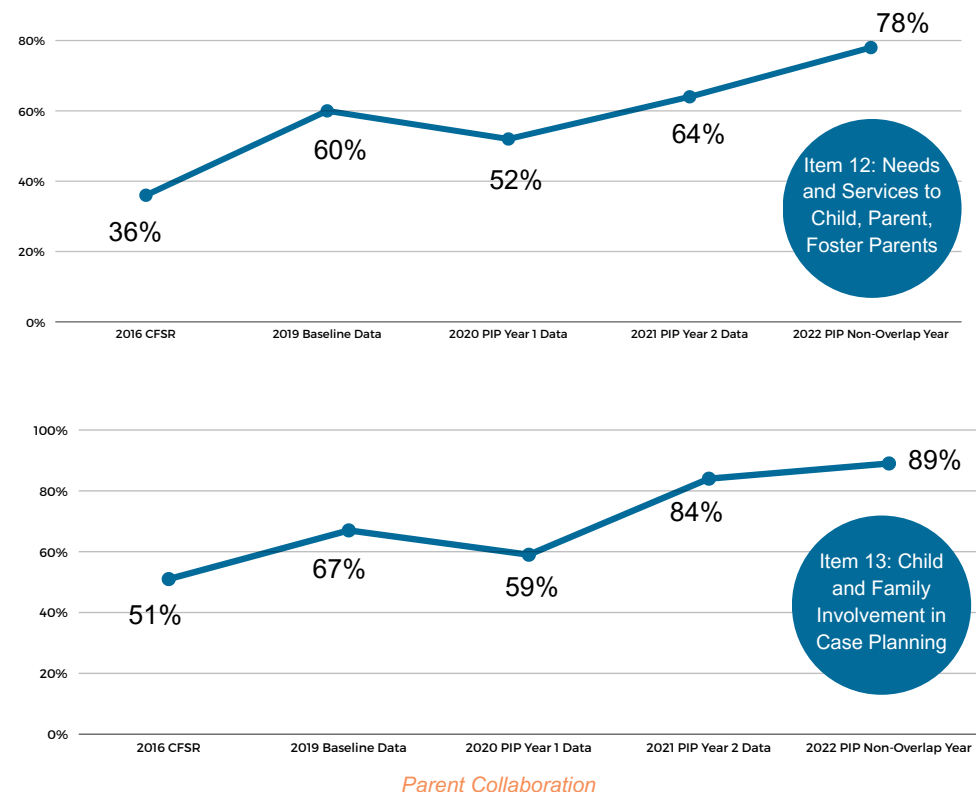
Kinship caregivers may be eligible for funding through the Kinship Navigator Grant. This grant assists kinship caregivers in learning about, finding, and using programs and services to meet the needs of the children they are raising and their own needs; and to promote effective partnerships with public and private agencies to ensure kinship caregiver families are served. This includes providing concrete support and brief legal services for families. Child Protection Services also provides reimbursement through other funding sources based on the needs of the child and family. These resources help provide placement stability in kinship care.



CPS does not provide unlicensed Kinship caregiver a monthly foster care subsidy payment while the child is in foster care. Unlicensed kinship families may be eligible for other resources when children are placed out of their home through safety planning or through a court order. Child Protection Services is responsible for making appropriate referrals to help Kinship families seek the services needed to care for a child. There are several community supports or programs through the SD Department of Social Services to assist kinship families in meeting the needs of the children in their home. If a Kinship family becomes a licensed foster or adoptive parent, they are eligible for the same monthly subsidy as other non-kinship licensed foster parents. When the Department of Social Services determines permanency through guardianship with an unlicensed kinship caregiver who has an approved home study is appropriate, the relative may be eligible for a guardianship subsidy. Eligibility is based on the same criteria as a non-kinship caregiver. Kinship caregivers are required to become licensed or approved for adoption prior to achieving permanency through adoption. The relative may be eligible for an adoption subsidy. Eligibility is based on the same criteria as a non-kinship caregiver. South Dakota is exploring the possibility of developing new kin-specific licensing/ approval standards as authorized by the Administration for Children and Families. Progress in developing these standards will be captured on the Annual and Progress Services Reports that follow the 2025-2029 Child and Family Services Plan.

The Kinship Navigator Program contract was implemented at the end of SFY 24 to be a central point of contact kinship families, regardless if they are involved with CPS or not, who need assistance identifying and connecting with resources and supports to support the child and kinship family's needs.

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



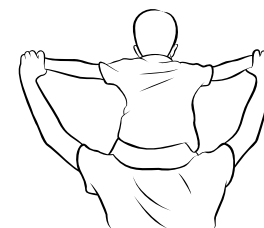
CPS has extensive efforts to collaborate with the caregivers and parents involved in the child welfare system within South Dakota. CPS's partnership with parent education partners throughout the state allow for parent input to be provided to enhance the parenting education programs. This feedback is provided through Peer Reviews which are held, at minimum, biannually for each parenting education site. There are not set months in which the peer reviews take place. Each year a schedule is developed based on the parenting education partners' preferences, availability, geography, and is also impacted by organizational changes. For example, the peer review at the Sisseton Wahpeton Oyate (SWO) occurred July 20th, 2021, and the most recent review was held February 6th, 2023. The 2023 review was held as a new instructor had been trained and began leading classes, so it was important to touch base with the site given the change in instructor.

The feedback provided includes information about the quality of the course, instructor delivery, and the needs and strengths for their communities. This provides opportunities to highlight preventative measures to further prevention services available not only through CPS, but also the Division of Child Care, which has also focused on prevention and parenting education for the birth to age 3 years range.

CPS also has an annual parent survey that is sent to all parents and caregivers that actively have involvement with CPS or have had a case closed within the last 12 months. This survey is focused on what the parent identified their needs are, how their needs were met, their relationship with their caseworker, their interactions with their caseworkers, as well as information about their type of current and prior contact with CPS.

This survey was first completed with in person survey interviews, through the lens of cognitive interviewing with 20 parents in the Sioux Falls, Pierre, and Brookings areas. 65% (13) of the parents who participated in cognitive interviewing were Native American. The feedback provided has been utilized to improve the quality of the survey, which will be sent out in July 2024, and annually. The CQI Team reviews the results of the parent surveys to target areas of strengths and needs both statewide and regionally. The results are shared with all levels of CPS staff to further efforts of quality parental engagement and collaboration. The survey findings and any progress associated with the findings will be captured in the Annual and Progress Services Reports that follow the 2025-2029 Child and Family Services Plan.

CPS has targeted efforts for father engagement. CPS has been able to add four male parenting education trainers. Two of the trainers teach Common Sense Parenting, while two others instruct Positive Indian Parenting. CPS feels that being able to have fathers instruct the parenting education to other fathers' engagement and outcomes will be increased for the fathers working with CPS. The individuals in the education courses are not only receiving the parenting curriculum but are also being provided with a positive male role model for fatherhood. CPS works to expand fatherhood curricula and programming available, and champions of fatherhood are continually sought to drive and maintain momentum on this focus area.

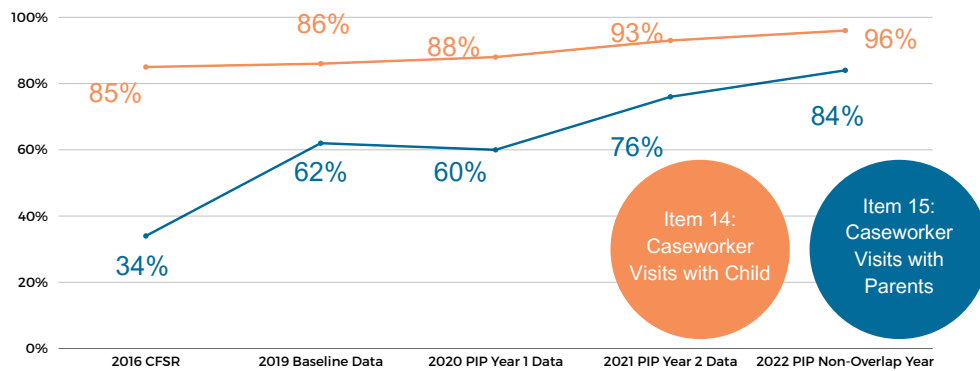


CPS also partners with the tribal stakeholders to ensure that parent and caregiver input from all communities are being sought. CPS has regular meetings and communication with tribal partners where feedback is communicated with CPS staff and leadership. This feedback is crucial to ensuring CPS preserves and grows the relationships with our tribal communities and the use the feedback to enhance practices and focus on culturally sensitive prevention techniques.

Child Case Plan and Child Caseworker Visit Fidelity Reviews

The CQI Team completed a case review of youth 14 and older who had a child case plan completed within July 1, 2023, through December 13, 2023. Youth 14 and older were targeted as they have represented a small sample in previous case reviews and CPS wanted to evaluate the sufficiency in Independent Living and Permanency outcomes for youth. This review occurred in March 2024 and was strictly a document review that did not take into consideration input from youth, parents, or caseworkers. An additional review is scheduled to occur in August 2024 and will occur in August annually.

The Supervisor Advisory Group (SAG) along with the support of the CQI Team, reviews findings of the fidelity reviews and makes recommendations to the Permanency Program Specialist and CQI Core on any modifications to the policy to better support frequency and quality of child caseworker visits and Child Case Plans. Due to the close timeframe between the two fidelity reviews, the findings of both will be compared and reviewed together, and any modifications made will be captured on the Annual and Progress Services Reports that follow the 2025-2029 Child and Family Services Plan.



Wrap Around Services to Foster Families

South Dakota Kids Belong (SDKB) is working closely with the faith communities in Sturgis, Deadwood, Hot Springs, Custer, Rapid City, Aberdeen, Yankton, Vermillion, and Sioux Falls areas to provide wrap around services to existing foster families. As of May 31, 2024, there are currently 27 wrap teams that include 378 members. Wrap services provide direct supportive services such as home/car repair, meal prep, day care, mentorship, grocery shopping/delivery, lawn maintenance and words of encouragement through members of the foster family's church or community.

- SDKB has a state wrap director who has vast experience in organizing wrap around services for foster families.
- SDKB has a regional wrap coordinator in Region 1 (Rapid City area), which is one of the three identified areas in SD that has the highest needs for recruitment and retention of foster families.
- Many churches in SD do not have organized wrap services, however, they have become foster friendly by creating an awareness for children in foster care and asking for members to engage in the mission to care for vulnerable children. These churches are recognized in SDKB's Foster Friendly App.
- Please reference America Kids Belong video highlighting a SD foster family.

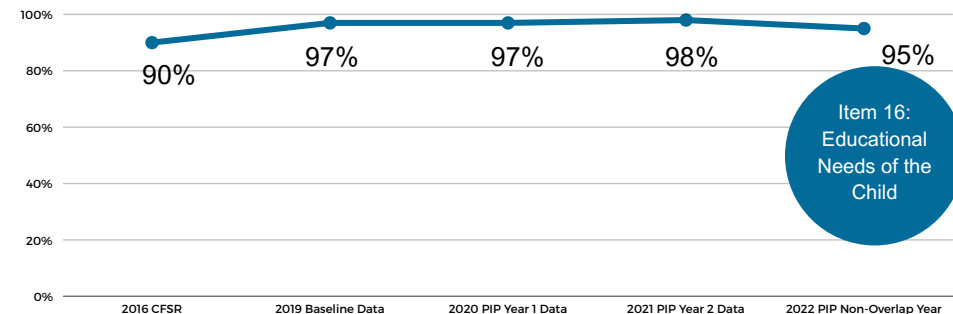


Business Partnerships

Through the Foster Friendly App, SDKB connects foster families with businesses and non-profits who are willing to support foster families by offering reduced or free products or services. These participating businesses are listed on the SDKB and Stronger Families Together website, as well as the Foster Friendly App. As of May 31, 2024, there are currently 274 foster friendly businesses and 35 foster friendly non-profits. Please reference America Kids Belong video highlighting a SD friendly business.



Well-Being Outcome 2: Children receive appropriate services to meet their educational needs



CPS developed initiatives to improve needs and services for youth. These initiatives include:

- **The Independent Living Program Specialist incorporates improvements to policy and practice of the management (tracking and planning) of educational credits for youth in care.**

The ILS Advisory Workgroup continues to discuss information collected in the ILS screen and transition survey when children leave foster care to make updated recommendations if necessary. Data collected from this reporting period indicates the following:

- 61% of youth are attending school when they transition from care.
- 35% of youth surveyed had completed the 11th grade.
- 26% of youth surveyed had completed high school.
- 81% of those youth who have not graduated stated it was a goal of theirs to graduate.
- 95% of youth stated it was a goal to continue their education after high school.

CPS has collaborated with the Department of Labor and Regulation to ensure continuity of employment training services are offered to ILS youth. Data collected from this reporting period indicates the following:

- 82% of youth had employment experience when transitioning from care.
- 37% of those youth reported being currently employed; and of those employed, 82% indicated it was part-time employment.
- **Fidelity reviews of the credit tracking management process will be completed by the Independent Living Program Specialist and Group and Residential Program Specialist twice a year.**

Ongoing fidelity reviews of the credit tracking management process are completed by the Independent Living Program Specialist and Group and Residential Program Specialist twice a year. An automated notification is sent out when the grade status information does not match in the ILS Screen and the Education Assessment Screen in FACIS. ILS narratives are often entered by Community Resource People and the education screen is updated by CPS staff. This discrepancy notification ensures the most accurate information is reflected in both screens.

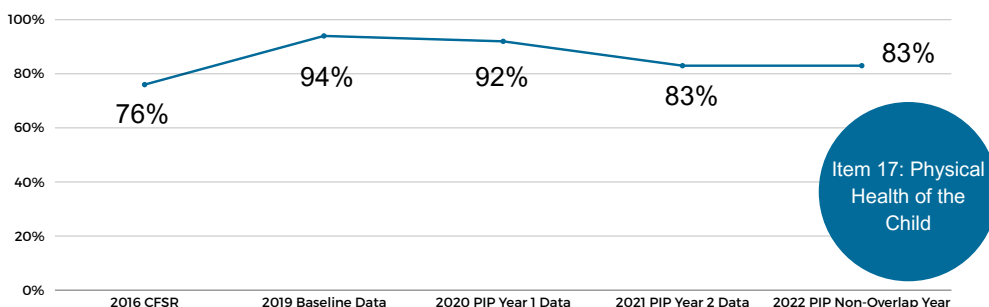
- **Provide education to staff and residential facilities on the management of educational credits for youth in care completed by the Independent Living Program Specialist and Group and Residential Program Specialist on an ongoing basis.**

The Independent Living Program Specialist presented an Independent Living training webinar during this reporting period to 125 child protection staff statewide. High school graduation, credits and the importance of the Age 16, Age 17, and Transitional Meetings were highlighted. The Age Meetings are defined as a connection between the youth and the important people in the youth's life to provide adequate time for planning and implementation of independent living services to ensure the youth is prepared for adulthood. It was stressed during this webinar the importance of extending an invitation to these Age Meetings to a school representative who can provide the youth's school credits and the specific requirements for the youth to graduate. Staff are encouraged to focus their engagement on the educational process of youth and enhance documentation of scholastic progress. Staff are also encouraged to work with providers and educational partners to help youth who have lost credits through uncontrollable factors such as school transfers, disrupted school attendance, mental health needs, learning disabilities and unexpected moves; the availability for credit recovery, tutoring, summer classes, or other alternative learning platforms to ensure that youth are leaving custody with a diploma or GED certificate.

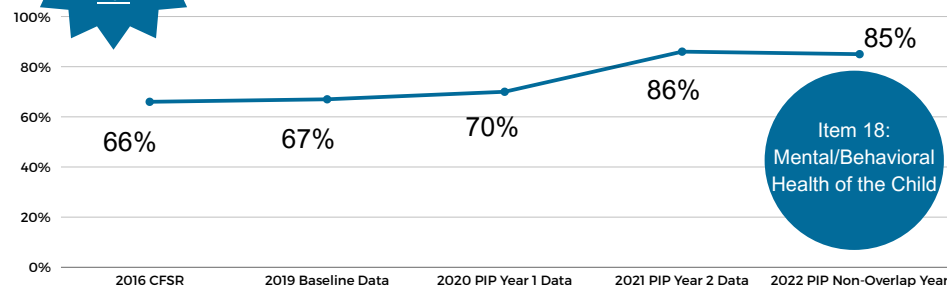
The Independent Living Program Specialist presented information on educational credits to the South Dakota Association of Youth Care Providers during their quarterly meeting. During this presentation, information was shared about the concern for low graduation rates for youth in custody with DSS over the past 5 years and the importance that DSS, group/residential and treatment providers work together to assure that youth are earning credits for classes they have taken despite the barriers with unplanned moves, placement, and discharge planning. During the presentation the providers shared that they understand the barriers for youth in foster care losing school credits and suggested that DSS reach out to the Department of Education and collaborate efforts on ways to advocate for foster youth not losing educational credits when often these issues are a result outside of the youth's control.

- **Collaboration with the Department of Education to ensure appropriate services and credit tracking are being provided to youth in care. Child Protection has a representative involved on the South Dakota Advisory Panel for Children with Disabilities to assist with this collaboration. CPS has a designated Child Welfare representative in State Office to work with the Department of Education.**

Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs



CPS' plan regarding physical and behavioral/mental health performance is outlined in the Health Care Oversight and Coordination Plan; reference this plan for further details.



Systemic Factors

Information System

Overview

Child Protection Services' Comprehensive Child Welfare Information System (CCWIS) is called Family and Child Information System (FACIS). FACIS is a statewide information system developed and maintained to collect and report data about children, family and resources served by South Dakota CPS. Quality data collection, both qualitative and quantitative, is a strength for CPS as evidenced by the information available through reports that readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care. During the 2016 Child and Family Services Reviews; the CPS information system was rated as a strength and found in substantial conformity. CPS included more detail for the comprehensive data quality plan in accordance with CCWIS requirements. The Data Quality Plan details were included with the FFY 2024 APDU completed on October 29, 2023.

Federal Report Submissions

CPS submits compliant Federal reports, which include, the Adoption and Foster Care Analysis and Reporting System (AFCARS), NYTD (National Youth in Transition Database) and National Child Abuse and Neglect Data System (NCANDS). These reports are submitted on time and with minimal errors noted. South Dakota has not been on an AFCARS improvement plan since 2019. South Dakota's last IV-E Review occurred in May 2018. The review found 1 error out of 80 cases. The review found there was a good relationship between CPS and the Court Improvement Program and FACIS was noted an area of strength. One example was IV-E eligibility is automatically ended if a 12-month review and IV-E redetermination are not entered in the system. This prevents overpayments from IV-E funds. South Dakota is scheduled for another IV-E review in April of 2026.

CPS has committed resources towards technology improvement to ensure that existing data is captured for the AFCARS requirements. CPS focused first on adding data fields to capture sibling placements and multiple Tribal affiliations for children in foster care. FACIS screens were updated to capture multiple Tribal affiliations in August 2020. FACIS captures all legal hearings and all placements for children in foster care. Reporting on these elements required only changes to the data extraction. Other additional elements were evaluated as to what information is required and how best to document the information.

Over the past year, fields and screens have been added or updated to capture information for the following data elements:

- victim of sex trafficking and report to law enforcement
- removal home information
- placement reasons
- discharge information
- pregnant/parenting
- demographics for guardianship caretakers
- adoptive mother/father changed to 1st and 2nd adoptive caretaker
- inquiry if child is Native American
- determination ICWA applies
- ICWA notification to tribes
- prior guardianship
- prior adoption
- health exam or assessment
- child's tribal enrollment

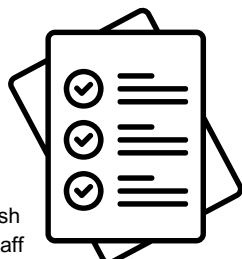
System edits were also enhanced where applicable to increase data accuracy and quality. Case Compliance reports were updated with additional information to assist staff and managers in oversight and timeliness of data entry for AFCARS reporting. Due to the quality and comprehensiveness of CPS FACIS system, many additional data elements needed mapping changes or additions to be able to capture the data for all the new elements.

The FACIS Team and Management Team members use the appropriate data quality utilities and tools provided to ensure data is accurate. These include using the Adoption and Foster Care Analysis and Reporting System (AFCARS) Data Quality, Compliance & Frequency Reports, National Youth in Transition Database (NYTD), NYTD Data Review Utility (NDRU) & National Child Abuse and Neglect Data System (NCANDS) portal programs to review data prior to submission. Any data errors found are addressed and corrected wherever possible. With the implementation of AFCARS 2.0, the National Child Welfare Data Management System (NCWDMS) portal was developed. South Dakota has uploaded AFCARS files and submitted the official files beginning with the FFY 2023A reporting period (10/01/2022-03/31/2023). All submissions thus far have been compliant. The FACIS Team and Bureau of Information and Technology (BIT) staff participated in the NCWDMS pilot phase by transmitting and submitting test files. The FACIS Team and BIT staff utilize the compliance and data quality checks to ensure data is accurate and meets data compliance rules.

FACIS Reports

Quantitative data reports are enhanced as needed based on changing requirements or areas of focus. The data reports are provided to offices/regions as they develop and implement Continuous Quality Improvement (CQI) plans in specific areas of focus. Categories for monthly reports are Adoption (7), Finance (6), Independent Living (6), Ongoing Services (7), Placements (41), Request for Service (12) and Resource Licensing (10). For example, an office may be working on a targeted recruitment plan and reports are provided regarding the demographics of children in care in their specific area.

FACIS utilizes online caseload compliance reports. These reports are real-time, interactive reports returning results directly from a worker's staff module. These reports alert staff to missing data based on state or federal rules, policy or practice. Many of these data elements are used for AFCARS including biological parents, diagnosed conditions, permanency goal, and tribal affiliation. When data is entered, the caseload reports refresh information directly from the database each time the report is accessed. Staff have consistently shared they use these caseload reports to monitor their caseloads and required data entry items.

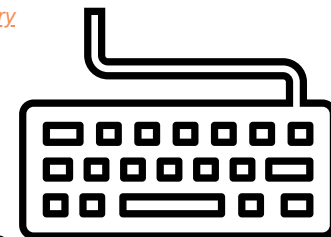


Rows on the caseload reports also alert staff to upcoming deadlines such as case plans due in the next 30 days and children who will need a visit in the present month. Workers with differing specialties have customized reports. Licensing staff have rows that return information on foster homes who have a license due and foster homes needing demographic information entered. Workers serving youth have rows regarding youth with pending National Youth in Transitional Database (NYTD) surveys and youth needing an answer if they are a parent or not. These reports assist staff in managing due dates and ensuring required data is entered.

Accurate and Timely Data Entry

CPS has policy to inform staff when certain data points must be entered into FACIS.

- Data related to placements must be entered before monthly batch process runs in order to ensure timely and accurate potential claim generation.
- Caseworker visit narratives must be entered within 48 hours of the visit.
- Abuse and neglect reports must be submitted for screening within two working days and screened within two working days following the submission.
- Placement and respite care activities must be entered by the second working day of the new month to be picked up for payroll.
- IV-A Eligibility screen must be completed the same day initial placement is entered.
- Medicaid screen must be completed the same day initial placement is entered.
- Biological parent screens must be completed within 14 days of placement.
- Discharges from care must be completed within 30 days of discharge date.
- Placement moves must be completed within 30 days of move.



To have compliant Federal submissions, caseworkers must maintain timely data entry in the FACIS system. CPS utilizes the FACIS data reports to submit each year's budget request for funding. If reports must be re-run for prior periods the data is consistent, which supports the state's assessment that the information is entered timely and accurately. Please see attachment 1 for screen shots showing the screens and fields where this information is maintained. These are mock cases and do not use or reflect actual client, family, or individual data.



There are appropriate date edits, range checks and prompts for critical or incomplete data on screens to prevent inaccurate or inconsistent dates. For example, the system will not allow a hearing disposition date to be prior to the hearing date. Initial contact with a child cannot be prior to the intake date. Date fields that document contact/visits with children and official findings cannot be a future date. Caseworker Visit narratives require completion of all defined program and policy areas such as Safety and Permanency.

FACIS has hyperlinks on some fields which the user can click to gain more information or instructions regarding the data to be entered in the field. For example, each NYTD service on the independent living screens has a hyperlink with the federal definition. CPS recently added a hyperlink for adjudicated delinquent on the independent living screen. Hyperlinks have been added for AFCARS elements such as discharge reason definitions and ICWA elements.

CPS utilizes the biennial reviews from the Data Quality Plan to verify accuracy of specific data points. CPS has a process of gathering additional information during case reviews and ensuring staff have an opportunity to correctly enter data (both fidelity reviews and regional reviews). As part of each fidelity review, elements included in the fidelity review are also reviewed for accuracy within FACIS. An example would be the Case Plan date in FACIS matches the signature date on a case plan. See Case Reviews section for more information on fidelity reviews.

Case reviews rationale statements includes specifics to what is missing to guide staff. CPS gathers additional information during case reviews and staff are afforded an opportunity to correctly enter data. This process occurs during both fidelity and regional reviews. Please see the Quality Assurance section for more details.

Even though South Dakota is meeting the 90% requirement for AFCARS elements, CPS is reviewing NCWDMS and sending data points out to local offices if information is missing. Prior to submission, Program Specialists are reviewing files and reach out to local offices to ensure data is entered correctly and complete before submitting.

CPS Management Team staff, including Program Administrators, Regional Managers, and Program Specialists, review reports in their specific areas for accuracy. For example, the ICWA Program Specialist reviews the ICWA report monthly and works with offices to ensure information is entered timely to be provided to the tribal entities.

Supervisors and Regional Managers utilize data reports for ongoing management of caseloads and due dates. Many reports highlight data points that are missing by displaying Unknown, Not Entered or blank fields. Supervisors and Regional Managers are responsible for qualitative checks to ensure accurate, timely and complete data for the cases they oversee. The CQI Team also reviews reports to ensure accurate and timely data entries. For example, the CQI Team monitors the status of caseworker visits and notifies CPS Management Team of the status of caseworker visit data entry approximately twice each month. Regional Managers then follow up with their offices regarding missing data.

As each AFCARS reporting period nears, FACIS Program Specialists run test files to ensure accurate and complete information. FACIS Program Specialists are reviewing those files along with CQI Program Specialists. Information on areas where the percentages are lower but still meeting the 90% requirement are provided to CPS Management Team and/or local offices to ensure data is entered correctly and complete prior to submitting the official AFCARS file. If any data element happens to be below the 90% compliance in a test file, the data points are discussed during weekly CPS Management Team meeting to address the missing information and plan to get the information entered timely.

Preparation of public data requests and internal data quality or fidelity reviews demonstrate information related to removal dates, foster care entry dates and exit dates. Further, Child and Family Services Reviews (CFSR) show these data points are accurate. CPS has not had the removal date, foster care entry date, or exit date conflict with FACIS in a review using the Online Monitoring System (OMS). Reviewers have not notified QA staff that FACIS information is incorrect for these data points. Since the FACIS system processes payments to providers in addition to supporting reporting, entry and exit dates must be entered timely and accurately. If not, payments would either be made incorrectly or be delayed due to errors.

In State Fiscal Year 2023, 99.7% of Payments were processed correctly due to accurate and timely data entry

FACIS Program Specialists monitor data as part of answering contacts via the FACIS Help desk. FACIS Program Specialists are part of CPS Management Team and are expected to maintain knowledge and expertise in current policy, rules, federal rules and requirements for data entry. While responding to help requests, FACIS Program Specialists are mindful of rules that apply and are attentive to data that is not in compliance. For example, when responding to a request for data changes on placement information; FACIS Program Specialists review the placement history. If there are additional data entry items that are not in compliance; staff work with the local office to fix the item(s) while educating staff and Supervisors regarding the error(s).

FACIS Program Specialists also monitor and evaluate trends regarding incorrect or erroneous data entry. When trends are found, FACIS Program Specialists consult with CPS Management Team to determine if changes or edits are needed in FACIS. These trends have helped inform Management Team regarding ongoing FACIS training sessions. CPS uses CQI process to determine if a trend is localized to a specific area or a statewide trend. From there, CPS uses CQI to process to determine any needed changes to effect improvement.

2025-2029 Information System Goals

South Dakota CPS takes a proactive approach to ensure their information system is kept up to date and relevant to accurately tell the story of children and families experience who enter the child welfare system, as well as staff's workload and caseload. The following goals have either continued or were added to the current CFSP.

1

Enhance CPS Information System to capture data around danger threats and present danger planning.

2

Enhance quality of data to collect and allow for analysis of Conditions for Returns prohibiting children from moving to trial reunification.

3

Enhance data reports distributed to judicial partners.

4

Complete CQI process on existing reports to ensure the information presented is still relevant and identify if any enhancements are needed.

5

Enhance FACIS to assist with caseload/workload analysis.

CPS develops and implements any needed improvements and modifications to FACIS to support Federal and State reporting and support the State's policy and practice. CPS will continue to develop functions in the system for any updates to federal requirements such as AFCARS, NYTD, IV-E Eligibility and funds reconciliation. As South Dakota CPS practice is enhanced in safety, permanency, and well-being, the necessary system changes to support the program are made. The program changes necessary in CPS for best practices will drive system changes. The system will not drive the practice used to deliver services to children and families.

Child's Written Case Plan

The written Child Case Plan provides a clear understanding of the child's permanency goal, strengths, needs, and related services necessary to address needs; and to assess how well the placement resource can provide for the needs and safety of the child. The Child Case Plan provides accountability for team members to complete services needed to meet the child's needs and achieve his/her permanency goal. The Child Case Plan provides an ongoing assessment of the child's strengths, needs, and activities (services) to improve needs and safety of the child in placement. Suitability of placement is assessed through least restrictive, proximity, and placement stability. Evaluations to the Child Case Plan captures changes in the child's goal, suitability of the child's concurrent plan, and the child's placement stability. Monitoring the child's progress through the evaluation provides a clear picture of how the child is progressing throughout placement and ensures prompt, thoughtful decision making surrounding the child's needs.

Functionality and usability of the Child Case Plan was thoroughly assessed from August 2014 through February 2019 through South Dakota's CQI process. Please see 2020-2024 Child and Family Services Plan and subsequent Annual Progress Services Reports for more details. The current Child Case Plan auto-populates any medications (physical health and mental/behavioral health) that are captured on the pharmacy claim screen in FACIS. This screen is an interface with Division of Medical Services that identifies medications prescribed to children in foster care covered by Medicaid. The Child Case Plan also auto-populates information from the child's health, education, and independent living assessment screens from FACIS into the Child Case Plan. The Family Services Specialist must review the information that is auto-populated by FACIS to ensure the information is correct and up to date. If not, the FACIS screens and Child Case Plan document must be updated.

The development of the Child Case Plan is completed jointly with parents, the child, placement resource, and others critical to implementation of the Child Case Plan. The Child Case Plan is completed after the Family Services Specialist has sufficient information relating to the following:

- Child's strengths,
- Child's needs
- Appropriate services are provided to the child to address identified needs
- Needs and services include independent living and transition to adulthood planning for youth 14 and older (if applicable).
- Identifies the child's permanent and concurrent goal, and
- Reason(s) resource placement type was selected and related suitability of this placement (least restrictive).
- Close proximity to the parent(s)/caregiver(s)
- Placement supports and stability

Parent engagement is essential to initial and ongoing case planning. Parental engagement is monitored and reviewed by the CQI Team through Caseworker Visit and Child Case Plan fidelity reviews and the Parental Capacity Assessment (PCA) fidelity reviews. Further information about parent engagement, input, and collaboration is discussed in detail the Well-Being 1 Outcome.

The following key areas regarding strengths and needs documented include:



The Initial Child Case Plan is due by the 60th day the child is in custody. FACIS tracks children in CPS custody who have a completed Child Case Plan. CPS Supervisors, Regional Managers, and Program Specialist are provided a compliance report that identifies children who have been in care for at least 60 days and have no Child Case Plan each month. This is provided at statewide and regional levels; it provides the overall performance as well as details to identify specific children. July 1, 2023-May 31, 2024, 75% of children in care 60 days or more had a written child case plan. The denominator is all children in custody over 60 days during that timeframe and the numerator is the population of children who have a completed written child case plan.

Periodic Reviews

South Dakota CPS received an overall rating of Area Needing Improvement for periodic reviews based on information from the statewide assessment and stakeholder interviews for the 2016 Child and Family Services Review. Information in the statewide assessment and collected during interviews with stakeholders indicated periodic reviews occur by courts and by administrative review. Administrative reviews are conducted by the Permanency Planning Review Team (PPRT). In one large region of the state, the PPRT conducts all periodic reviews, while in other regions, the PPRT conducts the review only in those cases where the courts do not. There is a provision in state law, SDCL 26-8A-24, that requires the court to hold review hearings of adjudicated abused and neglected children every six months. There is another provision in state law, SDCL 26-7A-19, that covers situations where an adjudication has not been completed but a child continues in care. If the child is in temporary custody of the Department of Social Services and has not been adjudicated as an abused or neglected child, the court shall review the child's temporary custody placement at least once every sixty days.

To ensure the case review requirements are met, those CPS offices where the court does not hold review hearings every 6 months must have a Permanency Planning Review Team (PPRT) for review of all children in legal custody, including those cases where CPS has been awarded placement and care responsibilities by a Tribal Court. This includes children in kinship care and children who have been returned home for a trial home visit.



The PPRT is required to review every child in care every 6 months until the child is no longer in custody. Cases where parental rights have been terminated and the child is placed in a pre-adoptive home waiting finalization, must also be reviewed. The PPRT shall consist of a CPS Supervisor, the Family Services Specialist, a placement resource representative, and a community person unrelated to the delivery of social services to children in foster care or their parents. It is the requirement of the Supervisor to serve as chairperson of the team. The review is open to the participation of the parents, foster parents, pre-adoptive parents, tribal

representatives (if applicable), or relative caretaker of the child. It is the duty of the Supervisor to certify that all participants have been notified and that all reasonable efforts have been made to secure their participation.

Changes were made to the FACIS case compliance screen for PPRT tracking. The definition has been updated to consider the new Permanency Review checkbox on the Client Legal Screen. If a legal hearing has this box checked, Case Compliance will read this as satisfying the PPRT requirements. Offices that have regular hearings on a timely schedule will no longer need to add separate legal hearings - one of the hearings and a PPRT Administrative Review. The initial PPRT or review hearing is due six months after a child's entry into foster care. Subsequent review hearings or PPRT's are due six months from the previous review hearing. If the review hearing or PPRT is late, the six months starts counting from the date of that review. Children will show on the Case Compliance screen four months before the PPRT or review hearing to allow time to schedule the review hearing or PPRT.

CPS completes an annual survey to stakeholders to gather input on how the child welfare system is performing on meeting the needs of children and families. In 2023 there were 102 stakeholders surveyed, out of those 53% (54) were involved with the court system. 98% of stakeholders who are with the court system indicated PPRT's are occurring every 6 months for children in the foster care system. The 2024 stakeholder survey is scheduled to go out in July of 2024. CPS received feedback from the Children's Bureau regarding the survey and it was updated to capture the role of the stakeholder as well as enhanced to collect more targeted data points regarding permanency.

Permanency Hearings

South Dakota CPS received an overall rating of Area Needing Improvement for permanency hearings based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and collected during interviews with stakeholders showed that permanency hearings are happening regularly for children in State Court, however not in Tribal Court

SDCL 26-8A-22 (Final decree of disposition—Permitted disposition when parental rights not terminated—Annual permanency hearing for child in foster care) and SDCL 26-8A-26 (Termination of parental rights—Return of child to parents or continued placement—Annual permanency hearing for child in foster care) state that in no case may a child remain in foster care for a period of more than twelve months from the time the child entered foster care without the court holding a permanency hearing and making a dispositional decree. The court is to review the child's permanency status and make a dispositional decree every twelve months if the child continues in the custody of the Department of Social Services. As part of the permanency hearing, the court shall determine whether the State has made reasonable efforts to finalize the permanency plan that is in effect.

CPS policy regarding permanency hearings mandates staff must request a permanency hearing for every child that has been in the Department of Social Services care for 12 months, and the child must have a Dispositional (Permanency) Hearing on or before the 12-month anniversary of the child's entry into foster care. There must be a Permanency Hearing requested every 12 months if the agency has custody, or placement and care responsibility.

Data from the 2023 stakeholder survey indicated that 100% of stakeholders who are with the court system indicated permanency hearings are occurring every 12 months for children in the foster care system.

Periodic Review and Permanency Hearing Goals

1

Aside from the caseworker compliance reports, CPS is collaborating with BIT to build a report that will let the Permanency Program Specialist and Regional Managers see upcoming PPRT 180 days in advance. This report will be run monthly to ensure it captures the most updated information.

2

An additional report is being developed to show the percentage of PPRT achieved timely in any given timeframe. The report is designed to capture the initial PPRT due from the child's entry into foster care (Adjudication or 60 days after placement, whichever comes first). Then the report will capture subsequent PPRT's from the date of the most recent home.

3

The data for these reports has historically been collected in FACIS, however, there wasn't a report to show the performance. These are being designed to show the statewide and Office/ Region performance. These reports will also capture, age, race, placement service type, length of time in care, court jurisdiction, if the child is in state or tribal jurisdiction, initial permanency goal, and current permanency plan. These specific data points will allow the CQI team to identify any trends relating to timeliness of PPRT's.

Termination of Parental Rights

South Dakota CPS received an overall rating of Area Needing Improvement for termination of parental rights based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and collected during interviews with stakeholders indicated there is not a consistent statewide process for filing termination of parental rights (TPR) petitions. CPS provided data showing that timely filings of TPR petitions did not occur in several cases. Stakeholders said termination proceedings do not occur timely for Native American children.

Not filing timely TPR petitions was captured in the South Dakota Program Round 3 Improvement Plan under Goal 2, Strategy 4, a collaboration with the legal systems to implement a petition specific to termination of parental rights to comply with the Adoptions and Safe Families Act. The TPR petition was developed and then sent out by the Executive Director of the State's Attorneys Association on March 1, 2019.

CPS must request the State's Attorney or Tribal Prosecutor to file a petition to terminate parental rights when a child has been in foster care for 15 of the most recent 22 months. The State's Attorney and Tribal Prosecutor file the petition.

The exceptions to the provisions are as follows:

- The child is being cared for by a relative.
- The Case Plan documents a compelling reason for determining that filing such a petition would not be in the best interest of the child.
- Not all the services in the Case Plan that are necessary for the safe return of the child to the parent's home have been completed but progress toward the goal is being made and is documented.
- The Department must document any compelling reasons for not filing a petition to terminate parental rights in the child's Legal Screen within FACIS.

SDCL [26-8A-21.1](#) allows the court to not reunify a child with the parent for certain circumstances including those felonies specified in Adoption and Safe Families Act (ASFA). SDCL [26-8A-21.2](#) requires the court to hold a permanency hearing if reasonable efforts are not provided and further requires the court to consider termination of parental rights, guardianship, placement with a permanent relative, or determine if there are compelling reasons to not enter a disposition that includes any of those options. SDCL [26-8A-26.1](#) allows the court to terminate parental rights for any child that has been abandoned for 6 months or longer. CPS policy requires a petition for termination of parental rights be filed on an abandoned infant as defined by State law. State law requires that children be appointed attorneys in abuse and neglect court actions to represent the interests of children.

Termination of Parental Rights Goal

1

There is currently a report in FACIS regarding children who have been in custody 15 of the most recent 22 months. This report currently captures, the date the TPR petition was filed, when TPR occurred for the mother and father, and what, if any, compelling reasons to not file a termination of parental rights petition. This report is being updated to capture the statewide and Office/Region performance. This report is also being updated to capture, age, race, placement service type, length of time in care, court jurisdiction, if the child is in state or tribal jurisdiction, initial permanency goal, and current permanency plan. This report is also being updated to capture exceptions to provide reasonable efforts under the Adoption and Safe Family Act. These specific data points will allow the CQI team to identify any trends relating to timeliness of permanency hearings.

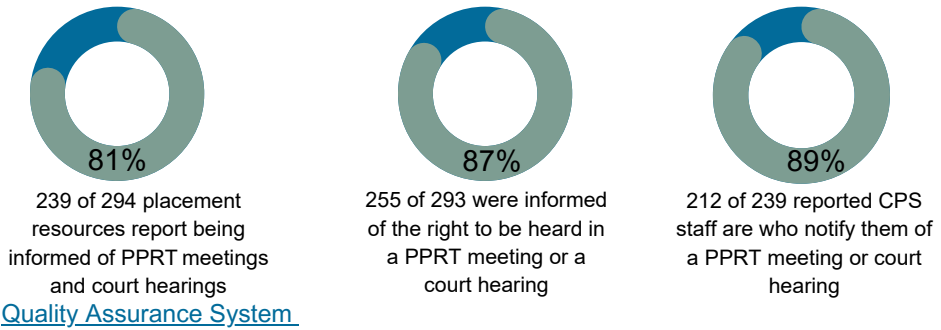
Notice of Hearings and Reviews to Caregivers

South Dakota CPS received an overall rating of Strength for notice of hearings and reviews to caregivers. Findings were determined based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and collected during interviews with stakeholders showed there is a process in place to notify foster parents, adoptive parents, and relative caregivers of reviews and hearings. Written notices are provided to caregivers. The written notice informs caregivers of their right to be heard in any review or hearing.

CPS has a written policy regarding the "Notice to Out of Home Providers". This policy can be found in the Legal section, of the CPS Procedures Manual. The policy states: "It is the FSS responsibility to assure that the foster parent, pre-adoptive parent, or relative caregiver, receives written notice of all hearings regarding the child placed in their home. The provider must also be given the opportunity to provide a verbal presentation or a written statement or report to the court."

In June 2007, the Chief Justice of the South Dakota Supreme Court gave a directive, by letter, to all Circuit Court Judges to ensure foster parents, pre-adoptive parents, and/or relative caregivers receive notice of hearings. CPS policy requires the Family Services Specialists offer the placement resource the option to be heard orally in court, submit written comment, or have their comments included in the court report.

Policy also requires the Supervisor to ensure all participants are notified by letter. Placement Resource providers can be reimbursed for travel for attendance at PPRTs. Placement Resources and stakeholders are surveyed on how often placement resources are informed being informed of PPRT meetings and court hearings regarding children placed in their homes. In SFY24, 342 placement resource providers were surveyed.



The Department of Social Services is state administered, and state operated. There are 19 CPS offices providing services to all counties in the state except those areas under the jurisdiction of an Indian tribe which has a tribal child welfare program and a current agreement with the State. South Dakota is divided into 66 counties. Oglala Lakota County, which is within the Pine Ridge Reservation, is the only county where CPS does not have at least partial service responsibility.

In April 2008, CPS implemented the Safety, Permanency and Wellbeing (SPWB) Reviews Quality Assurance program. In January of 2019 it was updated to the Regional Review Quality Assurance program as cases were reviewed at a regional level instead of an office level. Each year, all seven regions in the state are reviewed.

South Dakota has a Quality Assurance policy that outlines Continuous Quality Improvement and Outcomes policy and practice that describes how the CQI system functions in South Dakota.

South Dakota CPS received an overall rating of Strength for the quality assurance system based on information from the statewide assessment in the 2016 Child and Family Services Review. In the statewide assessment, CPS provided enough information to show the quality assurance system is functioning in the jurisdiction where the services included in the CFSP and APSR are provided. CPS conducts quality assurance reviews and uses reports from CCWIS to evaluate the process. Reports are accessible to all staff and reports and case review results are used to implement improvements and monitor progress. During the 2016 Child and Family Services Review (Round 3), CPS chose to have a State- conducted CFSR. South Dakota completed PIP reviews utilized existing staff as reviewers and successfully graduated off the Round 3 PIP. South Dakota has prioritized CQI and developing a consistent review team for CFSR reviews and interval review processes. South Dakota is currently capable of completing a State-Led Review for Round 4, however, has chosen to completed a CB-led Review in order to focus on developing the CQI Team. The full time review team will be onboarding by the beginning of 2025 and will support South Dakota in being State-led for future Child and Family Services Reviews. Please see attachment 2 for an overview of South Dakota CPS major QA initiatives.

The five components essential to a well-functioning CQI system in relation to CPS' CQI Program are detailed below. A description of strengths, concerns, and enhancements are included within each section.

Foundational Administrative Structure

The CQI Core Team has been operational for twelve years. South Dakota Child Protection Services Continuous Quality Improvement (CQI) Plan defines a three-tiered structure. Although these tiers operate separately, they are interconnected. The first level developed was the Core Team which is comprised of the Division Director, Assistant Division Director, CCWIS staff, and State Office staff members. The second tier developed was the Supervisor's Advisory Group (SAG) which consists of a supervisor from each of the seven regions within CPS. The final tier to be fully developed is the Regional CQI Teams.

South Dakota CPS is actively developing a full time CQI Team. The structure to the CQI Team consists of the Administrator of CQI and Outcomes overseeing the CQI team. There are two Program Specialists who operate the information system under the CQI team, a Data Analyst Program Specialist, and five CQI Program Specialists. The CQI Team is responsible for Regional Reviews and CFSR Review, development the Child and Family Services Plan, Annual Progress Service Report, and Program Improvement Plan, completing fidelity reviews to inform strengths and opportunities for improvement regarding policy and practice, revising the CPS policy and procedures manual, and overseeing performance outcome and the local and state level.

The CQI Team is designed to support each tier of the CPS CQI System. After the CQI Team completes case reviews on every Region, they review the effectiveness of policy and practice based on findings in the case reviews. They present findings to the Program Specialist who oversees the specific program and collaborate on any needed policy revisions. If training is what is needed, they collaborate with the Learning and Development Program Specialist on what areas of training need to be enhanced.

Continuous Quality Improvement System

Continuous Quality Improvement (CQI) Core Team

The Continuous Quality Improvement (CQI) Core Team has been operational for fourteen years. The CQI Core Team's vision is building capacity in all tiers in the CQI System to confidently apply the philosophy of CQI statewide. CQI Core Team meetings are scheduled monthly, and updates are provided at the Management Team/Supervisor meetings. CQI Core Team gathers data on outcomes, analyze data to determine next steps, and initiate any policy change needed. The Administrator of CQI and Outcomes leads the CQI Core team and keeps the team updated on trainings related to CQI and resources to help support the CQI System.

Supervisor Advisory Group (SAG)

The Supervisor Advisory Group (SAG) was developed in November 2010. This group consists of at least one supervisor from each Region. When Child Protection Services developed their CQI plan in 2012 SAG was identified as being a tier of CPS's CQI System. In May 2022 the SAG group analyzed ways to revitalize SAG to ensure the group is functioning at their full potential and applying the CQI philosophy to projects.

Regional CQI Teams

Between the second and third round of the CFSR, the teams were considered staff in the local offices. Since the completion of round three in 2016, CPS enhanced their collaboration with stakeholders in each local office as a part of the CQI team. One of the overarching goals of the 2020 – 2024 Child and Family Services Plan is to improve communication between partners of the child welfare system. This includes stakeholders as reviewers, a survey to them, and CQI meetings with the stakeholders. The CQI Team releases regional assessments to capture the performance outcomes of the latest Regional Review as well as results of fidelity review, stakeholder survey results, parent survey, and staff survey results. This gives a comprehensive view of how the region operates and what areas to focus CQI plans on. The regional assessments are provided to stakeholders and included in the office's CQI meeting with stakeholders.

Quality Data Collection

Quality data collection is the foundation of a fully functional CQI system. Primary sources of quantitative data include FACIS CCWIS Reports, AFCARS, NCANDS, NYTD, and state data profiles. Qualitative data is gathered through several avenues, including case record reviews, peer reviews, licensing renewal studies, parenting education outcomes data, customer satisfaction surveys, supervisor surveys, and foster parent surveys. CPS case record review process (which is more fully discussed in the Case Record Review Data and Process section) is referred to as Regional Reviews. Prior to Regional Reviews, reviewers receive training on the 2022 Onsite Review Instrument and Instructions (OSRII) to promote consistency across reviewers. The Program Administrator who oversees the reviews provide further consistency in that they attend all reviews and have the final decision on ratings. All cases are reviewed by at least the CQI Program Administrator or Program Specialist from the CQI Team before results are finalized. Every effort is made to ensure cases are rated consistently. The Administrator of CQI and Outcomes is consulted on any case rating where a rating decision cannot be reached due to gray areas in the instructions.

FACIS is used to input, collect & extract quality data for the State's child welfare system. The FACIS Team and BIT staff regularly extract and submit data for AFCARS, NCANDS, NYTD & the CFSP/APSR. For each of the items that are submitted through an extraction process, the State maintains mapping documents that clearly document what FACIS data fields and information are used for each element on these reports.

FACIS Reports are provided to the State's NCANDS designee for input into the NCANDS portal. CPS uses the data quality tools and utilities provided to ensure required processes are followed. The FACIS Project Manager ensures changes to mapping for reports are documented in the appropriate mapping documents.

CPS CQI Core Team reviews data and monitors trends across the State as well as trends within specific Region's. These reviews can be prompted by Core Team members, the Management Team, or the SAG. Ad hoc review teams have been created to review specific areas of concern. CPS' Management Team members review CPS Data Outcomes Reports when those are released and compare the information to internal reports or case review results.

Quantitative data reports are provided in a report viewer function for any staff to access. These quantitative reports are used for office/region/statewide review. CPS' FACIS system includes Compliance Reports providing real-time access to items that are missing information in the system. These Compliance Reports can be used with staff during their regular staffing with Supervisors. Staff have consistently shared they use the Compliance Report generated on FACIS to monitor their cases and required data entry. Please see attachment 3 for an overview of FACIS reports that are utilized for quality assurance and analysis of outcomes.

Ongoing training in specific areas is provided at the request of the office or region. Training on FACIS data reports is provided to various levels of the Management Team on an as needed basis. As part of the Regional Reviews, input is sought from Supervisors, Family Services Specialists, and other stakeholders regarding systemic factors such as training needs for staff and resource providers, quality of services provided by CPS, and service array. This information is summarized in an office final report submitted to the Division Director, Assistant Division Director and Regional Manager.

The FACIS Project Manager and the Management Team review information provided regarding federal requirements and guidelines on a regular basis. The FACIS Project Manager and members of the Management Team have participated in Federal workgroups related to data outcomes, collaborating with the court systems, technology, and CQI/QA. CPS regularly extracts and submits data for AFCARS, NCANDS, NYTD & the CFSP/APSR.

The FACIS Team and Management Team members use the appropriate data quality utilities and tools provided to ensure data is accurate. These include using the AFCARS Data Quality, Compliance and Frequency Reports, NYTD NDRU & NCANDS portal programs to review data prior to submission. Any data errors found are addressed and corrected wherever possible.

During case reviews, data quality issues are addressed with the appropriate staff. The FACIS system has numerous edit checks in the system to help ensure quality data entry including date edit checks prompt a user if the date is more than 180 days in the past or future. The FACIS system has filters that help ensure quality data including filters to assist with selecting appropriate legal hearing selections. The FACIS system has alerts that are provided to staff when an event occurs such as a child being discharged from a residential treatment facility.

Quality qualitative and quantitative data collection is a strength for CPS. Challenges within the area of data collection center around ensuring staff enter data in a timely manner for the various reports to capture the necessary data. The timely entry of data can be monitored through various reports on FACIS and efforts are made to make improvements where needed. Data is also collected through various survey's to staff and stakeholders, please see attachment 4 for an overview of survey's that are administered.



Case Record Review Data and Process

The Regional Review, previously known as SPWB review, process began in April 2009. The 2022 CFSR Onsite Review Instrument and Instructions is the tool used to review cases. The review process has evolved over time based on feedback from reviewers and the staff in the offices being reviewed. The Regional Review emulate the Child and Family Services Reviews as it includes not only case file reviews but also includes case related interviews with key individuals and non-case related community stakeholders. The Regional Reviews are led by the Administrator of CQI and supported by the CQI Program Specialist and Data Analysis Program

Specialist, who runs the randomized report, schedule review dates and reviewers and who are onsite for the week of the office reviews. Each of the seven Regions are reviewed every year. The number of cases reviewed each year include a minimum of 25 in-home cases per year and a minimum of 45 foster care cases per year. Typically, between 72 and 76 cases are reviewed annually. These cases are chosen six to eight weeks in advance from the AFCARS Report for placement cases and the in-home reports for in home cases.

At this time, Program Specialists, Regional Managers, and Supervisors are required to participate in one review each year. This requirement will end after all five CQI Program Specialist are hired and trained. To ensure there is not a conflict of interest, reviewers are not assigned to review cases from any office within their home region. Two cases are assigned to each team of two reviewers by members of the CQI Team. Each team is led by either State Office staff, a Regional Manager, Supervisor, or experienced Family Services Specialist.

In addition to the CQI philosophy, another important component in the review process is to obtain information from individuals as well as case file reviews.

Interviews are typically with the Family Services Specialists assigned to the case, the Supervisor overseeing the case, children, parents, foster parents, kinship resources, residential treatment case managers, therapists, CASA volunteers, children's attorneys, school personnel/counselors, Safety Plan Provider, and anyone else the review team determines could provide information about the case. Reviewers receive their cases on the Monday of the onsite review week.

The following is the layout of the onsite review week:

- Monday - 8:30 AM to 3:00 PM review case files.
- Monday - 3:00 PM until 12:00 PM Wednesday complete interviews.
- Wednesday - Noon until Thursday noon complete case write ups on the Online Monitoring System.
- Thursday - Noon until Friday 5:00 PM complete first and second level QA.

As the onsite week progresses and interviews are completed, the QA staff provide individual case consultation as needed, answer questions regarding the rating of each item, and finally, review and discuss the outcomes on each case prior to reviewers submitting the final documents outlining the strengths, and areas needing improvement. The final discussion of the case and review of the outcomes by a second QA staff provides a second level of review, to ensure inter-rater reliability.

A survey is sent to stakeholders in the Region in conjunction with the onsite review and are completed within two weeks of the date the survey is sent. The survey gathers information relating to service array, permanency, and staff/foster parent training. Surveys are sent to the following individuals: State Court Judges, Tribal Judges, State's Attorneys, Tribal Prosecutors, child's attorneys, parents attorneys, CASA directors, mental health directors, domestic violence shelter directors, drug and alcohol service providers, ICWA directors, BIA Social Services directors, law enforcement officials, family visitation center directors, court services officers, parole agents, schools and residential/group care facilities. All stakeholder feedback is provided to the Regional Manager, Administrator of CQI and Outcomes, Assistant Division Directors, and Division Director.

At the end of the review week, after all the cases have been reviewed and the documents on each case have been completed and submitted to the Regional Manager, a closing meeting is held with the reviewers to obtain their feedback on what worked well and what could be improved upon as far as the review process.

The Supervisor and Regional Manager are given two weeks after the onsite review to provide a rebuttal to the findings. Only rebuttals changing the rating of the item are accepted. The rebuttal must consist of the office producing documentation not found during the onsite review. The office must make sure the case meets the criteria for a strength as outlined in the OSRI. The rebuttals are reviewed by the Review Onsite Leaders, and the case reviewers are consulted to assist in determining if the outcomes should be changed based on the new information provided. If further guidance is needed, the Administrator of CQI and Outcomes is consulted, and a decision is made as to the result. A CQI meeting is held in the office to present a summary of the findings of the review to all staff and stakeholders. These exit meetings include information related to stakeholder surveys and the results of the case file reviews. Outcomes related to the case reviews are shared in a visual presentation to supplement the verbal presentation. Refer to the section above regarding the CQI process with stakeholders.

In addition to the Regional Reviews, ad hoc reviews are completed when specific trends or outcomes warrant further analysis and review. Reviews have been or are being conducted pertaining to services to prevent removal, monthly caseworker visits, Another Permanent Planned Living Arrangement (APPLA), placement stability, safety management, non-maltreating parents, assignment of abuse and neglect reports, timeliness of Initial Family Assessments, kinship search, fidelity of implementation of the concurrent planning model, permanency issues for youth in long term care, and foster/adoptive parent recruitment and retention.

These reviews are conducted by the Permanency Workgroup, CSI Workgroup, CQI Core Team, or various sub-workgroups. The ICWA Program Specialist also completes compliance reviews of ICWA cases and provides the results to the individual offices and the Management Team, starting in April 2022, these compliance reviews will be completed quarterly. Please see attachment 5 for an outline of fidelity and regional reviews that are completed.



There are several levels of data analysis occurring throughout CPS. Data, both qualitative and quantitative, are analyzed at the local level as offices review the results of the Regional Reviews. Data is analyzed at the regional and statewide levels as Regional Managers and Supervisors review the various data profiles, FACIS data, and surveys. The Supervisor Advisory Group (SAG) meets monthly. The SAG serves as another level of data analysis, as they work on issues identified by the field, or by the Management Team. The SAG disseminates results both to the Management Team and the field. The CQI Core Team meets monthly to discuss issues that have come to their attention through the Regional Reviews, SAG, or data profiles and other reports. The CQI Core Team then analyzes data around specific issues and reports findings to the Management Team.



Individual case review results from the Regional Reviews are distributed to the Regional Manager at the end of the onsite week. The Regional Manager is encouraged to share the specific results with the Supervisor(s) as well as each staff person.

While QA reviews serve as the data collection component in the CQI structure, it is important to continue the CQI loop. Upon receiving the local CQI training, offices are expected to examine instances of lower achieving performance indicators utilizing root cause analysis and to develop an improvement plan which includes continued evaluation. While data analysis occurs on a regular basis by the various groups within CPS, it historically has occurred to a lesser degree at the local level between Supervisors and the Family Services Specialists. Through the course of the local CQI training and application of the CQI process to improving specific outcomes and practice, all staff at the local office level become more engaged in data analysis.

Sharing of statewide and local data with stakeholders for their analysis and use and eliciting feedback on their analysis and conclusions is also an important component of CPS' CQI philosophy. In previous sections of this report, it has been detailed how information is shared with internal stakeholders and their feedback is sought. There is a shift from holding meetings across the state to share results with stakeholders to involving stakeholders in the offices CQI process and efforts towards change.



Collecting and analyzing the data are important steps within the CQI process. However, the agency and the stakeholders must then use the information to drive change to improve outcomes for children and families. One of the overarching goals of the 2020 - 2024 Plan was to improve communication between partners of the child welfare system, this goal is continuing through the 2025-2029 CFSP. This includes stakeholders as reviewers, a survey to them, and CQI meetings with the stakeholders. Information that will be used at CQI meetings with the stakeholders is data from the Regional Reviews, results of a survey sent to them during the onsite review, and any pertinent data from FACIS.

Regional Assessments will be released starting in July 2024. Regional Assessments will capture the performance outcomes of the latest Regional Review as well as results of fidelity review, stakeholder survey results, parent survey, and staff survey results. This gives a comprehensive view of how the Region operates and what areas to focus CQI plans on. South Dakota utilizes the Online Monitoring System (OMS) Reports to identify performance outcomes and trends associated with the Regional Reviews. CQI plans are approved by the Administrator of CQI and Outcomes and monitored by the CQI Program Specialist assigned to the Region. The Regional Assessments are provided to stakeholders and included in the office's CQI meeting with stakeholders.

Youth

Young Voices is active in South Dakota and meets monthly. Young Voices gives youth the opportunity to engage with their peers and enhance policies and practices of the child welfare system. Input is continually sought from this group and has led several successful initiatives. An annual youth survey is being administered to youth that gathers their perspective on safety, permanency, and well-being outcomes. Young Voices will be engaged to determine strategies to improve outcomes based on survey results and data collected from the case review process.

Parents

Parents and caregivers were recruited in the Brookings, Pierre and Sioux Falls areas to assist with cognitive interviewing in relation to parent surveys, which are slated to be sent out to all parents the Summer of 2024. Sixty-five percent of the parents who participated were Native American. Cognitive interviewing is a technique used to evaluate survey questions to determine whether the true meaning of the question, as intended by the evaluator, is conveyed to respondents, and more generally whether the question is functioning as intended.

One of the survey questions asked parents if they want to participate in a focus group that will review the results of the survey and participate in joint planning on how to improve children and parents experience when the are involved in the child welfare system in South Dakota. After the survey results are received, parents will be contacted to review the results of the survey and determine next steps.

Monthly Reports

South Dakota CPS has monthly reports that capture monthly updates on current initiatives, technology projects, new initiatives, and data reporting. The CPS Regional Managers and Program Specialists both report on initiatives outlined in the CFSP and CFSR. Monthly Report updates are shared with both CPS and DSS leadership to close the feedback loops about what the CPS specific initiatives are and how they compliment the overall mission of the South Dakota Department of Social Services. All Regional Managers and Program Specialists have access to the information contained in the monthly report and are responsible for reviewing the information to identify any intersects with their program.

Data and initiatives are shared at the CPS Management Team meetings when relevant. The following data points are captured on the monthly report:

- Total Abuse and Neglect Referrals each month
- Centralized Intake Data
 - Total calls
 - Total calls answered
 - Average speed of answer
 - Average call length
 - Average day to call abandon
 - Total abandoned calls
- Pending and Completed Out of Homes Investigations
- Placement Trends
 - New children entering custody
 - Children discharged from custody
 - Percentage of children in a family setting
- Alternative Placement Data
- Discharge Outcomes
- Children in Group/Residential Care by Region
- Out of State Youth in Residential Treatment Centers
- ICPC Requests
- Children missing from care
- Finalized Adoptions
 - Percentage of adoptions by Foster Parents, Relatives, Non-Relative/Non-Foster Parents
 - Finalized within 24 months
 - Average length between initial placement to finalization
- Adoption Data
 - Children with the plan of adoption
 - Children placed for adoption
 - Children with the plan of adoption and no identified resource
 - Average age of children waiting for adoption
 - Children involved in appeals to supreme court
 - Subsidized Adoptions
- Stronger Families
 - Newly licensed families
 - Goal progress
 - Region 1, 3, and 4 new, closed, and total homes
 - Wrap Services for Foster Families
 - Commit to Know More cards

Court Improvement Program

The Court Improvement Program and CPS actively collaborate on enhancing practice to achieve better permanency outcomes. The Administrator of CQI and Outcomes presents to the CIP committee on Safety, Permanency, and Well-Being performance outcomes from South Dakota’s CFSR Data Profile as well as performance outcomes from the onsite reviews. This helps CIP keep well-informed on where South Dakota is performing and to identify any areas they can provide support or insight to assist in improvement outcomes for children and families.

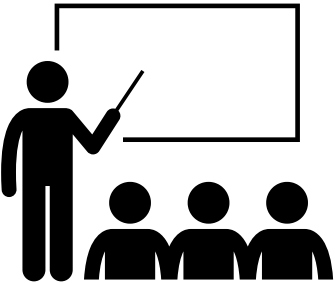
2025-2029 Quality Assurance Goals

- 1

Hire and Train remaining CQI Team
- 2

Enhance collaboration with stakeholders and Individuals with Lived in Experience into CQI processes.

Staff Training



Staff Training was found to be a strength in both initial and ongoing training in the 2016 CFSR. CPS has enhanced the training even more since the 2016 CFSR. CPS gathers data and more information related to staff perspective on training for the further assessment of this Systemic Factor.

As a result of the pandemic, trainings were largely delivered virtually. The shift back to in person trainings, or a hybrid of in person and virtual is underway. The delivery of training in person helps foster networking, relationship-building, sharing of best practices, helps with delivery and understanding of material, and can be delivered more personably.

After each certification training, surveys are completed by attendees to provide feedback. Results of those surveys reflect that staff feel the certification trainings are providing them with the knowledge and skills necessary to succeed in their respective roles within CPS. Staff made several comments recognizing the knowledge, skill, and expertise of the trainers; adding comments about how field experience and examples from the trainers were helpful for understanding how the concepts they learn translate into the field work. Staff shared that despite the virtual settings for most trainings, the trainers were successful with ensuring that there were times for engagement, small group activities, and asking questions. The staff surveys reflect a desire to have some components of training transition to in-person. This is being actively addressed. In February 2024, one session of Trauma Training was transitioned to in-person. In April 2024, two sessions of Motivational Interviewing One Training occurred in person. Feedback from the in-person training has been overall positive, with comments regarding the ability to actively engage with others being highly beneficial. In addition, Safety Crisis Management Techniques Training, Motivational Interviewing One/Two Training, Protective Capacity Assessment Training, and the Protective Capacity Evaluation trainings are slated to be fully in person for their next sessions in 2024. All certification trainings are being transitioned to in-person or hybrid by the start of 2025. Other notable comments from staff surveys were that completing the training prior to having a caseload was the most beneficial due to ensuring they had the time to focus on training, in addition to having all of the skills from training prior to the direct work with families.

A majority of staff did identify that if they had a caseload, they were receiving support from co-workers or their supervisor to cover their regular duties to allow for them to focus on the training

The responses from the staff surveys are reviewed by the CQI Team in collaboration with the Learning and Development Program Specialist after certification trainings. The data is used to identify trends and improve the existing staff training curriculum.

Initial Training

CPS continues to provide mandatory Certification training for all newly hired Family Services Specialists. The Certification Program also is required for any newly hired Supervisors, Regional Managers, or Program Specialists. The rotation allows for staff to enter the training cycle shortly after their hire date. The current Certification training is 225.5 hours of training.

225.5
Hours

The training rotations will be as follows:

- Foundation (28 hours)
- Mandatory Reporter Training (1 hour)
- Initial Family Assessment/Safety Evaluation
- Planning/Interviewing (28 hours)
- Ongoing Services/Case Planning and Safety Management (Protective Capacity Assessment) (28 hours)
- Protective Capacity Evaluation (14 hours)
- Permanency/Well-Being (30.5 hours)
- Trauma Informed Practice (12 hours)
- Medical Indicators of Abuse and Neglect (8 hours)
- Motivational Interviewing Level One (12 hours)
- Motivational Interviewing Level Two (8 hours)
- Foster/Adoptive Parent Training Program (30 hours)
- Common-Sense Parenting or Positive Indian Parenting Overview (4 hours)
- Human Trafficking Training (3 hours)
- Office of Licensing and Accreditation- Foster Care Licensing (3 hours)
- Safety Crisis Management Techniques (SCM) (8-16 hours)
- Compassion Fatigue (8 hours)

The Certification faculty includes 39 trainers from CPS, an SCM training team numbering 13 individuals, and a physician who trains on medical indicators of child abuse and neglect. The Certification faculty also includes a licensed therapist who trains on Trauma Informed Practice, an advocate from Call to Freedom who trains on Human Trafficking, and a staff member from the Office of Licensing and Accreditation to train on foster care Licensing for the State of South Dakota. The ICWA Program Specialist continues to provide Cultural Awareness training as part of Foundation training weeks.

The SCM training offers a full day de-escalation training which is required of all staff and additionally all staff who interact with the public face to face (majority of CPS staff) also take an additional full day of physical interventions training.

Staff receive initial training in the FACIS system that includes explanations of data fields pertinent to AFCARS submissions and the importance of timely and accurate data entry. This training is completed at the local office level during onboarding of new employees.

All Child Protection Services staff must complete the CQI Training Academy the Capacity Center for State's offers on their website. The training is comprised of a pre-test, 7 interactive modules, and then a post-test. Following the post-test there is a satisfaction survey staff must complete prior to getting the certificate to show they completed the required training. Staff must send a copy of their certificate to the Learning and Development Program Specialist. Once that certificate is received, the Learning and Development Program Specialist will assign the South Dakota Specific CQI training to the staff to complete within 2 weeks of assignment. The South Dakota Specific training provides an overview of each tier of the CQI system, internal processes, external processes, importance of accurate and timely data entry, and current workgroups.

PS continues to evaluate the training needs of field staff. CPS has been enhancing Certification training to create more skill-based training and is exploring technology to aid in this. Faculty for each training meet annually to evaluate and plan for further enhancement of the training to meet the development needs of field staff. As policies are undergoing updates the training teams meet and collaborate more closely on impacts.

Ongoing Training

CPS continues to provide formal ongoing training for Family Services Specialists and Supervisors. Depending on the need, CPS provides training either through virtual training or traditional classroom settings.

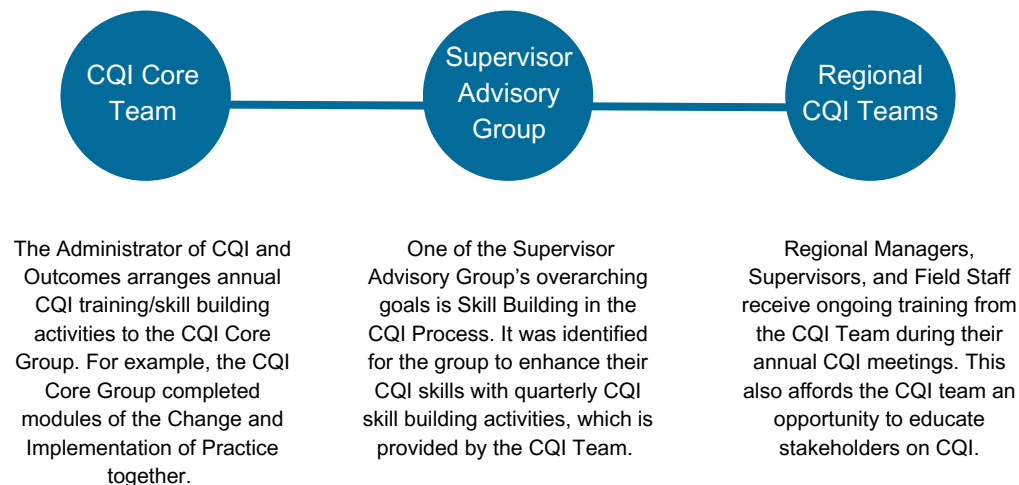
The following trainings are available virtually, both live and recorded, to Family Services Specialist, Supervisors, Program Specialist, and Regional Managers:

- Adoption- NTI Adoption Competency
- Independent Living Services
- Qualified Residential Treatment Provider Procedures and Upper-Level Placement
- FACIS Placements (2)
- FACIS Payments (2)
- FACIS Basics (6)
- Missing from Care
- FACIS Clerical Overview (2)
- FACIS Resources
- FACIS Case Plans & Family Matrix
- FACIS Request for Service Clearance (2)
- IV-E Eligibility
- AFCARS
- Foster Care Appreciation and Support Services

A webinar series to provide ongoing training on topics to all CPS staff was launched in 2024. Presentations on Kinship and ICWA, Permanency, Family First, and Foster Care Child Case Plan & Narratives are planned for the upcoming year. These sessions are recorded and available for all CPS staff to view if unable to attend the live presentation.

FACIS trainings highlighted in the bullets above occur. Training sessions on payments and supervisor roles are geared toward supervisors and their duties and responsibilities. Training on FACIS data reports is provided to various levels of the Management Team on an as needed basis.

CQI Ongoing Training:



Child Protection Services collaborates with the Division of Developmental Disabilities to offer regional trainings for CPS Staff to enhance their knowledge the Division of Developmental Disabilities and services they provide. A total of nine workshops were held for Family Services Specialists, Supervisors and Regional Managers.

The following workshops were held in 2022:

- February 17, 2022: Yankton/Vermillion
- February 18, 2022: Mitchell
- March 22, 2022: Chamberlain
- March 23, 2022: Winner
- April 20, 2022: Pierre
- April 21, 2022: Rapid City (Region 2 staff)
- May 17, 2022: Sioux Falls
- May 18, 2022: Sioux Falls
- June 2, 2022: Watertown
- September 14, 2022: Rapid City (Region 1)
- September 15, 2022: Rapid City (Region 1)

Safety Crisis Management was introduced to enhance staff safety through de-escalation techniques and hands-on physical intervention training. All CPS staff who work with the public in any capacity are required to participate in the de-escalation training; all staff who work with people face to face are expected to participate in the hands-on physical interventions training. Manuals of techniques are also shared to each participant to serve as an ongoing tool for reference. In order to share this training with all CPS staff, a team of thirteen instructors were trained by JKM, Inc. and certified to train the material ongoing. They are required to recertify annually through JKM, Inc. Five training teams were formed by these instructors and will be leaders of the training in their coverage areas. A training will be offered in each of the seven regions before the end of this calendar year to get all current staff trained and then trainings will be offered quarterly for onboarding new hires starting in 2025.

The following trainings were provided during Management Team and Supervisors meetings in person:

- QRTP Assessment Requirements
- Emergency Response Survey
- CFSR Round 4 Child and Family Services Review Process
- Caseworker Child Visit Narratives and Placement Screens
- Positive Indian Parenting
- Poverty Simulation
- Reframe Up Crisis to Clarity TOP Facilitation Methods
- Teambuilding Training by Black Hills Co-Op
- “Let’s Roam” (teambuilding and team formation)
- Compassion Fatigue

Refer to the Case Review section, Well-Being One, for more information on efforts to evaluate the effectiveness of Motivational interviewing. In order to reach more staff in need of MI 1 training, two training sessions were offered in April 2024, and two MI 2 training sessions as well as another MI 1 session will be delivered in October 2024. These training opportunities were shifted back to in person training to enhance practice and effectiveness of delivery.

[Northeast South Dakota Family Violence Prevention Conference](#)

This training was designed for professions working with families experiencing domestic violence, child maltreatment, sexual assault, and trauma. Staff heard from nationally known speakers regarding the latest research, practical experiences, and methods of addressing all forms of maltreatment.

[SDLearn](#)

South Dakota Bureau of Human Resources has developed a Learning Management System, SDLearn. All BHR Training and Development opportunities can be found in the SDLearn system. All state employees have access to SDLearn.

SDLearn houses over 2,600 predeveloped courses in a multitude of content genres. The system is designed to take an employee’s job title and personal interests into account, allowing it to suggest training courses suited to their needs. Employees can search for professional and personal development courses in SDLearn as well as register for instructor-led trainings being offered. Employee onboarding, BIT cybersecurity training, required compliance training and Ignite Leadership Development will all be found within SDLearn as well. Besides choosing classes independently and the required courses assigned to employees, supervisors also have the ability to assign trainings to staff.

The Child Protection Management Team (Regional Managers and Program Specialists) are informed of various trainings at the Capacity Center for State’s and Children’s Bureau regarding safety, permanency, and well-being for children and families as well as preparation for Round 4 of the Child and Family Services Review. Members of the Management Team attend these trainings if available and the training topic is relevant to their specialty.

[Community Response to Child Abuse Conference](#)

There is an annual Community Response to Child Abuse Conference, which occurs every October. Attendees typically included: medical providers, law enforcement, educators, counselors, social workers, students, community advocates and more. The conference typically offers 15+ unique breakout sessions provided by local and regional leaders.

Four general sessions will be offered in October 2024 that featured state and national experts who discussed current best-practices.

- Warren Binford: The Digital Child
- Sean Covel: The Question is How
- Suzanne Starling: Understanding Vulnerable Child Syndrome
- Michelle Trent and Briana Halse: Risk Management: Trauma-Informed (Self) Care

Staff will have the opportunity to pick from 19 breakout sessions in October 2024:

- The Negative Impact of Social Media on Child and Adolescent Mental Health; A.R. Ascano
- Sexually Transmitted Diseases in Child Sexual Abuse Cases; Shelly Hruby, Kirsten Persson, and Kelly Wharton
- Personal and Professional Perspective of Utilizing Lakota Culture to Heal and Examine Social Determinants of Tribal Health; Damon Leader Charge
- A Multi-Tiered Community-Based Approach to Trauma-Informed Care for Youth in Southeastern South Dakota; Ellen Knowles
- Handle with Care; Angela Waldner
- When the Perpetrator is a Child; Warren Binford
- Ghosts in the Nursery and Child Abuse: The Relationship to Infant Mental Health; Nancy Free
- Appropriate Involvement of Minors in Custody and Dependency/Neglect Cases; A.R. Ascano
- Family First Prevention Services: Next Steps; Ashley Schlichenmayer-Okroi
- Behavioral Health, Education, Access and Management for South Dakota - Increasing Capacity to Address Pediatric Behavioral Health Needs Across South Dakota; Aimee Deliramich and Nikki Eining
- Every Connection Counts: Strengthening Cases Through Victim-Centered Investigation and Prosecution; Roxanne Hammond and Cameron Ducheneaux
- Breaking Barriers: Reducing Stigma and Harm in Substance Disorder and Child Welfare; Melissa Dittbener
- Engaging Fathers: Enhancing Family-School Partnerships; Keith Ferguson
- Indigenous Approach to Addiction Healing and Mental Health Management; Gene Tyon
- Hope is an Action: The Next Step in Addressing Adverse Childhood Experiences; Tifanie Petro
- Monsters Among Us: Catching Predators and Keeping Kids Safe in a Digital Abyss; Heather Knox and Matthew Almeida
- The Medical Evaluation of Abusive Head Trauma in Children; Suzanne Starling
- Understanding the Impacts of Social Determinants of Health in Early Childhood; Jennifer Weber
- Laying the Foundation for Tribal and State Partnerships: Strategies to Expand Diversion Access for Indigenous Youth; Annie Brokenleg and Tamera Marshall

CPS continues to focus on the enhancement of supervision skills. In response to achieving this objective, CPS is committed to providing specialized training for Supervisors related to clinical and consultation skills in implementing the Comprehensive Safety Intervention (CSI) model. Child Protection Supervisors are required to complete a series of trainings to help support and give them guidance in supervision. These trainings include:



There are also elective trainings Supervisors have the opportunity to attend to further support them in supervision of staff.

- Helping Them Grow
- Feeding the Four Tendencies for Supervision
- 16 Personalities for Supervisors: Putting it All Together
- The Challenge of Change for Supervisors
- Managing Remote Workers
- Ignite Leadership: First-Time Supervisors
- Ignite Leadership: Mid-Level Managers and Experienced Supervisors

An emphasis on supervisory staff development including benchmarks of completion is in development; an exploration into the possibility of a supervisory certification program is underway.

BHR attended the April/May 2024 Management Team and Supervisor Meeting and presented on the results of the staff engagement survey. This survey was initiated statewide and the data was broken down by department and division. CPS data was presented and attendees at the meeting broke into groups in order to provide additional feedback and recommendations for next steps. The data was then shared with all CPS staff for information. At the beginning of SFY25, a workgroup was formed to review CPS specific data from the BHR engagement survey. The workgroup will determine next steps based on survey results to help support staff through training.

CPS purchased "A-Z for Self Care" books for supervisors and managers. The books outline guidance and recommendations on self care and exercises to participate in with staff.

- 1 Develop Hybrid Training Materials: Create training materials optimized for both virtual and in-person formats to ensure consistency in learning outcomes.
- 2 Standardize Training Assessment Criteria: Establish standardized assessment criteria to evaluate participant competency across all training formats.
- 3 Develop Formalized Supervisory Level Training: Create a comprehensive and standardized training program specifically designed for supervisory roles to ensure consistent leadership development.
- 4 Standardize In-Service Training: Implement standardized in-service training programs to ensure ongoing professional development and consistent competency across the agency.

Foster and Adoptive Parent Training

Thirty hours of training is provided for all prospective foster and adoptive families in the State of South Dakota. Training is facilitated through a combination of online and classroom sessions to provide added flexibility for families. Training is based on the philosophy that the value of family life for children, however family is defined, is compelling. Because of this, knowledgeable and skilled foster and adoptive parents are integral to providing quality services. The Office of Licensing and Accreditation administers a survey quarterly to families who completed the training to learn about their training experience and ways training can be enhanced.

30
Hours

Foster and adoptive parent training goals are to help:

- Meet the protective, developmental, cultural and permanency needs of children placed with foster and adoptive families.
- Strengthen families, whether they are families of origin, blended families, extended or kinship families, foster families, adoptive families, or tribal members.
- Strengthen the quality of family foster parenting and adoption services by providing a standardized, structured framework for pre-service training and mutual assessment.

UNITY

UNITY is a curriculum based on traditions and cultures of Indian people. It is designed to address issues Native American foster parents have identified as important and prepare current and potential foster parents for their critical role as care giver for Indian children.

UNITY is a 30-hour training curriculum with the following components:

- Foster Parent Orientation
- Human Growth and Development
- Attachment and Loss
- Protecting, Nurturing and Meeting Needs through Discipline
- Historical Trauma and Intergenerational Grief
- Effects of Addiction on Children
- Child Abuse/Neglect and Sexual Abuse
- Promoting Permanency Outcomes
- Kinship Care and Self-Esteem

In addition to training to become a licensed foster parent, additional cultural trainings are being offered to current foster families. Examples of these include the following trainings:

- Cultural Competency Training Services, training is provided by LSS through the WIC Community Innovation and Outreach Project:
- Part 1- Relating to Norms
- Part 2- Understanding Values
- Cultural Language Arts Network Classes
- Intro Dakota – taught by Summer Dumarce
- Intermediate Dakota- taught by Dawi Huhu Maza
- Positive Indian Parenting Classes
- Indian Child Welfare Act Training presented by CPS Family Services Specialist Supervisor from Watertown, SD.

Foster and Adoptive Parent Training 2025-2029 Goal

1

Enhance Foster and Adoptive Parent Training to be more trauma informed and provide families with specialized skills to care for children with medical and behavioral needs

Service Array and Resource Development

Array of Services

Service Array was found to be in substantial conformity in the 2016 Child and Family Services Review. Refer to attachment 6 for a full list of South Dakota's services. South Dakota continues to make efforts to ensure access to services for families and children. CPS identifies children and family's needs beginning with the Intake and through the IFA process. At the conclusion of the IFA, the safety evaluation process determines which families are in need of intervention based on child safety. The IFA is a bridge to the PCA which is the ongoing intervention process. The PCA provides the Family Services Specialist with a structured approach for engaging and involving caregivers and children in the case planning process. Intervention services are no longer focused on compliance, but rather on behavior changes. Services to children and families are provided by CPS, as well as community partners through contractual agreements or referral.



CPS provides a full range of child welfare services statewide. Services are provided in the tribal jurisdictions either directly by CPS or under agreements in which the particular Tribe provides the full array of services. The services provided by CPS include parenting education, intake for child abuse and neglect reports, 24/7 emergency response, assessment of abuse and neglect and child safety, ongoing protective services, reunification services to families, independent living services, and permanency planning services. CPS uses the Comprehensive Safety Intervention (CSI) model to respond to reports of abuse and neglect. The CSI is a safety driven model integrated throughout the components of the services to families. CPS coordinates these services with community and tribal providers.

In preparing for the Child and Family Services Review, Child and Family Services Plan, and Family First Prevention Plan, CPS Leadership discussed how the same stakeholders will be involved in multiple projects. Engagement with stakeholders is vital to empower them to participate in joint planning to enhance services to children and families in South Dakota. As an effort to respect their time, their input to develop the Family First plan was used to help developed the CFSP, specifically for service array and resource development. CPS utilized other engagement strategies with stakeholders in addition to information learned from the development of the Family First Plan, these efforts, along with the Family First engagement strategies are reflected throughout this section.

Throughout the creation of the Families First Prevention Plan, CPS has engaged in extensive collaboration with internal and external providers, including interagency staff, parents, caregivers and youth to ensure input from those working with and being provided services from CPS is utilized. CPS provided educational presentations to community partners across the state to allow for those partners to better understand the purpose and goals behind prevention services and efforts.

Internally South Dakota CPS has supported the efforts towards prevention in several ways, such as hiring a Program Specialist in 2019 dedicated to Title IV-E Families First Prevention Services Act development and implementation. In addition, in 2022, CPS contracted with the ICF consulting agency to support the CPS in further planning, development, and implementation of the prevention plan. As a result of this work, a teaming structure was developed to include a Core Team to drive planning efforts, a Prevention Team to help navigate efforts, and a Fiscal Team to plan and identify the multiple funding streams to ensure the greatest impact of the prevention efforts.

The CORE Team meets monthly and is comprised primarily of CPS and DSS Leadership and program staff. To further collaboration with the tribal community, a tribal Indian Child Welfare Act Director and two tribal child protection leads, sit on the CORE Team meetings, which help drive the creation and monitoring of the progress of the prevention plan.

The Prevention Team brings the most input from stakeholders across the state. By having such a diverse team and range of participants the input from the Prevention Team includes urban, tribal, rural, and even frontier perspectives in South Dakota. There is a prominent and diverse tribal aspect with a variety of representatives involved, such as a young adult with lived experience and a grandmother who is a Common Sense Parenting trainer in addition to raising her grandchildren.

Members of the prevention team are from the following agencies.

- Department of Social Services
 - Child Protection Services
 - Division of Child Care Services
 - Division of Behavioral Health
 - Department of Health
 - Department of Human Services
 - Department of Education
 - South Dakota Urban Indian Health
 - Division of Criminal Investigation
 - State’s Attorney Office
 - Juvenile Corrections Services
 - Department of Tribal Relations
 - Family and Youth Representatives
 - Youth Providers Association
 - Court Appointed Special Advocate
 - DSS Board Member
 - Monument Health
 - Indian Child Welfare Act Coalition
 - Public Elementary School Nurse
 - Sicangu Children and Family Services
 - Cheyenne River Sioux Tribe
- Lutheran Social Services
 - Multicultural Center
 - Sanford Health
 - Crow Creek Agency, Bureau of Indian Affairs
 - Children’s Bureau
 - Helpline Center
 - Crow Creek Tribe
 - Standing Rock Child Protection
 - Child Abuse Prevention Committee, Avera Health
 - Unified Judicial System
 - Positive Indian Parenting provider
 - Center for Prevention of Child Maltreatment
 - FRIENDS, NRC
 - Council of Community Behavioral Health
 - Network Against Family Violence & Sexual Assault
 - Yankton School District
 - Head Start

Outside of the Prevention Team significant collaboration and consultation with South Dakota Department of Corrections, Juvenile Services, and the South Dakota DSS Medicaid Team. Through this collaboration CPS was able to help identify what services are already provided through existing services, such as Medicaid and Medicaid expansion, as well as what needs are seen across the state, such as trends with youth who are involved with juvenile services, and how CPS can partner with existing initiatives to best serve the children and families of South Dakota.

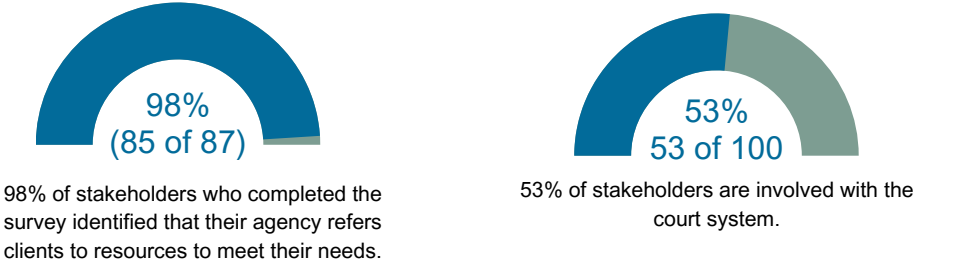
For individuals who may not have been an ongoing member of a prevention team, listening sessions were held across the state. Listening sessions helped inform the development of the plan by seeking from parents, caregivers, and youth with lived experience. Those invited included Prevention Team members, Youth Provider Association member agencies, CPS field staff, community agencies, and CPS-contracted parenting education provider instructors and organizations. The invitation was shared with each of the nine tribes and South Dakota Tribal Relations.

Community Stakeholder Engagement

CPS seeks input from stakeholders, parents, and youth about service array and delivery in their area. Please see Quality Assurance section for more detail regarding youth and parent surveys. There are seven Regional Reviews held each year where the Administrator of CQI and Outcomes provides a stakeholder survey to several community partners, including State Court Judges, Tribal Judges, State’s Attorneys, Tribal Prosecutors, child’s attorneys, parent’s attorneys, CASA directors, mental health directors, domestic violence shelter directors, drug and alcohol service providers, ICWA directors, BIA Social Services directors, law enforcement officials, family visitation center directors, court services officers, parole agents, schools and residential/group care facility representatives. Each region compiled a list of stakeholders to survey. See details below regarding date of survey distribution, number of surveys sent, number of responses, and response rate.

Region	Date Surveys Sent	Number of Stakeholders Surveyed	Number of Responses Received	Response Rate
Region 1	08/15/2023	38	13	34%
Region 2	08/14/2023	65	9	14%
Region 3	05/16/2023	53	11	21%
Region 4	05/10/2023	42	12	29%
Region 5	09/18/2023	73	26	36%
Region 6	10/02/2023	27	11	36%
Region 7	08/23/2023	130	20	15%
Total		428	102	24%

The stakeholder surveys showed both regional and statewide trends. Stakeholders identified the strongest resource in the community to help prevent child abuse and neglect was child education services, and in comparison, identified that affordable, quality childcare was the most difficult service for families to access in communities across the state. South Dakota’s stakeholders identified that the top three reasons for children entering foster care were substance use disorder, uncontrolled mental health, and domestic violence. The responses also showed that above all else, parents choosing to not engage in change, was the most common cause for children staying in foster care long term.



Tribal Engagement

Nine tribal nations are located within South Dakota, with CPS providing direct child protection services for five of these nine tribes. The four tribes that provide their own full array of child welfare services are the Flandreau Sioux Tribe, Sisseton Wahpeton Oyate Tribe, Standing Rock Sioux Tribe, and the Oglala Sioux Tribe. The tribes directly served by CPS are the Rosebud Sioux Tribe, Cheyenne River Sioux Tribe, Crow Creek Sioux Tribe, Lower Brule Sioux Tribe, and Yankton Sioux Tribe. CPS has Title IV-E agreements with these four tribes. Each of the tribes have tribal courts and tribal law enforcement. There are several similarities with the protocol with the courts and law enforcement with the five tribes compared to non-tribal law enforcement and courts. The similarities include the option for joint investigations, provisions for law enforcement to take emergency custody, and abuse/neglect actions through the court with the court being able to give custody, care, and placement responsibility to CPS. The FBI and U.S. Attorney’s Office also have jurisdiction to investigate and prosecute criminal child abuse on the reservations. Tribes have representation in many internal and external workgroups related to services provided by South Dakota’s child welfare system. Refer to Tribal Collaboration for further information

In 2022, in preparation for the planning and development of its FFPSA prevention plan, CPS began having individual engagement sessions with tribes. The purpose of these meetings was to gather information about their services, resources, revenues, strengths, and needs. An overview of FFPSA that included allowable areas for claiming, the Clearinghouse, and Evidence Based Practices (EBPs) were provided. The meetings provided an opportunity for CPS to enhance relationship-building with key tribal members. Through storytelling, the tribes shared their communities’ strengths, opportunities or challenges, and areas of concerns in services; these themed are identified below.

Through storytelling, the tribes shared their communities' strengths, opportunities or challenges, and areas of concerns in services; these themed are identified below.

Strengths:

- Developed service arrays
- Investment in families and community
- Creative systems to address basic needs
- Cultural/traditional methods to address family needs

Opportunities or Challenges:

- Housing
- Substance use disorder services/treatment
- Lack of cultural services
- General lack of services in geographical areas
- Lack of community/familial connection

Areas of Concern:

- EBPs lack cultural or traditional component
- Infrastructure, funding, and resources to support direct Title IV-E drawdown
- Necessary collaboration for Title IV-E pass-through funding
- How to ensure their voices are heard

The support of Positive Indian Parenting through Community Based Child Abuse Prevention Grant funds will continue. Other culturally-relevant programs such as Family Spirit and Lakota Circles of Hope would be considered for IV-E reimbursement if a program were to achieve the well-supported rating in the Clearinghouse. These programs are reported to be provided in the state by various community organizations.

Additional engagement included involvement of two tribal members for the development of the request for proposal to obtain the consultant to organize family first prevention planning, scoring of proposals, review of contract, and involvement in teaming structure. Meetings with the ICWA Coalition leads to gather historical information on preferred methods of engaging tribes and provide information on the elements and requirements of FFPSA occurred, including the SD ICWA Coalition meeting in Rapid City. CPS values the involvement of Native representation at all levels of planning, development, and implementation of the prevention plan and the pace at which this planning process has proceeded was intentional in order to organize this involvement. As a result, the Core and Prevention teams have benefited from tribal voice in discussion and decision-making.

Consultants from ICF along with members of DSS met individually with tribal officials on tribal lands to present an overview of FFPSA and begin the process of consultation to gain input from each of these tribes. Refer to attachment 7 for information regarding ongoing tribal collaboration efforts.

Youth Engagement

Incorporating Positive Youth Development is the foundation of the South Dakota Independent Living Program The Young Voices Program serves to ensure that practices are guided by youth input and lived experience. Youth have learned to speak about their life stories and experiences in a way which leads to positive changes in themselves and others. From June 1, 2023, through May 31, 2024, one scheduled Young Voices meeting was held in August virtually, during which the Family First Prevention Program Specialist recruited members to participate, and ten youth were present. During this report year, DSS has also worked to implement a Young Voices Speaker Bureau and has focused on recruitment of youth to participate. During all ILS events, including the workshops and workgroup meetings, there has been discussion with youth and supportive adults on how to utilize the youths' lived experiences to help recruit foster providers for older youth through in-person presentations, videos, social media and utilizing their input when writing policy. Due to the youth meeting virtually, it has been difficult to track attendance and registration, as well as individualized demographics to support the group having a diverse composition. Young Voices meetings and public presentations have given youth the opportunity to engage with their peers and enhance policies and practices of the child welfare system.



Input is continually sought from this group and has led several changes noted in subsequent paragraphs. CPS and the Division of Juvenile Services under DOC meet quarterly with the South Dakota Youth Care Providers Association (SDAYCP), which is comprised of directors of the intensive residential, residential and group care providers in South Dakota. Young Voices continues to be an active voice in dual status youth. Their input has been sought through in person panel presentations where they have shared their own lived experiences. In January 2024, three Young Voices members presented their lived experiences to the South Dakota Association of Youth Care Providers (SDAYCA) and have been invited to follow up events which included a presentation in May with a few members of the SDAYCA, DSS leadership and staff and the Division of Behavioral Health. Several members continue to contribute to a youth advocacy group to prevent homelessness, which meets several times per month virtually or in-person. In the upcoming year, Young Voices members will be invited to participate at upcoming foster parent recruitment meetings held at least two times per year and will plan to share lived experience at least two times per year with community members and stakeholders, as invited.

During ILS events in this report year, Young Voices had offered input on workshop and teen conference planning, foster parent recruitment feedback, and have been invited to participate in recruitment videos and DSS focus group membership. This will be a main Young Voices goal in the upcoming year.

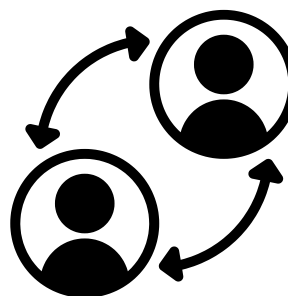
The Independent Living Workgroup meets at least twice a year for planning, organizing, and facilitating the workshops and Teen conference. Workgroup members evaluate the success of the conference, plan for the workshops and provide guidance to the ILS Program Specialist for planning for independent living services. The group is composed of representatives from over 20 various entities and the Young Voices advocacy group members. Staff and youth involved with the BIA and Tribal Child Welfare Agencies are invited to participate in the ILS Workgroup. The Independent Living Workgroup members represent CPS' current and past foster care youth, the DOC, foster/adoptive parents, staff from group care centers for minors and residential treatment facilities, staff from Lutheran Social Services, the CRPs, and their Supervisor and CASA.

A youth survey is scheduled to be sent out in July 2024, then each year in March. Youth are asked to identify their race, with the option to not disclose. This is to help ensure there is an accurate representation of the children being served by the child welfare system. Youth are also asked about what services they are receiving, services they need they are not receiving, and why they are not receiving those services. A group of youth are currently piloting the survey to ensure the language is understandable for youth. Young Voices will be utilized to review the results of the survey and make decisions on next steps to help enhance services for children in foster care.

Parent Engagement

Groups of parents and caregivers were recruited in the Brookings, Pierre and Sioux Falls areas to assist with cognitive interviewing in relation to parent surveys which are slated to be sent out the Summer of 2024. Cognitive interviewing is a technique used to evaluate survey questions to determine whether the true meaning of the question, as intended by the evaluator, is conveyed to respondents, and more generally whether the question is functioning as intended. The CQI Team conducted the interviews in Sioux Falls on May 29, 2024, and in Pierre on May 31, 2024 and in Brookings on June 5, 2024 and June 11, 2024. There was a total of

20 parents who participated in the cognitive interviews and 65% of these parents were Native American. They provided valuable feedback, which is being used to make updates to the survey.



The survey specifically asks parents what services they utilized to achieve their case plan goals, how services were individualized to address their specific needs, if there were services they needed, but did not have access to, and what barriers, if any, prevented them from receiving services. One of the survey questions asked parents if they want to participate in a focus group that will review the results of the survey and participate in joint planning on how to improve children and parents experience when the are involved in the child welfare system in South Dakota. All the parents interviewed expressed this being excellent and how valuable it is to have parents with lived experience involved in that process, majority wanted to participate in the focus group. Lutheran Social Services organized the purchase of gift cards for appreciation of participation in these sessions. The survey is scheduled to be sent out July 2024 and will target current parents involved with CPS, both in home and placement cases, as well as parents who have closed child welfare cases within the last year.

Individualizing Services

CPS begins assessment of children's and families' individualized needs at Intake. There are five elements included in the Initial Family Assessment (IFA) are also within the Request for Services Intake form. Those five elements are: whether maltreatment occurred; the nature of the circumstances surrounding the maltreatment if it did occur; child functioning of each child; general parenting practices and discipline of each parent/caregiver in the home; and adult functioning of each parent/caregiver in the home. Intake Specialists gather any information the referent can provide related to these five elements as well as demographic information and characteristics.

When referrals are assigned for an IFA, the Family Services Specialist completing the IFA must be aware, when possible, of any specialized needs that could affect the Family Services Specialists ability to complete the assessment related to such things as language, developmental delays, hearing or speech limitations, etc. CPS staff are able to purchase translator services.

CPS works with the parents during the PCA process to determine what the family's needs are and what services are necessary to address those needs. The PCA Case Plan is developed around the necessary services and includes roles, responsibilities, and time frames for those who are involved in the plan. South Dakota is an expansive, rural state with a small population base. The availability of services to families varies depending on the particular geographical area of the state.

CPS facilitates parent's access to services through collaboration with service providers, assistance with working with service providers, assistance with transportation, paying for expenses for services not covered through other means, and assistance in addressing other issues that may create barriers for families to access services. The PCA Case Plan Evaluation is used by CPS through communication and contact with the family members and communication and coordination with service providers to evaluate the Case Plan progress and assess whether the diminished protective capacities are being enhanced and, subsequently, whether safety threats are being eliminated.

Placement Resources Support Services

There are multiple resources across the state for foster families to access free clothing and other items for children in foster care. The following non-profit agencies provide support directly to foster families:

The Foster Network out of Sioux Falls assists with supporting foster families across the state. The Foster Network has a clothing closet open to families. The Foster Care Network assists families with bedroom furniture, scholarship opportunities for children in foster care and help supplement families at Christmas time with gifts for children in foster care. They also have a support group for foster families and offer training through this and host multiple retention events each year for families.

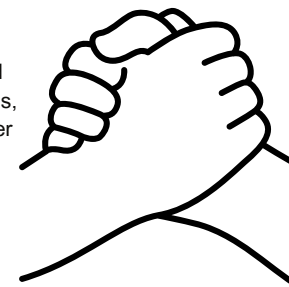
The Cherub's Closet in Sioux Falls, offers one pack of diapers per child once a month, including clothing and other items.

The Society of St. Vincent de Paul, in Sioux Falls, provides free diaper for children in foster care. These are available three Wednesdays and the first three Saturdays of every month.

Sotera Youth and Family Services Collaborative out of the Pierre area provides additional training to foster families. They have a supply closet consisting of clothes, diapers, furniture, formula and toys available to foster families. They host multiple retention events each year for families.

Black Hills Foster Care Association covers the western side of the state. They provide backpacks with basic necessities for children when they come into care. They host multiple retention events each years for families.

Fountain Springs Foster Care Supply Closet in Rapid City provided essential items to children and families in foster or kinship situations, including clothing, underwear and socks, pajamas, meals and other items as needed. This clothing closet closed in April of 2024, however, the Fountain Springs Church is committed in continuing to assist foster families by providing needed items for their family when a request is made.



The Aberdeen Area Foster Closet provides baby/toddler items and toys, hygiene items and clothing for children in foster care.

Restore Church Foster Closet in Yankton provides needed supplies and meals to support foster families and initial placements of children in their home. They also provide wrap around services for foster families with words of affirmation, child care, acts of service, and prayer.

The EC-CASA Caring Closet in Watertown provides items to foster families such as clothing, baby hygiene and equipment, blankets/pillow, toys books, and much more.

Brookings Area Foster Closet provides clothing, shoes, hygiene packs, diapers, baby items and more to foster families in the Brookings area.

The Light of Mine Ranch covers the western side of the state. They help families with school supplies. The assist with purchasing Regalia for Native American children to be able to dance. They provide furniture assistance when needed for families. During the summer they do monthly retention events for families.

South Dakota Kids Belong, in partnership with the Department of Social Services, has initiated a program that will allow community businesses to show their support to area foster families. South Dakota Kids Belong has reached out to local businesses with a request to become "Foster Friendly." Businesses that would like to participate will provide their information on the Foster Friendly app and will note any discounts that are being provided to show their support as a Foster Friendly business. There are currently over 300 businesses who have volunteered services at a reduced or no cost for foster families.

1

Develop a Parent Collaborative workgroup to assist in identifying strengths and barriers in accessing and individualizing services for children and families.

2

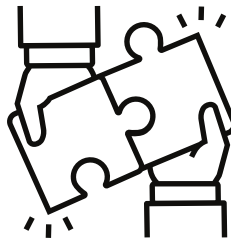
Continue engagement with Young Voices to ensure services to youth are appropriate and individualized.

Agency Responsiveness to the Community

Agency Responsiveness to the Community was found to be in substantial conformity in the 2016 Child and Family Services Review.

State Engagement and Consultation with Stakeholders

CPS is committed to collaborating with community partners to prevent child abuse and neglect. The Governor of South Dakota signed an Executive Order recognizing April as Child Abuse Prevention Month. A media campaign was developed to share the proclamation statewide. CPS encourages people in communities across the state to work together to keep children safe and offer the support families need to stay together. Child abuse prevention material is provided to the Common Sense Parenting class participants statewide. Parenting Education Partners provide information to parents and service providers in their areas of service. See Section 5, Community Based Child Abuse Prevention (CBCAP) section under Child and Family Service Continuum for further information about convening community partners to prevent child abuse and neglect.



Surveys are completed with community stakeholders, parents and children, and CPS staff when Quality Assurance reviews are completed to obtain input on CPS service delivery. The results of the surveys are provided to the Regional Managers and Supervisors for each office reviewed in the form of a written assessment to help in determining systemic strengths and needs and responding to the needs either locally or programmatically. The information gained from the surveys is used to assess outcomes and the CPS service system and will be provided to stakeholders and included in the office's CQI meeting with stakeholders.

Beginning in SFY 2022, parents, youth and kinship providers with lived experience were invited to participate in the kinship workgroup. The youth and kinship providers have attended workgroup meetings. Foster parents and other community partners are active members on the Region 1 and Region 3 Foster Parent Recruitment workgroup. The CQI process is completed during workgroup meetings with internal CPS staff, community partners, and members with lived experiences. This is further detailed in Section 2, Quality Assurance System. Young Voices is also active in South Dakota and meets monthly. Young Voices gives youth the opportunity to engage with their peers and enhance policies and practices of the child welfare system. Input is continually sought from this group and has led several successful initiatives. CPS publishes data relating to safety, permanency and well-being on the Department of Social Services website for anyone to access. Since the launch in SFY 2021, birth parents, kinship families, foster parents, adoptive parents, and youth with lived experience have participated in planning and implementation of the Stronger Families Together initiative to recruit and support foster families who support reunification efforts, maintaining connections, and timely permanency for children.

CPS asked partners within the child welfare system to participate in a survey to learn more about awareness and use of community supports and resources to help parents care for their children. This is further detailed in Section 1, Collaboration section.

Coordination of CFSP Services with Other Federal Programs

The Department of Social Services, Division of Child Care Services provides funding to resource providers when childcare is needed for children in out-of-home placement. The provider must meet program eligibility and is required to be working or attending school (excludes graduate school). Income is not considered for these providers. In SFY2024 (July 1, 2023-May 31, 2024) the Division of Child Care Services served a monthly average of 622 children in the care of CPS.

Temporary Assistance for Needy Families is a public assistance program administered by the Department of Social Services, Division of Economic Assistance. A relative caregiver may be eligible for TANF if there is a parent absent from the home and the caregiver is not receiving a comparable monthly subsidy or other forms of public assistance (for example SSI) for the child. In order for a relative to meet criteria for TANF, they must meet the specific degree of relationship found in Admin Rule 67:10:01:06. The TANF payment rate is higher for children who are "agency-placed". If the child was placed in out-of-home care (with custody or without custody) by the Department of Social Services under a parental agreement or court order, it is considered agency-placed. The average number of TANF cases per month that include at least one child in the home who is "agency placed" from July 2023 through April 2024 is 197 cases. CPS works with kinship families to assure families consider TANF as a source of funding for relative children who are placed in their care.

Children in foster care receiving IVE or IVB funding are eligible for Medicaid Title XIX coverage. Reimbursement for lodging, mileage, and meals is available for appointments or services covered by Medicaid, that are outside the child's city of residence, through the Medicaid Non-Emergency Medical Travel (NEMT). The resource provider must follow the guidelines set by the program. Children in out-of-home placement receiving Medicaid are eligible for this program. The service must be a Medicaid covered service by a Medicaid provider.

The Former Foster Care Medical Program, through the Department of Social Services, provides extended medical coverage for youth aged 18 to 26 that are leaving State or Tribal foster care after their 18th birthday. Referrals for this program are normally generated by the Division of Child Protection Services' (CPS) staff. There is no resource or income limit. In state fiscal year 2024, there were 435 youth receiving Medicaid as part of the Former Foster Care Medical Program as of May 31st, 2024.

Children in the custody of CPS eligible for IV-E funding receive child support services through the Department of Social Services, Division of Child Support Services.

The Health Home Program is available to any child in CPS custody in family foster homes and kinship homes. South Dakota's Health Home Program offers enhanced health care services to eligible Medicaid recipients who have qualifying chronic conditions or a severe mental illness or emotional disturbance.

A child in out-of-home placement may be eligible for assistance through the Social Security Administration due to a disability or through Social Security benefits after the death of a parent. If benefits are available, the Specialist must use the funding to support the care and wellbeing of the child while in out-of-home placement. When CPS learns a child who has entered CPS custody is receiving benefits from Social Security, CPS works with Social Security to be designate CPS as the payee for the child. If a child is not receiving benefits, but it is determined it is in the best interest of the child to receive benefits, CPS will make an application for benefits.

As of June 17, 2024, Child Support Services reports 382 current child support cases and 979 arrears cases involving children in CPS custody.

The Department of Social Services, Division of Behavioral Health provides mental health and substance use services across the state. CPS refers children and parents for evaluation and treatment services to Community Mental Health Centers which receive state and federal funds through contracts with the Department of Social Services. CPS also refers parents and youth for evaluation and treatment services to addiction treatment service providers which receive state and federal funds through contracts with the Department of Social Services. As part of the Juvenile Justice Public Safety Improvement Act, community-based treatment services are also available for justice involved and at-risk youth. Those services include Functional Family Therapy, Aggression Replacement Training, Moral Reconation Therapy, Systems of Care, Substance Use Disorder Services, and other additional services. The Suicide and Crisis Lifeline, 988, is a direct connection for children or families to receive care and support during a mental health, substance abuse, or suicide crisis. Resource providers or children can receive this support by dialing 988 on any phone. 988 can help address and guide a resource provider or child in addressing the immediate crisis needs of the child. It also reduces the use of law enforcement and helps end the stigma towards seeking or accessing mental health care.

The CPS Independent Living Program Specialist is a member of the Department of Labor and Regulation Workforce Training Youth Committee. The Committee was established in response to the Workforce Innovation and Opportunity Act (WIOA) of 2014. The WIOA provides greater emphasis on serving out of school youth through training and services related to related to employment. CPS assists youth who transition from foster care and parents in need of housing by working with federally funded housing programs including HUD.

Eligible children in the custody of CPS are provided services through the South Dakota Department of Human Services, Division of Developmental Disabilities. The programs include residential and community-based services for individuals with disabilities. The mission of the Division of Developmental Disabilities is to ensure that people with developmental disabilities have equal opportunities to receive services and supports they need to work and live. There are state funded family supports available for those caring for children who have a developmental disability. These programs include Respite Care, Strengthening Families Program, Family Support 360, and CHOICES Program.

CPS works with the local schools to assure children in the custody of CPS receive special education services and other school-based services. The National School Lunch Program (NSLP) is a federally assisted meal program operating in public and non-profit private schools. This program provides free and reduced school meals for children. Children in foster care or children who reside in a household that receives TANF services are eligible for free school meals. These children may also be eligible for the School Breakfast Program, Special Milk Program for Children, Child and Adult Care Food Program, and Summer Food Service Program. CPS also assists parents and resource providers in receiving in accessing special education services through the schools. A child may be eligible for an Individual Education Program. Eligibility is determined by an evaluation procedure completed by the child's school district and based off the SD Department of Education Eligibility Guide. Head Start and Early Head Start is available for families who receive public assistance (TANF, SSI, or SNAP) or who have children in an out-of-home care by CPS are eligible for free learning and developmental services for children ages 0-5. There are center-based or home-based options. Head Start programs help prepare children to succeed in school and deliver services in core areas of early learning, health, and family well-being.

SD Birth to Three helps children with developmental delays and their families provide early intervention to services and supports. The program is for children from birth to 36 months with developmental delays or disabilities. Children in out-of-home placement must receive a birth to three evaluations after a substantiated report of abuse and neglect or during their initial placement in out-of-home care, and additionally if there are developmental needs or concerns that are identified later. During State Fiscal Year 2024 (July 1, 2023-May 31, 2024), CPS referred 533 children to Birth to Three.

The Department of Social Services, Division of Child Care Services provides the Early Childhood Enrichment Program. This program focuses on keeping children safe by providing child safety seats at no cost to families with children who are eligible for Title XIX Medicaid. Caregivers for children placed in out-of-home care are eligible for this program.

South Dakota Women, Infants, and Children Program (WIC), through the SD Department of Health, is a public health nutrition program that provides information on healthy eating, referrals to healthcare and other services, and nutritious foods (vegetables/fruit, whole grains, dairy, proteins, juice, cereal, infant food) to supplement diets for South Dakota children up to age five who qualify for Medicaid Title XIX, Temporary Assistance for Needy Families (TANF), or other low income programs. Caregivers of children placed in out-of-home are eligible for this program.

The Supplemental Nutrition Assistance Program through the Department of Social Services, Division of Economic Assistance, helps low-income families by providing the food they need to stay healthy. If a kinship caregiver is struggling to provide food during out-of-home placement, SNAP is a resource that can be utilized.

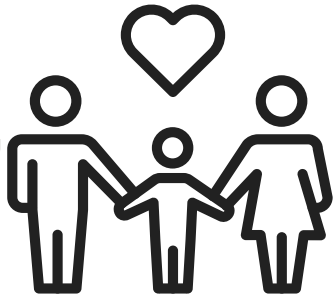
Energy and Weatherization Assistance is available through the Department of Social Services, Division of Economic Assistance. This program helps low-income households pay for home heating costs and make their homes more energy efficient. Eligibility and assistance amounts are based on the number of people in the home, income, and type and cost of heating in the home. Kinship caregivers are able to apply for assistance.

The Division of Rehabilitation Services (DRS) provides resources to assist children with a disability obtain or maintain employment, economic self-sufficiency, personal independence, and full inclusion into society. Vocational Rehabilitation offers Project Skills, which is a paid work experience available to high school students. The state works with the local school district to provide students a job coach that facilitates an opportunity to learn different skills in a variety of job placements. This division also provides transitional resources for students with disabilities. This helps students plan for their future with a variety of services. Other resources available through Rehabilitation Services include Project Search, Assistive Technology, Supported Employment Services, Customized Employment, and Independent Living Services. In addition, there are services available to children who are deaf, hard of hearing, or have speech impediments.

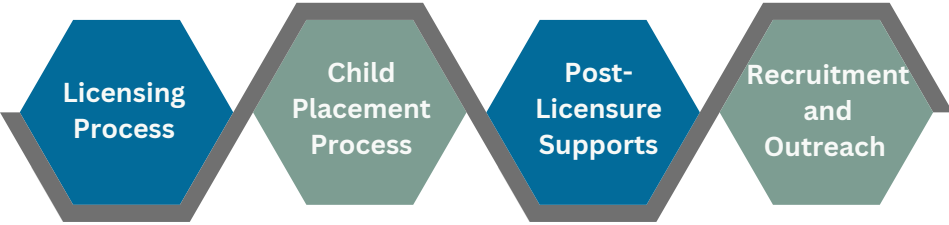
The Department of Social Services, Child Protection Services receives funding through the Kinship Navigator Grant to assist kinship caregivers in learning about, finding, and using programs and services to meet the needs of the children they are raising and their own needs; and to promote effective partnerships with public and private agencies to ensure kinship caregiver families are served. This includes providing concrete supports and brief legal services for families. These concrete supports may include groceries, gas, beds, clothing, etc. From July 1st, 2023, to June 1st, 2024, the Kinship Navigator Grant reimbursed 203 families with concrete services. There were 156 families involved with the SD Department of Social Services at the time the reimbursement occurred and 47 families informally caring for their kin or whose kinship placement was supervised by a tribal child welfare office. Other families were also provided long-term referrals to community supports or public assistance.

Office of Licensing and Child Protection Services Licensing Process Redesign

Child Protection Services and the Office of Licensing and Accreditation (OLA) have worked collaboratively on recruitment, licensure, placement, and foster parent support for several years. Over these years, CPS and OLA have identified strengths and areas for improvement. Currently, CPS and the OLA are working collaboratively with the assistance of the Change and Innovation Agency (CIA) on the Business Process Re-Design Project. The goal of this project is to develop a process redesign effort to achieve greater efficiency, effectiveness, and overall performance in our key functions for the families and children we serve. A team of staff members from various levels, from both CPS and OLA, including supervisors and managers are a part of the process re-design to ensure stakeholder engagement and input is being utilized within all phases of this effort. The team is currently discussing what processes are going well and what processes can be enhanced.



The process redesign team has been meeting with subject matter experts to identify and map several critical processes that will be addressed throughout the implementation stage of the process redesign effort. The team has identified the following critical processes thus far:



Throughout the mapping processes, innovative ideas from the redesign team have been discussed to assist in the implementation and improvement of these processes. These ideas range from small, incremental changes, to more substantial, transformative improvements, incorporating new technologies, all aimed at increasing efficiency, effectiveness, and overall performance. With these goals being prioritized, it will lead to better resource allocation, allowing CPS to direct efforts and resources where they are most needed. Additionally, a more streamlined system will create a more supportive environment for OLA and CPS staff, including an enhanced relationship with OLA as a stakeholder. With the implementation stage in process CPS can expect staff to see the following next steps:



Successes and barriers on the implementation of the redesign and the impacts on placement stability will be captured on the Annual and Progress Services Reports that follow the 2025-2029 Child and Family Services Plan.

SD State law mandates licensure of childcare providers and gives the Department authority to establish minimum standards for licensure and adoption approval. All licensing and adoption actions are based on South Dakota laws (SDCL 25-5 and 26-6) and adoption and licensing standards (Chapters 67:4:01 – Provisions and Scope of Services; 67:14:32 - Services to Adoptive Families; 67:42:09 – Child Placement Agencies; 67:42:05 - Family Foster Homes; 67:42:07 – Group Care Centers for Minors; 67:42:08 – Residential Treatment Centers; 67:42:11 – Environmental/Health; 67:42:13 – Independent living Preparation; and 67:42:15 – Intensive Residential Treatment Centers. As new national standards are passed into Federal law, the Department actively works with the Division of Legal Services and other stakeholders to draft legislation to bring South Dakota into compliance with Federal law.

Foster and adoptive parents are required to complete 30 hours of orientation training. Unity training is available to a limited degree in some tribal areas to offer a more culturally competent curriculum. DSS has modified the process for the 30 hours of training to allow applicants to attend classes completed in ten, three-hour meetings, participate in individual sessions or by completing it on-line. Home consultations are conducted throughout the training and as part of the home study process. Upon completion of the orientation training, families are given an application to sign for licensure of foster care and for adoption approval.

The Department has 120 days from the date an application is signed to complete the home study process. The initial home study completed can be used for both adoption approval and foster care licensure. DSS policy does not allow for provisional licenses. Exceptions can be made to the maximum of six children under 18 in the home, including the foster parent's children in the case of sibling groups.

When licensing staff initially license a foster home and complete renewals of licenses the OLA Supervisor and Program Manager reviews the documentation to assure standards are met. They are required to read the home study related to general standards, look for completed background checks, look for any changes in the home that may affect the license, and verify completion of training.



The rules and law cover a range of standards including health history, three reference checks, central registry screenings for all household members that are 18 years of age or older, criminal records checks for adult household members by the Division of Criminal Investigation that includes a fingerprint FBI check for foster care licensure and adoption approval, training, the applicant's ability to provide care, number of children in the home, and home safety provisions.

Once a family is licensed for foster care and adoption their license is valid for one year. After a foster parent is licensed, an application for foster care is completed by the foster parent on an annual basis. A renewal visit is completed to check continued compliance with administrative rules. In addition to required pre-service training, foster parents must attend six hours of training annually before their license may be renewed.

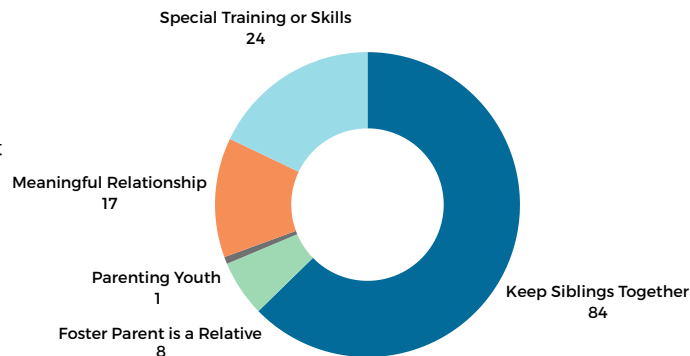
In compliance with new federal rule effective November 27, 2024; South Dakota's State Title IV-E plan was amended to ensure licensed kinship families are reimbursed at the same Foster Care Maintenance Payment (FCMP) rate as a licensed non-relative foster home would receive for the same placement. South Dakota is also exploring development of separate kinship licensing standards in accordance with this new federal rule.

Exceptions to the Number of Children

DSS has an Administrative Rule allowing exceptions to the status and number of children cared for by foster families. OLA Licensing Specialists request exceptions to this standard to the Licensing Supervisor and Program Manager. OLA Licensing Specialists provide the resource name and number along with the following:

- A summary of the number of children currently in the home
- The number of children requested for the exception
- The needs of the children being placed
- The reason for the exception
- The family's ability to meet the needs of the additional children
- What actions or next steps will be needed to support the family

The Licensing Supervisor and Program Manager will approve or deny the exception. All exceptions are tracked on a shared document between the Program Manager and Licensing Supervisor. There are no timeframes associated with the exceptions, however approved exceptions are re-evaluated at the time of the family's annual renewal. Since January 2021, OLA has granted 134 exceptions. The chart below shows the total number of exceptions and the reasons the exceptions were granted.



Child Placement Agencies (CPAs)

OLA is the agency responsible for licensing Child Placement Agencies. Each Child Placement Agency is relicensed annually by the Foster Care Program Specialist and each Group Care Center and Residential Treatment Facility is relicensed annually by the Group Care/Residential Program Specialist.

There are 12 Child Placement Agencies licensed to provide services. The majority of the children served by Child Placement Agencies providing adoption placement services are newborns whose parents are not involved with CPS and who voluntarily terminate parental rights for the purpose of adoption of the child. The agencies provide the temporary foster home, complete adoptive home studies and match children with adoptive parents. The service CPS contracts from Child Placement Agencies is treatment foster care. The Child Placement Agency recruits and licenses the foster families. CPS makes placement referrals to the Child Placement Agency. The Child Placement Agency provides supervision and case management services to the child and the foster home as a supplement to the supervision and case management services CPS provides.

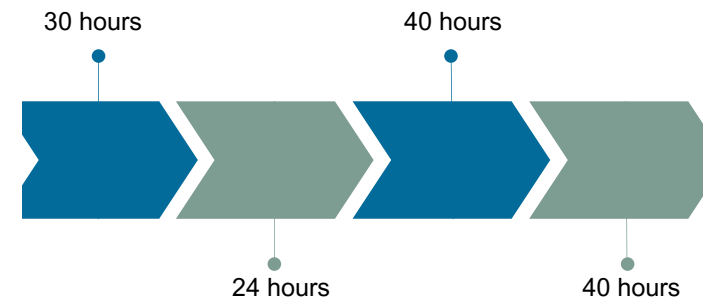
The Child Placement Agency must follow the same standards and requirements as OLA foster homes must follow, which are established through state law and rule. Each licensed agency is reviewed at least one time per year.

Group Care Centers, Emergency Shelters, and Residential Treatment Facilities

There are 7 Group Care Centers for Minors, 8 Residential Treatment Centers, 1 Intensive Residential Treatment Centers licensed, and 9 Emergency Shelters to provide care in South Dakota. Each licensed facility is reviewed at least one time per year. The review consists of an audit of 25% personnel records and 25% resident records, review of volunteer records if volunteers are used, review of updates or changes to policy and procedure and interviews with staff and residents of the facility.

A random sample of employee personnel records and youth records are reviewed, interviews are completed with a selected number of youth and staff, and surveys using survey monkey are completed with all youth and staff. OLA completed the annual reviews of all 21 facilities during state fiscal year 2024.

CPS contracts with Private Agencies to provide Treatment Foster Care, Group Care, Residential Treatment, and Intensive Residential Treatment services. These agencies are licensed by OLA, reviewed yearly, and approved by the Program Manager. Each agency is responsible to keep orientation and on-going training records for each staff and OLA reviews a random sample during their yearly renewal. Training standards for staff in these agencies follow:



Agencies that do not comply with the training standards will be placed on a Corrective Action Plan.

Requirements for Criminal Background Checks

OLA is the Division within the Department of Social Services responsible for licensing Child Welfare Agencies. The type of facilities for children which are defined as child welfare agencies are Foster Homes, Child Placement Agencies, Group Care Centers for Minors, Residential Treatment Centers, Intensive Residential Treatment Centers, and Emergency Shelters. Child Welfare Agencies are required to meet established standards.

Provisions for Criminal Background Checks for Prospective Foster and Adoptive Parents

South Dakota Codified Law 26-16-14.3 and 26-6-14.5 require criminal records checks of child welfare license applicants, staff, and other adults residing in the facility or home, including foster homes and group and residential programs, and 25-6-9.1 requires criminal records checks of adoptive parents and applicants. These checks for foster homes and group and residential facilities are done through the state Division of Criminal Investigation. DSS rules ARSD 67:42:01:05.01 and 67:14:32:05.05 defines what convictions disallow an applicant from being licensed for foster care or approved for adoption.

CPS rules ARSD 67:42:01:05.02 and 67:14:32:05.03 require screening of applicants, staff, family and other household members who are at least eighteen years of age for substantiated reports of child abuse or neglect, defines substantiated reports to include placement on the central registry, outlines the screening process and does not allow these individuals in a foster or adoptive home to have a substantiated report.

**67:42:01:05.01.
Criminal record
check.**

The department shall secure a criminal record check to obtain information concerning convictions for criminal offenses by a prospective foster parent as well as any other adult living in the prospective foster home. An individual is not eligible to receive a foster home license if the individual or any other adult living in the prospective foster home has a conviction for any of the following:

1. A crime that would indicate harmful behavior towards children;
2. A crime of violence as defined by SDCL 22-1-2 or a similar statute from another state;
3. A sex crime pursuant to SDCL chapters 22-22 or 22-24A or SDCL 22-22A-3 or similar statutes from another state; or
4. Within the preceding five years, a conviction for any other felony.

If an individual is seeking licensure from another child-placement agency, the department shall obtain the criminal record check for the child-placement agency if the child-placement agency is unable to obtain the record check on its own. If the criminal record check reveals a conviction for any of the crimes listed in this section, the department shall notify the child-placement agency of the existence of the conviction.

For all other child welfare agencies, the department shall review the provider's records to ensure that the criminal records are being secured to detect convictions for any of the crimes listed in this section.

The department shall deny an application and shall notify the applicant of the denial if the criminal record check required under § 67:14:32:11.01 detects a conviction for any of the following:

1. A crime that would indicate harmful behavior towards children;
2. A crime of violence as defined by SDCL 22-1-2 or a similar statute from another state;
3. A sex crime pursuant to SDCL chapters 22-22 or 22-24A or SDCL 22-22A-3 or similar statutes from another state; or
4. Within the preceding five years, a conviction for any other felony.

**67:14:32:05.05.
Application
denied if criminal
record check
detects certain
crimes.**

**67:14:32:05.03.
Screening for
substantiated
reports or
convictions of
abuse and
neglect.**

The department shall screen an applicant and family members and other household members who are at least ten years old to determine if the individual has been involved in any substantiated incidents of child abuse or neglect. The individual may not have a substantiated report of child abuse or neglect. Substantiated reports of child abuse or neglect include reports placed into the department's central registry under § 67:14:39:03, reports placed on the central registry of another state, and reports that were investigated and substantiated by a tribal program.

If the screening locates an individual's name on the department's central registry and the individual has not already been given due process on the substantiation, the department shall notify the individual in writing that he or she may request a hearing to refute the accuracy of the information found. The hearing shall follow the provisions of SDCL 26-8A-11 and chapter 67:14:39.

If the screening locates an individual's name on the central registry of another state, it is the individual's responsibility to contact the other state to access the process for removal of his or her name from that state's central registry. If the other state has such a process and removes the individual's name from its central registry, the individual shall request the other state to submit documentation to the department verifying the removal of the individual's name from its central registry.

If the screening locates a report that was substantiated by a tribal program, it is the individual's responsibility to contact the tribal program to access the process for removal of his or her name from the record of the report. If the tribal program has such a process and removes the individual's name from the record of the report, the individual shall request the tribal program to submit documentation to the department verifying the removal of the individual's name from the record.

Licensing Specialists monitor any changes in family circumstances and complete the required background checks as needed. At the time of the renewal, the Licensing Specialist will complete a name-based search in FACIS and through the Unified Justice System to ensure the family remains in compliance with standards.

Safety of Children in Care



The Regional Managers track the number of children who enter CPS custody and have no emergency placement identified by the evening of their first night in care. This tracking allows CPS to evaluate the types of placement resources needed for children in CPS custody.

CPS completes a minimum of one monthly home visit for children placed in all levels of out-of-home care within South Dakota. The caseworker must assess the child's strengths, needs, and services at each home visit. The caseworker must seek input from the resource provider, parent(s), child, and other members of the permanency team regarding the child's medical health, mental health, educational status, social health, family connections, independent living skills, and permanency goals. In addition, the caseworker must assess safety through observations and interviews with the resource provider and child. The caseworker must also assess placement stability and provider resources needed to stabilize the placement. The caseworker uses input, observation, and contacts with the child's permanency team to develop the Child Case Plan and is documented in the caseworker narratives monthly. This case plan is established within 60 days of the child's placement out of the home and updated every six months. Refer to Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits section for further information regarding frequency and quality of home visits.

Response to Children on Missing from Care Status

Areas of noncompliance with licensing standards are documented through Centralized Intake as Resource Complaints and assigned to the Licensing Specialist for follow up. The Licensing Specialist will contact the family and address areas of need.

When the Department of Social Services has custody or care of a youth and the youth is absent from their placement resource or parent, specific procedures must be in place to help successfully locate and assess the youth's safety.

Children and youth who are missing, or have run away from foster care, have a greater likelihood of experiencing adverse outcomes. This applies to any child or youth who the SD Department of Social Services has responsibility for care, placement, and supervision.

When a child is reported as missing from care, the resource provider or CPS must contact law enforcement for entry into the National Crime Information Center (NCIC) and SD Missing Persons Clearinghouse. Within 24 hours, CPS must notify the child's parent(s) and notify the National Center for Missing and Endangered Children (NCMEC). On the next business day, CPS must notify other participants of the child's permanency team including the tribe (if applicable), the state's attorney or tribal prosecutor, the child's attorney, or guardian et litem, and the parents' attorneys. The CPS Permanency Program Specialist will be notified of the report when the CPS caseworker enters that the child is missing from placement on the caseworker documentation system (FACIS). If the youth is missing from care and considered high risk or if it is believed that the child was taken against their will, the CPS Director must be notified. The CPS caseworker will document attempts to locate the child on a weekly basis. Concerted efforts should be completed to locate the missing youth. The Permanency Program Specialist reviews all CPS children missing from care monthly to ensure that sufficient attempts to locate are occurring. The Permanency Program Specialist can request further consultation to locate the missing youth. The Permanency Program Specialist reports information regarding children missing from care/runaway to the Director and Assistant Director.

Once a child is recovered or located, diligent efforts must be made to complete a debriefing with the child that includes:



Documentation of the debriefing must be included in the youth's file. This information will be reported to future placement resources. If the youth is identified to have been at risk or a victim of sex-trafficking trafficking, this must be reported immediately to intake, law enforcement, the NCIC, and NCMEC. A specialized plan must be created to identify specialized services and supports for a youth who has been a victim of sex-trafficking. This may include a referral to appropriate forensic, medical, mental health, placement, and educational services.

CPS Foster Home Licenses

The last Title IV-E review that was completed occurred in 2018, South Dakota was due for another review in 2021, however, this was cancelled due to the COVID-19 Pandemic. In 2018 the outcomes of the IV-E are as followed:

The review team determined that seventy-nine of the eighty (79 of 80) cases met eligibility requirements (i.e., were deemed non-error cases) for the PUR. One case was determined as an error for the child's entire foster care episode. There were no cases with underpayments or non-error cases with ineligible payments.

The Children's Bureau has determined the South Dakota title IV-E foster care program is in substantial compliance for the PUR. Substantial compliance in a primary IV-E Review means the total number of error cases is four or fewer cases determined as not meeting eligibility requirements for the PUR. Since the state is in substantial compliance, a secondary review of 150 sample cases is not required. The next primary review will be held in three years.

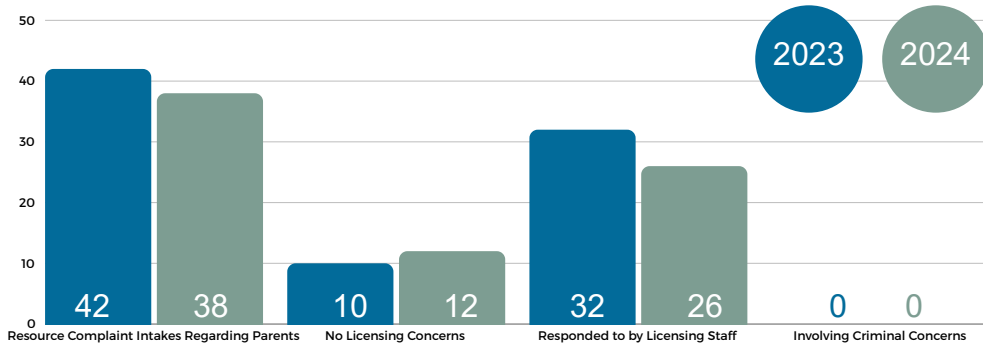
A mock IV-E review took place the week of April 22 through April 26, 2024. This review was in preparation for an anticipated upcoming federal review in late 2025 or 2026. There was a total of 80 cases reviewed utilizing the Federal Title IV-E Foster Care Eligibility On-Site Review Instrument and consisted of six reviewers from Child Protection and the Office of Licensing and Accreditation. This is the same number of cases that will be examined for the upcoming Federal Review. The purpose of the mock review and upcoming Federal review is to ensure the State of South Dakota is appropriately determining a child's eligibility for Title IV-E funding. Eligibility criteria include wording in court orders, financial need of birth/adoptive families, compliance with licensing standards for IV-E reimbursable payments, etc.

At this mock review, 2 cases out of 80 cases were found to be out of compliance, which means South Dakota is in substantial compliance with Federal Title IV-E requirements. One of the two cases found to be out of compliance was due to an invalid foster care license. The second of the two cases was found to be out of compliance due to a lack of appropriate language in a permanency order. Training and consultation will be provided to the IV-E Program Assistants, Field staff and Licensing staff in these areas, to minimize errors and maximize IV-E revenue.

Provisions for Addressing the Safety of Foster Care and Adoptive Placements for Children

When CPS receives a report alleging abuse or neglect of a child in foster care or a placement facility, the report is written as an Intake. The report is then screened by the Supervisor to determine what type of response is necessary. If the report in fact includes any allegations of abuse or neglect or concerns for child safety, steps are taken to assure the safety of the child, which may include removal of the child if necessary. In the case of placement facilities, involved staff may be put on administrative leave or terminated depending on the seriousness of the allegations. The report is assigned as an Out of Home Investigation. If the Intake is determined to not involve allegations of abuse or neglect or concerns for child safety, then the report is referred to OLA Licensing staff so a determination can be made what further action is needed to assess the situation for licensing compliance issues. CPS uses more liberal guidelines to assign reports involving children in care. This would also apply to situations where there are allegations regarding crimes on the part of the foster parent or any other member within the home. In most instances, the Out of Home Investigation is completed by a contract consultant. If it is determined after the investigation there was no abuse or neglect or no concerns for child safety, then the report is referred to OLA Licensing staff so a determination can be made what further action is needed to assess the situation for licensing compliance issues. It is also possible for a concern regarding a foster home to come to the attention of CPS as a licensing complaint. If the concerns do not involve allegations of abuse or neglect and safety issues, the report is recorded in the FACIS resource case screens and handled by OLA Licensing staff.

The following table provides data on the Resource Complaint reports to CPS regarding foster parents. Each report was determined to be solely a resource complaint since it did not involve abuse and neglect concerns or concerns for child safety. The reports were then further assessed for licensing concerns and those with licensing concerns were addressed by licensing. The concerns reported related to Fiscal Year 2022 and 2023.



Diligent Recruitment of Foster and Adoptive Homes

During the 2016 Child and Family Services Reviews the State's Foster and Adoptive Parent Licensing, Recruitment, and Retention program was rated as a Strength and found in substantial conformity.

The Department of Social Services, Office of Licensing and Accreditation has consistently licensed more families than families who discontinue providing care.

Refer to the [Foster and Adoptive Parent Diligent Recruitment Plan](#) for detailed information regarding plans for performance enhancements and assessment and strategies for continually strengthening outcomes consistent with our vision.

[Foster and Adoptive Parent Diligent Recruitment Plan](#)

State Use of Cross-Jurisdictional Resources for Permanent Placements

CPS policy requires home studies requested by another State for prospective foster and adoptive homes or kinship providers be completed and submitted to the other state within 60 days. The only exception to this time limit is if circumstances are beyond CPS's control (e.g., delays in receipt of Federal Agency background checks). CPS then has an additional 15 days to complete the study and report to the requesting State.

CPS contracts with Lutheran Social Services (LSS) to complete ICPC home studies for foster homes and adoptive homes in all Regions. CPS contracts with Lutheran Social Services to complete ICPC home studies for prospective kinship placements and parents in all Regions.

The following procedures are to be followed by LSS and CPS staff in order that the 60-day time frame can be met for ICPC home studies related to foster and adoptive parents.

- After receipt of the home study request from another state, ICPC Program Specialist reviews information for accuracy and submits ICPC information to LSS via secure email.
- LSS makes their first contact with the family over the phone whenever possible.
- LSS follow-ups with a letter re-affirming the time frames to complete the home study.
- LSS assists families in obtaining fingerprints, when necessary, in order to do FBI criminal background checks if the home is to be licensed for foster care. State Division of Criminal Investigation checks are completed for kinship and adoptive home study requests.
- LSS offers families assistance in completing necessary forms.
- When obtains the signed documents from the family. LSS contacts the appropriate CPS supervisor to discuss any issues that arise during the home study process.
- The completed home study includes a recommendation regarding the placement and identifies any issues requiring specific attention, services, or supervision. The completed study is sent to the ICPC Program Specialist, appropriate CPS supervisor with the cover letter copied to the appropriate Regional Manager.

- If required efforts by LSS have been exhausted and the family does not provide sufficient information or cooperate with other requirements for completion of the home study, the home study will be denied.
- The Deputy Compact Administrator/ICPC Program Specialist reviews all ICPC home studies. If the Regional Manager is reluctant to approve the home for placement, the reasons will be discussed with the ICPC Deputy Compact Administrator who then makes the final decision whether to approve the home study.

The following procedures are to be followed LSS and CPS staff in order that the 60-day time frame can be met for ICPC home studies related to kinship and parents.

1. After a request is received to complete a relative or parent home study, CPS documents the request in FACIS and sends the request to the CPS Regional Manager or Supervisor and LSS.
2. LSS makes contact with the relative or parent to complete the required paperwork. LSS completes home visits with the relative or parent and makes collateral contacts to gather information for the home study.
3. Once CPS receives the study, a determination is made by CPS whether the placement will be approved or if there is need for more information. CPS may need to gather more information from LSS and/or the potential resource in order to make the placement decision.
4. The Deputy Contract Administrator reviews all ICPC home studies. If the Regional Manager is reluctant to approve the home for placement, the reasons will be discussed with the ICPC Deputy Compact Administrator who then makes the final decision whether to approve the home study.
5. CPS tracks all incoming and outgoing home study requests and the completion dates in order to report to the Federal Government on an annual basis the length of time it takes to complete and report on the home studies from the requesting states.

South Dakota utilizes the National Electronic Interstate Compact Enterprise (NEICE) to process cross jurisdictional adoptive and permanent placements within the State of South Dakota. All Interstate State Compact on the Placement of Children (ICPC) parties are required to utilize NEICE by 2027. There are currently six ICPC member states that are not currently utilizing the NEICE program. South Dakota processes these requests via secure email.

South Dakota utilizes reports in the NEICE system and the FACIS system to assess the efficiency of the ICPC process.

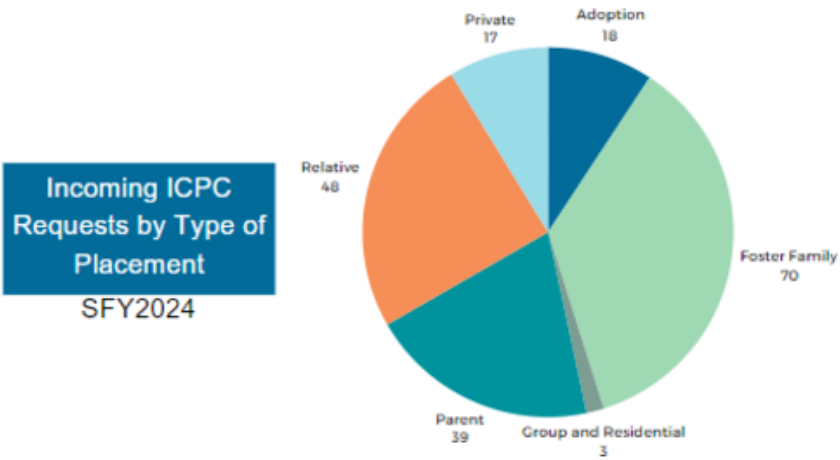
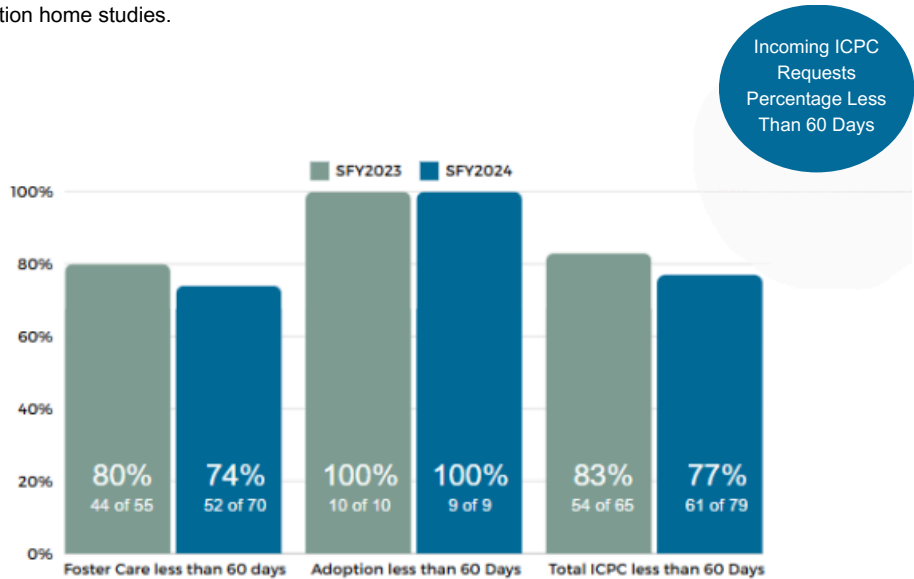
South Dakota Local Office completes all required documents for an ICPC request. This request is sent to the ICPC Program Specialist for processing. The ICPC Program Specialist reviews documents for accuracy and requests additional information from SD Local Worker if needed. The information is then sent to the receiving state via NEICE or secure email.

NEICE has streamlined the process for sending and receiving ICPC requests and improved timely communication between States. There continues to be delays in receiving out of state background clearances and completion of required foster parent/adoption training. These requirements often take over sixty days and delay the timely completion of home studies and placement decisions.

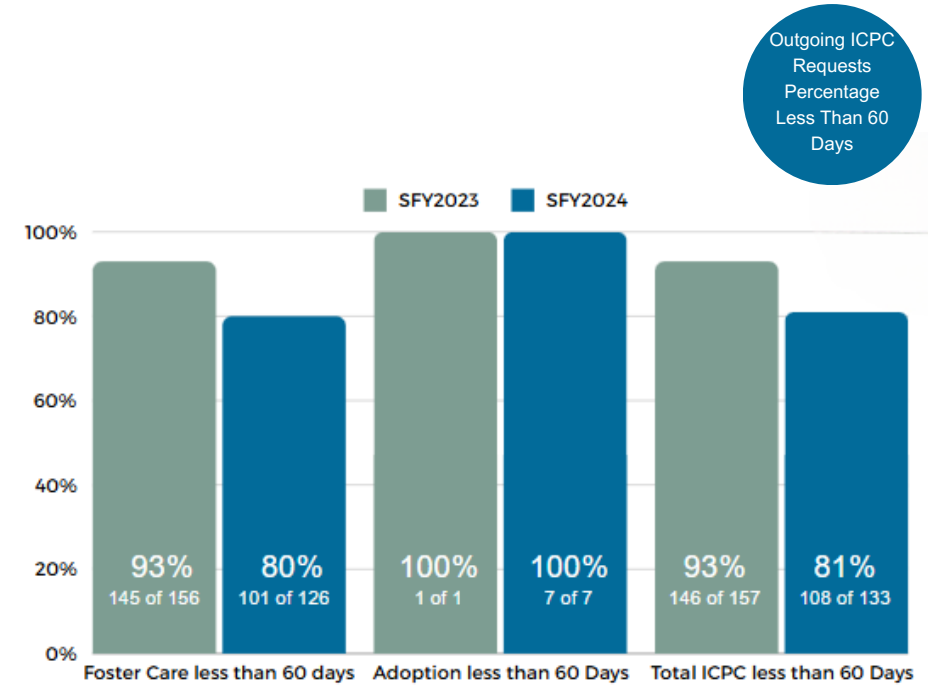
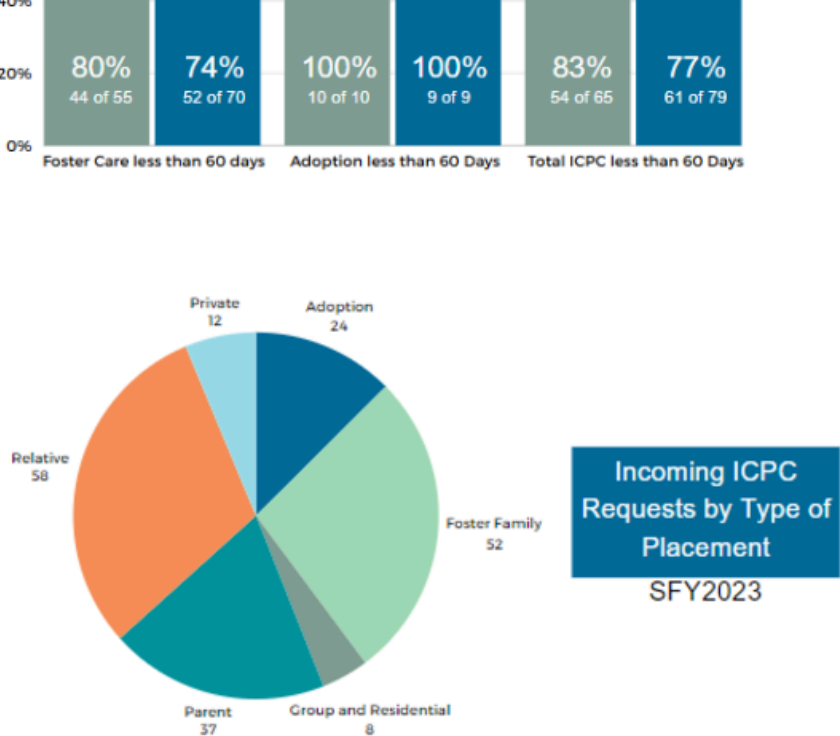
The sending state send ICPC documents to South Dakota utilizing the NEICE system or secure email. The ICPC Program Specialist reviews documents to ensure accuracy and requests additional information in needed. The information is then sent via secure email to SD Office of Licensing and Accreditation, the contracted home study agency, and the Local SD Child Protection Office for review. SD Office of Licensing and Accreditation and/or the contracted home study agency then complete study. The completed study is sent back to the ICPC Program Specialist who reviews in conjunction with the SD Local Office to determine a placement decision.

ICPC Program Specialist receives ICPC requests via secure email from the SD Department of Corrections, private adoption agencies/attorneys, contracted Tribes and from parents for private residential or adoptive placements. The ICPC Program Specialist reviews these requests for accuracy and sends the requests via NEICE or secure email to the receiving state. When ICPC requests are received from another state for private parental placements, private adoptions, or residential placements, ICPC Program Specialist reviews information and approves or denies placement. If the proposed placement resource is domiciled on a contracted Tribal Reservation, the request is sent to the Tribal Social Services Agency for completion of the home study and placement approval.

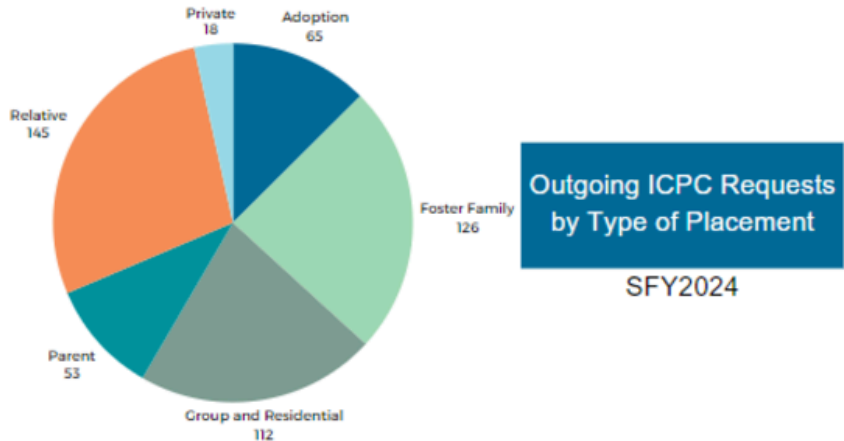
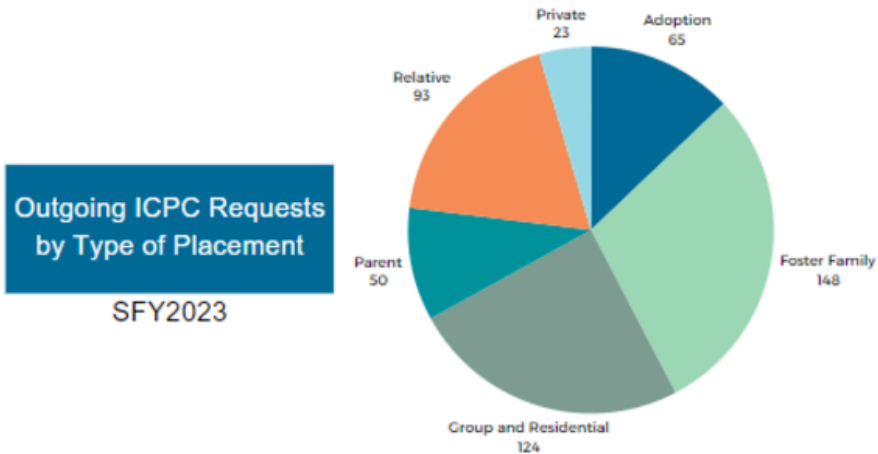
The following is data obtained from NEICE regarding completion of ICPC foster home and adoption home studies.



The following table includes data which shows the percentage of home studies completed for CPS within 60 days by other states. It indicates how timeliness of completion of home studies is a general issue nationally. Per NEICE, May of 2024, 40% of requests through NEICE meet the less than 60 days requirement.



The following table includes data which shows the volume of ICPC requests by placement type CPS has made in SFY2023. Of particular significance is the number of adoption and relative ICPC requests for the last State Fiscal Year.



III. Plan for Enacting the State’s Vision

Goals

Families are engaged with a child welfare system which honors and uplifts their values and resilience through the empowerment of families involved within the system.

CPS collaborates consistently with the internal and external partners in the development, assessment, modification, and monitoring of the CFSP, as well as the progress reported in subsequent APSRs. These collaborative efforts are not seen as an event, but an ongoing process to continually identify more efficient and effective ways to improve outcomes for children and families who encounter the child welfare system.

Further collaboration with internal and external teams provided the input necessary to finalize South Dakota’s vision statement, these partners included the Pennington County Deputy State’s Attorney, Court Improvement Program Coordinator, the Center for the Prevention of Child Maltreatment. A tribal stakeholder and additional CIP member who is associated with the school district were invited, however, were not able to attend. They were given the opportunity to provide feedback in writing. In determining interim benchmarks, the team agreed to set a benchmark for the first year, then review progress towards each goal/objective each year thereafter to determine what the next year’s goal should be.

The process of envisioning the future of child welfare through the development of a vision statement provided an opportunity for multiple discussions, both internal and external. The vision statement provided aims to empower all members of the child welfare system towards systemic change.

South Dakota is scheduled to complete their Child and Family Services Review in March of 2025. South Dakota determined it is more strategic to wait on setting benchmarks 5 years in advance or identify specific supports as initiatives may shift as a result of the CFSR findings and PIP implementation. CPS wants to ensure the PIP implementation supports and CFSP implementation supports align. Additional benchmarks and implementation supports will be captured on subsequent APSP’s after the Round 4 PIP is finalized.

Goal 1

The Child Welfare System is equipped to provide children and families with evidence-based prevention services which align with the Family First Prevention Plan.

Goal 2

When a family is involved in the child welfare system, the least restrictive prevention service is utilized, to ensure children are not removed from the home when they can safely be cared for in their home.

Goal 3

Families involved with the child welfare system through the court, receive appropriate services to ensure timely and suitable safety, permanency, and wellbeing for children. Children return to the home as soon as safely possible through a shared understanding of all parties of Conditions for Return.

Goal 1

The Child Welfare System is equipped to provide children and families with evidence-based prevention services which align with the Family First Prevention Plan.

The first goal focuses on the need to identify and change the trajectory of children and families at risk of entering the child welfare system. Families have better outcomes when parents and children are served together in the home prior to any formal child welfare intervention.

➤ Goal 1, Objective 1: Reduce entry into foster care by families accessing services prior to the need for out of home placement.

Rationale: Evidence-based prevention services to families will reduce situation where family find themselves in crisis situations that lead to Child Protection Services intervention. This will reduce childhood trauma and family separation.

Interim Benchmarks:

- Year 1: Finalize Family First Prevention Plan for comprehensive prevention services to be available to families.

Training and Technical Assistance: Once the Family First Prevention Plan is implemented, training on evidence-based programs that are encompassed in the plan will be provided.

When a family is involved in the child welfare system, the least restrictive prevention service is utilized, to ensure, whenever possible, children are not removed from the home.

The second goal focuses on the need for the child welfare system to effectively utilize prevention interventions, both existing and others yet undeveloped, to ensure children who can safely be cared for in their home or in the home of an extended family or family network, do not enter custody. Children and families must be served in the least intrusive means necessary.

➤ Goal 2, Objective 1: Child welfare system partners are empowered to participate in joint planning to enhance service array and delivery at the local level.

Goal 2

Rationale: Systemic change occurs when all child welfare systems collaborate to support families in receiving timely and appropriate services in order to achieve positive outcomes.

Interim Benchmarks:

- Year 1: Regional assessments are completed and distributed to stakeholders, to inform them of local child welfare trends.
- Year 1: Regional teams are created or enhanced to develop CQI plans to identify and implement strategies to improve outcomes for children and families.

Training and Technical Assistance: The CQI Team will complete case review on policy and practice, administer surveys, provide analysis of surveys and case reviews, and develop the Regional Assessments for each local CQI meeting. The CQI Team will provide guidance to the local teams in developing CQI plans.

Goal 3

Families involved with the child welfare system through the court, receive appropriate services to ensure safety, timely and suitable permanency, and well-being for children.

The third goal focuses on the need for families involved with the child welfare system through the court to receive appropriate services to ensure safety, timely

and suitable permanency, and well-being needs for children are met. A safe home is qualified by the absence or; the presence of sufficient caregiver protective capacities; and confidence in consistency and endurance of the conditions that produced the safe home. The term "safe home" is used in the Adoption and Safe Families Act (ASFA) as the objective of CPS intervention. Conditions for Return (CFR) identify specific behavior and circumstances that must exist within a child's home for a child who is in an out of home safety plan to move to an in-home safety plan. If all parties acknowledge and focused on CFR than children would return home as soon as possible based on safety. Permanency planning is the process of taking prompt, decisive action to maintain children in their own homes, or to permanently place them with other families. Permanency planning can only be achieved in a timely manner through a system wide recognition and investment in child welfare. The absence of any major partner in permanency planning causes significant delays and jeopardizes positive outcomes for children. Well-being encompasses mental, behavioral, emotional, and social functioning as well as physical health and development of a child. Children and families are best served when the system is functional.

Goal 3, Objective 1: Parents are actively engaged and empowered to participate in child welfare system change.

Rationale: Parents and/or caregivers with lived experience should be actively involved in child welfare system change in order to ensure they have sufficient, individualized services, are engaged in case planning and permanency planning for themselves and their children. Engaged parents are more likely to have successful outcomes. In order to enhance the child welfare experience for parents, it is vital to have perspective from a parent who has experienced the child welfare system. Seventy-three percent of children served by the child welfare system are Native American, there will be a strategic approach to ensure sufficient representation.

Interim Benchmarks:

- Year 1: A parent collaborative workgroup is built.

Training and Technical Assistance: Technical Assistance is needed from the Family First Program Specialist and local offices to identify parents to be involved in a collaborative workgroup. Training needs to be provided to the parents regarding capacity building in order to have focused and meaningful discussion. Technical assistance may be sought from the Capacity Building Center for S

Goal 3, Objective 2: Youth are engaged and empowered to participate in child welfare system change.

Rationale: Youth should be given the opportunity to be involved in child welfare system change. They should feel empowered to share their experiences as a child involved in the child welfare system. There is currently a youth advocacy group that provides input on permanency and wellbeing topics. The intention is to collaborate with this group to align youth engagement initiatives. Seventy-three percent of children served by the child welfare system are Native American, there will be a strategic approach to ensure sufficient representation.

Interim Benchmarks:

- Year 1: Community Resource Persons, Independent Living Skills Program Specialist, and Young Voices leadership are engaged to determine if incorporating this objective in their existing program aligns with their mission.

Training and Technical Assistance: Technical Assistance is needed from the Independent Living Program Specialist and local offices to identify youth to be involved in a collaborative workgroup. Training needs to be provided to the youth regarding capacity building in order to have focused and meaningful discussion. Technical assistance may be sought from the Capacity Building Center for States to collaborate with a youth with lived experience consultant to train and focus youth on the overarching goal of systemic change.

Goal 3, Objective 3: Court Improvement Program (CIP) Committee will analyze data and trends to determine improvement strategies to improve timely and appropriate permanency for children.

Rationale: To be engaged, a child welfare system must be well informed of the status of children and families served by the system. Accurate and precise data is necessary to understand child and family experiences in the child welfare system and determining what, if any, further strategies must be implemented.

Interim Benchmarks:

- Year 1: CIP Committee will review the results of the Child and Family Services Review, to identify permanency initiatives needed for the Program Improvement Plan.

Training and Technical Assistance: The CPS Administrator of CQI and Outcomes will provide data during CIP meetings that Child Protection Services has to help inform where South Dakota is in safety, permanency, and well-being outcomes. If available, other CIP members will share relevant data about safety, permanency, and well-being outcomes.

IV. Services

Child and Family Services Continuum

CPS provides a full range of child welfare services statewide. Services are provided in the tribal jurisdictions either directly by CPS or under agreements in which the Tribe provides the full array of services. The services provided by CPS include intake for child abuse and neglect reports, 24/7 emergency response, assessment of abuse and neglect and child safety, ongoing protective services, reunification services to families, independent living services, permanency planning services, licensing of child welfare agencies, and parenting education. CPS uses the Comprehensive Safety Intervention (CSI) model to respond to reports of abuse and neglect, assess child safety, and provide ongoing services to families. The CSI is a safety driven model integrated throughout the components of the services to families. CPS coordinates these services with community and tribal providers.

Intake

The first phase of the CSI is intake. State law requires reports of abuse and neglect to be made either to the county State's Attorney, law enforcement, or CPS. The county State's Attorney and law enforcement are required to inform CPS about reports they receive. CPS receives intake calls during normal business hours Monday through Friday between 8:00 AM and 5:00 PM. After hour emergency reports are received by law enforcement dispatch. CPS restructured the intake system in January 2015 from a regional call system to a centralized call system. Intake Specialists are split between two units, all serving under one administrator.

CPS can access information on criminal court convictions through the Unified Judicial System which provides information related to determining child safety during the intake process. CPS also networks and consults with key community and tribal stakeholders who could have relevant information about family history. Several jurisdictions across the state have community and tribally based Child Protection Teams and Multidisciplinary Teams for the purpose of assisting in the assessment and treatment of child abuse and neglect. CPS offices request collateral information from selected mandatory reporters to obtain relevant background information.

CPS uses the Child Maltreatment Screening and Response Determination to “triage” Request for Services (RFS) assignments based on child safety and vulnerability. The determination provides a structured decision-making process for Supervisors and Family Services Specialists designated as Screeners to assist staff performing intake duties in the initial determination of child safety and vulnerability which then drives CPS’ timeframes for initial contact.

To continue to advance the centralized process, CPS centralized the screening process, with implementation being completed in June 2020. This centralized process reduced the number of Supervisors, and Family Services Specialists are responsible for screening referrals. The centralized process includes four centralized Screeners who are solely responsible for decision-making of referrals statewide, regardless of the location of the family.

Emergency Response

CPS staff provide emergency response to reports of abuse and neglect 24 hours a day and seven days a week, which is coordinated with local law enforcement. Calls are routed through local law enforcement agencies and CPS staff respond to the reports determined to indicate present danger. Law enforcement or court services officers are authorized to take temporary custody of a child without an order of the court if certain criteria defined in South Dakota Codified Law are met.

Initial Family Assessment

CPS and law enforcement have the authority under State law to investigate child abuse and neglect reports. CPS and local law enforcement have a protocol in place regarding coordination of investigations of abuse and neglect depending on child safety and whether the report involves a potential crime. The Initial Family Assessment (IFA) is the assessment process used by CPS when a report is assigned. The IFA places the emphasis on decision-making regarding intervention on impending and present danger threats to child safety rather than the substantiation of an incident. The IFA is supplemented with processes for Present Danger Plans, Safety Plan Determinations, Conditions for Return, and In-Home Safety Plans. The Present Danger Plan allows CPS to consider an alternative to children being placed in CPS custody during the completion of the IFA when it is indicated the child is unsafe due to present danger threats. CPS uses the Present Danger Plan to explore possible ways of controlling the danger threats to child safety with the family. The parents can voluntarily allow the children to be cared for by other caretakers mutually agreed upon between the parent and CPS pending the completion of the IFA. Another option during the completion of the IFA, is the removal of the alleged maltreating caregiver. Safety Planning is used following the completion of the IFA when threats to child safety exist in the home. The use of a Safety Plan gives the parent and CPS additional time to make better determinations during the ongoing services phase as to what behavioral changes and services are needed to help the parent and CPS manage child safety. The most intrusive Safety Plan is when a child is removed from the home and placed in the custody of CPS because danger threats cannot be managed with the child in the home.



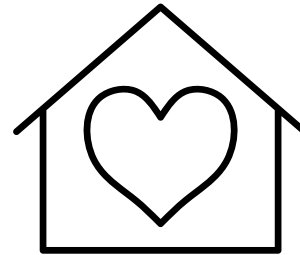
An important component of the Safety Plan requires coordination with other stakeholders who can be part of the Safety Plan. The Safety Plan Providers may be other family members, treatment providers, school representatives, day care providers, etc.

Ongoing Services

CPS believes case decisions need to be based on an ongoing analysis of safety. The Protective Capacity Assessment (PCA) is the ongoing process within the CSI model that occurs between CPS and the parents. The PCA emphasizes self-determination and facilitates case planning with the family based on danger threats, the protective capacities of the parents, and needed behavior change. This focuses case planning on behavior change rather than just the incident or compliance through the development and enhancement of caregiver protective capacities. The PCA is used with both in-home cases and cases where the child is placed in the custody of CPS in an out of home Safety Plan.

CPS works with the parents during the PCA process to determine what must change and what services are necessary to achieve these behavioral changes. The PCA Case Plan is developed around the necessary services and includes roles, responsibilities, and timeframes for those who are involved in the plan. South Dakota is an expansive, rural state with a small population base. The availability of services to families varies depending on the geographical area of the state. The PCA process encourages the parent to lead the determination of what services they believe are necessary to make behavior changes and encourages the utilization of natural services identified by the family, e.g., tribal elders as counselors. CPS facilitates parents’ access to services through collaboration with service providers, assistance working with service providers, assistance with transportation, paying for expenses for services not covered through other means, and assistance in addressing other issues that may create barriers for families to access services. The PCA Case Plan Evaluation is used by CPS through communication and contact with the family members and communication and coordination with service providers to evaluate the Case Plan progress to assess whether the diminished protective capacities are being enhanced, and subsequently, whether danger threats are being controlled.

Placement Services



CPS provides placement services when a child is placed into the care and custody of CPS by either law enforcement or the courts. Placement options include kinship care, which includes relative and fictive kin care, foster care, other child welfare agencies licensed by the Office of Licensing and Accreditation under the Department of Social Services, and in some instances, out of state placement resources. Licensed child welfare agencies include family foster care, emergency/shelter care, treatment foster care, alternative placement services, group care centers for minors, residential treatment centers, and intensive residential

treatment centers. Residential treatment programs are also available for children with needs related to substance abuse, mental health, and developmental disabilities. CPS considers placement with relatives a priority and state law include provisions requiring a relative placement to be the first consideration when a child is placed. Kinship home studies are completed through a contract with a private agency. The kinship study process includes background checks and the assessment of the kinship caregiver’s ability to meet the needs of the child and determination of the prospective kinship caregiver’s ability to provide a safe home based on identification and evaluation of their existing protective capacities.

CPS can consider an expedited placement with relative kin or fictive kin soon after the child is placed in care before a home study is completed if the child has a substantial connection to the kin provider and if the necessary safety determinations can be made.

CPS provides supervision, case planning, permanency planning services, and independent living services to children in CPS custody. When law enforcement determines a child must be removed from a caretaker due to safety threats in the home without the assistance of CPS, CPS must have contact with the child immediately after being notified by law enforcement or another reporter to determine an appropriate safety plan. In cases where law enforcement calls CPS for assistance, CPS will immediately respond. When a child is removed from the home and placed by CPS into a licensed foster home, CPS will meet with the child to assess the needs and safety of the child the next working day. If the child is placed in an unlicensed kinship care placement, CPS will assess safety the next business day. A home visit is then required for all children in out-of-home care within the next 14 days, with a third visit required in the next 30 days. Ongoing home visits are then required on a monthly basis.

CPS completes the Child Case Plan within 60 days of the child being placed in care. The case planning process emphasizes the involvement of parents, the child, the resource provider, the community resource person (if applicable), the supervisor, and others who have a significant role in the family. The Child Case Plan assesses and documents the child's needs, determines the services and supports needed, and documents the efforts made in meeting the child's needs, assuring stability, and facilitating permanency. CPS uses the Child Case Plan to assess progress and adjustments in the plan. CPS works in coordination with the Tribal ICWA Programs and other tribal resources when the child is affiliated with a Tribe. These efforts are described under the section on ICWA and collaboration with the Tribes. Additional tools CPS uses to promote stability and permanency for children in care and enhance family involvement include placement team meetings, team decision-making meetings, family group conferencing, permanency planning team meetings, independent living/ transition meetings, and concurrent planning.

Permanency Planning Services

When reunification is not successful, CPS makes concerted efforts to place children in an alternative permanent placement. CPS considers placement with relatives as a priority and makes ongoing efforts to locate relative placement resources. CPS provides subsidies for guardianship using state funds and also receives federal funding through the Guardianship Assistance Program to provide guardianship subsidies to licensed kinship families who are eligible. CPS provides financial and medical subsidies and post-adoption services to children and their adoptive families. Many adoptions and guardianships are with the children's foster parents or relatives. CPS also places children and youth in Another Planned Permanent Living Arrangement (APPLA) as an alternative when adoption and guardianship are not the permanent plans and APPLA is in the child's best interest. This is only utilized for a youth over age 16 and the court must provide approval for this permanent plan.

CPS provides support to placement resources and at least monthly visitation to ensure the stability, safety, and well-being of children in placement. CPS makes efforts to ensure the health, education, connections, social, and physical needs of children are met while in foster care. These efforts are documented in the Child Case Plan and the caseworker narratives.

CPS uses a variety of planning meetings to assist in permanency decisions and permanency planning. Those include Placement Team Meetings, Concurrent Planning Meetings, Family Group Conferencing, Permanency Roundtable Meetings, Adoption Conference Selection Meetings, and other team meetings.

Interstate Compact on the Placement of Children (ICPC)

South Dakota is part of the Interstate Compact on the Placement of Children (ICPC) which was established in 1960, to ensure children placed outside of their resident state are placed in a safe, suitable, and stable environment. The compact affords adequate protection and support services for children placed in out of state placements. South Dakota uses the National Electronic Interstate Compact Enterprise (NEICE) which is a national electronic system for quickly and securely exchanging data and documents from one state to the next in order to place children across state lines.



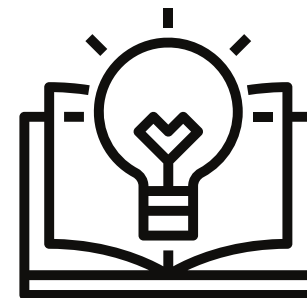
Community-Based Child Abuse Prevention Grant

CPS serves as the Lead Agency for the Community-Based Child Abuse Prevention (CBCAP) Grant. The CBCAP funding received by the State of South Dakota is used to:

- 1) Support primary and secondary community-based efforts to provide Parenting Education Programs and to prevent child abuse and neglect;
- 2) To support networks of partnerships for child welfare, schools, court systems, Head Start Programs, tribal agencies, and other organizations to better strengthen and support systems for families to reduce the likelihood of child abuse and neglect; and
- 3) To foster understanding, appreciation, and knowledge of diverse populations in order to prevent child abuse and neglect.

Parenting Education Program

The Parenting Education Program provides education to parents and caregivers through group classes to reduce the likelihood of child abuse and neglect. CBCAP funding makes it possible to support primary prevention programs and strategies that are available to all families, as well as secondary prevention efforts, which target children and families at risk for abuse and neglect in South Dakota. The Parenting Education Programs are offered to families and communities in South Dakota through Common Sense Parenting and Positive Indian Parenting. The class sites are posted on the State's website, so parents and caregivers have access to locations where the classes will be offered in different areas. If there is a need to have a class in an area not listed on the website, the Parenting Education Program coordinators will work with the Parenting Education Partners to meet the request through contracted instructors. There are also sites offering virtual training to attendees from throughout the state when in-person classes are not optimal.



Chafee Program

The CPS Chafee Program is designed to assist youth in foster care as they are working toward independence. The program is rooted in Positive Youth Development, and believes that positive youth experiences, positive relationships, and positive environments are necessities of the program.



The Independent Living Services (ILS) Program provides independent living services to youth at an early age and continues to build on the relationship with youth as they transition to adulthood. Over this transition period, the youth establish strong connections and trust with the Community Resource People (CRP). The CRP Program continues the support of youth, while in care and after the youth transition to adulthood. The strength of the Independent Living Services Program is the involvement of youth in the planning process and incorporating input and feedback through surveys completed at ILS Workshops, the Teen Conference, the Age 16, Age 17, Transitional Meetings and through the Lutheran Social Services Community Resource Person Satisfaction Survey.

Licensing

State law requires child welfare agencies that provide foster care, adoption, group care, independent living, residential treatment, and intensive residential treatment, to be licensed. The Office of Licensing and Accreditation under the Department of Social Services is the entity responsible for licensing child welfare agencies and monitoring child welfare agencies' compliance with licensing standards. The Office of Licensing and Accreditation has processes in place to ensure placement resources meet safety requirements and to ensure licensing standards are consistently applied to all placement resources.

Adoption

The CPS Adoption Program is responsible for the selection of the adoptive family for youth in CPS custody when the permanent plan changes to adoption. A formalized adoption selection committee is responsible for the selection of the adoptive family for youth. The Committee is made up of the Family Services Specialist, the Family Services Specialist's Supervisor, outside CPS representatives, the Adoption Program Specialist, the child's attorney, and other relevant participants. A review of the child's needs is considered as well as the approved adoption home studies of families interested in adopting. Prior to an adoption selection meeting being held for children where ICWA is applicable and a non-Native placement preference family is being considered, an ICWA staffing is completed. The Staffing includes the ICWA Program Specialist, the Adoption Program Specialist, and the local office to determine that ICWA has been followed. Placement laws are followed, and a decision is made regarding what is in the best interest of the child.

Youth who do not have an identified adoptive resource can be assigned to a Wendy's Wonderful Kid's recruiter or be candidates for the Permanency Roundtable process. The Adoption Program can access services through the Adoption Exchange, AdoptUsKids Program and SD Kids Belong for specialized recruitment efforts. CPS has started to track these youth to better document efforts in locating an adoptive family.

Once a family is identified, a full disclosure meeting is held. The full disclosure meeting is an opportunity for the prospective adoptive family to review the child's entire Child Protection Services file. The family is able to take copies of the child's medical record, mental record, and school record contained in the file. The adoptive family is encouraged to speak with the various professionals involved with the child. This gives the family a comprehensive view into the child's life and allows for them to make an informed decision on whether they can commit to being the child's adoptive family.

The Family Services Specialist will then explain adoption assistance. If the family requires adoption assistance in order to adopt, the family may negotiate up to the basic foster care rate. Other adoption assistance may include Medicaid coverage until a child is age 18 and a non-medical subsidy covering pre-existing conditions. The Adoptive Placement Agreement and Subsidized Adoption Agreement are signed on the date of the adoptive placement. Non-recurring adoption expense reimbursements are made available to the family to offset the cost of adoption.

When the Adoption Petition and Notice of Hearing are filed with the court and CPS is notified, the local CPS staff completes the adoption consent and the recommendation for adoption finalization based on the Court Report and Report of Investigator. Post adoption services and support are provided by the Adoption Specialist. The youth's record is sealed. There are two Adoption Program Specialists within the Child Protection Services Management team. One position focuses primarily on pre-adoption services while the second position's primary focus is on post-adoption services.

The Adoption Program Specialist manages the Adoption Assistance Program and oversees subsidy payments, Medicaid coverage, and post-adoption services for youth adopted by CPS. The Adoption Program is responsible for technical assistance on adoption-related matters to field staff and to the general public about policy, administrative rules, State laws, and Federal laws. The Program is responsible for creating and amending existing policy and administrative rules on adoption.. The Program is responsible for creating and amending existing policy and administrative rules on adoption.

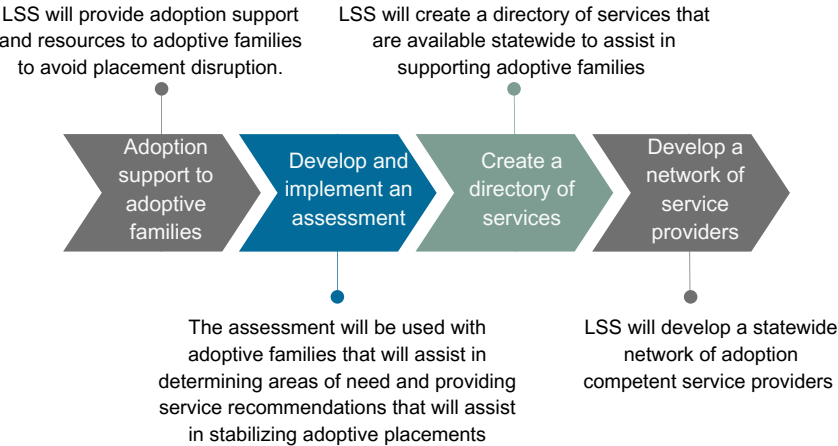
The Adoption Program is responsible for administration of the Interstate Compact on Adoption and Medical Assistance Program. The Adoption Program manages the Adoption Registry and assists adoptive families and adoptees with petitions to open sealed adoption records and complete adoption searches.

Adoption Support

Two thousand, three hundred sixty-one children are currently receiving adoption assistance through CPS. Adoption assistance may include a maintenance subsidy, Medicaid coverage, and a non-medical subsidy, which covers services for pre-existing conditions. The amount of a subsidy and types of adoption assistance are negotiated prior to adoption finalization and remain in effect up to the youth's eighteenth birthday. CPS has been successful in obtaining continued legislative support for the Adoption Program. The SD Legislature has approved increases to the adoption budget every year for the last ten years.

A combination of Adoption Incentive funds, the Children's Trust Fund, and State General funds support the Post Adoption Contract available to adoptive families in South Dakota. This year, a new Request for Proposal (RFP) was submitted as the prior RFP contract with Children's Home Society ended effective June 1, 2024. Lutheran Social Services (LSS) was the only agency who submitted a proposal, and they were awarded the contract. Surveys were sent to all DSS adoptive families to assist in the re-writing of the RFP to gain a better understanding of the needs adoptive families are experiencing. The needs identified through the surveys were included into the RFP and will be implemented once LSS's contract begins. 126 survey responses were received by adoptive parents. The RFP was enhanced to further meet the needs of adoptive families post adoption.

LSS will actively partner with the Department of Social Services to accomplish the desired outcomes:



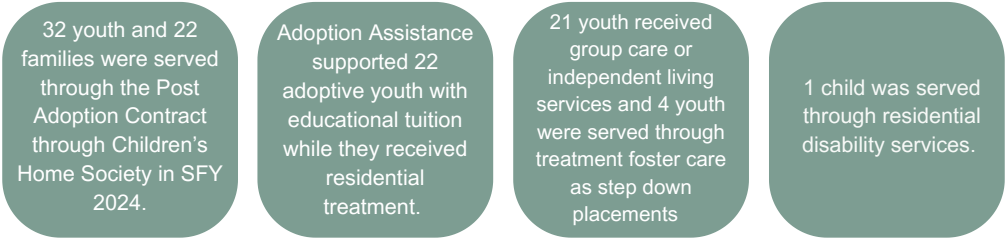
LSS will be hiring three professional staff members that will include two full time Post-Adoption Specialists and one full time Post Adoption Coordinator. The Post Adoption Specialists will become a centralized point of contact for adoptive families to connect to when they are experiencing challenges or crisis and the staff will complete an initial assessment to determine the family's strengths and need areas. Plans will be developed which may include a variety of resources and referrals. Other services provided by the agency will include assessments, safety planning, referrals, support, education and skills training, post legal adoption services, case management including home visits and support in the home if needed to prevent adoption disruption, and crisis support available 24/7 for adoptive families. In addition, the agency will provide monthly communication to families, connect families to cultural community resources, assist with referrals to Group Homes and Psychiatric Residential Treatment Facilities (PRTF), participate in discharge planning for youth in Group Homes and PRTF's, coordinate respite care, provide advocacy, create a Post Adoption Facebook Group, create Support Groups for adoptive parents and adopted children, create and coordinate an in-person camp for adopted youth, identify trainings and events, send a quarterly newsletter to adoptive families, develop a list-serve of adoptive families, create and update content for the DSS Post Adoption page, support birth family connections, and facilitate a yearly parent/child bonding workshop.

The annual Adoption Competency Conference was held in person this year versus being held via Zoom. A virtual Zoom session was offered to families throughout the evening parent session. The conference, titled "Our Children's Roots: Navigating Community, Culture and Family First Connections" was led by keynote speaker, Barb Clark, Director of Training at Families Rising, (formerly known as NACAC – North American Counsel on Adopted Children), and Daryle Conquering Bear Crow, Native Wellness Coordinator at Denver Indian Health Services, and from the Pine Ridge Indian Reservation.. 116 people participated in the conference including 15 Child Protection Services staff, and 55 other adoption professionals. An evening workshop for caregivers was attended by 46 caregivers and this session focused on teaching caregivers to identify how connections to first family, culture and community support the development of strong and positive sense of self. Caregivers learned strategies to keep children connected to their roots in a healthy and safe manner and learned how to affirm and validate their child's identities through complexities of their adoptive journey.

Funds are obligated, and timely expenditures of the funds are monitored by the CPS Adoption Program Specialist through the Department of Social Services' monthly Grant Expense Report. The Post Adoption Services are provided to families involved in Inter-Country adoptions.

The Adoption Program also offers individualized post adoption services to families needing services not offered through the Post Adoption contract or Medicaid funding. These services include tutoring services, equine therapy, specialty camps for children with special needs, neurofeedback, orthodontic work, vision therapy, after-school programs, reading literacy program, respite care, medical supplies, various developmental disability assessments from Fetal Alcohol Spectrum Disorders (FASD) testing to Autism evaluations, applied behavioral analysis, social learning programs, crisis stabilization services, treatment foster care, independent living care, group care, and residential treatment services.

For youth requiring psychiatric residential treatment, the Adoption Program Specialist assists families with applications for funding through Medicaid and CPS provides tuition funding if this is not provided by the child's school district. The Adoption Program Specialist also assists families with referrals to the treatment facilities. The Adoption Program Specialist provides advocacy for youth and families with involvement with service coordination, treatment planning, and discharge planning.



CPS continues to work to improve timeliness to adoption. South Dakota contracts with recruiters from Wendy's Wonderful Kids to assist with targeted recruitment for youth available for adoption. South Dakota continues to utilize permanency roundtables to remove barriers to adoption on stagnated cases and to better establish appropriate case goals. South Dakota has a partnership with SD Kids Belong to create videos of children to assist with recruitment for an adoptive home.

Adoption Family Service Specialists, Adoption Supervisors and the Adoption Program Specialists are in the process of completing the National Adoption Competency Training Initiative (NTI) through C.A.S.E. The training is a web-based training designed to enable those working with youth to better address the mental health and developmental needs of children in foster, adoptive, or kinship families. Each month the Adoption Family Service Specialists, Adoption Supervisors and Adoption Program Specialists are required to complete one of 8 modules of the NTI training. At the end of the month, a Transfer of Learning Session is held with the NTI Implementation Specialist. All current Adoption Family Service Specialists, Adoption Supervisors and Adoption Program Specialists will be completed with all 8 modules in June 2024 and certificates of completion will be received.

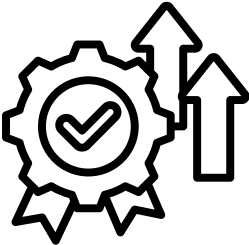
Information System

CPS has a functioning CCWIS called Family and Children Information System (FACIS). FACIS provides CPS with the ability to gather and maintain the necessary information related to the management of case activity throughout the CPS services continuum. FACIS provides the information required to be submitted for federal reporting under Title IV-E, Title IV-B, and Chafee. FACIS is used by all staff to document child welfare work including intake, IV-E eligibility, case management, placements, caseworker visits, resource management, adoptions, guardianships, financial management, reporting, administration, and interfaces. This is not an exhaustive list of documentation but provides a quality overview of major areas of focus.

CPS has dedicated resources assigned to FACIS with three assigned FACIS Program Specialists whose primary functions are to maintain the FACIS system, provide oversight of the data, provide technical assistance to all users and complete projects to make improvements to the system when needed. One Program Specialist is designated the CCWIS Project Director. Security is managed through a FACIS administration function. Only designated FACIS Program Specialists can add access for staff and reset passwords in FACIS.

Continuous Quality Improvement (CQI)

CQI was instrumental in identifying trends and implementing solutions to increase performance outcomes while South Dakota CPS was under their Program Improvement Plan. The CQI Core Team gathers data on outcomes, analyzes data to determine next steps, and initiates any policy changes needed. CQI is done at the regional levels with both the staff and stakeholders in the community to address outcomes CPS underperformed in to be addressed as an entire child welfare system. CQI is managed by the Outcomes Management Program Specialist.



Training

CPS provides mandatory Certification training for all newly hired Family Services Specialists. The Certification Program also is required for any newly hired Supervisors, Regional Managers, or Program Specialists. The Certification faculty includes 39 trainers from CPS and a physician who trains on medical indicators of child abuse and neglect, an advocate who trains on human trafficking awareness, a licensed therapist who shares trauma-informed care training, and a team of 13 Safety Crisis Management Instructors. The ICWA Program Specialist continues to provide Cultural Awareness training and contracted instructors deliver Positive Indian Parenting training as an option for the parenting education requirement.

The number of hours for certification training is 225.5. The increase in hours from 201.5 in the past year is due to the addition of Compassion Fatigue and Safety Crisis Management.

CPS continues to provide formal ongoing training for Family Services Specialists and Family Services Specialist Supervisors. Depending on the need, CPS provides training through Zoom, however, efforts are underway to transition the primary training method back to in person training. Please refer to the Initial and Ongoing Staff Training in Section two of the APSR. The FACIS team also delivers a variety of ongoing trainings related to FACIS processes and features; these trainings have been delivered more informally in years past, however, in 2024 the processes and offerings have been enhanced and are more structured.

Service Coordination

Community Based Child Abuse Prevention (CBCAP).

South Dakota's Department of Social Services continues in its role as the Lead Agency for the Community-Based Child Abuse Prevention (CBCAP) grant. The vision and mission is: "The South Dakota Department of Social Services is dedicated to strengthening families to foster families to foster health, wellbeing, and independence." and is executed and supported with CBCAP resources. The South Dakota Department of Social Services has identified the Division of Child Protection Services as the State Lead Agency (SLA) to implement and monitor the specific activities and goals of the programs supported through CBCAP. The Division of Child Protection Services has worked to establish and implement a continuum of community-based child abuse prevention programs.

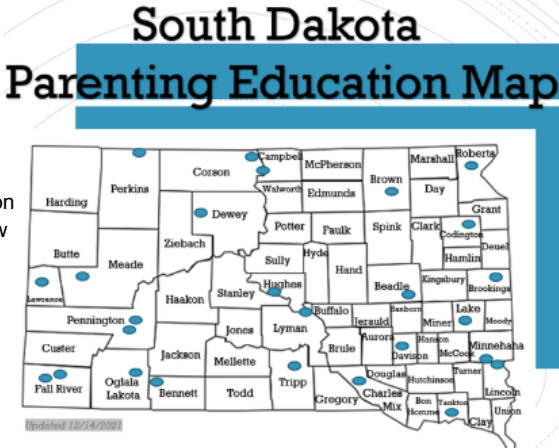
These programs lead and support a statewide network of public and private agencies, service providers, and individuals whose services strengthen and assist families. The goals of the program are focused on reducing the likelihood of child abuse and neglect through the provision of prevention programs and services.

The CBCAP Advisory Board for the Parenting Education Program is at the center of a statewide network. This network provides an ongoing opportunity for agencies and providers to collaborate and support community-based efforts to design and provide activities and initiatives aimed at the prevention of child abuse and neglect. The CBCAP State Lead Agency (SLA) Program Specialist leads and directs the CBCAP Advisory Board. The Division of CPS contracts with the Black Hills Special Services Cooperative and Jessica Snaza-Positive Parenting to provide a staff person to assist with additional training and support to the statewide network. The CBCAP SLA Program Specialist and consultants provide leadership for the CBCAP Advisory Board. A strong parent voice is a critical component of the CBCAP Advisory Board. Parents are involved in all aspects of the planning and implementation of prevention programs and services.

The CBCAP Advisory Board meets at a minimum twice per year. The CBCAP Advisory Board serves as a vehicle to ensure an ongoing focus on the social and emotional well-being of children in the State of South Dakota through building on the resources of the state and communities. The CBCAP Advisory Board meetings provide each member with an opportunity to describe their programs and services allowing each member to identify areas of potential collaboration and networking opportunities. The meetings allow the CBCAP SLA Program Specialist to provide education and information on a variety of areas related to child abuse prevention and to facilitate the development of a network of community-based services and providers. These meetings also provide an opportunity to share data, focus on innovation and best practices, and obtain feedback.

The Division of Child Protection Services as the CBCAP lead agency maintains a network of Parenting Education Partners strategically located to cover the geographic areas of the state (See Figure 1). The Division of Child Protection Services provides outreach to parents across state through this network of Parenting Education Partners. Each partner offers the Boys Town Common Sense Parenting (CSP) or Positive Indian Parenting (PIP) classes in their region of the state. Parenting education is a strategy for reducing the likelihood of child abuse and neglect. The CSP Program equips parents with the knowledge and the skills needed to be effective parents. Class sessions and course materials assist parents to recognize and reinforce positive behaviors with praise and positive consequences, to provide preventative teaching and corrective teaching, and to teach techniques for self-control and staying calm. Role-playing during each class session increases the parent's confidence and strengthens the relationship with their children.

Parents equipped with appropriate knowledge and skills create safer home environments for children and decrease the likelihood of abuse and neglect. The CSP Program helps parents make their homes peaceful, enjoyable, and safe for the whole family. Each Parenting Education Partner is monitored through a peer review process and an examination of the evaluations completed by each class participant.



Parenting Education Partners provide feedback about the peer review process at the conclusion of the review outlining commendations and recommendations made during the review. Parenting Education Partners, Division of Child Protection Services staff, parents and CBCAP partners value the opportunity to come together around the table to discuss issues and concerns and celebrate the success of the CSP and child abuse prevention activities. CBCAP funds continue to provide a stipend for parents attending peer reviews.

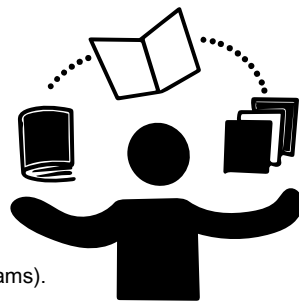
The Division of Child Protection Services continues to provide outreach assuring the availability of parenting education to Native American parents and caregivers, and others interested in learning culturally sensitive parenting methods. The Division of Child Protection Services has maintained a contract with Great Plains Psychological Services to provide Positive Indian Parenting classes in Sioux Falls, the state's largest urban setting. Great Plains Psychological Services provides Positive Indian Parenting classes through referrals from the Department of Social Services, Division of Child Protection Services. The eight-week course focuses on the elements of traditional Indian parenting which remain valuable and are utilized in contemporary parenting practices today. The goals for Positive Indian Parenting are:

- (1) To help Indian parents explore the values and attitudes expressed in traditional Indian child-rearing practices;
- (2) To help parents develop positive and satisfying attitudes, values, and skills that are rooted in the Indian cultural heritage.

Capacity has been built this year amongst current parenting education providers and additional sites to expand the impact of Positive Indian Parenting in South Dakota. In the past year a consultant has been brought on to help enhance the Positive Indian Parenting work. Contracts with The Right Turn, Inc. and Kari Ewalt-Positive Parenting were added in the past year, as well.

The Division of Child Protection Services contracts with Boys Town to conduct training for the CSP Program as needed. In June, CSP Training was provided by Boys Town staff for several new CSP trainers from across the State of South Dakota. Trainers are recertified by the program as required to continue teaching the curriculum with a high level of fidelity. The 19 Parenting Education Partners are strategically located across the state. Each site is responsible for conducting CSP classes within their assigned region. Parenting Education classes were provided to incarcerated parents in three prisons/jails served by the Parenting Education Partners and classes were offered on the nine Tribal Lands/Native American Reservations.

Parenting Education Partners assist in the elimination of barriers to class participation and attendance. Some of these efforts include providing CSP classes at remote locations to eliminate transportation as a barrier; offering virtual classes; altering the location and time of parenting classes; offering CSP materials in a Spanish version; certifying a bilingual instructor; and providing Karen language and sign language interpreters. Parenting Education Partners provides age-appropriate examples and additional instruction to families with young children (i.e., also families from Head Start Programs).



Several opportunities to share Positive Indian Parenting have been offered in the past year. Further detail is included in latter sections. Trainings have been led by PIP consultant Jessica Snaza and instructor Kari Ewalt. Their involvement in the Native American community near where they reside has really brought PIP to life in South Dakota and many further activities are planned.

The Division of Child Protection Services blends Federal and State General funds and Children's Trust Fund to enhance the services provided through the CBCAP Program. South Dakota used the Children's Trust Funds to assist with providing the match to the Parenting Education Program. The Department of Social Services collaborates with the Department of Health the use of birth certificate fees. The money collected is submitted on a monthly basis to the State Treasurer and deposited in the Children's Trust Fund. The Department of Social Services is the agency designated to administer Title IV-B and IV-E Programs, Child Abuse Prevention and Treatment Grant, Chafee Foster Care Independence Program, and the Community Based Child Abuse Prevention Program. The Division of Child Protection Services is a state-administered and state supervised child welfare system designated to administer the programs required to meet the mandates of those federal programs. The Division of Child Protection Services Program Specialists serve as advisors and consultants to the Division in specific program areas and are involved in the administration of funding, promotion, and evaluation of those services. The Division of Child Protection Services is divided into seven geographical regions. Each region has offices, which serve multiple counties. Regional managers are directly involved with the management of staff in the region and overseeing the region-wide provision of services in all program areas. The Division of Child Protection Services has 19 offices. Each office within a region has a supervisor or supervisors who provide clinical and direct supervision to Family Services Specialists, Leads, and Social Service Aides offering services in the program areas.

An important part of the IV-B program with the CBCAP Grant is focused on prevention education and parenting support; the goals are to enhance prevention of child abuse and neglect. Prevention-awareness activities occur statewide and increase parent's capacity to safely parent their children. The strategies are to support community-based efforts to develop, operate, expand, and enhance initiatives aimed at the prevention of child abuse and neglect and to support a network of coordinated resources and activities to better strengthen and support families to reduce the likelihood of child abuse and neglect. The objects are to promote community awareness activities by having information and education materials available to community-based programs; and to provide an additional parenting education resource by maintaining a network of parenting education providers who hold classes on a regularly scheduled basis that are designed to meet a variety of individual needs. South Dakota also offers sites opportunities for funding to support the site's involvement in developing or participating in community-based focused prevention efforts related to fatherhood and cultural experiences.

Information on the Family First Prevention Services act (FFPSA) has been shared with CBCAP Advisory Board members. This is a significant focus area which will enhance the future of prevention services in the state. The Division of Child Protection Services entered into a contract with ICF, inc. to guide the state as a consultant to develop the state's prevention plan. Discussion on evidenced-based practices and Advisory Board member involvement in prevention plan development has occurred.

As part of a broader state strategy, the Division of Child Protection Services through a state/tribal consultation group meets quarterly to collaborate and communicate with representatives from South Dakota tribes to obtain their input and discuss program issues related to the coordination of programs and services on the reservation. To improve collaboration with services to Native American children and families, the Division of Child Protection Services, Indian Child Welfare Act Program Specialist serves as a liaison between the tribes and the Division of Child Protection Services. The Indian Child Welfare Act Program Specialist serves on the CBCAP Advisory Board. Information about the Common-Sense Parenting (CSP) classes is communicated through the Indian Child Welfare Program Specialist.

The CSP classes are offered on the nine Native American Tribal Lands in South Dakota. Attendees to the Positive Indian Parenting classes have statewide representation and involvement in/represent all nine Native American Tribal Lands.

CPS provides a list of the CSP and Positive Indian Parenting sites on the website and encourages other agencies and organizations to refer parents to the program. A brochure for CSP provides a list of sites. A brochure for Positive Indian Parenting is in development. Class contact information is available on the state website which is mobile and accessibility friendly.

The Parenting Education Partners are strategically located to cover the geographic areas of the state. The Parenting Education Partners advertise the CSP classes in their area by providing emails along with flyers, PSA's, social media, radio announcements, and the DSS website for advertising the program to a variety of contacts in their community. CSP class information is posted on Parenting Education Partners Facebook pages. The CBCAP Advisory Board Meetings are an effective way to enhance communication and collaboration of resource promoting parenting education and prevention across the state.

CSP classes continue to be offered to incarcerated mothers in South Dakota. The women in the Women's Prison in Pierre are entered into the system as a course completion when completing CSP. The following month these records are flagged for Earned Discharge credit. There are 20 days awarded for class completion. It is applied to the end of their sentence, which pushes the dates on the front end. The amount of the push depends upon a sentencing formula determined by the length of the sentence. Essentially those that complete CSP will be awarded 20 days off their sentence. Collaboration occurred in 2022 regarding possible return to male correctional facilities in the state; delivery of classes ceased during COVID due to individual facilities' decisions for health and safety reasons. Efforts continue to revisit parenting education for incarcerated fathers. A trainer has been recruited for the Black Hills Special Services Co-Operative to teach classes in the Pennington County Correctional Facility upon the completion of his training planned for summer of 2024. Kari Ewalt has began teaching classes at the Roberts County Jail to mothers and fathers. Curricula is rotated between Common Sense Parenting and Positive Indian Parenting upon request of inmates who are parents and caregivers. She has outreached to the Codington County and Brown County areas and progress on delivering services in those areas is underway.

CSP classes held at the Women's Prison served 169 parents and impacted 534 children.

The Karen language is utilized frequently in the central northeast portion of the state and translation efforts have begun with materials. The instructor of CSP in the area also could deliver training by assistance of an interpreter, however the site has not provided training utilizing this service in the past year.

In 2022 Cultural Recognition funding opportunities were developed for all parenting education sites which will provide a \$150 to a site annually by request to help with cultural events focused on events and focus areas close to the community's cultural events and needs. In 2023 several sites have utilized this opportunity.

The statewide prevention activities provided by the Parenting Education Partners, Domestic Violence Centers, Child Protection Teams, and the Division of Child Protection Services includes:

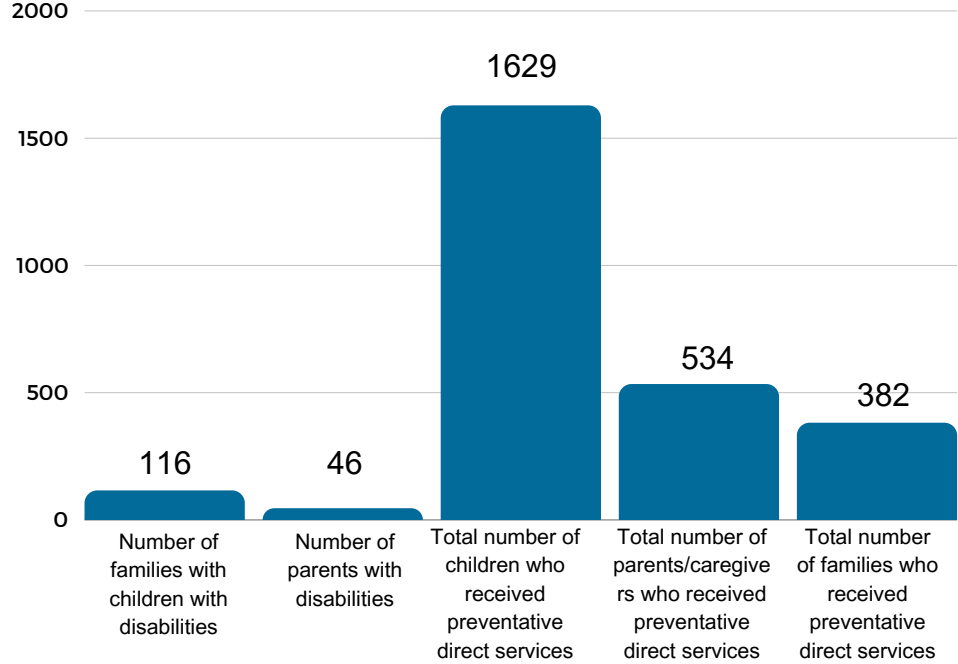
- Resources:** Includes the Child Welfare Information Gateway information, shared on the State's website
- Governor's Executive Proclamation:** The website contains the Executive Proclamation and resources to promote community awareness that can be used throughout the year, as well as activities designed especially for April, Child Abuse Prevention Month
- Prevention Resource Guide:** The 2023/2024 Prevention Resource Guide was shared with the Child Protection Services staff, Tribal Child Welfare Agencies, and Parenting Education Partners to strengthen families and prevent child abuse and neglect

- Social media** awareness campaign shared through Facebook, Twitter, and Instagram
- During April, Child Abuse Prevention Month,** several Facebook Posts specifically on topic of prevention of child abuse and neglect
- Child Abuse Prevention materials** distributed to CSP class participants statewide which included awareness materials, informational handouts, and questions to open up conversations with youth regarding child abuse. Common Sense Parenting brochure: The brochure has information about the CSP Program, locations, and contact information for CSP Providers. The CSP brochure includes information about the Six Protective Factors
- Safe Home Rule:** Parents attending CSP classes make a staying calm plan and learn skills to help them and their children remain calm; parents attending CSP classes will write a Safe Home Rule in place for the safety of everyone in the home
- Mandatory Reporting brochure:** South Dakota requirements regarding reporting child abuse and neglect
- Safe Havens in South Dakota brochure:** If a parent of a baby less than 60 days old feels they cannot care for their baby they can leave the baby with an emergency medical services provider, or employee at any fire department, law enforcement agency, clinic, licensed child placement agency or medical facility; leaving a baby under this law with an emergency medical services provider or child placement agency as allowed for under this law is not a crime
- Child Care Assistance Program:** Child Care Assistance is available to families who meet income guidelines and are working or working and attending school a minimum of 20 hours per week
- Registration and Licensure of Child Care Environments:** Information for licensing a child care environment
- Parent's Guide- Child Seat Safety:** Buckling up the right way in a car seat, booster, and seat belt brochure
- Impaired Driving Information:** Reducing alcohol-related crash fatalities and injuries is a priority for the Office of Highway Safety brochure
- Pedestrian and Bike Safety:** Helmet information brochure
- National Children's Helpline:** Get emotional support from a trained advocate, become empowered and a stronger parent
- Sexual Abuse Prevention Programs:** Strategies to prevent sexual abuse brochure

The following Child Abuse Prevention Activities were held during the reporting period:

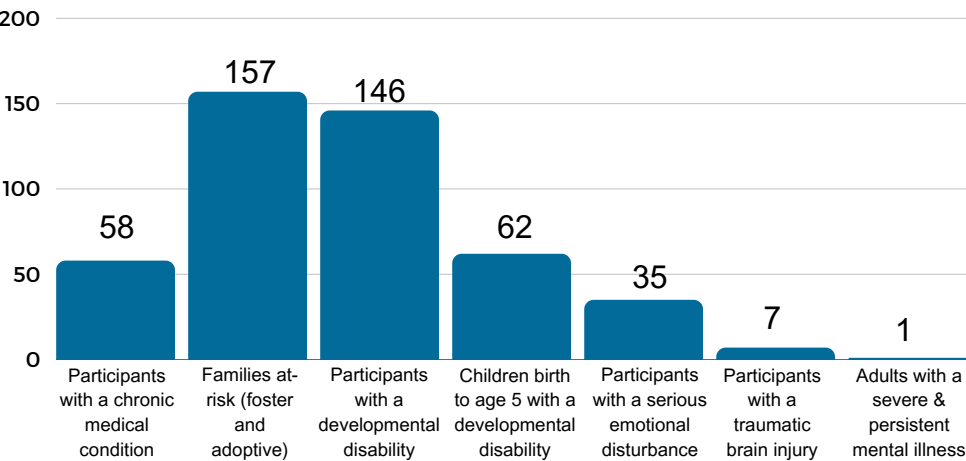
- Display blue and silver pinwheels on the street to focus attention to Child Abuse Prevention month
- “Wearing of blue” day in honor of Child Abuse Prevention Month in April
- Child Abuse Prevention was presented during CSP classes
- Stand Up to Child Abuse 5K Run and Walk
- Child Abuse Prevention information posted on Facebook
- Newsletters
- Family Strengthening Guide
- National Crime Victims’ Rights Week Walk
- The Enough Abuse Campaign
- Uplifting Parent Program

Description of the numbers served by CSP and PIP Federal Fiscal Year (FFY2023):

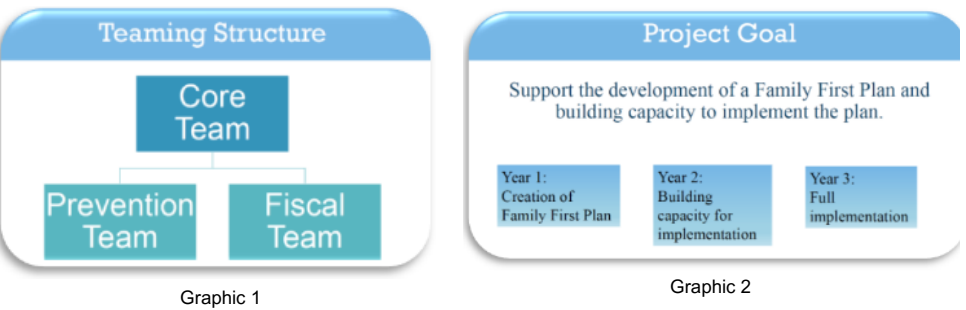


Other services and programs provided to families throughout South Dakota (FFY 2023): CPS uses Promoting Safe and Stable Families funding to provide foster parents and adoptive parents with respite care services through the South Dakota Department of Human Services Respite Care Program. The Respite Program served 466 children and adults. There were 379 families who received respite care services.

The number of children and adults in each diagnosis category are as follows:



CPS’s involvement with the Candidates for Care team has ended and resources shifted to the development of Family-First related activities, where the topic of candidacy will be assessed. Primary and Secondary levels of prevention are the focus areas of the CBCAP grant.



ICF will utilize a team approach (Graphic 1) to complete steps which include stakeholder and prevention team gathering, robust involvement of tribal representatives, and will result in the development of the Title IV-E Prevention Plan. The plan is projected to be submitted to federal representatives in early 2024. (Graphic 2). ICF will make recommendations for evidence-based practices to the state, and through collaboration, programs will be implemented.

The increase in the State’s CBCAP funds through the 2021 American Rescue Plan will assist in continued efforts to support and address primary and secondary prevention efforts with a focus on traditionally underserved populations. South Dakota has focused on Native American individuals and those South Dakotans residing in rural or frontier areas.

As outlined the American Rescue Plan funds awarded to South Dakota have been utilized to support the Positive Indian Parenting trainings and materials; however, further utilization of the funds will be informed by the work being conducted through the development of the South Dakota Prevention Plan. An element of the process has been conducting information seeking sessions from across the state and assessing for needs within the CPS system relative to primary, secondary, and tertiary prevention.

Members of several Native American tribes including a child with lived experience, a grandmother who is a Common Sense Parenting educator with lived experience and in generational parenting, tribal educators, South Dakota Cabinet Secretary of Tribal Relations, Great Plains Tribal Health, and Indian Health Services represent Native American perspectives in the FFPSA planning efforts for the Prevention Team. Several representatives of ICWA Directors and tribal child welfare agencies and the CPS ICWA Program Specialist drive planning through the Core Team for the FFPSA planning efforts. A representative of an urban multicultural center has also joined the Prevention Team.

Through the prevention plan research the requirement for evidence based programs to be provided to model fidelity as approved in the Title IV-E Clearinghouse has been prominent in an area of planning as people living in rural and frontier areas of the state often utilize telehealth or virtual options to receive these types of programs and those adaptations are not always in the final approved version as included in the clearinghouse. ARPA remaining funds will be utilized to provide training and purchase required items in order to deliver well supported evidence based programs, such as purchase of materials, certification costs, and such.

The Division of Child Protection Services requires new staff to attend a four-hour overview of the CSP Curriculum. The CSP overview increases the general understanding of the CSP Curriculum and the skills taught in classes so Family Services Specialists and Social Services Aides can model the parenting skills in their work with families. The Head Start staff, domestic violence program staff, TANF staff, school counselors, attorneys, court services personnel and service providers who make referrals to the CSP classes are invited and encouraged to attend this training. The CBCAP SLA Program Specialist or designee coordinates the dates and times Early Childhood Enrichment (ECE) system when planning and instructing the 4-hour CSP and Responsive Parenting Training for Child Protection Services staff and professional in the community, so these contacts can let parents know about the parenting classes. The CSP trainers include the Birth to Three information in the training and upcoming classes. The CSP instructors provide awareness about the Birth to Three classes to parents.

Participants of parenting education classes complete the parent survey during the first and last class. Questions on the survey ask for suggestions to help parents attend CSP classes, what additional information would be helpful to the parent and ask for recommendations for informing other parents about CSP. Data gathered from the surveys are incorporated into the program when appropriate and when possible. If a participant does not complete the class this information is not obtained.

This mechanism of data collection remained a solid source of information, factoring in the above paragraph, as sites utilize the parent surveys for peer reviews. In the past year an online survey platform was utilized to create an updated survey for the attendees to complete. Data is analyzed quarterly by site and program-wide and sent to sites for review and shared with the CBCAP Advisory Board.

Children's Justice Act (CJA)

The Children's Justice Act Task Force, Justice for Children's Committee (JCC), was first established in 1988 and continues to focus on efforts to improve child abuse and neglect cases in the various stages of the process. CPS has representation on the JCC Task Force and the JCC Task Force remains a joint committee with the Citizen Review Panel.

The Task Force meets quarterly. Historically two of the meetings were in person and held in Pierre, South Dakota, which is home of the state capital and a central location. The other two meetings are held via conference call. Since the COVID 19 pandemic, all the meetings have been held virtually. Due to at least six hours round trip travel required for nearly all the Task Force members, the members have agreed to continue to meet virtual. This allows for more members to participate and assists with time management.

There is high involvement and engagement of the Task Force members, especially with virtual meetings. The positions of Criminal Court Judge and Mental Health Professional were recently vacated, as both individuals retired. The Task Force members have been asked to provide input regarding a replacement for these positions, specifically those who work directly with the Court.

The Task Force members share agency updates at every meeting, which provides an opportunity for all the agencies to be aware of the different grants available in the state, training opportunities, and projects. This also builds relationships between the agencies. Minutes are taken at each meeting and the updates are detailed in the CJA grant application.

The Department of Social Services, Division of Child Protection and the Task Force continue to use Children's Justice Act grant funds to reach a level of an investigative and judicial process that is consistent in practice, effective in protecting children, limits the risk of further trauma to the child, and provides fairness to the accused. Children's Justice Act grant funds are used to fund Task Force activities that are focused on the areas emphasized in the Act.

Court Improvement Project (CIP)



The South Dakota Court Improvement Program Committee, through the direction of the SD State Supreme Court, assesses the child welfare system's handling of child abuse and neglect cases and recommends improvements for achieving safety, permanency, and well-being in a timely manner. The Chief Justice appoints four CPS staff to serve on the CIP. The CIP Coordinator and CPS leadership work closely together. Collaboration is evidenced through Goal 3 of the State's Round 3 PIP which was developed by combined efforts of CPS and CIP and is still a current project. The CIP Coordinator is a CFSR reviewer, a reviewer with the Safety, Permanency, and Well-being Regional Reviews, and a member of the State Tribal Consultation. The CIP Coordinator seeks CPS input in relevant sections of the CIP Self-Assessment. See the Tribal Consultation section. CIP have conducted monthly Lunch and Learn Trainings since March 2021 to provide relevant and up-to-date information as it relates to the child welfare system. The target audience for the training series are Judges, attorneys, child welfare agency staff, CASA, foster parents, or other child welfare professionals.

In SFY2024 the following training topics have been presented during the Lunch and Learn Series:

- August 2023: Value of Family Voice in System's Work
- October 2023: Understanding Psychosexual Assessments of Juvenile Offenders
- November 2023: Understanding Psychosexual Assessments of Adult Offenders
- January 2024: Child and Family Services Review & Data-Driven Processes
- February 2024: Family Violence
- March 2024: Empowering Indigenous Students and Families Through Multi-Generational Professional Mentoring Support
- April 2024: Child Custody, Safety, and the Impact on Children
- May 2024: Human Trafficking 101
- June 2024: 2024 Legislative Session Recap

Inclusion of Other Federally Funded Programs

CPS, Temporary Assistance for Needy Families, Medicaid, Child Care, and the Supplemental Nutrition Assistance Program are all programs within the Department of Social Services. As described in the Collaboration section, Division Directors for each program meet on a regular basis to coordinate in strategic planning and evaluation to best serve our consumers. In April of 2020 the Division of Children and Family Services was created under the Department of Social Services. Child Support, Economic Assistance, Child Care Assistance, and Child Protection Services all fall under this division. Refer to the Collaboration section.

CPS staff and Division of Developmental Disability staff frequently consult to ensure mutual consumers are receiving high quality services. Developmental Disability staff presented at the 2019 Fall Supervision Conference to ensure CPS staff are aware of the full spectrum of services available through Disabilities and the most effective process for accessing the services. Refer to Ongoing Training section for information regarding Division of Developmental Disability workshops. Refer to the Collaboration section for Birth to Three and Head Start collaboration and to the Tribal Collaboration section of the CFSP and subsequent APSRs. Please see Agency Response to the Community Systemic Outcome for more details on inclusion of other federally funded programs.

Service Description

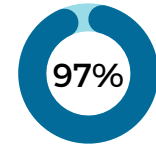
CPS seeks input from stakeholders, parents, and youth about service array and delivery in their area. Seven Regional Reviews occur a year; a survey is distributed to stakeholders in the Region in coordination with the review schedule. The survey gathers information relating to service array, permanency, and staff/foster parent training. South Dakota started conducting surveys instead of individual stakeholder phone calls in January 2020, at the beginning of the Round 3 PIP Year One Measurement Year. The surveys reach more stakeholders and provide more data on how the child welfare system functions within each Region. CPS reaches State Court Judges, Tribal Judges, State's Attorneys, Tribal Prosecutors, child's attorneys, parent's attorneys, CASA directors, mental health directors, domestic violence shelter directors, drug and alcohol service providers, ICWA directors, BIA Social Services directors, law enforcement officials, family visitation center directors, court services officers, parole agents, schools and residential/group care facilities through the survey process. All stakeholder feedback is provided to the Regional Manager, Assistant Division Directors and Division Director. The Regional Manager is responsible for providing the feedback to the local stakeholders and staff.

A parent survey is completed to obtain input on quality measures and receive feedback on service delivery. This year parents will be invited to participate in ongoing focus groups to share feedback ongoing. See the Service Array Outcome section for more details. CPS has shared information with parent groups located throughout the state through partnerships with the Center for the Prevention of Child Maltreatment and the Black Hills Special Services Cooperative.

Young Voices is an advocacy group comprised of youth and alumni involved in South Dakota's child welfare system. This group gives youth the opportunity to engage with their peers and enhance policies and practices of the child welfare system. Input is continually sought from this group and has led to several successful initiatives. Young Voices have been instrumental in discussing how to locate additional youth and how to support those in need. Further information regarding Young Voices can be found in the John H. Chafee Foster Care Program for Successful Transition to Adulthood section.

The NYTD Review provides guidance to policies and practices related to collecting and reporting timely, reliable, and accurate data on youth in transition. The NYTD data has identified strengths in emotional connections with an adult, Medicaid coverage, and safe sex practices. The NYTD data has identified additional support needed in education, employment skills, substance abuse, and housing.

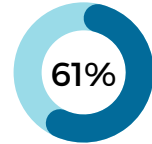
Youth complete the Independent Living Services Survey during the Transitional Living Planning Meeting which occurs thirty to ninety days before a youth leaves Child Protection's custody. The purpose of the Independent Living Services Survey is to gather data and information on youth as they transition from out-of-home care. The Transitional Independent Living Planning Meeting and Independent Living Services Survey must be completed with all youth transitioning from care at the age of 18 or older. Data collected from youth transitioning from care during this reporting period indicates the following:



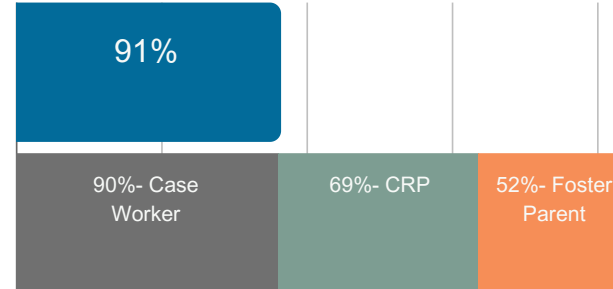
31 of 32 Youth stated they had a support to talk to about education



8 of 31 Youth report they have graduated high school

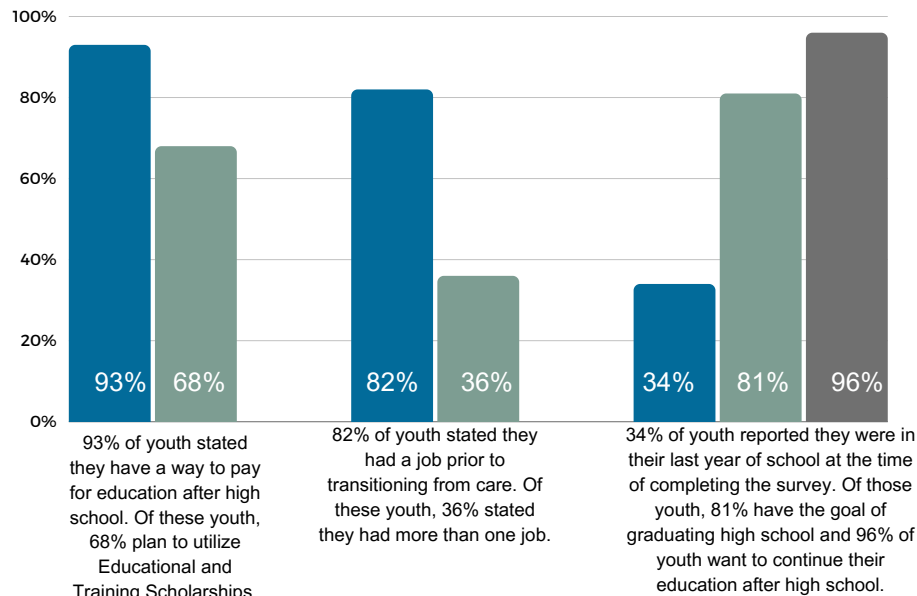


20 of 33 Youth are currently attending school

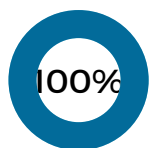


The graph shows the percentage of youth who have reported that someone has talked to them regarding career employment. Of the 91% of youth that have talked to someone, they chose who the individual was that they spoke to.

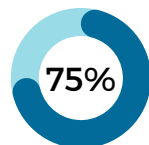
Education and employment continue to be focal points for the Independent Living Services Program. The information has been incorporated into the CFSP/APSR goals of the ILS Program. The ILS Program continues to utilize staff modules and compliance reports to monitor, and track tasks related to youth in NYTD baseline, and to ensure youth needing to complete a NYTD survey can be located to complete the survey. The CRPs have access to FACIS and Compliance Reports for cases assigned to them, which assists with meeting the NYTD requirements. Enhancing high school credit acquisition will be a main focal point of the program for the next several years.



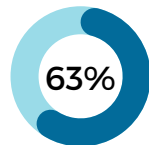
Youth who would like to stay in contact with their CRP for ILS services



Youth who have an adult in their life they could turn to for help



Youth who are in contact with a grandparent or family member



Youth not employed at the time of transitioning from care

Parenting Education Partners identify strengths and areas of enhancement through surveys and peer reviews of local Parenting Education providers. The peer reviews promote a continued collaboration with the community and how to effectively engage additional participants who would benefit from preventative services. Surveys are completed by class attendees before taking the class, and after completing the class. Data collected from the surveys are discussed during the peer reviews and utilized for delivery recommendations. The peer reviews have helped the program develop an understanding around new ways to engage communities and obstacles parents face in attending classes.

Instructors, site administrators, partner agencies from the community, Responsive Parenting and Understanding Me to Age Three partners, and local CPS gathers for the onsite or virtual peer reviews. These partners value the opportunity to come together around the table to discuss issues and concerns and celebrate the success of the CSP and child abuse prevention activities. CBCAP funds continue to pay for mileage and honorarium for parents attending peer reviews.

The Parenting Education Partners are required to have parents and caregivers complete a class evaluation at the end of the Common Sense Parenting or Positive Indian Parenting classes. The survey provides parent input into the satisfaction and effectiveness of the CSP and Leadership Curriculum and training skills of the presenters. This year enhancements were made so that the surveys are now electronic and parents can access these via link or QR code to enter themselves. For sites which cannot utilize electronic surveys due to environmental or regulations (such as in areas of no cell service or with incarcerated parents), paper copies are completed and parenting education partners are provided a stipend for data entry of these surveys. Another enhancement made this year is for the inclusion of a survey for parents and caregivers who did not complete the class. Reasons for parents not completing the class are often that they may find another class schedule or instructor to be a better fit, the attendees may experience a job or residential change impacting their ability to continue class, or they may be granted an early release from a correctional facility. A survey has been developed for these parents and caregivers and is sent via mail or electronically to the attendees to help offer input on reasons for not completing and recommendations for changes. Referral information for the "211 Helpline" is also sent, to offer resources to people who may have areas of need such as housing, food insecurity, transportation, etc. is available through "211".

Stephanie Tubbs Jones Child Welfare Services Program

Services offered under title IV-B, subpart 1 have been described in Services Array and Resource Developed and Service Description, please see those sections for details.

Services for Children Adopted from Other Countries



CPS provides services for children adopted from other countries. Services for adoptive families and post-adoptive families offered are dependent on the needs of the child and adoptive family, but can include: Medicaid coverage, mental health support, therapy services, medication management, medical appointments, educational services, case management, supervision, and monthly visitation to assess the child/children's needs. CPS provided assistance and services to one inter-country adoptive family during the last fiscal year. In order to protect this family's confidentiality, details regarding services offered to the family will not be shared. No other youth have entered state custody who were adopted international in the last twelve months.

Services for Children Under 5

There are specific initiatives outlined in the Case Review Outcomes Section of the CFSP, which encompass services to all children, including the 35.3% under the age of 5. Please see that section for more details.

Services are found across the State of South Dakota and CPS uses a range of services to help facilitate services for all children, including children under the age of five. These services include relative searches, home studies, concurrent planning, Placement Team meetings, developmental assessments, Fetal Alcohol Spectrum Disorders (FASD) evaluations, special needs daycare, and mental health referrals.

CPS' Certification training provides information to new staff on recognizing developmental milestones, beginning when a child is one month of age. In addition, new staff are also trained regarding developmental guidelines and family time, emphasizing the need for increased family time for younger children to support bonding and attachment.

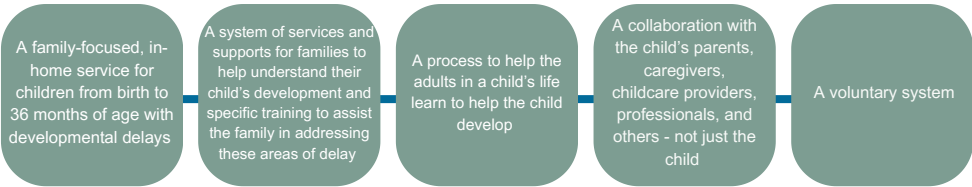
Children under the age of 5 comprise 35.3% of the population of children in custody of CPS.

The Child Abuse and Prevention Treatment Act (CAPTA) requires a referral to a Birth to Three Program for any child ages three and under who is involved in a substantiated case of child abuse or neglect. The parent/guardian is advised, and with their permission, a referral is made for developmental screening of their child. CPS has, and will continue to, refer children to the Birth to Three Program. Children are still referred to the Birth to Three Program even when the case does not involve a substantiation on a case-by-case basis.

To help protect the safety of children while minimizing the potential trauma caused by interim or multiple placements, the Interstate Compact on the Placement of Children (ICPC) Regulation No. 7 requests expedited ICPC approval or denial by a receiving state for the placement of a child with a parent, stepparent, grandparent, adult uncle or aunt, adult brother or sister or child's guardian. Regulation No. 7 expedited approval process includes criteria the child sought to be placed is four years of age or younger, including older siblings sought to be placed with the same proposed placement resource.

South Dakota Birth to Three contributes to the success of children with developmental delays and their families by providing dynamic, individualized early intervention services and supports by building on family strengths through everyday routines and learning experiences. The South Dakota Birth to Three Early Intervention Program serves children from birth to 36 months with developmental delays or disabilities and their families.

Early Intervention includes:



The Parenting Education Program and Head Start Programs continue to work together to pursue areas of connection with the South Dakota Head Start Programs. Parent information and education are critical components of every Head Start Program. Head Start services are located in every county in South Dakota, both state and tribal. Parents with children who attend a Head Start Program are encouraged to participate in the Common Sense Parenting classes. The Parenting Education Partner's instructors are provided with materials and training to assist in providing parenting education to families with children ages 3-5. The Common Sense Parenting Program and the Bright Start Responsive Parenting Program are comprehensive parenting programs designed to serve families in South Dakota. The Common Sense Parenting Program is a product of years of research compiled by Boys Town. The Program's easy-to-learn techniques address issues a parent may have with communication, discipline, decision-making, relationships, and self-control when parenting. Parenting training for parents and caregivers of children birth to age three is available in two formats: Responsive Parenting and Understanding Me Up to Age Three. During each of these series, parents will learn about topics such as social-emotional growth, early brain development, safety, temperament, and guidance. Instructors have been specially trained in infant-toddler caregiving. Both series are available in different locations throughout the state and are free.

Early Head Start Programs provide family-centered services for low-income families with children ages 0-5. These programs are designed to promote the development of the children, and to enable their parents to fulfill their roles as parents and to move toward self-sufficiency. Early Head Start programs provide similar services as preschool Head Start Programs, but they are tailored for the unique needs of infants and toddlers. Early Head Start Programs promote the physical, cognitive, social, and emotional development of infants and toddlers through safe and developmentally enriching caregiving. This prepares these children for continued growth and development and eventual success in school and life. Following the general Head Start model, Early Head Start Programs support parents, both mothers and fathers, in their role as primary caregivers and teachers of their children. Programs assist families in meeting their own personal goals and achieving self-sufficiency across a wide variety of domains, such as housing stability, continued education, and financial security. Early Head Start Programs also mobilize the local community to provide the resources and environment necessary to ensure a comprehensive, integrated array of services and support for children and families.

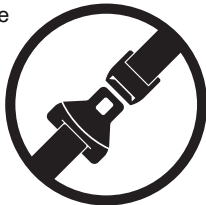
The Bright Start Program, through the Department of Health, is designed to help first-time expectant moms focus on their own health and well-being, so they have healthier babies. Home visits are especially helpful for first-time moms. Trained nurses visit during pregnancy to share information about nutrition, ongoing prenatal care, home safety, and creating a positive home environment. Visits may also include goal setting, building support systems, and can even address child care options and job training. Nurse home visits for first-time moms can begin anytime between the start of the pregnancy and two months after delivery. Once started, these visits can continue up to the child's third birthday. Bright Start has programs in Rapid City, Huron, Pierre, Sisseton, Aberdeen, Pine Ridge, Belle Fourche, Spearfish, and Sioux Falls. The Sioux Falls Program covers Minnehaha, Lincoln, Turner, and McCook counties.



Indian Health Service (IHS), an agency within the Department of Health and Human Services, is responsible for providing federal health services to American Indians and Alaska Natives. The provision of health services to members of federally recognized tribes grew out of the special government-to-government relationship between the federal government and Indian tribes. This relationship, established in 1787, is based on Article I, Section 8 of the Constitution, and has been given form and substance by numerous treaties, laws, Supreme Court decisions, and Executive Orders. IHS is the principal federal health care provider and health advocate for Indian people, and its goal is to raise their health status to the highest possible level. IHS provides a comprehensive health service delivery system for American Indians and Alaska Natives. IHS provides pre-natal care to women as well as dental, immunizations, pediatrics, behavioral health, and rehabilitation services. Locations in South Dakota include Eagle Butte, Fort Thompson, Mobridge, Lower Brule, Pine Ridge, Rapid City, Rosebud, Standing Rock, Sisseton, and Wagner. The Great Plains Area IHS also provides health services to Native Americans who are not counted in the user population of the Area. This population does not reside within any service unit; however, they meet the IHS eligibility criteria for health services provided at IHS or Tribally operated direct care facilities. The largest concentrations of the non-service unit eligible in South Dakota are in Aberdeen and Sioux Falls.

The Child Safety Seat Distribution Program focuses on keeping children safe by providing child safety seats at no cost to families who meet income eligibility requirements to ensure children are in the best child seat for their height and weight until they are at least 4'9". At 4'9", most children can safely wear a seat belt.

Current South Dakota law states, “Any operator of any passenger vehicle transporting a child under five years of age on the streets and highways of this state shall properly secure the child in a child passenger restraint system...” and the operator of a motor vehicle must make sure a “...passenger who is at least five and under eighteen years of age is wearing a properly adjusted and fastened safety seat belt system...” If the belts don’t fit properly, the operator must find another “safety belt system” to secure the child (SDCL 32-37). This program distributes child seats to income eligible parents and children statewide, by assessing financial need.



Feeding South Dakota is a hunger relief organization that has distribution centers in Sioux Falls, Pierre, and Rapid City. Their vision is a hunger-free South Dakota where everyone in need has access to nutritious food because freedom from hunger and good nutrition are critical to the future economic, social, and emotional health of South Dakota citizens. Every single week, Feeding South Dakota assists in providing temporary food assistance to approximately 21,000 hungry individuals and families in South Dakota and their Backpack Program gives food every weekend to over 5,500 kids who otherwise might go hungry. Department of Health, Child and Family Services Nurses and Nutritionists deliver public health services in each South Dakota county. Services include immunizations, WIC, growth and developmental screenings, and baby care.

Imagination Library through South Dakota United Way offers services to children and families. The Imagination Library is one the Capital Area United Way's Community Impact Programs, established to increase access to early learning. The Imagination Library provides free age-appropriate books to any child, ages 0-5, at no cost to them or their family, regardless of family income. Books are mailed to the child's home each month until their fifth birthday. Children will be able to build their own home library and access the joy of reading right from their home. Each book is age appropriate and includes such titles as The Little Engine That Could, The Poky Puppy, The Tale of Peter Rabbit and Favorite Finger Rhymes.

The Newborn Screening Program through the Department of Health is a program to detect potentially fatal or disabling conditions and birth defects in newborns as early as possible. This is a statewide service that is available at any doctor's office. In rural areas, the Department of Health has started a new program, Wellness on Wheels, to offer the newborn screening program to those who do not live near a medical clinic. This service offers blood spot screening, hearing screening, and continued follow-up medical care to infants who have a diagnosed disorder.

The following services specific to the seven CPS Regions across South Dakota.

Region 1 (Rapid City)

Full Circle is located in Rapid City, SD and is a substance abuse residential treatment program for pregnant women and women with young children who have substance abuse issues. Mothers receive intensive and/or low-intensity treatment and rehabilitation counseling in the following areas while living in this facility:

- Substance Abuse
- Prenatal Care
- Trauma Education
- Education on parenting, nutrition, and family issues
- Case management to link with other needed community services, including childcare and housing
- Rehabilitation counseling and recovery support
- Support in reunification goals

Children newborn to ten-years-old may be eligible to stay with their mother during treatment. This prevents foster family placement, provides opportunities for the family to stay together, and teaches the family to become a healthier unit.

Fatherhood First through Youth and Family Services (YFS) in Rapid City help fathers understand and embrace the vital role they play in their children’s lives. Fatherhood First offers hands-on programming for fathers or father figures and their children. Fathers, or male role models, and their children participate in quality, hands-on activities organized and provided by staff. These events promote social skills, enhance child development, and strengthen the bond between a father and his child. YFS Fatherhood First staff members also provide individualized home visits to families enrolled in YFS Programs.

United Families Visitation Center is located in Rapid City, SD. United Families allows multiple family time opportunities a week for children and their parents. This is also valuable when there are infants or children under the age of five where it is imperative to offer more family time to support reunification efforts.

Family Engagement Services through Children’s Home Society in Rapid City offers prevention programming in the Northern Hills. Programming includes in-home case management designed to address each family’s unique needs. They work with individuals and families to promote stability and prevent child abuse/neglect through education, skill development and therapeutic crisis management.



OneHeart, Transformational Services (Recovery Team) is located in Rapid City, SD. Recovery Team members work with each assigned adult and family as part of a multidisciplinary service team. Team members are comprised of OneHeart Care Coordinators, Peer/Residential Support Specialists, Housing Liaison, Life Safety Officers, and Provider Partner Case Managers and team members. Services may be provided both on and off the campus. Team members collectively and collaboratively support each adult or family in their journey towards an overall recovery from the underlying conditions contributing to unstable living situations and assist guests with obtaining and maintaining housing. Transformational Services are provided within a Recovery-Oriented Care (ROC), Trauma-Informed Care (TIC), and Poverty-Informed Care (PIC) framework and include assessment, service referral coordination, advocacy, and Person-Centered Planning (PCP). Team members utilize the technique of Motivational Interviewing to support their work with guests. Additionally, the Recovery Team’s practices and decision-making with clients are guided by evidence-based assessments and interventions, to include Service Prioritization Decision Assistance Tool (SPDAT), Adverse Childhood Experiences (ACEs), Trauma-Focused Cognitive Behavior Therapy, and Functional Therapy. OneHeart Campus is not yet operational but has been awarded substantial funding and the Campus will begin renovations shortly. There will be apartments available for families as well as individuals. They will be able to provide direct services not only to prevent the removal of children from a parent’s care, but to assist in reunification efforts recurring sooner.

Rural American Initiatives is another service in Rapid City, SD. This is a Head Start Program specific to Native American Children. They are in the Lakota Homes community in Rapid City and have a huge community support. They are very supportive to the families they provide services to and will take children who are in foster care. They are supportive of reunification efforts.

Volunteers of America (VOA) in Rapid City, SD provides several resources to families in crisis to include long-term and short-term housing, veteran’s assistance, emergency supplies for children under five, case management help and pre-natal classes. This is available to anyone in need to include foster parents, kinship, and parents.

The ReNew Program through Bethany Social Services is a program that starts at prenatal care and continues to age 5. This program provides a case manager to assist the family with resources to overcome any barriers they may be facing, though they specialize in past and present substance abuse.

Region 2 (Spearfish, Sturgis, Hot Springs)

Bella Pregnancy Center in Spearfish, SD offers the Earn While You Learn Program (EWYL). Often, new parents not only have questions about the care of their child but wonder, “How am I going to provide all the things my baby needs?” Earn While You Learn is an educational program designed to help you become the best parent you possibly can be, while at the same time giving you the opportunity to earn some of the things you need to care for the physical needs of your baby. You can earn “Mommy Money” or “Daddy Dollars” to purchase these and other items while you learn important information vital to raising your child in a healthy, happy environment. During the months of pregnancy, there are many concerns for most new parents about pregnancy and how to meet the needs of the baby after birth. The Earn While You Learn (EWYL) Program allows the expectant mother and father to gain information while earning “Mommy Money” or “Daddy Dollars” to purchase necessities from the wide array of brand new and “like new” items in our Bella Boutique. The more you learn, the more you earn. The education is done on an individual basis. Upon enrollment the client chooses the day of the week they will have their classes.

Early Childhood Connections covers our counties as well as Rapid. They provide various parenting classes, infant/child CPR, professional development for childcare providers and resource information like childcare listings and car seats.

Love Inc. covers the Black Hills area. They provide the Clothe a Kid Program which provides up to \$70 per child for clothing each school year. They offer classes through their Life Inc. Program that offers incentives as people complete their homework. They provide classes on finances, parenting, nutrition, marriage, and Christianity. They provide a free meal as a part of the classes. Love Inc. also has The Connection Center which can provide furniture items, diapers, and clothing.

Realtors for Kids provides financial resources for children of all ages who reside in the Northern Hills when referred by an agency such as CASA, DSS or a school. They can help with the cost of camps, sports, bedding, medical assistance for travel, or other expenses not covered by Medicaid/insurance or any area of need.

Family Engagement Services through Children’s Home Society in Rapid City offers prevention programming in the Northern Hills. Programming includes in-home case management designed to address each family’s unique needs. They work with individuals and families to promote stability and prevent child abuse/neglect through education, skill development and therapeutic crisis management.

Families First Early Learning Foundations through Black Hills Special Services Cooperative offers programming in the Northern Hills. Early Learning Specialists are dedicated to engaging with families in environments that suit them best. They provide emotional support, share valuable insights, and connect individuals with additional resources. Their primary focus is to empower and assist in their journey, fostering a positive and inclusive experience.



Region 3 (Pierre, Eagle Butte, Mobridge)

Urban Indian Health in Pierre offers affordable primary and preventative health care. Services include general pediatric care of childhood illnesses, vaccinations, well child checkups and pediatric acute care visits. They also offer a nutrition counseling and teaching kitchen, Baby Steps, a prenatal support group for pregnant women and their partners that meets monthly, and mental health and substance use disorder counseling services.

Growing Up Together in Pierre offers a Childbirth class four times a year and Breastfeeding class six times a year for expectant mothers and their family support person. They also offer a Sibling Readiness Class six times a year to provide information about becoming a big brother or sister to siblings and their parents.

Mothers of Preschoolers (MOPS) is a peer support group of mothers who are expecting or have an infant, toddler, or preschooler. MOPS meet during the school year twice a month, the second and fourth Tuesday at Community Bible Church in Pierre and on the second and fourth Thursday at First United Methodist Church.

Great Plains Healthy Start serves Cheyenne River and Standing Rock reservations offering a variety of services to women, their partners, and children from birth to 18 months. These services include case management, health and life skills education, screening and referral and home visiting. Cheyenne River Youth Project offers tribal members and their family’s access to emergency hygiene products, household items including cleaning supplies, clothing, school supplies and diapers.

Sleep in Heavenly Peace is a non-profit organization that builds and delivers beds to children who do not have a bed. Sleep in Heavenly Peace is a group of volunteers dedicated to finding those young children who do not have a bed and may be sleeping on the floors of their home. Through the efforts of volunteers and donations, wooden beds are built, assembled, and delivered to children in their homes. There are 250 Chapters across 38 states and Canada, one of those chapters has started in Pierre, SD.

Region 4 (Chamberlain, Winner, Mission)

Lakota Tiwahe Center (LTC) is located on the Rosebud Sioux Tribe and provides Early Intervention Services to Families of infants and toddlers (Birth to 5 years old) with developmental delays and/or disabilities. The Lakota Tiwahe provides services in four areas:



Lakota Tiwahe’s primary goals are to work towards decreasing the number of children born with disabilities and developmental delays, decrease the number of births to teenage mothers. LTC understands teenagers are at greater risk of having babies born with defects and developmental delays due to consumption, and the lack of prenatal care and screening all babies born on Rosebud Reservation at six months of age for physical and developmental delays.

The FACE Program through the St. Francis Indian School on the Rosebud Sioux Tribe is a program designed for teen mothers and their children. It allows the mothers to continue their education and their children receive daycare services, and preschool.

The Rosebud Sioux Tribe Maternal and Child Health Program serves women on the Rosebud Sioux Tribe Indian Reservation determined to have a high-risk pregnancy. Clients are followed by visiting nurses throughout their pregnancy. After delivery, the mother and newborn receive health and well-being checks, education and referrals to other programs, and resources as needed. Home visits begin two weeks after delivery and continue on a regular basis until the baby’s second birthday.

Shared Waters serves expectant mothers and families with children aged five and below on the Crow Creek Sioux and Lower Brule Sioux Indian Reservations by joining families in their homes for an hour twice a month and to help parents be their child(ren)’s first teacher by giving them the resources to do age-appropriate activities with the family.

Shared Waters helps to guide parents through this process by giving them praise, advice, and other added resources available in the community. Parents who successfully complete home visits are given small incentive bags with diaper wipes and 20 diapers for each visit. Shared Waters also helps to provide Lower Brule enrolled members with baby formula if needed.

Family Enrichment provides developmental screening using the Denver II Developmental tool for newborns up to age five, unless the child enters Early Head Start at which time screenings are done there. The screenings are done once every three months. Family Enrichment also partners with the Chamberlain School District, local area Birth to Three Connections, and the Highmore School District to identify families with children in this age range to ensure developmental screenings are completed. The program provides assistance to the parents by providing donated items such as formula, diapers, bottles, and wipes if available, purchasing children's books, making referrals to services, and assisting with transportation if needed.

Region 5 (Brookings, Huron, Aberdeen, Watertown)

Sleep in Heavenly Peace is a non-profit organization that builds and delivers beds to children who do not have a bed. Their motto: "No kid sleeps on the floor in our town!" Sleep in Heavenly Peace is a group of volunteers dedicated to finding those young children who do not have the luxury of sleeping on a bed or even laying their heads on a pillow. Through the wonderful efforts of volunteers and generous donations, bunk beds are built, assembled, and delivered to those children who are otherwise sleeping on couches, blankets or even floors. There are chapters in Aberdeen, Brookings, Huron, and Watertown, SD.

1,000 Books Before Kindergarten is through the Brookings Library in Brookings, SD. The concept is simple; the rewards are priceless. Read any book to your newborn, infant, and/or toddler. The goal is to have read 1,000 books (and you can repeat books) before your little one starts kindergarten. The Brookings Public Library offers tracking sheets to keep you going and celebrates reading milestones by tracking participation in the library. Toy and Resource Lending Library is in Brookings, SD and run through the South Dakota State University. The mission of the Toy and Resource Lending Library is to assist families and caregivers in learning more about their child/children's development, educating families and caregivers on how they can help children learn through play, and providing necessary knowledge, resources and tools for families and caregivers to learn about child growth and development. A variety of items, such as puzzles, games, blocks, children's books and more can be borrowed to assist children in their play.

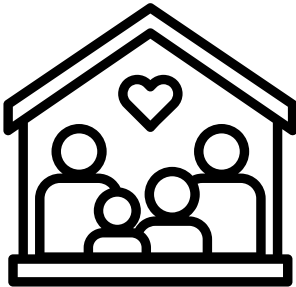
Feeding Brookings in Brookings, SD is a United Way sponsored organization that provides food and hygiene items to families in the Brookings community. Ascension Lutheran Church in Brookings has volunteers who distribute produce and bakery items provided by the local Wal-Mart and Hy Vee stores, canned goods from the Emergency Food Assistance Program, hygiene items, and a food item of the month as well as any donations from local churches and community members. There are no poverty restrictions, and everyone can utilize this opportunity. Each household receives a number and numbers are chosen at random for order of distribution. The Brookings Area Transit Authority (BATA) in Brookings provides free rides to Feeding Brookings.

Plus One Pregnancy Guidance Center in Huron is a non-profit faith-based organization that assists teens, women, and couples facing unplanned pregnancies in making the healthiest choices possible for themselves and their unborn children. They provide a safe, compassionate atmosphere for free and confidential services. New moms receive support at Plus One until the child is two years old. The following free services are offered: Free Pregnancy Test; Peer Counseling & Support; Pre-Natal, Labor & Delivery Education; Adoption Planning Information; Parenting Education; STD/STI Information; Maternity/Baby Boutique; Assistance Referrals; and Post-Abortion Counseling.



Mothers of Preschoolers (MOPS) is a peer support group of mothers who are expecting or have an infant, toddler, or preschooler. MOPS meet during the school year twice a month, the second and fourth Tuesday, from 9:30 to 11:30 AM at Living Hope Alliance Church in Huron, SD. Sessions will resume in Fall. At each MOPS meeting, you can expect brunch, fabulous speakers on an array of topics, small group discussion time, devotions, participation in community services, and the development of new relationships. Childcare is provided during meetings.

The Beacon Center in Watertown, SD offers Play Therapy for children to promote healing through creative play. Play therapy draws on the child's innate abilities and strengths while accommodating non-verbal communication and thus fostering self-healing. The Beacon Center Family Visitation Center provides a safe, child-friendly environment in which children and families can have family time and become reacquainted with one another. The Family Visitation Center provides both family time



and exchanges. Family Time include CPS family time and non-CPS family time. The facility offers three family time rooms that are monitored through audio and video technology. The Family Visitation Center allows the Department to offer multiple family time opportunities a week. This is also valuable when there are infants or children under the age of five where it is imperative more family time occurs to support reunification efforts.

The 612 Flats in Watertown, SD, offers emergency housing and has 8 units to house community members who currently do not have permanent housing, including families with children. In addition to providing a safe place to stay and a temporary address, residents work with a case manager towards the goals they identify that will help them gain stability. The 612 Flats has allowed CPS families to use this as a transitional housing as they get their own apartments and work their case plan with CPS while working with the on-site case manager to help them manage housing needs.

Fallout Shelter in a non-profit in Watertown, SD, which is a place that members of the community can go to find support in recovery from addiction and trauma. There is also an emergency housing component to their program and can assist parents with small children. They are a licensed JDAI facility that has helped with emergency housing for youth that did not score high enough on the RAI but has no other housing options. The Shelter also offers Martial Arts classes to youth in foster care at a discounted rate.

Kids Konnection in Aberdeen, SD is a visitation center that advocates for a child's right to establish and maintain positive interactions with significant adults in his or her life. Their trained staff facilitate family time on site and exchanges between parents and guardians in children's lives. Family time involves parents and children spending time together at Kids Konnection. Family time is monitored by staff and video recorded. The length of family time depends on the family situation and need. Kids Konnection's family time and exchange services allow parents to avoid encountering one another. An exchange involves custodial and non-custodial parents exchanging their children for family time which do not take place at Kids Konnection. Staff facilitate the exchange of the children between parents. Kids Konnection allows the Department to offer multiple family time opportunities a week. This is also valuable when there are infants or children under the age of five where it is imperative more family time occurs to support reunification efforts.

Region 6 (Sioux Falls)

Heartland House, through Inter-Lakes Community Action Partnership (ICAP), is a Rapid Re-Housing Program in Sioux Falls, SD created to help homeless families with children. To be eligible, families must have children, be homeless and must commit to case management services. Families are required to work with a Housing Stabilization Coach to create a Housing Stabilization Plan and can generally receive up to 12 months of rental assistance based on their individual progress. The families pay rent based on their income. The goal for each of the participants is eventual self-sufficiency and housing stabilization. Maximum capacity for the program is 46 families at any given time.

South Dakota is in the midst of a methamphetamine epidemic, while at the same time experiencing a growing opioid problem. These circumstances have led to a significant increase in the number of child abuse and neglect cases. Volunteers of America, Dakotas (VOAD) serves pregnant, parenting, and postpartum women whose children have been removed or are at-risk of being removed from their custody due to substance use. Volunteers of America Dakotas (VOAD), New Start Residential Program and its primary partner, the South Dakota Department of Social Services, Division of Child Protection Services (CPS), propose to address the need for formal coordination mechanisms among family services agencies to respond to the rising rate of children in out-of-home placements due to parental substance abuse. VOAD's New Start Program is one of only two residential treatment facilities in the state where mothers can live with their children during recovery. VOAD is in Sioux Falls, SD, and serves families from across the entire state. Mothers may have their children with them from ages 0-8 years old and a total of two children. Volunteers of America (VOA) in Sioux Falls, SD provides several resources to families in crisis to include long-term and short-term housing, veteran's assistance, emergency supplies for children under five, case management help and pre-natal classes. This is available to anyone in need including foster parents, kinship, and parents.

The Family Visitation Center in Sioux Falls, SD provides safe supervised family time and exchanges with the goal that while in their care, children are emotionally and physically safe. Families spend time together in private, child-friendly rooms, monitored by professional well-trained staff. Staff also facilitate the safe exchanges of the children from one parent to the other. The Family Visitation Center allows the Department to offer multiple family time opportunities per week. This is also valuable when there are infants or children under the age of five where it is imperative more family time occurs to support reunification efforts.

Harbor Families in Sioux Falls, SD is a movement fueled by compassion to keep children safe and families intact. Through Host Families, Family Friends, and Family Coaches, they temporarily host children and provide a network of support to families in crisis while they get back on their feet. The ReNew Program through Bethany Social Services starts at prenatal care and continues to age five. This program provides a case manager to assist the family with resources to overcome any barriers they may be facing, though they specialize in past and present substance abuse.

Region 7 (Mitchell, Yankton, Lake Andes, Vermillion)

Big Friendz Little Friendz in Mitchell, SD has a Mentor Moms Program that matches new and expectant young moms one to one with an experienced adult mentor mom. The mentor mom will assist with teaching essential parenting skills through observation, interaction, friendship, and role modeling. Matches meet once a week for an hour and commit to at least a one-year relationship.

Sleep in Heavenly Peace is a non-profit organization that builds and delivers beds to any child between the ages of 2-18 that has no bed. It is a group of volunteers dedicated to finding children who have no bed the luxury of sleeping on one. Using donations, the volunteers build beds/bunk beds and deliver them to those in need. Each bed comes with a mattress, bedding, pillow, and quilt/comforter. There are 250 Chapters across the U.S. and one in Canada. A new Chapter is begin organized in the Mitchell area but at this time they are still a distribution center.

River City Family Connections (RCFC) in Yankton, SD is designed for children and their separated or divorced parents where there has been domestic abuse, child abuse, or conflict involved with family time. RCFC can also be used to establish or re-establish relationships with significant others. Their site serves as a comfortable, neutral location for the transfer of children and for onsite supervised family time. They are committed to preserving family relationships with a secure, child-oriented setting. RCFC allows the Department to offer multiple family time opportunities a week. This is also valuable when there are infants or children under the age of five where it is imperative more family time occurs to support reunification efforts. River City Family Connections also offers Common Sense Parenting classes.

Family Visitation Center (FVC) in Mitchell, SD is available to parents and their children as a resource for families seeking a wide range of services in the process of custody and family time litigation. The safety and comfort of the child is of utmost importance. Children are often caught in the middle of their parents' problems, especially when there has been history of abuse. FVC is designed for children and their separated or divorced parents where there has been conflict involved with family time, domestic abuse, or child abuse. The Center serves as a comfortable, neutral location for the transfer of children for traditional family time and as a location for monitored onsite family time. The Family Visitation Center allows the Department to offer multiple family time opportunities a week. This is also valuable when there are infants or children under the age of five where it is imperative more family time occurs to support reunification efforts.

There is a program through Wagner School District that will be able to serve all 3–5-year-old in the Wagner school district for preschool services. This service will be offered full school days, five days a week. Breakfast and lunch and two snacks are provided to the children. The days are educational based but provide time for a nap and play. For students enrolled it will help reduce the daycare hours.

Melanie Bailey through River City Counseling in Platte and Wagner Community Hospital provides mental health services through play therapy. Melanie can provide more frequent contact while Wagner Community Hospital's contract is limited to 1-2 a month.

Lewis and Clark Behavioral Health Services has play therapy available for children.

The Yankton Contact Center provides food, and it is available all day every day. They provide gasoline, temporary housing, some medications. The Contact Center can also act as a rep payee for Social Security recipients.

Pathways Shelter has different tiers of services to assist with housing. They have a night-by-night emergency shelter for families. Pathways offers emergency shelter for families. There is a community transition program for men coming out of prison. Pathways has an Emergency Solution Grant Service to offer monetary support to families at risk of homelessness. Pathways offers security deposit assistance to people who have successfully moved through their tier program. And then they offer Pathways also offers youth services to young adults. The young adults are taught life skills and share a home with the other participants.

South Dakota Codified Law 26-8A-3 mandates which entities are required to report child abuse and neglect

"26-8A-3. Persons required to report child abuse or neglected child--Intentional failure as misdemeanor. Any physician, dentist, doctor of osteopathy, chiropractor, optometrist, emergency medical technician, paramedic, mental health professional or counselor, podiatrist, psychologist, religious healing practitioner, social worker, hospital intern or resident, parole or court services officer, law enforcement officer, teacher, school counselor, school official, nurse, licensed or registered child welfare provider, employee or volunteer of a domestic abuse shelter, employee or volunteer of a child advocacy organization or child welfare service provider, chemical dependency counselor, coroner, dental hygienist, or any safety-sensitive position as defined in § 3-6C-1, who has reasonable cause to suspect that a child under the age of eighteen has been abused or neglected as defined in § 26-8A-2 shall report that information in accordance with §§ 26-8A-6, 26-8A-7, and 26-8A-8. Any person who intentionally fails to make the required report is guilty of a Class 1 misdemeanor. Any person who knows or has reason to suspect that a child has been abused or neglected as defined in § 26-8A-2 may report that information as provided in § 26-8A-8."

South Dakota Codified Law 26-8A-4 mandates anyone who has reasonable cause to suspect a child has died because of child abuse or neglect must make a report. The reporting process required by SDCL 26-8A-4 stipulates the report must be made to the medical examiner or coroner and in turn the medical examiner or coroner must report to the South Dakota Department of Social Services.

"South Dakota Codified Law 26-8A-4. Additional persons to report death resulting from abuse or neglect--Intentional failure as misdemeanor. In addition to the report required under § 26-8A-3, any person who has reasonable cause to suspect that a child has died as a result of child abuse or neglect as defined in § 26-8A-2 shall report that information to the medical examiner or coroner. Upon receipt of the report, the medical examiner or coroner shall cause an investigation to be made and submit written findings to the state's attorney and the Department of Social Services. Any person required to report under this section who knowingly and intentionally fails to make a report is guilty of a Class 1 misdemeanor."

When CPS receives reports of child maltreatment deaths as required under SDCL 26-8A-4 or from any source, CPS documents the report in FACIS (CCWIS). In addition, the Protective Services Program Specialist, Assistant Division Director, and Division Director are immediately notified of the death. The Protective Services Program Specialist works closely with the Family Services Specialist and Supervisor assigned to the case to gather details regarding the death, as well as circumstances leading up to and surrounding the incident. Deaths that meet the NCANDS data definition are reported to NCANDS. The State has and will continue to provide information to the Justice for Children's Committee (JCC), which is a joint committee of the Citizen Review Panel and Children's Justice Task Force, regarding child deaths. For FFY 2023, South Dakota reported 7 child deaths to NCANDS that were a result of child maltreatment.

The South Dakota Department of Health has received a grant through the Centers for Disease Control and Prevention to implement a South Dakota Violent Death Reporting System (SD-VDRS) to collect data from death certificates, medical examiners/coroners and law enforcement related to various violent deaths to inform prevention efforts. As a part of the grant, the Department of Health has developed a Preventable Death Review Team in South Dakota. This team collaborates with law enforcement, medical examiners/coroners, and the Vital Statistics Office to create and implement a plan to collect timely and comprehensive data on all child deaths. The team will initially focus on the two largest counties, Minnehaha and Pennington, and then will expand statewide within the next two to four years. The team will begin with children ages 0-12 and then expand to include a review of all children.

The Protective Services Program Specialists are a part of the review team. Information regarding this review team will be shared with the task force, to include, but not limited to, supporting the fatality review team. Please see the following link for the Safe Sleep campaign to prevent child maltreatment fatalities by the Department of Health.



MaryLee Allen Promoting Safe and Stable Families

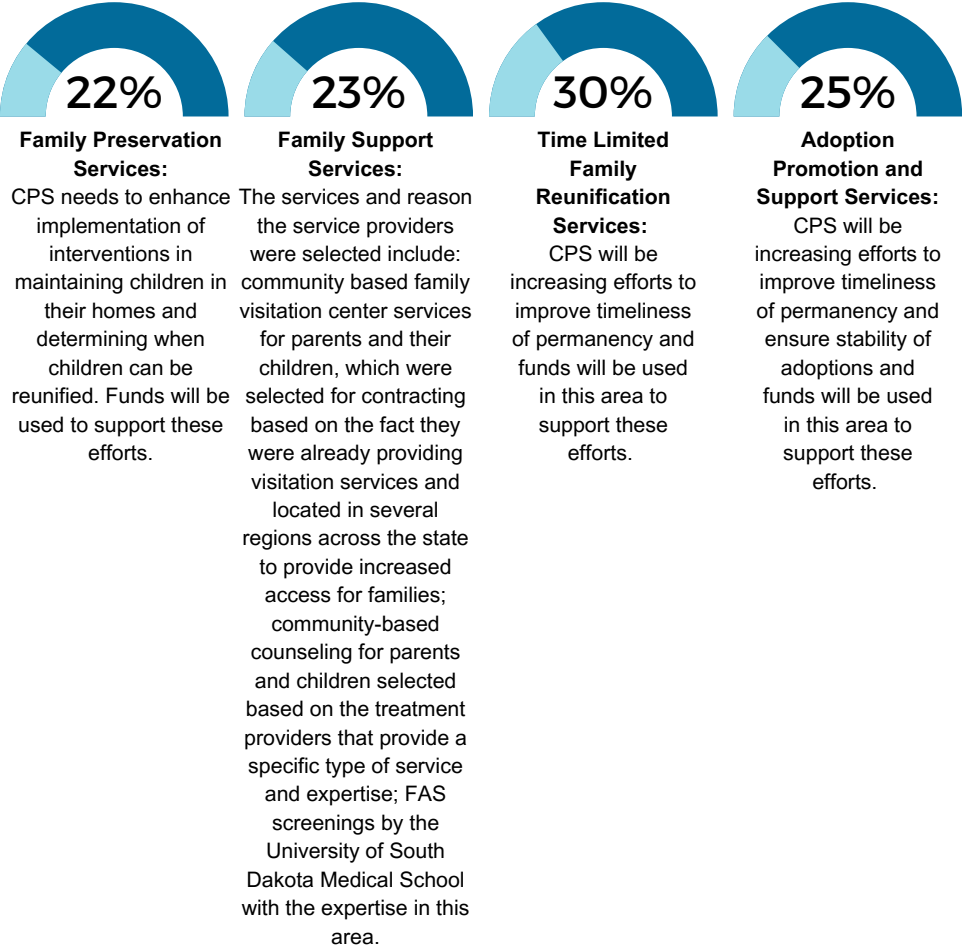
CPS continues to use Promoting Safe and Stable Families (IV-B, Subpart II) funds to assist with providing services that help keep children in their homes; support parents to keep children safe when reunification occurs; ensure stability of placements with foster parents, kinship parents, and adoptive parents; and facilitate adoptions. CPS views Promoting Safe and Stable Families funds as a critical source for situations where even basic levels of support can make the difference in the success of family preservation. Emergency funding for Promoting Safe and Stable Families allowed CPS to assist families with the same services for a longer period as CPS often depletes the funds well before the allotted timeframe. CPS will continue to request approval to use funds to provide:

- Contract services for Interstate Compact on the Placement of Children (ICPC) and kin placement home studies to support temporary and permanent placement with relatives and non-custodial parents
- Legal services to expedite permanency for ICWA children through the court process
- Child parent visitation through contracts with visitation centers
- Contract services for genetic testing to establish paternity for children in foster care

In addition, funds will be made available for staff to help families meet needs that can help with placement prevention or reunification, including:

- Transportation, bus tickets and gas cards for parents to access services and employment
- Rental assistance, utility deposits to support placement prevention and reunification
- Crisis or other day care to support placement prevention and reunification
- Counseling/treatment for parents
- Assessments and evaluations for parents and children to assess danger threats and determine service needs
- Alcohol and drug treatment and testing for parents to assess danger threats and determine service needs
- Supports and services to Present Danger Plan and Safety Plan Providers to prevent children from entering care
- Needs for kinship placement resources - beds, cribs, highchairs, initial food, or clothing, etc.

Approval for use of funds must be provided by Regional Managers and the Assistant Division Director. The IV-B, Subpart II funds will be allocated as follows:



Refer to CFS-101 Part II for further information regarding the estimated number of individuals and families to be served; the populations to be served; and the geographic areas where the services will be available. No category of Title IV-B, Subpart II - utilized below 20%. Reference CFS-101 for more details.

Service Decision-Making Process for Family Support Services

The services and reason the service providers were selected include: community based family visitation center services for parents and their children, which were selected for contracting based the need for family time and transportation services in regions across the state to provide increased access for families; FAS screenings by the University of South Dakota Medical School with the expertise in this area; home studies for parents and kinship families completed by service providers with statewide coverage who have training and experience providing culturally appropriate services to the communities they serve, support for Indian Child Welfare Act (ICWA) testimony for applicable cases in two of the jurisdictions with the majority of ICWA cases, and genetic testing to establish paternity necessary for parent/child case planning and permanency.

Populations at Greatest Risk of Maltreatment

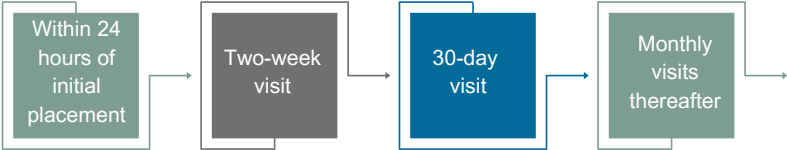
Children four and under and children in situations involving parental substance abuse are populations at high risk of maltreatment. CPS identified this population through abuse and neglect dispositions entered on FACIS (CCWIS). The Initial Family Assessment is the process used by CPS to assess child maltreatment and child safety. A child aged six or younger is automatically identified as vulnerable in the criteria utilized for determining children in impending danger and requiring intervention.

CPS refers children aged three or younger to the Department of Education's Birth to Three Program. The Birth to Three Program is a family-focused, in-home service for children from birth to 36 months of age with developmental delays or disabilities. CPS staff may refer any child to the program; however, CPS policy mandates all children involved in a substantiated case are required to be referred to the Birth to Three Program. In Federal Fiscal Year 2023, 574 children ages 0-3 were referred to the Birth to Three Program.

The Protective Capacity Assessment (PCA) is the intervention model used by CPS with families receiving ongoing services. The PCA is used to strengthen the parent's protective capacities related to existing threats to child safety. The presence of danger threats and need to strengthen parental protective capacities are correlated, which means there is an automatic focus on age-appropriate interventions related to danger threats to younger children in cases involving children 6 or younger or for children with disabilities. There is a focus in the PCA on assessing the impact of substance use on parents' protective capacities. Treatment is focused on those situations where substance use is found to be out of control, threatening a vulnerable child, and likely to cause significant harm in the near future.

Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits

CPS policy requires staff to visit children:



Children in group/residential care the policy is monthly visitation. Staff are expected to visit children placed out of state approximately every six months with an expectation of monthly visits by the out of state agency providing supervision.

CPS staff are required to enter visits with children in foster care in FACIS (CCWIS). Reports in FACIS, which is accessible to staff, are used to report both monthly calendar visits and visits per child per 12 months based on CPS staff entries of visits into FACIS. CPS staff also document the detail of the visits in the FACIS narrative. The narrative is to include the Family Services Specialist assessment of the safety, permanency well-being of the child during each visit as well as the case activity related to case planning. A screen in FACIS allows staff to document visits as a specific activity and specify whether or not they are in residence. CPS developed a report to be used by the administration, the Family Services Specialists and Supervisor to monitor the level of compliance with caseworker visits monthly. CPS added a Caseworker Visits Compliance Report.

CPS consistently outperforms the National Standard of 95% of children visited each month and 50% of the visits occurring in the child’s residence. In FFY 2023, 95.57% of children were visited monthly and 91.84% of these visits were in the child’s residence. CPS will continue to explore opportunities to increase quality assessment of children in care during caseworker visits. CPS administers a survey to placement resources to help monitor caseworker visits. The information gathered from the placement resource involves frequency of visits, location of visits, quality of visits, and placement resource satisfaction with visits. This information is utilized to help increase the frequency and quality of caseworker visits with children as well as enhance services and supports to placement resources. In SFY 2024 all seven regions sent the placement resources survey regarding caseworker visits. Surveys were sent to all resource providers at all levels of care with a current placement at the time the surveys were distributed in each region. Each region was designated a month during the fiscal year in which surveys would be sent to resource providers with current placements during that month. At the beginning of the designated month, the Strategy and Outcomes Program Specialist pulled a list of all children in care for the region and worked with the region to compile an email list of all resource providers for children placed from their region. Once the email list was completed, the surveys were sent out. Providers were asked to fill out a survey for each sibling group placed in their home if they had more than one. See details below regarding date of survey distribution, number of surveys sent, number of responses and response rate.. Note: Some respondents only submitted partial survey responses as they skipped some survey questions.

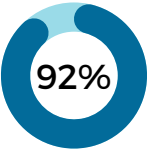
Region	Date Surveys Sent	Number of Resource Providers Surveyed	Number of Responses Received	Response Rate
Region 1	10/24/2023	243	123	51%
Region 2	10/19/2023	23	7	30%
Region 3	12/08/2023	68	29	43%
Region 4	12/21/2023	89	41	46%
Region 5	01/17/2024	82	45	55%
Region 6	03/01/2024	178	78	44%
Region 7	03/28/2024	51	14	27%
Total		734	337	46%



281 of 299
Placement resources reported their Family Services Specialist visits monthly or more with the child placed in their home/facility.



291 of 304
Placement resources report the Family Services Specialist address, privately if needed, the issues they want to discuss during caseworker visits.



278 of 301
Placement resources report the Family Services Specialist is responsive if something needs to be addressed between caseworker visits.

Survey results are filtered out by Region and each Regional Manager is provided their individual results to share with staff and follow up on any questions or concerns as needed. Please see Well-Being Outcome 1 for an overview of South Dakota’s outcome performance on frequent and quality caseworker visits.

South Dakota completes data quality checks, which are also outlined in South Dakota’s Data Quality Plan, to ensure caseworker visits identified as occurring in the residence are in person interactions or through virtual visits. When completed, information is shared with management team and a plan to improve data will be developed.

CPS utilizes visitation centers to supplement parent and child visitation. When CPS staff observe these visits and meet with the children afterwards, it provides another opportunity for the children to feel freer to express feelings and concerns to staff. Caseworker Visits funds will be used to help fund these visits to give CPS another resource related to staff visits of children in care.

John H. Chafee Foster Care Program for Successful Transition to Adulthood (the Chafee Program)

At the conclusion of the 2024 CFSP, the CPS Independent Living Program continued to provide the following services. A brief description and any changes are listed in the subsequent paragraphs

Agency Administering Chafee

CPS is the division within the Department of Social Services (DSS) which provides services and permanency planning for youth placed in the custody of DSS. The state statutes and rules related to youth under the custody of DSS apply to youth until they leave care at age 18. There is a provision in state law requiring the state to provide independent living services to youth ages 16 or older that are going to continue in foster care, for a specified period (SDCL 26-8A-26). Independent Living Services (ILS) are provided to youth who are going to be in foster care until they are 18 years of age. CPS policy is to provide ILS services to youth at the age 14. Requirements under the federal Chafee Foster Care Program for Successful Transition to Adulthood expand ILS services to youth who left foster care between the ages of 18 and 21. The Educational Training Vouchers (ETV) program was added later to the federal law for those youth. The Family First Prevention Services Act issued on July 9, 2018, allowed South Dakota to expand to assist young adults that were in foster care at age 18, adopted or placed in a guardianship with kinship at age 16, to participate in the (ETV) program and remain eligible until the young adult reaches 26 years of age.



The ILS Program Specialist oversees Chafee’s services and supports provided by DSS and service partners, the ILS Program, and the LSS Community Resource Program (CRP) contract. The ILS Program Specialist has continuous contact with the CRPs and their supervisor to assist with the delivery of the ILS program. There are ongoing communications via meetings, phone calls, and emails with the CRPs and their supervisor concerning the ILS Program and challenges effecting youth.

The ILS Program Specialist provides guidance to CPS staff and CRPs through CPS Policy and Procedure Manual. Trainings and updates to the ILS Policy and Procedure chapter of the manual are made as services, issues, or federal requirements arise. The ILS Program Specialist assigns youth to the appropriate CRP’s caseload within FACIS. These youth could be CPS, Department of Corrections (DOC), Bureau of Indian Affairs (BIA) and tribal youth who the CRP will provide services depending upon their status.

In South Dakota, the Chafee Foster Care Independent Living Program is a state administrated program. The ILS Program supports youth who have experienced foster care at age 14 or older in their transition to adulthood. Youth begin receiving ILS at the age of 14 years or older to provide ongoing opportunities to engage in age or developmentally appropriate activities.

The state intends to continue delivering and proving programs that support all youth through transitional services such as assistance in obtaining a high school diploma and post-secondary education, career exploration, vocational training, job placement and retention, training and opportunities to practice daily living skills, substance abuse prevention, and preventive health activities; help youth engage in meaningful connections with permanent connections with a caring adult; help youth engage in age or developmentally appropriate activities; provide financial, housing, counseling, employment, education, and other appropriate support and services to former foster care recipients between 18 and 21 years of age to complement their own efforts to achieve self-sufficiency and to assure that program participants recognize and accept their personal responsibility for preparing for and then making the transition from adolescence to adulthood; and to make available vouchers for education and training, including postsecondary training and education, to youths who have aged out of foster care.

CPS has a contract with Lutheran Social Services (LSS) to provide Community Resource People (CRP) to provide support services regarding development of independent living skills for youth ages 16 through 21 in foster care or formerly in foster care to assist in preparing youth to live independently as adults.

CPS provides child welfare services on the following five tribes: Rosebud, Lower Brule, Crow Creek, Cheyenne River and Yankton. CPS has established agreements with the other four Tribes to provide their own child welfare services, which are Pine Ridge, Flandreau, Sisseton, and Standing Rock. Native American youth are involved in all aspects of the ILS program. The ICWA Program Specialist maintains a contact list for each of the tribes. This information is shared with the CRPs. The CRPs are responsible for identifying resources and networking with people on the reservations in their area. Information regarding Chafee services, ETV funds, CRP services, ILS Workshops, Teen Conference and other ILS information is shared with the BIA and Tribal Child Welfare Agencies on an ongoing basis. Invitations are mailed to the Tribal ICWA Directors and Tribal Child Welfare Directors when conferences, workshops, and other ILS activities. are held.

The South Dakota Chafee Foster Care Independence Living Program Five-Year Plan is designed to assist youth in foster care and to assist youth as they are establishing independence. Youth begin receiving ILS at the age 14 through CPS continue to build on their relationship with youth as they transition to become an adult and living on their own. Over this period, the youth establish strong connections and trust with the CRPs. The CRP program established a process to continue the support of youth while the youth is in care and after the youth leaves care. The strength of the ILS program is to involve youth in the planning process with their plan as well as asking for their input and feedback through surveys completed at the workshops, teen conference, the exit survey and satisfaction survey. The CRP program has a high staff retention rate, which enhances the relationships between CRP's and youth. One of the purposes of the Child Family Service Plan (CFSP) is to continue to implement a comprehensive approach to achieve permanency. With the ILS program, the goal is to improve practice and coordination of services to assure youth are receiving the needed independent living services to have a positive transition to adulthood. Many of the aspects of the Five-Year Plan focus on the approaches to deliver independent living services to youth and young adults. The following goals have been identified to strengthen programs for the Chafee program over the next five years.

Goal 1

Youth will obtain a high school diploma or GED.

Objective 1: Enhance the process for monitoring youths' high school credits.

Objective 2: Promote meaningful connections with educational providers, foster parents, adoptive parents, workers in group homes, case managers, and the youth.

- **Intervention 1:** Provide staff training, during the ILS module of Permanency and Well Being Certification training, to increase their engagement in the educational process of youth and enhance documentation of scholastic progress.
- **Intervention 2:** Engage the Department of Education, educational providers, and Family Services Specialists to enhance relationships and provide support during the transition of high school credits for youth moving to different schools.

Objective 3: Address barriers affecting a youth's ability to obtain credits needed for graduation.

- **Intervention 1:** Collaborate with Department of Education along with Group and Residential Treatment providers to continue assessing the barriers limiting a youth's ability to obtain the credits required to graduate from high school and develop solutions to resolving the barriers such as through review of the youth's requirements to graduate and working with the former school district to transfer as many credits as possible. Child Protection has a representative involved on the Department of Education Advisory Council to assist with this collaboration.
- **Intervention 2:** While the school district is responsible for educational services, credit tracking is something the provider and Family Services Specialist must also be involved in during transition to make sure the youth receive maximum credit for the work they have done/doing at the time of their move.
- **Intervention 3:** Annual fidelity review of the credit tracking management process will be completed by the agency along with the CQI Team to monitor school credit tracking to identify ongoing trends.

Goal 2

Youth are employable after transitioning from foster care.

Objective 1: Increase youths' employability skills.

- **Intervention 1:** Provide employment skills training at Workshops, Teen Conference, and Young Voices meetings.
- **Intervention 2:** Collaborate with Group and Residential providers and Job Corp to provide youth with more work-related experiences. If the youth is unable to leave the campus due to treatment needs, collaborate with the provider to offer skill building opportunities onsite that will enhance the youth for future employability.
- **Intervention 3:** Collaborate with the Department of Labor, Community Resource People, and CPS to develop strategies to improve employability opportunities for youth.

Positive Youth Development (PYD) is a critical principle encompassed in all aspects of services provided to youth and exemplified through Young Voices. PYD is an intentional, prosocial approach that engages youth within their communities, school, organizations, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances young people's strengths; and promotes positive outcomes for young people by providing opportunities, foster positive relationship, and furnishing the support needed to build on their leadership strengths. PYD is incorporated to the training plan and principles of PYD are embedded in the policy and practices of the ILS program. Through case planning, age meetings, and youth groups, an emphasis is placed on engaging youth with meaningful connections and encourage youth to share their lived experiences. DSS has also worked to implement a Young Voices Speaker' Bureau and has focused on recruitment of youth to participate. During all ILS events, including the workshops and workgroup meetings, there has been discussion with youth and supportive adults on how utilize the youths lived experiences to help recruit foster providers for older youth through in-person presentations, videos, social media and utilizing their input when writing CPS policy.

The National Youth in Transitional Database (NYTD) data is shared with youth and placement providers at ILS Workshops and Teen Conference as well as attendees of the ILS Workgroup meetings and Young Voices meetings. CPS will continue to share data with the Court Improvement Program Committee, the South Dakota Youth Care Provider Association, BIA and tribal child welfare agencies to obtain their input on the data to improve service delivery and make a difference to youth in the foster care system.

CPS will continue to collect high quality NYTD data with the Family and Children Information System (FACIS). The FACIS system is designed to assist staff to assure a youth will not be missed if the NYTD survey needs completion. CPS continues to develop functions in the system to support federal requirements and policy changes. Staff modules and compliance reports are used to assist CPS with monitoring, and tracking tasks related to youth in the NYTD baseline and follow-up populations. The Community Resource Person contractors assist in providing independent living services by having access to FACIS for cases assigned to them. The CRPs have access to the compliance report, which assists with the NYTD requirements.

Serving Youth Across the State

Independent Living Services (ILS) is provided as a statewide, supplemental service for youth before the age of 18. If youth still have a plan of reunification with their family, CPS will continue to provide reunification services. Independent Living Services are provided until reunification is successful or until it is determined, reunification is no longer an option. The other permanent plans are adoption, guardianship, permanent placement with a relative, or another planned permanent living arrangement (foster home, treatment facility, etc.) If reunification is successful, CPS continues to be involved until the parent(s) have the capacity to keep the child safe at home. CPS does not provide ILS beyond that time. If reunification is not successful, CPS works toward adoption, guardianship or permanent placement with a relative. CPS continues to work with the youth, the temporary placement resource and the permanent resource until the permanent resource is legally appointed as the permanent guardian of the youth. CPS can provide a subsidy to adoptive parents and families receiving guardianship of the youth until the age of 18.

If youth will be in foster care until the age of 18, CPS continues to provide financial and other supports to the youth and the placement resource, until the youth turn 18 years old. CPS does have an exception in policy allowing CPS to continue financial support for youth in custody, until they complete high school or reach the age of 21, whichever comes first. CPS did not select to extend IV-E funding beyond age 19. However, CPS utilizes state funds to support young adults who remain in placement beyond age 19. In addition, CPS can use Chafee funds to pay a foster home up to \$200 a month for those youth over 18, who are out of school, but continue to reside with their foster parent until the age of 21.

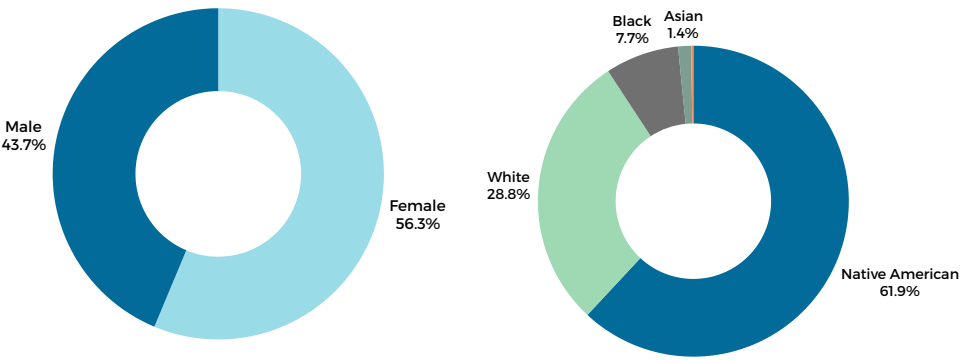
If a youth is attending a post-secondary school and dorms are not available, the ILS program can assist with housing off campus if the youth is a full-time student and maintains a 2.0 or higher-grade point average. The amount of the assistance can be up to \$300 per month including the security deposit.

While ILS is provided by CPS to youth at the age of 14, the primary purpose is to assist those youth who will transition to adulthood from foster care. Services include facilitating continued involvement of the placement resource with the youth and maintaining or reestablishing connections with relatives. The services for those youth up to the age of 21 are a safety net mainly for youth who do not have a permanent family and need the continued support after they leave care whether the resource family stays involved or not.

South Dakota provides tribal consultation with the tribes to remind the tribes with an approved IV-E plan or a title IV-E tribal and state agreement have the option to receive directly from ACF a portion of the state's Chafee Foster Care Independence Program (CFCIP) and / or Education Training Voucher (ETV) allotment to provide services to tribal foster/foster youth (section 477(j) of the ACT).

CPS is divided into seven regions providing child welfare services to South Dakota's 66 counties. There are five CRP's providing services to these counties. Two CRPs cover the entire western half of South Dakota (north and south), which includes 18 counties. There is one CRP located in the central portion of South Dakota who covers 28 counties, north and south, and two CRPs located in the eastern part of the state who cover 20 counties and they travel to the most southern corner of the state. CPS provides child welfare services for the following five tribes: Rosebud, Lower Brule, Crow Creek, Cheyenne River and Yankton. CPS has established agreements with the other four tribes who provide their own child welfare services, which are Pine Ridge, Flandreau, Sisseton and Standing Rock.

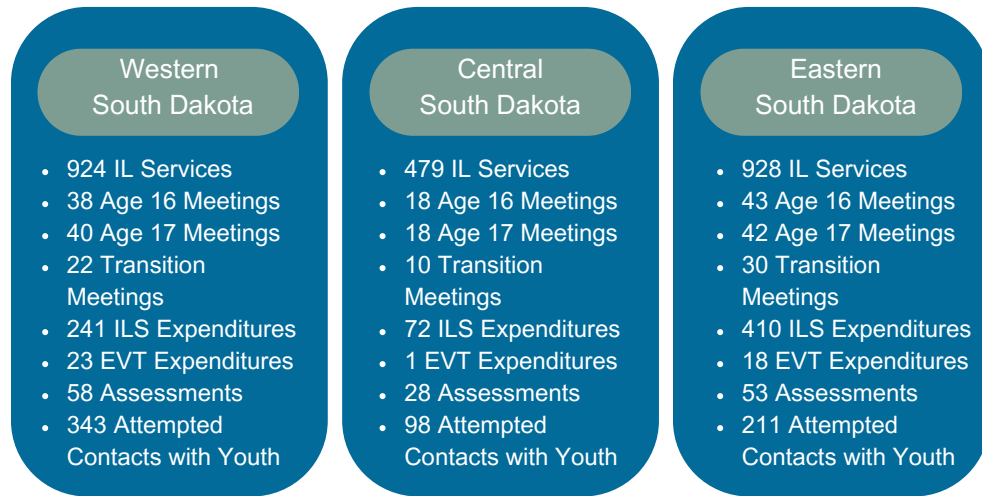
In SFY 24, 444 youth were served and 2,398 ILS Services were provided. The demographics of the youth served are as follows:



LGBTQIA2S+ Youth/Young Adults

LGBTQIA2S+ youth receive the same needs assessment and individualized services of any youth who is placed in the custody of SD CPS Youth age 14 and older in the custody of DSS are invited to participate in a youth advocacy group called Young Voices, which is youth-driven and provides opportunities to share their thoughts and ideas about ways to improve the child welfare system. Youth are also given a youth survey where they can share their input for the agency in a confidential manner.

The following are the statistics related to services and activities completed by the CRPs for the timeframe July 1, 2023, through May 31, 2024:



Serving Youth of Various Ages and Stages of Achieving Independence

CPS continues oversight of the contract with Lutheran Social Services (LSS) to provide Community Resource Persons (CRP). CRPs deliver support services regarding development of independent living skills for youth ages 16 through 21 to assist in their transition to adulthood and self-sufficiency. CRPs assist youth to prepare for post-secondary education; provide personal and emotional support to youth through mentors and promotion of interactions with dedicated adults; provide financial, housing, counseling, employment, education and other appropriate support and services to allow youth to have regular, ongoing opportunities to engage in age or developmental-appropriate activities as defined in Section 475 (111) of the Act; and provide services to youth who after attaining 16 years of age have left foster care for kinship, guardianship, or adoption. Youth, after attaining 16 years of age, who left care through adoption or guardianship can participate in ILS Workshops and would be eligible for Educational Training Voucher (ETV) funds. Youth, 18 years of age or older, can remain in care up to age 21 to complete their high school education. If youth attend a post-secondary school, the CRP provides support to youth up to the age of 26. The CRP remains in contact with youth identified in the NYTD baseline up to age 21 to meet the NYTD requirement. The delivery of services under Chafee will not change if the youth chooses to leave care. The CRPs work to support youth referred to them from the tribal areas.

South Dakota ensures that Independent Living services are available to youth formerly in foster who have moved to the state, after exiting foster care in another state. The Independent Living Program Specialist is the point of contact when questions arise about youth moving to South Dakota and if they qualify for ILS. The IL Program Specialist assigns a CRP to that young adult, so they have a point of contact to help guide them through IL services in South Dakota. These young adults also qualify for the Former Foster Care Medicaid program and the CRPs also assist them in getting those services in place. The IL Program Specialist helps guide educational service providers on what IL services are available when they reach out with questions. The Independent Living Program Specialist networks with other state ILS leaders when attending virtual and in-person conferences and has shared that South Dakota can provide IL services to eligible youth. The Independent Living Program Specialist is also a member of the federal list serve where other ILS program leaders can reach out through correspondence to ask questions about services available to young adults moving or currently residing South Dakota.

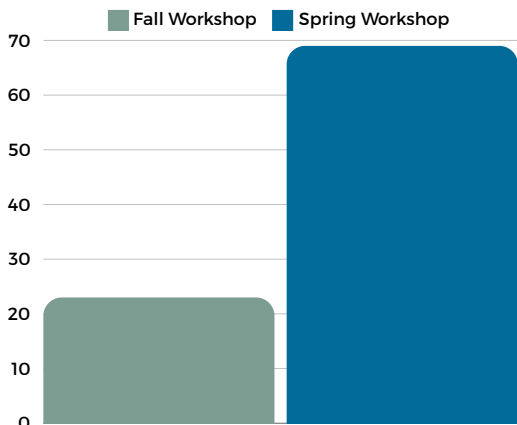
ETV funding and the Fostering Youth Independence (FYI) voucher for housing are resources available to youth who have exited foster care and who move from other states into South Dakota. The Independent Living Program Specialist will reach out to the state in which the youth has moved from to verify their eligibility to help establish what South Dakota can assist with. Collaboration then begins between the two states to ensure that the young adult does not fall through the cracks and IL services are made available to them.

South Dakota Youth Advocacy - Young Voices

Incorporating Positive Youth Development in the foundation of the South Dakota Independent Living Program, the Young Voices Program serves to ensure that practices are guided by youth input and lived experience. Youth have learned to speak about their life stories and experiences in a way which leads to positive changes in themselves and others. From July 1, 2023 through May 31, 2024, one scheduled Young Voices meeting was held in August virtually, during which the Family First Prevention Program Specialist recruited members to participate, and ten youth were present. During this report year, DSS has also worked to implement a Young Voices Speaker' Bureau and has focused on recruitment of youth to participate. During all ILS events, including the workshops and workgroup meetings, there has been discussion with youth and supportive adults on how utilize the youths lived experiences to help recruit foster providers for older youth through in-person presentations, videos, social media and utilizing their input when writing policy. Due to the youth meeting virtually, it has been difficult to track attendance and registration, as well as individualized demographics to support the group having a diverse composition. The ILS workgroup is exploring ways to have more opportunities for Young Voices to meet in person in the next year. Financial support is provided when youth need transportation, food, and/or lodging to attend meetings or events. Young Voices meetings and public presentations have given youth the opportunity to engage with their peers and enhance policies and practices of the child welfare system. Input is continually sought from this group and has led several changes noted in subsequent paragraphs. In January, three Young Voices members presented their lived experiences to the South Dakota Association of Youth Care Providers (SDAYCA) and have been invited to follow up events which included a presentation in May with a few members of the SDAYCA, DSS leadership and staff and the Division of Behavioral Health. Several members also continue to contribute to a youth advocacy group to prevent homelessness, which meets several times per month virtually or in-person. In the upcoming year, Young Voices members will be invited to participate at upcoming foster parent recruitment meetings held at least two times per year and will plan to share lived experience at least two times per year with community members and stakeholders, as invited. During ILS events in this report year, Young Voices offered input on workshop and teen conference planning, foster parent recruitment feedback, and have been invited to participate in recruitment videos and DSS focus group membership. This will be a main Young Voices goal in the upcoming year.

Independent Living Services Workshops

Rooted in positive youth development, ILS Workshops provide education and training in obtaining a high school diploma and post-secondary education, career exploration, vocational training, job placement and retention, training, and opportunities to practice daily living skills (such as financial literacy training and driving instruction), and substance abuse prevention, and preventative health activities (including smoking avoidance, nutrition education, and pregnancy prevention). All eligible youth can attend a workshop on each topic before reaching age 18. In addition to inviting youth to each workshop, invitations are extended to foster parents, adoptive parents, staff from group homes and residential treatment facilities, Department of Corrections (DOC) staff, Bureau of Indian Affairs (BIA), and Tribal Child Welfare staff so they have a better understanding of issues confronting youth as they prepare for independent living. [ST1] Ninety two youth attended ILS Workshops from July 1, 2023, through May 31, 2024. The Fall workshop was held virtually in December, with only 23 youth participating. Topics presented was on post-secondary education, NYTD, and Young Voices members shared their lived experiences and helped recruit for more members. The ILS Spring Workshop was held virtually in April with 69 participants, and the presentation was about Internet and Personal Safety.



92 total youth attended ILS Workshops from July 1, 2023 through May 31, 2024. Topics at these workshops included: post-secondary education and financial aid, being held on college campuses. Drug and Alcohol Prevention/Health and Medical Education, Housing, ILS, and NYTD, Internet and Personal Safety.

Starter Kit Funds

The starter kit funds are earned by youth through engaging with the Independent Living Program and used for independent living items and needs as the youth transitions from custody at the age of majority. Youth who have left foster care due to kinship, guardianship, or adoption before 18 years old can use the starter kit funding, they earned when living on their own. None of the starter kit funds will be used for room or board. Between July 1, 2023, and May 31, 2024, \$9,301.53 of Chafee funding was used for 29 youth who received starter kit funds.

Driver's Education

Public transportation is not readily available across the state of South Dakota. Driver's Education is an essential program to ensuring youth are prepared to safely operate a motor vehicle. From July 1, 2023, through May 31, 2024, \$9,175.70 of Chafee funding was provided to 28 youth for driver's education training.

Youth Organizers

Youth ages 16 and older are provided with organizers. The organizers are utilized to help youth gather and organize the information they will need as they prepare to transition to adulthood and live on their own. An organizer includes sections for organizing and retaining medical, housing, employment, education, insurance, legal, personal, emergency, family, school, tax, paid and unpaid bills, and banking information. Organizers are provided to CPS, BIA, and tribal youth.

Former Foster Care Medical Assistance Program (FFCMA)

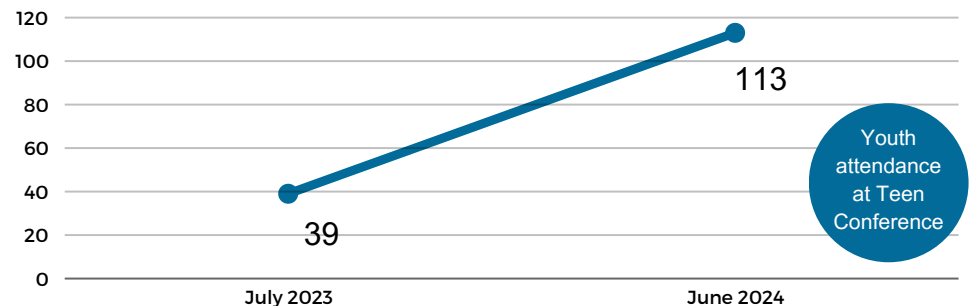
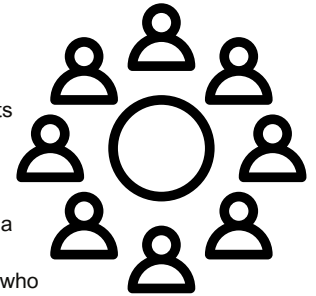
The Former Foster Care Medical Assistance Program (FFCMA) provided Medicaid coverage for 435 youth from July 1, 2023, through May 31, 2024.

Independent Living Services Workgroup

The Independent Living Workgroup meets at least twice a year for planning, organizing, and facilitating the workshops and Teen conference. Workgroup members evaluate the success of the conference, plan for the workshops and provide guidance to the ILS Program Specialist for planning for independent living services. The group is composed of representatives from over 20 various entities and the Young Voices advocacy group members. Staff and youth involved with the BIA and Tribal Child Welfare Agencies are invited to participate in the ILS Workgroup. The Independent Living Workgroup members represent CPS' current and past foster care youth, the DOC, foster/adoptive parents, staff from group care centers for minors and residential treatment facilities, staff from Lutheran Social Services, the CRP's, their Supervisor and CASA.

Teen Conference

The Teen Conference is designed to help youth improve their independent living skills as they transition from foster care into self-sufficiency. Youth from CPS, DOC, residential treatment facilities, group care centers for minors, BIA and Tribal Child Welfare Agencies are invited to attend the conference. Originally, the conference furnished meals, transportation, workshops, evening activities, and lodging for youth, and was held on a college campus to encourage youth who have been in the foster care system to think about the option of post-secondary education. The conference provides youth in foster care the opportunity to interact with other youth in similar situations and to learn important life skills. The conference has been a multi-day event which historically occurred every two years; however, with the input of youth, the conference is now held annually. Post pandemic attendance continues to be a concern. In person events are difficult to plan due to staffing and supervision availability and travel. The 2023 Teen Conference was held in July, in Rapid City and Sioux Falls, as a short one-day event. A total of 39 youth participated. The 2024 Teen Conference was held in one location, Pierre, and was a one-day event, which was an effort to increase in-person attendance. One-hundred and thirteen youth attended, along with forty-four adults who assisted with transportation and supervision. During this event, the youth participated in a simulation activity to help gain insights into the complex issues associated with exiting out of the foster care system. The activity served as a starting point for conversations on how we can collectively support and empower attendees. A debrief occurred after the simulation, which included the sharing of NYTD data collected through surveys of youth, ages 17, 19 and 21, which included outcomes of South Dakota youth who have aged out of the foster care system. Also, during the Teen Conference, a previous South Dakota foster youth shared her lived experience, recruitment was done in hopes of expanding the Young Voices Advocacy group, and the Secretary of the Department of Social Services, along with the Governor of South Dakota attended to welcome the youth and both shared an uplifting message which were both highlights for the youth in attendance. In upcoming years, Young Voices and the ILS workgroup will continue to provide suggestions and input on how to host teen conference events. Youth input will be essential when planning the times, days, and topics.



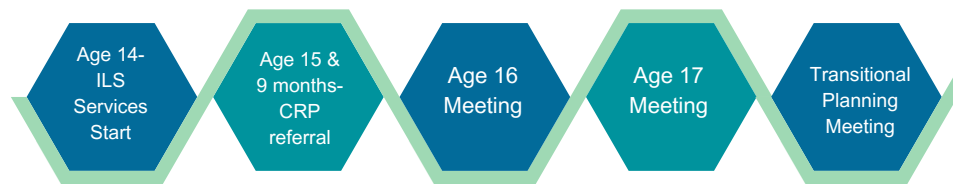
Transition Planning Processes

Independent Living Assessments and Case Planning

The Independent Living Program requires an independent living assessment for all youth in care at the age of 16, and then again at the time they exit foster care. The Casey Life Skill Assessment (CLSA) is used to evaluate a youth's readiness to meet the challenges of adulthood and is designed to provide a picture of a youth's strengths and needs. The assessment tool is used to match the needs with independent living services. The results of the assessment are incorporated into the youth's Case Service Plan by Family Services Specialists. The CRPs are responsible for ensuring assessments are completed within three months of a youth's sixteenth birthday. From July 1, 2023, through May 31, 2024, 142 youth completed the CLSA.

Independent Living Planning Meetings

The Independent Living Planning meetings goal is to review the youth's long-term plans and break them down into smaller short-term goals. Planning meetings are held to increase positive outcomes for youth and to enhance their supports. Before the meeting, the youth will identify influential people in their lives to invite to the meeting. Youth are encouraged to invite whomever they feel can help them plan for their future. Prior to the meetings, information such as the youth's progress in school and credit report information is gathered, to ensure the youth and their team have well-informed information to enhance transition planning. Planning meetings are utilized to partner with youth to assess their strengths and needs. Independent Living Plans are specific to each child, but all contain the same integral components such as housing, education, employment, mentoring, and continued support services. Planning meetings provide opportunities to foster self-determination and build resiliency, ensuring emotional and psychological needs are not overlooked.



Age 16 Planning Meeting

Prior to the Age 16 meeting the youth will complete the Casey Life Skills Assessment (CLSA). During the meeting youth and their supports will review the CLSA as a team to provide input to determine strengths and needs when developing the youth's case plan for ILS services. Education is an important topic to discuss at the Age 16 Planning meeting with emphasis on identifying a school contact, such as the school counselor, to participate in the meetings. The meeting assists youth to ensure the educational components are covered and identifies school credits obtained and those still needed to graduate. From July 1, 2023, through May 31, 2024, 101 Age 16 Planning meetings were completed.

Age 17 Planning Meeting

At the Age 17 meeting, although there are similarities to the Age 16 meeting, a higher focus is placed on the youth's plans for once they exit foster care. The youth and their supports review the information such as credits, progress towards graduation, and their credit scores. The youth discusses their plans for once they are 18 and the things they need to prepare for. From July 1, 2023, through May 31, 2024, 102 youth completed the Age 17 Planning meetings.

Transitional Independent Living Plan Meeting

This planning meeting is an opportunity, not only for additional program information, but also for the youth to share input about the system, identify unmet needs, and further assess readiness to transition into independent living. Important documents are given to the youth (such as verification letter, birth certificate, social security card, photo ID/driver's license, school records, and Medicaid card), in addition to information on the importance of having a Power of Attorney for Health Care or a Health Care Directive, Selective Service and sex trafficking information. This information is added to the youth's ILS organizer to assist in retention and organization. From July 1, 2023, through May 31, 2024, 65 youth completed the Transitional Independent Living Plan meeting. This meeting provides an opportunity to have in-depth discussions with the youth regarding their transition from care.

Collaboration with Other Public and Private Partners

The following provides information on collaborative and coordinated efforts that have taken place during the reporting period to involve the public and private sectors in helping adolescents in foster care achieve independence.

The ILS Program Specialist and CRP's collaborate with the Department of Labor and Regulation (DLR) regarding the South Dakota Workforce Innovation and Opportunity Act grant funding which provides additional resources to youth age 16-24 for career exploration and job training.

Department of Health – Resources and Education for Adolescents Choosing Healthy Behaviors (REACH)

The Personal Responsibility Education Program (PREP) is a collaborative effort with Department of Health, DSS/CPS, Lutheran Social Services and DOC. The overall goal of this project is to reduce teen pregnancy, and to increase abstinence, contraception to prevent pregnancy and STDs/HIV through intervention. This intervention is designed to increase the knowledge and skills youth have to reduce risky behaviors and help them identify qualities and attributes of healthy relationships between individuals and within families. CPS is using the evidence-based curricula Reducing the Risk, Be Proud Be Responsibility, and Botvin Life Skills Training. PREP also teaches 6 adulthood preparation subjects: healthy relationships, healthy lifestyles, adolescent development, financial literacy, parent and child communication and education/employment preparation skills. The trainings are currently being offered in five psychiatric residential treatment facilities, two intensive psychiatric residential treatment facilities, two group care centers for minors and one independent living program. The PREP program is working with 10 facilities in the state of South Dakota to target DSS youth. However, in some placements, some youth could be in DOC's custody or a school placement.

The 7thth Annual Positive Youth Development Spring Conference was held in April 2024-, hosted by LSS REACH (www.REACH.LssSD.org) on the topic of "Facilitating within our South Dakota Communities." This event included various speakers specifically covering Social Media Safety, School Partnerships, and Engaging Youth, Parents, and Communities. The event was an opportunity for facilitators, partner agencies, and interested parties to network and learn. Twenty three participants attended from across South Dakota. From October 2023 through April 2024, 219 total participants completed at least one evidence-based curricula, including Families Talking Together, Teen Outreach Program, Motivating Adolescents to Reduce Sexual Risk, and Reducing the Risk.

South Dakota Youth Care Providers Association

CPS and the Division of Juvenile Services under the DOC meet with the South Dakota Youth Care Providers Association, which is comprised of the directors of the intensive residential, residential and group care providers in South Dakota on a quarterly basis. The purpose of this collaboration is to provide information about DSS and DOC initiatives, seek assistance from the Association when needed and assure there is a platform for sharing of information and resolution of issues. Meeting agendas focus on sharing information regarding placement numbers, data regarding the monitoring of restraint and seclusion, data on the utilization of psychotropic medication and efforts to reduce utilization, enhancing the intake process for the reporting of allegations of abuse or neglect in facilities, credit recovery youth in placement, discharge planning, Positive Youth Development, the importance of ILS, and other topics to improve services to youth in placement.

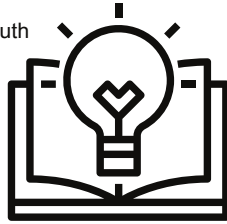
Juvenile Detention Alternatives Initiative (JDAI)

The mission of the Juvenile Detention Alternatives Initiative (JDAI) is to support the juvenile justice system that ensures the safety of youth and the community, utilizes the assessment of risks, eliminates the unnecessary detention of youth, provides a safe environment for the youth held in detention, and promotes healthy youth development by providing due process and collaborative, evidence-based interventions for youth and families.

The JDAI Statewide Steering Committee convenes quarterly and the CPS Assistant Director is a member of this committee. The Annie E. Casey Foundation provides technical assistance to South Dakota with the Unified Judicial System and the committee. The JDAI Statewide Steering Committee will impact youth by assisting to prevent youth from entering the UJS system and providing guidance to CPS as a member of this committee.

Post-Secondary Schools

The ILS Program collaborates with post-secondary schools when planning the Teen Conference and ILS Workshops. The Teen Conference historically has been held at a college campus, so youth have a chance to experience college life. The conference has been a multi-day event which historically occurred every two years; however, with the input of youth, the conference is now held annually. Post pandemic attendance continues to be a concern. In person events are difficult to supervise due to staffing and travel. The 2023 Teen Conference was held in July, in Rapid City and Sioux Falls, as a short one-day event. A total of 39 youth participated. The 2024 Teen Conference was held in one location, Pierre, and was a one-day event. This was an effort to increase in-person attendance, which was successful. One hundred and thirteen youth attended. In upcoming years, Young Voices will continue to provide suggestions and input on how to host workshop and teen conference events and discussions will continue on ways to encourage staff to provide transportation and supervision in hopes of returning to a college campus.



Department of Education – SDMyLife

CPS will work with the Department of Education (DOE) to address the educational issues confronting youth such as credit recovery as youth move from one school district to another. CPS will collaborate with DOE on issues such as challenges affecting their ability to complete a high school education.

Medicaid – Former Foster Care Medical Assistance Program

CPS and Medical Services developed a referral process to assure youth register with the Former Foster Care Medical Assistance program. A report generated each month through the CPS data system, FACIS, provides the names of young adults eligible for this program who reside in the state. After the age of 18, the Former Foster Care Medical Assistance Program sends youth an annual renewal mailing to continue their eligibility for the program until the age of 21 years old. There are no income or resource limits and can serve youth up to the age of 26. The CRPs continue to educate young adults over age of 21 about the program and assist them with enrollment.

South Dakota CPS ensures that youth who have exited care are aware of the Former Foster Care Medicaid Program. The youth continue to be assigned a CRP even if they move out of state. The CRP ensures that the youth is aware of Medicaid eligibility in any state they reside in. Prior to transitioning from care, the youth's CRP will review the Former Foster Care Medicaid program with the youth so they are aware of this benefit no matter where they reside.

Collaboration with Lutheran Social Services, High School Mentoring

The Sioux Empire United Way provided funding to LSS for the High School Mentoring Program. The program is designed to enhance relationships for youth in foster care by linking youth with an adult volunteer mentor in the community. LSS hosts one event per month for youth to attend in addition to the one-on-one time spent with their mentor each week.

The Independent Living Program collaborated with the Department of Education regarding SDMyLife. The user-friendly interface helps users with four key career preparation activities: career matching, career exploration, post-secondary education planning, and My Portfolio development. Each of these sections can be used on its own. For instance, someone interested in exploring careers could spend days simply learning about different careers and viewing multimedia interviews with people in those careers. Youth are able to connect to SDMyLife through their local school.

Department of Labor and Regulation

The DLR recognizes the importance of reaching out to youth in foster care, especially as they begin to transition to the adult world. The South Dakota Department of Labor and Regulation has 16 local offices throughout the state with several itinerant sites offering employment services to job seekers.

At these local offices, individuals can visit with an Employment Specialist regarding part-time or full-time work. Each local office provides Job Search Assistance Program classes to assist individuals in securing employment. This program is available to all residents, including the foster youth, while they are in care and after exiting care.

Career Launch SD is a no-cost resource to help youth from 16-24 explore education and career opportunities. Training opportunities include registered apprenticeships, internships and work experiences, job shadowing, informational interviews, classroom presentations, and career and post-high fairs. Career Advisors will help youth create work experiences. They'll also work with student on soft skills, monitor students, and promote youth job openings. The following site has additional information: <http://careerlaunchsd.com/referral>.

DLR has nine sub-grantee providers of Adult Education and Literacy (AEL) with services available throughout the state. AEL is for individuals over 18 years old and offers instructional courses to:

The Adult Education and Literacy Program emphasize skills such as reading, writing, numeracy, financial literacy, English language competency, problem solving, health 100 literacy and family literacy. These skills bolster workplace readiness, transitions to postsecondary education and a higher quality of life for South Dakotans.

Youth Transitional Impact Program

The Department of Social Services, Division of Behavioral Health, and CPS collaborated on a program to assist youth with mental health needs. New Alternatives, located in Rapid City, provides specialized mental health services, transitional housing, and support services targeted to assist young adults with employment, independent living skills and development of community supports to enhance their chances for a successful transition to adulthood. Referrals to the transition program is for those youth 18 or older who have functional impairments because of their mental illness. The program can host a maximum of 12 young adults. From July 1, 2023, through May 31, 2024, New Alternatives served 33 clients, 20 of these clients were involved in foster care.

Court Improvement Program

The Court Improvement Program is developing, establishing, and implementing Best Practice Standards for permanency hearings. Youth are an integral part of this process and will continue to be involved.

Court Improvement Program Committee hosts the annual Children's Justice Conference. The conference is presented in Rapid City and Sioux Falls. This is a multidisciplinary training opportunity those involved with youth such as attorneys, judges, CPS staff, DOC staff, CASA, mental health professionals, teachers, medical professionals, etc.

Public and Private Sector

The ILS Program collaborates through the CRPs when planning the ILS Workshops and the Teen Conference. In each area, where the ILS Workshop and Teen Conference is held, there are local speakers that assist with presentations to reinforce the ILS skills, which will assist youth to become an independent adult.

Housing Support

Housing assistance and support for youth 18-21 can include providing up to \$200 a month for youth who are no longer under the custody of DSS but continue living in a foster home for a limited time. For youth living in their own rental unit, housing support can include their initial rent deposit and the first month's rent, 66% of the rent the second month and 33% of the rent the third month.

Housing assistance also includes funds for youth to participate in Independent Living Preparation Programs; individual assistance to find and maintain housing by Prevention Act of 1974. Community Resource Person's in their areas, independent living classes on finding appropriate housing or using community housing resources, and \$300 monthly housing assistance for full-time students who maintain a 2.0 grade point average. From July 1, 2023, through May 31, 2024, 61 payments in housing support, totaling \$29,856.38, was provided to 26 youth. Additionally, \$770,990.177 was provided to support comprehensive case management of youth in transitional living programs and enhance placement stability.



The ILS Program Specialist is a member of the South Dakota for the Homeless Consortium and the Youth Committee. The Independent Living Preparation Program and CRPs will continue to educate and assist youth in registering with Public Housing in the area the youth would like to live. To receive "room and board" youth need to complete an individual Independent Living Plan and submit a housing application for prior approval before funds can be expended. The five CRPs collaborate with the local housing programs in the different areas of the state, so youth transitioning from foster care receive low-cost housing.

[Independent Living Preparation Programs](#)

CPS provides financial support to youth in three Independent Living Preparation Programs (ILPPs) located in Sioux Falls, Rapid City, and Mitchell, South Dakota. The ILPPs CPS contracts with do not receive funding under Part B of the Juvenile Justice and Delinquency Prevention Act of 1974.

McCrossan Boys Ranch is designed to prepare young men (ages 17 - 20) for independent living. This program and on-campus apartments provide an opportunity for the young men to gain employment, learn how to cook, clean, and manage finances, along with many other skills needed to live on their own. The program helps residents earn a high school diploma or GED and gain skills for employment or go on to higher education. The program can serve up to 24 participants.

Volunteers of America, Dakotas Axis 180 program provides young adults ages 16-21 the opportunity to transition out of unsafe environments into safe, supportive housing while they learn the skills necessary to succeed on their own. Specifically, the program assists participants with education completion, employment training and placement, financial management skills, daily living skills, and interpersonal skills. The program can serve up to 21 participants.

Abbott House, Bridges Independent Living Program is made up of 16 independent living apartments, located in Rapid City and Mitchell. The program is tailored to help young adults, both male and female, fine-tune their living skills while providing affordable housing and a structured independent lifestyle. Youth in this program sign a lease, find and maintain a job, and cook for themselves. Staff members are available to help and provide guidance as they transition into their own apartment and learn to live independently and to establish appropriate schedules and responsibilities. This program serves 16 participants and serves young adults ages 18-21.

[Foster Youth Independence \(FYI\) Vouchers](#)

CPS has partnered with Pennington County Housing Authority, South Dakota Housing Development Authority, and Lutheran Social Services to provide Foster Youth Independence (FYI) vouchers. The Pennington County Housing and Redevelopment Commission paid housing assistance in the amount of \$36,917.00 to landlords on behalf of the FYI program from July 1, 2023 until May 31, 2024. During this same period, \$435.00 was paid in Utility Reimbursement to eligible youth. Pennington County Housing Authority was the only housing authority participating in the FYI program until April 2024 when the FYI Voucher program was expanded into Minnehaha County and a MOU was signed between the Sioux Falls Housing and Development Commission, Department of Social Services, South Dakota Housing for the Homeless Consortium and Lutheran Social Services.

The Community Resource staff are partnering with landlords in the Sioux Falls area.

[Determining Eligibility for Benefits and Services](#)

DSS/CPS utilizes objective criteria for determining eligibility for benefits and services under the programs, and for ensuring fair and equitable treatment of benefit recipients. In general, Chafee services are available to youth who experience foster care at age 14 or older. DSS/CPS ensures that children who are likely to remain in foster care until age 18 can engage in age or developmentally appropriate activities. The program serves youth who are likely to remain in foster care until age 18, youth who, after attaining 16 years of age, have left foster care for kinship guardianship or adoption, and young adults ages 18- 21 who have "aged out" of the foster care system.

[Cooperation in National Evaluations](#)

DSS/CPS will cooperate in any national evaluations of the effects of the programs in achieving the purposes of Chafee.

[Education and Training Vouchers \(ETV\)](#)

DSS/CPS is the state agency responsible for administering, supervising and overseeing the ETV Program. The ETV Program is set forth under Section 477 (a) (3) "to help children likely to remain in foster care until 18 years of age prepare for and enter post-secondary training and educational institutions".

CPS implements policies and procedures to ensure South Dakota provides fair and equitable treatment of recipients in the ETV Program. The State will continue to assure and oversee the expansion of equal and fair treatment for current foster youth and youth who have transitioned from the foster care system. CPS is committed to improving the participation and success of youth who have exited foster care and are participating in educational and post-secondary training programs. The authorized ETV Program will give South Dakota the financial capability to encourage and support youth in completing educational goals and/or post-secondary training programs.

The funding received from the Federal ETV Program, which is used to support postsecondary education and training costs, including the cost of living and attendance, are provided to eligible youth. In accordance with the John H. Chafee Foster Care Program for Successful Transition to Adulthood (CFCPSTA), a youth may apply for assistance through the State's ETV Program. The level of education makes a big difference in where and how youth will live as well as the type of employment for which youth will qualify. It is therefore critical youth graduate from high school or receive a GED and continue to postsecondary education or training. CPS will use ETV funds to assist youth in making the transition from foster care to self-sufficiency. The Family First Prevention Services Act issued on July 9, 2018, allowed South Dakota to expand to assist young adults in foster care at age 18, or adopted or placed in a guardianship at age 16, to participate in the (ETV) program and remain eligible until the young adult reaches 26 year of age, as long as a young adult is enrolled in a post-secondary education or training program, maintain a 2.0 grade point average, and are making satisfactory progress toward completion of the program. In no event will a young adult participate in the program for more than five years.

The FACIS database will ensure the total amount of educational assistance to a youth under the federal assistance program does not exceed the total cost of attendance as define in section 472 of the Higher Education Act of 1965. The ILS Program Specialist monitors the ETV funds along with the youth that are eligible youth with the ETV funds.

The Independent Living Program Specialist and Assistant Director of DSS work together with the contracted agency to ensure external partners, such as the Department of Labor and Regulation are consulted and collaborated with, as it relates to ETV funds. Through these discussions the Department of Labor and Regulation and DSS are working on ensuring youth are aware of the Workforce Innovation and opportunity Act Youth Program, known as Career Launch.

Recruitment plan

- ETV Program information and the application process is on the DSS website
- ETV Program information is provided to BIA and Tribal Child Welfare Agencies, the DOC, Lutheran Social Services, all eligible youth, CRPs, the Department of Labor and Regulation and CPS staff.



Application process

The CPS website has information about the application and process. The following documents are required to be included with the application.

- A signed statement from post-secondary institution regarding the justification for funds including the cost of attendance
- School transcripts
- Goals and motivation statements from youth
- Acceptance letter from the school or vocational institution
- Last semester grades for subsequent applications

Criteria for eligible youth

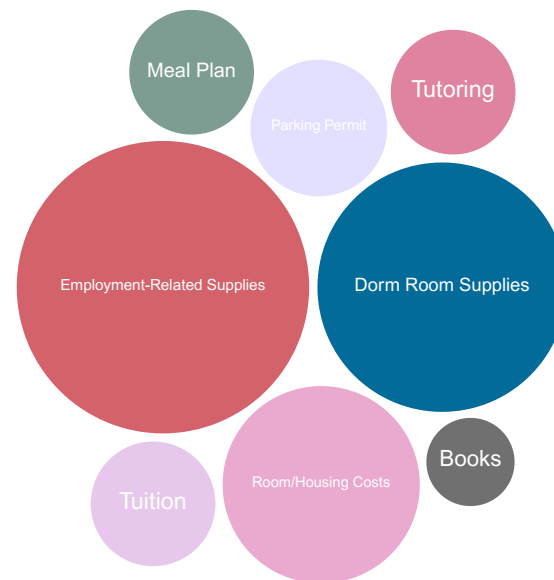
Youth in the custody of CPS, the DOC, BIA, and Tribal Child Welfare Agencies can apply for ETV funding to increase their educational attainment levels under this program if they meet the following criteria:

- Youth in foster care at age 18 who have transitioned from foster care in the custody of CPS, DOC, BIA and Tribal Child Welfare Agencies.
- Youth who are in foster care and are adopted or in guardianship after age 16.
- Youth participating in the ETV Program, before their 26th birthday, are eligible for the ETV, if they are enrolled in a post-secondary or training program and are making satisfactory progress toward completion of the program.
- Youth who accept the responsibility for completing their part of the educational planning and educational program.
- Youth who maintain positive documentation of progress by demonstrating at least a 2.0-grade point average and submit their grades each semester to the ILS Program Specialist. Youth may be granted a probation period on an individual basis.
- Youth who demonstrate their willingness and commitment to live up to their ETV Program responsibilities.

Funding for eligible youth

South Dakota approves cost for higher education that shall not exceed \$5,000 or the total “cost of attendance”, whichever is the less as defined in sections 472 of the High Education Act. Funding may be used for the following needs:

Funding may be used for the following needs:



These funds will be used after the Pell grant, and other financial aid assistance has been utilized. Education and Training Voucher funds will supplement existing financial assistance with the total amount not to exceed the “cost for attendance” for each postsecondary institution.

ETV data is shared and will continually be shared at the ILS Workgroup meeting. Youth will be involved with the information that is shared and will ask the youth for their input with the ETV funds in South Dakota. Young Voices will be involved with the ETV data by encouraging other youth to participate with the ETV funding. The ILS website will also be a way to continue to share the information concerning the ETV scholarships.

Chafee Training

Chafee training is incorporated into the training information discussed in the Training Plan.

Training funds provided under the title IV-E foster care and adoption assistance programs are utilized to provide training, including training on youth development, to help foster parents, adoptive parents, workers in group homes, and case managers understand and address the issues confronting youth preparing for a successful transition to adulthood and making a permanent connection with a caring adult.

Consultation with Tribes

CPS will continue efforts to work collaboratively with the South Dakota Tribes to improve child welfare outcomes and services for Native American youth and families. The ICWA Program Specialist is a liaison to the tribes and is responsible for collaborating and coordinating with the tribes to assure effective provision of services to tribal youth and families that comply with the federal and state mandates and tribal codes.

CPS will continue written and verbal contact with the BIA or tribal child welfare agencies from each of the nine tribes to discuss program issues and gain input related to the coordination of ETV, Chafee Foster Care program funding and services to eligible youth and staff on the reservations.

Native American youth between the ages of 14 up to age 21 are invited to be involved in the Chafee Foster Care program in the following ways:

- Invited to attend the ILS Workshops;
- Invited to attend the ILS Teen Conference;
- Invited to be members of the Independent Living Workgroup;
- Invited to attend Young Voices events;
- Invited to participate in the ETV funding to continue post-secondary education;
- Access to services provided by the Career Learning Centers (job mentors, job skills, writing resumes and pre-employment education);
- Invited to provide input regarding the ILS Five-Year Plan;
- Utilize Starter Kit funding; and
- Utilize PYD with youth.

The Community Resource Program will continue to collaborate with each tribe and offer assistance and support to youth with IL services. The CRPs are responsible to identify resources and to network with youth on tribal lands in their area. The CRP will continue to meet with BIA and tribal agencies individually to ensure their awareness and encourage participation in the program. Information regarding Chafee services, ETV funds, Community Resource Program services, ILS Workshops, Teen Conference events and other IL information and options will continue to be provided to the BIA and tribal child welfare agencies.

The Independent Living Program Specialist will work jointly with the CPS ICWA Program Specialist in the state office to enhance communication and ways to share information relating to the ILS program with BIA and the tribal child welfare programs. The ICWA Program Specialist is a member of the ILS workgroup and will provide information to the appropriate contacts within the tribal areas so youth in foster care are aware of the services. The ICWA Program Specialist is also part of the CPS Permanency Well-Being Workgroup and ILS Workgroup and is working on the Child and Family Service Plan.

Refer to Consultation and Coordination Between States and Tribes for further information.

V. Consultation and Coordination Between States & Tribes

History of Collaboration

The process of state tribal consultations has evolved over the past thirty years; the process changed dramatically with the creation of the Governor’s Commission on the Indian Child Welfare Act which authorized the Commission to study the requirements of the federal Indian Child Welfare Act and completion of an ICWA Compliance Study by the Center for State Courts in 2004. The Commission developed the “Top 30 Recommendations” from the analysis with yearly follow up. The state tribal consultation took a more structured approach in response with the creation of the “United for Families: The Collaborative Hocoka (Circle) for the Well-Being of South Dakota’s Native Children” (Collaborative Circle) which was funded by Casey Family Programs until 2010.

After 2010, the consultation between the state and tribes continued, leading to the implementation of the State Tribal Child Welfare Consultation (STCWC) on February 27, 2014.

Building on experiences learned from the Collaborative Circle, the new group expanded its membership to include not only tribal ICWA Directors but also tribal CPS directors who work with the state under State/Tribal Title IV-E Agreements; two tribal CPS programs where the tribe provides CPS services in lieu of the Bureau of Indian Affairs (Yankton Sioux Tribe and Rosebud Sioux Tribe); and other tribal leaders. Involved from the state are the Division Director, Assistant Division Directors, seven Regional Managers, ICWA Program Specialist, Foster/Kinship Care Program Specialist, and other invited guests. Recent additions to the group are the Permanency Program Specialist, the Parenting Education and Independent Living Services Program Specialist, and the Court Improvement Program Coordinator. Casey Family Programs committed to fund the group in 2015, and are a resource for consultation, research, and support when the State Tribal Child Welfare Consultation requests.

In 2022, the consultation process continued, but changed from what was previously followed. The pandemic disrupted the in-person meetings and required virtual meetings by Zoom. As this new method of delivery played out, it became obvious that it was less effective than in-person meetings, as meaningful discussions and attendance from tribal representatives deteriorated. The agendas were tailored to fit a two-hour time block and the meetings were more of an informational meeting with updates from the state and tribe. The view of both state and tribal representatives were that the past agendas were not productive and there was a need for a change. The Core Group met on August 12, 2022, with all team members attending. It was determined discussion on the broad goal of “Disproportional Entry Rates of Native American Children into Custody and Determine What Prevention Efforts Are Needed” from the Strategic Plan for 2019-2024 may be too broad of a topic to concentrate on and more realistic to work on goals that are mutually agreeable and would help both the tribes and the state. It was determined that quarterly meetings with a Core Group from State and Child Welfare Leadership will occur to work toward developing a structured framework to bring forward systemic barriers for ICWA compliance and collaboration between the State and the Tribes. STCWC members are invited to join these quarterly collaborative meetings and a training or group meeting with all STCWC members will be scheduled twice a year in conjunction with Core Group meetings.

A STCWC meeting was held on January 27, 2023, in Pierre. The changes regarding the format of the meeting structure were explained. The tribes provided updates on what they are currently dealing with in their respective areas and sought input from the state and each other on ways to address various problems in child welfare.

Current Collaboration:

The Department of Social Services, Division of CPS directly provides child protection services for five of the nine South Dakota tribes including Cheyenne River Sioux Tribe, Crow Creek Sioux Tribe, Lower Brule Sioux Tribe, Rosebud Sioux Tribe, and the Yankton Sioux Tribe. CPS works under the jurisdiction of tribal services, tribal law enforcement and tribal courts to carry out its responsibilities. CPS works with tribal courts for emergency custody, child custody, continued custody proceedings and the courts grant care and placement responsibility to CPS.

Safety, Permanency, and Well-Being Regional case reviews are completed on cases involving children and families under tribal court jurisdiction with services provided by state CPS, in the tribal areas mentioned above. Please see the Quality Assurance Outcome for more details of the case review process. CPS invites tribal partners to participate as a reviewer in the Regional case review process.

The ICWA Program Specialist distributes a monthly ICWA Director's report generated from CPS's CCWIS/FACIS system to the tribes. This report contains the following information for each tribe:

- | | |
|----------------------------|-------------------------------------|
| Office | Family Services Specialist Assigned |
| Enrollment Status | Months in Care |
| Demographic Information | Level of Care |
| Initial Placement Date | Permanency Plan |
| Date of last legal hearing | Type of last legal hearing |

Tribes have the opportunity to provide feedback to ensure accuracy of the information in the ICWA Directors Report, including names on the list who have been determined to be ineligible for tribal membership. The ICWA Directors Report was designed to include children who are enrolled, enrollment has not been established, and eligibility pending. Children are listed with the indicated tribe based on affiliation not enrollment status.

Definitions of selections for Tribal Enrollment are as follows, which aligns with AFCARS:

- Yes = The person is enrolled in the tribe.
- Ineligible = The person is ineligible for enrollment in the tribe.
- Eligible = The person is eligible for enrollment but either the process has not been started or enrollment paperwork is pending.
- Unable to Determine = Unknown if the person is enrolled in the tribe.

DSS-CPS formed an internal ICWA Capacity Building Workgroup as part of the ongoing efforts to enhance practice. The goal of this workgroup is to expand knowledge and expertise in each CPS region related to ICWA implementation. The workgroup is made up of representatives from the seven regions in CPS, the ICWA Program Specialist, CQI Program Specialist, and FACIS Program Specialist. It was decided for this to be an internal workgroup due to the need to maintain confidentiality related to case reviews to monitor internal compliance with CPS ICWA requirements.



This workgroup is not only responsible for completing ICWA compliance reviews but also a capacity building process with training and awareness of ICWA trends locally and nationally. As this workgroup becomes more established, the group will bring in consultants from tribes and other ICWA experts to assist in building knowledge and expertise among the group. Please see the Quality Assurance Systemic Outcome for more details regarding South Dakota's CQI Process.

The ICWA Program Specialist collaborates with the nine tribes on a yearly basis to gather input for the APSR and every five years to gather input for the CFSP. Once the reports are approved by the ACF, they are uploaded to the CPS's public webpage and also emailed to each tribal representative.

The state's process to gather input from the tribes is a process set up in previous years through the State Tribal Child Welfare Consultation workgroup and through individual tribal consultations. It is organized in three parts with:

- Tribes that have a State Tribal Agreement, which is centered around technical assistance with CPS or ICWA programs.
- Tribes who don't have a State Tribal Agreement, which is centered around consultation with ICWA programs or with tribal CPS programs operating without a State Tribal Agreement
- Government to government outreach, which is centered around DSS Cabinet Secretary and sometimes the Department of Tribal Relations Cabinet Secretary meeting with Tribal Presidents/Chairs and councilmen or women.

Contacts with tribal partners from July 1, 2023 through June 30, 2024 can be found in the Final Report.

Through contract management, the ICWA Program Specialist continues to provide training on Title IV-E and other contract responsibilities the tribe has, according to the agreement. The ICWA Program Specialist will also reach out to ICWA programs that do not have an agreement with the state, who have new directors, in case they are interested in an overview on state court processes or CPS process. As part of the yearly tribal outreach, those tribes are also contacted to see if they would like to have virtual consultations with DSS-CPS leads. Through both outreach efforts from the ICWA Program Specialist, it is hoped that the barrier of staff turnover will no longer effect meaningful dialogue and relationships with the tribe. This is all part of the multi-pronged effort to develop communication with the tribes to gain their feedback.

Please see attachment 7 for ongoing tribal engagement efforts.



Goals:

CPS works collaboratively to engage the tribe at all times, including actively engaging the tribe in placement searches, diligent relative searching and discussions on good cause when placing children outside of ICWA placement preferences.

This collaboration is ongoing through Good Cause Case meetings. A structured format for the meetings was developed to ensure that Family Service Specialists are prepared for the Good Cause case meetings. Local CPS staff, Adoption Program Specialist, Patricia Reiss, and the ICWA Program Specialist, Joseph Ashley attend the meetings to review DSS efforts to comply with efforts to meet ICWA preference before recommending Good Cause at Adoption Committee Meetings. See attachment 7 for outline of ICWA Good Cause Conference.

CPS builds and maintains its effective working relationship with tribes to ensure ongoing collaboration and ICWA compliance.

DSS-CPS must navigate through nine different tribal governments who oversee the ICWA or CPS programs the department works with. This has led to the Department of Social Services having government to government meetings with top officials from both entities to talk about improving communication, exploring the possibility of a direct Title IV-E program, entering into a State Tribal Agreement, or discussing other issues. DSS Cabinet Secretary Matthew K. Althoff has taken an active lead in communicating with tribes that have their Tribal Presidents or Chairmen involved in interactions with DSS-CPS. It has been DSS's long standing position to assist the tribes if they make the choice to enter into an agreement. When tribes are interested in making an agreement with the state, this process takes time and collaboration. The negotiations begin with a DSS listening session to the tribal representatives and tribal stakeholders after an overview presentation is given by DSS, which includes child welfare data for that region. Follow-up meetings occur as necessary.

SD-DSS, CPS Certification Training curriculum is shared with the tribal child welfare agencies to support the training of their CPS staff.

Tribal Child Welfare agencies are able to enroll their staff in CPS Certification Training when there is availability. The training includes information on the Initial Family Assessment (IFA), Protective Capacity Assessment (PCA), and Permanency and Well-Being (PWB).

More on Collaboration and Support with Tribes

South Dakota CPS and the tribes collaborate in several different ways. Additionally, South Dakota CPS has a ICWA Program Specialist, who is a liaison between the tribes and State to provide technical assistance. The technical assistance and collaborations can be seen in attachment 6.

Consultation on ETV and Chafee

The Independent Living Program Specialist collaborates with the ICWA Program Specialist to communicate and to share information relating to the ILS Program with the tribes. The ICWA Program Specialist provides this information to the appropriate contacts within the tribal areas, so youth in foster care are aware of independent living services.

The Independent Living Program Specialist and ICWA Program Specialist have made each tribe aware of available services and opportunities available to Native American youth who are or were formerly in foster care under Tribal jurisdiction. Also, financial assistance for post-secondary education and training is available to eligible tribal youth through the Educational Training Vouchers.

Special attention will be given to ensuring the Independent Living resources and Community Resource Person (CRP) services are available to youth living on the reservations. The CRPs have made efforts to schedule meetings with the BIA and Tribal Child Welfare Agencies and make services available to assist the tribal youth in foster care.

Native American youth in foster care with tribal child welfare agencies between the ages of 14 to 21 are invited to be involved in the Chafee Foster Care Program in the following ways (See Section John H. Chafee Foster Care Program for Successful Transition to Adulthood - the Chafee Program for additional service provision explanations):

- | | |
|---------------------------------|---|
| ● ILS Workshops | ● Independent Living Preparation Programs |
| ● ILS Teen Conference | ● CRP Support for youth in BIA or tribal custody |
| ● ILS Workgroup Meetings | ● FYI Vouchers |
| ● Drivers Education Support | ● ETV Funds/Post- Secondary Educations Financial Assistance |
| ● Housing Support | ● Job Mentoring and Skills through Department of Labor |
| ● Extended Medicaid Eligibility | ● Youth Advocacy through Young Voices |

The ICWA Program Specialist disseminated information to the BIA and Tribal Child Welfare Agencies from the ILS Program Specialist related to Independent Living Services such as the Teen Conference, ETV Scholarship funding, ILS Workshops, and ILS Workgroup meetings. The ILS Program Specialist attends the State Tribal Child Welfare Consultation meetings, as needed, to discuss Independent Living services information, otherwise, announcements for upcoming ILS events are emailed out to all of the tribes.

South Dakota collaborates with each of the nine tribes in the state, so they are aware of the ETV registration period. The CRP contacts the BIA and Tribal Child Welfare Agencies to provide information on the ILS services and how youth can apply for the ETV funds. The CRPs assist youth with the ETV registration and the application for the post-secondary school. The CRPs will continue to be in contact with the BIA and Tribal Child Welfare Agencies about the ETV funds and ask if there are youth that would be eligible, so the CRP can contact eligible youth. At this time, no tribes in South Dakota have requested to develop an agreement to administer, supervise, or oversee the Chafee or an ETV program.

Goals

**Title IV-E
Funding**

GOAL: Community Resource Person's (CRPs) provide ongoing consultation to tribes with an approved IV-E plan or a Title IV-E Tribal and State Agreement about their option to receive a portion of the State's CFCPSTA and /or ETV allotment to provide services to eligible tribal youth (Section 477(j) of the ACT) directly from ACF.

Progress: At this time, consultation is ongoing although the tribes have not pursued an agreement. No Tribes in South Dakota have requested to develop an agreement to administer, supervise, or oversee the Chafee or an ETV Program with respect to eligible Indian children.

**CRP Support
until age 21**

GOAL: Community Resource Persons (CRPs) provide services and support to all youth, including those involved with the Tribal Child Welfare Agencies, until the age of 21 years old.

CPS maintains a contract with Lutheran Social Services to provide the Community Resource Person's (CRPs). The CRPs provide assistance and services to youth in CPS custody, as well as youth with BIA and Tribal Child Welfare Agencies.

**Services to
Native American
Youth**

GOAL: Native American Youth, both the youth involved with the State Child Welfare System, and the Tribal Child Welfare Agencies will be engaged in the Independent Living Skills Program

The ICWA Program Specialist has created a contact list for each of the tribes. This information has been shared with the CRPs. The CRPs use this information to make connections with the tribes regarding the Independent Living Program for services such as CLSA, ETV funds, Young Voices, ILS Advisory Workgroup, ILS Workshops, ILS Teen Conference and to confirm placement contact information to make contact with youth. The CRPs will continue to be responsible for identifying resources and networking with BIA and Tribal Child Welfare Agencies on the reservations in their coverage areas throughout the state.

VI. Targeted Plans within the 2025-2029 CFSP



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



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



Disaster Plan



Training Plan

Section E. Financial Information

Payment Limitations

- CPS does not spend more Title IV-B, Subpart I for child care, foster care maintenance, and adoption assistance payments in any fiscal year the State expended for those purposed in FY 2005. FY 2005 Title IV-B funds \$640,797; match funds \$213,599.
- CPS did not spend Title IV-B, Subpart I funds in FY 2005 for administrative costs. The submitted CFS-101, Part III, includes \$0 for administrative costs.
- In FY 2018, the State did not use federal funds awarded under Title IV-B to supplant federal or state funds for existing family support, family preservation, family reunification and adoption support services based upon the State's FY 1992 expenditures.

Reallotment of FY 2024 (Current Year) Funding

South Dakota does not have any reallotments.

FY 2025 Budget Request—CFS-101, Parts I and II

Please see CFS-101 Part I and II attachment.

FY 2022 Title IV-B Expenditure Report—CFS-101, Part III

Please see CFS-101 Part III attachment.

Expenditure Periods and Submission of Standard Form 425 (SF-425) Federal Financial Report

The Department of Social Services Finance Department submits the Federal Finance Reports annually in the Payment Management System within 90 days of the end of the federal fiscal year based on the terms and conditions of the federal award.