Child and Family Services Reviews

New Hampshire Statewide Assessment

July 2, 2026

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ADMINISTRATION FOR CHILDREN & FAMILIES
Administration on Children, Youth and Families
Children's Bureau

Statewide Assessment

Section I: General Information

Name of State Child Welfare Agency: NH Division for Children, Youth and Families

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Sherry Ermel	DCYF Bureau Chief Bureau of Field Services	Collaborator, Provided information, Reviewed drafts
Mike Donati	DCYF Bureau Chief, Bureau of Community, Family and Program Support	Collaborator, Provided information, Reviewed drafts
Kara Buxton	DCYF Assoc. Bureau Chief, Bureau of Community, Family and Program Support	Collaborator, Provided information, Reviewed drafts
Marie Noonan	DCYF Director	Collaborator, Provided Information, Reviewed and approved SWA.
Jennifer Ross	DCYF Deputy Director	Collaborator, Provided Information
Marie Noonan- Director, Jennifer Ross- Dept Director, Bureau Chiefs, Field Administrators, Program Specialists, Program Administrators, Field Supervisors (CPS and JJS); DCYF Supervising Attorneys	DCYF Management Team	Collaborator, Provided information
Tracie Gelbstein	NH Judicial Branch	Collaborator, Provided information, co-authored SWA, analyzed data, Reviewed drafts
Jeanette Bilodeau	NH Judicial Branch	Permanency data analysis
Hon. Judge Susan Ashley	NH Judicial Branch	Collaborator
Jennifer Gilroy	DCYF Adoption Program Manager, Bureau of Community, Family and Program Support	Collaborator, Provided information
Various CPSWs. JPPOs, Supervisors, CASA Administration, Bureau Chief of Field Services, Tracie Gelbstein (CIP Director), Mark Rolan*- Stakeholder; etc.)	Cross Systems Permanency Workgroup	Collaborator, Provided information
Deanna Baker (DCYF Legal Director)		

Name of Participant	Affiliation	Role in SWA Process
Teresa Lukasavicz	DCYF Training Administrator, Bureau of Professional and Strategic Development	Collaborator, Provided information, Reviewed drafts, training data analysis
Child Welfare Education Partnership	DCYF Training Contractor	Collaborator, Provided information, training data analysis
Patrick Parkinson, Jessica Bellavance, Ashley Janos, Caroline Racine, Cortney Levesque	DCYF Service Array Team, Bureau of Community, Family and Program Support	Collaborator, Provided information, Reviewed drafts
Darryl Tenney, Paulette Rowell, Kathleen Talbot, Meaghan Sheehan	DHHS Division of Behavioral Health's Bureau of Children's Behavioral Health	Collaborator, Provided information, Reviewed drafts
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Various Foster, Adoptive and Kin caregivers*	Licensed Families	Collaborator, Provided information through survey responses

Description of Stakeholder Involvement in Statewide Assessment Process:

The development of the Statewide Assessment (SWA) was a collaborative, agency-wide effort that engaged a broad spectrum of internal and external stakeholders. Leadership and coordination were led by the Bureau of Evaluation, Analytics and Reporting, with the CFSR Coordinator overseeing SWA development, evaluation coaching, data review, and analysis. A team of data analysts from the same bureau contributed analytical expertise to ensure accuracy and integrity of the findings. Additional internal partners from the Bureaus of Information Systems, Field Services, Community, Family and Program Support, Children's Behavioral Health, and Professional and Strategic Development provided essential information, reviewed drafts, and helped align the assessment with current operations and policy. Many program leaders—including Bureau Chiefs, Field Administrators, Program Specialists, and Supervisors—contributed ground-level insights and operational context to strengthen the assessment's relevance to practice.

Engagement extended beyond DCYF to include critical cross-system partners. The New Hampshire Judicial Branch played a significant role, with contributors providing data analysis, co-authoring sections,

reviewing drafts, and offering judicial perspectives on child welfare practice. The Cross-Systems Permanency Workgroup, CASA representatives, and other stakeholders including those with lived experience, enriched the assessment with practice-informed feedback. Licensed foster, adoptive, and kin caregivers also participated through survey responses, ensuring the voices of caregiving families were represented. Training partners, including the Child Welfare Education Partnership, supported analysis of workforce development data and provided additional context. This comprehensive, multi-disciplinary engagement ensured the SWA reflected diverse expertise, stakeholder experience, and a shared commitment to improving outcomes for children and families.

Section II: State Context Affecting Overall Performance

Part 1. Vision and Tenets

New Hampshire's child welfare system is guided by the Division for Children, Youth and Families (DCYF) Practice Model, which serves as the Division's overarching vision for how high-quality child welfare practice is carried out statewide. The Practice Model articulates shared beliefs and guiding principles focused on child safety, family well-being, permanency, partnership, transparency, and respectful engagement with families. It affirms that families have strengths, that children do best in safe and stable family settings, and that child welfare practice must be individualized, collaborative, and culturally responsive. The Practice Model, updated most recently in 2023, continues to anchor the Division's expectations for all staff, supervisors, administrators, and contracted partners.

DCYF functions as a division within the New Hampshire Department of Health and Human Services (DHHS). The Division is structured into seven bureaus that collectively carry out the full scope of child protection, family services, juvenile justice, placement services, quality assurance, data analytics, continuous quality improvement (CQI), training, legal and regulatory oversight, and information systems management. Through this integrated structure, DCYF administers Title IV-B, Title IV-E, and related federal programs and ensures alignment between policy, practice, workforce development, data use, and organizational learning.

DCYF's strategic priorities for 2025–2026 were developed through an inclusive planning process involving staff, youth and parent partners, foster parents, community stakeholders, courts, and state agency representatives. These priorities emphasize: (1) strengthening family engagement throughout the life of a case; (2) supporting the workforce as the foundation of effective child welfare; (3) promoting shared responsibility across systems; and (4) ensuring that children and families receive the right services at the right time. These priorities operate alongside the Practice Model to guide daily operations, drive improvement, and support systemic functioning across all statewide factors.

Part 2. Cross-System Challenges

New Hampshire continues to experience several cross-cutting challenges that affect the performance and functioning of the child welfare system. These challenges are multifaceted and reflect system-wide pressures, external conditions, and operational constraints.

Workforce Capacity and Stability

Workforce capacity remains one of the most significant challenges for the Division. In spring 2025, statewide budgetary restraints resulted in a hiring freeze that has directly affected the agency's ability to

sustain staffing levels needed for timely and effective service delivery. Although approval has been given to recruit and hire for direct care positions, including Child Protective Service Workers (CPSWs), Juvenile Probation and Parole Officers (JPPOs), Youth Counselors, and Supervisors, there is a delay in processing. As a result, positions in direct care continue to experience delays in backfilling.

Non-direct-care positions, which still play an essential role in program operations, training, quality assurance, data management, and caregiver support, are not approved to recruit and hire. This has contributed to gaps in administrative and programmatic support, which in turn places greater strain on frontline staff and supervisors. The combined effect of these conditions limits DCYF's capacity to meet required timelines, provide consistent coaching and supervision, sustain quality improvement efforts, and respond to the increasingly complex needs of children and families.

Foster Care and Kinship Caregiver Capacity

New Hampshire has implemented a centralized recruitment and retention plan for foster and kinship caregivers, including localized recruitment events, statewide conferences, and weekly drop-in information sessions for prospective caregivers. Despite these efforts, challenges persist in ensuring that the state has a sufficiently diverse pool of caregivers who reflect the racial and ethnic identities of the children entering care. Gaps remain particularly for Black children and youth, who are less likely to be matched with foster caregivers of the same race or ethnicity. This mismatch affects children's cultural continuity and contributes to placement instability for youth requiring race- or culture-affirming caregiving environments.

Although the recruitment framework is in place, demand continues to outpace available caregivers—especially for older youth, youth with significant behavioral or medical needs, and sibling groups. These shortages affect placement stability, timely permanency, and efforts to reduce reliance on congregate care settings.

Court System Coordination

Practice-related challenges continue to surface within the court process, including variability in the timeliness of hearings, inconsistent coordination across jurisdictions, and barriers related to TPR processes and concurrent planning. However, these issues are actively addressed through the state's Model Court and Court Improvement Project (CIP) teams. These collaborative structures routinely analyze system-level barriers, implement targeted interventions, and support consistency in judicial and child welfare practice. The presence of these ongoing forums reflects strong cross-agency communication and a shared commitment to improving outcomes for children and families.

Statewide Information System

New Hampshire's statewide information system, Bridges, continues to meet core federal system requirements. Although the system captures required information related to child status, demographics, placement, and case planning, there are ongoing concerns regarding the timeliness of data entry across some offices. These delays can affect real-time visibility into casework activities; however, they do not constitute reliability issues with the data itself. The quality and accuracy of data within Bridges remain sufficient to support the state's Continuous Quality Improvement (CQI) processes and federal reporting expectations. The upcoming transition to the Comprehensive Child Welfare Information System

(CCWIS), Granite Families, is expected to further strengthen data quality through enhanced automation, streamlined workflows, and reduced duplicative data entry.

Part 3. Current Initiatives (Condensed and Integrated)

New Hampshire continues to advance a comprehensive set of initiatives aligned with the Division's 2025–2026 Strategic Priorities. These efforts build upon foundational work launched under the 2022–2024 priorities—work that strengthened the service array, expanded evidence-informed practice tools, modernized data infrastructure, enhanced cross-system partnerships, and initiated transformation of the juvenile justice treatment system. The current priorities deepen this earlier progress by shifting from initial development to full integration, sustainability, and consistency of practice statewide. Together, these initiatives underscore DCYF's commitment to a trauma-informed, family-centered, data-driven child welfare system that meets the evolving needs of children, youth, and families.

Strengthening Family Engagement and Centering Lived Experience

DCYF is implementing an expanded family engagement model that ensures families are active partners in assessment, planning, and permanency decisions. The model emphasizes transparent communication and early identification of strengths and needs to reduce unnecessary system involvement and keep children safely with their families whenever possible. Lived experience voices—parents, youth, and caregivers—are increasingly integrated into practice improvements, supporting stronger kinship, fictive kin, and foster caregiver partnerships and contributing to improved family-based placements and permanency outcomes.

Investing in Workforce Capacity, Coaching, and Support

Recognizing the workforce as the foundation of effective child welfare, DCYF continues to invest in staff training, supervision, and coaching to strengthen trauma-informed and consistent practice. Key efforts include reinforcing the DCYF Practice Model in day-to-day work, expanding initial and ongoing training, strengthening supervisory capacity, and applying safety science principles. Additional initiatives support redesigned roles within the juvenile justice facility, enhanced preparation for transition to a new therapeutic facility, and ongoing workforce supports amid statewide hiring constraints.

Driving Shared Responsibility and Systemwide Collaboration

DCYF is continuing to expand collaboration across the child welfare, behavioral health, education, judicial, and community systems. Joint initiatives include coordinated case planning, expanded use of clinical assessments, strengthened diversion pathways, and targeted strategies to support step-down from residential treatment. These collaborations deepen shared responsibility for family well-being and strengthen coordinated responses to the needs of children and youth.

Expanding Access to the Right Services at the Right Time

To improve timely access to effective supports, DCYF is enhancing its service array through improved service-matching processes, expansion of evidence-based in-home programs, and cultivation of provider capacity. Priority work includes development of therapeutic foster care, increased specialized foster

homes for older youth and youth with complex needs, expanded foster care health supports, and improved oversight of psychotropic medication. These initiatives advance the state's goals of supporting children safely at home and reducing reliance on residential treatment.

Modernizing DCYF's Data and Case Management Infrastructure

DCYF is developing Granite Families, the state's new Comprehensive Child Welfare Information System (CCWIS), to replace the Intake, Assessment, and Case modules in the current system. The new platform will reduce duplicate data entry, improve automation and workflow efficiency, and enhance usability for staff. Once implemented, Granite Families will strengthen data accuracy, timeliness, and integration, supporting improved casework, supervision, and leadership decision-making.

Transforming the Juvenile Justice Secure Facility and Establishing a Model Treatment Environment

DCYF continues its transformation of the juvenile justice secure facility into a trauma-informed therapeutic treatment setting. This includes implementing evidence-based programming, establishing a trauma-responsive milieu, and redesigning clinical and classification processes. Planning and design work is underway for the new 12-18-bed treatment facility scheduled to open in 2027, with enhanced staff training, strengthened permanency planning, and increased family and community engagement supporting successful youth transitions.

Commitment to Measurable Outcomes and System Accountability

DCYF's system improvement efforts are guided by clear, measurable performance goals. These include increasing the percentage of children served safely in their homes, expanding family-based placements, reducing residential treatment rates, increasing the availability of foster homes for older youth, decreasing staff vacancies, and improving permanency outcomes. Continuous quality improvement processes support regular monitoring and adjustments to sustain progress.

Section III: Assessment of Child and Family Outcomes

Safety Outcomes 1 and 2: Area Needing Improvement

Safety Outcome 1 assesses how effectively the State prevents maltreatment of children and protects them from future harm. It focuses on preventing recurrence of maltreatment after a substantiated finding and ensuring children in foster care remain safe within their placements. This outcome reflects response timeliness and the quality of safety practice, including investigation, assessment, oversight, and follow-through.

Safety Outcome 2 evaluates the State's effectiveness in preventing unnecessary removals, safely stabilizing children in their homes, and managing safety threats through timely, appropriate, and individualized in-home services. It examines whether services are provided to prevent removal or re-entry and whether risk and safety concerns are consistently assessed and managed throughout a case. The evaluation of both outcomes draws from aligned data sources: AFCARS and NCANDS indicators for FFY 2021–2023; OSRI case reviews for SFY 2024–2025; and statewide safety trend data from the Results

Oriented Management (ROM) system for FFY 2025. Additional context was informed by CFSR Round 3 findings.

Results Oriented Management (ROM) is a federally aligned data reporting and analytics platform developed with Kansas University to transform administrative data into standardized federal indicators, trend dashboards, and automated performance reports. ROM provides validated data related to safety, permanency, well-being, caseloads, and other core metrics.

These data sources collectively offer historical, current, and qualitative insight into child safety across in-home and out-of-home settings. New Hampshire's Division for Children, Youth and Families (DCYF) demonstrates a strong, data-driven commitment to child safety, integrating structured assessments, supervisory coaching, evidence-based services, and continuous quality improvement.

Although the statewide Data Profile (February 2026) reflects performance for FFY 2021–2023, these indicators show strong foundational practice. The FY23–24 maltreatment-in-care rate was 1.78 victimizations per 100,000 days in care (7 victimizations across 393,813 days). Recurrence of maltreatment affected 25 of 917 children with a substantiated finding in the prior year (2.7 percent). *Data Source: NH Child and Family Services Review CFSR 4 Data Profile. AFCARS and NCANDS submissions as of 1-10-26)*

ROM data show that strong performance continued into FFY 2025. Rolling 12-month recurrence rates ranged between 3.1 and 4.7 percent, stabilizing at 3 percent (34 of 1,147 children) by September 2025. Maltreatment-in-care rates ranged from 3.06 to 4.34 per 100,000 days in care, including 3.06 based on 12 reports and 391,774 care days in November 2024 and 4.09 with 15 reports and 366,803 care days by September 2025. *(Data Source: Results Oriented Management. Federal Maltreatment in Care; Recurrence of Maltreatment)*

OSRI findings for SFY 2024–2025 provide further insight into practice quality. Safety Outcome 1 was rated a Strength in 23/35 (66%) percent of applicable cases. Opportunities for improvement included timely interviews, consistent assessment of all children in the home, and documentation that clearly verifies safety actions. DCYF's use of the New Hampshire Integrated Assessment (NHIA) and SDM tools supports consistency in evaluating immediate safety and long-term risk. *(Data Source: NH CQI Data, OMS)*

Safety Outcome 2 showed similar strengths with some variability. Of 77 applicable cases, 44, (57%) percent were rated Strengths. Improvement areas included delays in service initiation following reunification, inconsistent engagement with fathers or siblings, missed follow-through on safety-related appointments, and provider capacity limitations. Documentation gaps in some cases made it difficult to verify safety monitoring.

OSRI reviews found strong safety monitoring for children in foster care, with consistent worker contact, use of structured assessment tools, and responsive action to emerging concerns, aligning with low maltreatment-in-care rates reported through AFCARS and ROM.

CFSR Round 3 (2018) provides essential context. New Hampshire was not in substantial conformity with either Safety Outcome. Safety Outcome 1 was achieved in 52 percent of reviewed cases, with delays in initiating investigations, inconsistent face-to-face contact, and documentation gaps. Contributing factors included high caseloads, uneven regional practices, and limited structured supervisory oversight. Safety Outcome 2 was achieved in 46 percent of cases (65 percent foster care; 16 percent in-home). Reviewers

found inconsistent provision of in-home safety services, limited monitoring of safety plans, insufficient engagement with fathers or all caregivers, and low ratings for services to prevent removal or re-entry (41 percent) and risk and safety management (48 percent). Round 3 also identified system challenges: high staff turnover, reduced service array, gaps in documentation, inconsistent use of SDM tools, and delays in service coordination.

Across federal indicators (FFY 21–23), ROM data (FFY 25), and qualitative OSRI findings (SFY 24–25), DCYF demonstrates strong and sustained child-safety performance. The agency responds promptly to high-risk concerns, uses robust assessment models, and invests in evidence-based services to prevent unnecessary removals and support safe reunification. Opportunities for continued improvement include documentation consistency, service timeliness, provider availability, and inclusive engagement of fathers and siblings. This item remains an area needing improvement

Permanency Outcomes 1 and 2: Area Needing Improvement

Permanency Outcome 1 measures how effectively the State ensures that children experience stable living arrangements and achieve timely, appropriate permanency outcomes. This outcome evaluates placement stability, the timeliness and appropriateness of permanency goal establishment, and the agency's efforts to achieve reunification, adoption, guardianship, or another planned permanent living arrangement in alignment with federal requirements and the individual needs of each child.

Permanency Outcome 2 measures the extent to which the State preserves and supports children's familial, relational, and cultural connections while they are in care. This outcome evaluates sibling placement, visitation with parents and siblings, preservation of family and community connections, relative identification and engagement, and efforts to support parent–child relationships beyond visitation. Together, these items assess whether the agency promotes relational permanence in addition to legal permanency.

The evaluation of Permanency Outcomes 1 and 2 relied on multiple aligned sources of qualitative and quantitative information for State Fiscal Years 2024–2025. Together, these data sources provided a comprehensive understanding of how effectively the State promotes timely permanency and preserves children's essential family, relational, and cultural connections.

For Permanency Outcome 1, the assessment incorporated OSRI case review findings for Items 4–6, statewide permanency data, qualitative feedback from case reviewers, and synthesized results from the OMS Permanency Practice Report. These sources highlighted placement stability patterns, the quality and timeliness of permanency goal establishment, and the agency's efforts to achieve reunification, adoption, guardianship, or other permanent living arrangements. Lessons from CFSR Round 3 were also integrated to help identify progress on persistent systemic challenges.

For Permanency Outcome 2, the evaluation drew from OSRI findings for Items 7–11, which examine sibling placement, visitation with parents and siblings, preservation of family and community ties, relative identification and engagement, and agency efforts to support parent–child relationships beyond visitation. Reviewers also assessed how interconnected relational factors influenced outcomes, such as how sibling placements supported visitation or how family finding shaped parent engagement.

Together, the aligned methodology for Permanency 1 and Permanency 2 allowed evaluators to examine both legal permanency and relational permanency, offering a full picture of the State's strengths, challenges, and systemic conditions affecting children's long-term stability and connections.

Permanency Outcome 1 reflects a system with demonstrated strengths in stable cases but persistent challenges that hinder timely achievement of permanency for many children. Across the review period, DCYF showed a strong commitment to permanency planning and stable placements, particularly when caregivers had the capacity and supports needed to meet children's needs. In such cases, children benefited from consistent environments and progressed toward reunification, adoption, or guardianship in alignment with established timelines.

NH's Federal Data Profile (February 2026) reflects performance for FFY 2021–2023, these indicators show strong foundational practice. The FY23–24 permanency in 12 months (entries) rate was 43.3%. above the national performance average of 35.2%. Permanency in 12 months (12-23 months) showed similar strengths with NH's performance at 47.4%, relatively similar, but still above the national performance average of 43.8%. Finally, permanency in 12 months (24+ months), shows strengths in that NH is performing above the national performance average (37.3%) at 45.3%. (Data Source: NH Child and Family Services Review CFSR 4 Data Profile. AFCARS and NCANDS submissions as of 1-10-26)

ROM data show that strong performance continued into FFY 2025. Permanency in 12 months (entries) rate was 43.1%. above the national performance average of 35.2%. Permanency in 12 months (12-23 months) showed similar strengths with NH's performance at 45.3%, relatively similar, but still above the national performance average of 43.8%. Finally, permanency in 12 months (24+ months), shows a slight decline in performance. NH is performing below the national performance average (37.3%) at 33.6.3%.. (Data Source: Results Oriented Management. Federal Permanency in 12 months (entries); Federal Permanency in 24 months (12-23 months) and Federal Permanency in 12 months (24+months.)

NH's Federal Data Profile (February 2026) reflects performance for FFY 2021–2023, these indicators show areas needing improvement. The FY23–24 Reentry to Foster Care shows NH is performing above the national performance average, where NH aims to perform at a lower rate of reentry than the national performance. NH's reentry rate is 11.2%, where the national performance average is 5.6%. Placement stability rates are at 6.51, above the national performance average of 4.48, where NH aims to perform at a lower rate than the national performance average. This is calculated by children who entered care in a 12-month period, the number of placement moves per 1,000 days in foster care. (Data Source: NH Child and Family Services Review CFSR 4 Data Profile. AFCARS and NCANDS submissions as of 1-10-26)

OSRI findings for SFY 2024–2025 provide further insight into practice quality. Permanency Outcome 1 was rated strengths in 11/52 (21%) percent of applicable cases, indicating an area needing improvement. Permanency Outcome 2 was rated a strength in 35/52 cases (67%) indicating an area still requiring improvement, yet rated slightly stronger than outcome 1.(Data Source: NH CQI Review, OMS)

Qualitatively, youth with significant behavioral health or developmental needs faced far greater placement instability. Systemic shortages of treatment foster homes, therapeutic placements, and timely behavioral health services led to frequent placement disruptions or temporary emergency placements that did not support long-term permanency goals. Youth awaiting specialized levels of care were particularly affected, resulting in prolonged stays in care and delays in achieving permanency.

Permanency goal setting showed similar patterns of both strength and inconsistency. Many cases demonstrated timely, developmentally appropriate, and safety-informed goal establishment. Concurrent planning practices were present in a number of cases, and reviewers noted strong alignment between children's needs and goals such as reunification or adoption. However, delays in goal establishment occurred for some youth, and concurrent planning was not always implemented consistently. In some situations, permanency goals did not fully reflect children's preferences or cultural needs. Delayed filing of termination of parental rights petitions also contributed to slower progress, even when ASFA timelines had technically been met.

Efforts to achieve permanency reflected these mixed patterns. In strong cases, collaboration among DCYF, caregivers, providers, and the courts resulted in timely reunification or adoption. Early identification of pre-adoptive families and effective support of foster parents played a significant role in these successes. Nonetheless, systemic issues—such as delays in service provision, inconsistent parental engagement strategies, limited movement on concurrent goals, and court continuances—frequently slowed progress. Youth with complex clinical needs were disproportionately affected, as service delays and placement disruptions directly delayed permanency.

At a broader systemic level, strengths included improved kinship engagement, increased use of family-centered supports, and more effective collaboration with some treatment providers. However, barriers such as court delays, service access challenges, limited therapeutic placement capacity, and documentation gaps impeded progress and affected the consistency of permanency efforts.

Permanency Outcome 2 highlights the State's commitment to relational permanence, demonstrating strong performance in preserving children's essential family, sibling, and community connections throughout their time in care. Across relational domains, reviewers noted consistent efforts by caseworkers to maintain meaningful bonds even when placement changes or service needs created complications.

Sibling placement emerged as a strength in cases where children could remain safely together. Workers conducted early assessments to explore sibling placement options, and separations were typically related to clinical or therapeutic needs rather than gaps in agency effort. The most significant barrier to keeping siblings together was limited placement capacity, especially for large sibling groups or youth with intensive needs.

Visitation with parents and siblings was another notable strength. Many cases reflected frequent, meaningful visitation supported by creative scheduling, transportation assistance, and the use of contracted supervisors. Parent–child visitation was often well aligned with permanency goals and demonstrated thoughtful engagement by caseworkers. When delays occurred, they were generally tied to logistical challenges, difficulty engaging out-of-state or incarcerated parents, or incomplete documentation.

The preservation of broader family, community, and cultural connections was among the strongest areas of performance. Children generally maintained contact with extended family, fictive kin, peers, mentors, and school communities. Reviewers highlighted consistent school stability and attention to connections even in treatment or residential settings. Opportunities for improvement included strengthening paternal engagement and ensuring extended family relationships were fully documented so reviewers could confirm the continuity of those connections.

Relative identification and engagement demonstrated strong early efforts, with timely family finding and outreach to potential kin. However, some cases lacked consistent follow-up after initial contact or reassessment when circumstances changed, limiting opportunities for kinship connections and placements.

Beyond visitation, workers often encouraged parents to participate in medical appointments, educational meetings, and therapeutic activities, supporting broader parent–child relationships. Co-parenting approaches were evident in cases where workers helped parents remain connected to everyday aspects of their children's lives. Still, variability existed. Parents facing barriers such as substance use treatment needs, housing instability, or transportation challenges were not consistently engaged, and alternative communication methods were not always fully utilized.

Overall, Permanency Outcome 1 illustrates a system in which strong practice is evident in cases with stable placements and adequate service access, but longstanding systemic challenges—particularly related to behavioral health services and placement availability—continue to create delays and inconsistencies in achieving timely permanency for all children. Overall, Permanency Outcome 2 reflects strong foundational practice grounded in the importance of preserving relationships. While some variability remains, many children in care experience meaningful continuity of family, sibling, and community ties, demonstrating the State's consistent commitment to relational permanence. Permanency overall is rated an area needing improvement.

Well-being Outcomes 1-3: Area Needing Improvement

Well-Being Outcome 1 measures how effectively the State supports families in gaining the capacity to meet the needs of their children. This outcome evaluates whether the agency assesses and addresses the needs of children, parents, and foster/kin caregivers, and whether the agency meaningfully engages families in case planning and ensures quality and frequency of caseworker visits with children and parents. The outcome encompasses Items 12A–12C and Items 13–15, reflecting the full spectrum of assessment, service provision, family engagement, and casework contact that together form the foundation of child and family well-being.

Well-Being Outcome 2 measures the extent to which the State ensures that children's educational needs are assessed, supported, and met throughout their involvement with the child welfare system. This outcome evaluates whether the agency gathers timely educational information, maintains school stability, oversees special education services, and advocates for appropriate assessments and accommodations when needed.

Well-Being Outcome 3 measures how effectively the State ensures that children's physical, mental, and behavioral health needs are identified, assessed, and met throughout their involvement with the child welfare system. This outcome evaluates whether children receive timely medical and dental care, necessary follow-up with specialists, consistent medication oversight, and access to appropriate mental and behavioral health services, including therapy, evaluations, crisis supports, and psychiatric care.

The evaluation of Well-Being Outcomes 1–3 drew from OSRI case review findings for SFY 2024–2025 across Items 12A–12C and 13–18, supported by statewide narrative analysis describing family engagement, service delivery, educational planning, and health-related practices. Collectively, the

assessment examined case plans; documentation of service delivery; assessment processes; caseworker visits with children and parents; and agency strategies for engaging families and caregivers, while also evaluating educational supports such as school communication, planning practices, and documentation influenced by factors like school variability, transportation barriers, and placement changes. In addition, reviewers assessed medical and behavioral health service delivery through case-level ratings, qualitative descriptions of agency practice, and system-level factors affecting physical and mental health outcomes, including referral processes, service delays, coordination challenges, and continuity of care across placements.

Well-being outcome 1 was rated an area needing improvement with 22/77 (29%) cases rated a strength. Well-being outcome 2 was rated a strengths in 56/69 (81%) cases. Well-being outcome 3 was rated a strength in 37/74 (50%) cases. *(Data Source: NH CQI, OMS)*

Analysis reflects a system with clear strengths in assessing and meeting children's needs, though inconsistency remains in engagement with parents and caregivers. Item 12A, assessing children's needs and services, showed the strongest performance in this domain. Many cases demonstrated thorough use of formal assessments such as Child and Adolescent Needs and Strengths (CANS), Comprehensive Assessment of Treatment (CAT), and developmental evaluations, supported by ongoing communication with caregivers, clinicians, and school personnel. When assessments were robust, services were well-matched, responsive to changing needs, and contributed to stabilizing placements, improving functioning, or advancing permanency. However, cases needing improvement revealed inconsistent reassessment after major events such as placement disruptions, delayed service initiation, and documentation gaps that obscured whether services had been offered or followed through.

Item 12B, related to assessing and addressing parents' needs, presented the greatest challenges within the well-being domain. Engagement with parents—particularly fathers, noncustodial parents, or parents experiencing substance use, mental health needs, or housing instability—was inconsistent. Strong cases showed clear assessment and meaningful service matching, including referrals for substance use treatment, mental health services, domestic violence supports, parenting education, transportation assistance, and supervised visitation. In contrast, ANI ratings frequently stemmed from insufficient follow-up, lack of reassessment as circumstances changed, or gaps in documentation that made it unclear whether needs were identified or addressed. Parents facing significant barriers, such as homelessness or incarceration, were most likely to experience fragmented or delayed assessment and services.

Item 12C, assessing foster, kin, and relative caregivers' needs, showed mixed performance. Strong cases highlighted effective communication, timely referrals for supports, and provision of services such as respite, daycare, transportation, and in-home behavioral supports. Workers often helped caregivers with safety planning, trauma-informed caregiving strategies, and navigating children's clinical needs. Cases requiring improvement involved insufficiently detailed or absent assessments, delayed referrals, and missed opportunities to stabilize placements. In some situations, caregivers lacked essential information about children's trauma histories or behavioral needs, contributing to preventable placement disruptions.

Items 13–15, which collectively measure case planning and the quality of engagement through caseworker visits, showed more significant variability. Item 14, caseworker visits with children, was the strongest performer in this group. Workers frequently met with children monthly or more often, often demonstrating strong rapport, discussing safety, permanency progress, mental health, education, and

sibling relationships. High-quality visits were especially noted during periods of transition or behavioral escalation.

By contrast, Items 13 and 15—case planning engagement and caseworker visits with parents—revealed substantial room for improvement. Case plans were often outdated or missing, and families were not consistently involved in developing, reviewing, or updating plans. Parents, particularly noncustodial or incarcerated parents, were not regularly engaged in case planning or caseworker visits. Reviewers noted that conversations occurring informally with parents or children were often not documented, making it impossible to verify engagement. Children capable of participating in planning were sometimes uninformed or unaware of their permanency goals. Systemic factors contributing to these ANI ratings included caseworker turnover, inconsistency in practice, variable documentation, and limited use of strategies to engage hard-to-reach parents.

When Items 12A–12C and 13–15 are considered together, a clear cross-item pattern emerges: strong assessment and service provision practices for children and caregivers are often undermined by inconsistent engagement and documentation practices with parents. Documentation gaps across all items significantly contributed to ANI ratings, as reviewers frequently lacked evidence that assessments, services, or planning efforts occurred. At the same time, strengths identified across multiple items—particularly in assessment of children's needs and worker–child engagement—demonstrate the agency's capacity for strong, child-centered practice.

Analysis shows that DCYF demonstrated strong overall performance in meeting children's educational needs during the review period. The majority of cases were rated as Strengths, reflecting consistent and effective practice in gathering educational records, maintaining regular communication with schools, and monitoring the implementation of Individualized Education Programs and 504 plans. Workers frequently attended educational meetings, coordinated evaluations, and collaborated with school teams to ensure that accommodations were provided. Educational stability was well supported, with workers facilitating transportation arrangements and holding Best Interest Determination meetings when placement changes occurred. Older youth benefited from support with independent-living skills, post-secondary planning, and vocational preparation.

Cases rated as needing improvement reflected different challenges. In these cases, educational needs were not consistently assessed or updated, documentation was insufficient to verify agency involvement, or follow-through on educational recommendations was delayed. Some children experienced delays in special education evaluations or Early Supports and Services referrals. In other cases, truancy was not adequately addressed, or educational records were missing during key points in the case. Systemic issues—such as differing school district policies, parental refusal to sign releases or participate in meetings, and frequent placement moves across school boundaries—contributed to these challenges.

Performance related to children's physical health showed a mix of strong practice and persistent challenges. Many cases demonstrated timely well-child visits, routine dental appointments, and consistent management of ongoing medical needs. Workers collaborated effectively with primary care providers, specialists, and caregivers—particularly for medically fragile children or those with chronic conditions requiring close monitoring. Foster parents, kin caregivers, and residential providers often played an active role in scheduling appointments, coordinating treatments, and maintaining medication regimens. Agency nursing staff provided important support by reviewing treatment plans and assisting workers with understanding complex medical recommendations.

Cases rated as needing improvement highlighted recurring issues. Overdue dental visits were the most common concern, along with delayed well-child exams, incomplete medical documentation, and insufficient follow-through on referrals for specialty care. In several cases, prescribed medications or as needed (PRN) treatments were not consistently monitored, or workers were unaware of medical needs identified by caregivers or providers. Placement instability contributed to lapses in continuity of care, as children often needed to restart services after moving. System-level factors—including shortages of Medicaid-accepting dentists, long waits for developmental or specialty evaluations, and insurance authorization barriers for out-of-state services—also hindered timely care.

Mental and behavioral health needs during the review period were complex and varied significantly across cases. Cases rated as Strength demonstrated thorough assessment practices through tools such as CANS, trauma screeners, psychological evaluations, and clinical assessments. Many children received appropriate therapeutic services, including individual and family therapy, in-home behavioral supports, group counseling, and specialized treatment within residential programs. Workers routinely participated in treatment planning, coordinated with clinicians, and collaborated with agency nursing staff on psychotropic medication oversight. Youth in crisis typically received timely intervention, with appropriate use of hospital evaluations, safety planning, and crisis stabilization.

Cases needing improvement reflected delays and inconsistencies in service delivery. In several situations, children waited long periods for mental health or substance use treatment due to provider waitlists, provider shortages, or challenges associated with placement changes requiring new referrals. Some children with documented trauma histories or behavioral concerns experienced extended gaps without therapy or formal evaluations. Recommendations for specialized treatment—such as trauma-specific interventions, developmental assessments, or LADC services—were not always pursued or adequately documented. Medication oversight was inconsistent in some cases, with limited documentation of conversations about side effects, treatment effectiveness, or changes in psychiatric needs.

System-level barriers played a significant role in these challenges. Provider shortages, particularly trauma-trained clinicians and Medicaid-accepting therapists, contributed to treatment delays. Catchment-area restrictions required re-referrals after placement changes, extending wait times and disrupting the continuity of care. Aftercare planning following residential treatment was not always timely or well coordinated, resulting in gaps during transitions back to family-based settings.

Overall, Well-Being Outcome 1 reflects a system with strong foundational values around assessing and addressing needs but one that continues to face challenges in consistent parent engagement, documentation quality, timely reassessment, and service follow-through. Overall, Well-Being Outcome 2 reflects strong, consistent statewide efforts to support children's educational progress, with targeted opportunities to strengthen documentation, reduce evaluation delays, and improve follow-through during placement transitions. Well-Being Outcome 3 reflects meaningful strengths in both physical and mental health service delivery, especially when services were already in place or when caregivers and providers collaborated effectively. Workers demonstrated strong engagement with providers and maintained consistent oversight in many cases. However, delays in service initiation, provider shortages, documentation inconsistencies, and challenges created by placement transitions contributed to variability in outcomes. Well-being overall is rated an area needing improvement.

Section IV: Assessment of Systemic Factors

Item 19 Statewide Information Systems: Area Needing Improvement

Item 19 evaluates the extent to which the statewide information system allows the state to readily identify, for each child in foster care:

- Status information
- Demographic characteristics
- Placement location
- Permanency goals

This item was evaluated through review of SACWIS data, NH's data quality plan and operational data quality checks, stakeholder engagement, review of CFSR Round 3 findings, exploration of if CFSR findings remain consistent.

Placement Types was measured by children and youth in the following placement types: Shelter Care Family Foster Home, Licensed Home, Therapeutic Foster Family, Relative Foster Family, Kin Foster Family Home, Group Home, Medical or Rehabilitative Facility, Residential, Child Care Institution-Shelter Care, Independent Living, Psychiatric Hospital, Runaway Status/Whereabouts Unknown, Juvenile Justice Facility (secure detention or committed). Children and youth over the age of 17 were excluded from this data.

Demographic Information was measured through review of AFCARS identification for children aged 17 and younger with a diagnosed physical of mental health condition.

Placement location is identified by the number of children aged 17 and younger in out of home, episodes of residential treatment (i.e. group home, residential) within New Hampshire, within New England and Outside New England. It also identifies the number of children placed in community based- (i.e. foster, kin and relative) placements.

Permanency goals are measured by the number of documented, missing or expired permanency goals in the SACWIS system for all children and youth in out of home placement aged 17 and younger.

Also, this was measured through collaboration with the DCYF AFCARS Administrator to ensure alignment in reporting elements.

Overview of the Statewide Information System

New Hampshire operates Bridges, the Statewide Automated Child Welfare Information System (SACWIS) and official system of record. Bridges captures and stores all required child welfare information, and is used statewide by caseworkers, supervisors, and administrative staff to support case management, workload monitoring, planning, budgeting, and resource management.

NH is implementing a new CCWIS system, Granite Families, through an incremental modernization approach designed to improve alignment with practice and introduce updated functionality across intake, assessment, and case modules.

State's Ability to Identify Required Data Elements

1. Status

Bridges reliably tracks each child's placement status, including whether the child is currently in foster care, has exited placement, or is served at home. The system also records placement start and end dates, allowing the state to identify the current status of all children in placement during SFYs 2024 and 2025.

In SFY 2024 there were 1701 children and youth in placement aged 17 and younger, and in SFY 2025 1550 children and youth in placement aged 17 and younger and served by either DCYF child protective services or juvenile justice services at any point during SFY 2024 and SFY 2025. *Data Source: NH SACWIS/Bridges*.

2. Demographic Characteristics

Bridges captures demographic characteristics including, but not limited to, race, ethnicity, age, sex, and detailed medical/disability characteristics. Demographic reports are available statewide for CPS and JJS populations, including age distributions of children in placement and counts of physical/medical conditions documented in SACWIS.

In SFY 2024, 306 (18%) children or youth, and in SFY 2025, 264 (17%) children or youth had a documented diagnosed condition as defined by AFCARS. *Data Source: NH SACWIS/Bridges*.

3. Placement Location

Bridges enables the state to readily identify the physical location of each child's placement, including the placement address, type of placement (e.g., foster care, kinship care, residential treatment), whether placements are in-state or out-of-state and where they are physically located. These data are available statewide and are updated by field staff. Data Reports are proactively run with this information to ensure easy access in the event a situation were to occur where Bridges was temporarily unavailable such as in the case of system upgrades.

In SFY 2024, 1271 (75%) children or youth, and in SFY 2025, 1149 (74%) children or youth were placed in either foster or kinship care. *Data Source: NH SACWIS/Bridges*.

In SFY 2024, 299 (17%) children or youth, and in SFY 2025, 285 (18%) children or youth were placed in an episode of residential treatment. *Data Source: NH SACWIS/Bridges*.

In SFY 2024, 131 (0.07%), and in SFY 2025, 116 (10%) of children or youth were placed in another type of placement. These include placements such as: secure detention or commitment, temporary staffed placements, hospital stays, or a youth runaway. *Data Source: NH SACWIS/Bridges.*

240 youth were placed in episodes of residential treatment on June 30, 2025. Of those, 84% children or youth were placed in residential treatment programs in NH; while 15% youth were placed within New England and only 1% children or youth were placed outside New England. Note: To maintain confidentiality, NH masks data when total counts of children is less than five. Therefore only the total number of youth in residential treatment on this day is reported in counts, while the breakdown is reported in percentages only. *Data Source: NH SACWIS/Bridges, Regional Placement Report, 6/30/2025*.

4. Permanency Goals

Bridges documents permanency goals such as reunification, adoption, legal guardianship, and APPLA, and the system can report goal distributions for all children in out-of-home care. The system also includes case plan goals for in-home cases, including "Maintain in Own Home." These goals are not permanency goals but are housed within the same SACWIS screens for documentation purposes.

Missing or expired permanency goals appear in some cases due to data entry timeliness challenges, not because of inappropriate goal selection. These instances are addressed through regular data quality monitoring.

In SFY 2024, 1355 (80%), and in SFY 2025, 1301 (84%) of children or youth had an state and federally approved permanency plan, while in SFY 2024, 346 (20%), and in SFY 2025, 249 (16%) of children or youth did not have an approved plan, or had a missing or expired plan. *Data Source: NH SACWIS/Bridges.*

Data accuracy, reliability, and quality assurance processes are key strengths of this systemic factor, supported by a comprehensive set of mechanisms designed to monitor and improve data integrity. The state conducts daily AFCARS validations with quarterly formal reviews, implements a cross-bureau Data Quality Plan, and uses Data Quality and Frequency Utilities to identify outliers across AFCARS, NYTD, and NCANDS reporting. Technical corrections are tracked through the AFCARS Improvement Plan, and continuous enhancements to Bridges strengthen alignment with Family First requirements, medical and behavioral health documentation, ICWA data elements, and extended foster care populations. These efforts are reinforced by DCYF policies requiring timely data entry and documentation, including 24-hour entry of placement changes and reunifications, prompt updates to permanency goals when circumstances change, and immediate documentation of new demographic information as it becomes known. Also, all field CPSWs and JPPOs who carry a caseload are required to complete the Basic Bridges training within their first six months of employment as part of Core Academy. This training provides CPSWs and JPPOs with the knowledge and skills for them to navigate the system and enter data accordingly.

There are also areas that require improvements. Stakeholders report that the main barrier is timely and accurate data entry into Bridges, particularly for permanency goals fields. Although the information may be documented in case plans or document imaging, it is not always entered into SACWIS fields used for reporting. This is an area where AFCARS conducts frequent quality assurance and improvement checks to ensure accuracy of data reporting. When data quality errors are identified, these are shared with Field Services Administration who takes the responsibility to ensure CPSW and JPPOs are correcting errors within a set period of time.

In the Round 3 CFSR, New Hampshire received an overall rating of Area Needing Improvement for Item 19 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and confirmed during interviews with stakeholders showed that although the state is operating a statewide information system that captures the status, demographic characteristics, location, and goals for the placement of every child in foster care, there is no oversight of the accuracy of data entered into the system. Some stakeholders said that staff can't rely on Bridges for accurate locations and that District Offices need to maintain systems outside of Bridges to know where children in placement are

located. Information in the statewide assessment and received from stakeholders also said that the entry of placement data was not timely.

NH has made meaningful progress compared to the findings from CFSR Round 3, particularly in the functionality and reliability of the statewide information system. The Bridges system, supported by ongoing modernization through Granite Families, continues to meet federal expectations for tracking status, demographics, placement locations, and permanency goals. The state has strengthened data validation practices, expanded quality assurance processes, and improved reporting alignment through collaboration with the AFCARS Administrator. These efforts represent clear advancements from Round 3, when concerns centered on the reliability of data and the need for stronger oversight.

However, some of the core challenges identified in CFSR Round 3 persist. Stakeholders still report issues with timely and accurate data entry, especially related to permanency goals and placement information. Although the system itself is capable and compliant, human-driven data entry delays contribute to gaps in accuracy and require district offices to maintain parallel tracking processes. While the state has implemented structured quality improvement activities—such as daily AFCARS validations, the Data Quality Plan, and required Bridges training—these measures have not fully resolved the data timeliness issues noted in Round 3. Overall, the state has strengthened its systemic infrastructure and monitoring, but the need for consistent, timely data entry remains the key area where challenges continue.

Although New Hampshire's information system (Bridges) is fully SACWIS-compliant and technically meets federal expectations to identify status, demographics, placement location, and permanency goals, the CFSR rating is based on whether the system functions reliably in practice. Stakeholders continue to report challenges with data accuracy, and continue to struggle with timely data entry. For this reason, this item is rated an area needing improvement.

Item 20 Case Planning: Area Needing Improvement

New Hampshire's case planning system has undergone extensive evolution over the past decade, yet the most recent review data show that many of the same structural and practice-level challenges identified during the Round 3 CFSR remain deeply rooted. The current assessment draws on statewide quantitative and qualitative information collected in FY 2024–2025 and demonstrates that while the state has invested heavily in policy updates, collaborative initiatives, and new oversight mechanisms, these changes have not consistently translated into reliable practice improvements for children and families.

Case planning in New Hampshire is supported by a standardized template containing all federally required elements, but the template alone does not guarantee that plans are jointly developed or meaningfully updated. Actual functioning depends on day-to-day practice, and review findings show that consistent engagement of parents, youth, and key partners remains limited across offices.

NH SACWIS data, for SFY 2024 and 2025 show a need for improvement in documenting the written case plan. In SFY 2024, 886/1731 (51%) cases, and in SFY 2025 1278/1577 (81%) of cases had a documented written case plan in the NH SACWIS system. *(Data Source, NH SACWIS/Bridges)*. In the most recent Item 13 reviews, only 22.97 percent of applicable cases were rated a Strength, with pervasive issues such as missing or outdated plans, incomplete six-month updates, and insufficient documentation appearing in

all regions and case types. *(Data Source: NH CQI Reviews, OMS)* These patterns indicate fundamental challenges in implementing co-development practices, maintaining regular case plan updates, and accurately recording case planning activities.

Despite these challenges, the system shows areas of strength, particularly in supervisory oversight and in structured engagement forums that support family voice. Multi-level case plan approvals, Roadmap to Reunification meetings, QRTP reviews, and treatment team meetings create opportunities to reinforce co-development and ensure that youth and parent perspectives are incorporated. In cases rated Strengths, reviewers consistently observed meaningful, ongoing communication with parents and youth, the use of developmentally appropriate explanations with children, and concrete efforts to remove barriers to participation. These positive examples demonstrate that high-quality case planning is achievable within the system when staffing capacity, supervision, and engagement structures support it.

Weaknesses, however, remain far more widespread. Variability across district offices continues to be a major barrier to systemic functioning. Key processes—such as early family engagement, follow-up with noncustodial parents, regular home visits, and consistent documentation—are implemented unevenly, often depending on local leadership, workforce experience, and available time. Workers frequently cited compressed court timelines, competing demands, limited opportunities to meet with families, and constraints within the Bridges case management system as barriers to completing timely and collaborative plans. In many cases, critical conversations about goals, services, progress, and permanency occurred but were not documented, resulting in automatic ANI ratings. These documentation gaps reinforce a longstanding disconnect between practice and the evidence available for review.

The system's progress since Round 3 reflects both genuine improvement efforts and the durable nature of certain practice challenges. Following the 2018 findings—which highlighted insufficient engagement of both parents, generic case plans, and a lack of authentic family voice—New Hampshire undertook substantial policy work. Case plan policies (1550 and 1551) were updated to align with evolving federal mandates, including requirements under the Preventing Sex Trafficking and Strengthening Families Act and the Family First Prevention Services Act. Cross-walks in 2012, 2018, and again in 2023–2025 ensured ongoing alignment with federal regulations. A major Case Plan Revision Workgroup in 2021 brought together field staff, administrators, youth, parents, and technical experts to redesign policies, forms, and procedures, producing new consolidated case plan tools and a young-adult specific plan. Revisions scheduled for 2026 incorporate statutory changes and reinforce the importance of individualized planning, family engagement, and consistent statewide expectations.

The state also undertook significant collaborative work with the Court Improvement Program to address missing-parent engagement, a key concern from Round 3. Policy 1173 established procedures for identifying, locating, and engaging all parents early in a case, and court protocols were created to oversee DCYF's efforts through affidavits and structured review. When a missing parent is located, courts and DCYF follow deliberate processes to ensure due process while accelerating involvement in case planning and visitation. These changes represent a meaningful system-level response to federal findings that father engagement was insufficient and that noncustodial parents were often overlooked.

Training improvements also emerged, with revised Core Academy content, field-based practice discussions, and ongoing reminders to reinforce expectations. However, staff consistently report that training gains erode once workers return to their offices, where heavy workloads and inconsistent local

practices shape the reality of case planning more than formal instruction. Case plans continue to use Solution-Based Casework terminology such as family and individual level objectives, despite the agency no longer practicing formal Solution Based Case work. Some case workers indicated they have never having received SBC training, and even those who have been trained often struggle to apply skills due to time constraints, documentation challenges, and competing priorities. As a result, the gap between policy and practice persists, not because of inadequate training design, but because staff lack the structural conditions needed to consistently implement what they have learned.`

Technology challenges within the case planning process appear to stem more from staff perceptions and workflow habits than from true system limitations. Bridges itself does not prevent timely or effective case plan completion, nor does the system require plans to be entered, printed, and re-entered. While some staff experience frustration with the usability of the platform, the primary issues arise when workers attempt to update case plans in the field using laptops that require Wi-Fi or mobile hotspot connectivity. In regions where cell service varies, these workers may encounter intermittent connection challenges while accessing Bridges remotely, which reinforces the belief that the system is difficult to use. However, apart from these occasional connectivity limitations, there are no substantive technological barriers preventing staff from completing case plans directly in Bridges. The gap appears to lie in practice patterns and misunderstandings about system requirements rather than in the technology itself.

New Hampshire received an overall rating of Area Needing Improvement for Item 20 based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, New Hampshire presented information from DCYF's Solution Based Casework Fidelity Reviews that showed parent engagement at 87 percent; however, these reviews do not require that both parents be engaged when both parents are available to the agency. Information from DCYF Quality Case Reviews, which are modeled after the CFSR case review, was also provided in the statewide assessment and showed that DCYF is engaging fathers in the case planning process in about 65 percent of the cases. Stakeholders confirmed the agency's challenges with engaging fathers and also said that although there are case plans, they were concerned that the plans were generic and that a true family voice was lacking when generating plans.

When current findings are compared with Round 3, striking similarities emerge. Engagement of both parents—especially fathers—remains limited, and case plans continue to lack individualized detail and clear family voice in many cases. The breadth of deficiencies observed in the current review cycle suggests that while New Hampshire implemented extensive policy and procedural improvements, these efforts have not translated into consistent practice statewide. Instead, the system continues to struggle with timely completion of plans, meaningful engagement of youth and families, accurate documentation, and consistent application of practice expectations across offices.

Overall, the evidence shows that although New Hampshire has made numerous policy, training, and collaborative improvements since Round 3, these changes have not yet produced the level of reliability and consistency required for the case planning system to function effectively statewide. Persistent barriers—including workforce capacity, variability across offices, documentation challenges, and practice-to-policy gaps—continue to limit progress. The system has improved, but the core issues

identified eight years ago remain largely unresolved, indicating this item remains an area needing improvement.

Item 21Periodic Reviews: Strength

Item 21 evaluates how well the case review system is functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every six months, either by a court or an administrative review.

During this reporting period, the Courts provide the sole administrative review for children in out of home care. This item was measured first, through review of AFCARS definitions to ensure the correct hearings were considered in the evaluation of this item. Next, all youth under the age of 18 who were in out of home care for at least six months during SFY 2024 and 2025 were identified as well as how many had an administrative review no less than once during each of those state fiscal years.

The Courts also evaluated this item from the same base population of youth in out of home placement for at least 6 months. The Courts used a template for calculating data provided by the Children's Bureau. The Courts and DCYF held at least monthly meetings to review and discuss data for this item to ensure consistency and alignment of data. Discussed some of the processes that may have impacted the performance in these measures.

SACWIS data for SFY 2024 and 2025 show high levels of compliance, with 95.6% and 94.1% of CPS youth and 94.9% and 98.8% of JJS youth receiving a qualifying court review within each six-month period, respectively. *Data Source: NH SACWIS/Bridges.*

Periodic reviews are occurring in all jurisdictions and for both child protection and juvenile justice involved youth. NH's Administrative Office of the Courts are responsible for ensuring uniform procedures and court forms are used in each of the Family Division locations overseeing child welfare cases. Child welfare cases are heard within the NH Circuit Court's Family Division. Family Divisions are currently located in all of NH's ten counties. Some counties, depending on its population (i.e. Hillsborough) or size (i.e. Coos) may operate between one and six court houses ensuring adequate coverage for the county. The same courts and Judges sit on the bench regardless of whether the case is a child protection or a juvenile justice matter. While court orders may vary, there has been considerable work done since Round 3 to create as much uniformity as statute allows among court orders.

A key strength of New Hampshire's periodic review system is the consistent and timely completion of periodic review hearings, which are conducted through the state's court-based periodic review hearing process.

Data indicates that the state has a reliable procedural structure that ensures children in out-of-home care receive legally required oversight at the expected frequency. The use of multiple qualifying hearing types—such as Dispositional, Review, Permanency, Post-Permanency, and TPR hearings—provides a comprehensive judicial mechanism to monitor the progress of each case. Compared to the timeliness concerns noted during the Round 3 CFSR, the current data demonstrates substantial improvement and reflects a functioning statewide process for meeting federal periodic review time requirements.

Despite strong performance in conducting frequent and high-quality periodic reviews overall, timely periodic reviews for cases where the permanency plan has changed from reunification to adoption needs further assessing for functionality. In those cases, DCYF is ordered to file TPR petitions to finalize the permanency plan of adoption through termination of parental rights or surrender. The court stays the A/N matter, cancels the previously scheduled post permanency hearing, and schedules the preliminary TPR hearing in the same time slot to occur within 60 days of the change in the permanency plan. The final TPR hearing is then scheduled to take place within 60 days of the preliminary TPR hearing. The court expects that the petitions will be filed immediately and served on the parent(s) so that the preliminary and final hearings are conducted within the intended timeframe. The court is mandated to issue a decision within 60 days of the final TPR hearing. The procedural framework is designed to resolve TPR petitions within 180 days of the approval of adoption as the primary permanency plan. As the TPR matter progresses, there are no periodic review hearings scheduled in the related A/N matter. TPR matters, however, may not proceed as expected due, for example, to delays in filing petitions, timely service, issuing hearing notices, need for continuances, and limited court availability. Resuming progress on the A/N matter may be delayed beyond 180 days. Meanwhile, there is no periodic review of the child's primary plan scheduled in the AN matter.

Another area in need of improvement is assessing the quality of reviews statewide. The SACWIS data measures only whether a review occurred—not whether the review was a meaningful discussion of safety, permanency, well being, case plan progress, or the adequacy of services. Concerns raised in the Round 3 CFSR—such as statewide inconsistencies in FAIR meeting timeliness, variability in the depth of case discussion, and inconsistent participation by key stakeholders—remain unassessed in the current data and the overall quality of reviews remains unknown. Additionally, because practices may still vary by region or court, the state would benefit from further examination of whether reviews consistently provide thorough, child centered oversight rather than functioning primarily as procedural checkpoints. Continued monitoring and quality assurance efforts are needed to ensure that the periodic review process not only occurs on time but also supports high quality decision making that advances safety, permanency, and well being.

New Hampshire received an overall rating of Area in Need of Improving. Information gathered from the statewide assessment and stakeholder interviews demonstrated that while New Hampshire had in place an administrative process for conducting periodic reviews of each child's status at least every six months that supplemented the court review, there were challenges to its implementation. DCYF utilized the Family Assessment Inclusive Reunification (F.A.I.R.) process as a collaborative, team-based approach for the review of case timelines, case status, the case plan, the child/youth's safety and wellbeing, and plans for permanency. The meetings were intended to bring together parents, children (as developmentally appropriate), foster/placement providers, DCYF caseworkers, and CASA/GALs to foster a connection between biological parents and foster families to achieve timely permanency. Concerns included delayed or inconsistent scheduling, wide variation across regions, uneven participation by key partners, and inconsistent discussion of case status, safety, case plans, well-being, and permanency. Stakeholders also noted that not all children and families received a comprehensive, meaningful review every six months, despite the procedural requirement being met.

These Round 3 findings highlighted that while New Hampshire was generally meeting the *timeliness* requirement, the *quality and consistency* of the periodic review process needed improvement. Compared to the timeliness concerns noted during the Round 3 CFSR, the current data demonstrates substantial

improvement and reflects a functioning statewide process for meeting federal periodic review time requirements.

Since 2018, responsibility for conducting periodic review hearings has shifted from DCYF to the courts. In Round 3, NH collaborated with the Region 1 Children's Bureau to ensure existing court orders contained the required elements for an Administrative Review. A judge's signature was indicative the Judge verified the elements contained within the courts orders were addressed during that hearing.

Current SACWIS data reflects that New Hampshire continues to meet the timeliness benchmark for conducting periodic reviews. With compliance levels consistently above 94%, the state demonstrates a strong and reliable process for ensuring that required periodic reviews occur as scheduled. This performance suggests improvement in the structural elements of periodic review scheduling since the Round 3 findings.

While the data confirms that reviews are occurring on time, SACWIS data alone cannot assess meaningful review of case plans, safety, well-being, permanency progress, and service adequacy, nor whether all required parties are consistently participating. These qualitative concerns were directly addressed by the agency in collaboration with the Court Improvement Project (CIP) and its interdisciplinary team and incorporated into policy and practice of agency attorneys and field staff over the past several years.

DCYF, the CIP, and other members of the Model Court reviewed and revised Chapter 10, Review Hearings, of the Protocols Relative to Abuse and Neglect Cases and Permanency Planning (Court Protocols), and consolidated it into a larger protocol binder to provide a clear, concise, and easily accessible framework for conducting timely periodic reviews. The Court Protocols were distributed to stakeholders, and training was offered with its rollout in December 2023. The CIP, in collaboration with the interdisciplinary team, also developed a standardized periodic review hearing court form that operates as a procedural and substantive checklist to ensure key elements are addressed in court. The form guides parties through key issues – such as status of missing parent, safety of the child, appropriateness of placement, DCYF's reasonable efforts to return the child home, extent of parent's progress on conditions that led to removal and finding, progress on the concurrent plan, and applicability of ICWA and/or ICPC. It ensures legally relevant information is presented consistently and comprehensively to help courts make factual findings and issue orders, as appropriate. The Court Protocols and standardized forms also ensure consistency statewide regardless of judge, location, or representation. Court staff manuals were also updated to incorporate the protocol framework into practice for scheduling the 3-, 6-, and 9-month periodic reviews as well as the post permanency hearing reviews. The extent to which these substantive improvements to the periodic review process consistently yields high-quality, comprehensive reviews statewide remains an area requiring continued monitoring.

In Round 3, New Hampshire received an overall rating of Area Needing Improvement for Item 21 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and collected during interviews with stakeholders showed that New Hampshire has a process for the periodic review of the status of each child at least every six months. However, stakeholders said that there were inconsistencies with the FAIR (Family Assessment Inclusive Reunification) meetings, including the timeliness of the reviews and the review of the status of the case, the case plan, the child or

youth's safety and well-being, and plans for permanency. Stakeholders also noted inconsistencies across the state in scheduling and in including key representatives in the reviews.

Based on available data, New Hampshire has a clearly defined, court-based process for conducting periodic reviews and demonstrates high performance in ensuring that children receive timely reviews, which reflects considerable improvement from concerns raised in the Round 3 CFSR. While the quantitative data show strong system functioning regarding timeliness, further qualitative assessment would be needed to determine whether the content and quality of periodic reviews consistently meet federal expectations across all regions and case types. This item is rated a strength.

Item 22 Permanency Hearings: Area Needing Improvement

Item 22 evaluates how well the case review system is functioning statewide to ensure that a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.

Researched both the federal and state statutes to confirm consistency. NH RSA 169-B and RSA 169- D statutes for PH align with federal statute; NH RSA 169-C PH does not align in its entirety in that it does not specifically state youth are required to have an annual permanency hearing. However, it does align under the Post Permanency Review Hearings which require an annual review subsequent to the annual permanency hearing requirement. The primary difference between these hearings is the review of the identified permanency goal. While the initial permanency hearing reviews the goal of reunification most typically, subsequent post permanency hearings focus on achievement of the current permanency goal, which was likely changed at the initial permanency hearing. With this in mind, data for child protective services was collected to include both permanency hearings and post permanency hearings. Data for juvenile justice was collected to include only the permanency hearing.

DCYF identified all youth who were in care (child protection and juvenile justice placements) on June 30, 2025 and had been in placement for at least 12 months, then reviewed whether each had a documented Permanency Hearing. For the base population of youth, we examined how many youth received their first Permanency Hearing within 12 months of entering foster care and whether subsequent hearings occurred every 12 months thereafter. We also calculated the number of youth who did not have a documented Permanency Hearing and the number of youths whose hearings occurred more than 12 months after entering foster care. Finally, we reviewed the specific timeframes of those late hearings. This analysis aligns with New Hampshire's requirement that Permanency Hearings occur within 12 months of the Adjudicatory Finding, which itself must occur within 60 days of removal.

In collaboration with DCYF and using the Children's Bureau Item 22 Tool, the courts narrowed its examination to the number of youths in child protection placements who had been in placement for at least 12 months during the 2 performance periods under review, July 1, 2023 to June 30, 2024 and July 1, 2024 to June 30, 2025. For that base population, the courts examined how many youths had a documented initial permanency hearing within 12 months of entering foster care, and whether there were subsequent permanency hearings within the following 12 months. Child protection related hearings that met the permanency hearing criteria and were included in the assessment were: early permanency hearings, initial 12-month permanency

hearings, subsequent permanency hearings, post permanency hearings, and 12-month post permanency hearings.

DCYF Data:

There were 532 youth under the age of 18, in care between child protection and juvenile justice on June 30, 2025, who had been in care for at least 12 months. *(Data Source: NH SACWIS/Bridges)*

18% (96/533) of youth had a Permanency Hearing within 12 or less months from their removal from home. 54/533 (10%) of youth did not have a documented Permanency Hearing. 383/533 youth who had a Permanency Hearing did not have one within 12 months or less from removal. However, of those 383 youth, 199 (52%) had a documented Permanency Hearing withing 13-14 months of their removal. In total, 295/479 (62%) of youth had an initial Permanency Hearing within 14 months of their removal from home. Given that this item is calculating from removal, not federal entry into placement, these numbers are considered timely. Of all youth that had a documented Permanency Hearing, 425/478 (89%) had either a subsequent qualifying Permanency Hearing, or Post Permanency Hearing within 12 months of the initial hearing. *(Data Source: NH SACWIS/Bridges)*

Court Data:

Assessing court data, the courts determined that during Performance Period 1 (July 1, 2023 to June 30, 2024), there were 334 youths in child protection placement who had been in foster care for at least 12 months and had an initial 12-month permanency hearing. Of the 334 youths, 16% of the youths (55/344) had an initial permanency hearing within 12 months of entering foster care; 52% of the youths (125/344) had an initial permanency hearing within 13 months of entering care; and 78% of the youths (212/334) had an initial permanency hearing within 15 months of entering care. During Performance Period 2 (July 1, 2024 to June 30, 2025), there were 319 youths in child protection placement who had been in foster care for at least 12 months who had an initial 12-month permanency hearing. Of the 319 youths, 20% of those youths (63/319) had an initial permanency hearing within 12 months of entering care; 58% of the youths (121/319 had an initial permanency hearing within 13 months of entering care; and 77% of the youths (183/319) had an initial permanency hearing within 12 months of entering care. *(Data Source: NH Judicial Branch)*

During Performance Period 1, there were 350 youths in child protection placement who had a subsequent permanency hearing after their initial 12-month permanency hearing. Of those 350 youths, 89% of those youths (311/350) had a subsequent permanency hearing within 12 months of the initial hearing. During Performance Period 2, there were 374 youths in child protection placement who had a subsequent permanency hearing after their initial 12-month permanency hearing. Of those 374 youths, 91% of those youths (339/374) had a subsequent permanency hearing within 12 months of the initial hearing. *(Data Source: NH Judicial Branch)*

A strength of New Hampshire's permanency hearing review is the consistent and timely completion of subsequent permanency hearings, which are conducted through the state's court based process. SFY 2024 and 2025 show high levels of compliance, with between 89% and 91% of youths receiving a qualifying subsequent permanency hearing review within the required 12 month period. This indicates that the state has a reliable procedural structure that ensures children in out of home care receive legally required oversight at the expected frequency. The use of multiple qualifying hearing types—Subsequent Permanency, Post-Permanency and 12-month Post Permanency —provides a comprehensive judicial

mechanism to monitor the ongoing efforts and progress to finalize the permanency plan in effect. Compared to the timeliness noted during Round 3 CFSR, the current data demonstrates an improvement and reflects a functioning statewide process for meeting federal subsequent permanency hearing time requirements.

Areas in need of improvement are timely completion of the initial 12-month permanency hearings. SFY 2024 and 2025 show low levels of compliance with between 16% and 20% of youths receiving a qualifying permanency hearing review within the required 12-month period. Although there was an increase from 16% of the youths to 20% of the youths having those initial permanency plan reviews, the results are significantly lower than expected. The examination, however, did demonstrate a significant increase in the number of youths having a permanency hearing review within the first 15 months of out of home placement with 62% of all youths (delinquency placements and child protection placements) have a qualifying initial permanency hearing within 14 months and 78% of the youths in child protection placement having a qualifying initial permanency hearing within 15 months of placement.

New Hampshire received an overall rating of Area Needing Improvement for Item 22 based on information from the statewide assessment and stakeholder interviews.

In the statewide assessment, New Hampshire provided data showing that 67% of permanency hearings were occurring within 13 to 15 months of children coming into care. Stakeholders were not able to provide additional insight on the percentage of initial permanency hearings held in accordance with the federally required time frame. New Hampshire did provide data and information in the statewide assessment showing that 87% of the children who remained in care longer than 24 months had a subsequent permanency hearing within 12 months of the first permanency hearing.

New Hampshire courts distinguish permanency hearings from periodic reviews, describing them in the court protocols as “fundamentally different for review hearings” with the objective “to move a child from the uncertainty of foster care to a permanent home as expeditiously as possible, consistent with the intent of the [ASFA] and [Child Protection Act]. In 2022, there were significant changes to the statutory framework for permanency hearings under RSA 169-C that resulted in revisions to the court protocols and additional opportunities for a court to consider the safety and wellbeing of the child, to review, modify or implement the permanency plan in effect or adopt the concurrent plan, and assess the reasonableness of DCYF’s efforts to help children and families achieve that primary plan. There was training for all stakeholders on the legislative changes, and DCYF incorporated the change in permanency law and practice into the policies and practices.

New Hampshire now considers several categories of hearings as permanency hearings, specifically: the initial 12 month; an early permanency hearing; the one-time 90-day extension at the initial permanency hearing; unique needs of child that prevent reunification; and subsequent permanency hearing. Moreover, while RSA 169 B (Delinquency) and RSA 169 D (Children in Need of Services) contain subsequent permanency hearing provisions that directly align with federal requirements, RSA 169 C (Abuse and Neglect) does not contain the same explicit subsequent permanency hearing timelines or required findings found in federal law or in 169 B and 169 D. Nonetheless, the post permanency review framework in RSA 169 C:24 c, along with the case law and Protocols that effectuate post permanency review, meet federal expectations for timely permanency hearings. It provides for ongoing judicial oversight to occur no less than every 12 months after the initial permanency hearing, regular assessment of the child’s safety, well being, and placement, review of the child’s plan progress, ability to modify plans as appropriate, and

evaluation of DCYF's reasonable efforts to finalize the permanency plan in effect. Because these recurring reviews ensure continuous monitoring of permanency progress—and address the same substantive elements that federal law requires—post permanency hearings align with federal requirements in practice. As a result, NH is able to demonstrate that post permanency hearings for children at least every 12 months after the initial hearing are functioning statewide.

However, there are legal constraints that prevent the courts from demonstrating compliance with the timeliness of the initial 12-month permanency hearing. The New Hampshire Supreme Court has had occasion to interpret the statutory permanency framework in termination of parental rights appeals. In doing so, the Court has held that the circuit court is required to assess a petitioned parent's conduct and the reasonableness of DCYF's efforts over a period of at least 12 months from the finding of abuse or neglect before determining whether the parent failed to correct the conditions of neglect or abuse. Consequently, as a matter of binding judicial interpretation, the circuit court cannot conduct a meaningful permanency assessment until a full 12 months has elapsed. Only after that period can the court determine whether the parent has failed to correct the conditions and whether DCYF's efforts have been reasonable. As a result, the court protocols, and training on those protocols, direct that the initial permanency hearing be scheduled more than 12 months after the finding of abuse and/or neglect. Binding judicial interpretation therefore makes it impossible for NH to demonstrate that the initial 12 month permanency hearing factor is functioning statewide.

In Round 3, New Hampshire received an overall rating of Area Needing Improvement for Item 22 based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, New Hampshire provided data showing that 67 percent of permanency hearings were occurring within 13 to 15 months of children coming into care. Stakeholders were not able to provide additional insight on the percentage of initial permanency hearings held within the federally required time frame. New Hampshire did provide data and information in the statewide assessment showing that 87 percent of the children who remained in care longer than 24 months had a subsequent permanency hearing within twelve months of the first permanency hearing.

The effectiveness of this systemic factor reflects a mixed picture of strong statewide performance in some areas and significant challenges in others. New Hampshire demonstrates a well-functioning and reliable process for completing subsequent permanency hearings, with consistently high compliance rates between 89% and 91% statewide—showing that ongoing judicial oversight is timely and firmly established. However, the timeliness of initial 12-month permanency hearings remains a substantial area needing improvement. Only 16% to 20% of youth receive an initial permanency hearing within the federally required 12 months, primarily due to statutory and judicial constraints that prevent courts from conducting a meaningful permanency assessment before a full year has passed. Despite this, the state shows improved performance when considering hearings held within 14–15 months, indicating progress but not full compliance. Overall, the systemic factor is effective in ensuring consistent ongoing permanency review but continues to face structural barriers that limit timely completion of the initial permanency hearing. This item remains an area needing improvement.

Item 23 Termination of Parental Rights: Area Needing Improvement

Item 23 evaluates the effectiveness of the statewide case review system in ensuring that termination of parental rights (TPR) petitions are filed in accordance with federal and state requirements. These requirements mandate that a TPR be filed when a child has been in out-of-home care for 15 of the most recent 22 months, unless specific exceptions apply, such as placement with relatives or documented compelling circumstances. Additional triggers include extended periods (typically 6–12 months) in which parental issues show no meaningful improvement, ongoing safety concerns, or the presence of aggravated circumstances like severe abuse or neglect.

The analysis for this evaluation incorporated multiple data sources and review periods. This included findings from CFSR Round 3, results from the State Fiscal Year (SFY) 2024 and 2025 Case Practice Reviews for Item 13, and internal DCYF data measuring the timeliness of required TPR filings. The methodology involved identifying cases with TPR reports, calculating the earliest relevant entry into care, determining whether the 15 of 22-month threshold had been met, and filtering placements to include only those subject to the requirement. From there, the analysis calculated the 474-day mark within qualifying placements to assess whether filings occurred within required timelines. Let me know if you'd like this shortened further or adjusted for a specific audience.

Findings from the SFY 2024–2025 internal Case Practice Review cycle reveal critical insights into the functioning of New Hampshire's Termination of Parental Rights (TPR) process and its intersection with timely permanency planning. The review of 52 foster care cases shows that while DCYF demonstrates consistent strengths in establishing appropriate permanency goals and filing timely TPR in many cases, recurring systemic issues continue to impact full alignment with federal ASFA requirements and timely permanency outcomes. (*Data Source: SFY 2024-2025 Case Practice Review, CFSR OMS*)

32/52 (62%) of cases were rated as strengths. Across cases rated as strengths, DCYF frequently filed TPR petitions within federal timelines when children met the "15 of the most recent 22 months" threshold and when reunification efforts had been exhausted. In cases where children had been in care for extended periods and adoption had been established as the appropriate permanency goal, the agency filed TPR petitions in accordance with ASFA expectations, sometimes within days of a goal change. Other cases showed similarly timely filings where parents were not making progress or where safety concerns such as abandonment or severe maltreatment warranted early pursuit of adoption. In these instances, timely TPR filings were supported by clear documentation and casework demonstrating that adoption was appropriate and that alternative permanency options were not viable. (*Data Source: SFY 2024-2025 Case Practice Review, CFSR OMS*)

Despite these strengths, 20/52 cases, 38% percent of cases were rated as Areas Needing Improvement. A common theme was the failure to file TPR timely despite children meeting the 15/22 month threshold without documenting compelling exceptions. Some children were in out-of-home care for multiple years without a filed petition or documented rationale for delay. Other cases showed lengthy periods in care with reunification remaining the goal despite minimal parental progress. (*Data Source: SFY 2024-2025 Case Practice Review, CFSR OMS*)

Documentation gaps contributed significantly to these findings, including missing permanency goals, incomplete case plans, and undocumented TPR related decisions. In some cases, permanency goals were conveyed verbally but not documented in the electronic case record. Court-related delays also contributed to TPR filing delays. Extensions of reunification, delays in scheduling permanency hearings, and

deviations from required judicial timelines stalled TPR filing. In several cases, petitions were ordered to be filed within required timeframes but were not filed until weeks later. (*Data Source: SFY 2024-2025 Case Practice Review, CFSR OMS*)

NH evaluated the effectiveness of timely filing of termination of parental rights petitions when children 0-17 have been in out of home placement for 15 of the most recent 22 months. There were 640 termination of parental rights petitions filed during SFY 2024 and SFY 2025 collectively. 287/640 (45%) were filed timely, either at or before the 15th month in placement. (*Data Source: NH SACWIS System/Bridges*).

Overall, the SFY 2024–2025 CQI findings reflect a TPR system capable of strong performance, particularly when safety risks or parental unfitness are clear, but one requiring improvement in consistency, documentation, court alignment, and timely goal establishment.

There are limitations to NH SACWIS data however, in that if a termination of parental rights petition had not yet been entered into the SACWIS system, it would not be reflected in the data. Another example of the agency's quality assurance oversight of data includes collaboration between the AFCARS Administrator and Field Administrators regarding timely documentation of termination of parental rights petitions in the SACWIS system.

Case Practice Review data examples suggest opportunities for improved monitoring, documentation, and coordination between DCYF and the courts to ensure compliance with statutory and court management expectations. Additional systemic barriers identified in the review included housing instability for parents, unresolved treatment needs, criminal proceedings, and barriers to engaging incarcerated parents. While these circumstances may justify ASFA exceptions, the rationale was rarely documented clearly, resulting in noncompliance findings even when practice decisions may have been reasonable.

The data analysis revealed a common theme of children remaining in out-of-home care for extended periods without a filed TPR petition and no documented justification for the delay. Although state law allows DCYF to forgo the mandatory filing when a compelling reason is documented, the available data does not demonstrate that these compelling reasons are consistently presented to, or considered by, the court during permanency hearings. Currently, there are no standardized procedures in court protocols or DCYF policy and practice to ensure that compelling reasons are reliably documented, communicated to the court, and explicitly addressed in judicial determinations. Strengthening practice in this area is necessary to support timely achievement of permanency and demonstrate the system is functioning statewide.

In the Round 3 CFSR, New Hampshire received an overall rating of Area Needing Improvement. Information in the statewide assessment and collected during interviews with stakeholders showed that filing of TPR petitions and documentation of compelling reasons not to file are not occurring consistently

throughout the state. Stakeholders said that the delays in filing TPR petitions are due in part to high caseworker caseloads and caseworker turnover. Stakeholders said that filing TPR petitions does not appear to be a priority. In the statewide assessment, New Hampshire said that the state's information system is unable to monitor and track both filings and petitions.

Since the Round 3 CFSR, the Model Court and CIP team fully implemented the 2018 Termination of Parental Rights Court Protocols to assist in the timely filing of and disposal of these petitions so that children and youth can achieve more timely permanency. Court protocols direct that petitions are immediately filed after the permanency hearing or within two days of issuance of the permanency hearing order. Hearing docket time has previously been set aside to conduct the preliminary TPR hearing within 60 days of the permanency hearing. There, parties agree on discovery exchange, identify preliminary hearing issues, and schedule the final hearing date 60 days later while all are present to avoid the need for continuances. The CIP, in collaboration with DCYF, has trained staff on the strict TPR timeframe. DCYF has also incorporated the timeframe into practices, and ongoing training opportunities. Court protocols were also updated to reflect the new law for early permanency hearings for children and youth "in which both parents are making no effort or only negligible efforts to comply with dispositional orders or based on another compelling reason." This statutory changes offers an additional opportunity for achieving timely permanency for children whose parent(s) is disengaged or making little to no progress on correcting the conditions that led the child to become court involved. (*Data Source: NH Judicial Branch*).

Overall, the effectiveness of New Hampshire's system for ensuring timely termination of parental rights (TPR) filings shows pockets of strong performance but remains inconsistently applied statewide, resulting in significant delays for many children. The Case Practice Review (SFY 2024–2025) indicates that while DCYF often acts promptly when safety risks are high or parental progress is minimal, large portions of cases still fail to meet the federal "15 of 22 months" requirement, and compelling reasons for delay are not consistently documented. Only 45% of TPR petitions were filed within required timelines, and nearly 40% of reviewed cases were rated as needing improvement due to delays, documentation gaps, or prolonged reunification efforts without demonstrated progress.

Systemic barriers—including inconsistent documentation of permanency goals, lack of standardized procedures to record and communicate compelling reasons, court-related delays, high caseloads, and workforce turnover—continue to undermine timely permanency outcomes. Although improvements such as updated TPR court protocols, enhanced training, and court–agency collaboration have been implemented since the CFSR Round 3 findings, the system overall still struggles with reliability, consistency, and timely decision-making. Strengthening documentation practices, improving coordination with the courts, and establishing clearer protocols for ASFA exceptions are critical next steps for ensuring the statewide case review system functions as intended. Item 23 remains an area needing improvement.

Item 24 Notice of Hearings and Reviews to Caregivers: Area Needing Improvement

Item 24 evaluates whether foster parents, pre-adoptive parents, and relative caregivers receive timely notice of hearings and reviews and have the opportunity to be heard in court proceedings involving the children in their care. Federal requirements emphasize consistent notification and meaningful caregiver participation as essential components of a functioning case review system.

Current functioning of Item 24 in DCYF reflects ongoing inconsistency in caregiver notification practices across District Offices. While some offices maintain structured internal workflows that support timely communication, survey results from both staff and caregivers indicate a lack of reliable, statewide practice in providing hearing notices and ensuring caregivers can exercise their right to be heard.

Of the 114 DCYF staff respondents surveyed, most reported that their office has a process for notifying the court when a child is placed with a caregiver. However, more than one-quarter of respondents indicated they were either unsure if a consistent process existed or believed there was none. Staff described practices that ranged from formalized team-based systems using checklists and paralegal support to far less structured individual practices, demonstrating substantial variability across offices.

More than 500 foster and kinship caregivers were surveyed, with 72 respondents. Caregiver survey responses further illustrate the inconsistent functioning of the system. While some caregivers reported receiving notifications for all or most hearings, many others reported receiving them only rarely or not at all. Several caregivers stated that they relied exclusively on CASA/GAL for updates, and a notable group reported receiving no notice from any party. Caregivers also expressed uncertainty about their right to provide information to the court and limited understanding of how to submit written or verbal input. Examples included statements being submitted late or not at all, reinforcing perceptions of being excluded from meaningful participation.

A review of District Office practice descriptions showed significant differences in notification processes. Some offices use detailed placement checklists, morning-after placement reviews, and consistent staff assignments for court notifications. Others have limited or no documented procedures. While many offices aim to file change-of-placement notifications within 24–48 hours, the absence of a uniform statewide protocol results in uneven execution across the state.

The analysis further indicates that although courts have a standardized process for fulfilling federal and state statutory mandates to notify relatives, kin, and foster parents of hearings and their right to be heard, there is currently no mechanism to assess how consistently the process is used. Courts are statutorily required in NH to notify foster parents of all proceedings and their opportunity to submit reports. Family Division Court Rule further requires that foster parents, pre-adoptive parents, and relative caregivers receive notice of review, permanency, and post permanency hearings and be allowed to be heard. Court protocols and the staff manual provisions instruct staff to classify foster parents, relative caregivers, and kinship caregivers as “participants” (not “parties”) in the case management system. The designation triggers the need to issue caregiver notifications for upcoming hearings. Staff then use form NHJB 3188 (Hearing Notice – Foster Parent, Relative Caregiver, or Kinship Caregiver) to independently notify these placement caregivers of upcoming hearings and an opportunity to be heard orally or in writing.

According to court data, in SFY24, 1,354 youth were in foster or kinship care (excluding residential placements) and had an open Abuse/Neglect case. 351 of these cases (26%) included a caregiver entered as a participant. In SFY25, 1,219 youth were in foster or kinship care (excluding residential placement) and had an open Abuse/Neglect case. 360 of these cases (30%) included a participant caregiver. While these percentages suggest the proportion of caregivers who may have received hearing notices, the estimate is unreliable. The case management system may not capture all qualifying caregivers in each of the open abuse and neglect matters. There is also no mechanism in the case management system to capture issuance of form NHJB 3188 to each designated participant once entered into the database. Additionally, some participant entries may lack accurate contact information. Effective notification

depends on DCYF providing timely and updated placement information to include initial, placement changes, and physical reunification.

The new court form implemented in January 2026 has introduced additional variability. Because its adoption is recent, District Offices are at differing stages of integrating the updated requirements into their workflows. Staff responses reflected uncertainty about expectations under the new form, and some continued to reference older practices. This transitional phase has contributed to short-term inconsistency, particularly in offices still developing or adjusting their procedures. As a result, while the new form may ultimately improve clarity and standardization, it has temporarily heightened variability in practice.

Despite ongoing challenges, several strengths were identified in New Hampshire's current approach to caregiver notification. Many District Offices utilize structured tools—such as placement checklists and standardized email distribution lists—which support timely notification when consistently applied. Staff also demonstrate a clear awareness of the importance of notifying courts and caregivers of placement changes, reinforcing a shared understanding of the critical role caregivers play in judicial reviews. Some caregivers reported receiving regular and reliable notifications, and several described positive experiences with being informed about court hearings. In addition, CASA/GAL often provides valuable supplementary communication, helping ensure that caregivers receive essential information even when DCYF communication lapses occur.

At the same time, significant systemwide challenges continue to undermine the consistency and effectiveness of caregiver notifications. The absence of a standardized statewide process results in variable implementation across District Offices and unequal access to information among caregivers. A substantial number of caregivers reported not receiving reliable hearing notices, and many were unaware of their right to be heard or lacked clear guidance on how to provide input to the court. Documentation practices for caregiver statements remain inconsistent, creating additional barriers to meaningful participation. The recent rollout of the new court form has also contributed to short-term confusion as staff adjust to updated expectations, and persistent staffing constraints further hinder consistent communication and follow-through. These challenges collectively limit the system's ability to ensure that all caregivers are informed, prepared, and meaningfully involved in court proceedings.

In the 2018 CFSR, DCYF received an Area Needing Improvement rating for Item 24. The federal review found that the state did not have consistent practice for notifying caregivers of hearings and did not consistently provide caregivers with the opportunity to be heard. Stakeholders also reported significant variation across District Offices.

The new court form has not been implemented long enough to demonstrate sustained change since Round 3. While some offices have improved internal structure since 2018, systemwide inconsistency persists. Caregiver reports continue to highlight variability, lack of clarity, and missed opportunities for meaningful participation. While certain District Offices demonstrate strong internal practices, the absence of a unified statewide procedure and uneven adoption of the new court form contributes to ongoing challenges. Caregivers continue to report unreliable notifications and limited understanding of their rights, and staff practices remain inconsistent during this period of transition. Item 24 remains an Area Needing Improvement due to persistent inconsistencies in caregiver notification and participation.

Item 25 Quality Assurance System: Strength

DCYF's Quality Assurance (QA) system functions as a statewide, comprehensive framework designed to monitor, assess, and improve child welfare practice in all jurisdictions where services under the Child and Family Services Plan (CFSP) are delivered. The system incorporates multiple review processes, robust policies, and advanced data and reporting tools to evaluate service quality and inform continuous improvement efforts. This narrative describes how the state's QA system operates, the methods used to assess service quality, the strengths and needs it identifies, the mechanisms that support reporting and data use, and the feedback loops that structure improvement activities.

To evaluate the functioning of the QA system, DCYF examined its full array of QA and CQI processes, including Case Practice Reviews (CPRs), Systems Reviews, Systems Mapping, and the RSC Program. The evaluation also included a review of policies and standard operating procedures guiding practice statewide, analyses of the state's data quality and reporting infrastructure, and assessment of feedback mechanisms that ensure findings lead to meaningful and sustained improvement. Through this review, the state assessed whether QA activities are conducted consistently across all ten District Offices, whether they use federally aligned standards such as the Onsite Review Instrument (OSRI), and whether results are effectively incorporated into practice and policy adjustments.

The QA system operates in every jurisdiction where services are provided, and CPRs—DCYF's OSRI-based case review process—are conducted multiple times each year. During SFY 2024, statewide CPRs were completed quarterly as part of the Program Improvement Plan, and in SFY 2025, targeted reviews were conducted in three District Offices, including the metropolitan office, Claremont and Laconia to support focused improvement priorities. Case sampling strategies ensure representation from CPS and JJS programs across offices, creating an equitable and statewide assessment of practice quality. Please see safety, permanency and well-being outcomes for a detailed breakout of outcomes.

These reviews use the federal OSRI to assess child safety, permanency, and well-being and provide qualitative insights regarding practice patterns. The state supplements these reviews with ongoing data monitoring, feedback from District Offices, and information gathered through contract monitoring and collaboration with the DHHS Division of Behavioral Health Services' Bureau of Children's Behavioral Health. Through these processes, the state consistently identifies recurring challenges, including the need to strengthen family engagement, particularly engagement of fathers, improve timeliness to permanency through more consistent concurrent planning, and enhance placement matching, stability, and treatment alignment for youth in residential settings. These issues are regularly shared with all District Offices, program specialists, and senior leadership, and they inform assessment of training needs, policy updates, and strategic planning efforts.

Beyond case reviews, DCYF operates a set of systemic quality assurance activities that enhance understanding of system performance. Systems Reviews, including child fatality reviews conducted through the National Partnership for Child Safety model, analyze the interplay of family dynamics, professional decision-making, team processes, and systemic factors contributing to safety concerns. Systems Mapping is used periodically to evaluate systemic strengths and challenges underlying critical incidents. These activities support cross-agency collaboration, guide shifts in the service array, inform legislative and policy development, and reinforce workforce training needs.

Complementing these efforts, the Risk and Safety Consultation (RSC) Program provides targeted review of assessments identified as posing a high risk for serious injury or child fatality. This program evaluates the quality of safety assessments, the adequacy of service responses, the sufficiency of collateral contacts, and the overall quality of family engagement during investigations. Supervisors and CPSWs receive at least monthly coaching through this program to strengthen the quality and consistency of safety decision-making statewide. Together, these systemic activities and consultation processes create a cohesive statewide learning system that helps ensure the safety and well-being of children and informs improvements in training, policy, operations, and resource allocation.

The QA system is supported by an extensive policy infrastructure that outlines practice expectations across safety, permanency, and well-being. Policies clearly define the required timeframes and documentation requirements for intake screening, safety assessments, initial contacts, and risk evaluations. Permanency policies specify expectations for placement decision-making, sibling connections, visitation standards, and concurrent planning timelines. Well-being policies ensure educational stability, trauma screening, developmental assessments, oversight of medical and dental care, and monitoring of psychotropic medications. These clear and detailed expectations allow the QA system to evaluate statewide consistency and alignment with federal requirements and enable supervisors and QA reviewers to assess compliance during CPRs and systemic reviews.

Supporting these efforts is DCYF's strong data management and reporting capacity. ROM provides validated data related to safety, permanency, well-being, caseloads, and other core metrics. In addition to ROM, the agency generates automated monthly reports covering licensing, placement trends, worker visit compliance, case plan timeliness, adolescent programming, residential service utilization, CANS, service utilization and caseload trends. AFCARS data undergoes daily data quality checks, and the Bureau of Evaluation, Analytics, and Reporting (BEAR) conducts routine data validation across program areas.

These data can be aggregated and analyzed at the statewide, program, District Office, supervisory unit, and individual worker level. Reports and findings are disseminated through automated dashboards, briefings to senior leadership, District Office meetings, court improvement activities, oversight commission presentations, and contract monitoring discussions. The ability to filter data at multiple levels supports local practice improvement, statewide planning, and targeted coaching and supervision while ensuring transparency and accountability throughout the system.

The process for evaluating program improvement measures is structured and cyclical. After each CPR, District Offices receive a detailed summary identifying case-level strengths, systemic issues, and recommendations for improvement. These findings guide the creation of targeted action plans developed with support from Field Administrators, the CFSR Coordinator, program specialists, and administrators. Program specialists assist District Offices in implementing improvement activities by providing coaching, technical assistance, and additional resources as needed. Prior to the next review cycle the CFSR Coordinator meets with each District Office to assess progress, identify barriers, and refine strategies.

Information from these discussions is shared with senior leadership and is used to inform statewide training initiatives, policy development, strategic planning, and resource allocation. This process creates a continuous feedback loop in which practice is assessed, improvement efforts are implemented, and results are evaluated on an ongoing basis.

The functioning of this system is supported by the Bureau of Evaluation, Analytics, and Reporting (BEAR), which oversees statewide QA activities, including CPRs, Systems Reviews, Systems Mapping, and data analysis. BEAR, and the Bureau of Information Systems (BIS) ensures data integrity across AFCARS, ROM, and Bridges and collaborates with other bureaus to guide improvement planning. BEAR also oversees the training and development of CQI reviewers and QA specialists, ensuring consistent application of review standards and high-quality data collection. Program specialists in permanency, family engagement, and service array provide additional support by helping District Offices interpret results, identify improvement priorities, and implement effective strategies. The state's robust data infrastructure—including daily AFCARS validation, bi-weekly ROM data validation, and extensive automated reporting—provides supervisors and administrators with timely and accurate information to guide practice decisions. Tracking improvement activities occurs through CQI summaries, follow-up meetings, BEAR analytics, and internal monitoring tools that document both progress and recurring needs.

Despite strong systemic functioning, statewide variation in outcomes persists, particularly in the areas of father engagement, concurrent planning consistency, and placement stability. These challenges influence DCYF's ability to consistently meet federal permanency expectations; however, each of these areas is being actively monitored and addressed through the CQI cycle, targeted technical assistance, and statewide training efforts. In Round 3 of the CFSR, DCYF was rated a strength in Item 25, with reviewers noting the state's strong CQI structure, comprehensive case review system, and robust administrative oversight. The primary concern identified at that time—data inconsistency across ROM, Bridges, and CPR sources has been addressed through improved validation processes and stronger data alignment efforts.

In Round 3, New Hampshire received an overall rating of Strength for Item 25 based on information from the statewide assessment and stakeholder interviews. Data and information in the statewide assessment and collected during interviews with stakeholders provided evidence of many key aspects of a continuous quality improvement system. New Hampshire DCYF has an administrative foundational structure that oversees all CQI activities. The state has a case practice review system that mirrors the CFSR process in conducting quality case practice reviews throughout the entire state and uses the data to inform local district office practice improvement initiatives. DCYF also conducts targeted reviews to ensure fidelity to the case practice model. The CQI process collects and analyzes data, though one area that could be strengthened is how the data disseminated to stakeholders are organized. Stakeholders noted that various data streams—ROM, Bridges, and Case Practice Reviews—are inconsistent, making it difficult for staff to ascertain which data points should be used to improve practice.

Overall, DCYF maintains an effective QA system that fulfills federal expectations by operating statewide, applying clear standards for evaluating service quality, identifying strengths and areas needing improvement, producing and disseminating meaningful reports, and evaluating the effectiveness of improvement strategies. The system's integration of case reviews, systemic reviews, policy infrastructure, data analytics, and structured feedback loops ensures that practice challenges are identified and addressed in a timely and coordinated manner. While continued improvement is needed in areas such as engagement, permanency timeliness, and placement stability, the QA system functions as a strong and reliable mechanism for supporting consistent, high-quality practice statewide. This item remains a strength.

Item 26 Initial Staff Training: Strength

Item 26 measures how well the State's initial staff training system ensures that all newly hired child welfare and juvenile justice staff receive timely, comprehensive, and competency-aligned training that prepares them to meet the needs of children and families served by the agency. This item evaluates whether required training is delivered consistently statewide, whether it equips staff with foundational knowledge and skills, and whether structures exist to support transfer of learning into the field.

The evaluation of Item 26 relied on statewide training data from SFY 2024 and SFY 2025, including CWEP contract reports, training evaluation data, Cornerstone LMS records, external Core tracking documents, Standard Operating Procedures, DCYF Mentor Logs, Mentor Surveys, and exit survey responses. The assessment reviewed curriculum design, delivery modalities, completion timelines, mentoring structures, knowledge-check outcomes, and system improvements implemented since prior CFSR findings.

Analysis shows that DCYF's initial staff training system is well-established, comprehensive, and functioning effectively statewide. DCYF's Bureau of Professional and Strategic Development, in partnership with the University of New Hampshire's Child Welfare Education Partnership, provides a robust blended training model that integrates classroom instruction, simulation-based learning, and asynchronous LMS coursework. Cornerstone serves as the centralized training record system, enabling supervisors and Instructor Coaches to monitor real-time completion and learning progress. The curriculum is aligned with DCYF policies, state and federal laws, best practice standards, and clearly defined learning objectives.

Core Academy is the agency's foundational pre-service program and must be completed within the first six months of hire. It is offered five times per year to minimize delays in staff onboarding and ensure equitable access across regions. Completion of Core is required before new Child Protection Service Workers and Juvenile Probation and Parole Officers may carry cases. Supervisors determine staff readiness based on mentor feedback, skill demonstration, and the complexity of case assignments.

A strong mentoring system complements formal training. DCYF's Certified Mentor Program—supported by more than 200 trained mentors statewide—provides structured, field-based learning throughout the first year of employment. Mentor Logs outline required activities, field observations, and tasks aligned with Core content, ensuring new staff have opportunities to practice and integrate skills under guided supervision.

Evaluation results for SFY 2024 and SFY 2025 demonstrate consistent, meaningful learning gains. Staff showed a 24% improvement between pre- and post-course knowledge checks, and survey results indicated high confidence in performing job duties after completing Core. Participants rated the relevance of course content and their increased ability to perform job duties above 4.5 on a 5-point scale. Mentor Surveys showed strong agreement that the mentoring system supports on-the-job learning needs and exit survey data indicated that most departing staff felt they had received adequate initial training.

DCYF has also implemented significant system improvements since the prior CFSR, including strengthened SOPs for curriculum updates, expanded use of data in curriculum decisions, mid-Core check-ins for improved completion monitoring, increased simulation and applied learning opportunities, and integration of lived experience through Parent Leaders in simulated home visit training. These

enhancements have strengthened the alignment between training content and real-world practice expectations.

In Round 3, New Hampshire received an overall rating of Strength for Item 26 based on information from the statewide assessment. In the statewide assessment, New Hampshire described initial staff training. DCYF's Core Academy presents its initial training in a tiered process that includes classroom experience along with a field practice advisor for on-the-job training. DCYF tracks completion of the Core Academy and presented data in the statewide assessment that showed that 91 percent of new hires had completed the initial training. DCYF also presented data from the evaluations of the initial trainings indicating that staff believed they gained a high rate of practice knowledge and skill development through the initial training.

Overall, the evidence shows that the initial staff training system is functioning effectively statewide. DCYF delivers timely, comprehensive training to new staff, uses strong evaluation systems to monitor learning, and maintains structured mentoring supports to ensure training translates into practice. While ongoing refinements continue, the system demonstrates statewide consistency and strong capacity to prepare new staff for their roles. This item remains a strength.

Item 27 Ongoing Training: Strength

Item 27 measures how effectively the State ensures that ongoing training is provided to staff responsible for delivering services under the Child and Family Services Plan and whether that training equips them with the knowledge and skills necessary to perform their duties. The item evaluates whether ongoing training is accessible, aligned with practice expectations, delivered consistently statewide, and reflective of the competencies required to support child safety, permanency, and well-being. It encompasses advanced learning opportunities, supervisor development, professional growth pathways, external training access, and the system's ability to evaluate and refine training to meet workforce needs.

The evaluation of Item 27 relied on statewide data from SFY 2024 and SFY 2025, including Cornerstone LMS training records, Child Welfare Education Partnership (CWEP) monthly/quarterly/annual reports,

CWEP end-of-course evaluations, knowledge-check results, confidence ratings, exit interview survey data, training request and approval records, curriculum updates, and continuous quality improvement activities. The review included a random sample of 30 staff training transcripts, external training request documentation (A24/2901 forms), and evidence of training evaluations through Qualtrics survey data.

Together, these data sources provided a comprehensive view of the quality, accessibility, impact, and monitoring of ongoing staff training.

Analysis shows that DCYF maintains a robust, well-established ongoing training system that effectively supports staff development and role-readiness. Staff have regular access to an extensive array of advanced trainings through the Child Welfare Education Partnership, including both in-person and asynchronous offerings. CWEP's contract requires at least 60 hours of in-person advanced training annually, ensuring adequate opportunities for staff to complete required ongoing professional development. Training topics reflect evolving practice needs, legislative and policy changes, clinical and behavioral skill development, and specialized competencies for child protection, juvenile justice, and facility staff. Examples include Motivational Interviewing, Concurrent Planning, Behavioral Health Medication Oversight, Assessment

Practice Series, Kin2You, Trauma and Grief training, Human Trafficking, Autism Spectrum Disorders, and medically focused child abuse and neglect modules.

Evaluation data demonstrates consistently high training quality. Across ongoing trainings, staff rated course relevance at 4.14 out of 5, and usefulness for job performance at 4.18 out of 5, showing that staff found the content directly beneficial to their work. Confidence ratings averaged 4.92, indicating that staff felt highly prepared to apply the skills learned. Knowledge-check data further reflects strong skill acquisition, showing an average 23% improvement from pre- to post-training assessments. These ratings and gains confirm that ongoing training is perceived not only as relevant but as meaningfully improving staff practice.

Exit interview data further validates training effectiveness, with 73.3% of departing staff reporting they received relevant ongoing training and 65% confirming they were able to access specialized external training opportunities, underscoring strong engagement and perceived value of the training system. Staff described ongoing trainings as "relevant," "useful," and "confidence-building," with many reporting that trainings "increased [their] ability to perform [their] duties." These qualitative findings reinforce that ongoing training is well-received and appropriately targeted at workforce needs.

The system demonstrates significant responsiveness to staff needs. CWEP and DCYF maintain multiple feedback loops—including post-training evaluations, training request processes, mentor surveys, and District Office communication—to identify training gaps and refine curriculum. CWEP's evaluation workgroup reviews training requests weekly and collaborates with subject matter experts to design or revise courses. Training timelines and external training opportunities are communicated quarterly, ensuring transparency and accessibility. These structures illustrate a highly adaptive and data-informed training system responsive to workforce input and continuous improvement needs.

Supervisor training—historically identified as a gap in CFSR Round 3—has been substantially strengthened. The Supervisor Core Academy, offered twice annually, supported 38 participants in FY24 and 14 in FY25, while the advanced "Coaching and Utilizing Supervision Effectively" training attracted supervisors seeking to deepen leadership and coaching skills. Field feedback directly informed the development of these offerings, which address earlier concerns that supervisors lacked relevant advanced training. Staff reported meaningful growth from these leadership trainings, which have helped reinforce supervision as a critical tool for supporting workforce development.

Despite strong system functioning, challenges remain in the areas of tracking and documenting required training hours. A targeted review of 30 Cornerstone training transcripts found that only 53% of staff had documentation showing completion of the required 30 annual hours, underscoring inconsistent use of Cornerstone and the need for clearer supervisory guidance. The transition from Bridges to Cornerstone in early 2024 resulted in incomplete or missing entries for external training hours, likely underrepresenting true completion rates. Supervisory monitoring practices vary, and the absence of a statewide Individual Training Needs Assessment limits the ability to align competencies with training requirements consistently. These findings suggest that while training quality is strong, tracking and accountability processes require targeted system strengthening.

In Round 3's CFSR, DCYF received an overall rating of Area Needing Improvement for Item 27 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and collected during interviews with stakeholders showed that social workers must complete

30 hours of annual training, and that Juvenile Parole and Probation Officers must complete 40 hours annually. However, the agency was not able to track compliance with these standards. Stakeholders also said that the agency's training partner was planning to make more online training available. However, this conflicts with the wishes of field staff, who were requesting more in-person training. Stakeholders also said that there was not relevant training available for supervisors.

Compared to CFSR Round 3, Item 27 reflects substantial improvement. The training system now offers significantly expanded advanced training options, greater access to external learning, dedicated supervisory development programs, and a more structured approach to curriculum updates. Evaluation data is more robust and shows higher satisfaction and stronger learning outcomes than previously documented. Also, in 2023 a new policy was approved that updated training requirements for all direct care staff. This change required 30 ongoing training hours per year. However, consistent statewide tracking of required training hours remains an ongoing area of need, representing partial progress from Round 3 rather than full resolution.

Overall, the evidence demonstrates that DCYF's ongoing staff training system is functioning effectively, with strong training quality, responsive curriculum development, high staff satisfaction, and meaningful learning gains. Continued work to strengthen training hour tracking, supervisory oversight of training completion, and implementation of a statewide needs assessment will further enhance consistency and ensure that all staff meet required training obligations annually. This item is rated a strength.

Item 28 Foster and Adoptive Parent Training: Strength

Item 28 measures how well the State ensures that foster parents, adoptive parents, and staff of licensed or approved facilities receive thorough initial and ongoing training that equips them with the knowledge and skills needed to meet the needs of children in foster care or adoptive placements. This item evaluates the availability, accessibility, timeliness, and effectiveness of training statewide, as well as whether training addresses required competencies.

The evaluation of Item 28 used multiple data sources from FY 2024–2025, including caregiver training evaluations, CWEP's statewide training schedule, Your Voice Matters Foster Parent Survey responses, Home Study Unit licensure data, and qualitative feedback from participants. The assessment examined whether caregivers receive required training within mandated timeframes, whether training is aligned with caregiver needs, and whether outcomes demonstrate improved knowledge and confidence.

DCYF maintains a comprehensive and clearly defined training system aligned with statewide licensing rules. All foster and adoptive applicants must complete 30 hours of preservice training unless otherwise waived. The Caregiver Preservice Training curriculum, delivered by CWEP, includes coursework on trauma, child development, attachment, grief and loss, partnering with birth parents, behavioral guidance, safety practices, CPR/first aid, medication administration, and the reasonable and prudent parent standard. Once licensed, caregivers must complete 16 hours of ongoing training every two years (or 32 hours for specialized homes), including specialized curricula tailored to a caregiver's certification type. Training is delivered through a flexible mix of live online classes, asynchronous modules, videos, and written resources, allowing caregivers to meet requirements in ways that suit their learning needs.

Training access and availability are functioning well statewide. CWEP maintains a continuous statewide

training calendar, ensuring regular opportunities for preservice and ongoing training. No applicants were denied access to training due to capacity constraints, and HSU monitors applicants' progress to ensure completion. In 2025, 205 new homes were licensed and 179 homes renewed, demonstrating capacity to support statewide caregiver onboarding and retention.

Evaluation results show that initial and ongoing training effectively support learning. Knowledge gains were recorded across all programs, and preservice programs saw measurable increases in understanding and preparedness. Caregiver confidence ratings averaged 4.4 or higher on a 5-point scale, and survey data indicated rising satisfaction with training variety and quality. Based on caregiver feedback, DCYF implemented a voluntary onboarding curriculum to strengthen practical skills around working with birth parents, understanding court processes, supporting trauma responses, and managing transitions.

Strengths in the training system include accessible scheduling, expanded online modalities, experienced instructors, and a curriculum that reflects core foster care competencies. Caregivers consistently report that preservice training prepares them for the realities of fostering and that instructors' use of lived experience helps connect concepts to practice.

Despite these strengths, challenges persist. Some kin caregivers experience technology barriers that limit access to virtual formats, though CWEP provides individualized support and non-digital alternatives when needed. Limited instructor capacity occasionally affects training continuity, and growing numbers of kinship and foster applicants may create future demand pressure. Additional clarification is also needed to align training requirements for residential care providers.

In Round 3, New Hampshire received an overall rating of Area Needing Improvement for Item 28 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and collected during interviews with stakeholders showed that there are different initial training requirements for unlicensed relative caregivers, who must complete 9 hours, and licensed relative or non-relative caregivers, who must complete 21 hours. Licensed relative and non-relative providers are also required to receive 9 hours annually of ongoing training, while unlicensed relative caregivers have no ongoing training requirement. Stakeholders said that the initial Foster and Adoption Care Essentials (FACES) and Relatively Speaking trainings did not consistently provide the level of support foster parents and relative caregivers need starting out, and that these trainings did not prepare caregivers for working with biological parents or effectively addressing the behavioral challenges of the children placed in their homes. Stakeholders also shared that much of the ongoing training is online, and many said that in-person training was more valuable to caregivers because it provided opportunities for support and group learning. Ongoing training hours are tracked by foster parents, who collect certificates of completion and present them at the time of relicensing.

Overall, evidence demonstrates that the foster and adoptive parent training system functions effectively statewide. Training is accessible, timely, and aligned with required competencies, and data show meaningful gains in caregiver knowledge and preparedness. While opportunities for continued improvement exist, DCYF's training system reflects a responsive, data-informed approach that supports caregivers in meeting the needs of children in foster and adoptive placements. This item is rated a strength.

Item 29 Array of Services: Area Needing Improvement

Item 29 measures how well the State ensures that the full range of services needed to assess the strengths and needs of children and families, support safe home environments, prevent removal, enable children to safely remain with their parents, and support permanency for those in foster or adoptive settings is available across all jurisdictions. This item evaluates whether the array is accessible statewide and whether gaps, capacity issues, or structural barriers impede the availability of required services.

The evaluation of Item 29 relied on DCYF's comprehensive review of its Children's System of Care (SOC) and DCYF service array, drawing from case-review findings, documentation describing the SOC tiered service structure, DCYF's contracted service array, and analyses of workforce and capacity challenges. The assessment examined how services function across prevention, early identification, community-based treatment, intensive home-based services, residential care, and crisis response. The method also incorporated system-identified challenges, such as access barriers, regional variation, workforce shortages, and transition gaps.

New Hampshire's Children's System of Care and DCYF service array jointly provide a broad continuum of services intended to meet children's behavioral health, developmental, safety, and permanency needs. At the universal level, Tier 1 supports—including primary care screening, early childhood programs, Family Resource Centers, and school-based programs—promote early identification of concerns. While these supports are widely available, case reviews show that early developmental and behavioral health needs are not always assessed promptly, resulting in missed prevention opportunities.

Tier 2 community-based services, such as outpatient therapy, community mental health services, developmental services, and school-based supports, are essential but often limited by workforce shortages, waitlists, and geographic disparities. Families relying on Medicaid frequently experience extended delays in accessing trauma treatment, psychiatric care, or specialized behavioral health services. Service continuity is disrupted when children move across catchment areas, requiring new referrals and causing prolonged service gaps.

Tier 3 services—including Wraparound through Care Management Entities, FAST Forward, TrECC, Intercept, and legacy models like HBT, CHS, and ISO—are highly effective when initiated on time. Families benefit significantly from intensive in-home stabilization, coordinated planning, and care management. However, delays in service initiation, particularly during reunification or periods of heightened need, undermine their effectiveness. Case reviews identify instances where referrals were not followed up, appointments were missed without resolution, or provider specialization did not match complex clinical needs such as autism, sexualized behaviors, or co-occurring medical conditions.

Tier 4 residential treatment services provide structured, trauma-informed care for youth whose needs exceed what can be managed in home-based settings. Providers and families report improvements in the residential system—including reductions in emergency department boarding—but significant vulnerabilities remain. Aftercare services are often delayed, discharge documentation may be incomplete, and reintegration into home or community settings lacks consistent support.

At the crisis tier, statewide mobile crisis response stands out as a major strength. Rapid Response services are available 24/7 across all regions. Despite this, some families remain uncertain about when crisis services should be used, and response times vary in rural areas. Crisis stabilization beyond the initial intervention remains inconsistent, limiting its ability to prevent repeat crises.

DCYF's contracted service array parallels the SOC tiers and includes essential programs such as CHS, HBT, TDT, ACT, transportation services, diagnostic evaluations, and specialized foster care models. These services play a critical role in promoting safety and permanency. However, widespread provider shortages, especially for diagnostic evaluations and highly specialized in-home services, create delays that impede timely intervention.

Foster care capacity challenges add another dimension to service array limitations. Rural regions experience chronic shortages of available homes, and very few homes statewide are equipped to care for youth with intensive behavioral health, developmental, or medical needs. Enhanced foster care—DCYF's specialized therapeutic foster license—had only five homes statewide during the review period, leaving many high-needs youth reliant on higher levels of care.

Across all tiers, transitions emerge as a central system challenge. Movement from one service level to another—including residential discharge, reunification, or escalating community-based needs—is frequently marked by gaps in service continuity. Lack of shared data systems, waitlists, unclear referral processes, and incomplete documentation contribute to disruptions, impeding progress and stability for children and families.

In Round 3, New Hampshire received an overall rating of Area Needing Improvement for Item 29 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and collected during interviews with stakeholders confirmed that the agency was unable to provide families with voluntary services that could address safety and well-being for families. Service availability was a challenge across the state, especially in the northern region. Stakeholders said that substance abuse services were not readily available and that there were shortages of counseling services, psychological evaluation and services, in-state residential treatment programs, parent aides, transportation services, and safety-related services. Waiting lists delayed the availability of services, and this affected timely achievement of permanency.

Overall, the analysis of Item 29 demonstrates that DCYF has built a comprehensive, values-driven service array with strong components across prevention, community-based care, crisis response, and residential treatment. However, persistent gaps in accessibility, workforce capacity, regional availability, timeliness, and transitions mean the array is not yet fully available or accessible statewide as required. Strengthening capacity, improving coordination, and enhancing timely access to core services remain critical priorities. This item remains an area needing improvement.

Item 30 Individualizing Services: Area Needing Improvement

Item 30 measures how well the State ensures that services within the array can be individualized to meet the unique needs of each child and family. This item evaluates whether services are flexible, culturally responsive, trauma-informed, tailored to specific clinical or developmental needs, and accessible through strategies such as specialized providers, adaptive service models, and flexible funding. It also assesses whether the system can adapt services as needs change.

The evaluation of Item 30 used the same methodological sources as Item 29—comprehensive service array analysis, case review findings, SOC documentation, DCYF service array descriptions, and statewide CQI insights. The assessment considered how well services were matched to assessed needs, whether

providers had appropriate expertise, whether transitions were managed effectively, and whether the system allowed for individualized planning in both community-based and residential settings.

New Hampshire's service model is grounded in the System of Care values of being family-driven, youth-centered, culturally and linguistically competent, and trauma-informed. These principles create a strong foundation for individualized practice. Programs such as Wraparound, FAST Forward, TrECC, and Intercept are specifically designed to tailor interventions to a child's strengths, family circumstances, natural supports, and cultural identity. When these programs begin promptly and include sustained engagement, families consistently report positive experiences and outcomes.

However, the ability to individualize services is significantly affected by access and specialization constraints. Case reviews reveal that youth with complex clinical profiles—including autism, co-occurring behavioral and medical issues, or sexualized behaviors—often cannot access specialized providers or evidence-based treatments in a timely manner. Community-based clinicians accepting Medicaid are limited, and many regions lack providers with the training needed to deliver trauma-informed or condition-specific services. This limits the degree to which interventions can be tailored to children's needs.

Service individualization also falters during transitions. When youth discharge from residential treatment, return home after reunification, or move across placements, services frequently do not adjust quickly enough to changing needs. Delays in aftercare, incomplete documentation at discharge, and lapses in psychiatric or behavioral services disrupt individualized planning and can lead to regression or placement instability.

DCYF's contracted service array includes specialized models—such as ISO, HBT, CHS, and ACT—that are designed to provide individualized support. Yet, shortages in provider capacity, uneven geographic distribution, and waitlists hinder their consistent use. Diagnostic evaluations, essential for tailoring interventions, are particularly limited; waits for evaluations delay service matching and, in some cases, records do not confirm that evaluations were completed at all.

The ability to individualize care is further constrained by the limited availability of specialized foster homes. Enhanced foster care, intended for youth with high needs, had only a handful of licensed homes statewide during the review period. As a result, children with complex needs may be placed in settings that are not tailored to their level of need, placing greater strain on caregivers and increasing the risk of instability.

Despite these challenges, New Hampshire demonstrates meaningful strengths in its individualized service approach. SOC-aligned values are evident across agencies, staff are dedicated and skilled, and programs such as Wraparound, mobile crisis response, and intensive in-home models are widely recognized as effective. Educational and medical collaboration further supports individualization for many children with specialized needs.

In Round 3, New Hampshire received an overall rating of Area Needing Improvement for Item 30 based on information from the statewide assessment and stakeholder interviews. New Hampshire did not provide any data in the statewide assessment on the agency's capacity to individualize services to meet the unique needs of children and families. Stakeholders said that the agency is not able to individualize services due to a lack of services within the state. In addition, stakeholders said that it is incredibly difficult to address the language or cultural needs of children and families in the state.

Overall, New Hampshire's ability to individualize services is strong in design but inconsistent in practice due to capacity limits, workforce shortages, delays in service initiation, and gaps in transition planning. Strengthening provider availability, improving timely access to evaluations, expanding specialized foster homes, and bolstering aftercare and transition supports would significantly enhance the State's effectiveness in meeting the individualized needs of children and families. This item remains an area needing improvement.

Item 31State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR: Strength

Item 31 evaluates whether the state engages in ongoing, meaningful, and influential consultation with internal and external stakeholders during the development, implementation, assessment, and monitoring of the CFSP and APSR. Stakeholders must include, at minimum: consumers, Tribes, courts, service providers, foster/relative caregivers, youth, parents, CASA, and other child- and family-serving agencies. Engagement must reflect regular communication, shared decision-making, and incorporation of stakeholder concerns into goals and updates.

The evaluation draws from APSR SFY 2026 documentation identifying stakeholder partnerships, cross-system governance bodies, lived-experience integration, and formal collaboration mechanisms. It also includes field-level documentation illustrating routine, structured collaboration between district offices and community partners (e.g., law enforcement, schools, hospitals, CACs, CASA). This evaluation includes Statewide Assessment content and stakeholder interviews from prior federal review cycles and quality assurance reviews and includes programmatic reports describing youth/parent engagement structures, prevention partners, and judicial partnerships.

DCYF's engagement and consultation with stakeholders in the development and implementation of the CFSP and APSR reflects a multi-layered system of collaboration that includes lived-experience partners, community service providers, judicial stakeholders, prevention partners, and cross-system agencies. The expectation that DCYF engage stakeholders in meaningful, ongoing, and influential dialogue is embedded throughout its operations, and the evidence shows that this engagement now occurs across strategic, policy, and practice levels. Stakeholder input does not simply inform decisions—it increasingly shapes policy directions, practice standards, training requirements, and improvement priorities.

To understand the functioning of DCYF's engagement structures, it is important to recognize the centrality of lived experience in DCYF's stakeholder framework. Birth parent leader and lived experience integration within New Hampshire DCYF represents a deeply collaborative model in which individuals with firsthand child welfare involvement are embedded across training, practice improvement, workforce development, and system transformation. Family Leaders serve as co-facilitators in professional development activities such as Better Together Workshops, Strategic Sharing sessions, and modules within the Family Engagement and Lived Experience Integration Academy. Their participation strengthens staff understanding of family perspectives, enhances trauma-informed engagement, and ensures training reflects real-world family experiences.

Beyond training, Family Leaders contribute to practice and workforce improvement by partnering in district-level initiatives such as Better Together Team Meetings, the Father Engagement Action Team, and interview panels. They participate in focus groups, practice discussions, and quality improvement projects that shape program redesign and elevate family voice. These contributions bring critical insight into gaps

in practice, highlight the needs of marginalized families, and reinforce respectful, responsive engagement across the workforce.

At the systems level, Family Leaders participate in the Parent Partner Program Steering Committee, the DCYF Advisory Board, and national learning collaboratives. Their leadership helps drive policy development, governance, and system transformation efforts. By moving from consultation to shared leadership, DCYF has embedded lived experience as a foundational component of decision-making, resulting in a more equitable, family-centered child welfare system.

The Father Engagement Action Team (FEAT) strengthens father involvement by combining staff expertise with the perspectives of fathers who have personally experienced the child welfare system. FEAT develops father-inclusive practice tools, provides training statewide, reviews qualitative data on engagement of nonresident fathers, and supports the agency's focus on incorporating father voice into case planning and policy updates. Through FEAT, fathers contribute directly to statewide guidance on identification, outreach, and engagement strategies, significantly expanding the inclusiveness of DCYF's planning and consultation structures.

Youth voice is similarly embedded at a systemic level. The Youth Advisory Board (YAB), also known as New Hampshire Youth Voices, includes young people currently or formerly in care who meet regionally and as a statewide collective. YAB members participate in the development of training for new workers, advise on placement stability efforts, review permanency and adolescent service policies, contribute to Chafee planning, and influence foster parent recruitment strategies. Youth perspectives are integrated not only through YAB but also through the Youth Action Pool (YAP), which allows youth who cannot commit to YAB's formal structure to participate through project-based activities, such as reviewing training modules, advising on transition supports, and informing adolescent practice guidelines. These structures ensure that youth experience informs both strategic direction and daily decision-making.

DCYF's internal Respect and Engagement Team further institutionalizes lived experience by coordinating meaningful participation of parents, youth, and caregivers across policy, training, and staff development activities. Building on this foundation, the agency is preparing to launch the Family Empowerment & Lived Experience Integration Academy (FELEIA), an initiative designed to train both staff and lived-experience partners in collaborative decision-making, facilitation skills, and trauma-informed engagement. This initiative represents a major advancement in the agency's commitment to embedding lived experience as a permanent and skilled part of the child welfare system.

Judicial engagement represents another major component of DCYF's stakeholder structure. New Hampshire's Court Improvement Project (CIP) provides a formal mechanism through which courts and DCYF jointly develop statewide child protection and permanency protocols. DCYF's role within CIP ensures that revisions to court protocols directly inform DCYF policy, case practice expectations, staff training, documentation standards, and permanency planning processes. The Model Court Executive Committee, which includes DCYF, CASA, OCA, parent attorneys, and judicial representatives, meets monthly to review systemic barriers, align practice expectations, and coordinate training across the court and child welfare systems. These structures represent a level of judicial engagement that goes significantly beyond the operational collaboration observed in the past. Judicial feedback now shapes statewide protocol development, staff training requirements, and the design of systemic improvement initiatives.

DCYF also participates in monthly cross-systems permanency meetings with courts, CASA, parents, youth, supervisors, attorneys, and federal colleagues. These meetings review data trends, identify barriers to permanency, and support coordinated solutions—particularly around timeliness of hearings, quality of case documentation, and concurrent planning. The involvement of CASA extends to field-level coordination as well, where CASA representatives participate in multidisciplinary meetings alongside mental health providers, schools, and CACs to align practice expectations and strengthen case-level problem solving. Field documentation illustrates that these partnerships occur consistently across districts, creating shared responsibility for child safety and well-being at the local level.

Partnerships with federal program entities—most notably the Children's Justice Act (CJA) and the New Hampshire Children's Trust—reinforce DCYF's engagement in statewide prevention and safety efforts. CJA collaborates with DCYF on multidisciplinary team responses to child abuse, supports improvements to investigation protocols, and helps strengthen training for both child welfare and law enforcement stakeholders. The NH Children's Trust coordinates statewide prevention infrastructure, oversees the Family Resource Center of Quality network, supports kinship navigation, and collaborates with DCYF on parent and caregiver engagement initiatives. These partnerships ensure the CFSP and APSR reflect prevention-oriented strategies and community-driven resource development.

At the practice level, DCYF staff maintain consistent engagement with law enforcement, schools, mental health centers, CACs, hospitals, and community-based organizations. Field offices participate in standing multidisciplinary meetings, WRAP collaborations with school districts, CAC case reviews, community provider forums, and joint trainings with courts, crisis centers, and police departments. These collaborative activities support daily decision-making, ensure communication and alignment across systems, and reinforce shared responsibility for safety and permanency.

In CFSR Round 3, New Hampshire received an overall rating of Area Needing Improvement for Item 30 based on information from the statewide assessment and stakeholder interviews. New Hampshire did not provide any data in the statewide assessment on the agency's capacity to individualize services to meet the unique needs of children and families. Stakeholders said that the agency is not able to individualize services due to a lack of services within the state. In addition, stakeholders said that it is incredibly difficult to address the language or cultural needs of children and families in the state.

Although the breadth and depth of stakeholder collaboration have strengthened considerably since the last federal review, challenges remain. Variation across district offices continues to affect the consistency of engagement practices. Stakeholder engagement has clearly advanced from the Round 3 baseline, where the state was found to need more meaningful, influential consultation, particularly with the judicial system.

Today, DCYF's stakeholder structures demonstrate a high degree of engagement. Stakeholders do not merely provide feedback—they contribute to decision-making, co-develop policies, participate in training, and shape system reforms. The integration of lived experience, formal judicial partnerships, prevention collaborations, and community-based engagement reflects a well-functioning, comprehensive system that meaningfully informs the APSR and CFSP. This item is rated a strength.

Item 32 Coordination of CFSP Services with Other Federal Programs: Strength

Item 32 evaluates the extent to which the state ensures that services provided under the Child and Family Services Plan are coordinated with those available through other federal or federally assisted programs, thereby creating a coherent, aligned, and responsive system of support for children and families. The purpose of this item is to determine whether DCYF meaningfully collaborates with federal partners—such as the Court Improvement Project (CIP), the Children's Justice Act (CJA), Medicaid, TANF, behavioral health programs, education systems, and federally supported community-based prevention networks—and whether that collaboration results in policies, services, training, and practice adjustments that reflect the needs and priorities of the communities served.

To evaluate this item, the state relied on multiple data sources, including the APSR SFY 2026, district-level documentation of field engagement, cross-system permanency meeting records, and stakeholder involvement from oversight bodies, youth and parent lived-experience programs, providers, courts, and federally funded partners. These sources collectively demonstrate a high level of coordination between DCYF and other federal programs and illustrate how that coordination influences statewide service delivery.

DCYF's coordination with federally supported judicial initiatives provides one of the strongest examples of alignment between child welfare services and federal programs. The Court Improvement Project (CIP), funded through federal child welfare court improvement appropriations, serves as a central mechanism through which the child welfare system and the judiciary jointly develop and revise statewide protocols related to abuse and neglect cases, permanency expectations, termination of parental rights, and the participation of children and youth in court. These protocols directly inform DCYF's policies, standard operating procedures, training curricula, and case documentation requirements. CIP and the Model Court Executive Team convene monthly, with representation from DCYF, CASA, Office of Child Advocate (OCA), parent attorneys, judges, and related court staff. Through these meetings, partners review statewide data, examine systemic challenges, analyze case level trends, and coordinate revisions to practices and protocols affecting both systems. The result is a clear and traceable influence of federally supported judicial work on DCYF's practice standards, timelines, and expectations for family engagement, permanency planning, and legal processes

Similarly, collaboration with the Children's Justice Act (CJA) builds alignment between DCYF and federally funded efforts to improve the Multidisciplinary Team (MDT) response to child abuse and neglect. CJA supports enhancements to investigative protocols, fosters collaboration with law enforcement and Child Advocacy Centers, and strengthens cross-system training. By working closely with CJA, DCYF benefits from improvements in forensic interviewing standards, investigative quality, and multidisciplinary practices, all of which contribute to more coordinated safety responses and align with federal requirements around child maltreatment investigation processes.

DCYF also coordinates extensively with federally supported community-based prevention partners, most notably the New Hampshire Children's Trust, the state's Community-Based Child Abuse Prevention (CBCAP) grantee. The Children's Trust oversees the Family Resource Center of Quality (FRC-Q) system, supports kinship navigation initiatives, and provides technical assistance and training to community-based prevention agencies. Through their partnership, DCYF and the Children's Trust align prevention strategies with federal expectations, support statewide access to voluntary family support services, and

strengthen kinship and caregiver resources—functions that directly relate to CFSP goals around reducing maltreatment and preventing unnecessary system involvement.

DCYF's coordination with federally funded programs administered through the New Hampshire Department of Health and Human Services (DHHS) strengthens the state's capacity to deliver integrated and comprehensive services to children and families. Through partnerships with Medicaid, Children's Behavioral Health, Developmental Services, and Temporary Assistance for Needy Families (TANF), DCYF aligns access to physical and behavioral health care, developmental supports, and economic stabilization resources with child welfare needs. These interdepartmental relationships support shared policy development, joint training, coordinated service standards, and aligned data reporting practices. The APSR reflects how federal program requirements and DHHS initiatives inform DCYF's strategic priorities, including family strengthening, behavioral health integration, evidence-based service expansion, modernized data systems, and improved service matching across programs. Through these collaborations, federally funded DHHS programs directly influence DCYF's policies, training, service array development, and quality improvement activities, ensuring that CFSP services are reinforced by broader state and federal systems.

At the community level, coordination with federally assisted programs is reflected in the day-to-day work of DCYF district offices. Field documentation shows routine collaboration with local law enforcement (supported through federal justice funding streams), public schools (including federally supported special education programs), hospitals and substance-use treatment providers (including those supported by federal substance abuse and mental health grants), and Child Advocacy Centers (supported through federal VOCA and CJA funding). District offices participate in WRAP team meetings with schools, multidisciplinary meetings with housing authorities and mental health centers, and case review meetings with CACs and county attorneys. They conduct joint trainings with law enforcement and fire/rescue personnel, collaborate with Head Start programs funded by the federal Office of Head Start, and engage with community support organizations that receive federal family support or early intervention funding. These ongoing interactions ensure that DCYF's responses are informed by partner systems, particularly where child safety and family needs intersect with federally funded services.

DCYF's coordination with lived-experience programs—though not federally funded in a traditional sense—enhances the agency's responsiveness to community needs and strengthens its alignment with federal expectations around family engagement, youth voice, and cultural responsiveness. Parent Partners, the Father Engagement Action Team (FEAT), the Youth Advisory Board (YAB), the Youth Action Pool (YAP), and the Respect & Engagement Team all provide experiential insight that informs policy revisions, case practice improvements, and APSR development. These programs help DCYF adjust service expectations, communication practices, and training content to better align with the lived realities of families and youth. Their feedback, when layered onto coordination with federal programs, contributes to a more comprehensive, community-responsive service array that is informed by both federal partners and local stakeholders.

The APSR process itself reflects DCYF's coordination with federal partners, as the development of APSR content incorporates data from federal reporting systems such as AFCARS and NCANDS, federal requirements under CAPTA, feedback from CIP and CJA initiatives, and insights from federally supported prevention networks. This integration ensures that CFSP activities align with federal guidance, national performance expectations, and emerging federal priorities.

New Hampshire received an overall rating of Area Needing Improvement for Item 31 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and collected during interviews with stakeholders showed that the state meets with an array of key internal and external stakeholders. However, stakeholders said that a more meaningful collaboration that includes input into agency policies and practices needs to be established with the court system to achieve the agency's overall goals and objectives.

Stakeholder feedback from CFSR Round 3 indicated that while coordination with federal programs was present, it lacked consistent structure and did not always result in clear practice or policy changes. Current evidence shows a substantially strengthened coordination infrastructure. DCYF now participates in routinely scheduled, cross-system meetings with courts, CASA, CJA, and federally supported prevention partners; integrates lived-experience voices into policy development; and relies on federal reporting and oversight mechanisms to guide improvement priorities. These coordinated efforts have expanded DCYF's ability to respond promptly to community needs, adjust services based on stakeholder input, and align statewide practice with federal expectations

Currently, the state's coordination with federal programs reflects a system that is integrated, responsive, and grounded in cross-system collaboration. Through its partnerships with CIP, CJA, Medicaid, TANF, Children's Behavioral Health, the NH Children's Trust, federally supported education and early childhood programs, and the diverse array of federally funded community agencies operating across New Hampshire, DCYF demonstrates a clear commitment to aligning child welfare services with federal resources and to ensuring that community needs drive system responsiveness. This coordinated approach strengthens the overall functioning of the child welfare system and reflects substantive progress since the Round 3 review. This item is rated a strength.

Item 33 Standards Applied Equally: Strength

Item 33 measures how well the State's foster and adoptive parent licensing, recruitment, and retention system ensures that licensing standards are applied equally and consistently across all licensed or approved foster family homes and child care institutions. This item evaluates whether statewide rules and requirements—particularly safety-critical standards such as background checks, home inspections, and home study assessments—are uniformly implemented regardless of caregiver type, geographic region, or the involvement of private child-placing agencies. The intent of Item 33 is to ensure that every child placed in foster care is served in a home that meets the same foundational standards of safety and quality.

The evaluation of Item 33 relied on a review of New Hampshire's statutory and administrative licensing framework, including Administrative Rules He-C 6446 and He-C 6447, as well as DCYF's statewide licensing structures and documentation outlining how the Licensing & Evaluation Unit oversees applications, home studies, and waivers. The analysis incorporated information from statewide licensing practices during SFY 2024 and SFY 2025 and included review of federal oversight findings, particularly the 2025 Title IV-E Foster Care Eligibility Review. The method focused on understanding whether the same licensing standards and safety requirements are enforced consistently across caregiver types—including general foster parents, kinship caregivers, and homes supported by private child-placing agencies—and whether monitoring and oversight systems function effectively to maintain uniformity.

DCYF's licensing system is grounded in a strong statewide regulatory framework that establishes clear, uniform requirements applicable to all licensed foster family homes. Administrative Rule He-C 6446 governs general foster care licensing, applying to all applicants, household members, and licensing agencies, while He-C 6447 provides a defined structure for kinship licensing that maintains safety while reducing barriers for relatives. All applicants undergo mandatory criminal background checks, State Central Registry checks, home walkthroughs, SAFE home studies or Kinship Home Studies, and required safety inspections. Safety-critical requirements—such as fingerprint-based checks and fire or health inspections—cannot be waived under any circumstances, ensuring statewide consistency in minimum safety thresholds.

The State applies these standards equally across caregiver types. General foster parents and kinship caregivers follow two separate but standardized sets of requirements, and all applicants within each caregiver category must meet the same criteria. Relatives who do not pursue licensure can still receive placement, but they must first meet a statewide set of preliminary safety checks—central registry checks, local police reviews, home walkthroughs, and review of agency records—which ensures the same baseline safety protections are applied even outside the licensing process. For licensed homes, a centralized Licensing & Evaluation Unit conducts all home study assessments and reviews all licensing decisions, ensuring statewide uniformity and preventing variations in regional interpretation.

The State also maintains a consistent structure for reviewing and approving waivers for non-safety requirements. The waiver process includes a standardized request form, supervisory review, and final approval by DCYF leadership. While non-safety requirements such as training timelines or certain medical forms may be waived when justified, waivers cannot be granted for mandatory safety requirements. All waivers and licensing actions are documented in the Bridges Resource Module. Although DCYF recognizes that statewide quantitative waiver tracking could be strengthened, the approval structure itself is standardized and uniformly applied.

Monitoring and oversight of licensing decisions are carried out through both state systems and federal review processes. The Bridges electronic system tracks licensing timelines, reminders, waivers, and renewals, and supervisors conduct reviews of licensing files and determinations. All licensing decisions—including provisional licenses, kinship permits, and ICPC-related decisions—are routed through the Licensing & Evaluation Unit, providing a centralized mechanism to ensure consistent statewide application of standards.

Federal oversight further validates the consistency of DCYF's licensing practices. During the 2025 Title IV-E Foster Care Eligibility Review, federal reviewers examined both case records and provider licensing files associated with the statewide sample. The review confirmed that all foster homes used during the period were fully licensed and met required federal safety standards. When two cases raised questions about potential licensing lapses, DCYF provided documentation confirming that licensure had remained continuous, demonstrating diligence in monitoring compliance. Importantly, none of the review's findings related to foster home licensing or background check failures. The federal review concluded that DCYF's foster care program was in substantial compliance with federal eligibility requirements, reinforcing that the State applies licensing standards consistently and correctly.

Strengths identified through the analysis include:

- centralized state authority over all licensing decisions, which eliminates regional variability;
- uniform statewide licensing rules and standardized assessment tools, including SAFE and Kinship Home Studies;
- mandatory safety requirements that cannot be waived; and
- consistent federal confirmation of proper licensing across sampled cases.

In Round 3, New Hampshire received an overall rating of Area Needing Improvement for Item 33 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and collected during interviews with stakeholders described situations in which placements did not conform to the home's license standards. For example, in some homes, the number of children placed exceeded the license capacity of the home, and in other homes, children were placed who did not meet the age ranges specified. Stakeholders also said that the fire code requirements for licensure varied across the state as did the application of those standards by the fire marshals.

Overall, the analysis indicates that DCYF's licensing system functions effectively and equitably, applying standards uniformly across the State. While improvements in quantitative waiver tracking and internal quality assurance reviews would strengthen monitoring, the licensing framework itself is solid, and federal review findings affirm that the State's practices meet both state and federal requirements. DCYF's foster and adoptive parent licensing system demonstrates consistent application of standards to ensure safety and quality in all licensed and approved foster family homes. This item is rated a strength.

Item 34 Requirements for Criminal Background Checks- Area Needing Improvement

Item 34 measures how well the State's foster and adoptive parent licensing, recruitment, and retention system ensures compliance with all federal requirements for criminal background clearances prior to the licensing or approval of foster and adoptive homes. The item evaluates whether the State's processes—including policy, procedures, and case planning practices—consistently safeguard children by ensuring that all required background checks are completed before placement and that ongoing monitoring mechanisms are in place to prevent children from entering unsafe or noncompliant homes.

The evaluation of Item 34 relied on a review of State statutory and administrative requirements, DCYF licensing procedures, and documented practices for conducting and verifying required background checks. The assessment used information from RSA 170-E, Administrative Rules He-C 6446 and He-C 6447, and agency documentation describing processes used in SFY 2024 and SFY 2025. The method included reviewing licensing steps, safety review procedures, compliance monitoring activities, and known operational limitations in the Bridges information system. This analysis focused on whether the State's processes function as intended, whether they are applied consistently statewide, and whether the necessary system supports exist to ensure compliance.

Analysis of this item shows that DCYF maintains a strong statutory and regulatory framework requiring comprehensive criminal background checks for all foster and adoptive applicants. Requirements include fingerprint-based FBI checks, statewide and local criminal record checks, State Central Registry checks, and out-of-state registry checks for all states in which applicants have resided in the past five years.

DCYF's licensing process reflects these statutory expectations and includes multiple layers of oversight such as manual licensing reviews, quarterly Caregiver Coordinator contacts, the mandated storage of fingerprints as required by the FBI, and tri-annual audits of Child Placing Agencies to ensure procedural fidelity. These structures demonstrate that the State's foundation for ensuring child safety through background checks is strong and clearly defined.

Despite this solid regulatory framework, system functioning remains inconsistent across the State. Implementation of required checks still relies heavily on staff awareness and manual processes rather than automated safeguards. There are no electronic alerts within Bridges to notify staff when household members turn 18 and require background checks, and no automated mechanism exists to prevent a child from being placed into a home before all required checks have been completed. These gaps increase the likelihood of human error and variability in practice. The absence of a DCYF-specific policy governing background check procedures means that implementation depends solely on RSA and Administrative Rules, without the benefit of a unified operational protocol to guide frontline staff.

The State continues to experience challenges ensuring timely and complete background checks prior to placement, especially in kinship settings. Kinship placements frequently occur before fingerprint-based checks have been completed, and this practice is documented as occurring in all fictive kin and relative placements. Without a clear policy restricting placement prior to completed checks, and without system-level triggers to enforce compliance, the agency cannot guarantee that all placements meet federal safety requirements at the moment of placement. These challenges parallel those identified during the federal CFSR Round 3, where inconsistent application of background check requirements and technological barriers were identified as key issues. Many of those concerns persist today, particularly in the continued lack of automated processes and inconsistent application for relative caregivers.

The assessment also found that data tracking related to background checks is hampered by limitations within Bridges. The resource module is described as difficult to use and often unreliable, resulting in incomplete or inaccurate information about licensure status, background check completion, and compliance timelines. Due to these system issues, staff frequently rely on external tools, such as SmartSheets, to track licensing and background check requirements, indicating that the primary system does not adequately support compliance monitoring. Additionally, no internal licensing audits are conducted within DCYF, leading to a lack of structured internal oversight to validate whether background check requirements are being consistently met statewide.

Strengths within the system include strong collaboration between internal units such as the Special Investigations Unit, Caregiver Coordinator Unit, Licensing and Evaluation Unit, and field staff. These collaborative efforts help ensure that safety concerns are addressed promptly when identified. The State also maintains clear processes for responding to licensing violations, issuing Orders to Comply, and removing children immediately when safety concerns are substantiated. These responsive actions demonstrate a commitment to safety even when preventive system functions are limited.

However, operational gaps remain significant. Without automated system supports, updated policy, or effective data tracking tools, the State cannot ensure consistent compliance with federal background check requirements across all placement types and regions. Kinship placements in particular continue to occur without full completion of required checks, and there are no structural safeguards to prevent this practice. While the legal framework is robust, the State lacks the operational infrastructure necessary to fully implement and monitor compliance.

In Round 3, New Hampshire received an overall rating of Area Needing Improvement for Item 34 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and collected during interviews with stakeholders showed that, although the state requires criminal background clearances for foster and adoptive families prior to placement and requires fingerprint-based clearances prior to licensure, the process is not consistent for relative caregivers.

Stakeholders also said that the Live Scan Fingerprinting System, which is newly administered, is not easily available to prospective foster parents consistently throughout the state. This can result in licensing delays as prospective foster parents attempt to obtain the required background checks.

Overall, DCYF demonstrates strong statutory expectations for criminal background checks but inconsistent statewide implementation. System limitations—including the lack of automated alerts, absence of a comprehensive DCYF policy, weaknesses in Bridges, and the reliance on manual processes—hinder the State's ability to ensure full compliance with federal requirements. Based on these findings, the systemic factor is partially functioning and does not yet reflect consistent or reliable statewide performance. This item remains an area needing improvement.

Item 35 Diligent Recruitment of Foster and Adoptive Parents: Area Needing Improvement

Item 35 evaluates whether the State has an effective, statewide process for diligently recruiting foster and adoptive families who reflect the racial and ethnic diversity of the children who need placement. It measures the extent to which recruitment efforts are data-driven, equitable, and responsive to the demographic characteristics, placement needs, and cultural identities of children entering foster care.

Data used to assess DCYF's diligent recruitment efforts were collected from BRIDGES, the State's child welfare information system, and from the DCYF Caregiver–Youth Ethnicity Matching Analysis for SFY 2024 and SFY 2025. These datasets included youth placement dates, placement settings, and race and ethnicity, along with licensed caregiver race and ethnicity and household composition. This allowed the state to evaluate demographic trends and analyze racial and ethnic matching between children and their caregivers.

Analysis shows that the racial and ethnic composition of licensed caregivers does not fully reflect the diversity of children in foster care. In SFY 2024, 72% of children in care were White, 10% were Hispanic/Latino, and 6% were Black. In SFY 2025, the proportions were 69% White, 12% Hispanic/Latino, and 4% Black. During the same period, licensed caregivers were overwhelmingly White—87% in SFY 2024 and 88% in SFY 2025—while Hispanic/Latino caregivers represented only 9% and 8%, and Black caregivers just 1% in each year. *(Data Source: NH SACWIS/Bridges)*

Racial and ethnic matching analyses show that many children were placed with at least one caregiver who shared their race or ethnicity. In SFY 2024, 336 children experienced such a match, and in SFY 2025, 408 children did. While these outcomes appear strong, they were largely driven by the high number of White children and White caregivers. Black children were much less likely to be placed with caregivers of the same race because of the very limited number of Black licensed foster caregivers statewide.

DCYF's recruitment system is centralized within the DCYF Recruitment and Retention Program, which relies heavily on data-informed planning. Recruitment strategies draw on BRIDGES data, BEAR analytics, statewide caregiver surveys, and Smartsheet tracking that monitors every prospective caregiver

from initial inquiry through licensing. The state uses a single statewide entry point for inquiries, weekly informational webinars, targeted digital campaigns, and coordination between Recruitment staff and district offices. Recruitment planning is reviewed regularly using semiannual reports, data dashboards, and district-specific feedback to ensure alignment with statewide needs.

To support diverse and culturally responsive caregiving, DCYF offers ongoing informational sessions and training addressing cultural humility, stigma and bias, English as a Second Language (ESL) needs, and diverse cultural backgrounds. The annual Caregiver Village Conference includes training sessions such as Trans-Racial Fostering and Adoption, Kinship and Other Unrelated Foster Relationships, and Preserving Sibling Contact. Community-based organizations participate in the conference to provide additional culturally relevant supports to caregivers.

The state also implements targeted recruitment strategies for children with special needs and those who are more difficult to place, including adolescents, large sibling groups, medically fragile children, and youth with autism, behavioral health needs, communication challenges, or mobility limitations. These strategies include targeted social media campaigns, child-specific recruitment through AdoptNH, the use of "Look Books" that highlight children needing placement, topic-specific workshops for caregivers, and engagement during statewide caregiver support calls. A specialized recruitment contract for older youth is expected to begin in July 2026.

DCYF maintains a strong kinship-first philosophy to preserve children's familial and cultural connections. Caseworkers must identify and engage kin before considering non-relative placements. Kinship caregivers receive early support from the Caregiver Coordinator Unit within 72 business hours of placement, followed by quarterly outreach, required home visits, ongoing guidance, and post-placement surveys. Kinship licensing is supported through administrative rule changes intended to simplify requirements, and kinship-focused training is offered through conferences and caregiver education opportunities.

In Round 3, New Hampshire received an overall rating of Area Needing Improvement for Item 35 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment showed that consistent recruitment is not occurring and that recruitment is generally left to the local districts. There is no centrally organized recruitment plan for the state. Stakeholders said that there is a problem with retention due to a lack of support for foster parents.

Despite a well-structured recruitment infrastructure, strong kinship engagement, and extensive caregiver supports, the caregiver pool does not yet fully reflect the racial and ethnic diversity of the children served. The extremely limited number of Black caregivers restricts opportunities for racial matching for Black children, and the lack of region-specific data limits the state's ability to identify precise geographic gaps. Additionally, constraints on race-specific recruitment limit targeted outreach efforts. As a result, while DCYF's system is functioning and continually improving, further work is needed to expand caregiver diversity and strengthen equitable placement outcomes across the state. This item remains an area needing improvement.

Item 36 State Use of Cross-Jurisdictional Resources for Permanent Placements: Area Needing Improvement

Item 36 evaluates how effectively New Hampshire uses cross-jurisdictional resources to facilitate timely adoptive and permanent placements for NH's waiting children. In accordance with ICPC definitions and for the purposes of this evaluation, New Hampshire is considered the sending state when it requests another state to conduct a home study, and the receiving state refers to the state that is responsible for completing that home study. Therefore, the timeliness metric for Item 36, including whether home studies are completed within the federally recommended 60-day timeframe, reflects how quickly receiving states complete the studies that New Hampshire has requested. This understanding is critical, because New Hampshire's performance as the sending state depends heavily on the responsiveness and processing timelines of receiving states.

To evaluate Item 36, the state conducted a comprehensive review of both quantitative and qualitative data sources. Quantitatively, this included an analysis of New Hampshire SACWIS ICPC transmission data, which documents outgoing ICPC requests from New Hampshire, the number of home studies completed by receiving states, completion timeframes, and compliance with the 60-day federal expectation. Qualitative evaluation relied on the program's descriptions of ICPC processes, staffing structures, supervisory oversight, use of tracking systems, and documented barriers encountered when interacting with receiving states. Federal guidance embedded in the CFSR Round 4 Stakeholder Interview Guide was also used to ensure the review addressed required areas such as systemic processes, barriers to timely completion, and data quality considerations. This combination of quantitative SACWIS data and qualitative APSR reporting allows for a comprehensive understanding of how effectively New Hampshire functions as a sending state.

New Hampshire's outgoing ICPC data for SFY 2024 and 2025 show that only 6 of 33 outgoing home studies were completed within 60 days, representing an overall timeliness rate of 18.2 percent. Timeliness was 15.4 percent in SFY 2024 and 28.6 percent in SFY 2025. These findings reflect a significant decline from the 59 percent timely completion rate reported during CFSR Round 3, and thus demonstrate regression rather than improvement in meeting federal expectations. The average completion time for studies not completed within 60 days was extremely long—387.3 days in SFY 2024 and 304.2 days in SFY 2025—indicating substantial delays occurring after requests are sent from New Hampshire to receiving states. *(Data Source: NH SACWIS/Bridges)*

As the sending state, New Hampshire generally meets expectations for the preparation and transmission of outgoing ICPC packets. The APSR describes several strengths, including assignment of incoming packets within five business days, outgoing packets sent within five business days (or one day for residential requests), use of Smartsheet tracking, and routine supervisory oversight. These processes help ensure that New Hampshire's responsibilities as the sending state are completed promptly. However, the APSR also identifies that some outgoing packets may be incomplete or require follow-up for missing documentation, which can contribute to delays before the receiving state begins its assessment. Documentation challenges, difficulties obtaining collateral information, and high caseloads may also slow the assembly of fully complete packets.

Despite these factors, the most substantial delays occur after the receiving state receives a complete packet. The APSR identifies several common reasons receiving states take longer than 60 days to complete home studies, including families becoming unresponsive, delays related to required collateral

information such as mental health or substance use evaluations, and state-specific procedural barriers. For example, some receiving states, do not permit provisional placement, which extends the timeline for completing full home study requirements. These receiving-state delays account for the extraordinarily long completion times reflected in the ICPC data. Thus, while New Hampshire has some opportunities to improve the completeness and consistency of its outgoing packets, the data show that receiving state processes represent the primary barrier to timely completion of home studies.

When evaluating Item 36, it is essential to distinguish between delays attributable to New Hampshire as the sending state and those due to receiving states. New Hampshire's administrative processes and internal timelines appear largely compliant with ICPC expectations. Most documented delays occur after responsibility transfers to the receiving state, as shown by the lengthy average completion times.

Nevertheless, since the CFSR assesses timeliness from the sending state's perspective, New Hampshire is ultimately accountable for the overall timeliness of outgoing ICPC requests, even when the delays occur outside the state's control.

In Round 3, New Hampshire received an overall rating of Area Needing Improvement for Item 36 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and collected during interviews with stakeholders showed that the state does not have an effective process to ensure that cross-jurisdictional resources are used to facilitate timely adoptive and permanent placements for waiting children. The state does not have the ability to complete home studies on Interstate Compact on the Placement of Children (ICPC) cases within the 60-day timeline, and data in the statewide assessment showed that 59% of ICPC home studies are completed within 60 days.

Overall, New Hampshire continues to experience challenges ensuring timely cross-jurisdictional placements due to the low percentage of home studies completed within 60 days. While internal processes show strengths, the data indicate that receiving state delays are the principal factor contributing to noncompliance with federal expectations. For these reasons, consistent with both the Round 3 findings and current performance, Item 36 remains an area needing improvement.