Round 4 CFSR

Arkansas Child and Family Service Review Statewide Assessment



ARKANSAS DEPARTMENT OF HUMAN SERVICES

DIVISION OF CHILDREN AND FAMILY SERVICES, Round 4 CFSR Statewide Assessment

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Arkansas Department of Human Services

Division of Children and Family Services

Round 4 Child and Family Services Review

Statewide Assessment

2025

Minor formatting adjustments may have been made to this document for 508 compliance. Content is unaffected.

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SECTION 1: GENERAL INFORMATION

List of Statewide Assessment Participants

The table below provides the names, affiliations, and roles of the individuals who participated in the statewide assessment process. Individuals with lived experiences are identified by an asterisk (*) by their names.

Name	Organization/Location	Position/Title	Role in Statewide Assessment
Tiffany Wright	DCFS Central Office	DCFS Director	CFSR Planning Team
Leslie Sebren	DCFS Central Office	DCFS Deputy Director	CFSR Planning Team
Amber Sartain	DCFS Central Office	DCFS Assistant Director	CFSR Planning Team
Megon Dade	DCFS Central Office	DCFS Assistant Director	CFSR Planning Team
Tracy Holloway	DCFS Central Office	DCFS Assistant Director	CFSR Planning Team
Heather Fendley	DCFS Central Office	DCFS Program Administrator	CFSR Planning Team
Lori Hutto	DCFS Central Office	SDM Program Manager	CFSR Planning Team
Tyronza Hampton	DCFS Central Office	DCFS Program Manager	CFSR Planning Team
Brooke Steen	Administrative Office of the Courts	Juvenile Division Director	CFSR Planning Team
Makeisha Davis	Administrative Office of the Courts	Data Analyst	CFSR Planning Team
Tori Foreman	Administrative Office of the Courts	Court Improvement Program Coordinator	CFSR Planning Team
Daniel Brightwell	DHS Office of Chief Counsel	DHS Attorney Director	CFSR Planning Team
Nellena Garrison	DHS Office of Systems and Technology	AR Focus Manager	CFSR Planning Team/Data Analysis
Audrey Martin	DHS Office of Systems and Technology	CHRIS Manager	CFSR Planning Team/Data Analysis
Paul Knipsher	Evident Change	Senior Analyst	Data Analysis / Support

Section I: General Information

Name	Organization/Location	Position/Title	Role in Statewide Assessment
Lendy Eichelberger	Evident Change	CQI Project Manager	Data Analysis / Support
Jeremy Holstead	UALR MidSOUTH	Data Coordinator	Data Analysis / Support
Sharra Singleton Litsey	Placement and Residential Licensing Unit	Licensing Specialist	Information and Support
Contonnia Brown	DCFS Central Office	Contracts Administrator	Information / Support
Melissa Everheart	DCFS Central Office	CFO	Information / Support
Terri Dost	DHS Office of Chief Counsel	DCFS Attorney Supervisor	Information / Support
Janet Bledsoe	Administrative Office of the Courts	Director	Focus Group Participant
Kurt Meridith	Administrative Office of the Courts	Data Director	Focus Group Participant
Kathie Hess	1st Judicial District	Judge	Focus Group Participant
Adam Weeks	3rd Judicial District	Judge	Focus Group Participant
Diane Warren	4th Judicial District	Judge	Focus Group Participant
Shanice Johnson	6th Judicial District	Judge	Focus Group Participant
Carlton Jones	8th Judicial District	Judge	Focus Group Participant
Blake Batson	9th Judicial District	Judge	Focus Group Participant
Donna Galloway	11th Judicial District	Judge	Focus Group Participant
Shannone Blatte	12th Judicial District	Judge	Focus Group Participant
Deanna Layton	14th Judicial District	Judge	Focus Group Participant
Lynn Williams	18th Judicial District	Judge	Focus Group Participant
Susan Weaver	20th Judicial District	Judge	Focus Group Participant
Mike Medlock	21st Judicial District	Judge	Focus Group Participant

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Name	Organization/Location	Position/Title	Role in Statewide Assessment
Barbara Elmore	23rd Judicial District	Judge	Focus Group Participant
Jeremy Landon	Administrative Office of the Courts	Attorney Ad Litem	Focus Group Participant
Greg Fallon	Administrative Office of the Courts	Attorney Ad Litem	Focus Group Participant
Evan Bell	Administrative Office of the Courts	Attorney Ad Litem	Focus Group Participant
Ashley Priest	Administrative Office of the Courts	Attorney Ad Litem	Focus Group Participant
Caroline Wilson	Administrative Office of the Courts	Attorney Ad Litem	Focus Group Participant
Ben Pollitzer	Office of Chief Counsel	DCFS Attorney	Focus Group Participant
Demarcus Tave	Office of Chief Counsel	DCFS Attorney	Focus Group Participant
Andrew Coleman	Office of Chief Counsel	DCFS Attorney	Focus Group Participant
Shelley Hart	CASA, Springdale	Program Director	Focus Group Participant
Robin Krneta	Child Advocacy Center/CASA, El Dorado	Program Director	Focus Group Participant
Celeste Davis	CASA, Pike and Clark	Executive Director	Focus Group Participant
Suzanne Herron	CASA, Tri-Lakes	Executive Director	Focus Group Participant
Angie Jones	CASA, Pulaski	Program Coordinator	Focus Group Participant
Danny Muniz	CASA, Statewide	Development Specialist	Focus Group Participant
Bessie Nazeem	MidSOUTH, Jonesboro	Classroom Trainer, Lead	Focus Group Participant
Paula Warner Hale	MidSOUTH, Fayetteville	Classroom Trainer	Focus Group Participant
Misty Blanton	Univ. AR Fayetteville	Classroom Trainer	Focus Group Participant
Cynthia Emerson	UALR, Arkadelphia	Classroom Trainer	Focus Group Participant

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Name	Organization/Location	Position/Title	Role in Statewide Assessment
Makesha Washington	MidSOUTH, Little Rock	Classroom Trainer	Focus Group Participant
Gale Perry	SAU, Hope	Classroom Trainer	Focus Group Participant
Shanell Robbins	Univ. of Monticello	Classroom Trainer	Focus Group Participant
Charraun Blackmon	MidSOUTH, LR	Classroom Trainer	Focus Group Participant
Lenora Jackson-Ayers	MidSOUTH, LR	CHRIS Trainer	Focus Group Participant
Mary Bolding	Univ. AR, Fayetteville	CHRIS Trainer	Focus Group Participant
Sonji Cline	MidSOUTH	CHRIS Trainer	Focus Group Participant
Nichole Warren	MidSOUTH, Farmington	Statewide Trainer	Focus Group Participant
Zedralyn Butler	MidSOUTH, Little Rock	Statewide Training Coordinator	Focus Group Participant
Felita House	Univ. Monticello, West Helena	Field Trainer	Focus Group Participant
Georgetta McGuire	Philander Smith College	Field Trainer	Focus Group Participant
Shelbye Yarbrough	SAU, Monticello	Field Trainer	Focus Group Participant
Lillian Dawn	Univ. Monticello, Monticello	Field Trainer	Focus Group Participant
Vanessa Socia	MidSOUTH, Sheridan	Field Trainer	Focus Group Participant
Katelyn Orona	UALR, Little Rock	Field Trainer	Focus Group Participant
Anthony Dosch	UALR, Hot Springs	Field Trainer	Focus Group Participant
Dekhorian Brown	MidSOUTH, LR	Field Trainer	Focus Group Participant
Alexia Hamilton	MidSOUTH, LR	Field Trainer	Focus Group Participant
Keith Merriweather	Philander Smith, LR	Field Trainer	Focus Group Participant
Kimberly Smith	Harding University	Field Trainer	Focus Group Participant

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Name	Organization/Location	Position/Title	Role in Statewide Assessment
Cat Ables	Univ. AR, LR	Field Trainer	Focus Group Participant
Erica Bowles	UofA, Van Buren	Field Trainer	Focus Group Participant
Krista Faulkner	AR Tech, Russellville	Field Trainer	Focus Group Participant
Amanda Wilson	AR Tech, Russellville	Field Trainer	Focus Group Participant
Shani Patterson	Univ. AR, Fort Smith	Field Trainer	Focus Group Participant
Jill Scott	Univ. AR, Springdale	Field Trainer	Focus Group Participant
Amanda Baker	Arkansas State Univ.	Field Trainer	Focus Group Participant
Paula Savage	University Monticello	Field Trainer, Supervisor	Focus Group Participant
Kelli Shankle	Univ. AR, Hartford	Field Trainer, Supervisor	Focus Group Participant
Brooke Carr	Arkansas State Univ.	Field Trainer, Supervisor	Focus Group Participant
Joannie Phelps	SAU, Monticello	Field Trainer, Supervisor	Focus Group Participant
Aaron Phillips	Univ. AR, Fayetteville	Field Trainer, Supervisor	Focus Group Participant
Tammy Vaughn	University Monticello	Field Trainer, Coordinator	Focus Group Participant
Cindy Thompson	MidSOUTH, Statewide	Field Trainer, Coordinator	Focus Group Participant
Holly Ricker	Univ. of AR, Sparkman	Data Coordinator	Focus Group Participant
Stephanie Clowers	MidSOUTH, Little Rock	Curriculum Lead	Focus Group Participant
Caroline Earleywine	MidSOUTH, Little Rock	Technical Writer	Focus Group Participant
Jalexsia Gooden	MidSOUTH, Little Rock	Technical Writer	Focus Group Participant
Carmien Penny	MidSOUTH, Little Rock	Technical Writer	Focus Group Participant

Name	Organization/Location	Position/Title	Role in Statewide Assessment
Tina Paxton	UALR, MidSOUTH	Child Welfare Process Coordinator	Focus Group Participant
Laura Mergele	MidSOUTH, Statewide	SOP Field Trainer Coordinator	Focus Group Participant
Shanta Porter	University Monticello	SOP Field Trainer	Focus Group Participant
Angela Newton	UALR, Arkadelphia	SOP Field Trainer	Focus Group Participant
Susan Pennington	S. AR Univ, Magnolia	SOP Field Trainer	Focus Group Participant
Kaylen Coke	UALR Statewide	SOP Field Trainer	Focus Group Participant
Stephanie Crommie	Arkansas State Univ.	SOP Field Trainer	Focus Group Participant
Danielle Webb	MidSOUTH, Jonesboro	SOP Field Trainer	Focus Group Participant
Jaden McFall	MidSOUTH, Jonesboro	Resource Parent Trainer	Focus Group Participant
Lauren McAlister	MidSOUTH	Resource Parent Trainer	Focus Group Participant
Rob Combs	UALR-Jonesboro	Resource Parent Trainer	Focus Group Participant
Tamela Cane	MidSOUTH, LR	Resource Parent Trainer	Focus Group Participant
Leticia Fox	MidSOUTH-Jonesboro	Resource Parent Trainer	Focus Group Participant
Carrie Bell	MidSOUTH	Resource Parent Trainer	Focus Group Participant
Cassandra Scott	DCFS Area 10	Area Director	Focus Group Participant
Natosha Lowrey	DCFS Area 1	Area Director	Focus Group Participant
Sarah Sharum	DCFS Area 2	Area Director	Focus Group Participant
Chalonda Williamson	DCFS Area 4	Area Director	Focus Group Participant
Felicia Price	DCFS Sebastian County	Supervisor	Focus Group Participant

Name	Organization/Location	Position/Title	Role in Statewide Assessment
Cassie Quezada	DCFS Pope County	Supervisor	Focus Group Participant
Wendy Switzer	DCFS Crittenden County	Supervisor	Focus Group Participant
Julie Brightwell	DCFS Independence	County Supervisor	Focus Group Participant
Jennifer Wunstel	DCFS Pulaski County	DR Supervisor	Focus Group Participant
Lashama Lee	DCFS Miller County	DR Supervisor	Focus Group Participant
Susan Townsend	DCFS Craighead County	Adoption Supervisor	Focus Group Participant
Gala Griffin	DCFS Miller County	Adoption Supervisor	Focus Group Participant
Sheila Swope	DCFS Pulaski County	Resource Supervisor	Focus Group Participant
Rachel Speights	DCFS Miller County	Investigation Supervisor	Focus Group Participant
Tessa Mann	DCFS Jackson County	TYS, Adoption, and Resource Supervisor	Focus Group Participant
Paula Woodside	DCFS Craighead County	Foster Care, Protective Services Supervisor	Focus Group Participant
William Stoecker	DCFS Cleburne County	Program Assistant	Focus Group Participant
Bobbie Rainey	DCFS Ouachita County	Program Assistant	Focus Group Participant
Claudia Zamora	DCFS Faulkner County	FSW DR	Focus Group Participant
Brandy Jones	DCFS Jackson County	FSW Adoption	Focus Group Participant
Shelby Williams	DCFS Sebastian County	FSW Adoption	Focus Group Participant
Jasmine Wilhelm	DCFS Pope County	FSW Adoption	Focus Group Participant
Minnie Griffin	DCFS Drew County	FSW Adoption	Focus Group Participant
Ruthann Murphy	DCFS Miller County	FSW Adoption	Focus Group Participant

Name	Organization/Location	Position/Title	Role in Statewide Assessment
Madison Mack	DCFS Arkansas County	FSW Generalist	Focus Group Participant
McKayla Whitley	DCFS Scott County	FSW Generalist	Focus Group Participant
Makaela Moody	DCFS Ashley County	FSW Generalist	Focus Group Participant
Oshaneia Nelson	DCFS Garland County	FSW Resource	Focus Group Participant
Melanie Chandler	DCFS Washington County	FSW Resource	Focus Group Participant
Hannah Karnes	DCFS Pope County	FSW Foster Care	Focus Group Participant
Aaron McClure	DCFS Pope County	FSW Foster Care	Focus Group Participant
Brenna McClure	DCFS Washington County	FSW Foster Care	Focus Group Participant
Casey Winchell	DCFS Miller County	FSW Investigator	Focus Group Participant
William Raiford	DCFS White County	Investigator Specialist	Focus Group Participant
Megan Goldman	St. Francis Ministries	Director of Contract Relations	Focus Group Participant
Mandy Kerperien	St. Francis Ministries	Program Administrator	Focus Group Participant
Gretchen Clayton	St. Francis Ministries	Clinical Supervisor	Focus Group Participant
Michelle Spann	Restore Hope, Lake City	Family Advocate	Focus Group Participant
Tara Morrell	Restore Hope, Mulberry	Resource Manager	Focus Group Participant
Tammy Henry	Restore Hope	Resource Manager	Focus Group Participant
Heather Edwards	Restore Hope, Fort Smith	Resource Manager	Focus Group Participant
Amy Grigg	Little Rock	Resource Manager	Focus Group Participant
Lauren Brown	Restore Hope 100 Families-Paragould	Coordinator	Focus Group Participant
Crystal Regalado	Restore Hope 100 Families- Monticello	Coordinator	Focus Group Participant

Name	Organization/Location	Position/Title	Role in Statewide Assessment
Paula Williams	Batesville School District/Restore Hope 100 Families	Teacher	Focus Group Participant
Sharon Long	Triple P Parenting	Statewide Coordinator	Focus Group Participant
Holly Wells	Triple P Parenting	Practitioner	Focus Group Participant
Chasity Giles	Triple P Parenting	Practitioner	Focus Group Participant
Felicia Brown	Triple P Parenting	Practitioner	Focus Group Participant
Jennifer Blasingame	Safe Care (Compact)	Enrollment Coordinator	Focus Group Participant
Renee Powell	Safe Care (Compact)	Enrollment Coordinator	Focus Group Participant
Allie Ramirez	Safe Care, Area 4	Direct Service	Focus Group Participant
Barbara Chirinos	Safe Care (ACH)	Hospital Director	Focus Group Participant
Lindsay Roberts	Foster Love, Paragould	Program Rep.	Focus Group Participant
Kathleen Housley	Housley Counseling, Fayetteville	LPC	Focus Group Participant
Courtney Ridings	Youth Villages	Program Rep.	Focus Group Participant
Whitney Fraley	Crowley's Ridge Development Council	Coordinator	Focus Group Participant
Melissa Capuano	OBHAW	County Coordinator	Focus Group Participant
Julia DesCarpentrie	The Call	Trainer	Focus Group Participant
Sharese Handie	AR River Edu. Coop.	Safe Care Coord.	Focus Group Participant
Brandon Tittle	The Contingent	Director	Focus Group Participant
Jacob Atchley	Van Buren	Resource Parent	Focus Group Participant
Lacey Atchley	Van Buren	Resource Parent	Focus Group Participant

Name	Organization/Location	Position/Title	Role in Statewide Assessment
Ann Clem Foster	Rogers	Resource Parent	Focus Group Participant
Kallie Burleson	Sheridan	Resource Parent	Focus Group Participant
Abigail Bymaster	Monticello	Resource Parent	Focus Group Participant
Tiffani Kennedy	Benton	Resource Parent	Focus Group Participant
Emma McGrath	Little Rock	Resource Parent	Focus Group Participant
William McGrath	Little Rock	Resource Parent	Focus Group Participant
Isis Trautman	AR Support Network, Springdale	Director	Focus Group Participant
Ashley Enslow	NWA Children's Shelter, Bentonville	Director of Youth Services	Focus Group Participant
Christy Ward	Hillcrest Family Services	Case Manager	Focus Group Participant
Lonni Elliott	Compact Family Services	Director	Focus Group Participant
Courtney Bishop	Pinnacle Pointe	CEO	Focus Group Participant
Candy Smith	Consolidated Youth Services	Facility Director	Focus Group Participant
Kerri Bangert	Consolidated Youth Services	Director of Contracts and QA	Focus Group Participant
Anita Daniels	Youth Villages	Program Rep.	Focus Group Participant
Ashley Allender	Youth Villages	Placement Mgr.	Focus Group Participant
Sebrina Patton	Youth Homes	Staff	Focus Group Participant
Beverly Foti	Youth Homes	Therapist	Focus Group Participant
Craig Gammon	Methodist Children's Homes	Administrator	Focus Group Participant
Fred Knox	Rivendell	CEO	Focus Group Participant
Megan Miller	Rivendell	Staff	Focus Group Participant

Name	Organization/Location	Position/Title	Role in Statewide Assessment
Ambra Conway	The Answer	Coordinator	Focus Group Participant
Amy Hughes	The Answer	Director	Focus Group Participant
Cara Matthews	Ouachita Children's Shelter	Shelter Manager	Focus Group Participant
*Alyssa Bishop	Area 2	Youth/Lived Experience	Focus Group Participant
*Keiry Castaneda	Area 5	Youth/Lived Experience	Focus Group Participant
*Diamon Horner	Area 10	Youth/Lived Experience	Focus Group Participant
*A'Tiyana Willis	Area 10	Youth/Lived Experience	Focus Group Participant
Kara Georgi	Lead Senior Associate of Parent Partnerships	Technical Advisor	Focus Group Participant
*Latosha Taylor	Area 5	Parent/Lived Experience	Focus Group Participant
*Lisa Crowe	Area 8	Parent/Lived Experience	Focus Group Participant
*Charles 'Tony' Ortner	Area 2	Parent/Lived Experience	Focus Group Participant
*Delanie Pinchbeck	Area 5	Parent/Lived Experience	Focus Group Participant
*Leia Holland	Area 3	Parent/Lived Experience	Focus Group Participant
*LaSasha Castleberry	Area 2	Parent/Lived Experience	Focus Group Participant
*Torre Hogue	Areas 3 and 6	Parent/Lived Experience	Focus Group Participant
Mindy Tuck-Duty	FSW/Cherokee	Tribal Representative	Focus Group Participant
Brian Walkabout	FSW/Cherokee	Tribal Representative	Focus Group Participant
Amber Scott	Choctaw Nation	Tribal Representative	Focus Group Participant
Kim Phillips	Seneca Cayuga	Tribal Director	Focus Group Participant
Emily Sheild	Seneca Cayuga	CPS Worker	Focus Gorup Participant

Description of Stakeholder Involvement in the Statewide Assessment Process

The Arkansas Department of Children and Family Services (DCFS) highly values and prioritizes the engagement of stakeholders throughout the development and evaluation of the child welfare systematic process. This collaborative approach has been an integral part of Arkansas DCFS's continuous efforts to enhance service delivery and outcomes for children and families. This inclusion of stakeholder input is fluid to DCFS operations and not segmented to a one-time engagement effort. In preparation and development of Round 4 CFSR, Arkansas DCFS met with these groups with a specific set of questions to gain perspective, presented data, and gathered information for input. Details of this stakeholder engagement are provided below.

CFSR Planning Team

Arkansas DCFS established a Planning Team to facilitate continuous input and feedback regarding systematic processes and assessments. The team comprises leadership from DCFS, key state agencies, legal experts, family support representatives, and individuals with lived child welfare experience. The Planning Team reviewed all aspects of statewide assessment items and incorporates stakeholder perspectives into its findings. The Planning Team prepares state leadership for upcoming reviews, aids in disseminating review outcomes, and assists in the development of a Program Improvement Plan (PIP). The team plans to expand its membership to include a broader range of external stakeholders to ensure comprehensive representation.

Resource Parent Advisory Council

The Resource Parent Advisory Council meets monthly and includes licensed resource parents, resource workers, and agency representatives. The council contributes vital recommendations and insights to DCFS leadership, ensuring that policies and practices align with realities faced by resource families. Writers capture their input and voice in as many areas as possible. This group's input reinforces the importance of resource parent voices in shaping policies that directly affect their caregiving roles.

Youth Advisory Board

The Arkansas DCFS Youth Advisory Board was established to provide a platform for youth who have experienced the foster care system to voice their needs and perspectives. The Youth Advisory Board meets monthly and actively participates in initiatives aimed at improving the foster care experience. They meet with leadership to discuss their lived experiences and suggest enhancements for service delivery. Feedback from the Youth Advisory Committee and their perspectives were woven into the systematic findings to ensure youth-centric solutions.

Arkansas Court Services

Arkansas DCFS engages in regular collaboration and quarterly meetings with court staff (Judicial,

CASA, Probation) for sharing information and ideas. The court staff provided information and insight for statewide assessment as written.

Focus Groups

During the formal CFSR evaluation, stakeholders at all levels were actively included in structured focus groups and comprehensive reviews of relevant systemic factors, specifically concerning key stakeholder groups. The insights gathered from these focus groups were documented in the 'stakeholder feedback' section of applicable systemic factor descriptions. This feedback was integral in assessing whether specific systemic factors functioned as strengths or required further enhancement. In cases where system factors and data provided by stakeholders outside of DCFS influenced a particular systemic factor, these stakeholders were incorporated into the development process of the final systemic factor assessment.

Ongoing Stakeholder Involvement

Arkansas DCFS engages with stakeholders beyond formal assessments, especially in the development and implementation of new practices and policies. Workgroups composed of DCFS staff, external partners, and community advocates collaborate to shape policies that strengthen the child welfare system. Once policies are developed, they undergo further review by the Secretary's office and the Governor's office before public commentary and legislative consideration.

Including stakeholders at every stage of policy and practice development ensures that the implementation is effective, comprehensive, and reflective of community needs. During formal CFSR evaluations, input from stakeholders was pivotal in assessing system factors and identifying strengths and areas for improvement. Arkansas DCFS is committed to a transparent process that integrates external feedback into systemic assessments, demonstrating its dedication to continuous improvement and excellence in child welfare.

Since the last Child and Family Services Review, stakeholders have provided input into the development of DCFS' Practice Model, At One Table, implementation of Safety Organized Practice, and implementation of Structured Decision Making.

SECTION II: STATE CONTEXT AFFECTING OVERALL PERFORMANCE

Part 1: Vision and Tenets

Agency Information

The Division of Children and Family Services (DCFS) works to ensure safety and permanency for children and youth of all ages and to strengthen families. The Division, which is comprised of more than a thousand employees across 10 service areas throughout the state, work alongside national and local partners to respectfully engage children and youth, families, and communities to prevent and protect them from child abuse and neglect, provide safety and stability through foster care, and permanency through reunification, adoption, and other services.

Tiffany Wright serves as the Director of the Division of Children and Family Services (DCFS). In this role, she is responsible for the safety of children and youth in Arkansas, child abuse and neglect prevention, foster care, and adoption programs. She has a proven track record of building strong teams that result in positive outcomes for vulnerable children.

Arkansas DCFS initiated the At One Table Practice Model representing the culmination of our collective vision that every child deserves a safe, stable, and nurturing family every day. The Practice Model illustrates how we work together every day to translate our vision and values into DCFS' practice with children and families by providing supervisors, managers, and field staff with concrete examples of the practices that best reflect our child welfare culture. At One Table offers a metric that can be used to identify what is working well, what needs improvement, and to determine next steps so that we are continuously evolving and improving as an organization.

Vision

Every child has a safe and stable family every day.

DCFS Priorities

The Arkansas Division of Children and Family Services (DCFS) has collaboratively designed a practice framework to guide the top three priorities of the agency:

1. Safely stabilize and preserve families; and if that is not possible . . .
2. Safely care for children and quickly reunify children with their families of origin. If children must be removed from the home, relative and fictive kin caregivers will be considered immediately and throughout the entire engagement with the family; and if reunification is not possible . . .
3. Safely support child permanency, well-being, and development of culturally safe, lifelong relationships.

Values

1. Relationships with Children, Youth, and Families are the Foundation
2. Collaborative Partnerships with Resource Families
3. Helping Children and Youth Achieve Their Full Potential and Develop Lifelong Relationships
4. Shared Responsibility with Community Partners
5. A Strong Working Relationship with the Legal System
6. A Workplace Culture Characterized by Reflection, Appreciation, and Ongoing Learning

Continuous Quality Improvement

Continuous Quality Improvement (CQI) promotes the use of Appreciative Inquiry by focusing on what is working well and identifying opportunities to replicate those successes across the system. CQI helps pinpoint when staff are excelling and supports the expansion of those effective practices organization wide.

CQI is grounded in shared responsibility for data and outcomes at all staffing levels. Workers, supervisors, and managers are expected to contribute quality data remain informed performance and outcomes. It also promotes transparency by engaging families, youth, and other key stakeholders in the improvement process, using their feedback as tool for evaluation and system enhancement.

The CQI approach emphasizes identifying root causes of concerns, recognizing contributing factors to success, and developing interventions that address challenges or reinforce strengths. This process relies on a continuous feedback loop to drive and sustain improvements in policy and practice.

CQI ownership is critical at every level of the organization. A strong CQI culture values teamwork, collaboration, and communication, and is essential to creating lasting, positive change across the child welfare system.

Part 2: Cross System Challenges

Case Manager Turnover

Arkansas DCFS has experienced significant challenges with staff turnover, a persistent issue impacting caseload management and service delivery. High turnover rates resulted in increased caseloads at times for remaining staff, leading to difficulties in maintaining timely and consistent case management. Arkansas experienced the largest amount of staff turnover in State Fiscal Year (SFY) 2021 and SFY 2022 as did many agencies, in the “Great Resignation” across the nation. While Arkansas continues to see improvement, SFY 2024 had a turnover rate of 46.54%.

In response to these challenges, Governor Sarah Huckabee Sanders recently announced a comprehensive state employee pay plan overhaul. This initiative aims to align state employee

compensation with private sector rates, particularly targeting positions with chronic shortages, including social service workers. This announcement reflects the state's commitment to ensuring the workforce remains stable and effective.

Arkansas DCFS has also implemented changes to improve retention of Family Service Workers through a career advancement program. This program provides a 7% pay increase upon completion of New Staff Training (NST). Family Service Workers may also apply for an additional promotion to Family Service Worker Specialist upon reaching 3 years of employment. This promotion, if approved, comes with a 10% increase in salary. To be approved to become an FSW Specialist, FSWs must be able to provide concrete examples of how he or she has achieved proficiency as an FSW and has gone beyond standard job duties to serve clients and support colleagues.

Additionally, DCFS implemented differential pay for staff assigned to on-call and began allowing frontline staff to claim overtime pay rather than first banking 240 hours of comp time as previously required.

SFY	Position	Turnover
21	Family Service Worker	64.15%
22	Family Service Worker	70.39%
23	Family Service Worker	61.83%
24	Family Service Worker	46.54%
21	Program Assistant	63.54%
22	Program Assistant	88.89%
23	Program Assistant	68.86%
24	Program Assistant	51.49%
21	Family Service Worker Supervisor	37.45%
22	Family Service Worker Supervisor	30.66%
23	Family Service Worker Supervisor	32.28%
24	Family Service Worker Supervisor	23.89%

Part 3: Current Initiatives

Safety Organized Practice

Arkansas DCFS successfully implemented the Safety Organized Practice (SOP) initiative in partnership with Evident Change, transforming how child welfare services are delivered across the state. This strength-based, family-centered framework focuses on improving child safety, permanency, and well-being by fostering collaboration among families, family service workers, and community partners.

Through tools such as safety mapping, harm and worry statements, and clear safety plans, SOP has enhanced decision making and family engagement, leading to measurable improvements in outcomes. Progress includes increased involvement of kin and other support members in Family Team Meetings, more effective family case planning through the use of safety networks and behaviorally specific language, and clearer action steps beyond formal referrals. These changes have resulted in reduced placement disruptions and better alignment of services.

Arkansas DCFS remains committed to refining the practice, scaling systemic changes, and leveraging data to achieve greater stability and permanency for children and families.

Structured Decision Making

Arkansas DCFS has implemented the Structured Decision Making (SDM) system, also developed in collaboration with Evident Change, to enhance consistency and accuracy in critical decision making throughout the child welfare process. The SDM system provides research-based tools that guide staff in assessing safety, risk, and family needs, ensuring that decisions are equitable and focused on achieving the best outcomes for children and families.

Since implementation, SDM has improved the consistency of safety assessments and family case planning while also supporting family service workers in prioritizing services for families with the highest levels of need. This initiative is a cornerstone of Arkansas's efforts to drive systemic change and improve outcomes for Arkansas Children and families statewide.

Team Decision Making

Arkansas DCFS has implemented the Team Decision Making (TDM) initiative to promote collaboration and inclusive decision making. This approach brings together caregivers, extended family, community partners, and DCFS staff to make informed decisions that prioritize child safety and well-being while preserving family connections whenever possible.

Since its implementation, TDM has led to improved family engagement, stronger support networks, and reductions in unplanned placement and permanency disruptions. Progress includes increased participation from families and stakeholders in decision making meetings, leading to more comprehensive and sustainable safety plans.

Arkansas DCFS remains committed to embedding TDM into practice, expanding facilitator training and using participant feedback to refine the process. This initiative plays a vital role in driving systemic change and ensuring that decisions reflect the shared knowledge and lived experiences of those most directly impacted.

Expanding Relative Placements

Arkansas DCFS is committed to prioritizing and expanding relative and kinship placements to support stability and maintain connections between children and their families and communities. This focus reflects the understanding that children experience better outcomes when placed with familiar, trusted adults whenever safely possible.

To strengthen this approach, DCFS has increased efforts to identify, engage, and assess relatives and fictive kin early in the case. Staff are trained to explore family networks proactively, and internal procedures have been enhanced to support timely approval of kinship homes.

Additionally, DCFS continues to remove barriers to licensure for relatives, improve communication and support for kinship caregivers, and streamline the process for placement and subsidy consideration. These efforts are critical to reducing congregate care and non-relative placements and ensuring children experiencing foster care maintain meaningful, supportive relationships with their extended families.

Family First

The Family First Prevention Services Act represents a transformative approach to child welfare by prioritizing family preservation and preventing the need for children to enter foster care.
Arkansas was proud to be one of the early adopters of this Act, demonstrating strong commitment to keeping children safely with their families whenever possible. The initiative allows DCFS to access federal funding for evidence-based programs that support families at risk, such as mental health services, substance abuse treatment, and in home parenting skills. As an early adopter, Arkansas has made significant strides in expanding prevention services, addressing the root causes of family instability, and reducing the need for resource placements.

These efforts underscore DCFS's dedication to proactive, family-centered care, promoting stability and ensuring children grow up in a safe, loving environments while strengthening families for long term success.

Every Child Arkansas

Every Child Arkansas initiative is a statewide collaboration bringing together Arkansas DCFS, faith-based organizations, nonprofits, and community partners to recruit, support, and retain resource families. This initiative reflects a shared commitment to ensuring that every child in Arkansas has a safe, loving, and stable home.

Since its launch, Every Child Arkansas has streamlined efforts to engage communities, increase awareness about the need for resource families, and enhance the support systems for caregivers. Early successes include a rise in inquiries from potential resource families and strengthened partnerships with faith based and community organizations.

Moving forward, the initiative aims to further expand outreach and continue building sustainable networks of support, ultimately ensuring that children in care have the connections and stability they need to thrive.

Permanency Specialist

To further enhance outcomes for children and families, DCFS created two new positions of Permanency Specialists. This role is specifically designed to focus on improving permanency timelines and outcomes, ensuring that children achieve safe, stable, and permanent homes as quickly as possible.

The Permanency Specialist works closely with field staff, supervisors, community partners, and leadership to identify and address barriers to permanency and provide targeted support. The creation of this role has led to many children achieving permanency and highlights Arkansas's commitment to prioritizing the well-being of children and families by continuously evaluating and improving systems to achieve permanency more effectively and efficiently.

Restore Hope 100 Families

Arkansas DCFS continues to partner with the Restore Hope 100 Families initiative, a collaborative, community-based approach to improving outcomes for families involved in the child welfare system. This initiative focuses on reducing crisis, building stability, and promoting long term success through coordinated support from local nonprofits, faith-based organizations, law enforcement, education systems, and state agencies. Families are assigned navigators who help them set goals and access services across multiple domains, such as housing, employment, addiction recovery, transportation, and parenting. This model aligns with DCFS's prevention focused vision by addressing root causes of child welfare involvement and reducing recidivism.

SECTION III: ASSESSMENT OF CHILD AND FAMILY OUTCOMES

A. Safety

Safety Outcomes 1 and 2

Safety outcomes include: (A) children are, first and foremost, protected from abuse and neglect; and (B) children are safely maintained in their own homes whenever possible and appropriate. Arkansas assesses safety outcomes as a **strength**.

Performance Data Highlights

The Arkansas Division of Children and Family Services (DCFS) is committed to ensuring that children live in a safe, healthy, and supportive family and community. Arkansas's policies, practice, and data driven approach to continuous quality improvement aim to ensure that children are, first and foremost, protected from abuse and neglect.

Arkansas has made notable progress in ensuring that children are protected from abuse and neglect and maintained in their homes whenever it is safe and appropriate. Since completion of the Round 3 CFSR, improvement efforts have resulted in a significant decrease in the number of children entering foster care by maintaining them safely in their family homes through:

- Implementation of the Structured Decision-Making Tools for Assessment of Safety and Management of Risk
- Implementation of the Immediate Safety Planning Tool
- Expansion of evidence-based services to vulnerable populations in their own households, such as SafeCare and Intensive In-Home Services
- Increased understanding (through both short term and long-term training efforts) regarding the evaluation of and impacts on individuals in a family concerning Adverse Childhood Experiences (ACEs), substance use disorders, and Intimate Partner Violence
- Establishment of the Prevention and Reunification Unit in Central Office, including the addition of a Reunification Specialist and an In-Home Services Manager
- Increased capacity to respond promptly to allegations of child maltreatment through:
    - Statewide expansion of Differential Response
    - Statewide expansion of Team Decision Making Meetings for any removal or considered removals from the family home

Methodology

The Arkansas Department of Human Services, Division of Children and Family Service's Quality Assurance (QA) and Continuous Quality Improvement (CQI) systems and processes include a comprehensive array of strategies used to assess the effectiveness of staff, services, and programs in achieving improved, positive outcomes for children and families. These include Statewide Data indicators and Risk-Standardized Performance scores generated by the Children's Bureau administrative data sources, as well as qualitative data obtained from interviews, evaluations, and internal case reviews. A brief description of the most notable data used to evaluate this area is outlined below.

CFSR Statewide Data Indicators

The statewide data indicators are aggregate measures calculated using information that states report to the Adoption and Foster Care Analysis and Reporting System (AFCARS) and the National Child Abuse and Neglect Data System (NCANDS). Statewide data indicators are then provided back to DCFS as Risk-Standardized Performance scores for the submission period as a summary of performance for that period under review.

Administrative Data Reports

The information management systems used by DCFS to provide the data used in assessment of outcomes are described in detail in the Systemic Factors section of this report, to include:

- CHildren's Information and Reporting System (CHRIS)
- SafeMeasures

Quality Services Peer Review

The Division of Children and Family Services (DCFS) utilizes the Quality Services Peer Review (QSPR) process as a principal component of its Continuous Quality Improvement (CQI) system. Arkansas currently utilizes the Quality Services Peer Reviews (QSPR) as a vital component of its CQI processes. Evident Change, a contractor for DCFS, provides an ongoing, annual process for conducting QSPRs in each of the Division's ten geographical service areas. A random sample of twenty cases is drawn from each Area prior to the beginning of the reviews. In addition to these reviews, an additional two to three reviews are completed across each area by peer reviewers to provide additional insight to Arkansas' documentation quality.

The CQI Manager and the Planning and Practice Manager present the findings of the Area's QSPR to the corresponding Area Director and supervisors. The purpose of the presentation is to discuss the findings, focusing on strengths and areas needing improvement. This presentation of results is also the beginning of the Quality Assurance Loop Around (QALA) process. This is a new initiative that is meant to bridge the gap between reviews from year to year. After the findings have been presented, each area is required to identify one area (or item) of focus to improve or build upon an identified strength or an ANI identified from the findings.

Safety Outcome 1: Children are First, and Foremost, Protected from Abuse and Neglect

The Children's Bureau determines whether a state is in substantial conformity based on the state's RSP on two statewide date indicators and the state's performance.

ITEM 1: TIMELINESS OF INITIATING INVESTIGATIONS OF REPORTS OF CHILD MALTREATMENT

The chart below shows the state's performance from State Fiscal years 2021-2024 and was used to determine substantial conformity for Safety Outcome 1.

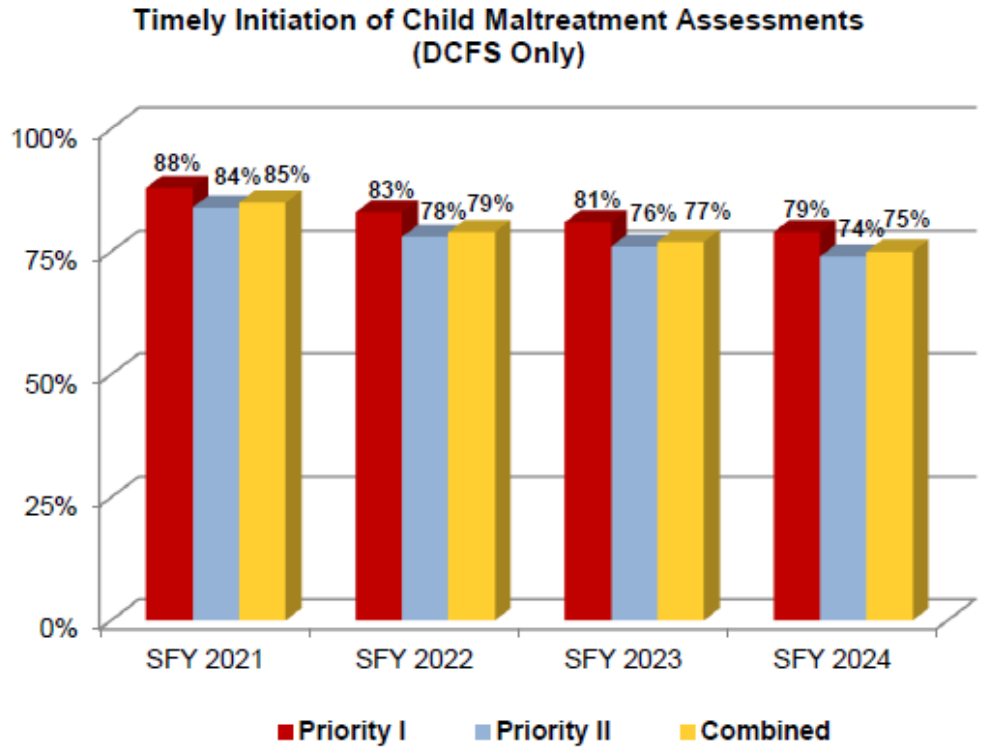


Figure 1: Timely Initiation of Child Maltreatment Assessments

DCFS initiated seventy-five (75) percent of its investigations on time during SFY 2024, performing better on its Priority I investigations than Priority II, but did not achieve the 95% strength threshold.

The state's policy requires all reports of known or suspected child maltreatment to be promptly investigated and immediate steps taken to protect a maltreated child and any other child under the care of the same alleged offender who may also be in danger of maltreatment. The health and safety of the child are always of paramount concern.

Reports assigned as Priority I require a face-to-face attempt to see the alleged victims within twenty-four (24) hours of receipt of the report and seventy-two (72) hours of a Priority II report. Initiation occurs when all victim children are interviewed or observed (if too young for an interview) within the designated timeframes.

Safety 1: Children are first and foremost protected from abuse and neglect. (N =*SFY 2024)	SFY 2024 QSPR	SFY 2023 QSPR	SFY 2022 QSPR	SFY 2021 QSPR	SFY 2020 QSPR	Round 3 CFSR
Item 1: Timeliness of investigations (N=65)	**77%**	**85%**	**87%**	**74%**	**88%**	**69%**

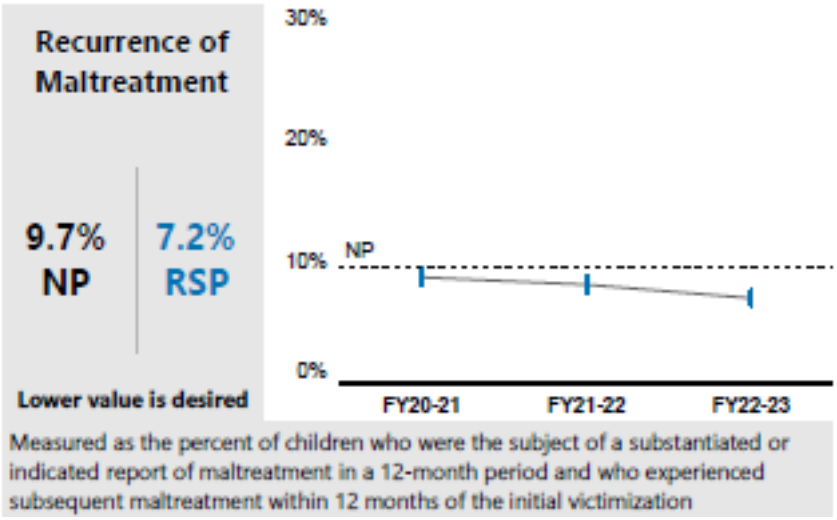
Reports of abuse and neglect were received during the 12-month period under review in 65 cases reviewed during the SFY 2024 QSPR. Family Service Workers initiated the investigations within

the State mandated timeframes in seventy-seven (77) percent of these cases, an eight (8) percent decrease from the SFY 2023 QSPR, and eight (8) percent increase from Round 3 CFSR. Area 2 and Area 7 have achieved substantial conformity for this item, initiating all reports in accordance with the statie's initiation policy. Area 3 has had the most difficulty initiating investigations in a timely manner in 57% of the cases reviewed during the SFY 2024 QSPR (see Arkansas's 2025-2029 CFSR Attachment #1 QSPR SFY '24 for more complete report).

Arkansas monitors timely initiations of investigations through the SafeMeasures dashboard. Reports are generated once all data has been entered into Arkansas's Statewide Automated Child Welfare Information System (SACWIS). This information is also compiled and entered into the Arkansas Annual Report Card. Therefore, the state believes the data in the SafeMeasures dashboard and Annual Report Card present a realistic description of Arkansas's performance for the State Fiscal Year (SFY).

Recurrence of Maltreatment

Arkansas's Round 4 CFSR Data Profile from February 2025 (representative data is derived from the period beginning April 1, 2024, and ending September 30, 2024) provides that the state's performance surrounding repeat maltreatment utilizing the risk standardized performance (RSP) interval of 7.2% which is less than the national performance of 9.7%. This is a decrease in recurrence of maltreatment from 8.9% during previous reporting periods. The chart below demonstrates the consistent decrease in recurrence of maltreatment for the state since 2020.



The Division's Quarterly Performance Reports and Annual Report consistently track Arkansas's performance regarding prevention of repeated maltreatment, specifically abuse/neglect which occurs within six (6) and twelve (12) months of a founded maltreatment referral. In SFY 2024, four (4) percent of the victim children involved in true investigations experienced a recurrence of maltreatment within six (6) months, the same percentage as SFYs 2022 and 2023. In SFY 2024, five (5) percent of children experienced a recurrence of maltreatment within twelve months. This represents a decrease of 2% from the past three SFYs. This places Arkansas well below the

national standard of 9.1 percent.

The chart below is from the SFY '24, 4th Quarter Performance Report and further supports that Arkansas is below the National Average for recurrence of child maltreatment. The chart also demonstrates that at the end of the 4th quarter of SFY '24, Arkansas had a recurrence of child maltreatment of 3% within six months and 5% within 12 months. This is a decrease of 2% from the previous quarter.

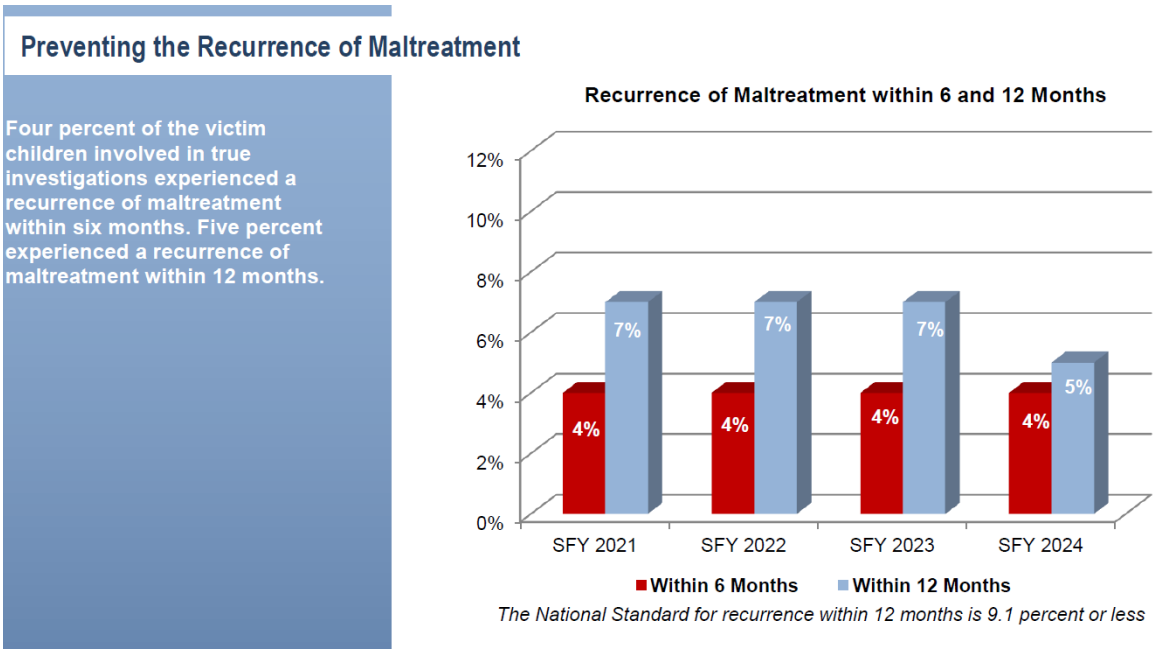


Figure 4: Recurrence of Maltreatment within 6 and 12 months

DCFS believes that one of the primary purposes of its interventions with children and families is to prevent future harm for children who have already experienced maltreatment. The Division recognizes the negative consequences associated with multiple episodes of abuse and neglect and continues to work to prevent the recurrence of maltreatment by adequately engaging children and families in assessing risk and safety and implementing services and supports to mitigate identified threats and strengthen parental capacity. One of the strategies the Division has implemented in the past is using alternate funding streams (i.e., non-IV-E) to support Intensive In-Home Services for families who have recently reunified. DCFS continues to implement Safety Organized Practice (SOP), which focuses on building family support networks to minimize future risks of child welfare involvement. DCFS believes these efforts are visible in the decrease in the number of children experiencing foster care, the increase in the number of in-home cases being worked, and the decrease in recurrence of maltreatment at 12 months.

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

Safety Outcome 2 reviews services to families to protect children in the home and prevent removal or re-entry into foster care as well as risk and safety assessment and management.

Safety 2: Children are safely maintained in their homes whenever possible and appropriate. (N=*SFY 2024)	SFY 2024 QSPR	SFY 2023 QSPR	SFY 2022 QSPR	SFY 2021 QSPR	SFY 2020 QSPR	Round 3 CFSR
	66%	64%	61%	75%	82%	60%
Item 2: Services to Prevent Removal (N=*81)	81%	89%	83%	82%	91%	55%
Item 3: Risk and Safety Assessment and Management (N=*170)	67%	64%	62%	79%	83%	61%

ITEM 2: SERVICES TO PREVENT REMOVAL

DCFS provided the necessary services to prevent children from entering foster care in 81 percent of the applicable cases reviewed during the SFY 2024 QSPR, as shown in the chart above. This is a decrease of eight percent since the SFY 2023 QSPR. This performance remains significantly improved (26%) from the Round 3 CFSR. Efforts surrounding prevention continue to focus on the use of Immediate Safety Planning, SafeCare home visiting program, the Triple P parenting program, and intensive in-home services (Intercept and Family Centered Treatment). These services are often implemented to prevent removal and have also been used to stabilize and support during trial home visits. In addition, the state's continued expansion of Considered Removal Team Decision Making (TDM) Meetings have likely contributed to improvements for Safety Outcome 2 since these forums bring together the child's caregivers, network members, and DCFS to collaboratively assess safety and implement a plan to keep the children safely in the home when possible.

ITEM 3: ASSESSING AND ADDRESSING RISK AND SAFETY CONCERNS

During SFY 2024, QSPR reviews found that sufficient efforts were not made to assess and address risk and safety concerns for children receiving services in 33 percent of the cases reviewed, despite this being an increase of sufficient efforts by four percent. Initial assessments that accurately assessed safety and risk occurred in 81% of cases during the SFY 2024 QSPR. Accurate ongoing assessments only occurred in 70% of cases reviewed. DCFS conducted accurate initial assessments in 81% of all case types. Breaking this down, accurate initial assessments occurred in 87% of permanency (foster care cases) and 77% of in-home cases. DCFS conducted accurate ongoing assessments in 71% of all case types. This can be broken down into accurate ongoing assessments in 76% of permanency cases and 62% of in-home cases.

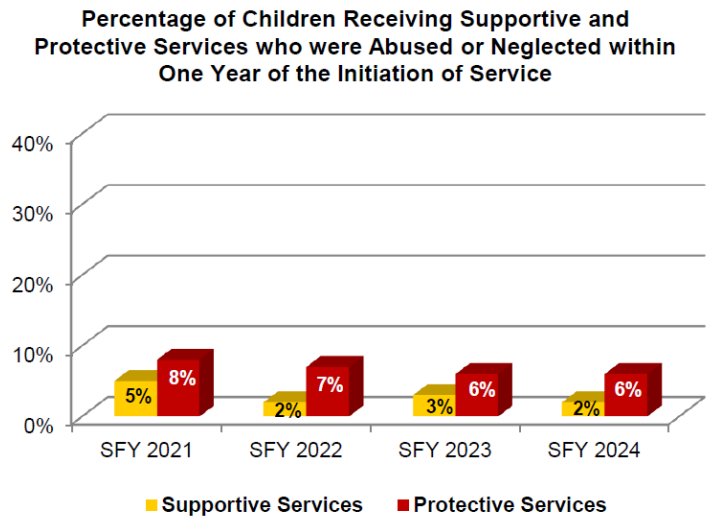
As noted in the SFY 2023 QSPR, barriers to achieving strength ratings for this item are closely related to limited caseworker visitation with children and families, which has become an improvement goal for several DCFS areas' Quality Assurance Loop Around processes, particularly as it relates to caseworker visits with caregivers.

Regardless of whether children remain in the family home or enter foster care, DCFS is required to assess and address risk and safety concerns for children receiving services, and the SFY 2024 QSPR noted that Arkansas demonstrated a four-percentage point increase in performance from

the SFY 2023 QSPR in permanency and in-home services cases reviewed. This shows a trend to achievement of performance gains that occurred directly following Round 3 CFSR. Again, barriers for this item continue to be consistent caseworker visitation with families. DCFS continues to work toward higher quality visits and improved teaming with staff across the state to ensure children and families are seen regularly and of a sufficient quality to ensure safety and assess for risks. During the SFY 2024 QSPRs, no area achieved a strength rating on this safety-related measure. It should be noted that Areas 5, 8, 9, and 10 made successful efforts to assess and address risk and safety in over three-quarters of reviewed cases. Area 3 struggled the most, making successful efforts to manage risk and safety in less than one-third of the reviewed cases, a continued decrease in performance from past reviews for the Area.

The SFY '24 ARC shows steady improvement since SFY '21 in the rate of victimization among children who received protective and supportive services.

Victimization Rate Among Children Who Received Protective and Supportive Services



Of the children who began receiving in-home protective services during the year prior to SFY 2024, six percent experienced a true report of maltreatment within one year. Of the children who began receiving supportive services during the year prior to SFY 2024, two percent were involved in a true report within one year.

Figure 6: Victimization Rate Among Children Who Received Protective (Permanency) and Supportive (Prevention) Services

In January 2025, training on the use of SDM Safety and Risk Tools began and this will be included in standard assessment practice for all incoming investigations and ongoing case work. The outcomes of the safety and risk assessments will no longer be contained in a system outside of the Division SACWIS and this should provide active data points to track trends and improve the quality of safety and risk assessments using evidence based SDM tools. DCFS also plans to expand Team Decision Making to all DCFS areas using the fidelity model. This should increase reviews of safety and use of networks to support families, thus increasing safety for children.

Conclusion

Arkansas rates Safety as a **Strength**. Data from administrative and case reviews shows:

Item 1: Children are First and Foremost Protected from Abuse and Neglect – While Arkansas did not achieve substantial conformity for initiation of investigations (79%), Arkansas demonstrated an 8% improvement from round 3 CFSR. Arkansas consistently maintains a recurrence of maltreatment (7.2) according to the State's data profile that is significantly below the national average (9.7). State administrative data further shows a decline in the occurrence of maltreatment in all case types for SFY '24 of up to an additional 3% depending on case type.

Item 2: Services to Prevent Removals – 81% conformity statewide, however, this is a 26% improvement from the round 3 CFSR

Item 3: Assessing and Addressing Risk and Safety Concerns – 6% improvement from round 3 CFSR. Four areas that achieved substantial conformity for a strength rating and those four areas also demonstrate the most stability in staff turnover for the state.

With the implementation of Structured Decision Making, the State has observed a steady increase in the ability to maintain children safely in their homes utilizing immediate safety planning to create safety. The state has also observed a notable decrease in the recurrence of maltreatment and as such, while the state recognizes the necessity to continue monitoring and reinforcement of practice strengths, the state finds Safety to be rated as an overall **Strength**.

B. Permanency

Permanency Outcomes 1 and 2

Permanency outcomes include: (A) children have permanency and stability in their living situations; and (B) the continuity of family relationships is preserved for children. Arkansas concludes that Permanency is an **Area Needing Improvement**.

PERFORMANCE DATA HIGHLIGHTS

Arkansas continues to focus on achieving stability and timely permanency for children experiencing foster care while maintaining family and kinship connections. Efforts to strengthen placement stability, support timely reunifications, and finalize adoptions have shown steady progress in SFY 2024:

- Placement Stability: In SFY 2024, 83% of placements were deemed stable, representing a 14-percentage point increase since the Round 3 CFSR. This improvement reflects ongoing efforts to align placements with children's needs and reduce disruptions.
- Kinship Placements: Arkansas continues to prioritize "kinship first" strategies. The rate of initial placements with relative or fictive kin has remained steady, supported by fidelity to the Team Decision Making (TDM) model. These meetings ensure children are safely placed with relatives whenever possible, leading to faster identification of supportive networks.
- Timely Permanency: The percentage of children achieving permanency within 12 months of entering foster care has increased to 45% reflecting continued progress in case management and court collaboration. Efforts to reduce delays in Termination of Parental Rights (TPR) and improve post TPR timelines have supported the improvement.

Permanency Outcome 1: Children Have Permanency and Stability in Their Living Situations

ITEM 4: PLACEMENT STABILITY

Children are considered to experience stability if their current placement (or last placement before exiting care) is stable and any moves they have made during the twelve-month period under review have been planned and designed either to achieve case goals or better meet their needs. During SFY 2024 QSPRs 83% were rated as successful in placement stability. In addition to the Division's ongoing resource home recruitment efforts, higher numbers of placements with relative and kin connections, particularly when a child's first placement in foster care is with a kinship provider, have likely contributed to the continued improvement in this area.

These "kinship first" placements have held relatively steady over the last year as illustrated in the graph below. It is likely that the continued expansion of fidelity model TDM meetings may have also helped the state remain steady with initial relative placements when it is determined that a child cannot remain safely in his or her own home at the conclusion of a TDM. The TDM meetings can essentially serve to quickly identify and assess relatives and fictive kin.

PERMANENCY	SFY 2024	SFY 2023	SFY 2022	SFY 2021
Outcome 1: Children have permanency and stability in their living situations	54%	44%	48%	43%
Item 4: Stability of Foster Care Placement (N = 100)	83%	81%	78%	73%
Item 5: Permanency Goal for Child (N = 99)	79%	75%	81%	76%
Item 6: Achieving Reunification, Guardianship, Adoption, or APPLA (N = 100)	75%	65%	67%	69%

The next chart, taken from April '25 Every Day Counts report shows the consistent trend in placement with relatives as a first placement for children entering foster care. This trend has been improving since February 2024.

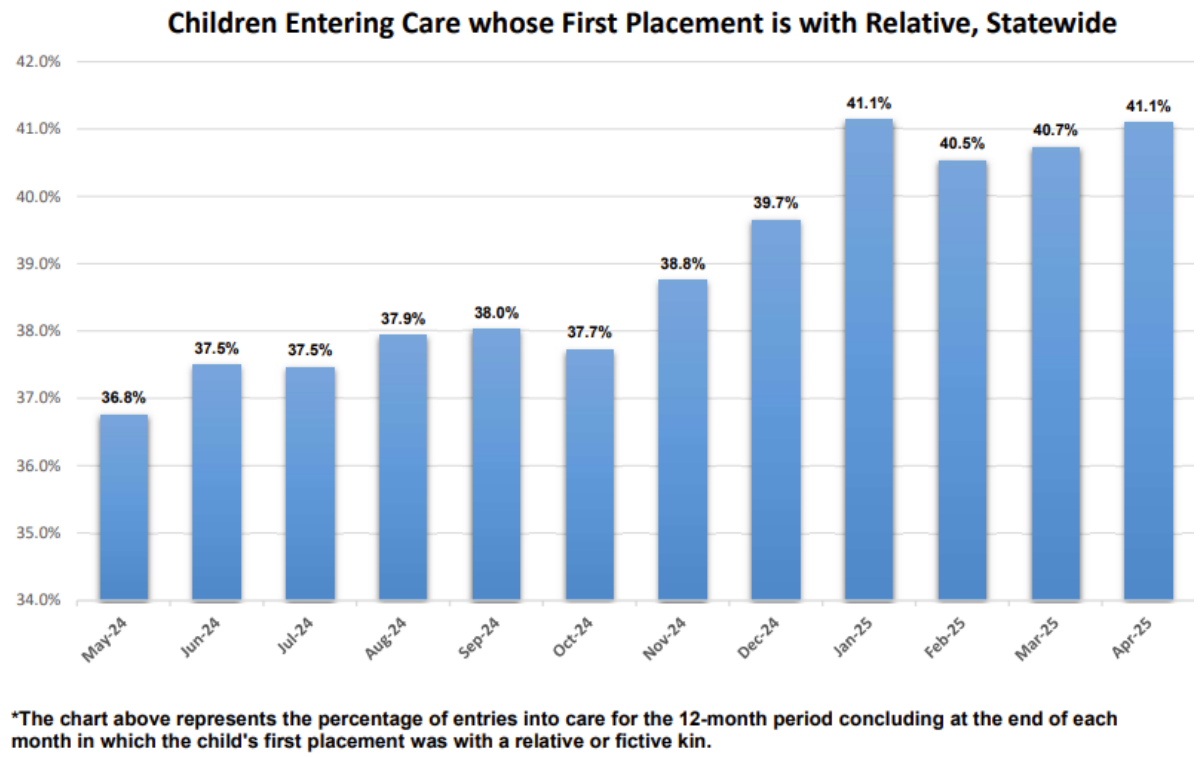


Figure 8: State, Area, and County Profiles Report, April 2025

February 2025 Round 4 CFSR Data Indicator: Placement Stability			
Indicator	**Performance**	**NS**	**Status**
Placement stability	8.92	4.12	Not Met

In reviewed areas to date, Area 2 and Area 9 have achieved substantial conformity regarding placement stability at 90% and 100% respectively in applicable cases. It should be noted that all other areas reviewed to date have obtained a strength rating of 80% for all cases reviewed. This is a significant increase for certain areas, such as Area 5 having only 58% success in the SFY 2023 QSPRs.

Further, Arkansas administrative data shows that, despite still being above the national standard, the placement stability of children experiencing foster care (measured by the rate of placement moves per 1,000 days in foster care for children who enter care over a twelve-month period) has remained consistent over the last several state fiscal years.

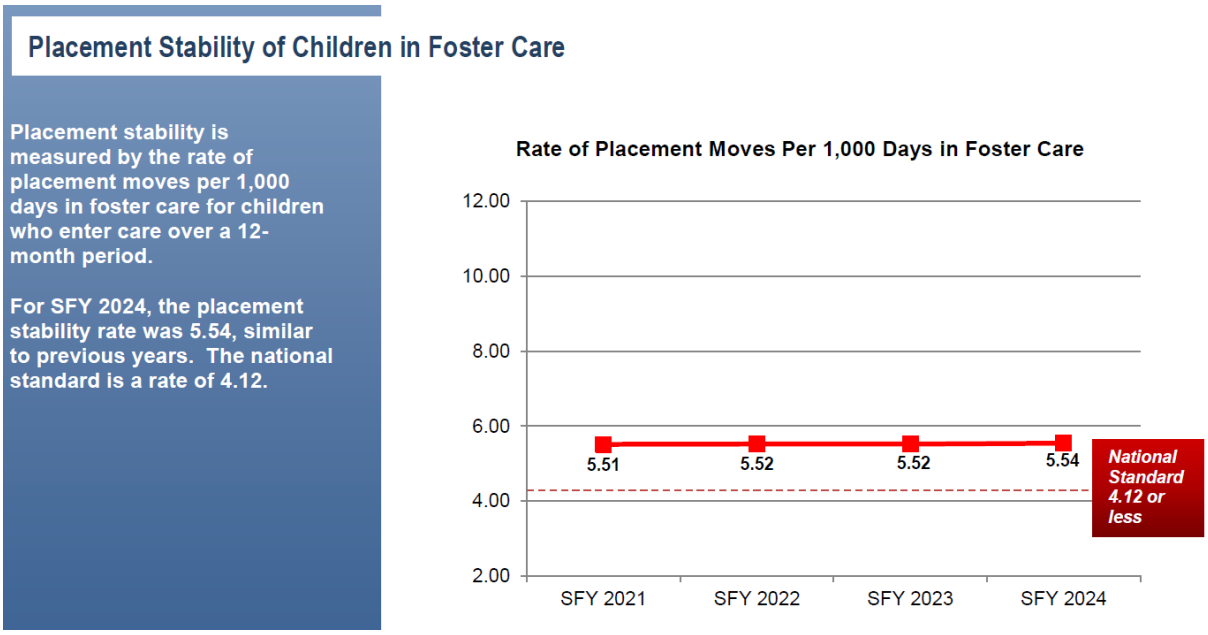


Figure 10: Arkansas's Annual Report Card SFY '24

ITEM 5: TIMELY AND APPROPRIATE PERMANENCY GOALS

In 79 percent of permanency cases reviewed in the SFY 2024 QSPRs, permanency goals were established timely and appropriately. The barrier for most of the cases reviewed to date includes inappropriate permanency goals. This is a similar barrier as reported in SFY 2023 QSPRs when the goal of guardianship remains in place after relative efforts have been exhausted and the child is placed in a traditional resource home. Limitations in administrative data regarding permanency hearings exist for this measure and are detailed in the Case Review systemic factors section of this document.

The chart below is from the SFY '24 ARC and demonstrates the administrative data held by Arkansas DCFS. The data illustrates the permanency goals of children currently experiencing foster care in Arkansas.

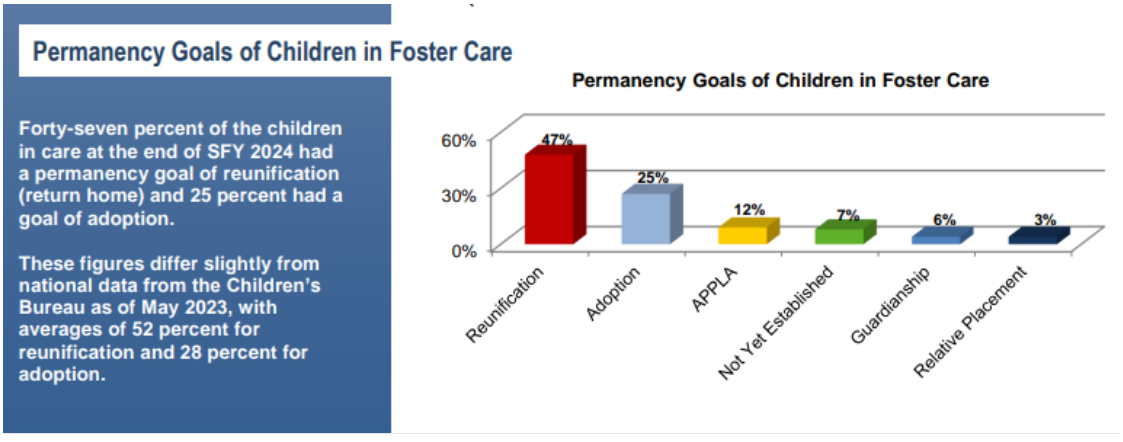


Figure 11: Permanency Goals of Children in Foster Care, Arkansas's Annual Report Card SFY '24

ITEM 6: EFFORTS TO ACHIEVE PERMANENCY GOALS

Appropriate legal and relational permanence should be achieved as timely as possible once a child enters foster care. Insufficient efforts were made to achieve permanency in one-quarter of the cases reviewed to date in the SFY 2024 QSPR (25 percent). This is a decrease of 10 percentage points since the SFY 2023 QSPRs. The Division did not make concerted efforts to engage fathers in some cases early on, which has extended the time to permanency for the child. In other cases, the Division did not concurrent plan in a manner that allowed the child to achieve permanency at the earliest possible time, such as not having guardianship or adoption paperwork completed timely.

The Division has made ongoing efforts to target cases that have been open for an extended period to move children lingering in foster care to permanency. One of these efforts includes the creation of the Permanency Outcomes Specialist position. This is an individual position that works with children that have been experiencing foster care the longest by conducting case mining, deep dives into relatives, and other targeted efforts to move the child to permanency.

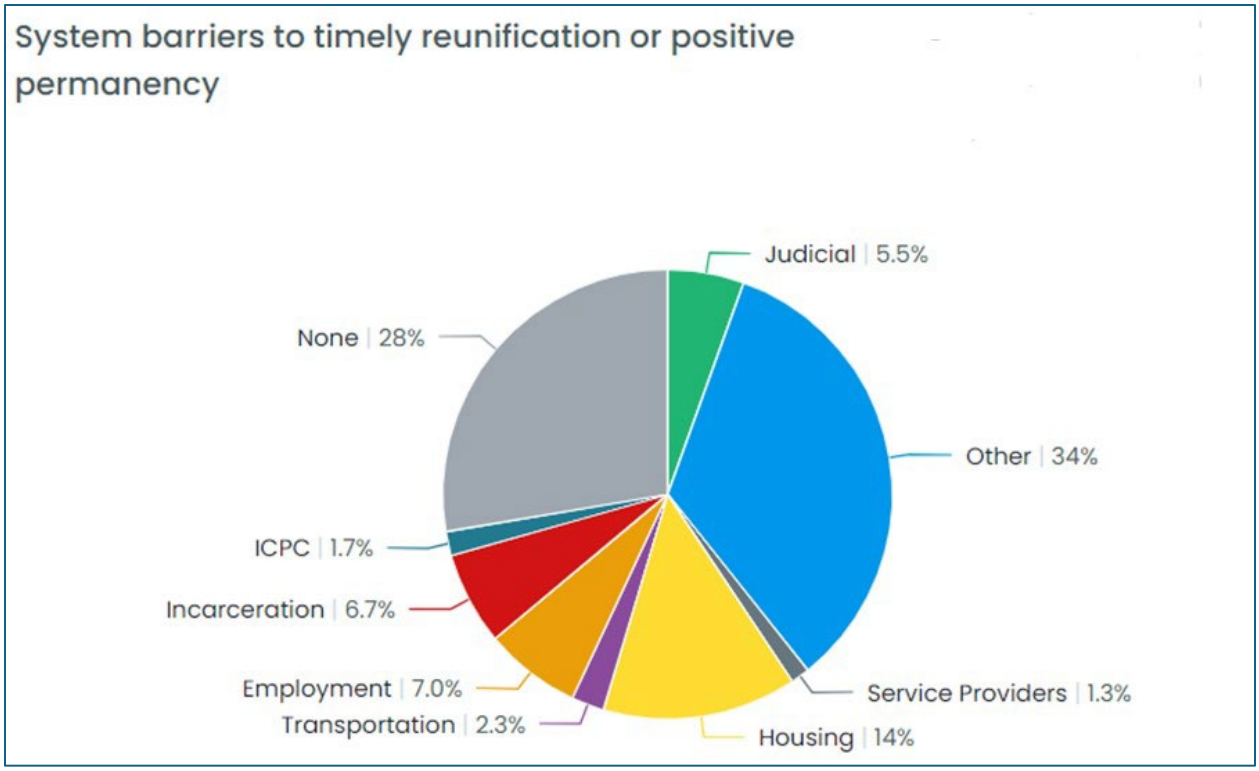
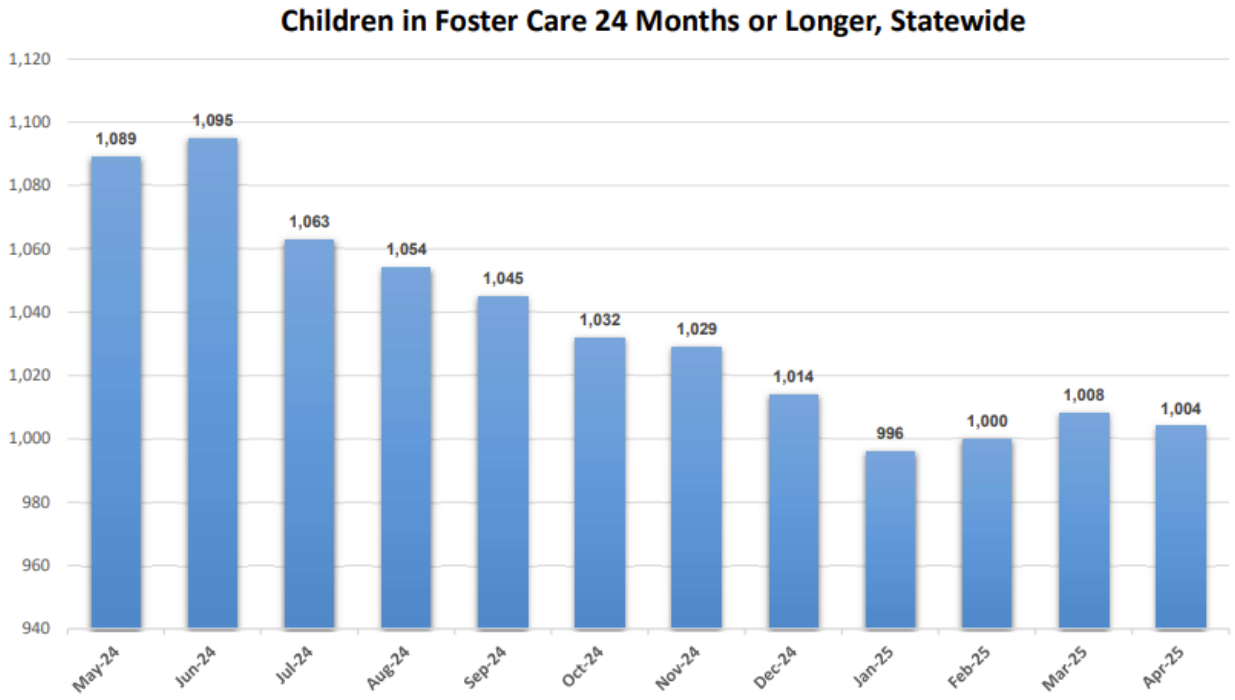


Figure 12: Permanency Safety Consultation Survey Results as captured in Formstack

Emerging trends identified include an ongoing inclusion of service-based decision-making regarding permanency where courts and DCFS staff base reunification on completion of a service rather than on resolution of safety threats to a child. DCFS has identified this trend previously and believes implementation of the SDM Safety and Risk Assessment has and will continue to impact this data by focusing decision making surrounding reunification on direct safety of the child.

DCFS tracks the number of children experiencing foster care for 24 months or longer statewide. Below is data from monthly Every Day Counts charts representing data from May 2024 to April 2025. The data shows that Arkansas has made significant improvements in moving children to permanency more timely.



***The chart above represents the number of children who have resided in foster care for 24 consecuive months or longer at the end of the month.**

Figure 13: Children in Foster Care 24 Months or Longer, Statewide

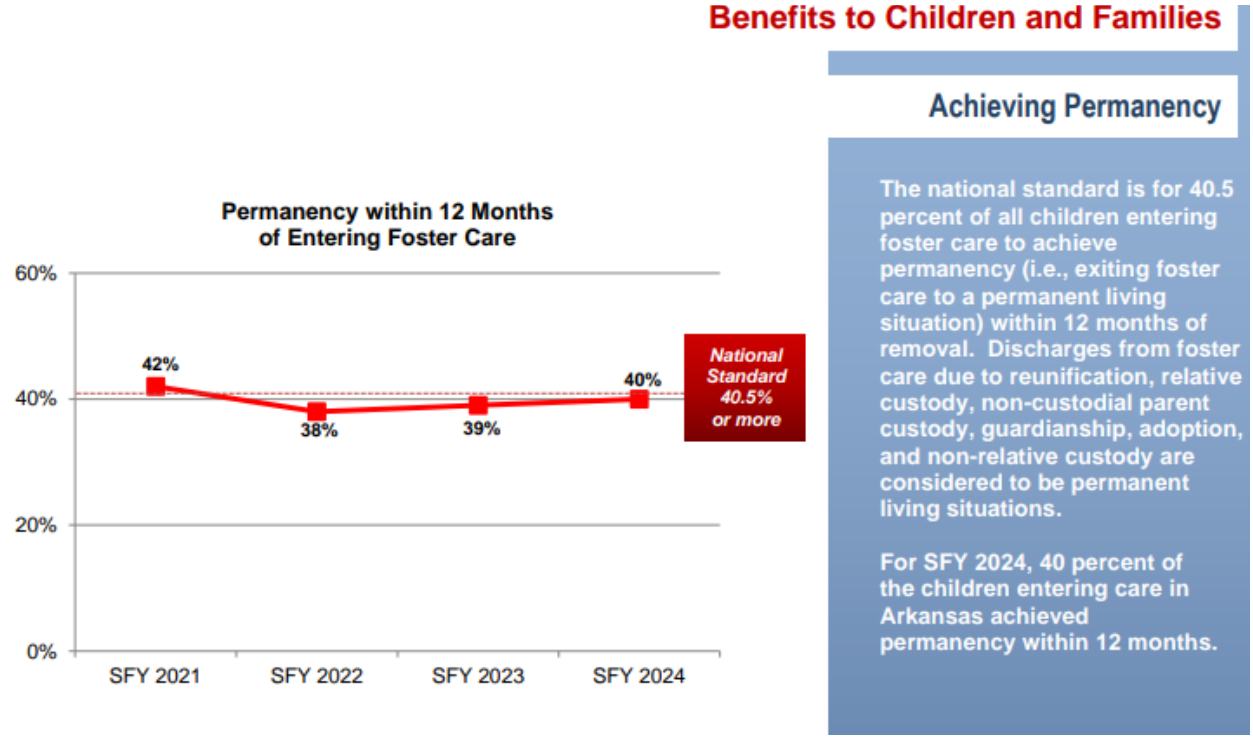


Figure 14: Permanency within 12 Months of Entering Foster Care, Arkansas's Annual Report Card, SFY 2024

As illustrated above, over the past three years, Arkansas has not quite met the National Standard of 40.5% or more children achieving permanency within 12 months. However, as illustrated below, Arkansas does meet the National Average of 12.4 months from TPR to finalization of adoption.

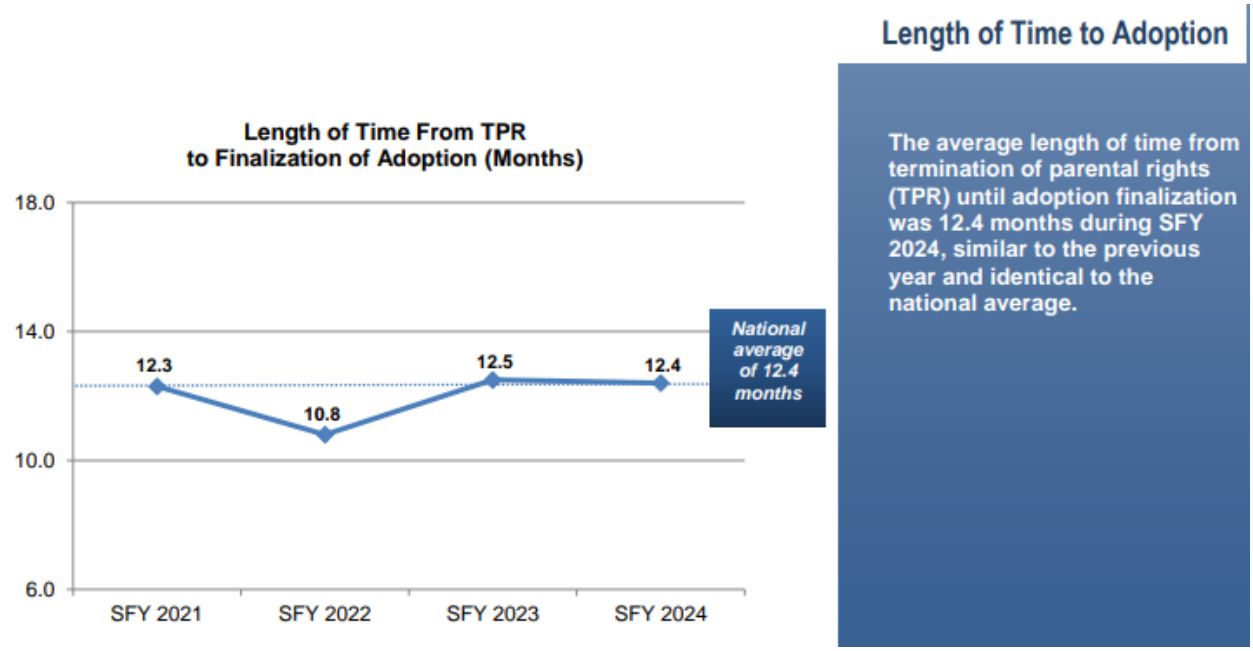


Figure 15: Length of Time to Adoption, Arkansas's Annual Report Card, SFY 2024

In the February 2025 Data Profiles, information for permanency outcomes could not be obtained due to data quality limits for Permanency in 12 months (entries). However, data quality allowed for indicators to be obtained for Permanency in 12 months (12-23 and 24+) and both indicators showed significant improvement from previous data sets and not only met but exceeded the national average.

February 2024 Round 4 CFSR Data Indicators: Permanency in 12 Months			
Indicator	**Performance**	**NS**	**Status**
Permanency in 12 months (entries)	DQ	35.2%	Not Met
Permanency in 12 months (12-23 mos.)	57.1	43.8%	Met
Permanency in 12 months (24+ mos.)	43.6	37.3%	Met

Permanency Outcome 2: The Continuity of Family Relationships is Preserved for Children

Permanency 2: The continuity of family relationships and connections is preserved (N= *SFY 2023)	**SFY 2024 QSPR**	**SFY 2023 QSPR**	**SFY 2022 QSPR**	**SFY 2021 QSPR**	**SFY 2020 QSPR**	**Round 3 CFSR**
	58%	**72%**	**74%**	**71%**	**79%**	**43%**
Item 7: Placement with Siblings (N=62)	90%	88%	82%	75%	76%	47%
Item 8: Family Time with Caregivers and Siblings Experiencing Foster Care (N=79)	63%	88%	79%	83%	89%	64%
Item 9: Preserving Connections (N=100)	69%	68%	82%	65%	76%	49%
Item 10: Relative Placement (N=95)	83%	83%	82%	92%	94%	70%
Item 11: Relationship of Child in Care with Caregivers (N=68)	35%	58%	61%	46%	51%	48%

ITEM 7: PLACEMENT WITH SIBLINGS

Seventy-nine (62) permanency care cases in the SFY 2024 QSPR included sibling groups. In 90% of cases, sufficient efforts were made to ensure siblings were placed together when appropriate. This is an increase of two (2) percentage points from the SFY 2023 QSPR and a 43-percentage point increase from the Round 3 CFSR. In many cases, siblings were placed together throughout the review period and often placed with a relative.

To date, Area 2, 5, 6, 9, and 10 have been 100% successful in placing siblings together when appropriate in the reviewed cases. Area 3 and Area 4 received a strength rating in only 75% of cases reviewed. Placement of children in separate homes due to age preferences of the resource parents continues to be a barrier. Division staff report struggles to find homes that can keep sibling groups together because the children are of various ages.

From a statewide perspective, the SFY 2024 Annual Report Card noted at least one or more siblings are placed together in 71% of the cases. This is slightly less than SFY 2022 (74%).

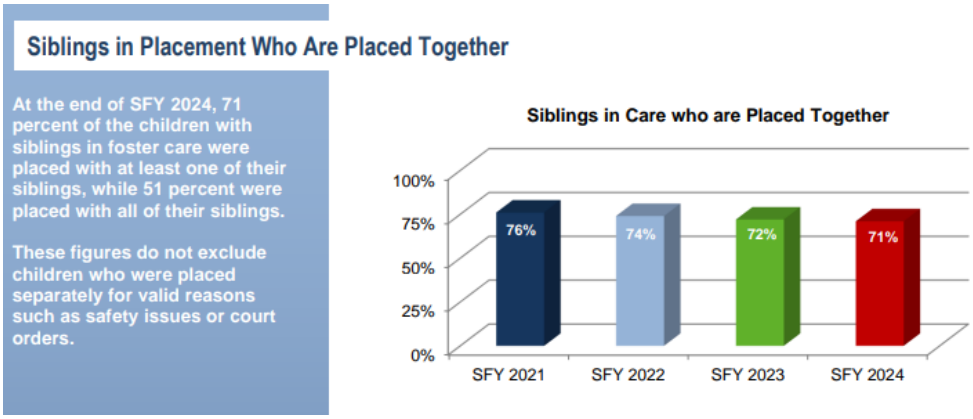


Figure 16: Siblings in Care Who are Placed Together, Arkansas's Annual Report Card, SFY 2024

As of June 5th, 2025, DCFS had 1,377 resource homes to accommodate 3,442 children experiencing foster care, or .79 beds per child. The bed to child ratio also means it is difficult to locate a resource home to accommodate a sibling group as they enter foster care. Every Child Arkansas ECA) has been established under Governor Sanders' Executive Order 23-18 to bring communities together to support the child welfare system in remedying this crisis. Since Every Child Arkansas was established, it has brought together faith-based and other organizations, various agencies, and advocates. In May 2024, it launched efforts to include business, health care providers, and schools.

ITEM 8: FAMILY TIME BETWEEN CHILDREN EXPERIENCING FOSTER CARE AND THEIR CAREGIVERS AND SIBLINGS

While Arkansas DCFS strives to ensure that children experiencing foster care have meaningful family time with their caregivers and siblings, only 63% of cases reviewed during the SFY 2024 QSPR were found to be in substantial conformity with this item. This reflects a significant decrease of 25 percentage-point decrease from the SFY 2023 QSPR, and a three-point decline from Round 3 CFSR results.

A major barrier continues to be the separations of siblings due to placement limitations, resulting in extended travel times and fewer opportunities for family time. Ongoing staffing shortages have compounded the issue, creating further difficulty in arranging and supervising consistent, quality family time. Additionally, in many cases, the noncustodial parent (often the father) is not actively involved or engaged in reunification efforts, further limiting the opportunities for family time.

In cases that received a strength rating, DCFS staff made intentional efforts to facilitate frequent, quality family time. This included hosting family time outside of traditional office settings, such as parks or community centers and partnering with local organizations to support natural and comfortable family time experiences. When family time was missed, staff documented the cause and made efforts to reschedule to ensure the family did not lose critical time together. To help ensure quality family time as frequently as possible, the Division also created clear expectations regarding family time scheduling, monitoring, and support.

In the SFY 2025 QSPR to date, Area 2 has successfully achieved this measure in 90% of cases reviewed. Area 6 again struggled the most with this item. Only 22% of cases reviewed were rated as a strength.

Arkansas DCFS recognizes that consistent, face-to-face family time plays a vital role in maintaining the continuity of relationships and supporting reunification. Family service workers are expected to ensure that the location and frequency of family time supports engagement between children, caregivers, and siblings. Supporting regular sibling contact, whether in person or virtually, remains a priority, particularly when siblings are separated in care.

To strengthen this area, the Division is implementing a revised family case plan template. The new plan will capture family time planning and include detailed requirements for supporting sibling relationships when siblings are placed separately. Family Case Plans will now include documentation of who is responsible for ensuring bi-weekly, face-to-face contact during spiritual, educational, or extracurricular activities. Plans will also clarify who ensures virtual or telephone contact occurs on a routine basis.

Additionally, DCFS has updated its Special Board policy to include a new reimbursement category: Reunification Supports. Under this category, resource parents may request additional compensation when they demonstrate efforts to preserve sibling bonds, such as regularly engaging all siblings in group activities or facilitating consistent sibling contact.

ITEM 9: PRESERVING IMPORTANT CONNECTIONS

When children first begin experiencing foster care, maintaining their existing connections to their communities, extended families, neighborhoods, faith-based groups, schools, and friends is essential. These relationships provide continuity, emotional stability, and support, and should be preserved whenever possible, even if the child does not ultimately return home.

However, in only 32% of cases reviewed during the SFY 2024 QSPR, DCFS efforts to maintain these connections were rated as a strength, indicating that significant improvement is needed.

To address this, the Division has implemented structured tools to promote meaningful support networks. This includes the use of SOP tools such as including Circles of Safety, Ecomap, and the Support Network Grid. Each tool provides staff with clear directions for engaging families in identifying and building support systems, particularly those that include fictive kin and extended family members.

Directives have been issued requiring staff to use at least one SOP tool in each case to help establish and strengthen the family's network. developing a robust support network. In tandem, DCFS has launched internal messaging campaigns emphasizing the positive impacts of support networks, including improved placement stability, reduced recidivism, and increased safety.

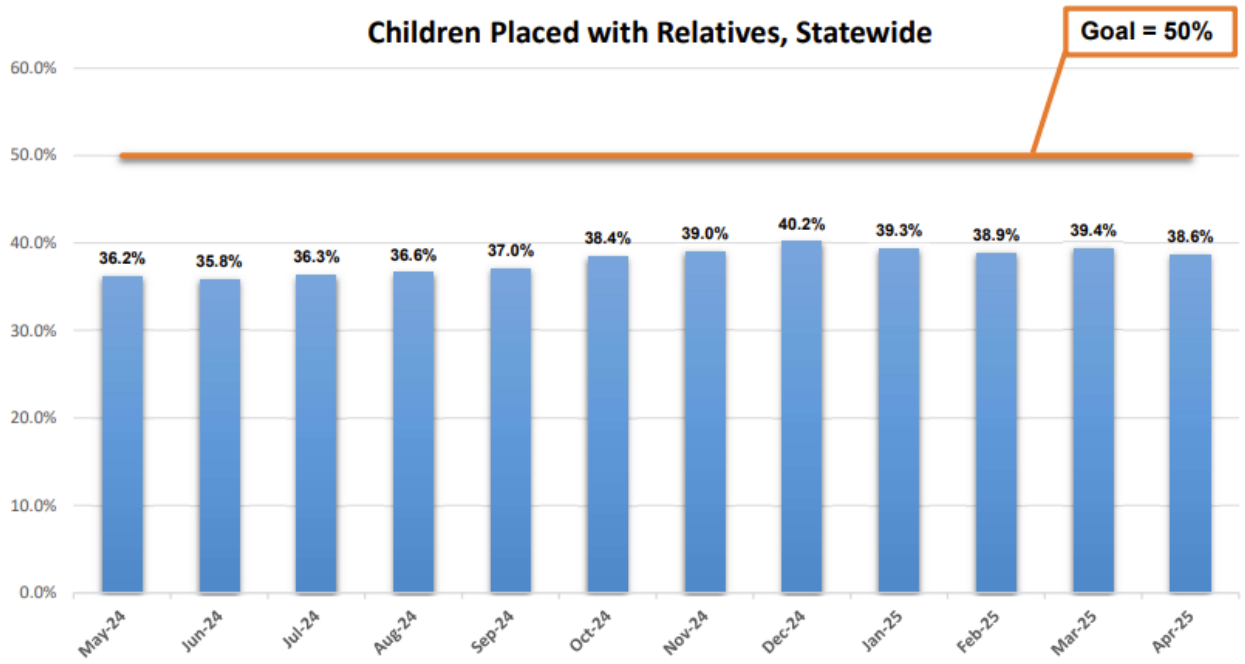
The Division also enhanced messaging to highlight the importance of daily kin for children

experiencing foster care. Workers are encouraged to integrate kin into both the safety planning and family case planning processes. These efforts are aimed at ensuring children maintain cultural, spiritual, and emotional toes while progressing toward permanency.

ITEM 10: RELATIVE PLACEMENT

Best practice and federal guidance identify relatives as the preferred placement option for children who cannot safely remain with their caregivers. Placing children with relatives reduces the trauma often experienced upon entering foster care provides a familiar, supportive environment that promotes emotional well-being, cultural continuity, and long-term stability.

DCFS continues to demonstrate strong performance in this area. During the SFY 2024 QSPR, 83% of reviewed cases reflected appropriate efforts to identify, locate, and evaluate relative placement options. This is consistent with SFY 2023 QSPR findings.



***The chart above represents the percentage of children residing with relatives at the end of each month.**

****Children are considered to be residing with relatives if they are placed in a provisional relative or provisional fictive kin home, relative or fictive kin foster home, relative pre-adoptive home, ICPC home, or temporary family placement.***

Figure 17: Children Placed with Relatives Statewide, DCFS Monthly Charts

There has also been a measurable upward trend in the overall percentage of children placed with relatives statewide. In November 2023, the rate of placement with relatives was 36.1%. By April 2025, this increased to 38.6%, as reflected in the Every Day Counts dashboard.

To support these efforts, DCFS emphasizes early exploration of kinship options during the initial placement process, along with the use of tools such as family finding strategies, support network mapping, and collaborative case staffing. The Division continues to promote and monitor relative

placements as a core stability and permanency strategy.

ITEM 11: RELATIONSHIP OF CHILDREN IN CARE WITH THEIR CAREGIVERS

Arkansas DCFS recognizes that maintaining and strengthening the caregiver-child relationship is essential to both reunification efforts and child well-being. The Division encourages staff to support engagement beyond scheduled family time by involving caregivers in medical appointments, school meetings, extracurricular events, and therapeutic services, when safe and appropriate to do so.

Despite these expectations, during the SFY 2024 QSPR, only 35% of reviewed cases were rated as a strength, indicating this item remains a significant struggle. Although family time was occurring in many cases, there was often little evidence of intentional efforts to deepen caregiver-child connections beyond family time. In most deficient cases, family time occurred in isolation from broader family involvement.

Under Arkansas law, all family time is presumed to be unsupervised unless an active safety threat exists. The law also requires a minimum of four hours of supervised family time each week, when supervision is necessary. Safe Measures data between 12/21/24 and 6/7/25 reflects the extent to which this is being met, as illustrated in the chart below.

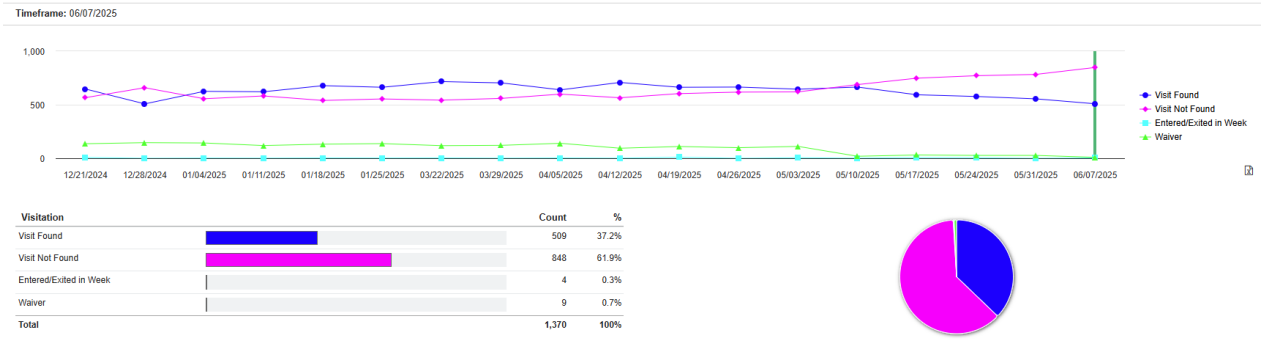


Figure 17: SafeMeasures, Visitation Report June 2025

DCFS has identified several barriers to consistent and meaningful family engagement. These include limited and timely documentation of family time due to staff workloads, unclear expectations regarding what constitutes quality engagement, and insufficient coordination with support networks to assist in facilitating family time.

In response, the inclusion of the SOP Family Time Planning and Reflection Worksheet will help capture a more comprehensive record of family time sessions, including observations on caregiver behavior change and progress over time.

Conclusion

Arkansas concludes that Permanency is an **Area Needing Improvement**.

Although the state is meeting or exceeding national standards for achieving permanency within

12-23 and 24+ months, data related to the quality of connections for children experiencing foster care suggest a need for improvement. Arkansas is not consistently ensuring strong, stable connections for children, particularly through minimizing placement changes and fostering meaningful, high-quality relationships between children and caregivers.

C. Well-Being

Well-Being Outcomes 1, 2, and 3

Well-being outcomes include: (A) families have enhanced capacity to provide for their children's needs; (B) children receive appropriate services to meet their educational needs; and (C) children receive adequate services to meet their physical and mental health needs. Arkansas concludes that Well-Being is an **Area Needing Improvement**.

Performance Data Highlights

Based on analysis of engagement patterns from Arkansas's CFSR Statewide Assessment:

- Children were engaged in family case planning more frequently than their caregivers, with participation rates of 66% for children, compared to 59% for mothers, and 4% for fathers. This highlights the state's efforts to elevate youth voice in planning, while also indicating a need to further engage caregivers, particularly fathers.
- In-home services cases demonstrated stronger caregiver engagement overall, with mothers participating in family case planning 64% of the time, compared to 53% in permanency cases. This suggests that proximity and reduced system involvement may support greater caregiver involvement.
- Permanency cases had the highest frequency of caseworker visits, with 79% meeting the federal standard for regular contact. This is a notable strength and demonstrates Arkansas's commitment to ensuring consistent face to face contact with children in care.
- The quality of contact between caseworkers and children was strongest in permanency cases (77%)
- As of SFY 2024, only 68.7% of all permanency cases had a current family case plan statewide. This falls short of federal expectations and emphasizes the need for involvement.
    - When disaggregated by region, Areas 1, 3, and 6 had the lowest rates of plan completion. These areas are ongoing challenges for consistent documentation and family engagement in planning efforts.
    - Addressing these barriers remains a strategic priority, with Arkansas exploring targeted workforce stabilization and process improvements to strengthen planning practices statewide.

Methodology

This section is evaluated using quantitative data from existing data sources as well as qualitative data obtained from focus group interviews, and internal case reviews. A brief description of the most notable data used is outlined below.

- Data Reports:
  - Arkansas's Annual Report Card SFY '24
  - QSPR Report SFY '24
  - State, Area, and County Profiles Sept. '24
  - SafeMeasures Family Case Plan Report
- Focus Group Interviews

Well-Being Outcome 1: Families Have Enhanced Capacity to Provide for their Children's Needs

This item assesses whether agencies adequately assess and address the needs of children, caregivers, and resource parents to ensure well-being, permanency, and stability. It includes:

- Comprehensive assessments of children's physical, emotional, educational, and mental health needs.
- Service provision to biological caregivers and resource parents to support reunification, placement stability, or adoption.
- Timely and ongoing caseworker visits to ensure needs are being met.

Well-Being 1: Families have enhanced capacity to provide for their children's needs (N=SFY 2024)	SFY 2024 QSPR	SFY 2023 QSPR	SFY 2022 QSPR	SFY 2021 QSPR	SFY 2020 QSPR	Round 3 CFSR
	48%	43%	43%	56%	71%	56%
Item 12: Needs and Services of Child, Caregivers, and Resource Parents (N=170)	42%	47%	43%	64%	75%	64%
Item 13: Child and Family Involvement in Family Case Planning (N=160)	51%	59%	61%	69%	78%	69%
Item 14: Caseworker Visits with Child (N=170)	69%	67%	63%	80%	86%	80%
Item 15: Caseworker Visits with Caregivers (N=137)	48%	53%	46%	63%	71%	63%

ITEM 12: NEEDS AND SERVICES OF CHILD, CAREGIVERS, AND RESOURCE PARENTS

This item examines how needs are identified, what the needs are, and the match between needs and implemented services.

Arkansas continues to experience challenges in ensuring consistent, comprehensive assessments of the needs of children, caregivers, and resource parents. In SFY 2024, only 42% of reviewed cases met the threshold for strength in this area, a decline from 47% in SFY 2023 and 64% in Round 3 of the CFSR.

Item	Strength Rating Percentage	Number of Cases
12	52%	89
12A: Child	72%	123
12B: Caregivers	51%	71
12C: Resource Parents	81%	77

The results point to practice inconsistencies across work processes, particularly around early assessments and timely service linkage. Delays in completing family case plans and uneven use of Structured Decision Making (SDM) tools suggest that while the infrastructure for high quality assessments exists, it is not fully integrated into day-to-day practice across all areas.

SafeMeasures data further illustrates these gaps. As of February 2025, only 68.7% of all permanency cases statewide had completed current family case plans for the state. When disaggregated by region, Areas 1, 3, and 6 show the lowest rates of completion. These areas also report the highest caseloads and the most significant turnover rates for the area as well as challenges in sustaining consistent documentation and planning efforts.

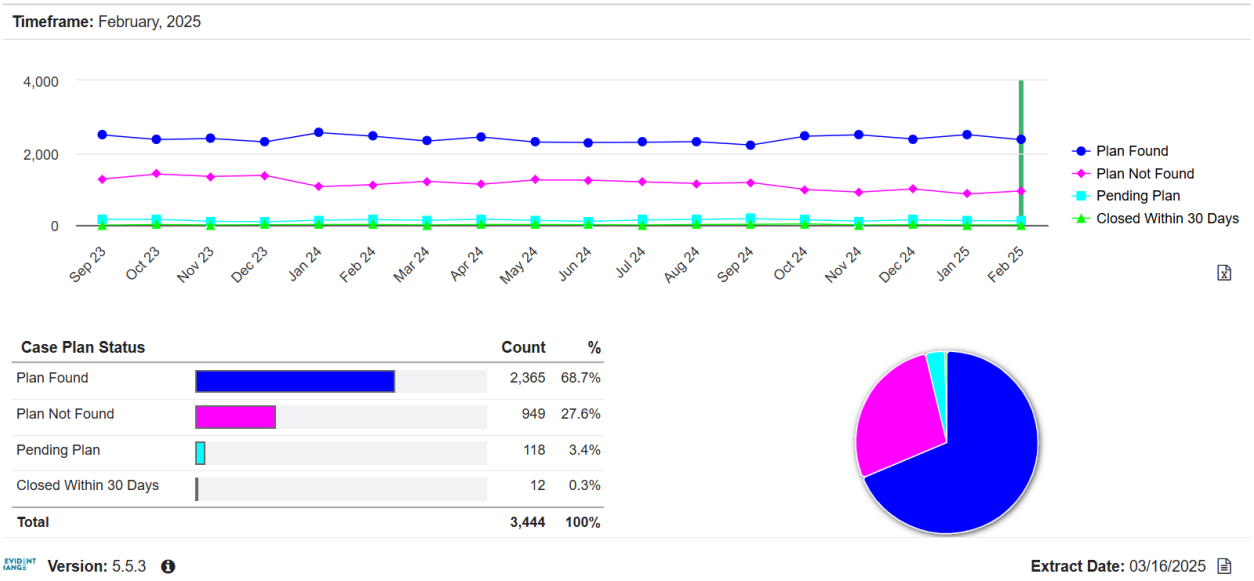


Figure 18: SafeMeasures Family Case Plan Report March 2025

Despite these challenges, Arkansas continues to prioritize improvement in family case planning and service coordination:

- **Family Case Plans**: Every child experiencing foster care must have a court approved family case plan that outlines the steps and services needed to achieve permanency. In Arkansas, these plans serve as the foundation for case direction. They are regarded as a roadmap for families, staff, and the court system. As such, family case plans must clearly align services with family needs and the court ordered permanency goal.
- **Structured Decision Making (SDM) Tools**: Arkansas has implemented SDM tools,

including the family case planning tool, to improve consistency in assessment and family case planning. These tools are designed to ensure that services are matched to each family's strengths, needs, and circumstances.

- **Strengthening Community Based Support**: Arkansas is actively working to reduce delays and administrative burden by increasing the use of community driven supports. This shift helps to ensure that families have access to services and resources outside of DCFS involvement, which can lead to more sustainable, long-term support.

Well-Being 1: Families have enhanced capacity to provide for their children's needs (N=SFY 2024)	SFY 2024 QSPR	SFY 2023 QSPR	SFY 2022 QSPR	SFY 2021 QSPR	SFY 2020 QSPR	Round 3 CFSR
	48%	43%	43%	56%	71%	56%
Item 13: Child and Family Involvement in Family Case Planning (N=160)	**51%**	**59%**	**61%**	**69%**	**78%**	**69%**

ITEM 13: ENGAGING CHILDREN AND FAMILIES IN FAMILY CASE PLANNING

Ensuring that children and their caregivers are actively involved in the family case planning process is essential for achieving meaningful permanency and well-being outcomes. In Arkansas, 51% of cases reviewed during the SFY 2024 QSPR indicated that children and caregivers were engaged in family case planning discussions. While this represents a foundation for continued efforts, Arkansas recognizes the importance of strengthening engagement strategies to ensure that families have a more active and meaningful role in shaping case goals and service plans.

The State continues to implement targeted strategies to improve meaningful family engagement, including efforts related to Safety Organized Practice (SOP), which promotes collaborative decision making between family service workers, families, and service providers.

Current Engagement Trends

Analysis of engagement patterns indicates that:

- Children were engaged in family case planning at higher rates than caregivers (66% for children, 59% for mothers, and 4% for fathers).
- In permanency, engagement efforts were more frequent (74%) compared to in-home cases (55%).
- In-home cases showed higher levels of caregiver engagement overall, with mothers participating 64% of the time compared to 53% in permanency cases.
- Fathers were engaged less consistently than mothers across both in-home (49%) and permanency (46%) cases.

While these efforts reflect progress in engaging families, a lack of consistent caseworker contact with children and caregivers continues to be a barrier to full participation. Additionally, logistical

challenges-such as family case planning meetings occurring during the workday at DHS offices can make it difficult for caregivers to attend and fully engage.

Efforts to Increase Caregiver Engagement

Arkansas has taken specific steps to enhance caregiver engagement, particularly for fathers and putative fathers:

- Legislative changes now allow putative fathers to participate in family case planning without requiring DNA conformation first, ensuring earlier involvement.
- Routine messaging through worker training and on-going DCFS professional development reinforces the importance of caregiver engagement at all stages of a case.
- "Back to the Basics" webinar series continues to emphasize evaluating and providing services consistently across all case types, including investigations, DR, in-home, permanency, and adoption.

Well-Being 1: Families have enhanced capacity to provide for their children's needs (N=SFY 2024)	SFY 2024 QSPR	SFY 2023 QSPR	SFY 2022 QSPR	SFY 2021 QSPR	SFY 2020 QSPR	Round 3 CFSR
	48%	43%	43%	56%	71%	56%
Item 14: Caseworker Visits with Child (N=170)	69%	67%	63%	80%	86%	80%
Item 15: Caseworker Visits with Caregiver (N=137)	48%	53%	46%	63%	71%	63%

ITEMS 14 & 15: CASE WORKER VISITATION WITH CHILDREN AND THEIR CAREGIVERS

Frequent and high-quality caseworker visits are the foundation of effective child welfare practice. These visits allow case workers to engage with families, assess risk and safety, identify strengths and needs, and provide support to strengthen caregiver capacity. Consistent and meaningful interactions between family service workers and families are critical for ensuring child safety, permanency, and well-being. When these visits do not occur as required, it becomes more difficult to monitor progress, address concerns, and support families in achieving their case goals.

Current Performance and Progress

During the SFY 2024 QSPR, visits between children and caseworkers were conducted with sufficient frequency and quality in 69% of cases reviewed. This represents a four-percentage point increase from SFY 2023 and Round 3 CFSR, demonstrating progress in strengthening visitation practices.

When looking at Items 3, 14, and 15 together, over half of the cases reviewed (101) received the same rating for these items. Meaning that if Item 3 was rated as a strength, so were 14 and 15, OR if Item 3 was an ANI, so were 14 and 15. This demonstrates a connection in data to support the State's assertion that assessing safety and risk is likely not happening in many cases simply because visits to caregivers and children are not happening at a sufficient frequency and quality.

However, differences remain between in-home and permanency cases:

- Permanency cases had a higher frequency of caseworker visits (79%) compared to in-home cases (70%)
- The quality of contact between case workers and children was also found to be stronger in permanency cases (77%) compared to in-home settings (72%).

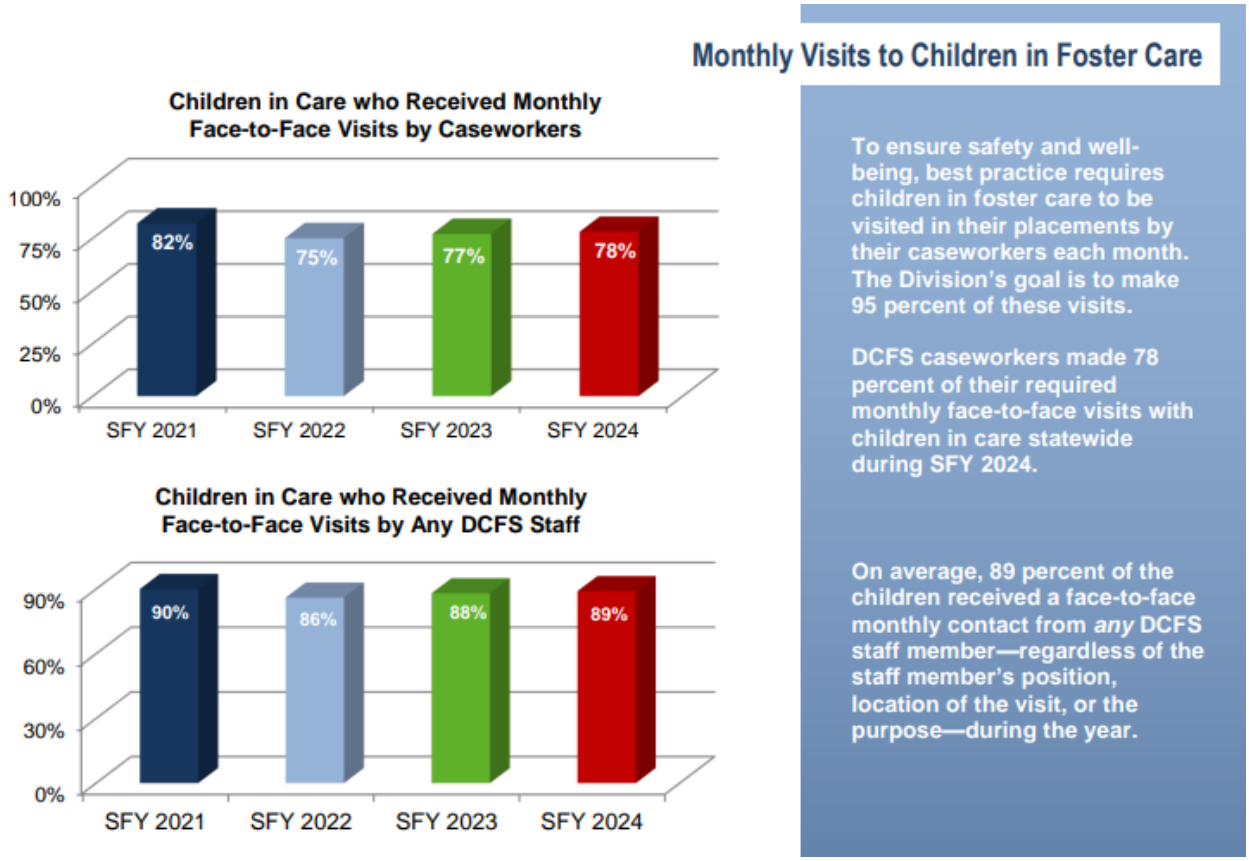


Figure 20: Arkansas's Annual Report Card SFY 2024

The data in the chart above reflects the rate of face-to-face contact between DCFS staff (FSW, Program Coordinator, or higher) and children experiencing foster care during SFY 2024. During SFY 2024, the Division conducted monthly face-to-face visits with 78% of children experiencing foster care. This measure remained relatively consistent throughout the period demonstrating 3 percentage points improvement since SFY 2022. The chart also shows that the percentage of monthly contact by DCFS is significantly higher at 89% monthly when considering contact by any DCFS staff member.

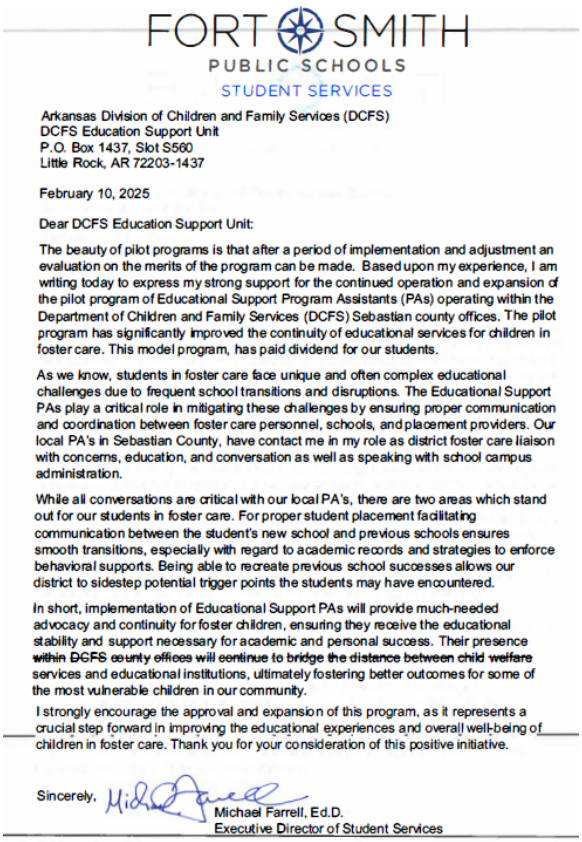
Well-Being Outcome 2: Children receive Appropriate Services to Meet Their Educational Needs

Ensuring that children experiencing foster care receive appropriate educational services is critical to their long-term success and stability. Many children experiencing foster care face educational disruptions, enrollment delays, and learning gaps due to placement changes, trauma, and other challenges. Well-being Outcome 2 assesses whether DCFS is effectively identifying and addressing

the educational needs of children in care, ensuring they have access to necessary supports, resources, and advocacy.

Arkansas DCFS works collaboratively with schools, resource parents, and child welfare professionals to support educational stability and success. Key components of this outcome include:

- Timely school enrollment and records transfer following a placement change.
- Identification and provision of special education services when needed.
- Caseworker engagement in monitoring school progress and addressing academic challenges.
- Efforts to maintain school continuity whenever possible to minimize disruptions.



FORT SMITH
PUBLIC SCHOOLS
STUDENT SERVICES

Arkansas Division of Children and Family Services (DCFS)
DCFS Education Support Unit
P.O. Box 1437, Slot S560
Little Rock, AR 72203-1437

February 10, 2025

Dear DCFS Education Support Unit:

The beauty of pilot programs is that after a period of implementation and adjustment an evaluation on the merits of the program can be made. Based upon my experience, I am writing today to express my strong support for the continued operation and expansion of the pilot program of Educational Support Program Assistants (PAs) operating within the Department of Children and Family Services (DCFS) Sebastian county offices. The pilot program has significantly improved the continuity of educational services for children in foster care. This model program, has paid dividend for our students.

As we know, students in foster care face unique and often complex educational challenges due to frequent school transitions and disruptions. The Educational Support PAs play a critical role in mitigating these challenges by ensuring proper communication and coordination between foster care personnel, schools, and placement providers. Our local PA's in Sebastian County, have contact me in my role as district foster care liaison with concerns, education, and conversation as well as speaking with school campus administration.

While all conversations are critical with our local PA's, there are two areas which stand out for our students in foster care. For proper student placement facilitating communication between the student's new school and previous schools ensures smooth transitions, especially with regard to academic records and strategies to enforce behavioral supports. Being able to recreate previous school successes allows our district to sidestep potential trigger points the students may have encountered.

In short, implementation of Educational Support PAs will provide much-needed advocacy and continuity for foster children, ensuring they receive the educational stability and support necessary for academic and personal success. Their presence ~~within DCFS county offices will continue to bridge the distance between child welfare~~ services and educational institutions, ultimately fostering better outcomes for some of the most vulnerable children in our community.

I strongly encourage the approval and expansion of this program, as it represents a crucial step forward in improving the educational experiences and overall well-being of children in foster care. Thank you for your consideration of this positive initiative.

Sincerely,

Michael Farrell, Ed.D.
Executive Director of Student Services

Figure 21: Letter of Support

Well-Being 2: Children Receive Appropriate Services to Meet Their Educational Needs (N=SFY 2024)	SFY 2024 QSPR	SFY 2023 QSPR	SFY 2022 QSPR	SFY 2021 QSPR	SFY 2020 QSPR	Round 3 CFSR
	92%	95%	89%	91%	92%	91%
Item 16: Educational Needs of the Children (N=101)	92%	95%	89%	91%	92%	91%

ITEM 16: EDUCATIONAL NEEDS OF CHILDREN

During SFY 2024 QSPR, DCFS demonstrated strong performance in assessing and addressing the educational needs of children experiencing foster care. 92% of reviewed cases confirmed that children received appropriate educational services, aligning closely with Well-Being Outcome 2 and maintaining a high standard of compliance. While this represents a slight three percentage points decrease from SFY 2023 QSPR, it remains one percentage point higher than Round 3 CFSR results, reflecting continued commitment to ensuring educational stability for children experiencing foster care.

To further strengthen education focused advocacy and service coordination, DCFS employs a statewide Education Program Manager, an experienced licensed teacher with extensive knowledge of education law, policies, and school systems. This position plays a critical role in:

- Advocating for children's educational rights within both child welfare and school systems.
- Ensuring special education needs are properly identified and addressed.
- Collaborating with caseworkers, schools, and caregivers to remove educational barriers for children experiencing foster care.

In 2023, DCFS launched a pilot program for Educational Support Program Assistants (PAs), modeled after Health Service Workers but focused specifically on education related needs. This initiative, currently in 3 areas (10, 8, and 2), has shown exceptional success in:

- Ensuring timely school enrollment and record transfers.
- Monitoring education screens in the Division information management system to track academic progress.
- Facilitate comprehensive education-based assessments and special education referrals.
- Build relationships within areas and local school districts.

Due to success thus far of the pilot, DCFS hopes to expand the program statewide, ensuring that all children experiencing foster care have dedicated educational support specialists advocating for their academic success. Arkansas continues to demonstrate strong performance in meeting the educational needs of children experiencing foster care. With high compliance rates, an experienced Program Manager, and successful pilot programs expanding statewide, the state remains proactive in maintaining and improving educational outcomes for youth in care.

Well-Being Outcome 3: Children Receive Adequate Services to Meet Their Physical and Mental Health Needs

Ensuring that children experiencing foster care receive comprehensive physical and mental health services is essential for their overall well-being, stability, and development. Many children entering care has unmet medical, dental, or behavioral health needs due to prior neglect, trauma, or lack of access to healthcare. Well-Being Outcome 3 assesses whether DCFS is effectively identifying, providing, and coordinating the necessary healthcare services to support children's physical, emotional, and psychological well-being.

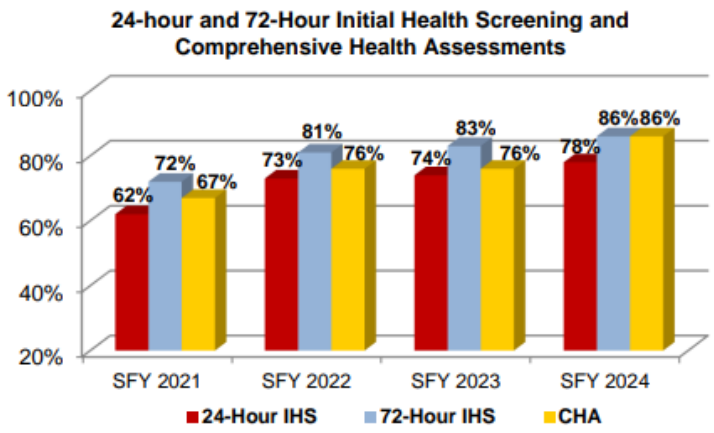
Well-Being 3: Children Receive Adequate Services to Meet Their Physical and Mental Health Needs (N=SFY 2024)	SFY 2024 QSPR	SFY 2023 QSPR	SFY 2022 QSPR	SFY 2021 QSPR	SFY 2020 QSPR	Round 3 CFSR
	73%	80%	73%	91%	92%	91%
Item 17: Physical Health of the Child (N=141)	82%	84%	80%	91%	92%	83%
Item 18: Mental/Behavioral Health of the Child (N=97)	75%	83%	72%	75%	92%	75%

ITEM 17: PHYSICAL AND DENTAL HEALTH NEEDS OF CHILDREN

DCFS continues to demonstrate a commitment to addressing the physical and dental health needs of children experiencing foster care. In SFY 2024, 82% of cases reviewed showed that children's physical health needs were adequately assessed and addressed. While this is a slight decrease from the 84% reported in SFY 2023, it still reflects a one percentage point improvement from the Round 3 CFSR baseline of 81%.

Most deficiencies identified in this area continue to relate to dental health, particularly delays in ensuring that children, including infants and toddlers, receive timely dental assessments. This aligns with national concerns and reinforces the importance of early intervention. The American Academy of Pediatric Dentistry recommends that children see a dentist by age one or within six months of their first tooth erupting.

The Delta Dental Smiles Program has shown promise in supporting this effort, and additional outreach and reminders to caseworkers are underway. Continued messaging about early dental care and the use of standing dental orders remain a focus.



Depending on the severity of alleged maltreatment that leads to a child's entry into care, DCFS must complete either a 24-hour initial health screening (IHS) or 72-hour IHS. Children must also receive a Comprehensive Health Assessment (CHA) within 60 days of entering care.

DCFS completed 78 percent of its required 24-hour IHSs, 86 percent of its 72-hour IHSs, and 86 percent of its CHAs on time during SFY 2024.

Figure 24: Initial Health Screenings, Arkansas's Annual Report Card SFY 2024

The DCFS SFY 2024 Annual Report Card, as shown above, indicates DCFS completed 78% of its required initial health screens within 24 hours, 86% of its 72-hour initial health screens, and 76% of its comprehensive health assessments (required within sixty (60) days of a child entering foster care) on time during SFY 2024. All three (3) of these measures were improvements from SFYs 2022 and 2023.

ITEM 18: MENTAL AND BEHAVIORAL HEALTH NEEDS OF CHILDREN

In 75% of cases reviewed during the SFY 2024 QSPR, DCFS made sufficient efforts to assess and address the mental and behavioral health needs of children involved with the Division. This represents a nine (9) percentage decrease from the SFY 2023 QSPR.

Deficiencies in this area were most often related to a lack of timely assessment and service provision, particularly in cases where children were known victims of physical abuse or had witnessed significant domestic violence in the home. In several instances, there was no clear documentation of follow-up or referral for mental health services after disclosure of trauma.

Current DCFS Policy requires that all children entering foster care receive a mental health assessment within five business days. While this expectation is in place, staff capacity and access to qualified providers remain challenges in some areas of the state.

The SFY 2024 QSPR suggests there are systemic barriers in how mental and behavioral health services for children are viewed and prioritized. In some communities, services are underutilized due to limited availability, stigma, or a lack of understanding about early mental health intervention.

DCFS will continue to partner with service providers, schools, and community stakeholders to reinforce the importance of mental health services, particularly for infants and young children, as a critical part of long-term well-being and permanency planning.

Conclusion

While the state is doing well with educational services (item 16) for children experiencing foster care, Arkansas recognizes there is room for improvement in efforts to engage families in planning and that additional focus on the mental health of children experiencing foster care is necessary. Arkansas concludes that Well-Being is an **Area Needing Improvement**.

SECTION IV: ASSESSMENT OF SYSTEMIC FACTORS

A. Statewide Information System

Item 19: Statewide Information System

Summary of State Performance

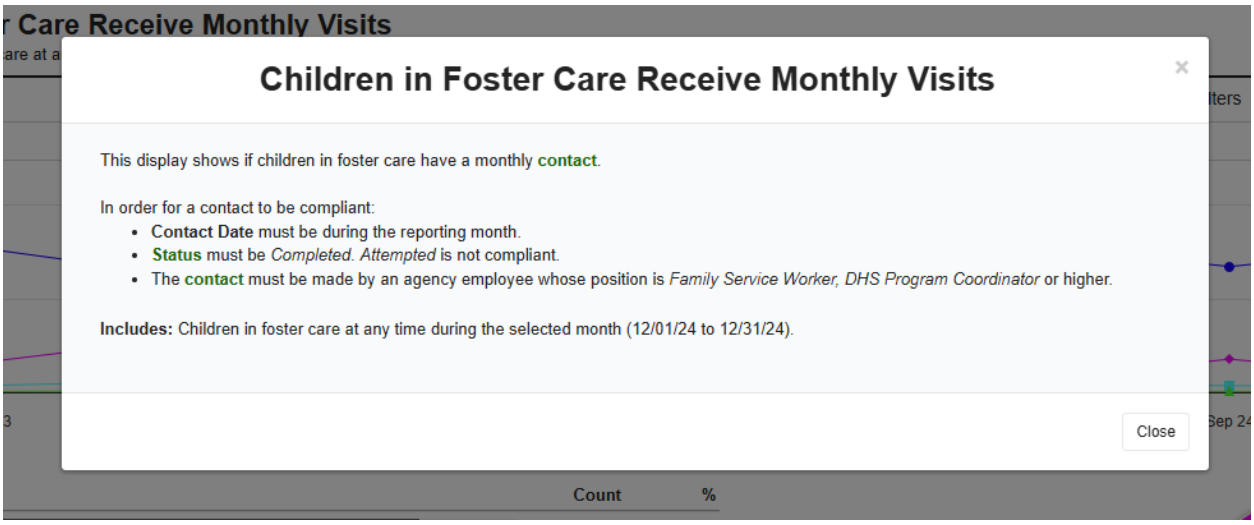
Item 19 is rated as a strength, as the Arkansas Department of Children and Family Services has a statewide information system that can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) experiencing foster care. Arkansas DCFS Information Management System, CHRIS, is a fully longitudinal database that permits the tracking of all children from the time they enter the child welfare system through the time the case is closed and includes all related casework activities statewide. The accuracy of demographic information, placement locations, and child status is supported by layers of review/approval and system validation. Quality assurance activities confirm the reliability of the data.

Arkansas's system does have some opportunities for improvement. While Arkansas has administrative data to support identification of permanency goals as well as trends and patterns in achieving those goals, Arkansas has faced challenges in meeting AFCARS requirements, which led to federal noncompliance findings. This stems primarily from the change in the required format for submitting files to the Children's Bureau in November 2023. The change rendered CHRIS unable to support AFCARS information. Arkansas is still able to upload files into the National Child Welfare Data Management System (NCWDMS) and download the Compliance Details report, Compliance Summary Report, and Quality report. However, due to the file formats, Arkansas is not able to translate the data into usable information that DCFS staff can comprehend. This has had an adverse impact on Arkansas's overall continuous quality improvement system. However, the Information Technology team in Arkansas is working to resolve this issue. The state recognizes the need for enhancements in its data reporting and management capabilities to better align with federal standards and improve overall child welfare outcomes.

Introduction and Background

DCFS has operated the **CH**ildren's **R**eporting and **I**nformation **S**ystem (CHRIS), Arkansas's statewide automated child welfare information system (SACWIS), since 1997. CHRIS is a fully longitudinal database that permits tracking of children from the time they enter the child welfare system through the time they leave the system. The system supports the full scope of services provided by the Division and includes functionality that allows DCFS to readily identify the status, demographic characteristics, location, and goals for the placement of every child experiencing foster care. Arkansas DCFs policy and practice guidelines outline the requirements for gathering and verifying child/family information and the requisite timelines. Arkansas DCFS maintains electronic case files for all children in care.

Static information, such as the child's ethnicity, and gender are mandatory fields that must be documented within CHRIS for staff to move to the next screen. Although DCFS policy requires caseworkers to document fluid changes, such as status, physical location, and permanency goals in CHRIS, there are no system stops to ensure documentation of fluid information occurs. To ensure documentation of fluid information, DCFS balances the lack of system checks with administrative checks conducted by supervisors. Each supervisor is responsible for ensuring timely documentation of changes according to DCFS policy and for monitoring overall performance of timely and accurate documentation. The definition of timely changes based on the DCFS Policy for the particular data point being documented. For this reason, SafeMeasures (described below) provides an outline for supervisors to fact check their understanding of the policy requirements for each data point as shown below:



Supervisors and staff can additionally click on any green link to see further Policy guidelines. For the example above, when you click on the word 'contact' the following is displayed:

Foster Care Contact Requirements

In order for a contact to be compliant:

- **Contact Date** must be during the reporting month.
- **Status** must be *Completed*. *Attempted* is not compliant.
- The contact must be made by an agency employee whose position is *Family Service Worker* or higher.

Contact Type in the **Contact** screen must be either:

- *Face to Face (Home)*
- *Face to Face (Hospital/Medical Facility)*
- *Face to Face (Placement Provider)*
- *Face to Face (Mental Health Facility)*
  - ***Face to Face (Failed Attempt)* is not compliant.**

Figure 25: SafeMeasures Help Text, Foster Care Contact Requirements

Supervisors and staff have other reminders of timing and quality for data entry. "Ticklers," for example is an alert supervisors can create to remind staff to complete specific case needs. Additionally, system reports are available to ensure supervisors and staff can review the completion or absence of case contacts or services based on time frames required by DCFS Policy.

CHRIS serves as a centralized source to store information (e.g., client, legal and service information) and manage workloads (e.g., its tickler system). It is also the source of DCFS' state and federal reporting, including DCFS management reports and the reporting required for the Adoption and Foster Care Analysis and Reporting System (AFCARS), the National Child Abuse and Neglect Data System (NCANDS), the National Youth in Transition Database (NYTD) and the federal caseworker visits reports. The information stored within CHRIS is available to the system's users 24/7. [1]

Methodology

SafeMeasures

Data is easily aggregated and reported by the county, service through SafeMeasures, a reporting system managed through a contract with Evident Change. SafeMeasures provides information obtained from CHRIS and affords DCFS staff the ability to sort data on a case level for use in case management while also allowing administrative staff the ability to sort by county, area, or statewide data sets for use in predicting and managing trends. Each report in SafeMeasures can be further refined by filtering the data sets according to user preferences. Filters available vary by report and data subsets within individual reports. Evident Change provides continual user support to allow development of new reports, customization of existing reports, and 'bug' fixes when data errors are identified. Reports are specific to the user, meaning the view is different based on who is accessing the information. When a family service worker (FSW) works in SafeMeasures, the view is specific to the FSW's case load. When a supervisor is in SafeMeasures the view is specific to the unit or county of supervision. When an area director works in SafeMeasures the view is specific to the area of supervision. When administrative staff work in SafeMeasures the view is specific to the entire state. Depending on the security level of the individual, they may be able to view more than their specific area or level of supervision, as necessary. SafeMeasures has metrics built to ensure records are being documented to comply with DCFS Policy. Compliance reporting will categorize a record as incomplete if it is not recorded up to specifications (e.g., Client contact reports require a contact to be made by and FSW position or higher and must be a face-to-face purpose type). The cross tab and subsets tools help identify other items that are missing related to the report (demographics).

Arkansas SafeMeasures has 6 years of database development. Initial report development fine-tuned cohort populations and assignment structures. New reports use that foundation to build their displays. Through the QA process reports are compared, using approved and trusted reports as a source of truth and leveraging that knowledge when developing new reports. All report displays are based on methodologies approved by DCFS and adhered to DCFS Policies. When

[1] Excluding regularly scheduled maintenance that occur outside of core working hours to ensure minimal impact to operations

venturing into new data elements, SafeMeasures collects as much information as possible to best understand how the data is entered and establish the workflow to get the data entered. When a report is released, DCFS stakeholders are asked to vet the report and identify issues with how the report is set up. If any issues are found, solutions are discussed and implemented accordingly. This work is ongoing, and if issues are found later, Evident Change will work to ensure all reports match expectations. If a report needs to be updated due to policy change, Evident Change works to have the report updated as soon as DCFS provides notification of the new requirements. SafeMeasures is described in more detail in Arkansas's CFSP 2025-2029, page 62.

The graphic below demonstrates the core reporting of demographics in SafeMeasures. There are three sections to show more than one demographic for visualization in this report.

Over 18 Years	208	86.0%	34	14.0%	
Unknown	0	0.0%	38	100.0%	
Total	3,561	41.1%	5,105	58.9%	

Gender

Gender	Foster Care		In Home Protective Services		
Male	1,800	41.0%	2,593	59.0%	
Female	1,761	41.3%	2,503	58.7%	
Unknown	0	0.0%	9	100.0%	
Not Reported	0	0.0%	0	0.0%	
Error	0	0.0%	0	0.0%	
Total	3,561	41.1%	5,105	58.9%	

Race

Race	Foster Care		In Home Protective Services	
American Indian or Alaskan Native	7	50.0%	7	50.0%
Asian	10	50.0%	10	50.0%
Black or African American	737	39.4%	1,132	60.6%
Native Hawaiian or Pacific Islander	24	52.2%	22	47.8%
White	2,241	40.8%	3,254	59.2%

Figure 26: SafeMeasures Demographics Report

The specific report below offers data regarding the length of time children experience foster care beginning with the date the child enters foster care and ending with the date the child achieves permanency and exits foster care.

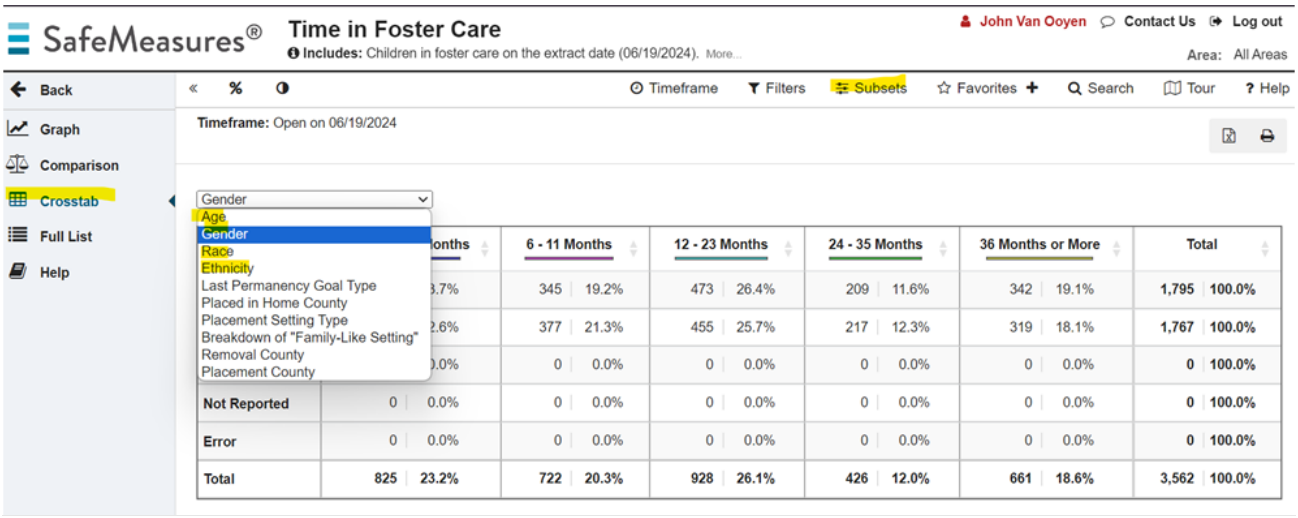


Figure 27: SafeMeasures Demographics Report, Crosstab

Each report provides a column or row to account for errors and reports which can be used administratively to improve practice by observing the full list of children for each report. When 'Full List' is selected, a report containing the child's name, supervisor, worker, case id, client id, client name, client age, removal date, exit date, priority, and status is displayed. Detailed reports, like all SafeMeasures reports, can be printed. SafeMeasures reports are numerous and cover all specialties of child welfare. A glimpse of some of the available reports is displayed below:

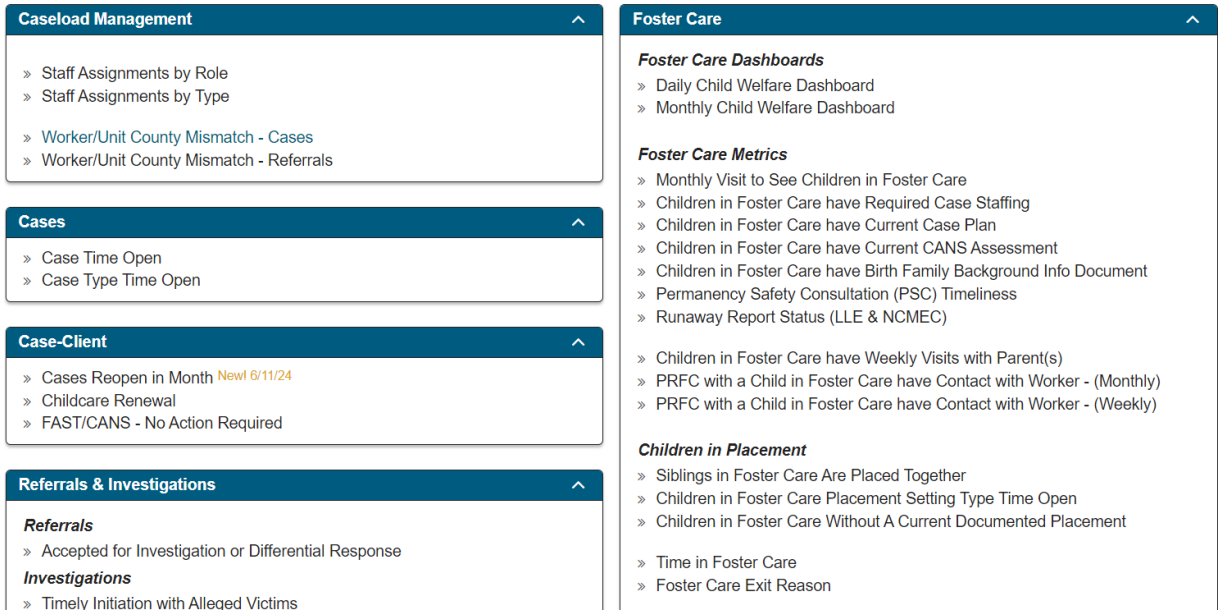


Figure 28: SafeMeasures General Reporting Capacities

Adoption and Foster Care Analysis and Reporting System (AFCARS) Error Progression Reports
AFCARS reports provide a quantitative measure of data validity and reliability. Reports indicate that the statewide information system is functioning such that it can readily identify the status, demographic characteristics, location, and goals for the placement of every child experiencing foster care. When functioning normally, tables are developed from these reports and delineate

the number and types of errors as well as the percentage of records with errors for each pertinent AFCARS Data Element.

The AFCARS Foster Care Error Report – Open and Closed Cases lists all AFCARS foster care errors for the current reporting period for both open and closed cases by service area, county, and primary caseworker. As errors are corrected, they are removed from the report, thereby allowing supervisors and program staff to use these reports as management tools to ensure that the appropriate data is documented within the SACWIS.

The Information Technology team in Arkansas is working to resolve these issues pertaining to the non-compliant elements due to the change in reporting requirements. Arkansas is currently "non-compliant" on 14 elements:

E12 – ICWA Notification
E58 – Siblings in Living Arrangements
E63 – Termination of Parent Rights for First Parent
E114 – E120 – Foster Family Home Type
E114 – Licensed Home
E115 – Therapeutic Foster Family
E116 – Shelter Care Foster Family Home
E117 – Relative Foster Family
E118 – Pre-Adoptive Home
E119 – Kin Foster Family Home
E120 – Other Living Arrangement Type
E126 – Tribal Membership of First Resource Parent
E151 -- Caseworker Visit Dates
E155 – Exit Reason
E55 – Foster Care Maintenance Payment

Arkansas is working with the vendor, Deloitte, to correct the data collection methodologies in order to submit the AFCARS elements and the state plans as well as to resubmit the 2024A file for PUR October 1, 2023 – March 31, 2024. Some of the elements will not be corrected for resubmission of 2024A due to the lack of ability to capture the data in CHRIS.

Analysis

Arkansas's Statewide Information System can identify the status, demographic characteristic, placement location, and goals for all children. All users can open CHRIS for any client and readily view key information. Arkansas has several policies and practices to ensure the accuracy and reliability of the data in the statewide information system. In response to the issues linked to limitations in the existing information system, which affected Arkansas's ability to meet federal reporting requirements, Arkansas outlined strategies to enhance the information system in the CFSP. A key initiative during that time was the development of ARFocus, a new system intended to replace CHRIS and address previous deficiencies. However, due to various challenges, the state discontinued the ARFocus project. Subsequently, Arkansas shifted its focus to enhance some parts of the existing CHRIS platform while determining next steps in 2025. These enhancements

aim to improve data accuracy, timeliness, and overall system functionality to better support case management and comply with federal reporting standards, including AFCARS. This strategic pivot leverages existing infrastructure while addressing the critical need for a robust system. By concentrating on upgrading CHRIS, Arkansas demonstrates a commitment to resolving the systemic issues highlighted in the CFSR and fulfilling the objectives set for the in the CFSP. This approach is expected to enhance the state's capacity to manage child welfare data effectively, thereby improving outcomes for children and families. Therefore, **Item 19 is rated as a strength**.

B. Case Review System

Item 20: Written Family Case Plan

Summary of State Performance

Item 20 is rated as an **Area Needing Improvement** based on the SFY 2024 QSPR. While Arkansas DCFS demonstrates strong policy guidance and practice expectations for written family case plans, there are ongoing challenges with consistent, timely completion across the state.

From April 2023 through September 2024, DCFS staff completed family case plans timely in 2,221 out of 3,617 applicable cases, reflecting a statewide timeliness rate of 61.4%. This trend remained consistent over the reporting period and highlights both strengths in policy structure and continued need for improved practice fidelity and accountability in timely family case plan development.

Introduction and Background

DCFS Policy IV-B: Services Case Plan and Procedure IV-B1 and content of written family case plans. A family case plan must be completed and filed with the court within 30 days of a child's entry into foster care.

Family case plans are developed using the information gathered through assessments, investigation findings, and initial contacts with the family. Workers use this information to identify service needs and outline clear conditions for return, ensuring the plan is both individualized and safety focused. DCFS policy also requires documentation of placement appropriateness, sibling connections, family time plans, and services for both children and caregivers.

Recent QSPR results indicate strong procedural compliance in this area, with most plans meeting required timeframes and including essential elements. Areas for ongoing improvement include the quality of engagement with families during plan development and ensuring goals remain current and connected to the underlying safety threats and behavior change.

These plans serve as a foundation for case direction and permanency planning, and DCFS continues to emphasize the importance of tailoring case goals to match the family's strengths, needs, and progress.

Analysis

The most recent QSPR data reinforces this challenge. Although written family case plans were present in the majority of cases reviewed, many did not meet the required timeframe. Furthermore, regional variation is significant. Areas 1,3, and 6 demonstrated the lowest percentage of completed family case plans, indicating the need for targeted support, supervision, and system alignment in those areas.

All Areas — Show All

Area	Plan Found		Plan Not Found		Pending Plan		Closed Within 30 Days		Total
Missing/Unknown	0	0.0%	0	0.0%	9	56.2%	7	43.8%	**16**
Area 10	105	96.3%	0	0.0%	4	3.7%	0	0.0%	**109**
Area 4	198	77.3%	54	21.1%	4	1.6%	0	0.0%	**256**
Area 7	162	63.3%	73	28.5%	21	8.2%	0	0.0%	**256**
Area 5	242	82.0%	31	10.5%	21	7.1%	1	0.3%	**295**
Area 3	161	48.9%	148	45.0%	18	5.5%	2	0.6%	**329**
Area 8	323	80.1%	42	10.4%	32	7.9%	6	1.5%	**403**
Area 9	310	71.8%	112	25.9%	8	1.9%	2	0.5%	**432**
Area 6	106	24.0%	317	71.9%	15	3.4%	3	0.7%	**441**
Area 1	184	40.6%	247	54.5%	20	4.4%	2	0.4%	**453**
Area 2	430	68.5%	168	26.8%	27	4.3%	3	0.5%	**628**
Total	**2,221**	**61.4%**	**1,192**	**32.9%**	**179**	**4.9%**	**26**	**0.7%**	**3,618**

Figure 29: SafeMeasures Family Case Plan Report, Area Specific

CHRIS and SafeMeasures reports show that while the system is structured to document all federally required elements, placement, family time, services, conditions for return, and sibling contact, these fields are not consistently completed or updated. Only 0.7% of family case plans were documented as “closed within 30 days”, suggesting a misalignment between caseworker practice and system usage. Plans may be developed or discussed with families but not formally entered or finalized in the system, leading to compliance gaps that affect federal ratings and data accuracy.

While DCFS adopted Safety Organized Practice (SOP) in 2021 to support family engagement and safety planning, the tools that support SOP are not currently embedded or required within CHRIS. This creates variability in how plans are developed and documented across the state. To address this, DCFS will implement Structured Decision Making (SDM) tools, specifically the Safety and Risk Reassessment and Family Case Planning tools, starting in 2025. These tools will standardize the way workers assess child and family needs, define behavior-based case goals, and structure plans aligned with protective capacities and permanency outcomes.

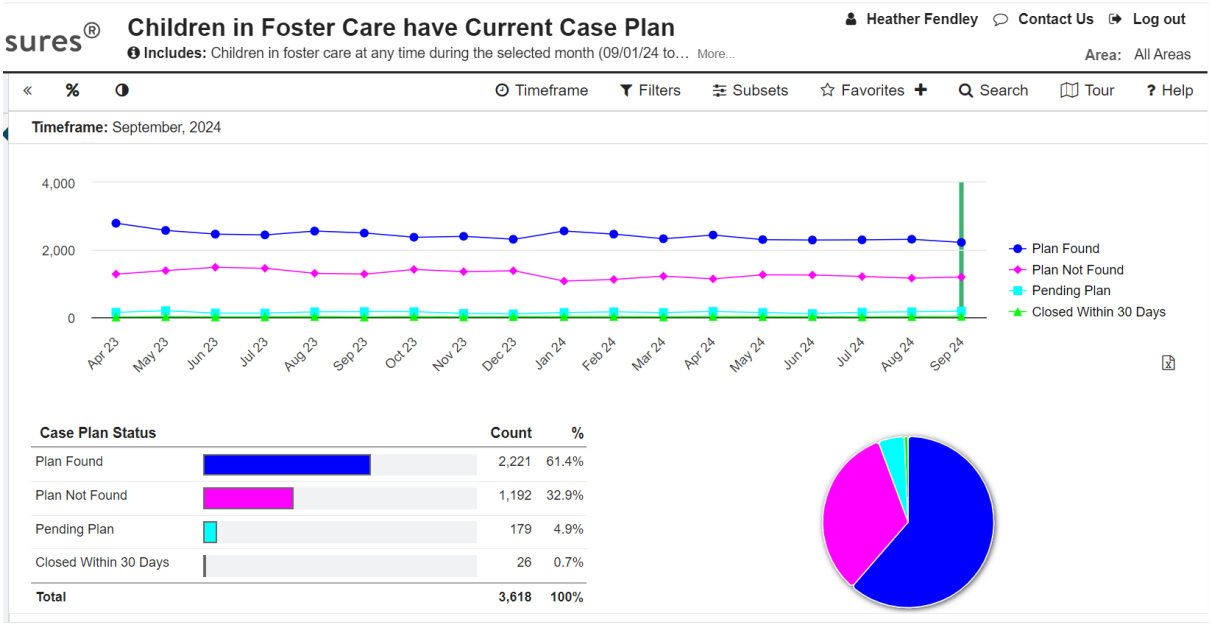


Figure 30: SafeMeasures Family Case Plan Report, Statewide

In addition to timeliness and completeness, QSPR also considers the child and family's experience with the family case planning process. While many case workers gather input from families, the quality of engagement varies. Some caregivers and youth felt the plan was "presented to them" rather than built together. Others express confusion around what the goals meant for their day-to-day responsibilities or reunification timeliness. These insights highlight the importance of not only meeting policy requirements, but ensuring families understand, contribute to, and feel ownership over their plans.

Stakeholder Input

Stakeholders across the state, including caregivers, resource parents, judicial partners, and caregivers with lived experience, provided mixed feedback on the family case planning process. While most agreed that families are given the opportunity to participate, the quality of that engagement and the consistency of the process vary greatly depending on the area of the state and leadership of local supervisors.

Common themes included:

- **Strong engagement leads to better outcomes**. Stakeholders emphasized that when Family Service Workers are actively engaging all parties, children, and caregivers, the case progresses more smoothly, and families have greater clarity about expectations and goals.
- **Some counties excel in collaborative planning,** tailoring services to family needs and completing plans timely, while others struggle to implement a consistent approach.
- **Resource parents often feel excluded** from the planning process, with some staff reportedly not inviting them or assuming they are not part of the decision-making team.
- **Caregivers are inconsistently engaged.** Some actively participate, while others are unaware or unclear about the planning process unless their caseworker clearly explains it and facilitates their involvement.

- **Family Team Meeting structure is lacking.** Stakeholders in many areas noted that the family case planning process would benefit from a more formal and consistent Family Team Meeting structure, with better facilitation and preparation.
- **Judicial influence is significant.** Some judges place little value on the family case plan, while others use adjudication hearings to dictate what should be included in the plan, leading to delays or minimal staff investment in initial planning.
- **Accountability varied widely.** In areas where leadership holds staff accountable for competing and documenting plans, family case plans are more likely to be timely and comprehensive. Where accountability is lacking, plans are often delayed or deprioritized.

Conclusion

While DCFS has clear policy and system structures in place to support the timely development of comprehensive family case plans, current date and stakeholder input reflect a consistent need for improvement in both execution and engagement. With only 61.4% of family case plans completed within required timeframes and wide variation in practice across the state, timely documentation and meaningful planning remain areas of concern.

The analysis reveals that plans are not always completed or documented within the CHRIS system, and families often do not experience the process as collaborative or clearly communicated. Resource parents and non-custodial caregivers are frequently left out, and the absence of a consistent Family Team Meeting structure contributes to these gaps.

Stakeholders echoed that when engagement is strong, outcomes are better, but accountability, supervision, and court culture all play a significant role in whether planning occurs with quality and intention. Efforts to improve this item must focus on reinforcing expectations, equipping staff with consistent tools, and creating space for meaningful participation by families and caregivers.

With the planned implementation of the SDM Family Case Planning tool and expanded SOP training, DCFS has the opportunity to embed both structure and equity into the family case planning process. These improvements will help ensure family case plans are not only completed on time, but truly reflect the needs, voices, and goals of the families we serve. Therefore, **Item 20 is rated as an Area Needing Improvement**.

Item 21: Periodic Reviews

Summary of State Performance

Arkansas DCFS meets federal and state legal requirements to ensure that every child in an out-of-home placement has a periodic review of their case status at least once every six months. These reviews are critical to ensuring child safety, ongoing service needs, and timely permanency planning**. Item 21 is rated as a Strength.**

Between July 1, 2022, and June 30, 2024, data from the Administrative Office of the Courts (AOC) indicated that review hearings were held on time for all but 228 cases statewide. Upon further verification, 226 of those entries were confirmed to have occurred within the required timeframe,

and only two cases were identified as not meeting the six-month requirement. This reflects a strong pattern of compliance and coordinated tracking between DCFS, the court system, and the AOC's DNet data system.

Introduction and Background

Periodic review hearings are governed by the Adoption and Safe Families Act (ASFA) and codified in Arkansas code A.C.A. § 9-27-337, as well as DCFS Policy VI-G. These reviews must occur at least every six months for each child experiencing foster care until a permanency outcome is achieved or the case is closed. The purpose of these reviews is to assess:

- Whether the family case plan, services, and placement are appropriate to meet the child's needs
- Whether reasonable efforts have been made to support reunification or other permanency goals
- Whether the child should continue to experience foster care or return home safely
- Whether the family time plan is appropriate and supportive of permanency and sibling connections.

Court findings must include the extent of compliance with the family case plan, progress toward alleviating the reasons for placement, and whether concurrent planning is occurring. The court may require additional reviews as needed and must provide reasonable notice to all parties.

Analysis

DCFS, in collaboration with the Administrative Office of the Courts (AOC), demonstrates consistent compliance with the requirement for periodic judicial reviews. Between July 2022 and June 2024, only two cases across the state lacked documented six-month reviews within the required timeframe, reflecting a nearly **100% compliance rate**.

The AOC's data were cross verified with CHRIS case narratives and court documentation, and in cases of missing data, DCFS staff made direct contact with legal partners to confirm hearing dates. In cases open for more than one-year, additional hearings were typically held every three months, exceeding the minimum requirement.

This performance reflects a strong culture of collaboration between caseworkers, legal staff, and the courts, and highlights how data transparency and communication contribute to timely judicial oversight. However, some variation was noted across jurisdictions, where hearing documentation processes differ or rely on manual entry, which can lead to data lags or consistencies.

Additional data pulls by AOC using methodology provided by Children's Bureau indicate inconsistency in accurate collection of data through the Context system (AOC's database). The hearing information in Contexte is still an optional data point to be collected by courts. The CIP team begin entering PPH hearings into DNet starting with PPH orders that were filed in 2022. For this data pull, hearing information was pulled from both DNet and Contexte. In the worksheets, the calculations get better in the 07/01/2024 period, and it is expected going forward the

calculations will continue to improve as more hearing data is being entered into DNet alongside the work of the courts that are scheduling hearings.

Note: SFY '25 review data was pulled differently from previous years using the workbook provided by Children's Bureau. Data for initial hearings, review hearings, and subsequent hearings was pulled according to the established timeframes in the workbook and all data sets are attached as Arkansas's 2025-2029 CFSR Attachments #6-#11 Hearing Calculations. For clarity and illustration, data in charts below is for the following timeframes:

- 070124_123024:

Hearing Type	Count of children (denominator)	Count of valid hearings (numerator)	Percentage of children who received a timely hearing
Initial	3477	405	12%
Subsequent	2630	800	30%
All	6107	1205	20%

- 010125_050125:

Hearing Type	Count of children (denominator)	Count of valid hearings (numerator)	Percentage of children who received a timely hearing
Initial	3842	597	16%
Subsequent	3697	1717	46%
All	7539	2314	31%

712 Review hearings entered filed between 07/01/2024 - 6/23/2025

- 84% were filed within 12 months of case opening
- 3% within 15 months
- 13% within 24 months

When pulling the data according to orders entered in Context rather than according to hearings entered, the data appears significantly different as shown below:

Hearing Type	Count of children (denominator)	Count of valid hearings (numerator)	Percentage of children who received a timely hearing
Initial	1195	712	60%
Subsequent	1352	482	36%
All	2547	1194	47%

Conclusion

Arkansas DCFS demonstrates strong compliance with holding timely periodic reviews for children in care, and both quantitative and qualitative data show that review hearings are occurring consistently statewide. The collaboration between CHRIS, DNET, and legal stakeholders supports ongoing monitoring of child safety, permanency progress, and family case plan implementation.

However, due to limitations in our current systems, the state is unable to produce fully independent administrative data confirming the timing of these reviews without additional manual verification. Despite best efforts to coordinate data across CHRIS, DNET, and Rocket Matter, this lack of centralized reporting capacity impacts our ability to meet the federal measurement standard.

Because there is a high rate of completed reviews and strong coordination with the courts, Item 21 is rated as a **Strength.**

Item 22: Permanency Hearings

Summary of State Performance

AOC data pulls included all children that were in care on the start of the performance window. In DNet/Contexte, a child in care is determined by the petition type on the case being emergency custody, and the juvenile's end date was used to determine the active status. Data includes the most recent PPH hearing that had occurred prior to the performance window and the most recent PPH hearing that occurred after the performance window.

Calculations were completed by the provided worksheet throughout the workbook with the last tab being the final totals. Comparing the removal date, previous PPH, and 1st PPH post period, the percentage of children who received a timely hearing is calculated. The PPH workbook covers two performance periods at a time and there is a separate workbook for the 07/01/2024 – 05/01/2025 period.

07/01/2022 – 06/30/2023 and 07/01/2023 – 06/30/2024

Hearing Type	Count of children (denominator)	Count of valid hearings (numerator)	Percentage of children who received a timely hearing
Initial	1413	640	45%
Subsequent	1258	211	17%
All	2671	851	32%

07/01/2024 – 05/01/2025

Hearing Type	Count of children (denominator)	Count of valid hearings (numerator)	Percentage of children who received a timely hearing
Initial	4210	1350	32%
Subsequent	2309	459	20%
All	6519	1809	28%

All 3 time periods added together

Hearing Type	Count of children (denominator)	Count of valid hearings (numerator)	Percentage of children who received a timely hearing
Initial	5623	1990	35%
Subsequent	3567	670	18%
All	9190	2660	29%

Item 22 is rated a Strength. Federal law under the Adoption and Safe Families Act (ASFA) and Arkansas Code § 9-27-338 require that a permanency planning hearing (PPH) be held within twelve months of a child entering foster care and at least every twelve months thereafter for the duration of the child's time in care. These hearings serve to assess the child's permanency goal, determine whether reasonable efforts are being made to finalize that goal, and ensure appropriate progress toward reunification, guardianship, adoption, or another planned permanent living arrangement. For youth aged 16 and older, these hearings must also evaluate the transition to adulthood and the services needed for independent living.

DCFS Policy VI-G aligns with these requirements and directs staff to ensure permanency hearings are scheduled and documented in coordination with the Administration Office of the Courts (AOC). The policy applies to all children in out of home care, including those placed out of state.

During the review period of July 1, 2022, to June 30, 2024, data from DNet and DCFS records demonstrated that **100% of permanency hearings were held timely**. However, the documentation challenge noted in other review items applies here as well: although hearings occurred, the state cannot independently verify through administrative data that all initial PPHs were held specifically within the twelve-month requirement from the date of entry into foster care.

Conclusion

While available data from DNet and internal DCFS records confirm that permanency hearings are occurring as required, the state cannot independently verify that all initial Permanency Planning Hearings (PPHs) are held within the federal twelve-month timeframe due to limitations in CHRIS and other administrative systems.

CHRIS does not currently capture sufficient data to assess the timeliness of specific hearings, and while the Office of Chief Counsel (OCC) maintains a separate database of historical hearings, it only contains limited entries and is inconsistently updated due to staffing turnover. As a result, OCC opted not to submit their data for inclusion in the CFSR, expressing concern that incomplete information could lead to misinterpretation of their performance.

Although DCFS case reviews and staff interviews suggest that hearings are routinely held and that the case review system functions effectively in practice, the state lacks the system integration necessary to validate that all initial hearings meet the federal 12-month requirement. Therefore, **Arkansas assesses Item 22 as a Strength**.

Item 23: Termination of Parental Rights

Summary of State Performance

Item 23 is rated as an Area Needing Improvement. Consistent with the Adoption and Safe Families Act and state law (A.C.A. § 9-27-341), DCFS must pursue termination of parental rights when a child has been experiencing foster care for at least 15 of the most recent 22 months or the court has determined that the child is an abandoned infant or that the child's parent(s) have been convicted of one of the felonies designated in Section 475(5)(E) of the Social Security Act, including murder, voluntary manslaughter or felony assault that led to serious bodily injury against any of his/her children. Both ASFA and Arkansas Statute provide exceptions to these requirements if the child is being cared for by a relative; the agency documents a compelling reason why the filing would not be in the child's best interest; or, in any case where reasonable efforts are required, the State has not provided the family with those services needed for the safe return of the child. Concurrent with the termination process, the state must identify, recruit, process, and approve a qualified family to adopt the child.

Data provided by AOC surrounding Termination of Parental Rights for the past three state fiscal years is provided below and shows that despite the inefficiencies in collection of data, the state consistently meets timeframes for this measure in more than 60% of cases.

- 663 TPR petitions filed between 07/01/2022 - 6/30/2023
- Of the 663 TPR petitions filed:
    - 41% were filed within 12 months of case opening
    - 24% within 15 months
    - 25% within 24 months
    - 10% over 24 months
- 524 TPR petitions filed between 07/01/2023 - 6/30/2024
- Of the 524 TPR petitions filed:
    - 46% were filed within 12 months of case opening
    - 19% within 15 months
    - 26% within 24 months

- 9% over 24 months

TPR Data was pulled from July 1, 2024 to June 23, 2025 for SFY '25.

- 360 TPR petitions filed
- Of the 360 TPR petitions filed:
  - 44% were filed within 12 months of case opening
  - 22% within 15 months
  - 21% within 24 months
  - 13% over 24 months

Conclusion

Based on the findings from the QSPRs and the case mining completed by DCFS, Arkansas believes that the case review system is functioning well statewide to ensure that the filing of termination of parental rights proceedings occurs in accordance with the law / required provisions.

Even so, Arkansas recognizes the need to strengthen its data collection and monitoring around this element. OCC captures data pertaining to TPR within its internal database, Rocket Matter, such as the dates petitions to terminate parental rights are filed with the clerks, the dates on which the parents are served with TPR Petitions, the dates TPR Hearings are held and whether or not TPR is granted by the courts. However, because of issues around attorney and legal support turnover, OCC is concerned that some data is likely incomplete. The OCC management team works in constant partnership with their supervising and field attorneys and, through those collaborations, stresses the importance of timely, accurate data input.

The State further recognizes that because data for this element must be derived from three separately functioning systems (CHRIS, DNet, and Rocket Matter), administrative data demonstrates how well the system is functioning statewide to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions is not readily available. Subsequently, the State assesses Item 23: Termination of Parental Rights to be an **Area Needing Improvement**.

Item 24: Notice of Hearings and Reviews to Caregivers

Summary of State Performance

Item 24 is a Strength. Arkansas DCFS policy requires that resource parents, pre-adoptive parents, and relative caregivers be notified of any court proceedings concerning the child in their care, as well as given the opportunity to be heard. Notification methods vary by county, influenced by community practices and court procedures. These methods may include verbal notification from DCFS staff or the attorney ad litem at the conclusion of a hearing, written notification via CFS-343: Notification of Court Appearance, or other locally determined methods designed to ensure timely awareness.

While DCFS has communicated the expectation to consistently document caregiver notification in CHRIS, using the "Notification of Court Hearing to Resource Parents/Relative caregivers" value on the Case Contact screen, this documentation is not yet consistently embedded statewide. In SFY 2024, this specific value was only used 13 times in 13 unique cases, suggesting limited and inconsistent documentation despite clear policy expectations.

In addition, resource parents in Arkansas can access upcoming court dates through the Resource Parent Portal. This provides a self-service option for caregivers to stay informed when reports are entered and data is available.

Stakeholder Input

Although DCFS does not currently track quantitative data on adherence to the notification requirement, feedback from stakeholder focus groups across the state suggests that most caregivers are receiving notice of hearings and being given the opportunity to be heard.

Stakeholders frequently described Family Service Workers in most counties providing notice via phone calls or text messages to resource parents or caregivers. Others noted that FSWs remind caregivers of court dates during home visits. In some counties, notification may come from the attorney ad litem (AAL) or Court Appointed Special Advocates (CASAs).

Area Directors, frontline staff, and other stakeholders generally reported no major issues with notification of hearings, except in rare instances involving last-minute continuations or scheduling changes. While stakeholders confirmed that most caregivers were aware of court dates and felt comfortable reaching out to DCFS or AALs with questions, some resource parents noted that they had to search for this information themselves rather than receiving it directly.

CQI feedback and additional focus group input indicate that most resource parents and caregivers attend hearings when they want to and are given the opportunity to share updates and concerns in court. Stakeholders shared that judges typically announce the next hearing date during proceedings and include it in the written court order. Stakeholders also indicated that if a caregiver cannot attend, the AAL often provides a status update on their behalf and addresses any issues related to the child in care.

Overall, stakeholders expressed confidence that caregivers are receiving notifications and are present when they wish to attend. No complaints were reported about caregivers being prevented from attending hearings.

Conclusion

Overall, the case review system is functioning effectively in regard to notifying caregivers of hearings and ensuring their right to be heard. Caregivers, resource parents, and relative caregivers are generally informed and supported, making this an area of strength for Arkansas.

DCFS will continue to reinforce the importance of timely documentation and will promote the use of the Resource Parent Portal as a tool for accessing court information. Continued efforts will also focus on policy expectations and improving consistency in documentation. **The Division assesses Item 24 to be a Strength.**

C. Quality Assurance System

Item 25: Quality Assurance System

Summary of State Performance

Arkansas assessed the state's performance on this systemic factor using the state's performance on Item 25. Arkansas believes the state to be in **substantial conformity** with the systemic factor of the Quality Assurance System; therefore, **Item 25 is rated as a Strength.**

Introduction and Background

The Arkansas Department of Human Services, Division of Children and Family Services, operates a robust Quality Assurance (QA) and Continuous Quality Improvement (CQI) system. These systems are essential for addressing the effectiveness of staff, services, and programs in achieving positive outcomes for children and families. Arkansas's QA and CQI strategies, outlined in the 2024-2029 Child and Family Services Plan (CFSP), include a variety of tools such as administrative reports, qualitative case reviews, evaluations, and collaborative forums to analyze and discuss findings.

The information management systems supporting these processes are critical for collecting and analyzing data on outcomes and are detailed further in the Systemic Factors section of this report.

DCFS has internal practices for ensuring quality work at the individual case level. DCFS' practice model, At One Table, describes the CQI process for monitoring provision of services by DCFS for families by saying: CQI supports the practice of Appreciative Inquiry by putting focus on the areas where DCFS is doing well. CQI helps identify when staff are doing well and helps DCFS extend those practices throughout our system. CQI relies on shared responsibility for data and outcomes at all staff levels. Workers, supervisors, and managers all have the responsibility to input quality data and to know about data and outcomes. CQI also helps us have more transparency by partnering with families, children, youth, and other key stakeholders on how to improve our system, using their feedback as another means to evaluate our work.

DCFS' CQI approach focuses on identifying the root causes of concerns or contributing factors to strengths, developing interventions to reduce or eliminate these causes or improve upon strengths, and taking action to correct the processes with a continuous feedback loop to make and maintain positive changes in policy and case practice. CQI ownership is essential at all levels of an organization, and it is necessary for the entire child welfare system to place a high value on teamwork, collaboration, and communication.

CQI helps DCFS identify the extent to which worker practice aligns with the practice model and is evaluated using the following scale:

- NOVICE – There is evidence that the worker has "tried out" or begun to use the tool but may not have implemented it properly.
- EMERGING – There is evidence that the worker is using the tool or practice but lacks accuracy or consistency.
- ACCOMPLISHED – There is evidence that the worker uses the tools and practices them consistently and accurately.
- DISTINGUISHED – There is evidence that the worker has integrated the tools and practices into their practice as a way of doing business.
- MASTER – There is evidence that in addition to practicing integrated work, the worker is creative with the tools in difficult or problematic situations or takes the "next steps" of follow-up and evaluation

Methodology

Item 25 is evaluated using measures from existing administrative data sources, DCFS written policy, agency federal reports, improvement event records, and stakeholder engagements. The following data sources were used in this analysis:

- Administrative Data: SafeMeasures reports, CHRIS Net Reports
- DCFS employs the Quality Services Peer Review (QSPR) process as a foundational component of its Continuous Quality Improvement (CQI) system. Evident Change, a contractor for DCFS, conducts annual QSPRs across the Division's ten geographical service areas.
- DCFS contracts with Evident Change to engage in ongoing CQI reviews of programs implemented under FFPSA.

Key Findings

- Arkansas has standards and quality assurance processes to evaluate the quality of services provided to children and families statewide. The QSPR process has highlighted both strengths and areas requiring improvement within Arkansas's child welfare system.
- Peer reviews provide detailed insights into the quality of documentation, with additional reviews enhancing the depth of evaluation across all service areas.
- The QALA initiative has proven to be a promising strategy to ensure continuous improvement by linking the results of previous reviews with actionable plans for future progress.

Analysis

Continuous Quality Improvement Processes

DCFS contracts with Evident Change to complete Quality Service Performance Reviews (QSPR) of child welfare cases involved with the agency during a specified period under review (PUR). QSPR serves as an ongoing assessment of Arkansas's child welfare system. QSPRs follow a similar

structure to the CFSR. Evident Change provides evaluation reports quarterly and yearly that compare DCFS performance to national standards.

Evident Change completes the Quality Services Peer Reviews (QSPR) as part of the DCFS CQI system. Yearly QSPR processes mirror the onsite CFSR methods in each of the Division's ten geographical service areas and include methods to ensure inter-rater reliability. In addition, Evident Change completes two to three additional electronic reviews by peer reviewers to provide additional insight into Arkansas's documentation quality. Final written reports are provided yearly. These reports are provided to Arkansas's Legislative Review Committees and are made available to all stakeholders on Arkansas's public website. Arkansas's Annual Report Card is attached as an example and is labeled Arkansas's 2025-2029 CFSR Attachment #2: Annual Report Card SFY '24.

Changes to Arkansas's policies governing the Division of Children and Family Services are subject to evaluation of impact on the public and are subject to public comment prior to being filed for review and approval by the legislative body.

Quality Assurance Reviews are conducted by Arkansas's contractor, Evident Change, annually to ensure that services to families are of quality and meet the needs of the individual family and its members. Arkansas's process employs the federal Child and Family Services Review's Onsite Review Instrument (OSRI) for its reviews. Each review utilizes information gathered from the state's SACWIS, physical case files, and interviews with various case participants and providers (children, caregivers, resource parents, caseworkers, court parties, attorneys, family network members, and other professionals involved with the children and family). DCFS adopted the Round 4 OSRI for use in the QSPR process in State Fiscal Year (SFY) 2024. Statewide scores are comprised of straight averages of the combined scores from the ten service areas in accordance with the approved federal sampling methodology. During the inception of the contract Evident Change reviewed 17 cases (10 permanency and 7 in-home cases) are reviewed in each of DCFS' ten service areas over the course of the fiscal year, for a total of 170 cases (100 prevention and 70 in-home cases) statewide. The reviewed cases are selected using a stratified, random sampling technique and cases from three DCFS Areas are chosen.

Once all the cases in the sample have been reviewed, finalized, and gone through both levels of QA, the findings are compiled and analyzed and a service area-specific report (Area 1 Synopsis) is issued describing the performance, highlighting the strengths, and areas needing improvement. These reports are initially shared with Executive Staff and the pertinent Area Director via email; each Area Director then shares with their supervisory staff via email. The Program Manager for Infrastructure and Specialized Programs and the QA Manager for Evident Change then schedule an in-person or zoom meeting with the Area Director and the supervisors from the Area to go over the findings of the review and brainstorm ideas for development of practice improvement plans to address the areas identified as needing improvement in an effort to improve future performance and services to families. These meetings continue to occur in a hybrid presentation option, depending on the Area's preference for meeting, either in-person or by Zoom.

As part of the process, DCFS also utilizes a Quality Assurance Loop Around (QALA) process to better support CQI work and improve outcomes related to these reviews. Once the full QSPR synopsis for each area is completed and presented to the area leadership, the Area Director and supervisors select one item on which to focus on for the upcoming year to either improve upon or continue to strengthen upon if it was listed as a strength in the QSPR. This includes identifying specific action steps to accomplish the desired, improved outcome. The DCFS Practice and Planning Manager and Evident Change CQI Project Manager have regular check-ins with area leadership every other month to assess how the implementation of the action steps is going and what, if any, results are being observed or measured as a result with the ultimate goal of seeing improvement in that particular item in the subsequent QSPR for that area in the following year.

Another process added to Evident Change contract entails an entrance conference just prior to the onsite review week and an exit conference immediately following the onsite review week with area staff, to include frontline workers as well as supervisors and area leadership. The entrance conference is designed to better orient the DCFS staff to the review process and intended goals. The entrance conference also provides an opportunity to review and discuss recent SafeMeasures with the local DCFS staff and for those staff to then share current trends, practices, barriers, or successes that may provide additional context for the SafeMeasures data as well as the items that will be reviewed during the QSPR onsite week with the Evident Change team. The exit conference provides more immediate feedback to staff regarding their QSPR performance and trends even though the formal, full synopsis is not yet complete. This was done since, in years prior, staff often shared that the delay in receiving feedback on their performance until the final report was issued was a barrier to them finding the QSPR to be helpful, particularly if some of the staff associated with the cases reviewed had left the Division by the time the final QSPR synopsis for the area was issued.

Evident Change's Continuous Quality Improvement Unit issues an annual Statewide QSPR Performance Report outlining Arkansas's performance following the review of the entire state at the conclusion of the State Fiscal Year. This report combines the results of the individual service areas' reviews to provide an overall summary of the child welfare system's performance pertaining to the goals of safety, permanency and well-being for children receiving services. The Statewide QSPR Performance Report is emailed to Executive Staff by the CQI Project Manager and then disseminated throughout the Division, including to the Area Directors, via email and a meeting occurs with all area AD's, DCFS Director, Deputy Director, Assistant Directors, CQI Manager, and Program Manger to review and discuss findings for the Statewide report.

A planned activity that was completed for SFY2025 was to increase the number of reviewed cases to 20 cases per area (12 foster care, 6 In home, and 2 DR). The state determined it would be more valuable to have additional cases reviewed using the entire QSPR process and add DR to provide a more robust review of each area.

DCFS's Advisory Boards convene on a basis established by each board. The agenda for each

advisory board provides an opportunity for presentation of CQI data and reports. Each advisory board provides recommendations regarding the next steps to improve the child welfare system based on the data collected to the DCFS Program Manager assigned as the representative for the respective advisory board. It is the responsibility of the DCFS Program Manager to analyze the information being received, disseminate information to necessary parties (such as executive staff and middle management), and incorporate the recommendations into DCFS daily practice as applicable/feasible.

Stakeholder Input is incorporated into the QA process routinely at all levels of the child welfare organization. At the individual case level, courts, service providers, community members, and resource parents participate in monitoring, evaluation, and adjustment of services for families during family team meetings and court reviews. Information from family team meetings is captured by Division staff in updates to the family case plan, family assessments, and in contact screens for the Division information management system. Stakeholders participate in improving the quality of services to families at the organizational level by partnering with DCFS to physically provide services and supports in local communities that may not otherwise be available in rural areas of the state.

At the systemic level, stakeholders participate in the CQI process by providing feedback during meetings, surveys, and formally scheduled planning opportunities. DCFS then uses this input to adjust family centered practices at all levels. The information is provided to the 10 Area Directors who then meeting with Supervisors to ensure practice is adjusted and monitored at the local level when working with families and stakeholders.

Data Informed Decision Making occurs in varied context for child welfare:

- Local and statewide data are aggregated in the Division information management system and then staff at all levels can use SafeMeasures and CHRISnet reports (for more information refer to Systemic Factor 1: Statewide Information System) to manage workloads, identify trends, and develop plans to improve quality services and improve outcomes for families.
- Data from SafeMeasures produces publicly available dashboards that allow stakeholders to view data and adjust practices accordingly.
- Child welfare data is published annually in the form of an Annual Report Card which is also posted publicly for stakeholders to view and utilize in their practice.
- The SDM case review tool allows supervisors to monitor stakeholder involvement, family engagement, and service provision while SafeMeasures is a dashboard that allows supervisors to monitor FSW compliance with systemic metrics (often that feed to reporting of AFCARS and NCANDS). Supervisors use both sets of data to individualize continuing education and coaching efforts with FSWs, in turn improving the quality of services for families.
- Program Managers use monthly charts and area data from SafeMeasures and CHRIS Net Reports (which derive data from the Division information management system) to monitor program usage and adjust service contracts, area implementation, and county usage, as necessary.

- Program Administrators often determine the best method of collecting the data necessary to inform the implementation of new programs. As such, the Program Manager for new programs are often responsible for ensuring all necessary data is obtained and stakeholders are involved in assessment and planning phases of program implementation. This requires flexibility and adaptability as the data necessary at each step of implementation varies by the stage of implementation and the needs of the specific implementation. Program Managers often obtain qualitative data from stakeholders during planning phases of implementation and then use initial data to determine what other data needs to be obtained to inform further planning. Program Administrators also use monthly charts, SafeMeasures and CHRIS Net Reports to monitor implementations and determine if overall systemic changes are necessary to preserve fidelity to established program models.
- Administrative staff utilize the data sets gathered at all levels of practice and planning and view the data in a holistic context. The data is used to identify trends and determine what systemic factors may be influencing trends. When systemic implications are identified Administrators begin work with stakeholders and staff implement systemic changes to support or remedy the trends.
- Reports are created monthly reflecting data that stakeholders request frequently. These reports are available at the county, area, and statewide level. Reports are made available monthly to stakeholders and the public on DCFS' Public Website.
- DCFS staff are responsible for establishing the feedback and communication loops, as well as the criteria for monitoring the success of change projects at various levels:
    - For changing projects at the programmatic level, Program Managers are responsible for their programs and are monitored for programmatic success by executive staff, the DHS Secretary's Office, and the Office of the Governor
    - For changing projects at the area level, the Area Director is responsible
    - For changing projects at the county level, the County Supervisor is responsible
    - For monitoring of change within the case level, the Family Service Worker is responsible

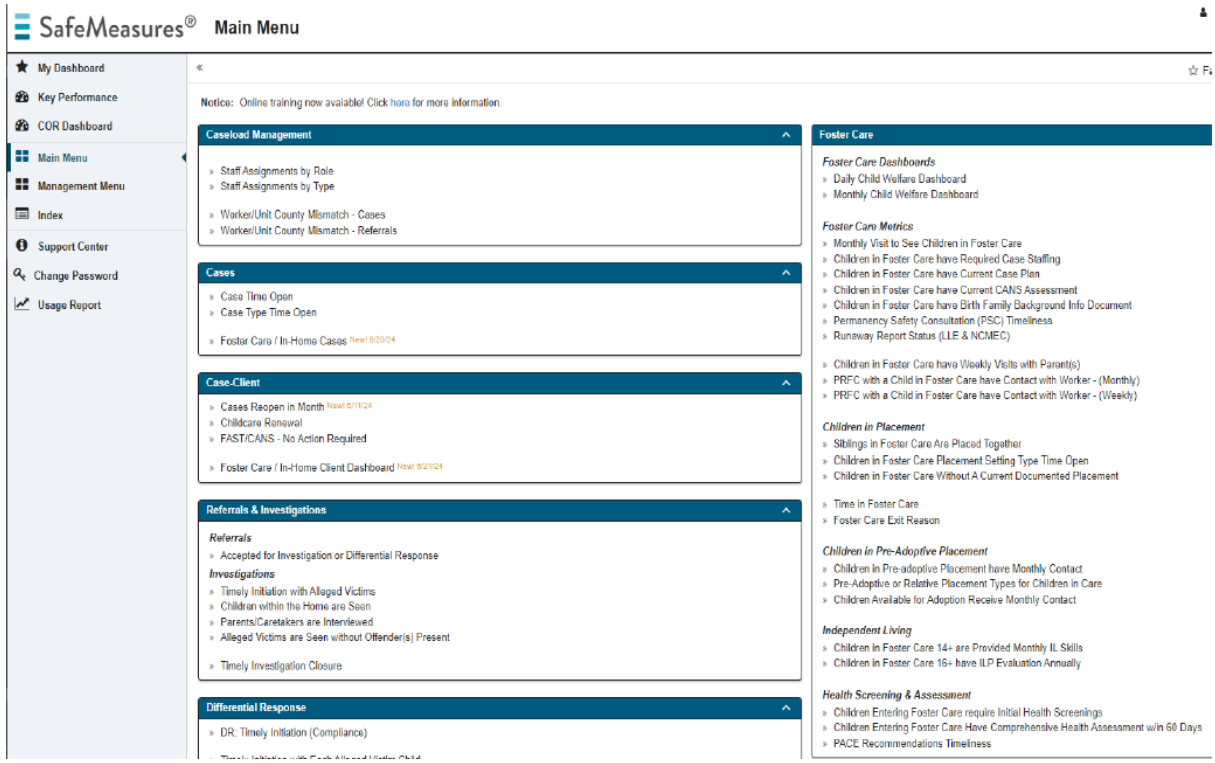


Figure 31: SafeMeasures Main Menu

Conclusion

Arkansas assesses item 25: Quality Assurance System as a strength.

Arkansas has demonstrated significant strengths in its approach to quality assurance through consistent efforts to monitor and improve the delivery of child welfare services statewide. The implementation of a comprehensive QA system ensures that policies, practices, and outcomes are regularly evaluated against federal and state standards. Much of this work is conducted in collaboration with Evident Change through the Quarterly Statewide Performance Reviews (QSPR), which serves as a cornerstone for identifying strengths, addressing gaps, and driving targeted improvements.

The QSPR process allows for robust case reviews, data analysis, and feedback loops with frontline staff, ensuring that findings are actionable and tied directly to measurable outcomes. This collaboration has strengthened Arkansas's ability to engage stakeholders at all levels, develop targeted action plans, and promote a culture of continuous improvement. By focusing on accountability, transparency, and collaboration, Arkansas has effectively positioned quality assurance as a core strength within its child welfare system. These efforts reflect the state's dedication to achieving and maintaining high standards of care and safety for all children served.

D. Staff and Provider Training

Item 26: Initial Staff Training

Summary of State Performance

Item 26 assesses how well the staff and provider training system functions statewide and in accordance with the established curriculum and timeframes as well as whether the state provides initial training for newly hired staff that addresses the skills and knowledge necessary for them to perform their job duties effectively. **Item 26 is rated as a strength for Arkansas.**

The Arkansas Division of Children and Family Services (DCFS) ensures that newly hired staff receive comprehensive training to effectively carry out their responsibilities in child welfare. Arkansas meets routinely with University Partnerships responsible for initial staff training to review and updated curriculum and field training practices to ensure training efforts align with the established knowledge, skills, and abilities (KAS) required for staff to effectively complete their job duties. DCFS reviews and updates the KAS requirements in collaboration with the University Partnership, with the most recent review occurring in SFY '23.

Through DCFS' academic partnership, the Division is also able to monitor and assess the effectiveness of the initial training system to ensure staff are prepared with the knowledge they need to carry out their duties and ensure child safety for families in Arkansas. DCFS considers new Family Service Workers to be successfully trained if they have completed all six foundations and all three concentrations and can successfully complete all of the established KAS (as evaluated during the WRAM meeting) within the first year (12 months) of employment. For a list of the Knowledge, Skills, and Abilities that are required during New Staff Training please see Arkansas's 2025-2029 CFSR Attachment # 3 Knowledge, Ability, and Skills. During SFY '24, DCFS staff completed initial training within 8.62 months on average.

Between July 1, 2023, and May 31, 2024, DCFS reported the following percentages of staff who had been hired during this period and remained in the agency:

- 94% of Family Service Workers (FSWs),
- 74.5% of Program Assistants, and
- 70.7% of Supervisors

Introduction and Background

DCFS maintains a partnership with MidSOUTH, a division of the University of Arkansas at Little Rock's School of Social Work, to provide comprehensive training for all new staff. This partnership ensures that all newly hired employees receive structured and competency-based training aligned with best practices in child welfare. The curriculum is based on worker and supervisor competencies developed by the Institute for Human Services (IHS). The New Staff Training (NST) for Family Service Workers (FSW) is a hybrid training model consisting of online training (self-directed), field training (university field trainer), and traditional classroom/lab training (MidSOUTH), in addition to supervision (DCFS Supervisor).

MidSOUTH plays a critical role in the evaluation of New Staff Training (NST) through a Learning Management System (LMS) that tracks participation and completion rates. MidSOUTH also administers and maintains competency assessments for all staff attending training. This system ensures that all new employees receive timely and consistent training. The LMS provides a nightly interface with the DCFS information management system (CHRIS), enabling supervisors and the professional development unit to monitor training completion and attendance.

MidSOUTH develops and submits weekly and monthly reports of attendance and completion to the DCFS Training Manager. Weekly training reports are also emailed to the FSW Supervisor for each staff member in attendance that week for monitoring and follow-up. Supervisors are expected to monitor and enforce on-going training requirements for their staff and record on-going training hours for each staff member in their personnel files.

Key components of the MidSOUTH partnership include:

1. Comprehensive Training Curriculum
    - The curriculum includes modules on child safety assessments, permanency planning, trauma informed care, and legal requirements to name a few.
    - Training materials are regularly updated based on policy changes, emerging best practices, and workforce needs.
2. Blended Learning Approach
    - Training is offered through a combination of classroom instruction, online modules, and field training.
3. Data Driven Monitoring and Compliance
    - Monthly reports are provided to DCFS, ensuring accountability and identifying areas for improvement.
    - Ongoing assessment of training effectiveness through employee feedback, supervisor evaluations, and performance.
4. Ongoing support and Workforce Development
    - MidSOUTH facilitates continuous education opportunities for staff, including advanced practice training when needed.

Methodology

This item is evaluated utilizing descriptive statistics from existing administrative data and surveys listed below:

- Staff Training Reports: SFY 2024, SFY 2023, and SFY 2022
- Training Evaluations: Evaluations offered for every training for each NST participant during SFY 2024
    - 264 participants were offered the opportunity to provide feedback regarding NST for SFY 2024 and 163 completed a survey (62%)
    - Participants who completed the survey represent all ten areas of the state
- Focus group Responses

- 135 of 185 (73%) focus group participants provided feedback regarding initial staff trainings
- Focus group participants providing feedback on this item included DCFS supervisors, FSWs, and Program Assistants, as well as training partners, and service providers
- Focus group participants represented all ten areas (jurisdictions) in Arkansas

Analysis

Schedule and Curriculum

A new FSW may begin the first Online Training Unit as soon as their first day in the office. The first Online Training Unit provides an introduction to training, policy, Division information management systems, and the Life of a case. Once a new FSW completes the first Online Training Unit, all other online training units are accessible to the employee. The FSW can work ahead or out of sequence for the other online training units, if needed or desired. However, a new FSW must complete the online training unit that corresponds to the Classroom Foundation Unit prior to attending that Classroom Foundation Unit (FSW must complete Online Unit 2 prior to attending Classroom Foundation 2). Upon completion of all six foundations trainings, staff will then complete three concentrations. New staff are expected to complete all concentration trainings within the first year of employment regardless of whether they will have any job duties related to the remaining concentrations.

After a new FSW has been employed for eight (8) months, the Field Trainer sets up a Worker Readiness Assessment Meeting (WRAM) with the FSW, Field Trainer and the FSWs Supervisor. The purpose of the WRAM is to review the FSWs status in training and develop a plan of what training activities will be provided in the remaining four (4) months of the FSW's first year of employment.

DCFS, through the academic partnership, maintains a tracking system that monitors training enrollment and completion rates. New employees are referred to New Staff Training (NST) an average of 5.13 days prior to their employment begin date. This allows training partners to begin scheduling new staff for a training to begin as quickly as possible once the employee begins employment. During State Fiscal Year '24, once a Family Service Worker employee physically began working for the Division, on average they completed the following within the number of days stated (for raw data, see Arkansas's 2025-2029 CFSR Attachment #4: DCFS Tracking of Averages NST):

- Orientation and navigation completed - 11.52
- Foundations Training Begin – 31.67
- Completed all 6 Foundations – 74.44
- Began Concentrations – 99
- Completed all 3 Concentrations – 187.74
- Worker Readiness Assessment Meeting – 258.7

The schedules and curriculum were considered in the overall analysis of factors promoting learning and participation.

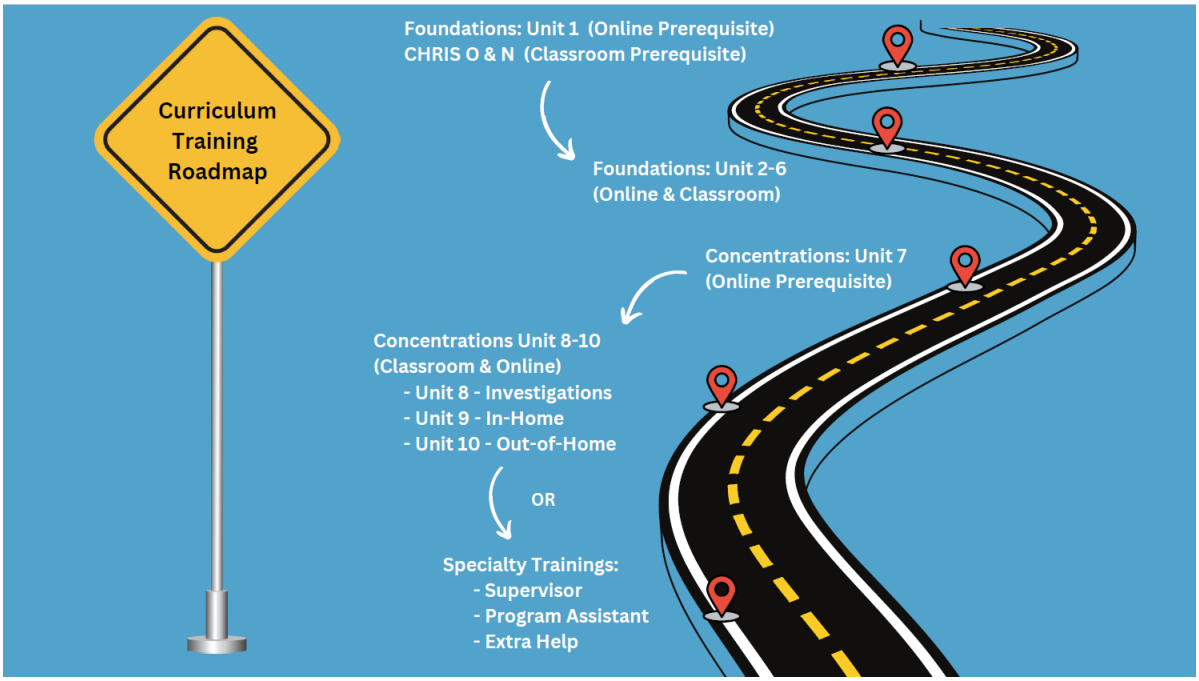


Figure 32: Curriculum Training Roadmap

Factors Promoting Learning and Participation

DCFS believes adult learners retain more information when they feel engaged in the learning environment. Therefore, DCFS works with the university partnership to constantly obtain feedback regarding training and use the feedback to identify strengths and areas needing improvement as it impacts staff engagement in training. When DCFS FSW staff participating in NST were asked to identify factors that contributed to successful engagement and learning as a question on training evaluations, the following key themes emerged from the participant's perspective:

- Interactive games that promoted participation and understanding.
- Group activities and breakout sessions, which facilitated hands-on learning.
- Real-life examples provided by trainers.
- Role-playing exercises that were helpful for skill development.
- Visual aids and downloadable resources that enhanced comprehension.
- Knowledgeable trainers and supportive classmates.
- Trainer's ability to ensure active participation and engagement.
- Opportunities to ask questions and seek clarification.
- High quality participant manuals and handouts.
- Focused explanations of family needs and dynamics.
- Videos that had a lasting impact on learning outcomes.

Word Cloud Chart from All Foundation Evaluations (FY21/22, FY22/23, & FY23/24)



Figure 33: Foundation Evaluations Word Cloud, SFYs ’22, ’23, and ‘24

Focus group participants identified direct supervisory staff as a factor promoting learning when those supervisors hold positive values of the NST process and actively engage in the learning process with new staff.

Barriers to New Staff Training

Survey responses identified barriers to the New Staff Training process, including:

- Challenges with Classroom and On-line Training: Training was difficult to complete in the office (on-line training) due to interruptions and competing expectations of staff responsibilities. This barrier is dependent on the attitude of supervisor for each staff member and is a significant barrier to good practice in those locations of the state but does not appear to be a barrier to staff learning the established KAS required to successfully complete NST.
    - This was reinforced by focus group participants who stated that interruptions from current case duties, such as supervisors calls to personal cell phones during classroom training or receiving emails and texts that required attention during breaks in classroom training or after classroom training hours made it hard to be able to concentrate on absorbing information that is being provided during training.
    - Supervisors in focus groups acknowledged respectively that they:
        - Value the training process and ensure their staff are protected during training so staff have the opportunity to learn. FSWs and stakeholders

in counties and areas supervised by these supervisors provided feedback that enjoy training and learned a lot during trainings.

- Feel training is a waste of their time and of their staff's time. Staff and stakeholders in counties and areas supervised by these supervisors provided feedback that they are often interrupted during training by texts and emails and that they often go back to the office after training and are told, 'we don't do it that way here'. One seasoned worker stated, "they don't teach them right at training so I tell them (other staff) to ignore what they've been told in training and do it this (my) way'.

- Relevant Training Materials: Staff that work in the resource field noted minimal training provided for their positions.
  - While focus group participants (supervisors and FSWs) remarked on a lack of a concentration for new resource staff (who's job duties are to ensure resource homes initially and continually meet licensure requirements for resource homes), staff and supervisors also remarked that the majority of their job duties are learned in on-the-job training from supervisory staff and other resource workers.
  - Staff and supervisors did not advocate for more formal initial training for resource workers but rather commented that the resource trainings held by central office for resource workers is helpful.
- Practical Application of Knowledge and Skills learned during NST:
  - Focus group participants at all levels and from all areas of the state indicated that they feel a disconnect between learning the technical information they learn during NST through the university partnership and applying the information and skills when working with families. Staff expressed the need for full-time field trainers that can go with them and demonstrate how to maneuver the complexities of families while demonstrating flexibility in application of skills necessary to provide quality assessment and services for families.
  - Focus group participants were clear that Supervisory staff do not have the ability to absorb this role within their current duties, and in some instances, do not have the ability to apply Knowledge, Ability, and Skills adaptively themselves.
  - Focus group participants made it clear that this is an additional training need and not something that can be accomplished in lieu of or within classroom training.

Evaluation of New Staff Training

In addition to the annual UA Little Rock (UALR) MidSOUTH Family Service Worker (FSW) and FSW Supervisor survey regarding NST referenced above, individual FSW's ability to comprehend and apply knowledge and skills taught during initial training is evaluated through the following mechanisms:

- Pre and post-tests: These tests are administered during applicable training sessions to assess whether each staff member has learned the required concepts and information. Pre and Post test are developed around the established KAS and are scored on a scale of 0-10. All FSWs must complete the pre and post tests prior to leaving the training facility. The evaluation summary charts below (January 1, 2022 to January 1, 2025) indicate statistically significant improvement in staff understanding of the knowledge, skills, and abilities established in the NST curriculum.

	Pre-Test Score Average	Post-Test Score Average	Change +/-
Unit 2	7.19	8.81	*1.62*
Unit 3	5.98	8.95	*2.97*
Unit 4	6.41	9.11	*2.7*
Unit 5	8.22	9.41	*1.19*
Unit 6	6.88	9.42	*2.54*
Unit 8 (INV)	6.69	8.91	*2.22*
Unit 9 (IH)	5.77	8.96	*3.19*
Unit 10 (OOH)	7.18	9.45	*2.27*
Overall Average	**6.79**	**9.13**	***2.34***

Figure 34: Pre and Post-Test Scoring

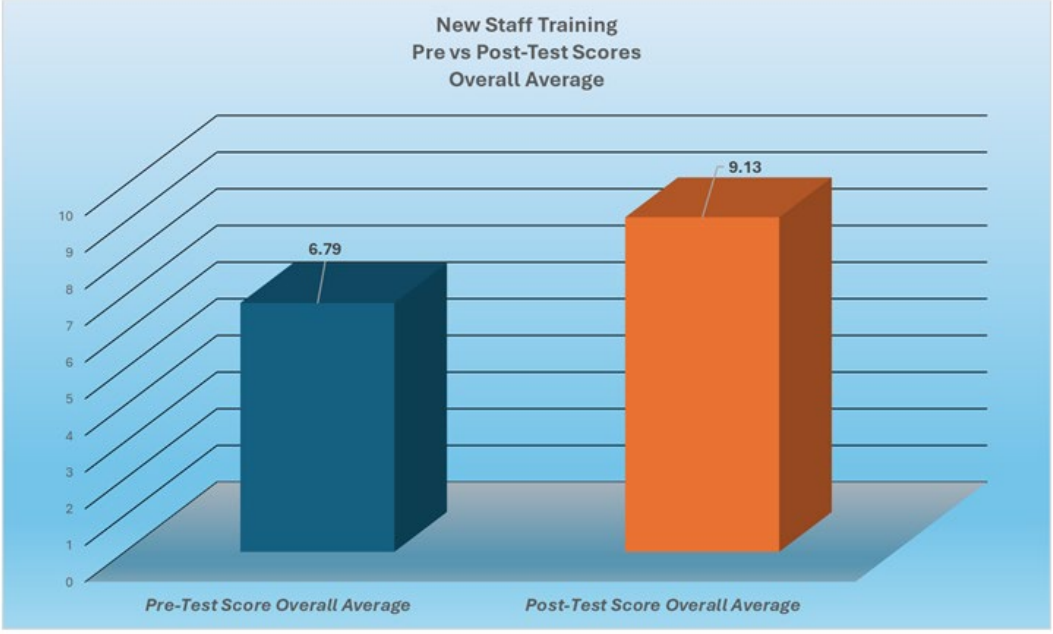


Figure 35: Pre and Post-Test Scoring, Visual

- Participant Evaluations: At the conclusion of each training session, participants provide feedback on the training's content, delivery, and environment to determine whether it

supported adult learning effectively. This allows for adjustments in presentation to ensure staff are able to best able to learn the information being presented.

- The chart below represents the change in satisfaction with the training from staff exiting NST across three fiscal years.

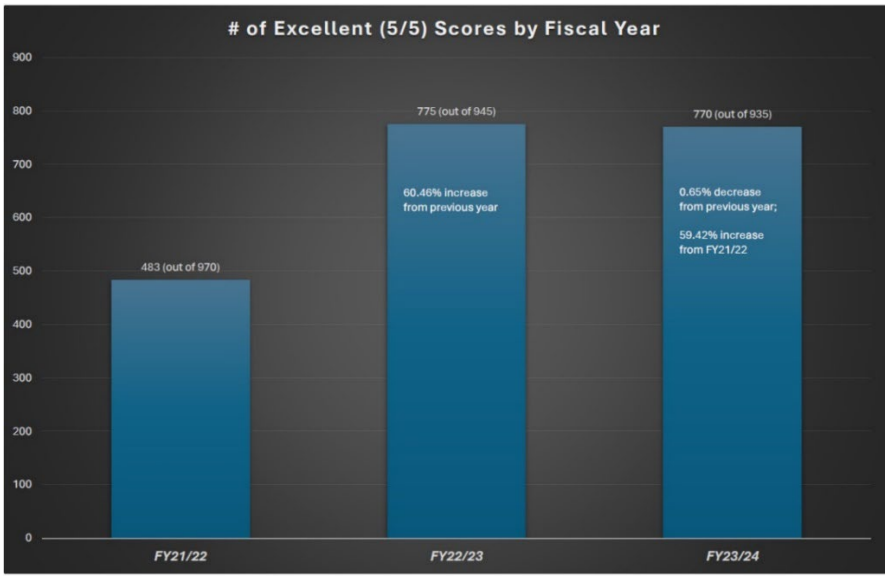


Figure 36: Participant Evaluation Results, Excellent Scores

- Individual Training Needs Assessment (ITNA): Also known as the Worker Readiness Assessment Meeting (WRAM), this evaluation occurs in the field after a New Worker Training concludes. Within 20 business days, the new FSW, their supervisor, and applicable training staff meet to discuss:
  - FSW's performance during training
  - FSW's job performance up to that point
  - FSW's strengths and areas for improvement
  - Development of a plan to build strengths and address identified weaknesses

The chart below shows the number of staff who began meeting with a field trainer as part of new staff training in the SFY Column. The chart shows the number of staff that completed new staff training and participated in an ITNA (WRAM) meeting, and the percentage of the total for each row in the second column for each SFY. The overall totals for each year are captured on the final row of the table. The data demonstrates that approximately 63% of staff that begin new staff training complete all modules and requirements.

Totals	SFY22	Comp (%)	SFY23	Comp (%)	SFY24	Comp (%)
Adoption Specialist	5	4 (80%)	13	5 (39%)	7	5 (71%)
Differential Response	5	3 (60%)	9	4 (44%)	8	5 (63%)
Family Service Worker	206	119 (58%)	190	124 (65%)	145	91 (63%)
Investigator	44	35 (80%)	46	34 (74%)	55	30 (55%)

Resource Worker	12	4 (33%)	13	5 (39%)	10	6 (60%)
Community Engagement	2	2 (100%)	0	0 (0%)	1	0 (0%)
Supervisors	39	26 (67%)	47	32 (68%)	38	26 (68%)
Total	**313**	**193 (62%)**	**318**	**204 (64%)**	**264**	**163 (62%)**

Figure 36: Field Training

The state reviewed the percentage of staff who completed new staff training and subsequently requested or required additional training. Data was pulled from the training partnership New Staff Training Logs for staff requiring additional training past the one-year mark. The topics listed below are the most common topics of continuing education (past one year):

- SFY22 – 19%; Family Case Planning & Family-Centered Casework; Separation, Placement, and Reunification; Managing withing a Child & Family Service System: Leadership Administration & Performance Improvement
- SFY23 – 22%; Legal Aspects of Child Protection; Family-Centered Casework; Supervising Family Case Plan Development & Implementation, Supervising Intake, Risk Assessment, and Initial Family Assessments; Supervising for Optimal Job Performance
- SFY24 – 32%; Family-Centered Child Protective Service, Family Case Planning & Family-Centered Casework; Adoption & Foster Care; Legal Issues in Child Welfare; Casework with Children; Case Management and Supervision

Field Trainer Support

To ensure consistent support during the first year of employment, each new staff member is assigned a field trainer. Field trainers play a critical role in coordinating the following:

- Training Materials: Trainers provide resources for each stage of the new employees' training.
- Practical Application of Learning: Trainers work with new employees during daily business activities, offering hands-on guidance and support to help them apply what they've learned to their job duties. Field trainers are required to attend three home visits with each FSW in NST.
- Collaboration with Supervisory Staff: Field trainers meet regularly with supervisors to align training efforts with the staff member's identified needs and the agency's goal.
- Field trainers ensure consistency in messaging between classroom learning and application of technical skills during the first year of employment for new staff.



Figure 37: Field Training Word Cloud, Participant Evaluations

Training partners, field trainers, staff representatives, and the Central Office Professional Development Team meet quarterly to discuss the NST curriculum and ongoing training needs. These meetings ensure that the curriculum remains aligned with best practices incorporates feedback from the field to address current training requirements. The team also ensures that field training and staff consistently deliver the same core messages to maintain uniformity across the state. Training opportunities are further customized to meet the specific needs of individual staff members, counties, or areas. However, these tailored efforts are generally developed in response to requests from staff in the field or as part of the Quality Improvement Process and are delivered as on-going training by central office staff rather than being integrated into the NST curriculum.

Stakeholder Input

Stakeholders at all levels and positions were vocal about the need for full time mentors and coaches for new staff (program assistants, FSWs, and supervisors). New staff are learning technical information and gaining insight into technical applications of skills during NST but information must be applied to individual families adaptively and staff struggle with having enough support from seasoned field staff (who are carrying their own caseloads) to practice implementation of knowledge adaptively.

Stakeholders also indicated that mentoring new staff could not become an additional duty of current supervisors because supervisors currently have a lack of time to perform all of their own job duties. Supervisory staff in focus groups indicated that they do not feel prepared themselves and would like their own mentors and coaching regarding adaptive implementations of technical skills.

Stakeholders were clear that staff are learning the basic information they need in new staff training, but transfer of learning requires practice and reinforcement in adaptive application and there is little reinforcement currently of best practice while staff are carrying out daily job duties.

A common statement from stakeholders was the indication that a unit or county supervisor's attitude towards implementation of new initiatives and learning in general was paramount to a new worker's ability to thrive and demonstrate best practice when working with families. Stakeholders (to include DCFS staff and Supervisors) said that it is easier for new staff to learn Safety Organized Practice and Structured Decision Making (the Division's system for safety and risk management). Stakeholders said that new staff are being taught SOP and SDM in new staff training and are then returning to some county offices to be told, 'we don't do it that way here' or 'forget what they said in training, that's not accurate'. New staff mentioned supervisors making these statements while seasoned staff and supervisors also confirmed making the statements.

Conclusion

By leveraging MidSOUTH's expertise in curriculum development, technology-driven training delivery, and performance tracking, Arkansas DCFS has built a highly effective and sustainable training model. This partnership is a key strength in ensuring new staff are fully equipped to meet the complex needs of children and families in the state's child welfare system initially. However, staff must have routine coaching and mentoring while learning to implement what they have learned in training. Based on the aforementioned data and information Arkansas has determined that the staff and provider training system is functioning effectively statewide. Initial training is consistently provided to all staff delivering services pursuant to the CFSP, ensuring they acquire the foundational skills and knowledge required for their positions. The State identifies Item 26: Initial Staff Training as a **Strength** and recognizes that additional work needs to be done to strengthen mentoring and coaching models to support use of best practices and teach adaptive skills while staff are attending NST and after staff have completed new staff training.

Item 27: Ongoing Staff Training

Summary of State Performance

Item 27 assesses whether the state provides ongoing training for staff to ensure they have the skills and knowledge necessary to carry out their duties effectively. While Arkansas DCFS identified in our plan requiring staff complete a minimum number of continuing education hours annually, the monitoring system in place to track compliance relies on DCFS supervisory staff to monitor compliance. Ongoing Staff Training is rated as an overall **Area Needing Improvement**.

The analysis below provides information about relevant, updated, and high-quality training. However, there are limitations within the child welfare system for monitoring and tracking ongoing staff training hours, as required, on an aggregate level. Currently, compliance is monitored at the individual level and does not allow the state the ability to assess overall effectiveness of the ongoing training system. The State can say based on stakeholder feedback that supervisory staff attitudes and values regarding training has a significant impact, both

positive and negative on overall effectiveness of training efforts for staff at all levels of the child welfare organization.

Introduction and Background

DCFS has established an ongoing training requirement with a minimum number of hours per year for all staff. The number of required hours employees are required to have is dependent on their specific job function. This training is intended to provide:

- Updates on policy and procedural changes
- Specialized training in areas such as trauma informed care, permanency planning, and legal processes to name a few
- Refresher to reinforce best practices in case management

Any continuing education provided by UALR MidSOUTH or the Academic Partnership in Public Child Welfare ("the IV-E Partnership") is reported nightly directly to DCFS through the LMS and is also reported on a quarterly basis in training reports.

Methodology

Ongoing training is offered through various methods, including:

- Web based courses through the Learning Management System (LMS)
- In person and virtual training sessions
- Workshops, conferences, and external professional development opportunities
- 100% of DCFS employees have full access to the LMS to complete specialized and tailored training to meet ongoing educational requirements

Analysis

As outlined in CFSP 2025-2029 Targeted Plan 2: Training Plan, each year direct service DCFS staff must complete the mandated *Managing Difficult Encounters with Families* and *A Comprehensive and Compassionate Approach to Trauma Assessment* trainings. The hours for both trainings are applied to the annual ongoing training requirement and provided by the Academic Partnership for Public Child Welfare. The specific training objectives within those two mandated training courses are adjusted annually based on:

- Feedback from the previous year's *Managing Difficult Encounters with Families* and *A Comprehensive and Compassionate Approach to Trauma Assessment* training (also referred to as Annual Grief and Loss Training)
- Data MidSOUTH collects through Individual Training Needs Assessments offered at the end of each initial training series for DCFS staff
- Evaluations collected at the conclusion of MidSOUTH continuing education offerings
- Input collected during quarterly Regional Team Meetings between DCFS and the Academic Partnership in Public Child Welfare as well as monthly meetings with DCFS Area Directors, the IV-E University Coordinators, and the DCFS Professional Development Unit Manager.

Mandatory continuing education for all DCFS employees is coordinated through the MidSOUTH Learning Management System (LMS) or through the Department of Human Services LMS (Success

Factors). Courses tracked through the MidSOUTH LMS can be aggregated with other courses to form reports demonstrating attendance and staff satisfaction with course materials and facilitators (see examples provided in Item 26). Courses offered on the MidSOUTH LMS are tracked and course completion information is transferred nightly to the Division information management system where staff and supervisors can access recorded training hours for each individual employee. The Department of Human Services LMS currently has no interface with the Division information management system.

Beyond standard mandated training, DCFS employees may satisfy their remaining continuing education requirement in a multitude of ways. For instance, DCFS staff may elect to access continuing education opportunities offered through other community organizations and collaborations, educational institutions, and in-state and out-of-state conferences. These requests are submitted to and approved by the professional development team via CFS-360: Request for Training or Conference. During SFY '24 the professional development team received 57 requests for trainings or conferences which included requests for: Inaugural Human Trafficking Summit, Crimes Against Children Conference, Maltreatment and Drug Endangered Children Workshop, National Child Abuse Conference, Champions of Light Conference, Working Retreat on Resource Family Recruitment, and Strengthening Arkansas Families Child Welfare Conference.

The Academic Partnership in Public Child Welfare maintains learning opportunities on their LMS and staff may register for offered courses to meet continuing education requirements. Over 60 opportunities were available during SFY '24 and titles such as Active Parenting, Fetal Alcohol Spectrum Disorders, Every Child Arkansas Trust-Building Collaboration, Components for Enhancing Career Experience and Reducing Trauma (CE-CERT), and Safety is a Skill: Lived Experience Storytelling that Does No Harm, among others. In SFY '24 there were 366 continuing education courses offered, 3,885 course participants, and 19,285.50 continuing education hours awarded.

The Academic Partnership in Public Child Welfare also works with local Area Directors in each of the 10 service areas statewide to schedule annual staff training that benefits the individual area and area staff. Training courses are often scheduled as part of the annual area director's meeting but are sometimes scheduled in other manners such as training provided during a local office meeting. Such training can be customized to the needs of the individual staff at the unit or county level as well as benefiting the area as a whole.

Typically, training is mandated by DCFS Central Office throughout the year for DCFS staff related to new programs or initiatives. These mandated in-service training courses may count towards the ongoing training requirement for staff. Examples of required continuing education for DCFS staff include: Court Preparation and Testimony Trainings in each area yearly, SOP Deep Dives available monthly in all areas, Safety and Risk; Bringing it all Together in 2022, 2023 Legislative Update Training in the summer of 2023, Program Assistant Conference on Family Time in 2023, Special Board Rate Training in spring of 2023, Investigations training in Summer of 2024, and TDM expansion training throughout 2024.

In addition, DCFS requires all staff to attend a weekly statewide webinar, providing a structured and consistent approach to ongoing training, policy updates, and best practice discussions. This webinar serves as a real-time professional development tool to ensure staff, supervisors, and other professionals remain informed and aligned with agency expectations. This weekly webinar is mandatory for all staff unless they are in court, attending a critical meeting, or handling an urgent child welfare matter. The sessions are designed to also address common challenges faced in the field and offer guidance as well as create a safe space for staff to ask questions and clarify expectations directly with leadership.

Staff who are promoted to supervisory positions and those who are newly hired into supervisory positions are required to complete New Supervisor Training which is provided by MidSOUTH. New Supervisor Training maintains a focus on leadership skills within the context of child welfare and the administrative, educational, and supportive roles a supervisor plays. It is a 54-hour classroom-based training delivered over three weeks.

There is also a structured On-the-Job Training for New Supervisors provided by the IV-E University Partnership that is organized on the principles of safety, permanency, and well-being. This program serves as a "bridge" between a new supervisor's hire date and the time that new supervisor participated in the classroom-based New Supervisor Training since a minimum of eight participants are required before a New Supervisor classroom training is scheduled. OJT Participant Materials are posted to Knowledge Net, the online Knowledge Management website. New DCFS supervisors are also expected to complete the Departmental (DHS) Supervisor training prior to attending additional supervisor training provided by MidSOUTH. The DHS Leadership Series is a 1.5-day course and includes addressing employee issues, compliance, employment law, hiring procedures and grievance, interviewing, sexual harassment training and interpersonal communications.

DCFS Supervisors are required to maintain CFS-381: Training Record Log for each employee in their unit. Training Record Logs are used to track completion of all courses for a staff member to demonstrate that the staff member has accumulated the continuing education hours for their position as necessary for the year.

Despite having a continuing education training requirement and having a structured monitoring system to track whether all staff complete their annual training hours, DCFS does not have a comprehensive electronic method of monitoring all training hours (new staff training, training tracked in the DHS LMS, Division trainings created and provided by Division staff, and trainings completed outside of the agency)for all staff members. Without a comprehensive electronic tracking system, there is no method to aggregate data on how many employees meet the annual training requirement. While the Division information management system has a location to capture this data, many DCFS staff and supervisors are unaware of the system capacity and do not utilize the system to capture training measures.

Below is a representation, from the MidSOUTH LMS, of all IV-E eligible trainings conducted during SFY 23/24 by the MidSOUTH training partner for DCFS staff, including initial and ongoing 16,120

total participants (not a unique count) who participated in 1,264 courses, resulting in 64,353.50 training hours being awarded for the year.

Total Number of DCFS Staff Attendances for IV-E Training (including duplicates)	16,120
Total Number of Unique DCFS Staff who Attended At Least One IV-E Training	1,264
Total Number of IV-E Hours Earned by DCFS Staff	64,353.50

Total Participants	*2,409*	*(duplicates for NST, Online & PS)*
Total Participant Hours Awarded	*8,406.50*	
Total Courses Offered	*188*	
Total Training Hours Offered	*857.25*	

Figure 38: Training Attendance

Stakeholder Input

Stakeholders confirmed the information outlined above to include:

- Supervisors are not aware of an ability to monitor staff attendance for mandatory on-going training
- Staff attendance at on-going trainings is partially contingent upon the supervisor's attitude regarding on-going training
- Supervisors have the ability to request on-going training focused at the individual, unit, or county level as needed.

Conclusion

While Arkansas DCFS has a plan in place requiring a minimum set of ongoing training per year, the lack of electronic monitoring and uniform support of training efforts by supervisory staff limits the effectiveness of on-going training efforts. Implementing a structured tracking and accountability system will ensure that staff receive the necessary training to remain knowledgeable, skilled, and prepared to serve children and families effectively. Given the inability to aggregate data and information the state maintains in regard to ongoing staff training, Item 27 cannot currently be rated as a strength and is rated as an **Area Needing Improvement**. Heightened focus on the transfer of knowledge and skills from ongoing training to the workplace would benefit Arkansas and its employees.

Item 28: Resource Parent Training

Item 28 assesses whether the state provides effective pre-service and ongoing training for resource parents to ensure they have the skills and knowledge needed to care for children in the child welfare system. Arkansas DCFS has established a strong and structured training program, utilizing a combination of evidence-based curriculum, ongoing learning opportunities, and statewide accessibility to support resource families. In CFSR Round 3, Resource Parent Training was rated as a strength. Since Round 3, Arkansas has continued to provide appropriate training. In addition, Arkansas has further enhanced provider training by implementing the federally recognized curriculum with the National Training and Development Curriculum. After assessment, **Item 28 is rated as a Strength for Arkansas** and the state finds this factor to be in substantial conformity.

Introduction and Background

Arkansas licenses foster and adoptive homes through Private Licensed Child Placement Agencies (PLPA) or through DCFS directly. Both avenues achieve an identical license and follow the same standards and process, as described in future Items 33 and 34. This process requires that all prospective and current foster and adoptive homes complete training curriculum. Because licensing standards apply equally to both foster and adoptive parents in Arkansas, the State chooses to refer to them collectively as Resource Parents.

Methodology

Item 28 is evaluated using measurements from existing data sources, DCFS written policy, and written licensing standards, as well as stakeholder engagements.

Analysis

Training of perspective resource parents is required through the Child Welfare Agency Review Board and the Arkansas Department of Human Services, through the minimum licensing standards for Child Welfare Agencies and is also outlined in DCFS PUB-30: Resource Parent Handbook.

In early 2023, Arkansas DCFS adopted the National Training and Development Curriculum (NTDC) as the core pre-service training program for all prospective resource parents. NTDC is evidence based, and trauma informed, providing a foundation for caregivers to understand the needs of children in care. This curriculum replaced PRIDE in an effort to standardize training and improve preparedness. This program ensures resource parents are well prepared before receiving placements. All traditional resource parents who wish to foster or adopt are required to complete a thorough training process prior to becoming licensed.

NTDC is offered in both virtual and in person formats. The training covers topics such as trauma informed care, behavior management, child development, loss and grief, and building relationships with birth families. This pre-service training curriculum includes fifteen (15) hours of classroom training and three (3) hours of DCFS orientation prior to placement of a child in the home. Kinship resource parents must complete the Division's classroom pre-service curriculum which is twelve (12) hours of classroom training and three (3) hours of DCFS orientation. Resource parents must complete assessments to demonstrate comprehension before licensing.

Additional licensing considerations include home studies and background checks as well as cardiopulmonary resuscitation and first aid training. To maintain licensure, resource parents must complete 6 hours of annual in-service training. This can be met through MidSOUTH Training Academy courses, resource parent conferences with DCFS updates and best practices, resource parent webinars covering specialized topics, and therapeutic foster care training for homes caring for children with high behavioral needs.

Arkansas is currently in the process of revising kinship home requirements to better support relatives and fictive kin who step forward to care for children. The proposed changes have been

approved by the Child Welfare Agency Review Board and are awaiting finalization through Promulgation and Legislative Review. Key areas under revision are training expectations for kinship homes, licensing flexibility, and enhancement of the information and guidance available to kinship caregivers to align with best practices.

Arkansas has a strong system of recruitment and retention for resource parents through partnerships with community and faith-based organizations such as The CALL, Together We Foster, Foster Love, Therapeutic foster homes, and Private Licensed Placement Agencies. Each of these community and faith-based organizations are responsible for training providers recruited by the organization. Licensing standards for resource homes are applied equally regardless of the agency recruiting and training the resource parents. As such, the State maintains a Provider Invoice Entry (PIE) system which allows for provider billing and helps the State track standards for all community and faith-based recruitment.

Summary of State Performance

The current DCFS resource parent pre-service training is described in the CFSP Targeted Plan 2: 2025-2029 Training Plan, pages 19-21.

Through the agency's contract with MidSOUTH Training Academy, there were 182 individual PRIDE completions between July 1, 2023-February 3, 2023 (the date of the last PRIDE session before transitioning to the new Connecting AR Families Training). There have been 155 individuals complete the new Connecting AR Families Training between March 11, 2024-June 26, 2024. This makes for a combined total of 337 traditional resource parent applicants trained by MidSOUTH in SFY 24 –plus forty additional individuals trained from the previous SFY. Regarding the Kinship Connect Training, 707 individuals completed this pre-service training designed for relatives and fictive kin in SFY 2024 to date, which once again speaks to the Division's efforts in seeking out relative and fictive kin resource homes.

The chart below demonstrated the number of resource parents trained by MidSOUTH for FY '23/'24. 1,297 unique resource parents attended 16,449 hours of resource parent training for FY '23/'24.

Total Number of Resource Parent Attendances (including duplicates; excluding CE courses)	***6,019***
Total Number of Unique Resource Parents who Attended at Least One Resource Parenting Class (PRIDE, Connecting AR Families, Kinship Connect, FP Online)	***1,297***
Total Number of Resource Parent Hours Earned by Resource Parents	***16,449.00***

Figure 39: Resource Parent Trainings

MidSOUTH administers evaluations at the end of Resource Parent Training Classes to monitor the effectiveness of the training. Below is a word cloud resulting from those monitoring efforts.



Figure 40: Resource Parent Training Evaluations Word Cloud

DCFS also offers Bridging the Gap training for Kinship families who later choose to become traditional resource parents. This training focuses on strengthening relationships between non-kin caregivers and the children they foster, helping them navigate the complexities of child welfare involvement.

Training records for resource parent applicants who complete training through UALR MidSOUTH Training Academy are transferred nightly into DCFS's CHRIS system. However, resource homes cannot be open for placement in CHRIS until the prospective resource parents have successfully completed the required pre-service training. This training equips caregivers with essential knowledge, including:

- Understanding trauma and its impact on children,
- Recognizing trauma-related behaviors and how to manage them,
- Developing strong partnerships with family service workers, birth parents, and other resource parents,
- The importance of self-care for caregivers.

DCFS resource homes have access to ongoing training through UALR MidSOUTH, community providers, and other available resources. While certain courses, such as first aid/CPR recertification training may not count toward the required six hours of annual training, they are still required for resource parents.

DCFS actively monitors compliance with ongoing training requirements to ensure all licensed resource parents remain eligible. If a resource home fails to meet the annual training requirement, no new placements can be made in the home until compliance is restored, per

Policy VII-K. Safe Measures reports assist in tracking compliance, allowing Resource Staff to monitor outstanding training hours and identify homes at risk of falling out of compliance. These reports summarize training completion rates at both the county and state levels. Some examples of reports available in SafeMeasures are below.

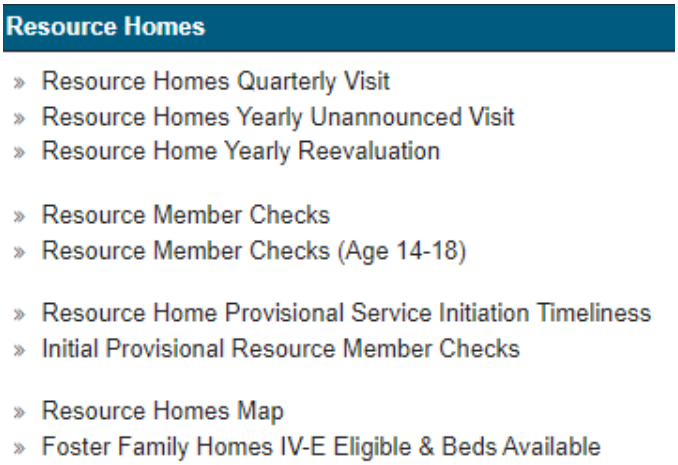


Figure 41: SafeMeasures Resource Homes Reports

The Placement and Residential Licensing Unit (PRLU) within the Arkansas Department of Education is responsible for monitoring compliance with licensing requirements across DCFS resource homes and childcare facilities. PRLU reviews approximately 80 percent of DCFS resource homes, and 100% of childcare facilities annually to ensure adherence to regulations, including the required annual training hours for resource homes. Compliance tracking is documented in PRLU's electronic Licensing System.

The Minimum Licensing Standards for Child Welfare Agencies establish the training requirements for therapeutic foster care (TFC) parents. In Arkansas, All TFC providers utilize the Pressley Ridge curriculum for initial training. This curriculum emphasizes trauma informed care, behavioral intervention strategies, and cultural competency to better equip caregivers for the unique challenges of therapeutic foster parenting.

Similar to DCFS licensed foster homes, TFC homes cannot be opened for placement until prospective resource parents have successfully completed the required pre-service training curriculum for their specific provider. PRLU also oversees both initial and ongoing training compliance for TFC providers to ensure sustained quality in therapeutic care.

Resource Parent Portal

DCFS maintains an information portal accessible only to resource parents. This resource parent portal allows resource parents to access information regarding children currently placed in their home such as the date the child was keyed into the resource home, information regarding board payments, and access to court hearing dates and family case plans. The resource parent portal also provides access to training opportunities that meet requirements for continuing education

hours. Resource parents may access training which support retention on the portal such as videos on completing travel reimbursement requests, how to locate certified childcare providers, and how to navigate the resource portal.

Resource Parent Conferences
Each DCFS area provides a yearly conference specifically designed to support retention and training efforts for resource parents within the area. Area resource staff coordinate to have speakers present IV-E eligible topics based on the current needs of the resource parents in the area.

Stakeholder Input
Stakeholders who participated in the CFSR focus groups indicated that while initial and ongoing training for prospective and current resource parents, as well as staff at state licensed or approved facilities, is provided in a timely manner, additional support is necessary.

Stakeholders, including DCFS resource parents, noted that while training provides foundational knowledge and skills necessary to promote child safety, it is often not enough on its own. To be truly effective, training is supplemented by coaching, mentorship, and support groups to help both staff and caregivers apply what they have learned in real-life situations.

Participants described the complex needs of children in care and the challenges staff and caregivers face in meeting those needs, particularly for individuals with limited lived experience. While trauma informed training is provided, it does not always fully prepare resource parents or staff for handling the day-to-day manifestations of trauma related behaviors.

Additionally, service providers and placement stakeholders emphasized the need for more frequent guidance and regular communication with DCFS. Providers cited a recent meeting hosted by the DCFS In-Home Unit as an example of a beneficial opportunity to improve collaboration, peer networking, and information sharing. They found it helpful in strengthening relationships among providers and in staying updated on departmental initiatives.

Conclusion
Based on the findings above, Arkansas provides resource parents with initial and ongoing training that aligns with established licensing requirements and federal expectations. The use of the National Training and Development Curriculum (NTDC), along with specialized training for therapeutic and kinship caregivers, equips resource parents with foundational knowledge. Additionally, the state's commitment to continuing education through MidSOUTH, DCFS training opportunities, and external resources ensures that caregivers receive ongoing support to address the complex needs of children in care.

While **CFSR Item 28 is considered a Strength**, the assessment highlights the critical role of real-life experience and mentorship in supplementing formal training. Hands on learning, coaching, and peer support are essential in improving caregiver retention and placement stability. It is

recommended that Arkansas continue to engage resource parents and incorporate their feedback into improving the agency's practices that impact them and the youth that they serve.

E. Service Array and Resource Development

Item 29: Array of Services

Summary of State Performance

Item 29 is rated as a strength with supporting evidence and analysis outlined below to show that Arkansas's families have services available and Accessible to meet their needs. This includes all case types. These services keep children safe at home or help children achieve permanency.

Introduction and Background

Arkansas DCFS is committed to providing a comprehensive array of services to meet the diverse needs of children and families involved in the child welfare system. The goal is to ensure that services are accessible, coordinated, and tailored to address safety, permanency, and well-being at every stage of involvement.

DCFS utilizes standardized tools to access needs and guide service delivery. The Child and Adolescent Needs and Strengths (CANS) tool is used for children experiencing foster care, while the Family Advocacy and Support Tool (FAST) is applied to families receiving in-home services. These assessments help identify strengths, needs, and service priorities to support individualized family case planning.

Structured Decision Making (SDM) Safety Organized Practice (SOP) frameworks are also embedded in practice. These tools support the identification of safety threats, prioritize services, and promote the use of natural and community-based supports. The goal is to build safety networks around families, reduce the need for removal, and support safe permanency outcomes.

Through this approach, DCFS strives to ensure that every family, regardless of where they are, has access to the services needed to promote child safety and family stability. Efforts to maintain children safely in their homes, when possible, have contributed to consistent decline in the foster care population and reduced rates of repeat maltreatment statewide.

Methodology

This item is evaluated utilizing descriptive statistics from existing administrative data and surveys listed below:

- Public Consulting Group independent assessment and report
- Restore Hope 100 Families data
- Stakeholder input

Analysis

Arkansas DCFS offers a broad array of services through a combination of state, federal, and community resources, as well as through contracted providers and informal and formal community supports. However, barriers remain related to rural access and behavioral health services.

Arkansas has seen great improvement since round three CFSR in services to maintain children in their homes with implementation of evidence-based programs. With the exceptions of mental health and substance misuse treatment for teens, stakeholders and staff reported minimal to no wait times for provision of services to families to begin.

In April 2023, Public Consulting Group, LLC completed an independent assessment of Family Centered Treatment Programs in Arkansas, such as Intensive In-Home Services. The chart below shows that families interviewed were satisfied with both the number of services they received, and they felt better equipped to cope with problems on a daily basis.

I am satisfied with the amount of services my family and I received from my FCT agency.			
	St Francis Ministries	Youth Advocacy Programs (YAP)	Grand Total
Strongly Agree	80	12	**92**
Agree	25	6	**31**
Somewhat Disagree	1	0	**1**
Strongly Disagree	2	0	**2**
Grand Total	**108**	**18**	**126**

The services we received from my FCT agency helped us to better handle our family problems on a day-to-day basis.			
	St Francis Ministries	Youth Advocacy Programs (YAP)	Grand Total
Strongly Agree	76	9	**85**
Agree	26	9	**35**
Somewhat Disagree	4	0	**4**
Strongly Disagree	2	0	**2**
Grand Total	**108**	**18**	**93**

Figure 42: Independent Assessment of Family Centered Treatment Programs

DCFS refers to and provides services in a wide array and specific to individual cities, counties, and areas of service. The array of services ranges from formal services paid for by state and federal funding sources to informal sources provided by networks, communities, and stakeholders. Programs and services of other Divisions within the Department of Human Services (DHS) are also available to clients of DCFS. Delivery of such services is coordinated with other Divisions

administering TEA/TANF Medicaid, Supplemental Nutrition Assistance Program, Social Services Block Grant, and other federal entitlement programs. DCFS continues to work with the state Community-Based Child Abuse Prevention Program (CBCAP) State Lead Agency funded under Title II of CAPTA to develop child abuse prevention programs, in addition to the ones DCFS makes available through contracts. Enhanced communication amongst DHS Divisions over the past three years has resulted in the ability for clients to apply for services via an on-line platform rather than making a trip to a local government office, and the office of communications ensures more visibility for Divisions on social media reaching more clients. According to round 4 focus group input, community engagement and support have increased exponentially in some areas of the state (Areas 1, 2, 3, 4, 6, and 8)

DCFS delivers some services directly to clients while others are contracted with statewide organizations or local providers. Division-delivered services are available statewide through DCFS staff, while some contracted services are only available in limited jurisdictions due to the service area of the particular contract provider. Service gaps are usually addressed through the development of a Purchase Order for necessary services not available through contract. With the implementation of SOP and increased inclusion of a family's network in planning, more support and services are being provided to a family by providers in their own communities and by their own network members.

The Division has made notable progress in implementing evidence-based programs statewide. SafeCare, a structured in-home parenting program, is now available across all areas and is used to prevent removal, support reunification, and reduce recurrence of maltreatment. Intensive In-Home Services provide short term, crisis focused intervention and stabilization for families experiencing safety threats. Both programs are widely used and have been identified by stakeholders as contributing to improved child and family outcomes.

DCFS also continues to embed Safety Organized Practice (SOP) to help staff access informal support networks, prioritize service delivery, and develop safety and family case plans that are tailored to the unique needs of each family. SOP has supported better engagement with extended family and community-based supports and is used in conjunction with structured assessments like CANS and FAST.

A key innovation strengthening the service array is the Restore Hope 100 Families Initiative, now active in six service areas (1,2,3,4,6, and 8). This model brings together multiple partners, including DCFS, housing agencies, workforce programs, recovery services, and local churches, to support families in crisis through coordinated case navigation.

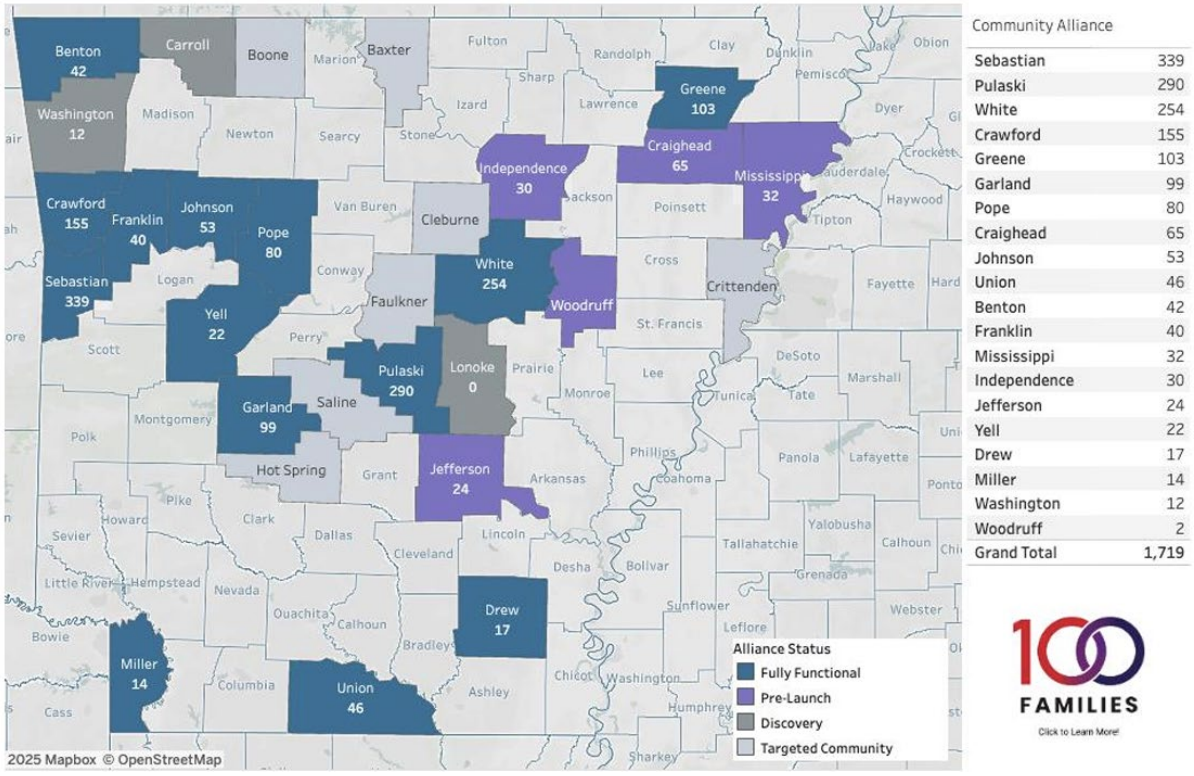


Figure 43: Restore Hope 100 Families Services Map

In Sebastion County, where Restore Hope 100 Families is well established, over 500 families were referred in SFY2024. Of those, 73% stabilized without further DCFS involvement or placement disruption. Families connected through this initiative received housing, employment assistance, transportation, and essential needs within an average of 30 days.

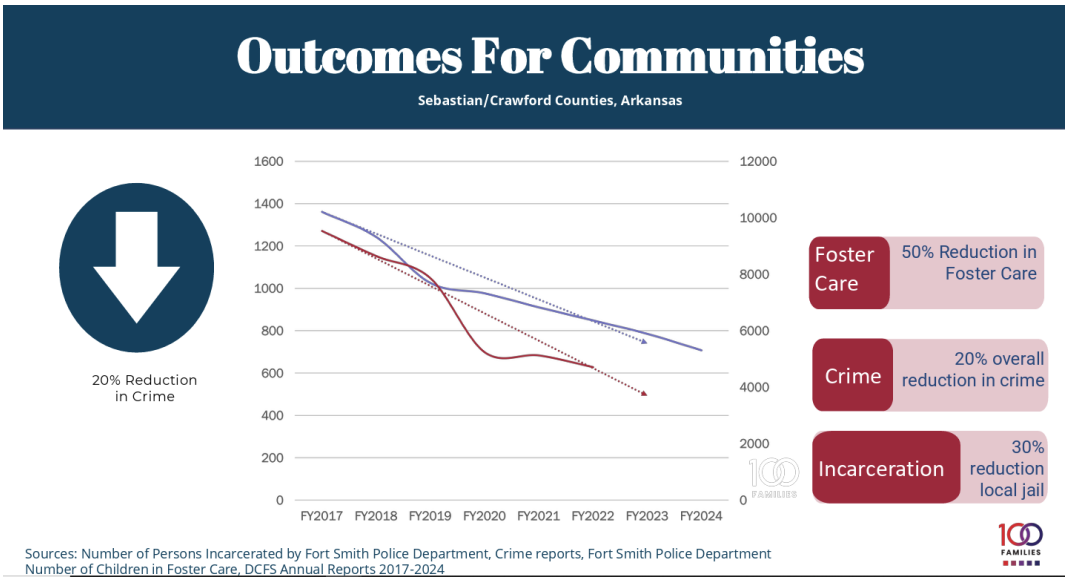
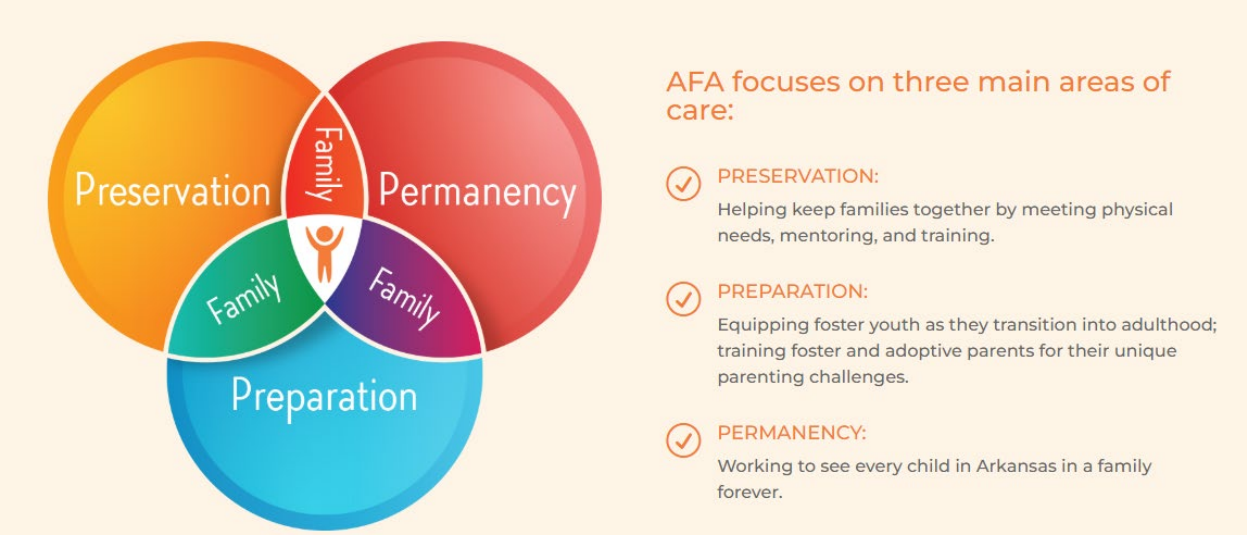


Figure 44: Restore Hope 100 Families Outcomes

Additionally, DCFS partners with Arkansas Family Alliance (AFA) to provide upstream, proactive assistance to families and children in crisis, addressing the root causes of poverty, instability, and family separation before they escalate into more severe societal challenges. By creating a platform for community engagement, AFA mobilizes individuals, organizations, and resources to meet tangible needs, fostering a culture of prevention and empowerment. Through this collaborative approach, AFA is significantly reducing the financial and social burden on taxpayers, the state, and the community by preventing crises that often lead to foster care placement, homelessness, incarceration, and reliance on state-funded programs. This was done through them being the implementing partner for CarePortal, a shared technology platform that bridges the gap between families in crisis and community resources.

CarePortal and their work with several community partners has played a pivotal role in reducing foster care numbers in Sebastian County specifically by over 50%. By partnering with the Division of Children and Family Services (DCFS) and other local nonprofits, AFA has demonstrated the transformative potential of this tool in addressing family needs before they escalate into crises.



CarePortal launched in Arkansas in 2018 and has served 1,843 children, with an economic impact of $1,187,858. This economic impact figure does not account for the substantial savings to taxpayers from reducing the number of children entering foster care.

Arkansas Family Alliance (AFA), with a grant funded from DCFS through CBCAP funding, was able to expand CarePortal services across the state. AFA successfully expanded operations in Benton, Pope, Woodruff, Faulkner, and Crawford Counties while simultaneously increasing service capacity in Pulaski, Sebastian, Washington, and White Counties. The economic impact is valued at $518,211 per year.

Arkansas continues to expand its array of supportive services to meet the diverse and evolving needs of children and families. Another such service is WIC Baby and Me, and enhanced program

under the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), designed to promote the health and well-being of pregnant and postpartum women and their infants. WIC Baby and Me provides families with nutrition assistance, breastfeeding support, health screenings, and parent resources during pregnancy and throughout the postpartum period. These services play a critical role in strengthening protective factors, particularly for families with identified risks factors such as poverty or limited access to prenatal care. The integration of WIC Baby and Me into DCFS practice aligns with the Division's focus on early intervention and family centered support and reflects a commitment to building a comprehensive service array that addressed both immediate needs and long erm stability.

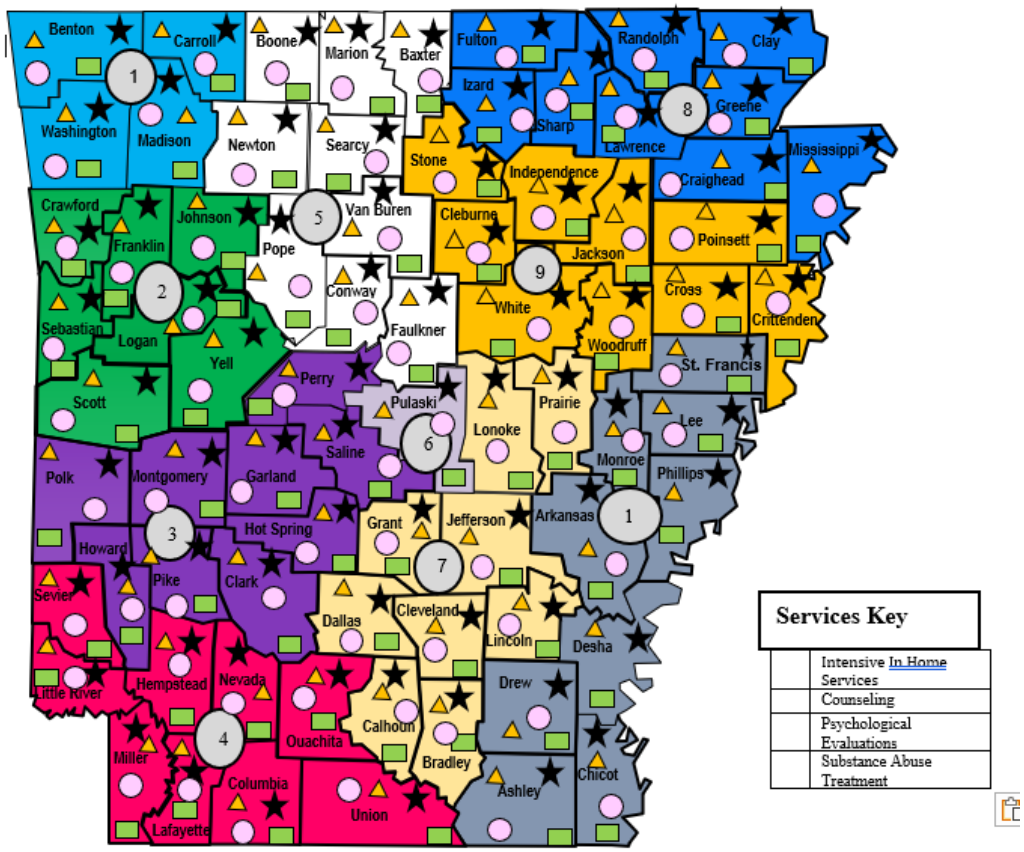


Figure 45: Contract Services Map

For a complete listing of services offered—please refer to:

- Pages 219-271 of the Arkansas 2024 Annual Progress and Services Report; Arkansas CAPTA Plan pages 272-274
- Pages 83-97 of the SFY 2025-2029 Child and Family Services Plan
- 2025-2029 CFSP Targeted Plan 3: Health Care Oversight and Coordination Plan

In round 3 CFSR, transportation was cited as a barrier to obtaining services but round 4 focus group interviews suggest that family and community supports have stepped in to either

physically transport the family to appointments or provide gas cards for families who have personal transportation, effectively removing transportation as a barrier to services for most families.

Despite these strengths, challenges persist. Service access for certain targeted populations also remains limited. Stakeholders identified insufficient services for children with developmental delays, youth needing substance use treatment, and families with limited English proficiency.

Efforts are ongoing to improve cross-jurisdictional access to services, particularly when children are placed outside of their home county. In those cases, staff often encounter difficulties coordinating services due to contract limitations, reimbursement delays, and geographical barriers. Each county office is expected to coordinate referrals with both formal and informal providers in the placement location to ensure continuity of care.

Stakeholder Input

Stakeholders in all areas and across all focus groups indicated:

- Services across the state have improved and all stakeholders had to be encouraged to consider what specific service gaps existed for the state before they identified any gaps. Stakeholders attributed improvements to increased community support for families and to programs such as Restore Hope 100 Families and SafeCare which employ case managers that support families and make connections with community resources for families.
    - Stakeholders, with an emphasis from those with lived experience, stated emphatically that the 'experience' of child welfare differs based on the attitudes and values of the individual DCFS staff working with the family.
- Substance Misuse Diagnosis and Treatment for Teens
    - There is an increasing population of youth ages twelve (12) and older who are experiencing substance misuse disorders and there are no treatment providers for inpatient or outpatient treatment for youth in the state.
- Behavior Management Training for Caregivers and Placement Providers for Youth Experiencing Significant Development Delays
    - There are not enough (if any) resources available to help providers and caregivers in the State learn how to manage behaviors for children and youth experiencing significant developmental delays, specifically children who fall on the autism spectrum. This also impacts the ability for placement providers to stabilize out-of-home placements for this population.
- Translation Services Readily Available
    - Translation services are available in all areas of the state for scheduled needs such as family team meetings and court hearings, though at times the dates for these meetings must be pushed back due to interpreter availability.
    - Translation services are not readily available for all needs such as random home visits or meetings with service providers.
    - DCFS and service providers are compensating by hiring bilingual staff when the opportunity arises.
- Quality Mental Health Services

- Community Mental Health Centers are unable to retain staff causing:
  - Long wait lists to begin services
  - Inability to get youth started with services when placement changes occur
  - A lack of continuity of care in mental health and medication management services
- Placement providers report being unequipped to meet the level of need for the youth that require placements currently and DCFS staff report being unable to get the same youth approved for inpatient treatment by the PASSE.
- Stakeholders did not believe that telehealth provided quality mental health care and believed that mental health care should occur in person rather than virtually

Conclusion

Overall, Arkansas demonstrates a strong commitment to improving its service array through the expansion of evidence-based models, integration of informal supports, and community level collaboration. Stakeholder interviews and case reviews indicate that the availability of services throughout the State is consistent, though transportation services are necessary in urban areas to access some services. Some counties benefit from a wide array of services while others, generally more rural areas, have limited access to services to prevent and adequately address issues that impact child safety. However, stakeholders routinely said there were no barriers to accessing services in any area of the state because stakeholders help provide for any family experiences during service provision.

Based on the aforementioned information and analysis, Arkansas finds that the service array and resource development system is functioning sufficiently to ensure that the requisite array of services is accessible in all political jurisdictions covered by the CFSP. While the State intends to work to address the specific areas of need identified, overall, the State assesses Item 29 to be a **Strength**.

Item 30: Individualizing Services

Summary of State Performance

Arkansas DCFS individualizes services through active engagement with families, their networks, and stakeholders to ensure the unique needs of each child and family are addressed. By involving all individuals who are important to a family in family case planning and assessment, DCFS is able to create tailored plans that reflect the family's strengths, challenges, and goals. Team Decision Making (TDM) meetings and family team meetings allow inclusive planning that often includes relatives, fictive kin, and professionals who know the family well.

The Division utilizes tools such as SOP, SDM, FAST, and CANS to guide individualized service planning and ensure the assessment process is centered around the family's identified needs. DCFS staff work with the family and their identified support network to develop individualized family case plans that promote safety, permanency, and well-being. The family case plans are updated as needed to support family progress, and services are adapted accordingly to ensure continued relevance.

Progress is evident in the expansion of specialized services and strategies aimed at increasing individualization. The use of evidence-based models like SafeCare and Intensive In-Home Services allows services to be targeted based on a child or family's specific needs and risks. Additionally, DCFS has made significant strides in providing materials in accessible formats, including multiple languages and plain language brochures. Interpreter services are available statewide to support families who experience language barriers, including during court hearings and family case planning.

DCFS expanded the use of Team Decision Making meetings statewide, allowing multiple opportunities to tailor services, elevate the family's voice, and identify informal supports that can be leveraged. These meetings also allow families and caseworkers to identify needed services that may not have been immediately available at the time of removal.

The Division works to individualize placement and adoption planning through the use of targeted recruitment, including partnership with The Contingent, which supports identifying families that reflect the cultural, linguistic, and developmental needs of children. The Division begins safety planning and identification of needed supports from the point of first contact with a family regardless of whether the care is ultimately opened. This early focus allows DCFS to better align services to both safety and permanency outcomes (see Arkansas's CFSR 2025-2029 Attachment #5 - Contingent Arkansas DCFS Report for more information).

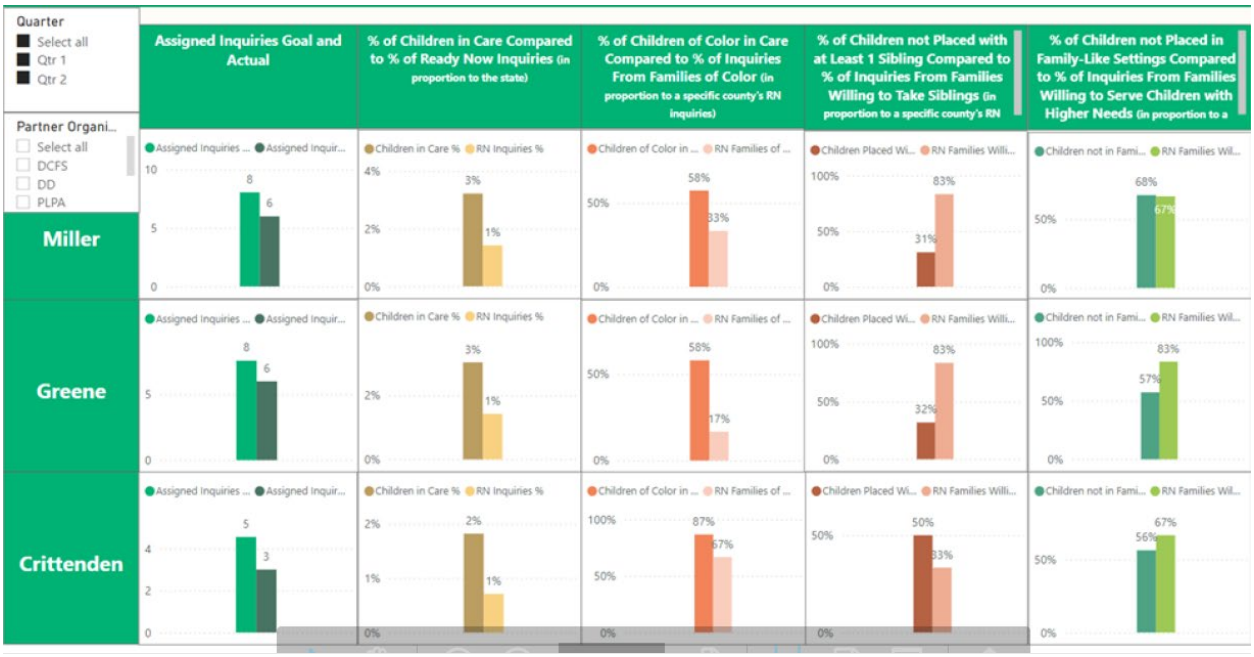


Figure 46: Contingent Recruitment Tracking

Stakeholder Input

Stakeholder feedback supports that DCFS is doing well in individualizing services for families. Stakeholders noted flexibility in service delivery (such as providing services at home or after

hours), use of assessments to determine strengths and match services accordingly, and significant involvement for families and community partners to guide planning.

However, there are systemic challenges in some counties that impact individualization. Stakeholders report that in certain jurisdictions, family case planning does not begin until after initial court hearings, or courts do not consider individualized safety assessments before making placement or permanency decisions. Staff in these areas described frustration with perceived "cookie-cutter" approaches that limit their ability to reflect each family's unique needs in the family case plan. Concerns about supervisor's influence on planning decisions and lack of consideration of case specific dynamics were also noted.

Conclusion

Arkansas continues to make measurable progress in expanding individualized services through assessments, evidence-based interventions, targeted recruitment, and increased use of family engagement strategies. While some systemic barriers persist in certain local jurisdictions, the Division has prioritized continuous improvement through data monitoring, stakeholder input, and case level practice reform. Based on this assessment, **DCFS rates Item 30 as a Strength.**

F. Agency Response to the Community

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

Summary of State Performance

Item 31 is rated as a Strength. Arkansas DCFS actively engages stakeholders at all levels to gather input, share information, and strengthen service delivery. Engagement occurs through formal structures such as statewide advisory groups, feedback forums, and routine collaboration with internal and external partners. Stakeholder participation is embedded in DCFS's broader practice model, At One Table, which emphasizes inclusion, transparency, and shared ownership of planning and outcomes.

Forums and strategies used to obtain input include community presentations, public comment hearings, youth advisory boards, resource parent advisory meetings, and stakeholder focus groups. DCFS hosts quarterly and ad hoc stakeholder meetings across all program areas including prevention, in-home services, foster care, adoption, and transition, bringing together supervisors, caseworkers, providers, and lived-experience participants. These meetings inform policy, recruitment strategies, system improvement efforts, and public communication.

DCFS partners with sister agencies such as the Division of County Operations and Division of Developmental Disabilities Services to address the needs of families with complex barriers including disabilities, aging out youth, and limited English proficiency. Formal collaboration occurs through memoranda of understanding (MOUs) and interagency workgroups, helping ensure access and continuity of care across systems.

To improve transparency and access, DCFS maintains a public facing dashboard that provides data on outcomes, staffing, and service performance. Information about how to become a resource parent is available on the DCFS website along with policy manuals, forms, and training resources. Executive staff also regularly use this platform to share updates and performance goals with stakeholders and the public.

DCFS staff regularly share data across the Division to support learning and improvement. Reports and dashboards are reviewed by executive staff, area directors, and program leads to identify trends and plan improvements. Information from stakeholders is consistently used to guide training, policy updates, and practice improvements. Area Directors and service Area Managers work closely with Quality Service Peer Review results, CHRIS data, and stakeholder feedback to develop targeted improvement strategies.

Training Skills Development Team meetings occur quarterly and include members of each training partner, including field trainers. The resource parent advisory committee, Parent Advisory Committee (PAC), and Youth Advisory Board (YAB) all meet routinely as established by the needs of the individual committees. The Human Trafficking Committee also meets monthly.

The state's approach to stakeholder engagement included targeted outreach to populations that may be historically underserved. This includes youth with disabilities, kinship caregivers, and transition aged youth. DCFS ensures outreach is reflective of community needs. The Division also regularly shares updates in multiple formats.

At the local level, DCFS supervisors are expected to engage in regular communication and planning with community stakeholders to support families. Family Service Workers and Program Assistants routinely collaborate with school staff, community organizations, and informal networks during safety planning, referrals, and placement matching.

The strategic plan for Arkansas's CFSP, while administrative in nature, is reflective of the feedback received from external and internal stakeholders. Information gathered from stakeholders is shared with DCFS' Executive staff on an ongoing basis which is then used to brainstorm and strategize on changes to enhance the support and supervision provided to direct services staff, help them to enhance their skills, and develop improved practices with families and relationships with community partners.

Continuous Quality Improvement meetings with Service Area staff are also conducted no less than annually. Findings from the Quality Services Peer Review, examination of child protective services practices and a meta-analysis of data analyzed from CHRIS are used to identify promising practices and areas where practice improvement is needed. Area Directors are encouraged to develop and implement the goals and objectives of DCFS' CFSP through development of individualized Program Improvement Plans. Although this is an area where work needs to continue, it is an area where development persists.

Stakeholder Input

Stakeholders across all areas consistently reported that DCFS is responsive to feedback and increasingly inclusive of community voices. The At One Table model has been positively received, particularly where both the DCFS supervisor and juvenile judge adopt the values of shared planning, transparency, and collaboration. Where one or both do not embrace these principles, stakeholder engagement and communication breakdowns are more common.

Stakeholders noted that Team Decision Making meetings and Safe Babies Court Team staffings are effective in bringing families and partners together to develop individualized, family centered plans. However, some areas still struggle with consistency with communication, particularly when staff turnover is high or caseloads limit routine coordination.

Feedback indicated that Family Team Meetings often lack structure, and outcomes may improve if facilitated by a neutral third party. Additionally, stakeholders highlighted strong progress in including kin and community members in service planning and support roles, which improves family capacity and safety outcomes.

Conclusion

Based on information collected through stakeholder engagement forums, community partnerships, and statewide focus groups, DCFS demonstrates a strong commitment to ongoing collaboration, Feedback is actively used to inform improvements in practice, policy, and communication. Arkansas finds that its responsiveness to the community system is functioning effectively, and rates **Item 31 as a Strength.**

Item 32: Coordination of CFSP Services with Other Federal Programs

Summary of State Performance

Item 32 is rated as a Strength. Arkansas DCFS collaborates extensively with other public and private child and family service agencies, including the Division of Developmental Disabilities (DDS), Division of Behavioral Health Services (DBHS), Division of Youth Services (DYS), and Division of County Operations (DCO). DCFS also works with the Office of Child Support Enforcement (OCSE), Housing and Urban Development (HUD), and Division of Workforce Services on an as-needed basis. Coordination of service delivery ensured access to federally funded programs such as TEA/TANF, SNAP, Medicaid, the Social Services Block Grant, and other entitlements.

Division of Youth Services

DCFS has strong coordination with the Division of Youth Services (DYS) for children adjudicated and placed in the juvenile justice system. Although DYS holds custody, DCFS serves as the liaison and participates in planning meetings to ensure continuity of care, discharge planning, and reunification efforts. Memorandum of Understanding (MOU) between DYS and DCFS outlines protocols for transfer of custody when youth exit DYS. In some cases, DCFS assumes custody in lieu of a parent. The discharge process includes coordination for family reunification or placement and ongoing services upon exit from the system.

Division of Behavioral Health Services
DCFS also partners with DBHS to coordinate behavioral health services for children and families, including planning, referrals, and implementation of new initiatives. The Behavioral Health Program Manager at DCFS works closely with DBHS to ensure services are accessible and to avoid conflicting provider expectations. Additionally, DBHS certifies, and funds contracted substance abuse providers used by DCFS families. Coordination supports timely access to treatment for both children and adults in the home.

Division of Developmental Disabilities
To streamline services for children with developmental disabilities, DCFS has three Centralized Developmental Disabilities Coordinators who handle all DDS waiver packets. These roles were created to relive the burden on field staff, who previously faced challenges managing this process alongside case responsibilities. Centralization has resulted in more timely and consistent processing.

Division of County Operations (DCO)
DCFS staff partner with the Division of County Operations at state and county levels as necessary to ensure coordination and provision of the Supplemental Nutrition Assistance Program (SNAP) and the Medicaid Program. DCFS and DCO staff in local offices collaborate frequently to ensure clients have the necessary referrals and assistance completing applications for SNAP and Medicaid programs. DCFS and DCO coordinate frequently to obtain expedited approvals for families in extenuating circumstances.

Office of Child Support Enforcement
DCFS coordinates services with the Office of Child Support Enforcement (OCSE) to ensure children experiencing foster care are supported by all caregivers. DCFS and OCSE work together to complete an assessment and ensure support is not pursued if payment of support would create a barrier to reunification.

Social Security Administration
The Eligibility Unit within DCFS Central Office determines IV-E eligibility for children experiencing foster care. This unit coordinates with DCO to assist with Medicaid enrollment and with OCSE to secure benefits. Staff also work closely with SSA to ensure children receive appropriate benefits. Locally, caseworkers help families access HUD and SNAP benefits and often assist in competing applications of services.

Families in Need of Services
DCFS staff also participate in Families in Need of Services (FINS) and court involved planning meetings to align support services across systems. In many cases, DCFS staff facilitate coordination of federal services including SNAP, Medicaid, housing, and childcare, particularly when families experience housing instability or when multiple agencies are involved.

Stakeholder Input

Stakeholders widely agreed that coordination of services across federal programs is generally successful when strong interpersonal relationships exist between DCFS staff and other agencies. This is especially true in counties where partnerships with SNAP, Medicaid, Housing Authorities, Childcare, and Social Security offices have been cultivated over time. However, these relationships appear to be more developed in rural areas, where the need is high and providers are more accustomed to collaboration. Urban counties reported mixed experiences, often related to system fragmentation and population size.

Stakeholders highlighted the difficulty families face when navigating application processes for federal services. DCFS staff and providers frequently assist families with completing applications and troubleshooting system delays, which families have found helpful.

Coordination with Juvenile Services Programs remains an area needing improvement. Stakeholders noted that youth exhibiting challenging behaviors are sometimes placed in foster care despite no maltreatment, simply due to a lack of alternatives. This trend adds strain to the foster care system and increases the complexity of care needed for these youth.

Conclusion

Based on stakeholder feedback and observed practices, Arkansas finds that collaboration between DCFS and other federally funded programs is occurring consistently across the state. Interagency relationships are generally strong and support the service needs of children and families, though opportunities remain for improvement with the Juvenile Services coordination and system navigation for families. The state assesses **Item 32 to be a Strength**.

G. Foster and Adoptive Parent Licensing, Recruitment, and Retention

Item 33: Standards Applied Equally

Summary of State Performance

Item 33 is rated as a strength. Arkansas DCFS has robust systems in place to ensure that licensing standards are applied equally to all resource homes and childcare institutions. This includes both DCFS approved resource homes and private licensed facilities overseen by the Placement and Residential Licensing Unit (PRLU). Licensing standards are grounded in state statute and policy and are consistently monitored and enforced to ensure compliance with Title IV-E eligibility requirements.

Introduction and Background

Under the authority of the Child Welfare Agency Licensing Act (Ark. Code Ann. 9-28-401 et. seq.) the Child Welfare Agency Review Board (CWARB) establishes and enforces minimum licensing standards for all child welfare agencies. PRLU serves as the enforcement body responsible for

licensing inspections, investigations of violations, and compliance monitoring. PRLU uses the Enterprise Licensing System (ELS) to document all inspections and track corrective actions.

PRLU monitors licensing compliance across:

- Resource homes (DCFS and PLPA)
- Psychiatric Residential Treatment Facilities
- Child Placement Agencies
- Emergency and specialized youth residential settings

Standards apply equally to all licenses resource homes, whether public or private, and regardless of whether the home is licenses directly by DCFS or by an external agency. These standards are outlined in the Minimum Licensing Standards for Child Welfare Agencies publication produced by the CWARB and the Placement and Residential Licensing Unit (PRLU) within the Arkansas's Department of Human Services (PUB-004: MLS-for-CWA-Placement-06012022.pdf (arkansas.gov)).

Resource Home Licensing Standards and Oversight

DCFS ensures that all resource homes meet licensing requirements before children are placed and that reevaluations occur annually or upon significant life events. Licensing standards include:

- Completion of background checks (FBI, state, and child maltreatment)
- Submission of required documentation (Form 346, SAFE Home Study, reference letters)
- Minimum pre-service training hours (currently 14 hours)
- CPR/First Aid certification for all caregivers
- A completed home study approved before final approval

Monitoring, Reassessment, and Quality Control

To maintain standards, DCFS and PRLU monitor homes through:

- Annual reevaluations (triggered also by life events such as marriage, divorce, or household changes)
- In-service training compliance (6 hours annually after year one)
- Random reviews of 80 homes per quarter
    - New homes are reviewed for:
        - A 346 with correct results/names/dates written in for *each person* 14 years or older.
        - Policy waiver or alternative compliance approvals, including those for Criminal/child abuse hits.
        - The SAFE Home Study that was completed for the family. Must be signed and dated.
        - Reference letters included in the Home Study
        - Up to date CPR/BLS/First Aid Certificates or a reason why this are not included.
    - Re-eval homes are reviewed for:

- A 346 with correct results/names/dates written in for each person 14 years or older.
- Policy waiver or alternative compliance approvals including those for Criminal/child abuse hits *or past FBI checks*.
- The SAFE Home Study *Renewal only* completed for the family. Must be signed and dated.
- Up to date CPR/BLS/First Aid Certificates or a reason why this are not included.
- Review of SAFE studies, waiver/alternative compliance approvals. CPR/First Aid certification, and background check results.

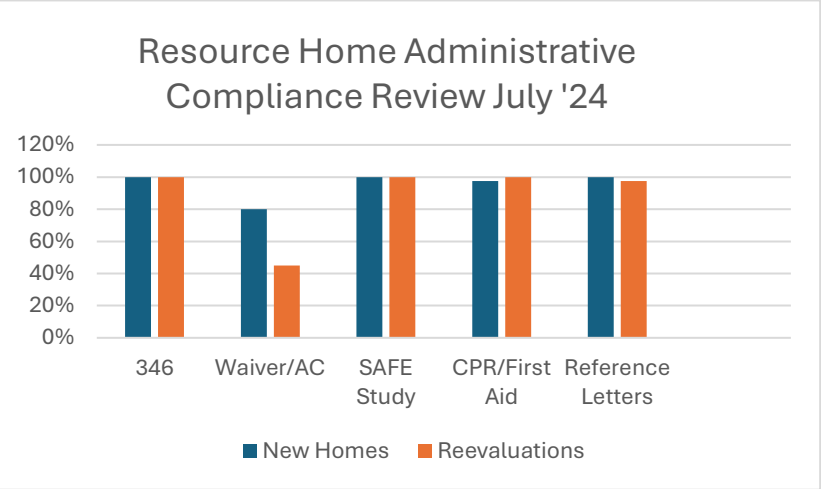


Figure 47: Resource Home Administrative Compliance Review

If homes fall out of compliance (missed in-service deadlines), foster care board payments are paused, and corrective action plans are initiated. PRLU also issues Visit Compliance Reports (Form 521) and Acknowledgment Reports (Form 522) when deficiencies are identified during inspections.

Policy Waivers and Alternative Compliance

DCFS allows for policy waivers or alternative compliance requests when a home may meet the intent but not the letter of the regulation. These requests are reviewed by the Assistant Director of Placement Supports and Community Outreach, and final approval is granted by the DCFS Director or CWARB. Some issues, such as DUI convictions, always require formal policy waivers. The process is standardized and applies equally to all homes, regardless of their relationship with the child.

Unlicensed Relative/Kinship Homes

Arkansas DCFS prioritizes placement with relatives and fictive kin whenever safely possible, recognizing the importance of preserving family connections and minimizing trauma for children entering care. While these kinship homes may initially be unlicensed, DCFS policy allows for the opening of a provisional resource home to expedite placement while licensing requirements are

being completed. Upon approval of a provisional home, foster care board payment begins funded through State General Revenue funds, but the home must achieve full compliance within six months. If the home is not fully licensed by the end of that period, the board payments stop. To further support kinship caregivers PRLU is working to promulgate separate, streamlined licensing standards for kinship homes. These new standards are designed to preserve child safety while reducing unnecessary barriers which have already been approved by the CWARB and are in development for formal adoption.

Stakeholder Input

Stakeholders affirmed that licensing standards are applied consistently across all resource homes. They appreciated the structure and transparency of reevaluation processes, as well as PRLU's role in ongoing oversight. Some stakeholders noted challenges for kinship homes in meeting the same standards as traditional resource homes but recognized efforts to support kin in achieving compliance through the provisional approval process.

Conclusion

Arkansas maintains a comprehensive and equitable system for licensing and monitoring resource homes and residential facilities. Licensing standards are applied equally across all provider types, and robust systems are in place to enforce compliance. Based on policy review, stakeholder feedback, and PRLU oversight data, **Item 33 is rated as a Strength**.

Item 34: Requirements for Criminal Background Checks

Summary of State Performance

Arkansas complies with federal and state requirements for criminal background checks as outlined in the Child Welfare Agency Licensing Act (A.C.A. § 9-28-409). DCFS maintains strong systems to ensure that all resource homes undergo background clearances. However, while the foundational systems are in place and largely functioning, stakeholder feedback and internal review indicate inconsistencies in monitoring and documentation. As such, Arkansas assesses **Item 34 as an Area Needing Improvement**.

Compliance with Federal Requirements

DCFS policy requires that all resource parents, as well as appropriate household members complete the following background checks prior to full approval of a home:

- Arkansas Child Maltreatment Central Registry for all household members age 14 and older
- Arkansas State Police Criminal Record Check for all household members age 18 and older
- FBI Criminal Background Check for all household members age 18 and older who have not lived in Arkansas for the past five years

Implementation in Resource Homes

Background checks are initiated and are part of the full resource home approval process. For provisional homes, minimum safety clearances must be received before a child is placed. The full set of background checks must be completed before a home can be fully approved.

The DCFS information management system tracks the due dates for background checks and sends notifications to resource staff two months prior to expiration. If a check becomes overdue, the home is immediately marked out of compliance and flagged for follow up.

For newly eligible household members (such as those turning 14 or 18), staff are expected to initiate checks immediately upon reaching the required age. Delays in requesting these checks or processing results can interfere with timely home approval or reevaluation.

Policy and Administrative Review Processes

The CWARB has authority to review and determine whether a household member with a substantiated maltreatment report or criminal history may remain in the home. Requests for policy waivers or alternative compliance are made through DCFS's established process when the offense does not automatically disqualify the applicant. Factors considered include the nature of the offense, the time elapsed, rehabilitation efforts, and relevance to the child's safety.

DCFS Policy VII-K also outlines the process for reassessing resource homes following allegations of child maltreatment. When a Priority I or II allegation is substantiated or upheld on appeal, the home must be re-evaluated before any additional placements occur. In certain cases, DCFS may seek a waiver or alternative compliance to keep the home open if doing so serves the best interest of a child already placed.

Monitoring and Systems Reports

DCFS uses reports from the Division information management system and SafeMeasures to monitor compliance with background checks timelines. Supervisors and resource staff can track when checks are due and ensure they are completed on time. These tools support statewide consistency and accountability.

DCFS Procedure VII-C delineates the Division's processes for handling background checks.

The tables denote the total number of criminal background checks processed by the DCFS Backgrounds Unit during the past three fiscal years, including requests, results, and the number of hits for each type.

Rejected signifies that a background check has been requested with insufficient information to process the initial check.

DCFS Background Checks Processed

***July 1, 2022 – June 30, 2023**

Type	Requests	Results	Hits
State Criminal	514	513	33
FBI Criminal	4990	3177	601
Provisional	3668	3231	383
Court-Ordered	31	27	5
ICPC	126	112	18
Rejected	8286	--	--
Totals	13,147	10,202	1218

DCFS Background Checks Processed

***July 1, 2021 – June 30, 2022**

Type	Requests	Results	Hits
State Criminal	1992	1761	114
FBI Criminal	4975	3080	602
Provisional	4318	4022	468
Type	**Requests**	**Results**	**Hits**
Court-Ordered	31	29	10
ICPC	156	150	8
Rejected	13,091	--	--
Totals	**14,644**	**11,956**	**1338**

DCFS Background Checks Processed

***July 1, 2023 – June 30, 2024**

Type	Requests	Results	Hits
State Criminal	2162	2146	172
FBI Criminal	4401	2712	625
Provisional	2561	2529	381
Court-Ordered	15	11	2
ICPC	160	158	15
Rejected	9553	--	--
Totals	**11,009**	**9,173**	**1405**

Figures 48-50: DCFS Background Checks Processed SFYs '22, '23, and '24

The "Open Foster Home Eligibility Summary and Detail" report on CHRIS Net also assists Resource Workers, supervisors and management in monitoring the criminal background check requirement for DCFS providers. This report summarizes by county the number of resource homes by Eligible

and Not Eligible Status, and staff can drill down to individual providers to get more detailed information regarding providers who are Non-IVE-Eligible, including the specific reason why providers are not currently eligible

Background check compliance for service providers can be monitored through the Provider Invoice Entry (PIE) system as shown below:

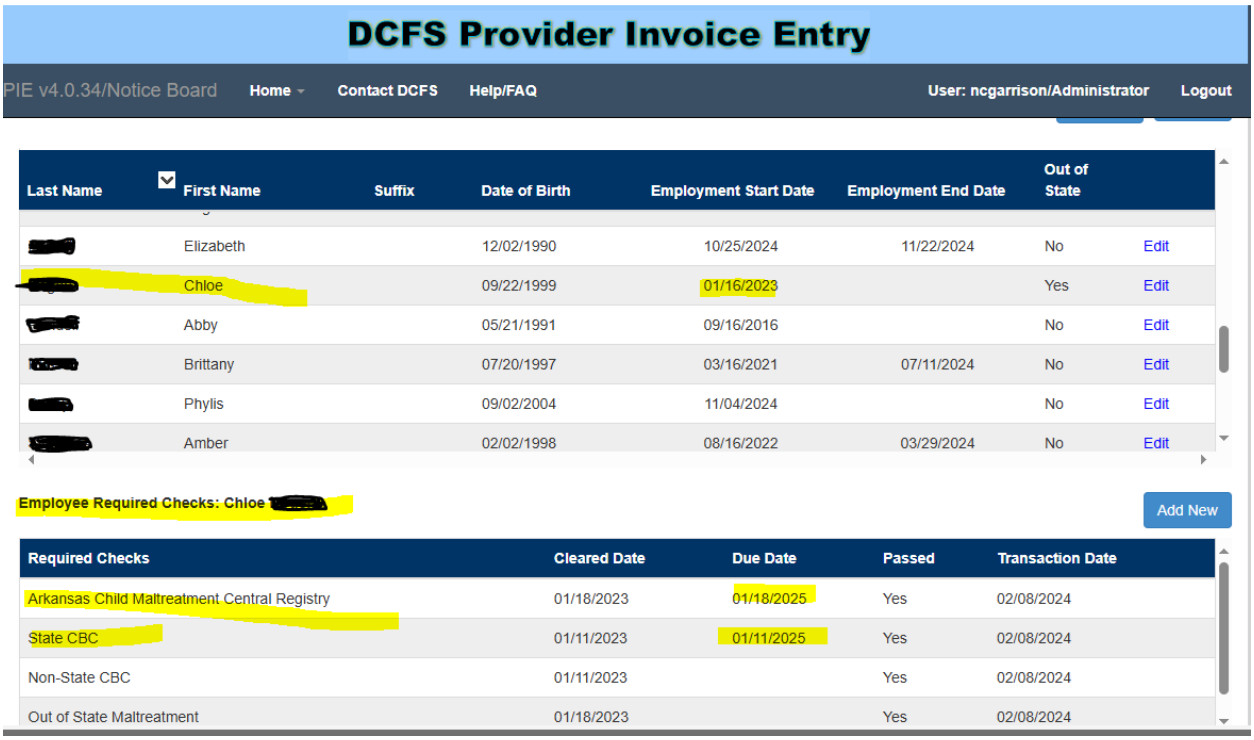


Figure 51: DCFS Provider Invoice Entry

Conclusion

While Arkansas has policies and systems in place to meet background check requirements for resource homes, challenges remain with consistent application, timely processing, and system level monitoring. As a result, **Item 34 is rated as an Area Needing Improvement**. DCFS is working to strengthen internal tracking tools, reinforce staff training, and reduce delays in processing to ensure children are only placed in safe, clear homes.

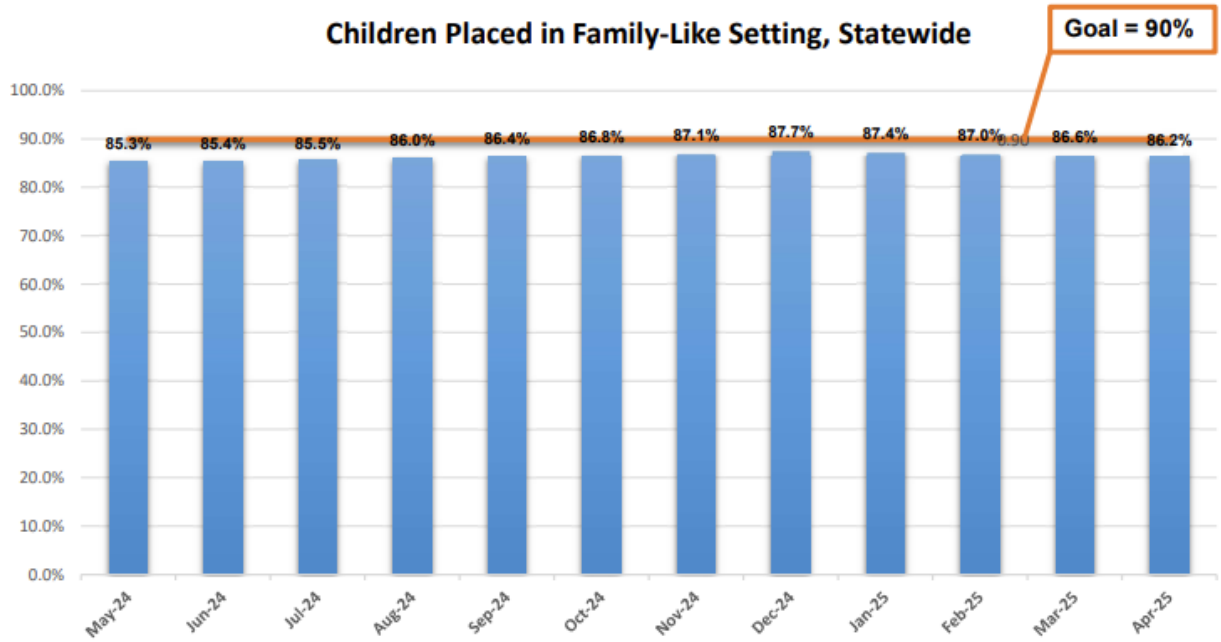
Item 35: Diligent Recruitment of Resource Homes

Summary of State Performance

Item 35 is rated as a Strength. The 2025-2029 CFSP, Targeted Plan 1: Resource Home Diligent Recruitment Plan, provides a summary of DCFS' efforts to recruit, support and retain quality resource families to care for children and youth within the foster care system. Item 35 on pages 107-113 of the CFSP offers a comprehensive overview of Arkansas' strategies to recruit and support these families.

The number of children experiencing foster care in Arkansas has been steadily declining over the past three years; however, there are still not enough resource homes to meet the needs of children with complex behaviors, large sibling groups, and older youth. In SFY 2024, there were 3,553 children in the State's custody. There were 2,670 beds in roughly 1,369 homes licensed to accept children in care, equaling only 0.75 resource home beds per child across the state (visual representations can be located in Arkansas's 2025-2029 CFSR Attachment #2: Annual Report Card SFY '24).

The shortage of placement resources is not a new phenomenon in Arkansas, but the increased attention on kinship placement has resulted in 86.2% of children being placed in family-like settings in Arkansas. The chart below shows placement of children with kin (relatives and fictive kin) in 35-39% of all placements statewide.



***The chart above represents the percentage of children residing in a family-like setting at the end of each month.**

****Family-Like Settings include both family-like homes (e.g., foster family homes, relative placements, pre-adoptive homes, therapeutic foster homes) and family-like residential facilities (i.e., home-like residential settings with live-in house parents).***

Figure 52: DCFS State, Area, and County Profiles April '25

Despite challenges in recruiting and retaining enough non-kin resource homes, Arkansas is committed to creating permanent, lasting placements. The Division emphasizes kinship placement as a first option when possible, and when not, aims to match children with resource families that align with their needs and characteristics.

Arkansas' innovative collaboration with non-profits and state agencies supports this goal. A unique partnership with The Contingent has been developed to localize and adapt their recruitment model for Arkansas. This includes:

- Air game: Microtargeted digital marketing to families whose profiles match successful resource parents.
- Ground Game: Leveraging healthcare, education, and business partners as recruitment networks.

This collaboration, known as Every Child Arkansas (ECA), focuses on educational opportunities, recruitment, retention, support services, and leveraging community resources. A statewide assessment conducted by ECA identified high-need areas for recruitment, including Hispanic families, families of color, families open to large sibling groups, and families open to high-needs children.

3/1/23-11/4/24									
State/ County	Total Foster Inquiries since 3/1/23	Assigned to Partners	ECA-Earned (Assigned)	Partner-Earned (Assigned)	Hispanic (Assigned)	Black/African-American (Assigned)	Willing to Foster Siblings of 2 or more?	Willing to serve Children with Higher Needs	Licensed
Arkansas									
Pulaski County, Arkansas	547	176	135	41	7	116	35	118	18
Sebastian County, Arkansas	103	33	26	7	6	3	5	27	6
Washington County, Arkansas	134	48	34	14	4	3	7	29	6
Miller County, Arkansas	30	11	6	5	0	2	2	10	2
Greene County, Arkansas	68	17	7	10	2	4	0	11	2
Crittenden County, Arkansas	41	10	9	1	0	8	0	8	2
Statewide	2539	906	629	277	44	294	187	662	134

Figure 53: Every Child Arkansas Recruitment Tables

More information regarding Every Child Arkansas's implementation is available:

- Pages 3-18 of Arkansas's 2025-2029 CFSP, Targeted Plan 1: Resource Home Diligent Recruitment Plan

Adoptions: SFY 2024

During SFY 2024, 699 adoptions were finalized. The average length of time from entry into foster care until finalization of adoption for children whose adoptions were finalized during the fourth quarter of SFY 2024 was 12.0 months, this is .4 months sooner than the national standard of 12.4 months. Children ages 2 to 5 represented the largest group (39%) of children who were adopted during the fourth quarter of SFY 2024.

Race/Ethnicity of Children in Foster Care		
Race / Ethnicity	N	%
WHITE	1550	44.3
BLACK	662	18.9
MULTIPLE	911	26.0
HISPANIC	324	9.3
AIAN	7	.20
ASIAN	9	.26
NAPI	7	.20
UTD	28	.80
TOTALS	3499	100.0

*Data current as of 10/10/2024

Ages of Children in Foster Care		
Age Category	N	%
0 to 1	484	13.8
2 to 5	725	20.7
6 to 8	432	12.3
9 to 10	259	7.4
11 to 12	297	8.5
13 to 14	292	8.4
15 to 17	648	18.5
Older than 18	362	10.4
Totals	3499	100.0

*Data current as of 10/10/2024

Figure 54: DCFS Data, Children Experiencing Foster Care

At the end of SFY 2024, 263 children were available for adoption. Children available for adoption are defined as those who have a termination of parental rights on both parents and a goal of adoption. Of the available children, 46 percent were white, and 12 percent were black, while 34% were identified as multiracial. Children ages ten and older made up 67% of the children available for adoption. The charts below present visual representations of this data taking from Arkansas's 2025-2029 CFSR Attachment #2: Annual Report Card SFY '24.

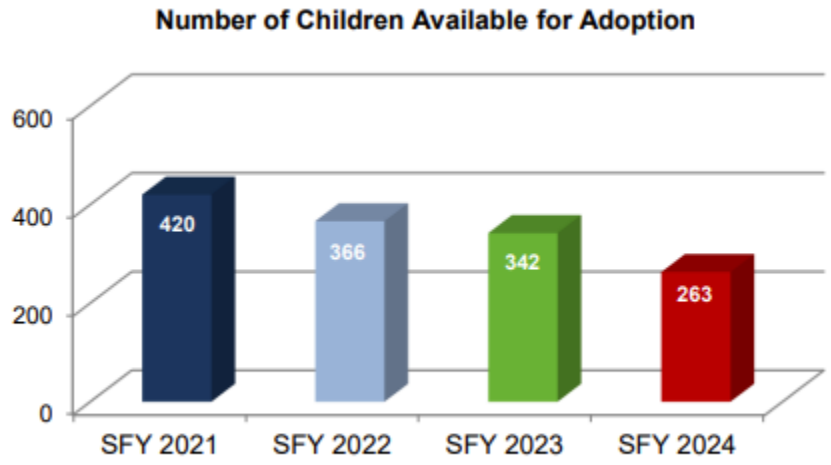


Figure 55: Number of Children Available for Adoption, Arkansas's Annual Report Card, SFY '24

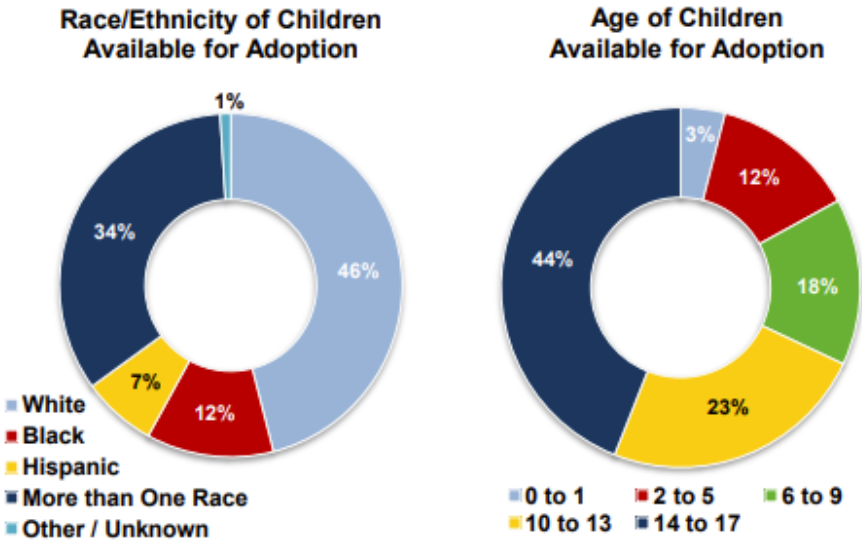


Figure 56: Demographics of Children Available for Adoption, Arkansas's Annual Report Card, SFY '24

As of December 31st, 2024, there were 2,444 resource parents documented.

Ethnicity of Resource Parents			Age of Resource Parents		
Ethnicity	N	%	Age Category	N	%
White	1628	66.1	20-29	238	9.74
Black	691	28.27	30-39	603	24.67
Hispanic	85	3.48	40-49	646	26.43
Multiple	22	.90	50-59	494	20.21
Asian	4	.16	60-69	356	14.57
AIAN	11	.45	70 or older	107	4.38
NAPI	3	.12			
UTD	0	0			
TOTALS	2444	100.00	Totals	2444	100

Figure 57: Demographics of Resource Parents

Conclusion

While Arkansas continues to face a shortage of resource families, there are strong signs that current recruitment efforts, especially through Every Child Arkansas, are positioned to yield growth in the near future. The resource parent licensing and retention system is functioning well enough to support continued recruitment and expansion efforts. **Arkansas rates Item 35, Diligent Recruitment of Resource Homes, as a Strength**.

Item 36: State Use of Cross Jurisdictional Resources for Permanent Placements

State Assessment of Performance

Item 36 is rated as a Strength. Arkansas's Interstate Compact Placement of Children (ICPC) Unit plays an important role in facilitating cross jurisdictional resource placements, adoptions, and family reunifications. The ICPC process ensures that when a child requires placement outside of Arkansas, DCFS can coordinate with another state's ICPC office to request and complete necessary home studies. Likewise, Arkansas receives requests from other states via the National Electronic Interstate Compact Enterprise (NIECE) system.

Family Service Workers (FSWs) collaborate with Area ICPC liaisons to communicate directly with out of state ICPC offices. Upon receiving a home study request from another state, Arkansas's ICPC Unit ensures the placement is not contrary to the child's best interest. This mirrors in state placement approval procedures including child maltreatment registry checks, criminal background checks with state police and FBI, and a SAFE home study evaluation.

A recommendation is issued by the FSW Supervisor or Area Director, for or against the placement while the Adoption Manager authorizes adoption home studies. A placement approval (ICPC-100A) is completed and sent to the sending state as notification that a home meets applicable standards, and the child or children may be placed in the home.

Once a child is placed in Arkansas, the state ensures supervision, services, and quarterly progress reports are submitted to the sending state. These reports document visit frequency, topics discussed, and the child's strengths and needs.

Arkansas utilizes ICPC to request other states evaluation and approval of relatives and fictive kin for placement of children experiencing foster care in Arkansas. The charts below represent the utilization of ICPC for this purpose over the past three fiscal years. All data below was obtained from the NEICE system.

Placement Requests	Case Count SFY '22	Case Count SFY '23	Case Count SFY '24
Completed	9	50	70
Pending	1	2	21
Overdue	10	11	29
Adoptive Home	1	6	18

Children Placed Out of State	Count SFY '22	Count SFY '23	Count SFY '24
Area 1	11	6	8
Area 2	15	20	16
Area 3	1	2	1
Area 4	7	9	8
Area 5	16	8	5
Area 6	19	7	7
Area 7	2	1	7
Area 8	10	9	9
Area 9	19	6	7
Area 10	1	2	1
Central	7	14	8

Figures 58 and 59: ICPC Requests

Arkansas uses the ICPC process to request adoptive home studies as an option for recruitment of permanent relative placements for children experiencing foster care. In December 2024, Arkansas had 30 active requests for adoptive studies in various states, to include Colorado, Missouri, Indiana, Oklahoma, Louisiana, Florida, Vermont, Minnesota, Illinois, Mississippi, Ohio, and California.

While Arkansas is doing well utilizing ICPC as a means to obtain permanency for children experiencing foster care, Arkansas's ability to complete home study requests for other states timely fluctuates with the number of requests, the priority of the requests, and the turnover rate for the Division at the time as seen in the figures below.

ICPC Requests Meeting Safe and Timely Requirement : Regulation 1 - Intact Family Relocation (60 calendar days)

Arkansas (Receiving)

Filters:
Year Type: Calendar Year **Case Type(s):** All **Regulation Type(s):** IntactRelocation **Placement Type(s):** All

State Data				National Data		
	2023	2024	2025	2023	2024	2025
Number of requests with determination response meeting Safe and Timely	0	0	0	92	57	35
Percentage of requests with determination response meeting Safe and Timely	0%	0%	0%	24%	18%	53%
Median days to determination response	169	137	100	139	130	56.5
Number of requests with determination response	5	10	2	385	317	66
Number of requests with determination response exceeding Safe and Timely	5	10	2	293	260	31

Figure 60: ICPC Requests Regulation 1

ICPC Requests Meeting Safe and Timely Requirement : Regulation 2 - Home Study Requests (60 calendar days)

Arkansas (Receiving)

Filters:
Year Type: Calendar Year **Case Type(s):** All **Regulation Type(s):** HomeStudy **Placement Type(s):** All

State Data				National Data		
	2023	2024	2025	2023	2024	2025
Number of requests with determination response meeting Safe and Timely	84	89	46	5407	6225	3120
Percentage of requests with determination response meeting Safe and Timely	32%	36%	61%	37%	40%	67%
Median days to determination response	90	86	36	79	72	46
Number of requests with determination response	262	247	75	14639	15510	4683
Number of requests with determination response exceeding Safe and Timely	178	158	29	9232	9285	1563

Figure 61: ICPC Requests Regulation 2

ICPC Requests Meeting Timeline for Placement Decision : Regulation 4 - Residential Placement Requests (3 business days)

Arkansas (Receiving)

Filters:

Year Type: Calendar Year **Case Type(s):** All **Regulation Type(s):** ResidentialPlacement **Placement Type(s):** All

	State Data			National Data		
	2023	2024	2025	2023	2024	2025
Number of requests meeting placement decision timeline	362	437	267	5965	6492	3856
Percentage of requests meeting placement decision timeline	99%	99%	98%	93%	88%	89%
Median days to placement decision	1	1	1	1	1	1
Number of requests with placement decision	364	440	272	6410	7339	4323
Number of requests exceeding placement decision timeline	2	3	5	445	847	467

Figure 62: ICPC Requests Regulation 4

ICPC Requests Meeting Timeline for Placement Decision : Regulation 7 - Priority Placement Requests (20 business days)

Arkansas (Receiving)

Filters:

Year Type: Calendar Year **Case Type(s):** All **Regulation Type(s):** PriorityPlacement **Placement Type(s):** All

	State Data			National Data		
	2023	2024	2025	2023	2024	2025
Number of requests meeting placement decision timeline	4	10	2	472	493	271
Percentage of requests meeting placement decision timeline	9%	26%	20%	27%	28%	39%
Median days to placement decision	49	43	32.5	33	32	23
Number of requests with placement decision	43	39	10	1734	1769	689
Number of requests exceeding placement decision timeline	39	29	8	1262	1276	418

Figure 63: ICPC Requests Regulation 7

Stakeholder Input

Stakeholders reported strong cross-jurisdictional coordination with Arkansas' child welfare system, with a focus on early identification and placement of children with relatives and fictive

kin. Several tools were noted, including Clear and Seneca Searches, Genograms, and searches through Division of County Operations (DCO).

While some stakeholders reported delays with certain out of state ICOC responses, most confirmed appropriate use of ICPC and successful placement follow through. Feedback also emphasized:

- Continued tribal engagement for children with tribal ancestry
- Monitoring and advocacy when tribes are contacted
- Assistance in maintaining cultural and family connections

Stakeholders unanimously agreed that Arkansas's system is "doing really well" in locating permanent placement resources, beginning the first date of removal, and coordinating across judicial and child welfare systems to achieve permanency.

Conclusion

Arkansas has strong ICPC related policies and procedures, supported by both quantitative and qualitative data demonstrating successful use of ICPC to develop permanency for children experiencing foster care in Arkansas. The state demonstrates:

- A steady decline in the number of children awaiting adoption
- Strong use of cross jurisdictional tools for permanent placement
- Effective collaboration with other states and tribal entities

Item 36 is assessed to be a Strength.

APPENDIXES

Appendix: CFSR State Data Profile

The State Data Profile is available from the state or the Children's Bureau upon request.