

# Fact Sheet

for MENTAL HEALTH PROFESSIONALS

## HISTORY of the CFRs

The 1994 Amendments to the Social Security Act authorize the U.S. Department of Health and Human Services to review state child and family service programs to ensure conformity with the requirements in titles IV-B and IV-E of the Social Security Act. The Children's Bureau, part of the Department of Health and Human Services, administers the review system, known as the Child and Family Services Reviews.

In 2000, the Children's Bureau published a final rule in the Federal Register to establish a process for monitoring state child welfare programs. Under the rule, states are assessed for substantial conformity with federal requirements for child welfare services.

All 50 states, the District of Columbia, and Puerto Rico completed their first review by 2004 and their second review by 2010. After each review cycle, or "round," no state was found to be in substantial conformity in all of the seven outcome areas and seven systemic factors. States developed and implemented Program Improvement Plans after each review to correct those areas not found in substantial conformity.

The third round of reviews runs from 2015 to 2018.



## PURPOSE

The Child and Family Services Reviews enable the Children's Bureau to: (1) ensure conformity with federal child welfare requirements; (2) determine what is actually happening to children and families as they are engaged in child welfare services; and (3) assist states in enhancing their capacity to help children and families achieve positive outcomes.

The reviews are structured to help states identify strengths and areas needing improvement within their agencies and programs. Ultimately, the goal of the reviews is to help states improve child welfare services and achieve the following seven outcomes for families and children who receive services:

### Safety

- Children are, first and foremost, protected from abuse and neglect.
- Children are safely maintained in their homes whenever possible and appropriate.

### Permanency

- Children have permanency and stability in their living situations.
- The continuity of family relationships and connections is preserved for families.

### Family and Child Well-Being

- Families have enhanced capacity to provide for their children's needs.
- Children receive appropriate services to meet their educational needs.
- Children receive adequate services to meet their physical and mental health needs.



The reviews also assess the following seven systemic factors that affect outcomes for children and families:

- statewide information system
- case review system
- quality assurance system
- staff and provider training
- service array and resource development
- agency responsiveness to the community
- foster and adoptive parent licensing, recruitment, and retention

## MENTAL HEALTH *and the* REVIEWS

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States work with a variety of systems, including mental health agencies, to ensure positive outcomes for children. In addition to using the Child and Family Services Reviews as a learning tool, mental health representatives may participate directly in the review process in a variety of ways, such as participating as a consultant on a review team to help review cases and conduct interviews; serving on statewide assessment or Program Improvement Plan development teams; or being interviewed during stakeholder interviews conducted for each review. Representatives may include persons from the state health program, Medicaid program, mental health agency, or mental health treatment providers.

The reviews assess state efforts to address the mental/behavioral health needs of children through exploration of questions such as:

- Did the agency conduct an assessment of the children’s mental/behavioral health needs initially and on an ongoing basis to inform case planning decisions?
- Did the agency provide appropriate services to address the children’s mental/behavioral health needs?
- How well is the service array and resource development system functioning to ensure that services are accessible in all jurisdictions that assess and address child and family needs for a safe home environment, enable children to remain safely with their parents, and help children achieve permanency?
- How well is the service array and resource development system functioning statewide to ensure that such services can be individualized to meet child and family needs?

## FINDINGS FROM *the* CFSRs

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During the first two rounds of the reviews, only a few states received a Strength rating for assessing and addressing the mental and behavioral health needs of children. The reviews noted states’ challenges in meeting the mental health needs of children in care in the following areas:

- **Access to services.** Many states lacked sufficient, appropriate mental health services for children who needed them. The reviews also found a lack of substance abuse treatment (for parents and children) and domestic violence services in many states.
- **Rural areas.** Many states lacked mental health service providers in rural areas.
- **Budget deficits.** Many states had difficulty providing appropriate services because of budget constraints.
- **Collaboration.** While most states engaged in collaboration, many described service coordination as problematic and difficult.
- **Foster care/in-home services.** The mental/behavioral health needs of children in foster care were more consistently assessed and addressed than were those of children receiving in-home services.
- **Juvenile justice cases.** Cases involving children whose primary reason for agency involvement was “child in the juvenile justice system” were more often rated as having their mental/behavioral health needs assessed compared to cases involving children with other reasons for agency involvement.
- **Children/youth.** Children’s mental/behavioral health needs were rated as more consistently assessed than were those of Youth. (Children were defined as age 15 years and younger; “Youth” were defined as age 16 years and older.)

States have addressed such challenges in a variety of ways, including:

- Developing screening and assessment instruments
- Building service arrays to address deficits in certain types of services and specific regions
- Training child welfare staff and foster parents on mental health issues
- Monitoring mental/behavioral health services and child and family outcomes
- Collaborating across agencies to achieve improved service delivery
- Replicating systems of care

## MORE INFORMATION

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More information on the findings from the first two rounds of reviews with regard to mental health services is available from the National Technical Assistance Center for Children's Mental Health at <http://gucchdtacenter.georgetown.edu>. The following publication is especially useful in describing mental health concerns in the context of the Child and Family Services Reviews:

- "An Analysis of Mental Health Issues in States' Child and Family Services Reviews and Program Improvement Plans," available at <http://gucchd.georgetown.edu/72371.html>.

Mental health professionals can learn about the review process by becoming familiar with the outcomes of their state's last review. State Final Reports, which include detailed findings for mental health services for each state, are available on the Child Welfare Monitoring section of the Children's Bureau website at <http://www.acf.hhs.gov/programs/cb/monitoring/child-family-services-reviews>.

Additional information on the reviews is available on the Children's Bureau's website at <http://www.acf.hhs.gov/programs/cb/monitoring/child-family-services-reviews> or from the Child Welfare Reviews Project, JBS International, Inc., 5515 Security Lane, Suite 800, North Bethesda, MD 20852; 301-565-3260; e-mail: [cw@jbsinternational.com](mailto:cw@jbsinternational.com). Round 3 resources are available at <https://training.cfsrportal.org/resources/3105>.



