

Department of Health and Human Services
Division of Child and Family Services
FY2007-09 Budget Overview



Presented To:
The Legislative Commission
Budget Subcommittee
January 24, 2007

Budget Overview

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Mission

The Nevada Division of Child and Family Services (DCFS), together in genuine partnership with families, communities and other governmental agencies, provides support and services to assist Nevada's children and families in reaching their full human potential. DCFS recognizes that Nevada's families are our future and children, youth and families thrive when they:

- Live in safe, permanent settings
- Experience a sense of sustainable emotional and physical well being
- Receive support to consistently make positive choices for family and the common good

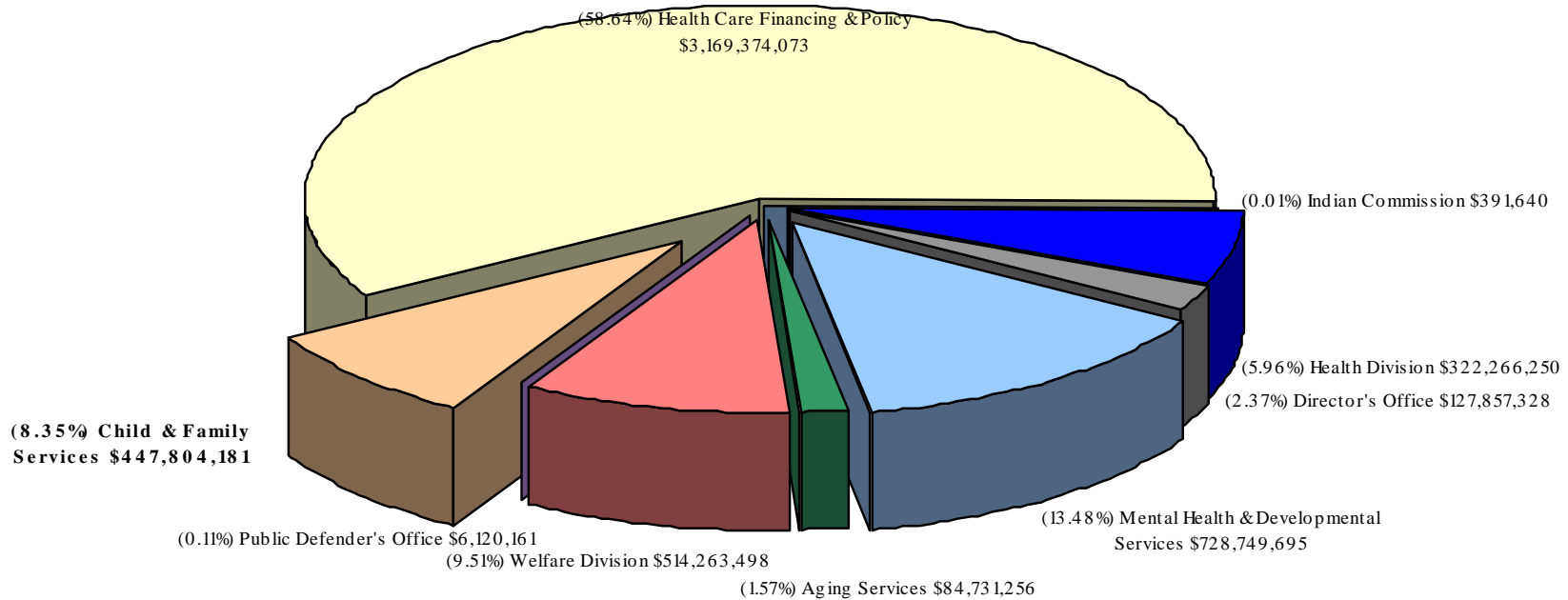
Purpose/Program Areas

DCFS, created by legislation in 1991, is responsible for child protective and welfare service delivery in rural Nevada and oversight of urban county-operated child protective and welfare services, children's mental/behavioral health treatment and residential services (outpatient and inpatient acute) in urban Nevada, and statewide juvenile justice services including state-operated youth training centers and youth parole. A non-exhaustive list of DCFS' program areas includes:

- Children's Mental/Behavioral Health Services: screenings and evaluations, early childhood services, outpatient therapy, Wraparound case management, residential and inpatient/acute treatment services.
- Preservation, Child Protection and Permanency Services: clinical and case management services and programs that respond to caregiver maltreatment/abuse of children and children's need to achieve permanency such as intensive family preservation services, foster care, adoption services and independent living services.
- Juvenile Justice Services: facilities that balance youth rehabilitation, treatment and community safety; youth commitment to state-operated juvenile facilities with behavioral health services and supervision of youth upon release to their communities (parole).

Budget Summary

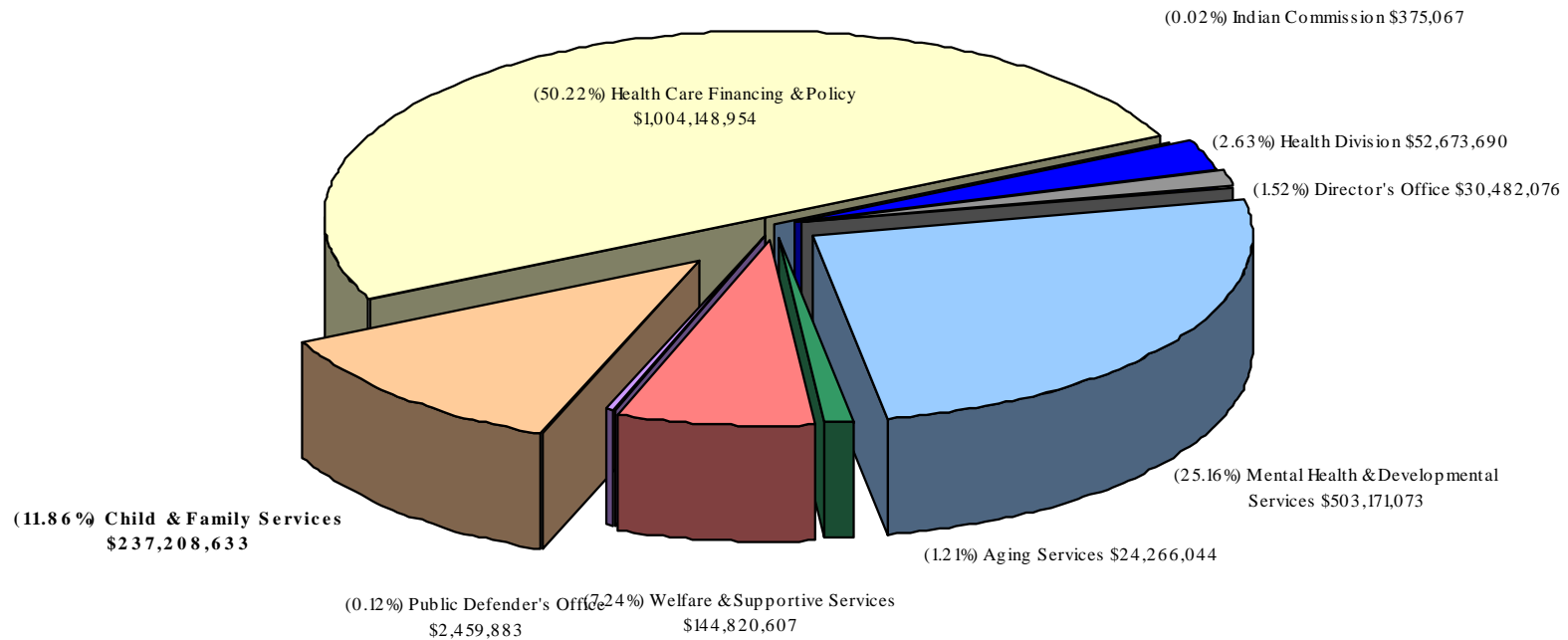
Division of Child and Family Services Revenues By Division 2008-2009 Biennium



Total \$5,405,107,687

Budget Summary

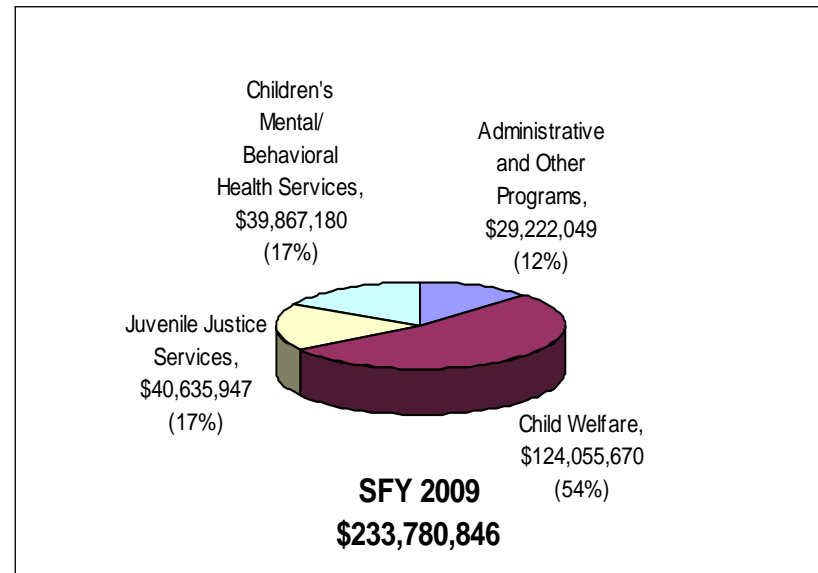
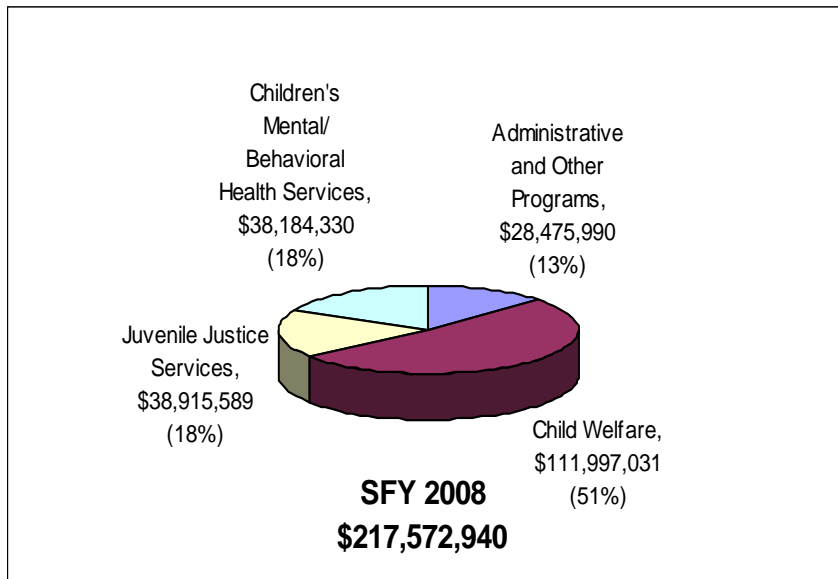
Division of Child and Family Services General Funds By Division 2008-2009 Biennium



Total \$1,999,606,027

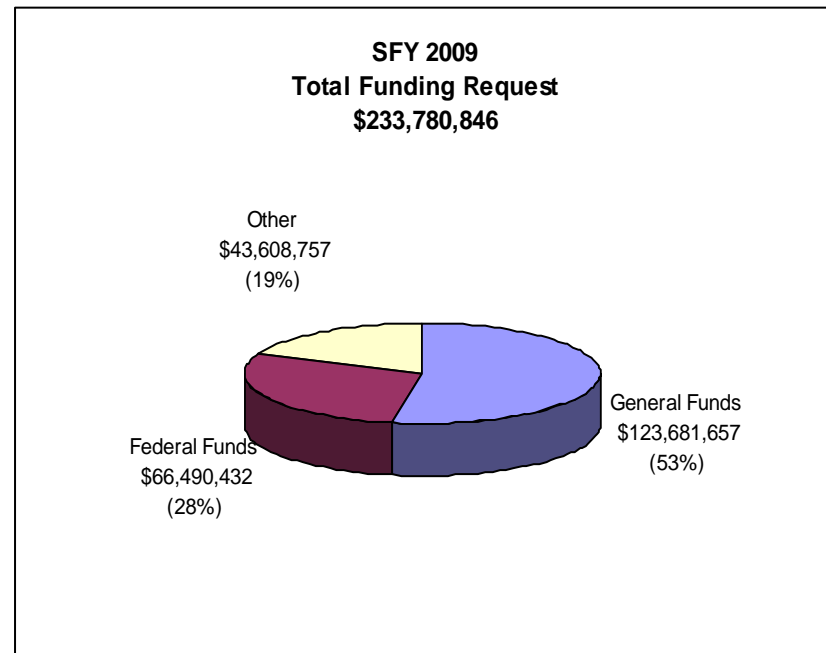
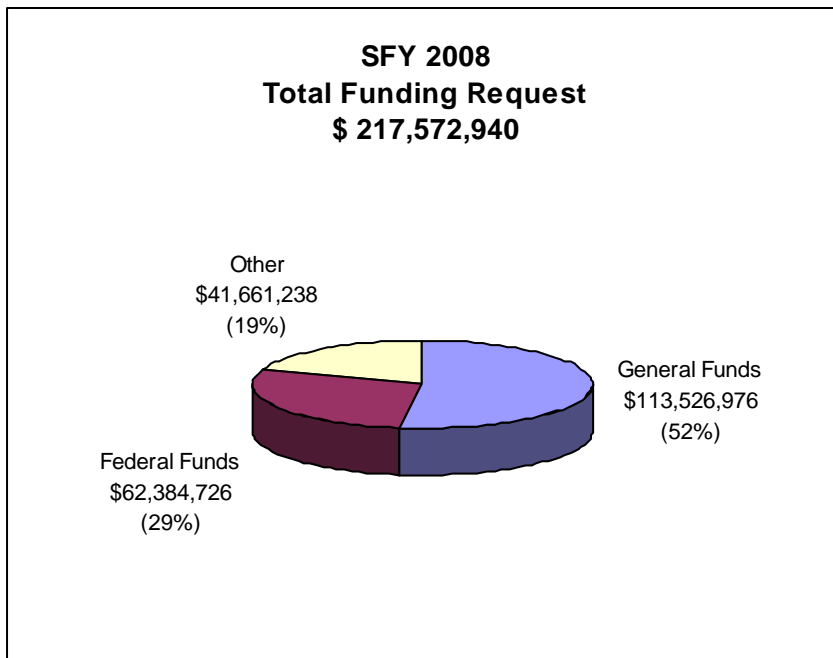
Budget Summary

The DCFS budget request for the 2007-2009 Biennium budget totals \$ 451,353,786 and includes 1,058.15 full-time equivalent positions. The program spending is broken down as follows:



Budget Summary

The Division's overall funding is broken down as follows :



Improvement Strategies

- Increasing Nevadan's Access to Services
- Staffing Appropriately to Meet Federal Outcomes and National Standards
- Enhancing Organizational/Professional Competence and Safety

Increasing Nevadan's Access to Services

Oasis On-Campus Treatment Homes Expansion to Serve Youth with Severe Emotional Disturbances

Oasis On-Campus Treatment Homes provide an intensive, highly structured treatment program for youth with severe emotional disturbances ages 6-18 years. Currently, the program has a service capacity of 17.

At the September 12th meeting of the Interim Finance Committee, the Committee approved DCFS' request to expand the Oasis On-Campus Treatment Homes with the opening of two additional homes to serve a total of 10 children/youth with severe emotional disturbances and developmental disabilities. The population of children with these dual diagnoses is increasing in Nevada. A review of youth served by county and State child welfare agencies, DCFS children's mental health, MHDS rural mental health and MHDS developmental services in the month of February 2006 documented 292 youth statewide who were diagnosed with both a severe emotional disturbance and a developmental disability or suspected by professionals of having dual diagnoses. Of these children, 192 were from Clark County. There is no existing facility in Nevada which provides a range of services that meets the needs of youth with dual diagnoses in a semi secure facility. The homes will provide 24 hour intensive supervision of treatment. This request included staffing, furnishings and with clinical oversight by a multidisciplinary team of specialists, training resources to implement a new service delivery model and open two additional homes. Existing state owned physical facilities will be utilized. Total new staff positions requested was 18.5 FTE.

The DCFS budget recommends continued support of this expansion.

Increasing Nevadan's Access to Services

Foster Care Rate Increase

The DCFS budget recommends additional funding to increase the daily foster care rate from an average of \$21 per day to a flat rate of \$24 per day in SFY2008 and \$28 per day in SFY2009.

The current foster care payment is not adequate to cover children's basic expenses. The monthly foster care payment for a 9-year-old child is \$591.69. The average middle-class family spends about \$854 per month on a child of the same age, according to the U.S. Department of Agriculture (Expenditures on Children by Families, 2005).

With the onset of the methamphetamine epidemic, the number of children in foster care has significantly increased statewide over the past few years, while the number of available foster care homes in Rural Nevada and Clark County has declined. Currently, DCFS closes almost as many foster homes each year as it licenses and Clark County has estimated that they will need to recruit and train an additional 450 foster homes to meet their current caseloads.

With the transition of the child welfare programs to Washoe County in January 2003, the County made a policy decision to pay all family foster homes \$30 per day, even though the State only reimbursed the County \$21 per day. This has allowed Washoe County to develop and maintain better system capacity. In February 2003, Washoe County had an available licensed bed capacity of 780, on August 15th that capacity was 1,240 beds, which represents an increased capacity of 59%.

Increasing Nevadan's Access to Services

Northern Nevada Child & Adolescent Service Early Childhood Mental Health Services and Outpatient Services Intake Coordinators

Early Childhood Mental Health Services and Outpatient Services provide assessment, care coordination and an array of outpatient therapies for emotionally disturbed children/youth from birth through 18 years of age and their families. Currently there is no staff dedicated to responding to inquiries, requests for services and crises. The Washoe County Children's Mental Health Consortium recommends the creation of intake coordinators to better serve children, families and the community and to develop the system of care.

The DCFS budget request is for dedicated intake coordinators assigned to the two community-based clinics to provide a single point of access for children's mental health services. Services provided to families and community stake holders would include: information and referral, linkage to other community based mental health services, referral to social services, in-person and telephone crisis screenings, triage of requests for DCFS mental health services and conducting intakes for children and families. Total new staff positions recommended is 2.51 FTE.

Increasing Nevadan's Access to Services

Expansion of Northern Nevada Child and Adolescent Service Early Childhood Mental Health Day Treatment Services

Early Childhood Mental Health Services provides an array of assessment, care coordination and therapeutic services to include day treatment. Day treatment provides social, emotional and behavior interventions and skill-building techniques for children ages 4 to 6 years. In Washoe County, only one half-day program is provided and is funded by the Victims of Crime Act grant. This request expands the target population beyond those who are victims of crime and increases the number of children who can be served by adding an additional half-day program. The existing facility would be used. The Washoe County Children's Mental Health Consortium recommends this in their Fifth Annual Plan, July 2006. Washoe County School District will partner by providing transportation for the children.

Total new staff recommended is 1.02 FTE (two.51 FTE).

Increasing Nevadan's Access to Services

Mobile Crisis and Stabilization Services

According to the President's New Freedom Commission of Mental Health Report, July 2003, mobile crisis has proven effective with children in reducing the need for emergency room visits and psychiatric hospitalizations.

The DCFS budget requests supports a new service, Mobile Crisis and Stabilization, to meet a critical gap in children's mental health services as identified in the Clark County Children's Mental Health Consortium in their fifth annual plan, July 2006. The program would provide immediate telephone response, screening and triage and community-based response by a team of mental health professionals for children in mental health crisis and their families 365 days per year from 8am to 12 midnight. The goal is to provide immediate care from qualified mental health professionals to assist with immediate stabilization and short-term intervention linking children to needed ongoing services.

The Mobile Crisis and Stabilization Service would be a contracted service provided by a private provider. Expectations include: Rapid telephone follow-up; phone screening, triage and referral; home-based and community-based crisis intervention including assessment crisis resolution and stabilization; intensive short-term child/adolescent and family treatment up to five sessions per episode to stabilize and connect ongoing services if needed and desired by youth and family; care coordination including linkage with treatment providers and family support; assessment for acute psychiatric care admission and community outreach and education. Currently these children in crisis and families struggle with no services and supports, call law enforcement for psychiatric emergencies and/or end up in hospital emergency rooms from where there are no psychiatric services. It is anticipated that families and communities will perceive this model as highly responsive, will assist with immediate stabilization and short term intervention and, therefore, decrease the number of out-of-home placements and hospitalizations. Eligible children and/or adolescents are all children in the community. Those with private providers and Medicaid HMO's would be referred/linked with their providers for ongoing services. Those with no medical insurance or resources and those having Fee for Service Medicaid would be linked with DCFS or Behavioral Health Community Networks for ongoing services.

Increasing Nevada's Access to Services

Conversion of a Residential Treatment Unit at Desert Willow Treatment Center to Serve Youth with Severe Emotional Disturbances and Co-occurring Substance Abuse Disorders

Desert Willow Treatment Center (DWTC) is a 58 bed in-patient psychiatric facility providing acute psychiatric care (20 beds) and residential treatment care (38 beds) for children/youth with severe emotional disturbances who require secure inpatient care for their treatment and safety.

The DCFS budget requests converting one residential treatment unit, 12 beds, from serving youth with severe emotional disturbances to serving youth with severe emotional disturbances AND co-occurring substance abuse disorders. This service has been identified by stakeholders across the state as a priority unmet need, most particularly by juvenile justice agencies. DWTC treats many youth admitted for both acute psychiatric care and for residential treatment who have dual diagnoses. Currently the facility does not have the staff expertise to treat substance abuse needs of these youth nor the staffing level on a residential unit to ensure the safety of adolescents with co-occurring diagnoses who present a risk to themselves and/or others in the community, therefore, requiring inpatient locked facility treatment.

This decision unit will not increase the number of children served annually but will be providing services to a new targeted group of children. There is not inpatient residential treatment for co-occurring diagnoses SED/SA youth in this state. This has been identified as an unmet need by stakeholders across the state. These youth are remaining for extended periods of time in emergency shelters, juvenile detention facilities, youth correctional facilities and mental health treatment facilities with no treatment for their co-occurring diagnoses. DWTC has already shows its success in caring for specialized needs that are unmet or undermet in other facilities through its specialized program for youth with severe emotional disturbances and sexualized offenses. According to SAMHSA Center for Mental Health Services the prevalence cited most frequently for co-occurrence of substance abuse and mental health disorders in adolescents is about 50% with a range between approximately 20% and 82%; as reported by A. Lezak et al. in "Overcoming Barriers to Serving Our Children in the Community" 2002.

This request is for staffing, training and specialized treatment materials. Total new staff positions recommended is 5 FTE.

Staffing Appropriately to Meet Federal Outcomes and National Standards

Child Death Review positions

The DCFS budget recommends 4 FTE to facilitate prompt response to fatality issues, data analysis, provision of quality improvement activities, compliance analysis, and provision of regular and consistent technical assistance to all jurisdictions related to Child Abuse Prevention and Treatment Act (CAPTA) provisions. Due to a significant statewide increase in the number of child fatalities and near fatalities due to child maltreatment, DCFS has assumed increased oversight responsibility for all jurisdictions on the analysis and strategic planning related to their prevention. DCFS has been placed on a corrective action plan by the federal government related to the State's inability to meet CAPTA provisions. DCFS is now required to conduct reviews of every child fatality that occurs in the State due to abuse and neglect. This is not a function previously conducted by DCFS.

In addition, NRS 432B. 403 – 409 requires DCFS to organize and operate five regional child death multidisciplinary review teams (MDT's), as well as two statewide oversight groups to review child death. The Administrative Team reviews reports and recommendations from the regional MDT's and makes decisions regarding recommendations for improvements to law, policies, and practices. The Executive Committee makes decisions about funding initiatives to prevent child maltreatment and death. The Executive Committee adopts statewide protocols for the review of the death of children, oversees training and development for the regional MDT's, and compiles and distributes a statewide annual report.

Staffing Appropriately to Meet Federal Outcomes and National Standards

Quality Assurance/Quality Improvement

The DCFS budget recommends 4 FTE to help meet increased federally mandated oversight requirements for all public child welfare jurisdictions in the State which includes implementation, coordination and evaluation of the Statewide quality review process, data analysis and statistical reporting, and provision of cross-jurisdictional technical assistance related to quality improvement activities at the field level.

DCFS is currently under a Child Abuse Prevention and Treatment Act corrective action plan in addition to a Program Improvement plan, which require quarterly federal reporting by staff, specific to quality improvement.

Staffing Appropriately to Meet Federal Outcomes and National Standards

Interstate Compact on the Placement of Children

With the passage of the Safe and Timely Interstate Placement of Foster Children Act of 2006 (H.R. 5403), Congress revised the Interstate Compact on the Placement of Children (ICPC).

Some of the key provisions of the Safe and Timely Interstate Placement of Foster Children Act are as follows

- Home Study Time Limits: A new section was added to the Title IV-E state plan for foster care and adoption assistance to require states to conduct, complete, and report the results of a home study (directly or by contract) within 60 days of a request. There is a provision allowing an additional 15 days to complete the home study if a state can document that circumstances beyond state control were involved; however, these additional days apply to home studies begun on or before September 30, 2006. Sending states will have 14 days to determine if placement is appropriate based on the home study report.
- Caseworker Visits: A new requirement that on-going visitation occur at least every six months (instead of every 12 months) if interstate cases are included.
- Case Reviews: The legislation includes provisions to require the consideration of interstate placements at all appropriate points (i.e. permanency hearing, concurrent planning, etc.).
- Health and Education Records: The bill requires states to provide foster children aging out of the system with a copy of their health and education records free of charge.
- Court Related Provisions: Language is amended to give foster parents, pre-adoptive parents, or relative caregivers a right (rather than just an opportunity) to be heard at proceedings held in reference to the child. Courts are also required to notify foster parents, pre-adoptive parents or relative caregivers of any court proceedings held in reference to the child.

The legislation also requires courts in different states to cooperate in information sharing; authorizes courts to obtain information and testimony from agencies and parties in other states without requiring interstate travel; and permits necessary parties to participate in interstate placement cases without requiring interstate travel.

Implementation: The amendments in this legislation apply to payments made under IV-B and IV-E beginning on October 1, 2006, regardless of whether regulations to implement the amendments have been promulgated by then.

The DCFS budget recommends 2 FTE in Budget Account 3145 (Children and Family Services Administration), 1 FTE in Budget Account 3142 (Clark County Integration) and 1 FTE in Budget Account 3141 (Washoe County Integration) to support these new requirements.

Staffing Appropriately to Meet Federal Outcomes and National Standards

Interstate Compact on Juveniles

The Interstate Compact on Juveniles (ICJ) was established in 1955 primarily to develop cooperative procedures for out-of-state supervision of juveniles and provides procedures for their return. In 2003, the ICJ was amended based upon recommendations gathered through national surveys and a detailed study by a task force appointed by the Office of Juvenile Justice and Delinquency Prevention. The new compact retains cooperation among states in tracking and supervising juveniles who move across state borders. In addition, it establishes an Interstate Commission to administer the compact, create policies and rules, enforce compliance and institute a mandatory funding mechanism. The compact will become binding after 35 jurisdictions have legislatively enacted it into law.

The 2005 Legislature approved Senate Bill 43, which repealed the current ICJ and adopted a new compact in its place. This bill also created the Nevada State Council on Interstate Juvenile Supervision, which has policymaking and oversight authority concerning operation of the compact in Nevada. This bill becomes effective upon enactment of the ICJ into law by the 35th jurisdiction. As of July 13, 2006, it has been adopted in 30 States, passed one chamber in two states, and is under consideration in five other States.

The DCFS budget recommends 1 FTE, a Social Services Program Specialist position, to support the revised ICJ.

Enhancing Organizational/Professional Competence and Safety

Grants Management Unit

DCFS Grants Management Unit (GMU) currently provides programmatic oversight for 11 federal grants including approximately 150 sub grantees and eight contracts totaling more than \$15 million dollars. One Clinical Program Planner II is currently funded to manage these grants. Additionally, the division utilizes temporary contract staff to conduct annual on - site reviews for assessment of program compliance and financial verification.

The DCFS budget recommends 3 FTE Grants and Project Analyst positions to replace the contract staff. Employing State staff will ensure improved stability within the unit and reinforce internal controls related to management of grants, analysis of services provided related to scope of work, budget monitoring, statistical reporting, consistency in interpretation of policies, procedures and technical guidelines, and provide technical assistance to sub grantees, completion of the evaluation process and other oversight activities.

All new positions in this unit are recommended to be cost allocated across several federal grants.

Enhancing Organizational/Professional Competence and Safety

Rural Child Welfare Staff Safety

In Nevada, safety while in the field is an extremely important issue as it is nationally for child welfare workers. The Division implemented a Supervisor and Social Work Staff Workload Survey on December 12, 2005 with a 90 % return rate. A majority of the staff expressed concerns related to their own safety including the work performed in some rural areas that are isolated from communication and without access to emergency assistance or needed help while on the road or at a residence. There are many unknown factors when entering a home that may involve criminal histories, weapons, substance abuse, violent clients, clients with mental illness, and unrestrained animals.

Staff survey recommendations included phones with service coverage. Currently, the child welfare staff in rural areas have cell phones to use when conducting investigations however, there is limited to no cell-phone coverage in large areas of rural Nevada. To enhance the safety of its rural child welfare staff, the DCFS budget recommends funding to purchase and support 10 800MHz radios along with annual assessment charges made to Nevada Department of Transportation and Public Safety.

Additionally, funding is recommended to replace twenty-one agency owned vehicles with leased Motor Pool vehicles. These vehicles are used to transport children and are used for CPS investigations 24 hours a day, seven days a week. The existing vehicles are unsafe with extensive mileage, repairs and lack necessary safety features.

Enhancing Organizational/Professional Competence and Safety

Ongoing operational costs and a new Information Systems Specialist to support Avatar

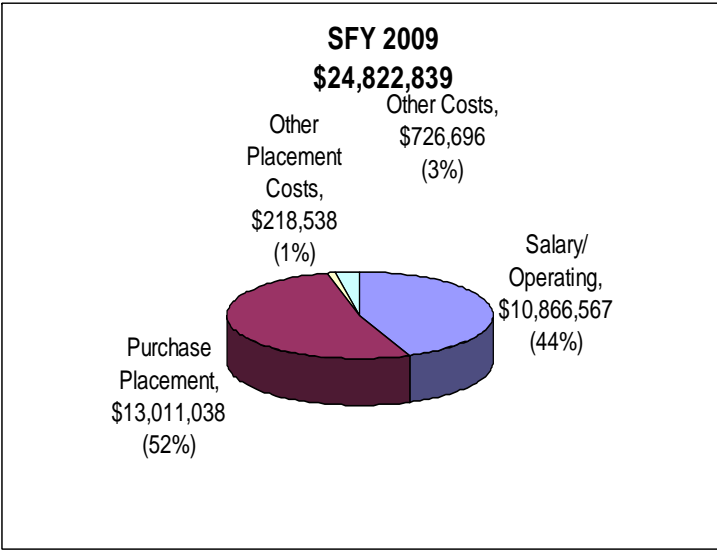
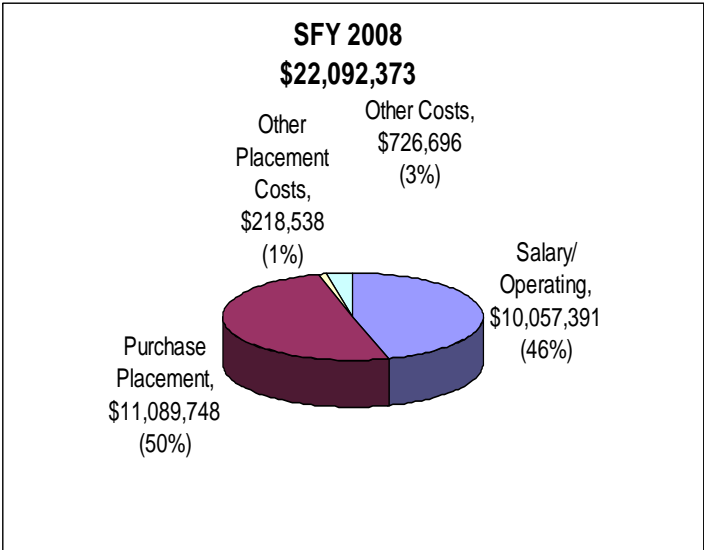
Operations costs for the Avatar System are currently in the Department of Administration's budget. The DCFS UNITY budget will need to fund Avatar in the future. Ongoing costs include maintenance agreements, new licenses, training for Avatar staff and travel.

Additionally, the DCFS budget recommends a new Information Systems Specialist position to assist the existing Agency Information Specialist positions develop windows and reports, provide data base administration services, test new functionality, manage and provide technical support for electronic billing. The user base consists of 400 users statewide.

Child Welfare Integration Budgets

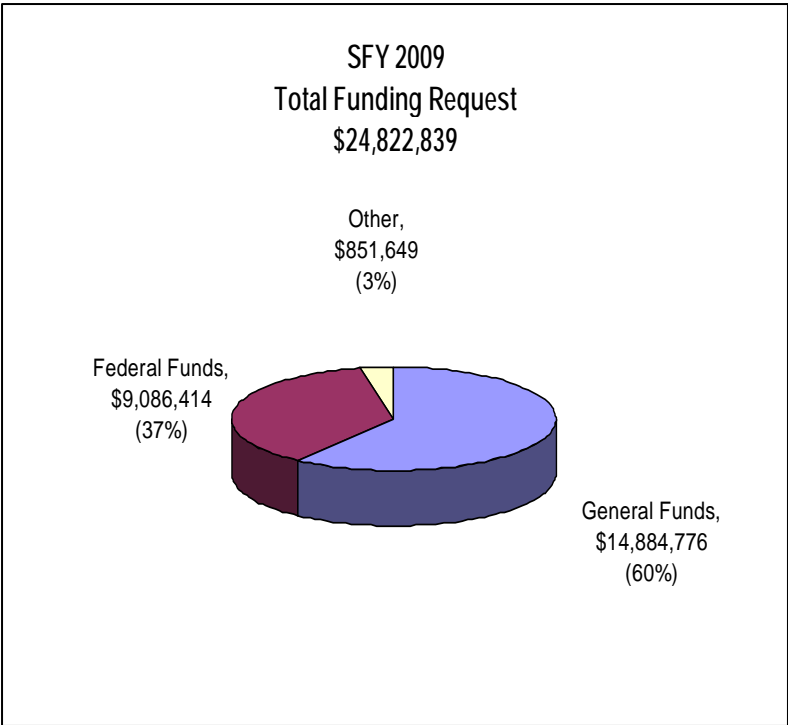
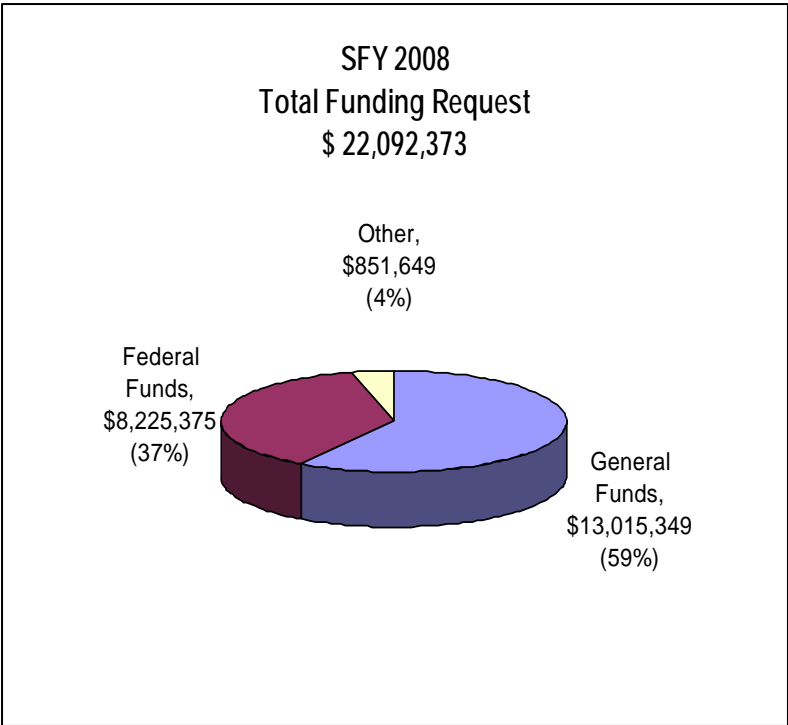
Washoe County Child Welfare Integration

The Washoe County Integration budget request for the 2007-0009 Biennium budget totals \$54,792,154 and includes a total of 94.04 full-time equivalent positions. Of the total request, \$7,826,942 represents the Title IV-E pass-through to support front-end services, and \$46,915,212 supports Child Welfare services transferred as a part of Child Welfare Integration. Child Welfare services costs are broken down as follows:



Child Welfare Integration Budgets

The Washoe County Integration budget funding for this budget is broken down as follows:



Child Welfare Integration Budgets

Included in this:

- The continuation funding of ongoing costs and the cost of Washoe County supporting 82.06 full-time equivalent integration positions, and their associated operating and travel costs.
- Caseload increases for Foster Care Placement and Adoption Subsidies.
- The addition of six full-time equivalent positions to support projected foster care caseload growth.
- One full-time equivalent position to support the new ICPC.
- Funding to increase the daily foster care rate from an average of \$21 per day to \$24 per day in FY08 and \$28 in FY09.

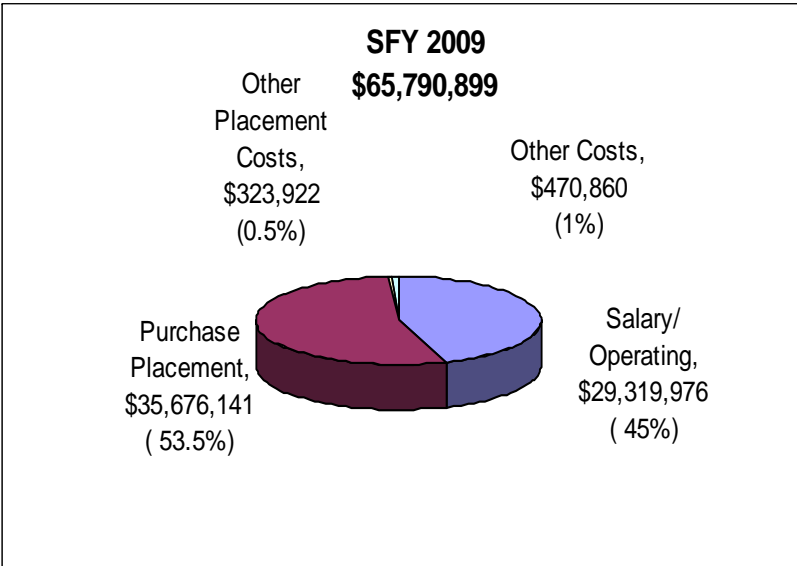
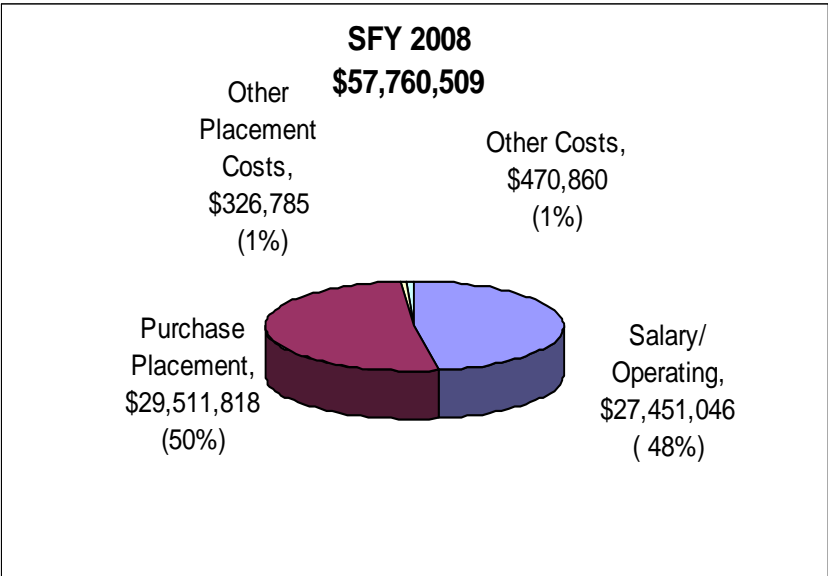
Additionally, the following enhancement units are included in Washoe County's budget:

- Increased funding to support three additional Mental Health Counselor positions for the Family Preservation Unit. A full caseload for a Family Preservation worker is 6 to 10 families, depending on the service intensity needs of each family. In a one year period, 107 families were served representing 243 children. Services provided by the Family Preservation Unit kept these children out of the legal system, off of the permanency caseloads, saved thousands of dollars in foster care expenses, and most importantly, kept them in their homes.
- One full-time equivalent Social Worker to support caseload growth in Foster Care Licensing. The Deficit Reduction Act prompted new regulations regarding the claiming of administrative costs for the Title IV-E program for children that are Title IV-E eligible but in an unlicensed placement. Since January 2006, this has impacted the County licensing caseload by over 60 children. This position would support this caseload.
- Increase two .51 FTE positions to 1.00 full-time equivalent positions to support increased workload demands.
- Funding to reclassify two Social Worker III positions to Senior Social Work positions and one Office Assistant II to an Office Support Specialist position to meet increased workload demands.

Child Welfare Integration Budgets

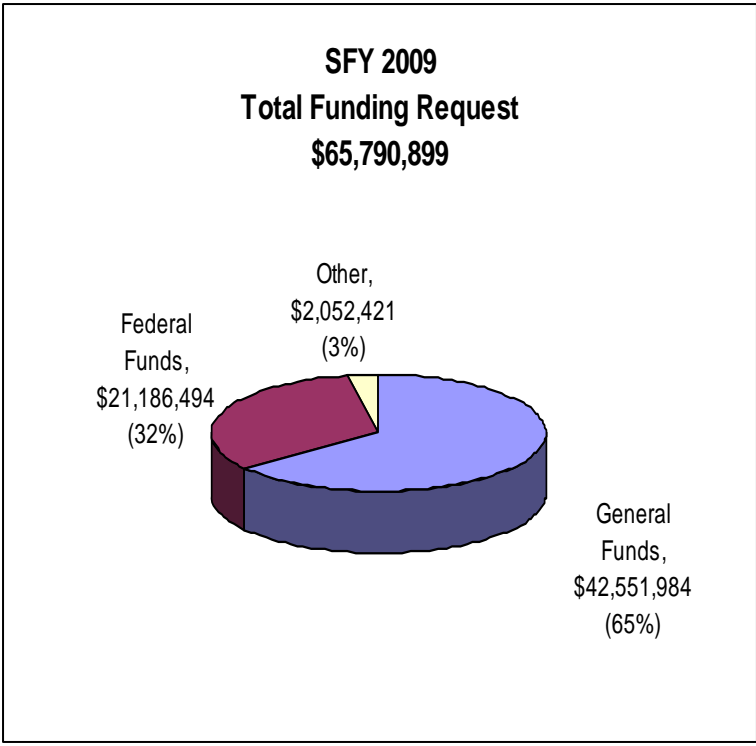
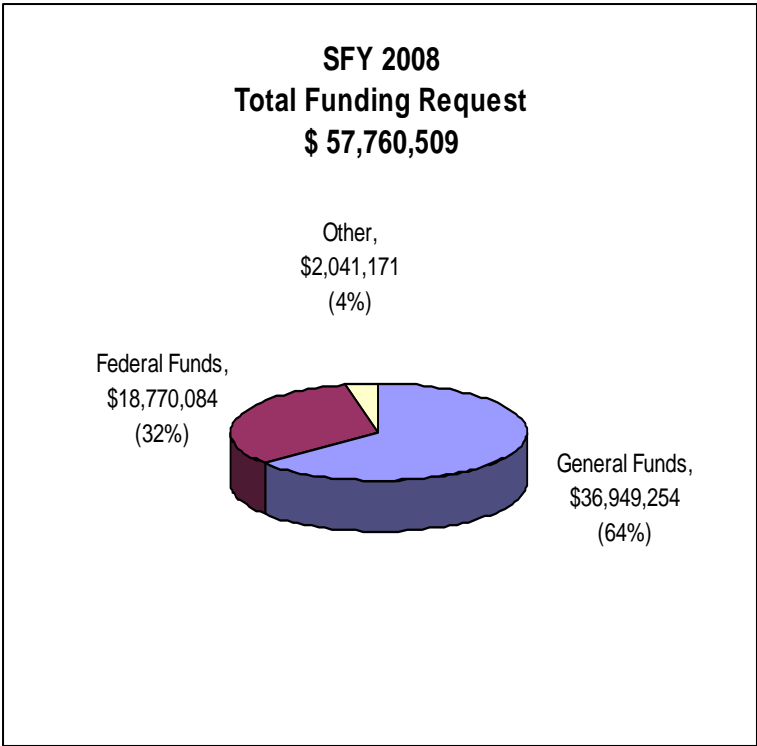
Clark County Child Welfare Integration

The Clark County Integration budget request for the 2007-0009 Biennium budget totals \$135,551,408 and includes a total of 337.06 full-time equivalent positions. Of the total request, \$12,000,000 represents the Title IV-E pass-through to support front-end services, and \$123,551,408 supports Child Welfare services transferred as a part of Child Welfare Integration. Child Welfare services costs are broken down as follows:



Child Welfare Integration Budgets

The Clark County Integration budget funding for this budget is broken down as follows:



Child Welfare Integration Budgets

Included in this:

- The continuation funding of ongoing costs and the cost of Clark County supporting 217.06 full-time equivalent integration positions, and their associated operating and travel costs.
- Increases for Foster Care Placement and Adoption Subsidies.
- The addition of 47 full-time equivalent positions in FY08 and an additional 17 full-time equivalent positions in FY09 to support projected foster care caseload growth.
- One full-time equivalent position to support the new ICPC.
- Funding to increase the daily foster care rate from an average of \$21 per day to \$24 per day in FY08 and \$28 in FY09.

Additionally, the following enhancement units are included in Clark County's budget:

- Funding for 32 full-time equivalent Family Support Worker positions to provide additional visits with children, parents and relative foster parents. These positions will also provide direct services to children and families including transportation to appointments, supervised visitation, developing hard goods, and other related activities.
- With the current caseloads, workers are unable to complete the once a month visit, complete quarterly reports, and initial home studies in a timely manner as required by Federal law. The Family Services Specialist is often the only worker who is seeing the family and monitoring the safety of the children in the home.
- Funding for five full-time equivalent positions to expand recruitment, training and retention of foster homes. These positions are necessary to expand recruitment, training, and retention of foster homes for the Department of Family Services.
- Funding for six full-time equivalent positions to support the expected increase in the number of new licensed foster homes.
- Funding for six full-time equivalent foster parent liaison positions to provide support, mentoring, and retention of 500 additional foster care beds.
- Funding for six full-time equivalent positions to enhance the Placement Team to facilitate the direct placement of children into family foster care homes on a 24/7 basis.

Special Salary Adjustments

The DCFS budget recommends a two grade increase for the following classifications:

- Sworn officers
 - Youth Parole Counselors
 - Senior Youth Parole Counselors
 - Unit Managers
 - Chief of Youth Parole

This affects 23 positions

- Professional Mental Health Staff
 - Licensed Psychologist
 - Mental Health Counselors
 - Clinical Social Worker

This affects 161 positions

- Nurses
 - Correctional Nurse
 - Psychiatric Nurse
 - Director of Nursing Services

This affects 29 positions

Supplemental Appropriation Request

Clark County Integration Budget

The DCFS budget includes a request for a supplemental appropriation in the amount of \$3,696,791 to cover a projected shortfall in the Clark County Integration budget. During FY06 DCFS requested a transfer of General Funds from FY07 to FY06 to cover projected shortfalls in the Clark County Ongoing Category due to adoption subsidy expenses being greater than originally budgeted as well as an increase in the foster care caseload. At the time, it was also projected that an additional shortfall in the amount of \$2,598,304 would occur in FY07.

This request was based upon an analysis of actual costs incurred by Clark County from July 1-December 31, 2005 and projected costs through June 30, 2007, for adoption and foster care payments.

Based upon an analysis, a shortfall of approximately \$800,000 was projected for adoption subsidies in FY06, and \$1,221,542 in FY07. While the average caseloads appeared to be lower than projected in the budget (1,425 projected - 1,407 average for FY06), the average subsidy amount was higher than projected in the budget (\$508.79 projected per mo, \$558.07 average per month for FY06).

Based upon an analysis, a shortfall of approximately \$1,057,826 for foster care, which includes relative foster care, family foster care, medically fragile/special rates, independent living, and non-recurring expenses (school supplies, personal incidentals and clothing), was projected for FY06 and \$1,638,614 for FY07. The average caseloads appeared to be higher than projected in the budget (1,090 projected - 1,286 average for FY06). The average daily rate appeared to be close to what was projected in the budget (\$21 per day projected - \$20.05 per day average for FY06).

Additionally, a shortfall of approximately \$1,228,279 was projected for salaries and operating to support additional caseworkers needed to maintain the caseloads at a ratio of 1:22, as approved for FY07 in the budget.

Bill Draft Requests

- BDR 597 - Amend NRS 62.E.710 to add violation of parole as a condition of being placed in a detention facility for not more than 30 days. The intent of the proposed bill is to revise provisions governing detention of Juvenile parole violators. This legislation would allow youth on parole to be sentenced to up to 30 days in local detention facilities. Presently, statute allows only for probation violators to be sentenced in this manner. This change would provide similar options to those juveniles or young adults currently on parole status, and increase community protection and juvenile offender sentencing options.
- BDR 598 -Amends NRS 432B to comply with CAPTA regulations regarding public disclosure of child fatalities and near fatalities. The intent of the proposed bill is to ensure compliance with certain provisions of the CAPTA, including: reporting of child abuse and neglect; procedures for screening; investigation; child fatality review panels; public disclosure of child fatalities and near fatalities; and expungement of records. In addition, the intent of this bill is to delete references to a requirement for the development of a plan of efforts that was made mandatory pursuant to the Adoptions and Safe Families Act of 1997 and has been incorporated into existing NRS.
- BDR 599 - Amends NRS 432A to add residential, shelter, and educational child care institutions to the definition of child care facility and provides they will be licensed by the State. The intent of the proposed bill is to ensure compliance with certain provisions of the CAPTA by making certain that placement of abused or neglected children is in a safe environment, and create new licensing categories for residential child care institutions, shelter child care institutions and educational child care institutions. In addition, the intent is to create state authority for institutional licensure.

This legislation will help ensure that residential child care institutions, shelter child care institutions and educational child care institutions operate in accordance with local health and safety ordinances, including staffing ratios and meet state licensing requirements.

- Amend NRS 217.410 to allow the Division to expend a maximum of 10.0% percent of total revenue collected to fund existing costs associated with administering the Account for Aid for Victims of Domestic Violence.

Capital Improvement Projects

The Governor's Budget recommends two Capital Improvement Projects for the Division of Child and Family Services:

- Construction, Project C26, Desert Willow Treatment Center
The addition of 7,500 square feet to Desert Willow Treatment Center
- Maintenance, Project M27, Summit View Youth Correctional Center
Replacement and addition of existing security cameras, channel recorder, and software in the security control system of the Summit View Youth Correctional Center
- Other Projects
Statewide ADA Project S02
Projects 403, 443, and 444

Organizational Structure

Division of Child and Family Services

