Georgia

Child and Family Services Review

Proposed Program Improvement Plan

8/07/08
States are encouraged to use this PIP standard format to submit their PIP to the Children’s Bureau Regional Office. The standard format includes the following sections:

I. PIP General Information
II. PIP Summary Work Plan and Matrix Instructions and Quality Assurance Checklist
III. PIP Agreement Form (authorizing signatures)
IV. PIP Matrix

### I. PIP General Information

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GA PIP 8/07/08
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Georgia’s Approach to the Program Improvement Plan (PIP)

Child welfare programs in Georgia are state-supervised and county-administered by the Division of Family and Children Services (DFCS) of the Department of Human Resources (DHR). Within DFCS, the Office of Family Independence (OFI) handles financial and support services (i.e., TANF, Food and Nutrition, Child and Parent Services program, Medicaid, Refugee Assistance) and Social Services is charged with handling investigations and cases of child abuse and neglect (child protective services, foster care, adoption). The Federal Child and Family Services Review (CFSR) conducted in Georgia May 14-18, 2007, provided an opportunity for Georgia to identify strengths in its child welfare system and develop strategies to improve services and outcomes for children and families where indicated.

Background

DHR, particularly DFCS, is developing a shared vision with community partners focused on supporting and involving Georgia’s families. DHR Commissioner B.J. Walker initiated this effort with the Georgia Nine (G-9) group process following her appointment in 2004. The G-9 included directors of the nine Georgia counties with the highest percentage of the state’s social services cases (comprising over 50% of the social services cases). The purpose of this group was to build hypotheses and develop innovative solutions for concerns/issues/areas having the greatest adverse impact on Georgia’s children and families.

The G-9 initially focused on preventing the recurrence of maltreatment. The agency studied data, reviewed case files and developed purposeful strategies targeted at reducing pending cases through the inclusion of preventive services, which aimed to stem a second incident of maltreatment. The G-9 expanded to all 17 regions into a statewide G-Force process with a family focus that includes monthly meetings to review data and progress at the county, regional and/or state levels.

Following the successful reduction of pending cases and the implementation of the Diversion program (now called Family Support), the focus of the G-Force process broadened to include foster care re-entries; stability of foster care placements; placing children within their communities as well as with siblings; ensuring contacts were made with children; and meeting the educational, physical health and mental health needs of children in foster care. The 2007 CFSR validated Georgia’s strides in each of these areas. Georgia’s leadership deliberately chose to influence outcomes that were child-centric and could ensure the immediate safety and stability of children.
Georgia began its program improvement process prior to the CFSR onsite review. In order to gather input from key stakeholders, other agencies, citizens, and community organizations from across the state, DFCS held community forums regarding the agency’s programs and services statewide. Additionally, surveys were conducted among parents, caregivers and other stakeholders (including front line staff), as well as county and regional directors. Through the community forums and stakeholder surveys, the state began to scrutinize initiatives and assess their scalability for statewide incorporation.

Recognizing the vital role the community and stakeholders play in the success of families, the agency has engaged partners throughout its self-assessment and PIP development processes. The agency sponsored a PIP kickoff meeting with over 160 attendees, including technical advisors, county and regional staff, state office leadership, youth, consumers, providers, child welfare advocates, and other stakeholders. Meeting participants were divided into workgroups corresponding to themes identified in the CFSR process as follows:

- Family engagement
- Case planning/family team meetings
- Courts
- Data/quality case review
- Assessments

The workgroups have been modified so that data/quality case review representatives will participate in other workgroups and will no longer be a separate group. The purpose of the workgroups going forward is to monitor and assess Georgia’s child welfare strategies and results throughout PIP implementation and beyond as Georgia strives to make lasting changes. The comprehensive scope of the PIP reflects the commitment of the participants and extensive collaboration that will be required to implement the plan over the next five years. As required, the Title IV-B Advisory Committee will assist DHR in developing and monitoring the annual Title IV-B State Plan including the PIP.

Georgia is committed to continuing to work with the Region IV staff of the Administration for Children and Families (ACF) in implementing and closely monitoring its PIP. Georgia believes this partnership will result in a more responsive child welfare system for Georgia’s children and families. DHR plans to continue an open process for sharing results, progress, and needs with ACF Region IV staff, agency staff, communities, stakeholders and the general public.

The state plans to host additional regional community forums during the course of PIP implementation.
Major Strategies: Shifting the Focus

Georgia has engaged experts from across the nation to assist in the development of a Family-Centered Practice Model (FCPM), which will be developed in the first year of the PIP and piloted, evaluated, and revised as needed during the second year.

A key finding of the 2007 CFSR was that Georgia does not always address the safety and well-being of all children living in a home. Instead, services have tended to focus on the “target child.” While a lot of good work is being done for the target child, this practice leaves other children vulnerable, does not always address root causes (which often involve the parents/family), and fails to strengthen the family’s ability to provide for the needs of all children.

Recognizing that child issues are symptomatic of greater family issues, the state has now begun to focus on a **family-centered practice approach** to improve outcomes. All aspects of assessment and service planning are expected to include children and families, with an increased emphasis on paternal family members. This approach will not only improve customer service and relationships between families and the agency, but it will also foster needed collaboration between state agencies, communities, service providers, and elected officials, as the state builds the support network necessary to achieve safety, permanency, and well-being for Georgia’s families and children.

The focus on family-centered practice represents significant systemic change and is the foundation of Georgia’s plan. Thus, the major strategies for this PIP are:

I. Develop and pilot a Family-Centered Practice Model
II. Strengthen policy and improve practice to ensure safety of children
III. Improve permanency outcomes for children and families
IV. Improve service array and foster parent recruitment/retention

The development of Georgia’s Family-Centered Practice Model will incorporate existing relevant initiatives and support the development of new initiatives. These initiatives will be assessed for inclusion in the model and statewide scalability. Although the FCPM is a pilot, some specific practice changes related to safety and permanency are being addressed statewide more immediately, including:

- New quality screening/intake tool/process
- “Every Child Every Month” caseworker-child visit training and emphasis
- Improving and expanding the use of Family Team Meetings
- Individualizing services for needs identified in assessments, including physical health, mental health and educational services for children
- Improved foster home recruitment practices
- Permanency collaboration with the Court Improvement Project and the Office of the Child Advocate
As with any systemic change, the implementation of the Family-Centered Practice Model will present challenges. It will require integration of services within the purview of DHR; clarification of programs, policies and procedures; careful review and evaluation of current resources and programs; accountability for program improvements across all levels; modification of assessment and case planning processes; additional training and revision of training content for staff and providers; and more effective inter/intra-agency collaboration and monitoring.

This systemic change involves a significant change in both values and culture spanning all layers of the agency workforce. The agency has already begun a major effort to change both values and culture at all levels through the G-Force Process as well as leadership meetings, state office presentations to local and regional staff, employee engagement initiatives, policy updates, and new or revised trainings. In addition, staff at all levels have been engaged in the CFSR process, including the self-assessment, the on-site review, the workgroups, the PIP development, and quarterly review of CFSR outcomes.

To help with the planning, piloting, and evaluation of its new Family-Centered Practice Model, Georgia has requested technical and financial assistance from the Casey Family Foundation, the National Resource Center for Organizational Improvement, the National Resource Center for Family-Centered Practice/Permanency Planning, the National Resource Center for Youth Development, the National Resource Center for Legal/Judicial Issues, and the Child Welfare Policy and National Conference of State Legislatures.

The following sections provide a brief introduction to each of the major strategies included in this PIP.

I. Develop and Pilot a Family-Centered Practice Model

Guiding Principles

Adopting a family-centered approach requires a simultaneous shift in both philosophy and practice. To achieve this transformation, DFCS plans to progress toward a family-centered approach deliberately and systematically. To guide this transformation, DFCS will adopt the following principles:

- The safety and well-being of children and all family members is paramount. When safety can be assured, strengthening and preserving families is the best way to promote the healthy development of children.
- Services are focused on the family as a whole; families are engaged in the development of their plans via family team meetings; case managers and service providers work with families as partners in identifying strengths and needs and providing appropriate services to address identified needs and build parental capacity.
- Services are directly related to promoting the healthy development of children and youth, permanency for children, self-sufficiency and independent living for youth emancipating from the foster care system.
- Services may focus on prevention/family support (diversion), protection, or other short- or long-term interventions to best meet the needs of the intact family, as well as children and youth who may be placed in out-of-home care.
- Services are to be timely, flexible, coordinated, accessible to families and individuals, and delivered in their home or community whenever possible.
- Services are intensive enough, and of sufficient duration, to keep children safe and meet family needs.

The Georgia Family-Centered Practice Model (Six Innovation Zones (counties))

Georgia’s Family-Centered Practice Model will cover all aspects of interaction with children and families with the above values serving as the driving force for the work. The following chart shows core functions to be included in the model with tools for implementing the model listed on each side. Implementation plans are addressed in the narrative section of this PIP document as well as the PIP matrix. The innovation zones are Brantley, Catoosa, Fulton, Muscogee, Richmond and Walton.
A systemic change such as the proposed shift to family-centered practice requires initial policy changes as well as new and ongoing training, support, monitoring, and evaluation.

**Policy Changes**

Considering the feedback from its self-assessment and input from the PIP planning groups, DFCS will first address changes in policy required to support its family-centered practice, such as quality intake/screening, family involvement in assessment and planning, expanded use of family team meetings, preserving family connections, caseworker visitation, diligent parent and relative search and contact, concurrent planning, continuous re-assessment/periodic case review, and cross-jurisdictional coordination of services.

As feedback on the Family-Centered Practice Model implementation is obtained, policy will be updated as needed. Policy and practice changes will be communicated to all staff via electronic (email and website) communications and training.

**Training**

Changes in policy and practice will be incorporated into current and new training curricula as developed or adopted in order to sequentially implement specific aspects of the Family-Centered Practice Model over the PIP implementation period. Training will address veteran and new staff, both supervisory and front-line, and will include opportunities to measure transfer of knowledge. Recognizing that quality supervision is key in the development of staff as well as in case progression for families, supervisor training will be used not only to build knowledge of policy and practice changes but also to provide supervisors with tools for effective leadership.

**Transfer of Learning/Supervision**

Georgia recognizes that training alone is not always sufficient to ensure content is incorporated into practice. One way to ensure changes in policy and practice are implemented as envisioned is through not only training but also through supporting the transfer of knowledge and staff retention through good supervisory practice.

Staff retention has been an issue for Georgia and was identified as a key concern in the Georgia self-assessment. Effective training and supervisory transfer of learning activities contribute to and support staff retention along with other employee engagement and support efforts being implemented by the state.

Georgia is now including a transfer of learning component in key trainings. This component includes communication before and after training with the trainees’ supervisors so that the supervisors are able to assess and reinforce learning as well as help the trainees incorporate the principles learned into practice.
After the training occurs, supervisors of trainees receive a packet that includes key learning points, implications of training, follow-up activities for the supervisor and trainee, and a checklist to determine how well the trainee is doing in achieving the overall goals of the training.

Approximately six weeks after the training, the supervisor will receive a follow-up survey that is used to assess the effectiveness of the training which will be used to modify future training as indicated.

Key trainings related to this Program Improvement Plan that are slated to incorporate a transfer of learning component include:

- The Family-Centered Practice Model (innovation zones)
- Family Team Meetings (statewide)
- Caseworker-child visitation (statewide)
- Quality intake and screening (statewide)
- Risk assessment (statewide)
- Service planning (statewide)
- Independent living training (coordinators statewide)
- Permanency and concurrent planning (statewide)

**Caseworker-Child Visitation (Statewide)**

In order to increase the ability of the case manager to assess the safety of children in their placement settings based on the individual needs of the child and the appropriateness of the child’s permanency plan, the agency has begun a statewide initiative focused on caseworker-child visitation. The focus of the initiative is to increase purposeful, face-to-face contact between case managers and the children involved in a case. The goal is to better engage children, assess their current placement needs, assess their current health/mental health needs, and build/preserve the child’s family connections.

For this initiative, key Georgia staff are receiving training from the National Resource Center on Family-Centered Practice and Permanency Planning, including training for trainers to enable Georgia to provide this training for additional staff and on an ongoing basis.

**Strengthening Families**

In addition, the Family-Centered Practice Model will work to strengthen parental capacity by including the following practices:

- Engaging parents in identification of strengths and needs for themselves and their children
- Direct involvement of parents in decision-making regarding goals and plans
- Improving caseworker visits with parents
- Focusing on the inclusion of fathers and paternal relatives, as well as mothers and maternal relatives
• Providing access to services in the family’s home and community whenever possible
• Facilitating the successful transfer of families from one county to another to ensure continuity of services

**Family Preservation Practice (Statewide)**

In the agency’s self-assessment process, the state closely reviewed the current family preservation process in conjunction with the current risk assessment and determined the process to be cumbersome. In an effort to overcome the difficulties identified by the field related to the risk assessment tool, the state is seeking technical assistance from the National Resource Center on Child Protective Services on using the current tool more effectively.

The state is currently utilizing a new family preservation case process that will be incorporated into the Family-Centered Practice Model. This process focuses on engaging families, identifying family needs and providing services linked directly to the identified needs of the family to identify best practices in this area and locate resources for families within their communities. Family Preservation is a family-centered, integrated approach to keeping families intact. This is done via collaboration between OFI and Social Services in an effort to engage families and the community in creating a comprehensive plan to strengthen families. Core to this approach are early identification and intervention, family team meetings, and community involvement in the development of a plan for the family.

In this approach, Family Preservation cases are identified during a Child Protective Services (CPS) investigation. A staffing is held to determine immediate services needed and plan for a joint family visit with the CPS investigator and the Family Preservation Services (FPS) worker. The family assessment/risk assessment is completed within 30 days of the identification of a case.

**Family Team Meetings (Statewide)**

Key to family preservation is family team meetings (FTMs). The initial FTM is held within 45 days of the case being identified. The purpose of the FTM is to develop the case plan, set contact standards, identify appropriate collateral contacts, identify potential safety resources, and begin developing an exit strategy (community and family supports that will be in place at case closure).

Each case will have, at a minimum, two FTMs; an initial case planning FTM and a closure FTM to evaluate and finalize the exit strategy. FTMs are also held during the life of the case as situations arise that require case plan revisions due to a family’s lack of progress or change in circumstances; thus child safety is continuously assessed throughout the case.
Monitoring and Evaluation (Statewide)

The state routinely tracks outcomes at the state, regional and county levels, with these outcomes now reviewed at monthly G-Force meetings with state, regional and county leadership.

The effectiveness of the systemic changes and PIP actions – those underway and those to be piloted in specific areas – will be assessed primarily using 12-month data (rolling quarters) derived from the state’s Qualitative Case Review system. These case reviews mimic the CFSR process on a regional basis and are conducted in each region annually. The case review instruments have been aligned with CFSR review instruments.

In addition, as the new Georgia SHINES case record and data system is implemented statewide (statewide rollout successfully completed June 2008), it is anticipated that data reports from this system will supplement but not supplant the data from the case review process.

II. Strengthen Policy and Improve Practice to Ensure Safety of Children

Quality Intake and Screening (Statewide)

Quality screening/intake refers to all of the activities necessary to receive referrals of suspected child maltreatment, assess whether or not a referral will be accepted as a report of child abuse or neglect, and determine the agency's response and the urgency of that response.

Screening/intake is the initial point of contact between the DFCS and the community, and to a great extent, this initial contact determines perceptions of expertise and professionalism of the agency and its staff. The focus of screening/intake is to promote the safety of the child and to identify ways the family can ensure that safety, and the emphasis is on helping. The intake process is family-centered and culturally responsive.

Our day-to-day practice will include but is not limited to the following:

1. Respond to all callers promptly with respectful, active listening skills.
2. Gather essential information, including the beginning identification of all individuals who are parents and other important family members.
3. Screen referrals using uniform instruments that structure the process of screening/intake and response to information related to child safety.
4. Screen referrals uniformly.

Strategies to strengthen our screening/intake processes include:
1. Review and revise policies that address the agency's response and the urgency of that response to referrals of suspected child abuse or neglect.
2. Develop, distribute and implement through training a uniform set of questions that are used to screen all referrals of suspected child abuse or neglect.
3. Screen all referrals of suspected child abuse or neglect for the presence of domestic violence and substance abuse.
4. Develop and conduct a specialized professional development course for all employees who are responsible for the screening/intake function.

Intake staff and supervisors will be trained in the quality intake and screening process. This training will include a transfer of learning component to ensure appropriate implementation and supervision as well as a follow-up assessment to document changes in practice.

**Improved Risk Assessment (Statewide)**

Georgia is in the process of reviewing and revising its assessment process to:

- Obtain technical assistance on using the current risk assessment tool more effectively
- Address the needs of the family as well as all children in the family/household
- Provide the basis for individualized family and child case planning
- Guide the provision of appropriate services, including those related to preserving children’s connections to their families and home communities

**III. Improve Permanency Outcomes for Children and Families**

**Court Improvement Project Collaboration (Statewide)**

Georgia’s Court Improvement Project (CIP) is a project of the Council of Juvenile Court Judges (CJCJ) to improve court practices related to child welfare in Georgia, especially permanency for abused or neglected children. DFCS, the (CIP) and the Office of the Child Advocate (OCA) began working collaboratively during the CFSR self-assessment process. This collaborative effort continued throughout the onsite review, with the CIP and OCA both having staff on the review teams. In addition, CIP and OCA staff actively participated in focal workgroups formed for the purpose of developing PIP strategies.

DFCS, CIP and OCA jointly hosted a collaborative technical assistance meeting with the National Resource Center on Judicial and Legal Issues, American Bar Association to formalize PIP action steps related to courts and permanency issues.

Plans include additional federal technical assistance to facilitate collaboration among DFCS, the Georgia Attorney General’s office and related partners. It is hoped that this TA
will lead to identification of best practices and SAAG performance standards as well as improved permanency outcomes.

**Court Compliance Officer Initiative (Statewide)**

The Court Compliance Officer Initiative is a statewide collaborative effort between the Court Improvement Project (CIP) and the agency to conduct joint quality assurance reviews. CIP has hired (initially) a “court compliance officer,” who is an officer of the court, to travel the state and review orders as well as provide consultation when a problem order is identified. Cases for review will represent a sample of the state’s quality assurance sample pulled by the Data Analysis and Reporting Unit for the State Quality Assurance Review within that Region/Judicial Circuit.

Completing joint quality assurance reviews will allow for the early identification of barriers to reunification and permanency, as well as case plan-related issues. Identified issues will be discussed during periodic meetings among DFCS leadership, CJCJ judicial executive council and staff, CIP staff, and the Office of the Child Advocate.

**Permanency Unit Initiative (Regional Pilot)**

In an effort to expedite permanency attainment for children in state custody, DFCS Region IV is piloting a Permanency Unit, which began operating in January 2008. This unit is led by a Regional Permanency Coordinator and includes multiple permanency teams to coordinate planning and services from the child’s entry into state custody until permanency is achieved. The unit will focus on child well-being in the permanency process. This includes child involvement in permanency planning, therapeutic interventions, facilitating timely termination of parental rights (TPR) where indicated, timely adoption of children for whom reunification or relative placement is not appropriate, permanency staffings to establish concurrent planning, parental and caregiver involvement in permanency planning, preserving family connections of children, development of resource families for children free for adoption without identified resources and/or with special needs, and provision of specialized training for DFCS case staff related to permanency.

The following measures will be used to assess scalability for statewide implementation:

- Case reviews using the CFSR format conducted by county directors, field program specialists and permanency unit
- Ongoing analysis of permanency outcome measures
- Ongoing G-Force meeting discussions
- Ongoing feedback from county DFCS staff at all levels
- Court Improvement Project (CIP) data analysis
- Creation of a program management database documenting ongoing efforts, progress and recommendations
- Documentation of all efforts to ensure child well-being
- Ongoing feedback and oversight by licensed professionals, both within the Permanency Unit and in private practice
IV. Improve Service Array and Foster Parent Recruitment/Retention

Georgia’s 159 counties vary from highly urbanized to extremely rural. The result is that the range and number of services to families varies a great deal, with those in the metro Atlanta area having more services available to them and easier access, and those in the rural areas having to travel further (if they have the transportation/means) to find the services they need.

Of particular concern is availability of substance abuse and mental health treatment services for families in the more rural areas of the state.

Improving Georgia’s Service Array

Georgia is planning to address service array issues using a two-pronged approach:

1. Through collaboration at the state level with the mental health, public health, education and child support agencies; and
2. Through collaboration at the regional level spear-headed by DFCS regional directors.

The Office of the Child Advocate (OCA) and the Governor’s Office of Children and Families are planning to collaborate on a statewide service array survey. Once available, the results of this survey will be used by regional directors as the platform to develop regional strategic action plans to address regional service deficiencies.

Individualizing Services

Georgia is making a concerted effort to ensure that case plans for services are individualized and address the needs of all family members based on needs identified in the (1) ongoing risk assessments in CPS and foster care cases and (2) comprehensive child and family assessments for children in foster care.

This is being addressed through technical assistance on the risk assessment; policy updates; ongoing supervisory and staff training related to case planning, caseworker-child visitation and case documentation in the newly-deployed SHINES database system; and the Family-Centered Practice Model development and implementation.

Purchase of Service for Foster Parent Retention and Support

Despite the overwhelming and consistent data about foster parent retention, child welfare agencies locally, nationally and internationally struggle with foster parent satisfaction and retention. The problems are well documented, and despite good practice ideas, the issue of foster parent retention continues to plague child welfare programs.
Georgia has embarked on a research and practice initiative, known as the Foster Family Initiative (FFI), that is focused on retaining and supporting veteran foster families by contracting for services with community-based organizations. The Foster Family Initiative is an umbrella project which includes the development and implementation of pilots in Region 17 and five additional counties (Fulton, DeKalb, Thomas, Colquitt and Mitchell) and other retention efforts throughout the state.

In an effort to address Georgia’s urgent need for well-trained and supported foster families who are able to meet the complex needs of our children/youth in care, Georgia is piloting a re-focused effort with a private contractor to assist the state with foster parent retention. The revised focus is to provide the support, continued skill development, and community connections that foster families need in order to increase foster home retention. This initiative allows community-based organizations to make available their expertise and knowledge of best practices in youth development.

The pilots are attempting to understand how to effect changes in retention through two avenues: (1) short-cycle Plan-Do-Study-Act tests similar to the Breakthrough Series Collaboratives, in which a hypothesis about foster parent retention is tested through support, training offerings and attempts to influence staff behavior; and (2) a study intended to identify predictive indicators or risk factors for foster home voluntary closure which will result in the creation of a tool designed to promote foster parent retention through early identification of key indicators for voluntary exit.

Effective pilot program strategies will be rolled into the prototype for the model as it goes statewide. All counties will implement improvements to their foster family retention programs based on lessons learned through the FFI.

The state will retain responsibility for foster home recruitment, with resource staff developing recruitment plans at the local level.

**Foster Care Recruitment (Statewide)**

Georgia is developing an internal foster home recruitment improvement initiative that will include updates to policies, training for the resource development supervisors and staff and development of regional recruitment plans.

**Outstanding Paternal Involvement Initiative (Regional Pilot)**

The Outstanding Paternal Involvement (OPI) pilot was generated in Region 16 and is developing new ways to identify, engage and work with paternal relatives. All DFCS program areas in that region are participating in the pilot and are generating strategies to increase contact and interaction with fathers and the paternal extended family.
The OPI process starts with a case analysis to determine the level of paternal involvement. Data currently indicate a low percentage of paternal involvement in cases, with 30-40% as the common baseline. Potential measures to assess the pilot for success/scalability include:

- Increased percentage of cases with paternal involvement in FTMs and case plans as determined by participant logs and Quality Case Review (QCR)
- Increased rate of paternal relative placements
- Increased child support payments
- Decreased length of time for reunification

**Georgia PIP Detail**

Focusing on family-centered practice, Georgia has established four key strategies for addressing areas that directly affect safety, permanency, and child and family well-being.

The next section addresses Georgia’s data sources and outcome measurements in detail. This section is followed by four charts that provide details of the Georgia plan.

1. The ACF Work Plan Summary outlines the state’s primary strategies and CFSR items addressed by those strategies, key concerns raised in the CFSR to be addressed, and technical assistance needed.

2. The Georgia PIP Strategies, Goals and Actions Table (corresponding to the ACF PIP Matrix Part A: Strategy Measurement Plan and Quarterly Status Report) identifies the specific strategies, goals and actions that address outcomes and systemic factors that fell below the federal threshold for substantial conformity. These include all seven outcomes (safety, permanency and well-being) as well as the Case Review System, Service Array, and Foster Parent and Adoptive Parent Licensing, Recruitment and Retention systemic factors. This table also includes evidence of completion, responsibilities and CFSR item references.

3. The ACF PIP Matrix Part B: National Standards Measurement Plan and Quarterly Status Report (Part B deleted from this version.)

4. The ACF PIP Matrix Part C: Item-Specific and Quantitative Measurement Plan and Quarterly Status Report
Georgia PIP Outcome Measures and Data Sources

At the current point in time, Georgia is in a transitional state in terms of its data management due to several factors:

1. The state is in the midst of changing data systems from its legacy system, Integrated Data Systems (IDS), to SHINES, its new SACWIS system expected to be operational in all 159 counties by June 2008.
2. The Adoption Data and Matching (ADAM) system and other stand-alone data systems are in the process of being integrated into SHINES.
3. The state is under a consent decree, known as Kenny A, which has its own monitoring and reporting requirements, in two of its largest metro Atlanta counties, Fulton and DeKalb.
4. Georgia uses more than one process for case reviews:
   a. The Program Evaluation and Analysis Section (PEAS) Quality Assurance (QA) system, which conducts annual reviews of a sample of cases in each of the state’s 15 regions not under the Kenny A consent decree.
   b. Field Operations Case Reviews of a sample of five cases per month in each of the state’s 159 counties.
   c. Supervisor reviews of one case per program area per worker per month.

To assess CFSR outcomes statewide, ACF and DFCS leadership have agreed that Georgia use 12-month measures for baselines and rolling quarter 12-month measures for quarterly tracking once the PIP is approved.

The purpose of this section is to provide a brief overview of Georgia’s case review and data systems and describe in detail Georgia’s proposed outcomes measurements and data sources for the PIP.

1. Program Evaluation and Analysis Section (PEAS) Quality Case Reviews (QCR)

Methodology

The Social Services Quality Assurance Review Team, which is part of the Program Evaluation and Analysis Section (PEAS), regularly reviews and evaluates the quality of services provided to children and families by county DFCS offices through its Quality Case Review (QCR) process. In October 2007, the review team began a regional review process in order for more Georgia counties to have more regular reviews and to improve statewide outcomes. For this process, each region is now reviewed once a year on a rotating annual schedule.

The design of the process and the review instrument measures the same elements as identified in the federal CFSR. Regional data and other information are combined to determine the region’s
compliance with federal review items, including IV-E compliance. This QA process is a primary PIP data source.

The state’s annual regional review process includes the following:

1. A qualitative case review instrument and case-specific interviews utilized to evaluate the quality of casework and adherence to policy as it relates to safety, child and family well-being and permanency planning for children.
2. Interviews, focus groups and/or surveys conducted at both county and regional level with community stakeholders, children, parents, foster parents, social services supervisors, case managers, DFCS administrators, ILP youth, service providers, relatives, court personnel and attorneys.
3. Completion of a regional self-assessment (prior to the case reviews) by regional administrators, with input from county directors.

The QCR assesses the region’s performance on 23 items pertaining to the seven CFSR outcomes and 22 items pertaining to the seven CFSR systemic factors. In order for a region to be in substantial conformity with a particular outcome, they must achieve 95%. For each outcome that falls below 95%, the region must complete a quality improvement plan. The results of the regional review are shared with regional administrators and others during an exit conference. Statewide and regional trends are identified and reports are released on at least a quarterly basis.

A random sample of cases for the region is reviewed, including separate samples for investigation, Family Preservation Services, placement and adoption cases. A sample of agency foster home files and family support (diversion) cases are also reviewed.

Approximately 100 cases per region are reviewed, not including family support (diversion) cases or foster home files. From that sample, at least 14-21 placement and family preservation cases are selected for interviews with the child (if old enough), caregivers, birth parents, CASA and/or guardian ad litem (GAL).

**Sampling Method**

CPS Investigations: The number of investigations is taken from the Trans table (generated by SMI for all cases in a program area in a month) in the month’s IDS/Protective Services Data System (PSDS) data file. This table stores data on all active cases and is the table that is used for the State Active Cases report in IDS online. The query seeks all cases that were under investigation during the queried month except those that were initiated as a CPS case but were not marked “Active,” meaning the case is still under investigation. (Cases still under investigation are not included except as noted below.) The query determines the number of relevant cases for each month during a 12-month period and calculates an average number of relevant cases per month.

CPS (Family Preservation Services): The number of CPS Family Preservation cases is taken from the Trans table in the IDS/PSDS data file. The query pulls all cases that were active as a CPS case and marked “Active,” which indicates whether the case is considered an on-going case.
or is still under investigation after 45 days. The query determines the number of relevant cases for each month during a 12-month period and calculates an average number of relevant cases per month.

Placement: The placement cases are sampled from a monthly Adoption and Foster Care Analysis and Reporting System (AFCARS) table within a monthly extraction of data from the IDS System from Systems and Methods, Inc. (SMI, the IDS vendor). The query presently extracts cases that meet the following criteria:

1) Placement
2) All case plans that are not adoption
3) Active as of the end of the month
4) In care for greater than 90 days
5) Unique per sibling group (only one child from a sibling group)

Excluded from the placement cases are any cases that are boarded by a county, Interstate Compact on Placement of Children (ICPC) foster or adopt home, and children who are 18 years or older.

Placement Free for Adoption: The placement cases are sampled from a monthly AFCARS table within our monthly extraction of data from the IDS System from SMI. The query presently extracts cases that meet the following criteria:

1) Placement
2) All case plans that are not adoption
3) Active as of the end of the month
4) TCM service during the month
5) In care for greater than 90 days
6) Unique per sibling group (only one child from a sibling group)

Excluded from the placement cases are any case that is boarded by a county, ICPC foster or adopt home, children who are 18 years or older.

Samples are calculated using a one-tailed z-score at 90% confidence level (1.282) and a 10% standard error for all regions. The formula is as follows:

\[
N = \text{Population} \\
E = \text{Standard Error} \\
z = z\text{-score} \\
p = \text{Proportion (proportion used in this case is .2)} \\
S = \text{Sample} \\
\]

\[
N / [(E / z)^2 * (N – 1)) / (p * (1 – p)) + 1] = S
\]
The random samples are pulled from the IDS/PSDS file from two months before the review month (i.e. if August is the review month, the random sample will be taken from June’s IDS/PSDS data file).

**Regional Review Schedule**

Following is the review schedule for FFY 2008:

<table>
<thead>
<tr>
<th>Month</th>
<th>Region</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2007</td>
<td>15</td>
</tr>
<tr>
<td>December 2007</td>
<td>8</td>
</tr>
<tr>
<td>January 2008</td>
<td>(none due to SACWIS implementation)</td>
</tr>
<tr>
<td>February 2008</td>
<td>4</td>
</tr>
<tr>
<td>March 2008</td>
<td>6</td>
</tr>
<tr>
<td>April 2008</td>
<td>5 &amp; 12</td>
</tr>
<tr>
<td>May 2008</td>
<td>11</td>
</tr>
<tr>
<td>June 2008</td>
<td>3 &amp; 9</td>
</tr>
<tr>
<td>July 2008</td>
<td>7 &amp; 17</td>
</tr>
<tr>
<td>August 2008</td>
<td>1 &amp; 2</td>
</tr>
<tr>
<td>September 2008</td>
<td>10 &amp; 16</td>
</tr>
<tr>
<td>October 2008 **</td>
<td>13</td>
</tr>
<tr>
<td>November 2008 **</td>
<td>14</td>
</tr>
</tbody>
</table>

* Dates subject to change as necessary
** Abbreviated review

2. Field Operations Case Reviews (County Director Reviews)

County directors review five cases a month and supervisors review one case per month per worker in each county to ensure that every county is reviewed and there are sufficient case reviews to track performance at the county and region levels. While primarily a supervisory tool, data from the field operations case reviews will be used to assess the Family-Centered Practice Model innovation sites described in this PIP, including assessment of the quality intake and screening process implementation.

Currently the field operations case review results are tracked in a stand-alone database; these are in the process of being incorporated into the SHINES data system. The field operations case review guide is being aligned with the PEAS review guides and will be tracked in the SHINES data system beginning November 2008. Previously, county directors selected cases for review; effective August 2008, the SHINES system will pull random samples for those reviews.

Supervisor reviews are primarily a management tool and will be tracked in the field operations case review system; however, these reviews will be tracked separately from the reviews conducted by county directors.
3. Kenny A Consent Decree Monitoring for Fulton & DeKalb Counties

The Kenny A Consent Decree requires the State Defendants – the Georgia Department of Human Resources (DHR) and its Division of Family and Children Services (DFCS) – to provide certain services and interventions to, and to achieve certain outcomes on behalf of, children in the plaintiff class – defined as “…children who have been, are, or will be alleged or adjudicated deprived who (1) are or will be in the custody of any of the State Defendants; and (2) have or will have an open case in Fulton County DFCS or DeKalb County DFCS.”

Termination of the Kenny A Consent Decree is primarily outcome driven. That is, to exit federal court oversight, the State Defendants have agreed to achieve and sustain a series of 31 outcomes related to the safety, permanency, and well-being of the DeKalb and Fulton County children served by DFCS.

Because of the consent decree and its associated monitoring, outcome measures for Fulton and DeKalb counties are those specified in the decree. Following is a summary table of the outcome measures from the first monitoring report. A full list of the outcome measures and the monitoring methodology from that report are included as appendices to this section.

<table>
<thead>
<tr>
<th>Thematic Grouping of Kenny A Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Safety</strong></td>
</tr>
<tr>
<td>1. Children in Foster Care are Safe from Maltreatment</td>
</tr>
<tr>
<td>• Consent Decree Outcomes 1, 2, and 3 related to investigations of maltreatment in care.</td>
</tr>
<tr>
<td>• Consent Decree Outcomes 5 and 6 related to the incidents of substantiated maltreatment in care and corporal punishment.</td>
</tr>
<tr>
<td><strong>Permanency</strong></td>
</tr>
<tr>
<td>2. Children in Placements Maintain Family Connections</td>
</tr>
<tr>
<td>• Consent Decree Outcomes 7, 16, and 19 related to keeping children connected to family and community at the time of placement.</td>
</tr>
<tr>
<td>• Consent Decree Outcomes 21 and 23 related to visitation among family members.</td>
</tr>
<tr>
<td>3. Children Achieve Permanency</td>
</tr>
<tr>
<td>• Consent Decree Outcomes 4 and 14 related to re-entry into care.</td>
</tr>
<tr>
<td>• Consent Decree Outcomes 8a &amp; b, 9, 10, 11, 12, 13, and 15 related to positive permanency exits.</td>
</tr>
<tr>
<td>• Consent Decree Outcomes 27 and 28 related to timely and complete court review of permanency efforts.</td>
</tr>
<tr>
<td><strong>Well-Being</strong></td>
</tr>
<tr>
<td>4. Children Experience Stable Placements and Worker Continuity</td>
</tr>
<tr>
<td>• Consent Decree Outcome 17 related to placement stability.</td>
</tr>
<tr>
<td>• Consent Decree Outcomes 18, 20, and 22 related to worker continuity and contacts with children and caregivers.</td>
</tr>
<tr>
<td>5. Children and Youth Receive the Services they Need</td>
</tr>
<tr>
<td>• Consent Decree Outcome 24 related to the educational achievement of those youth who “age out” of foster care.</td>
</tr>
<tr>
<td>• Consent Decree Outcome 30 related to meeting children’s service needs.</td>
</tr>
</tbody>
</table>
### Strengthened Infrastructure

6. **Effective Oversight of Placement Settings**
   - Consent Decree Outcomes 25 and 31 related to placement setting conditions.

7. **Timely and Complete Court Orders**
   - Consent Decree Outcomes 26 and 29 related to DFCS authority to assume and continue custody.

Included in the Kenny A monitoring data are:
- Monthly visitation reports (worker-child, sibling, caregiver, parent-child when goal is reunification)
- Medical, dental and mental health tracking reports (coming due, totals by type of case - adoption, foster care, resource development, specialized unit)
- FTM tracking reports
- CCFA and MDT tracking logs

### 4. Internal Data System (IDS)

This is the legacy child welfare data tracking system from which outcome reporting data have been provided. Now that SHINES is fully operational, this system is view-only; however, historical data may continue to be accessed by the Data Analysis & Reporting Section through reports and queries.

The incorporation of IDS historical data into the SHINES system is under consideration, but no decision has been made yet.

The Adoption and Foster Care Reporting and Analysis System (AFCARS), included in IDS and SHINES, collects case level information on all children in foster care for whom state child welfare agencies have responsibility for placement, care or supervision and on children who are adopted under the auspices of the State's public child welfare agency.

### 5. Georgia SHINES

This is the comprehensive statewide automated child welfare information system (SACWIS) that is replacing IDS. This system, also a primary data source for the PIP, is used to track and manage cases and replaces many of the paper forms being used in the field.

SHINES was designed to meet federal SACWIS requirements and supports the reporting of data to federal systems, including the Adoption and Foster Care Analysis Reporting System and the National Child Abuse and Neglect Data System.

SHINES assists DFCS case managers throughout the entire lifecycle of a case -- from the initial intake of information through investigation to foster care placement and adoption. In each of those steps, SHINES gives case managers access to case histories (which helps eliminate duplicative data entry), information on placement and adoption resources, and state policies.

GA PIP 8/07/08
SHINES also:
- Allows staff to process invoices, track payments, and update information on providers and caretakers
- Interfaces with other statewide systems such as Case Plan Reporting System (foster care case plans accessible to courts), Targeted Case Management, SUCCESS (economic support system information), SMILE (accounting) and STARS (child support system)

SHINES was deployed statewide as of June 2008. Modifications or enhancements to the SHINES system that are recommended based on the FCPM and/or the federal technical assistance received will be prioritized and implemented as funding allows.

6. Adoption Data and Matching (ADAM) System

This system provides data on children and families in the adoption process and will be used in the evaluation of the Permanency Unit Pilot. System reports include:
- Adoption AFCARS
- Quarterly Child and Family Management Reports
- Overdue Life History Report
- My Turn Now exception report
- Monthly and annual statistical reports
- Ad-hoc reports

Information is collected on children from the field in a number of ways as driven by current policy requirements. The field is required to notify the Adoption Exchange (Adoption Unit data base) when a child becomes free for adoption, when a life history is completed and approved, and through six- month updates to the life history. The Exchange is copied when a family is selected for a child; is provided a copy of the adoption placement agreement, letter of release, documents sent cover letter; and is notified of finalization of the adoption. Cross-checks to ensure the Permanency Unit is informed of all children free for adoption occur as a result of requirements of state law for Juvenile Courts to inform this unit of all terminations of parental rights. Finalizations are confirmed through receipt of adoption petitions and final orders of adoption from the Superior Courts.

Information is collected on families who inquire or apply to foster/adopt or adopt as driven by current policy. The field is required to notify the Exchange of inquiries, entrance into IMPACT, completion and approval of a family assessment, annual updates of those assessments, selection of a family for a child, placement, and the steps toward and including finalization.

The functionality in ADAM, with the exception of the Adoption AFCARS file, will be incorporated into SHINES and available for use by October 2008.
7. Other

Metis Associates

Metis is a private consulting firm and the evaluator for the Region 17 foster parent support pilot. The local Family Connection contracted with Metis to set up baselines and track progress for this initiative. The firm uses IDS data supplemented by survey tools for its evaluation. The Metis evaluation is the source for the Region 17 measures.

Proposed Statewide Outcome Measures & Data Sources

Following are the proposed outcome measures and data sources for Georgia’s PIP. The first set of measures are statewide measures; the next set of measures are pilot-specific measures limited to the regions or counties included in the pilot. The outcomes baselines and goals are included in a separate table.

Data measures are for four quarters, reported on a rolling quarter basis; therefore, for measures specified in this PIP, baseline data are for the period January 1 – December 31, 2007, the last four completed quarters.

Item 1: Timeliness of initiating investigations of reports of child maltreatment

<table>
<thead>
<tr>
<th>Proposed Measure:</th>
<th>Percent of cases for which the item is rated a strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Source:</td>
<td>PEAS (Quality Assurance) Regional Case Reviews</td>
</tr>
<tr>
<td>Discussion:</td>
<td>While these data are being collected in SHINES, there is not enough historical data to establish a baseline (IDS only included report date and investigation completion date); therefore, the QA regional review data will be used to establish the baseline and track performance.</td>
</tr>
</tbody>
</table>

Item 4: Risk of harm

<table>
<thead>
<tr>
<th>Proposed Measure:</th>
<th>Percent of cases for which the item is rated a strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Source:</td>
<td>PEAS (Quality Assurance) Regional Case Reviews</td>
</tr>
<tr>
<td>Discussion:</td>
<td></td>
</tr>
</tbody>
</table>

Item 7: Permanency goal for child

<table>
<thead>
<tr>
<th>Proposed Measure:</th>
<th>Percent of cases for which the item is rated a strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Source:</td>
<td>PEAS (Quality Assurance) Regional Case Reviews</td>
</tr>
<tr>
<td>Discussion:</td>
<td></td>
</tr>
</tbody>
</table>
**Item 17: Needs/services of child, parents and foster parents**

<table>
<thead>
<tr>
<th>Proposed Measure:</th>
<th>Percent of cases for which the item is rated a strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Source:</td>
<td>PEAS (Quality Assurance) Regional Case Reviews</td>
</tr>
<tr>
<td>Discussion:</td>
<td>Needs and services data are not collected in IDS; the only source of historical data are case reviews.</td>
</tr>
</tbody>
</table>

**Item 18: Child/family involvement in case planning**

<table>
<thead>
<tr>
<th>Proposed Measure:</th>
<th>Percent of cases for which the item is rated a strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Source:</td>
<td>PEAS (Quality Assurance) Regional Case Reviews</td>
</tr>
<tr>
<td>Discussion:</td>
<td>Needs and services data are not collected in IDS; while there are some aspects tracked in SHINES; the only source of historical data is case reviews. Note that the baseline for this item is the CFSR finding as PEAS reviews did not focus on this item in the same way historically.</td>
</tr>
</tbody>
</table>

**Item 19: Worker visits with child**

<table>
<thead>
<tr>
<th>Proposed Measure:</th>
<th>Percent of cases for which the item is rated a strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Source:</td>
<td>PEAS (Quality Assurance) Regional Case Reviews</td>
</tr>
<tr>
<td>Discussion:</td>
<td>Visitation data is not collected in IDS.</td>
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</table>

**Item 20: Worker visits with parents**

<table>
<thead>
<tr>
<th>Proposed Measure:</th>
<th>Percent of cases for which the item is rated a strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Source:</td>
<td>PEAS (Quality Assurance) Regional Case Reviews</td>
</tr>
<tr>
<td>Discussion:</td>
<td>Visitation data is not collected in IDS.</td>
</tr>
</tbody>
</table>
**Item 23: Mental health of child**

<table>
<thead>
<tr>
<th>Proposed Measure:</th>
<th>Percent of cases for which the item is rated a strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Source:</td>
<td>PEAS (Quality Assurance) Regional Case Reviews</td>
</tr>
<tr>
<td>Discussion:</td>
<td>Data on mental health needs/services is not collected in IDS. Note that the baseline for this item is the CFSR finding as PEAS reviews did not focus on this item in the same way historically.</td>
</tr>
</tbody>
</table>

As agreed at the May 28-29, 2008, meeting with ACF Children’s Bureau in Atlanta, the agency is not submitting incremental improvement goals for the above outcome measures pending recommendations for goals from the Children’s Bureau.
### PIP Summary Work Plan:
Summary of Primary Strategies and Technical Assistance to Support Outcome Achievement

<table>
<thead>
<tr>
<th>Primary Strategies &amp; CFSR Items Addressed</th>
<th>Key Concerns</th>
<th>TA Resources Needed</th>
</tr>
</thead>
</table>
| **I. Develop and Pilot Family-Centered Practice Model** | Assignment of response time frames (Family support (diversion), 24 hours, 5 day)  
Contact/assessment of each child victim  
Inconsistent interpretation of when a case warrants a subsequent referral  
New reports of abuse taken in isolation  
Serious allegations not accepted by the agency  
Inconsistencies in placing with relative/safety resources  
Failure to assess needs of relative/safety resources  
All household members not assessed  
Non-custodial fathers/boyfriends not always included in the assessment  
Children with elevated behavioral needs bounced from one place to the next until an appropriate LOC assessment determined correct placement resource  
Inconsistent practice in relative home evaluations  
No clear documentation related to separation of siblings or efforts to place children together subsequent to their initial separation  
Newly removed children (with siblings in foster care) treated in isolation  
Failure to hold external providers for contracted services responsible for quality work  
Process for family participation in developing written case plan  
Process for family participation in case plan review  
Families were not involved in FTMs  
Poor documentation of information gleaned from | Casey Family Foundation assistance in developing the Family-Centered Practice Model  
National Resource Center for Child Protective Services on most effective use of risk assessment tool  
National Resource Center on Family-Centered Practice and Permanency Planning on “Every Child, Every Month” purposeful caseworker-child visits |

| **II. Strengthen policy and improve practice to ensure safety of children** | Timely initiation of investigation (Item 1)  
Risk of harm to children (Item 4)  
Stability of foster care placement (Item 6)  
Permanency goal for the child (Item 7)  
Relative placement (Item 15)  
Relationship of child in care with parents (Item 16)  
Needs and services of child, parents and foster parents/caregiver (Item 17)  
Worker visits with children (Item 19)  
Worker visits with parents (Item 20)  
Educational needs of the child (Item 21)  
Physical health needs of the child (Item 22)  
Mental health needs of the child (Item 23)  
Systemic Factors | Ensure each child has a written case plan developed with child’s parents (Item 25)  
Periodic review of each child’s status, at least every 6 months (Item 26)  
Effective use of cross-jurisdictional resources (Item 45; see Strategy V) |

**GA PIP** 8/07/08
<table>
<thead>
<tr>
<th>Primary Strategies &amp; CFSR Items Addressed</th>
<th>Key Concerns</th>
<th>TA Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>FTM(s)</td>
<td>Poor documentation of family involvement in FTMs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Children not involved in FTMs when appropriate (school-age)</td>
<td></td>
</tr>
<tr>
<td>Primary Strategies &amp; CFSR Items Addressed</td>
<td>Key Concerns</td>
<td>TA Resources Needed</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>III. Improve Permanency Outcomes for Children and Families</strong></td>
<td>No evidence of aftercare for teens returned home</td>
<td>National Resource Center on Legal and Judicial Issues, American Bar Association</td>
</tr>
<tr>
<td>Permanency goal for the child (Item 7)</td>
<td>Court continuances by agency, SAAG, GAL or parent attorney</td>
<td></td>
</tr>
<tr>
<td>Reunification, guardianship, or permanent placement with relatives (Item 8)</td>
<td>Delays in receiving court orders</td>
<td></td>
</tr>
<tr>
<td>Adoption (Item 9)</td>
<td>Permanency orders not addressing permanency goals for child or reasonable efforts to achieve permanency</td>
<td></td>
</tr>
<tr>
<td>Permanency goal of other permanent planned living arrangement (Item 10)</td>
<td>Compelling reasons for not filing for TPR not documented</td>
<td></td>
</tr>
<tr>
<td>Needs and services of child, parents, and foster parents (Item 17)</td>
<td>Neither families nor children engaged in the permanency planning process</td>
<td>National Resource Center on Family-Centered Practice and Permanency Planning</td>
</tr>
<tr>
<td><strong>Systemic Factors</strong></td>
<td>Paternal family excluded from permanency planning</td>
<td></td>
</tr>
<tr>
<td>Permanency hearings for each child in foster care (Item 27)</td>
<td>Case managers not showing or not being prepared for court</td>
<td></td>
</tr>
<tr>
<td>Process for termination of parental rights (Item 28)</td>
<td>Reunification always selected for permanency goal and maintained for 12 months even though the plan may not be appropriate</td>
<td></td>
</tr>
<tr>
<td>Notification of hearings and reviews for foster parents, pre-adoptive parents and relative caregivers (Item 29)</td>
<td>Value set of not pursuing TPR unless there is an identified adoptive resource available</td>
<td></td>
</tr>
<tr>
<td>Diligent recruitment of potential foster and adoptive families (Item 44)</td>
<td>Notification of right to be heard</td>
<td></td>
</tr>
<tr>
<td>Cross-jurisdictional resources for timely placements (Item 45)</td>
<td>Timely TPR</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Timely permanency hearings</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Diligent recruitment</td>
<td></td>
</tr>
<tr>
<td>Primary Strategies &amp; CFSR Items Addressed</td>
<td>Key Concerns</td>
<td>TA Resources Needed</td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>--------------</td>
<td>---------------------</td>
</tr>
<tr>
<td><strong>IV. Improve Service Array and Foster Parent Recruitment/Retention</strong></td>
<td>Disconnect between services identified through formal and informal assessments to the services provided.</td>
<td>National Resource Center for Organizational Improvement</td>
</tr>
<tr>
<td>Services to family to protect children in home and prevent removal (Item 3)</td>
<td>Lack of knowledge and access to services (urban vs. rural and transportation)</td>
<td>National Resource Center for Independent Living Programs</td>
</tr>
<tr>
<td>Stability of foster care placement (Item 6)</td>
<td>Case plans utilized over and over with dates marked through</td>
<td>Casey Family Foundation assistance with the Family-Centered Practice Model</td>
</tr>
<tr>
<td>Permanency goal for the child (Item 7)</td>
<td>Case plans were “cookie cutter”; lack of individualized service plans</td>
<td></td>
</tr>
<tr>
<td>Reunification, guardianship or permanent placement with relatives (Item 8)</td>
<td>Pertinent information on case plans not completed or updated</td>
<td></td>
</tr>
<tr>
<td>Preserving connections (Item 14)</td>
<td>Lack of parental signatures</td>
<td></td>
</tr>
<tr>
<td>Placement with siblings (Item 12)</td>
<td>Little to no evidence of concurrent planning</td>
<td></td>
</tr>
<tr>
<td>Permanency goal of Other Permanency Planned Living Arrangement (Item 10)</td>
<td>Little evidence of engagement with paternal family members</td>
<td></td>
</tr>
<tr>
<td>Visiting with parents and siblings (Item 13)</td>
<td>Incarcerated parents not engaged in the process</td>
<td></td>
</tr>
<tr>
<td>Relative placements (Item 15)</td>
<td>Little evidence of family engagement in case plans</td>
<td></td>
</tr>
<tr>
<td>Relationship of child in care with parents (Item 16)</td>
<td>Poor documentation of contacts with parents and children</td>
<td></td>
</tr>
<tr>
<td>Needs and services of child, parents, and foster parents/caregiver (Item 17)</td>
<td>Little evidence of relative being engaged to identify needs of the family/child or of services being provided</td>
<td></td>
</tr>
<tr>
<td>Child and family involvement in case planning (Item 18)</td>
<td>Little evidence of the family participating in discharge planning/case closure</td>
<td></td>
</tr>
<tr>
<td>Worker visits with child (Item 19)</td>
<td>Poor assessment of ILP teen needs</td>
<td></td>
</tr>
<tr>
<td>Worker visits with parents (Item 20)</td>
<td>Teens were not engaged in their case planning/permanency planning activities</td>
<td></td>
</tr>
<tr>
<td>Education needs of the child (Item 21)</td>
<td>No evidence of aftercare for teens returned home</td>
<td></td>
</tr>
<tr>
<td>Physical health needs of the child (Item 22)</td>
<td>Children unable to maintain a connection to their removal communities or engaged in their existing community</td>
<td></td>
</tr>
<tr>
<td>Mental health needs of the child (Item 23)</td>
<td>Services not available to address identified needs</td>
<td></td>
</tr>
</tbody>
</table>

**Systemic Factors**
- Array of services to assess strengths and needs of families and children (Item 35)
- Services accessible in all political jurisdictions (Item 36)
- Services individualized to meet unique needs of children and families (Item 37)
### Statewide Measures

<table>
<thead>
<tr>
<th>Outcome/Systemic Factor: Safety 1</th>
<th>Item: 1</th>
<th>Timeliness of Investigations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance as Measured in Final Report</td>
<td>76%</td>
<td></td>
</tr>
<tr>
<td>Performance as Measured at Baseline/Source Data Period</td>
<td>Data source: PEAS Regional Case Reviews</td>
<td></td>
</tr>
<tr>
<td>Negotiated Improvement Goal</td>
<td>Improvement goal to be negotiated with ACF</td>
<td></td>
</tr>
<tr>
<td>Method of Measuring Improvement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Renegotiated Improvement Goal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Status (Enter the current quarter measurement for the reported quarter.)</td>
<td>Q1</td>
<td>Q2</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Outcome/Systemic Factor: Safety 2</th>
<th>Item: 4</th>
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<tbody>
<tr>
<td>Performance as Measured in Final Report</td>
<td>68%</td>
</tr>
<tr>
<td>Performance as Measured at Baseline/Source Data Period</td>
<td>Data source: PEAS Regional Case Reviews</td>
</tr>
<tr>
<td>Negotiated Improvement Goal</td>
<td>Improvement goal to be negotiated with ACF</td>
</tr>
<tr>
<td>Method of Measuring Improvement</td>
<td></td>
</tr>
<tr>
<td>Renegotiated Improvement Goal</td>
<td></td>
</tr>
<tr>
<td>Status (Enter the current quarter measurement for the reported quarter.)</td>
<td>Q1</td>
</tr>
<tr>
<td>Outcome/Systemic Factor: <strong>Permanency 1</strong></td>
<td>Item: <strong>7</strong></td>
</tr>
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<td>------------------------------------------</td>
<td>------------</td>
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<tr>
<td>Performance as Measured in Final Report</td>
<td>60%</td>
</tr>
<tr>
<td>Performance as Measured at Baseline/Source Data Period</td>
<td>Data source: PEAS Regional Case Reviews</td>
</tr>
<tr>
<td>Negotiated Improvement Goal</td>
<td>Improvement goal to be negotiated with ACF</td>
</tr>
<tr>
<td>Method of Measuring Improvement</td>
<td></td>
</tr>
<tr>
<td>Renegotiated Improvement Goal</td>
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<tr>
<td>Status (Enter the current quarter measurement for the reported quarter.)</td>
<td>Q1</td>
</tr>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Outcome/Systemic Factor: <strong>Well-Being 1</strong></th>
<th>Item: <strong>17</strong></th>
<th>Needs and Services of Child, Parents and Foster Parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance as Measured in Final Report</td>
<td>40%</td>
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<tr>
<td>Performance as Measured at Baseline/Source Data Period</td>
<td>Data source: PEAS Regional Case Reviews</td>
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<tr>
<td>Negotiated Improvement Goal</td>
<td>Improvement goal to be negotiated with ACF</td>
<td></td>
</tr>
<tr>
<td>Method of Measuring Improvement</td>
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<td></td>
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<tr>
<td>Renegotiated Improvement Goal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Status (Enter the current quarter measurement for the reported quarter.)</td>
<td>Q1</td>
<td>Q2</td>
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<td></td>
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</table>
### Part C (1), continued

<table>
<thead>
<tr>
<th>Outcome/Systemic Factor: <strong>Well-Being 1</strong></th>
<th>Item: <strong>18</strong></th>
<th>Child and Family Involvement in Case Planning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance as Measured in Final Report</td>
<td>27%</td>
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</tr>
<tr>
<td>Performance as Measured at Baseline/Source Data Period</td>
<td>Data source: PEAS Regional Case Reviews</td>
<td></td>
</tr>
<tr>
<td>Negotiated Improvement Goal</td>
<td>Improvement goal to be negotiated with ACF</td>
<td></td>
</tr>
<tr>
<td>Method of Measuring Improvement</td>
<td></td>
<td></td>
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<tr>
<td>Renegotiated Improvement Goal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Status (Enter the current quarter measurement for the reported quarter.)</td>
<td>Q1</td>
<td>Q2</td>
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<table>
<thead>
<tr>
<th>Outcome/Systemic Factor: <strong>Well-Being 1</strong></th>
<th>Item: <strong>19</strong></th>
<th>Worker Visits with Child</th>
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</thead>
<tbody>
<tr>
<td>Performance as Measured in Final Report</td>
<td>80%</td>
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<tr>
<td>Performance as Measured at Baseline/Source Data Period</td>
<td>Data source: PEAS Regional Case Reviews</td>
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<tr>
<td>Negotiated Improvement Goal</td>
<td>Improvement goal to be negotiated with ACF</td>
<td></td>
</tr>
<tr>
<td>Method of Measuring Improvement</td>
<td></td>
<td></td>
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<tr>
<td>Renegotiated Improvement Goal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Status (Enter the current quarter measurement for the reported quarter.)</td>
<td>Q1</td>
<td>Q2</td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td>Outcome/Systemic Factor: Well-Being 1</td>
<td>Item: 20</td>
<td>Worker Visits with Parents</td>
</tr>
<tr>
<td>--------------------------------------</td>
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<td>-----------------------------</td>
</tr>
<tr>
<td>Performance as Measured in Final Report</td>
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<tr>
<td>Performance as Measured at Baseline/Source Data Period</td>
<td>Data source: PEAS Regional Case Reviews</td>
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<tr>
<td>Negotiated Improvement Goal</td>
<td>Improvement goal to be negotiated with ACF</td>
<td></td>
</tr>
<tr>
<td>Method of Measuring Improvement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Renegotiated Improvement Goal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Status (Enter the current quarter measurement for the reported quarter.)</td>
<td>Q1</td>
<td>Q2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Outcome/Systemic Factor: Well-Being 3</th>
<th>Item: 23</th>
<th>Mental Health of Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance as Measured in Final Report</td>
<td>57.5%</td>
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</tr>
<tr>
<td>Performance as Measured at Baseline/Source Data Period</td>
<td>Data source: PEAS Regional Case Reviews</td>
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</tr>
<tr>
<td>Negotiated Improvement Goal</td>
<td>Improvement goal to be negotiated with ACF</td>
<td></td>
</tr>
<tr>
<td>Method of Measuring Improvement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Renegotiated Improvement Goal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Status (Enter the current quarter measurement for the reported quarter.)</td>
<td>Q1</td>
<td>Q2</td>
</tr>
</tbody>
</table>
**PIP Agreement Form**

The PIP should be signed and dated by the Chief Executive Officer of the State child welfare agency and by the Regional Administrator for the Children’s Bureau Regional Office responsible for the State. The approved PIP with original signature must be retained in the Children’s Bureau Regional Office. A hard copy of the approved PIP must be submitted to the following parties immediately upon approval:

- State child welfare agency
- Children’s Bureau (Child and Family Services Review staff)

**Agreements**

The following Federal and State officials agree to the content and terms of the attached Program Improvement Plan:

<table>
<thead>
<tr>
<th>Name of State Executive Officer for Child Welfare Services</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Children’s Bureau</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Strategy I. Develop and Pilot Family-Centered Practice Model (FCPM)</td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>Goals</strong></td>
<td><strong>Actions</strong></td>
</tr>
<tr>
<td>----------</td>
<td>-------------</td>
</tr>
<tr>
<td>A.</td>
<td>Develop and pilot a Family-Centered Practice Model (FCPM)</td>
</tr>
<tr>
<td></td>
<td>Obtain internal and external stakeholder feedback related to FCPM development and planning</td>
</tr>
<tr>
<td></td>
<td>Incorporate current Family Preservation practice into FCPM</td>
</tr>
<tr>
<td></td>
<td>Revise/update policies to be consistent with the FCPM pilot in innovation sites</td>
</tr>
<tr>
<td></td>
<td>Develop FCPM leadership training approach and related materials</td>
</tr>
<tr>
<td></td>
<td>Provide Leadership Development Training on FCPM for regional directors, county directors, field program specialists, supervisors and middle managers in innovation sites and state office staff</td>
</tr>
<tr>
<td></td>
<td>Provide FCPM training to front line case staff and supervisors, field program specialists, program administrators and program directors, and county directors in innovation sites on FCPM policies and practices</td>
</tr>
<tr>
<td></td>
<td>Establish measures and baseline(s) and set goal(s) for measuring FCPM outcomes and incremental improvements in innovation sites</td>
</tr>
<tr>
<td>Goals</td>
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<td>A. (continued)</td>
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**Strategy I. Develop and Pilot Family-Centered Practice Model (FCPM)**

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<thead>
<tr>
<th>Goals</th>
<th>Actions</th>
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<th>Person Responsible</th>
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<th>CFSR Safety Outcomes</th>
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<th>CFSR Well-Being Outcomes</th>
<th>Systemic Factors</th>
<th>CFSR Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. Improve and expand the Family Team Meeting practice statewide</td>
<td>1. Revise/update FTM policies to reflect best practice in family team meetings, including engagement of families and community resources in the family team meeting process, good documentation, and shared decision-making; establish clear practice guidelines for using FTM throughout the life of a case (case planning, change in placement, discharge, etc.)</td>
<td>Copy of revised FTM policy and practice, copy of documentation tool</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Policy Unit, Training Unit, Field Operations, Family Services Section Director</td>
<td>Quarter 2</td>
<td>1, 2</td>
<td>1, 2</td>
<td>1, 2</td>
<td>Case Review System</td>
<td>All</td>
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<tr>
<td></td>
<td>2. Update FTM policies and/or practice in ODIS (web-based policy manual) as adopted</td>
<td>Quarterly updates</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Policy Unit</td>
<td>Quarter 2</td>
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<td></td>
<td>3. Send email blast notification(s) to Social Services staff regarding updated FTM policies and/or practice and posting</td>
<td>Copy of email and distribution list</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit Education &amp; Training Section</td>
<td>Quarter 2</td>
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<td></td>
<td>4. Enhance FTM competency training</td>
<td>Copy of FTM training materials</td>
<td>Education &amp; Training Section Director Education &amp; Training Section</td>
<td>Education &amp; Training Section</td>
<td>Quarter 3</td>
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<td>5. Provide revised intensive FTM competency training for trainers for FTM facilitators, to include mentor, practice observation and certification enhancements</td>
<td>FTM training attendance</td>
<td>Education &amp; Training Section Director Education &amp; Training Section</td>
<td>Education &amp; Training Section</td>
<td>Quarter 3</td>
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<td></td>
<td>6. Promote and provide introductory FTM training opportunities for partners in FCPM innovation sites on a voluntary basis</td>
<td>Training invitation, invitation list and attendance</td>
<td>Education &amp; Training Section Director Education &amp; Training Section</td>
<td>Education &amp; Training Section</td>
<td>Quarter 3</td>
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<td>7. Offer FTM training quarterly for veteran staff, facilitators and approved community partners</td>
<td>Training attendance</td>
<td>Education &amp; Training Section Director Education &amp; Training Section</td>
<td>Education &amp; Training Section</td>
<td>Quarter 3</td>
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<td></td>
<td>8. Incorporate FTM training into new worker and new supervisor training</td>
<td>Copy of training curricula PEAS case review results, SHINES data reports</td>
<td>Education &amp; Training Section Director Deputy Director for Field Operations</td>
<td>Education &amp; Training Section PEAS, Data Analysis &amp; Reporting, Accountability Officer</td>
<td>Quarter 3</td>
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<td>9. Track changes in the usage of family team meetings</td>
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<td>Quarter 4-8</td>
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### Strategy I. Develop and Pilot Family-Centered Practice Model (FCPM)

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</thead>
<tbody>
<tr>
<td>C. Promote placement stability and permanency through caseworker-child visit statewide initiative (<em>Every Child Every Month</em>)</td>
<td>1 Obtain technical assistance from National Resource Center on Family-Centered Practice and Permanency Planning to develop policy and training curricula as well as to train and develop internal training capacity on &quot;Every Child Every Month&quot; (ECEM, purposeful case manager-child visitation)</td>
<td>Copy of updated policy and training curricula</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Program Director for Promoting Safe &amp; Stable Families, Family Services Section Director</td>
<td>Quarter 1</td>
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<td>6,17,19</td>
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<td></td>
<td>2 Provide ECEM Train-the-Trainer training (currently scheduled for July 2008) to professional excellence training staff and to ECEM practice champions, select field program specialists, supervisors and program administrators, who will then co-train with professional excellence training staff</td>
<td>ECEM train-the-trainer training attendance</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Education &amp; Training and Family Services Section Directors, Professional Excellence and Promoting Safe &amp; Stable Families</td>
<td>Quarter 1</td>
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<td></td>
<td>3 Provide ECEM training for foster care supervisory and specialist staff in all regions (currently scheduled for July - October 2008)</td>
<td>ECEM training attendance</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Education &amp; Training and Family Services Section Directors, Professional Excellence and Promoting Safe &amp; Stable Families</td>
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<td>4 Incorporate &quot;Every Child Every Month&quot; training into new worker and new supervisor training for Foster Care</td>
<td>Copy of ECEM training curricula</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Education &amp; Training and Family Services Section Directors, Policy Unit, Family Services Section Director</td>
<td>Quarter 3</td>
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<td></td>
<td>5 Update policies and/or practice in ODIS (web-based policy manual) for caseworker-child visitation policies as adopted</td>
<td>Quarterly updates</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Policy Unit, Family Services Section Director</td>
<td>Quarter 3</td>
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<td></td>
<td>6 Send email blast notification(s) to Social Services staff regarding updated caseworker visitation policies and/or practice and posting</td>
<td>Copy of email and distribution list</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Policy Unit, Family Services Section Director</td>
<td>Quarter 3</td>
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<td></td>
<td>7 Provide ECEM training for new and veteran foster care case managers in all regions (planned for October 2008 - September 2009)</td>
<td>ECEM training attendance</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Education &amp; Training and Family Services Section Directors</td>
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<tr>
<td>A.</td>
<td>Develop and distribute to intake staff statewide quality screening intake tool</td>
<td>1 Develop and distribute a uniform set of questions to be used by intake staff for referrals of suspected child abuse or neglect</td>
<td>Copy of screening questions and related correspondence</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 1</td>
<td>1, 2</td>
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<td>1, 3, 4</td>
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<td></td>
<td>2 Revise/update policies and/or practice regarding quality intake &amp; screening, to include response urgency</td>
<td>Copy of screening and intake policy</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 1</td>
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<tr>
<td></td>
<td>3 Update screening/intake policies and/or practice protocols in ODIS (web-based policy manual) as adopted</td>
<td>Quarterly updates</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 2</td>
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<td></td>
<td>4 Send email blast notification(s) to Social Services staff regarding updated screening/ intake policies and/or practice and posting</td>
<td>Copy of email and distribution list</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 2</td>
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<td>5 Provide training on revised screening and intake process for screening and intake staff and supervisors for all regions</td>
<td>Screening/intake training curricula</td>
<td>Education &amp; Training Section Director</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 3</td>
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<td></td>
<td>6 Incorporate quality intake and screening tools into new worker and new supervisor training</td>
<td>Copy of training curricula</td>
<td>Education &amp; Training Section Director</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 3</td>
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<tr>
<td>B.</td>
<td>Improve ongoing risk and safety assessment tool usage statewide</td>
<td>1 Obtain consultation from National Resource Center for Child Protective Services as well as courts and agency staff using risk assessment tool more effectively</td>
<td>Documentation of TA visits/ correspondence/ telephone conferences/meetings</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 2</td>
<td>1, 2</td>
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<td>1, 3, 4, 7, 16, 17, 21, 22, 23, 35, 37, 45</td>
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<tr>
<td></td>
<td>2 Update/enhance policies and/or practice based on input from NRC-CPS related to risk assessment process</td>
<td>Copy of risk assessment policies and/or practice</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 3</td>
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<td></td>
<td>3 Update risk assessment policies and/or practice in ODIS (web-based policy manual)</td>
<td>Quarterly updates</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
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<td><strong>B. (continued)</strong></td>
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<td>5</td>
<td>Send email blast notification(s) to Social Services staff regarding updated risk assessment policies and practice and posting</td>
<td>Copy of email and distribution list Risk assessment training attendance Copy of training curricula</td>
<td>Deputy Director for Policy &amp; Practice Education &amp; Training Section Director</td>
<td>Family Services Section Director, Policy Unit Education &amp; Training Section</td>
<td>Quarter 3</td>
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<td></td>
<td>6</td>
<td>Provide CPS and Family Preservation training for supervisors and front line staff for all regions on revised risk assessment process</td>
<td></td>
<td>Education &amp; Training Section Director</td>
<td>Education &amp; Training Section</td>
<td>Quarter 3</td>
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<td>7</td>
<td>Incorporate risk assessment trainings into new worker and new supervisor training</td>
<td></td>
<td>Deputy Director for Field Operations</td>
<td>PEAS, Field Program Specialists, County Directors, Supervisors and front line staff</td>
<td>Quarter 4</td>
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<td>8</td>
<td>Track the practice of continuous re-assessment</td>
<td>PEAS case review results</td>
<td>Deputy Director of Field Operations</td>
<td>Regional Directors, County Directors, Field Program Specialists SHINES team</td>
<td>Quarters 4-8</td>
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<td>9</td>
<td>Identify and address common practice issues related to re-assessment</td>
<td>Leadership strategies meeting agendas and presentations Documentation of enhancements request; work order fulfillment</td>
<td>Deputy Director of Field Operations</td>
<td>As negotiated based on funding availability</td>
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<td>10</td>
<td>Update SHINES data collection system to reflect any change in risk assessment as needed and as funding is available</td>
<td></td>
<td>Deputy Director for Fiscal &amp; Administrative</td>
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<tr>
<td>C. Improve case documentation</td>
<td>1</td>
<td>Provide training for supervisors and front line staff for all regions on documentation and case records</td>
<td>Documentation training attendance Copy of training curricula</td>
<td>Education &amp; Training Section Director</td>
<td>Education &amp; Training Section</td>
<td>Quarter 5</td>
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<td>2</td>
<td>Incorporate documentation training into new worker and new supervisor training</td>
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<td>Education &amp; Training Section Director</td>
<td>Education &amp; Training Section</td>
<td>Quarter 6</td>
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## Strategy III: Improve Permanency Outcomes for Children and Families

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</thead>
<tbody>
<tr>
<td></td>
<td>A. Support Court Improvement Project (CIP) summits review of courts related to child abuse and neglect cases</td>
<td>1. Provide requested data to CIP on child welfare outcomes (safety, permanency, well-being)</td>
<td>Copies of data provided to CIP</td>
<td>Deputy Director for Fiscal &amp; Administrative Data Analysis &amp; Reporting</td>
<td>Quarter 1 1, 2</td>
<td>1, 2</td>
<td>1, 2, 3</td>
<td>Case Review System</td>
<td>All</td>
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<td></td>
<td>2. Assist CIP with summit presentations on model practices in permanency planning</td>
<td>Documentation of assistance</td>
<td>Deputy Director for Field Operations</td>
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<td></td>
<td>2. Assist CIP with summit presentations on model practices in permanency planning</td>
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<td>Deputy Director for Field Operations</td>
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<td>B. Support CIP review of courts related to child abuse and neglect cases to address problems of permanency, including adoption and APPLA</td>
<td>1. Provide permanency and APPLA data to CIP and collaborate in selection of counties for review (based on CIP selection process)</td>
<td>Copies of data provided to CIP</td>
<td>Deputy Director for Fiscal &amp; Administrative Data Analysis &amp; Reporting</td>
<td>Quarter 1</td>
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<td>Case Review System</td>
<td>7, 9, 10</td>
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<td>2. Meet with CIP, Office of Child Advocate (OCA), Council of Juvenile Court Judges (CJCJ) at least quarterly to go over CIP Court Compliance Officer reviews of agency/court files</td>
<td>Documentation of meetings, attendance list</td>
<td>Deputy Director for Field Operations</td>
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<td>3. Discuss issues raised by OCA that arise outside of summits and compliance reviews in quarterly DFCS-CIP-OCA meetings</td>
<td>Documentation of meetings</td>
<td>Deputy Director for Field Operations</td>
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<td>C. Support court process to notify parents, foster parents, pre-adoptive parents and relative caregivers regarding their rights related to hearings and case reviews</td>
<td>1. Support CIP annual survey of GA foster parents to identify areas where notice to foster parents is or is not occurring.</td>
<td>Copy of survey results</td>
<td>Deputy Director for Field Operations CIP, OCA</td>
<td>Quarter 2</td>
<td></td>
<td></td>
<td>Case Review System</td>
<td>29</td>
<td></td>
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<td></td>
<td>2. Support CIP training for foster parents on right to be heard at annual conference of the Adoptive and Foster Parent Association of Georgia</td>
<td>Copy of PowerPoint presentation</td>
<td>Deputy Director for Field Operations CIP, OCA</td>
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<td>3. Based on survey results and feedback from annual conference, identify needs and communicate with local entities (CFCS county office, foster parent associations and any foster care-related contractors) to address identified issues related to notice and right to be heard through presentations and other communications</td>
<td>Presentation agendas, attendance lists, and/or communications</td>
<td>Deputy Director for Field Operations CIP, OCA</td>
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**GA PIP 8/07/08**

**Page 7**
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<tbody>
<tr>
<td>D. Collaborate with federal and state partners to improve permanency outcomes for children</td>
<td>1 Request technical assistance from NRC in creating performance standards for SAAGs to improve SAAG performance</td>
<td>Copy of request for technical assistance</td>
<td>Deputy Director for Field Operations</td>
<td>CFSR Project Manager, Legal Services Officer</td>
<td>Quarter 1</td>
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<td>27, 28, 29</td>
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<td></td>
<td>2 Coordinate technical assistance from National Resource Center for Courts and the American Bar Association on working with Attorney General's office regarding legal representation</td>
<td>Documentation of TA received and summary of results</td>
<td>Deputy Director for Field Operations</td>
<td>Brenda Woodard (DHR Legal), CFSR Project Manager, Legal Services Officer</td>
<td>Quarter 1</td>
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<td>3 Set up a joint planning meeting to include DFCS, the AG's office and representatives from the NRC</td>
<td>Meeting agendas; list of attendees</td>
<td>Deputy Director for Field Operations</td>
<td>CFSR Project Manager, Legal Services Officer</td>
<td>Quarter 3</td>
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<tr>
<td>E. Cross-train SAAGs, GALs, parent attorneys, CJCJ, court staff, child fatality review committees and DFCS</td>
<td>1 Promote and provide training opportunities on permanency and court processes for juvenile justice-related stakeholders on a voluntary basis</td>
<td>Copy of invitation and PowerPoint presentation</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Education &amp; Training Unit, CIP</td>
<td>Quarter 3</td>
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<td>2 Provide at least one local training opportunity (summit) and one statewide opportunity (Child Placement Conference) a year for SAAGs, GALs, parent attorneys, CJCJ, court staff on permanency, DFCS and others</td>
<td>Training agenda, attendee list</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>CIP, OCA and NRC</td>
<td>Quarter 4</td>
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<tr>
<td>F. Increase timely achievement of permanency for children through Permanency Unit Pilot in Region 4</td>
<td>1 Generate strategies/methods for using Regional Permanency Unit to improve permanency for children in Region 4</td>
<td>Copy of strategies</td>
<td>Region 4 Director</td>
<td>Region 4 County Directors and Permanency Unit</td>
<td>Quarter 4</td>
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<td>5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16</td>
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<td></td>
<td>2 Track permanency outcomes and assess Regional Permanency Unit for statewide scalability based on feedback, cost, permanency data for Region 4</td>
<td>Summary of feedback received; permanency data reports</td>
<td>Deputy Director for Field Operations</td>
<td>PEAS, Deputy Director for Fiscal &amp; Administrative, Data Analysis &amp; Reporting</td>
<td>Quarter 6</td>
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### Strategy III: Improve Permanency Outcomes for Children and Families

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<tr>
<th>Goals</th>
<th>Actions</th>
<th>Evidence of Completion</th>
<th>Person Responsible</th>
<th>Supported By</th>
<th>Quarter Due</th>
<th>CFSR Safety Outcomes</th>
<th>CFSR Permanency Outcomes</th>
<th>CFSR Well-Being Outcomes</th>
<th>Systemic Factors</th>
<th>CFSR Items</th>
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<tbody>
<tr>
<td>G.</td>
<td>Update and/or develop policies and/or practice to improve permanency outcomes for children based on best practices</td>
<td>1 Request technical assistance from National Resource Center (NRC) for Permanency and Case Planning on identifying best practices, developing policy and training related to permanency and concurrent planning</td>
<td>Copy of request for technical assistance</td>
<td>Deputy Director for Field Operations</td>
<td>CFSR Project Manager</td>
<td>Quarter 1</td>
<td>1, 2</td>
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<td>5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16</td>
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<td>2 Update and/or develop policies and/or practice related to permanency and concurrent planning, including APPLA and adoption, based on technical assistance from the NRC</td>
<td>Copy of permanency/ concurrent planning policy</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 4</td>
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<td>3 Update permanency/concurrent planning policies and/or practice protocols in ODIS (web-based policy manual) as adopted</td>
<td>Quarterly updates</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 4</td>
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<td>4 Send email blast notification(s) to Social Services staff regarding updated permanency/concurrent planning policies and/or protocols and posting</td>
<td>Copy of email and distribution list</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 4</td>
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<td>H.</td>
<td>Train foster care supervisors and staff on best practices for achieving permanency</td>
<td>1 Track identification of appropriate permanency goals and reasonable efforts to achieve them</td>
<td>PEAS case review results</td>
<td>Accountability Officer</td>
<td>PEAS Unit</td>
<td>Quarter 2</td>
<td>1, 2</td>
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<td>2 Provide training for foster care supervisors and front line staff for all regions on permanency (APPLA, adoptions) and concurrent planning policies and practices</td>
<td>Permanency/ concurrent planning training attendance</td>
<td>Education &amp; Training Section Director</td>
<td>Education &amp; Training Section</td>
<td>Quarter 5</td>
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<td>3 Incorporate permanency/concurrent planning training into new worker and new supervisor training</td>
<td>Copy of training curricula</td>
<td>Education &amp; Training Section Director</td>
<td>Education &amp; Training Section</td>
<td>Quarter 6</td>
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<tr>
<td>A. Individualize services for family members to meet their specific needs as identified in the risk assessment</td>
<td>1 Update and/or develop policies and/or practice related to service planning</td>
<td>Copy of service planning policy</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 4</td>
<td>1, 2, 3</td>
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<td>1, 3, 4, 7, 16, 17, 21, 22, 23, 35, 37, 45</td>
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<td>2 Update policies and/or practice related to service planning in ODIS (web-based policy manual) as adopted</td>
<td>Quarterly updates</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
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<td>3 Send email blast notification(s) to Social Services staff regarding updated service planning policies and/or protocols and posting</td>
<td>Copy of email and distribution list</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
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<td>4 Track percentage of case plans that incorporate individualized, appropriate services for family members for individual needs identified in assessment</td>
<td>PEAS case review results</td>
<td>Deputy Director for Field Operations</td>
<td>PEAS, Field Program Specialists, County Directors, Supervisors and front line staff Education &amp; Training Section</td>
<td>Quarter 5</td>
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<td>5 Provide training for Social Services supervisors and front line staff for all regions on case planning, to include individualized service, permanency and concurrent planning</td>
<td>Training attendance</td>
<td>Education &amp; Training Section Director</td>
<td>Education &amp; Training Section</td>
<td>Quarter 6</td>
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<td>6 Incorporate service planning training into new worker and new supervisor training</td>
<td>Copy of training curricula</td>
<td>Education &amp; Training Section Director</td>
<td>Education &amp; Training Section</td>
<td>Quarter 6</td>
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<td>B. Improve availability of and access to services for families and children</td>
<td>1 Review results of service array survey conducted by the Governor's Office for Children and Families (GOCF) in partnership with the Office of the Child Advocate (OCA) as well as self-assessment results to identify service barriers/needs within regions</td>
<td>Summary of identified barriers and needs</td>
<td>Deputy Director for Field Operations</td>
<td>DHR and divisional state office leadership, the Governor's Office for Children and Families, OCA Regional and County Directors</td>
<td>To be determined once GOCF and OCA develop action plans First quarter following plan development</td>
<td>1, 2, 3</td>
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<td>1, 3, 4, 7, 16, 17, 21, 22, 23, 35, 37, 45</td>
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<td>2 Provide results of OCA survey to regional directors, who will communicate with community stakeholders and establish priorities for addressing critical services needed to achieve CFSR-related outcomes</td>
<td>Lists of regional director priorities as needed</td>
<td>Deputy Director for Field Operations</td>
<td>Regional Directors, Field Program Specialists</td>
<td>To be determined once GOCF and OCA develop action plans First quarter following plan development</td>
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<td>3 Regional directors to report on barriers and service array improvements at regularly scheduled Regional Leadership Lens Meetings</td>
<td>Copy of agendas</td>
<td>Deputy Director for Field Operations</td>
<td>Regional Directors, Field Program Specialists</td>
<td>First quarter following plan development</td>
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<td>B. (Continued)</td>
<td>4 Collaborate at state level through DHR Enterprise Meetings at least quarterly with mental health and/or public health and/or child support agencies to identify opportunities for service array enhancement; DFCS leadership to present service array issues to be addressed</td>
<td>Meeting agendas, notes</td>
<td>DHR Chief Operating Officer</td>
<td>DHR and divisional state office leadership</td>
<td>Quarter 1</td>
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<td>5 Participate in training of Local Interagency Planning Teams (LIPT: multi-agency teams that coordinate case planning for children in multiple systems with serious emotional disorders and substance abuse disorders)</td>
<td>Training attendance</td>
<td>DHR Consultant</td>
<td>Deputy Director for Field Operations, MHDDAD, Education &amp; Training, Regional Directors</td>
<td>Quarter 3</td>
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<td>6 Develop capacity to train case staff to participate in LIPT through a Train the Trainers for DFCS training staff</td>
<td>Training attendance</td>
<td>DHR Consultant</td>
<td>Deputy Director for Field Operations, MHDDAD, Education &amp; Training, Regional Directors</td>
<td>Quarter 3</td>
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<td>7 Provide LIPT training to designated case managers in all regions</td>
<td>Training attendance</td>
<td>DHR Consultant</td>
<td>Deputy Director for Field Operations, MHDDAD, Education &amp; Training, Regional Directors</td>
<td>Quarter 3</td>
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<td>8 Provide LIPT training to additional designated staff as requested by regional directors</td>
<td>Training attendance</td>
<td>DHR Consultant</td>
<td>Deputy Director for Field Operations, MHDDAD, Education &amp; Training, Regional Directors</td>
<td>Quarter 3</td>
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<td>9 Promote and involve staff in LIPTs</td>
<td>County memo regarding LIPTs</td>
<td>Deputy Director for Field Operations</td>
<td>Regional and County Directors</td>
<td>Quarter 4</td>
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<td>10 Match children and families with intensive resources to meet their assessed needs through LIPTs</td>
<td>Case review results regarding LIPTs</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Deputies Director for Fiscal &amp; Administrative, Deputy Director for Field Operations, Regional and County Directors</td>
<td>Quarter 5</td>
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<td>Goals</td>
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<td>C.</td>
<td>Individualize services for youth to meet their specific needs related to education, employment, housing, supportive relationships and health</td>
<td>Obtain technical assistance from the NRC on Independent Living to develop policy and training curricula in the provision of independent living services</td>
<td>Copy of TA request</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Quarter 1</td>
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<td>17, 18, 21</td>
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<td>NRC to conduct initial training of ILP coordinators and identified case staff and Training-for-Trainers to develop internal training capacity</td>
<td>Training attendance</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Independent Living Program (ILP) Director, ILP coordinators</td>
<td>Quarter 1</td>
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<td>Implement Ansell-Casey Life Skills Assessment for children in foster care ages 14, 16 and 17.5</td>
<td>SHINES data report on assessments completed</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Independent Living Program (ILP) Director, ILP coordinators</td>
<td>Quarter 4</td>
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<td>Update policies and/or practice in ODIS (web-based policy manual) for use of the Ansell-Casey Life Skills Assessment</td>
<td>Copy of youth assessment policy</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Independent Living Program (ILP) Director, ILP coordinators</td>
<td>Quarter 4</td>
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<td>Send email blast notification(s) to Social Services staff regarding updated policies and/or practice related to the Ansell-Casey Life Skills Assessment</td>
<td>Copy of email and distribution list</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Independent Living Program (ILP) Director, ILP coordinators</td>
<td>Quarter 4</td>
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<td>Provide Ansell-Casey Life Skills Assessment training on a quarterly basis for new ILP coordinators and identified case staff</td>
<td>Youth assessment training attendance</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Independent Living Program (ILP) Director, ILP coordinators</td>
<td>Quarter 4-6</td>
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<td>Utilize Ansell-Casey Life Skills Assessment results to revise and guide written transitional living plans (WTLP)</td>
<td>PEAS case review results</td>
<td>Deputy Director for Fiscal &amp; Administrative</td>
<td>PEAS, Data Analysis &amp; Reporting</td>
<td>Quarter 4-8</td>
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*GA PIP 8/07/08*
### Strategy IV: Improve Service Array and Foster Parent Recruitment/Retention

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<th>Goals</th>
<th>Actions</th>
<th>Evidence of Completion</th>
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<tr>
<td>D. Incorporate physical health, mental health and educational services for children in case plans as identified in needs assessments</td>
<td>1 Track percentage of case plans that incorporate physical health services when physical health needs are identified (see IV.A.3)</td>
<td>PEAS case review results and SHINES data reports</td>
<td>Deputy Director for Field Operations</td>
<td>PEAS, Field Program Specialists, County Directors, Supervisors and front line staff</td>
<td>Quarter 3-8</td>
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<td>2, 3</td>
<td>21, 22, 23</td>
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<td>2 Track percentage of case plans that incorporate mental health services when mental health needs are identified in assessment (see IV.A.3)</td>
<td>Copy of PEAS reports and data reports</td>
<td>Deputy Director for Field Operations</td>
<td>PEAS, Field Program Specialists, County Directors, Supervisors and front line staff</td>
<td>Quarter 3-8</td>
<td>1, 2</td>
<td>2, 3</td>
<td>21, 22, 23</td>
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<td>3 Track percentage of case plans that incorporate educational services when education needs are identified in assessment (see IV.A.3)</td>
<td>PEAS case review results and SHINES data reports</td>
<td>Deputy Director for Field Operations</td>
<td>PEAS, Field Program Specialists, County Directors, Supervisors and front line staff</td>
<td>Quarter 3-8</td>
<td>1, 2</td>
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<td>21, 22, 23</td>
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<td>E. Provide training and comprehensive support for foster caregivers through pilots in Region 17 and five additional counties (Fulton, Dekalb, Thomas, Colquitt and Mitchell)</td>
<td>1 Enter into purchase of services contract(s) with private provider(s) for foster caregiver training in Region 17 and five additional counties on such foster care issues as meeting emotional and health needs of children, advocating for children</td>
<td>Copy of contract</td>
<td>Deputy Director for Field Operations</td>
<td>DHR Project Manager for Foster Family Initiative</td>
<td>Quarter 2</td>
<td>1, 2</td>
<td>1, 2, 3</td>
<td>2, 4, 6, 11, 12, 13, 14, 15, 16, 17, 21, 22, 23</td>
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<td>2 Enter into purchase of services contract with private provider(s) for such foster caregiver supports as respite, mentor, 24-hour crisis line, finding resources in Region 17 and five additional counties</td>
<td>Copy of contract</td>
<td>Deputy Director for Field Operations</td>
<td>DHR Project Manager for Foster Family Initiative</td>
<td>Quarter 2</td>
<td>1, 2</td>
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<td>3 Survey foster parents in Region 17 and five additional counties for feedback</td>
<td>Survey results</td>
<td>DHR Project Manager for Foster Family Initiative</td>
<td>Regional Director for Region 17, county directors for five additional counties</td>
<td>Quarter 4</td>
<td>1, 2</td>
<td>1, 2, 3</td>
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<td>4 Assess pilot in Region 17 and five additional counties for statewide scalability based on retention, cost and foster parent feedback</td>
<td>Assessment results</td>
<td>Accountability Officer</td>
<td>DHR Project Manager for Foster Family Initiative, DHR Project Manager for Foster Family Initiative, Data Analysis &amp; Reporting</td>
<td>Quarter 5</td>
<td>1, 2</td>
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### Strategy IV: Improve Service Array and Foster Parent Recruitment/Retention

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<tbody>
<tr>
<td>F. Establish internal foster care recruitment program</td>
<td>1. Update and/or develop policies and/or practice protocols related to foster home recruitment</td>
<td>Copy of foster home recruitment policy</td>
<td>Division Director</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 4</td>
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<td>2, 4, 6, 9</td>
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<td>2. Update foster home recruitment policies and/or practice protocols in ODIS (web-based policy manual) as adopted</td>
<td>Quarterly updates</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 4</td>
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<td>Send email blast notification(s) to Social Services staff regarding updated foster home recruitment policies and/or protocols and posting</td>
<td>Copy of email and distribution list</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Family Services Section Director, Policy Unit</td>
<td>Quarter 4</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>3. Implement revised recruitment policy/practice statewide</td>
<td>Documentation of recruitment activities</td>
<td>Deputy Director for Field Operations</td>
<td>Regional and County Directors, Resource Development staff</td>
<td>Quarter 5</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>4. Develop at least one recruitment plan in each region to meet needs of foster care population in region, including measures, baselines(s) and improvement goal(s)</td>
<td>Copy of plans, baselines and goals</td>
<td>Deputy Director for Policy &amp; Practice</td>
<td>Regional and County Directors, Family Services Section Director, Policy Unit</td>
<td>Quarter 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>5. Implement recruitment plans and provide quarterly reports on progress</td>
<td>Documentation of activities completed in quarterly reports</td>
<td>Deputy Director for Field Operations</td>
<td>Regional and County Directors, Foster Care Unit</td>
<td>Quarter 5</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>6. Provide training for resource development supervisors and front line staff for all regions on updated foster care recruitment policies and practices</td>
<td>Foster home recruitment training attendance</td>
<td>Education &amp; Training Section Director</td>
<td>Education &amp; Training Section</td>
<td>Quarter 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7. Track orientation attendance, IMPACT training attendance and foster home approvals</td>
<td>Data reports</td>
<td>Deputy Director for Fiscal &amp; Administrative</td>
<td>Regional Directors, Data Analysis &amp; Reporting</td>
<td>Quarter 7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G. Increase paternal family involvement through Outstanding Paternal Involvement pilot</td>
<td>1. Establish baseline measure and set improvement goal for percentage of cases with paternal involvement in FTMs and case plans in Region 16 pilot</td>
<td>Baselines, goals</td>
<td>Deputy Director for Field Operations</td>
<td>Region 16 Director</td>
<td>Quarter 2</td>
<td>2</td>
<td>2</td>
<td></td>
<td>3, 11, 12, 13, 14, 15, 16</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2. Generate strategies/methods of involving paternal family members in FTMs and case plans in Region 16 pilot</td>
<td>Copy of strategies</td>
<td>Region 16 Director</td>
<td>Data Analysis &amp; Reporting, PEAS and Region 16 Director</td>
<td>Quarter 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Measure improvement in paternal involvement in FTMs and case plans in Region 16</td>
<td>PEAS case review results and SHINES data reports</td>
<td>Accountability Officer</td>
<td>Data Analysis &amp; Reporting, PEAS and Region 16 Director</td>
<td>Quarter 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Assess paternal involvement pilot for statewide scalability based on paternal family involvement data in Region 16</td>
<td>PEAS case review results and SHINES data reports</td>
<td>Deputy Director for Field Operations</td>
<td>Data Analysis &amp; Reporting, PEAS and Region 16 Director</td>
<td>Quarter 5</td>
<td></td>
<td></td>
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</tbody>
</table>
Section 15 of the Consent Decree requires 31 outcomes. These outcomes are grouped in the categories of Safety, Permanency, Well-Being, and Strengthened Infrastructure

SAFETY

1. Children in Foster Care are Safe From Maltreatment
   - **Outcome 1:** By the end of the first reporting period, at least 95% of all investigations of reports of abuse or neglect of foster children shall be commenced, in accordance with Section 2106 of the Social Services Manual, within 24 hours of receipt of report.
   - **Outcome 3:** By the end of the first reporting period, at least 99% of all investigations of reported abuse or neglect of foster children during the reporting period shall include timely, face-to-face, private contact with alleged victim, including face-to-face contact with a child who is non-verbal due to age or for any other reason.
   - **Outcome 2:** By the end of the first reporting period, at least 95% of all investigations of reported abuse or neglect of foster children shall be completed, in accordance with Section 2106 of the Social Services Manual, within 30 days of receipt of report.
   - **Outcome 5:** By the end of the first reporting period, no more than 1.27% of all children in foster care shall be the victim of substantiated maltreatment while in foster care. By the end of the second reporting period, no more than .94% of all children in foster care shall be the victim of substantiated maltreatment while in foster care. By the end of the fourth reporting period, no more than .57% of all children in foster care shall be the victim of substantiated maltreatment while in foster care.
   - **Outcome 6:** By the end of the second reporting period, 90% of all foster homes will not have an incident of corporal punishment within the previous six months. By the end of the third reporting period, 98% of all foster homes will not have an incident of corporal punishment within the previous 12 months.

PERMANENCY

2. Children in Placements Maintain Family Connections
   - **Outcome 7:** By the end of the second reporting period, at least 70% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 90 days of entering foster care. By the end of the fourth reporting period, at least 95% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 60 days of entering foster care.
   - **Outcome 16:** By the end of the second reporting period, at least 70% of all foster children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings. By the end of the fourth reporting period, at least 80% of all foster children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings.
   - **Outcome 19:** By the end of the second reporting period, at least 70% of all children in
care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b(ii) and (iii). By the end of the third reporting period, at least 80% of all children in care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b(ii) and (iii). By the end of the fourth reporting period, at least 90% of all children in care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b(ii) and (iii).

- **Outcome 21:** By the end of the third reporting period, 75% of all the children with the goal reunification shall have had appropriate visitation with their parents to progress toward reunification. By the end of the fourth reporting period, 85% of all the children with the goal reunification shall have had appropriate visitation with their parents to progress toward reunification.

- **Outcome 23:** By the end of the second reporting period, at least 80% of children in the Class at a point in time during the reporting period who have one or more siblings in custody with whom they are not placed shall have had visits with their siblings at least one time each month, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state in compliance with ICPC, or the distance between the children’s placement is more than 50 miles and the child is placed with a relative.

3. **Children Achieve Permanency**

   (permanency= reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.)

*Children in care at the time of the consent decree:*

- **Outcome 12:** For children whose parental rights have been terminated or released and the child has an identified adoptive or legal guardian resource at the time of the entry of the Consent Decree, 90% shall have had their adoptions or legal guardianships finalized within six months after the entry of the Consent Decree.

- **Outcome 13:** For all children for whom parental rights have been terminated or released at the time of entry of the Consent Decree, and the child does not have an identified adoptive resource, 95% shall have been registered on national, regional, and local adoption exchanges, and have an individualized adoption recruitment plan or plan for legal guardianship within 60 days of the Consent Decree.

- **Outcome 15:** Permanency efforts (15/22): By the end of the second reporting period, at least 80% of all foster children who reached the point of being in state custody for 15 of the prior 22 months, shall have had either (1) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable OR (2) documented compelling reasons in the child’s case record why termination of parental rights should not be filed.

By the end of the fourth reporting period, at least 95% of all foster children who reached
the point of being in state custody for 15 of the prior 22 months, shall have had either (1) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable OR (2) documented compelling reasons in the child’s case record why termination of parental rights should not be filed.

- **Outcome 9**: Children in custody for up to 24 months and still in custody upon entry of the Consent Decree (children in the “24 backlog pool”): For all children in the 24 month backlog pool, by the end of the second reporting period, at least 35% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship. For all children in the 24 month backlog pool, who remain in custody at the end of the second reporting period, by the end of the third period at least 40% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship. For all children in the 24 month backlog pool, who remain in custody at the end of the second reporting period, by the end of the fourth reporting period at least 40% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.

- **Outcome 10**: Children in custody for more than 24 months and still in custody upon entry of the Consent Decree (children in the “over 24 backlog pool”): For all children in the over 24 month backlog pool, by the end of the second reporting period, at least 35% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship. For all children in the over 24 month backlog pool, who remain in custody at the end of the second reporting period, by the end of the third reporting period, by the end of the fourth reporting period at least 40% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.

**Children entering custody after consent decree:**

- **Outcome 8a**: Of all the children entering custody following the entry of the Consent Decree, at least 40% shall have had one of the following permanency outcomes within 12 months or less after entering custody: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.

- **Outcome 8b**: Of all the children entering custody following the entry of the Consent Decree, at least 74% (1) shall have had one of the following permanency outcomes within 12 months or less after entering custody: reunification or permanent placement with relatives; or (2) shall have had one of the following permanency outcomes within 24 months or less of entering custody: adoption, permanent legal custody, or guardianship.
Permanency actions after consent decree:

- **Outcome 11:** By the end of the second reporting period, for all children whose parental rights have been terminated or released during the reporting period, 80% will have adoptions or legal guardianships finalized within 12 months of final termination or release of parental rights.

- **Outcome 4:** By the end of the second reporting period, no more than 8.6% of all foster children entering custody shall have re-entered care within 12 months of the prior placement episode.

- **Outcome 14:** No more than 5% of adoptions finalized during the reporting period shall disrupt within the 12 months subsequent to the reporting period.

Court reviews of permanency actions

- **Outcome 27:** By the end of the second reporting period, at least 80% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child’s six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review. By the end of the third reporting period, at least 85% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child’s six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review. By the end of the fourth reporting period, at least 95% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child’s six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review.

- **Outcome 28:** By the end of the second reporting period, at least 95% of foster children in custody for 12 or more months shall have either had a permanency hearing held by the Juvenile Court within 12 months of the time the child entered foster care or had his or her last permanency hearing, or DFCS shall have submitted the documents required by the Juvenile Court for and requested a permanency hearing within 45 days of the expiration of the 12-month period following the time the child entered foster care or had his or her last permanency hearing.

WELL BEING

4. **Children Experience Stable Placements and Worker Continuity.**

- **Outcome 17:** By the end of the second reporting period, at least 86.7% of all children in care shall have had 2 or fewer moves during the prior 12 months in custody. By the end of the fourth reporting period, at least 95% of all children in care shall have had 2 or
fewer moves during the prior 12 months in custody.

- **Outcome 18**: By the end of the second reporting period, at least 90% of all children in care at a point in time during the reporting period shall have had 2 or fewer DFCS placement case managers during the prior 12 months in custody. This measure shall not apply to cases that are transferred to an adoption worker or Specialized Case Manager; case managers who have died, been terminated, or transferred to another county; or case managers who have covered a case during another case manager’s sick or maternity leave.

- **Outcome 20**: By the end of the second reporting period, at least 95% of children in care at a point in time during the reporting period shall have had at least one in-placement visit and one other visit, as defined in Section 5.D, each month by their case manager. During the prior 12 months in custody.

- **Outcome 22**: By the end of the second reporting period, at least 90% of all children in care at a point in time during the reporting period shall have had visits between their DFCS placement case manager and their foster parent, group care, institutional or other caretaker at least one time each month during the prior 12 months in custody.

5. **Children and Youth Receive the Services they Need**

- **Outcome 24**: By the end of the second reporting period, the percentage of youth discharged from foster care at age 18 or older with a high school diploma or GED will increase over baseline by 10 percentage points. By the end of the fourth reporting period, that percentage shall increase by an additional 10 percentage points.

- **Outcome 30**: By the end of the second reporting period, at least 80% of children in care shall not have any unmet medical, dental, mental health, education or other service needs, according to the service needs documented in the child’s most recent case plan. By the end of the fourth reporting period, at least 85% of children in care shall not have any unmet medical, dental, mental health, education or other service needs, according to the service needs documented in the child’s most recent case plan.

6. **Capacity to Support Placement Process**

- **Outcome 25**: By the end of the first reporting period, at least 85% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status. By the end of the second reporting period, at least 95% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status. By the end of the fourth reporting period, at least 98% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status.

- **Outcome 31**: By the end of the second reporting period and continuing thereafter, no more than 10% of all children in foster homes shall be placed in foster care homes that exceed the capacity limits referenced in Section 5.C.4.e. of the Consent Decree, concerning the requirement that no child shall be placed in a foster home if that
placement will result in more than three (3) foster children in that foster home, or a total of six (6) children in the home, including the foster family’s biological and/or adopted children.

7. **Timely and Complete Court Orders**
   - **Outcome 26:** By the end of the second reporting period, at least 85% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act. By the end of the fourth reporting period, at least 95% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act.
   - **Outcome 29:** By the end of the third reporting, no more than 5% of all children in custody of DHR/DFCS for 12 months or more shall have lapse of legal custody within the prior 13 months.
Appendix B
Methodology

The Accountability Agents used several methodologies to make the judgments, conclusions and recommendations contained in this report: (i) review of written materials and data supplied by the State and Counties; (ii) interviews; (iii) extensive case record reviews; and (iv) strategic engagement of State and county personnel for pro-active, hands-on monitoring through biweekly meetings known as the “G2.” This appendix describes the data sources and each of these methods.

A. Data Sources and Methodology for Measuring State Performance

Five primary sources of information were used to assess the State of Georgia’s progress.

1. State Data Systems

The first source of information is the DFCS administrative data systems that the Department currently employs to hold case-related information and prepare reports for the Federal Department of Health and Human Services, the citizens of Georgia and other interested parties. This is system is known as “IDS.”

There is general agreement that IDS is not sufficiently robust to support the kind of case management and data analysis desired by the State of Georgia. Over the next few years it will be replaced by a Statewide Automated Child Welfare Information System (SACWIS) that the state is currently developing. However, IDS currently is sufficient to provide reports on a number, but not all of the outcomes.

a. Addressing Data Integrity Issues

Like all information systems, the accuracy of IDS’ data is function of the accuracy with which data are coded and input into the system. Previous external evaluations and a baseline case record review conducted in November and December of 2005 by the DFCS Evaluation and Reporting Section (E&R) have noted some significant discrepancies between the information contained in case records and data produced by IDS. It is important to understand that these discrepancies appear to be caused by human error (typically, mistakes in interpretation and coding of the facts contained in the case record that result in erroneous data being entered into the system) not any malfunction of the computer system itself that we were able to detect. Data fields that are less complex or qualitative (e.g., whether or not an allegation was substantiated) are less prone to coding errors and produce data with a higher degree of reliability. Data fields that are more complex, qualitative, or ambiguous are more error prone and demonstrate greater problems of reliability.

As a result of such issues, we have been very selective about which IDS data we rely on for
assessing compliance with the Consent Decree’s provisions. Most of the data in this report was generated by our own case record reviews. We have also made a major effort to identify important data fields that are error prone and to work with the Counties and the E&R and DFCS training staff to get the errors corrected and to revise guidance and training in the hope of preventing the errors from occurring in the future. These activities are described in more detail below:

- **Data accuracy discussions in the G2 and subsequent data “clean-up”**

Starting with our second G2 meeting, data integrity and improving data accuracy has been an on-going agenda item. The DFCS Evaluation & Reporting Section has been supplying the counties with case listings for the outcome data they report out of IDS. The counties are using these lists to review the cases and verify the information in IDS or identify information that needs to be corrected in IDS to agree with the actual case file. The most striking example of this effort is the work that has been done to enable IDS to produce a more accurate picture of the rate of maltreatment in care. In the course of the G2 discussions and counties reviewing files, they discovered that there was a misunderstanding around the child’s location at the time of the maltreatment. Many caseworkers mistakenly believed that a question on the maltreatment investigation data entry form asking for the child’s location referred to the child’s CURRENT location, rather than to the setting in which maltreatment occurred. This misunderstanding caused the location of the maltreatment to be entered into IDS as the foster placement, when, in fact, the maltreatment occurred in the child’s home. As a result of this finding, the counties provided greater instruction to the case managers regarding the form and DFCS made changes to the form to add greater clarity about the desired information. The counties continue to review the lists from E&R and correct discrepancies as they are identified. Over time, we believe this will produce a much higher degree of consistency between IDS and case records.

- **Case record reviews collected comparative information**

In several instances, the case record readers were asked to collect the exact piece of information directly from the sampled case files and from IDS by going “on-line” and looking at the IDS data base. These instances included information about a child’s date of entry into foster care, current placement type and date, and permanency goal.

2. **Evaluation and Reporting 2005 Baseline Case Record Review**

During October and November 2005, the DFCS Evaluation and Reporting unit conducted four case record reviews of key aspects of the Consent Decree to provide the State and Counties with a baseline of their performance against the Consent Decree requirements. This effort included reviews of 1) Maltreatment in care investigations, 2) records of children in care, 3) records of children with the goal of adoption and partial termination of parental rights, and 4) DFCS
Foster home records. This information was used throughout the reporting period as discussion points in G2 meetings and informed the development of the case record review conducted for this report. For three of the reviews, samples were separately drawn for each county from active records in the period of September 2004 through August 2005. All of the investigations of maltreatment in care were reviewed.

3. Document Review and Interviews

During the monitoring period, the Accountability Agents collected written reports and materials regarding foster care and adoption policy, budgets, findings from the Child Advocate, licensing, treatment services, worker training and certification, and preparation for the upcoming Federal IV-E audit. At the state level, we interviewed the leadership of the Office of Regulatory Affairs, Treatment Services Unit, Statewide Risk Assessment, Education and Training Services Section, and other administrative offices. At the local county level, we interviewed supervisors and case managers responsible for 1) investigating reports of maltreatment in care, 2) placement, and 3) foster parent training and support. We worked directly with State and County Quality Assurance staff to analyze data collected and tracked at the local level such as specialized case management caseloads, medical exams, and adoption recruitment plans.

4. Structured Case Record Reviews

A second source of information is systematic case record reviews (CRRs.) Four case record reviews were conducted: 1) investigations of maltreatment in care; 2) foster home approval status and capacity; 3) children in foster care placements; and 4) children with the goal of adoption. Table B-4 summarizes sample characteristics of each review. The following discussion provides more detail on the sampling approach, the review instruments development, review logistics, reviewer qualifications and quality assurance, and analytical process.

a. Sampling Approach

As indicated in Table B-4, 100 percent of the investigations of maltreatment in care between October 27, 2005 and June 30, 2006 were read. Therefore, the margin of error in these results is extremely small and would reflect case record reviewer differences rather than differences within the universe.

For the three other case record reviews, random samples were drawn from three different universes:

- All foster homes located in DeKalb and Fulton counties that had a DeKalb or Fulton child placed in the home at anytime between October 27, 2005 to May 31, 2006. This included private agency supervised homes as well as DFCS supervised homes. This timeframe was
selected to enable the case record review to begin in the first part of July. It was presumed that the difference in the number and type of homes in the population between this time frame and one that extended to the end of June 2006 would be immaterial to the results.

- All foster care cases (children) active in DeKalb and Fulton counties any time between October 27, 2005 to June 30, 2006.
- All children with the goal of adoption with active cases in DeKalb and Fulton counties any time between October 27, 2005 to June 30, 2006, excluding finalized adoptions.

For each of these reviews, samples were drawn such that the findings would have a +/- 7% error rate at a 95% confidence level. As described later in this appendix, a certain number of records included in the original samples of Foster Homes, Foster Care, and Adoptions could not be read and were rejected based on pre-determined criteria. This level of precision is for frequencies reported for the sample as a whole. Data provided on subsets of the sample are less precise; however, we have not calculated separate margins of error for the different subsets used in this first report. To achieve the minimum number of records for each review, small additional, random replacement samples were drawn. In the case of the Foster Homes, however, the replacement sample was drawn solely from the pool of DFCS supervised homes.

### Table B-1
Case Record Review Sample Size and Associated Margin of Error

<table>
<thead>
<tr>
<th>Target of Review</th>
<th>Universe of cases</th>
<th>Desired Maximum Sample Size</th>
<th>Actual Number Reviewed</th>
<th>Margin of Error</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster Home Investigations</td>
<td>74</td>
<td>74</td>
<td>52 completed by DeKalb and Fulton 22 completed by other counties involving DeKalb and Fulton children</td>
<td>+/- 0.0 percent</td>
</tr>
<tr>
<td>Foster Homes</td>
<td>808</td>
<td>160</td>
<td>165</td>
<td>+/- 7 percent</td>
</tr>
<tr>
<td>Children in Foster Care</td>
<td>3,3351 children with active cases any time October 27, 2005 and June 30, 2006</td>
<td>185</td>
<td>165</td>
<td>+/- 7 percent</td>
</tr>
<tr>
<td>Children with the goal of adoption</td>
<td>322</td>
<td>130</td>
<td>115</td>
<td>+/-7 percent</td>
</tr>
</tbody>
</table>

#### b. Instrument Design

Four separate data collection Instruments were developed, one for each sample. They were developed in conjunction with the DFCS Evaluation and Reporting Section (E&R) and
consultants from Georgia State University (GSU) schools of public administration and social work. The instruments were field tested and Counsel for the Plaintiffs reviewed and recommended changes, many of which were incorporated into the final instruments. However this work occurred in a very compressed time period. The final products would have benefited from more time for consideration and refinements. Learning from this first effort will be incorporated into the next case record review.

c.  **Data Collection Schedule and Logistics**

Planning for the data collection effort began in March 2006 with discussions with E&R and GSU regarding formatting data instruments for efficient data capture and analysis. To achieve the greatest level of accuracy and to meet reporting deadlines, it was determined that DFCS data collectors would input their case record review responses directly into an Excel database. GSU research assistants prepared these databases from the instruments provided by the Accountability Agents. These spreadsheets were altered as the guides were prepared and modified. One spreadsheet was used for each data collection instrument. Each instrument had at least one page and up to four pages in the spreadsheet. Each question described the possible answers to that question. A majority of the questions requested numerical, coded responses (i.e. 1 for yes or 2 for no). Some of the questions allowed for a Not Applicable response generically coded as 8888 or an Unable to Determine generically coded as 7777. A few responses provided for the next several questions to be skipped as being not applicable if that response was chosen. Skipped questions were coded as 6666. Answers that were not chosen or questions that were not responded to were coded 9999. A majority of the questions also offered a section for unlimited comments. If no comments were necessary, as determined by the reviewer, then 9999 was entered into the comment column. If a reviewer felt comments were necessary and no comment column was provided, a general comment column was also made available at the end of each spreadsheet.

Field testing of the instruments using paper versions was conducted in June 2006. Changes were made to the instruments based on these reviews. Original files were reviewed between July 10 and August 15, 2006. Data analysis began in August as GSU began compiling the collected data into four data bases.

Data collection began in July with the foster home records selected from private agencies. Reviewers went to the private agencies and reviewed the records on-site. They also photocopied the complete records to bring back to E&R. The remaining records for investigations, foster care, adoptions, and DFCS supervised foster homes were reviewed at the county offices where the active cases are maintained. Closed records were brought to these sites for review.

Because this was the first time reviewers had reviewed private agency foster home files, the on-site review of these records proved to be an additional testing period for the instruments. After reading these records, numerous suggestions for revising the instrument were made to reflect
d. **Review Team Qualifications and Training**

Twelve E&R staff were the primary case readers. These staff members average 25 years of experience in DFCS and are very familiar with the DFCS’s policies and practices. They were selected for this task based on their skills, experience, and knowledge.

There was a brief training before commencing each record review. The training consisted of reviewing and discussing the wording and meaning of each question on the data collection instruments. Additional changes were made to the guides and spreadsheets as a result of these discussions. The GSU project coordinator and research assistants also provided a one half day training session in the use of the Excel spreadsheets. DFCS reviewers were able to practice with the spreadsheets on their computers, ask questions, and offer feedback. Training is another area that would have benefited from more time. Reviewing practice records would have been helpful to work out the questions that arose. More time will be devoted to this aspect in the next review round.

DFCS reviewers and GSU researcher staff were provided with a digital file containing a “Handbook” and a copy of the consent decree for reference. In addition, reviewers had personal copies of the instruments in hard copy on which they had made notations regarding the discussions about definitions, responses, and where within the case records to locate certain pieces of information.

e. **Quality Assurance**

Reading accuracy and inter-reader reliability was assured by an extensive quality assurance process that included constant “calibration” and a “second read” of the records. Two senior E&R reviewers were designated team leaders. They were responsible for responding to reviewer questions regarding clarification or how to interpret information contained in the record. These team leaders shared with one another the questions being asked and the responses they were giving to reviewers so as to assure consistency. In this way, patterns among questions were monitored and instructions were clarified for all reviewers as necessary. Team leaders reviewed each reviewers work at the completion of each review. The Accountability Agents were also on-site several days a week during the review and provided another resource for questions and clarification. Finally, reviewers were encouraged to provide explanatory comments for there responses if they felt the situation they found did not adequately fit the question being asked or additional detail for some critical questions was desired. These comments were invaluable to the Accountability Agents as they reviewed the data collected and made judgments about response recodes when necessary.
The Georgia State University (GSU) project coordinator and three research assistants with backgrounds in social service and/or case record review provided an additional level of Quality Analysis. They read 30 percent each of Foster Care, Adoptions and Foster Home and CPS investigations samples. The records were randomly selected from each reviewers completed set. In some instances, they read more records done by particular reviewers who seemed to have the most difficulty with the technology and some of the elements of the review. In the future, the QA reviewers will read a larger portion of the files particularly when a new instrument is being introduced.

To calculate inter rater reliability GSU selected variables from all four files (Adoptions, CPS Investigations, Foster Homes and Foster Care) where both the reviewers and the QA reviewers had access to the same information in the case file. Each response was not tested for inter-rater reliability. Correlations between the reviewer results and the QA reviewer results were correlated using SPSS and a Cronbach’s Alpha statistic was calculated for each. Cronbach’s Alpha measures how well a set of items, in this case the reviewer responses and the QA reviewer responses, correlate or match. Cronbach’s Alpha is not a statistical test - it is a coefficient of reliability (or consistency). Note that a reliability coefficient of .70 or higher is considered “acceptable” in most Social Science research situations like the Kenny A case review.

The Cronbach’s Alpha measure for each of the data sets are provided in Table B-2, below. All measures are well above the threshold of .70.

<table>
<thead>
<tr>
<th>Sample</th>
<th>Cronbach’s Alpha Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPS Investigations</td>
<td>.94792</td>
</tr>
<tr>
<td>Foster Homes</td>
<td>.85259</td>
</tr>
<tr>
<td>Foster Care</td>
<td>.94792</td>
</tr>
<tr>
<td>Adoptions</td>
<td>.93018</td>
</tr>
</tbody>
</table>

A final check on quality came during the analysis. When the analysis identified a discrepancy that could not be explained by the reviewer comments, the Accountability Agents requested a reviewer to go back to the file in question and collect more specific information on which to make a judgment. During the analysis, it became clear to the Accountability Agents that the majority of reviewer errors resulted from the 1) electronic technology, “paperless” process used or 2) poorly worded questions that still caused confusion among some reviewers. Both these errors can be addressed with different data collection software with built-in data edits and more careful attention to the instrument design and testing.

f. Data analysis

The Statistical Package for Social Sciences (SPSS) was used for analyzing the collected data.
GSU staff assisted in creating descriptive statistics for the Accountability Agents.

g. **Records in Sample that Were not Read**

Not all records included in the original samples were reviewed. Because of the data integrity challenges previously discussed, we anticipated that some number of records in each sample would not meet the criteria for the record review. Before the reviews began, we established a set of reasons for why a case record may not be read. Table B-3 provides a summary distribution of the cases that were not read with the reasons for not reading them. Need to add about reporting records that could not be located.

<table>
<thead>
<tr>
<th>Target of Review</th>
<th>Number of cases sampled but not read as part of the review and reason why they were not read</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster Home Investigations</td>
<td>Files could not be located (investigations by counties other than DeKalb or Fulton)</td>
</tr>
<tr>
<td></td>
<td>Children not in DFCS custody</td>
</tr>
<tr>
<td></td>
<td>Children were not in the custody of DeKalb or Fulton County DFCS</td>
</tr>
<tr>
<td></td>
<td>Coded incorrectly as maltreatment in care</td>
</tr>
<tr>
<td></td>
<td>Investigations initiated on reports occurring before the review period</td>
</tr>
<tr>
<td></td>
<td>Reports on relative homes that were not foster homes</td>
</tr>
<tr>
<td></td>
<td>Investigated in another county</td>
</tr>
<tr>
<td></td>
<td>Allegation occurred while on visitation with relative</td>
</tr>
<tr>
<td>Total</td>
<td>95</td>
</tr>
<tr>
<td>Foster Homes</td>
<td>Home did not have a child in the custody of DeKalb or Fulton Counties during the review period</td>
</tr>
<tr>
<td></td>
<td>Records could not be located</td>
</tr>
<tr>
<td></td>
<td>Homes closed before the review period</td>
</tr>
<tr>
<td></td>
<td>Home not a foster home</td>
</tr>
<tr>
<td></td>
<td>Oversight transferred to another county</td>
</tr>
<tr>
<td>Total</td>
<td>24</td>
</tr>
<tr>
<td>Children in Foster Care</td>
<td>Adoptions had been finalized, records were unavailable</td>
</tr>
<tr>
<td></td>
<td>Child was in care less than 5 days</td>
</tr>
<tr>
<td></td>
<td>Child reached age of 18 before the review period</td>
</tr>
<tr>
<td></td>
<td>Custody transferred to a relative before review period</td>
</tr>
<tr>
<td></td>
<td>Child never in care</td>
</tr>
<tr>
<td></td>
<td>Cases not located</td>
</tr>
<tr>
<td></td>
<td>Cases provided too late for review</td>
</tr>
<tr>
<td></td>
<td>Other reasons</td>
</tr>
<tr>
<td>Total</td>
<td>40</td>
</tr>
<tr>
<td>Children with the goal of adoption</td>
<td>Adoption was not the permanency goal</td>
</tr>
<tr>
<td></td>
<td>Cases not available because they had been pulled for the Federal IV-E review</td>
</tr>
<tr>
<td>Total</td>
<td>18</td>
</tr>
</tbody>
</table>
5. **Biweekly meetings with the management teams of Fulton and DeKalb County DFCS (G2)**

The Accountability Agents met twice each month with Fulton and DeKalb directors, senior management, supervisors and case managers, and senior central office staff. These meetings allowed for hands-on monitoring and data verification. Specifically, the purpose of the G2 has been fourfold:

- Engage Fulton and DeKalb County senior management teams in tracking their own progress in achieving the Consent Degree outcomes;
- Have “real-time” communication about successes and areas of concern regarding the progress of reform;
- Establish a clear understanding of the relationship between practice, process, and infrastructure enhancements and outcome achievements; and,
- Integrate the settlement outcomes and required practice and process into other initiatives the counties are engaged in, such as Family to Family and the Program Improvement Plan (PIP) to help develop and articulate the “big picture” of reform.

The process during the G2 starts with using administrative data to prompt the group to develop hypotheses about underlying problems that threaten the achievement of critical outcomes, and about potential solutions. Fresh data that shed light on the validity of those hypotheses are then brought back to a subsequent meeting. Based on the group’s examination and discussion of the fresh data, a given hypothesis may then be rejected, accepted, or refined and retested. For hypotheses that are accepted, in-depth “So What?” conversations take place during which best practices among field staff may be highlighted, operational strategies that leverage the learning that has transpired are devised, resource allocation decisions may be made, and parties responsible for implementation identified. In addition to developing, identifying resources for, and implementing data-based strategies for improving child and family outcomes, a significant by-product of the G2 process has been a fairly dramatic improvement in the quality of some of the automated data for DeKalb and Fulton counties.

B. **Methodology for Verifying State Repeat Maltreatment Data**

Section 20 G of the Consent Decree requires DHR to provide the Accountability Agents data and information sufficient to enable us to verify data reported by the State on the number of children in DeKalb and Fulton counties during the reporting period (other than those in foster care) that experience repeat maltreatment or substantiated maltreatment within 11-365 days after being referred to DHR’s diversion program. Due to the 11-365 day follow up period for the diversion statistics, diversion will not be reported on until our third report, covering the period through June 30, 2007. The DHR data on repeat maltreatment in DeKalb and Fulton Counties are presented in Section VII of this report. Following is a discussion of the approach we took to verify it.

---

1 Diversion is now referred to as Family Support.
The validity of the State statistics on repeat maltreatment rest on the accuracy of the data coding and data input associated with maltreatment investigations, and the validity and rigor of the file matching algorithm. These are considered separately below.

1. **Data Coding and Input**

Data fields that are less complex or qualitative (e.g., whether or not an allegation was substantiated) are less prone to coding errors and produce data with a higher degree of reliability. Data fields that are more complex, qualitative, or ambiguous are more error prone and demonstrate greater problems of reliability. Data on the results of maltreatment investigations fall into the former category. When a report of maltreatment is received, it is reviewed by CPS intake staff, logged into the county’s tracking system, and if it meets the criteria to be investigated, an investigator initiates an investigation. Pertinent data about the report and subsequent investigation, including whether or not the investigation substantiated the allegation, are entered on Form 453. A casework supervisor reviews the completed form 453 and when they are satisfied as to its quality, they sign off in it. The completed form is then input into IDS.

Interviews with county investigations staff and review of 100 percent of the investigations of maltreatment in care give us confidence that IDS captures virtually 100 percent of the investigations that are conducted. We did find one case in which the case notes indicated that a maltreatment investigation was initiated and face-to-face contact made within the required time frames, but the results of the investigation were not transferred from the case notes form (Form 452) to the CPS report form (Form 453) and therefore the case had not been entered into IDS. The investigator on this case was an experienced social worker from New York who had been a Georgia DFCS employee for about three months. This case is being re-investigated by DeKalb County staff and a Form 453 will be completed for it and entered into IDS. We are satisfied that this was an isolated and anomalous incident. We did not find any instances in which substantiated cases were miscoded as unsubstantiated, or vice versa.

The file review of CPS investigations of alleged maltreatment in foster care also found one instance in which an alleged victim documented in the file and recorded on the form 453 did not appear in IDS. Conversely, we found one instance in which there was an alleged victim listed in IDS that was not identified by our file review.

The problem of disagreement between the file review and IDS on maltreatment data appears to be very limited. The single child involved in the case that was not reflected in IDS represents less than one percent of the population covered by our file review of maltreatment in care investigations, and did not involve a case of substantiated maltreatment. Still, it illustrates that while underreporting of substantiated maltreatment is quite unlikely, theoretically, it could happen. Obviously, if it did happen and that same child was to experience repeat maltreatment, it too would be under-reported.
2. **File Matching Algorithm**

To produce the data on repeat maltreatment required by the Consent Decree, E&R used the following algorithm:

- Data for Fulton and Dekalb are extracted from the state Protective Services Data System (PSDS), a component of IDS;
- Children with substantiated maltreated are selected from two timeframes -- the reporting period and the preceding 12 months;
- Foster children are deleted from the files;
- Children from the reporting period are matched with children from the preceding 12 months; and
- Resulting matches are deemed to be children that experienced repeat maltreatment.

The record matching algorithm used by E&R is based on the way the federal Department of Health and Human Services (DHHS) historically recommended states conduct such matches. That is, a computer is programmed to match two case record listings on a set of consistently available demographic descriptors. In Georgia’s case, the fields are first name, last name, date of birth, and gender. A significant limitation of this approach is that only exact matches are counted. In other words a child who had experienced repeat maltreatment might be missed by the match if the first referral listed him as John O’Connor, and the second listed him as John O’Conner; or if his birth date on either referral was transposed as the 13th instead of the 31st.

However, the DFCS Evaluation and Reporting Section, working with a computer services vendor, recently undertook the development of a unique child identifier to enable it to produce and send to the federal Department of Health and Human Services an NCANDS Child File. Such an identifier will soon enhance the accuracy of such computer matches as those required to calculate the incidence of repeat maltreatment. Georgia’s new unique child identifier will also become a feature of the new SACWIS system. A recent beta test of Georgia’s unique identifier by DHHS showed that it increased the “hit” rate on Georgia’s statewide repeat maltreatment match by about 0.4 percentage points.\(^{107}\) As indicated in Section VII, the repeat maltreatment rates reported there for DeKalb and Fulton counties likely understate the true incidence of repeat maltreatment by a similar margin of error. E&R hopes to have the new unique identifier fully tested and ready for use in time for our second report, which should improve the reliability of this measure.

\(^{107}\) Georgia Child and Family services Review Data Profile: August 24, 2006.
Complete the chart below:

**Instructions:**
For both foster care cases and in-home services cases, enter the first and last names (first name first) of all children in the family as identified in the case file. If the case is a foster care case, put an asterisk next to the name of the target child. It is essential that the target child be clearly identified with an asterisk for all foster care cases.

Enter the race/ethnicity information as provided in the case file. If the child is of two or more races/ethnicities, list all that are provided in the case file (for example, White and Hispanic, or White and Native American, etc.). If during the course of the interviews, it is learned that a child is of a different race/ethnicity than is noted in the file or is of two or more races and only one is noted in the file (for example, Native American instead of Hispanic, or both Hispanic and Native American), please change the race identification information presented below to reflect the accurate information.

Provide the date of birth for all children in the family, even if this is a foster care case.

<table>
<thead>
<tr>
<th>Child(ren)'s name(s)</th>
<th>Race and/or ethnicity</th>
<th>Date(s) of birth (MM/DD/YY)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**TYPE OF CASE REVIEWED:**
- Foster Care Case: _______
- In-home Services Case: _______

**TYPE OF CASE ACTIVITY (Check all that apply):**
- Investigations: _______
- Family Preserv.: _______
- PLC/ Adopt: _______

**Instructions:**

The case is a foster care case if the target child was in foster care at any time during the period under review. A child is considered to be in foster care if the State child welfare agency (hereafter “the agency”) has care and placement responsibility for the child. This includes a child who is placed by the agency with relatives or in other kin-type placements, but the agency maintains care and placement responsibility. It does not include a child who is living with relatives (or caregivers other than parents) but who is not under the care and placement responsibility of the agency.

The case is an in-home services case if no child in the family was in foster care at any time during the period under review, and the case was open for at least 60 days. If the case was not open for 60 days, please notify the Team Leader.
### Definitions and Instructions:

**Discharge from foster care** is defined as the point when the child is no longer in foster care under the care and placement responsibility or supervision of the agency.

If a child returns home on a trial home visit and the agency retains responsibility or supervision of the child, the child should be considered discharged from foster care only if the trial home visit was longer than 6 months, and there was no court order extending the trial home visit beyond 6 months.

If the child is in foster care but has not yet been discharged, check **Not Yet Discharged**.

If the case is an in-home services case, check **Not Applicable**.

### Date of discharge from foster care for the most recent foster care episode (MM/DD/YY):

- **Not Applicable**
- **Not Yet Discharged**

**Definitions and Instructions:**

“Discharge from foster care” is defined as the point when the child is no longer in foster care under the care and placement responsibility or supervision of the agency.

If the case is an in-home services case, check **Not Applicable**.

### Date of closure (for all cases) (MM/DD/YY):

- **Case not closed by time of Review**

**Instructions:**

Provide the date that the agency officially closed the case. For foster care cases, this may or may not be the same date as the discharge date.

If the case is still open at the time of review, check **Case not closed by time of Review**.
Reason for Agency Involvement (select appropriate response below):

Instructions:
Indicate the reason for the agency’s involvement with this child or family for the most recent case opening. Mark all reasons that apply.
Place an asterisk (*) next to the square that indicates the primary reason that the case was opened. It is essential that the primary reason is identified with an asterisk.

<table>
<thead>
<tr>
<th>Physical abuse</th>
<th>Abandonment</th>
<th>Substance abuse by child</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual abuse</td>
<td>Mental/physical heath of parent</td>
<td>Domestic violence in child's home</td>
</tr>
<tr>
<td>Emotional Maltreatment</td>
<td>Mental/physical heath of child</td>
<td>Child in juvenile justice system</td>
</tr>
<tr>
<td>Neglect (not including medical neglect)</td>
<td>Substance abuse by parent(s)</td>
<td>Other (specify)</td>
</tr>
<tr>
<td>Medical neglect</td>
<td>Child's behavior</td>
<td></td>
</tr>
</tbody>
</table>

Total Number of Persons Interviewed by the reviewers (list below):

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship to Case</th>
<th>Date of Interview</th>
<th>Type of Interview</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>In-Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Phone</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>In-Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Phone</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>In-Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Phone</td>
</tr>
</tbody>
</table>

SECTION I: SAFETY

SAFETY OUTCOME 1: CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT.

Item 1. Timeliness of initiating investigations of reports of child maltreatment (case file and interview with caseworker)

Purpose of Assessment: To determine whether responses to all accepted child maltreatment reports received during the period under review were initiated, and face-to-face contact with the child made, within the timeframes established by agency policies or State statute.

Applicable Cases:
Cases are applicable for an assessment of this item if an accepted child maltreatment report on any child in the family was received during the period under review. “Accepted” means that the report was assigned to the agency to conduct an assessment or investigation. This includes reports assigned for a diversion assessment. Reports that are screened out are not considered “accepted.”

Cases are Not Applicable for an assessment of this item if, during the period under review, there were no child maltreatment reports on any child in the family, or if a report was received on a child in the family, but was “screened out,” that is, they were not referred for an assessment or investigation.

Is this case applicable? (Select the appropriate response. If the response is "no," complete question A1 then rate the case as Not Applicable in the ratings section, provide your reason for the rating in the documentation section, and continue to item 2.)

<table>
<thead>
<tr>
<th>Yes</th>
<th>NO</th>
</tr>
</thead>
</table>

A1. How many reports of suspected abuse or neglect have been received on any child(ren) in the family (including those that were screened out by the agency during the life of the case)?

Number
Instructions:
The information collected in question A1 is intended to provide background information on the family. It is not to be used to determine the rating.

The life of the case begins with the first recorded maltreatment report received by the agency on any child in the family, even if the report was screened out.

For foster care cases, reviewers should record the total number of reports of child maltreatment for all children in the family, not just the child in foster care.

<table>
<thead>
<tr>
<th>A2.</th>
<th>How many accepted reports alleging abuse or neglect were received on any child(ren) in the family during the period under review (i.e., they were not screened out)?</th>
</tr>
</thead>
</table>

Instructions for completing the table below:

Complete the following table for all accepted reports received during the period under review.

The date the investigation or assessment was initiated is the date that the agency made the first attempt to contact the family.

The date assigned for an investigation or assessment is the date the report is assigned to a specific worker to conduct the investigation or assessment (unless the State policy has a different definition for “assigned”).

Under date assigned for investigation or assessment, indicate what action was taken (i.e., was the report investigated or referred for assessment?).

Report the disposition of the case (for example, substantiated, not substantiated, unfounded, etc.). If the case was not investigated and, therefore, did not have a disposition, indicate whether it was opened for services.

Indicate whether the case was coded correctly on the F. 431 in PSDS.

<table>
<thead>
<tr>
<th>Report Date</th>
<th>Allegation</th>
<th>Priority Level (if applicable)</th>
<th>Date of Initiation AND Date of Face-to-Face Contact with Child</th>
<th>Disposition</th>
<th>431 - Living Arrangement at the Time of Maltreatment</th>
<th>431 - Alleged Maltreater Coded Correctly</th>
<th>431 - Location of Maltreatment Coded Correctly</th>
<th>431 - Case Disposition Coded Correctly</th>
<th>431 - Accurately Reflects Investigative Time Frame</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Total | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Instructions for completing the table below:

B. In how many of the reports listed above was the investigation NOT initiated in accordance with the State’s timeframes and requirements for a report of that priority?

C. In how many of the reports listed above were face-to-face contact with the child(ren) who is the subject of the report NOT made in accordance with the State’s timeframes and requirements for a report of that priority?

D. For all reports identified in B and C, were the reasons for the delays due to circumstances beyond the control of the agency?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Instructions:

If the answers to both questions B and C are zero the answer to question D should be Not applicable (NA).

Delays in services provided by organizations or agencies under contract with the agency would not be considered to be beyond the control of the agency. However, where services are provided by another public State or local agency, such as law enforcement, the actions of these agencies may be beyond the control of the child welfare agency.

Rating Criteria:

Item 1 should be rated as a Strength if either of the following applies:
- The answers to B and C are zero.
- The answers to B and C are greater than zero but the answer to D is yes.

Item 1 should be rated as an Area Needing Improvement if the following applies:
- The answer to B or C is greater than zero, and the answer to D is no.

<table>
<thead>
<tr>
<th>Rating for this indicator (select one):</th>
<th>Strength</th>
<th>Area Needing Improvement</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

Reason for rating and Documentation:

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason:

Item 1 is rated as a(n) [ ] because:

Documentation Information:

Identify reasons why a response was not initiated within established timeframes (if applicable and reason is available):

Identify reasons why face-to-face contact was not made within established timeframes (if applicable and reason is available):

Discuss the special circumstances that the reviewers determined permit a rating of Strength for this item even if there was a delay in initiating the response or making face-to-face contact, if applicable:

Other Issues:
**SAFETY OUTCOME 1: CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT.**

### Item 2. Repeat Maltreatment

**Purpose of Assessment:** To determine if any child in the family experienced repeat maltreatment within a 6-month period.

**Applicable Cases:**

A case is applicable if there was at least one maltreatment report involving any child in the family that met all of the following criteria: (1) it was received during the period under review, (2) it referred to a maltreatment incident that occurred during the period under review, and (3) it was investigated and determined to be "substantiated" or "indicated" or

There was at least one maltreatment report involving any child in the family that met all of the following criteria: (1) it was received during the period under review, (2) it referred to a maltreatment incident that occurred during the period under review, and (3) it was referred for diversion and the decision was made to open the case for services to address concerns relevant to the safety of at least one of the children in the family (this decision may have been made by the agency or by a private provider under contract with the agency).

**Cases are not applicable for assessment of this item if either of the following applies:**

- All maltreatment reports received during the period under review were "screened out," that is, the reports were neither investigated nor referred for an alternative response, or
- The only maltreatment report that was received and investigated or assessed during the period under review referred to an incident that occurred before the period under review.

<table>
<thead>
<tr>
<th>Is this case applicable? (Select the appropriate response. If the response is No, rate the case as Not Applicable in the ratings section, provide your reason for this rating in the documentation section and continue to rate Safety Outcome 1.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

**During the period under review was there:**

A.  
(1) At least one substantiated or indicated maltreatment report involving any child in the family  
(2) At least one maltreatment report involving any child in the family that was referred for diversion and the decision was made to open the case for services to address concerns relevant to the safety of at least one of the children in the family (this decision may have been made by the agency or by a private provider under contract with the agency)?

**Definitions:**

"Substantiated" refers to an investigation in which the report of maltreatment or risk of maltreatment was supported or founded according to State law or policy. Reviewers should be aware that a State may have different terms for this and identify the correct terms.

**Instructions:**

Use the information provided in the table for item 1 to answer questions A1 and A2. The key information is provided in the columns pertaining to (1) the report date, (2) whether there was an assessment or an investigation, and (3) the disposition or whether the case was opened for services.

If the answers to questions A1 and A2 are No, the case should be rated Not Applicable in the ratings section. Provide your reason in the documentation section, and move to the rating for Safety Outcome 1.
If the answer to either question A1 or A2 is Yes, within a 6-month period before or after any maltreatment report identified in question A:

(1) was there at least one additional substantiated or indicated maltreatment report involving any child in the family? Or

(2) was there at least one additional maltreatment report involving any child in the family that was handled by diversion and resulted in a decision to open the case for services to address concerns relevant to the safety of at least one of the children in the family (the case may have been opened for services by the agency or by a private provider under contract with the agency)?

Yes No

**Instructions:**
Reviewers should answer No to questions B1 and B2 if the only additional maltreatment reports occurring within 6 months of one another referred to the same maltreatment incident identified in question A.

Reviewers should be aware that sometimes when children come into contact with a child welfare agency they disclose maltreatment incidents that occurred prior to the maltreatment incident that brought them into contact with the agency. The agency then may investigate these earlier incidents. If the case under review involves this type of maltreatment report and the report was substantiated or indicated, please follow the instructions below:

– If the maltreatment report refers to an incident that occurred within 6 months before another maltreatment report received during the period under review, and the report is substantiated or indicated, then the answer to question B1 or B2 should be Yes.

– If the maltreatment report refers to an incident that occurred more than 6 months before another maltreatment report received during the period under review, then the answers to questions B1 and B2 should be No, even if the report is substantiated or indicated.

If the response to either question B1 or B2 is Yes, did:

(1) the report(s) identified in questions A and B above involve the same or similar circumstances? Or

(2) any of the reports involve maltreatment of the child by the foster parents, members of the foster parents’ family, other children in the foster home or facility, or facility staff members?

Yes No NA

**Instructions:**
If the answers to questions B1 and B2 are No, then the reviewers should answer Not Applicable (NA) to questions C1 and C2.

Reviewers should answer No to question C1 if the answer to either question B1 or B2 is Yes, but there is no relationship between the circumstances involved in the two events. In determining the similarity of the circumstances, reviewers should consider the perpetrator of the maltreatment and other individuals involved in the incident.

Reviewers should answer No to question C2 if the answer to either question B1 or B2 is Yes, but none of the substantiated or indicated maltreatment reports involved maltreatment of the child by the foster parents, members of the foster parents’ family, other children in the foster home or facility, or facility staff members.

**Rating Criteria:**

Item 2 should be rated as a Strength if either of the following applies:
- The answer to either question A1 or A2 is Yes, and the answers to both questions B1 and B2 are No.
- The answers to both questions C1 and C2 are No or Not Applicable.

Item 2 should be rated as an Area Needing Improvement if the answer to at least one question in each of A, B, and C is Yes.

**Rating for this indicator (select one):**

<table>
<thead>
<tr>
<th>Strength</th>
<th>Area Needing Improvement</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

**Reason for Rating and Documentation**

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).
<table>
<thead>
<tr>
<th>Main Reason:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 2 is rated as a(n)</td>
</tr>
</tbody>
</table>

**Documentation Information:**
If the item is rated as an Area Needing Improvement, indicate the dates of the maltreatment reports (or incidents) that occurred within the 6-month period:

For each situation that was assigned to diversion, provide reviewer's reason for determining the case was opened for services to address children's safety or for determining the case was opened for reasons not related to child safety:

Describe the circumstances related to maltreatment recurrence (if relevant), including information related to the perpetrator:

If there was maltreatment recurrence, indicate why the reviewers determined that the two incidents did or did not involve the same circumstances:

Describe the circumstances related to any substantiated or indicated reports of maltreatment involving the foster parents, members of the foster parents' family, other children in the foster home or facility, or facility staff members:

Other Issues:
**RATING SAFETY OUTCOME 1**

**SAFETY OUTCOME 1: CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT.**

Select the level of outcome achievement that best describes the extent to which this outcome is being or has been achieved, based on the ratings for items 1 and 2.

<table>
<thead>
<tr>
<th>Level of Outcome Achievement</th>
<th>Safety Outcome 1 should be rated as Substantially Achieved if either of the following applies:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>- Item 1 and item 2 are rated as Strengths.</td>
</tr>
<tr>
<td></td>
<td>- One of the two items is rated as a Strength, and the other is Not Applicable.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Partially Achieved:</th>
<th>Safety Outcome 1 should be rated as Partially Achieved if the following applies:</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>- One of the two items is rated as an Area Needing Improvement, and one is rated as a Strength.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Not Achieved:</th>
<th>Safety Outcome 1 should be rated as Not Achieved if either of the following applies:</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>- Item 1 and item 2 are rated as an Area Needing Improvement.</td>
</tr>
<tr>
<td></td>
<td>- One of the two items is rated as an Area Needing Improvement, and the other is Not Applicable.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Not Applicable:</th>
<th>Safety Outcome 1 should be rated as Not Applicable if the following applies:</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>- Both item 1 and item 2 are rated as Not Applicable.</td>
</tr>
</tbody>
</table>

**SAFETY OUTCOME 2: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE**

**Item 3: Services to Family To Protect Child(ren) in Home and Prevent Removal or re-entry into foster care (Case file and interviews with caseworker, parent(s), service providers.)**

**Purpose of Assessment:** To determine whether, during the period under review, the agency made concerted efforts to provide services to the family to prevent children’s entry into foster care or re-entry after a reunification.

**Applicable Cases:** A case is applicable for an assessment of this item if it meets at least one of the following criteria:

- It is an in-home services case and the reviewer determines that there are concerns regarding the safety of at least one child in the family during the period under review.
- It is a foster care case and the child entered foster care during the period under review due to safety concerns.
- It is a foster care case, the child was reunified during the period under review or was returned home on a trial basis, and the reviewer determines that there are concerns regarding the safety of that child in the home.
- It is a foster care case, and although the target child entered foster care before the period under review and remained in care for the entire period under review, there are other children in the home and the reviewer determines that there are concerns regarding the safety of these children during the period under review.

**Is this case applicable?** (Select the appropriate response. If the response is No, rate the case as Not Applicable in the ratings section, provide your reason for the rating in the documentation section, and continue to item 4.)

A. For the period under review, did the agency make concerted efforts to provide or arrange for appropriate services for the family to protect children and prevent their entry into foster care or re-entry into foster care after a reunification? (Be sure to assess the entire period under review.)
Definitions:

“Appropriate services” for purposes of item 3 are those that are provided to, or arranged for, the family with the explicit goal of ensuring the child’s safety, such as homemaking services, family preservation services, anger management classes, or substance abuse treatment services, etc., and that meet the specific needs or circumstances of the family. For example, if a parent’s substance abuse is associated with the neglect that brought the case to the attention of the agency, then substance abuse treatment would be an appropriate service. If, in this situation, all that is offered is parenting education, then that service by itself would not be appropriate to address the safety issues. As another example, if there was domestic violence in the family and there was no effort to offer or provide domestic violence prevention services to the family, then the services would not be considered appropriate to ensure the child’s safety. If a child needs mental health services, education-related services, or services to address behavioral problems, in most cases these would not be considered relevant to the child’s safety if the child remained in the home. Efforts of the agency to meet these service needs are assessed in other items.

“Appropriate services” also would include services provided to, or arranged for, a noncustodial parent, but only if the parent has contact with the child and there are safety concerns associated with that contact. It would not include services to assist the noncustodial parent in becoming a permanent caregiver.

“Concerted efforts” for purposes of item 3 refers to the following activities: conducting a safety assessment to identify the services that are necessary to ensure the child’s safety in the home, working to engage families in services, and facilitating a family’s access to those services.

Instructions:

In answering question A, focus only on whether the agency made concerted efforts to provide appropriate and relevant services to the family to address the safety issues in the family so that the child could remain in the home or would not re-enter foster care. Concerns about monitoring service participation and safety planning and assessment of progress made will be captured in item 4.

If the agency removed the child from the home without making concerted efforts to provide services, the answer to question A should be No, even if the agency determined that it was necessary to remove the child for safety reasons. This issue will be addressed in question B.

If during the period under review, the agency removed any child from the home without providing or arranging for services, was this action necessary to ensure the child’s safety?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>NA</th>
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<tbody>
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Instructions:

If the answer to question A is Yes, but, after making efforts to provide services, the agency removed the child(ren) from the home during the period under review due to safety concerns, the answer to question B should be Not Applicable (NA).

If the agency did not remove the child from the home during the period under review, the answer to question B should be Not Applicable (NA).

Reviewers should focus on whether the circumstances of the case suggest that services would not have been able to ensure the child’s safety if the child remained in the home. If the information indicates that it was necessary to remove the child to ensure the child’s safety, the answer to question B should be Yes. If the information indicates that services should have been provided to prevent removal (for example, homemaking or family preservation services) but the agency removed the child without providing those services, this question should be answered No.

If services should have been offered to protect the child, but were not because those services were not available in the community, the answer to question B should be No.

Rating Criteria:

This item should be rated as a Strength if either of the following applies:

- The answer to question A is Yes, and the answer to question B is Not Applicable.
- The answer to question A is No, but the answer to question B is Yes.

This item should be rated as an Area Needing Improvement if either of the following applies:

- The answer to question A is No, and the answer to question B is No.
- The answer to question A is No, and the answer to question B is Not Applicable.
Rating for this indicator (select one): 0 Strength 0 Area Needing Improvement 0 Not Applicable

Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

<table>
<thead>
<tr>
<th>Item 3 is rated as a(n)</th>
<th>-</th>
<th>because:</th>
</tr>
</thead>
</table>

Documentation Information:

Describe the circumstances of the case that indicate a safety risk to the child:

Identify the services provided by the agency to address these circumstances during the period under review (if relevant):

Identify the services that were needed by the family to address safety issues but were not provided by the agency during the period under review (if relevant):

Provide the agency’s reason for removing the child from the home during the period under review without providing services (if relevant and reason is available) and provide the reviewers’ reasons for determining whether the reason was appropriate or inappropriate:

Are any child(ren) placed in a safety resource?  

YES  NO

Date Child(ren) placed in a safety resource (MM/DD/YY):  

Was Safety Resource Assessment timely and completed appropriately?  

YES  NO

At time of TCM month, how many days has child been placed in safety resource?  

(Enter a Number Only)

Other Issues:
SAFETY OUTCOME 2: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE

Item 4: Risk assessment and safety management (case file and interviews with caseworker, parent(s), child, foster parent(s), service providers, guardians ad litem)

Purpose of Assessment: To determine whether, during the period under review, the agency made concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care.

Applicable Cases: All cases are applicable for an assessment of this item.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. If the case was opened during the period under review, did the agency conduct an initial assessment of the risk to the target child in foster care and/or any child(ren) in the family remaining in the home?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. During the period under review, did the agency conduct ongoing assessments of the risk to the target child in foster care and/or any child(ren) in the family remaining in the home?</td>
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</tbody>
</table>

Definitions:

“Risk” is defined as the likelihood that a child will be maltreated in the future.

“Target child” is defined as the child in a foster care case who is the subject of the case.

Instructions:

Questions A and B should be answered for the target child in foster care or receiving in-home services and any other children in the family remaining in the home.

Question A should be answered Not Applicable (NA) if the case was opened before the period under review.

Reviewers should note that in some cases, the issue of ongoing risk assessments may not be relevant because the case was opened near the end of the period under review and was not closed during the period under review (for example, if the case was opened shortly before the end of the period under review and during the initial assessment the agency determined that there were no risk concerns, then it may be reasonable to conclude that the agency would not have conducted a second risk assessment during the period under review). In this case, reviewers should determine whether the agency conducted ongoing risk assessments and, if not, whether it should have given the timeframe of the case.

If reviewers believe that ongoing risk assessments were not necessary, question B may be answered Not Applicable (NA).

In responding to question B, reviewers should determine whether ongoing risk assessments (formal or informal) were conducted during the period under review. If the agency conducted a risk assessment at the onset of the case, but did not assess for risk on an ongoing basis (for example, when there were new allegations of abuse or neglect, changing family conditions, changes to visitation, upon reunification, or at case closure, etc.) then the answer to question B should be No unless the reviewers have sufficient information, based on their review of the case, to determine that during the period under review there were no apparent risk concerns for the child in foster care or any child(ren) in the family who remained in the home.

If a case was closed during the period under review, reviewers should determine whether the agency conducted a risk assessment before closing the case. If not, the answer to question B should be No, unless the reviewers have sufficient information, based on their review of the case, to determine that such an assessment was not necessary because during the period under review there were no apparent risk concerns for the child in foster care or any child(ren) in the family remaining in the home.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>C. If the case was opened during the period under review for either foster care or in-home services, did the agency: (1) conduct an initial assessment of the safety of the target child in foster care and/or any child(ren) remaining in the home, and (2) develop a safety plan with the family for addressing identified safety issues?</td>
<td></td>
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<tr>
<td>D. During the period under review, did the agency: (1) conduct ongoing safety assessments of the target child in foster care and/or any children(ren) remaining in the home, and (2) continually monitor and update the safety plan, including encouraging family engagement in services designed to promote achievement of the goals of the safety plan?</td>
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</table>
Definitions:

“Safety assessment” refers to the determination of whether a child is in a safe environment. A safe environment is one in which there are no threats that pose a danger or, if there are threats, there is a responsible adult in a caregiving role who demonstrates sufficient capacity to protect the child.

“Safety plan” refers to a plan that describes strategies developed by the agency and family to ensure that the child(ren) is safe. Safety plans should address safety threats and how those will be managed/addressed by the caregiver, caregiver capacity to implement the plan and report safety issues to the agency, and family involvement in implementation of the plan. Safety plans may be separate from or integrated into the case plan.

Instructions:

Questions C and D should be answered for the target child in foster care or receiving in-home services and any other child(ren) in the family remaining in the home.

Question C should be answered Not Applicable (NA) if the case was opened before the period under review.

Question D should be answered Not Applicable (NA) if the reviewers determine that during the period under review there were no apparent safety concerns for the target child in foster care and/or any child(ren) in the family remaining in the home.

Reviewers should note that in some cases, the issue of ongoing safety assessments may not be relevant because the case was opened near the end of the period under review and was not closed during the period under review (for example, if the case was opened shortly before the end of the period under review and during the initial assessment the agency determined that there were no safety concerns, then it may be reasonable to conclude that the agency would not have conducted a second safety assessment during the period under review). In this case, reviewers should determine whether the agency conducted ongoing safety assessments and, if not, whether the assessments should have been conducted given the timeframe of the case. If reviewers believe that ongoing safety assessments were not necessary, question D may be answered Not Applicable (NA).

In responding to questions C and D, reviewers should determine whether the agency conducted initial and ongoing safety assessments (formal or informal) during the period under review.

If the agency did not assess the child(ren)’s safety on an ongoing basis (for example, when there were new allegations of abuse or neglect, changing family conditions, changes to visitation, upon reunification, or at case closure, etc.) then the answer to question D should be No unless the reviewer determines that during the period under review there were no apparent safety concerns for any child(ren) in the family remaining in the home.

If the case was closed during the period under review, reviewers should determine whether a safety assessment was conducted before closing the case. If the case, to determine that such an assessment was not necessary because during the period under review there were no apparent safety concerns for any child(ren) in the family remaining in the home.

Instructions:

In answering question E, reviewers should consider whether any of the following occurred while the case was open for services (select all that are appropriate and provide further information in the documentation section):

- There were maltreatment allegations on the family that were reported to the agency but were inappropriately screened out (based on reviewers’ judgments)
- There were maltreatment allegations on the family but they were never formally reported or formally investigated.
- There were extensive delays in accepting an allegation for investigation or assessment.
- There were maltreatment allegations that were not substantiated despite evidence that would support a substantiation.
- The case was closed prematurely (based on reviewers’ judgments and because of either an agency or court decision).

Question E should be answered Not Applicable (NA) if the reviewer determines that during the period under review there were no apparent safety concerns for the target child in foster care and/or any child(ren) in the family remaining in the home.
### F.

**During the period under review, was there a safety concern related to the target child in foster care during visitation by parents or other family members that could be attributed to the agency not providing sufficient monitoring of visitation, or permitting unsupervised visitation when it was not appropriate?**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>NA</th>
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</table>

**Instructions:**

The answer to question F should be Not Applicable (NA) if this is not a foster care case.

If the child does not have visits with the parents or with other family members (for example, parental rights have been terminated and the parents are no longer involved in the child’s life, or parents are incarcerated and there are no visits with family members), the answer to question F should be Not Applicable (NA).

Reviewers should determine whether the visitation arrangements with parents or other family members with regard to supervised or unsupervised visits or home visits were appropriate given the circumstances of the case.

If a reviewer determines that the agency permits unsupervised visitation, but that this type of visitation presents safety concerns for the child, then the answer to question F should be Yes.

Reviewers should assess whether any safety concerns existed during the child’s visitation with parents. For example, were there allegations of child maltreatment during visitation or was the child in an unsafe situation during visitation (for example, because the custodial parent’s significant other, who was known to be a drug user, was present in the home or because previously identified risk factors had not been mitigated through effective treatment)?

### G.

**During the period under review, was there a concern for the target child’s safety related to the foster parents, members of the foster parent’s family, other children in the foster home or facility, or facility staff members that was not adequately or appropriately addressed by the agency? (Foster parents include pre-adoptive parents and nonlicensed relatives providing care to a child in State custody.)**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>NA</th>
</tr>
</thead>
</table>

**Instructions:**

The answer to question G should be Not Applicable (NA) if this is not a foster care case.

The answer to question G should be Yes if reviewers determine that, during the period under review, the child was in at least one foster care placement in which he or she was unsafe, and the agency did not take appropriate action (such as providing closer monitoring of the placement, placing fewer children in the home, providing services to address potential problems or existing problems, finding a more appropriate placement, etc.). The following are examples:

- There was a substantiated allegation of maltreatment of the child by a foster parent (including a relative foster parent) or facility staff member that could have been prevented if the agency had taken appropriate actions.

- There was a critical incident report or other major issue relevant to noncompliance by foster parents or facility staff that could potentially make the child unsafe, and the agency could have prevented it or did not provide an adequate response after it occurred.

- The child’s placement during the period under review presented other risks to the child that are not being addressed by the agency, even though no allegation was made and no critical incident reports were filed.

- The reviewers discover that there are safety concerns related to the child in the foster home that the agency is unaware of because of inadequate monitoring.

### H.

**During the period under review, if the target child was discharged from foster care to be reunited with parents or relatives or returned home on a trial home visit, did the agency conduct a thorough safety assessment?**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>NA</th>
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**Instructions:**

The answer to question H should be Not Applicable (NA) if, during the period under review, the child was not discharged from foster care to reunification with parents or relatives or was not returned home on a trial visit at any time.

The answer to question H should be Yes if the child was reunified with parents or relatives on a permanent or trial basis, and a thorough safety assessment was conducted before reunification.

If a thorough safety assessment was not conducted before reunification or a trial home visit, the answer to question H should be No.
Rating Criteria:

Item 4 should be rated as a Strength if both of the following apply:
- The answers to questions A, B, C, D, and H are either Yes or Not Applicable, and
- The answers to questions E, F, and G are either No or Not Applicable.

Item 4 should be rated as an Area Needing Improvement if either of the following applies:
- The answer to any one of questions A, B, C, D, or H is No, or
- The answer to any one of questions E, F, or G is Yes.

<table>
<thead>
<tr>
<th>Rating for this indicator (select one):</th>
<th>Strength</th>
<th>Area Needing Improvement</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

Item 4 is rated as a(n) ________________ because:

Documentation Information

Describe the circumstances of the case that indicate risk concerns related to the child(ren):

Describe the characteristics of the risk assessment(s) (for example, was one conducted, how was it conducted, how comprehensive was it, what did it include or not include?):

Describe the timing of the risk assessments (for example, at first contact, at the conclusion of the investigation, at case transfer, on an ongoing basis, when new allegations of abuse or neglect were received, when determining changes to visitation, at reunification, or before case closure) (if relevant):

Describe the circumstances of the case that indicate safety concerns related to the child(ren):
Describe the characteristics of the safety assessment(s) (for example, was one conducted, how was it conducted, how comprehensive was it, what did it include or not include?):

Describe the timing of the safety assessment(s) (for example, at first contact, at the conclusion of the investigation, at case transfer, on an ongoing basis, when new allegations of abuse or neglect were received, when determining changes to visitation, at reunification, or before case closure) (if relevant):

Identify the activities undertaken to monitor participation in safety-related services (or the absence of activities to monitor service participation):

Describe the nature of the safety concerns related to the child(ren) during visitation (if relevant), including a description of the visitation (for example, was it unsupervised, and if so, was this appropriate?):

Describe the nature of the safety concerns related to the child(ren) from foster care providers (if relevant) and the agency activities with regard to addressing safety. (For example, was there sufficient monitoring of the placement? Were there an excessive number of children in the foster home? Did the agency respond to the foster parent’s request for services to address problems? Is there sufficient monitoring of residential facilities? Are there people living in the home of whom the agency is unaware?):

Was there a report substantiating that the foster care provider(s) maltreated the child during the period under review? If Yes, describe the circumstances of that report, whether the agency might have prevented the maltreatment, and the agency’s response:

Other Issues:
<table>
<thead>
<tr>
<th>Level of Outcome Achievement</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substantially Achieved:</td>
<td>Safety Outcome 2 should be rated as Substantially Achieved if either of the following applies:</td>
</tr>
<tr>
<td></td>
<td>- Item 3 and item 4 are rated as Strengths.</td>
</tr>
<tr>
<td></td>
<td>- One of the two items is rated as a Strength and the other as Not Applicable.</td>
</tr>
<tr>
<td>Partially Achieved:</td>
<td>Safety Outcome 2 should be rated as Partially Achieved if the following applies:</td>
</tr>
<tr>
<td></td>
<td>- One of the two items is rated as a Strength and the other as an Area Needing Improvement.</td>
</tr>
<tr>
<td>Not Achieved:</td>
<td>Safety Outcome 2 should be rated as Not Achieved if either of the following applies:</td>
</tr>
<tr>
<td></td>
<td>- Item 3 and item 4 are rated as Areas Needing Improvement.</td>
</tr>
<tr>
<td></td>
<td>- One of the two items is rated as an Area Needing Improvement and the other as Not Applicable.</td>
</tr>
<tr>
<td>Not Applicable:</td>
<td>Safety Outcome 2 should be rated as Not Applicable if the following applies:</td>
</tr>
<tr>
<td></td>
<td>- Both item 3 and item 4 are rated as Not Applicable.</td>
</tr>
</tbody>
</table>
SECTION II: PERMANENCY

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY AND STABILITY IN THEIR LIVING SITUATIONS

Item 5: Foster Care Re-entries (case files, court orders, interview with caseworker)

Purpose of Assessment: To assess whether children who entered foster care during the period under review were re-entering within 12 months of a prior foster care episode.

Applicable Cases: A case is applicable for an assessment of this item if the child entered foster care at least once during the period under review.

Special Circumstances: If a child was on a trial home visit and then returned to a substitute care setting, that return is not considered an “entry into foster care” and the case is not applicable, unless the child was on a trial home visit for more than 6 months and there is no court order extending the trial home visit beyond 6 months.

Is this case applicable? (Select the appropriate response. If the response is No, rate the item as Not Applicable in the rating section, provide your reason for this rating in the documentation section, and continue to item 6.)

A. Did any of the child’s foster care entries during the period under review occur within 12 months of the child’s discharge from a prior foster care episode?

Definitions:

“Entry into foster care” is defined as a child’s physical removal from his or her normal place of residence by the agency and placement in a substitute care setting under the care and placement responsibility or supervision of the agency. If a child was on a trial home visit and then returned to a substitute care setting, that return is not considered an “entry into foster care” unless the child was on a trial home visit for more than 6 months and there is no court order extending the trial home visit beyond 6 months.

“Episode of foster care” refers to the timeframe between a child’s entry into foster care (the date shown in Section J on the Face Sheet) and the child’s discharge from foster care (the date shown in Section K on the Face Sheet).

“Discharge” refers to the point when the child is no longer in foster care under the care and responsibility or supervision of the agency. If the agency retains supervision of a child and the child returns home on a trial basis for an unspecified period of time, the child should be considered discharged from foster care after a 6-month period of time, unless a longer period of time has been specified in a court order.

Instructions:

Reviewers are to answer this question based only on formal entries into and exits from foster care as defined above. Reviewers are not to consider physical reunification as a discharge from foster care unless there also is a transfer of care and placement responsibility.

B. If the answer to question A is Yes, was there evidence that the agency made a concerted effort to prevent re-entry?

Instructions:

If the answer to question A is No, the answer to question B should be Not Applicable (NA).

Reviewers should examine the reasons why a child had multiple entries into foster care and what efforts were made by the agency to prevent the re-entry.

Rating Criteria:

Item 5 should be rated as a Strength if either of the following applies:

The answer to question A is No.

The answer to question A is Yes, and the answer to question B is Yes.

Item 5 should be rated as an Area Needing Improvement if both of the following apply:

The answer to question A is Yes.

The answer to question B is No.
Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

<table>
<thead>
<tr>
<th>Item 5 is rated as</th>
<th>-</th>
<th>because:</th>
</tr>
</thead>
</table>

Documentation Information

Date of child's first entry into foster care during the period under review (MM/DD/YY): __________________________

Was this entry within 12 months of a previous discharge: [ ] YES [ ] NO

Date of discharge, if any, within 12 months of this entry (MM/DD/YY): __________________________

If there are additional entries into foster care after a discharge during the period under review, provide the above information for each of those entries:

Describe the reasons for each entry into foster care during the period under review:

Other Issues:
**PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY AND STABILITY IN THEIR LIVING SITUATIONS**

**Item 6: Stability of foster care placement (case files and interviews with caseworker, foster parent(s), child)**

**Purpose of Assessment:** To determine if the child in foster care is in a stable placement at the time of the onsite review and that any changes in placement that occurred during the period under review were in the best interest of the child and consistent with achieving the child’s permanency goal(s).

**Applicable Cases:** All foster care cases are applicable for an assessment of this item.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</table>

**Is this case applicable?** (Select the appropriate response. If the response is No, rate the item as Not Applicable in the rating section, provide your reason for this rating in the documentation section, and continue to item 7.)

A. How many placement settings did the child experience during the period under review?

**Definitions:**

“Placement setting” refers to a physical setting in which a child resides for more than 24 hours while in foster care under the supervision of the agency. A new placement setting would result, for example, when a child moves from one foster family home to another or to a group home or institution. Placement settings may include shelter care, treatment facilities, and juvenile justice placements. If, however, a foster family with whom a child is placed moves and the child moves with them, this does not constitute a change in placement.

“Entry into foster care” refers to a child’s removal from his or her normal place of residence by court order or a voluntary placement agreement, and placement in a substitute care setting, or the removal of custody from the parent or relative guardian, which permits the child to remain in a substitute care setting.

“Current episode of foster care” refers to a child’s current stay in foster care based on the most recent removal of the child from his or her normal place of residence, resulting in his or her placement in a foster care setting and ending upon the child’s discharge from foster care.

**Instructions:**

If there were multiple episodes of foster care during the period under review, add up the placement settings within each episode. If there is a re-entry into foster care and the child is placed in a different placement setting at the time of re-entry, then it would count as a new placement setting. If the child returns to the placement setting that he or she was in before the return home, then it would not count as a new placement setting.

Reviewers should not consider the following as placement settings: (1) trial home visit; (2) a runaway episode; (3) temporary absences from the child’s ongoing foster care placement, including visitation with a sibling, relative, or other caretaker (for example, pre-placement visits with a subsequent foster care provider or pre-adoptive parents); (4) hospitalization for medical treatment, acute psychiatric episodes, or diagnosis; (5) respite care; and (6) day or summer camps.

Complete the table below. Begin with the child’s placement setting at the onset of the period under review, or if the child entered foster care during the period under review, begin with the first placement setting at entry into foster care. If there was only one placement setting, complete only the first two columns of the first row.

<table>
<thead>
<tr>
<th>Placement Date</th>
<th>Placement Type</th>
<th>Reason for change in Placement Setting</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<tr>
<td>B. If the response to question A is greater than one (1), were all placement changes during the period under review planned by the agency in an effort to achieve the child’s case goals or to meet the needs of the child?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**Definitions:**
Placement changes that reflect agency efforts to achieve case goals include: moves from a foster home to an adoptive home, moves from a more restrictive to a less restrictive placement, moves from non-relative foster care to relative foster care, moves that bring the child closer to family or community, etc.

Placement changes that do not reflect agency efforts to achieve case goals include: moves due to unexpected and undesired placement disruptions; moves due to placing the child in an inappropriate placement (that is, one that was based on availability rather than on appropriateness); moves to more restrictive placements when this is not essential to achieving a child’s permanency goal; temporary placements while awaiting a more appropriate placement; and practices of routinely placing children in a particular placement type, such as shelter care, upon initial entry into foster care regardless of individual needs.

**Instructions:**
If the response to question A is one (1), then the response to question B should be Not Applicable (NA). If the single placement is not stable, that information will be collected in question C.

If ALL placement changes during the period under review reflect planned agency efforts to achieve the child’s case goals or meet the needs of the child, then the answer to question B should be Yes.

If any single placement change that occurred during the period under review was for a reason other than agency efforts to achieve case goals or to meet the child’s needs, the answer to question B should be No.

Placement changes that occur as a result of unexpected circumstances that are out of the control of the agency (such as the death of a foster parent or foster parents moving to another State) can be considered similar to those that reflect agency efforts to achieve case goals for purposes of question B.

| C. Is the child’s current placement setting (or most recent placement if the child is no longer in foster care) stable? | Yes | No |

**Instructions:**
If any of the following apply to the child’s current placement, the answer to question C should be No (select all that apply). If none of the following apply, then the answer to question C should be Yes.

- The child’s current placement is in a temporary shelter or other temporary setting.
- There is information indicating that the child’s current substitute care provider may not be able to continue to care for the child.
- There are problems in the current placement that threaten the stability of the placement but that the agency is not addressing.
- The child has run away from this placement more than once in the past, or is in runaway status at the time of the review.
- Other (describe):

**Rating Criteria:**

**Item 6 should be rated as a Strength if either of the following applies:**

- The answer to question A is one (1), the answer to question B is Not Applicable, and the answer to question C is Yes.
- The answer to question A is greater than one (1), but the answers to questions B and C are Yes.

**Item 6 should be rated as an Area Needing Improvement if either of the following applies:**

- The answer to question A is one (1), but the answer to question C is No.
- The answer to question A is greater than one (1), and the answer to either question B or C is No.
### Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

**Main Reason**

<table>
<thead>
<tr>
<th>Item 6 is rated as a(n)</th>
<th>-</th>
<th>because:</th>
</tr>
</thead>
</table>

### Documentation Information

For each placement change (if relevant) during the period under review, indicate why you determined that the change was or was not planned by the agency in an effort to achieve the child’s case goals or to meet the needs of the child:

Provide your reasons for determining that the child’s current placement (or most recent placement if the child is no longer in foster care) is or is not stable:

### Other Issues:

<table>
<thead>
<tr>
<th>Placement Moves in AFCARS</th>
<th>Placement Moves in PLC Central</th>
<th>Number of Moves in Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Was the correct number of moves indicated in AFCARS? (Explain)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Was the correct number of moves indicated in Placement Central? (Explain)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Were all moves clearly documented in the case file during the period under review? (Explain)</th>
</tr>
</thead>
<tbody>
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<td></td>
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</tbody>
</table>

### Additional Comments:
### PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY AND STABILITY IN THEIR LIVING SITUATIONS

**Item 7: Permanency goal for child (case file and interviews with caseworker and other relevant persons involved in the case, including the child, when age appropriate, parent(s), foster parent(s), service providers, CASA workers, guardian ad litem)**

**Purpose of Assessment:** To determine whether appropriate permanency goals were established for the child in a timely manner.

**Applicable Cases:** All foster care cases are applicable for an assessment of this item, unless the case has not been open long enough (less than 60 days) for the agency to have developed a case plan and established a permanency goal. If the case has been open for less than 60 days, but a permanency goal has been established, the case is applicable for assessment.

**Is this case applicable?**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**A1. What is (are) the child’s current permanency goal(s) (or if the case was closed during the period under review, what was the permanency goal before the case was closed)?**

<table>
<thead>
<tr>
<th>Permanency Goal 1</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Reunification</td>
<td></td>
</tr>
<tr>
<td>Guardianship</td>
<td></td>
</tr>
<tr>
<td>Adoption</td>
<td></td>
</tr>
<tr>
<td>Live with fit &amp; willing relative</td>
<td></td>
</tr>
<tr>
<td>Other Planned Permanent Living Arrangement</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Permanency Goal 2 (If Applicable)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Reunification</td>
<td></td>
</tr>
<tr>
<td>Guardianship</td>
<td></td>
</tr>
<tr>
<td>Adoption</td>
<td></td>
</tr>
<tr>
<td>Live with fit &amp; willing relative</td>
<td></td>
</tr>
<tr>
<td>Other Planned Permanent Living Arrangement</td>
<td>NA</td>
</tr>
</tbody>
</table>

**Instructions:**

Permanency goals are the following: adoption, guardianship, reunification with parents, reunification with relatives, and other planned permanent living arrangements. A goal of other planned permanent living arrangement often will not be specified in the case file using that term. This goal refers to a situation in which the State maintains care and custody responsibilities for the child, but places the child in a setting in which the child is expected to remain until adulthood, such as with foster parents who have made a commitment to care for the child permanently, with relatives who have made the same commitment, or with a residential care facility (for example, for children with developmental disabilities that require residential care).

The permanency goal or goals identified in question A1 determine the additional items to be completed for this outcome (items 8, 9, or 10). If two concurrent permanency goals have been established and are identified in the case plan, identify both goals and complete the corresponding items (items 8, 9, or 10) for each of the goals. If both goals fall under item 8, complete item 8 with both goals in mind. Do not report concurrent goals in A1 unless both are identified in the case file.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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<tbody>
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</table>

**A2. Is (are) the child’s permanency goal(s) specified in the case file?**

**Instructions:**

Permanency goals should be established in the case plan and specified in the case file. If the permanency goal is not specified anywhere in the case file, such as in the case plan, then the answer to question A2 should be No, and item 7 should be rated as an Area Needing Improvement.

If no permanency goal is specified in the case file, reviewers should ask the caseworker to identify the permanency goal that the agency is working toward for the child. This goal should be entered for question A1, and should be used to determine which additional item is completed for the case. Reviewers should ask the caseworker to explain why the child’s permanency goal is not specified in the case file and include that information in the documentation section.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</table>

**B. Were all permanency goals in effect during the period under review established in a timely manner?**

**Instructions:**

Reviewers should answer this question based on their professional judgment regarding the timeliness of establishing the goal, particularly with regard to changing a goal, and provide the rationale for their decision in the documentation section. For children who recently entered care, reviewers should expect the first permanency goal to be established no later than 60 days from the date of the child’s entry into foster care consistent with the Federal requirement that a case plan be established within 60 days from the date of the child’s entry into foster care. For children whose goal was changed from reunification to adoption, reviewers should consider the guidelines established by the Federal Adoption and Safe Families Act (ASFA) regarding seeking termination of parental rights, which might impact the timeliness of changing a goal from reunification to adoption.
Reviewers should answer this question for all permanency goals in effect during the period under review. If there are concurrent goals, the answer should apply to both goals. For example, if there are concurrent goals of reunification and adoption, and you believe that the reunification goal was established in a timely manner, but the adoption goal was not, the answer to question B should be No.

Complete the table below for each of the goals in place during the period under review. Begin with the child’s first permanency goal in place during the period under review, and end with the current or latest permanency goal or goals identified in section A.

<table>
<thead>
<tr>
<th>Permanency Goal</th>
<th>Date Established</th>
<th>Time in Foster Care Before Goal Established</th>
<th>Date Goal Changed</th>
<th>Reason for Goal Change</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

C. Were all permanency goals in effect during the period under review appropriate to the child’s needs for permanency and to the circumstances of the case?

Instructions:

Reviewers should answer this question based on their professional judgment regarding the appropriateness of the permanency goal and provide the rationale for their decision in the documentation section.

Reviewers should consider the factors that the agency considered in deciding on the permanency goal and whether all of the relevant factors were evaluated.

If one of the goals is other planned permanent living arrangement and the reviewer determines that the goal was established without a thorough consideration of other permanency goals, then the answer to question C should be No.

D. Has the child been in foster care for at least 15 of the most recent 22 months?

Instructions:

In answering question D, reviewers should begin the “count” with the date of the judicial finding of child abuse and neglect (usually the adjudicatory hearing) or 60 days after the child’s removal from the home and placement in a substitute care setting, whichever is earlier.

E. If the answer to question D is No, does the child meet other Adoption and Safe Families Act (ASFA) criteria for termination of parental rights (TPR)?

Definitions:

ASFA requires an agency to seek TPR under the following circumstances:

- The child is an abandoned child, or
- The child’s parents have been convicted of one of the felonies designated in Section 475(5)(E) of the Social Security Act, including: (1) committed murder of another child of the parent; (2) committed voluntary manslaughter of another child of the parent; (3) aided or abetted, attempted, conspired, or solicited to commit such a murder or such a voluntary manslaughter; or (4) committed a felony assault that resulted in serious bodily injury to the child or another child of the parent.

Instructions:

If the answer to question D is Yes, the answer to question E should be Not Applicable (NA).

Question E must be answered if the answer to question D is No.

If any of the conditions noted above apply to the case under review, question E should be answered Yes.

F. If the answer to either question D or E is Yes, did the agency file or join a TPR petition before the period under review or in a timely manner during the period under review?

Instructions:

If the answers to both questions D and E are No, the answer to question F should be Not Applicable (NA).

Reviewers should review the case file for evidence of petitioning for TPR. If there is no evidence of this in the file, then reviewers should ask the caseworker for documentation regarding petitioning for TPR. If there is no evidence in the file or other documentation, then question F should be answered No.
Yes | No | NA
---|---|---
G. | If the answer to question F is No, is an “exception” or compelling reason for not filing for TPR specified in the case file? |  |  | 

Definitions:

Exceptions to the TPR requirement include the following: (1) at the option of the State, the child is being cared for by a relative; (2) the agency has documented in the case plan a compelling reason for determining that a TPR would not be in the best interest of the child; or (3) the State has not provided to the child the services that the State deemed necessary for the safe return of the child to the child’s home if reasonable efforts of the type described in Section 471(a)(15)(B)(ii) of the Social Security Act are required to be made with respect to the child.

Instructions:

If the answer to question F is Yes or Not Applicable (NA), then question G should be answered Not Applicable (NA).

Question G can be answered Yes only if the “exception” or compelling reason for not seeking TPR is noted somewhere in the case file or if there is a court order that acknowledges the exception. If, during an interview, the caseworker provides a reason for not seeking TPR, but cannot provide any documentation, then question G should be answered No. However, the caseworker’s verbal description of the reason for not seeking TPR should be noted in the documentation section.

Rating Criteria:

Item 7 should be rated as a Strength if any one of the following criteria apply:

The answers to questions A2, B, and C are Yes, and the answers to questions D and E are No.

The answers to questions A2, B, C, D, and F are Yes.

The answers to questions A2, B, and C are Yes, the answer to question D is No, and the answers to questions E and F are Yes.

The answers to questions A2, B, and C are Yes, the answer to question D or E is Yes, the answer to question F is No, and the answer to question G is Yes.

Item 7 should be rated as an Area Needing Improvement if any of the following apply:

The answer to question A2, B, or C is No.

The answers to questions A2, B, and C are Yes, but the answer to question D or E is Yes, and the answers to questions F and G are No.

Rating for this indicator (select one): | Strength | Area Needing Improvement | Not Applicable
---|---|---|---

Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

| Item 7 is rated as a(n) | - | because: |

Documentation Information

If the permanency goal is not in the case file, provide the caseworker’s explanation for why this information is missing from the file:

Describe the rationale behind the reviewers’ determination regarding the appropriateness or lack of appropriateness of permanency goals:

Describe the rationale behind the reviewers’ determination regarding the timeliness or lack of timeliness in establishing the permanency goals. The reviewers may use information pertaining to seeking TPR or providing exceptions in the case file to justify their determination, if relevant:

If the caseworker reported an “exception” or a compelling reason for not filing for TPR, but it was not in the case file, provide any information obtained about what the exception was and why it was not specified in the case file:

Other Issues:
**PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY AND STABILITY IN THEIR LIVING SITUATIONS**

**Item 8: Reunification, guardianship, or permanent placement with relatives (case files and interviews with caseworker, child, parent(s), foster parent(s), guardian ad litem, service providers)**

**Purpose of Assessment:** To determine whether concerted efforts were made, or are being made, during the period under review, to achieve reunification, guardianship, or permanent placement with relatives in a timely manner.

**Applicable Cases:** All foster care cases in which the child’s current (or most recent) goal is reunification, permanent placement with relatives, or guardianship, including cases in which any one of these is the concurrent goal.

<table>
<thead>
<tr>
<th>Is this case applicable?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

**A. What is/was the child’s most recent permanency goal? (Select the appropriate response.)**

**Definitions:**
- A goal of reunification is defined as a plan for the child to be discharged from foster care to his or her parents or primary caretaker.
- A goal of guardianship is defined as a plan for the child to be discharged from foster care to a legally established custody arrangement with an individual that is intended to be permanent.
- A goal of permanent placement with relatives is defined as a plan for the child to be discharged from foster care to the permanent care of a relative other than the one from whose home he or she was removed.

If there are concurrent goals and both are relevant for item 8, identify both goals.

**B. Are the agency and court making (or did they make) concerted efforts to achieve the goal (or these goals, if there are concurrent goals) in a timely manner?**

**Definitions:**
- "Entry into foster care" is defined as a child’s physical removal from his or her normal place of residence by the agency and placement in a substitute care setting under the care and placement responsibility or supervision of the agency. If a child was on a trial home visit and returned to a substitute care setting, that return is not considered an “entry into foster care” unless the child was on a trial home visit for more than 6 months and there was no court order extending the trial home visit beyond 6 months.
- "Discharge from foster care" is defined as the point when the child is no longer in foster care under the care and placement responsibility or supervision of the agency. If a child returns home on a trial home visit and the agency retains responsibility or supervision of the child, the child is not considered discharged from foster care unless the trial home visit is longer than 6 months, and there was no court order extending the trial home visit beyond 6 months.

**Instructions:**
Complete the following information for the child:

- Date of the child’s most recent entry into foster care (this date should be the same as the date provided in Section J on the Face Sheet): ___________
- Time in care (in months) at the time of the TCM month (this is the number of months that the child was in foster care from the date of the most recent entry into foster care to the beginning of the TCM month or from the date of the most recent entry into foster care to the time of discharge): ___________
- Date of discharge from foster care (this date should be the same as the date provided in Section K on the Face Sheet; if the child was not discharged, enter Not Applicable (NA)): ___________
In determining a response to question B, reviewers should consider the time the child has been in foster care as well as agency efforts. As a general rule, if the child has been in foster care for more than 12 months and the goal has not yet been achieved, then the answer to question B should be No, unless there are particular circumstances that justify the delay. If the reviewer determines that there is a justification for the child remaining in foster care for longer than 12 months before achieving the permanency goal, the justification should be included in the documentation section for this item. For example:

— The permanency goal of reunification has been in place for longer than 12 months, but there is a concurrent goal of adoption and the agency also is working toward the goal of adoption.

— The permanency goal of reunification has been in place for longer than 12 months, but the child was physically returned to the parents during or before the 12th month and remained at home on a trial home visit beyond the 12th month. If the reviewer determines that the length of time that the child spent in out-of-home care and on the trial home visit was reasonable given the child and family circumstances, then the item may be rated as a strength even though the child was not discharged from foster care until after the 12th month.

If the reviewer determines that the agency could have achieved the permanency goal prior to 12 months, but there was a delay due to lack of concerted efforts on the part of the agency, then the answer to question B should be No even if the child was reunified within 12 months. A justification should be included in the documentation section for this item.

Rating Criteria:

Item 8 should be rated as a Strength if the answer to question B is Yes.

Item 8 should be rated as an Area Needing Improvement if the answer to question B is No.

<table>
<thead>
<tr>
<th>Rating for this indicator (select one):</th>
<th>Strength</th>
<th>Area Needing Improvement</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

Item 8 is rated as a(n) __________ because:

Documentation Information

Describe the circumstances of the case relevant to goal achievement (for example, reasons for removal, characteristics or special needs of family or children, such as substance abuse or mental health concerns, circumstances of family, etc.):

Describe efforts made to achieve goal, including what efforts were made, the appropriateness and effectiveness of the efforts, and, if the efforts were not effective, why not:

Describe the barriers to achieving the goal (for example, agency, court, or other factors that prevented or are preventing timely achievement of the goal):
If item 8 was rated as a Strength even though the goal of reunification or permanent placement with relatives was not achieved or is not likely to be achieved within 12 months, describe the special circumstances that justify this rating:

If item 8 was rated as an Area Needing Improvement even though the permanency goal was achieved in 12 months, describe the special circumstances that justify this rating:

Other Issues:

### PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY AND STABILITY IN THEIR LIVING SITUATIONS

**Item 9: Adoption (case file and interviews with caseworker, child, foster parent(s), guardian ad litem, service providers)**

**Purpose of Assessment:** To determine whether, during the period under review, concerted efforts were made, or are being made, to achieve a finalized adoption in a timely manner.

**Applicable Cases:** All foster care cases in which the child’s current (or most recent) permanency goal is adoption, including cases in which adoption is concurrent goal.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
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</table>

**Is this case applicable?** (Select the appropriate response. If the response is No, rate the item as Not Applicable in the rating section, provide your reason for this rating in the documentation section, and continue to item 10.)

A. Is the agency making (or did the agency make) concerted efforts to achieve the goal of adoption in a timely manner?

**Definition:**

“Entry into foster care” is defined as a child’s physical removal from his or her normal place of residence by the agency and placement in a substitute care setting under the care and placement responsibility or supervision of the agency. If a child was on a trial home visit and they returned to a substitute care setting, that return is not considered an “entry into foster care” unless the child was on a trial home visit for more than 6 months and there is no court order extending the trial home visit beyond 6 months.

Discharge from foster care” is defined as the point when the child is no longer in foster care under the care and placement responsibility or supervision of the agency. If a child returns home on a trial home visit and the agency retains responsibility or supervision of the child, the child is not considered discharged from foster care unless the trial home visit is longer than 6 months, and has not been extended by a court order.

**Instructions:**

Provide the following information for the child:

Date of the child’s most recent entry into foster care (this should be the same date as in Section J on the Face Sheet):

Time in care (in months) at the time of the TCM month (this is the number of months that the child was in foster care from the date of the most recent entry into foster care to the beginning of the TCM month or from the date of the most recent entry into foster care to the time of adoption finalization):

Date of adoption finalization (if relevant) (this is the date that the court legally established the adoption and transferred care and placement responsibility or supervision from the State to the adoptive parent(s); this should be the same date as in Section K on the Face Sheet; if the adoption has not been finalized, enter Not Applicable (NA)):
In determining a response to question A, reviewers should consider the following:

- The length of time that the child has been in foster care.

- The agency-related efforts to achieve adoption in a timely manner (for example, establishing a goal of adoption concurrent with the goal of reunification at the onset of the case, placing the child in a foster/adoptive home as the first placement, completing paperwork in a timely manner, conducting a concerted search for an absent parent early in the case, etc.).

- The court-related efforts (for example, holding termination of parental rights hearings in a timely manner, not permitting continuances, etc.).

The determination of timeliness should be based on the date of the child’s most recent entry into foster care, not the date that the goal of adoption was established.

If the adoption was not achieved within 24 months of the date of the most recent entry into foster care, or it does not appear that the adoption will be achieved within that timeframe, then the answer to question A should be No, unless the reviewer finds that there are particular circumstances that warrant the delay. These circumstances must be beyond the control of the agency or the courts. For example, there is evidence that the agency has made concerted efforts to find an adoptive home for a child with special needs, but the appropriate family has not yet been found, or a pre-adoptive placement disrupted despite concerted efforts on the part of the agency to support it.

If the adoption occurs within 24 months, but the reviewer determines that it could have been achieved earlier if the agency had made more concerted efforts, then the answer to question A should be No, but the reviewer must specifically document the agency-related delays in the documentation section.

**Rating Criteria:**

Item 9 should be rated as a Strength if the answer to question A is Yes.

Item 9 should be rated as an Area Needing Improvement if the answer to question A is No.

**Rating for this indicator (select one):**

<table>
<thead>
<tr>
<th>Strength</th>
<th>Area Needing Improvement</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

**Reason for Rating and Documentation**

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

**Main Reason**

Item 9 is rated as a(n) [ ] because:

**Documentation Information**

Describe the circumstances of the case relevant to achievement of the child’s goal of adoption (for example, characteristics of child such as age or special needs, reasons for removal, involvement of biological parents with child, etc.).

Describe efforts made to achieve the child’s goal of adoption, including what efforts were made, the appropriateness and effectiveness of the efforts, and if the efforts were not effective, why not:
If this item was rated as a Strength even though the child’s goal of adoption was not achieved or is not likely to be achieved within 24 months of the child’s entry into foster care, describe the special circumstances that justify this rating:

Other Issues:

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY AND STABILITY IN THEIR LIVING SITUATIONS

Item 10: Other planned permanent living arrangement (case files and interviews with child, caseworker, foster parent(s), relative caregiver(s), independent living services providers, service providers, guardian ad litem)

**Purpose of Assessment:** To determine whether, during the period under review, the agency made concerted efforts to ensure the following:

- That the child is adequately prepared to make the transition from foster care to independent living (if it is expected that the child will remain in foster care until he or she reaches the age of majority or is emancipated).
- That the child, even though remaining in foster care, is in a “permanent” living arrangement with a foster parent or relative caregiver and that there is a commitment on the part of all parties involved that the child remain in that placement until he or she reaches the age of majority or is emancipated.
- That the child is in a long-term care facility and will remain in that facility until transition to an adult care facility.

Reviewers are not to rate this item based on the appropriateness of the goal. If the reviewer believes that the goal is not appropriate, this should be indicated under item 7 and the rationale for this decision provided in the documentation for item 7.

**Applicable Cases:** All foster care cases in which at least one (if there are concurrent goals) of the child’s current (or most recent) goals is emancipation/independent living or a planned permanent living arrangement other than adoption, guardianship, reunification, or permanent placement with relatives.

**Is this case applicable?** (Select the appropriate response. If the response is No, rate the item as Not Applicable in the rating section, provide your reason for this rating in the documentation section, and continue to item 11.)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</thead>
</table>

A. What is the child’s other planned permanent living arrangement goal (check the goal that most closely reflects the one in the case file)?

- **Emancipation/Independence:** Child is expected to remain in existing placement until she/he reaches the age of majority. Usually when this type of goal is specified, the child is age 16 or older, but that is not always the case.
- **Long-term foster care placement with a non-relative foster parent.**
- **Long-term foster care placement with a specified relative.**
- **Placement in a long-term care facility until transition to an adult care facility.**
- **Other (specify):**
A goal of other planned permanent living arrangement often is not specified in the case file using that term. This goal refers to a situation in which the agency maintains care and custody responsibilities for and supervision of the child, and places the child in a setting in which the child is expected to remain, such as with foster parents who have made a commitment to care for the child permanently, with relative foster caregivers who have made the same commitment, or with a long-term care facility (for example, for those children who have developmental disabilities that require long-term residential care services).

If the case plan permanency goal is to establish legal guardianship with a relative or non-relative caregiver and for the child to be discharged from foster care to the care of that relative, then this item is not appropriate and item 8 should be completed instead.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</table>

B. For children with an other planned permanent living arrangement permanency goal that are expected to eventually exit foster care to independence, has the agency made, or did the agency make concerted efforts to provide the child with services to adequately prepare the child for independent living when the child leaves foster care? Independent living services should be provided to all youth age 16 and older and to children of any age with a goal of emancipation/independence.

Instructions:

Question B should be answered Not Applicable (NA) if the child did not reach his or her 16th birthday at any time during the period under review, and the child does not have a goal of emancipation/independence.

In making this determination reviewers should consider the following:

- Did the agency assess for independent living skills?
- Is there an independent living plan in the file? (This is required for all youth age 16 and older.)
- Is the child receiving an age-appropriate range of independent living services (for example, post high school planning, life skills classes, employment training, financial planning skills training, etc.)?
- Is the child receiving transitional living services?
- Does the child have an independent living caseworker?

Reviewers should complete this item for all children 16 and older who have a goal of other planned permanent living arrangement and for all children who have a goal of emancipation/independence regardless of age. Information regarding independent living services for children who have other types of goals will be captured under item 17.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</table>

C. Did the agency make concerted efforts to achieve the goal of other planned permanent living arrangement in a timely manner by placing the child in a living arrangement that is “permanent,” that is, the child will remain in the living arrangement until discharge from foster care?

Instructions:

Question C is relevant for all cases that are applicable for an assessment of item 10, including those in which the child’s stated goal is emancipation/independence. Regardless of the specifics of the goal, reviewers must establish that there were agency efforts to ensure that a child who does not have a goal of adoption, reunification, or guardianship has long-term stability until he or she reaches adulthood.

Examples of “permanent” living arrangements include situations where foster parents have made a formal commitment to care for the child until adulthood, the child is with relatives who plan to care for the child until adulthood, the child is in a long-term care facility to meet special needs and will transferred to an adult facility at the appropriate time, the child is an older adolescent in a stable group home and both the group home directors and the child have agreed that it will be the child’s placement until adulthood, or the child is in agency-supervised transitional living.

Provide the following information for the child:
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of the child’s most recent entry into foster care (this is the same date as in Section J on the Face Sheet):</td>
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<td></td>
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<tr>
<td>Time in care (in months) at the time of the TCM month (this is the number of months that the child was in foster care from the date of the most recent entry into foster care to the beginning of the TCM month or from the date of the most recent entry into foster care to the time of adoption finalization):</td>
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<tr>
<td>Date of documentation regarding “permanency” of the child’s living arrangements (this is the date that there was a formal and documented agreement that the caretaker of a particular facility would provide care for this child until the child reaches adulthood):</td>
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<tr>
<td>Date of discharge from foster care (this is the same date as in Section K on the Face Sheet; if the child was not discharged, enter Not Applicable (NA)):</td>
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</table>

**D.** If the child is not in a living arrangement that can be considered permanent, has the agency made (or is the agency making) concerted efforts during the period under review to achieve this type of living arrangement for the child? Yes No N/A

**Instructions:**

If the child is in a permanent living arrangement or was in a permanent living arrangement before being discharged from foster care, then the answer to question D should be Not Applicable (NA).

In answering question D, reviewers should consider the child’s current living arrangement and whether formal steps were completed to make this arrangement permanent. For example, if the child is in a shelter or living with foster parents without a formal permanent foster care agreement, then the answer to question D would be No. A formal agreement would include a signed agreement and/or court order that are part of the case file.

Reviewers should consider the efforts or actions taken on the part of the agency during the period under review to achieve a planned permanency arrangement other than adoption, guardianship, or reunification with family. This might include asking foster parents or relatives to agree to and sign a long-term care commitment, etc.

If the child is no longer in foster care, then the answer to question D should be based on the child’s last placement before leaving foster care.

**Rating Criteria:**

**Item 10 should be rated as a Strength if either of the following applies:**

- The answers to questions B, C, and D are Yes or Not Applicable.
- The answer to question B is Yes or Not Applicable, the answer to question C is No, and the answer to question D is Yes.

**Item 10 should be rated as an Area Needing Improvement if either of the following applies:**

- The answer to question B is No.
- The answers to questions C and D are No.
### Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

**Main Reason**

<table>
<thead>
<tr>
<th>Item 10 is rated as a(n)</th>
<th></th>
<th></th>
<th>because:</th>
</tr>
</thead>
</table>

**Documentation Information**

Describe the circumstances of the case relevant to goal achievement (for example, age and special needs of child, child behavior problems, placement characteristics, reason for removal, juvenile justice case, etc.):

Describe the efforts made to achieve the child’s goal (for example, what efforts were made, were they appropriate, were they effective, and if not, why not?):

Describe the barriers to achieving the child’s goal (for example, agency-related barriers or child-related barriers, etc.):

If the item is rated as a Strength even though the child is not in a permanent placement (the answer to question D is Yes), describe the special circumstances that justify that rating:

Describe the services provided to adequately prepare the child for independent living:

Other Issues:
### RATING PERMANENCY OUTCOME 1

#### PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY AND STABILITY IN THEIR LIVING SITUATIONS.

Select the level of outcome achievement that best describes the extent to which this outcome is being or has been achieved, based on the ratings for items 5 through 10.

<table>
<thead>
<tr>
<th>Level of Outcome Achievement</th>
<th>Substantially Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Permanency Outcome 1 should be rated as Substantially Achieved if both of the following apply:</td>
</tr>
<tr>
<td></td>
<td>- Item 7 and the relevant permanency goal item (or items, if there are concurrent goals) for this case are rated as Strengths. The relevant permanency goal items are items 8, 9, and 10.</td>
</tr>
<tr>
<td></td>
<td>- Either item 5 or item 6 is rated as a Strength (the other may be rated as an Area Needing Improvement or Not Applicable), or both are rated Not Applicable.</td>
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</table>

<table>
<thead>
<tr>
<th>Level of Outcome Achievement</th>
<th>Partially Achieved</th>
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<tbody>
<tr>
<td></td>
<td>Permanency Outcome 1 should be rated as Partially Achieved if either of the following applies:</td>
</tr>
<tr>
<td></td>
<td>- Item 7 and the relevant permanency goal item or items (8, 9, or 10) are rated as Strengths, but both items 5 and 6 are rated as Areas Needing Improvement, or one of them is rated as an Area Needing Improvement and the other is Not Applicable.</td>
</tr>
<tr>
<td></td>
<td>- Either item 7 or the relevant permanency goal item or items (8, 9, or 10) is rated as an Area Needing Improvement (regardless of the ratings for items 5 and 6).</td>
</tr>
<tr>
<td></td>
<td>- Either item 5 or 6 are rated as strengths, but item 7 and the relevant permanency goal item or items (8, 9, or 10) is rated as an Area Needing Improvement.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level of Outcome Achievement</th>
<th>Not Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Permanency Outcome 1 should be rated as Not Achieved if the following applies:</td>
</tr>
<tr>
<td></td>
<td>- Items 5, 6, 7, 8, 9, and 10 are rated as either Areas Needing Improvement or Not Applicable, but not all items are rated Not Applicable.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level of Outcome Achievement</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Permanency Outcome 1 should be rated as Not Applicable if the following applies:</td>
</tr>
<tr>
<td></td>
<td>- Items 5, 6, 7, 8, 9, and 10 are rated as Not Applicable. (This would only occur if the case is an in-home services case.)</td>
</tr>
</tbody>
</table>
### PERMANENCY OUTCOME 2: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.

**Item 11: Proximity of foster care placement (case file and interviews with caseworker, parent(s), foster parent(s))**

**Purpose of Assessment:** To determine whether, during the period under review, the agency made concerted efforts to ensure that the child’s foster care placement was close enough to the parent(s) to facilitate face-to-face contact between the child and the parent(s) while the child was in foster care.

**Applicable Cases:** An assessment of this item is applicable for all foster care cases except those that meet the following criteria during the entire period under review:

- The whereabouts of both parents is unknown despite documented concerted agency efforts to locate them, and there are no other family members that could potentially provide a permanent home for the child. If there is no evidence that the agency made concerted efforts to locate the parents, then the case is eligible for assessment of item 11.
- Parents are deceased and there are no other close family members that could potentially provide a permanent home for the child.
- Parental rights have been terminated and the parents are not involved in case planning and there are no other close family members (for example, grandmother, aunt, etc.) that could potentially provide a permanent home for the child.
- The agency or the court has determined that continued contact between the child and parents is not in the child’s best interest and this is documented in the case file and there are no other family members that could potentially provide a permanent home for the child.
- Parents have a history of frequent moves that would make it difficult to place the child in close proximity and there are no other family members that could potentially provide a permanent home for the child.

#### Is this case applicable? (Select the appropriate response. If the response is No, rate the item as Not Applicable in the rating section, provide your reason for this rating in the documentation section, and continue to item 12.)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.</td>
<td>Is the child’s current or most recent placement close enough to his or her parents or other potential permanent caregiver to facilitate frequent face-to-face contact between the child and the parents while the child is (or was) in foster care?</td>
<td></td>
</tr>
</tbody>
</table>

#### Instructions:

Reviewers should determine if the child’s placement is (or was) in one of the following (select the appropriate placement):

- Same community
- Different community, but same county
- Different county, but same State.
- Different State

If placement is in the same community as the parents, the answer to question A should be Yes.

If placement is not in the same community, reviewers should consider if the placement is sufficiently close to allow frequent contact between the child and the parents. For example, if placement is in another State, but is still very near where the parents live, then the answer to question A should be Yes. In contrast, if placement is in the same State or county, but is actually quite a distance from the parents, then the answer to question A would be No.

As a general rule, reviewers should consider a travel distance of less than 1 hour as close enough for face-to-face contact. However, this is just a general guideline. Reviewers should consider all relevant circumstances in determining whether the location of the child’s placement allows parents to visit the child on a frequent basis.

If the child’s parents live separately, reviewers should determine which parent is most involved in case planning and is most likely to be reunified with the child. The answer to question A then would be based on the location of that parent’s residence.

#### Is the agency’s reason for the location of the child’s current or most recent placement based on the child’s needs and intended to ensure that the child’s case plan goals are achieved?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. If the answer to question A is No, was the agency’s reason for the location of the child’s current or most recent placement based on the child’s needs and intended to ensure that the child’s case plan goals are achieved?</td>
<td></td>
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</tbody>
</table>
Instructions:

Reviewers should check Not Applicable (NA) if the answer to question A is Yes.

Reviewers should determine if the placement decision was made in order to achieve the child’s case goals or to meet the child’s needs for specialized services (for example, to place with a relative, to place in a potential adoptive home, to provide a highly specialized treatment setting, etc.).

Question B should be answered No if the only reason for not placing the child in close proximity to the parents was a lack of existing placement resources in the community, unless the resource is such a highly specialized treatment facility that most communities would not be expected to maintain one (for example, a residential treatment program for sexual offenders).

Rating Criteria

Item 11 should be rated as a Strength if either of the following applies:
- The answer to question A is Yes, and the answer to question B is Not Applicable.
- The answer to question A is No, and the answer to question B is Yes.

Item 11 should be rated as an Area Needing Improvement if the answers to questions A and B are No.

Rating for this indicator (select one): Strength Area Needing Improvement Not Applicable

Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

Item 11 is rated as a(n) because:

Documentation Information

Describe the relationship between the child’s current or most recent placement and the location of the parents or of a family member with whom the child is likely to be reunified (for example, the child will be reunified with a grandmother):

If the reviewers determine that the child’s placement is not sufficiently close to the parent(s) to facilitate frequent contact, provide the reasons for this determination (and identify any reasons provided by the agency):

Other Issues:
**Item 12: Placement with siblings (case file and interviews with caseworker, parent(s), foster parent(s), child)**

**Purpose of Assessment:** To determine if, during the period under review, the agency made concerted efforts to ensure that siblings in foster care are placed together unless a separation was necessary to meet the needs of one of the siblings.

**Applicable Cases:** Cases applicable for an assessment of this item include all foster care cases in which the child has one or more siblings who are (or were) also in foster care during the period under review. If the child has no siblings in foster care during the period under review, the case is not applicable for an assessment of this item. For example, if the child in foster care has an older sibling that was in foster care at one time, but not during the period under review, this case would be Not Applicable.

| Is this case applicable? (Select the appropriate response. If the response is No, rate the item as Not Applicable in the rating section, provide your reason for this rating in the documentation section, and continue to item 13.) |
|---|---|---|
| **A.** During the period under review, was the child placed with all siblings who also were in foster care? |
| Yes | No | N/A |

**Definitions:**
Siblings are children who are related biologically or through the marriage of their parents.

**Instructions:**
In answering question A, reviewers should consider only the location of each of the siblings, not the reason for their location.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>B.</strong> If the answer to question A is No, was there a valid reason for the child’s separation from the siblings (for example, the separation was necessary to meet the needs of one of the siblings, to address safety concerns for one or more of the siblings, or to accommodate a large sibling group)?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Instructions:**
If the answer to question A is Yes, the answer to question B should be Not Applicable (NA).

Reviewers should consider the circumstances of the placement of siblings, focusing on whether separation was necessary to meet the child’s needs. For example, were siblings separated temporarily because one sibling needed a specialized treatment or to be in a treatment foster home, or because one sibling was abusive to the other, or because siblings with different fathers were placed with paternal relatives?

If the separation of siblings is attributed by the agency to a lack of foster homes willing to take sibling groups, question B should be answered No, unless the reviewer believes that the size of the sibling group (i.e., five or more children) made finding a single placement difficult and the agency made concerted efforts to place the children in close proximity to each other.

If siblings were separated for a valid reason, reviewers should consider the entire period under review and determine if that valid reason still exists and if the need for separation still exists. For example, the siblings were separated because one sibling needed temporary treatment services. However, during the period under review, the sibling’s treatment services ended. In this situation, reviewers should determine whether the agency made concerted efforts to reunite the siblings after the treatment service was completed. If the need for separation no longer exists and the agency has made no efforts to reunite the siblings, then the answer to question B should be No.

**Rating Criteria**

Item 12 should be rated as a Strength if either of the following applies:

- The answer to question A is Yes.
- The answer to question A is No, but the answer to question B is Yes.

Item 12 should be rated as an Area Needing Improvement if the answers to questions A and B are No.
Rating for this indicator (select one): | Strength | Area Needing Improvement | Not Applicable |
---|---|---|---

**Reason for Rating and Documentation**

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

**Main Reason**

| Item 12 is rated as a(n) | - | because: |

**Documentation Information**

Complete the information in the chart below only if there are siblings that were in foster care but were not placed with the target child for some or all of the period under review.

Provide the first name of siblings who are (or were) in foster care during the period under review, identify their placements during the period under review (for example, Smith foster home, Hope Institution, Aunt Mary’s, etc.), and describe the reason for separation of that sibling from the target child (if applicable).

| Sibling First Name | Placement Setting | Reason for Separation (if applicable) |
---|---|---|
| | | |
| | | |
| | | |
| | | |

Other Issues:
### Purpose of Assessment
To determine if, during the period under review, the agency made concerted efforts to ensure that visitation between a child in foster care and his or her mother, father, and siblings is of sufficient frequency and quality to promote continuity in the child’s relationship with these close family members.

### Applicable Cases
Foster care cases are applicable for an assessment of this item if any of the following apply:
- The child has at least one sibling in foster care who is in a different placement setting.
- The whereabouts of the child’s parents is known and there is no documented information in the case file indicating that contact between the child and the parent is not in the child’s best interest.

Cases are not applicable for assessment if any of the following apply:
- The child has no siblings in foster care, and there is documentation in the case file indicating that contact between the child and both of his or her parents is not in the child’s best interest.
- The child has no siblings in foster care, and the whereabouts of both parents is unknown despite documented concerted agency efforts to locate the parents.
- The child has no siblings in foster care, both parents were deceased during the entire period under review or the parental rights of both parents have been terminated during the entire period under review, and no parent is involved in the child’s life.

### Is this case applicable?
(Select the appropriate response. If the response is No, rate the item as Not Applicable in the rating section, provide your reason for this rating in the documentation section, and continue to item 14.)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. During the period under review, did the agency make concerted efforts to ensure that visitation (or other forms of contact if visitation was not possible) between the child and his or her mother was of sufficient frequency to maintain or promote the continuity of the relationship?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. During the period under review, did the agency make concerted efforts to ensure that visitation (or other forms of contact if visitation was not possible) between the child and his or her father was of sufficient frequency to maintain or promote the continuity of the relationship?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Check the box next to the statement that best describes the usual frequency of visits between the mother and the child:
- More than once a week
- Once a week
- Less than once a week, but at least twice a month
- Less than twice a month, but at least once a month
- Less than once a month
- Never

### Check the box next to the statement that best describes the usual frequency of visits between the father and the child:
- More than once a week
- Once a week
- Less than once a week, but at least twice a month
- Less than twice a month, but at least once a month
- Less than once a month
- Never
During the period under review, did the agency make concerted efforts to ensure that visitation (or other forms of contact if visitation was not possible) between the child and his or her sibling(s) was of sufficient frequency to maintain or promote the continuity of the relationship?

During the period under review, did the agency make concerted efforts to ensure that the quality of visitation between the child and the father was sufficient to maintain or promote the continuity of the relationship?

**Instruction:**

Same as for questions A and B except that reviewers should determine if the agency made concerted efforts to ensure that the quality of parent-child visitation was sufficient to maintain the continuity of the relationship. For example, did visits take place in a comfortable atmosphere and were they of an appropriate length? Did visitation allow for sufficient interaction between parent and child? If siblings were involved, did visits allow parents to interact with each child individually? If appropriate, did the agency allow unsupervised visits and visits in the parent’s home in preparation for reunification?

During the period under review, did the agency make concerted efforts to ensure that the quality of visitation between the child and the mother was sufficient to maintain or promote the continuity of the relationship?

During the period under review, did the agency make concerted efforts to ensure that visitation (or other forms of contact if visitation was not possible) between the child and his or her sibling(s) was of sufficient frequency to maintain or promote the continuity of their relationships?

Check the box next to the statement that best describes the usual frequency of visits between the sibling(s) and the child:

- More than once a week
- Once a week
- Less than once a week, but at least twice a month
- Less than twice a month, but at least once a month
- Less than once a month
- Never

**Instructions:**

Reviewers should answer Not Applicable (NA) if the child has no siblings in foster care or if contact with all siblings who are in foster care is not considered to be in the best interests of the child (for example, one sibling is a physical threat to the other sibling or has a history of physical or sexual abuse of the other sibling).

Reviewers should consider whether the frequency of visits during the period under review was sufficient to maintain the continuity of the sibling relationships.

During the period under review, did the agency make concerted efforts to ensure that the quality of visitation between the child and his or her sibling(s) was sufficient to promote the continuity of their relationships?
Instruction:

Same as for question E, except reviewers should determine if the agency made concerted efforts to ensure that the quality of sibling visitation was sufficient to maintain the continuity of the relationship. For example, were visits long enough to permit quality interaction? Did sibling contacts only occur in the context of parent visitations? Did visits occur in a comfortable atmosphere?

Rating Criteria:

Item 13 should be rated as a Strength if the answers to all of questions A through F are either Yes or Not Applicable.

Item 13 should be rated as an Area Needing Improvement if the answer to any one of questions A through F is No.

<table>
<thead>
<tr>
<th>Rating for Item 13:</th>
<th>Strength</th>
<th>Area Needing Improvement</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

Item 13 is rated as a(n) ____________________________ because:

Documentation Information

For each applicable relationship, document why visitation was or was not of sufficient frequency to ensure continuity of the relationship.

Mother:

Father:

Siblings:
For each relationship in which face-to-face visitation was not possible or limited by circumstance (for example, parents are out of State or incarcerated), describe agency efforts or lack of agency efforts to promote contact through telephone or mail.

Mother:

Father:

Siblings:

For each relationship, describe agency efforts (for example, establishing written visitation plans, providing or arranging for transportation, encouraging visits, arranging for flexible hours or meeting locations, providing flexible supervisory arrangements, etc.) or lack of efforts to promote frequent visitation.

Mother:

Father:

Siblings:

For any relationship identified as Not Applicable, provide the reason why it was determined by the reviewers to be Not Applicable.

Mother:

Father:

Siblings:

Other Issues:
## Item 14: Preserving connections (interviews with caseworker, parent(s), foster parent(s), child)

**Purpose of Assessment:** To determine whether, during the period under review, the agency made concerted efforts to maintain the child’s connections to his or her neighborhood, community, faith, extended family, tribe, school, and friends.

**Applicable Cases:** Almost all foster care cases are applicable for an assessment of this item. A possible exception may be the situation of an abandoned infant where the agency has no information about the child’s extended family or connections.

<table>
<thead>
<tr>
<th>Is this case applicable? (Select the appropriate response. If the response is No, rate the item as Not Applicable in the rating section, provide your reason for this rating in the documentation section, and continue to item 15.)</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>During the period under review, did the agency make concerted efforts to maintain the child’s important connections (for example, neighborhood, community, faith, language, extended family members including siblings who are not in foster care, school, tribe, and/or friends)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If the child is Native American, is there documentation in the case file that the agency took appropriate steps to identify the child’s Native American heritage?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>If the child is Native American, during the period under review, did the agency provide the tribe timely notification of its right to intervene in any State court proceedings seeking an involuntary foster care placement or termination of parental rights (TPR)?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**Instructions:**

Reviewers must determine what the important connections are for the child (for example, a young child is more likely to have an important connection with extended family than with school, and it is important for Native American children to maintain tribal connections) and then determine whether the agency made concerted efforts to maintain those connections.

Reviewers should not rate this item based on connections to parents or siblings who are in foster care. Information about sustaining those connections is captured in other items. However, the item may be rated based on connections with siblings who are not in foster care and other extended family members (who were not the child’s primary caregivers before entry into foster care), such as grandparents, uncles, aunts, cousins, etc.

If there is no evidence that the child is Native American either in the case file or through interviews, then the answer to question B is Not Applicable (N/A). If there is no information in the case file that indicates the child is Native American and no apparent efforts were made to determine whether the child was of Native American heritage, then the answer to question B is No.

If the child entered foster care during the period under review, reviewers should determine whether the agency took timely and appropriate action to determine whether the child is Native American. This may include exploring this with the parents and/or other persons with a relationship to the child, contacting tribes, and contacting the Bureau of Indian Affairs.

If the child entered foster care before the period under review, the answer to question B can be Yes if by the beginning of the period under review the agency had made an informed determination about the child’s Native American heritage and the State had taken all appropriate steps to determine whether the child is Native American.

If the child is not Native American, the answer to question C is Not Applicable.

If the child entered care during the period under review or had a TPR hearing during the period under review, reviewers should determine if the agency provided timely notice to the tribe. Timely notice is notice that was received no later than 10 days before the proceeding. If timely notice was not provided, the answer to question C is No.

If the child entered care before the period under review and did not have a TPR hearing during the period under review, the answer to question C is Yes by the beginning of the period under review, the agency had taken all appropriate steps to notify the tribe.
If the child is Native American, did the agency place the child in foster care in accordance with the Indian Child Welfare Act (ICWA) placement preferences or engage in concerted efforts to place the child in accordance with ICWA placement preferences?

Instructions:
If the child is not Native American, then the answer to question D is Not Applicable (NA).

Reviewers should determine whether, during the period under review, the child was placed (1) with a member of the child’s extended family; (2) in a foster home licensed, approved, or specified by the Native American child’s tribe, (3) in another Native American foster home placement, or (4) in an institution approved by a tribe or operated by a Native American organization. Placement preference is in this order unless another order is specified by tribal resolution.

If the child’s placement was not made in accordance with ICWA placement preferences, reviewers should determine if, during the period under review, there were documented concerted efforts to meet the ICWA placement preferences.

Rating Criteria:
Item 14 should be rated as a Strength if the answer to question A is Yes and the answers to questions B, C, and D are either Yes or Not Applicable.

Item 14 should be rated as an Area Needing Improvement if either of the following applies:
- The answer to question A is Yes, but the answer to any one of questions B, C, or D is No.
- The answer to question A is No, regardless of the answers to questions B, C, and D.

Rating for Item 14: Strength Area Needing Improvement Not Applicable

Reason for Rating and Documentation
Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason
Item 14 is rated as a(n) _______________ because:

Documentation Information
Describe the child’s important connections, based on the circumstances of the case:

Describe how the child’s placement does or does not promote maintaining the important connections described above. Identify those connections that are maintained and those that are not maintained through the placement:
Describe agency efforts or lack of efforts to help children maintain important connections when these are not being maintained through the placement itself:

Other Issues:

**PERMANENCY OUTCOME 2: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.**

**Item 15: Relative placement (case file and interviews with caseworker, child’s caregiver, parent(s), child)**

**Purpose of Assessment:** To determine whether, during the period under review, the agency made concerted efforts to place the child with relatives when appropriate.

**Applicable Cases:** All foster care cases except those in which (1) the agency determined upon the child’s initial entry into care that his or her needs required a specialized placement (such as residential treatment services) and will continue to require such specialized treatment the entire time the child is in care and a relative placement would be inappropriate, or (2) situations such as abandonment in which the identity of the parents and relatives remains unknown despite documented concerted efforts to identify them.

| Is this case applicable? (Select the appropriate response. If the response is No, rate the item as Not Applicable in the rating section, provide your reason for this rating in the documentation section, and continue to item 16.) |
|---|---|---|
| Yes | No |

| A1. During the period under review, was the child’s current or most recent placement with a relative? |
|---|---|---|
| Yes | No | N/A |

| A2. If the answer to question A1 is Yes, is (or was) this placement stable and appropriate to the child’s needs? |
|---|---|---|
| Yes | No | N/A |

**Instructions:**

If the answer to question A1 is No, the answer to question A2 should be Not Applicable (NA).

If the answer to question A2 is Yes, reviewers may rate the item as a Strength, and answer Not Applicable (NA) to the remaining questions for the item.

If the answer to question A2 is No, reviewers should answer the remaining questions for this item.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
</table>

| B. If the answer to either question A1 or A2 is No, did the agency, during the period under review, make concerted efforts to identify, locate, and evaluate maternal relatives as potential placements for the child, with the result that maternal relatives were ruled out as, or were unwilling to be, placement resources? |
|---|---|---|

| C. If the answer to either question A1 or A2 is No, did the agency, during the period under review, make concerted efforts to identify, locate, and evaluate paternal relatives as potential placements for the child, with the result that paternal relatives were ruled out as, or were unwilling to be, placement resources? |
|---|---|---|
Instructions:

The answers to question B and C should be Not Applicable (NA) if the answers to both questions A1 and A2 are Yes.

If a child entered foster care during the period under review, reviewers must determine if the State followed the requirements of the title IV-E provision that requires States to consider giving preference to placing the child with relatives, and determine whether the State considered such a placement and how (for example, identifying, seeking out, and evaluating the child’s relatives).

If a child entered foster care before the period under review and the answer to either question A1 or A2 is No, reviewers must determine whether, during the period under review, the agency made concerted efforts to search for and assess relatives as placement resources, if appropriate. If reviewers determine that, during the period under review, the agency did not consider relatives as placement resources in cases in which consideration was appropriate, the answer to question B should be No.

Rating Criteria:

Item 15 should be rated as a Strength if either of the following applies:

- The answers to both questions A1 and A2 are Yes.
- The answer to either question A1 or A2 is No, but the answers to questions B and C are Yes or Not Applicable.

Item 15 should be rated as an Area Needing Improvement if both of the following apply:

- The answer to either question A1 or A2 is No.
- The answer to either question B or C is No.

<table>
<thead>
<tr>
<th>Rating for this indicator (select one):</th>
<th>Strength</th>
<th>Area Needing Improvement</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

| Item 15 is rated as a(n) | - | because: |

Documentation Information

If the child is placed with a relative, identify the relationship of that relative to the child and how long the child has been in that placement:

If the child is not placed with a relative, identify the type of placement the child is in and reasons why the child is not in a relative placement:

Describe agency efforts or lack of efforts to locate and evaluate maternal relatives (including reasons why relatives were not considered as placement resources, if relevant) if appropriate, during the period under review:
Describe agency efforts or lack of efforts to locate and evaluate paternal relatives (including reasons why relatives were not considered as placement resources, if relevant) if appropriate, during the period under review:

Other Issues:

PERMANENCY OUTCOME 2: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.

Item 16: Relationship of child in care with parents (interviews with child, parent(s), foster parent(s), service providers)

Purpose of Assessment: To determine whether, during the period under review, the agency made concerted efforts to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation.

Applicable Cases: All foster care cases are applicable for assessment of this item unless (1) the parental rights for both parents were terminated before the period under review and neither parent made efforts to be involved in the child’s life or in ongoing planning for the child during the period under review; (2) the child was abandoned and neither parent could be located; (3) the whereabouts of both parents was not known during the entire period under review despite documented concerted agency efforts to locate both parents; (4) contact with both parents was considered to be not in the best interests of the child (for example, both parents are abusive and there is concern about managing contact with the child); or (5) the child was initially removed from a parent’s home, but, during the entire period under review, both parents were deceased.

<table>
<thead>
<tr>
<th>Is this case applicable? (Select the appropriate response. If the response is No, rate the item as Not Applicable in the rating section, provide your reason for this rating in the documentation section, and continue to the section on rating Permanency Outcome 2.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td><strong>A.</strong> During the period under review, did the agency make concerted efforts to promote, support, and otherwise maintain a positive and nurturing relationship between the child in foster care and his or her mother?</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>B.</strong> During the period under review, did the agency make concerted efforts to promote, support, and otherwise maintain a positive and nurturing relationship between the child in foster care and his or her father?</td>
</tr>
</tbody>
</table>

Instructions:

The applicable question A or B should be answered Not Applicable (NA) if (1) the parent’s parental rights were terminated before the period under review and the parent was not involved in planning for the child, (2) the parent’s whereabouts was not known during the entire period under review despite agency efforts to locate her/him, (3) contact between the child and the parent was considered to be not in the child’s best interest, or (4) the parent was deceased during the entire period under review.

Foster parents’ activities are considered “agency” activities for purposes of this question. For example, if the foster parent provided transportation to the parent so that the parent could attend the child’s school event or medical appointment, that would be considered an “agency” effort.
Reviewers should determine whether the agency made concerted efforts to support or strengthen the parent-child relationship. For example, did the agency (select all that apply):

- Encourage the parent’s participation in school activities and case conferences, attendance at doctors’ appointments with the child, or engagement in the child’s after school or sports activities?
- Provide or arrange for transportation or provide funds for transportation so that the parent could attend the child’s special activities and doctors’ appointments?
- Provide opportunities for therapeutic situations to help the parent and child strengthen their relationship?
- Encourage the foster parents to provide mentoring or serve as role models to the parent to assist her/him in appropriate parenting?
- Encourage and facilitate contact with incarcerated parents (where appropriate) or with parents not living in close proximity to the child?

Reviewers should not answer this question based on agency efforts (or lack of efforts) to ensure the frequency or quality of visitation between the parent and the child. That information is captured under item 13. This question pertains to additional activities of the agency to help support, strengthen, or maintain the parent-child relationship.

Rating Criteria:

Item 16 should be rated as a Strength if the answer(s) to question(s) A and B are Yes or Not Applicable.

Item 16 should be rated as an Area Needing Improvement if the answer to either question A or B is No.

<table>
<thead>
<tr>
<th>Reason for Rating and Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).</td>
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</table>

<table>
<thead>
<tr>
<th>Main Reason</th>
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</thead>
<tbody>
<tr>
<td>Item 16 is rated as a(n) <em>Strength</em> because: <em>because:</em></td>
</tr>
</tbody>
</table>

Documentation Information

Describe the agency’s efforts or lack of efforts to support or maintain a positive mother-child relationship. (The focus should be on activities such as the ones listed in the instructions, rather than on visitation). Foster parent activities may be considered equivalent to “agency” activities in responding to this question:

Describe the agency’s efforts or lack of efforts to support or maintain a positive father-child relationship. (The focus should be on activities such as the ones listed in the instructions, rather than on visitation.) Foster parent activities may be considered equivalent to “agency” activities in responding to this question:

Other Issues:
**RATING PERMANENCY OUTCOME 2**

**PERMANENCY OUTCOME 2: THE CONTINUITY OF FAMILY RELATIONSHIPS AND CONNECTIONS IS PRESERVED FOR CHILDREN.**

Select the level of outcome achievement that best describes the extent to which this outcome is being or has been achieved, based on the ratings for items 11 through 16.

<table>
<thead>
<tr>
<th>Level of Outcome Achievement</th>
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<tbody>
<tr>
<td><strong>0</strong></td>
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### Section III: Child and Family Well-Being

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

**Item 17: Needs and Services of Child, Parents, and Foster Parents (Case File and Interviews with Caseworker, Child, Parent(s), Foster Parent(s), Service Providers, Guardian Ad Litem)**

**Purpose of Assessment:** To determine whether, during the period under review, the agency made concerted efforts to assess the needs of children, parents, and foster parents (both at the child’s entry into foster care [if the child entered during the period under review] or on an ongoing basis) to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency’s involvement with the family, and provided the appropriate services.

**Applicable Cases:** All cases are applicable for an assessment of this item.

**Special Instructions:**

Item 17 is divided into three sections: 17A: Needs Assessment and Services to Children, 17B: Needs Assessment and Services to Parents, and 17C: Needs Assessment and Services to Foster Parents.

For each section, answer the relevant questions and provide a rating of Strength or Area Needing Improvement and a reason for the rating. If a particular section is Not Applicable for the case, rate that section as Not Applicable.

When each section is completed, provide an overall rating for item 17, and the key reasons for the rating. Keep in mind that for the overall item rating to be a Strength, all three sections must be rated as a Strength or Not Applicable.

**Special Definitions:**

For in-home services cases, “parents” are defined as the children’s primary caregivers with whom the children live (for example, biological parents, relatives, guardians, adopted parents, etc.) or a noncustodial parent who is involved, or has indicated a desire to be involved, in the child’s life.

For foster care cases, “parents” include the child’s parents, or the child’s primary caregivers (if other than the biological parents) from whom the child was removed.

Foster parents are defined as related or non-related caregivers who have been given responsibility for care of the child by the agency while the child is under the care and placement responsibility and supervision of the agency. This includes pre-adoptive parents.

### Section 17A: Needs and Services to Children

| A1. | 
| --- | --- |
| During the period under review, did the agency conduct (1) a formal or informal initial comprehensive assessment of the child(ren)’s needs (if the case was opened during the period under review), or (2) an ongoing assessment to provide updated information regarding the child(ren)’s needs for case planning purposes (if the case was opened before the period under review)? | Yes | No |

**Instructions:**

Assessment of needs may take different forms. For example, needs may be assessed through a formal evaluation conducted by another agency or by a contracted provider or through a more informal case planning process involving intensive interviews with the child, family, service providers, etc.

Reviewers are to answer question A1 based on a determination of whether the agency made concerted efforts to achieve an in-depth understanding of the needs of the child and family, regardless of whether the needs were assessed in a formal or informal manner. Consequently, the evaluation of the assessment should focus on its adequacy in addition to whether one was conducted or not.

Reviewers are to consider whether there were safety concerns pertaining to the child(ren), other than those identified in item 4 that could be reasonably expected to escalate to an immediate safety issue without intervention.
In answering this question, reviewers should consider whether the agency conducted an adequate assessment of the child’s needs with regard to appropriate placement.

Reviewers are to answer this question with regard to an assessment of needs other than those related to the child’s education, physical health, and mental/behavioral health (including substance abuse). The assessment of the child’s needs related to these issues is addressed in later items.

If the case is a foster care case, reviewers are to determine only whether the agency assessed the needs of the target child in the case, even if there are other children in the family in foster care or in the home.

If the case is a foster care case, and the child is an adolescent, reviewers should determine whether the child’s needs for independent living services are being assessed on an ongoing basis as part of the child’s independent living plan. However, if the child is an adolescent and has a permanency plan goal of other planned permanent living arrangement, the reviewer is not to focus on independent living services assessments for item 17 because this was reviewed under item 10.

---

A2. During the period under review, were appropriate services provided to meet the child’s identified needs?

Instructions:

If the answer to question A1 is Yes, but the result of the assessment was that no service needs were identified other than those related to education, physical health, and mental/behavioral health (including substance abuse), and therefore no services were provided other than services to address those needs, the answer to question A2 should be Not Applicable (NA).

Reviewers should focus on the agency’s provision of services during the period under review. If services were provided before the period under review, and an assessment conducted during the period under review indicated no further service needs, then the answer to question A2 should be Not Applicable (NA).

Reviewers are to answer this question with regard to provision of services other than those related to education, physical health, or mental/behavioral health (including substance abuse). The assessment of service provision related to these issues is addressed in later items.

Reviewers should determine whether the services provided matched identified needs. For example, were the services provided simply because those were the services available or were they provided because the assessment revealed a particular need for a particular type of service?

If the case is an in-home services case, reviewers are to consider whether the agency met the service needs of all children in the family, even if only one child was the subject of the maltreatment report.

If the case is a foster care case, reviewers are to determine only whether the agency met the service needs of the target child in the case, even if there are other children in the family in foster care or in the home.

If the case is a foster care case, and the child is an adolescent but does not have a permanency plan of other planned permanent living arrangement, reviewers should determine whether the agency met the service needs relevant to independent living.

Examples of services that are assessed under this item include child care services that are not required for the child’s safety (those services would be covered under item 4), mentoring programs that are not related to the child’s education, recreational services, teen parenting education, preparation for adoption and other permanency goals, services that address family relationships that are not mental health in nature (for example, services to assist children in reestablishing or maintaining family ties), and services to assist the child that are recommended by a therapist or other provider but are not mental-health related (such as enrollment in an activity to assist with social skills or to boost self-esteem), etc.

Rating Criteria:

Section 17A should be rated as a Strength if either of the following applies:

- The answers to both questions A1 and A2 are Yes.
- The answer to question A1 is Yes, and the answer to question A2 is Not Applicable.

Section 17A should be rated as an Area Needing Improvement if the answer to either question A1 or A2 is No.
Rating for this indicator (select one) | 0 | Strength | 0 | Area Needing Improvement

Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

Item 17A is rated as a(n) - because:

Documentation Information

Describe the method that the agency used to assess the child’s needs:

List the needs of the child(ren) identified by the agency:

List needs that were present but were not identified by the agency:

List the services provided to the child(ren):

List the services that were needed but not provided:

Other Issues:
### Section 17B: Needs Assessment and Services to Parents

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>B1.</strong> During the period under review, did the agency conduct (1) a formal or informal initial comprehensive assessment of the mother’s needs (if the case was opened during the period under review) or (2) an ongoing assessment to provide updated information regarding the mother’s needs for case planning purposes (if the case was opened before the period under review)?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B2.</strong> During the period under review, did the agency conduct (1) a formal or informal initial comprehensive assessment of the father’s needs (if the case as opened during the period under review) or (2) an ongoing assessment to provide updated information regarding the father’s needs for case planning purposes (if the case was opened before the period under review)?</td>
<td></td>
<td></td>
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</table>

**Instructions:**

The applicable question B1 or B2 should be answered Not Applicable (NA) if (1) the parent’s parental rights were terminated before the period under review, (2) the parent’s whereabouts was not known during the entire period under review despite agency efforts to locate her or him, or (3) the parent deceased during the entire period under review.

Reviewers are to determine whether the agency has made concerted efforts to ensure that case planning is based on an in-depth understanding of the needs of the child and parent, regardless of whether the needs were assessed in a formal or informal manner. (Assessment of needs may take different forms. For example, needs may be assessed through a formal psychosocial evaluation conducted by another agency or by a contracted provider or through a more informal case planning process involving intensive interviews with the child, family, service providers, etc.)

Assessment of parents’ needs refers to a determination of what parents need to provide appropriate care and supervision to ensure the safety and well-being of their children.

Assessment of parents’ needs may include mental and physical health needs, as later items do not address these concerns for the parents.

If the case was opened during the period under review, reviewers should focus on whether the agency conducted an initial comprehensive assessment as a basis for developing a case plan, and whether ongoing assessment was conducted as appropriate.

If the case was opened before the period under review, reviewers should focus on whether the agency conducted periodic comprehensive needs assessments (as appropriate) during the period under review to update information relevant to ongoing case planning.

If the child is in a pre-adoptive home and termination of parental rights or relinquishment for adoption has been achieved, reviewers should consider the adoptive parents as the parents.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>B3.</strong> During the period under review, did the agency provide appropriate services to the mother to meet identified needs (with respect to services the mother's needs in order to provide appropriate care and supervision to ensure the safety and well-being of her children)?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B4.</strong> During the period under review, did the agency provide appropriate services to the father to meet identified needs (with respect to services the father's needs in order to provide appropriate care and supervision to ensure the safety and well-being of his children)?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Instructions:**

Follow the instructions for questions B1 and B2.

If an assessment was conducted but no service needs were identified, this question can be answered Not Applicable (NA).

Appropriate services are those that enhance the parents’ ability to provide care and supervision to their children and ensure the child(ren)’s safety and well-being, for example, substance abuse treatment, parenting skills classes, safety-related services not included in item 4, etc.
Rating Criteria:

Section 17B should be rated as a Strength if either of the following applies:
- The answers to all four questions are Yes.
- The answer to at least one question is Yes, and the answers to the others are Not Applicable.

Section 17B should be rated as an Area Needing Improvement if the answer to any one of the four questions is No.

Section 17B should be rated as Not Applicable if the answers to all four questions are Not Applicable.

<table>
<thead>
<tr>
<th>Rating for this indicator (select one):</th>
<th>0</th>
<th>Strength</th>
<th>0</th>
<th>Area Needing Improvement</th>
<th>0</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

Item 17B is rated as a(n) ________________________ because:

Documentation Information

If the assessment of the mother’s needs is determined to be not applicable, indicate reason:

If the assessment of the father’s needs is determined to be not applicable, indicate reason:

Describe the needs of the mother identified by the agency:

Describe the mother’s needs that were not identified by the agency:

Describe the services that were provided to the mother:
Describe the services that the mother needed but that were not provided:

Describe the needs of the father identified by the agency:

Describe the father’s needs that were not identified by the agency:

Describe the services provided to the father:

Describe the services that the father needed, but that were not provided:

Other Issues:
**Section 17C: Needs Assessment and Services to Foster Parents**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1. During the period under review, did the agency conduct an assessment of the needs of the foster or pre-adoptive parents on an ongoing basis (with respect to services they need in order to provide appropriate care and supervision to ensure the safety and well-being of the children in their care)?</td>
<td></td>
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</tr>
<tr>
<td>C2. During the period under review, were the foster or pre-adoptive parents provided with appropriate services to address identified needs that pertained to their capacity to provide appropriate care and supervision and ensure the safety and well-being of the children in their care?</td>
<td></td>
<td></td>
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</tbody>
</table>

**Definitions:**

Foster parents are defined as related or non-related caregivers who have been given responsibility for care of the child by the agency while the child is under the care and placement responsibility and supervision of the agency. This includes pre-adoptive parents.

**Instructions:**

Reviewers should select Not Applicable (NA) for both questions C1 and C2 if the case is not a foster care case or if, during the entire period under review, the child was in out-of-home care in a residential facility or similar placement, but does not have foster parents.

The answer to question C2 should be Not Applicable (NA) if needs were assessed but none were identified.

Reviewers should determine whether an assessment was conducted to identify what the foster parents needed to enhance their capacity to provide appropriate care and supervision to the children in their home, including needs for respite care, assistance with transportation needs, counseling to address the child’s behavior problems, etc.

Reviewers should determine whether assessment of foster parent needs is done on an ongoing basis. If there is no evidence in the case file that the agency assessed the needs of the foster parents at any time during the period under review, and the foster parents (if available for interview) indicate that they have not been assessed, then the answer to question C1 should be No.

**Rating Criteria for Section 17C:**

- Section 17C should be rated as a Strength if either of the following applies:
  - The answers to both questions C1 and C2 are Yes.
  - The answer to question C1 is Yes, and the answer to question C2 is Not Applicable.

- Section 17C should be rated as an Area Needing Improvement if the answer to either question C1 or C2 is No.

- Section 17C should be rated as Not Applicable if the answers to questions C1 and C2 are Not Applicable.

<table>
<thead>
<tr>
<th>Rating for this indicator (select one):</th>
<th>0</th>
<th>Strength</th>
<th>0</th>
<th>Area Needing Improvement</th>
<th>0</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

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Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

<table>
<thead>
<tr>
<th>Item 17C is rated as a(n)</th>
<th></th>
<th>because:</th>
</tr>
</thead>
</table>

Documentation Information

Describe the needs of the foster parent(s) identified by the agency:

Describe the foster parents’ needs that were not identified by the agency:

Describe the services provided to the foster parent(s):

Describe the services that the foster parent(s) needed but that were not provided:

Other Issues:
### Rating Criteria for Item 17:

- **Item 17 should be rated as a Strength if sections A, B, and C are all rated as a Strength or Not Applicable.**
- **Item 17 should be rated as an Area Needing Improvement if any one of sections A, B, or C is rated as an Area Needing Improvement**

<table>
<thead>
<tr>
<th>Rating for this indicator (select one)</th>
<th>0</th>
<th>Strength</th>
<th>0</th>
<th>Area Needing Improvement</th>
</tr>
</thead>
</table>

### Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

**Main Reason**

- **Item 17 is rated as a(n) [Blank] because:**

[Blank]
### WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS.

**Item 18: Child and family involvement in case planning (case file and interviews with caseworker, parent(s), child, foster parent(s), service providers)**

<table>
<thead>
<tr>
<th><strong>Purpose of Assessment:</strong> To determine whether, during the period under review, concerted efforts were made (or are being made) to involve parents and children (if developmentally appropriate) in the case planning process on an ongoing basis.</th>
</tr>
</thead>
</table>

**Applicable Cases:** All cases are applicable for an assessment of this item except for the following:
- Foster care cases involving a child for whom participating in planning is not developmentally appropriate, and whose parents or relatives cannot be located despite documented concerted efforts on the part of the agency.
- Foster care cases involving a child for whom participation in planning is not developmentally appropriate, whose parents were deceased during the entire period under review, and who is not in a pre-adoptive or pre-guardianship home.
- Foster care cases involving a child for whom participation in planning is not developmentally appropriate, who is not in a pre-adoptive or pre-guardianship home, and whose parents voluntarily terminated their parental rights (i.e., consented to adoption of the child) shortly after contact with the agency and/or did not seek to be involved in any way in the child’s life.
- Foster care cases involving a child for whom participation in planning is not developmentally appropriate, who is not in a pre-adoptive or pre-guardianship home, and, during the entire period under review, it was documented in the case file that it was not in the child’s best interest to involve the parents and the child in case planning.

In-home services cases are applicable even in States that do not require a formal case plan to be developed for in-home services cases. Therefore, the case is applicable even if there is no requirement for a case plan and there is no case plan in the file.

**Is this case applicable? (Select the appropriate response. If the response is No, rate the item as Not Applicable in the rating section, provide your reason for this rating in the documentation section, and continue to item 19.)**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</table>

A. During the period under review, did the agency make concerted efforts to actively involve the child in the case planning process?

<table>
<thead>
<tr>
<th>Definition:</th>
</tr>
</thead>
</table>

“Actively involved” means that the agency consulted with the child (as developmentally appropriate) regarding the child’s goals and services, explained the plan and terms used in the plan in language that the child can understand, and included the child in periodic case planning meetings, particularly if any changes are being considered in the plan.

**Instructions:**

Reviewers should select Not Applicable (NA) if the child is not old enough to participate in case planning or is incapacitated. Although the capacity to participate actively in case planning will need to be decided on a case-by-case basis, as a guideline, most children who are elementary school-aged or older may be expected to participate to some extent.

If the case is a foster care case, item 18 applies to the target child only. If the case is an in-home services case, item 18 applies to all children in the family who are/were receiving agency services or are/were residing within the family.

If the case is a foster care case, reviewers should answer No to this question if there is no case plan in the file.

If the case is an in-home services case, and there is no case plan in the file (some States require that an identifiable written case plan be included in the file for in-home services cases), reviewers should identify the extent to which the child (if developmentally appropriate) was involved in determining the following: (1) his or her strengths and needs, (2) the type and level of services needed, and (3) his or her goals and progress toward meeting them. The reviewer should determine whether this information was documented in the case file in any way.

Reviewers should not assume that a child’s knowledge about his or her case plan is an indicator of active involvement.

If the initial case plan was developed before the period under review, reviewers should focus on the child’s involvement during the period under review in the ongoing case planning process, particularly with regard to evaluating progress and making changes in the type and level of services needed.
B. During the period under review, did the agency make concerted efforts to actively involve the mother in the case planning process?

C. During the period under review, did the agency make concerted efforts to actively involve the father in the case planning process?

Definition:

“Actively involved” means that the agency involved the parent in (1) identifying strengths and needs, (2) identifying services and service providers, (3) establishing goals in case plans, (4) evaluating progress toward goals, and (5) discussing the case plan in case planning meetings.

For in-home services cases, “parents” are defined as the child’s primary caregivers with whom the child lives, or as a noncustodial parent who is involved or wishes to be involved in the child’s life.

For foster care cases, “mother” and “father” include the following:

- The child’s biological parents
- The child’s primary caregivers (if other than the biological parents) from whom the child was removed (if relevant)
- If, during the period under review, the only plan for the child was guardianship or adoption, the item may be assessed for pre-adoptive parents or persons who are designated to be guardians (those individuals that the agency has designated as potential adoptive parents or guardians and with regard to whom the required procedures have been put in place in preparation for adoption finalization or legal guardianship)

Instructions:

Reviewers should select Not Applicable (NA) if the parents’ involvement was determined to be contrary to the child’s safety or best interests (for example, the parents are considered abusive parents whose contacts with the child continue to pose unmanageable risks). Documentation must be in the case file.

Reviewers should select Not Applicable (NA) if the parents’ whereabouts were not known, and there is documentation in the case file regarding the agency’s concerted efforts to locate her or him.

If the initial case plan was developed before the period under review, reviewers should focus on the parents’ involvement during the period under review the ongoing case planning process, particularly with regard to evaluating progress and making changes in the plan.

Reviewers should select No if the agency did not make concerted efforts to locate a parent whose whereabouts were unknown.

Rating Criteria:

Item 18 should be rated as a Strength if the answers to questions A, B, and C are either Yes or Not Applicable.

Item 18 should be rated as an Area Needing Improvement if the answer to any one of questions A, B, or C is No.

Rating for this indicator (select one): 0 Strength 0 Area Needing Improvement 0 Not Applicable
<table>
<thead>
<tr>
<th>Main Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 18 is rated as a(n) — because:</td>
</tr>
</tbody>
</table>

**Documentation Information**

If the involvement of the child, mother, or father is determined by the reviewers to be Not Applicable, document the reasons for this determination (including any evidence of efforts to locate absent parents).

**Child:**

**Mother:**

**Father:**

Describe the ways that the child was or was not involved in case planning (for example, identifying needs and services, establishing goals, evaluating progress, etc.):

Describe the ways that the mother was or was not involved in case planning (for example, identifying needs and services, establishing goals, evaluating progress, etc.):

Describe the ways that the father was or was not involved in case planning (for example, identifying needs and services, establishing goals, evaluating progress, etc.):

**Other Issues:**
### WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN'S NEEDS.

**Item 19: Caseworker visits with child (case file and interviews with caseworker, child, parent(s), foster parent(s), service providers, guardian ad litem, CASA worker)**

**Purpose of Assessment:** To determine whether the frequency and quality of visits between caseworkers and the child(ren) in the case are sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals.

**Applicable Cases:** All cases are applicable for an assessment of this item.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A.</td>
<td>During the period under review, was the frequency of the visits between the caseworker (or other responsible party) and the child(ren) sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A1.</td>
<td>During the period under review, was a face-to-face visit made with the child in foster care in every applicable month of the review period.</td>
<td></td>
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</tbody>
</table>

**Definitions:**

“Other responsible party” refers to contracted service providers who have full responsibility for case planning and case management (for example, fully or partially privatized child welfare systems where, full case management responsibilities are delegated to contract agencies). It does not refer to contracted service providers that provide services while the agency maintains decision making and case management responsibilities regarding the case or the child.

A “visit” is defined as a face-to-face contact between the caseworker or other responsible party and the child.

**Instructions:**

If the case is an in-home services case, question A should be answered for all children in the family who are living in the home and/or receiving services through the agency.

If the case is a foster care case, question A should be answered only for the target child in the case.

Reviewers should consider only the pattern of visits during the period under review and not over the life of the case.

Reviewers should focus on the visitation frequency of the agency caseworker responsible for the case.

Reviewers should determine the most typical pattern of visiting during the period under review because the actual frequency may vary in specific time periods.

Reviewers should base their determination on the frequency necessary to ensure the child’s safety, permanency, and well-being and not on State policy requirements regarding caseworker contacts or visits with the child. For example, if State policy is that the caseworker should visit the child at least once a month, and the reviewer determines that given the circumstances of the case (for example, there are safety concerns), the caseworker should visit more frequently, then the answer to question A should be No, and the reason for this answer should be provided in the documentation section.

If the typical pattern of visits is less than once a month, the answer to question A should be No unless the reviewer determines that there is a substantial justification for a Yes answer. In this situation the justification should be included in the documentation section.

If the child is in a placement in another State, the reviewer should determine whether a caseworker from the jurisdiction in which the child is placed, or a caseworker from the jurisdiction from which the child was placed, visits with the child in the placement on a schedule that is consistent with the child’s needs and no less frequently than every six months, as required by Federal law.
During the period under review, was the quality of the visits between the caseworker and the child(ren) sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals (for example, did the visits between the caseworker or other responsible party and the child(ren) focus on issues pertinent to case planning, service delivery, and goal achievement)?

**Instructions:**

Reviewers should consider both the length of the visit (for example, was it of sufficient duration to address key issues with the child, or was it just a brief visit) and the location of the visit (for example, was it in a place conducive to open and honest conversation, such as a private home, or was it in a more formal or public environment, such as a restaurant or court house).

Reviewers should consider whether the caseworker saw the child alone or whether the parent or foster parent was usually present during the caseworker’s visits with the child. If the child was older than an infant, and the caseworker did not see the child alone for at least part of each visit, then the answer to question B should be No.

Reviewers also should consider the topics that were discussed during the visits, if that information is available in the case file or through interviews. For the answer to question B to be Yes, there must be some evidence that the caseworker and the child addressed issues pertaining to the child’s needs, services, and case goals during the visits.

**Rating Criteria:**

Item 19 should be rated as a Strength if the answers to both questions A and B are Yes.

Item 19 should be rated as an Area Needing Improvement if the answer to either question A or B is No.

There are no circumstances under which item 19 could be rated as Not Applicable.

<table>
<thead>
<tr>
<th>Rating for this indicator (select one):</th>
<th>0</th>
<th>Strength</th>
<th>0</th>
<th>Area Needing Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>0</td>
<td></td>
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</tbody>
</table>
Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

<table>
<thead>
<tr>
<th>Main Reason</th>
<th>Item 19 is rated as a(n)</th>
<th>because:</th>
</tr>
</thead>
</table>

Documentation Information

Describe barriers to more frequent visiting (if relevant):

If visits were less frequent than monthly, and question A was answered Yes, provide documentation to support that decision and identify other contacts the agency had with the child, if appropriate (for example, the child is in a residential care facility that is 6 hours away, but the caseworker calls and has private conversations with the child weekly and visits the child regularly):

Describe the aspects of the caseworker visits with the child that contributed to high quality visits (if relevant):

Describe why caseworker visits with the child were not of high quality (if relevant):

Describe the child’s needs that are being met during the visits:

Describe the child’s need that are not being met during the visits:

Other Issues:
### WELL-BEING OUTCOME 1: FAMILIES HAVE ENHANCED CAPACITY TO PROVIDE FOR THEIR CHILDREN’S NEEDS.

**Item 20: Caseworker visits with parents (case file and interviews with caseworker, parent(s), service providers)**

**Purpose of Assessment:** To determine whether, during the period under review, the frequency and quality of visits between caseworkers and the mothers and fathers of the children are sufficient to ensure the safety, permanency, and well-being of the children and promote achievement of case goals.

**Applicable Cases:** This item is applicable for assessment for all cases in which visits between the caseworker and at least one parent were determined to be appropriate and not contrary to a child’s safety or best interests. The case is Not Applicable for an assessment of this item if any of the following apply:

- Both parents are deceased (during the entire period under review) and the child is not in a permanent home.
- There is no plan for further involvement between the parents and the agency or the parents and the child, and the child is not in a permanent home.
- The whereabouts of both parents is unknown and (during the entire period under review) there is documentation of the agency’s concerted efforts to locate them.
- During the period under review, neither parent indicated interest in being involved in the child’s life after contact or concerted efforts to contact were made by the agency, and/or contact between the agency and the parent would not be in the child’s best interest (for example, parental rights have been terminated with no plan for further parental involvement, the parents are considered abusive parents whose contacts with the child continue to pose unmanageable risks). Documentation for this also must be in the case file.

Reviewers may not rate the case as Not Applicable if the parents have not been involved in the child’s life unless there is documentation that the agency made concerted efforts to locate both parents and could not locate them, or the agency located them but the parents refused to have any contact with the worker.

**Is this case applicable?** (Select appropriate response. If the response is No, check Not Applicable in the ratings section, provide your reason for the rating in the documentation section, and continue to the Well-Being Outcome 1 rating section.)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
</table>

A1. During the period under review, was the frequency of the visits between the caseworker (or other responsible party) and the mother sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</thead>
</table>

A2. During the period under review, what was the most typical pattern of visitation between the caseworker or other responsible party and the mother of the child(ren)?

<p>| | |</p>
<table>
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<tbody>
<tr>
<td>More than once a week</td>
<td></td>
</tr>
<tr>
<td>Once a week</td>
<td></td>
</tr>
<tr>
<td>Less than once a week, but at least twice a month</td>
<td></td>
</tr>
<tr>
<td>Less than twice a month, but at least once a month</td>
<td></td>
</tr>
<tr>
<td>Less than once a month</td>
<td></td>
</tr>
<tr>
<td>Never</td>
<td></td>
</tr>
<tr>
<td>Not applicable</td>
<td></td>
</tr>
</tbody>
</table>

B1. During the period under review, was the frequency of the visits between the caseworker (or other responsible party) and the father sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
</table>
During the period under review, what was the most typical pattern of visitation between the caseworker or other responsible party and the father of the child(ren):

- More than once a week
- Once a week
- Less than once a week, but at least twice a month
- Less than twice a month, but at least once a month
- Less than once a month
- Never
- Not applicable

Definitions:

"Other responsible party" refers to contracted service providers who have full responsibility for case planning and case management (for example, fully or partially privatized child welfare systems where full case management responsibilities are delegated to contract agencies). It does not refer to contracted service providers who provide services while the agency maintains decision making and case management responsibilities regarding the case or the child.

A “visit” is defined as a face-to-face contact between the caseworker or other responsible party and the parent.

For in-home services cases, “parents” are defined as the children’s primary caregivers with whom the children live, or as a noncustodial parent who is involved or wishes to be involved in the child’s life.

For foster care cases, “parents” include the following:

- The child’s biological parents
- The child’s primary caregivers (if other than the biological parents) from whom the child was removed (if relevant)
- If, during the period under review, the only plan for the child was guardianship or adoption, the item may be assessed for pre-adoptive parents or persons who are designated to be guardians (those individuals that the agency has designated as potential adoptive parents or guardians and with regard to whom the required procedures have been put in place in preparation for adoption finalization or legal guardianship)

Instructions:

Reviewers should select Not Applicable (NA) if: (1) agency contact with the mother or father was determined to be contrary to a child’s safety or best interests (and this is documented in the case file), (2) the location of the parent was unknown during the entire period under review, despite documented concerted agency efforts to locate her or him, (3) the parents’ parental rights were terminated before the period under review and she or he is not involved in the child’s life, or (4) during the entire period under review, the parent was not involved in the child’s life or in case planning in any way despite agency efforts to involve her or him.

If the answer to question A1 or B1 is Not Applicable (NA), the answer to question A2 or B2 for that parent also should be Not Applicable (NA).

Reviewers should consider only the pattern of visits during the period under review and not over the life of the case.

Reviewers should determine the most typical pattern of visiting during the period under review because the actual frequency may vary in specific time periods.

Reviewers should select Never for questions A2 and B2 if the agency reported that the whereabouts of the mother or father was unknown, but there was no evidence that the agency made concerted efforts to locate either the mother or the father.

Reviewers should consider the frequency of visits that is necessary to effectively address: (1) the child’s safety, permanency, and well-being, and (2) achievement of case goals. Reviewers should not answer the question based on the caseworker visit requirements that may be established by State policy.

The answers to questions A1 and B1 should be No if the typical pattern of contact is less than once a month, unless the reviewer has a substantial justification for answering either question as Yes. (Please provide this justification in the documentation section.)
### Item 20: Visits with Mother/Father

During the period under review, was the quality of the visits between the caseworker and the mother or father sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?

**Instructions:**

Reviewers should consider both the length of the visit (for example, was it of sufficient duration to address key issues with the mother/father, or was it just a brief visit?) and the location of the visit (for example, was it in a place conducive to open and honest conversation, such as a private home, or was it in a formal or public environment that might be uncomfortable for the parent, such as a court house or restaurant?).

Reviewers should consider whether the visits between the caseworker or other responsible party and the mother/father focused on issues pertinent to case planning, service delivery, and goal achievement.

If the answer to question A or B is Not Applicable, then the answer to the corresponding question (same parent) C or D should be Not Applicable.

**Rating Criteria:**

Item 20 should be rated as a Strength if the answers to questions A1, B1, C, and D are Yes or Not Applicable.

Item 20 should be rated as an Area Needing Improvement if the answer to any one of questions A1, B1, C, or D is No.

<table>
<thead>
<tr>
<th>Rating for Item 20:</th>
<th>Strength</th>
<th>Area Needing Improvement</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**Reason for Rating and Documentation**

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

**Main Reason**

- Item 20 is rated as a(n) [ ] because:

**Documentation Information**

Describe barriers to more frequent visiting with the mother (if relevant):

If visits with the mother were less frequent than monthly, and the answer to question A1 is Yes, provide the rationale and documentation to support that decision:
If visits with the father were less frequent than monthly, and the answer to question B1 is Yes, provide the rationale and documentation to support that decision:

Describe the general quality of the caseworker visits with the father and the issues that were or were not addressed during caseworker visits (if relevant):

Provide documentation to support a determination that caseworker visits with the father is Not Applicable (if relevant):

Describe barriers to more frequent visiting with the father (if relevant):

If visits with the father were less frequent than monthly, and the answer to question B1 is Yes, provide the rationale and documentation to support that decision:

Describe the general quality of the caseworker visits with the father and the issues that were or were not addressed during caseworker visits (if relevant):

Provide documentation to support a determination that caseworker visits with the father is Not Applicable (if relevant):

Other Issues:
## Rating Well-Being Outcome 1

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

Select the level of outcome achievement that best describes the extent to which this outcome is being or has been achieved, based on the ratings for items 17 through 20.

<table>
<thead>
<tr>
<th>Level of Outcome Achievement</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substantially Achieved</td>
<td>Well-Being Outcome 1 should be rated as Substantially Achieved if both of the following apply:</td>
</tr>
<tr>
<td></td>
<td>- Item 17 is rated as a Strength, and</td>
</tr>
<tr>
<td></td>
<td>- Only one of items 18, 19, and 20 is rated as an Area Needing Improvement</td>
</tr>
<tr>
<td>Partially Achieved</td>
<td>Well-Being Outcome 1 should be rated as Partially Achieved if either of the following applies:</td>
</tr>
<tr>
<td></td>
<td>- Item 17 is rated as an Area Needing Improvement, but at least one other item is rated as a Strength.</td>
</tr>
<tr>
<td></td>
<td>- Item 17 is rated as a Strength, but at least two of items 18, 19, and 20 are rated as Areas Needing Improvement.</td>
</tr>
<tr>
<td>Not Achieved</td>
<td>Well-Being Outcome 1 should be rated as Not Achieved if the following applies:</td>
</tr>
<tr>
<td></td>
<td>- All applicable items are rated as Areas Needing Improvement.</td>
</tr>
<tr>
<td>Not Applicable</td>
<td>Well-Being Outcome 1 should be rated as Not Applicable if all items are rated as Not Applicable.</td>
</tr>
</tbody>
</table>
### Purpose of Assessment
To assess whether, during the period under review, the agency made concerted efforts to assess children’s educational needs at the initial contact with the child (if the case was opened during the period under review) or on an ongoing basis (if the case was opened before the period under review), and whether identified needs were appropriately addressed in case planning and case management activities.

### Applicable Cases
All foster care cases involving a school-aged child, including those in pre-school, are applicable for an assessment of this item. If a child is 2 years old or younger and has been identified as having developmental delays, the case may be applicable if the developmental delays need to be addressed through an educational approach rather than through physical therapy or some form of physical health approach. In these latter cases, the issue of developmental delays would be addressed under item 22.

Foster care cases are **Not Applicable** if the child is age 2 or younger and there are no apparent developmental delays.

In-home services cases are applicable for an assessment of this item if (1) educational issues are relevant to the reason for the agency’s involvement with the family, and/or (2) it is reasonable to expect that the agency would address educational issues given the circumstances of the case. For example, it is reasonable to expect that the agency would address educational issues in a case in which the child is the subject of a substantiated maltreatment report and, during the period under review, the maltreatment appeared to be affecting the child’s school performance.

In-home services cases are **Not Applicable** for an assessment of this item if the reviewer determines that, during the period under review, there is no reason to expect that the agency would address educational issues for any children in the family, given the reason for agency involvement or the circumstances of the case. Such a case would be **Not Applicable**, even if there is information in the case file that the mother or other caregiver has obtained educational services for the child.

### Is this case applicable?
(Select the appropriate response. If the answer is No, rate the item as Not Applicable in the ratings section, provide a reason for the rating in the documentation section, and continue to the Well-Being Outcome 2 rating section.)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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<tbody>
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</table>

### Instructions:
If the case is a foster care case, question A should be answered only for the child in foster care, even if the child was reunified during the period under review and there are other children in the home.

If the case is an in-home services case, question A should be answered for all children in the home who meet the case applicability requirements.

Question A should be answered **Yes** if there was evidence of an educational assessment in the case file, such as the following:

- An educational assessment was included in the comprehensive needs assessment.
- A separate educational assessment was conducted by the school (and made available to the agency) or by the agency.
- The agency conducted an informal (and documented) educational assessment.

Question A should be answered **Yes** if the reviewer determines through interviews with key individuals that the agency assessed the child’s educational needs, even if the case file did not include the documentation identified above.

### Question A
During the period under review, did the agency make concerted efforts to assess the child(ren)'s educational needs?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</thead>
<tbody>
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</table>

### Question B
During the period under review, did the agency engage in concerted efforts to address the child(ren)’s educational needs through appropriate services?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>
Instructions:

Question B should be answered Not Applicable (NA) if an educational assessment was conducted (i.e., question A is answered Yes) but no needs were identified.

Reviewers should identify the child(ren)’s educational needs and determine if services were provided to address those needs. For example, did the child need special education services, extra help with school work (for example, tutoring), advocacy with the school system, early intervention preschool classes, etc.? Were the appropriate services provided to meet the needs?

Reviewers should focus on agency efforts, even if these efforts were not fully successful due to factors beyond the agency’s control. For example, if the agency made concerted efforts to advocate for special education classes, but the local school continued to resist, reviewers may answer Yes to question B, although the child did not receive the needed services.

Rating Criteria:

Item 21 should be rated as a Strength if either of the following applies:

- The answers to questions A and B are Yes.
- The answer to question A is Yes, and the answer to question B is Not Applicable.

Item 21 should be rated as an Area Needing Improvement if the answer to either question A or B is No.

<table>
<thead>
<tr>
<th>Rating for Item 21:</th>
<th>0</th>
<th>Strength</th>
<th>0</th>
<th>Area Needing Improvement</th>
<th>0</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

Reason for Rating and Documentation

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

Main Reason

| Item 21 is rated as a(n) | - | because: |

The following information is being collected for analysis purposes:

For foster care cases only, during the period under review, did the agency conduct case management activities appropriate to addressing the child’s educational needs? Reviewers should determine if, during the period under review, the following case-management requirements of Federal statute were met for an applicable foster care case (select each one that was met):

- To the extent available and accessible, the child’s educational records are in the case file and are up to date [Social Security Act §475(1)(C)].
- The case plan addresses identified educational needs [Social Security Act §475(1)(C)].
- To the extent available and accessible, foster parents or caregivers of a child placed in a facility are provided with the child’s educational records [Social Security Act §475(5)(D)].
- Educational records include the names and addresses of the child’s educational providers, the child’s grade level performance, and any other relevant education information [Social Security Act §475(1)(C)].
Identify in the chart below the services provided or not provided to address the child’s educational needs. Services would include advocacy on the part of foster parents as well as the caseworker; ensuring that the child received special education classes; making provisions for the child to receive tutoring or educational mentoring; or arranging for the child to be enrolled in early intervention preschool classes, such as Head Start:

<table>
<thead>
<tr>
<th>Educational Needs</th>
<th>Services Provided</th>
<th>Services Needed but Not Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

If there are services that were not or are not being provided, describe agency efforts, or lack of agency efforts, to provide those services:

Other Issues:

**RATING WELL-BEING OUTCOME 2**

WELL-BEING OUTCOME 2: CHILDREN RECEIVE APPROPRIATE SERVICES TO MEET THEIR EDUCATIONAL NEEDS.

Check the level of outcome achievement that best describes the extent to which this outcome is being or has been achieved, based on the rating for item 21.

<table>
<thead>
<tr>
<th>Level of Outcome Achievement</th>
<th>Well-Being Outcome 2 should be rated as:</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 Substantially Achieved:</td>
<td>Substantially Achieved if the following applies:</td>
</tr>
<tr>
<td></td>
<td>- Item 21 is rated as a Strength.</td>
</tr>
<tr>
<td>0 Partially Achieved:</td>
<td>Partially Achieved if the following applies:</td>
</tr>
<tr>
<td></td>
<td>- Item 21 is rated as an Area Needing Improvement, but the answer to at least one of the key questions was Yes.</td>
</tr>
<tr>
<td>0 Not Achieved:</td>
<td>Not Achieved if the following applies:</td>
</tr>
<tr>
<td></td>
<td>- Item 21 is rated as an Area Needing Improvement and none of the questions was answered Yes.</td>
</tr>
<tr>
<td>0 Not Applicable:</td>
<td>Not Applicable if the following applies:</td>
</tr>
<tr>
<td></td>
<td>- Item 21 is rated as Not Applicable.</td>
</tr>
</tbody>
</table>
### WELL-BEING OUTCOME 3: CHILDREN RECEIVE ADEQUATE SERVICES TO MEET THEIR PHYSICAL AND MENTAL HEALTH NEEDS.

**Item 22: Physical health of the child (case file and interviews with caseworker, foster parent(s), parent(s), medical service providers, guardian ad litem, service providers)**

**Purpose of Assessment:** To determine whether, during the period under review, the agency made concerted efforts to address the physical health needs of the child, including dental health needs.

**Applicable Cases:**

All foster care cases are applicable for an assessment of this item.

In-home services cases are applicable for an assessment of this item if (1) physical health issues were relevant to the reason for the agency’s involvement with the family, and/or (2) it is reasonable to expect that the agency would address physical health issues given the circumstances of the case. For example, it is reasonable to expect that the agency would address physical health issues in a case in which the child is the subject of a substantiated maltreatment report and there is reason to suspect that, during the period under review, the maltreatment may have affected the child’s physical health.

In-home services cases are not applicable for an assessment of this item if the reviewer determines that there is no reason to expect that the agency would address physical health issues for any children in the family, given the reason for agency involvement or the circumstances of the case. This “non-applicability” applies even if there is evidence in the case file that the agency has learned that the parent is effective in taking care of the child’s physical health needs.

#### Is this case applicable? (Select the appropriate response. If the answer is No, rate the case as Not Applicable in the ratings section, provide your justification for the rating in the documentation section, and continue to item 23.)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
</table>

#### A1. During the period under review, did the agency make concerted efforts to assess the child’s physical health care needs?

#### A2. During the period under review, did the agency make concerted efforts to assess the child’s dental health care needs?

**Instructions:**

If the child is too young for a dental examination, then question A2 should be answered Not Applicable (NA).

Reviewers should determine if there is evidence that, during the period under review, the agency made concerted efforts to arrange for assessment of the child(ren)’s health care needs, including dental care needs, both initially (if the child entered foster care during the period under review), or on an ongoing basis through periodic health and dental screening services conducted during the period under review.

The evidence to take under consideration would include, but is not limited to, the following:

- Conducting an initial health care screening, such as EPSDT (Early Periodic Screening, Diagnosis, and Treatment) or other comprehensive medical examination upon entry into foster care (if the child entered foster care during the period under review).
- Ensuring that, during the period under review, the child received ongoing periodic preventive physical and dental health screenings to identify and avoid potential problems. (Preventive health care refers to initial and periodic age-appropriate dental or physical health examinations.)
- Including an assessment of physical and dental health needs in the initial comprehensive needs assessment (if the child entered foster care during the period under review), or in ongoing needs assessments conducted to guide case planning.

#### B1. During the period under review, did the agency make concerted efforts to provide appropriate services to the child to address all identified physical health needs?

#### B2. During the period under review, did the agency make concerted efforts to provide appropriate services to the child to address all identified dental health needs?
Health records include the names and addresses of the child’s health care providers, a record of the child’s immunizations, the child’s known medical problems, the child’s medications, and any other relevant health information.

Reviewers should answer No to question B1 or B2 if they determine that the fact that the case management activities were not met had or has a negative impact on the agency’s ability to meet the child’s health and dental care needs. For example, foster parents were unable to effectively address health care needs because they had never seen the child’s health records, or the child’s health care needs were not being met because there were no health records in the case file and the worker was unaware of the child’s health care needs.

---

### Rating Criteria:

**Item 22 should be rated as a Strength if either of the following applies:**

- The answers to questions A1, A2, B1, and B2 are Yes.
- The answer to at least one of questions A1, A2, B1, and B2 is Yes, and the rest are Not Applicable.

**Item 22 should be rated as an Area Needing Improvement if the answer to at least one question is No.**

<table>
<thead>
<tr>
<th>Rating for this indicator (select one):</th>
<th>0</th>
<th>Strength</th>
<th>0</th>
<th>Area Needing Improvement</th>
<th>0</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

**Reason for Rating and Documentation**

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

**Main Reason**

Item 22 is rated as a(n) - because:

**Documentation Information**

Identify the evidence of physical or dental health assessment or the lack of evidence of assessment (for example, what type of needs assessment was conducted, and what kind of information was in the case file or missing from the case file that is relevant to an assessment of physical or dental health needs?):

---

Instructions:

If the answers to question(s) A1 and/or A2 are Yes and no needs for services or treatment were identified, then the corresponding question(s) B1 and/or B2 should be answered Not Applicable (NA). If question A2 is Not Applicable (NA) because of the child’s age, then question B2 also should be Not Applicable (NA).

Reviewers should answer these questions based on a determination of the child(ren)’s physical health needs and the services provided or not provided by the agency to address those needs during the period under review. This would include immunizations, treatment services, and dental services, including orthodontics.

For foster care cases only, reviewers should determine if, during the period under review, there was evidence that the following case-management criteria required by Federal statute were met (select each one that was met):

- To the extent available and accessible, the child’s health records are up to date and included in the case file [Social Security Act §475(1)(C)].
- The case plan addresses the issue of health and dental care needs [Social Security Act §475(1)(C)].
- To the extent available and accessible, foster parents or caregivers of a child placed in a facility are provided with the child’s health records [Social Security Act §475(5)(D)].

Health records include the names and addresses of the child’s health care providers, a record of the child’s immunizations, the child’s known medical problems, the child’s medications, and any other relevant health information.

Reviewers should answer No to question B1 or B2 if they determine that the fact that the case management activities were not met had or has a negative impact on the agency’s ability to meet the child’s health and dental care needs. For example, foster parents were unable to effectively address health care needs because they had never seen the child’s health records, or the child’s health care needs were not being met because there were no health records in the case file and the worker was unaware of the child’s health care needs.
Did the child receive periodic, age-appropriate physical and dental health examinations to ensure ongoing assessment of needs? If not, document the reasons why the agency did not conduct this ongoing assessment:

Identify in the chart below the services that were or were not provided to address physical or dental health needs and link those services to identified needs:

<table>
<thead>
<tr>
<th>Identified Physical or Dental Health Needs</th>
<th>Services Provided</th>
<th>Services Needed but Not Provided</th>
</tr>
</thead>
<tbody>
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<td></td>
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</table>

If there are services that were not provided, describe why the services were not provided (for example, lack of agency efforts to secure services, lack of service availability in the community, lack of transportation for foster parents to take child to appointments, etc.):

Other Issues:

WELL-BEING OUTCOME 3: CHILDREN RECEIVE ADEQUATE SERVICES TO MEET THEIR PHYSICAL AND MENTAL HEALTH NEEDS.

Item 23: Mental/behavioral health of the child (case file and interviews with caseworker, foster parent(s), parent(s), child, service providers, guardian ad litem)

Purpose of Assessment: To determine whether, during the period under review, the agency made concerted efforts to address the mental/behavioral health needs of the child(ren).

Applicable Cases:

Foster care cases are applicable for an assessment of this item if the reviewer determines that, during the period under review, the child had existing mental/behavioral health needs, including substance abuse issues. If the child had mental/behavioral health issues before the period under review that were adequately addressed and there are no remaining needs during the period under review, the case should be rated as Not Applicable (NA) and the reason(s) should be noted in the documentation section.

In-home services cases are applicable for an assessment of this item if (1) mental/behavioral health issues were relevant to the reason for the agency’s involvement with the family, and/or (2) it is reasonable to expect that the agency would address mental/behavioral health issues given the circumstances of the case. For example, it is reasonable to expect that the agency would address mental health issues in a case in which the child is the subject of a substantiated maltreatment report and there is reason to suspect that, during the period under review, the maltreatment may have affected the child’s mental health.

In-home services cases are Not Applicable for an assessment of this item if the reviewer determines that there is no reason to expect that, during the period under review, the agency would address mental/behavioral health issues for any children in the family, given the reason for agency involvement or the circumstances of the case.
### Is this case applicable? (Select the appropriate response. If the answer is No, rate the case as Not Applicable in the rating section and provide your justification for this rating in the documentation section.)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

**A.** During the period under review, did the agency conduct an assessment of the child(ren)’s mental/behavioral health needs either initially (if the child entered foster care during the period under review) or on an ongoing basis to inform case planning decisions?

**Definition:**

“Behavioral health needs” includes needs related to behavioral problems that are not always specified as mental health needs, including substance abuse.

**Instructions:**

This question should be answered for all cases determined to be applicable for an assessment of this item, based on the above criteria.

Reviewers should determine whether, during the period under review, the agency conducted a formal or informal mental/behavioral health assessment on the child either at entry into foster care (if the child entered foster care during the period under review), or on an ongoing basis to provide updated information for case planning decisions with regard to mental/behavioral health issues.

If the case is an in-home services case, question A should be answered for all children in the home who meet the case applicability requirements.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
</table>

**B.** During the period under review, did the agency provide appropriate services to address the child(ren)’s mental/behavioral health needs?

**Instructions:**

If question A is answered Yes, but no mental/behavioral health service needs were identified, then the answer to question B should be Not Applicable (NA).

Reviewers should consider the mental/behavioral health needs that existed during the period under review and the services that the agency provided to address those needs, including outpatient treatment, inpatient mental health treatment, treatment for substance abuse disorders, individual therapy, group therapy, family therapy, etc.

**Rating Criteria:**

Item 23 should be rated as a Strength if the answer to question A is Yes, and the answer to question B is Yes or Not Applicable.

Item 23 should be rated as an Area Needing Improvement if the answer to either question A or B is No.

**Rating for this indicator (select one):**

<table>
<thead>
<tr>
<th></th>
<th>0</th>
<th>Strength</th>
<th>0</th>
<th>Area Needing Improvement</th>
<th>0</th>
<th>Not Applicable</th>
</tr>
</thead>
</table>

**Reason for Rating and Documentation**

Please provide below your main reason for rating this item as a Strength, an Area Needing Improvement, or Not Applicable, and provide documentation for the identified issues. If any issue is Not Applicable to the case, enter NA in the appropriate space. For each issue, indicate the source of your information (for example, case file, interview with biological mother, interview with caseworker, etc.).

**Main Reason**

Item 23 is rated as a(n) ________ because:
Documentation Information

If the agency did not conduct initial and/or ongoing mental/behavioral health (including substance abuse) assessments, document the reasons why the assessments should have been provided during the period under review and were not. Also, determine whether any initial mental/behavioral health assessment arranged for by the agency was done so in accordance with State policy timeframes:

Note whether or not there is evidence of a mental/behavioral health (including substance abuse) assessment. For example, (1) what type of needs assessment was conducted, and (2) what kind of information was in the case file or missing from the case file that is relevant to an assessment of mental/behavioral health needs? Indicate if a formal assessment was conducted, and if so, note the diagnosis:

Identify in the chart below the services that were or were not provided to address mental/behavioral health needs and link those services to identified needs:

<table>
<thead>
<tr>
<th>Identified Mental/Behavioral Health Needs</th>
<th>Services Provided</th>
<th>Services Needed but Not Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

If there are services that were not or are not being provided, describe why the services were not provided (for example, lack of agency efforts to secure services, lack of service availability in the community, no transportation for foster parents to take child to appointments, parent’s unwillingness to engage child in services, etc.):

Other Issues:
**RATING WELL-BEING OUTCOME 3**

**WELL-BEING OUTCOME 3: CHILDREN RECEIVE ADEQUATE SERVICES TO MEET THEIR PHYSICAL AND MENTAL HEALTH NEEDS.**

Check the level of outcome achievement that best describes the extent to which this outcome is being or has been achieved, based on the rating for item 22 and 23.

<table>
<thead>
<tr>
<th>Level of Outcome Achievement</th>
<th>Details</th>
</tr>
</thead>
</table>
| 0 | **Substantially Achieved:** Well-Being Outcome 3 should be rated as Substantially Achieved if either of the following applies:  
- Items 22 and 23 are both rated as Strengths.  
- One item is rated as a Strength and the other item is rated as Not Applicable. |
| 0 | **Partially Achieved:** Well-Being Outcome 3 should be rated as Partially Achieved if the following applies:  
- One of the two items (item 22 and 23) is rated as a Strength and the other is rated as an Area Needing Improvement. |
| 0 | **Not Achieved:** Well-Being Outcome 3 should be rated as Not Achieved if either of the following applies:  
- Both items are rated as Areas Needing Improvement.  
- One item is rated as an Area Needing Improvement and the other item is rated as Not Applicable. |
| 0 | **Not Applicable:** Well-Being Outcome 3 should be rated as Not Applicable if both items are rated as Not Applicable. |
I. PURPOSE

The Social Services Program Evaluation and Analysis Section conducted a Quality Case Review (QCR) of Region for the purpose of evaluating the quality of services provided to children and families. This document presents the findings of the QCR assessment of regional performance with regard to seven child and family outcomes and seven systemic factors. The findings were derived from the following documents and data collection procedures:

- Review of 135 social services cases in Region.
- Interviews, focus groups and/or surveys were conducted in counties and at the region level with community stakeholders, including but not limited to, children, parents, foster parents, social services supervisors, social services case managers, DFCS administrators, ILP Youth, collaborating agency personnel, service providers, court personnel and attorneys.
- Information reflected in state, regional and county level data reports as well as the regional self-assessment.

The design of the process and the review instrument measure the same elements identified in the Child and Family Services Federal Review. Region related data and other information were combined to determine the State’s compliance with Federal review items.

This report is in follow-up to the exit conference conducted with management staff. There were five members from the Program Evaluation and Analysis Section in attendance.

II. METHODOLOGY

A qualitative review instrument and case specific interviews were utilized to evaluate the quality of casework and adherence to policy as they related to safety, child and family well-being and permanency planning for children. In addition, a standardized questionnaire was utilized and interviews conducted in order to assess the agency’s relationship with the stakeholders in the community and the agency’s effectiveness in helping children move toward permanency.

Case records were randomly selected based on a statistically valid sample. This data will be included in a statewide sample. All program activity (CPS Investigations, Family Preservation, Placement and/or Adoption) in selected case records was reviewed.
The QCR assessed regional performance on 23 items (1-23) pertaining to the seven outcomes (safety, permanency and well being) and 22 items (24-45) pertaining to the seven systemic factors. In the Outcomes Section of the report, an overall rating of Strength or Area Needing Improvement is assigned to each of the 23 items. Regional performance on the seven outcomes is evaluated as Substantially Achieved, Partially Achieved and Not Achieved. In order for a region to be in substantial conformity with a particular outcome, 95% of the cases reviewed must be rated as having substantially achieved the outcome.

The seven systemic factors are as follows:

- Information System
- Case Review System
- Quality Assurance System
- Staff and Provider Training
- Service Array and Resource Development
- Responsiveness to the Community
- Foster and Adoptive Parent Licensing, Recruitment, and Retention

A region that is not in substantial conformity with a particular outcome must develop and implement a Quality Improvement Plan (QIP) to address the areas of concern within that outcome.

### III. QUALITY ASSURANCE REVIEW FINDINGS

**Strengths:**

- Region had no occurrences of repeat maltreatment and foster care re-entries in the cases reviewed.
- The region made concerted efforts to ensure that children’s foster care placements were within close proximity to parents in order to facilitate face-to-face contact between the children and the parents.
- Documentation supported efforts to place siblings together unless a separation was necessary to meet the needs of one of the siblings.
- Placement cases with children in care less than 12 months had significant improvement in Permanency Outcome Two and Well-Being Outcomes as compared to children in care more than 12 months.
- County A achieved higher ratings in the following Outcomes: Safety Outcome Two, Permanency Outcomes, and Well-Being Outcomes as compared to the combined overall regional performance.
- County B documented efforts to identify, follow up and engage birth fathers in applicable cases.
- The region’s IV-E penetration rate was 40%.
- All Diversion reports reviewed for the region were deemed appropriate for Diversion.
- The average number of days children resided with a safety resource was 69 days.
Areas Needing Improvement:

- Diversion cases in counties A and B were not completed within 30 days as stated in agency protocols.
- The region’s self-assessment indicated all counties were utilizing Family Team Meetings; however, this was not supported with review findings for all counties.
- The frequency and quality of case manager contacts were not sufficient to indicate needs of the children were being assessed.
- Parents and age-appropriate children were not always involved in the case planning process.
- Diligent efforts to identify and engage absent parents in the process were not documented.
- In 62% of applicable cases, safety resource assessments were not completed in a timely manner and/or lacked appropriate screenings on all adult household members, or the agency failed to conduct an assessment.
- Concurrent planning was used in only 11% of the cases reviewed and lack of concurrent planning was also acknowledged by stakeholders as affecting timely permanency achievement.
- Although placed within close proximity, agency efforts were not made to facilitate frequent visitation and activities to promote a positive relationship between children and parents.
- County A submitted Form 431 as the investigation being completed; however, documentation indicated investigation activity continued on for several weeks. This practice did not accurately reflect timeliness of investigations and as a result, the county had 20 past due investigations at the time of the review, however, there were no investigations over 90 days on the Overdue Pending Incidents Report.
- In County A, an average of 30 cases were assigned for Diversion per month during the review period; however the county had a higher number of investigations that were unsubstantiated/closed. Nine of the ten investigations reviewed were unsubstantiated and closed. The agency should review Diversion policy to ensure all reports applicable for Diversion are made.

Systemic Factors:

- Rural counties often lacked needed resources, and staff provided multi- county coverage. Multi-county coverage appeared to impact supervisory practices, especially during vacancies.
- Due to tornado damage, County C DFCS had been operating under adverse conditions, which included lack of a filing system, lack of appropriate office furniture, limited computer/telephone access and being temporarily housed in a vacant church.
- The region conducted supervisory and second level reviews. Review guides were included in the case records.
- A Regional Data Unit was created to improve data accuracy and monitor progress and trends within the region.
- A Regional Resource Development team was established to recruit, train and maintain foster/adoptive parents.
- Limited local institutional placements for children with behavioral problems resulted in children being placed in the Atlanta area, which required several hours of travel.
- ILP coordinator was housed in County D, which was over 1 ½ hours drive from other counties in the region. County A served at least 1/3 of the reported 300 ILP youth.
SECTION A: OUTCOMES SECTION

SAFETY

<table>
<thead>
<tr>
<th>Performance Item or Outcome</th>
<th>Performance Item Rating</th>
<th>Outcome Ratings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Strength</td>
<td>Area Needing Improvement</td>
</tr>
<tr>
<td>Outcome S1: Children are, first and foremost, protected from abuse and neglect.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Item 1: Timeliness of initiating investigations of reports of child maltreatment</td>
<td>78%</td>
<td>22%</td>
</tr>
<tr>
<td>Item 2: Repeat maltreatment</td>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Outcome S1: Children are, first and foremost, protected from abuse and neglect.

Case Review Findings

Item 1. Timeliness of initiating investigations of reports of child maltreatment (An assessment of Item 1 was applicable for 40 cases)

Item 1 was rated a Strength when the reviewers determined that investigations were initiated timely and face-to-face contact with the victim child was established within the assigned time frames.

Item 1 was rated an Area Needing Improvement when the reviewers determined all victim children were not seen within the assigned response time or concerted efforts by the agency to make contact with them were not documented.

Item 2. Repeat maltreatment (An assessment of Item 2 was applicable for 19 cases)

Item 2 was rated a Strength when there was no indication of repeat maltreatment. Repeat maltreatment was identified as a substantiated referral received during the review period with another substantiated referral received six months prior or subsequent to that report. Cases were not applicable for this item if there were no substantiated reports during the review period. Reviewers determined this item was in substantial conformity at 100%.
Stakeholder Interview Information

- Missed response times were usually due to the inability to locate families.
- Lack of investigative staff was identified as a barrier.
- Mandated reporter letters were not always received after reports were made.

Regional Self-Assessment Information

- Progress had been made in the timeliness of completing investigations as most counties were completing investigations in less than 30 days; however, this was still an area of concern for County A.
- Overall, Region remained consistently below the state average for reoccurrence rates with the exception of three counties. (Review findings also indicated one county was above the state average with 10%.)
- Each case of reoccurrence of maltreatment was reviewed by the county staff and the Field Program Specialist to determine whether appropriate or additional services were provided or needed to prevent reoccurrence.
- CPS past due and pending IDS reports was tracked by the counties on a weekly basis.

Management recommendation pertaining to Safety I:

Improve supervisory tracking systems to monitor that response times are met with all child victims and ensure all concerted efforts to meet response times are well documented.

Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.

<table>
<thead>
<tr>
<th>Performance Item or Outcome</th>
<th>Performance Item Rating</th>
<th>Outcome Ratings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Strength</td>
<td>Substantially Achieved</td>
</tr>
<tr>
<td>Outcome S2: Children are safely maintained in their homes whenever possible and appropriate</td>
<td></td>
<td>68%</td>
</tr>
<tr>
<td>Item 3: Services to family to protect child(ren) in home and prevent removal or re-entry into foster care</td>
<td>65%</td>
<td>35%</td>
</tr>
<tr>
<td>Item 4: Risk assessment and safety management</td>
<td>67%</td>
<td>33%</td>
</tr>
</tbody>
</table>
Case Review Findings

Item 3: Services to family to protect child (ren) in home and prevent removal or re-entry into foster care (An assessment of Item 3 was applicable for 54 cases). Children who entered care prior to the review period, remained in care the entire review period, with no other children remaining in the birth home were rated not applicable for this item.

Item 3 was rated a Strength when the reviewers determined the following:

- Services were provided to families to prevent removal included but were not limited to the following: safety resource assessments, protective court orders, mental health services, domestic violence assessments, substance abuse treatment, in-home therapy and medication, PUP, parent aide services, and appropriate referrals to various service providers.
- Children were appropriately removed from the home when it was necessary to ensure their safety.
- The region utilized Concept Guided Risk Assessments, completed safety plans and safety assessments, utilized safety resources and provided appropriate services to reduce risk and promote safety.
- The average number of days children resided with a safety resource was 69 days.

Item 3 was rated an Area Needing Improvement when the reviewers determined the following:

- Contacts with families were not sufficient.
- Safety resource assessments were not completed when required or completed in a timely manner and/or lacked screenings on all adult household members.
- Follow up with service providers was insufficient.
- Lack of quality contact with families in the home.
- Court intervention was not secured when parents were non-compliant with agency safety plans and protective court orders.
- Other services not provided included: mental health services for domestic violence, individual counseling, psychosexual assessments, parent aide and parenting services, and PUP assistance.

Item 4. Risk assessment and safety management (An assessment of Item 4 was applicable for 92 cases)

Item 4 was rated Strength when the reviewers determined the following:

- Required contacts were made with children and they were interviewed privately during a portion of the visit.
- Contacts with relevant collaterals and service providers were documented.
- Use of safety resource placements and protective court orders were secured when needed.
- Services provided to reduce risk in the home included: mental health services to address domestic violence and parenting issues, drug screening and substance abuse services, child care and supervised visitation by the agency.
Item 4 was rated an Area Needing Improvement when the reviewers determined the following:

- Contact with children was infrequent and lacked quality.
- Children were not being observed in their home or interviewed privately to assess safety.
- Risk and safety allegations were not discussed or thoroughly addressed with children.
- Services needed to reduce risk but not provided included: domestic violence and substance abuse assessments, parent aide services, safety resource assessments, safety screenings on other adults living in the home and mental health services for parents.

**Stakeholder Interview Information**

- Relatives were sought prior to entry into foster care to help prevent removal.
- According to many stakeholders, the region was very effective in meeting the needs of children in the home and foster care. Regional staff reported that available preventive services were usually effective.
- Decisions for removal of children were made by the supervisor with input from case managers. Field Program Specialists and/or County Directors also had input as needed.
- Children were sometimes moved to safety resources without adequate assessments.
- Contracted services were ineffective in preventing removal or achieving reunification.

**Management recommendations pertaining to Safety II:**

*During case conferences and case record reviews, supervisors should direct effective case management to ensure safety and risk is thoroughly assessed, contacts with children are of quality and required frequency and ensure appropriate services are provided and agency follow-up is maintained.*
PERMANENCY

Outcome P1: Children have permanency and stability in their living situations.

<table>
<thead>
<tr>
<th>Performance Item or Outcome</th>
<th>Performance Item Rating</th>
<th>Outcome Ratings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Strength</td>
<td>Substantially Achieved</td>
</tr>
<tr>
<td>Outcome P1: Children have permanency and stability in their living situations.</td>
<td></td>
<td>29%</td>
</tr>
<tr>
<td>Item 5: Foster care re-entries</td>
<td>100%</td>
<td>0%</td>
</tr>
<tr>
<td>Item 6: Stability of foster care placement</td>
<td>71%</td>
<td>29%</td>
</tr>
<tr>
<td>Item 7: Permanency goal for child</td>
<td>42%</td>
<td>58%</td>
</tr>
<tr>
<td>Item 8: Reunification, guardianship, or permanent placement with relatives</td>
<td>75%</td>
<td>25%</td>
</tr>
<tr>
<td>Item 9: Adoption</td>
<td>22%</td>
<td>78%</td>
</tr>
<tr>
<td>Item 10: Other planned permanent living arrangement</td>
<td>56%</td>
<td>44%</td>
</tr>
</tbody>
</table>

Case Review Findings

Item 5. Foster care re-entries (An assessment of Item 5 was applicable to six cases)

Item 5 was rated a Strength when the reviewers determined the child had entered foster care at least once during the period under review, and the entry had not occurred within 12 months of children being discharged from a prior entry.

Region was in substantial conformity at 100% for this item.

Item 6. Stability of foster care placement (An assessment of Item 6 was applicable to 45 cases)

Item 6 was rated a Strength when the reviewers determined the following:

- Supportive services were provided to children to meet their emotional/behavioral needs to prevent disruptions.
- Placement changes occurred for appropriate reasons including: placement of siblings together, thoroughly assessing the child and securing placement in a treatment facility, and achieving permanency through placement with adoptive resources or in the home of relatives.
Item 6 was rated as an Area Needing Improvement when the reviewers determined the following:

- Placements were not appropriate to meet the current behavioral needs of the children.
- Services were not offered to prevent disruptions caused by the children’s behaviors.
- Moves were often not planned or not in an effort to achieve permanency for the children.

**Item 7. Permanency goal for child (An assessment of Item 7 was applicable to 45 cases)**

Item 7 was rated a Strength when the reviewers determined the following:

- Permanency goals were appropriate to meet the needs of the children and established in a timely manner.
- Compelling reasons were documented supporting reasons Termination of Parental Rights had not been filed when the children had been in care for 15 out of 22 months. (Great improvement was noted in County A cases.)
- Region appropriately utilized concurrent plans when warranted.
- The permanency plan was changed from Reunification to Adoption within a timely manner to promote achievement within 24 months, particularly in newer cases.

Item 7 was rated as an Area Needing Improvement when the reviewers determined the following:

- Permanency plans were not appropriate based on case circumstances or not established by the court within 60 days of the child entering care.
- TPR petitions were not filed within ASFA timeframes and compelling reasons were not documented.
- There were delays in achieving TPR after the petitions had been filed.
- The goal of Live with a Fit and Willing Relative was often identified as the permanency plan when documentation indicated no relatives were available for placement.

**Item 8. Reunification, Guardianship, or Permanent Placement With Relatives (An assessment of Item 8 was applicable to 16 cases)**

Item 8 was rated a Strength when the reviewers determined the following:

- The region provided services to achieve reunification, such as referrals for parenting skills classes, domestic violence intervention, family and individual counseling, parent aide services, drug and alcohol intervention.
- Case plans for reunification were established within 60 days of the child entering care.
- Diligent searches for relatives were completed when the permanency plan was Live with a Fit and Willing relative.
- Home evaluations were completed on relatives to facilitate relative placements.
- Concerted efforts were made to achieve the permanency plan, even though achievement of reunification would not occur within 12 months.
Item 8 was rated as an Area Needing Improvement when the reviewers determined the following:

- Reunification had not been achieved within 12 months and concerted efforts were not documented.
- Reunification services to parents were not being provided.
- The permanency plan of Live with a Fit and Willing Relative continued when no relatives had been identified as a placement resource.
- Concerted efforts to achieve permanent placement with relatives within 12 months were not documented.

Item 9. Adoption (An assessment of Item 9 was applicable to 23 cases)

Item 9 was rated a Strength when the reviewers determined the following:

- TPR was achieved and concerted efforts, including recruitment for adoptive resources, were being made to achieve adoption within 24 months.
- Concerted efforts to locate an adoptive home were documented when adoption was not achieved within 24 months.

Item 9 was rated as an Area Needing Improvement when the reviewers determined the following:

- TPR petitions were not filed within ASFA timeframes, and often after the children had been in care for up to four years.
- Adoption was not achieved within 24 months of the children entering care.
- Diligent recruitment efforts to locate homes for children without adoptive resources were not always documented.
- The permanency plan of Adoption was not established timely to achieve finalization within 24 months.

Item 10. Other planned permanent living arrangement (An assessment of Item 10 was applicable to nine cases)

Item 10 was rated a Strength when the reviewers determined children were in placements willing to keep them until emancipation. Independent Living services as well as services to address behavioral issues were being provided.

Item 10 was rated as an Area Needing Improvement when the reviewers determined children were in placements that were not willing to keep them until emancipation. There was lack of involvement with the Independent Living Program (ILP) and/or the children lacked knowledge of their Written Transitional Living Plan (WTLP) goals.

Stakeholder Interview Information

- Counties’ decisions to file Termination of Parental Rights (TPR) in a timely manner have improved in the last six months to a year.
- A stakeholder stated some counties did a very good job in establishing appropriate and timely permanency goals and changed them when case circumstances warranted.
- Citizen panels were helpful in making recommendations for changes.
The court and CASA monitored agency efforts to achieve permanency. Tremendous effort had been made to achieve timely reunification for children with their families. Much effort was applied to keeping track of the services needed and asking the court for hearings to correct problems.

Concurrent planning was primarily used if the family had a long history with DFCS and if there had been termination on an older sibling(s). Some counties were not using concurrent planning when appropriate, which would expedite achievement of permanency.

In lieu of TPR, the agency maintained long-term foster care agreements for older children. Permanency hearings were held in conjunction with extensions and did not necessarily promote achievement of permanency.

Fathers were often identified but there was lack of agency effort to locate them and involve them in the case. Turnover issues affected timeliness of achieving permanency.

Local foster homes were not always available, resulting in long trips to place children in adequate placements to meet specific needs.

The region delayed changing permanency goals and filing TPR due to the following:
- large caseloads
- lack of trained staff
- age of children
- children’s bond with family
- mental or physical needs of children

Ineffective casework affected achievement of permanency.

Courts were hesitant to move toward permanency without resolution of delinquent behavior.

Foster parents reported routine lack of participation in permanency hearings and lack of knowledge of the child’s current permanency goal.

Case managers cited several Juvenile Court Judges in the region were giving families additional time to complete their case plans, which delayed TPR.

Case managers reported difficulty in securing TPR court dates once timely petitions were filed.

**Regional Self-Assessment Information**

- Region achieved permanency for 44% of children in their first year of placement.
- Region has finalized 50 adoptions, and adoptive resources were identified for 42 children during the last year.
- Having five judicial systems with different Juvenile Court Judges and SAAGs impacted timelines of court hearings, achievement of permanency and timeliness of ASFA requirements. This also affected consistent permanency planning among the region.

Barriers to achieving timely permanency:
- court delays in conducting permanency hearings
- the court’s hesitance to approve concurrent or non-reunification plans
- the court’s lack of understanding of APPLA (Another Planned Permanent Living Arrangement) as a permanency goal
- counties incorrectly tracking 12 months from date of ten day hearing rather than from removal date
- case manager’s lack of understanding of ASFA requirements as it relates to timely documentation of compelling reasons and petitioning the court for TPR
Management recommendations pertaining to Permanency I:

- Provide supervisory oversight to ensure services are provided to relatives and foster parents to prevent placement disruptions and maintain stability and ensure these efforts are clearly documented in the case files.
- Conduct frequent supervisory reviews and staff all placement cases where children have been in care for 12 months or longer to ensure permanency goals are appropriate, placements are suited to meet those goals, and the agency is moving children toward permanency in a timely manner. Special attention should be given to the documentation of compelling reasons and compliance with ASFA regulations by filing Termination of Parental Rights petitions in a timely manner.
- Secure permanent living arrangements for children with an APPLA permanency goal.
- Utilize the IDS Baseline report in supervisory conferences to address timely achievement of permanency goals and ASFA compliance.

Outcome P2: The continuity of family relationships and connections is preserved for children.

<table>
<thead>
<tr>
<th>Performance Item or Outcome</th>
<th>Outcome Ratings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Strength</td>
</tr>
<tr>
<td>Outcome P2: The continuity of family relationships and connections is preserved for children.</td>
<td>56%</td>
</tr>
<tr>
<td>Item 11: Proximity of foster care placement</td>
<td>96%</td>
</tr>
<tr>
<td>Item 12: Placement with siblings</td>
<td>97%</td>
</tr>
<tr>
<td>Item 13: Visiting with parents and siblings in foster care</td>
<td>51%</td>
</tr>
<tr>
<td>Item 14: Preserving connections</td>
<td>77%</td>
</tr>
<tr>
<td>Item 15: Relative placement</td>
<td>72%</td>
</tr>
<tr>
<td>Item 16: Relationship of child in care with parents</td>
<td>30%</td>
</tr>
</tbody>
</table>
Case Review Findings

**Item 11. Proximity of foster care placement (An assessment of Item 11 was applicable to 25 cases)**

Item 11 was rated a Strength when the reviewers determined that children were placed in the same community or county as their parents or in close proximity. Through placement with relatives, children were able to maintain connections with their parents. Documentation supported placement out of the county was necessary to better meet their identified needs.

Region achieved substantial conformity for Item 11.

**Item 12. Placement with siblings (An assessment of Item 12 was applicable to 29 cases)**

Item 12 was rated a Strength when the reviewers determined the children were placed in a placement with all of their siblings or documentation supported separation of siblings was due to the needs of one or more of the sibling group.

Region achieved substantial conformity for Item 12.

**Item 13. Visiting with parents and siblings in foster care (An assessment of Item 13 was applicable to 37 cases)**

Item 13 was rated a Strength when the reviewers determined the following:

- Visitation plans were established for parents and children.
- Meeting locations were arranged and transportation provided for visitation.
- Supervision for visitation was provided, when needed.
- Diligent efforts to engage birth fathers in visitation with their children were documented. (County A showed a marked improvement in this area.)

Item 13 was rated an Area Needing Improvement when the reviewers determined the following:

- Visitation plans were not established for parents and children.
- Concerted efforts to locate parents for visitation purposes or to facilitate visitation when fathers were identified failed to occur.
- Concerted efforts to facilitate visitation with siblings who were also in foster care failed to take place.
**Item 14. Preserving connections (An assessment of Item 14 was applicable to 43 cases)**

Item 14 was rated a Strength when the reviewers determined the following:

- Children’s connections to extended family members were maintained through placement and agency efforts.
- Children’s connections to their schools and communities were maintained through their placement and regional efforts.
- Children’s connections to former foster families with whom they developed relationships were maintained by the region.
- Children’s connections to siblings not in foster care were maintained through visitation and telephone contacts.

Item 14 was rated an Area Needing Improvement when the reviewers determined the following:

- Failure to maintain connections with extended family members who had been involved with the children prior to their entry into foster care.
- Failure to address birth fathers in some cases prevented connections to paternal relatives to be established or maintained.
- Failure to sustain children’s connections with their siblings who had been adopted and continued contact was planned.

**Item 15. Relative placement (An assessment of Item 15 was applicable to 36 cases)**

Item 15 was rated a Strength when the reviewers determined the following:

- The region conducted diligent searches for relatives, conducted home evaluations on potential relative placements and requested evaluations through the ICPC process when necessary.
- Children were placed with relatives when appropriate.
- When children were not placed with relatives, placement settings were made to best meet their physical, behavioral and emotional needs.

Item 15 was rated an Area Needing Improvement when the reviewers determined the following:

- Initial or ongoing diligent searches for relatives were not conducted.
- The region failed to contact and assess relative placements identified by parents or through the Comprehensive Child and Family Assessments (CCFA).
- Failure to address birth fathers in some cases resulted in the failure to identify potential relative placements for children.

**Item 16. Relationship of child in care with parents (An assessment of Item 16 was applicable to 20 cases)**

Item 16 was rated a Strength when the reviewers determined the agency made concerted efforts to support and/or strengthen the bond between parents and children beyond regular visitation. Examples of efforts to promote bonding between the child and parent included providing opportunities for therapeutic situations to help the parent and child strengthen their relationship, involving the birth parents in school and community activities as well as medical appointments.
Item 16 was rated an Area Needing Improvement when the reviewers determined the following:

- The region failed to make efforts to support or strengthen the parent-child relationship through activities such as participation in school/day care activities, attendance at doctor’s appointments, and involvement in the child’s therapy.
- The region failed to address or make efforts to locate biological fathers and involve them in their children’s lives.

**Stakeholder Interview Information**

- Relative searches are completed before foster care placement. Some counties were successful in finding relative placements.
- There appeared to be great improvement in locating relative resources and using them when appropriate.
- Diligent searches depended upon obtaining information from the parents or having knowledge of the family. Fathers were often known but lacked follow up by county staff.

**Regional Self-Assessment Information**

- Most recent relative placement rate for the region was reported as 22%.
- Lack of adequate diligent search for relatives prior to TPR.

**Management recommendations pertaining to Permanency II:**

**Increase supervisory oversight to ensure:**

- Visitation occurs between children and birth parents, as well as between siblings who are separated in foster care.
- Efforts are made to maintain and preserve children’s connections to extended family members and siblings who are not in foster care.
- Diligent searches are conducted and documented for both maternal and paternal relatives initially and on an ongoing basis. Ensure follow-up occurs in contacting and assessing relatives for placement.
- Efforts are made to support and strengthen the parent-child bond through activities other than visitation.
- More concerted efforts should be made to ensure fathers are addressed in order to involve them in their children’s lives through visitation and other activities, when appropriate and to promote connections with extended family members.
## CHILD AND FAMILY WELL-BEING

### Outcome WB1: Families have enhanced capacity to provide for their children’s needs.

<table>
<thead>
<tr>
<th>Performance Item or Outcome</th>
<th>Outcome Ratings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Strength</td>
</tr>
<tr>
<td>Outcome WB1: Families have enhanced capacity to provide for their children's needs.</td>
<td></td>
</tr>
<tr>
<td>Item 17: Needs and services of child, parents, foster parents</td>
<td>52%</td>
</tr>
<tr>
<td>Item 18: Child and family involvement in case planning</td>
<td>48%</td>
</tr>
<tr>
<td>Item 19: Caseworker visits with child</td>
<td>54%</td>
</tr>
<tr>
<td>Item 20: Caseworker visits with parent(s)</td>
<td>14%</td>
</tr>
</tbody>
</table>

### Item 17: Needs and Services of Child, Parents, Foster Parents (An assessment of Item 17 was applicable to 69 cases)

Item 17 was rated a Strength when the reviewers determined the following:

- Formal assessments were conducted using tools such as Comprehensive Child and Family Assessments, psychological evaluations, and substance abuse assessments.
- Informal assessments were conducted during face-to-face contacts with children, parents and foster parents.
- Needs of children and placement providers were identified and addressed through utilization reviews.
- Services provided to children in response to identified needs included:
  - placement in the most stable, least restrictive setting
  - facilitation of visitation with parents and siblings
  - referral for services provided through the Independent Living Program
  - facilitation of involvement in extracurricular activities
- Services provided to parents in response to identified needs included:
  - facilitation of visitation with children
  - drug screens
  - referrals for mental health/substance abuse treatment
  - family therapy
  - parenting classes
Region Social Services Review

- safety resource assessments
- home evaluations

- Services were provided to foster/adoptive parents and relative placements included:
  - assistance with transportation of children for appointments
  - assistance in obtaining information from school systems
  - assistance with pre- and after-school programs
  - assistance in obtaining Enhanced Relative Rate payments
  - adoptive services, including foster home conversions, completion of life histories and registration with the Office of Adoptions, and assistance in completing necessary paperwork for finalizations

Item 17 was rated an Area Needing Improvement when the reviewers determined the following:

- There was a lack of adequate contact with parents and children to assess needs and/or to ensure appropriate service provision.
- Assessment of children and families’ needs were insufficient and/or appropriate services were not provided in response to identified needs. In some instances, documentation did not support the agency followed up on recommendations made in psychological/psychosexual evaluations, provided housing assistance, or made appropriate referrals and/or follow-up with domestic violence and anger management issues.
- The agency failed to follow recommendations regarding the best placement options for children and/or failed to follow-up on children’s expressed concerns about their placement settings.
- Documentation did not support the agency made concerted efforts to identify, locate, assess and/or engage absent parents in the case process, including incarcerated parents.
- Foster/Adoptive parents’ needs were not thoroughly assessed in some cases to determine if support services were appropriate or effective.

Item 18: Child and Family Involvement in Case Planning (An assessment of Item 18 was applicable to 65 cases)

Item 18 was rated a Strength when the reviewers determined the following:

- Parents and age-appropriate children were included in the case planning process by discussing permanency plans/case plan goals, and attending Family Team Meetings, Multi-disciplinary Team Meetings, court hearings and case panel reviews.
- Written Transitional Living Plans were located for age-appropriate children in most of the cases reviewed.

Item 18 was rated an Area Needing Improvement when the reviewers determined the following:

- There was insufficient documentation to support parents and/or age-appropriate children were involved in case planning, panel reviews, or judicial reviews.
- Youth were not involved in the development of their Written Transitional Living Plans.
- Case plans were not developed timely and/or relevant information was not updated.
In the majority of these cases (25 of the applicable 34 cases rated as needing improvement), documentation did not support agency efforts to locate absent parents and involve them in the case planning process, including incarcerated parents. Lower outcomes were noted in Family Preservation cases.

Although it was reported that FTMs were being utilized by all counties in the region, the review did not support this process was being utilized.

**Item 19: Caseworker visits with child (An assessment of Item 19 was applicable to 69 cases)**

Item 19 was rated a Strength when the reviewers determined the following:

- The frequency of contacts met state guidelines and quality of contacts was sufficient to assess ongoing risk, safety, and well-being. In some cases, contacts exceeded state requirements and documentation reflected excellent engagement between the case manager and the child. There was a noted improvement in County A cases.
- When quarterly visits were made, case files contained monthly progress notes from private placement agencies and/or telephone contact was made with the child by the case manager.
- Case managers discussed case plan goals and progress with children in an age-appropriate manner.
- Children were seen alone for portions of contacts to assess their safety and needs.
- Contacts focused on the reasons for agency involvement.

Item 19 was rated an Area Needing Improvement when the reviewers determined the following:

- Quality and frequency of contacts were insufficient to meet the ongoing needs of children and/or assess risk, safety and wellbeing. This was a low outcome particularly in County B.
- Documentation did not reflect separate interactions with children or age-appropriate discussions to assess needs, service provision or to discuss goals.
- Documentation did not reflect case manager observed interaction between children and caretakers in Family Preservation cases.

**Item 20: Caseworker visits with parents (An assessment of Item 20 was applicable to 43 cases)**

Item 20 was rated a Strength when the reviewers determined the frequency and quality of caseworker visits with parents was sufficient to assess needs, service compliance, and promote achievement of case goals.

Item 20 was rated an Area Needing Improvement when the reviewers determined the following:

- Frequency and quality of contacts with parents did not meet state standards and was insufficient to address needs and monitor progress toward goal achievement. This was a low outcome particularly in two counties.
- Case plan goals and steps were not discussed and issues related to agency involvement were not addressed in caseworker contacts.
- Documentation did not support concerted efforts were made to locate absent parents and engage them in the case process.
- Documentation did not reflect contacts were made in the home when appropriate (particularly in cases where the goal was reunification).
Stakeholder Interview Information

- Case plans were developed by the case managers in conjunction with the parents and children’s input. Often this was part of the Family Team Meetings. When this did not occur, it was generally due to parents’ whereabouts being unknown and/or lack of cooperation/participation, children being unable to attend due to school, conflicting schedules, and/or children’s placement outside of the county.
- Direct case manager services, in-home services and Medicaid transportation helped eliminate barriers to families accessing services.
- The region was very effective in meeting the needs of children in the home and foster care.
- Case plans were tailored to meet the needs of the families. Goals and steps were relevant to the problems.
- Services were limited or not available in all areas of the region and parents did not always have transportation.
- Case plans were not always effective. Some case plans were submitted with the same goals and steps having only changed the date.
- Staff holidays and trainings sometimes interfered with the timeliness of the case plan process.
- Paperwork for panel reviews was not always fully completed. However, it was submitted and presented reasonably well. Panel members did not hesitate to make staff aware of the shortcomings.
- Turnover in DFCS staff made it difficult to obtain family history and information.
- Lack of funding sources and reliable providers were the most common barriers identified by case managers in providing services to families.

Regional Self-Assessment

- County A had more array of services with regard to providers and contract services as opposed to other rural counties in the region.
- Two counties were a part of the pilot project for Family Preservation services.
- FTM Coordinators were identified for each county and/or group of counties.
- Parents, children and foster parents were invited to reviews in most counties, but case records did not always reflect verification of notification.
- Foster care plans were developed with the families through Citizen Panel Reviews or Judicial Reviews.
- The rural counties in Region had limited choices in resources such as Homestead, parent aide, and CCFA providers. Some providers thought that it was not cost effective to travel to the rural areas to service a few families.
- Region needed additional core providers, foster homes, and intensive home providers to better serve children and families.
- Region continued to struggle with parental involvement in the case planning process.
- Region experienced difficulty getting the Family Preservation/FTM process in place. This impacted timely case plan development due to cases not being transferred from Investigations to Family Preservation in a timely manner and due to lack of trained staff in the FP/FTM process.
- At times, the court calendar did not align with case plan review time frames, because some counties scheduled court hearings once per month and reviews must be conducted in advance.
- Region reported problems getting supplemental orders returned by the court system.
Management Recommendation pertaining to Well Being 1:

Through case record reviews and case conferences, supervisors should ensure:

- Birth families, foster families and children receive appropriate services to address identified needs. Special attention should be given to recommendations received from other professionals.
- Case manager contact with children, parents and service providers are frequent, of quality and documented.
- Parents and age-appropriate children are actively involved in the case planning process, with emphasis on Family Team Meetings and more efforts are made to engage absent parents in case activity.

Outcome WB2: Children receive appropriate services to meet their educational needs.

<table>
<thead>
<tr>
<th>Performance Item or Outcome</th>
<th>Outcome Ratings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Strength</td>
</tr>
<tr>
<td>Outcome WB2: Children receive appropriate services to meet their educational needs.</td>
<td></td>
</tr>
<tr>
<td>Item 21: Educational needs of the child</td>
<td>86%</td>
</tr>
</tbody>
</table>

Case Review Findings

Item 21. Educational needs of the child (An assessment of Item 21 was applicable to 43 cases)

Item 21 was rated a Strength when the reviewers determined the following:

- Educational needs were assessed either formally or informally through psychological evaluations, Individualized Educational Plans, contacts with teachers or counselors, Parent Teacher Student Association (PTSA) meetings or conferences.
- School records were located in the case files including copies of Individualized Educational Plans, report cards and progress reports.
- Educational needs were being assessed and services provided through child’s residential placement setting. Copies of progress reports/utilization reviews were in the case record.
- Developmental assessments were completed.
- Services provided but not limited to included: special education, speech therapy, counseling, alternative school settings and programs, tutoring and in-home occupational therapy.
- County A achieved 100% in this outcome.
Item 21 was rated an Area Needing Improvement when the reviewers determined the following:

- Thorough educational assessments were not completed due to lack of records, missing information on the assessment form, not assessing all children in the sibling group, and lack of contact with school personnel.

**Outcome WB3: Children receive adequate services to meet their physical and mental health needs.**

<table>
<thead>
<tr>
<th>Performance Item or Outcome</th>
<th>Performance Item Rating</th>
<th>Outcome Ratings</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outcome WB3:</strong> Children receive adequate services to meet their physical and mental health needs.</td>
<td>Strength</td>
<td>Substantially Achieved</td>
</tr>
<tr>
<td></td>
<td>Strength</td>
<td>76%</td>
</tr>
<tr>
<td>Item 22: Physical health of the child</td>
<td>83%</td>
<td>17%</td>
</tr>
<tr>
<td>Item 23: Mental/Behavioral health of the child</td>
<td>72%</td>
<td>28%</td>
</tr>
</tbody>
</table>

**Case Review Findings**

**Item 22. Physical health of the child (An assessment of Item 22 was applicable to 53 cases)**

Item 22 was rated a Strength when the reviewers determined the following:

- Periodic, age-appropriate medical and/or dental exams were documented.
- Appropriate services for identified physical/dental needs were provided including periodic screenings, dental services, treatment for asthma, medication assessment, HIV testing, hernia surgery and glasses.
- Documentation supported ongoing contact with medical providers to assess medical needs and ensure follow-up appointments were maintained.
- Immunizations were current.
- Copies of current medical and dental records were located in the case records.
- County A achieved 100% in this outcome.
Item 22 was rated an Area Needing Improvement when the reviewers determined the following:

- Lack of current age-appropriate medical and/or dental exams documented in the case file.
- There was no documented medical exam to assess an infant for alleged sexual abuse.
- Lack of follow-up to ensure service provision for identified needs such as dental, vision, sickle cell anemia, asthma, seizures, and medication.

**Item 23. Mental/behavioral health of the child (An assessment of Item 23 was applicable to 43 cases)**

Item 23 was rated a Strength when the reviewers determined the following:

- Mental health needs were formally or informally assessed on an ongoing basis through evaluations by mental health and medical providers, face-to-face contacts with child or placement providers, collateral contacts, utilization reviews and progress notes from residential treatment facilities.
- Services provided included individual, group and family therapy, referral to Project Detour: Boys to Men, medication management, psychiatric assessment/follow-up, level of care and specialized placement, wrap around and special education.
- Services were monitored through contact with placement providers and progress notes.
- County A achieved 95% in this outcome.

Item 23 was rated an Area Needing Improvement when the reviewers determined the following:

- Mental health needs of alleged sexual abuse victims were not adequately assessed or services were not provided to meet the identified needs.
- Recommended services were not provided including evaluation of sexual trauma, individual counseling, family counseling, psycho-sexual evaluation, and neuropsychological evaluation.
- Lack of ongoing contact/follow-up with mental health providers.

**Management recommendation pertaining to Well Being II and III:**

- During case record reviews and case conferences, supervisors should direct and monitor case activity in all program areas to ensure children’s current educational, physical, dental and mental health needs are thoroughly assessed and appropriate services are provided, documented and monitored.
ILP Youth Focus Group and Survey

Five teens participated in the Region focus group for Independent Living Program, including one male and four females ranging in age from 15 to 20 years old. One participant boarded in Region, but was not in the Region’s custody. The teens had been in foster care from two to 16 years and all were participating in the ILP. All of the participants completed surveys regarding the ILP services they were receiving, and the following is a summary of those surveys.

<table>
<thead>
<tr>
<th>ILP Youth Focus Group and Survey</th>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>How would you rate your participation in the case panel review process (include case plan and Written Transitional Living Plan)?</td>
<td>0%</td>
<td>80%</td>
<td>20%</td>
<td>0%</td>
</tr>
<tr>
<td>How would you rate the quality of your Independent Living Program? (daily living skills, extracurricular activities, educational planning, etc)</td>
<td>40%</td>
<td>40%</td>
<td>0%</td>
<td>20%</td>
</tr>
<tr>
<td>How would you rate your understanding of the reasons you are in foster care?</td>
<td>40%</td>
<td>20%</td>
<td>40%</td>
<td>0%</td>
</tr>
<tr>
<td>How would you rate your understanding of your current permanency plan and goals?</td>
<td>20%</td>
<td>60%</td>
<td>0%</td>
<td>20%</td>
</tr>
<tr>
<td>How would you rate the agency’s assistance in helping you achieve your current goals and your future plans when you turn 18?</td>
<td>0%</td>
<td>80%</td>
<td>20%</td>
<td>0%</td>
</tr>
<tr>
<td>How would you rate the agency’s ability to meet your basic needs? (clothing, school supplies, shelter, etc)</td>
<td>20%</td>
<td>20%</td>
<td>60%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Key Findings:

- All of the teens felt they understood the reasons they were in foster care, however some indicated they did not understand why they remained in care so long. All but one youth indicated they attended their case reviews and/or court hearings. They knew who their Guardian ad Litem was and indicated they saw or had some discussion with them before court. Four teens felt their case manager was attentive and they discussed their case plan goals, attended case planning reviews and court. One teen indicated her case plan was several months late and the case manager did not go over the case plan goals with her when she received it. All members of the focus group had a Written Transitional Living Plan and knew their goals.

- All teens were participating in the ILP meetings and said they enjoyed the activities. They agreed the meetings were helpful and offered instruction in money management, education and SAT prep, how to handle emergencies and job preparedness. Activities included field trips to the Georgia Legislature to speak on behalf of teens in foster care.

- Most were aware of at least some benefits, such as college, that were available after turning 18 years old. Some of their goals included finishing high school, going to college and employment.
• Most of the participants felt their overall foster care experience was good. One mentioned the only reason she did not rate this as excellent was because she was not where she really wanted to be, at home. A few issues were reported by the youth in attendance such as, being unable to drive, own a car or visit with their parent, and the fact that medical complaints were not always taken seriously in group homes.

Stakeholder Interview Information

• The region reported many children who signed themselves back into care if the agency thought it was in their best interest.
• County A had an assigned worker who helped with ILP but could not sign WTLPs or authorize expenditures.
• County A often staffed cases of all children over 14 years old, especially those with non-reunification goals to ensure appropriate service provisions.
• An array of services reported to be offered by the ILP included the following:
  o career exploration
  o music camps
  o tuition and housing assistance
  o monthly stipends
  o GED and test preps
  o interview skills and tips
  o household maintenance – cooking, cleaning, and laundry
• Barriers to successful transitions to independent living included:
  o lack of programs and transitional living facilities
  o regional ILP coordinator was not housed in the largest county in the region with the highest number of ILP children (aprox. 100)
• There was a huge gap in services in large part due to the lack of community-based programs in the region. It was generally believed there was nothing done to prepare youth in foster care for emancipation.
• Stakeholders indicated ILP services were few and rated ineffective.
• When children were placed out of the region, ILP services were not consistently provided by the boarding region.
• Documentation from group homes did not support the youth routinely received ILP services.

Regional Self-Assessment:

More than one hundred children are served by the region’s ILP program. The age range of youth served was 14-25 years. One ILP coordinator provided workshops and learning activities for the youth; however, the coordinator could not be at every review and activity.
Management Recommendation pertaining to ILP Program:

Supervisors need to utilize a tracking system to ensure that youth placed in group homes are receiving ILP services.

SECTION B: SYSTEMIC FACTORS

REGIONAL INFORMATION SYSTEM

<table>
<thead>
<tr>
<th>Item 24: Regional Information System</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

Key findings:

- The review findings supported state reports, case record supervisory review guides and case management logs were being used to track data and performance outcomes.
- In all placement cases reviewed for IV-E, the funding source was correctly coded in the SUCCESS system; however, the funding source in three cases were incorrectly coded in AFCARS.
- Data issues were identified during the case review process: AFCARS did not reflect child’s current placement date, correct number of moves and Form 431 did not accurately reflect the investigative time frame.
- In eight cases reviewed, investigative documentation continued after the Form 431 had been submitted for closure.

REGION DATA ACCURACY RESULTS:

Forty-five cases were read for placement stability and AFCARS. (in one case the child had been correctly discharged from AFCARS)

Placement Stability

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Correct Number of Moves in AFCARS</td>
<td>38</td>
<td>7</td>
</tr>
<tr>
<td>Correct Number of Moves in Placement Central</td>
<td>42</td>
<td>3</td>
</tr>
<tr>
<td>Moves Clearly Documented</td>
<td>43</td>
<td>2</td>
</tr>
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</table>
AFCARS

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Permanency Plan/Goal</td>
<td>39</td>
<td>5</td>
</tr>
<tr>
<td>Placement Type</td>
<td>42</td>
<td>2</td>
</tr>
<tr>
<td>Child’s Most Recent Removal Date From Home</td>
<td>42</td>
<td>2</td>
</tr>
<tr>
<td>Child’s Current Placement Date</td>
<td>33</td>
<td>11</td>
</tr>
</tbody>
</table>

PSDS

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was the living arrangement at the time of maltreatment correctly coded?</td>
<td>37</td>
<td>3</td>
</tr>
<tr>
<td>Was the alleged maltreater relationship correctly coded?</td>
<td>37</td>
<td>3</td>
</tr>
<tr>
<td>Was the location of abuse correctly coded?</td>
<td>36</td>
<td>4</td>
</tr>
<tr>
<td>Does the 431 reflect the correct case disposition?</td>
<td>32</td>
<td>8</td>
</tr>
<tr>
<td>Does the 431 accurately reflect the investigation time frame?</td>
<td>25</td>
<td>15</td>
</tr>
</tbody>
</table>

Regional Self-Assessment Information

- Region created a Regional Data Unit to include a data manager, for the purpose of tracking, monitoring and maintaining regional data, regional and county charts, outcome measures, as well as individual case manager activity and case accuracy reviews.
- The Regional Data Unit tracked length of time a child was in care, CPS Past Due and Overdue Pending Incidents Reports. Field Program Specialists reviewed reports and identified regional trends and issues.
- County offices and management conducted weekly reviews of in-house reports to ensure data accuracy. Supervisory monitoring and some individual case management issues were indicated as problem areas that were ultimately addressed.
- County A had begun to put their CPS intake logs on the common drive to allow closer monitoring.

Stakeholder Interview Information

Region conducted random record reviews that included review of case documentation and case plans. Weekly and monthly conferences were held with staff to discuss case management activity.
Management Recommendations pertaining to Data Accuracy:

Increase supervisory oversight in County A of all investigations to ensure Form 431 is completed at the conclusion of all investigative activity.

Increase oversight to ensure all data is entered accurately and updated correctly.

CASE REVIEW SYSTEM

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>25</td>
<td>Joint development of case plan</td>
</tr>
<tr>
<td>26</td>
<td>Periodic reviews every six months</td>
</tr>
<tr>
<td>27</td>
<td>Permanency hearings every 12 months</td>
</tr>
<tr>
<td>28</td>
<td>Provides a process for TPR in accordance with ASFA</td>
</tr>
<tr>
<td>29</td>
<td>Foster parents are notified and have the ability to participate in hearings</td>
</tr>
</tbody>
</table>

Key findings:
- Parents and age-appropriate children were not included in the case planning process.
- Family Team meetings were not utilized in all counties.
- Issues continued with the legal process, which included timely permanency hearings and court orders.
- Excessive delays in filing TPR petitions drastically affected ASFA achievement.

Regional Self-Assessment Information:
- Region utilized the Citizen Panel and Judicial Review process. Case plans were developed with the families and submitted to the court for approval.
Region had a 16% reduction in placement cases due to timely achievement of permanency. Although Region completed a number of TPR hearings, case managers lacked understanding of ASFA requirements and Region needed to become more effective at documenting compelling reasons for not filing TPR.

Parents and children were invited to periodic reviews with the panel, and the SAAG invited the foster parents in most of the counties, however case records did not reflect that appropriate persons were invited.

Several counties had difficulty receiving timely court orders, supplemental orders and orders with correct language due to SAAG issues.

Permanency hearings were scheduled regularly, but some counties were incorrectly tracking 12 months from the 10 day hearing rather than from removal, which delayed permanency hearings.

Region experienced problems with the court approving non-reunification or termination of parental rights when requested by the agency.

The court had difficulty distinguishing Emancipation and Long Term Foster Care as it related to Another Planned Permanent Living Arrangement.

**Stakeholder Interview Information**

- Foster parents and other relevant parties were allowed to give input at Family Team meetings, Citizen Panel and Judicial Reviews.
- Supervisors monitored case review schedules, IDS reports, and monthly logs to ensure timely case plan reviews.
- All relevant parties, to include foster parents, were notified in writing of reviews and hearings according to case managers. In at least half of the counties, foster parents were allowed to participate and give input about the case. Parents were notified by letter or individual contact.
- Foster parents reported notification to attend permanency hearings were not received timely; however notification to the case panel reviews were generally reported as timely. Notifications were usually received through the mail.
- When children were in care 15 out of 22 months and it is in their best interests, petitions were being filed for TPR.
- Supervisors staffed cases to determine permanency and TPR status.
- The State Office’s legal department assisted three counties with SAAG related issues.
- Several counties experienced problems with timeliness of hearings and receiving court orders.
- County C experienced problems with the SAAG with regard to court orders reflecting correct permanency plans, being child specific and including correct IV-E language.
- Most foster parents reported they were not given the opportunity to participate in permanency hearings. In citizen panel reviews, they reported active participation and reported “their voices were heard.”
- Counties did not always submit civil action worksheets timely in order to complete timely extensions.
- Some stakeholders noted case managers did not bring case files to court therefore much testimony was perceived as guesswork and case workers were not prepared.
- Delays in permanency (pertaining to TPR) were attributed to staff turnover and high case loads.
- Case managers reported difficulty in securing TPR court dates once timely petitions were filed.
- Barriers to timely case planning included lack of cooperation by parents, court schedules, case load size, staff turnover and multi-county case managers.
Management Recommendations pertaining to the Case Review System:

Regional management should continue to work with the SAAGs to improve the legal process in obtaining timely achievement of permanency and court orders.

Regional management should continue to work with FTM coordinators to ensure Family Team Meetings are being consistently held and accurately documented for developing case plans with families.

QUALITY ASSURANCE SYSTEM

<table>
<thead>
<tr>
<th>Quality Assurance System</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 30: Implemented standards to ensure quality services</td>
</tr>
<tr>
<td>Item 31: Implemented a quality assurance system</td>
</tr>
</tbody>
</table>

Key Findings:

The review supported second level case record reviews were completed.

Regional Self-Assessment Information

- County A used one of their allocated staff positions to hire a Field Program Specialist to help with record reviews. The region hired an additional Field Program Specialist to complete regular evaluations of the region’s work.

Stakeholder Interview Information

- Decisions for removal were made by the supervisor with input from case managers. Field Program Specialists and/or County Directors had input as needed.
- According to case managers, cases were being staffed at least monthly with supervisors and a majority of the counties reported that cases are staffed more often as needed. When cases were discussed on a more frequent basis, some of the staffings may have included other case managers, County Directors and/or Field Program Specialists.
### Staff and Provider Training

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 32:</td>
<td>Operating a staff development and training program that supports the CFSP</td>
</tr>
<tr>
<td>Item 33:</td>
<td>Provides ongoing training</td>
</tr>
<tr>
<td>Item 34:</td>
<td>Provides training for current prospective foster parents, adoptive parents and licensed facilities</td>
</tr>
</tbody>
</table>

### Regional Self-Assessment Information

- Initial certification was seen as inadequate to prepare a case manager for fieldwork. Field Program Specialists and supervisors provided mentoring to new case managers for approximately a year. Field Program Specialists provided ongoing assistance to their assigned counties on an ongoing basis.
- Supervisor meetings were currently being held monthly at which time Field Program Specialists updated staff on policy, social work practice and shared best practice.
- Training had included CFSR and policy issues regarding TCM and documentation.

### Stakeholder Interview Information

- Staff participated in staff development training with the school system.
- Initial Adoption training needed to be expanded.
- Field Program Specialists and supervisors monitor and mentor new case managers. In smaller counties, other case managers assist.
- Counties across the region provide ongoing training in areas such as TCM and CFSR during unit meetings and/or individual conferencing.
- Foster parents reported:
  - initial and ongoing training was very good, but reported “experience was the best teacher.”
  - training opportunities were provided through online training, local classes and foster parent conferences.

Smaller counties struggled with offering enough training opportunities to meet yearly foster parent training hour requirements.

Case managers reported problems with training being cancelled due to low enrollment, thus making accessibility difficult.

Most case managers acknowledged getting the required number of hours of professional training.
SERVICE ARRAY AND RESOURCE DEVELOPMENT

<table>
<thead>
<tr>
<th>Status of Service Array</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 35: Has in place an array of services that assess the strengths and needs of children</td>
</tr>
<tr>
<td>and families and determine other service needs</td>
</tr>
<tr>
<td>Item 36: Services are accessible</td>
</tr>
<tr>
<td>Item 37: Services are individualized to meet the unique needs of children and families</td>
</tr>
</tbody>
</table>

Regional Self-Assessment Information

- Staff turnover occurred in many counties in the region, which negatively impacted service delivery. With staff not being certified in multiple programs, coverage during vacancies and training was difficult.

Stakeholder Interview Information

- Staff participated in staff development training with the school system.
- Lack of resources to assist parents with achieving case plan goals.
- Limited PUP funds to provide services in Family Preservation.
- Providers did not think it was cost effective to travel long distances to service a few families within the rural areas of the region.
- Limited hospitals and child care institutions in the area made it difficult to meet behavioral and emotional needs of children.
- Mental Health agencies often lacked appropriate staff.
- Case managers reported available services were usually effective and accessible.
AGENCY RESPONSIVENESS TO THE COMMUNITY

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>38</td>
<td>Engages in ongoing consultation with tribal representatives, services providers, foster care providers, juvenile court and other public and private child and family-serving agencies</td>
</tr>
<tr>
<td>39</td>
<td>Develops annual progress and service reports</td>
</tr>
<tr>
<td>40</td>
<td>Services are coordinated with services or benefits of other federal or federally-assisted programs</td>
</tr>
</tbody>
</table>

Regional Assessment Information

County A held community forums to assist with building relationships and improve rapport with their community partners. Politicians, school teachers, administrators and other professionals were included in this successful venture and plans were to continue this effort.

Stakeholder Interview Information

- Counties did not always involve the SAAG in case consultation until court action was required.
- During court hearings, FTM, and panel reviews, the case managers and supervisors were very professional and well prepared.
- The agency recently became active in the local Child Abuse Council meetings.
- Case managers and supervisors should have knowledge of cases sometimes but do not. Citizen panel members reported hating to hear that they just received the case.
### Foster and Adoptive Parent Licensing, Recruitment and Retention

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 41</td>
<td>Implemented state standards for family foster homes and child caring institutions</td>
</tr>
<tr>
<td>Item 42</td>
<td>Standards are applied to all homes receiving IV-E and IV-B funds</td>
</tr>
<tr>
<td>Item 43</td>
<td>Complies with Federal requirements for criminal background clearances and has in place a case planning process that addresses safety of foster and adoptive placements for children</td>
</tr>
<tr>
<td>Item 44</td>
<td>Process to ensure diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children</td>
</tr>
<tr>
<td>Item 45</td>
<td>Effective use of cross jurisdictional placements</td>
</tr>
</tbody>
</table>

#### Regional Self-Assessment Information

- At the end of 2006, Region had the fewest number of foster homes than any other region in the state. As a result, a Regional Resource Development Team was implemented, dedicated to increasing the number of resources and maintaining the current homes. This team served several counties in Region; County A had their own staff responsible for developing and implementing their recruitment efforts.
- The RD team assessed the needs of the entire region and even though specific recruitment resources had not been requested, emphasis was placed on the need for children to maintain their ethnic and racial connections.
- Small rural communities tend to be in more economically depressed areas, which made recruitment more difficult.

#### Stakeholder Interview Information

- Orientation was held once per month for prospective foster parents.
- IMPACT training was held every 90 days within the region.
- Recruitment efforts included recruitment plans, newspaper articles and use of current foster parents.
- County A had two case managers delegated for recruitment efforts.
Region Social Services Review

- Barriers to recruitment efforts included: time, funding, and resources for Hispanic speaking populations in the rural areas.
- A few case managers reported that more Hispanic foster homes were needed, and several more reported that they just needed more homes in general.
- Many case managers reported that more staff was needed to conduct recruitment efforts and activities.

SECTION C: FOSTER HOMES

A total of 23 foster homes were reviewed.

The foster homes were currently in correct full/special approval status, contained current re-evaluations, criminal records checks and updated medical information on all household members.

- Foster parents completed IMPACT or required training hours.
- None of the homes reviewed contained any CPS reports during the period under review.
- One home had a low risk foster care policy violation, which was appropriately addressed by the region.

Key Findings:

Of the cases reviewed, there were no identified trends.

SECTION D: DIVERSIONS

A total of 20 cases were reviewed:

<table>
<thead>
<tr>
<th>Appropriate</th>
<th>Not Appropriate</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Key Findings:

- All counties within the region had a local Diversion protocol.
- Of the reviewed cases, all were closed (no cases were referred for CPS investigation) with several receiving referrals to community resources.
- Diversion cases were not completed within the 30-day time frame as stated in agency protocol in two counties.
- In lieu of their unsubstantiated/closed cases, County A may consider reviewing their agency’s protocol to determine if more investigations could be assigned for Diversion.
SECTION E: CRITICAL ISSUES

Seven critical issues were reported in the Family Preservation and Placement programs for Region. Critical issues were identified in the following counties: two in County B, two in County C, one in County D. Two critical issues were reported in the Placement program in two counties.

County B: In a Family Preservation case, the agency did not conduct appropriate screenings on other adults residing in the home. A thorough assessment was not completed regarding allegations of physical abuse and there was no follow up with child’s DJJ worker, recommendations for a psychosexual evaluation and child’s potential to become a pedophile. Documentation indicated that the child was about to return to the home with younger siblings.

County B: In a Family Preservation case, the agency did not conduct a thorough assessment of relative caregivers and other adults residing in the home. The child resided with several relative caregivers and the mother resided away from her home at night due to having no electricity. The mother cared for child during the day, but the child was being cared for by other caretakers at night. Child was one year of age, and maternal grandmother had custody of older siblings and documentation indicated that mother was non-cooperative with the agency.

County C: In a Family Preservation case, an older child had a psychosexual evaluation after two incidents of inappropriate sexual behavior. The evaluation recommended the child not be in the home with younger children or that an alarm be placed on the door if the child was with younger children. Siblings were to also be assessed to determine whether they were victims of molestation. Documentation did not support the agency conducted a thorough assessment and follow up of children’s safety needs and well-being.

County C: In a Family Preservation case, the agency did not assess ongoing concerns of a mother’s drug use. The children spent time with relatives who were identified as a safety resource, but there was no documentation to support an assessment was completed. There was no documentation to support that appropriate screenings were conducted on the mother’s boyfriend and other men in and out of the home. Safety could not be determined for the children based on documentation.

County D: In a Family Preservation case, an infant was co-sleeping with other family members. The child resided with grandparents while mother was incarcerated. There was no documentation of a safety resource assessment and safety screenings on other adults in the household. All allegations of neglect were not addressed by the agency. There were issues regarding mother’s violent behavior, homelessness, alcohol abuse, and domestic violence resulting in the mother’s arrest. There was no medical follow up for the baby after sexual abuse allegations were indicated.

County D: In a placement case in which the child was beaten by the stepfather and documentation indicated the child was afraid, the agency did not assess child’s safety and well-being. Documentation did not support the agency’s efforts to assess the needs of the stepfather and engage him in services to address substance abuse, anger management, parenting and counseling issues. Documentation indicated the child was diagnosed with sickle cell, and Children’s Medical Services recommended the child needed to be involved in a medical program. Documentation did not support the agency referred child for services or maintained follow up.
County E: In a placement case, a child made several complaints regarding treatment of himself and his sister by the foster parent. Documentation indicated the child taped the foster mother cursing the sibling. The child wrote several letters and drawings about hate and dying. The child wrote a letter about being afraid in the foster home and feeling unsafe. Documentation did not support the agency was conducting a thorough assessment of safety and addressing needs of child and sibling.

SECTION F: FEDERAL COMPLIANCE REVIEW

TITLE IV-E

Twenty-five cases were read for IV-E compliance. A social services review guide and family independence review guide were utilized to determine compliance. Correct payments and funding sources were reviewed for each case for one month. All payments were correct.

Key Findings:

- Twenty-three cases reviewed had correct eligibility determinations. Two cases did not contain budgets to determine financial need of the child for the month of removal. Although both children were potentially IV-E eligible, neither was in reimbursable placements.
- Five children were residing in relative placements or had been discharged to parents.
- 95% had correct and timely initial court order language.
- 95% had a judicial finding of reasonable efforts within 60 days of removal.
- 47% (8) did not have a judicial determination of reasonable efforts to finalize permanency within 12 months.
- 17% (4) of cases did not have a court order verifying continuous custody during the time the child had been in care.
- All of the cases reviewed had a timely redetermination for IV-E eligibility.

Regional Self Assessment

- As of September 2007 the Region’s IV-E penetration rate was 40%.
- An increasing number of counties in the region were utilizing model court orders.
- There was a good working relationship with Regional Accounting and RevMax.
- County staff reviewed court orders to ensure timely IV-E judicial determinations, as well as the required child specific language.
- There had been turnover of SAAGs, especially in one county.
- There has been recent improvement in receiving timely court orders and those orders containing child specific language.
Management Recommendations pertaining to IV-E:

- *Increase supervisory oversight and implement tracking systems to ensure permanency hearings occur every 12 months, court orders address reasonable efforts to finalize permanency plans and verify continuous custody.*

MEPA/IEPA

Based on information provided, the region did not appear to be in full compliance with MEPA/IEPA. During the review process, an approval letter was observed in one county case record identifying the home was approved for “white” children; correspondence from the foster parent was attached stating a discussion was needed regarding the race of the children they were willing to accept. The foster home list for that county also indicated the race of children these foster parents were willing to accept.

Management Recommendation pertaining to MEPA/IEPA:

*County social services staff should receive updated MEPA/IEPA training.*

HIPAA

Based on case reviews the NPP (Notice of Privacy Practices) form appeared in 100% of the records reviewed. According to the DHR/DFCS HIPAA Disclosure tracking log, there had not been an incident of inadvertent and/or illegal disclosure of Protected Health Information.

SECTION G: TCM COMPLIANCE

A total of 69 cases were reviewed for TCM compliance in the Family Preservation and Placement/Adoption programs.

Of the 24 family preservation cases reviewed, 100% were processed correctly for TCM. Of the 45 Placement and Adoption cases reviewed 93% were processed correctly for TCM.
SECTION H: SUMMARY OF FINDINGS FOR REGION

<table>
<thead>
<tr>
<th>Performance Outcomes</th>
<th>Substantially Achieved</th>
<th>Partially Achieved</th>
<th>Not Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety 1: Children are First &amp; Foremost, Protected From Abuse &amp; Neglect</td>
<td>78%</td>
<td>8%</td>
<td>14%</td>
</tr>
<tr>
<td>Safety 2: Children are Safely Maintained in their Homes Whenever Possible and Appropriate</td>
<td>68%</td>
<td>4%</td>
<td>28%</td>
</tr>
<tr>
<td>Permanency 1: Children Have Permanency and Stability in their Living Situation</td>
<td>29%</td>
<td>58%</td>
<td>13%</td>
</tr>
<tr>
<td>Permanency 2: Continuity of Family Relationships and Connections is Preserved for Children.</td>
<td>56%</td>
<td>42%</td>
<td>2%</td>
</tr>
<tr>
<td>Well Being 1: Families have Enhanced Capacity to Provide for Their Children’s Needs.</td>
<td>48%</td>
<td>19%</td>
<td>33%</td>
</tr>
<tr>
<td>Well Being 2: Children Received Appropriate Services to Meet Their Educational Needs.</td>
<td>86%</td>
<td>0%</td>
<td>14%</td>
</tr>
<tr>
<td>Well Being 3: Children Received Adequate Services to Meet Their Physical and Mental Health Needs.</td>
<td>76%</td>
<td>5%</td>
<td>19%</td>
</tr>
</tbody>
</table>

Promising Practices:

- Field Program Specialists conducted quality and second level reviews across the region to ensure quality case management and service provision.
- Region established a Regional Data Unit to track and maintain accurate data and monitor progress and trends within the region.
- The region’s Revenue Maximization, Regional Accounting office and agency staff have a good understanding of IV-E data and requirements and have a good working relationship for ensuring the region’s IV-E penetration rate.