



# **PROGRAM IMPROVEMENT PLAN**

## **QUARTER 6 PROGRESS REPORT**

**May 2006 – July 2006**

**SUBMISSION DATE:**

**August 29, 2006**

## Quarter 6 Accomplishments

The following is summary of activities completed during Quarter 6 (May 2006 to July 2006) of the Program Improvement Plan.

### **Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect.**

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

(S1.1.1) – **Clarify policy regarding timeliness of initiating reports of child maltreatment.** All benchmarks in this action step were met during Quarter 1.

(S1.1.2) – **Increase accuracy of data regarding initial contact.**

d. Circuit Managers and the assisting QA Specialists monitor quarterly Peer Record results and make recommendations for improvements.

- *Analysis and comparisons was conducted across all CA/N workers and CA/N units in the circuit for CY 2004 & 2005 and results distributed to circuit manager, CA/N supervisors and program managers for planning and monitoring purposes.*
- *Data Accuracy training is being provided to all CD staff and topics include initial contact.*
- *Charts on all PIP measures are updated and disseminated to all CD staff in the circuit each quarter.*
- *The importance of meeting the initial contact time has been stressed in staff meetings and the clarification that certain multi-disciplinary members can be counted as making those initial contacts has helped.*
- *The Circuit Manager pulls up the Managed Reporting Tool monthly to review the staff's members, percentage of initial contact made within 3, 24, or 72 hours and their completion rate within 30 and 45 days.*
- *Circuit Managers and CA/N Supervisor are utilizing a CA/N review tool on two random cases per worker per month.*
- *QA Specialists provide ongoing data to the Regional Director. The Regional Director shares the data with Managers, Supervisors and with Family Court. The QA Specialist provides data on how well the workers are doing in making the initial contact in the period by using the worker analysis provided by the Data Manager.*
- *Supervisors have been instructed to meet weekly with their staff to monitor compliance to policy. These weekly meeting are being monitored by Program Managers to ensure compliance.*

(S1.1.3) – **Study feasibility for alternative protocols for managing non CA/N referral.** All benchmarks in this action step have been met.

**(S1.1.4) – Develop improvement plan to respond timely to reports of maltreatment.** All benchmarks in this action step have been completed.

**(S1.1.5) – Call Management and Structured Decision Making (SDM) Protocols Implemented at the Child Abuse and Neglect Hotline Unit to provide consistent screening and classification of calls received.**

g. Collected and analyzed PRR tool results for practice enhancements.

*Of the 1255 reviews recently conducted, 94% of the reviews were concluded in ten minutes or less. The average review time for those reviews (1183 of the 1255 reviews) was 3.2 minutes. 577 CA/Ns (comprising 1156 reviews as one CA/N was reviewed by four people) were reviewed by two or more staff while 99 were reviewed by one person. Of the 577 calls reviewed by two or more people, complete agreement was reached by the reviewers for 68% (393) of the calls reviewed. An additional 27% of the reviews had consensus on at least four of the six questions on the instrument. In the reviews of the 577 calls reviewed by two or more staff, the reviewers agree on whether the call passed or failed each individual question 80.6% (465).*

*The record review tool still seems to achieve the goal of being a quick to complete instrument for reviewing calls. Dual reviews (each case being reviewed by two staff) may be disbanded at this time with the concurrence of management as conformity has improved. While we had initially established a goal of 90% conformity for each question we have achieved conformity on whether a call passes or fails each particular question in excess of 89% of the time. At this time I believe staff can feel comfortable using the results of the Peer Record Reviews in the quality improvement process.*

**(S1.1.6) – Revised policy relating to non CA/N referrals (M,P,N) given the division’s need to better address its core functions and statutory mandates, with existing available resources.**

e. Modified proposed plan, if needed, based on recommendations of the Regional Directors. *The proposed plan for information dissemination on practice changes for non CA/N calls was shared with the Regional Directors on May 31, 2006 during their monthly meeting. No additional recommendations or changes were made.*

f. Shared proposed plan with CJA taskforce. *The proposed plan was shared with the CJA Taskforce at the June 14, 2006 meeting.*

g. Shared CJA taskforce recommendations with CD administration. *CJA taskforce members provided limited feedback on the proposed plan. Comments include:*

- *CD pays for services when other resources may be more appropriate.*
- *Ensure there is a mechanism in place to assure that someone will follow up with referrals that may place a child in crisis.*
- *Suggested the Children's Trust Fund provides education to general public related to prevention.*

- *Develop a 211 directory similar to Jackson County's United Way 211 directory. The United Way 2-1-1 is available in the extended Kansas City metro area, including 23 counties in western Missouri and eastern Kansas. Calls are answered 24 hours a day, 7 days a week by trained professionals who have immediate access to resources and information and can help callers determine which programs or services are best equipped to help.*

*These recommendations were shared with CD administration at the monthly executive staff meeting on July 20, 2006.*

## **Item 2: Repeat maltreatment**

### **(S1.2.1) – Ensure consistent and accurate completion of SDM safety and risk assessment.**

*d. Evaluated SDM Peer Record Review Outcomes. The PRR results indicated that average rate of completion for the SDM Safety Assessment (CPS-1) for the second quarter of 2006 was 93 percent. Some activities associated with maintain a high completion rate includes:*

- *QA Specialist gives statistical data to Regional Director on quarterly basis to show progress or lack of progress. Data is shared with Program Managers, Supervisors, and with Family Court.*
- *The Circuit Self-assessment Workgroup (PET TEAMS) –CA/N 24 hour and 30 day is developing a tip sheet for CA/N Staff to locate families, along with a Tool Kit for CA/N workers to follow to expedite initial contact and completion of CA/N reports.*
- *To help ensure that the initial response time frames are met on a continual basis, Supervisors and Circuit Managers will attend Hotline Supervisors Meeting facilitated by Field Support Manager. In addition, monthly Supervisor Meetings will focus on daily work activities for improved outcomes. Daily and Weekly Supervisor/Worker meetings will focus on consistent and accurate completion of SDM.*
- *Investigative Supervisor will continue to monitor by using the FACES system. The supervisor will review the first three pages of the CSP-1 by initialing and signature of CSP-1A. The investigators are required to scan the 1A to the Investigative Supervisor for his signature within the timeframes and the FACES System reminders are reviewed each a.m. and sign-on by the worker and supervisor.*

*h. As needed, provided training to circuits identified with imminent need.*

- *SDM refresher training has been scheduled in Boone County in October, 2006. Circuit protocol continues to have supervisors monitor this with a check list along with the CA/N records.*
- *In Circuit 32, the CS Worker provided training on August 4, 2006 on safety and risk assessments and re-assessments.*
- *Circuit 21 has identified the need for SDM training. Training to be scheduled.*

- *Monitoring in all circuits will continue and if the need arises, training will be provided.*

**(S1.2.2) – Implementation of Confirming Safe Environments (CSE) process**

k. Policy memo disseminated to staff. *A memo was disseminated to staff enhancing visitation to address safety of children throughout their placement. See attached or review at: <http://www.dss.mo.gov/cd/info/memos/2006/47/cd0647.pdf>*

l. Training began on policy enhancements to new and existing staff. *A memo was sent to Regional Directors requesting they select regional staff to attend the Visitation Train the Trainer sessions. Children Services Specialists and supervisors attended a training held on July 26, 2006. They will be required to provide training to staff in their region. A PowerPoint presentation was developed and used during the Train the Trainer session in July. A second Train the Trainer session will be held on August 24, 2006. Attached is the PowerPoint presentation used during the training.*

**(S1.2.3) - Strengthen policy regarding assessment of safety at and throughout placement.**

e. Policy disseminated. *This memorandum is the third in a series to address visitation and safety. See attached or <http://www.dss.mo.gov/cd/info/memos/2006/cd0663.pdf>*

f. Training began on policy enhancements to new and existing staff. *A memo was sent to Regional Directors requesting they select regional staff to attend the Visitation Train the Trainer sessions. Children Services Specialists and supervisors attended a training held on July 26, 2006. They will be required to provide training to staff in their region. A PowerPoint presentation was developed and used during the Train the Trainer session in July. A second Train the Trainer session will be held on August 24, 2006. Attached is the PowerPoint presentation used during the training.*

**(S1.2.4) – Practice Enhancement Teams (PET) assist Circuit Managers in development of improvement strategies to reduce repeat maltreatment and CA/N in foster care.** *All benchmarks in this action step have been completed.*

**(S1.2.5) – Strength policy and practice relating to chronic neglect and accumulation of harm.**

g. Developed a tool for manual tracking of CN families to be utilized throughout pilot. *The attached log was developed to track information about the families involved with the pilot.*

h. Met with Regional and Circuit administrators to strategize about next steps and community forums. *Central Office staff continues to support regional and circuit staff in their effort in meeting with the community. Jasper, Newton and McDonald County*

offices have met with Community Partners who have expressed interest in participating in the project.

i. Held community forum to gain support from stakeholders. Recent personnel changes in management have caused some delays in implementation. The recently appointed Circuit Manager for the 29<sup>th</sup> Circuit will continue to keep the project moving steadily forward during the transition. A community forum is scheduled for August 30, 2006

(S1.2.6) – **Develop performance-based contract for foster parents.**

g. Initiated PFDP for all new and reassessed foster parents. Following the dissemination of the memo, staff began using the PFDP in April and May. Staff will continue to use the PFDP for all new foster parents and existing foster parents as their license come up for renewal.

**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**

(S2.3.1) – **Improve family assessment and case plan tools to better link service provision to the needs of family identified in the initial and ongoing assessments.**

e. Recommendations regarding changes made. The last of the training sessions were completed during February 2006. No additional training sessions have been added and no feedback solicited at this time.

(S2.3.2) – **Strengthen worker/supervisor skills in engaging families in the assessment, case planning and case plan review process to increase parent, caregiver and child involvement.** All benchmarks in this action step have been completed.

(S2.3.3) – **Improve supervisory capacity to monitor enhanced practice relating to case planning.**

g. System automation completed for supervisory case review tool. During May and June 2006, supervisors across the state were trained on the SCR process and tool, after self-scoring and data auto-population features were automated. The tool and a training Powerpoint are all available on the CD intranet.

h. Supervisory case review tool and protocols approved and distributed for statewide use. A memo went out to all staff informing them of the SCR process in June 2006. The first sample of cases to be reviewed were sent out to each circuit manager during July 2006. <http://www.dss.mo.gov/cd/info/memos/2006/cd0657.pdf>

(S2.3.4) – **Establish procedures to access various service funding streams.**

*All benchmarks in this action step have been completed.*

**(S2.3.5) – Per new legislation, develop comprehensive children’s mental health plan to increase level of cooperation between court, mental health, child welfare and families.** *All benchmarks in this action step have been completed.*

**Item 4: Risk of harm to child**

**(S2.4.1) – Ensure consistent and accurate completion of SDM safety and assessment.** *Refer to S1.2.1. All benchmarks in this action step have been completed.*

**(S2.4.2) – Implementation of CSE process.** *Refer to S1.2.2.*

**(S2.4.3) – Implement enhance background screening for foster/adopt and court ordered providers.** *All benchmarks in this action step have been completed.*

**(S2.4.4) – Development of “Culture of Care Initiative” for improving safety and nurturance of children in a residential care setting.**

f. measured through a reduction of the number of preponderance of evidence reports received by the residential treatment facilities. *For the 6th Quarter (5-1-06 to 7-31-06) there were two (2) POE reports compared to the three (3) POE reported in the 5<sup>th</sup> quarter.*

**(S2.4.5) – Improve family assessment and case plan tools to better link service provision to the needs of the family identified in the initial and ongoing assessments; include a mechanism for family self-assessment and identified areas specifically related to child safety and risk concerns.** *Refer to S2.3.1.*

**Permanency Outcome 1: Children have permanency and stability in their living situations.**

**Item 5: Foster care re-entries.** *This item was found to be substantially achieved.*

**Item 6: Stability of foster care placement**

**(P1.6.1) – Increase system capacity to accurately track placement kinship vendor types.** *All benchmarks in this action step have been completed.*

**(P1.6.2) – Improve diligent search for relatives/missing parents.** *All benchmarks in this action step have been completed.*

**(P1.6.3) – Expand use of family support team meetings to promote stability in alternative care placements.** *All benchmarks in this action step have been completed.*

**(P1.6.4) – Identify resource family types and shortages.**

d. Circuits reported quarterly progress on recruitment activities.

- *Community events to recruit foster parents were held in May of 2006.*
- *BFC training was recently held and more are planned along with Career Training. A PET will be developed locally to address the issues of homes needed in the area.*
- *Resource Development workers continue to work on recruitment activities utilizing the Foster Parent Support Group to assist in recruitment.*
- *Specialized recruitment efforts for foster home who will take the older youth population.*
- *Activities to recruit resource families will be coordinated with local functions in the community to ensure good coverage of the area as well as a variety of independent activities by the circuit staff. A recruitment book will be kept to track activities, families who have shown interest from the activity, what follow up was done and the results.*
- *Letters were sent to each of the churches in the area regarding the need for good families to foster the circuit's children in care.*
- *Resource unit is preparing an article for various newspapers regarding the rewards of foster parenting and how there is a desperate need for these families.*
- *Stars/Spaulding training is being provided bi-monthly.*
- *Recruitment activities, marathon training and foster parent recognition dinners are being held in various counties.*
- *PET Teams formed to focus on specific recruitment efforts each month.*
- *Regular notice and information goes out to current licensed foster parents about the need for more Foster Parents and to spread the word.*
- *Faith based mini conference held to promote the need for foster homes.*

**(P1.6.5) – Increase number of resource families.**

g. Quarterly report on PBC contractors performance on stated child outcome on safety, permanency and stability. See for further clarification on the relationship between the performance expectations (previously sent) and PBC outcomes (attached).

i. Annual report to General Assembly regarding PBC case management, recruitment and training outcomes. See Attached.

**(P1.6.6) – Increase placement stability by improving matching capabilities for children in out-of-home setting.**

b. Surveyed resource families to gather information regarding placement stability. While in the process of developing a survey for resource families, we learned that regional staff were already surveying foster families. A review of the surveys was completed and an executive decision was made not to develop a statewide survey. See attached for a summary of the survey and survey tools.

**(P1.6.7) – Evaluate support and training provided for relative/kinship resource families.** No benchmarks due this quarter.



## **Item 7: Permanency goal for child**

(P1.7.1) – **Ensure the frequency and timeliness of FST Meetings occurs per policy.**

### c. Circuit Managers assisted by PET monitored frequency data.

- QA Specialists send overdue PPRT's to the Regional Director and managers.
- Development of a court report form which provides uniform information to the court of all FST meetings held within the 90 days between court hearings. Supervisors review all court reports prior to submittal and are able to monitor and ensure that FST meetings are being conducted on each case.
- Supervisors continue to utilize a computerized tool to assure appropriate time frames are met. This data is monitored on an ongoing basis.
- Circuit Manager monitors frequency data.
- The Permanency Supervisor keeps a log from the time a child comes into care on the dates not only for the court hearings/reviews but also for the FST meetings.
- The Circuit Manager ensures these meetings are taking place by reviewing the Peer Reviews and having weekly conferences with the supervisor.
- Each worker was required to make a list of all cases with overdue FSTMs and schedule a meeting within the next three months to get current.
- Supervisors are discussing with workers when FST meetings are due during their weekly conference.

(P1.7.2) – **Improve quality of FSTs to ensure permanency goal is reviewed and established.** All benchmarks in this action step have been completed.

(P1.7.3) – **Strengthen policy and practice relating to concurrent planning.**

c. integrated concurrent planning into Advanced FCOOHC In-service Module training and child welfare manual. The FCOOHC in-service training has two parts, Part I and Part II. The part II is delivered four weeks following part I to allow for OJT activities. See attached FCOOHC outline.

(P1.7.4) – **Increase collaboration with courts by providing cross training to judiciary, court staff, GALs and CD staff on ASFA & permanency hearings consistent with state and federal regulations.** No benchmarks are due for this quarter.

## **Item 8: Reunification, guardianship, or permanent placement with relatives**

(P1.8.1) – **Address permanency and service needs of children in Legal Status 2, 3, and 4.**

f. Developed policy and protocol on worker duties related to legal status 2, 3, and 4 cases. A memorandum was disseminated to staff in May 2006 to update policy

clarifying services provided to children in all legal statuses whether in CD custody or under CD supervision. See attached or view at <http://www.dss.mo.gov/cd/info/memos/2006/47/cd0647.pdf>.

(P1.8.2) – **Establish procedures to access various funding streams.** Refer to S2.3.4.

(P1.8.3) – **Ensure frequency and timeliness of FST Meetings occurs per policy.** Refer to P1.7.1. All benchmarks in this action step have been completed.

(P1.8.4) – **Improve quality of FST to assure the review of permanency goal.** Refer to P1.7.2.

(P1.8.5) – **Increase collaboration with courts by providing cross training to new judiciary, court staff, CD staff and GAL's on ASFA and Permanency hearings consistent with state and federal regulations.** Refer to P1.7.4. All benchmarks in this action step have been completed.

(P1.8.6) – **Increase collaboration with courts by providing cross training to judiciary, court staff, GAL's and CD staff regarding roles and responsibilities.** All benchmarks in this action step have been completed.

(P1.8.7) – **Collaborate with OSCA to explore barriers that would allow Juvenile Courts to enter temporary custody orders and transfer jurisdiction to Probate & Circuit Courts to expedite guardianship.** All benchmarks have been completed for this action step.

(P1.8.8) – **Determined policy remedy to be used in addition or in lieu of any legislative change referred in P1.8.7.** Refer to P1.6.1.

## **Item 9: Adoption**

(P1.9.1) – **Termination of Parental Rights will be filed in a timely manner, except when compelling reasons are documented.**

### f. Quarterly monitoring by PRR.

- Circuit Managers will monitor the Peer Reviews to see that timely TPR's are being completed.
- Ongoing dialog between the Juvenile Office and the CD to assure timely filing of the TPR's.
- Supervisors will monitor timely documentation of compelling reasons.
- DLS Attorney continues to assist staff with monitoring length of time in AC as well as filing TPR petitions or Compelling Reasons.
- Promoting more timely filing of TPR and guardianships by creating a plan to routinely schedule case review staffings with Legal Services and Case Managers.

g. Incorporated into Advanced FCOOHC In-service module training. The FCOOHC in-service training has two parts, Part I and Part II. The part II is delivered four weeks following part I to allow for OJT activities. See attached P1.7.3.c FCOOHC outline.

(P1.9.2) – **Increase number of resource families.** Refer to P1.6.5.

(P1.9.3) – **Increase capacity to conduct home studies and finalize adoptions.** All benchmarks have been completed for this action step.

(P1.9.4) – **Improve access to legal representation for CD staff.**

e. CD legal representation at court hearings monitored by CD/DLS joint committee for improvement. The joint committee in conjunction with OSCA met and discussed reintroducing the 2007 legislative proposal that will require petitions for Termination of Parental Rights to be filed within 60 days of a judicial determination in certain instances.

#### **Item 10: Other planned living arrangement**

(P1.10.1) – **Increase number and quality of resource families for older youth.** All benchmarks in this action step have been completed.

(P1.10.2) – **Increase awareness of Chafee program services to staff and community members.**

e. ILP staff provided Chafee informational meetings, seminars, workshops to CD Staff, foster parents, juvenile court and youth serving agencies.

- A Presentation was made to CJA Taskforce during their quarterly meeting in June 2006.
- Shared with CD staff the award of ETV administration to Orphan Foundation of America
- Family Centered Out of Home Care Core In-Service Training for supervisors in the 5th Circuit. This training included information about "preparing youth for adult living".

(P1.10.3) – **Increase program accessibility to provide life skills training services for older youth.**

c. Consulted with SYAB members on needs of older youth. A quarterly meeting was held with youth to solicit their input on June 10-11, 2006. The Chair of the SYAB serves on the PIP Advisory Committee where her input is greatly valued by committee members.

**Permanency Outcome 2 - The continuity of family relationships and connections is preserved for children.**

**Item 11: Proximity of foster care placement.** *This item was found to be substantially achieved.*

**Item 12: Placement of Siblings.**

(P2.12.1) – ***Increase the number of siblings placed together.***

c. Circuit Managers monitored quarterly PRR results and improvement plans developed.

- All FP workers fill out sibling review forms with their supervisor.
- Investigators, at the time of removal, will advocate for relative placement to keep siblings together.
- Development Specialist continually emphasize to our present foster parents the importance of keeping siblings together and recruit foster parents who will be willing and licensed to take in sibling groups.
- Foster Parents' Development Plans will reflect the foster parents' willingness to assist and cooperate in seeing that siblings placed in their home have regular visits.
- Staff are attending training called "Sibling Split" training that was organized for the Northern Region.
- Cases where siblings are not placed together are discussed in supervisor/worker conferences. Supervisors then discuss with Circuit Managers to review efforts made by staff to place siblings together.

f. Policy disseminated to staff on FST. *A memo was disseminated to staff on policy enhancements to the Child Welfare manual addressing preserving the bond and connection between siblings through placement and on-going family visitation. See attached or view at <http://www.dss.mo.gov/cd/info/memos/2006/cd0650.pdf>*

g. Developed supervisory sibling case review process to review cases after siblings are separated after 30 days. *Staff was provided instructions on how to conduct sibling administrative reviews through the above memo.*

P2.12.2) – ***Develop an ongoing training module regarding sibling placements for staff, foster parents, and juvenile court staff.***

h. Emphasis on the importance of sibling bonds, long term effects of visitation, parentified child and sibling rivalries incorporated into BASIC and advanced FCOOHC In-service training module. *The preservation of a child's relationship with siblings is essential to the child's permanency and well being. If siblings can not be placed together, every effort is made to ensure visitation occurs. This philosophical base of child welfare practice is espoused throughout BASIC and in service training for staff. It was included in FCOOHC in-service and staff began receiving training during June 2006. It was addressed in conjunction with OSCA through the video teleconferencing in May 2006. It is also addressed in the Train-the Trainer Visitation training with staff and foster parents in July and August 2006.*

(P2.12.3) – **Increase capacity for resource families that accept sibling groups.**  
*Refer to P1.6.5.*

**Item 13: Visiting with Parents and Siblings in foster care.**

(P2.13.1) – **Increase frequency and quality of parent/child and sibling visits.**

c. Incorporated policy revision into BASIC training and supervisory oversight provided to existing staff. *Policy revision on visitation has been incorporated into BASIC and the Train-the-Trainer Visitation training sessions will provide selected staff with information to use with local staff and foster parents.*

d. Incorporated revisions into PRR tool. *See attached revised PRR tool.*

**Item 14: Preserving connections.**

(P2.14.1) – **Increase emphasis on preserving familial and community connections for children in out of home care.** *All benchmarks in this action step have been completed.*

(P2.14.2) – **Improve diligent search for relatives/missing parents.** *Refer to P1.6.2. All benchmarks in this action step have been completed.*

(P2.14.3) – **Revise ICWA policy.** *All benchmarks in this action step have been completed.*

**Item 15: Relative Placement.**

(P2.15.1) – **Increase system capacity to accurately track placement kinship venter type.** *Refer to P1.6.1.*

(P2.15.2) – **Improve diligent search for relatives/kinship resource families.** *Refer to P1.6.2. All benchmarks in this action step have been completed.*

(P2.15.3) – **Evaluate support and training provided for relative/kinship resource families.** *Refer to P1.6.7.*

**Item 16: Relationship of child in care with parents.**

(P2.16.1) – **Improve diligent search for non-custodial parent.** *Refer to P1.6.2. All benchmarks in this action step have been completed.*

(P2.16.2) – **Improve engagement of non-custodial parents in case planning by strengthening worker/supervisor skills in engaging families in the assessment, case planning and case plan review process.** *Increase parent, caregiver*

*(alternative care provider) and child involvement in case assessment, plan development and reassessment. Refer to S2.3.2.*

**Well Being Outcome 1 – Families have enhanced capacity to provide for children’s needs**

**Item 17: Needs and services of child, parents, and foster parents.**

**(WB1.17.1) – Improve family assessment and case plan tools to better link service provision to the needs of the bio family identified in the initial and ongoing assessments. Refer to S2.3.1.**

**(WB1.17.2) – Strengthen worker’s skills in engaging families in the assessment, case planning and case plan review processes to increase parent, caregiver (alternative care provider) and child involvement in case assessment, plan development and reassessment. Refer to S2.3.2.**

**(WB1.17.3) – Implementation of “Confirming Safe Environments” to reduce the risk for children in foster/kinship care to identify needs of child and providers. Refer to S1.2.2.**

**Item 18: Child and family involvement in care planning**

**(WB1.18.1) – Maximize parental/family participation in Family Support Team Meeting. Refer to S2.3.2.**

**(WB1.18.2) – Improve the quality of Family Support Team Meeting. Refer to P1.7.2.**

**(WB1.18.3) – Review and further develop a handbook, to be distributed at the point of removal, to educate parents on their rights and responsibilities, Court procedures, etc.**

d. Solicited consumer feedback on parent handbook. *The Handbook was sent to six circuits across the state to be piloted. Feedback was gathered from staff in these circuits and surveys were provided for parents to complete. There has been very limited response from parents concerning the handbook. Staff have provided feedback based on their observations and interaction with parents.*

- *Staff believe it is due in part that parents are so overwhelmed with the amount of papers that we already give them (plus court appearances, etc.) at this stressful time in their life when children are being removed from the home, that adding more papers may be too much for them.*
- *Giving the handbook at the initial contact was overwhelming for most families and they seem to not care about reading it or have questions. Perhaps at the 30 day FST when we know CD will retain jurisdiction would be a better time to give them*

*the handbook. But I see that initial removal information would be very helpful but the parents are not reading it.*

- *One mother was willing to sit down with the worker to go over the handbook together. The mother was glad to get it and thought it was informative. The mother said it gave her a place to keep all the paperwork related to the case, and she was glad to list all participants and phone numbers.*
- *Some foster parents like it because they can keep a folder on each child.*
- *We added a letter to the parent asking them to bring certain things to the 72 hour meeting, such as, Medicaid card, immunizations record, Social Security card, etc. We also added the CS-99. We like the handbook. Looks more professional than what we had previously.*

*e. Developed policy to all staff and supervisory oversight. A policy memorandum, introducing the parent handbook has been developed pending administrative approval for dissemination to staff.*

#### **Item 19: Worker visits with Child – Improve quantity and quality**

**(WB1.19.1) – Develop policy addressing the quality of visits to incorporate case planning, service delivery and goal attainment.**

*f. Policy disseminated to staff. This memorandum is the third in a series to address visitation and its impact on reunification and preserving and maintaining family ties. See attached (S1.2.3.e) or view at <http://www.dss.mo.gov/cd/info/memos/2006/cd0663.pdf>.*

*g. Training began on policy enhancements staff and foster parents. Visitation training began with two train-the-trainer sessions. The selected trained staff and foster parents will provide this training locally on an as needed basis.*

*h. Utilize Practice enhancement Teams (PET) to support protocols. Central Office staff and local PETs are available to assist staff and foster parents in the Visitation training and the use of the various visitation checklists.*

**WB1.19.2) – Increase policy compliance for frequency of worker visits for intact and out-of-home cases.**

*a. Achieved progress in caseload equalization by developing quarterly circuit workload reports.*

- Home Visit tool developed locally and then created statewide improved number and quality of visits.
- Alternative Care and Family Centered Services staff provides supervisors with the case load reports at the beginning of each month.
- Excel spreadsheet is in place to equalized caseloads.
- Monthly Staffing analysis is completed and case loads assignment is constantly monitored on a dry erase board and cases adjusted and assigned accordingly.

- Circuit maintained practice in monitoring caseload equalization through “End of the Month Reports” that are submitted to Circuit Manager by every work unit. Supervisors and Office Managers use this report regularly to assign new cases to workers in their units and buildings instead of using a worker rotation method.
- Workers are using the CD-82, Checklist for Worker/Child Visits that focus on the quality and relationship building in relation to those visits.
- Staff are reporting every 90 days their visitation schedule, amount and content to the court.
- The SCRT will help identify issues in this area.

**(WB1.19.3) – *Tracking system to track worker visits (date/site)* –**

*c. PET teams annually analyzed family satisfaction survey data. See attached family satisfaction survey analysis.*

*d. Worked with ITSD staff to include worker visit information (with child, parents, foster parents) and sibling visits in the Outcomes Reports when converted to SACWIS. Central Office staff met with contracted ITSD staff on several occasion during May to request and explain business needs of adding the ability to track worker/parent/child/visits.*

**Item 20: *Worker visit with parent(s)***

**(WB1.20.1) – *Strengthen worker relationships with biological or adoptive parents.***

*a. Protocols established in WB1.19.1 g included in all resource parent training. Foster and adoptive parents were invited and included in the Visitation Train-the-Trainer sessions held in July and August 2006.*

**(WB1.20.2) – *Refer to WB1.19.1, WB1.19.2 and WB1.19.3***

**Well Being Outcome 2 – Children receive services to meet their educational needs**

**Item 21: *Children receive appropriate services to meet their educational needs***

**WB2.21.1) – *Improve working relationship among Children’s Division, Department of Elementary and Secondary Education (DESE) and local school districts.* All benchmarks in this action step have been completed.**

**(WB2.21.2) – *Improve the flow of educational records and reports when children transfer schools.* All benchmarks in this action step have been completed.**

**(WB2.21.3) – *Decrease the incidence of educational neglect, truancy and suspension of children in care.* All benchmarks in this action step have been completed.**



(WB2.21.4) – **Decrease the incidence of educational neglect, truancy and suspension of children for intact families.** All benchmarks in this action step have been completed.

### **Well Being Outcome 3 – Children receive adequate services to meet their physical and mental health needs**

#### **Item 22: Physical health of the child**

(WB3.22.1) – **Increase ability of Children’s Division staff and families to access available dental resources.** All benchmarks in this action step have been completed.

(WB3.22.2) – **Increase capacity of staff to assess medical needs of children in intact families.** All benchmarks in this action step have been completed.

#### **Item 23: Mental health need of the child**

(WB3.23.1) – **Increase the ability of Children’s Division staff and families to access available mental health resources.** All benchmarks in this action step have been completed.

(WB3.23.2) – **Increase awareness of staff and foster parents regarding attachment and mental health issues.** No benchmarks due this quarter.

(WB3.23.3) – **Increase capacity of staff to assess mental health needs of children in intact families.** No benchmarks due this quarter.

### **Systemic Factors**

**Item 24: System can identify the status, demographic characteristics, location and goals of children in foster care.** This item was found to be substantially achieved.

**Item 25: Provides a process that ensures that each child has a written case plan to be developed jointly with the child’s parent(s) that includes the required provisions**

(25.1) – **Improve family assessment and case plan tools to better link service provision to the needs of the family identified in the initial and ongoing assessments.** Refer to S2.3.1.

(25.2) – **Strengthen worker/supervisor skills in engaging families in the assessment, case planning and case plan review process to increase parent**

**caregiver (alternative care provider) and child involvement in case assessment , plan development and reassessment. Refer to S2.3.2.**

**(25.3) – Improve supervisory capacity to monitor practice linking the assessment with the overall plan. Refer to S2.3.3.**

**(25.4) – Maximize parental/family involvement in Family Support Team Meetings. Refer to P1.6.2.**

**(25.5) – Improve staff facilitation skills for Family Support Team Meetings.**

**c. Advanced FST Skill application integrated into advanced Family Centered Out-of-Home Services In-service module. Part I of the FCOOHC in-service training module provides staff with knowledge and skills for improving FST facilitation. See attached FCOOHC outline.**

**Item 26: Process for 6-month case reviews**

**(26.1) – Revised current policy to clarify an Administrative Review and requirements. All benchmarks in this action step have been completed.**

**(26.2) – Recruit 3<sup>rd</sup> party participants for Administrative Reviews. All benchmarks in this action step have been completed.**

**(26.3) – Increase ability to track 6 month Administrative Reviews separately from FSTs. All benchmarks have been completed in this action step.**

**Item 27: Provides a process that ensures that each child in foster care under the supervision of the state has permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.**

**(27.1) – Improve access to legal representation for CD. Refer to P1.9.4. All benchmarks have been completed in this action step**

**(27.2) – Implement training to develop testifying skills for CD staff. All benchmarks in this action step have been completed.**

**(27.3) – Increase the timeliness of 12 month Permanency Hearings. All benchmarks in this action step have been completed.**

**(27.4) – Provide cross training to judiciary, court staff, GALs and Children's Division staff on ASFA and Permanency Hearings consistent with state and federal regulations. Refer to P1.7.4. All benchmarks in this action step have been completed**

**Item 28: Provides a process for termination of parental rights proceedings in accordance with provisions of ASFA.**

(28.1) – **Improve access to legal representation for CD.** Refer to P1.9.4. All benchmarks in this action step have been completed

(28.2) - **Strengthen worker/supervisor skills in engaging families in the assessment, case planning and case plan review process to increase parent, caregiver(alternative care provider) and child involvement in case assessment, plan development and reassessment.** Refer to S2.3.2.

(28.3) – **Termination of Parental rights will be filed in a timely manner, except when compelling reasons are documented.** Refer to P1.9.1.

(28.4) – **Improve diligent search for relatives/ parents.** Refer to P1.6.2. All benchmarks in this action step have been completed

(28.5) – **Collaborate with OSCA to amend 211.227 RSMo to ensure consistency w/ASGA requirements regarding filing of TPR petitions w/in 60 days of a judicial determination that the child is an abandoned infant, or that no Reasonable efforts are required.**

d. Advocated for proposed legislation. See the attached 2007 legislative proposal to ensure consistency with AFSA requirements.

**Item 29: Provides a process for foster parents, re-adoptive parents, and relative caregivers of children in foster care to be notified of and have an opportunity to be heard in, any review or hearing held with respect to the child.**

(29.1) – **Increase ability of foster parents to be notified of and heard in court.** All benchmarks in this action step have been completed.

**Item 30: Standards to assure quality services and ensure children’s safety and health** - This item was found to be substantially achieved.

**Item 31: Identifiable QA system that evaluates the quality of services and improvements** - This item was found to be substantially achieved.

**Item 32: Provision of ongoing staff training that addresses the necessary skills and knowledge** - This item was found to be substantially achieved.

**Item 33: Ongoing training for staff**

(33.1) – **Develop supervisory training for front line supervisors.**

m. Professional Development and Training implemented curriculum statewide. New clinical supervisor training began statewide during July 2006.

(33.2) – **Develop advanced in-service training module for investigations and assessment.** All benchmarks in this action step have been completed.

(33.3) – **Develop advanced in-service training module for Family-Centered Services.** No benchmarks due this quarter.

(33.4) – **Develop advanced in-service training module for Family-Centered Out-of-Home Care Services.**

h. Professional Development and Training implemented revised Family-Centered Out-of-Home Care Services advanced in-service training statewide. The FCOOHC in-service training has two parts, Part I and Part II. The part II is delivered four weeks following part I to allow for OJT activities. See attached FCOOHC outline.

(33.5) – **Enhanced On-The-Job (OJT) Training.**

g. Supervisors commented on the skills/guide list. Supervisors commented on the skills/guide list beginning May 26- June 30 2006. Feedback was gathered from June 30th through July 17th. See attached comments from supervisors.

h. Skills guide modified after comment periods. Based on the feedback, revisions were made to the skills guide July 17th through July 25th. The completed, final revised draft was submitted on July 26, 2006. See attached draft revisions to the skills guide.

(33.6) – **Create training advisory committee to annually assess needs and evaluate training** No benchmarks due this quarter.

d. Advisory Committee developed a written plan for evaluating training needs. Although this benchmark has a renegotiated due date of November 2006, this following information is being provided as requested.

*The training advisory committee members are confirming their participation for the first proposed meeting to be held either October 12th or the 18th. The purpose of this meeting will be to examine the effectiveness of the agency's training, review trends, patterns and staff needs, etc. based on the current training plan and structure. The advisory committee will begin to develop a mission statement and define how better to assess needs and evaluate the agency's training.*

(33.7) – **Develop Child Abuse and Neglect Training (CA/N) Institute for CD staff.** All benchmarks in this action step have been completed.

(33.8) – **Provide training based on circuit specific needs.** All benchmarks in this action step have been completed.

**Item 34: Provision of training for caregivers and adoptive parents that addresses the necessary skills and knowledge.** This item was found to be substantially achieved.

**Item 35: Service array**

(35.1) – **Increase access and availability to dental services.** Refer to WB3.22.1. All benchmarks in this action step have been completed.

(35.2) – **Increase the ability of staff and families to access Alcohol and Drug Abuse Services (ADA)**

f. Completed three additional Family, Drugs and Safety trainings across the state. After the field test was conducted in November 2004, three additional training were provided: November 8 – 10, 2004 in Arnold; March 9 – 11, 2005 in Kansas City; July 12 – 14, 2006 in St. Joseph.

(35.3) – **Increase availability of specialized foster homes for older youth, siblings, disabled and medically fragile children.** Refer to P1.6.5.

(35.4) – **Increase availability of and access to parenting classes and family/parent aide services.** All benchmarks in this action step have been completed.

(35.5) – **Increase services to meet the needs of non-English speaking consumers.** All benchmarks in this action step have been completed.

(35.6) – **Increase availability of transportation services.** All benchmarks in this action step have been completed.

**Item 36: The services in item 35 are accessible to families and children in all political jurisdictions covered in the State's CFSP.** See Item 35 1-6.

**Item 37: The services in item 35 can be individualized to meet the unique needs of children and families served by the agency.**

(37.1) – **Increase access to existing services.** See item 35 1-6.

(37.2) – **Strengthen work/supervisor skills in engaging families in the assessment, case planning and case plan review process to increase parent, care giver (alternative care provider) and child involvement in case assessment, plan development and reassessment.** Refer to S2.3.2.

**Item 38: Engages in ongoing consultation with critical stakeholders in developing the CFSP.** This item was found to be substantially achieved.

**Item 39: *Develops annual progress reports in consultation with stakeholders.***  
*This item was found to be substantially achieved.*

**Item 40: *Coordinates services with other federal programs.*** *This item was found to be substantially achieved.*

**Item 41: *Standards for foster family and child care institutions.*** *This item was found to be substantially achieved.*

**Item 42: *Standards are applied equally to all foster family and child care institutions.*** *This item was found to be substantially achieved.*

**Item 43: *Conducts necessary criminal background checks.*** *This item was found to be substantially achieved.*

**Item 44: *Diligent recruitment of foster and adoptive families that reflect children's racial and ethnic diversity***

**(44.1) – *Increase the number of resource families.*** *Refer to P1.6.5.*

**Item 45: *Uses cross jurisdictional resources to find placements.*** *This item was found to be substantially achieved.*