

**Children's Bureau
Child and Family Services Reviews
IV. Program Improvement Plan Matrix (PIP Matrix)**

State: Missouri

ACF Regional Office:

State contact and telephone: Lee Temmen, 573-526-3735 ___ Region I ___ Region IV X Region VII ___ Region X

ACF Contact and telephone: Ann Burds, 816 426-2260 ___ Region II ___ Region V ___ Region VIII

Date and quarter submitted: May 26, 2006 – 5th Quarter ___ Region III ___ Region VI ___ Region IX

Blue = under renegotiation

Gray = completed

A = Achieved
N/A = Not Achieved

***Performance derived using the average of pervious four quarters performance**

| Program Improvement Implementation | | | | | | | |
|--|-----|---|--------------|---|----------------------------------|----------------------|-----------------------------------|
| 1 | | 2 | 3 | 4 | 5 | 6 | 7 |
| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| Safety Outcome S1: | | | | | | | |
| | X | Baseline 76.6% (derived from average of 8 quarters in FY 2003 and 2004) The Goal of achieving 80.4% has been met. Goal 80.4% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement. | | Monitored through CD Outcomes Report Outcome #1: Improve timeliness of initial child contact. | | | Projected-Dec 2006 Actual- |

Program Improvement Implementation

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| A | N/A | | | | | | | | |
| | | | Progress to be tracked quarterly over two year period from CD Outcomes Report). | | | | | | |
| | | | S1.1.1 Clarify policy regarding timeliness of initiating reports of child maltreatment. Kathryn Sapp | | S1.1.1.a Refined definition of "initiating" reports. | P-Mar 05 A-Mar 05 | | | |
| | | | | | S1.1.1.b Policy clarified regarding multi disciplinary team contact. | P- Mar 05 A-Mar 05 | | | |
| | | | | | S1.1.1.c Policy clarified regarding face-to-face contact and determining safety of the child. | P-Mar 05 A-Mar 05 | | | |
| | | | | | Policy issuance | S1.1.1.d Policy disseminated to all CD staff. | P-Mar 05 A-May 05 | | |
| | | | S1.1.2 Increase accuracy of data regarding initial contact. Kathryn Sapp Susan Savage | | S.1.1.2.a Data system entry guidelines clarified for "initial contact". | P-Aug 05 A-Aug 05 | | | |
| | | | | | | S.1.1.2.b As determined, if needed by policy clarification, additional systems entry codes developed to capture accurate data. | P-Feb 06 A-Jan 06 | | |
| | | | | | PRR revised | S1.1.2.c Revised Peer Record review questions to assess accuracy of coding. | P-Sept 05 A-Oct 05 | | |
| | | | | | Quarterly PRR results | S1.1.2.d Circuit Managers and the assisting QA specialists monitor quarterly Peer Record results and make recommendations for improvements. | P-Ongoing quarterly A-Ongoing quarterly | | |
| | | | S1.1.3 Study feasibility for alternative protocols for managing non CA/N referrals Virginia Lewis-Brunk | Demographic data | S1.1.3.a CD/FSD assessed demographics for non CA/N referrals. | P-Apr 04 A-Apr 04 | | | |
| | | | | Protocol written | S1.1.3.b Protocol written for screening and assigning non CA/N referrals for test sites in Jackson, Clay and Platte Counties. | P-May 04 A-May 04 | | | |
| | | | | Training agenda | S1.1.3.c Training provided to CD/FSD workers and supervisors regarding new protocol for testing. | P-May 04 A-May 04 | | | |

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| | | | | | | S1.1.3.d Launched a non CA/N referral alternate response process in Jackson, Clay and Platte Counties. | P-Jul 04 A-Jul 04 | |
| | | | | | Pilot data | S1.1.3.e Convened workgroup to evaluate CD/FSD pilot for non CA/N referrals. | P-Jan 05 A-Jan 05 | |
| | | | | | Recommendations report | S1.1.3.f Workgroup to provide recommendations for modifications of non CA/N referral protocol and test site continuation. | P-Apr 05 A-Apr 05 | |
| | | | | | Recommendation Plan | S1.1.3.g Recommendation plans finalized. | P-Apr 05 A-Apr 05 | |
| | | | | | Implementation plan | S1.1.3.h Implementation plans finalized to implement in target areas | P-Aug 05 A-Apr 05 | |
| | | | | S1.1.4 Develop improvement plan to respond timely to reports of maltreatment | Circuit self-assessments | S1.1.4.a Circuit level assessment to evaluate CA/N response completed. | P-Oct 04 A-Aug 04 | |
| | | | | Kathryn Sapp | Established protocol | S1.1.4.b Local protocol for CA/N response established. | P-Mar 05 A-Mar 05 | |
| | | | | | Implemented protocol | S1.1.4.c Implemented local protocol for improvement of maltreatment. | P-Apr 05 A-Apr 05 | |
| | | | | | | S1.1.4.d Monitored the improved timeliness of initial child contact. | P-Jul 05 A-Jul 05 | |
| | | | | S1.1.5 Call Management and Structured Decision Making (SDM) Protocols Implemented at the Child Abuse and Neglect Hotline Unit (CA/N HU) to provide consistent screening and classification of calls received. | Protocols developed | S1.1.5.a Began development of SDM and Call Management protocols for CA/N HU. | P-Dec 03 A- Dec 03 | |
| | | | | Charlotte Gooch | | S1.1.5.b Incorporated SDM and Call management protocols into CA/N HU process. | P-Apr 04 A-Apr 04 | |
| | | | | | Training agenda | S1.1.5.c Remaining CA/N HU staff trained on protocols and using call management system. | P-Aug 04 A-Aug 04 | |
| | | | | | CA/N HU Supervisory Review Tool developed | S1.1.5.d CA/N HU Supervisory Review tool developed to assess quality. | P-Sept 05 A-Sept 05 | |
| | | | | | | S1.1.5.e CA/N Hotline protocols automated. | P-Sept 05 A-Jun 05 | |

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| | | | | PRR revision | S1.1.5.f Added CA/N HU section to the Peer Record Review tool. | P-Sept 05 A-Oct 05 | |
| | | | | PRR tool analysis. On going data collected and reviewed quarterly. | S1.1.5.g Collected and analyzed PRR tool results for practice enhancements. Analysis. | P-Jan 2006 Ongoing Quarterly A- Jan 06 Quarterly | |
| | | | 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. Kathryn Sapp | | S1.1.6.a Defined what statutory core functions are. | P-Dec 05 A-Dec 05 | |
| | | | | Draft plan | S1.1.6.b Developed proposed plan for information dissemination on practice changes regarding non CA/N calls. | P- Dec 05 A-Dec 05 | |
| | | | | Consult with NRC-CPS | S1.1.6.c Consulted with National Resource Center on Child Protective Services regarding non CA/N referrals. | P-Feb 06 A-Nov 05 | |
| | | | | | S1.1.6.d Shared proposed plan with Regional Directors. | P-Apr 06 A-Apr 06 | |
| | | | | Modified plan | S1.1.6.e Modified proposed plan, if needed, based on recommendations of the Regional Director | P-May 06 A- | |
| | | | | | S1.1.6.f Shared proposed plan with CJA taskforce. | P-Jun 06 A- | |
| | | | | CJA recommendations | S1.1.6.g Shared CJA taskforce recommendations with CD administration. | P-Jul 06 A- | |
| | | | | Policy developed | S1.1.6.h Policy changed for CANHU on the screening process for non CA/N calls, if needed. | P-Aug 06 A- | |
| | | | | Training agenda | S1.1.6.i If needed, training provided to CANHU staff on modified protocol changes. | P-Sep 06 A- | |
| | | | | Notification letter | S1.1.6.j Notified known mandated reporters and other professional organizations on practice changes. | P- Oct 06 A- | |
| | | | Disseminate policy | S1.1.6.k Disseminate policy changes to all staff. | P-Nov 06 A- | | |

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| | X | CA/N Recidivism Nat'1 Standard 6.1 % or less MO FFY 2003 NCANDS Baseline 8.3% NCANDS Goal 7.4% (Based on Federal formula for goal setting 5th quarter average performance= 4.8% based on quarterly Outcome Report not NCANDS. NCANDS data not available quarterly. | | | | | P-Dec 2006 A- |
| | | | S1.2.1 Ensure consistent and accurate completion of SDM safety and risk assessment. Kathryn Sapp Cindy Wilkinson | PRR revision Training curriculum Training agenda Evaluation Report In-service training agenda | S1.2.1.a Incorporated SDM safety and risk assessment questions into Peer Record Review Tool. S1.2.1.b Modified BASIC training curriculum and ongoing training curriculum based on PRR results. S1.2.1.c Conducted initial in-service training with CD and court staff. S1.2.1.d Evaluated SDM Peer Record Review Outcomes. S1.2.1.e Convene workgroup to finalize SDM review tool and instruction to field. S1.2.1.f Instruct field staff to review 10% of cases using SDM review tool. | P-Jan 04 A-Feb 04 P-Feb 04 A-Mar 04 P-Jun 04 A-Jun 04 P & A-On-going & quarterly P-Feb 05 A-Dec 04 P-Apr 05 A-Apr 05 | |

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| | | | | | | S1.2.1.g Evaluate results of review, identify circuits whose needs are more imminent for the training. | P-Jul 05 A-Jul 05 | |
| | | | | | | S1.2.1.h As needed, provided training to circuits identified with imminent need. | P-Sep 05 ongoing A-Sep 05 | |
| | | | CA/N in AC Nat'l Standard 0.57% or less MO FFY 2003 NCANDS Baseline 0.37% Goal Achieved | | | | | P-Dec 2006 A- |
| | | | | S1.2.2 Implementation of "Confirming Safe Environments" (CSE) process. Susan Savage | Training agenda | S1.2.2.a All staff trained in CSE process in test sites of Pettis, Cooper, and Greene. | P-Jul 04 A-Jul 04 | |
| | | | | | Training agenda | S1.2.2.b Trained one Out-of-Home Unit on CSE in St. Louis City. | P-Jul 04 A-Jul 04 | |
| | | | | | | S1.2.2.c In-house expertise developed for training | P-Dec 04 A-Dec 04 | |
| | | | | | Evaluation report | S1.2.2.d Central Office staff summarized test site implementation in Pettis, Cooper and Greene for Child Protection | P-Mar 05 A-Mar 05 | |
| | | | | | Review of CSE curriculum | S1.2.2.e Strengths in summary and CSE curriculum identified by Visitation Workgroup. | P-Aug 05 A-Aug 05 | |

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| | | | | | Workgroup recommendations report | S1.2.2.f. Visitation Workgroup presented recommendations on enhancing visitation and safety policies throughout the continuum of services to Executive staff. | P-Nov 05 A-Nov 05 | |
| | | | | | | S1.2.2.g. Executive staff met to approve recommendations. | P-Jan 06 A-Jan 06 | |
| | | | | | | S.1.2.2.h. Central Office staff met to begin addressing policy assignments. | P-Feb 06 A-Feb 06 | |
| | | | | | | S1.2.2.i Developed safety policy regarding assessment of safety at and throughout placement. | P-Apr 06 A-Apr 06 | |
| | | | | | Meeting notes | S1.2.2.j Staff Training and Development met to discuss incorporating Visitation Workgroup recommendations into training for staff and foster parents | P-Apr 06 A-Apr 06 | |
| | | | | | Policy memo | S1.2.2.k Policy memo disseminated to staff. | P-May 06 A- | |
| | | | | | Training plan | S1.2.2.l Training began on policy enhancements to new and existing staff. | P-Jul 06 A- | |
| | | | | S1.2.3 Strengthen policy regarding assessment of safety at and throughout placement. | Convened Visitation workgroup | S1.2.3.a Visitation Workgroup convened to review current visitation and safety policy. | P-May 05 A-May 05 | |
| | | | | Cindy Wilkinson | Workgroup Recommendations | S1.2.3.b Visitation Workgroup presented recommendations on enhancing visitation and safety policies throughout the continuum of services to Executive staff. | P-Nov 05 A-Nov 05 | |
| | | | | | Draft policy | S1.2.3.c Developed safety policy regarding assessment of safety at and throughout placement. | P-Apr 06 A-Apr 06 | |

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| A | N/A | | | | | | |
| | | | | | S1.2.3.d Staff Training and Development met to discuss incorporating Visitation Workgroup recommendations into training for staff and foster parents. | P-Apr 06 A-Apr 06 | |
| | | | | Policy disseminated | S1.2.3.e Policy disseminated. | P- May 06 A- | |
| | | | | | S1.2.3.f Training began on policy enhancements to new and existing staff | P-Jul 06 A- | |
| | | | 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. Bonnie Washeck | | S1.2.4.a Developed PET roles and responsibilities. | P-Feb 05 A-Feb 05 | |
| | | | | Organizational Chart | S1.2.4.b PET teams developed. | P-Mar 05 A-Mar 05 | |
| | | | | Current data on repeat maltreatment | S1.2.4.c Convened PET teams to review Circuit Self-Assessments in the areas of repeat maltreatment and CA/N in foster care. | P-Apr 05 A-Apr 05 | |
| | | | | List of strategies – | S1.2.4.d PET teams and Circuit Managers developed improvement strategies. | P-May 05 A-Jul 05 | |
| | | | | Program improvement plans developed | S1.2.4.e Program improvement plans implemented by Circuit Managers and staff. | P-Aug 05 A-Aug 05 | |
| | | | S1.2.5. Strengthen policy and practice relating to chronic neglect and accumulation of harm. Kathryn Sapp | Analysis report | S1.2.5.a Statewide analysis of families with multiple reports completed by CD and Institute of Applied Research (IAR). | P-June 04 A-Feb 04 | |
| | | | | Waiver application | S1.2.5.b Submit revised Title IV-E waiver application for Chronic Neglect pilot. | P-Jan 05 A-May 05 | |
| | | | | Training curriculum | S1.2.5.c Training Curriculum for pilot sites developed regardless of waiver outcome. | P-July 05 A-Jun 05 | |

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| A | N/A | | | | | | | |
| | | | | | | S1.2.5.d Three pilot sites selected (Jasper, McDonald and Newton counties) based on negotiations with Federal partners. | P-July 05 A-Jun 05 | |
| | | | | | Training agenda | S1.2.5.e Pilot sites trained by FCS consultants. | P-Jul 05 A-Jun 05 | |
| | | | | | IAR Screening Tool | S1.2.5.f Used IAR's screening tool to determine if families meet the CN criteria. | P-Nov 05 A-Oct 05 | |
| | | | | | Tracking tool | S1.2.5.g Developed a tool for manual tracking of CN families to be utilized throughout pilot | P-Feb 06 R-May 06 A- | |
| | | | | | | S1.2.5.h Met with Regional and Circuit administrators to strategize about next steps and community forum. | P-Jun 06 A- | |
| | | | | | | S1.2.5.i Held community forum to gain support from stakeholder. | P-Jul 06 A- | |
| | | | | | | S1.2.5.j Initiated pilot. | P-Aug 06 A- | |
| | | | | | Evaluation report | S1.2.5.k CD staff evaluated short term output of pilot effectiveness. | P-Jan 07 A- | |
| | | | | S1.2.6 Develop performance-based contract for foster parents Bonnie Washeck | Licensing rules | S1.2.6.a Incorporated HB 1453 legislation regarding the Professional Family Development Plan (PFDP) into Licensing rules. | P-May 05 A-May 05 | |
| | | | | | | S1.2.6.b Identified the performance based criteria required for the PFDP. | P-Aug 05 A-Oct 05 | |
| | | | | | | S1.2.6.c Informed foster parents of PFDP criteria at assessment and reassessment | P-Aug 05 ongoing A-Oct 05 | |
| | | | | | Memo | S1.2.6.d Identify plan to inform CD staff of new requirements for foster parents. | P-Nov 05 A-Apr 06 | |

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| | | | | | Training agenda | S1.2.6.e Trained CD staff on PFDP and how to assist family in developing and implementing the plan. | P-Feb 06 A-Mar 06 | |
| | | | | | | S1.2.6.f Identified resources for foster families to use to successfully implement PFDP. | P-Mar 06 A-Mar 06 | |
| | | | | | | S1.2.6.g Initiated PFDP for all new and reassessed foster parents. | P-May 06 A- | |
| Safety Outcome S2: | | | | | | | | |
| Item 3: Services to family to protect child(ren) in home and prevent removal | | X | Baseline 89.4% 5th quarter average PRR performance = 88.5 % Goal 90.3% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 1% of the average to measure improvement.) | | Peer Record Review (PRR) IV-13. Services being provided to the family are adequate to meet their needs as identified in the assessment. (Previous measure used was IV-15). | | | P-Dec 2006 A- |
| | | | | S2.3.1 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; include a mechanism for family self-assessment and | Draft of CD-14 | S2.3.1.a CD-14 family assessment tool field test initiated in Circuit 2. | P-Sep 04 A-Sep 04 | |
| | | | | | | S2.3.1.b CD-14 family assessment tool field test expanded to other sites. | P-May 05 A-Feb 05 | |
| | | | | | Evaluation report | S2.3.1.c Results of field test evaluated and analyzed by staff and work group. | P-Jun 05 A-Mar 05 | |
| | | | | | Revised CD-14 | S2.3.1.d Revised CD-14 as needed. | P-Jul 05 A-Apr 05 | |
| | | | | | | S2.3.1.e Recommendations regarding changes made. | P & A On-going | |

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| A | N/A | | | | | | | |
| | | | | identified areas specifically related to child safety and risk concerns (to be completed concurrently with S2.3.2) Kathryn Sapp | Policy issuance | S2.3.1.f Policy issued with new documents and instructions. | P-Oct 05 R-Jan 06 A-Dec 05 | |
| | | | | | Training | S2.3.1.g Training of existing staff completed. | P-Jan 06 A-Feb 06 | |
| | | | | | | S2.3.1.h Incorporated changes into BASIC training. | P-Jan 06 A-Feb 06 | |
| | | | | S2.3.2 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. Bonnie Washeck | | S2.3.2.a Conducted focus groups (workers, supervisors, circuit managers and consumers) in four circuits (circuits 1, 2, 10, 41) to identify clinical support needs. | P-Aug 04 A-Aug 04 | |
| | | | | | Supplemental Supervisory Training | S2.3.2.b Focus group results compiled and used for supplemental supervisory training. | P-Oct 04 A-Oct 04 | |
| | | | | | Training curriculum developed and began | S2.3.2.c Training curriculum developed and supplemental FST training began. | P-Feb 05 A-Feb 05 | |
| | | | | | | S2.3.2.d Up to twenty sessions of Supplemental Supervisory training for all Supervisor I's began. | P-Feb 05 A-Mar 05 | |
| | | | | | Training agenda and summary of feedback | S2.3.2.e Training provided for existing staff and feedback solicited from trainees on training. | P-Oct 05 A-Oct 05 | |
| | | | | | Survey results and circuit improvement plans | S2.3.2.f PET teams annually analyzed family satisfaction survey data and PDR results for improvement with the expectation that circuits develop methods to improve. | P-Nov 05 annually R-Apr 06 A-Apr 06 | |
| | | | | S2.3.3 Improve supervisory capacity to monitor enhanced practice relating to case planning. | | S2.3.3.a Reviewed existing supervisory case review tools. | P-May 05 A-May 05 | |
| | | | | | Draft of tool | S2.3.3.b Created draft standardized supervisory case review tool. | P-June 05 A-Sept 05 | |

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| | | | | Susan Savage | | S2.3.3.c Supervisory case review tool field tested by selected supervisors. | P-Sept 05 A-Sep 05 | |
| | | | | | Feedback summary | S2.3.3.d Feedback from field testing reviewed by review team. | P-Jan 06 A-Dec 05 | |
| | | | | | Tool revision | S2.3.3.e Supervisory case review tool revised as needed. | P-Jan 06 A-Jan 06 | |
| | | | | | Protocol established and manual revision | S2.3.3.f Protocol for supervisory case review established and manual revisions made. | P-Jan 06 A-Jan 06 | |
| | | | | | | S2.3.3.g System automation completed for supervisory case review tool. | P-Feb 06 R-Jul 06 A- | |
| | | | | | Policy disseminated and implemented | S2.3.3.h Supervisory case review tool and protocols approved and distributed for statewide use. | P-Feb 06 R-Jul 06 A- | |
| | | | | S2.3.4 Establish procedures to access various service funding streams. Bonnie Washeck | | S2.3.4.a Developed service access funding grid and guidelines. | P-Aug 05 A-Aug 05 | |
| | | | | | Guidelines distributed | S2.3.4.b Distributed service access funding grid and guidelines to all staff. | P-Sept 05 A-Feb 06 | |
| | | | | S2.3.5. Per new legislation, develop state comprehensive children's mental health plan to increase level of cooperation between court, mental health, child welfare and families. Jim Harrison | | S2.3.5.a Barriers identified for children needing mental health services. | P-Jan 05 A-Jan 05 | |
| | | | | | | S2.3.5.b Funding mechanisms established for providing mental health services. | P-Jan 05 A-Jan 05 | |
| | | | | | Coordination plan | S2.3.5.c Plan developed for coordination of resources from multiple agencies. | P-Jan 05 A-Jan 05 | |
| | | | | | | S2.3.5.d Evaluation methodology established. | P-Jan 05 A-Jan 05 | |
| | | | | | Report submission | S2.3.5.e Report with recommendations submitted to legislators and governor. | P-Jan 05 A-Jan 05 | |

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| Item 4: Risk of harm to child(ren) | | X | | | PRR IV-13 was removed as a measure for this item per 4 th quarter renegotiation. | | | P-Dec 2006 A- |
| | | | | S2.4.1 Ensure consistent and accurate completion of SDM safety and risk assessment. Cindy Wilkinson | SDM Review Tool | S2.4.1.a See S1.2.1.a S2.4.1.b See S1.2.1.b S2.4.1.c See S1.2.1.c S2.4.1.d See S1.2.1.d S2.4.1.e See S1.2.1.e S2.4.1.f See S1.2.1.f S2.4.1.g See S1.2.1.g S2.4.1.h See S1.2.1.h | | |
| | | | | S2.4.2 Implementation of "Confirming Safe Environments" process. Susan Savage | | S2.4.2.a See S1.2.2.a S2.4.2.b See S1.2.2.b S2.4.2.c See S1.2.2.c S2.4.2.d See S1.2.2.d S2.4.2.e See S1.2.2.e S2.4.2.f See S1.2.2.f S2.4.2.g See S1.2.2.g S2.4.2.h See S1.2.2.h S2.4.2.i See S1.2.2.i S2.4.2.j See S1.2.2.j S2.4.2.k See S1.2.2.k S.2.4.2.l See S1.2.2.l | | |
| | | | | S2.4.3 Implement enhanced background screening for foster/kinship and court ordered providers. | Policy disseminated | S2.4.3.a Policy for enhanced background screening implemented statewide. S2.4.3.b Policy updates and supervisory consultations with existing staff. | P-Aug 04 A-Aug 04 P-Aug 04 A-Aug 04 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | | |
| | | | | | | | Benchmark | Goal | |
| A | N/A | | | | | | | | |
| | | | | Cindy Wilkinson | | S2.4.3.c Incorporated enhanced background screening into on-going STARS and BASIC training. | P-Nov 04 A-Nov 04 | | |
| | | | S2.4.4 Development of "Culture of Care Initiative" for improving safety and nurturance of children in a residential care setting. Fred Proebsting | Committee member list | | S2.4.4.a Work committees formed with volunteers from residential sites to develop curriculum. | P-Jan 04 A-Jan 04 | | |
| | | | | Curriculum | | S2.4.4.b Curriculum Drafted. | P-Mar 04 A-Mar 04 | | |
| | | | | | | S2.4.4.c Curriculum approved by CD administration. | P-May 04 A-May 04 | | |
| | | | | | | S2.4.4.d Roundtables held with CEO's to discuss curriculum. | P-Jul 04 A-Jul 04 | | |
| | | | | | Training agenda | | S2.4.4.e NRC Train-the-Trainers session held/2 days in KC and St. Louis for residential licensed providers. | P-Aug 04 A-Aug 04 | |
| | | | | | | | S2.4.4.f Measured through a reduction of the number of preponderance of evidence reports received by the residential treatment facilities. | P-Ongoing A-Ongoing | |
| | | | 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. Kathryn Sapp | | | S2.4.5.a See S2.3.1.a | | | |
| | | | | | | | S2.4.5.b See S2.3.1.b | | |
| | | | | | | | S2.4.5.c See S2.3.1.c | | |
| | | | | | | | S2.4.5.d See S2.3.1.d | | |
| | | | | | | | S2.4.5.e See S2.3.1.e | | |
| | | | | | | | S2.4.5.f See S2.3.1.f | | |
| | | | | | | | S2.4.5.g See S2.3.1.g | | |
| | | | | | | | S2.4.5.h See S2.3.1.h | | |
| Permanency | | | | | | | | | |

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| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| Outcome 1 | | | | | | | |
| Item 5 | X | | Passed CFSR On-site review and 2002 AFCARS | | | | |
| Item 6: Stability of foster care placement | | X | Stability in foster care. Nat'l Standard 86.7% or more 5th quarter performance based on quarterly outcomes report = 75.8%* not AFCARS formula. AFCARS data not available. MO FFY 2003 78.6% AFCARS Goal 80.5% (Based on Federal formula for goal setting). Data profile: 2-7-06 - FFY 05 for stability = 80.7% | | | | P-Dec 2006 A- |
| | | | P1.6.1 Increase system capacity to accurately track placement kinship vendor types. Lesley Pettit | | P1.6.1.a Logic created to track additional placement types 1) Kin, Related, Not licensed 2) Kin, Non-related, Not licensed 3) Kin, Non-related, Licensed. | P-Mar 05 A-Feb 05 | |
| | | | | | P1.6.1.b Coding changes in Legacy completed. | P-May 05 A-May 05 | |
| | | | | Policy disseminated | P1.6.1.c Policy updated and distributed to CD staff. | P-Aug 05 A-Sep 05 | |
| | | | | Data converted | P1.6.1.d Staff will convert existing data to reflect accurate placement types. | P-Dec 05 A-Feb 06 | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | Quarterly Outcome Report | P1.6.1.e Coding changes to be reflected in Quarterly Outcome Report. | P-Apr 06 | |
| | | | | | | | A-Mar 06 | |
| | | | | P1.6.2 Improve diligent search for relatives/missing parents. Bonnie Washeck | | P1.6.2.a Potential explored for CD staff to access existing diligent search mechanisms. | P-Jul 04 | |
| | | | | | Procedure disseminated | P1.6.2.b Diligent search procedure developed, distributed, and monitored through supervisory oversight. | A-Jul 04 | |
| | | | | | | P1.6.2.c Established agreements, as necessary, with other state agencies (possibly through Family Support Division and OSCA) to enhance access to state databases as mechanisms for diligent search. | P-Aug 04 | |
| | | | | | | | A-Aug 04 | |
| | | | | | Quarterly outcome reports | P1.6.2.d CD staff utilize enhanced diligent search mechanism and monitored through supervisory oversight. | P-Mar 05 | |
| | | | | | | | A-Apr 05 | |
| | | | | P1.6.3 Expand use of family support team meetings to promote stability in alternative care placements Kathryn Sapp Cindy Wilkinson | Plan disseminated | P1.6.3.a Plan written and disseminated for HB 1453 requirement of a FST prior to or immediately after an impending move. | P-Aug 04 | |
| | | | | | | P1.6.3.b Made ACTS system changes to track FSTs held prior to or immediately after a move. | A-Aug 04 | |
| | | | | | | P1.6.3.c Central Office staff provided training to regional staff on HB 1453 requirements | P-Aug 04 | |
| | | | | | | P1.6.3.d Regional staff provided localized training to existing staff on HB 1453 requirement | A-Aug 04 | |
| | | | | | | P1.6.3.e Policy incorporated into BASIC training. | P-Sep 04 | |
| | | | | | | | A-Sep 04 | |
| | | | | | PRR | P1.6.3.f Updated PRR to assure pre-placement FSTs. | P-Dec 04 | |
| | | | | | | | A-Dec 04 | |
| | | | | | | | P-Feb 05 | |
| | | | | | | | A-Mar 05 | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | P1.6.4 Identify resource family types and shortages | Circuit data | P1.6.4.a Resource and recruitment contractors worked with circuits to determine resource family needs. | P-Mar 05 | |
| | | | | Cindy Wilkinson | Circuit management plan | P1.6.4.b Recruitment plan targeting resource families written into a circuit management plan to address identified need. | P-May 05 A-Jul 05 | |
| | | | | | Contract extension | P1.6.4c Extended current Foster Care/Adoption Resource Services contract | P-Nov 05 A-Nov 05 | |
| | | | | | Circuit progress reports | P1.6.4d Circuit reported quarterly progress on recruitment activities | P-Feb 06 quarterly A-Feb 06 | |
| | | | | | NRC Technical Assistance plan | P1.6.4e Consulted with the National Resource Center for Family Centered Practice and Permanency Planning regarding recruitment of resource families. | P-Mar 06 A-Jan 06 | |
| | | | | P1.6.5 Increase number of resource families | Recruitment and retention plan developed | P1.6.5.a Recruitment and retention plan for foster home serving older youth implemented through Chafee program. | P-Jun 04 A-Jun 04 | |
| | | | | Cindy Wilkinson | Adopt US Kids campaign | P1.6.5.b Implemented Adopt US Kids campaign. | P-Jul 04 A-Jul 04 | |
| | | | | | Request for Proposal | P1.6.5.c RFP written and released for performance based case management contracts (PBC). | P-Apr 05 A-Apr 05 | |
| | | | | | Award letters | P1.6.5.d Awarded PBC contracts. | P-Jun 05 A-Jun 05 | |
| | | | | | | P1.6.5.e PBC Case Management Services began | P-Sep 05 A-Sep 05 | |
| | | | | | Contract extension | P1.6.5.f Extended current Foster Care/Adoption Resource Services contract. | P-Nov 05 A-Nov 05 | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | ACTS data report | P1.6.5.g Quarterly report on PBC contractors' performance on stated child outcome on safety, permanency, and stability. | P-Feb 06 quarterly | |
| | | | | | NRC Technical Assistance plan | P1.6.5.h Consulted with the National Resource Center for Family Centered Practice and Permanency Planning regarding recruitment of resource families. | P-Mar 06 A-Jan 06 | |
| | | | | | Annual report | P1.6.5.i Annual report to General Assembly regarding PBC regarding case management, recruitment and training outcomes. | P-Jul 06 annually A- | |
| | | | | P1.6.6 Increase placement stability by improving matching capabilities for children in out-of-home settings. Cindy Wilkinson | | P1.6.6.a Consulted with the National Resource Center for Family Centered Practice and Permanency Planning regarding "critical" factors in placement stability. | P-Mar 06 A-Jan 06 | |
| | | | | | Survey results | P1.6.6.b Surveyed resource families to gather information regarding placement stability. | P-May 06 A- | |
| | | | | | | P1.6.6.c Developed a placement matching tool designed for use in team decision making. | P-Oct 06 A- | |
| | | | | | Matching tool developed disseminated | P1.6.6.d Tool disseminated with instructions. | P-Nov 06 A- | |
| | | | | | | P1.6.6.e Tool incorporated into BASIC training and supervisory oversight provided to existing staff. | P-Dec 06 A- | |
| | | | | P1.6.7 Evaluate support and training provided for relative/kinship resource families | Survey | P1.6.7.a Surveyed current relative caregivers on the adequacy of the Caregiver who Knows the Child training curriculum. | P-Dec 05 A-Feb 06 | |
| | | | | | Analysis report | P1.6.7.b Data Collected and analyzed. | P-Feb 06 A-Apr 06 | |

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| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | Cindy Wilkinson Jeff Adams | Curriculum revision | P1.6.7.c Based on curriculum modifications, training to began to be delivered to newly licensed relative/kinship providers. | P-Sep 06 A- | |
| Item 7: Permanency goal for child | X | Baseline 85.9% 5th quarter PRR results = 83.7% Goal 90.2% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement.) | | PRR V-12 The permanency plan was developed and it includes options for concurrent planning. | | | P-Dec 2006 A- |
| | | | P1.7.1 Ensure the frequency and timeliness of Family Support Team Meetings occurs per policy Kathryn Sapp Cindy Wilkinson | Circuit Self Assessment | P1.7.1.a Circuit Managers analyzed FST frequency data through circuit self assessment. | P-Aug 04 A-Aug 04 | |
| | | | | Corrective action plans | P1.7.1.b Initiated corrective action when data falls below goal set in strategic plan. | P-Feb 05 A-Apr 05 | |
| | | | | Quarterly data reports | P1.7.1.c Circuit Managers assisted by PET monitored frequency data | P & A-Ongoing quarterly | |
| | | | P1.7.2 Improve quality of Family Support Teams (FSTs) to ensure permanency goal is reviewed and established Kathryn Sapp | | P1.7.2.a Made ACTS systems changes to track permanency reviews separately from FSTs. | P-Aug 04 A-Aug 04 | |
| | | | | Policy developed | P1.7.2.b Policy written on ACTS systems changes and elements necessary for permanency reviews. | P-Sep 04 A-Aug 04 | |
| | | | | Policy disseminated | P1.7.2.c Policy disseminated to all staff. | P-Sep 04 A-Aug 04 | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | Cindy Wilkinson | Training agenda | P1.7.2.d Incorporated ACTS system changes and policy into BASIC and computer systems training. | P-Jan 05 A-Oct 04 | |
| | | | | | List of facilitators | P1.7.2.e Identified individuals who will serve as expert facilitators for more difficult FSTs. | P-Mar 05 A-Jul 05 | |
| | | | | | Protocol developed | P1.7.2.f Protocol developed for accessing expert facilitators. | P-Apr 05 A-May 05 | |
| | | | | | Training agenda | P1.7.2.g Trained expert facilitators. | P-Apr 05 R-Jan 06 A-Jan 06 | |
| | | | | | Memo disseminated | P1.7.2.h Memo describing expert facilitator access protocol and expert facilitator duties distributed to all staff. | P-Apr 05 R-Jan 06 A-Jan 06 | |
| | | | | P1.7. 3 Strengthen policy and practice relating to concurrent planning. | | P1.7.3.a Circuit Managers monitored outcomes through PRR tool. | P-Mar 05 A-Mar 05 | |
| | | | | | Improvement plans | P1.7.3.b Circuit Managers assisted by the PET to develop improvement plans. | P-May 05 A- Jul 05 | |
| | | | | Cindy Wilkinson | Training curriculum and revised child welfare manual | P1.7.3.c Integrated concurrent planning into Advanced FCOOHC In-Service Module training and child welfare manual. | P-May 06 A- | |
| | | | | P1.7.4 Increase collaboration with courts by providing cross training to judiciary, court staff, GALs and Children's Division staff on ASFA & Permanency hearings consistent with state and federal regulations. | Training curriculum | P1.7.4.a CD partnered with OSCA to develop training curriculum. | P-Jan 04 A-Jan 04 | |
| | | | | | | P1.7.4.b Developed draft plan to address logistics of proposed training. | P-Jan 04 A-Jan 04 | |
| | | | | | | P1.7.4.c Submitted draft to management of CD/OSCA. | P-Feb 04 A-Feb 04 | |
| | | | | | Contract developed | P1.7.4.d Developed a contract to provide cross training to judiciary, court staff, GAL's and CD staff. | P-Mar 04 A-Mar 04 | |
| | | | | | | P1.7.4.e Management approved draft. | P-Apr 04 A-Apr 04 | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | Cindy Wilkinson | Training agenda and curriculum | P1.7.4.f Training implemented by CD/OSCA to include concurrent planning training. | P-Jun 04 A- Sept 04 ongoing twice per year | |
| Item 8: Reunification, guardianship, or permanent placement with relatives. | | X | Reunification Nat'l Standard 76.2% or more MO FFY 2003 AFCARS Baseline 59.8% AFCARS Goal 62.2% (Based on Federal formula for goal setting). 5th quarter performance based on quarterly outcomes report = 69.1 % not AFCARS. AFCARS data not available. | | | | | P-Dec 2006 A- |
| | | | | P1.8.1 Address permanency and services needs of children in Legal Status 2, 3, and 4 Bonnie Washeck | Data reports Workgroup member list Case review results report Summary of meeting decisions | P1.8.1.a Prepared data on legal status 2, 3, and 4 children. P1.8.1.b Developed workgroup to examine legal status 2, 3, and 4 children (include in workgroup OSCA, CD, and metro sites). P1.8.1.c Conducted special case reviews on legal status 2, 3, and 4 cases. P1.8.1.d CD met with DLS and OSCA to determine legal obligations related to legal status 2, 3, and 4 children. | P-Dec 04 A-Feb 05 P-Feb 05 A-Apr 05 P-Apr 05 A-May 05 P-Apr 05 A-Aug 05 | |

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| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | | | P1.8.1.e Revise AFCARS population if necessary. | P-Apr 05 A-Jul 05 | |
| | | | | Protocol developed | P1.8.1.f Developed policy and protocol on worker duties related to legal status 2, 3, and 4 cases. | P-July 05 R-May 06 A- | |
| | | | | Comparison data | P1.8.1.g Caseload analysis (comparison to LS1) completed Legal status 2, 3, and 4. | P-Sept 05 A-Oct 05 | |
| | | | | PRR | P1.8.1.h Incorporated Legal status 2, 3, and 4 cases into established Peer Record Review process. | P-Oct 05 A-Oct 05 | |
| | | | P1.8.2 Establish procedures to access various service funding streams. Bonnie Washeck | | P1.8.2.a See S2.3.4.a. P1.8.2.b See S2.3.4.b. | | |
| | | | P1.8.3 Ensure frequency and timeliness of Family Support Team Meetings occurs per policy. Kathryn Sapp Cindy Wilkinson | | P1.8.3.a See P1.7.1.a P1.8.3.b See P1.7.1.b P1.8.3.c See P1.7.1.c | | |
| | | | P1.8.4 Improve quality of Family Support Teams to assure the review of permanency goal. Kathryn Sapp Cindy Wilkinson | | P1.8.4.a See P1.7.2.a P1.8.4.b See P1.7.2.b P1.8.4.c See P1.7.2.c P1.8.4.d See P1.7.2.d P1.8.4.e See P1.7.2.e P1.8.4.f See P1.7.2.f P1.8.4.g See P1.7.2.g P1.8.4.h See P1.7.2.h | | |
| | | | P1.8.5 Increase collaboration with courts by providing | | P1.8.5.a See P1.7.4.a P1.8.5.b See P1.7.4.b P1.8.5.c See P1.7.4.c | | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | cross training to new judiciary, court staff, Children's Division staff and GAL's on ASFA & Permanency hearings consistent with state and federal regulations Cindy Wilkinson | | P1.8.5.d See P1.7.4.d P1.8.5.e See P1.7.4.e P1.8.5.f See P1.7.4.f | | |
| | | | | P1.8.6 Increase collaboration with courts by providing cross training to judiciary, court staff, GAL's and Children's Division staff regarding roles and responsibilities. Cindy Wilkinson | Contract developed | P1.8.6.a Contract developed to provide training. | P-Apr 04 A-Apr 04 | |
| | | | | | Meeting minutes | P1.8.6.b Meeting held to discuss roles and responsibilities of CD and Juvenile Officers. | P-Dec 04 A-Oct 04 | |
| | | | | | Training agenda | P1.8.6.c Training provided to judiciary, court staff, GAL's and CD staff | P-May 05 A-May 05 | |
| | | | | 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. Jim Harrison | Meeting Minutes | P1.8.7.a Meeting held (with OSCA, CD, and DLS) to look at existing data and practices to identify problem areas and barrier to expeditious guardianship, including legislative and policy change. | P-Mar 05 A-Oct 04 | |
| | | | | | Proposal drafted | P1.8.7.b Proposal drafted for legislative change. | P-Mar 05 A-Oct 04 | |
| | | | | | | P1.8.7.c Written proposal reviewed by OSCA, CD and DLS. | P-Mar 05 A-Sept 04 | |
| | | | | | | P1.8.7.d Proposal finalized and presented to Department for legislative change. | P-Mar 05 A-Jan 05 | |
| | | | | P1.8.8 Determined policy remedy to be used in addition or in | | P1.8.8a Each circuit determined strategies with their court to expedite guardianship for children placed with | P-Oct 05 | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | lieu of any legislative change referred in P1.8.7. Jim Harrison Lesley Pettit | | relatives in CD custody. P1.8.8.b See P1.6.1a P1.8.8.c See P1.6.1b P1.8.8.d See P1.6.1c P1.8.8.e See P1.6.1d P1.8.8.f See P1.6.1e | A-Oct 05 | |
| Item 9: Adoption | X | | Adoption Nat'l Standard 32% or more MO FFY 2003 AFCARS Baseline 38.5% Goal achieved | | | | | P- Dec 2006 A- |
| | | | | P1.9.1 Termination of Parental Rights will be filed in a timely manner, except when compelling reasons are documented. Cindy Wilkinson Kathryn Sapp | Data report Circuit reports on outcomes of meetings with courts. Policy developed Policy disseminated PRR monitoring | P1.9.1.a.Examine TPR data from current information system. P1.9.1.b Initiated local circuit meetings with Judicial Courts to address local procedures for filing of TPR petitions. P1.9.1.c Developed policy for supervisor and staff responsibilities in documenting compelling reasons for not filing TPR. P1.9.1.d Policy disseminated to staff and supervisory oversight P1.9.1.e Incorporated into BASIC training. P1.9.1.f Quarterly monitoring by PRR. P1.9.1.g Incorporated into Advanced FCOOHC In-service module training. | P-Feb 05 A-Feb 05 P-Jun 05 A-Jul 05 P-Jun 05 A-Jul 05 P-Aug 05 R-Mar 06 A-May 06 P-Jun 05 R-Mar 06 A-Mar 06 P&A ongoing quarterly P-May 06 A- | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | P1.9.2 Increase number of resource families. Cindy Wilkinson | Performance based contracts and outcome reports | P1.9.2.a See P1.6.5.a P1.9.2.b See P1.6.5.b P1.9.2.c See P1.6.5.c P1.9.2.d See P1.6.5.d P1.9.2.e See P1.6.5.e P1.9.2.f See P1.6.5.f P1.9.2.g See P1.6.5.g P1.9.2.h See P1.6.5.h P1.9.2.i See P1.6.5.i | | |
| | | | | P1.9.3 Increase capacity to conduct home studies and finalize adoptions. Cindy Wilkinson | Request for Proposal | P1.9.3.a RFP written for performance based case management contracts | P-Sep 04 A-Sep 04 | |
| | | | | | Workload staffing analysis | P1.9.3.b Conducted a workload staffing analysis to determine staffing need for completing home studies and finalized adoptions. | P-Mar 05 A-Mar 05 | |
| | | | | | Award letters | P1.9.3.c Awarded performance based case management contracts | P-Mar 05 A-Jun 05 | |
| | | | | | Staffing report | P1.9.3.d Committed additional staff (private or public) as needed per available resources. | P-Jul 05 A-Aug 05 | |
| | | | | P1.9.4 Improve access to legal representation for CD staff Jim Harrison | | P1.9.4.a DLS identified plan to fill vacant FTE's or contract for attorneys. | P-Jul 04 A-Jul 04 | |
| | | | | | | P1.9.4.b Additional attorneys hired and placed. | P-Sep 04 A-Sep 04 | |
| | | | | | Establish workgroup | P1.9.4.c CD/DLS established a work group to develop a protocol for CD staff to access DLS attorneys or contractors. | P-Mar 05 A-Apr 05 | |
| | | | | | Develop draft protocol | P1.9.4.d Draft Protocol developed. | P-Apr 05 A-Apr 05 | |
| | | | | | | P1.9.4.e CD legal representation at court hearings monitored by CD/DLS joint committee for improvement. | P-July 05 Ongoing A-Jul 05 | |
| | | | | | Draft joint memo | P1.9.4.f Draft joint memo with DLS to assist CD staff in developing a clearer understanding on how to access legal services. | P- Jul 05 A-Jul 05 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | Memo disseminated | P1.9.4.g Memo and Protocol disseminated to staff and adopted. | P-Oct 05 A-Sep 05 | |
| Item 10: Other planned living arrangement | | X | Baseline 63.6% 5th quarter results for PRR V-22 = 51.1% Goal = 66.4% The goal has been achieved for PRR V-21. | | PRR V-22 Youth 16 or older have an ILP plan documented in the case record (CS-1 Att.) PRR V-21 Youth 16 or over, are participating in or have completed ILP classes | | | P-Dec 2006 A- |
| | | | | P1.10.1 Increase number and quality of resource families for older youth Cindy Wilkinson | | P1.10.1.a See P1.6.5.a P1.10.1.b See P1.6.5.b P1.10.1.c See P1.6.5.c P1.10.1.d See P1.6.5.d P1.10.1.e See P1.6.5.e | | |
| | | | | | Discuss recruitment activities | P1.10.1.f Met with IL Specialists to discuss strategies on recruitment activities for locating homes for older youth. | P-Mar 05 A-Mar 05 | |
| | | | | | Recruitment activities report | P1.10.1.g Met with IL Specialists to report on community recruitment activities. | P-Jun 05 A-Jun 05 | |
| | | | | | | P1.10.1.h Incorporated Ready, Set, Fly curriculum and Chafee video into foster parent training. | P-Sep 05 A-Sep 04 | |
| | | | | P1.10.2 Increase awareness of Chafee program services to staff and community members Cindy Wilkinson | Distribute ETV material | P.1.10.2.a Increased awareness of Education and Training Voucher Program through distributing information material to secondary and higher education programs | P-Jan 04 A-Jan 04 | |
| | | | | | Youth conference | P1.10.2.b State Youth Advisory Board (SYAB) designed and hosted annual | P-July 04 annually | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | | youth empowerment conference | A-July 04 Annually | |
| | | | | | Provide information meetings | P1.10.2.c ILP staff provided Chafee informational meetings, seminars, workshops to CD staff, foster parents, juvenile court, and youth serving agencies. | P- Mar 04 Ongoing A-Mar 04 Ongoing | |
| | | | | | Write and disseminated memo | P1.10.2.d CD memo written and disseminated to staff involving ILP staff in the case planning process for older youth and referring age appropriate youth for Chafee services. | P-May 05 A-Sep 05 | |
| | | | | | Distributed ETV poster | P1.10.2.e Designed and distributed ETV poster to schools and youth serving agencies | P-May 05 A-Aug 05 | |
| | | | | P1.10.3 Increase program accessibility to provide life skills training services for older youth Cindy Wilkinson | Implement Pre-ILP Training curriculum | P1.10.3.a Designed and Implemented Pre-ILP Life Skills training curriculum for youth 14-15. | P-June 04 A- June 04 | |
| | | | | | Youth conference | P1.10.3.b State Youth Advisory Board (SYAB) designed and hosted annual youth empowerment conference | P-July 04 annually A-July 04 Annually | |
| | | | | | Consult with SYAB | P1.10.3.c Consulted with SYAB members on needs of older youth. | P-Dec 04 Ongoing A- Dec 04 Ongoing | |
| | | | | | Convene workgroup and address recommendations | P1.10.3.d Convened workgroup to address recommendations from Chafee stakeholder and transitional living meetings on designating positions and training plan for adolescent workers | P-Feb 05 A-Feb 05 | |
| | | | | | Provide training to selected staff in designed areas | P1.10.3.e Training provided in designate areas to selected staff interested in adolescent worker positions | P-Feb 05 A-Feb 05 | |
| | | | | | CD memo | P1.10.3.f CD memo written and | P-May 05 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | | | disseminated to staff involving ILP staff in the case planning process for older youth and referring age appropriate youth for Chafee services | A-Sep 05 | |
| Permanency Outcome P2: | | | | | | | |
| Item 11: Proximity of foster care placement | X | | | | | | |
| Item 12: Placement with siblings | | X | Baseline 85.6 5th quarter PRR results = 84.1% Goal 89.9% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement). | Monitored through Peer Record Review Question V-4: Siblings are placed together or there is ongoing visitation | | | P-Dec 2006 A- |
| | | | P2.12.1 Increase the number of siblings placed together Kathryn Sapp | Policy developed | P2.12.1.a Policy developed for FST to be required prior to separating siblings at any time during placement episode. | P-Aug 04 | |
| | | | | Policy enhancement | | P2.12.1.b Enhanced policy addressing the continual need for maintaining sibling relationship. | P-Aug 04 |
| | | | | PRR results & Improvement plans | P2.12.1.c Circuit Managers monitored quarterly PRR results and improvement plans developed. | P-Feb 05 Ongoing Quarterly A-Ongoing | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | Recommendations from workgroup | P2.12.1.d Visitation Workgroup presented recommendations on preserving sibling ties. | P-Nov 05 A-Nov 05 | |
| | | | | | Draft policy | P2.12.1.e Developed policy requiring a FST prior to separating siblings. | P-Apr 06 A-Apr 06 | |
| | | | | | Policy disseminated | P2.12.1.f Policy disseminated to staff on FST | P-May 06 A- | |
| | | | | | Supervisory sibling case review | P2.12.1.g Developed supervisory sibling case review process to review cases after siblings are separated after 30 days. | P-May 06 A- | |
| | | | | P2.12.2 Develop an ongoing training module regarding sibling placements for staff, foster parents, and juvenile court staff. | | P2.12.2.a Emphasis on the importance of sibling bonds, long term effects of separation, and importance of visitation, parentified child and sibling rivalries incorporated into foster parent training. | P-Nov 05 A-Dec 05 | |
| | | | | Jeff Adams | | P2.12.2.b See P1.7.4.a | | |
| | | | | | | P2.12.2.c See P1.7.4.b | | |
| | | | | | | P2.12.2.d See P1.7.4.c | | |
| | | | | | | P2.12.2.e See P1.7.4.d | | |
| | | | | | | P2.12.2.f See P1.7.4.e | | |
| | | | | | | P2.12.2.g See P1.7.4.f | | |
| | | | | | Training module | P2.12.2.h Emphasis on the importance of sibling bonds, long term effects of separation, and importance of visitation, parentified child and sibling rivalries incorporated into BASIC and advanced FCOOHC In-Service training module. | P-May 06 A- | |
| | | | | P2.12.3 Increase capacity for resource families that accept sibling groups. | | P2.12.3.a See P1.6.5.a | | |
| | | | | | | P2.12.3.b See P1.6.5.b | | |
| | | | | | | P2.12.3.c See P1.6.5.c | | |
| | | | | | | P2.12.3.d See P1.6.5.d | | |
| | | | | | | P2.12.3.e See P1.6.5.e | | |
| | | | | | | P2.12.3.f See P1.6.5.f | | |
| | | | | | | P2.12.3.g See P1.6.5.g | | |
| | | | | Cindy Wilkinson | | | | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | | | P2.12.3.h See P1.6.5.h P2.12.3.i See P1.6.5.i | | |
| Item 13: Visiting with parents and siblings in foster care. | X | Baseline 89.4 % 5th quarter PRR results = 85.0% Goal 90.3% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 1% of the average to measure improvement). Baseline 85.6% 5th quarter PRR results = 84.1% Goal 89.9% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure Improvement). | | Parents' visits monitored through PRR Question V-13. There is a current visitation plan in place to facilitate reunification. Sibling visits monitored through Peer Record Review question V-4: Siblings are placed together or there is ongoing visitation. | | | P-Dec 2006 A- |
| | | | P2.13.1 Increase frequency and quality of parent/child and | Recommendations from workgroup | P2.13.1.a Visitation Workgroup presented recommendations on preserving sibling ties. | P-Nov 05 A-Nov 05 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | sibling visits. Cindy Wilkinson | Policy revision | P2.13.1.b Revised policy to improve qualitative and quantitative visitation plan requirements. | P-Apr 06 A-Apr 06 | |
| | | | | | P2.13.1.c Incorporated policy revision into BASIC training and supervisory oversight provided to existing staff. | P-Jul 06 A- | |
| | | | | PRR | P2.13.1.d Incorporated revisions into PRR tool. | R-Jul 06 A- | |
| | | | | Quarterly data reports | P2.13.1.e Circuit Managers monitor data regarding frequency of parent/child/sibling visits. | P-Oct 06 A- | |
| | | | | Practice improvement plans developed | P2.13.1.f Circuit Managers assisted by the PET teams developed practice improvement plans using all available data for guidance. | P-Oct 06 A- | |
| Item 14: Preserving connections | | X | Baseline 25.9% 5th quarter performance = 27.4% Goal 27.2% Baseline 83% | Relative Placement CD-Outcomes #17. Increase the number of children placed with relative providers (LS 1-4) Previous data only captured LS 1 children. | | | P-Dec 2006 A- |

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| Program Improvement Implementation | | | | | | | | |
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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | <p>5th quarter results for PRR = 83.4 %</p> <p>Goal 87.2% Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement.</p> | | PRR V-1 Consideration was given to relatives or kin for placement. | | | |
| | | | | P2.14.1 Increase emphasis on preserving familial and community connections for children in out of home care. Kathryn Sapp | Evaluation report | P2.14.1.a Evaluated Family-to-Family program regarding applicability for statewide implementation. | P-May 05 A-Jan 06 | |
| | | | | | | P2.14.1.b Submitted evaluation recommendations to administration. | P-July 05 A-Jan 06 | |
| | | | | | | P2.14.1.c Based on results of Family to Family evaluation and review of other state's best practices determined statewide applicability. | P-Aug 05 A-Jan 06 | |
| | | | | | State plan developed | P2.14.1.d Develop state plan to address preserving connections. | P-Oct 05 A-Apr 06 | |
| | | | | P2.14.2 Improve diligent search for relatives/missing parents Bonnie Washeck | | P2.14.2.a See P1.6.2.a P2.14.2.b See P1.6.2.b P2.14.2.c See P1.6.2.c P2.14.2.d See P1.6.2.d | | |
| | | | | P2.14.3 Revise ICWA policy Cindy Wilkinson Kathryn Sapp | Policy revision | P2.14.3.a Revised ICWA policy to reflect best practice standards. | P-Aug 04 A-Aug 04 | |
| | | | | | CPS-1 CD-14 | P2.14.3.b ICWA questions incorporated into intake (CPS-1) and family assessment (CD-14) tools. | P-May 05 A-Apr 05 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | | Policy disseminated | P2.14.3.c Newly revised intake & assessment disseminated to all CD staff. | P-Aug 05 | |
| | | | | PRR | P2.14.3.d Add ICWA question to Peer Record Review tool. | A-Dec 05 | |
| | | | | PRR quarterly data reports | P2.14.3.e Establish a baseline for ICWA for Peer Record. | P-Sept 05 A-Mar 05 | |
| Item 15: Relative placement | | X | Baseline 25.9% 5th quarter | Relative Placement monitored | | P-Dec 2006 A- | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | <p>Outcome Reports results = 27.4%*</p> <p>Goal achieved</p> <p>Goal 27.2% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement).</p> <p>Baseline 83.0%</p> <p>5th quarter PRR results = 83.4%</p> <p>Goal 87.2% (Goal established is calculated by taking the average of 8 quarters performance adding 5% of the average to measure improvement).</p> | | <p>through the number of children placed with relative provider in legal status 1-4</p> <p>Monitored through Peer Record Review question V-1: Consideration was given to relatives or kin for placement</p> | | | |
| | | | P2.15.1 Increase system capacity to accurately track placement kinship vendor types. | | P2.15.1.a See P1.6.1.a | | |
| | | | | | P2.15.1.b See P1.6.1.b | | |
| | | | | | P2.15.1.c See P1.6.1.c | | |
| | | | | | P2.15.1.d See P1.6.1.d | | |
| | | | | | P2.15.1.e See P1.6.1.e | | |
| | | | Lesley Pettit | | | | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | P2.15.2 Improve diligent search for relatives/missing parents. Cindy Wilkinson | | P2.15.2.a See P1.6.2.a P2.15.2.b See P1.6.2.b P2.15.2.c See P1.6.2.c P2.15.2.d See P1.6.2.d | | |
| | | | P2.15.3 Evaluate support and training provided for relative/kinship resource families Cindy Wilkinson Jeff Adams | | P2.15.3.a See P1.6.7.a P2.15.3.b See P1.6.7.b P2.15.3.c See P1.6.7.c | | |
| Item 16: Relationship of child in care with parents | X | Baseline 91.0% 5th quarter PRR results = 89.8% Goal 91.9% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 1% of the average to measure improvement). | | Parent Visits monitored through Peer Record Review question V-3: The child is placed in close proximity to his/her family. | | | P-Dec 2006 A- |
| | | | P2.16.1 Improve diligent search for non-custodial parent. Bonnie Washeck | | P2.16.1.a See P1.6.2.a P2.16.1.b See P1.6.2.b P2.16.1.c See P1.6.2.c P2.16.1.d See P1.6.2.d | | |
| | | | P2.16.2 Improve engagement of non-custodial parents in | PRR Outcomes | P16.16.2.a See S2.3.2.a P16.16.2.b See S2.3.2.b P16.16.2.c See S2.3.2.c | | |

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| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | 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. Kathryn Sapp | | P16.16.2.d See S2.3.2.d P16.16.2.e See S2.3.2.e P16.16.2.f See S2.3.2.f | | |
| Well Being Outcome 1 Families have enhanced capacity to provide for children's needs | | | | | | | |
| Item 17: Needs and services of child, parents, foster parents | X | Baseline 89.4% 5th quarter PRR results = 88.5% Goal 90.3% | | PRR IV-13 Services being provided to the family are adequate to meet their needs as identified in the assessment. Previously PRR III-3 and III-10 were used. | | | P-Dec 2006 A- |
| | | | WB1.17.1 Improve family assessment and | | WB1.17.1.a See S2.3.1.a WB1.17.1.b See S2.3.1.b | | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | case plan tools to better link service provision to the needs of the bio family identified in the initial and ongoing assessments. Kathryn Sapp | | WB1.17.1.c See S2.3.1.c WB1.17.1.d See S2.3.1.d WB1.17.1.e See S2.3.1.e WB1.17.1.f See S2.3.1.f WB1.17.1.g See S2.3.1.g WB1.17.1.h See S2.3.1.h | | |
| | | | | Per 4 th quarter renegotiation, PRR IV-15 has been removed. | | | |
| | | | WB1.17.2 Strengthen workers 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. Kathryn Sapp | | WB1.17.2.a See S2.3.2.a WB1.17.2.b See S2.3.2.b WB1.17.2.c See S2.3.2.c WB1.17.2.d See S2.3.2.d WB1.17.2.e See S2.3.2.e WB1.17.2.f See S2.3.2.f | | |
| | | | 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. | | WB1.17.3.a See S1.2.2.a WB1.17.3.b See S1.2.2.b WB1.17.3.c See S1.2.2.c WB1.17.3.d See S1.2.2.d WB1.17.3.e See S1.2.2.e WB1.17.3.f See S1.2.2.f WB1.17.3.g See S1.2.2.g WB1.17.3.h See S1.2.2.h WB1.17.3.i See S1.2.2.i | | |

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| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | Cindy Wilkinson | | WB1.17.3.j See S1.2.2.j WB1.17.3.k See S1.2.2.k WB1.17.3.l See S1.2.2.l | | |
| Item 18: Child and family involvement in case planning. | X | Baseline 74.1% 5th quarter PRR results = 73.7 % Goal 77.8% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement). | | Monitored through Peer Record Review question IV-8: The family participated in the development of and signed the service plan. | | | P-Dec 2006 A- |
| | | | WB1.18.1 Maximize parental/family participation in Family Support Team Meetings. Bonnie Washeck | | WB1.18.1.a See S2.3.2 a WB1.18.1.b See S2.3.2 b WB1.18.1.c See S2.3.2 c WB1.18.1.d See S2.3.2 d WB1.18.1.e See S2.3.2 e WB1.18.1.f See S2.3.2 f | | |
| | | | | Protocol established | WB1.18.1.g Established a protocol for accessing division staff outside of regular working hours. | P-Aug 05 A-Aug 05 | |
| | | | WB1.18.2 Improve the quality of Family Support Team Meetings. Kathryn Sapp Cindy Wilkinson | | WB1.18.2.a See P1.7.2a WB1.18.2.b See P1.7.2b WB1.18.2.c See P1.7.2c WB1.18.2.d See P1.7.2d WB1.18.2.e See P1.7.2e WB1.18.2.f See P1.7.2f WB1.18.2.g See P1.7.2g WB1.18.2.h See P1.7.2h | | |
| | | | WB1.18.3 Review and further develop a | | WB1.18.3.a Collected parent handbooks used by various circuits. | P-Aug 05 A-Aug 05 | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | handbook, to be distributed at the point of removal, to educate parents on their rights and responsibilities, court procedures, etc. Cindy Wilkinson | Workgroup list | WB1.18.3.b Convened a work group to evaluate parent handbooks. | P-Oct 05 A-Sep 05 | |
| | | | | | Parent handbook | WB1.18.3.c Developed a universal parent handbook. | P-Jan 06 A-Jan 06 | |
| | | | | | Survey results | WB1.18.3.d Solicited consumer feedback on parent handbook | P-Apr 06 R-Jun 06 A- | |
| | | | | | Policy developed | WB1.18.3.e Developed policy on use of parent handbook. | P-Jul 06 A- | |
| | | | | | Policy disseminated | WB1.18.3.f Policy distributed to all staff and supervisory oversight. | P-Sept 06 A- | |
| | | | | | Training curriculum | WB1.18.3.g Policy Incorporated into BASIC training | P-Oct 06 A- | |
| Item 19: Worker visits with child – improve quantity and quality | | X | The goal has been achieved for PRR V-16. | | Foster Care cases monitored through Peer Record Review question V-16: The worker visits the child twice every month. | | | |
| | | | | WB1.19.1 Develop policy addressing the quality of visits to incorporate case planning, service delivery and goal attainment. Bonnie Washeck | Team appointments | WB1.19.1a Appointed visitation policy and practice team. | P-Jan 05 A-Feb 05 | |
| | | | | | Convene meeting | WB1.19.1.b Convened first policy and practice team meeting. | P-Feb 05 A-May 05 | |
| | | | | | Workgroup recommendations | WB1.19.1c Visitation Workgroup presented recommendations on how visitation is critical in timely reunification to executive staff. | P-Nov 05 A-Nov 05 | |
| | | | | | Recommendations reviewed | WB1.19.1.d Recommendation reviewed by executive staff. | P-Jan 06 A-Jan 06 | |
| | | | | | Policy draft | WB1.19.1.e Policy drafted. | P-Apr 06 A-Apr 06 | |
| | | | | | Policy disseminated | WB1.19.1.f Policy disseminated to staff | P- May 06 A- | |
| | | | | | | WB1.19.1.g Training began on policy enhancements staff and foster parents. | P-Jul 06 A- | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | | WB1.19.1.h Utilize Practice Enhancement Teams (PET) to support protocols. | P-Jul 06 A- | |
| | | | WB1.19.2 Increase policy compliance for frequency of worker visits for intact and out-of-home cases. Cindy Wilkinson Kathryn Sapp | Quarterly workload report | WB1.19.2.a Achieved progress in caseload equalization by developing quarterly circuit workload reports. | P-Aug 05 quarterly ongoing A-Aug 05 | | |
| | | | | PRR | WB1.19.2.b Circuit Managers monitored the frequency of worker visits through the PRR. | P-Aug 05 A-Aug 05 | | |
| | | | | Practice Improvement plans | WB1.19.2.c Circuit Managers assisted by PET to develop practice improvement plans. | P-Sep 05 A-Sep 05 | | |
| | | | WB1.19.3 Tracking system to track worker visits (date/site). Jim Harrison | | WB1.19.3.a Reviewed the FCS section of the Family Satisfaction survey on monthly worker visits with the family. | P-Feb 06 A-Feb 06 | | |
| | | | | | WB1.19.3.b Reviewed the youth portion of the Family Satisfaction survey on bi-monthly worker visits with the out-of-home care child. | P-Feb 06 A-Feb 06 | | |
| | | | | | WB1.19.3.c PET teams annually analyzed family satisfaction survey data | P-Apr 06 A-Apr 06 | | |
| | | | | | WB1.19.3.d Worked with ITSD staff to include worker visit information (with child, parents, foster parents) and sibling visits in the Outcome Reports when converted to SACWIS. | P-May 06 A- | | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| | A | N/A | | | | | | |
| Item 20: Worker Visit with parent(s). | | X | Baseline 85.3% 5 th quarter PRR results = 85.1% Goal 89.5% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement). | | Intact and Foster Care Cases monitored through Peer Record Review question IV-14: The worker visits family (caretakers) at least one time per month. | | | P-Dec 2006 A- |
| | | | | WB1.20.1 Strengthen worker relationships with biological or adoptive parents. Bonnie Washeck | Protocols established | WB1.20.1.a Protocols established in WB1.19.1g included in all resource parent training | P-May 05 R-Jul 06 A- | |
| | | | | | Revise PRR | WB1.20.1.b Revised PRR to reflect collateral contacts required per family risk assessment/reassessment | P-Jun 05 A-Jun 05 | |
| | | | | | | WB1.20.1.c See S2.3.2.a | | |
| | | | | | | WB1.20.1.d See S2.3.2.b | | |
| | | | | | | WB1.20.1.e See S.2.3.2.c | | |
| | | | | | | WB1.20.1.f See S.2.3.2.d | | |
| | | | | | | WB1.20.1.g See S.2.3.2.e | | |
| | | | | | | WB1.20.1.h See S2.3.2.f | | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | WB1.20.2 – Refer to: WB1.19.1, WB1.19.2 and WB1.19.3 a. WB1.19.1 Develop policy addressing the quality of visits to incorporate case planning, service delivery and goal attainment. b. WB1.19.2 Increase policy compliance for frequency of worker visits for intact and out-of-home cases. c. WB1.19.3 Tracking system to track worker visits (date/site). | | WB1.20.2.a See WB1.19.1.a-f WB1.20.2.b See WB1.19.2 a-c WB1.20.2.c See WB1.19.3 a-b | | |
| Well Being Outcome 2 | | | | | | | |
| Children receive services to meet their educational needs | | | | | | | |
| Item 21: Children receive appropriate services to meet their educational needs | X | Baseline 95.6% 5th quarter PRR results = 94.5% Goal 96.6% (Goal established is calculated by taking the average of 8 quarters performance) | | PRR V-18 The child is at grade level and receiving appropriate educational services. | | | P-Dec 2006 A- |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | in 2003 and 2004 and adding 1% of the average to measure improvement.) | | | | | |
| | | | WB2.21.1 Improve working relationship among Children's Division, Department of Elementary and Secondary Education (DESE) and local school districts. Kathryn Sapp | WB2.21.1 Improve working relationship among Children's Division, Department of Elementary and Secondary Education (DESE) and local school districts. | Protocol developed | WB.2.21.1.a Protocol developed regarding inclusion of educational personnel in FST's. | P-Mar 05 | |
| | | | | | Education liaisons | WB2.21.1.b Designated an education liaison at the state level. | A-Apr 05 | |
| | | | | | Circuit Self Assessment | WB2.21.1.c Local level barriers identified regarding working with schools and educational disruptions of children in foster care. | P-May 05 A-May 05 | |
| | | | | | Written local plans | WB2.21.1.d Developed a plan to alleviate barriers and address educational disruptions of children in foster care as applicable. | P-May 05 A-Jul 05 | |
| | | | | | Written State plan | WB2.21.1.e Children's Division Administration partnered with DESE to address identified barriers at State level. | P-May 05 A-Jul 05 | |
| | | | WB2.21.2 Improve the flow of educational records and reports when children transfer schools. Kathryn Sapp Cindy Wilkinson | WB2.21.2 Improve the flow of educational records and reports when children transfer schools. | Protocols developed | WB2.21.2.a Local protocols developed for alternative care children regarding permission of custodian to access records needed for enrollment. | P-Jun 05 A-Jun 05 | |
| | | | | | Residential Facility contracts | WB2.21.2.b. Incorporated accountability measures for transfer of educational records into Residential Facility contracts. | P-Jun 05 R-Jan 06 A-Feb 06 | |
| | | | WB2.21.3 Decrease the incidence of educational neglect, truancy and suspension of children in care. | | | WB2.21.3.a Consult with National Resource Centers and other national education resources regarding early identification of educational neglect, truancy and suspension of children in care. | P-Apr 05 A-Apr 05 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | Cindy Wilkinson Kathryn Sapp | Revised CD-14 and CS-1 | WB2.21.3.b Identification of risk factors for educational neglect, truancy or school suspension incorporated into the CD-14 and CS-1. | P-Jul 05 A-Jul 05 | |
| | | | | | Distribute youth training video | WB2.21.4.c Distribute Youth Training Video for teacher in-service training. | P-Sep 05 A-Nov 05 | |
| | | | | | Protocol developed | WB2.21.3.d Protocol developed for accessing early interventions for students at risk for educational neglect, truancy and suspension. | P-Oct 05 A-Nov 05 | |
| | | | | | Protocol developed | WB2.21.3.e Protocol developed for children expelled due to the Safe School Act. | P-Oct 05 A-Nov 05 | |
| | | | | | Protocol disseminated | WB2.21.3.f Protocols distributed to staff and shared with local school districts. | P-Nov 05 A-Feb 06 | |
| | | | | | | WB2.21.3.g Protocols incorporated into BASIC and foster parent training. | P-Dec 05 A-Feb 06 | |
| | | | | WB2.21.4 Decrease the incidence of educational neglect, truancy and suspension of children for intact families. Kathryn Sapp | | WB2.21.4.a Consulted with National Resource Center on Child Maltreatment and other national education resources regarding early identification of educational neglect, truancy and suspension of intact families. | P-Apr 05 A- Apr 05 | |
| | | | | | CD-14 revision | WB2.21.4.b Identification of risk factors for educational neglect, truancy or school suspension incorporated into the CD-14. | P-July 05 A-Jul 05 | |
| | | | | | Distribute youth training video | WB2.21.4.c Distribute Youth Training Video for teacher in-service training. | P-Sep 05 A-Nov 05 | |
| | | | | | Protocol developed | WB2.21.4.d Protocol developed for accessing early interventions for students at risk for educational neglect, truancy and suspension. | P-Oct 05 A-Nov 05 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | Protocol developed | WB2.21.4.e Protocol developed for children expelled due to the Safe School Act. | P-Oct 05 | |
| | | | | | Protocols disseminated | WB2.21.4.f Protocols distributed. | A-Nov 05 P-Nov 05 A-Feb 06 | |
| | | | | | | WB2.21.4.g Protocols incorporated into BASIC training. | P-Dec 05 A-Feb 06 | |
| | | | | | | | | |
| | | X | Baseline 96.9% 5th quarter PRR results = 95.8% Goal 97.8% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 1% of the average to measure improvement. | | PRR V-17: The physical needs of the child are being met. | | | P-Dec 2006 A- |
| | | | | WB3.22.1 Increase ability of Children's Division staff and families to access available dental resources. | Circuit Self Assessment | WB3.22.1.a Circuits identified available local dental resources. | P-Mar 05 A-Aug 05 | |
| | | | | | Dental coordinator list | WB3.22.1.b Dental coordinator assigned to each region (local level) to identify barriers and facilitate access to dental providers. | P-May 05 A-Jul 05 | |
| | | | | Bonnie Washeck | Notification letter | WB3.22.1.c Notified dental providers of regional dental coordinators. | P-Aug 05 A-Aug 05 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | | Written plan | WB3.22.1.d In partnership with Division of Medical Services (DMS) assessed and developed plan to reduce administrative burden on Medicaid providers. | P-Aug 05 A-Aug 05 | |
| | | | | Assessment report | WB3.22.1.e Completed assessment regarding Dental Van program expansion. | P-Aug 05 A-Nov 05 | |
| | | | WB3.22.2 Increase capacity of staff to assess medical needs of children in intact families. Bonnie Washeck | CD-14 revision | WB3.22.2.a Revised CD-14 to include assessment of medical needs of children in intact families. | P-July 05 A-Apr 05 | |
| | | | | Policy disseminated | WB3.22.2.b Issued revised form and policy. | P-Sep 05 R-Dec 05 A-Dec 05 | |
| | | | | Training curriculum | WB3.22.c Existing staff trained in Assessment and Service Planning using CD-14 as tool statewide. | P-Oct 05 R-Jan 06 A-Feb 06 | |
| | | | | | WB3.22.2.d Integrated CD-14 into Advanced Family-Centered In-service training module. | P-Jan 06 A-Feb 06 | |
| Item 23: Mental health needs of the child | | X | Baseline 96.4% 5 th quarter PRR results = 95.6% Goal 97.3% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 1% of the average to measure improvement. | PRR V-19: The mental health needs of the child are being met. | | | P-Dec 2006 A- |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | WB3.23.1 Increase the ability of Children’s Division staff and families to access available mental health resources. Jim Harrison | Circuit Self Assessment | WB3.23.1.a Available mental health resources identified through Circuit Self Assessment. | P-Aug 04 A-Aug 04 | |
| | | | | Mental Health Coordinator list | WB3.23.1.b Five Regional Mental Health Coordinators designated. | P-Jan 05 A-Jan 05 | |
| | | | | Written plan | WB3.23.1.c See S2.3.5 WB3.23.1.d Mental Health Coordinators convened teams to identify local barriers, develop a plan to alleviate barriers and create partnerships to improve service delivery. | P-May 05 A-May 05 | |
| | | | | Plan developed | WB3.23.1.e In partnership with Division of Medical Services (DMS) assessed and developed plan to reduce administrative burden on Medicaid providers. | P-Aug 05 A-Aug 05 | |
| | | | | | WB3.23.2.a See P1.6.3.a | | |
| | | | WB.3.23.2 Increase awareness of staff and foster parents regarding attachment and mental health issues. Cindy Wilkinson | | WB3.23.2.b Increased the number of staff and foster parents trained on Working with the Explosive Child (See Training Matrix). | P & A- Ongoing semi-annually | |
| | | | | | WB3.23.2.c Increased the number of staff and foster parents trained on Grief and Loss (See Training Matrix). | P-Sep 04 A-Sep 04 ongoing semi-annual | |
| | | | | Curriculum developed | WB3.23.2.d Developed Reactive Attachment Disorder curriculum. | P-Mar 05 A-Mar 05 | |
| | | | | Training agenda | WB3.23.2.e Incorporated attachment issues training into on-going training. | P-Sep 06 A- | |
| | | | WB3.23.3 Increase capacity of staff to assess mental health needs of children in | CD-14 revision | WB3.23.3.a Incorporated assessment of mental health needs of children in intact families in CD-14 revision (See S2.3.1.b-h). | P-July 05 A-Apr 05 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | intact families. Kathryn Sapp | Practice improvement plans | WB3.23.3.b Circuit Managers evaluated SCRT results and developed practice improvement strategies as needed.(See S2.3.3 a-f) | P-Apr 06 ongoing quarterly R-Nov 06 A- | |
| Systemic Factors | | | | | | | |
| Item 24: System can identify the status, demographic characteristics, location and goals of children in foster care. | X | | | | | | |
| 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. | | X | Baseline 74.1% 5 th quarter PRR results = 73.7% Goal 77.8% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement. | Monitored through Peer Record Review question IV-8. The family participated in the development and signed the service plan. Previous measurement PRR IV-15 | | | |
| | | | 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 | | 25.1.a See S2.3.1.a 25.1.b See S2.3.1.b 25.1.c See S2.3.1.c 25.1.d See S2.3.1.d 25.1.e See S2.3.1.e 25.1.f See S2.3.1.f 25.1.g See S2.3.1.g | | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | assessments. Kathryn Sapp | | 25.1.h See S2.3.1.h | | |
| | | | 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. Kathryn Sapp | | 25.2.a See S2.3.2.a | | |
| | | | | | 25.2.b See S2.3.2.b | | |
| | | | | | 25.2.c See S2.3.2.c | | |
| | | | | | 25.2.d See S2.3.2.d | | |
| | | | | | 25.2.e See S2.3.2.e | | |
| | | | | | 25.2.f See S2.3.2.f | | |
| | | | 25.3 Improve supervisory capacity to monitor practice linking the assessment with the overall plan. Bonnie Washeck | | 25.3.a See S2.3.3.a | | |
| | | | | | 25.3.b See S2.3.3.b | | |
| | | | | | 25.3.c See S2.3.3.c | | |
| | | | | | 25.3.d See S2.3.3.d | | |
| | | | | | 25.3.e See S2.3.3.e | | |
| | | | | | 25.3.f See S2.3.3.f | | |
| | | | | | 25.3.g See S2.3.3.g | | |
| | | | | | 25.3.h See S2.3.3.h | | |
| | | | 25.4 Maximize parental/family involvement in Family Support Team Meetings. Bonnie Washeck | | 25.4.a See P1.6.2.a | | |
| | | | | | 25.4.b See P1.6.2.b | | |
| | | | | | 25.4.c See P1.6.2.c | | |
| | | | | | 25.4.d See P1.6.2.d | | |
| | | | | | 25.4.e See S2.3.2 a | | |
| | | | | | 25.4.f See S2.3.2 b | | |
| | | | | | 25.4.g See S2.3.2 c | | |
| | | | | | 25.4.h See S2.3.2 d | | |
| | | | | | 25.4.i See S2.3.2 e | | |
| | | | | | 25.4.j See S2.3.2 f | | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | 25.5 Improve staff facilitation skills for Family Support Team Meetings. | Training curriculum | 25.5.a Began offering 25 supplemental FST trainings to selected staff throughout state. | P-Feb 05 | |
| | | | | Jeff Adams | | 25.5.b Enhanced/Improved FST skill application for BASIC. | A-Feb 05 | |
| | | | | | | 25.5.c Advanced FST skill application integrated into advanced Family-Centered Out-of-Home Service In-Service module. | P-May 06 A- | |
| | | | | | | 25.5.d Advanced FST skill application integrated into Advanced Family-Centered Service In-Service module. | P-Sep 06 A- | |
| Item 26: Process for 6-month case reviews | | X | Baseline 62.8% (derived from average of 8 quarters in FY 2003 and 2004) 5 th Quarter performance = 57.8% Goal 69% (Goal established through method described in Item 15 using Outcomes Report data). | | Monitored through CD Outcomes Report Outcome #12: Children with Timely Completion of Permanency Planning Review within 30 Days and 6 Months. | | | P-Dec 2006 A- |
| | | | | 26.1 Revised current policy to clarify an Administrative Review and requirements | Draft policy | 26.1.a Developed draft policy clarifying administrative review requirements and procedures. | P-Feb 05 A-Jul 04 | |
| | | | | Susan Savage | | 26.1.b Draft policy sent to policy review team and management. | P-Mar 05 A-Aug 04 | |
| | | | | | Policy revision | 26.1.c Feedback received and revisions made. | P-Apr 05 A-Aug 04 | |
| | | | | | Policy disseminated | 26.1.d New policy distributed to CD staff. | P-Jun 05 A-Aug 04 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | 26.2 Recruit 3 rd party participants for Administrative Reviews Cindy Wilkinson | Volunteer list | 26.2.a Circuit Managers recruited and trained a pool of qualified volunteers to participate in six month administrative reviews. 26.2.b Circuit Managers scheduled and assigned individual reviewers to cases. | P-May 05 A-Nov 05 | |
| | | | 26.3 Increase ability to track 6 month Administrative Reviews separately from FSTs Cindy Wilkinson | System logic CS-1 revision Revised form disseminated | 26.3.a Met with MIS and developed system logic needed to add fields to SS-61. 26.3.b Revised the SS-61 to denote Administrative Review. 26.3.c Revised form and instructions distributed to all CD staff. | P-Aug 04 A-Aug 04 P-Jan 05 A-Aug 04 P-Jan 05 A-Aug 04 | |
| Item 27: Provides a process that ensures that each child in foster care under the supervision of the State has a 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. | | X | Will extract data on most recent court date from ACTS system. <i>Baseline established on March 31, 2005 86.3%. Goal=88.0%</i> LS 1-3 children on 4/30/06 = 94.1% <i>Goal Achieved</i> | | | | P-Dec 2006 A- |
| | | | 27.1 Improve access to legal representation for | | 27.1.a See P1.9.4.a 27.1.b See P1.9.4.b | | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | CD. Jim Harrison | | 27.1.c See P1.9.4.c 27.1.d See P1.9.4.d 27.1.e See P1.9.4.e 27.1.f See P1.9.4.f 27.1.g See P1.9.4.g | | |
| | | | | 27.2 Implement training to develop testifying skills for CD staff. Jeff Adams | | 27.2.a Current curriculum evaluated by Division of Legal Services. 27.2.b Obtained technical assistance from DLS, NRC and OSCA. 27.2.c Based on evaluation and technical assistance curriculum modified. 27.2.d Modified curriculum approved. 27.2.e Modified curriculum incorporated into Basic and OJT for existing staff. | P-Apr 05 A-Dec 04 P-Jun 05 A-Jul 05 P-Oct 05 A-Oct 05 P-Dec 05 A-Dec 05 P-Mar 06 A-Mar 06 | |
| | | | | 27.3 Increase the timeliness of 12 month Permanency Hearings Cindy Wilkinson Kathryn Sapp | | 27.3.a See 27.2.a 27.3.b See 27.2.b 27.3.c See 27.2.c 27.3.d See 27.2.d 27.3.e See 27.2.e 27.3.f Collaborated with OSCA at the state level to ensure joint accountability for timely court hearings and identify circuits where CD and court issues needed to be addressed. 27.3.g Developed on-going Court Issues workgroup to monitor timeliness of hearings. 27.3.h Developed local protocols between the court and CD offices to ensure timely hearings. | P-May 05 A-Jun 05 P-June 05 A-Aug 05 P-July 05 A-Aug 05 | |

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| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | | FST policy revision | 27.3.i Revised Family Support Team policy to assure 12 month Permanency Hearing date is discussed and documented during team meeting. | P-Jul 05 A-Jul 05 | |
| | | | | | 27.3.j Incorporated new FST policy into BASIC and OJT training for existing staff. | P-Aug 05 R-Apr 06 A-Apr 06 | |
| | | | 27.4 Provide cross training to judiciary, court staff, GALs and Children's Division staff on ASFA & Permanency hearings consistent with state and federal regulations. Jeff Adams | | 27.4.a See P1.7.4.a 27.4.b See P1.7.4.b 27.4.c See P1.7.4.c 27.4.d See P1.7.4.d 27.4.e See P1.7.4.e 27.4.f See P1.7.4.f | | |
| Item 28: Provides a process for termination of parental rights proceedings in accordance with provisions of ASFA. | X | Baseline 83.4% 5 th Quarter PRR results = 89.8%* Goal achieved Goal 87.5% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement.) | | Monitored through PRR V-14: TPR has occurred or been filed when the child has been in Out-of-Home Care for 15 of the most recent 22 months, or compelling reasons are documented. | | | P-Dec 2006 A- |
| | | | 28.1 Improve access to legal representation for CD. | | 28.1.a See P1.9.4.a 28.1.b See P1.9.4.b 28.1.c See P1.9.4.c | | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | Jim Harrison | | 28.1.d See P1.9.4.d 28.1.e See P1.9.4.e 28.1.f See P1.9.4.f 28.1.g See P1.9.4.g | | |
| | | | 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. Kathryn Sapp | | 28.2.a See S2.3.2.a 28.2.b See S2.3.2.b 28.2.c See S2.3.2.c 28.2.d See S2.3.2.d 28.2.e See S2.3.2.e 28.2.f See S2.3.2.f | | |
| | | | 28.3 Termination of Parental Rights will be filed in a timely manner, except when compelling reasons are documented. Cindy Wilkinson | | 28.3.a See P1.9.1a 28.3.b See P1.9.1.b 28.3.c See P1.9.1.c 28.3.d See P1.9.1.d 28.3.e See P1.9.1.e | | |
| | | | 28.4 Improve diligent search for relatives/parents Bonnie Washeck | | 28.4.a See P1.6.2.a 28.4.b See P1.6.2.b 28.4.c See P1.6.2.c 28.4.d See P1.6.2.d | | |
| | | | 28.5 Collaborate with OSCA to amend 211.447 RSMo to ensure consistency | Draft proposal | 28.5.a Proposal drafted. | P-Aug 05 A-Aug 05 | |
| | | | | | 28.5.b Written proposal reviewed by OSCA and the Department. | P-Oct 05 A-Aug 05 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | w/ASFA 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. Jim Harrison | Meeting agenda | 28.5.c Meetings held between OSCA and the Department of Social Services to finalize proposal. | P-Nov 05 A-Aug 05 | |
| | | | | Draft legislation | 28.5.d Advocated for proposed legislation. | P-Jun 06 A- | |
| 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. | X | | 29.1 Increase ability of foster parents to be notified of and heard in court. Bonnie Washeck | | 29.1.a Implemented HB 1453. | P-Aug 04 A-Aug 04 | |
| | | | | Consumer survey | 29.1.b Revised consumer surveys for foster parents, youth and bio parents to incorporate questions regarding notification of court hearings and opportunity to be heard in court. | P-Jun 05 A-Jun 05 | |
| | | | | | 29.1.c Emphasized to staff the importance of including correct names and addresses in court reports. | P-Mar 05 A-Apr 05 | |
| | | | | Cross training curriculum | 29.1.d Comprehensive Child Welfare Training completed with OSCA. | P-May 05 A-May 05 | |
| Item 30: Standards to assure quality services and ensure children's safety and health | X | | | | | | |
| Item 31: Identifiable QA system that evaluates the | X | | | | | | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| quality of services and improvements | | | | | | | |
| Item 32: Provision of ongoing staff training that addresses the necessary skills and knowledge | X | | | | | | |
| Item 33: Ongoing training for staff | | X | | | | | |
| | | | 33.1 Develop supervisory training for front line supervisors. | | 33.1.a Professional Development and Training collaborated with HRC for on-going supervisors training. | P-Feb 04 | |
| | | | | Training agenda | 33.1.b Implemented Module Four of the CPS Supervisor Training Project. | A-Feb 04 P-Mar 04 A-Apr 04 | |
| | | | Jeff Adams | Training agenda | 33.1.c Implemented Module Five of the CPS Supervisor Training Project. | P-Jul 04 A-Aug 04 | |
| | | | | Training agenda | 33.1.d Implemented Module Six of the CPS Supervisor Training Project. | P-Oct 04 A-Nov 04 | |
| | | | | Debriefing report | 33.1.e CPS Supervisor Training Project Debriefing. | P-Dec 04 A-Dec 04 | |
| | | | | List of trainings offered | 33.1.f HRC supervisor administrative pre-service training began for CD supervisors. | P-Dec 04 A-Nov 04 | |
| | | | | Curriculum developed | 33.1.g Professional Development and Training completed development of new supervisor training curriculum/structure including initial and on-going training. | P-July 05 A-Jul 05 | |
| | | | | | 33.1.h Training curriculum reviewed and approved by CD management. | P-Aug 05 A-Aug 05 | |
| | | | | | 33.1.i Professional Development and Training selected one rural and one metro field test site. | P-Aug 05 A-Aug 05 | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | | 33.1.j Professional Development and Training field tested curriculum in two test sites | P-Sep 05 | |
| | | | | | Evaluation report | 33.1.k Professional Development and Training evaluated field test results | A-Sep 05 | |
| | | | | | Curriculum revised | 33.1.l Professional Development and Training, revised curriculum based on evaluation | P-Jan 06 | |
| | | | | | | 33.1.m Professional Development and Training implemented curriculum statewide. | A-Jan 06 | |
| | | | | | | 33.1.n Professional Development and Training implemented curriculum statewide. | P-Jun 06 | |
| | | | | 33.2 Develop advanced in-service training module for investigations and assessments | Curriculum developed | 33.2.a Professional Development and Training developed advanced in-service curriculum for investigators and assessors. | P-Oct 04 | |
| | | | | Jeff Adams | | 33.2.b CD administration approved advanced investigation and assessment in-service training module. | A-Sept 04 | |
| | | | | | Training dates | 33.2.c Professional Development and Training began training advanced investigation and assessment curriculum. | P-Jan 05 | |
| | | | | | Curriculum revised | 33.2.d Professional Development and Training evaluated advanced investigation and assessment training module and made revisions. | A-Sept 04 | |
| | | | | | | 33.2.e Professional Development and Training implemented revised investigation and assessment advanced in-service training statewide. | P-June 05 | |
| | | | | | | 33.2.f Professional Development and Training implemented revised investigation and assessment advanced in-service training statewide. | A-June 05 | |
| | | | | 33.3 Develop advanced in-service training module for Family- Centered | Workgroup participant list | 33.3.a Professional Development and Training formed workgroup to develop Family-Centered Services advanced in-service training module. | P-Jul 05 | |
| | | | | | | 33.3.b Professional Development and Training formed workgroup to develop Family-Centered Services advanced in-service training module. | A-Jul 05 | |
| | | | | | | 33.3.c Professional Development and Training formed workgroup to develop Family-Centered Services advanced in-service training module. | P-Feb 04 | |
| | | | | | | 33.3.d Professional Development and Training formed workgroup to develop Family-Centered Services advanced in-service training module. | A-Feb 04 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | Services Jeff Adams | Focus group report | 33.3.b Professional Development and Training workgroup conducted focus groups for feedback on Family-Centered Service training needs. | P-Mar 04 A-Mar 04 | |
| | | | | | | 33.3.c Professional Development and Training reviewed Family-Centered Service focus group feedback. | P-Mar 04 A-Mar 04 | |
| | | | | | Curriculum developed | 33.3.d Professional Development and Training developed advanced in-service curriculum for Family-Centered Services. | P-Aug 05 A-Aug 05 | |
| | | | | | | 33.3.e CD administration approved advanced Family-Centered Services in-service training module. | P-Aug 05 A-Sep 05 | |
| | | | | | Training dates | 33.3.f Professional Development and Training began training advanced Family-Centered Services curriculum. | P-Sep 05 A-Oct 05 | |
| | | | | | Curriculum revisions | 33.3.g Professional Development and Training evaluated advanced Family-Centered Services training module and made revisions. | P-Mar 06 A-Feb 06 | |
| | | | | | | 33.3.h Professional Development and Training implemented revised Family-Centered Services advanced in-service training statewide. | P-Sep 06 A- | |
| | | | | 33.4 Develop advanced in-service training module for Family-Centered Out-of-Home Care services Jeff Adams | Workgroup participant list | 33.4.a Professional Development and Training formed workgroup to develop Family-Centered Out-of-Home Care Services advanced in-service training module. | P-Jun 04 A-Jun 04 | |
| | | | | | focus group report | 33.4.b Professional Development and Training workgroup conducted focus groups for feedback on Family-Centered Out-of-Home Care Services training needs. | P-Jul 04 A-Jul 04 | |

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| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | | 33.4.c Professional Development and Training reviewed Family- Centered Out-of-Home Care Services focus group feedback. | P-Jul 04 A-Jul 04 | |
| | | | | | Curriculum developed and reviewed | 33.4.d Professional Development and Training developed advanced in-service curriculum for Family-Centered Out-of-Home Care Services and reviewed by OSCA. | P-Oct 05 A-Oct 05 | |
| | | | | | | 33.4.e CD administration approved advanced Family- Centered Out-of-Home Care Services in-service training module. | P-Nov 05 A-Feb 06 | |
| | | | | | Training dates | 33.4.f Professional Development and Training began training advanced Family- Centered Out-of-Home Care Services curriculum in one metro and one rural site. | P-Dec 05 A-Feb 06 | |
| | | | | | Curriculum revision | 33.4.g Professional Development and Training evaluated advanced Family-Centered Out-of-Home Care Services training module and made revisions. | P-Mar 06 A-Mar 06 | |
| | | | | | | 33.4.h Professional Development and Training implemented revised Family-Centered Out-of-Home Care Services advanced in-service training statewide. | P-May 06 A- | |
| | | | | 33.5 Enhanced On-The-Job (OJT) Training | Workgroup participant list | 33.5.a Professional Development and Training and Children's Services Specialist formed OJT workgroup. | P-Mar 04 A-Mar 04 | |
| | | | | Jeff Adams | Evaluation tools developed | 33.5.b Workgroup developed new evaluation tools for OJT activities. | P-Mar 05 A-Mar 05 | |
| | | | | | | 33.5.c Children's Services Specialists provided enhanced OJT in field and served as clinical mentors/trainers for OJT. | P-June 05 A-Jun 05 | |

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|--|-----|--|--|--|-------------------------------------|---|----------------------------|------|
| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | Core team members | 33.5.d Created a core team consisting of social work specialists, supervisors, workers and trainer to enhance the provision of On-the-Job Training (OJT). | P-Jan 06 A-Jan 06 | |
| | | | | | List of core skills/competencies | 33.5.e Identified core skills/competencies that CD will expect new staff to have after completing BASIC. | P-Apr 06 A-Apr 06 | |
| | | | | | Skill guide | 33.5.f Beginning skills guide to be developed for use by supervisors. | P-Apr 06 A-Apr 06 | |
| | | | | | | 33.5.g Supervisors commented on the skills/guide list. | P-Jun 06 A- | |
| | | | | | | 33.5.h Skills guide modified after comment periods. | P-Jun 06 A- | |
| | | | | | | 33.5.i Skills guide/list available for statewide use by supervisors. | P-Aug 06 A- | |
| | | | | 33.6 Create training advisory Committee to annually assess needs and evaluate training | Advisory Committee participant list | 33.6.a Professional Development and Training created state training advisory committee, including schools of social work. | P-Mar 05 R-Oct 06 A- | |
| | | | | Jeff Adams | Mission statement | 33.6.b Advisory committee developed a mission statement. | P-Apr 05 R-Oct 06 A- | |
| | | | | | Written assessment plan | 33.6.c Advisory Committee developed a written plan for assessing training needs | P-May 05 R-Nov 06 A- | |
| | | | | | Written evaluation plan | 33.6.d Advisory Committee developed a written plan for evaluating training needs | P-May 05 R-Nov 06 A- | |
| | | | | | | 33.6.e Plan submitted to CD administrators for approval | P-Jul 05 R-Dec 06 A- | |
| | | | | 33.7 Develop Child Abuse and Neglect Training (CA/N) Institute for CD staff | Committee participant list | 33.7.a CA/N Training Institute Planning Partnership committee met to finalize topics and session content for upcoming three CA/N Training Institutes | P-Jan 04 A-Jan 04 | |

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|--|-----|--|---|--------------------------|---|----------------------|------|
| Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity | | Goal/Negotiated Measure/Percent of Improvement | Action Steps | Method of Measurement | Benchmarks Toward Achieving Goal | Dates of Achievement | |
| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | Cindy Wilkinson | Training agenda | 33.7.b Held first CA/N Training Institute Session | P-Apr 04 A-Jun 04 | |
| | | | | Training agenda | 33.7.c Held second CA/N Training Institute | P-Nov 04 A-Nov 04 | |
| | | | | Training agenda | 33.7.d Held third CA/N Training Institute | P-Feb 05 A-Feb 05 | |
| | | | 33.8 Provide training based on circuit specific needs | Circuit Self-Assessments | 33.8.a Circuits completed Circuit Self-Assessments | P-Aug 04 A-Aug 04 | |
| | | | Jeff Adams | | 33.8.b Circuits notified Professional Development and Training Unit of targeted training needs | P-Nov 04 A-Nov 04 | |
| | | | | | 33.8.c Professional Development and Training Unit to began providing targeted training to circuits based on identified need | P-Jan 05 A-Jan 05 | |
| Item 34: Provision of training for caregivers and adoptive parents that parents addresses the necessary skills and knowledge | X | | | | | | |
| Item 35: Service array | | X | | | | | |
| | | | 35.1 Increase access and availability to dental services | | 35.1.a See WB3.22.1.a | | |
| | | | | | 35.1.b See WB3.22.1.b | | |
| | | | | | 35.1.c See WB3.22.1.c | | |
| | | | | | 35.1.d SeeWB3.22.1.d | | |
| | | | Bonnie Washeck | | 35.1.e SeeWB3.22.1.e | | |
| | | | 35.2 Increase the ability of staff and families to access Alcohol and Drug Abuse Services (ADA) | Curriculum developed | 35.2.a Professional Development and Training developed Family Drug and Safety Training based in focus group information | P-Jan 04 A-Jan 04 | |
| | | | | Training agenda and date | 35.2.b Presented Drug training to focus group | P-Feb 04 A-Feb 04 | |

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|--|-----|--|---|--------------------------|---|----------------------|------|
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| | | | | | | Benchmark | Goal |
| A | N/A | | | | | | |
| | | | Jeff Adams | Field test training | 35.2.c Field tested drug training in Southwest region | P-Jun 04 A-Jun 04 | |
| | | | | Training agenda | 35.2.d Second field test conducted in Jefferson County | P-Nov 04 A-Nov 04 | |
| | | | | Curriculum revised | 35.2.e Curriculum revised to reflect recommendations during field test, including target audiences and how many staff | P-Apr 05 A-Apr 05 | |
| | | | | Training dates and sites | 35.2.f Completed three additional Family, Drugs and Safety trainings across the state. | P-Jun 06 A- | |
| | | | 35.3 Increase availability of specialized foster homes for older youth, siblings, disabled and medically fragile children. Cindy Wilkinson | | 35.3.a See P1.6.5.a 35.3.b See P1.6.5.b 35.3.c See P1.6.5.c 35.3.d See P1.6.5.d 35.3.e See P1.6.5.e | | |
| | | | 35.4 Increase availability of and access to parenting classes and family/parent aide services. Bonnie Washeck | Circuit self-assessment | 35.4.a Through circuit self-assessment, determined available parenting classes and family/parent aide services | P-Mar 05 A-Aug 04 | |
| | | | | CTS contracts | 35.4.b Developed performance based CTS contracts for family/parent aide and parenting class service | P-Feb 06 A-Feb 06 | |
| | | | 35.5 Increase services to meet the needs of non-English speaking consumers. Kathryn Sapp | Circuit self-assessments | 35.5.a Through circuit self-assessment, determined available interpretive services for non-English speaking clients | P-Mar 05 A-Aug 04 | |
| | | | | Recruitment plans | 35.5.b Developed recruitment plan for multi/bilingual staff in circuits with identified need | P-May 05 A-Jul 05 | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | Forms translated | 35.5.c Made CD forms available in other languages (Spanish to accommodate growing Hispanic population) | P-Dec 05 A-Dec 05 | |
| | | | | 35.6 Increase availability of transportation services. | Circuit self-assessment | 35.6.a Available transportation services determined through circuit self-assessment. | P-Mar 05 A-Aug 04 | |
| | | | | Bonnie Washeck | | 35.6.b Recruited regional service organizations to provide transportation services. | P-May 05 A- Jul 05 | |
| | | | | | CTS contracts | 35.6.c Issued state-wide transportation contracts. | P-Mar 06 A-Feb 06 | |
| | | X | | | | | | |
| | | | | See Item 35, 1-6 | | | | |
| | | X | | | | | | |
| | | | | | | | | |
| | | | | 37.1 Increase access to existing services | | See Item 35 1-6 | | |
| | | | | 37.2 Strengthen worker/supervisor skills in engaging families in the | | 37.2.a See S2.3.2.a | | |
| | | | | | | 37.2.b See S2.3.2.b | | |
| | | | | | | 37.2.c See S2.3.2.c | | |
| | | | | | | 37.2.d See S2.3.2.d | | |

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| | | | | | | | Benchmark | Goal |
| | A | N/A | | | | | | |
| | | | | 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. Kathryn Sapp | | 37.2.e See S2.3.2.e 37.2.f See S2.3.2.f | | |
| Item 38: Engages in ongoing consultation with critical stakeholders in developing the CFSP | X | | | | | | | |
| Item 39: Develops annual progress reports in consultation with stakeholders | X | | | | | | | |
| Item 40: Coordinates services with other federal programs | X | | | | | | | |
| Item 41: Standards for foster family and child care institutions | X | | | | | | | |
| Item 42: Standards are applied equally to all foster family and child care institutions | X | | | | | | | |
| Item 43: Conducts necessary criminal | X | | | | | | | |

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| | | | | | | | Benchmark | Goal |
| A | N/A | | | | | | | |
| | | | | | | | | |
| background checks. | | | | | | | | |
| Item 44: Diligent recruitment of foster and adoptive families that reflect children's racial and ethnic diversity. | | X | | | | | | |
| | | | | 44.1 Increase the number of resource families. Cindy Wilkinson | | 44.1.a See P1.6.5.a 44.1.b See P1.6.5.b 44.1.c See P1.6.5.c 44.1.d See P1.6.5.d 44.1.e See P1.6.5.e 44.1.f See P 2.12.3.a 44.1.g See P 2.12.3.b 44.1.h See P 2.12.3.c 44.1.i See P 2.12.3.d 44.1.j See P 2.12.3.e | | |
| Item 45: Uses cross-jurisdictional resources to find placements | X | | | | | | | |