



PROGRAM IMPROVEMENT PLAN

QUARTER 5 PROGRESS REPORT

February 2006 – April 2006

SUBMISSION DATE:

May 26, 2006

Quarter 5 Accomplishments

The following is summary of activities completed during Quarter 5 (February 2006 to April 2006) of the Program Improvement Plan.

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

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

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

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

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

- *Supervisors continue to meet with workers on a case by case basis to find every possible way of meeting initial contact timeframes.*
- *Supervisors review cases for initial contact during weekly case conferences*
- *Circuit Managers and PET Team monitor initial contact on a monthly basis and issues are addressed with front line staff as they come up*
- *Supervisors review CPS 1 and the CPS 1A at or within 72 hours with investigators/assessors.*
- *A workgroup was developed for supervisors to help expound on an excel spreadsheet that would calculate the initial contact for workers so they would know when initial contact was due.*
- *Supervisors are required before assigning the case to a worker to assess whether the worker will be able to make timely contact and if not, the supervisor or another worker will make the initial contact and properly document the contact.*
- *Circuit Managers monitors the Peer Record Review results. Supervisors and Circuit managers read cases on an ongoing basis for accuracy*

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

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

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

g. Collected and analyzed PRR tool results for practice enhancements. Analysis. Ongoing/Quarterly.

The review tool is a six item instrument with additional clarification items if certain questions are answered in the negative. Of the 487 reviews recently conducted, 94% of the reviews were concluded in ten minutes or less. The average review time for those reviews (459 of the 487 reviews) was 2.3 minutes. 239 CA/Ns (comprising 478 reviews) were reviewed by two staff while nine were reviewed by one person. Of the 239 calls reviewed by two people, complete agreement was reached by the reviewers for 61% (146) of the calls reviewed. An additional 32% of the reviews had consensus on at least four of the six questions on the instrument.

The record review tool still seems to achieve the goal of being a quick to complete instrument for reviewing calls. Also, dual reviews (each case being reviewed by two staff) needs to continue until there is more conformity in the review results. It is hoped that the reviewer agreement rate can be increased to at least 90% for each question before the review data can be used to properly inform the agency on strengths or needs in practice at the hotline.

(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.

d. Shared proposed plan with Regional Directors. A copy of the proposed plan was shared with the Regional Directors at their April meeting.

Item 2: Repeat maltreatment

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

d. Evaluated SDM Peer Record Review Outcomes. (Ongoing/Quarterly). For Calendar Year (CY) 2005, the PRR results indicated that average rate of completion for the SDM Safety Assessment (CPS-1) was 94 percent. For the first quarter of CY 2006, the completion rate remains at 94 percent.

h. As needed, provided training to circuits identified with imminent need. SDM and Practice improvement training related to child fatality reviews was originally scheduled to begin during March 06. This training has been postponed to begin during June 06 due to the addition of new procedures for Field Managers to assume the primary responsibility on July 1, 2006 for reviewing fatality or critical event reports in cases having current or prior CD involvement. Therefore, training Field Managers on this new responsibility will occur simultaneously with the practice improvements training in the respective circuits. Additionally, the visitation workgroup recently completed their discussions and related policy revisions pertaining to various visitation issues, one of which is continuing to assure safety during visits with children and families. This issue

is also one of the key points that will be discussed in the SDM/Practice Improvements training. Therefore, delaying the SDM training has allows an opportunity to bridge information and unify a message prior to the commencement of both groups proceeding with the field training.

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

f. Visitation Workgroup presented recommendations on enhancing visitation and safety policies throughout the continuum of services to Executive staff. A copy of the Visitation Workgroup recommendation was provided to Executive staff in November 2005.

g. Executive staff met to approve recommendations. At one of their January meetings, the Executive staff approved the recommendations.

h. Central Office staff met to begin address policy assignments. Central Office staff met on February 27, 2006 to discuss policy assignments.

i. Developed safety policy regarding assessment of safety at and throughout placement. Central Office staff has developed three policy memorandums to address safety and visitation based on the recommendations from the Visitation Workgroup.

j. Staff Training and Development met to discuss incorporating Visitation Workgroup recommendations into training for staff and foster parents. Central Office policy development staff met with Staff Development and Training to discuss recommendations from the Visitation workgroup, policy implications, and how to incorporate this information into BASIC and In-Service trainings. Below are highlights from the meeting:

- The OJT will be done locally by the first line supervisors and CD specialists. Some of this will be included into the OJT material.*
- The Quality Improvement and Field Support staff is developing the power point and will be doing an initial round of training using the power point for the circuits and specialists.*
- This training will be reference in BASIC, but agreed cannot include the entire PowerPoint training*
- Older Youth-Foster parent training will include Ready Set Fly training which will now be part of the local in-service in addition to what is provided as in-service through STARS modules.*

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

a. Visitation Workgroup convened to review current visitation and safety policy. The Visitation Workgroup was convened and met for the first time in May 2005 to begin reviewing visitation policy throughout the child welfare manual.

b. Visitation Workgroup presented recommendations on enhancing visitation and safety policies throughout the continuum of services to Executive staff. The Visitation Workgroup completed their review of safety and visitation policies in the child welfare manual and submitted their recommendations in November 2005. This report was previously submitted as documentation.

c. Developed policy regarding assessment of safety at and throughout placement. Central Office staff has developed several policy memorandums addressing safety and visitation based on many of the recommendations from the Visitation Workgroup. Three policy memorandums have been developed.

d. Staff Training and Development met to discuss incorporating Visitation Workgroup recommendations into training for staff and foster parents. During an April 24th meeting, Central Office policy development staff met with Staff Development and Training to discuss recommendations from the Visitation workgroup, policy implications, and how to incorporate this information into BASIC and In-Service trainings.

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

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

Per CD's 4th quarter response, we are providing an update on the proposed evaluation grant, including benchmark updates.

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.

c. Informed foster parents of PFDP criteria at assessment and reassessment. The performance based criteria continues to be used as a guide for staff to address with foster parents at licensure and re-licensure.

d. Identify plan to inform CD staff of new requirements for foster parents. A memo was disseminated to staff addresses resource provider training including the use of the Professional Family Development Plan.

<http://www.dss.mo.gov/cd/info/memos/2006/37/cd0637.pdf>

e. Trained CD staff on PFDP and how to assist family in developing and implementing the plan. Central Office staff developed and provided training to resource development workers in the entire Southern Region and the Northeast Region beginning in March 2006. A plan has been formulated to complete this training for remaining staff during June. A training agenda is attached.

f. Identified resources for foster families to use to successfully implement PFDP. It is the responsibility of the resource development worker to assist foster families to identify needs and resources required in their PFDP. The resource development workers know best what resources are available in their area and provide this information to foster families as needed.

Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.

Item 3: Services to family to protect child(ren) in home and prevent removal. Per 4th quarter negotiations, PRR IV-13 replaces IV-15.

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

e. Recommendations regarding changes made. All training sessions have been completed during February 2006. No additional training sessions are being added nor feedback solicited at this time.

(S2.3.2) – Strengthen worker/supervisor skills in engaging families in the assessment, case planning and case plan review process to increase parent, caregiver and child involvement.

f. PET teams annually analyzed family satisfaction survey data and PDR results for improvement with the expectation that circuits develop methods to improve. Consumer surveys are sent monthly and responses are recorded when received. However, survey results are posted on the CD's Intranet annually. The data for the 2005 surveys are have been posted and available for staff to review on the Intranet.

PDR results are provided to the circuits at the end of their review. The preliminary data which are tied to Outcome measures are provided to all participants at the meeting. Those measures that fall below the PDR expectation of acceptable are required to develop an improvement plan.

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

g. System automation completed for supervisory case review tool. *The Children’s Division is dependent upon IT staff outside of the division to automate the SCR process and tool. The tool could have been implemented in the field on time without the self-scoring or data auto-population features, however, this would mean the tool will take much more time to complete and results for the survey could not be gathered into a database for monitoring use. We felt these features were crucial to supervisor buy-in and success of the review process. We worked with ITSD staff to incorporate these features into the process and feedback from users has been positive.*

h. Supervisory case review tool and protocols approved and distributed for statewide use. *During May and June 2006, supervisors across the state will be trained on the SCR process and tool. Additionally, the tool, local Excel spreadsheet and a PowerPoint training are all available on the CD intranet. The beginning of June a memo will go out to all staff informing them of the SCR process. The beginning of July the first sample of cases to be reviewed will be sent out to each circuit manager. QA Specialists will be responsible for monitoring their region’s reviews and SCR results will be posted quarterly.*

(S2.3.4) – Establish procedures to access various service funding streams. *All benchmarks in this action step have been completed.*

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

Item 4: Risk of harm to child. *PRR IV-13 was removed as a measure for this item per 4th quarter renegotiation.*

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

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

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

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

f. Measured through a reduction of the number of preponderance of evidence reports received by the residential treatment facilities. *(Ongoing/Quarterly). There were three substantiated preponderance of evidence reports on licensed residential treatment facilities from January 1, 2006 through March 31, 2006.*

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

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

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

Item 6: Stability of foster care placement

(P1.6.1) – **Increase system capacity to accurately track placement kinship vendor types.**

d. Staff will convert existing data to reflect accurate placement types. Training was provided to QA and assigned staff from all the regions to begin converting court ordered placements to either relative or kinship placements in December. Conversion of these placement types were concluded at the end of February 2006.

e. Coding changes to be reflected in Quarterly Outcome Report. In Measure #17 of the Outcomes report - **Increase the number of children placed with relative providers** This is an unduplicated count of children placed with relatives during the quarter. Children are counted as being placed with relatives if they are in a licensed or unlicensed relative home. Children in kinship placements are not reflected in this measure. This information is included in the monthly Children's Services Management Report.

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

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

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

d. Circuits reported quarterly progress on recruitment activities. Circuits are actively pursuing recruitment of additional foster parents by the following methods:

- Local pizza franchise agreed to put a flyer on each pizza delivered. The flyer advertises what a foster parent is, what the requirements are to be one and the need for more in the area.
- Local churches agreed to put notice in their flyers or bulletins for the need of more foster parents in their areas
- Foster parent appreciation banquet to be held for foster parents. A list of potential foster parents will be compiled based on this event

- *Flyers posted at local schools and throughout the community regarding the need for good foster parents.*
- *Open house held in circuit providing the public general information about foster care. The Open House advertised in the newspapers and an article about the need for foster parents.*
- *Circuits have had pens, pads of paper, lapel pins and ribbons made to distribute randomly informing the public of the need for more foster parents*
- *Recruitment meetings held at local schools and churches*
- *Foster parent support groups formed and local staff attend these meeting and promote bringing a friend to these meetings*
- *Numerous circuits have planned foster parent appreciation activities and foster parents are asked to bring a friend who could be a potential foster parent*
- *Flyers are placed in grocery bags at local supermarkets*
- *Letters to editors with need identified and statistics that show need for more foster parents*
- *Radio spots used*
- *Displays set up at local civic or community events*
- *Using the STARS training in process with many families being trained.*
- *Use ILP video at STARS training to show the need for foster homes for teenagers*
- *Recruitment efforts target specific areas such as homes for African-American males, older your and sibling groups. All staff are to engage in recruitment activities*

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

g. Quarterly report on PBC contractors' performance on stated child outcome on safety, permanency and stability. *The attached Excel report provides information on progress of contractors toward achieving their outcomes which are designed for a 12 month period.*

(P1.6.6) – Increase placement stability by improving matching capabilities for children in out-of-home setting. *There are no benchmarks due during Quarter 5 for this action step.*

(P1.6.7) – Evaluate support and training provided for relative/kinship resource families.

a. Surveyed current relative caregivers on the adequacy of the Caregiver Who Knows the Child training curriculum. *At the end of the Caregiver Who Knows the Child Training, each participant is asked to complete the evaluation for the training. Initially it was decided that we would use the evaluation as the survey. After reviewing the evaluation, it was decided the evaluation did not meet our need. In February 2006 a survey was developed by a workgroup and distributed to 200 caregivers. The data will be collected and analyzed in March 2006. A copy of the survey is attached.*

b. Data collected and analyzed.

Fifty of the 200 surveys were returned. Based on the returns, the group determined the caregivers approved of the curriculum, and found it to be helpful and did not need to develop a new training curriculum, but need to improve the following areas of the current manual:

Primary Areas of Focus:

- *Understanding Permanency Goals*
- *Managing New Responsibilities*
- *Managing Stress & Staying Healthy*
- *Information regarding the Grievance Process.*

Secondary areas of improvement are:

- *Foster Parent Role in the FST*
- *The Impact of Separation & Loss on the Child*
- *Meeting Medical Needs*

Central Office staff will send out the original chapters of the curriculum for review and revisions by the workgroup. The compiled draft will be reviewed by the team. A select sample of relative providers will review the draft material. The Caregivers will work with the workgroup to finalize the draft. The revisions will be available for review by CD administration.

Item 7: Permanency goal for child

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

c. Circuit Managers assisted by PET monitored frequency data. There has been increasing concern during the past few months with the decline of the timely completion of FST meeting within 30 days and 6 months as reported in the Outcomes Report. This concern was addressed during the quarterly Big 8 Circuit conference calls. There appeared to be a lot of confusion surrounding timeframes, data accuracy and the difference between a FST and PPR. A policy clarification memo was disseminated to staff in April. <http://www.dss.mo.gov/cd/info/memos/2006/39/cd0639.pdf>

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

(P1.7.3) – Strengthen policy and practice relating to concurrent planning. *Benchmarks in this action step are not due this quarter or were previously met.*

(P1.7.4) – Increase collaboration with courts by providing cross training to judiciary, court staff, GALs and CD staff on ASFA & permanency hearings consistent with state and federal regulations.

P1.7.4.f Training implemented by CD/OSCA to include concurrent planning training (Ongoing). A collaboration workshop involving multi-disciplinary teams from five judicial circuits, was conducted in Jefferson City from February 27-March 1, 2006. The goals of the workshop were to promote a common understanding of the language and concepts of collaboration; promote team building; enable teams to articulate their vision, values, and mission; educate teams about group dynamics and how to examine the dynamics of their own groups; enable teams to understand the team lifecycle and assess their own place on that cycle; instruct teams on how to create an action plan to strengthen their collaboration; and allow teams to share common experiences with one another.

Teams from nine judicial circuits applied to participate in the workshop. Selection was based primarily on the team's history of working together and on an assessment by the applicants of why improving collaboration is critical at this time. Each team was to consist of six members, comprised of at least two representatives from the juvenile courts and two representatives from the Children's Division. It was recommended that a judge who hears child abuse/neglect cases be included as a member of the team. All members were to sign a memorandum of understanding, expressing a commitment to participate in the workshop and all of its activities.

Information about a video teleconference on best practices and creative strategies for implementing concurrent planning presented at 6 locations will be provided in the 6th quarter update.

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

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

P1.8.1.f Developed policy and protocol on worker duties related to legal status 2, 3, and 4 cases. This memo was previously drafted some months ago. However in clarifying protocols in policy to reflect good social work practice to assure the safety and meeting the permanency needs of children, this benchmark was included in the responsibility of the Visitation Workgroup with a renegotiated distribution date of May 2006.

(P1.8.2) – Establish procedures to access various funding streams. Refer to S2.3.4. All benchmarks in this action step have been completed.

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

(P1.8.4) – Improve quality of FST to assure the review of permanency goal. Refer to P1.7.2. All benchmarks in this action step have been completed.

(P1.8.5) – Increase collaboration with courts by providing cross training to new judiciary, court staff, CD staff and GAL's on ASFA and Permanency hearings

consistent with state and federal regulations. Refer to P1.7.4. All benchmarks in this action step have been completed.

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

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

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

Item 9: Adoption

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

d. Policy disseminated to staff and supervisory oversight. This memo was disseminated to staff in May 2006. Due to this memo being extremely late, it is being submitted in this update. <http://www.dss.mo.gov/cd/info/memos/2006/cd0653.pdf>.

e. Incorporated into Basic training. TPR and compelling reasons changes have been included in BASIC. Due to the tremendous delay of this memo being sent out to staff, Staff Development and Training worked with the policy unit to add changes/updates while the memo was going through the approval process.

f. Quarterly monitoring by PRR. In CY 2005, the average PRR results indicated that filing TPR when a child has been in care for 15 out of the most recent 22 months or compelling reasons were documented occurred 88 percent of the time. For the first quarter of CY 2006, the percentage increased to 91 percent. This measure will be monitored to determine policy impact during subsequent quarters.

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

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

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

e. CD legal representation at court hearings monitored by CD/DLS joint committee for improvement. Ongoing. During the past quarter the joint committee has met to review the process that was set in place by the protocol. Quarterly meetings are available between the DLS attorney assigned to the circuit and the Circuit Manager to discuss

issues of significance to the region; staff TPR cases or any concerns the region may have. DLS is the support division for DSS however they provide legal representation for CD in approximately 97 percent of the cases opened during FY 05.

Item 10: Other planned living arrangement

(P1.10.1) – **Increase number and quality of resource families for older youth.**

Refer to P1.6.5.a-e. The remaining benchmarks have been completed.

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

c. ILP staff provided Chafee informational meetings, seminars, workshops to CD staff, foster parents, juvenile court, and youth serving agencies. Ongoing ILP staff continuously are involved with Case Managers and community youth serving agencies. Some of the activities include:

- Quarterly advisory committee meetings with the Missouri Mentoring Partnership.
- Attendance at PET team meeting to discuss Chafee and TLP.
- Attendance at many FST meetings with youth.
- Child Advocacy Day held on January 31, 2006.
- Hosted quarterly TLP provider meeting to update all providers on Chafee services and anticipated changes.
- Met with colleges and universities on working with adolescents.
- Participated in residential reviews.
- Monthly or quarterly meetings with RHY providers.
- Participated in STARS and BASIC trainings.
- Involved youth in community fund raising projects.

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

c. Consulted with SYAB members on needs of older youth. Quarterly meetings are held with youth to solicit their input.

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

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

Item 12: Placement of Siblings.

(P2.12.1) – **Increase the number of siblings placed together.** Per the Visitation Workgroup Implementation Plan, benchmarks e-g has been revised. Benchmarks d and e are indicated below, while f and g are not due until next quarter.

c. Circuit Managers monitored quarterly PRR results and improvement plans developed. *When possible and in the children's best interest sibling placement is a priority. Emphasis is placed on keeping sibling together. Other efforts made to improve results include:*

- *Increasing the number of children for which foster parents can be licensed.*
- *Stressing the importance of sibling placement during foster parent training.*
- *Provide joint trainings with juvenile office on the importance of sibling placement.*
- *Use of relative/kinship home to keep siblings together.*
- *Holding a FST prior to separating siblings.*
- *Accessing training from Early Head Start regarding the impact of separation on attachment.*

d. Visitation Workgroup presented recommendations on preserving sibling ties. *A copy of the Visitation Workgroup recommendations report was presented to the Executive team during their regular meeting for review and input in November 2005.*

e. Developed policy requiring a FST prior to separating siblings. *A memo and policy updates were drafted during April 2006.*

(P2.12.2) – Develop an ongoing training module regarding sibling placements for staff, foster parents, and juvenile court staff. *Benchmarks in this action step are not due this quarter or were previously met.*

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

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

(P2.13.1) – Increase frequency and quality of parent/child and sibling visits. *Per the Implementation Plan, the benchmarks in this action step have been revised. Refer to Matrix for changes.*

a. Visitation Workgroup presented recommendations on preserving sibling ties. *The recommendations reported presented in November 2005 to the Executive team includes recommendations on preserving sibling ties.*

b. revised policy to improve qualitative and quantitative visitation plan requirements. *Central Office staff has developed several policy memorandums addressing safety and visitation based on the recommendations from the Visitation Workgroup. Three policy memorandums have been developed. This memo due out by the end of May will be the third and last of the series.*

Item 14: Preserving connections. *Per 4th quarter negotiation, the method of measurement for Relative Placement CD-Outcomes #17 will include children in Legal Statuses 1-4. Previous data only captured LS 1 children.*

(P2.14.1) – Increase emphasis on preserving familial and community connections for children in out of home care.

d. Developed state plan to address preserving connections. Policy enhancements to the Child Welfare Manual that addresses the CD's philosophical base regarding the preservation of family and community connections was disseminated statewide to staff during April 06.
<http://dssweb/cs/memos/2006/41/cd0641.pdf>

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

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

Item 15: Relative Placement.

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

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

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

Item 16: Relationship of child in care with parents.

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

(P2.16.2) – Improve engagement of non-custodial parents in case planning by strengthening worker/supervisor skills in engaging families in the assessment, case planning and case plan review process. Increase parent, caregiver (alternative care provider) and child involvement in case assessment, plan development and reassessment. Refer to S2.3.2.

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

Item 17: Needs and services of child, parents, and foster parents. PRR III-3, III-10 and IV-15 have been removed as a method of measurement from the matrix per 4th quarter negotiation. IV-13 has been added.

(WB1.17.1) – Improve family assessment and case plan tools to better link service provision to the needs of the bio family identified in the initial and ongoing assessments. Refer to S2.3.1. All benchmarks in this action step have been completed.

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

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

Item 18: Child and family involvement in care planning

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

(WB1.18.2) – **Improve the quality of Family Support Team Meeting.** Refer to P1.7.2. All benchmarks in this action step have been completed.

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

d. Solicited consumer feedback on parent handbook. The Parent Handbook is currently being piloted in 5 circuits. Each handbook provides a survey for the parent to complete. Feedback is being solicited from both parents and workers. The pilot will be concluded on May 31, 2006.

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

(WB1.19.1) – **Develop policy addressing the quality of visits to incorporate case planning, service delivery and goal attainment.** Benchmarks c-h have been revised due to the Visitation Workgroup Implementation plan.

c. Visitation Workgroup presented recommendations on how visitation is critical in timely reunification to executive staff. A copy of the Visitation Workgroup recommendations report was presented to the Executive team during their regular meeting for review and input in November 2005.

d. Recommendations reviewed by executive staff. Executive staff approved all the recommendations of the workgroup without a fiscal impact during the in person meeting in January 2006.

e. Policy drafted. The third and last policy memo from the recommendations of the Visitation Workgroup has been drafted and is scheduled to be disseminated at the end of May 2006.

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

a Achieved progress in caseload equalization by developing quarterly circuit workload reports. (Quarterly). *The following are steps taken by various circuits to address this benchmark.*

- Developed a workload equalization chart that used the COA standards.
- Caseload stats are updated on a monthly basis and new cases assigned accordingly.
- Convened Monthly Stats sheet workgroup to develop monthly stats report.
- Use of the end of the month report to monitor and stabilize work loads.

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

CD will not be committing additional resources to make enhancements to the ACTS and FCS systems to track worker visits due to being in the process of converting Case Management information into SACWIS. Statewide conversion is anticipated during the first quarter of CY 2007. Since we will not be able complete these benchmarks until after the two year PIP period, we are proposing a rewrite of the benchmarks in this action step as indicated.

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-

a. Reviewed the FCS section of the Family Satisfaction survey on monthly worker visits with the family. *The FCS Family Satisfaction survey results are posted on CD's Intranet annually. Staff can view results on gender, race and age of children by regions.*

b. Reviewed the youth portion of the Family Satisfaction survey on bi-monthly worker visits with the out-of-home care child. *The FCS Family Satisfaction survey results are posted on CD's Intranet annually. Staff can view results on gender, race and age of children by regions.*

c. PET teams annually analyzed family satisfaction survey data. *During April 2006, the QA Unit reviewed and analyzed survey results. QA Specialists were required to submit to the QA Manager their regional report based on analysis of the data for their region in May 2006. In June, the QA Specialists will provide survey data to the Regional Directors.*

Item 20: Worker visit with parent(s)

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

a. Protocols established in WB1.19.1 c included in adoptive parent training. *Due to the Implementation plan renegotiations his benchmark should now refer to WB1.19.1g to reflect training on policy enhancements for all resource parents.*

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

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

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

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

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

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

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

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

Item 22: Physical health of the child

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

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

Item 23: Mental health need of the child

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

(WB3.23.2) – **Increase awareness of staff and foster parents regarding attachment and mental health issues.**

b. Increased the number of staff and foster parents trained on Working with the Explosive Child (See Training matrix). (Ongoing Semi-annually)

c. Increased the number of staff and foster parents trained on Grief and Loss (See Training Matrix). (Ongoing semi-annually)

Efforts to increase the number of staff who are trained on Working with the Explosive Child and on Grief and Loss include:

- *Supervisors and intake workers attended an attachment training presented by Dr, Jacqueline Ellis.*
- *Mental Health issues and attachment are discussed with Foster Parents through STARS training and through a variety of in-service trainings offered to them.*
- *Local health provider trained staff and foster parents on self-mutilations.*
- *BFC consultant is being utilized to work individually with foster parents of children who have these specific needs.*
- *Guest speakers are invited to attend circuit staff meetings to present on various mental health topics.*
- *Training on Working with the Explosive Child presented to foster parents at the Foster Parent Banquet in May.*
- *Staff are encouraged to attend agency sponsored and non-agency sponsored trainings, workshops and seminars to advance their know base and skill level.*
- *Foster parents are notified of training through the Foster Parent newsletter.*
- *Local hospital provides training in this area free of charge. All foster parents are invited to attend these free trainings*
- *Some in-service training has been made available to foster parents through contracted providers throughout the state*

(WB3.23.3) – **Increase capacity of staff to assess mental health needs of children in intact families.**

b Circuit Managers evaluated SCRT results and developed practice improvement strategies as needed. (See S2.3.3 a-f). (Ongoing quarterly) *During May and June 2006, supervisors across the state are being trained on the SCR process and tool. During the beginning of June a memo will go out to all staff informing them of the SCR process. At the beginning of July the first sample of cases to be reviewed will be sent out to each circuit manager. While the results are immediately available to the supervisor. The supervisor can forward their review results to the Circuit Manager. Individual review results will be sent to a Central Office database. We anticipate that we will post aggregate results on the CD Intranet on a quarterly basis beginning in November.*

Systemic Factors

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

Item 25: Provides a process that ensures that each child has a written case plan to be developed jointly with the child's parent(s) that includes the required provisions. The method of measurement PRR IV-15 was changed during the annual meeting in March to PRR IV-8.

(25.1) – **Improve family assessment and case plan tools to better link service provision to the needs of the family identified in the initial and ongoing assessments.** Refer to S2.3.1. All benchmarks in this action step have been completed.

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

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

(25.4) – **Maximize parental/family involvement in Family Support Team Meetings.** Refer to S2.3.2. All benchmarks in this action step have been completed.

(25.5) – **Improve staff facilitation skills for Family Support Team Meetings.** There are no benchmarks due for this action step in Quarter 5.

Item 26: Process for 6-month case reviews

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

(26.2) – **Recruit 3rd party participants for Administrative Reviews.**

b. Circuit Managers recruited and trained a pool of qualified volunteers to participate in six month administrative reviews. All regions have recruited and train some third party reviewers. However, recruitment and training must be ongoing in order to keep a pool of third party reviewers available. Some of the activities include:

- Invitations sent to community resources for informational meetings to recruit third party reviewers
- Held recruitment meetings and secured names of interested parties and have utilized them in the PPRT process

- Utilizing Senior Services or FSD staff as third party reviewers
- Ministers, Retired School Teachers, Mental Health providers in community will assist
- Retired staff who know the system well are utilized as third party reviewers
- Staff made aware of all names on list
- Supervisors are responsible for distribution of list
- Most of those recruited are very familiar with the Missouri Child Welfare System and no additional training necessary
- Plans have been made to train third party reviewers that have no knowledge or background in the public child welfare system.

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

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

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

(27.2) – **Implement training to develop testifying skills for CD staff.**

e. Based on evaluation and technical assistance curriculum modified. The curriculum was reviewed and approved by DLS. NRC shared written materials for consideration. The revisions were completed in March 06.

(27.3) – **Increase the timeliness of 12 month Permanency Hearings.**

j. Incorporated new FST policy into BASIC and OJT training. The policy clarification relating to FST and PRR was distributed to staff on April 7, 2006. The new policy was added into BASIC in April and is being trained as part of the current session.

<http://www.dss.mo.gov/cd/info/memos/2006/cd0650.pdf>

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

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

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

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

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

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

(28.5) – Collaborate with OSCA to amend 211.227 RSMo to ensure consistency w/ASGA requirements regarding filing of TPR petitions w/in 60 days of a judicial determination that the child is an abandoned infant, or that no Reasonable efforts are required. Benchmarks in this action step are not due this quarter or were previously met.

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

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

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

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

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

Item 33: Ongoing training for staff

(33.1) – Develop supervisory training for front line supervisors. Benchmarks in this action step are not due this quarter or were previously met.

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

(33.3) – Develop advanced in-service training module for Family-Centered Services.

g. Professional Development and Training began training advanced Family-Centered Services training module and made revisions. Staff Development and Training (SD&T)

piloted the Family Centered-Services in-service training in St. Louis County during January 2006. Training evaluations and input from the trainees were used to fine tune the curriculum in February. In the next several months SD&T are planning to train a few more stand alone sessions to further refine the curriculum.

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

e. CD Administration approved advanced Family-Centered Out-of-Home Care Services in-service training module. *Addressed in the 4th quarter update.*

f. Professional Development and Training began training advanced Family-Centered Out-of-Home Care Services curriculum in one metro and one rural site. *Addressed in 4th quarter update.*

g. Professional Development and Training evaluated advanced Family-Centered Out-of-Home Care Services training module and made revisions. *The field test training of the FCOOHC in-service was completed on February 28, 2006. Revisions have been made based on feedback and recommendations.*

(33.5) – Enhanced On-The-Job (OJT) Training. *Per 4th quarter renegotiation, benchmarks d-i have been added.*

<i>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).</i>	<i>P-Jan 06 A-Jan 06</i>
<i>33.5.e Identified core skills/ competencies that CD will expect new staff to have after completing BASIC.</i>	<i>P-Apr 06 A-Apr 06</i>
<i>33.5.f Beginning skills guide to be developed for use by supervisors.</i>	<i>P-Apr 06 A-Apr 06</i>
<i>33.5.g Supervisors commented on the skills/guide list.</i>	<i>P-Jun 06 A-</i>
<i>33.5.h Skills guide modified after comment periods.</i>	<i>P-Jun 06 A-</i>
<i>33.5.i Skills guide/list available for statewide use by supervisors.</i>	<i>P-Aug 06 A-</i>

d Created a core team consisting of social work specialists, supervisors, workers and trainer to enhance the provision of On-the-Job Training (OJT). *Members of the core team consist of:*

- Lanette Bowring – NE Region Children Services Specialist*
- Jody Scherer – SW Region Children Services Specialist*
- Stacie Lee – SE Region Children Services Specialist*
- Krista Mansholt – St. Louis Co. Children Services Specialist*
- Elizabeth Schwach – St. Louis Co. Supervisor*

Cindy Miller – Training Unit Manager
 Julia Adami – Circuit Manager, 2nd circuit

e. Identified core skills/competencies that CD will expect new staff to have after completing BASIC. The competencies to be used are those currently used in Child Welfare Practice Training. See attached.

f. Beginning skills guide to be developed for use by supervisors. *The attached Supervisor's guidebook has been sent for front line supervisors in selected circuits to use and comment.*

(33.6) – **Create training advisory committee to annually assess needs and evaluate training.** *Benchmarks in this action step have been renegotiated and due in subsequent quarters.*

33.6.a Professional Development and Training created state training advisory committee, including schools of social work.	P-Mar 05 R-Oct 06 A-
33.6.b Advisory committee developed a mission statement.	P-Apr 05 R-Oct 06 A-
33.6.c Advisory Committee developed a written plan for assessing training needs	P-May 05 R-Nov 06 A-
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.** *All benchmarks in this action step have been completed.*

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

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

Item 35: Service array

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

(35.2) – Increase the ability of staff and families to access Alcohol and Drug Abuse Services (ADA). Benchmarks in this action step are not due this quarter or were previously met.

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

(35.4) – Increase availability of and access to parenting classes and family/parent aide services.

b. Developed performance based CTS contracts for family/parent aide and parenting class service. Children's Treatment Services (CTS) are intended to supplement the casework of staff. These services, including family/parent aide services are used to reduce risk and improve family functioning and are currently available in each region. The overall quality of the service delivered by the treatment provider must be evaluated constantly by local staff to ensure that family members receive appropriate intervention. Other than addressing provider compliance and effectiveness issues, it is virtually impossible to develop one statewide fee for service performance contract.

In the current contract, if a provider's level of effectiveness is not adequate, local staff must take steps to address concerns with the provider. Documented continued ineffective service may result in the withdrawal of authorizations.

For compliance staff looks at the following issues:

- Did the provider begin service delivery promptly?
- Was the provider's initial 30-day report received on time?
- Is the provider available to discuss the service delivery and results with staff?
- Were the provider's subsequent 60-day reports received in a timely manner?
- Did the provider consistently report changes?

The following issues are considered when evaluating the effectiveness of the contracted service provider:

- Did the provider establish a constructive relationship with household members?
- Were the provider's activities appropriate?
- Has there been progress toward achieving desired outcomes for the family?
- Do family members feel they have benefited from the service?
- Does the provider identify specific areas of progress or benefit for the family?

While the Contract Management Unit has convened a work group to revise the current contract, we do not anticipate any major changes to the RFP than what is currently in the contract.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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