Data from the Base reviews conducted during the 2nd, 3rd, and 4th quarters was arrayed by the five Windows into Practice: Assessment, Family Engagement, Service Planning and Provision, Promoting Case Progress, and Supervision. The progress chart below documents consistent improvement over the 2nd and 3rd quarters for Assessments, Family Engagement, Promoting Case Progress, and Supervision.

**Assessment**

**Strengths:** The Base reviews documented that assessments were consistently found for all youth reviewed between the ages of 13 and 15 years of age. Additionally, assessments for residential group care were also completed when required for all youth reviewed; concerted efforts were made during post-placement supervision to manage the risks; exit interviews were completed and appropriate actions were taken; ongoing assessments of the child’s and out-of-home care provider’s needs were conducted; and assessments of the child’s mental/behavioral health needs were conducted.

**Opportunities:** The Base reviews documented deficiencies in completing the initial and six-month assessments in the Florida Safe Families Network (FSFN). Additional focus is...
needed in documenting a thorough safety assessment prior to reunification or placement; documenting a staffing or assessment prior to a child’s placement or placement change; documenting an ongoing assessment of a mother’s and father’s needs for case planning purposes; and consistently ensuring the assessment of a child’s educational, physical, and dental healthcare needs.

**Family Engagement**

**Strengths:** The Base reviews documented that parents were notified of the child’s placement changes; concerted efforts were made to ensure visitation between the child, parents, and siblings; and concerted efforts were made to maintain the child’s important connections.

**Opportunities:** Additional focus is needed to encourage the mother and father to participate in meaningful decision-making; supporting the mother’s and father’s engagement with services, actively involving all of the case participants in the case planning process; and ensuring informed consent or court approval was obtained for the use of each psychotropic medication.

**Service Planning and Provision**

**Strengths:** The Base reviews documented the initiation of appropriate interventions when a child was re-abused or re-neglected; concerted efforts were made to provide or arrange for appropriate services for the family to protect the child; ensured service referrals are consistent with the identified service needs; documented ongoing efforts to identify, locate and evaluate other potential relative placements when a child remains in a licensed or unlicensed placement; appropriately monitored youth between the ages of 15 and 18; and the quality of contacts focused on the issues relevant to the child’s safety, permanency, and well-being.

**Opportunities:** Additional efforts and focus are needed in ensuring all immediate and emerging safety concerns are addressed; and ensuring the court is accurately informed of both the child’s placement changes and the reasons for the changes. Additionally, youth were not consistently afforded opportunities to participate in normal life activities in the foster home and in the community. The frequency of the case manager’s contacts with the mother, father, child and caregiver was not documented consistent with the minimum requirement of every 30 days when the goal is reunification or maintain and strengthen; and although there was some improvement overall, there exist
opportunities for improvement in the area of assessment and ensuring appropriate services are provided to address the child’s physical and dental healthcare needs, as well as the child’s mental and behavioral health needs.

Promoting Case Progress

**Strengths:** The Base reviews documented the child’s current placement was stable and appropriate to meet the child’s needs; case records contained a current case plan with an appropriate goal; case plan was designed to achieve permanency, safety, and stability; child’s current placement was in close proximity to the parents to facilitate face-to-face contact; appropriate steps were taken to process and approve adoptive families; and judicial reviews were held timely and provided pertinent and required information to the court.

**Opportunities:** The case record failed to consistently document children remained safe at home and did not re-enter care within 12 months of discharge. Additional effort is needed to ensure children are placed with all siblings in out-of-home care; and case plans routinely address visitation. Focus is also needed on documenting ongoing two-way communication with the service providers involved with the family. Ongoing collaboration is critical to the service provider understanding the status of the case, and to the case manager’s ability to accurately assess the family’s progress. A completed Indian Child Welfare Act inquiry was not consistently found in the records reviewed. Additional focus is also needed in ensuring that a TPR petition is filed timely for children in out-of-home care for at least 12 of the most recent 22 months, and consistently document compelling reasons for not filing the TPR petition. Finally, consistently documenting the appropriate steps taken to identify and recruit an adoptive family.

Quality of Supervision

**Opportunities:** The Base reviews documented that the supervisory reviews were not documented quarterly as required. Once completed, the supervisor did not document consideration of all aspects of the child’s safety, permanency, and well-being; or ensure consistent follow through on the supervisory guidance and direction provided. Revisions will be made to consider implementing a format for documenting supervisory reviews that specifically address the following:

| Participants: | (Include individuals present for supervisory review completion) |
| Purpose: | Supervisory Qualitative Discussion |
| Child Safety: | What is the current level of risk? |
What are the immediate safety actions warranted?

**Case Status:**
- What progress was made in achieving permanency/stability (address ongoing two-way communication with service providers)?
- What barriers exist to achieving permanency/stability?
- What well-being issues were addressed or need to be addressed?
- What actions were completed since the last review and what actions remain?

**Next Steps:**
- What supervisory guidance and direction is needed?

**Note:** Supervisory review format taken from the Mentoring Through Qualitative Discussion Trainer Guide.

**Addressing Findings:** The opportunities for improvement that are listed above will be addressed through the provision of additional trainings, evaluating the need for additional specialized positions and revising processes to include policies and procedures, when applicable.