Case Management Side-by-Side
And In-Depth Review Report

Region: Northeast          Date of Review: January 10 to January 14, 2011

1. Practice Trends
The chart below compares the overall percent achieved by area of practice with the percent achieved in the first, second and third quarters of fiscal year 2010/2011.

A. Assessment
A thorough assessment is the foundation of effective practice with children and families. A family centered assessment focuses on the entire family and encourages the family’s participation in identifying their strengths and needs.
Strengths: The third quarter review documented excellence (100%) in some of the standards related to assessment. Full compliance was noted in ensuring children served through out-of-home care are free from re-abuse and re-neglect. Additionally, full compliance was noted in completing exit interviews when an age appropriate child in a placement 30 or more days moves from one licensed placement to another. Full compliance was also noted in assessing the mental/behavioral health needs of children served through out-of-home care, and for children served in-home, when this issue was relevant to the reason for the agency's involvement. One of the eight focus children in the review sample had reached 13 but not yet 15 years of age, and a Pre-Independent Living Assessment was completed. One youth in the sample met the criteria for efforts to manage the risks following reunification to prevent re-entry into out-of-home care.

Opportunities: The third quarter review documented (50%) in the standard related to ensuring children served in-home care are free from re-abuse and re-neglect. Assessments are the foundation for ensuring child safety, and sound decision-making. Additional focus is needed on ensuring initial (0%) and updated (38%) family assessments are thorough and completed timely. Improvement is also needed in ensuring a thorough safety assessment of the home is completed prior to reunification or placement of a child in an unlicensed out-of-home care setting (67%). For children age 11 and older, living in a licensed placement for six months or longer, with more than one placement, and suffering from serious behavioral problems, the case manager is required to assess whether the child's needs could be better met in a residential group care setting. One youth in the sample met the criteria, and an assessment for residential group care was not found (0%). The records for three of the six youth (50%) did not document a dental health care assessment.

The case manager is required to conduct an ongoing assessment of the mother's (43%), father's (0%), child's (71%) and out-of-home caregiver's (50%) needs for case planning purposes through a formal or informal process to identify the services needed to achieve case plan goals. Continued efforts are needed to ensure these assessments are addressed and documented for all participants.

B. Family Engagement

Family engagement is critical to achieving a successful outcome with the children and families served, and must involve the family's participation in the assessment, identification of strengths and needs, and input and or decision-making regarding services.

Strengths: No areas of excellence (100%) were identified in the area of Family Engagement.
Opportunities: The areas in need of improvement included documenting parents are notified in advance of all planned placement changes (40%), and within 72 hours for unplanned (40%) placement changes. Additional focus is also needed in ensuring visitation or other forms of contact occur between siblings in out-of-home care (50%). The records failed to document concerted efforts to maintain each child’s important connections (14%). These connections may include extended family members, significant others, siblings not in care, a close friend, teacher or coach. Face-to-face contact between and among siblings in out-of-home care should be maintained weekly unless it is not feasible, and at a minimum of every 30 days (50%). The majority of cases reviewed failed to document concerted efforts to encourage and support the mother’s (14%) and father’s (14%) participation in decision-making about the child’s educational performance and needs; in-school and/or extracurricular activities, medical and mental health or substance abuse appointments. Additional efforts are also needed to encourage and support the mother’s (50%) and father’s (50%) engagement with services, and in documenting the active involvement of all case participants in the case planning process (38%). For children in foster care prescribed psychotropic medication, case management and the prescribing physician must attempt to obtain express and informed consent, and if not possible court authorization for the use of each psychotropic medication. In one of the three applicable cases reviewed, informed consent was not obtained from the parent whose rights remained intact (0%).

C. Service Planning and Provision
Service planning and provision must involve the family’s participation and include frequent updates based on the case manager’s and family’s assessment of the progress made. Case plans should be thoughtful and focused on outcomes, and practical in assisting the families with meeting the practical needs of family members.

Strengths: The third quarter documented a number of areas of excellence (100%), including ensuring immediate and ameliorative interventions were initiated and appropriate services were provided in an effort to protect the child and prevent the child’s entry into out-of-home care. The court was consistently and accurately informed of the child’s placements, and reasons for any changes in placement. For youth 15 but not yet 18 years of age, the agency appropriately monitored the youth’s progress in preparing for independence through periodic staffings.

Opportunities: Continued performance improvement is needed in addressing the immediate and emerging safety concerns and additional needed interventions to protect the child (67%). Examples immediate and emerging safety concerns could include a domestic violence incident, inadequate supervision, substance abuse relapse, new abuse report or an incomplete background check (67%). Additional focus is needed on ensuring the case manager documents efforts to identify, locate and evaluate other potential maternal and paternal relatives on that could be a placement resource for any child under active supervision and residing with a relative or non-relative caregiver, regardless of the stability of the current placement (0%). The intent is to ensure an alternative placement is available in the event the current placement ends. The search for maternal and paternal relatives as possible placement resources must continue until all relatives are exhausted.
All teen-aged children in licensed care are to be provided opportunities to participate in normal life skill activities in the foster home and in the community, but the records failed to document this was occurring with the two focus children reviewed (0%). The frequency (13%) and quality (50%) of the case manager’s contacts also need to be improved. The reviewer is required to determine if contacts occurred every 30 days with the mother and father (when the goal is reunification), and with the child and caregiver in all cases; whether the child was seen separate and away from the caregiver; and whether the case manager focused on the issues relevant to the child’s safety, permanency and well-being. In several cases the child was under the age of five and general information was documented, but no specific observations of the child’s developmental progress or interactions were noted. Improvement is also needed in identifying each child’s educational needs, and engaging necessary services (75%). Additionally, concerted efforts are needed to provide appropriate services to address the child’s identified physical health needs (67%).

D. Promoting Case Progress
Case progress is promoted through a number of avenues. Case plans must be current, appropriately focused on the presenting concerns, and identify appropriate tasks and accessible services. The case record must document ongoing two-way communication between the case manager and the service providers to ensure all involved understand the progress made, as well as any concerns or barriers to the family’s success. When removal is necessary, it is critical for the child to be in a stable and appropriate placement located in close proximity to the parents. When termination of parental rights is necessary, the case record must document appropriate steps are taken to timely achieve permanency for the child.

Strengths: The third quarter documented excellence (100%) in ensuring the children reviewed experienced no more than two out-of-home care placement settings during the period under review. For children not placed in close proximity to the parents, the record noted the placement was based on the child’s needs and achieving the case plan. When an out-of-state placement was explored, the completed Interstate Compact for the Placement of Children (ICPC) packet was sufficient to enable the receiving state to make an appropriate decision. When termination of parental rights occurred, appropriate steps were documented to approve an adoptive family matching the child’s needs. For teenage youth age 13 and older, the case record documented guidance was provided in developing an education and career path based on each youth’s individual abilities and interests.
Opportunities: Six of the eight cases ensured the record contained a current (not expired) case plan (75%) and only two of five addressed visitation and other contact plans with case participants (40%). Continued effort is needed to ensure the case manager documents ongoing two-way communication with service providers (43%). The provider contacts should be purposeful and directed toward achieving the case plan goal, and include sharing information from both the case manager’s and service provider’s perspective. One of the three applicable cases involved siblings in out of home care that were not placed together (33%). Of the two cases documenting separated siblings, one sibling group was separated in order to address the child’s special needs (50%). An Indian Child Welfare Act (ICWA) inquiry regarding the family’s possible Native American or Alaskan Native heritage is required for all judicial cases, and was not found for two of the eight applicable children (75%). Where an out-of-state placement was explored, the completed ICPC packet was submitted within the required timeframe (50%). For children in out-of-home care for at least 12 of the most recent 22 months, a TPR petition is to be filed or joined (33%), or a compelling reason for not filing the petition is required to be documented in the court order (0%).

A child’s statement that he or she does not want to be adopted does not constitute a compelling reason. In the two cases involving youth prescribed medications, the Florida Safe Families Network (FSFN) data fields did not accurately reflect the medication information (0%). Judicial reviews must be held at a minimum every six months and provide detailed information to update the court (50%). For children with a goal of Another Planned Permanent Living Arrangement (APPLA), concerted efforts are required to ensure the caregiver made a permanent commitment to provide for the youth until leaving care, and the youth is adequately prepared to transition into independent living (0%). This standard applied to one case. One case involved a 16-year-old with an APPLA goal and no caregiver committed to providing care for the youth until she reached 18.

E. Quality of Supervisory Reviews, Direction and Follow-up
Supervision is critical to ensuring timely and appropriate assessments, engaging families, ensuring effective and appropriate service planning and service provision, and monitoring case plan progress.

Strengths: No areas of excellence (100%) were identified in the areas of supervisory review, direction and follow-up.

Opportunities: The third quarter review documented concerns regarding supervisory reviews. Supervisory reviews were documented every 90 days for three of the eight cases reviewed (38%). The completed reviews did not consistently document consideration of all issues relevant to the child’s safety, permanency, and well-being (50%). In three of the eight reviews (63%) the supervisor failed to ensure follow through on the guidance and direction provided.
2. In-Depth Review Findings

A. Findings from Case-Specific Interviews
The first case involved a seven-year old child in out-of-home care since May 2010. The child was noted to have special health care needs and had remained in the care of his paternal grandfather since sheltered. The case goal was reunification with the mother, concurrent with permanent guardianship. The mother was in an in-patient substance abuse treatment program completing her case plan tasks, and the father was incarcerated in state prison. The child was diagnosed with Autism, and suffers from a brain tumor. He is prescribed several medications, including psychotropic medication, for seizures.

The child was observed in the paternal grandfather’s home. Although the child has difficulty communicating, he was able to understand when spoken to, and was engaging. He demonstrated his understanding of colors, when asked to show each one of his colored markers. He easily responded to the paternal grandmother’s requests to feed the fish, get his markers and assist her in the kitchen.

The paternal grandfather was interviewed and explained taking care of his grandson was a full time job. He takes the child to doctors’ appointments about four times a month, and also takes him to visit on Saturdays with his mother in Jacksonville. He said it’s difficult to keep up with the child’s needs, and expects it to be more challenging as the child gets older. However, it was clear they are very bonded with the child and would not consider placing him in foster care.

The paternal grandparents said they hope the mother is able to regain custody of her child, but if that is not possible they will continue to care for the child as long as they can. He also explained his son is in prison about 16 hours away from their home and it’s difficult for them to drive to see him.

The Guardian ad Litem was interviewed and advised she is kept informed of the family’s progress; attends court hearings and staffings; and believes case goal is appropriate. She indicated the child’s caregiver provides for all of his needs and the family is appropriately matched with their service needs. The case worker stated the child’s teachers have helped refer the relatives to different resources. He advised it was a challenge for him to engage the mother in services, because she did not want to go into inpatient treatment. He talked with her a number of times until he was able to convince her it was the best plan for her. The case manager stays in touch with the mother, sends letters to the father, and communicates with the providers. The father is actively working his case plan while incarcerated in prison.

The second case involved a 16-year-old youth in licensed foster care and receiving Department of Juvenile Justice (DJJ) services. In October 2007, the child was removed from her relatives and has remained in licensed foster care since.
The youth is currently residing in a DJJ facility and has a projected release date of May 2011. The agency plans to place her with her maternal grandmother out of state. She stated she has contact with her mother and maternal grandmother via telephone calls, but her father has not been in touch with her. Since entering licensed care, she has had no contact with her siblings who continue to live with relatives. She stated she is looking forward to living with her maternal grandmother upon her release. She stated she is attending school, involved with the Boys and Girls Club, and working for the Department of Transportation (DOT).

The mother was not interviewed by telephone, because she did not answer her cell phone. The maternal grandmother stated she is excited to know her granddaughter will be coming to live with her when she is released. Her granddaughter lived with her recently when she was on runaway. While living with her, her granddaughter reportedly did not get into any trouble, and got along well with her cousins.

The assigned case manager was interviewed at KFF. She reported she had been assigned to the case for approximately one month. She advised she had talked with the child and the assigned DJJ worker once since being assigned to the case. She said she had reviewed the file and knew about the possible placement with the maternal grandmother. She is working to address the youth’s needs and assure the courtesy worker is providing the necessary Independent Living skills and supervision.

B. System Assessment (if applicable)
A systemic review will not be conducted during this fiscal year.

3. Request for Action
During the third quarter Side-by-Side Review, six administrative Requests for Action (RFA) were generated. The first RFA involved an expired case plan and the need to add new case participants to an open case. The second RFA documented the need to correct the information regarding psychotropic medications in FSFN, and to complete an ICWA inquiry. The third RFA documented the need to find or obtain the required home-study and related background checks. The fourth RFA noted the need to re-staff the case plan goal, request an updated Interstate Compact for the Placement of Children (ICPC), and consult with CLS on the parental consent for an EPI pin. The fifth RFA documented the need to correct the psychotropic medication information in FSFN, and follow up on the CBHA recommendations for information regarding the Medicaid Waiver. The sixth RFA documented concern about inappropriate discipline or abuse by a foster parent. All were tracked to successful resolution.
### 4. Data Findings by Standards

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<th>I</th>
<th>Assessment. How well is the agency doing in conducting critical assessment activities?</th>
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<tbody>
<tr>
<td>1</td>
<td>No child living in the home was abused or neglected. (applicable to in-home cases)</td>
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<td>2</td>
<td>The focus child was not re-abused or re-neglected. (applicable to out-of-home cases)</td>
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<td>5</td>
<td>A thorough initial family assessment was conducted following the investigatory safety assessment that sufficiently addressed child safety factors and emerging risks. (applicable to all cases)</td>
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<tr>
<td>7</td>
<td>The updated family assessment was focused on the immediate and prospective safety of the child, as well as any changes and implications in the family's situation related to emerging concerns and service needs. (applicable to all cases)</td>
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<td>9</td>
<td>A thorough safety assessment of the home was completed prior to reunification or placement of the child in an unlicensed out-of-home care setting. (applies to cases involving post placement supervision, and where a child will be placed in an unlicensed [relative/non-relative] setting.)</td>
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<td>10</td>
<td>Concerted efforts were made during post-placement supervision to manage the risks following reunification and prevent re-entry into out-of-home care. (applicable to in-home post-reunification cases)</td>
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<tr>
<td>12</td>
<td>A multi-disciplinary staffing/assessment for placement planning was conducted before each placement to ensure the placement or move was unavoidable. (applicable to out-of-home cases)</td>
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<td>17</td>
<td>In cases involving a child in a licensed placement setting, an exit interview was conducted with the child when moved from one placement to another, and appropriate action was taken if the exit interview documented a concern. (applicable to licensed out-of-home cases)</td>
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<td>44</td>
<td>If the case involves a youth who has reached 13 but not yet 15 years of age and he/she is living in a licensed, out-of-home placement, a Pre-Independent Living Assessment was completed that identified service needs and services were provided. <em>(applicable to licensed out-of-home cases)</em></td>
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<td>48</td>
<td>An ongoing assessment of the child(ren)'s needs was conducted to provide updated information for case planning purposes. <em>(applicable to all cases)</em></td>
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<tr>
<td>49</td>
<td>An assessment for residential group care was completed when required. <em>(applicable to out-of-home cases)</em></td>
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<tr>
<td>50</td>
<td>An ongoing assessment of the mother's needs was conducted to provide updated information for case planning purposes. <em>(applicable to all cases)</em></td>
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<tr>
<td>52</td>
<td>An ongoing assessment of the father's needs was conducted to provide updated information for case planning purposes. <em>(applicable to all cases)</em></td>
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<tr>
<td>54</td>
<td>An ongoing assessment of the out-of-home care providers or pre-adoptive parent's service needs was conducted in order to ensure appropriate care for the child. <em>(applicable to out-of-home cases)</em></td>
</tr>
<tr>
<td>58</td>
<td>Concerted efforts were made to assess the child's educational needs during out-of-home placement. <em>(applicable to out-of-home cases and in-home cases if relevant)</em></td>
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<tr>
<td>61</td>
<td>Concerted efforts were made to assess the child's physical health care needs. <em>(applicable to out-of-home cases and in-home cases if relevant to why the child and family are involved with the dependency system)</em></td>
</tr>
<tr>
<td>63</td>
<td>Concerted efforts were made to assess the child's dental health care needs. <em>(applicable to out-of-home cases and in-home cases if relevant)</em></td>
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<tr>
<td>65</td>
<td>An assessment(s) of the child's mental/behavioral health needs was conducted. <em>(applicable to out-of-home cases and in-home cases if relevant)</em></td>
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**Total**

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<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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<td>Y</td>
<td>31</td>
<td>51</td>
<td>57</td>
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<td>N</td>
<td>33</td>
<td>21</td>
<td>33</td>
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<tr>
<td>NA</td>
<td>80</td>
<td>72</td>
<td>54</td>
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**Overall % of Yes for Assessment**

|   | 48% | 71% | 62% |
### Family Engagement: Is the agency engaging and supporting families, to include regular contact and involvement in decision-making?

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<td>II</td>
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<tr>
<td>18</td>
<td>The parents were notified of all the child’s placement changes. (applicable to out-of-home cases)</td>
<td>0%</td>
<td>0%</td>
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<tr>
<td>30</td>
<td>Concerted efforts were made to ensure visitation (or other contact) between the child and parents was sufficient to maintain or promote the continuity of the relationship between them. <em>(applicable to out-of-home cases)</em></td>
<td>100%</td>
<td>100%</td>
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<tr>
<td>31</td>
<td>Concerted efforts were made to ensure visitation (or other forms of contact if visitation was not possible) between the child and his or her siblings and it was of sufficient frequency to maintain or promote the continuity of the relationship. <em>(applicable to out-of-home cases)</em></td>
<td>0%</td>
<td>33%</td>
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<tr>
<td>32</td>
<td>Concerted efforts were made to maintain the child’s important connections. (applicable to out-of-home cases)</td>
<td>67%</td>
<td>100%</td>
</tr>
<tr>
<td>36</td>
<td>The mother was encouraged and supported to participate in making decisions about her child’s needs and activities. (applicable to out-of-home cases)</td>
<td>20%</td>
<td>100%</td>
</tr>
<tr>
<td>37</td>
<td>The father was encouraged and supported to participate in making decisions about his child’s needs and activities. (applicable to out-of-home cases)</td>
<td>0%</td>
<td>50%</td>
</tr>
<tr>
<td>51</td>
<td>Concerted efforts were made to support the mother’s engagement with services. <em>(applicable to all cases)</em></td>
<td>50%</td>
<td>33%</td>
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<tr>
<td>53</td>
<td>Concerted efforts were made to support the father’s engagement with services. <em>(applicable to all cases)</em></td>
<td>75%</td>
<td>67%</td>
</tr>
<tr>
<td>55</td>
<td>Concerted efforts were made to actively involve all case participants in the case planning process. <em>(applicable to all cases)</em></td>
<td>38%</td>
<td>75%</td>
</tr>
<tr>
<td>67</td>
<td>Express and informed consent or court authorization was obtained for the use of each psychotropic medication deemed necessary by a physician to address the child’s mental/behavioral health needs. (applicable to out-of-home cases)</td>
<td>N/A</td>
<td>67%</td>
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**Total**

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<th>Total Y</th>
<th>16</th>
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<td></td>
<td>Total N</td>
<td>22</td>
<td>12</td>
<td>32</td>
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<td></td>
<td>Total NA</td>
<td>42</td>
<td>45</td>
<td>30</td>
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<tr>
<td></td>
<td>Overall % of Yes for Family Engagement</td>
<td>42%</td>
<td>66%</td>
<td>36%</td>
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<td>III</td>
<td>Service Planning and Provision.</td>
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<td>Does the agency provide services to children and families to promote positive outcomes and improve child-well-being?</td>
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<td>3</td>
<td>If a child was re-abused or re-neglected, immediate and ameliorative interventions were initiated on behalf of the child. <em>(applicable to all cases)</em></td>
<td>N/A</td>
<td>N/A</td>
<td>100%</td>
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<tr>
<td>4</td>
<td>Concerted efforts were made to provide or arrange for appropriate services for the family to protect the child and prevent the child’s entry into out-of-home care. <em>(applicable to in-home cases)</em></td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
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<tr>
<td>6</td>
<td>Completed service referrals were consistent with the needs identified through investigative assessment(s), and other assessments related to safety. <em>(applicable to all cases)</em></td>
<td>100%</td>
<td>100%</td>
<td>86%</td>
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<tr>
<td>8</td>
<td>All immediate and emerging safety concerns were addressed and additional needed interventions were provided to protect the child. <em>(applicable to all cases)</em></td>
<td>75%</td>
<td>100%</td>
<td>67%</td>
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<tr>
<td>14</td>
<td>Concerted efforts were made to identify, locate and evaluate other potential relatives and other possible permanent placements for the child. <em>(applicable to out-of-home cases)</em></td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
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<tr>
<td>16</td>
<td>If No was entered for #15, all placement changes were planned in an effort to achieve the child’s case goals or to meet the needs of the child. <em>(applicable to out-of-home cases)</em></td>
<td>0%</td>
<td>N/A</td>
<td>N/A</td>
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<td>19</td>
<td>The court was informed of the child’s placements and reasons for changes in placement. <em>(applicable to out-of-home cases)</em></td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
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<td>46</td>
<td>The teen-aged focus child is afforded opportunities to participate in normal life skills activities in the foster home and community that are reasonable and appropriate for his/her respective age or special needs. <em>(applicable to licensed out-of-home cases)</em></td>
<td>0%</td>
<td>50%</td>
<td>0%</td>
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<tr>
<td>47</td>
<td>For youth 15 years of age but not yet 18, the agency appropriately monitored the youth’s progress toward successfully transitioning from foster care to independence through regular informative staffings.</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
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<tr>
<td>56</td>
<td>The frequency of the services worker’s visits with all case participants was sufficient to address issues pertaining to the safety, permanency goal, and well-being of the child. <em>(applicable to all cases)</em></td>
<td>13%</td>
<td>13%</td>
<td>13%</td>
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<td>57</td>
<td>The quality of the services worker’s visits with case participants was sufficient to address issues pertaining to the child’s safety, permanency and well-being. <em>(applicable to all cases)</em></td>
<td>13%</td>
<td>63%</td>
<td>50%</td>
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If educational needs were identified, necessary educational services were engaged. *(applicable to out-of-home cases and in-home cases if relevant)*

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<th>75%</th>
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Services effectively reduced or resolved the issues that interfered with the child’s education. *(applicable to out-of-home cases and in-home cases if relevant)*

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Concerted efforts were made to provide appropriate services to address the child’s identified physical health needs. *(applicable to out-of-home cases and in-home cases if relevant to the reason the agency is involved)*

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<th>25%</th>
<th>67%</th>
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Appropriate services were provided to address the child’s identified dental health needs. *(applicable to out-of-home cases and in-home cases if relevant)*

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Appropriate services were provided to address the child’s mental/behavioral health needs. *(applicable to out-of-home cases and in-home cases if relevant)*

<table>
<thead>
<tr>
<th></th>
<th>33%</th>
<th>75%</th>
<th>100%</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

| Total Y | 21 | 27 | 40 |
| Total N | 30 | 20 | 25 |
| Total NA | 77 | 81 | 63 |
| Overall % of Yes for Service Planning & Provision | 41% | 57% | 62% |

### IV Promoting Case Progress

Does the agency conduct activities that facilitate achieving and maintaining permanency for children?

<p>| | | | |</p>
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</table>

The child remained safe in his/her home after being discharged from out-of-home care and did not re-enter out-of-home care at least 12 months following discharge. *(applicable to out-of-home cases - life of case)*

<table>
<thead>
<tr>
<th></th>
<th>N/A</th>
<th>N/A</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

The child’s current placement is stable and appropriate to meet the child’s needs with no apparent or significant risks or projections of disruption. *(applicable to out-of-home cases)*

<table>
<thead>
<tr>
<th></th>
<th>67%</th>
<th>83%</th>
<th>86%</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

The child experienced no more than two out-of-home care placement settings during the period under review. *(applicable to out-of-home cases)*

<table>
<thead>
<tr>
<th></th>
<th>83%</th>
<th>100%</th>
<th>100%</th>
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</thead>
<tbody>
<tr>
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</tbody>
</table>

The case record contained a current (not expired) case plan. *(applicable to all cases)*

<table>
<thead>
<tr>
<th></th>
<th>75%</th>
<th>100%</th>
<th>75%</th>
</tr>
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<tbody>
<tr>
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</table>

The current case plan goal was appropriate based on the child’s, and family’s circumstances. *(applicable to all cases)*

<table>
<thead>
<tr>
<th></th>
<th>86%</th>
<th>88%</th>
<th>83%</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

The case plan specifically addressed visitation and other contact plans with all case participants. *(applicable to out-of-home cases)*

<table>
<thead>
<tr>
<th></th>
<th>100%</th>
<th>100%</th>
<th>40%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Description</td>
<td>71%</td>
<td>88%</td>
</tr>
<tr>
<td>---</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-----</td>
<td>-----</td>
</tr>
<tr>
<td>24</td>
<td>The case plan is designed to achieve permanency <em>(out-of-home cases)</em> and safety and stability <em>(in-home cases)</em> through appropriate tasks for the case participants.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>The services worker communicated with service providers about the effectiveness of services for involved case participants. <em>(applicable to all cases)</em></td>
<td>67%</td>
<td>71%</td>
</tr>
<tr>
<td>26</td>
<td>The child’s current placement was in close proximity to the parents to facilitate face-to-face contact between the child and parents while the child was in out-of-home care. <em>(applicable to out-of-home cases)</em></td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>27</td>
<td>If No was entered for #26, the location of the child’s current placement was based on the child’s needs and achieving the case plan goal. <em>(applicable to out-of-home cases)</em></td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>28</td>
<td>The child was placed with siblings who were also in licensed and/or non-licensed out-of-home care. <em>(applicable to out-of-home cases)</em></td>
<td>60%</td>
<td>0%</td>
</tr>
<tr>
<td>29</td>
<td>If No was entered for #28, there was clear evidence separation was necessary to meet the child’s needs. <em>(applicable to out-of-home cases)</em></td>
<td>0%</td>
<td>75%</td>
</tr>
<tr>
<td>33</td>
<td>An inquiry was made to determine if the child was of Native American or Alaskan Native heritage. <em>(applicable to out-of-home care and court ordered supervision cases - life of case)</em></td>
<td>50%</td>
<td>75%</td>
</tr>
<tr>
<td>34</td>
<td>If the child is of Native American or Alaskan Native heritage, the tribe was provided timely notification of its right to intervene in any state court proceedings seeking court ordered supervision, an involuntary out-of-home care placement or termination of parental rights. <em>(applicable to out-of-home and court ordered supervision cases - life of case)</em></td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>35</td>
<td>Concerted efforts were made to place the child in out-of-home care in accordance with the Indian Child Welfare Act placement preferences if the child was of Native American or Alaskan Native heritage. <em>(applicable to out-of-home and court ordered supervision cases - life of case)</em></td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>38</td>
<td>For cases in which an out-of-state placement was or is being explored for the focus child, a complete Interstate Compact for the Placement of Children (ICPC) packet requesting a home study was submitted within the required timeframe. <em>(applicable to out-of-home cases)</em></td>
<td>0%</td>
<td>N/A</td>
</tr>
<tr>
<td>39</td>
<td>The information provided in the ICPC packet regarding the focus child was sufficient to enable the receiving state to make an appropriate decision concerning approval of the proposed placement for the focus child. <em>(applicable to out-of-home cases)</em></td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>
If the child was in out-of-home care for at least 12 of the most recent 22 months or met other Adoption and Safe Families Act (ASFA) criteria for terminating parents' rights, a TPR petition was filed or joined. *(applicable to out-of-home cases - life of case)*

<p>| | | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>40</td>
<td>If a Termination of Parental Rights petition was not filed, there were compelling reasons and an exception for not filing the petition was documented. <em>(applicable to out-of-home cases)</em></td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td>Appropriate steps were taken to identify and recruit an adoptive family that matched the child's needs. <em>(applicable to out-of-home cases)</em></td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Appropriate steps were taken to process and approve an adoptive family that matched the child's needs. <em>(applicable to out-of-home cases when TPR has occurred)</em></td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>If the child is 13 years of age or older and in licensed foster care, the case management agency provided guidance and assistance in developing an educational and career path that is based on the child’s individual abilities and interests. <em>(applicable to licensed out-of-home cases)</em></td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>All data fields in the Florida Safe Families Network related to psychotropic medications appropriately and accurately documented the child's prescribed medications (applies to out-of-home cases).</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Judicial Reviews were held in a timely manner and Judicial Review Social Study Reports (JRSSR's) provided a thorough investigation and social study concerning all pertinent details relating to the child.</td>
<td>43%</td>
</tr>
<tr>
<td></td>
<td>For children with the goal of &quot;Another Planned Permanent Living Arrangement (APPLA),&quot; the agency made concerted efforts to provide the needed services that would adequately prepare the child for transition to adulthood. <em>(applicable to APPLA cases)</em></td>
<td>0%</td>
</tr>
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<table>
<thead>
<tr>
<th></th>
<th>Total Y</th>
<th>51</th>
<th>66</th>
<th>56</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total N</td>
<td>27</td>
<td>23</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>Total NA</td>
<td>122</td>
<td>11</td>
<td>113</td>
</tr>
</tbody>
</table>

|   | Overall % of Yes for Promoting Case Progress | 65% | 74% | 67% |
### V Quality of Supervisory Reviews, Direction and Follow-up

<table>
<thead>
<tr>
<th></th>
<th>Quality of Supervisory Reviews, Direction and Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Qualitative supervisory reviews and follow through were conducted as needed and required. (applicable to all cases)</td>
</tr>
<tr>
<td>20.1</td>
<td>Reviews were completed every 90 days;</td>
</tr>
<tr>
<td>20.2</td>
<td>Supervisor considered all aspects of the child’s safety, well-being and permanency; and,</td>
</tr>
<tr>
<td>20.3</td>
<td>Supervisor ensured follow through on guidance and direction or documented the reasons the guidance and direction were no longer necessary.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Total Y</th>
<th>Total N</th>
<th>Total NA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2</td>
<td>6</td>
<td>3</td>
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</table>

<table>
<thead>
<tr>
<th></th>
<th>Overall % of Yes for Quality of Supervisory Reviews</th>
<th>25% 75% 38%</th>
</tr>
</thead>
</table>

### VI Other Issues/Trends: None.

<table>
<thead>
<tr>
<th></th>
<th>TOTAL YES</th>
<th>TOTAL NO</th>
<th>TOTAL NA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>124</td>
<td>173</td>
<td>175</td>
</tr>
<tr>
<td></td>
<td>121</td>
<td>78</td>
<td>125</td>
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<tr>
<td></td>
<td>305</td>
<td>309</td>
<td>260</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>TOTAL % YES</th>
<th>51% 69% 58%</th>
</tr>
</thead>
</table>

Signed by:  

**Sue Pellet**  
NE Region Quality Manager  
March 1, 2011  
Date

**Jim Compton**  
NE Region Program Administrator  
March 1, 2011  
Date