

# CHAPTER 1: CONTINUOUS QUALITY IMPROVEMENT (CQI)

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**OUTCOME STATEMENT: CHILDREN AND FAMILY SERVICES WILL MEASURE AND EVALUATE THE QUALITY AND EFFECTIVENESS OF OUR WORK WITH CHILDREN AND FAMILIES.**

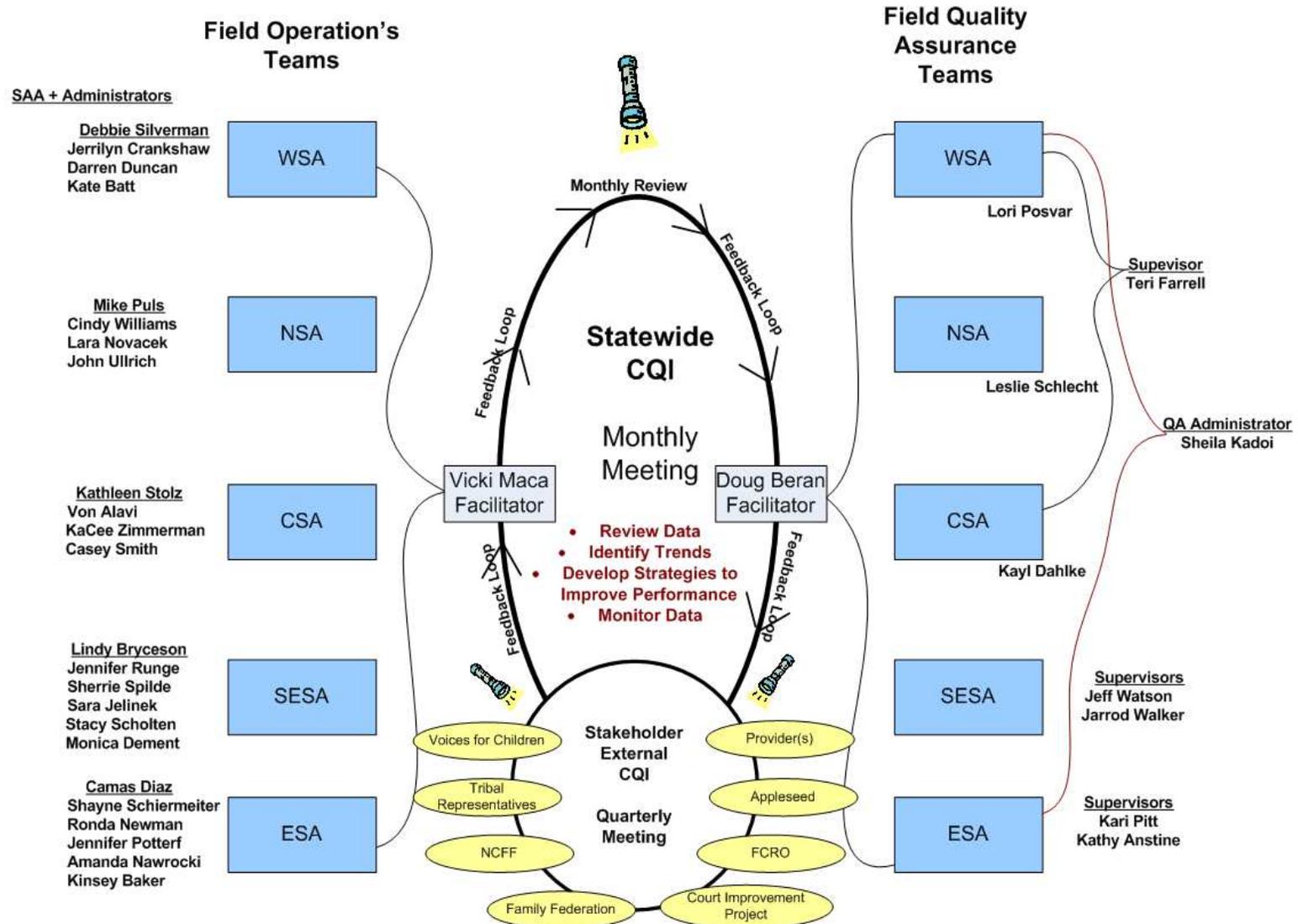
# Schedule of Discussion Subjects 2013

- January
  - Process Measures
  - Operations Data
  - SDM Quality
- February
  - Process Measures
  - SDM Quality
  - Turnover/Vacancy
- March
  - Process Measures
  - SDM Quality
  - COMPASS
- April
  - Process Measures
  - Intake Results
  - Operations Data
  - SDM Quality
  - Denials/Disruptions
- May
  - Process Measures
  - Intake Results
  - SDM Quality
  - Turnover/Vacancy
  - Caseload
  - Denials/Disruptions
- June
  - Process Measures
  - WSA CQI Discussion
  - Intake Results
  - COMPASS
  - SDM Quality
  - Local CQI Update
  - Ward Count Review
  - Wild Card Discussion – Youth re-entering care
- July
  - Process Measures
  - SESA CQI Discussion
  - Intake Results
  - Operations Data
  - SDM Quality
  - Denials/Disruptions
  - Wild Card Discussion
- August
  - Process Measures
  - Intake Results
  - SDM Quality
  - Turnover/Vacancy
  - Caseload
  - Wild Card Discussion (AFCARS Trial Home > 6 mos.)
- September
  - Process Measures
  - NSA CQI Discussion
  - Intake Results
  - COMPASS
  - SDM Quality
  - LB-1160 results
  - Maltreatment Recurrence
- October
  - Process Measures
  - CSA CQI Discussion
  - Intake Results
  - Operations Data
  - SDM Quality
  - Denials/Disruptions
  - Wild Card Discussion
- November
  - Process Measures
  - Intake Results
  - SDM Quality
  - Turnover/Vacancy
  - Caseload
  - Wild Card Discussion
- December
  - Process Measures
  - ESA CQI Discussion
  - Intake Results
  - COMPASS
  - SDM Quality
  - Ward Count Review
  - Wild Card Discussion

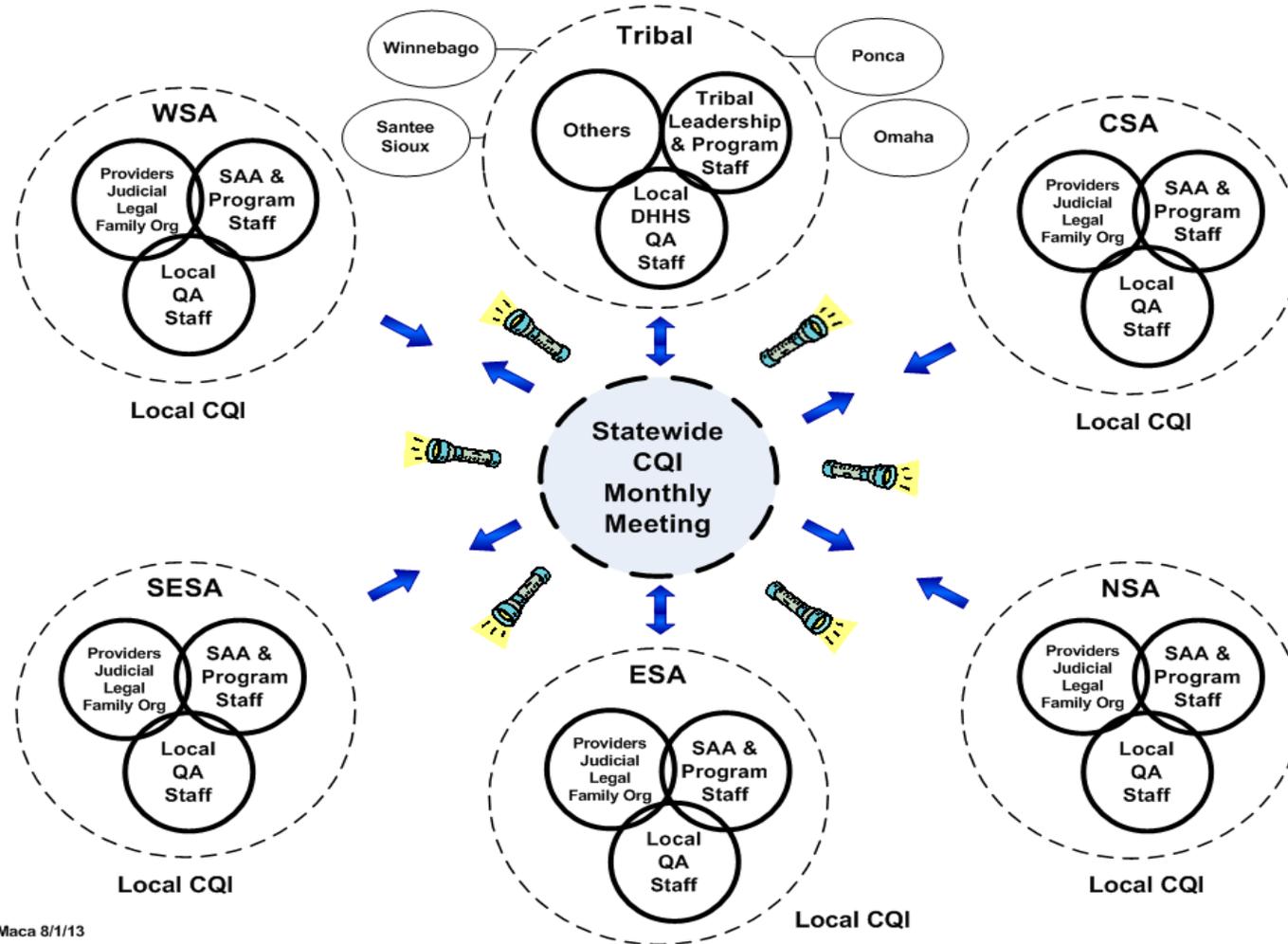
# Federal IM 12-07

- **CQI Structure**
  - Statewide Quality Assurance program with autonomous oversight and dedicated staff
  - Continual training of CQI staff is occurring and QA is collaboratively working with Policy, Training and Administrators to ensure QA's decisions are based upon common policy and to help policy with Administrator's situations
  - Written policies and procedures are being updated and produced where they don't exist
- **Quality Data Collection**
  - Common data collection and measuring process statewide
  - All QA staff are trained and utilize the same QA Tools
  - CFSR reviews are performed by the same staff and reported consistently
  - 2<sup>nd</sup> level reviews occur on all processes to ensure consistent QA and learning opportunities
- **Case Record Review Data and Process**
  - Quality unit is responsible for all case reviews
  - Case review system has been developed to randomly select cases statewide, provide the QA person with correct review questions and stores results in a non-editable location.
  - Case review system has been modified to allow for testing of specific CFSR questions by service area as needed and generate an email to the worker.
  - Inter-rater reliability testing is ongoing to ensure consistent scoring.
- **Analysis and Dissemination of Quality Data**
  - Statewide case review system has been developed to review all cases selected for review
  - Data is reported statewide and by service area
  - An extensive array of performance reports are created and distributed at monthly CQI meeting
- **Feedback to Stakeholders**
  - Results are used to inform training, policy, stakeholders, community partnerships and others as a means to identify and communicate improvement opportunities and areas of strength
  - Supervisors and field staff understand how results link to daily casework practices; results are used by supervisors and field leadership to assess and improve practice.
  - First stage of CQI communications is monthly Statewide CQI meeting. Second stage of CQI communications is local CQI meetings. At the local level 4-6 areas of improvement have been selected and structured teams created to analyze the results and identify improvement opportunities.

# Statewide CQI Process



# Local CQI Process



# CHAPTER 2: PREVENTION AND EARLY INTERVENTION

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**OUTCOME STATEMENT: DELIVER AN EFFECTIVE SYSTEMS RESPONSE THAT IS FLEXIBLE, FAMILY CENTERED AND FOCUSED ON PREVENTING CHILD ABUSE AND NEGLECT**

**Goal Statement: Identify and develop the community-based prevention supports that allow children to safely remain in their home without CFS involvement**

## Safely Decrease the Number of State Wards

### Strengths/Opportunities:

June 25, 2012 = 6,073 Statewards  
 June 17, 2013 = 5,369 Statewards  
 Statewide Reduction of 704 statewards for time period June 2012 to June 2013

### Barriers:

### Action Items:

#### \*Completed:

- 40 Day Focus Initiatives
  - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
  - B.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
  - C.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

#### \*Planned:

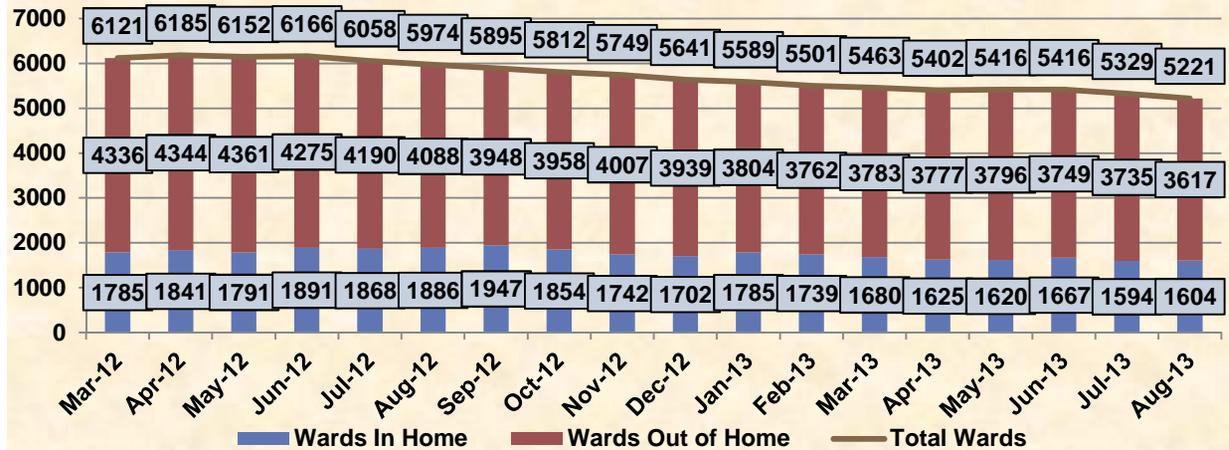
### CQI Team Priority:

\* Statewide

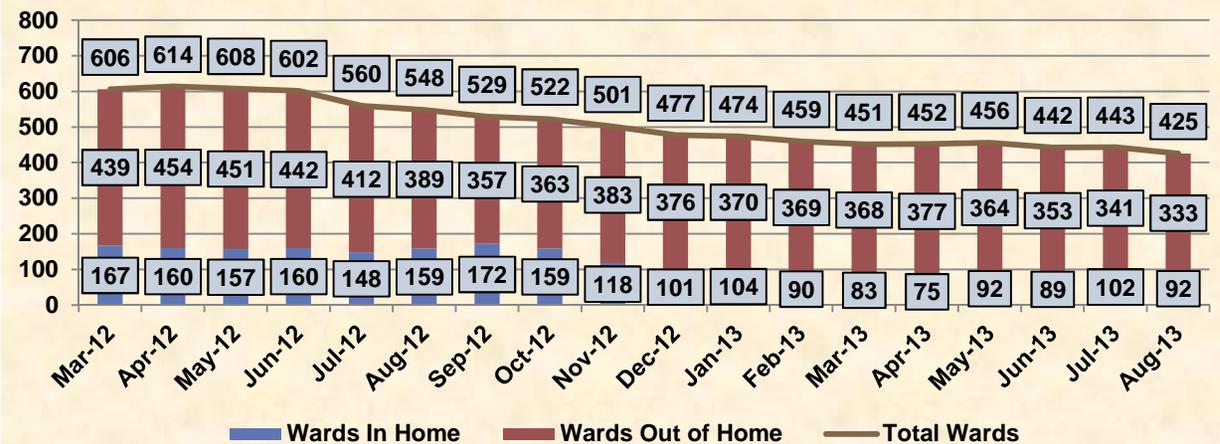
## OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect



### Statewide: Count of Wards 2012-2013



### Western Service Area: Count of Wards



Data Review Frequency: Quarterly

## Safely Decrease the Number of State Wards

### Strengths/Opportunities:

### Barriers:

### Action Items:

#### *\*Completed:*

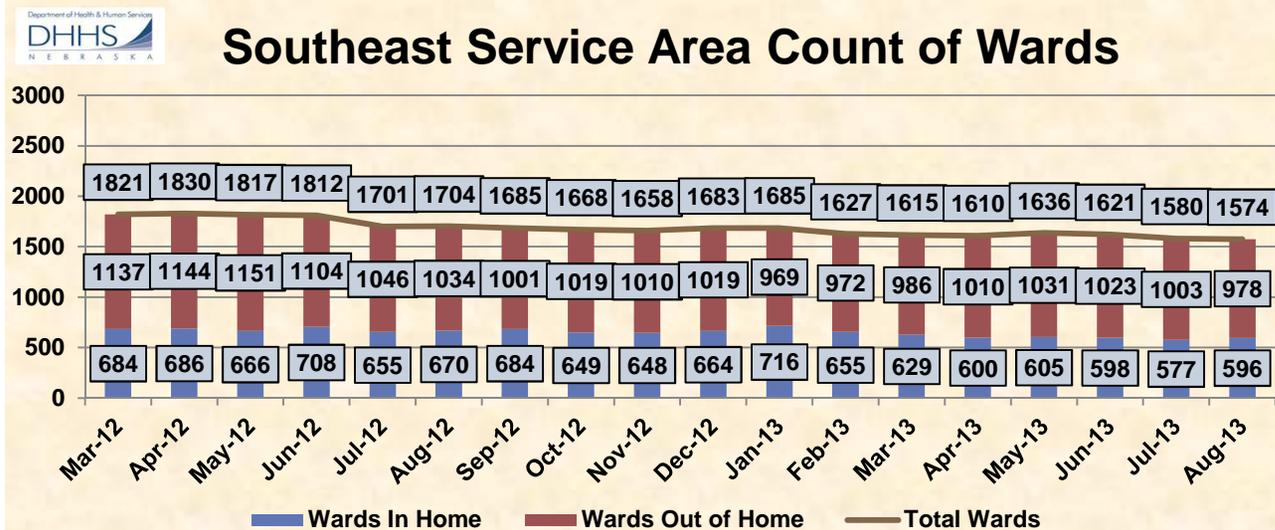
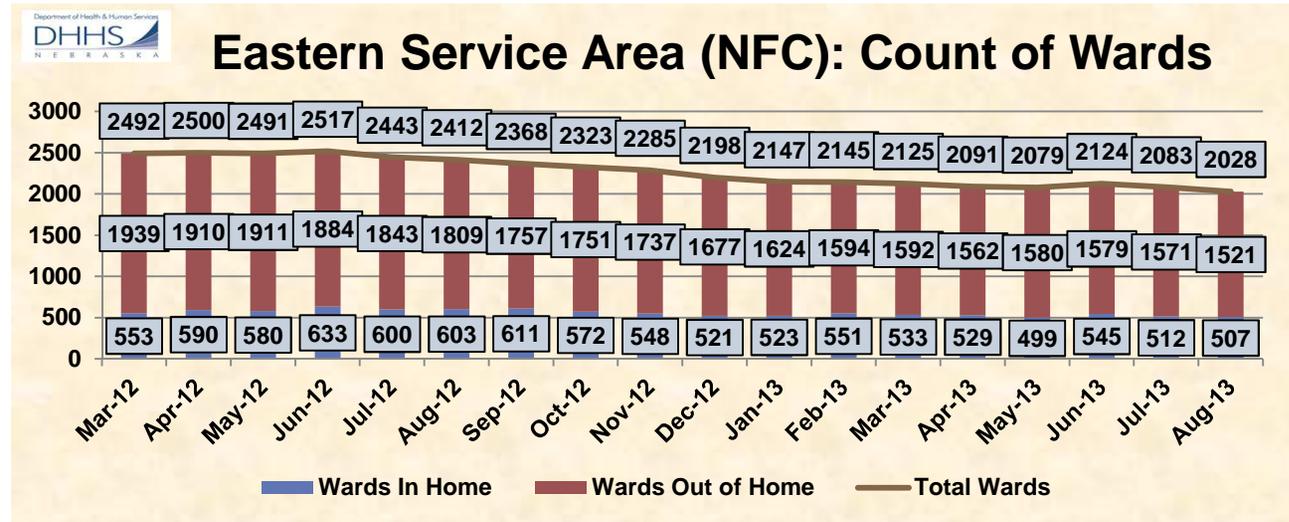
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#### *\*Planned:*

### CQI Team Priority:

\* Statewide

## OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect



Data Review Frequency: Quarterly

**OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect**

**Safely Decrease the Number of State Wards**

**Strengths/Opportunities:**

**Barriers:**

**Action Items:**

*\*Completed:*

- 40 Day Focus Initiatives
  - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
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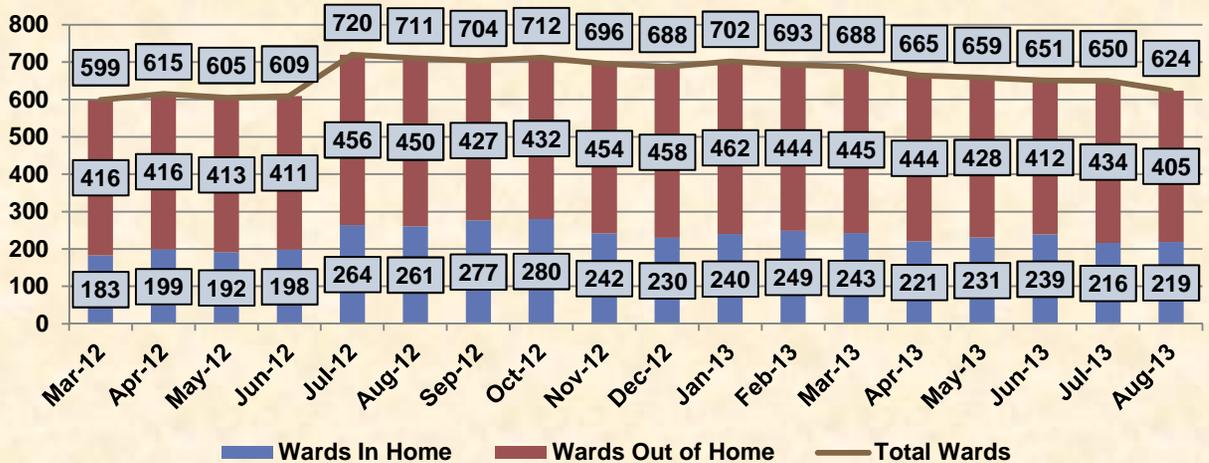
*\*Planned:*

**CQI Team Priority:**

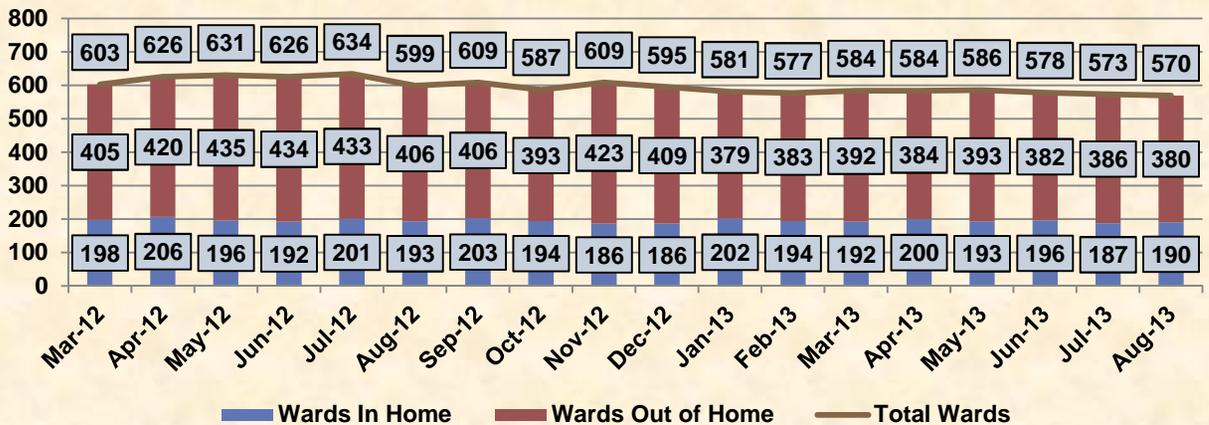
\* Statewide



**Northern Service Area: Count of Wards**



**Central Service Area: Count of Wards**



**Data Review Frequency: Quarterly**

**Safely Decrease the Number of OOH Wards by Moving Them Back to In-Home Care**

**Strengths/Opportunities:**

- WSA reduced In Home count by 50% which increased their Out of Home to In Home proportion (8/5/13).

**Barriers:**

**Action Items:**

*\*Completed:*

- 40 Day Focus Initiatives
  - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
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*\*Planned:*

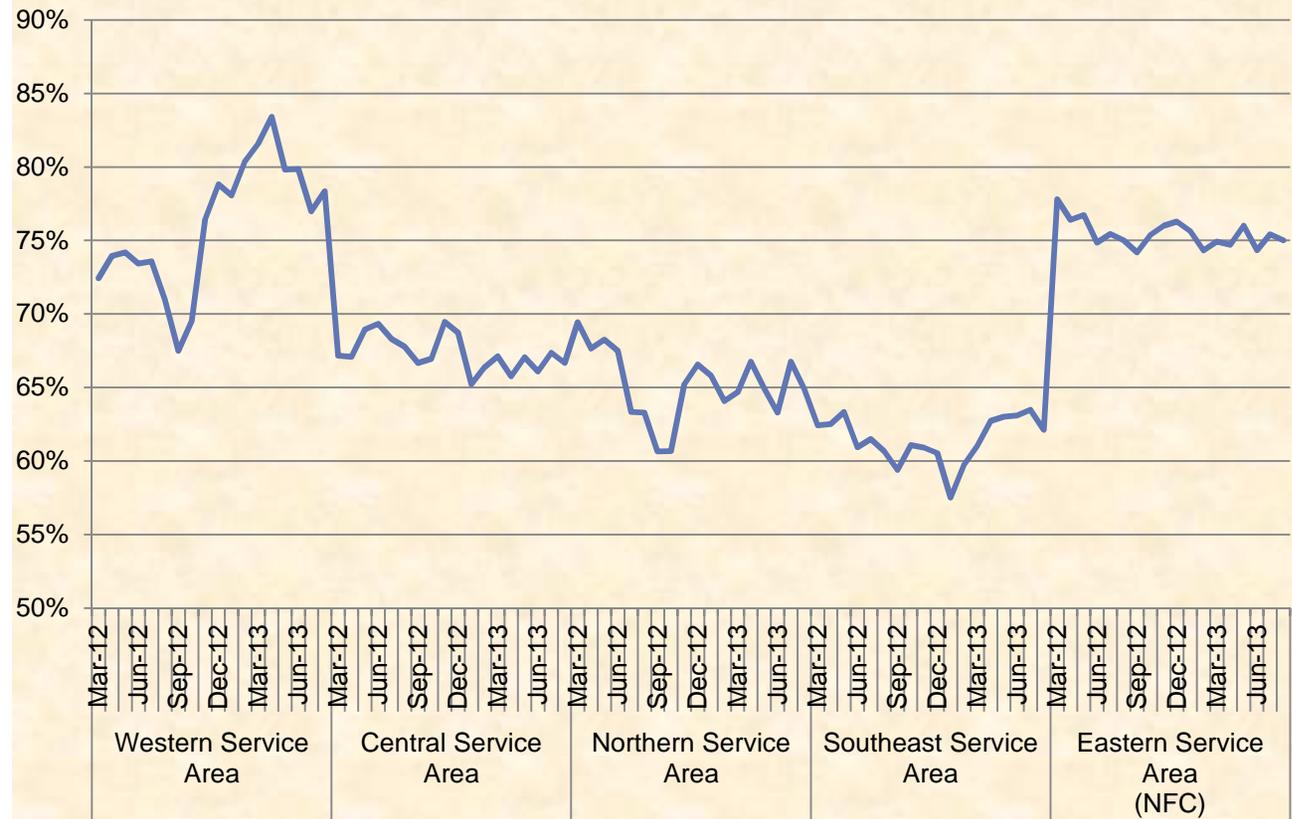
**CQI Team Priority:**

\* Statewide

**OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect**



**Proportion of Out of Home Wards to InHome Wards by Service Area**



Source – Point-in-Time 8/5/2013

**Data Review Frequency: Quarterly**

## Safely Decrease the Number of State Wards

### Strengths/Opportunities:

- In 2011, NE ward count was 10.1 per 1,000 youth. Current NE ward count is at 7.6/1,000 youth.

### Barriers:

### Action Items:

#### *\*Completed:*

- 40 Day Focus Initiatives
  - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
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#### *\*Planned:*

### CQI Team Priority:

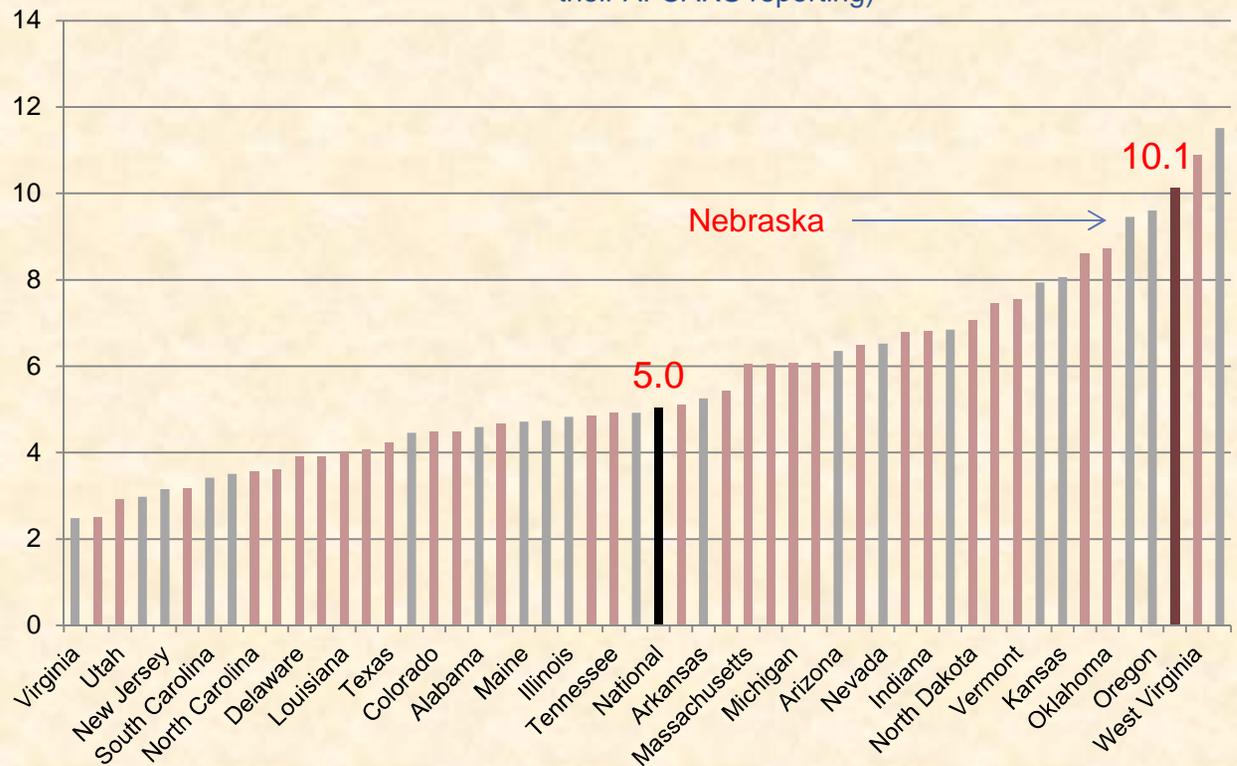
\* Statewide

## OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect



The in-care rate in Nebraska (10.1 per 1,000 in FY11) is twice the national in-care rate (5.0 in FY11).

(Pink shaded states also include some number of Juvenile Justice youth in their AFCARS reporting)



Data source: CASEY - AFCARS – population 0-18 years olds

Below is the website for more information on the source of population information.

<http://www.claritas.com/sitereports/default.jsp>

**Safely Decrease the Number of State Wards**

**Strengths/Opportunities:**

**Barriers:**

**Action Items:**

***\*Completed:***

- 40 Day Focus Initiatives
  - A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
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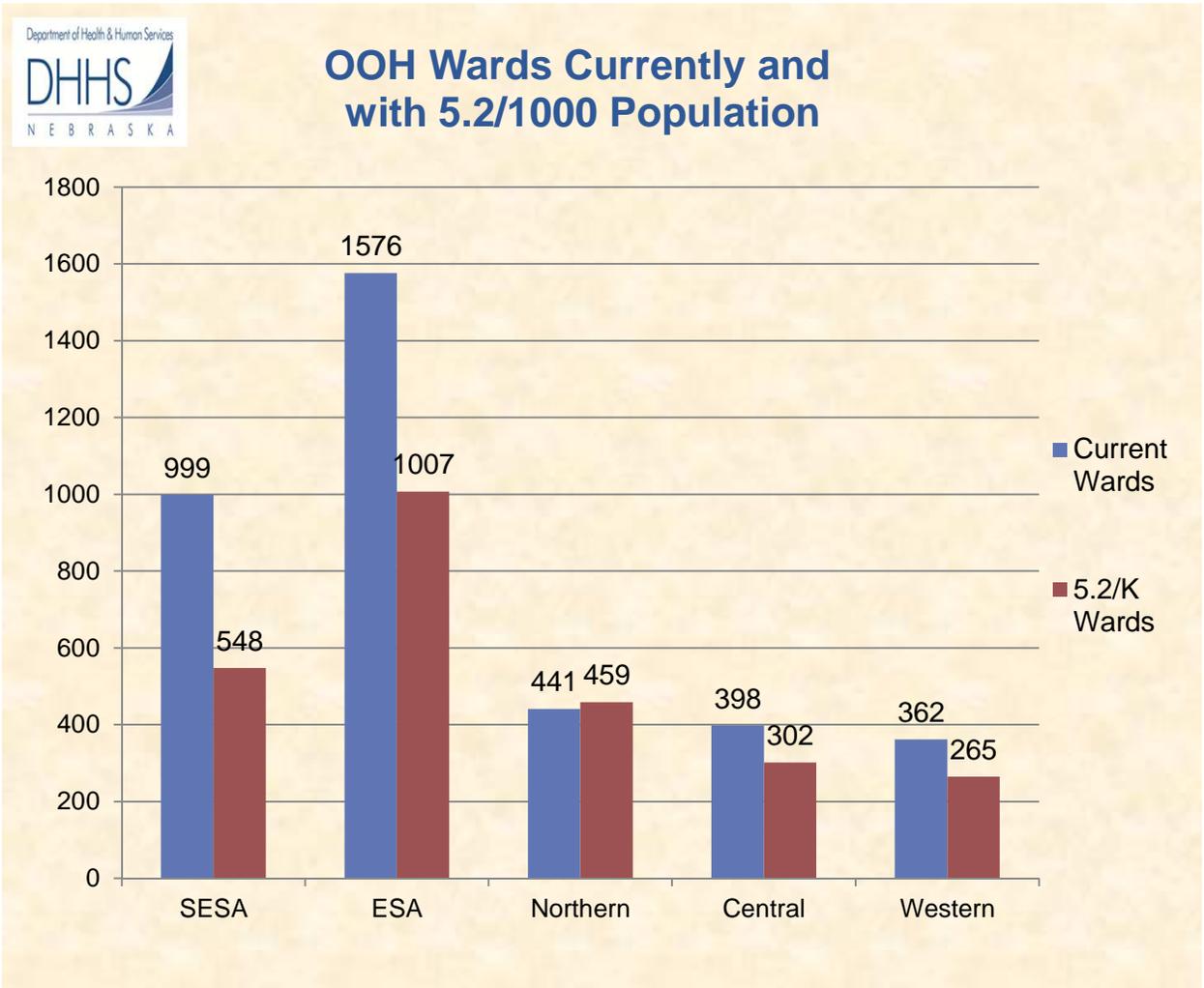
***\*Planned:***

**CQI Team Priority:**

\* Statewide

**Data Review Frequency: Monthly**

**OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect**



Data Source: Point in time report 3/18/2013. Out of Home Court wards using 2012 Claritas youth population < 19 yrs. of age.

**Note: Count by County Report is now available.**

## Safely Decrease the Number of State Wards

### Strengths/Opportunities:

### Barriers:

### Action Items:

#### *\*Completed:*

- 40 Day Focus Initiatives
  - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
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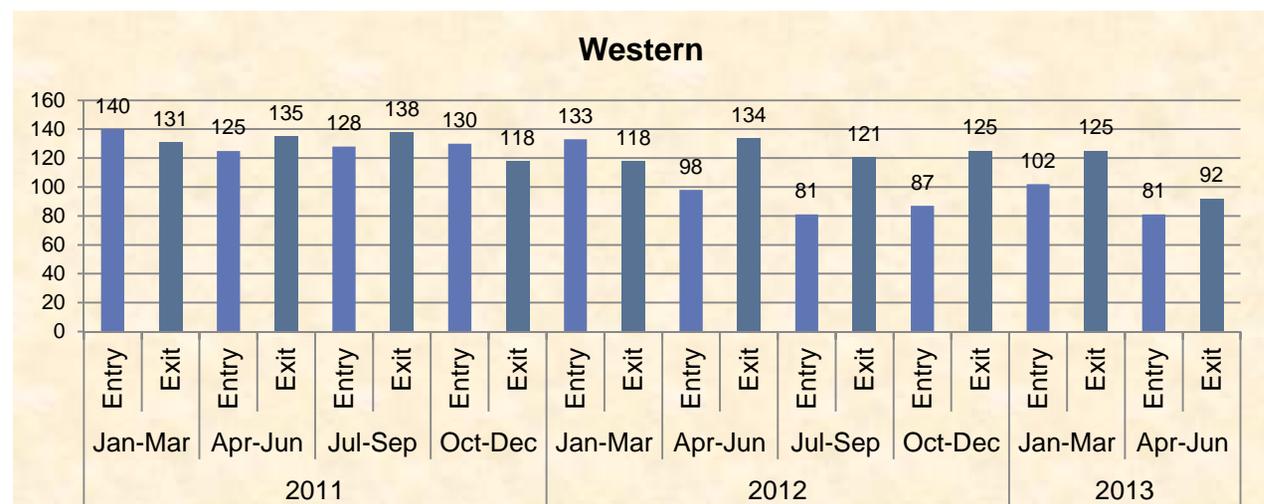
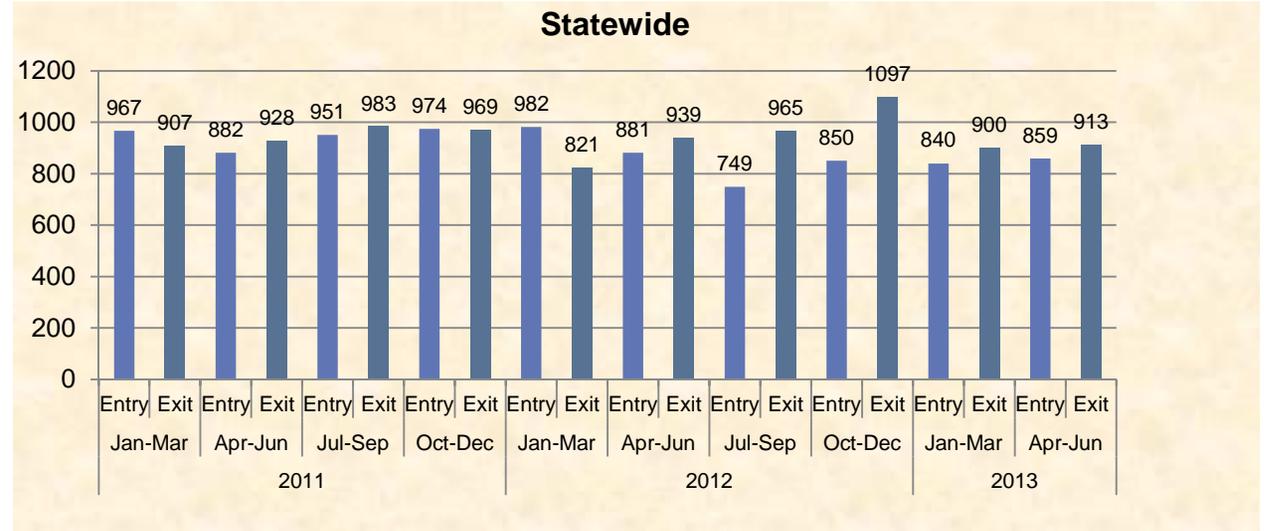
#### *\*Planned:*

### CQI Team Priority:

\* Statewide

**Data Review Frequency: Quarterly**

## OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect



N-Focus Legal Status field. An entry occurs when a child is made a state ward. An exit occurs when the Legal Status changes to non-ward - not when it is entered into NFocus. Entries include youth that go from non-court to court. Counts based on date of action, not entry date into NFocus

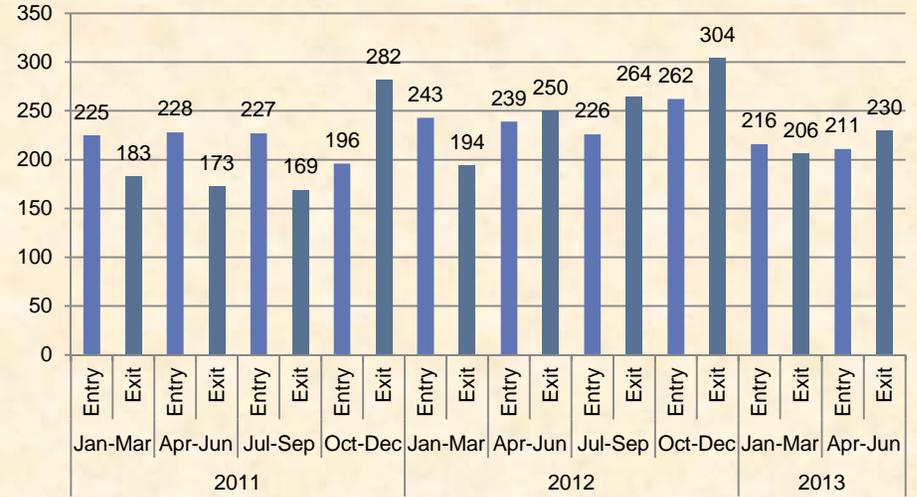
Safely Decrease the Number of State Wards

**OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect**

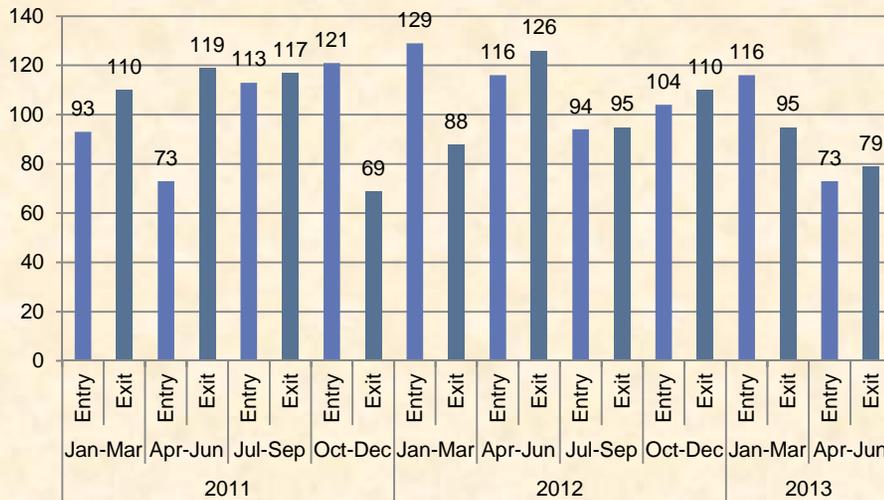
**NFC Exits and ESA (DHHS) Entries**



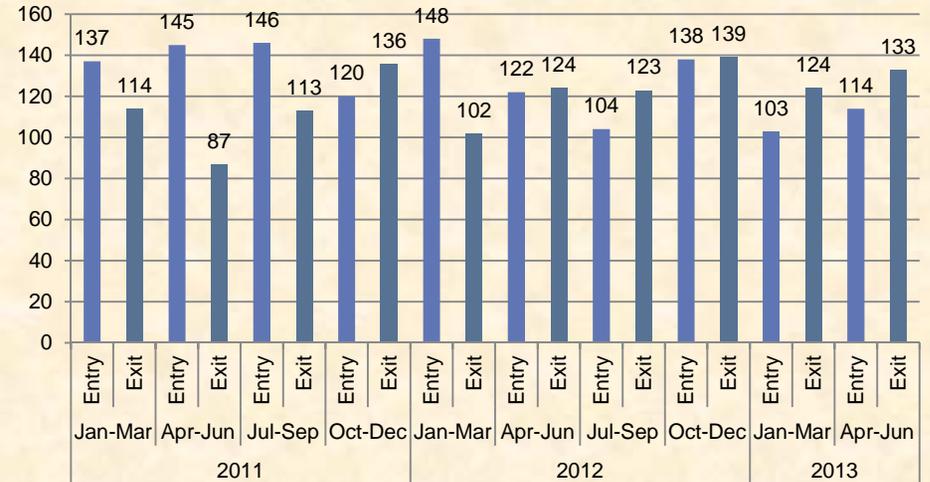
**Southeast**



**Central**

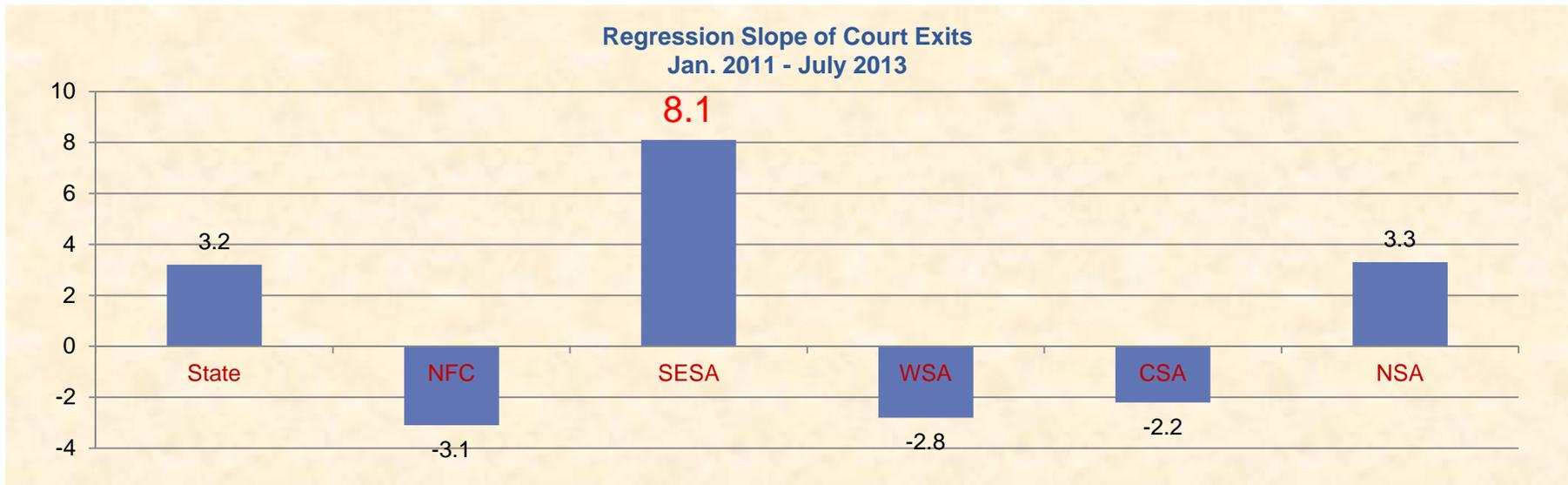


**Northern**



Safely Decrease the Number of State Wards

**OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect**



Exit Period is Measured Quarterly from Jan 2011 – July 2013

# CHAPTER 3: PERFORMANCE AND ACCOUNTABILITY

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**OUTCOME STATEMENT: CHILDREN  
ARE SAFELY MAINTAINED IN THEIR  
HOMES WHENEVER POSSIBLE AND  
APPROPRIATE**

**Goal Statement: Measure youth's Safety,  
Permanency and Well-being.**

### In-home versus out-of-home placements

#### Strengths/Opportunities:

- June 2013 OOH Rates

- State – 70.1%
- NFC – 75.6%
- SESA – 63.5%
- CSA – 67.2%
- NSA – 66.7%
- WSA – 76.8%

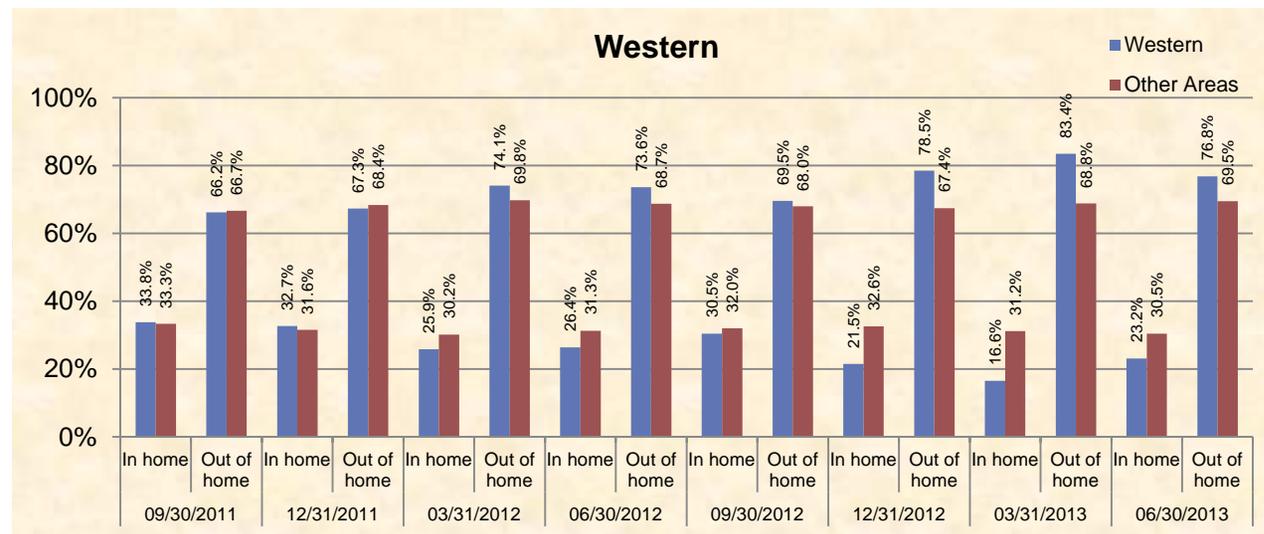
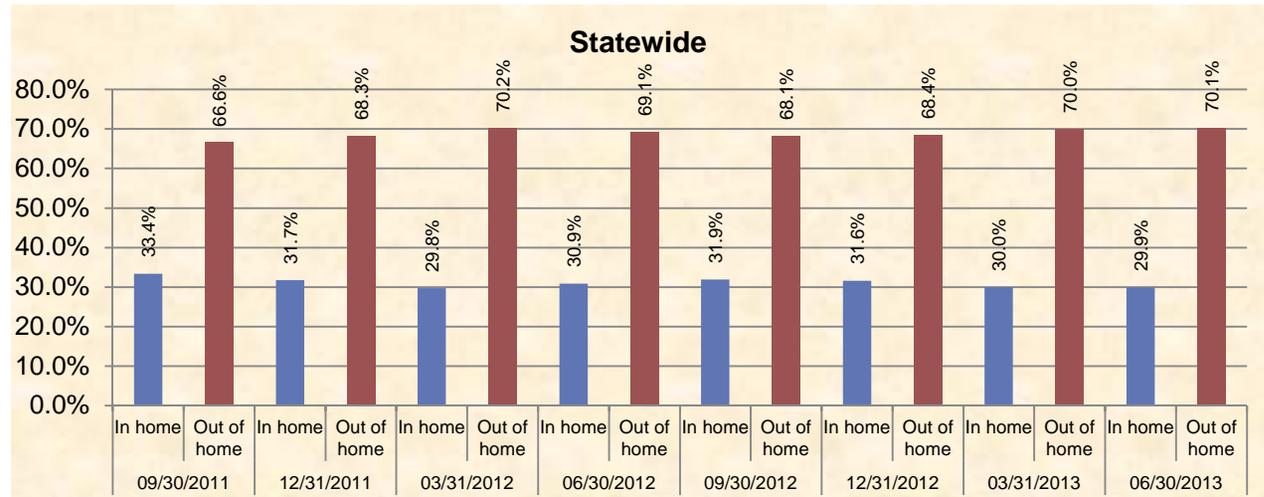
#### Barriers:

#### Action Items:

*\*Completed:*

*\*Planned:*

## OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.

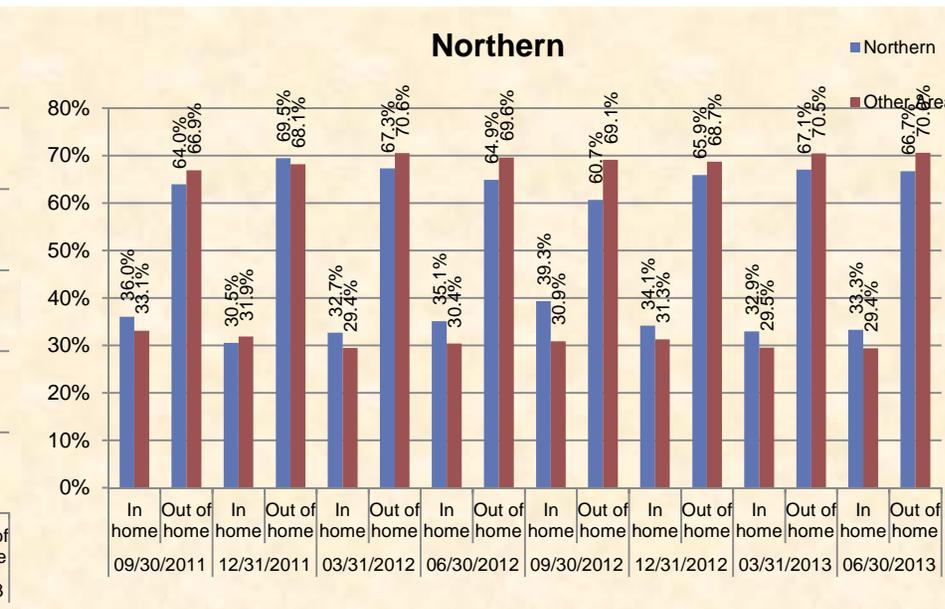
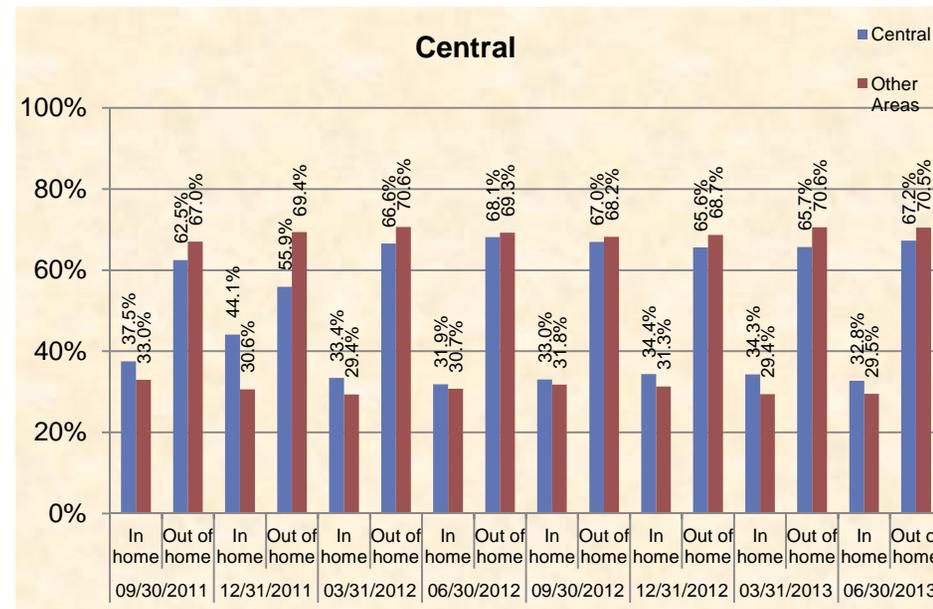
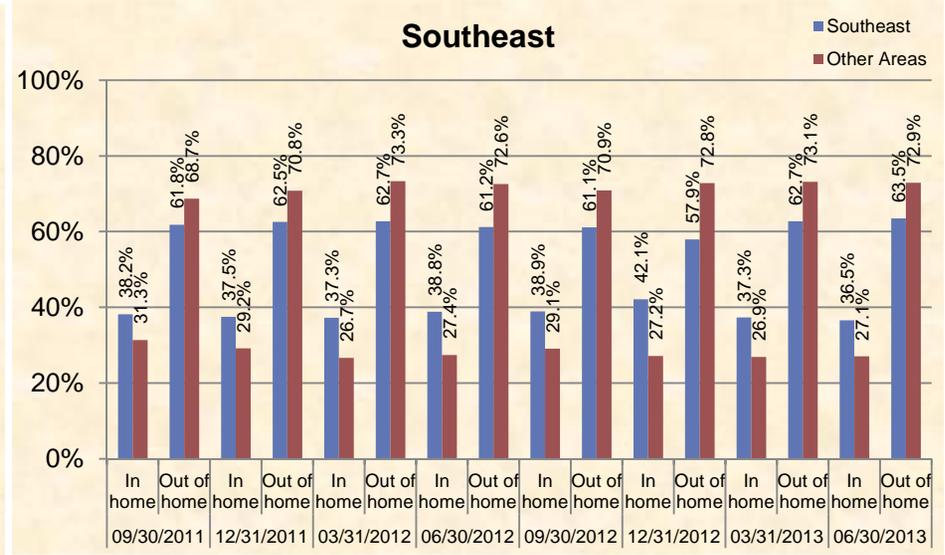
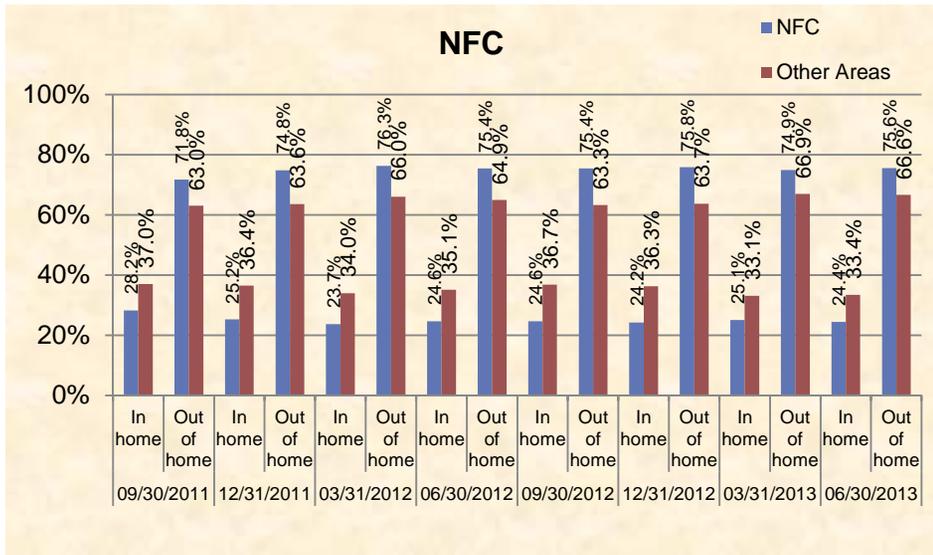


N-Focus Placement field. The In Home category includes state wards living with a parent, guardian or independently. The Out of Home category includes state wards in all types of out of home placements and those on runaway status. Data includes all court wards measured at a point-in-time on the last day of the quarter.

**Data Review Frequency: Quarterly (April, July, November & January)**

In-home versus out-of-home placements

**OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.**



**OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.**

**Intake Calls/Responses**

**Strengths/Opportunities:**

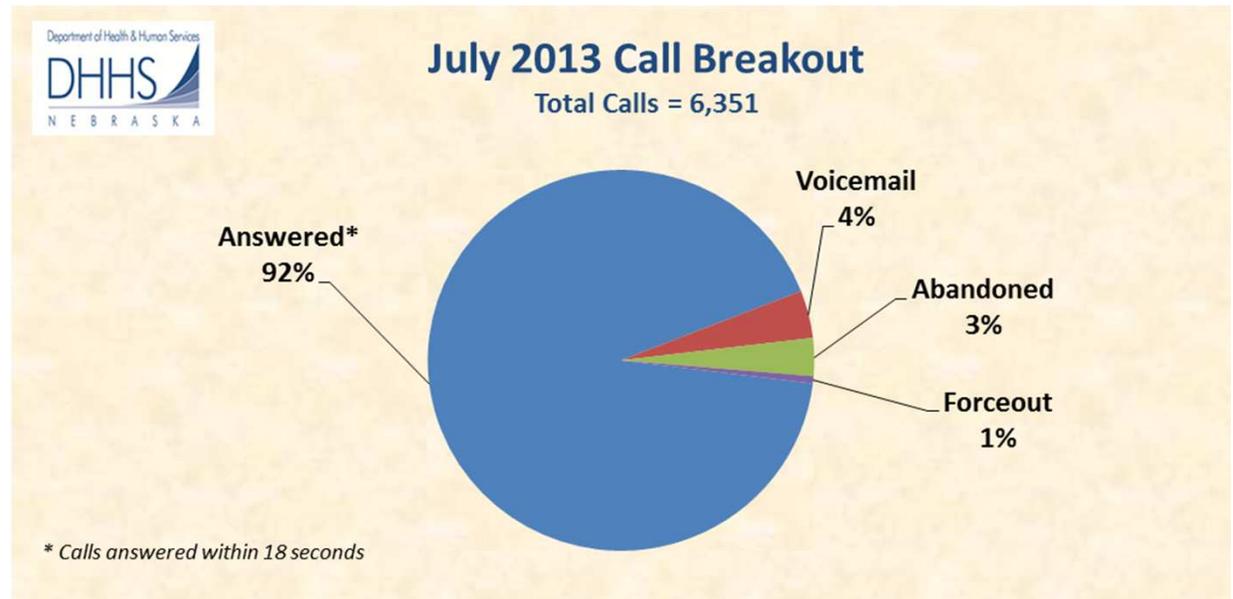
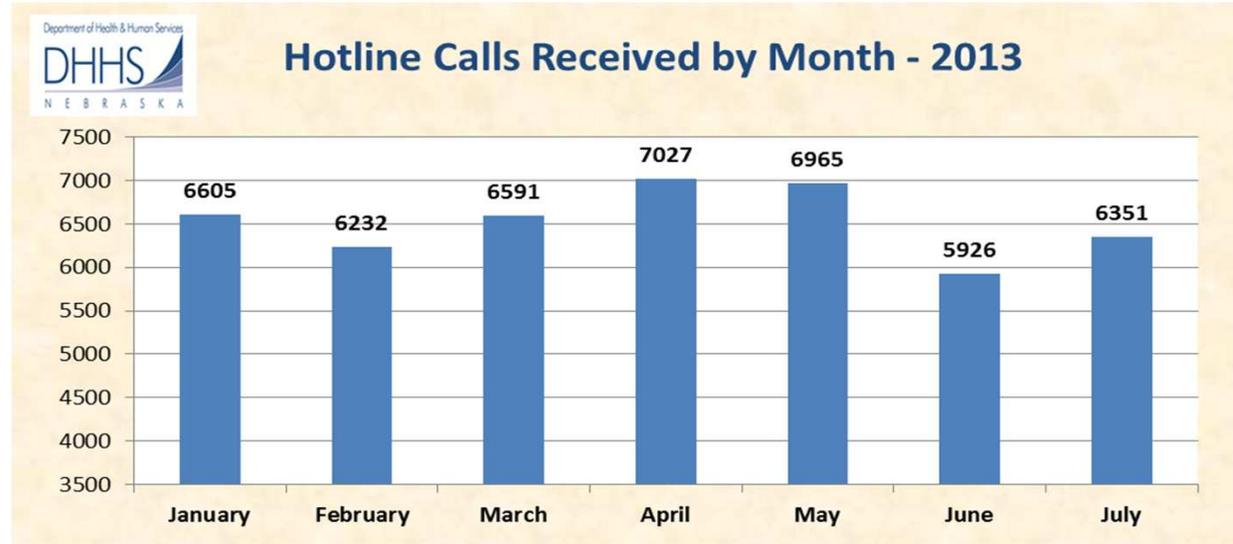
- In July 2013, 92% of all calls to the hotline were answered. This is up from 88% in May 2013.
- Count of hotline increased to 6351 in July 2013.

**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*



**Data Review Frequency: Monthly**

### OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.

#### Intake Quality Measures

##### Strengths/Opportunities:

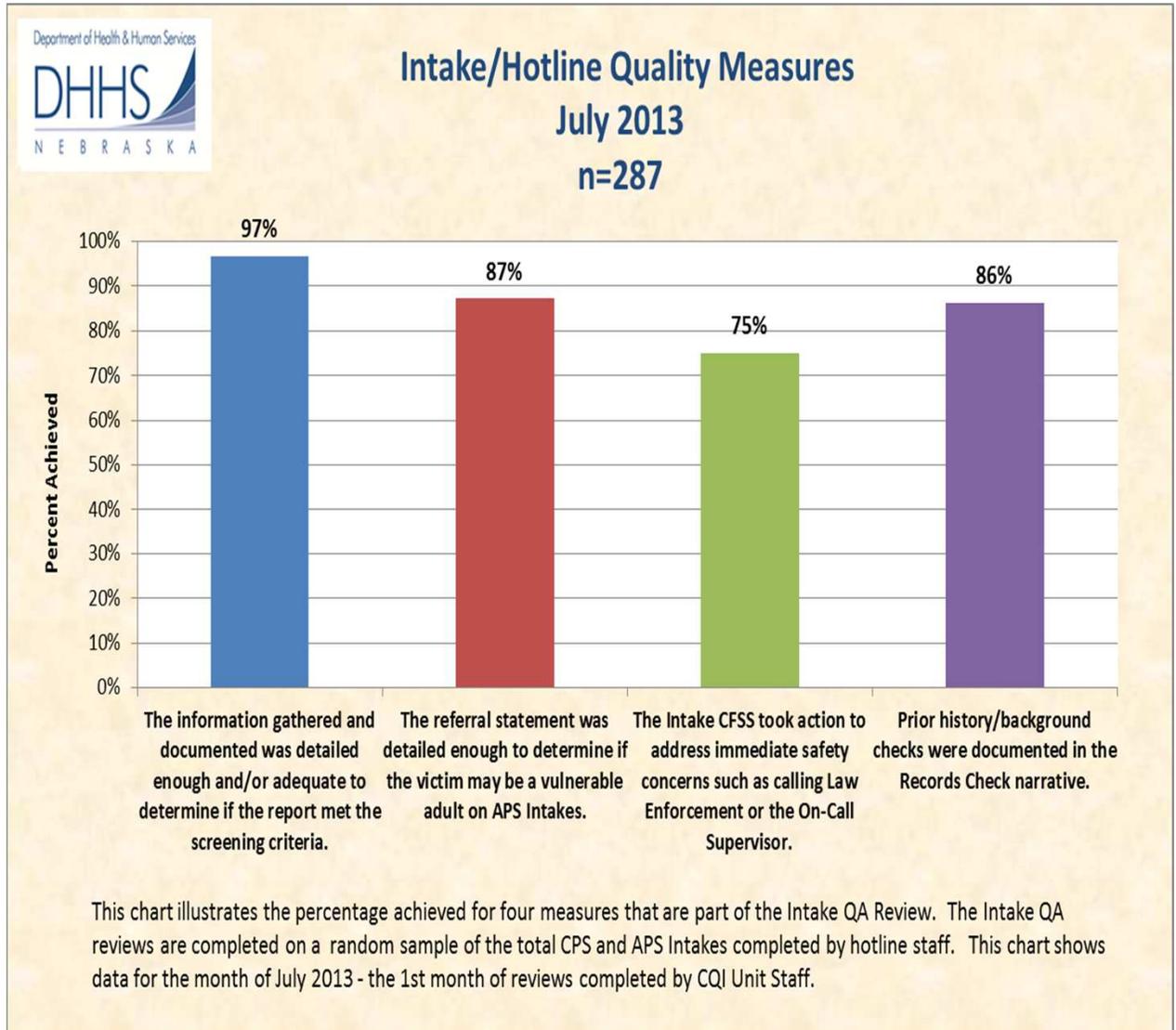
##### Barriers:

##### Action Items:

###### *\*Completed:*

- Intake QA Unit Reviews were implemented by CQI unit in July 2013. QA feedback is sent via email to the Hotline Supervisor and Worker. QA Results are discussed during Intake Monthly Meetings and System Team Calls and strategies are developed to address areas needing improvement.

###### *\*Planned:*



Data Review Frequency: Monthly

## IA – Contact Timeframes

### Strengths/Opportunities:

- July 2013: Achieved 94-96% for contact timeframes on all Priorities. Huge improvement from previous months.

### Barriers:

- Intakes not tied to Assessments  
 - ARP ID # errors

### Action Items:

*\*Completed:*

- Direction was given to hotline staff to restart N-Focus at midnight in order to reset the clock used to calculate timeframes.  
 -4/30/13 Doug Beran emailed document to all CFS Admin/Supervisors providing guidance accessing the report to identify items not tied. Not tied includes instances where the ARP ID on Assessment does not match ARP ID on Intake.

-Reminders and Directions were given to IA staff regarding the following:

*\* P1 time is based on 24 hours from the time the call was received by the hotline, so 8:00 am means we must respond by 8:00 am the following day.*

*\* When a meeting occurs prior to the hotline received date, the worker should either notify the hotline that the received date was in the past review the SDM report and set the received date to the proper date*

*\*Planned:*

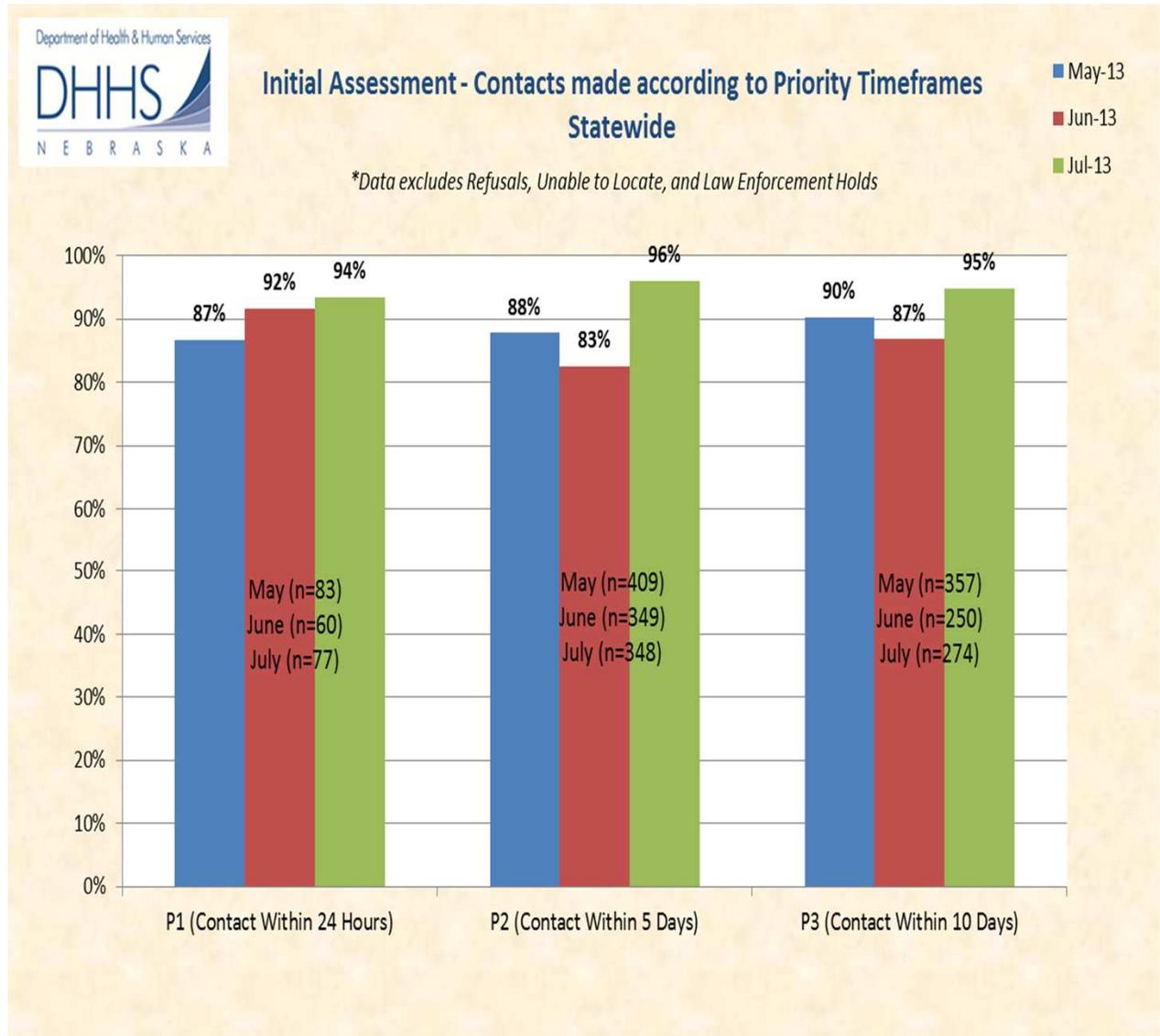
- Upcoming Quick Tip will include video instructions on how to use weekly InfoView reports to identify intakes not tied etc.

### CQI Team Priority:

- Statewide
- Western Service Area

**\*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

## OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.



**Data Review Frequency: Monthly**

## IA – Contact Timeframes

### Strengths/Opportunities:

- Central Service Area achieved 100% for p1 timeframe three months in a row (May-Jul 2013).
- Huge Improvement by Western Service Area between June and July 2013 for P1 timeframe.

### Barriers:

- Intakes not tied to Assessments
- ARP ID # errors

### Action Items:

#### \*Completed:

- Direction was given to hotline staff to restart N-Focus at midnight in order to reset the clock used to calculate timeframes.
- 4/30/13 Doug Beran emailed document to all CFS Admin/Supervisors providing guidance accessing the report to identify items not tied. Not tied includes instances where the ARP ID on Assessment does not match ARP ID on Intake.
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#### \*Planned:

- Upcoming Quick Tip will include video instructions on how to use weekly InfoView reports to identify intakes not tied etc.

### CQI Team Priority:

- Statewide
- Western Service Area

\*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

Data Review Frequency: Monthly

## OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.



**Initial Assessments Not Finalized in 30 days**

**Strengths/Opportunities:**

- Central Service Area has the lowest number of Initial Assessments Not Finalized – 23 from Jan 2012 – July 2013.
- On 8/20/13, there were 1,023 Initial Assessments that were due between Jan 2012 and July 2013 that had not been finalized.

**Barriers:**

- Finding is not entered for the assessments.
- Intake is not tied to the safety assessment.

**Action Items:**

**\*Completed:**

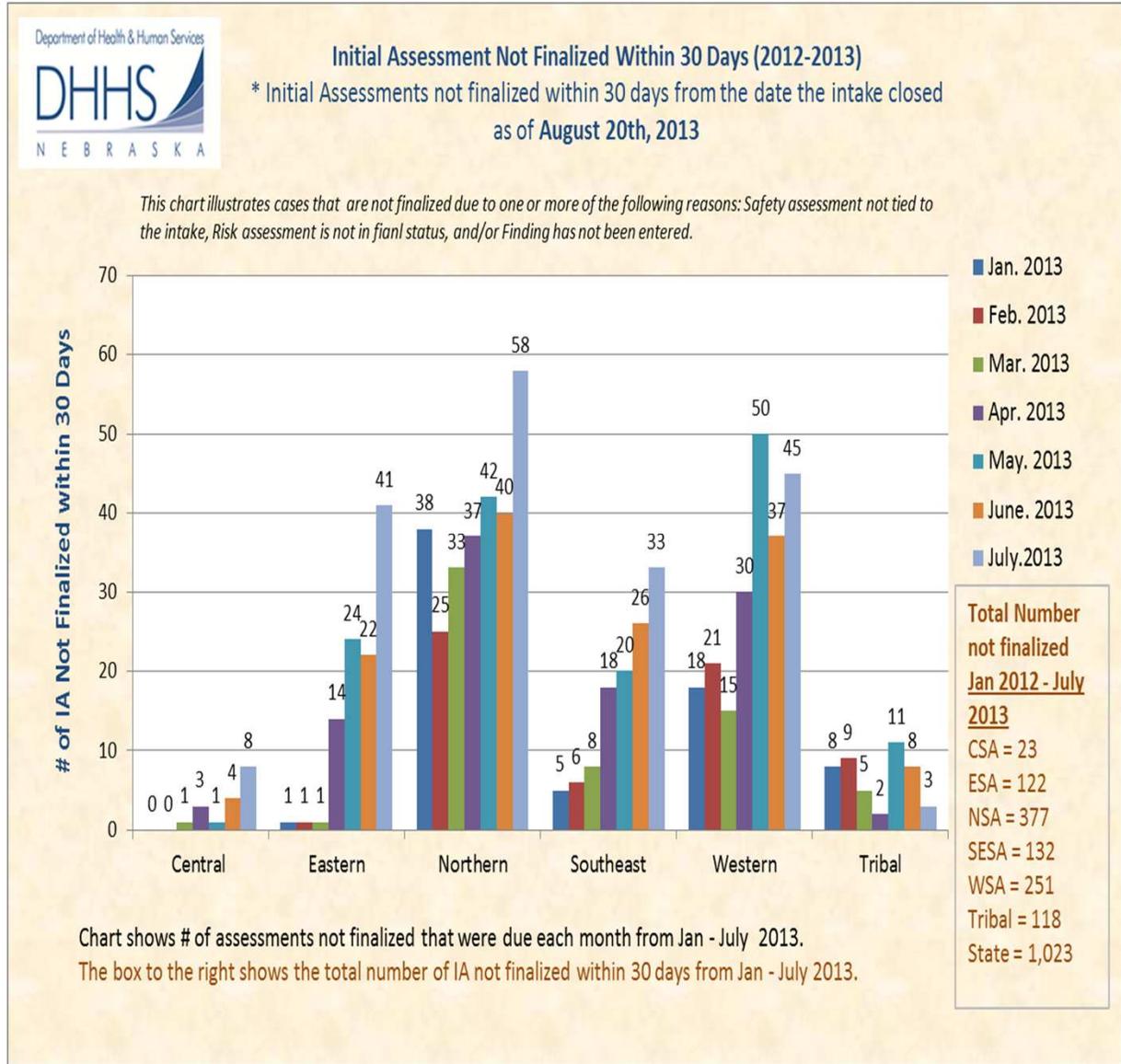
- New/Improved SDM Intake and Assessment Reports are now posted on InfoView. Reports identify assessments that are not tied to the intake, assessments with no findings entered etc. Instructions were emailed to CFS staff.
- Initial Assessment supervisors and workers are using InfoView reports to identify and address assessments with

**\*Planned:**

- Upcoming Quick Tip will include video instructions on how to use weekly InfoView reports to identify intakes not tied, assessments with no finding entered etc.
- Greg Brockmeier, Business Analyst will work with CFS Supervisors and CQI staff to use reports to manage the work and to identify and address additional barriers.

**Data Review Frequency: Monthly**

**OUTCOME STATEMENT #3: Children Will Experience Stability and Permanency In Their Lives**



### Absence of Maltreatment in Six Months

**Strengths/Opportunities:**

-July 2013: Western Service Area is the only Service Area meeting the target goal for this measure. Eastern Service Area is showing a positive trend in this measure.

**Barriers:**

-Duplicate Reports for the same incidents are creating instances of repeat maltreatment.

**Action Items:**

*\*Completed:*

- Policy changes were implemented in October 2012 to eliminate duplicate reports/substantiation of intakes that are received within 6 months for the same allegations

*\*Planned:*

- A workgroup will convene to look at reason for case involvement and put instructions together on how to document reason for case involvement to better capture information about substance abuse and other reasons for case opening/involvement.

-CQI team will complete additional breakdown of repeat maltreatment data to help the team identify areas needing improvement.

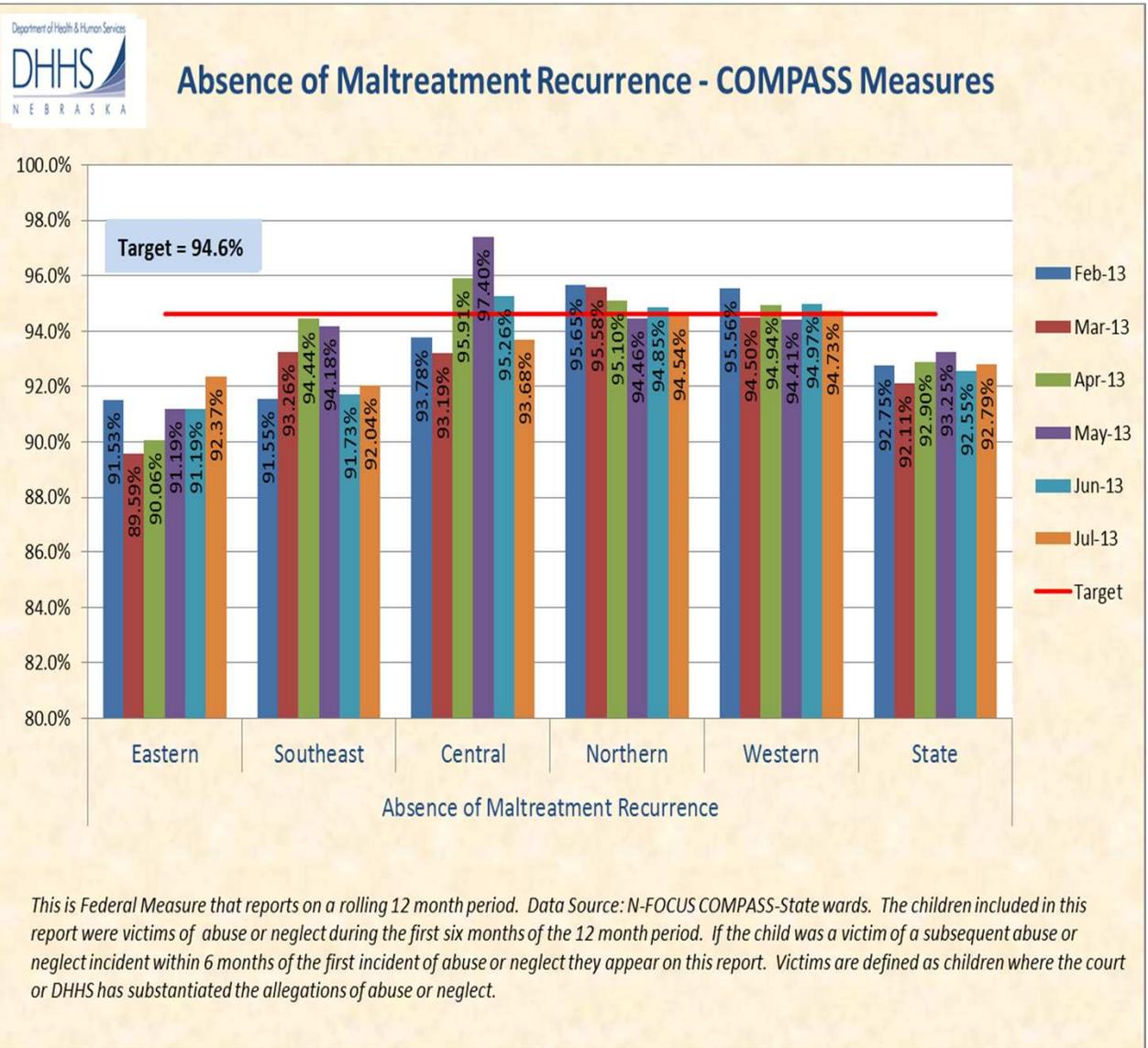
**CQI Team Priority:**

\*Statewide External Stakeholder Team

\*Western and Southeast Service Areas

**\*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

## OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.



**Data Review Frequency: Quarterly (March, June, September, December)**

**Absence of Maltreatment in Foster Care**

**Strengths/Opportunities:**

-July 2013: Western Service Area is the only Service Area meeting the target goal for this measure. Eastern Service Area is showing a positive trend in this measure.

**Barriers:**

-Duplicate Reports for the same incidents are creating instances of repeat maltreatment.

**Action Items:**

*\*Completed:*

- Southeast Service Area Administrator and the Foster Care Review Office Director met and created a process to staff and address barriers for repeat maltreatment in foster care cases in Southeast Service Area.
- Policy changes were implemented in October 2012 to eliminate duplicate reports/substantiation of intakes that are received within 6 months for the same allegations

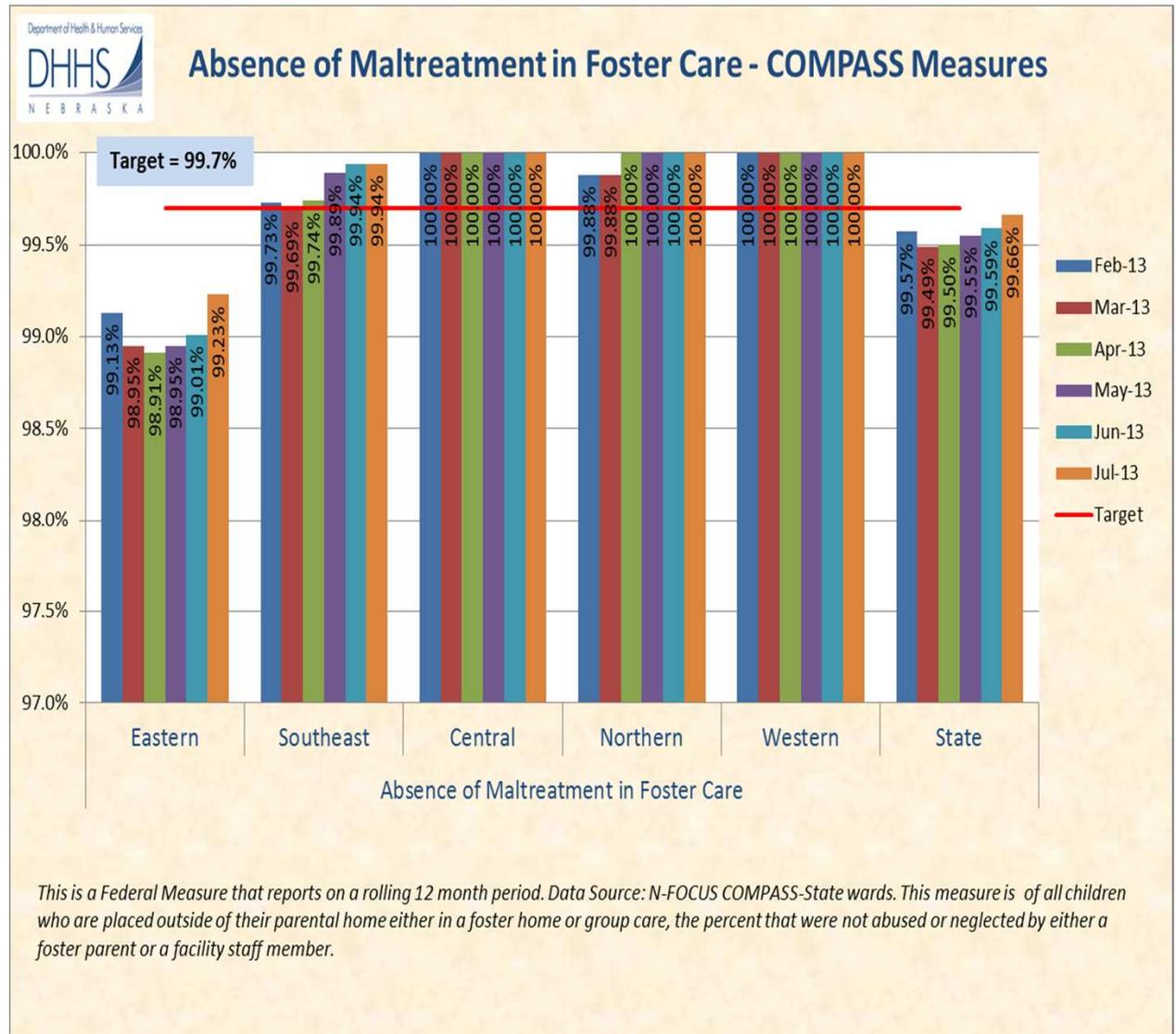
*\*Planned:*

- A workgroup will convene to look at reason for case involvement and put instructions together on how to document reason for case involvement to better capture information about substance abuse and other reasons for case opening/involvement.
- CQI team will complete additional breakdown of repeat maltreatment data to help the team identify areas needing improvement.

**CQI Team Priority:**

*\*Statewide External Stakeholder Team*

**OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.**



**Data Review Frequency: Quarterly (March, June, September, December)**

**Permanency for Children in Foster Care**

**Strengths/Opportunities:**

-All Service Areas continue to exceed the target goal for this measure.

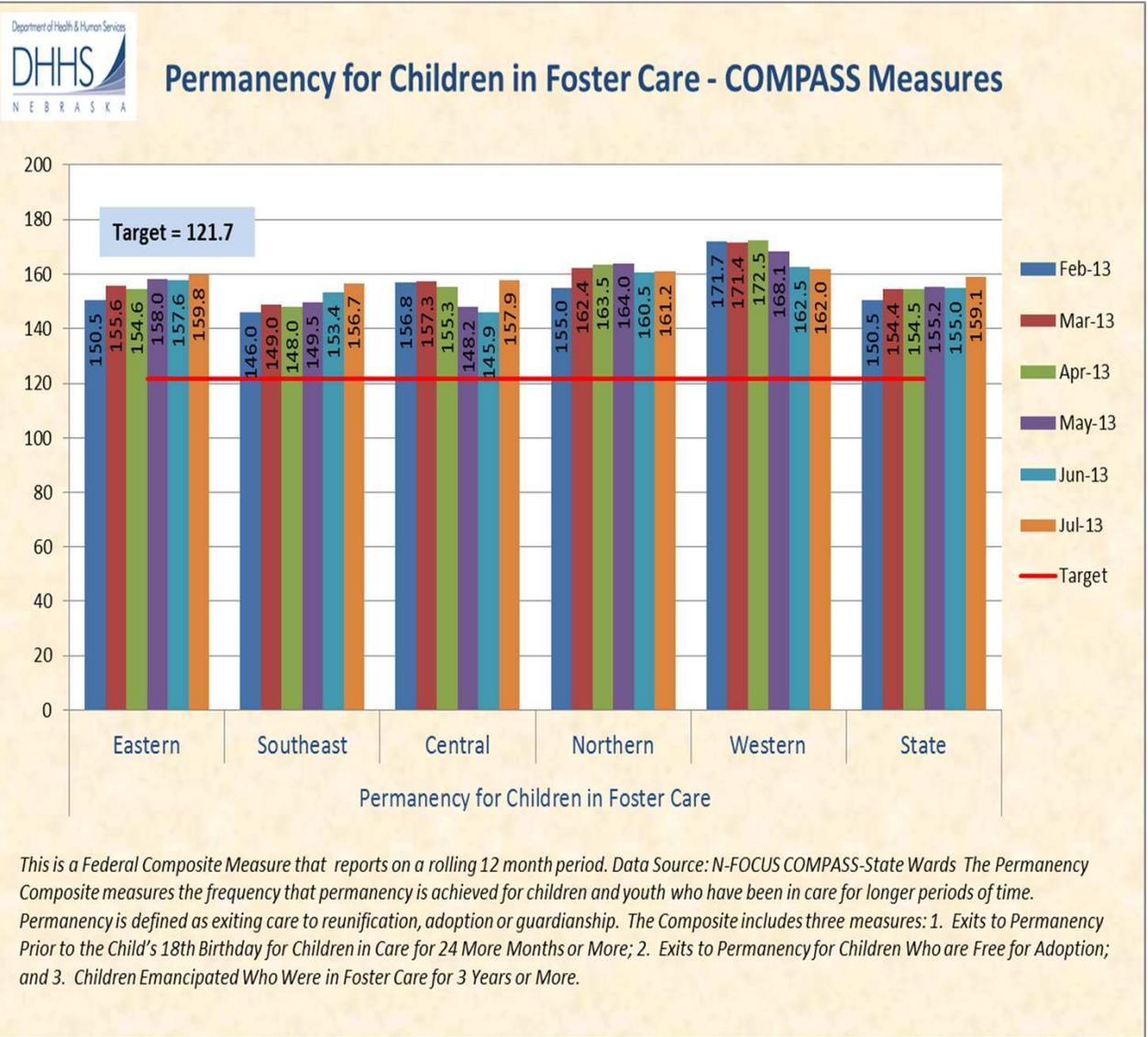
**Barriers:**

**Action Items:**

\*Completed:

\*Planned:

**OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.**



**Data Review Frequency: Quarterly (March, June, September, December)**

### Timeliness of Adoption

**Strengths/Opportunities:**

- Eastern Service Area met this measure for the first time in May 2013 and continue to see a positive trend.
- Central Service Area is the only Service Area not meeting the target goal for this measure and has seen a downward trend in the past few months.

**Barriers:**

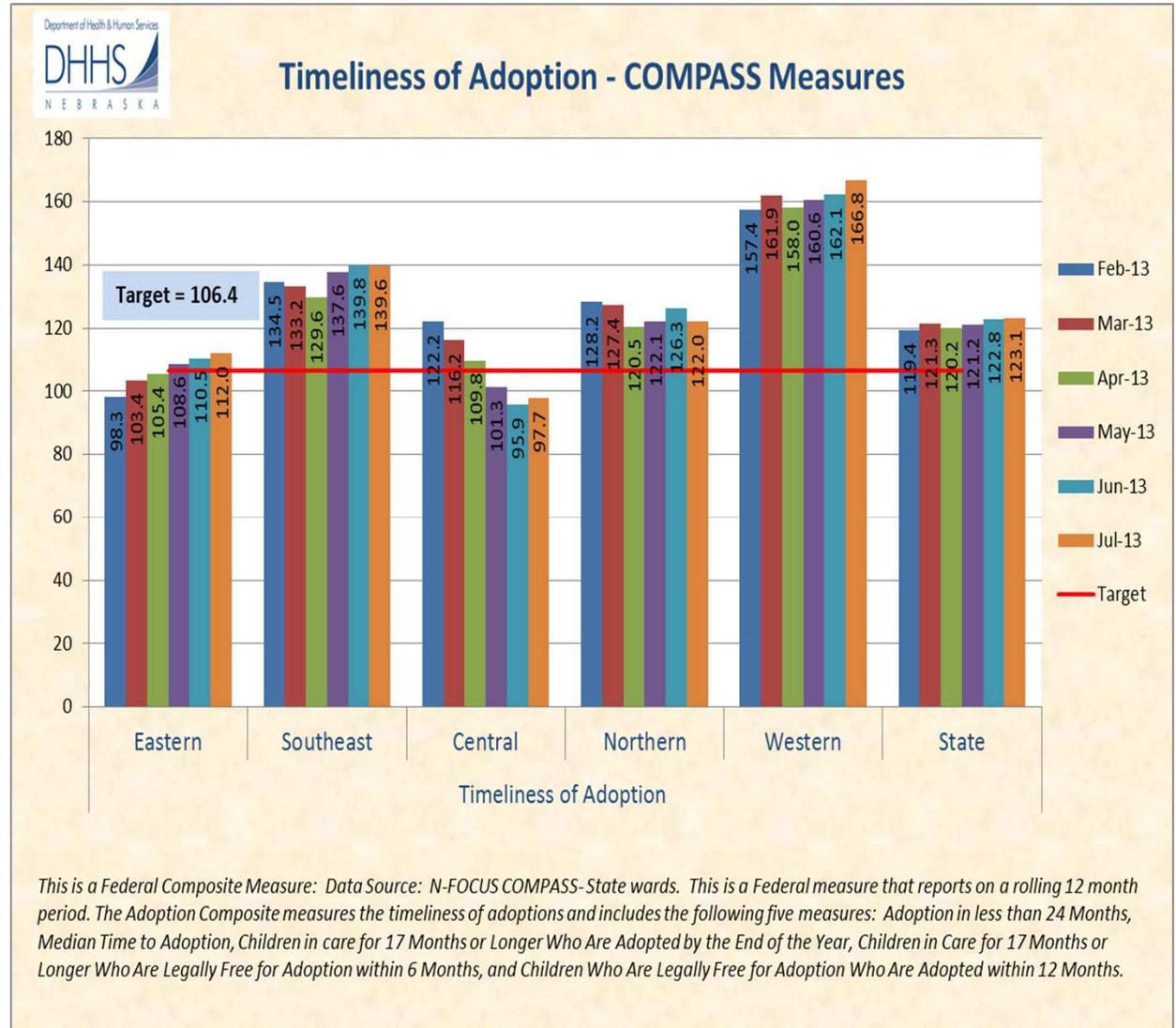
**Action Items:**

*\*Completed:*

- CQI team corrected the definition of Free for Adoption to no longer include the existence of TPR hearing for this measure.
- Eastern Service Area/NFC completed a review of 119 adoption cases and identified barriers to Adoption in ESA. Eastern Service Area continues to address barriers through Court Collaboration meetings and other processes.

*\*Planned:*

## OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.



**Data Review Frequency: Quarterly (March, June, September, December)**

### Timeliness of Adoption

#### Strengths/Opportunities:

-- Central and Eastern Service Areas are not meeting the target goal for this measure. Central Service Area has seen a downward trend in the past few months.

#### Barriers:

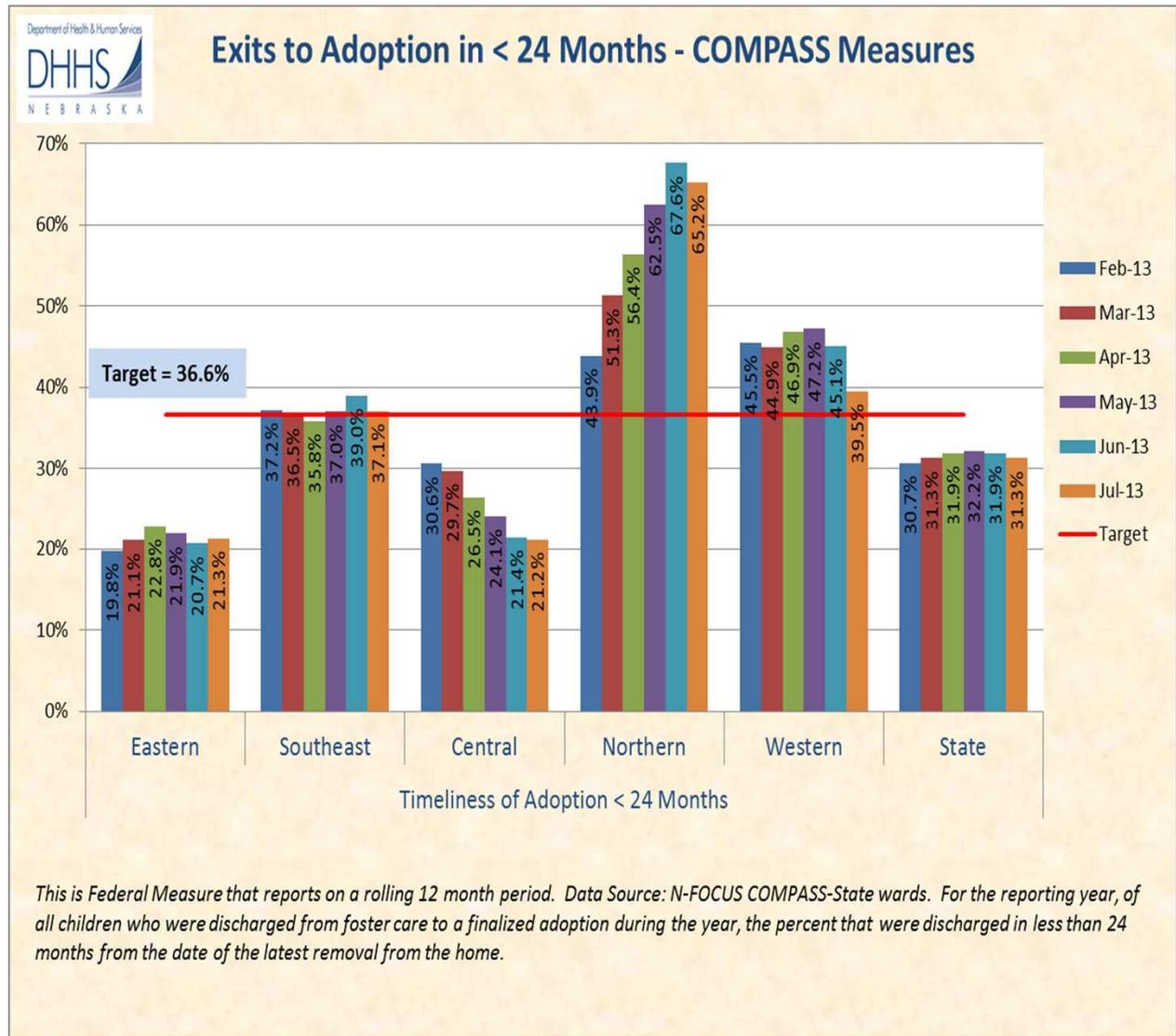
#### Action Items:

##### *\*Completed:*

- CQI team corrected the definition of Free for Adoption to no longer include the existence of TPR hearing for this measure.
- Eastern Service Area/NFC completed a review of 119 adoption cases and identified barriers to Adoption in ESA. Eastern Service Area continues to address barriers through Court Collaboration meetings and other processes.

##### *\*Planned:*

## OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.



**Data Review Frequency: Quarterly (March, June, September, December)**

### Timeliness & Permanency of Reunification

**Strengths/Opportunities:**

-None of the service areas are meeting the target goal at this time. WSA met the goal in Dec 2012 but has seen a decrease since then. WSA continues to lead the state and is near this target!

**Barriers:**

**Action Items:**

*\*Completed:*

- CFS Staff are utilizing Average Number of Out of Home Report to look at length of time and address barriers for youth who are in Out of Home Care for an extended period of time.
- 40 Day Focus Initiatives
  - A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
  - B.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.
- CQI team corrected the definition of Free for Adoption to no longer include the existence of TPR hearing for this measure

*\*Planned:*

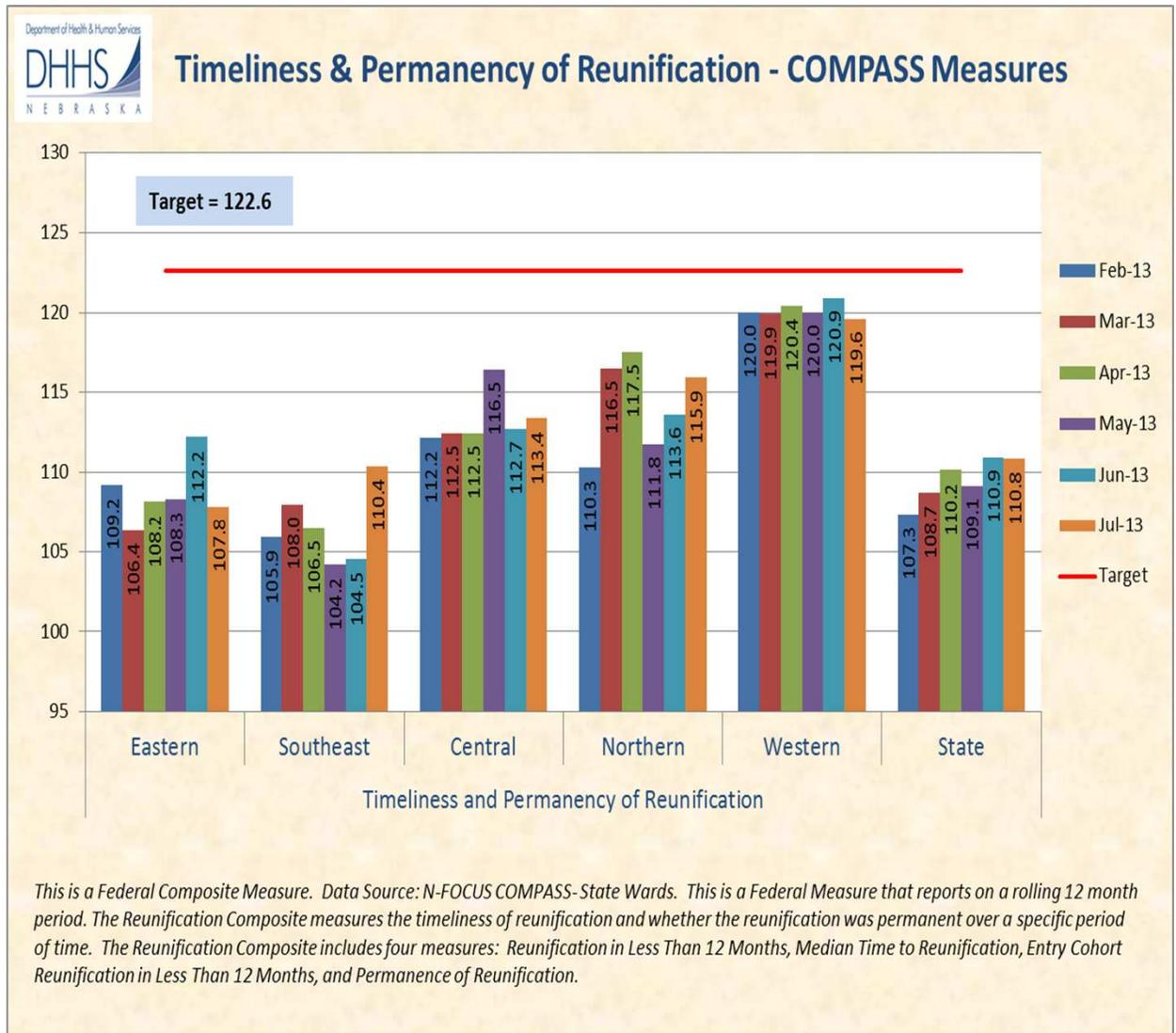
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

**CQI Team Priority:**

- \*Statewide External Stakeholder Team
- \*Eastern, Northern, Southeast and Western Service Areas

**\*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

## OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.



**Data Review Frequency: Quarterly (March, June, September, December)**

## Placement Stability

### Strengths/Opportunities:

-Northern Service Area continues to exceed the target goal. Positive trend in Eastern and Southeast while seeing a decline in Central and Western.

### Barriers:

-Placement disruptions due to child behaviors  
 -Shortage of foster placements for older youth with behavior needs.

### Action Items:

#### \*Completed:

-Southeast and Western Service Areas are utilizing Denials and Disruption Tracking/Database to address placement stability issues/needs. Other Service Areas will be implementing this tracking method in the future. Data from this system is shared with foster care agency providers.

-CQI Team provided additional data to each Service Area regarding placement changes in N-FOCUS.

#### \*Planned:

-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement

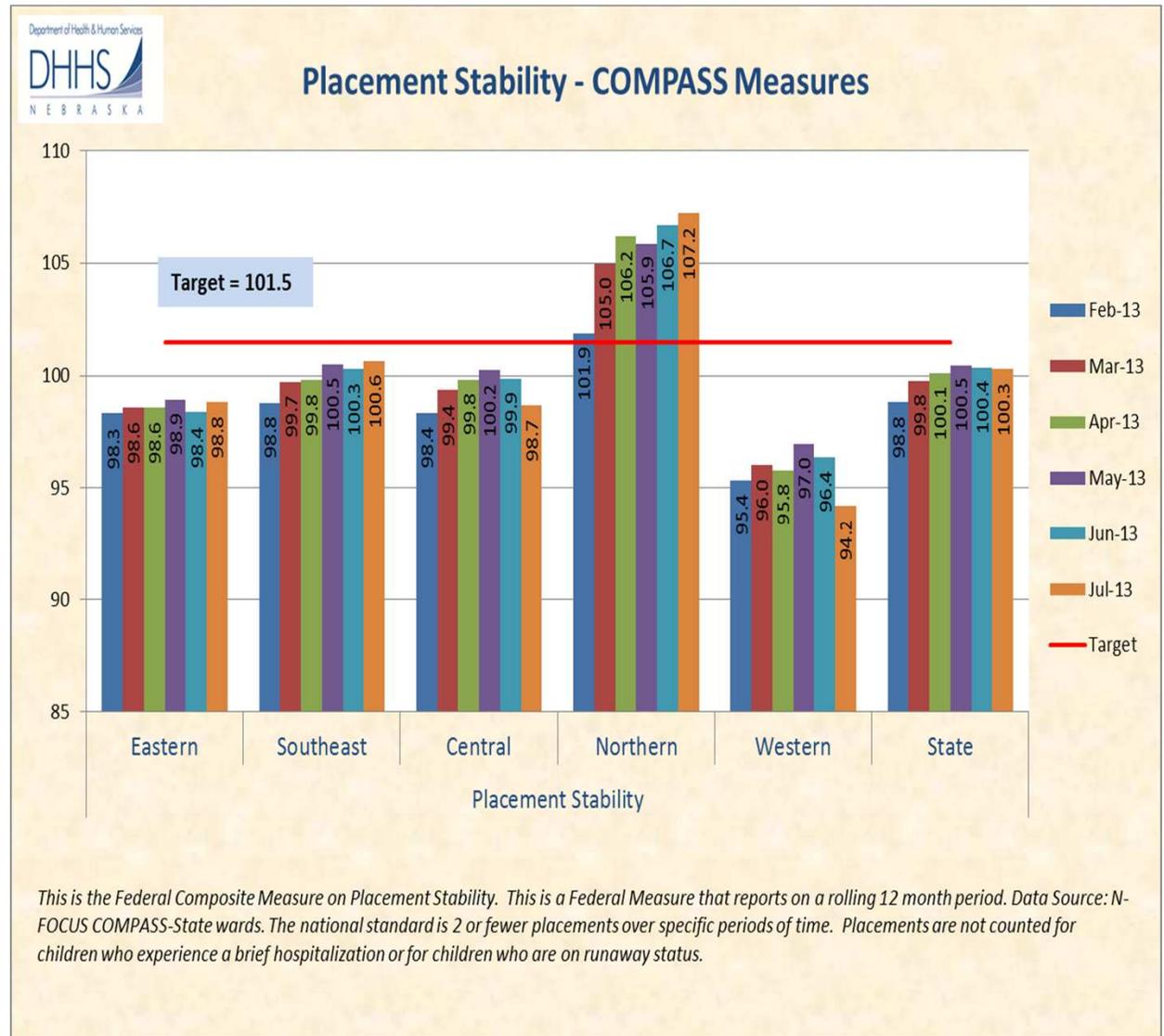
### CQI Team Priority:

\*Statewide External Stakeholder Team

\*Eastern, Northern, Southeast and Western Service Areas.

\*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.

## OUTCOME STATEMENT: Children Will Experience Stability and Permanency In Their Lives



**Data Review Frequency: Quarterly (March, June, September, December)**

### OUTCOME STATEMENT: Children Will Experience Stability and Permanency In Their Lives

Kinship Care for Out of Home Wards

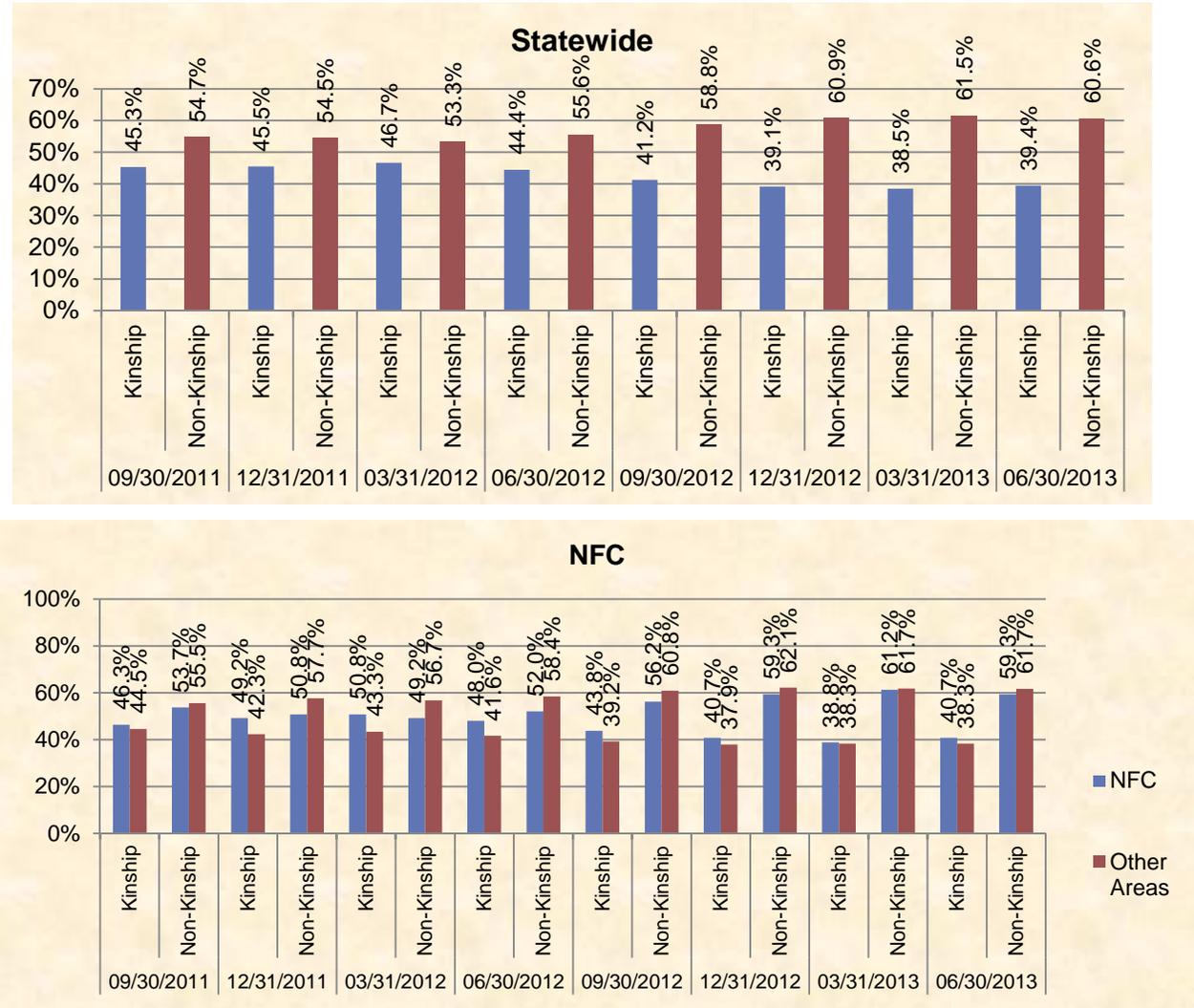
**Strengths/Opportunities:**

**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*



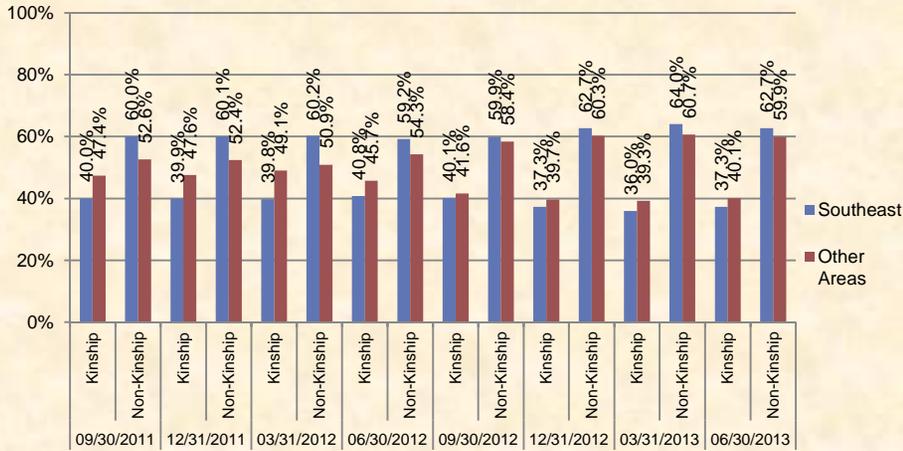
Per LB 265 (July 2013) a “kinship home means a home where a child or children receive foster care and at least one of the primary caretakers has previously lived with or is a trusted adult that has a pre-existing, significant relationship with the child or children or a sibling of such a child or children....”

**Data Review Frequency: Quarterly (April, July, November & January)**

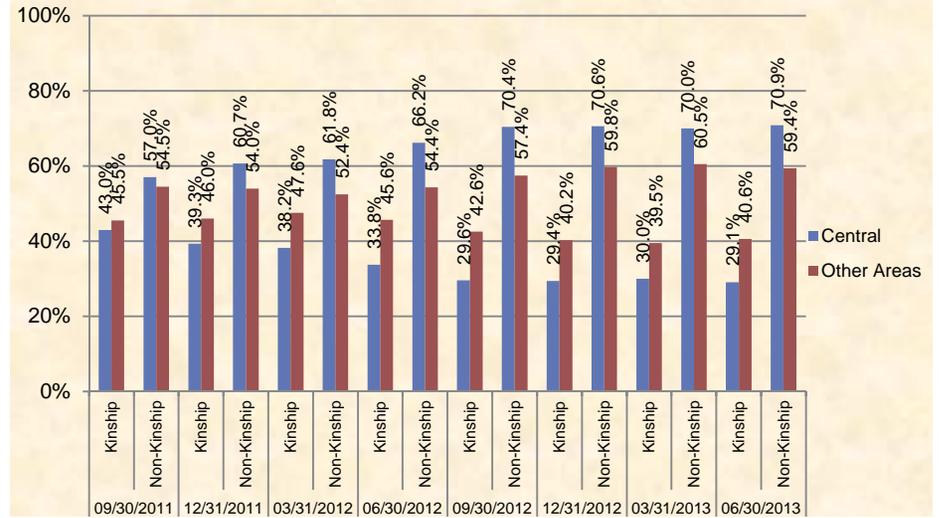
**Kinship Care for Out of Home Wards**

**OUTCOME STATEMENT: Children Will Experience Stability and Permanency In Their Lives**

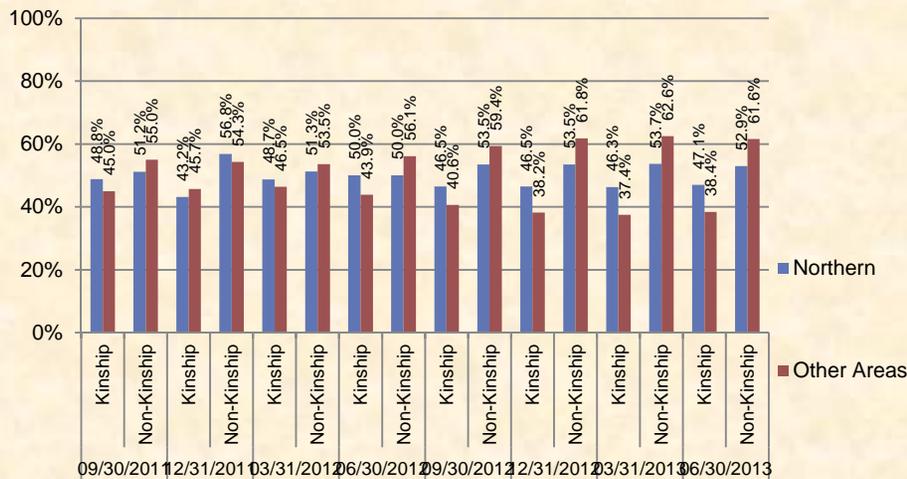
**Southeast**



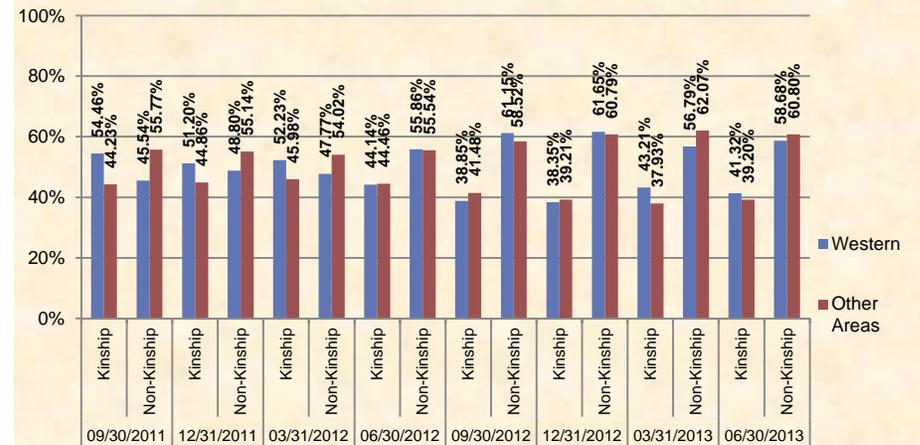
**Central**



**Northern**



**Western**



## Placement Change Documentation w/in 72 hours

### Strengths/Opportunities:

-State hit a record high! Great job! Seeing improvements in tribal data. Northern Service area achieved 96.3%

### Barriers:

-Data analysis determined that placements occurring on Thurs & Friday are not being documented timely.  
 -Staff need additional training and direction on removals and placement change documentation.

### Action Items:

#### \*Completed:

-July 2013 – changes were made in N-FOCUS to allow CFS Supervisors to make corrections to placement changes in N-FOCUS.

-Workgroup tasked to work on definitions of removals and placement changes and create instruction materials for staff.

- Service areas are implementing creative methods to remind staff to document placement changes (email reminders, signage). Service area administrators are also holding staff accountable to providing explanations when documentation timeframes are not met.

#### \*Planned:

-Quality Tip will be sent to CFS Staff with finalized definitions and instructions about removals and placement changes.

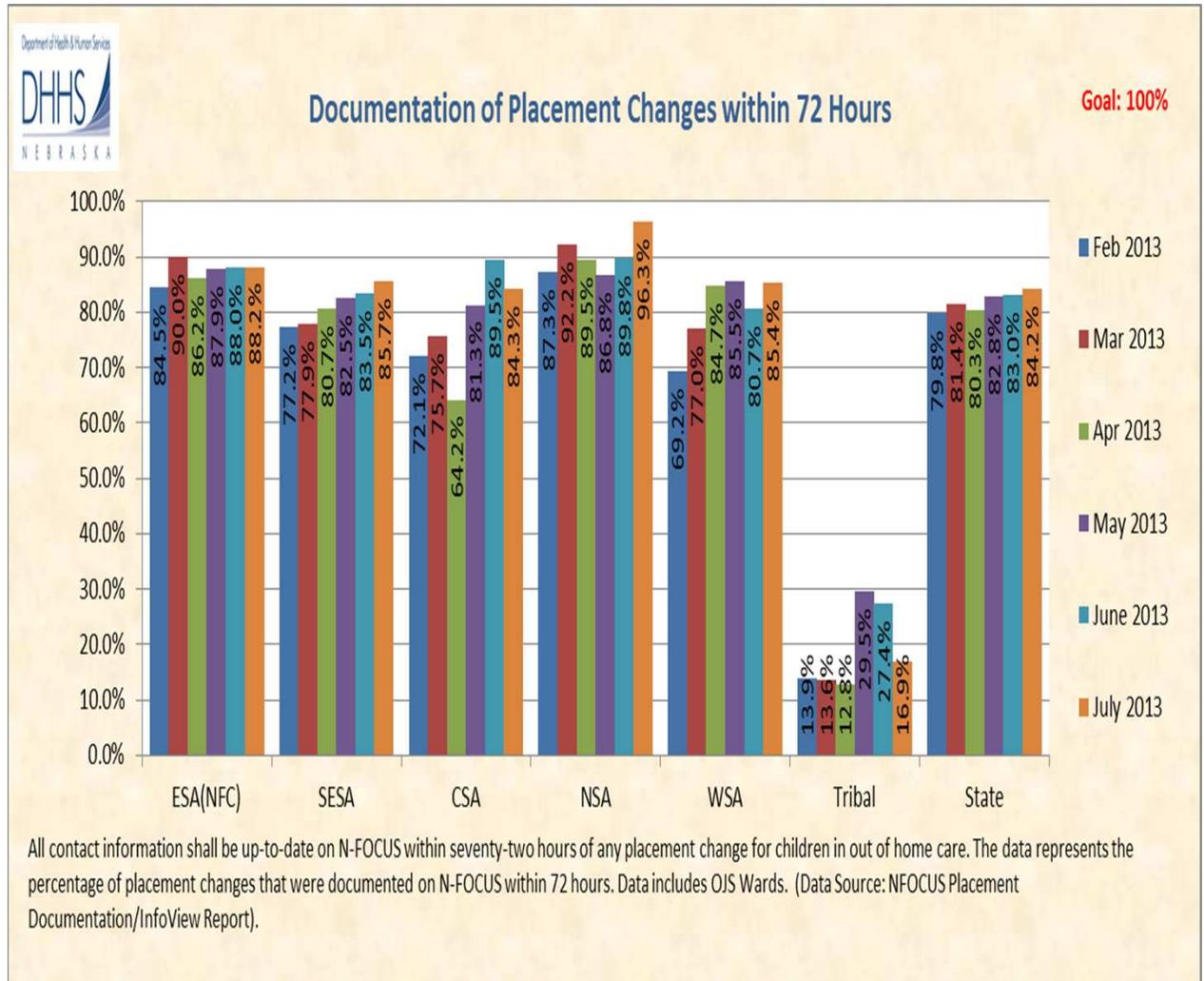
### CQI Team Priority:

\*Central, Northern, Southeast and Western Service Areas.

\*Tribes

**\*Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.**

## OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE.



**Data Review Frequency: Monthly**

**OUTCOME STATEMENT: Children Will Experience Stability and Permanency In Their Lives**

**Family Team Meeting**

**Strengths/Opportunities:**

-State reached an all time high! Positive trend in Eastern, Southeast, Central and Western Service areas!

**Barriers:**

**Action Items:**

*\*Completed:*

- Service Area Admin/Staff sent FTM templates to the Training Administrator, to put together a common guide/template for new worker and current worker training.
- Case management due date report includes Family Team Meetings.
- Procedure Update #15-2013 regarding Family Team Meetings was issued on 4/19/13.

*\*Planned:*

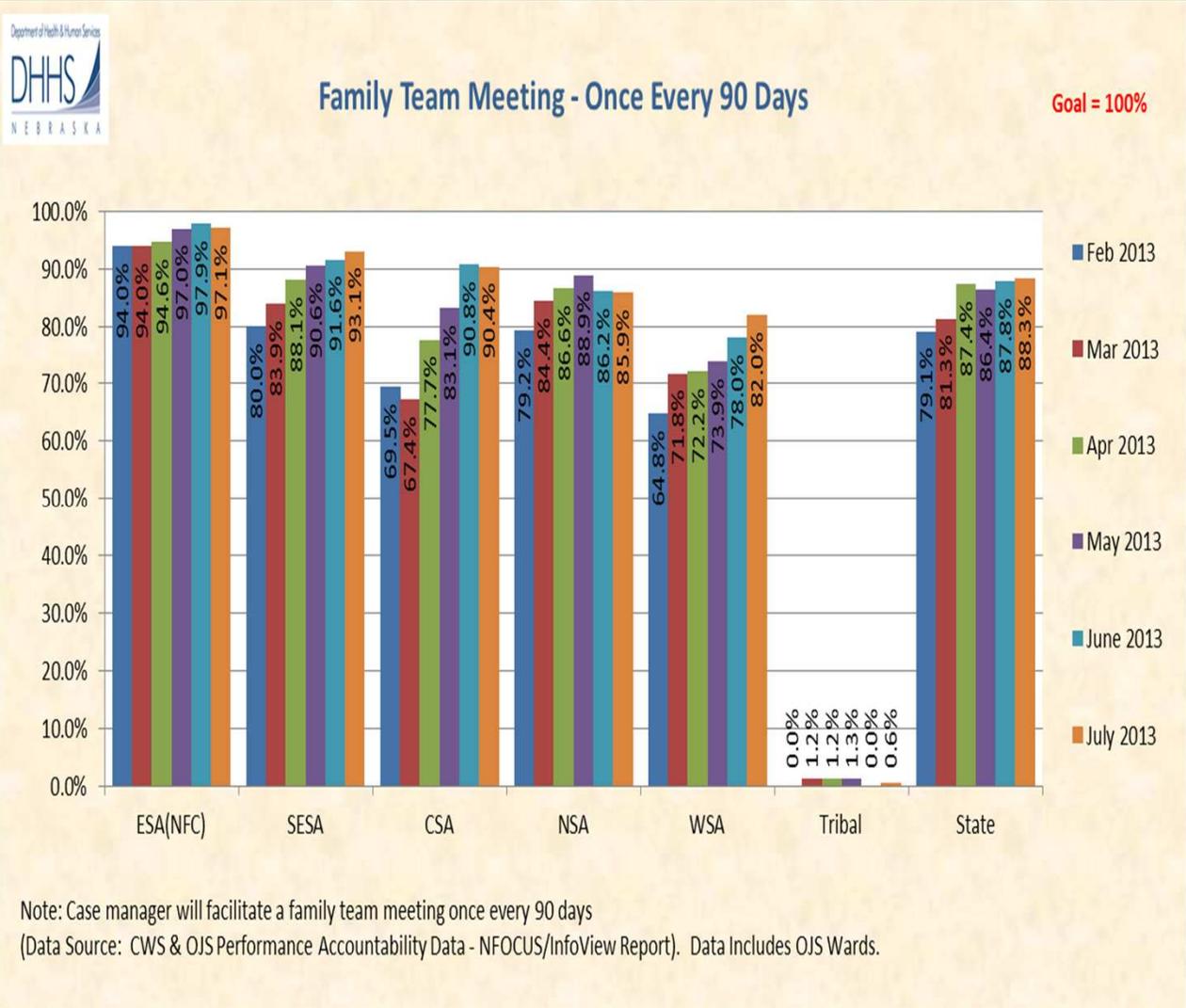
- Central Office Staff will review and make necessary changes to FTM report on Performance Accountability Report.
- Deputy Director and Training Administrator will put together a plan to address Family Team Meeting Quality.

**CQI Team Priority:**

\*Central, Eastern, Northern, and Western Service Areas

\*Tribes

**\*Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.**



**Data Review Frequency: Monthly**

**Federal Visitation with State Wards**

**Strengths/Opportunities:**

The Federal Measure is 90%, this will increase to 95% in 2015. NE has set goal at 95% in preparation for the change with the federal measure. All Service Areas are currently meeting this goal!!! Great Work!

*Note: In SFY11, NE reported 48.4% monthly child contact with this federal measure! WOW!!!*

**Barriers:**

-Lack of documentation in tribal cases

**Action Items:**

*\*Completed:*

- Case Management Due Date Report includes Monthly Child Contact.
- Sherri Haber and Sherri Eveleth will work with Vicki Maca to identify and provide support to the tribes
- SAA/CFS Admin have been submitting a list and reasons for all missed worker visits with the child to the Deputy Director for review.
- SAA/CFS Admin have been coordinating visits with all youth placed out of state to ensure visits are taking place every month.

*\*Planned:*

-Some Service areas are planning to implement quality reviews and training with their staff on the quality of face to face contact.

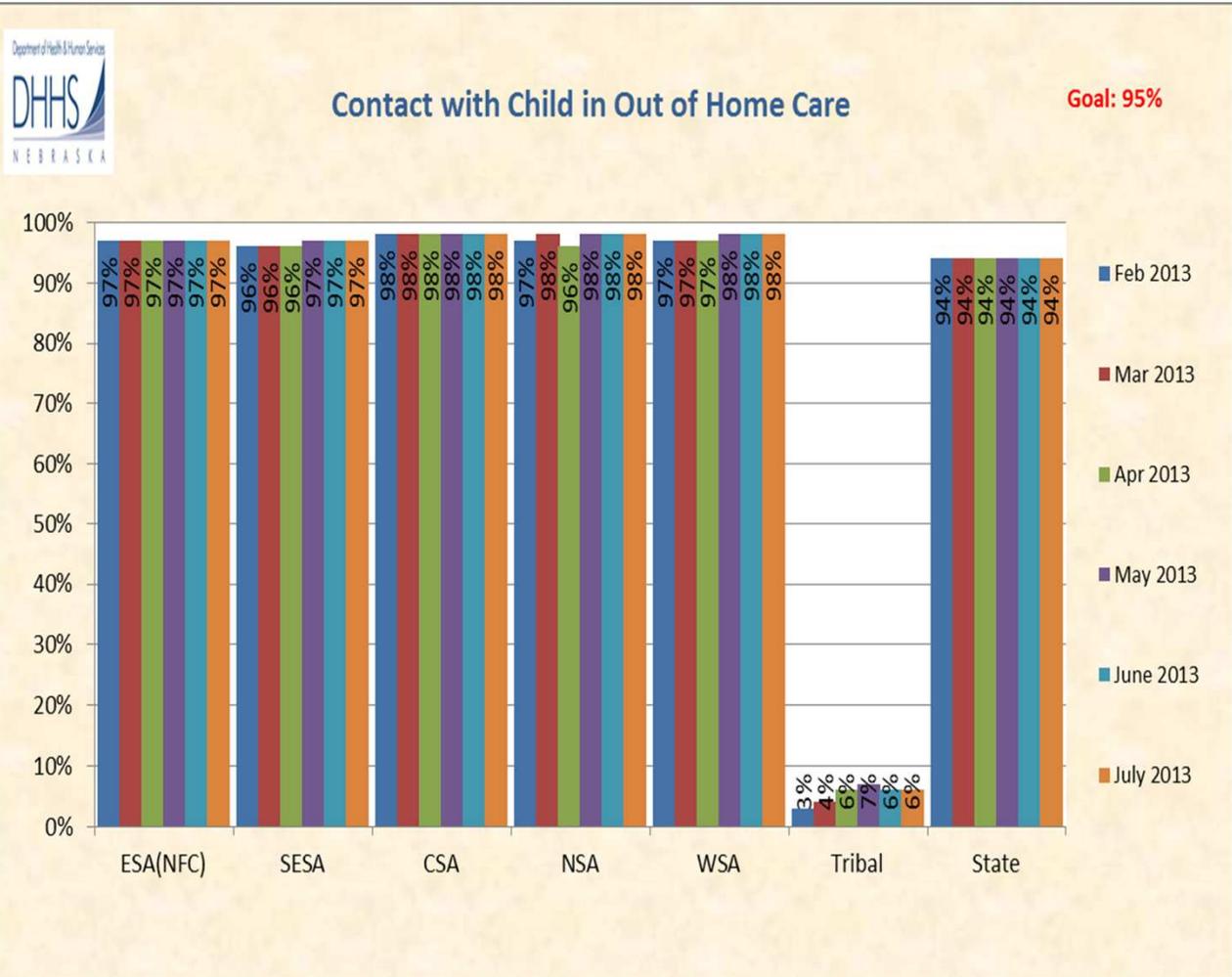
**CQI Team Priority:**

- \*Central and Southeast Service Areas
- \*Tribes

**\*Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.**

**Data Review Frequency: Monthly**

**OUTCOME STATEMENT: Children Will Experience Stability and Permanency In Their Lives**



Case manager will have monthly face to face contact with the child. This federal visitation requirement is a cumulative measure for the federal fiscal year (October to December). Youth are required to be visited 95% of the months they are in out of home care. Data includes OJS Wards. (Data Source: Federal Visitation Data - NFOCUS/InfoView Reports).

**Monthly Contact with IH/OOH Court Involved Youth**

**Strengths/Opportunities:**

-All Service Areas continue to achieve over 97% in this measure.

**Barriers:**

-Lack of documentation in tribal cases

**Action Items:**

*\*Completed:*

- Case Management Due Date Report includes Monthly Child Contact.
- Sherri Haber and Sherri Eveleth will work with Vicki Maca to identify and provide support to the tribes
- SAA/CFS Admin have been submitting a list and reasons for all missed worker visits with the child to the Deputy Director for review.
- SAA/CFS Admin have been coordinating visits with all youth placed out of state to ensure visits are taking place every month.

*\*Planned:*

-Some Service areas are planning to implement quality reviews and training with their staff on the quality of face to face contact

**CQI Team Priority:**

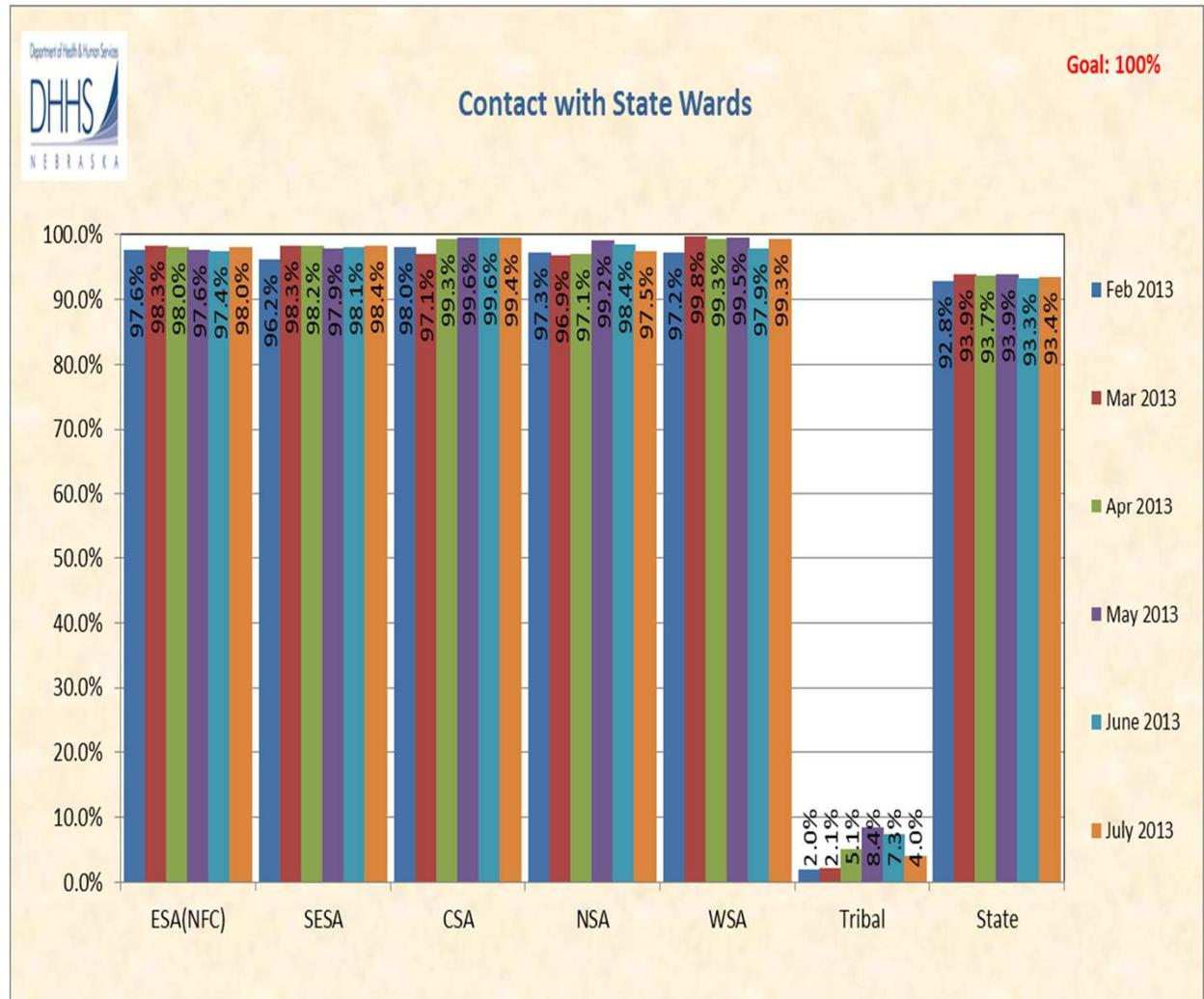
\*Central and Southeast Service Areas

\*Tribes

**\*Refer to Local Service Area or Tribal Action Plan Forms for detailed Action Items and Strategies for each Area/Tribe.**

**Data Review Frequency: Monthly**

**OUTCOME STATEMENT #3: Children Will Experience Stability and Permanency In Their Lives**



NE GOAL is 100%. Case manager will have monthly face to face contact with all statewards. (Data Source: CWS & OJS Performance Accountability Data - NFOCUS/InfoView Reports).

**Monthly Contact with Non-Court Involved Child**

**Strengths/Opportunities:**

- The state reached an all time high in July 2013 at 96.4%. *Note: In May 2012, the state performance was at 53.4% for this measure..*
- Central Service Area has achieved 100% in this measure in 5 out of the last 6 months. Positive trends in Eastern,, Northern and Western Service Areas.

**Barriers:**

- Lack of documentation in tribal cases

**Action Items:**

*\*Completed:*

- Case Management Due Date Report includes Monthly Child Contact.
- Sherri Haber and Sherri Eveleth will work with Vicki Maca to identify and provide support to the tribes
- SAA/CFS Admin have been submitting a list and reasons for all missed worker visits with the child to the Deputy Director for review.
- SAA/CFS Admin have been coordinating visits with all youth placed out of state to ensure visits are taking place every month.

*\*Planned:*

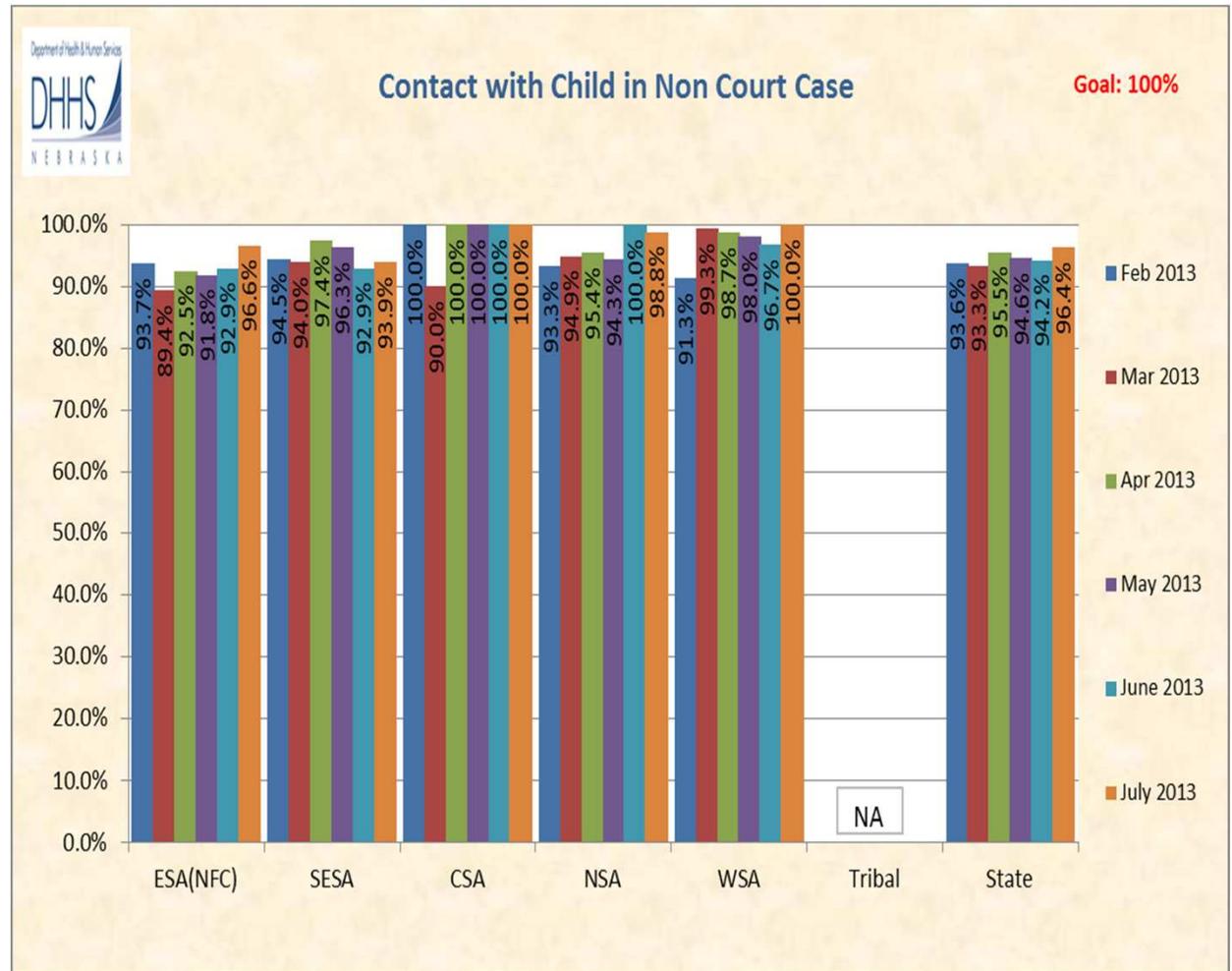
- Some Service areas are planning to implement quality reviews and training with their staff on the quality of face to face contact

**CQI Team Priority:**

- \*Central and Southeast Service Areas

**Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

**OUTCOME STATEMENT #3: Children Will Experience Stability and Permanency In Their Lives**



Case manager will have monthly face to face contact with the child (Data Source: CWS & OJS Performance Accountability Data - NFOCUS/InfoView Reports).

**Data Review Frequency: Monthly**

# STRUCTURED DECISION MAKING (SDM)

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**OUTCOME STATEMENT: CHILDREN  
ARE SAFELY MAINTAINED IN THEIR  
HOMES WHENEVER POSSIBLE AND  
APPROPRIATE**

**Goal Statement: Measure youth's Safety,  
Permanency and Well-being.**

### SDM Reunification Assessments

**Strengths/Opportunities:**

# of Youth with NO finalized Reunification assessments as of 8/19/13:	
State	252
Central	34
Eastern	67
Northern	28
Southeast	88
Western	35

**Barriers:**

**Action Items:**

*\*Completed:*

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff etc.)

*\*Planned:*

- Upcoming Quick Tip will include video instructions on how to use InfoView reports to identify and address cases that do not have finalized SDM Assessments.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

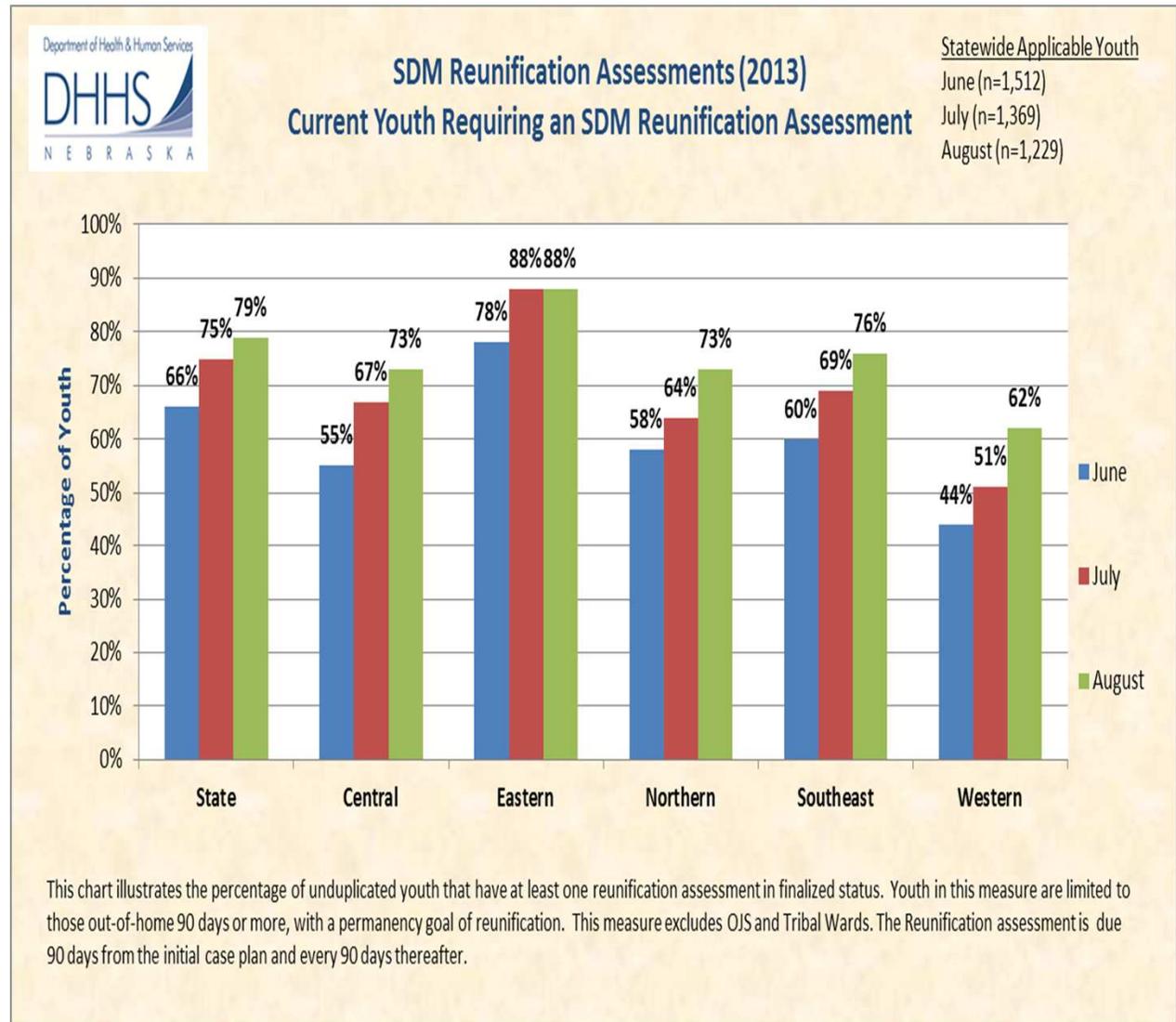
**CQI Team Priority:**

\* ALL Service Areas

**\*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

**Data Review Frequency: Monthly**

## OUTCOME STATEMENT #3: Children Will Experience Stability and Permanency In Their Lives



## SDM Risk Reassessment

### Strengths/Opportunities:

# of Cases with NO finalized Risk Reassessment as of 8/19/13:	
State	68
Central	1
Eastern	25
Northern	14
Southeast	21
Western	7

### Barriers:

#### Action Items:

##### \*Completed:

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff, etc.)

##### \*Planned:

- Upcoming Quick Tip will include video instructions on how to use InfoView reports to identify and address cases that do not have finalized SDM Assessments.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

#### CQI Team Priority:

\* ALL Service Areas

**\*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

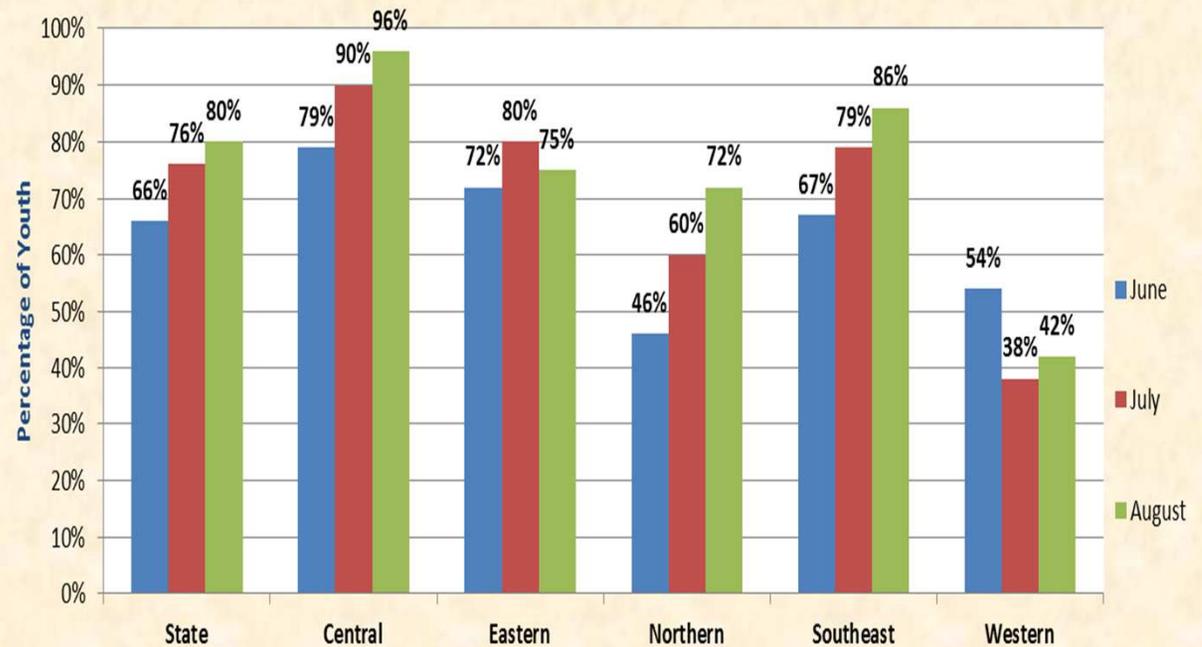
**Data Review Frequency: Monthly**

## OUTCOME STATEMENT #3: Children Will Experience Stability and Permanency In Their Lives



### SDM Risk Reassessments (2013) Current Cases Requiring an SDM Risk Reassessment

Statewide Applicable Cases  
June (n=469)  
July (n=379)  
August (n=377)



This chart illustrates the percentage of unduplicated cases that have at least one risk reassessment in finalized status. Cases in this measure are limited to those in which a case plan has been created and at least one child has been at home for at least 90 days. This measure excludes cases with Out of Home care, Runaway or Independent Living Youth. This measure excludes OJS and Tribal Wards. The Risk Reassessment is due 90 days from the initial case plan and every 90 days thereafter.

### SDM Family Strengths and Needs Assessment (FSNA)

**Strengths/Opportunities:**

# of Cases with NO finalized FSNA as of 8/19/13:	
State	293
Central	42
Eastern	35
Northern	77
Southeast	56
Western	83

**Barriers:**

**Action Items:**

*\*Completed:*

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff, etc.)

*\*Planned:*

- Upcoming Quick Tip will include video instructions on how to use InfoView reports to identify and address cases that do not have finalized SDM Assessments.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

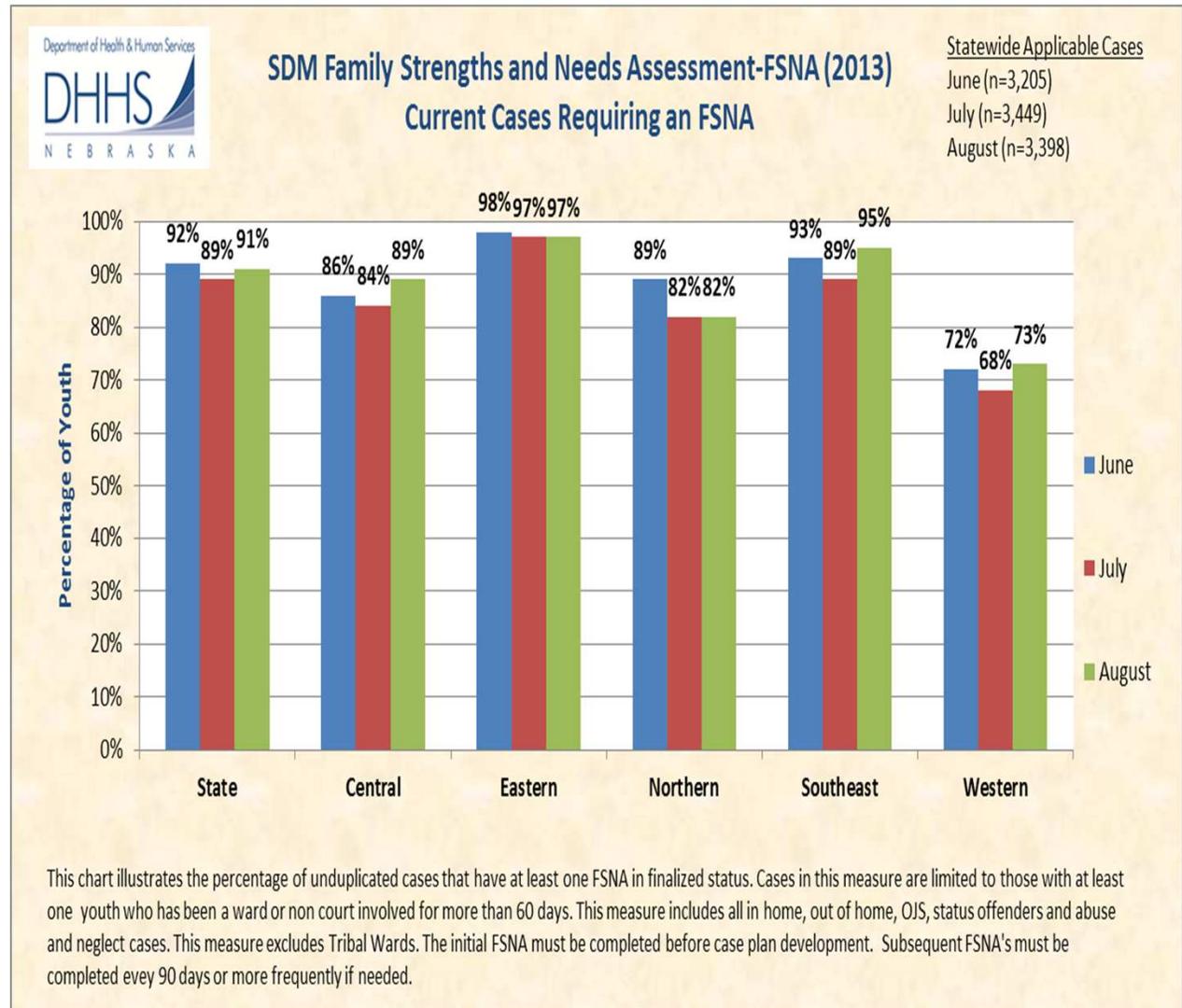
**CQI Team Priority:**

\* ALL Service Areas

**Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

**Data Review Frequency: Monthly**

### OUTCOME STATEMENT #3: Children Will Experience Stability and Permanency In Their Lives



## SDM Administrative Reviews

### Strengths/Opportunities:

-The number of Admin Reviews has been decreasing in the past few months.

### Barriers:

### Action Items:

#### *\*Completed:*

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff,

#### *\*Planned:*

- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

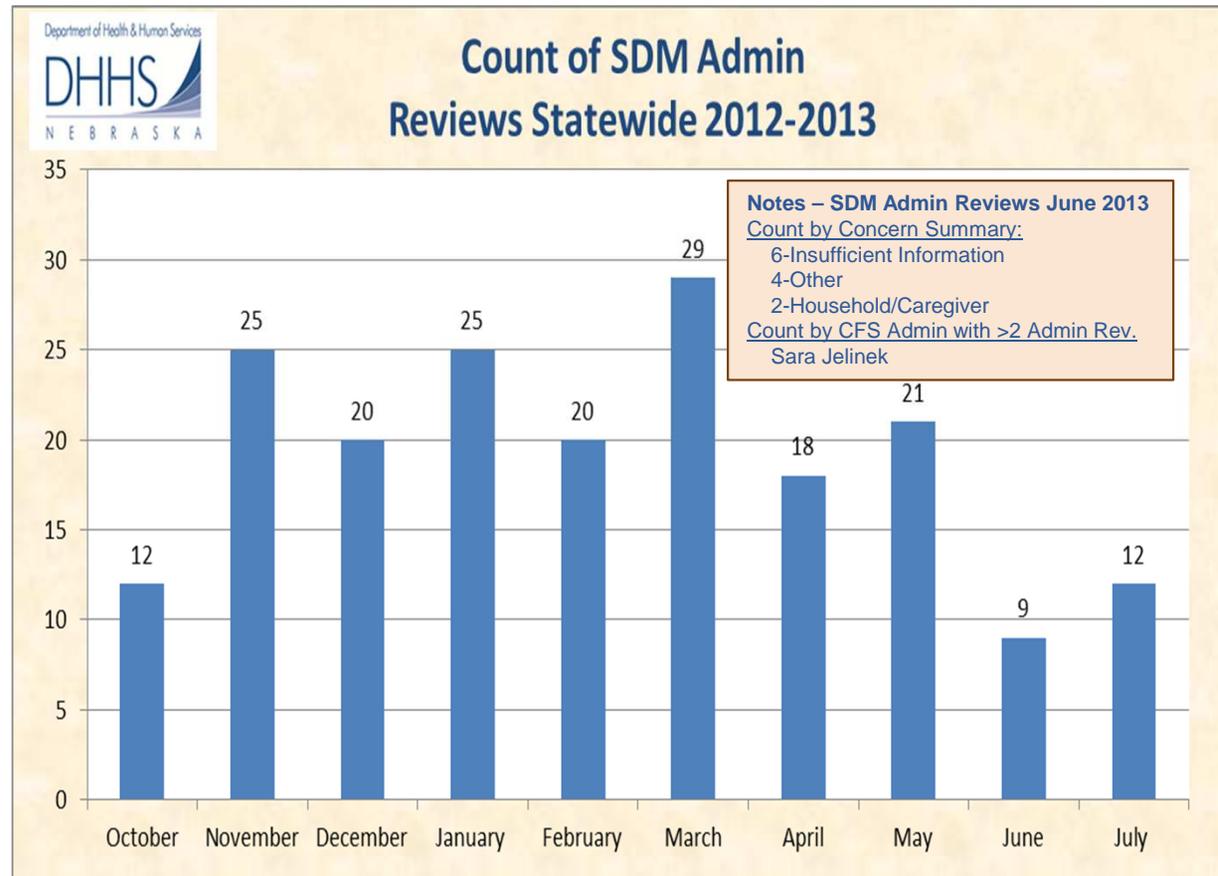
### CQI Team Priority:

\* ALL Service Areas

**\*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

**Data Review Frequency: Monthly**

## OUTCOME STATEMENT #3: Children Will Experience Stability and Permanency In Their Lives



This represents the count of Administrative Reviews sent by the QA unit to alert the Worker, Supervisor and Administrator of possible safety concerns due to lack of information or error in completion and scoring of the SDM assessment.

*Note: The total number of SDM Assessments applicable for review increased in the month of November 2012 due to the following reasons: QA unit began reviewing Ongoing SDM assessments completed by NFC staff; and more ongoing SDM assessments were due and completed in CSA, NSA and WSA since SDM was implemented in July 2012.*

### SDM Assessment Quality Results – Finalized Timely

**Strengths/Opportunities:**

-Slight increase in the quality of Ongoing SDM assessments.

**Barriers:**

**Action Items:**

*\*Completed:*

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff)
- N-FOCUS changes were implemented to add narrative boxes to each question on the FSNA.
- Ongoing Case Management Due Date Report includes SDM due dates.

*\*Planned:*

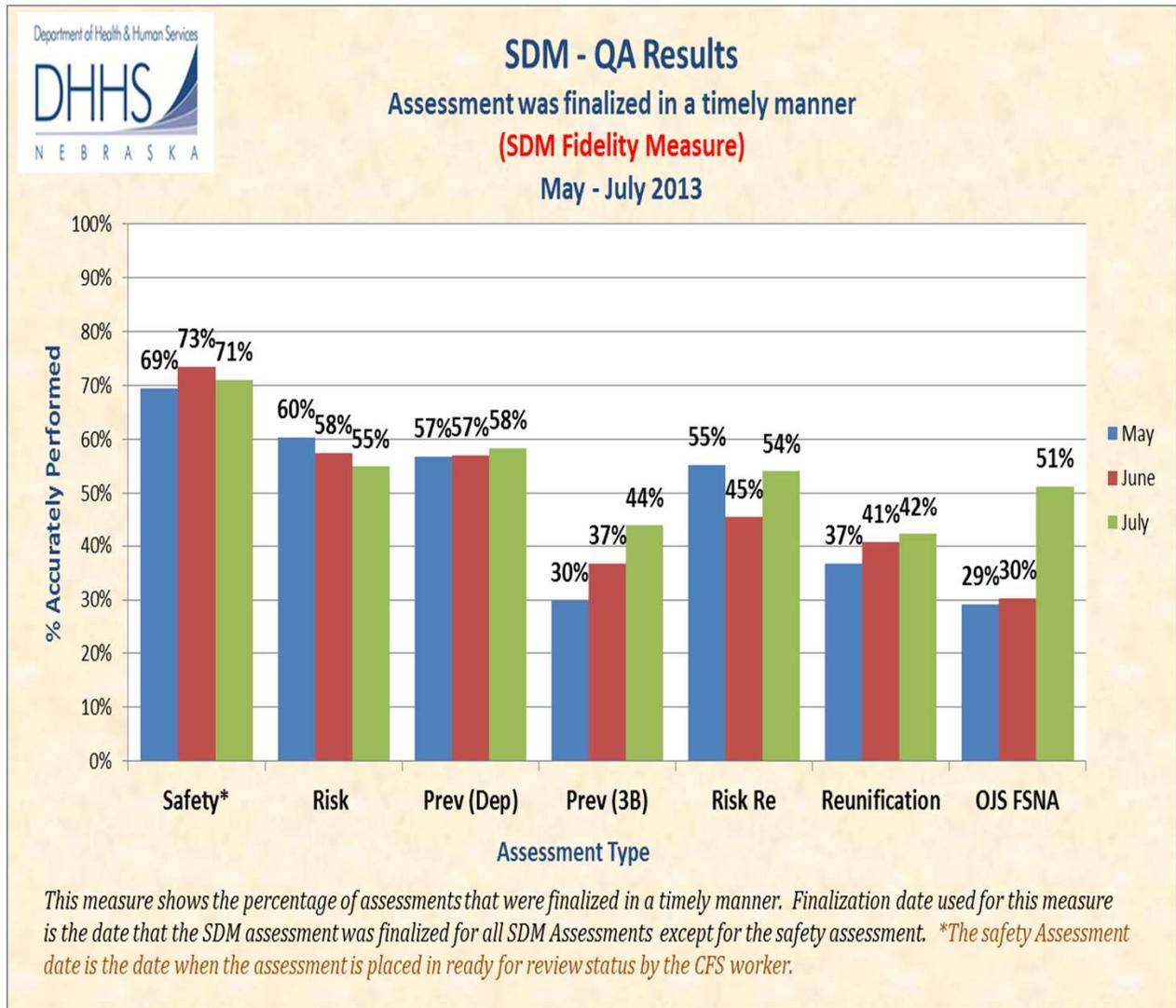
- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
- N-FOCUS changes are planned to add narrative boxes to each question on the remaining SDM Tools.
- Initial Assessment Case Management Due Date Report is being developed to include SDM due dates.

**CQI Team Priority:**

\* ALL Service Areas

**\*Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

### OUTCOME STATEMENT #3: Children Will Experience Stability and Permanency In Their Lives



**Data Review Frequency: Monthly**

### SDM Initial Assessment Quality Results

**Strengths/Opportunities:**

-Higher quality of documentation is seen in the Safety Assessments completed by IA staff.

**Barriers:**

**Action Items:**

*\*Completed:*

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff)
- N-FOCUS changes were implemented to add narrative boxes to each question on the FSNA.
- Ongoing Case Management Due Date Report includes SDM due dates.

*\*Planned:*

- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
- N-FOCUS changes are planned to add narrative boxes to each question on the remaining SDM Tools.
- Initial Assessment Case Management Due Date Report is being developed to include SDM due dates.

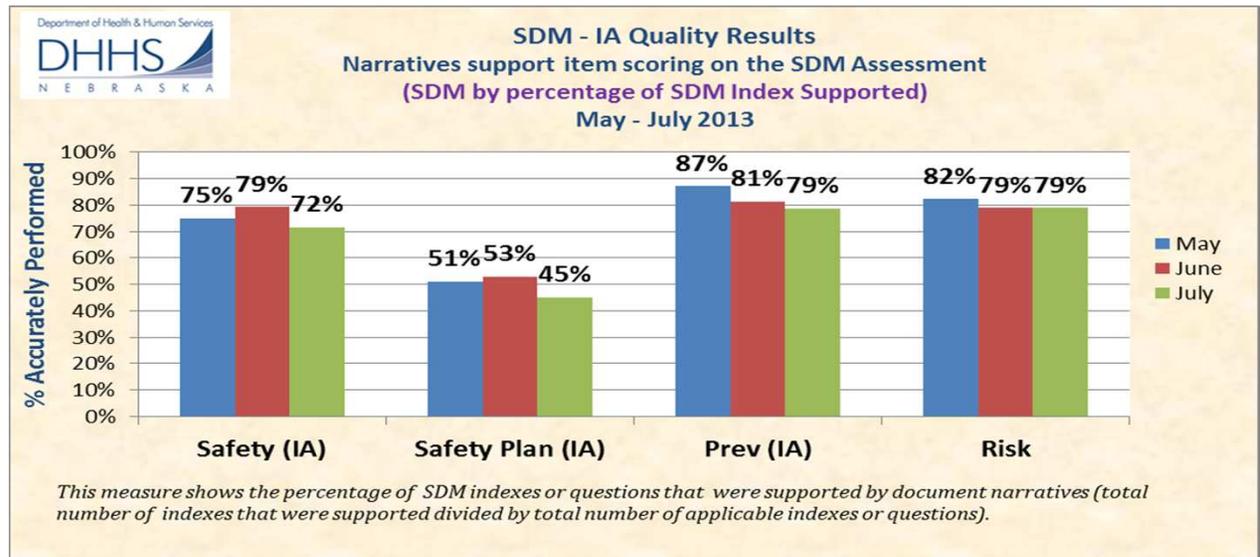
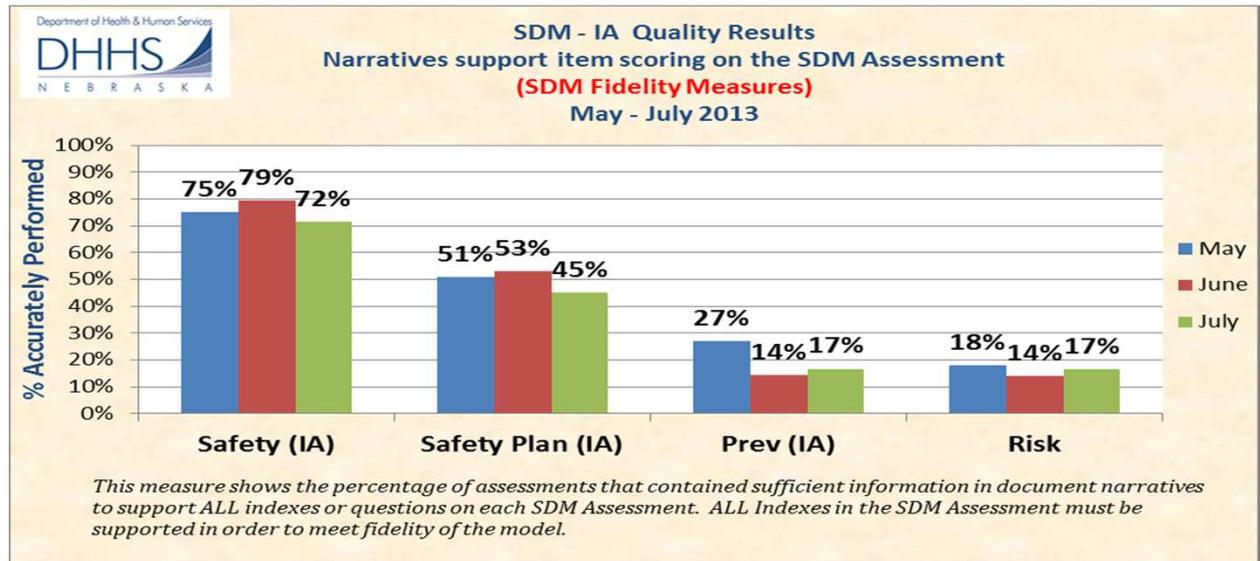
**CQI Team Priority:**

\* ALL Service Areas

**Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

**Data Review Frequency: Monthly**

## OUTCOME STATEMENT #3: Children Will Experience Stability and Permanency In Their Lives



## SDM Ongoing Assessment Quality Results

### Strengths/Opportunities:

-Lower quality of documentation is seen in the FSNA Assessments.

### Barriers:

### Action Items:

#### \*Completed:

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff)
- N-FOCUS changes were implemented to add narrative boxes to each question on the FSNA.
- Ongoing Case Management Due Date Report includes SDM due dates.

#### \*Planned:

- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
- N-FOCUS changes are planned to add narrative boxes to each question on the remaining SDM Tools.
- Initial Assessment Case Management Due Date Report is being developed to include SDM due dates.

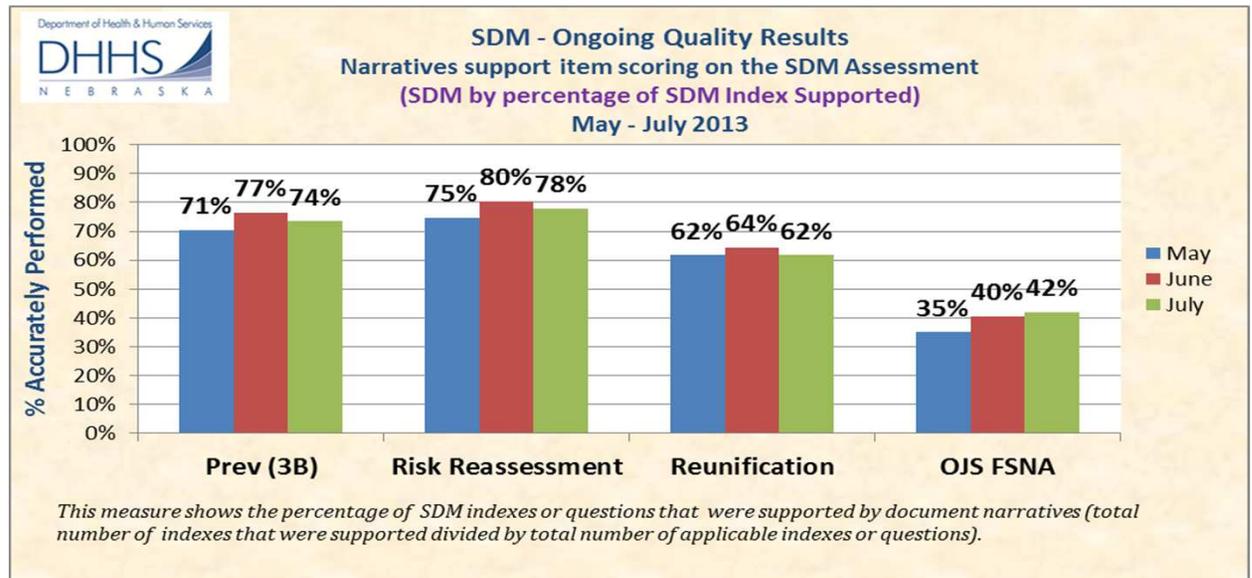
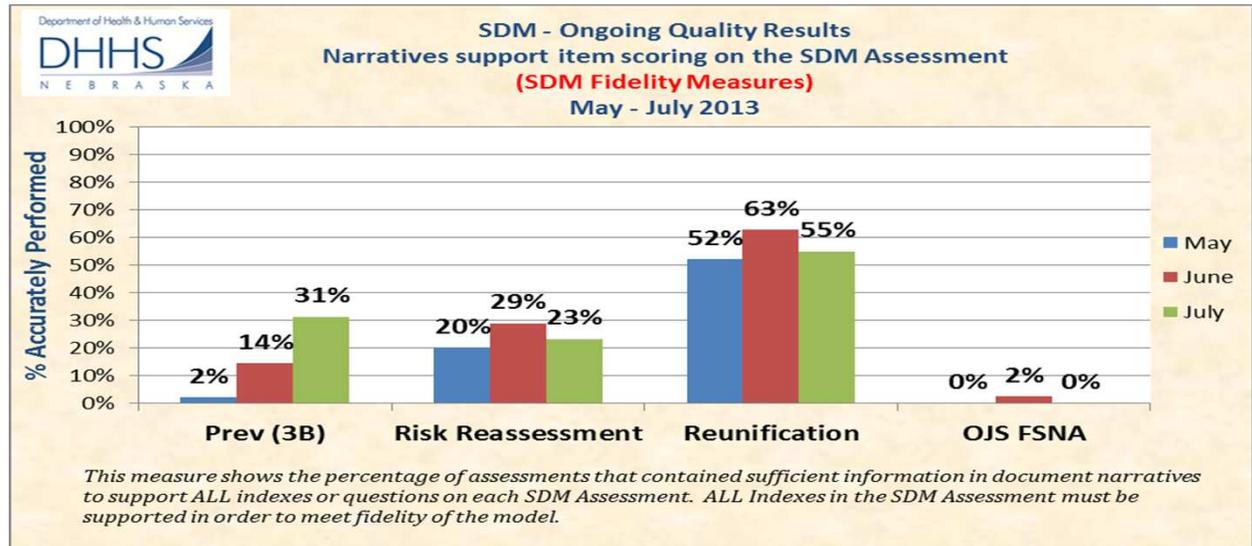
### CQI Team Priority:

\* ALL Service Areas

**Refer to Local Service Area Action Plan Forms for detailed Action Items and Strategies for each Service Area.**

**Data Review Frequency: Monthly**

## OUTCOME STATEMENT #3: Children Will Experience Stability and Permanency In Their Lives



# CHAPTER 4: WORKFORCE STABILITY

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**OUTCOME STATEMENT: THE DIVISION OF CHILDREN AND FAMILY SERVICES' WORKFORCE IS WELL-QUALIFIED, TRAINED, SUPERVISED AND SUPPORTED**

**Goal Statement: The number of employees who do their jobs with confidence and competency will increase and caseloads will align with CWLA standards**



**OUTCOME STATEMENT: The Division of CFS Workforce is Well-Qualified , Trained, Supervised and Supported.**

**Caseload Sizes for IA & Ongoing**

**Strengths/Opportunities:**

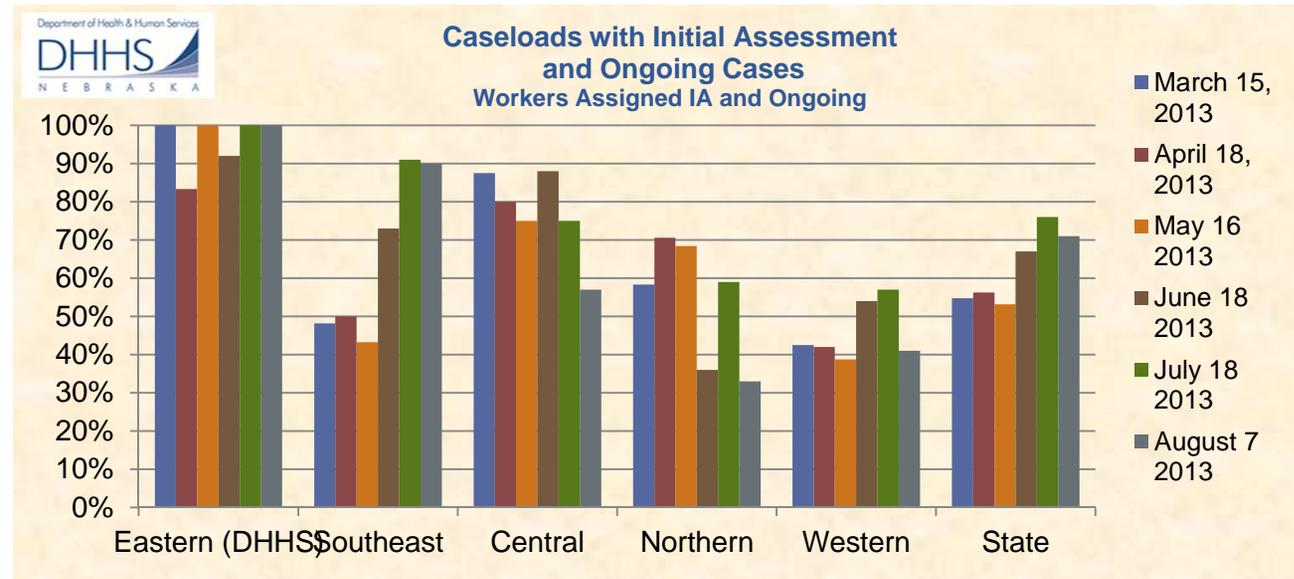
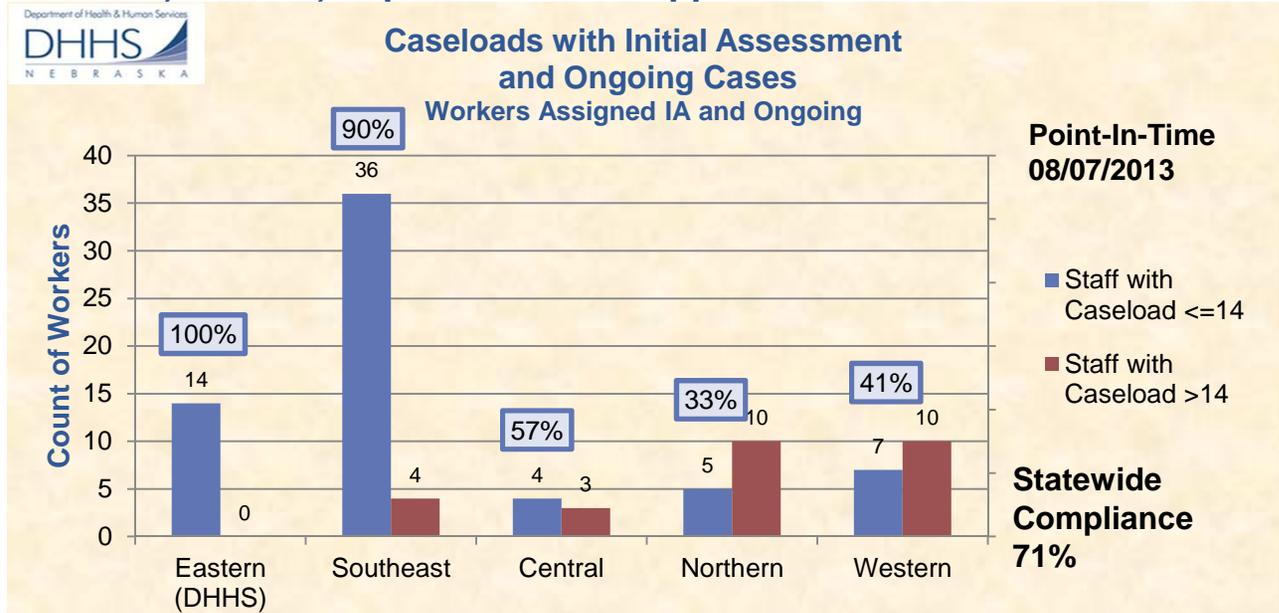
**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

**Data Review Frequency: Monthly**



**OUTCOME STATEMENT: The Division of CFS Workforce is Well-Qualified , Trained, Supervised and Supported.**

**Caseload Sizes**

**Strengths/Opportunities:**

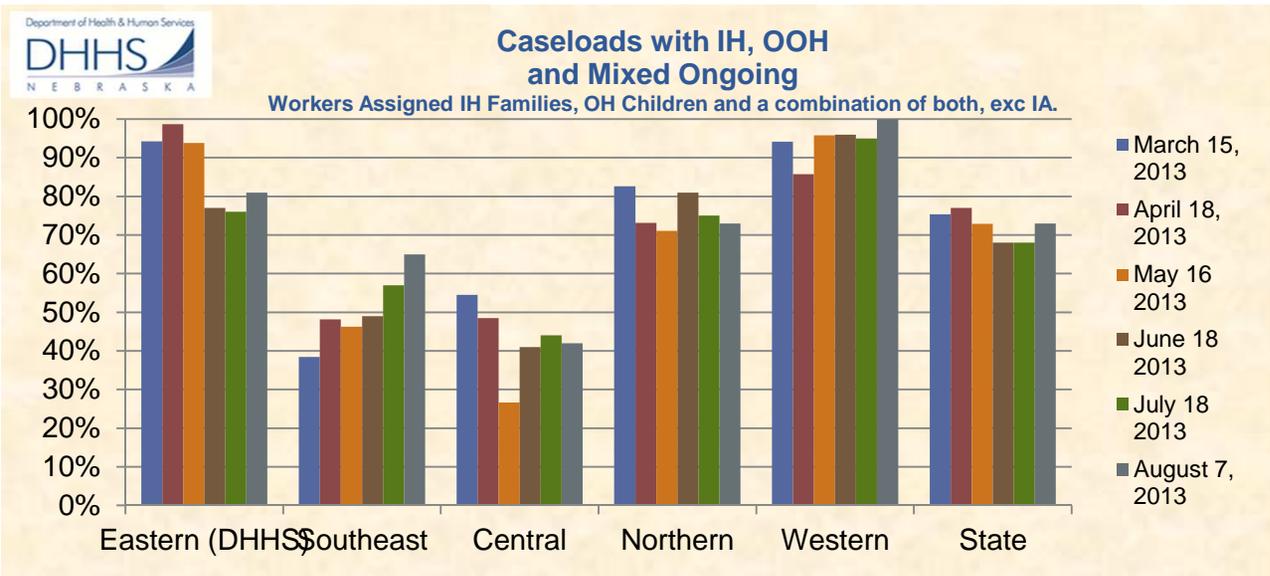
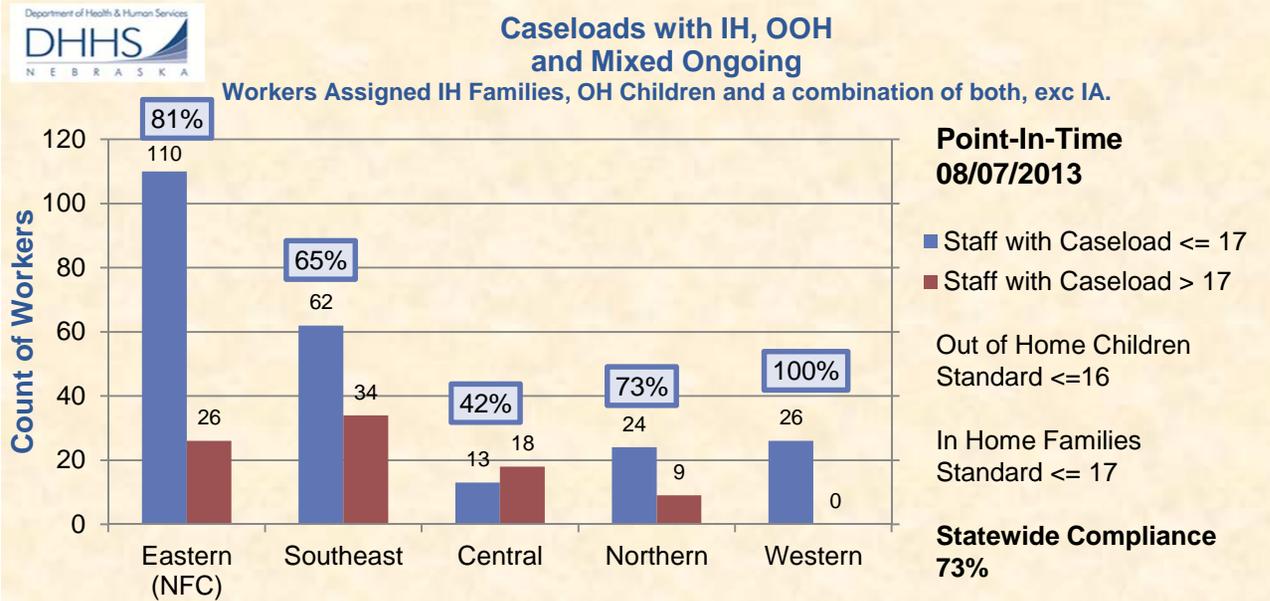
**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

**Data Review Frequency: Monthly**



**OUTCOME STATEMENT: The Division of CFS Workforce is Well-Qualified , Trained, Supervised and Supported.**

**Caseload Rates**

**Strengths/Opportunities:**

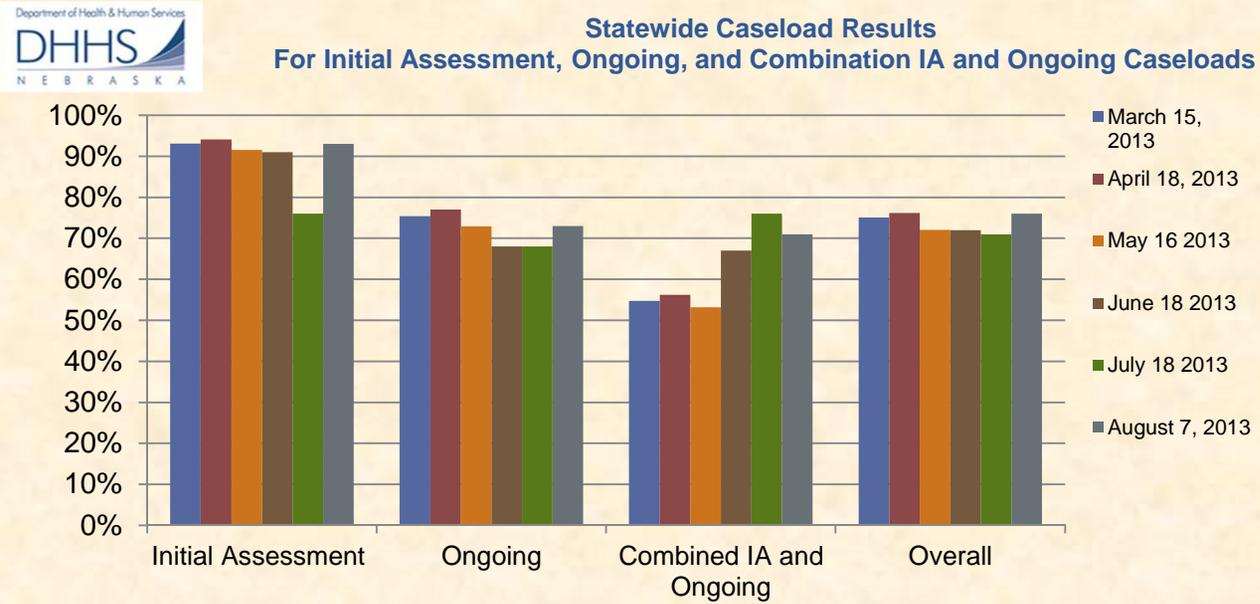
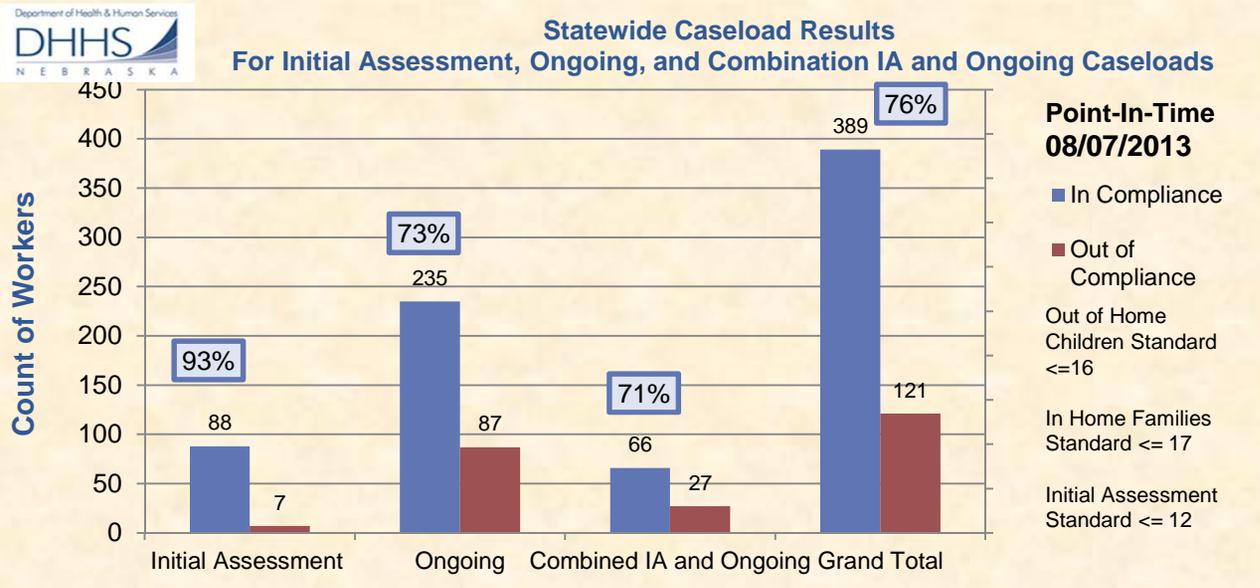
**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

**Data Review Frequency: Monthly**



**CFS Staff Turnover**

**OUTCOME STATEMENT: The Division of CFS Workforce is Well-Qualified , Trained, Supervised and Supported.**

**Strengths/Opportunities:**

**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

**Protection and Safety Turnover Percent\***

Title	Oct 2012	Nov 2012	Dec 2012	Jan 2013	Feb 2013	Mar 2013	Apr 2013	May 2013	June 2013	July 2013
CFS Spec Trainee	0.00%	2.60%	0.00%	4.26%	0.00%	0.00%	1.89%	1.89%	6.12%	7.32%
CFS Specialist	1.41%	2.35%	1.73%	1.17%	1.81%	2.04%	1.26%	1.99%	2.21%	2.21%
CFS Supervisors	0.00%	1.37%	0.00%	0.00%	0.00%	0.00%	1.32%	1.32%	2.74%	2.82%

**Turnover Percent July 2013**

Title	CSA PS	ESA PS	NSA PS	SESA PS	WSA PS
CFS Spec Trainee	0.00%	0.00%	33.33%	0.00%	0.00%
CFS Specialist	0.00%	1.01%	5.00%	2.11%	3.28%
CFS Supervisors	0.00%	6.67%	0.00%	4.76%	0.00%

**Turnover Counts July 2013**

Title	CSA PS	ESA PS	NSA PS	SESA PS	WSA PS
CFS Spec Trainee	0	0	3	0	0
CFS Specialist	0	1	3	3	2
CFS Supervisors	0	1	0	1	0

**Aggregate Counts**

Title	Total Employe	Term Employe	Turnover
CFS Spec Trainee	41	3	7.32%
CFS Specialist	407.5	9	2.21%
CFS Supervisors	71	2	2.82%

*\*Note: Turnover rates are calculated using filled positions at the end of the month and includes only those employees who left state government during that month. It does not include employees who transferred from one program or Division to another within DHHS or from DHHS to another state agency. Turnover is as of the last day of posted month.*

**Data Review Frequency: Quarterly**

**NFC Staff Turnover**

**Strengths/Opportunities:**

**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

**OUTCOME STATEMENT: Nebraska Family Collaborative Workforce is Well-Qualified , Trained, Supervised and Supported.**

NFC TURNOVER PERCENT*										
Title	12-Oct	12-Nov	12-Dec	13-Jan	13-Feb	13-Mar	13-Apr	13-May	13-Jun	13-Jul
FPS Trainee	4.50%	16.60%	0.00%	0.00%	0.00%	66.60%	0.00%	14.20%	0.00%	0.00%
FPS	2.94%	2.02%	1.34%	4.92%	2.04%	4.22%	5.00%	2.15%	4.44%	5.22%
FP Supervisor	0.00%	4.50%	4.76%	4.50%	0.00%	0.00%	0.00%	0.00%	0.00%	4.76%

Aggregate Counts – July 2013			
Title	Total Employees	Term Employees	Turnover
FPS Trainee	6	0	0%
FPS	134	7	5.22%
FP Supervisor	21	1	4.76%

**Data Review Frequency: Quarterly**

**OUTCOME STATEMENT: The Division of CFS Workforce is Well-Qualified , Trained, Supervised and Supported.**

**New CFS Trainees by Month**

**Strengths/Opportunities:**

**Barriers:**

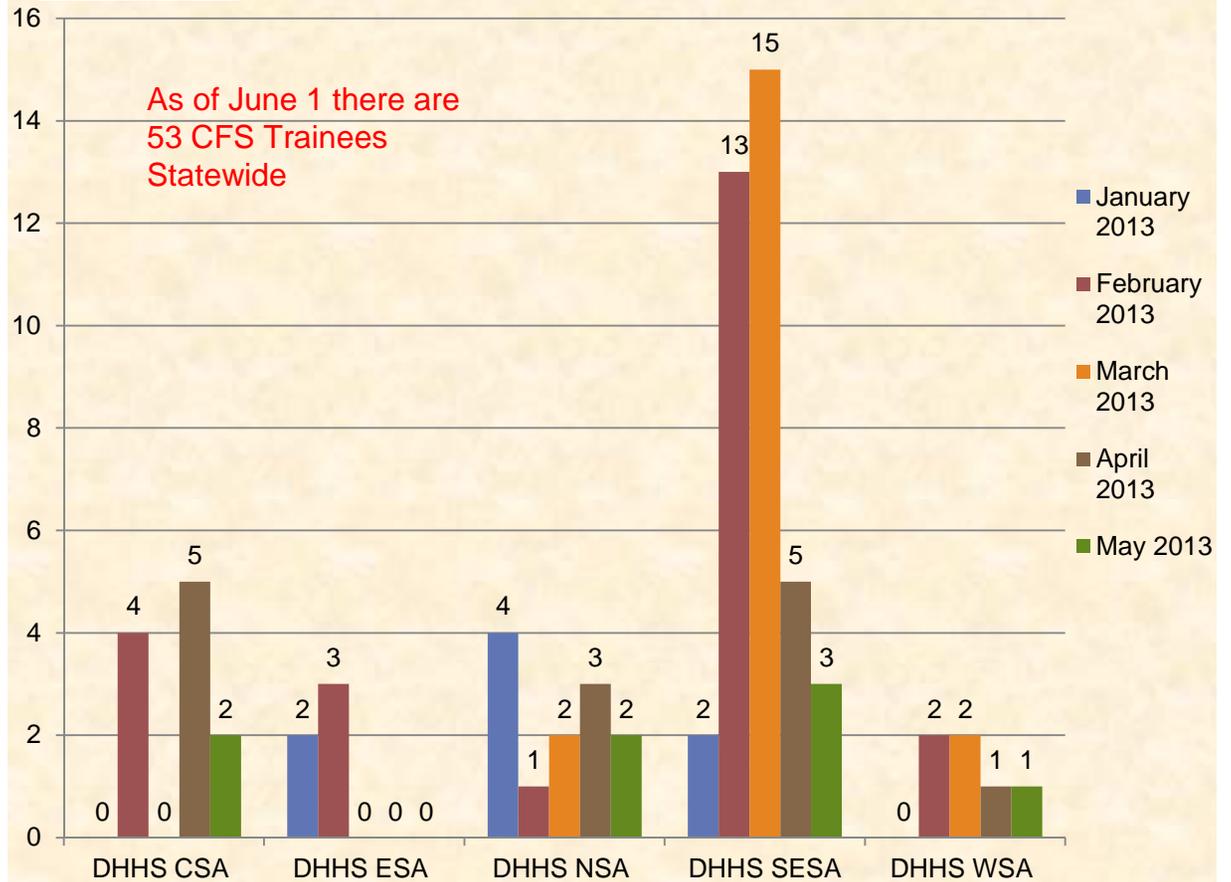
**Action Items:**

*\*Completed:*

*\*Planned:*



**Count of New CFS Specialist Trainees Entering by Month - job code C72311**



**Data Review Frequency: Quarterly**

Date is effective as of last day of posted month

**OUTCOME STATEMENT: The Division of CFS Workforce is Well-Qualified, Trained, Supervised and Supported.**

**YRTC Staff Turnover**

**Strengths/Opportunities:**

**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

**YRTC Turnover Percent\***

Title	Oct 2012	Nov 2012	Dec 2012	Jan 2013	Feb 2013	Mar 2013	Apr 2013	May 2013	June 2013	July 2013
YOUTH SECURITY SPECIALIST I				0.00%	0.00%	0.00%	4.76%	0.00%	2.35%	4.75%
YOUTH SECURITY SPECIALIST II				2.79%	4.28%	5.69%	0.00%	4.38%	2.84%	6.01%

**Turnover Percent July 2013**

Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0.00%	8.70%
YOUTH SECURITY SPECIALIST II	3.77%	7.50%

**Turnover Counts July 2013**

Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0	1
YOUTH SECURITY SPECIALIST II	1	3

**Aggregate Counts**

Title	Total Employee	Term Employee	Turnover
YOUTH SECURITY SPECIALIST I	21.05	1	4.75%
YOUTH SECURITY SPECIALIST II	66.50	4	6.01%

*\*Note: Turnover rates are calculated using filled positions at the end of the month and includes only those employees who left state government during that month. It does not include employees who transferred from one program or Division to another within DHHS or from DHHS to another state agency. Turnover is as of last day of posted month.*

**Data Review Frequency: Quarterly**

**OUTCOME STATEMENT: The Division of CFS Workforce is Well-Qualified , Trained, Supervised and Supported.**

Vacancies are allocated positions not filled, excluding frozen positions

**CFS Staff Vacancy Rate**

**Strengths/Opportunities:**

**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

<b>CFSS + CFSS/T</b>										
Location	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13
Central Service Area	3.40%	6.90%	6.90%	12.10%	8.60%	12.10%	8.90%	5.30%	6.90%	5.20%
Eastern Service Area	6.60%	6.60%	4.70%	5.70%	4.60%	5.60%	6.50%	3.70%	3.70%	3.70%
Northern Service Area	9.80%	12.00%	12.00%	6.00%	11.00%	10.80%	13.30%	9.60%	12.00%	16.90%
Southeast Service Area	7.50%	7.50%	10.60%	12.40%	8.10%	5.30%	5.90%	6.20%	1.80%	1.90%
Western Service Area	7.00%	5.60%	11.30%	11.30%	7.00%	2.80%	1.40%	4.30%	7.00%	9.90%
<b>Total</b>	<b>7.10%</b>	<b>7.70%</b>	<b>9.20%</b>	<b>9.60%</b>	<b>7.70%</b>	<b>6.70%</b>	<b>7.00%</b>	<b>5.80%</b>	<b>5.40%</b>	<b>6.40%</b>

<b>YSS I</b>										
Location	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13
YRTC Geneva	10.00%	10.00%	20.00%	30.00%	22.20%	20.00%	20.00%	20.00%	10.00%	0%
YRTC Kearney	14.30%	0.00%	14.30%	0.00%	0.00%	0.00%	0.00%	0.00%	7.10%	14%
<b>Total</b>	<b>12.50%</b>	<b>4.20%</b>	<b>16.70%</b>	<b>12.50%</b>	<b>8.70%</b>	<b>8.30%</b>	<b>8.30%</b>	<b>8.30%</b>	<b>8.30%</b>	<b>8%</b>

<b>YSS II</b>										
Location	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13
YRTC Geneva	6.70%	0.00%	0.00%	0.00%	12.90%	6.70%	16.70%	13.30%	6.70%	10.00%
YRTC Kearney	22.00%	22.00%	14.00%	14.00%	12.00%	15.70%	8.00%	15.70%	17.60%	21.60%
<b>Total</b>	<b>16.30%</b>	<b>13.80%</b>	<b>8.80%</b>	<b>8.80%</b>	<b>12.30%</b>	<b>12.30%</b>	<b>11.30%</b>	<b>14.80%</b>	<b>13.60%</b>	<b>17.30%</b>

\*Date is effective as of first day of posted month

**Data Review Frequency: Quarterly**

**OUTCOME STATEMENT: The Division of CFS Workforce is Well-Qualified , Trained, Supervised and Supported.**

Vacancies are allocated positions not filled, excluding frozen positions

**NFC Staff Vacancy Rate**

Strengths/Opportunities:

Barriers:

Action Items:

	13-May			13-Jun			13-Jul		
Location	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate
NFC**	10	156	6.41%	15	156	9.61%	15	156	9.61%

\*\*includes Family Permanency Supervisors and Family Permanency Specialists

\*Date is effective as of first day of posted month

**Data Review Frequency: Quarterly**

# **ADULT PROTECTIVE SERVICES (APS)**

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APS Contact Timeframes

**Strengths/Opportunities:**

-Southeast Service Area achieved 100% for P1 contacts in the last 3 months.

**Barriers:**

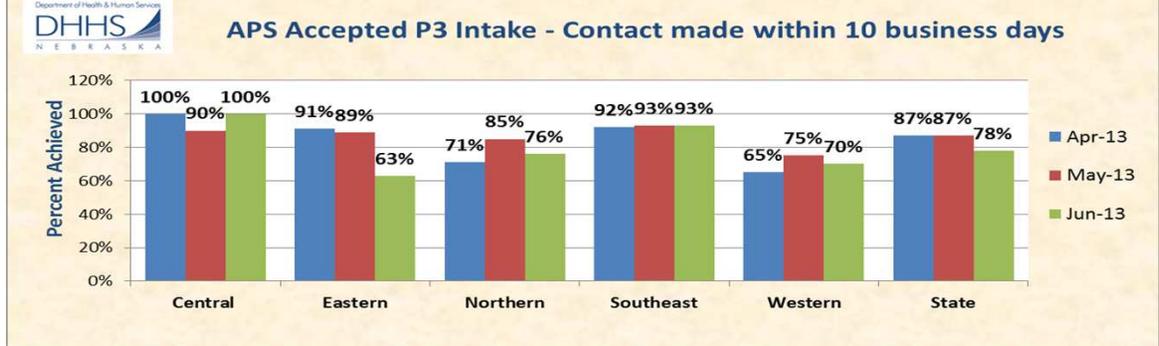
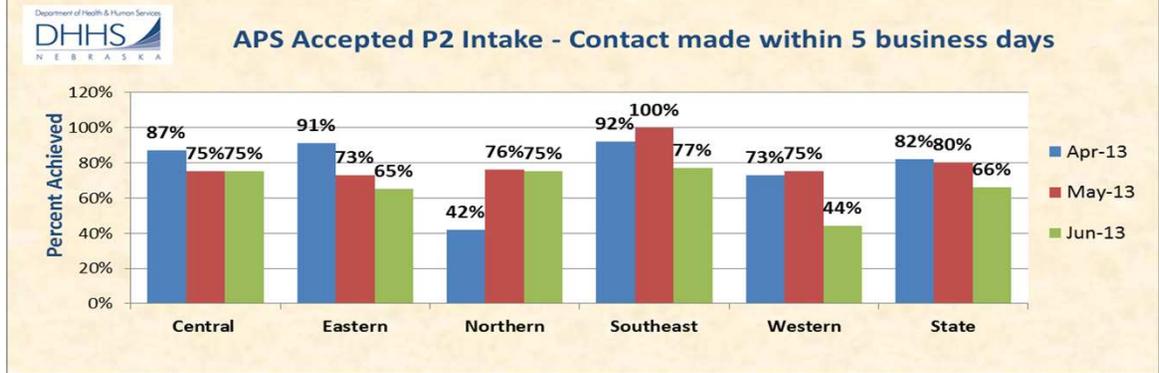
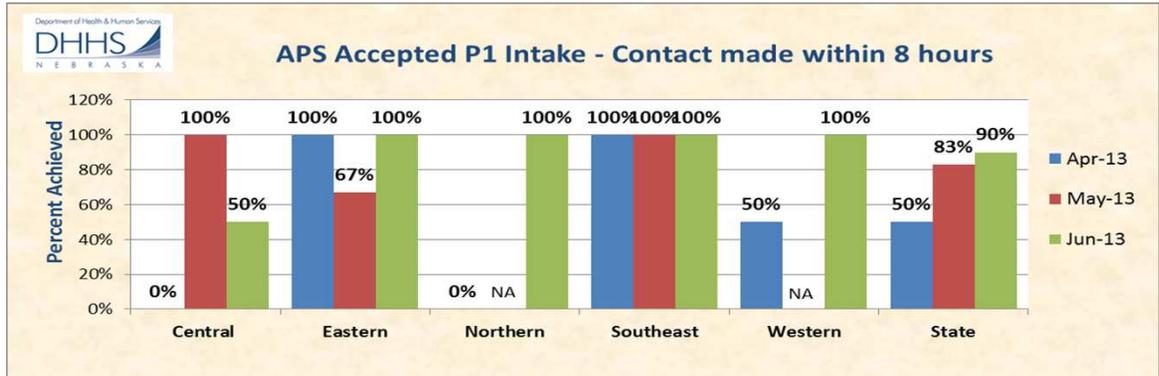
**Action Items:**

\*Completed:

\*Planned:

Data Review Frequency: Monthly

**OUTCOME STATEMENT: Vulnerable Adults will experience safety and stability in their lives.**



These charts illustrate contacts made within expected timeframes per intake priority. Measure is from Intake Closure/Acceptance to CFSS Face to Face Contact. Data Source: N-FOCUS Data from the APS Investigation Status Report on InfoView.

### APS Investigation Timeframes

**Strengths/Opportunities:**

-Southeast Service Area achieved 100% for P1 contacts in the last 3 months.

**Barriers:**

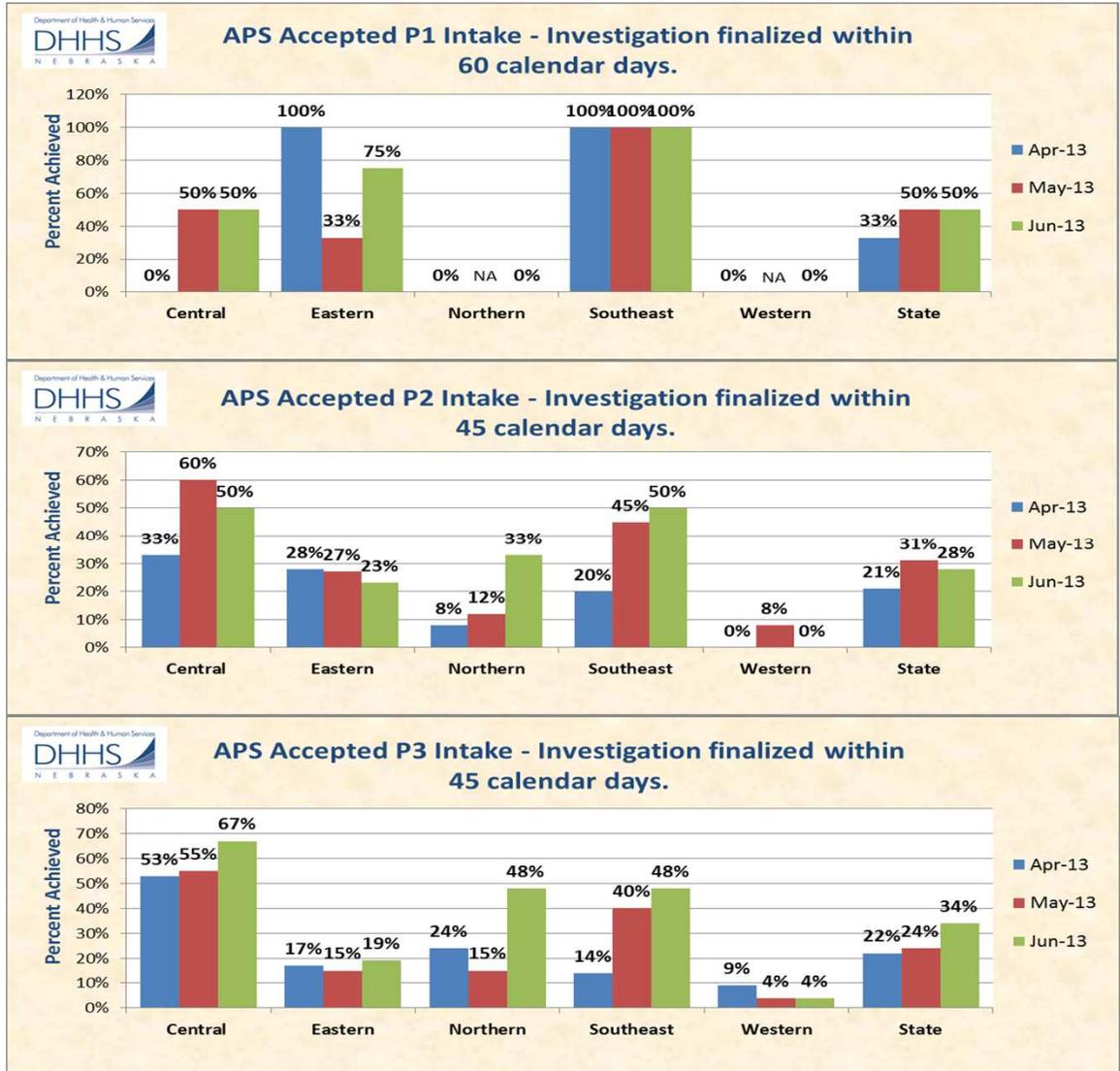
**Action Items:**

*\*Completed:*

*\*Planned:*

**Data Review Frequency: Monthly**

## OUTCOME STATEMENT: Vulnerable Adults will experience safety and stability in their lives.



These charts illustrate investigations that were finalized within expected timeframes per intake priority. Measure is from Intake Closure/Acceptance to Investigation Finalization Date. Data Source: N-FOCUS Data from the APS Investigation Status Report on InfoView.

### APS Quality Measures

**Strengths/Opportunities:**

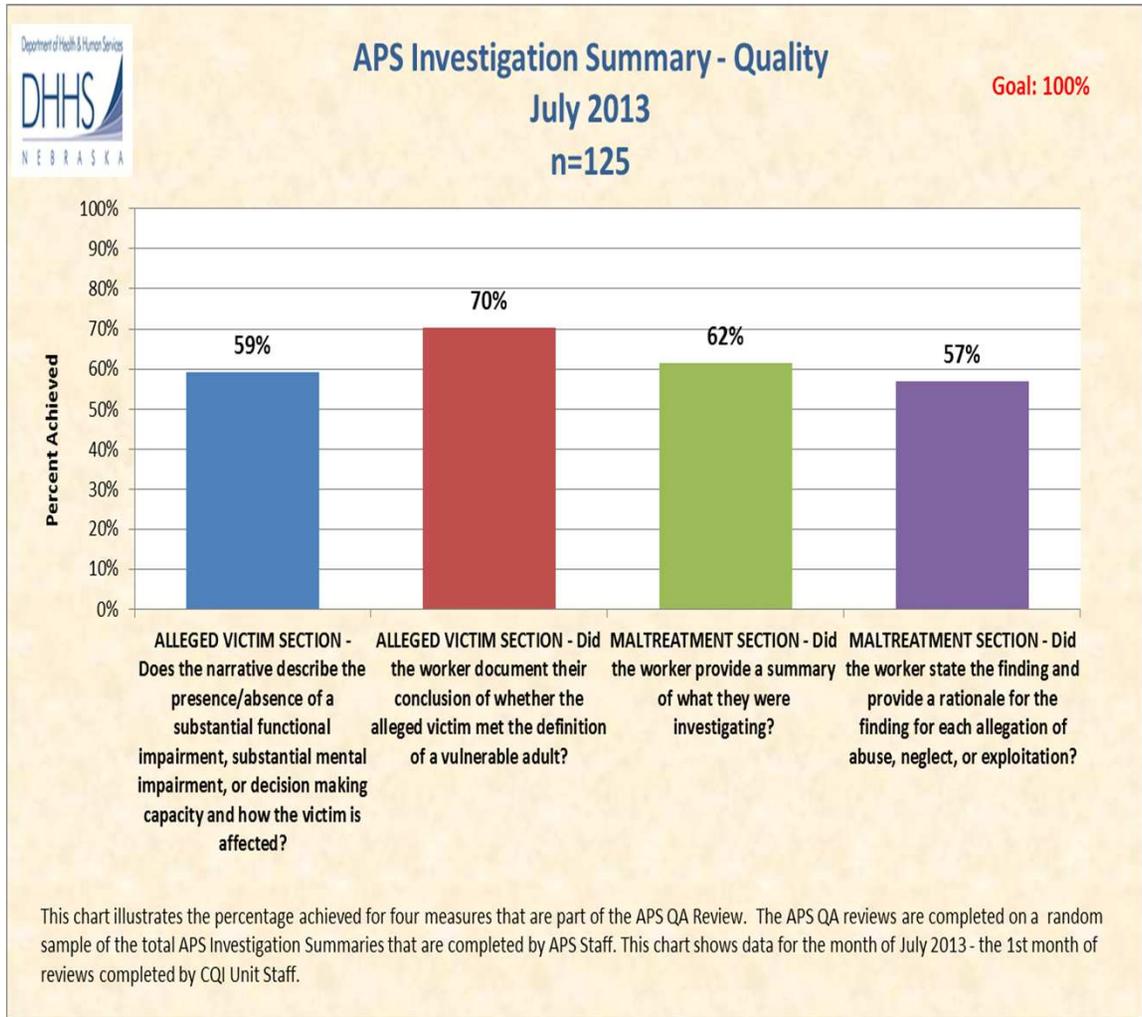
**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

## OUTCOME STATEMENT: Vulnerable Adults will experience safety and stability in their lives.



**Data Review Frequency: Monthly**