

CHAPTER 1: CONTINUOUS QUALITY IMPROVEMENT (CQI)

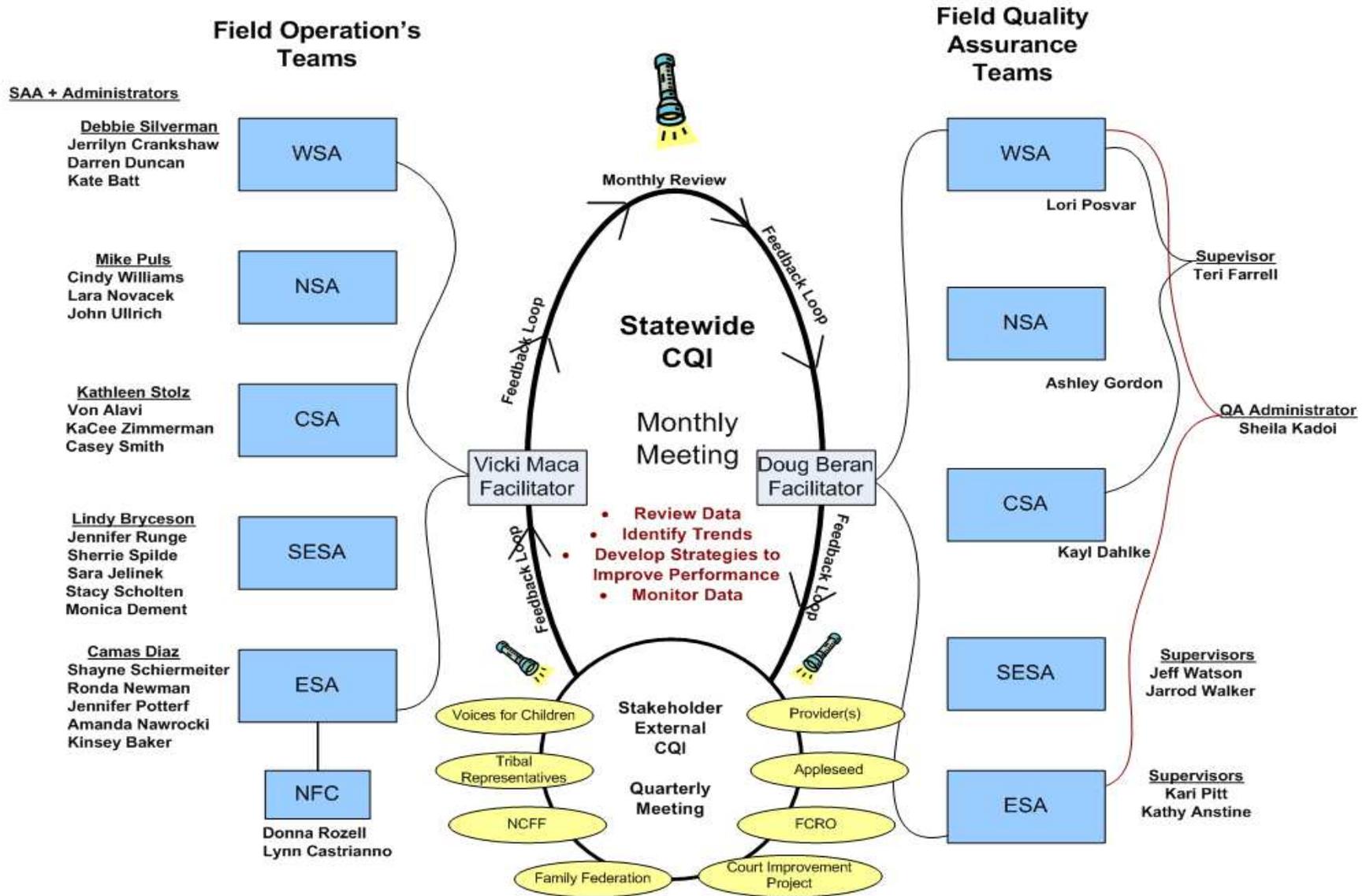
OUTCOME STATEMENT: CHILDREN AND FAMILY SERVICES WILL MEASURE AND EVALUATE THE QUALITY AND EFFECTIVENESS OF OUR WORK WITH CHILDREN AND FAMILIES.

Schedule of Discussion Subjects 2013

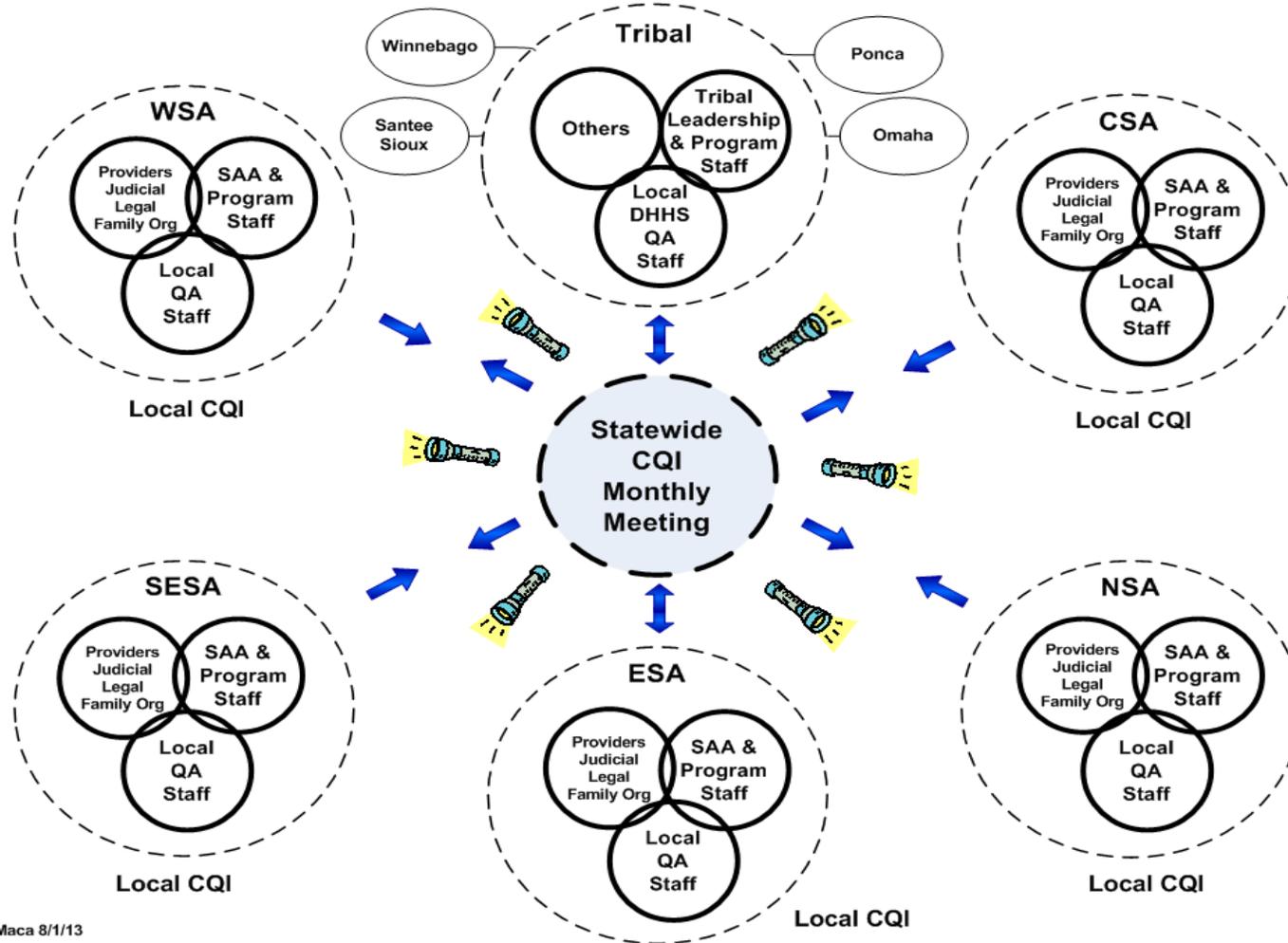
- January
 - Process Measures
 - Operations Data
 - SDM Quality
- February
 - Process Measures
 - SDM Quality
 - Turnover/Vacancy
- March
 - Process Measures
 - SDM Quality
 - COMPASS
- April
 - Process Measures
 - Intake Results
 - Operations Data
 - SDM Quality
 - Denials/Disruptions
- May
 - Process 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 Survey results
 - Maltreatment Recurrence
- October
 - Process Measures
 - Intake Results
 - Operations Data
 - SDM Quality
 - Denials/Disruptions
 - Wild Card – SDM Timeliness
- November – half-day meeting
 - Process Measures
 - CSA CQI Discussion
 - SDM Quality
 - Dictation Program
 - Wild Card Discussion - Time Permitting
- December
 - No Meeting this month

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
 - 2nd 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.



Local CQI Process



CHAPTER 2: PREVENTION AND EARLY INTERVENTION

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:

Stateward Reductions (Oct 2012 - Oct 2013)	
WSA	98
CSA	27
NSA	104
SESA	127
ESA(NFC)	310
STATE	666

Barriers:

Action Items:

*Completed:

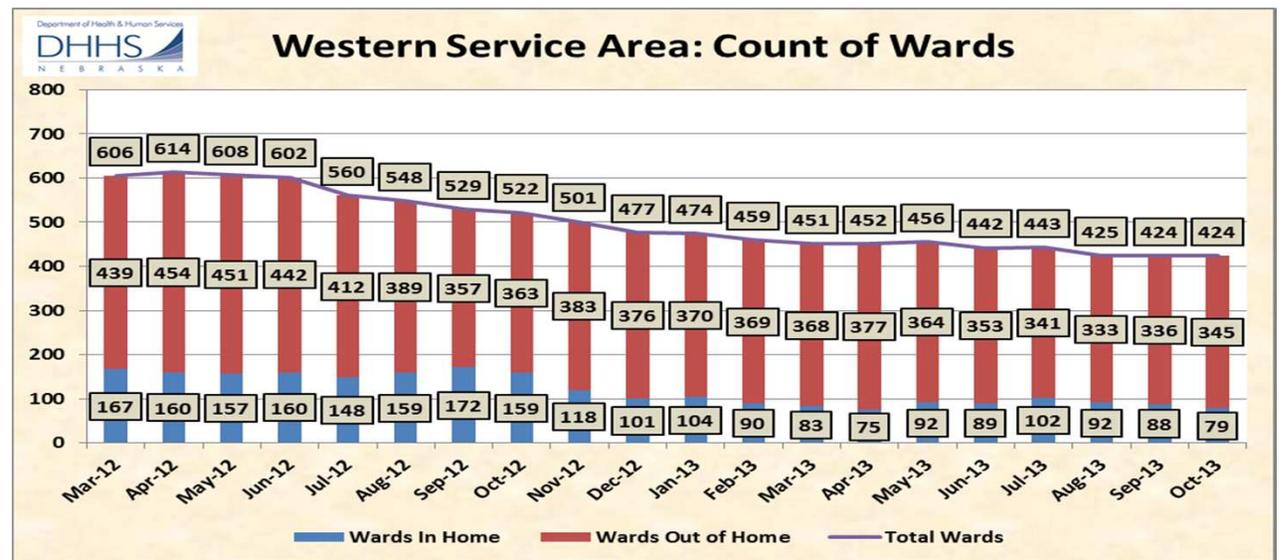
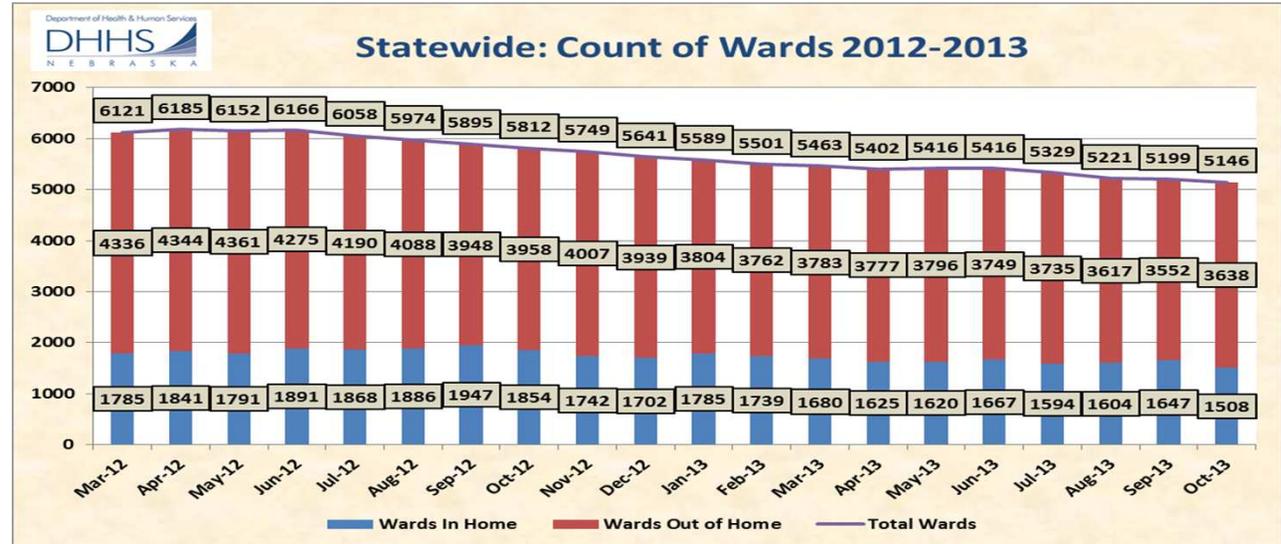
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 - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
 - B.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
 - C.) OJS & 3B Youth.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



*LB 961 directs DHHS to realign the Western, Central, and Northern Service Areas to be coterminous with the District Court judicial districts. The baseline data from July 2, 2012 reflects this geographical change.

Data Review Frequency: Quarterly

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Strengths/Opportunities:

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Barriers:

Action Items:

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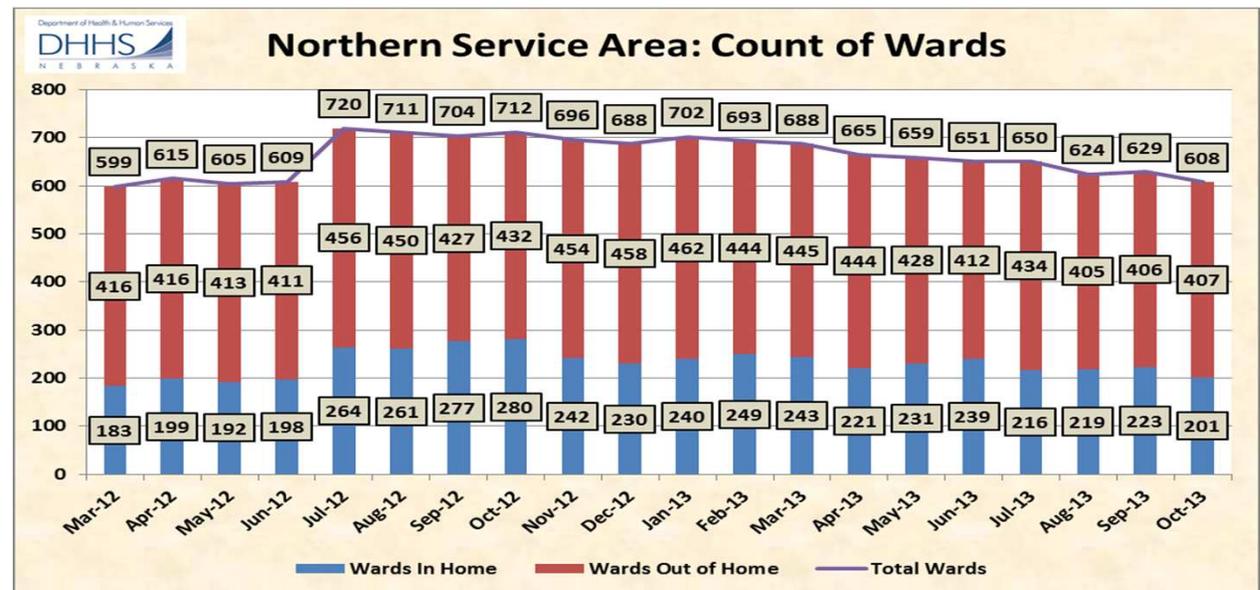
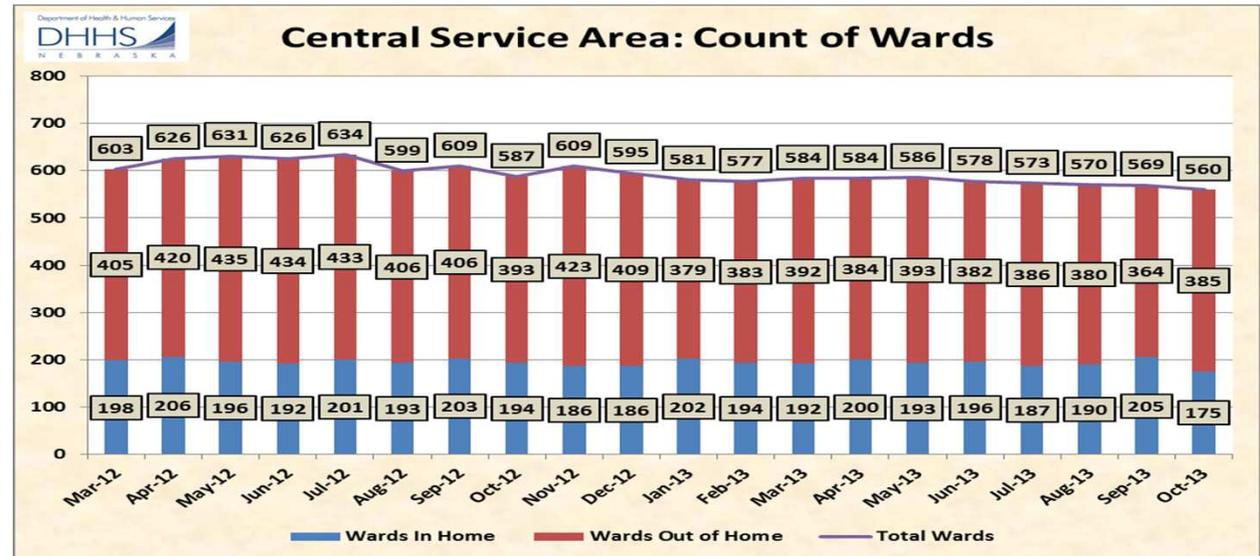
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OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect



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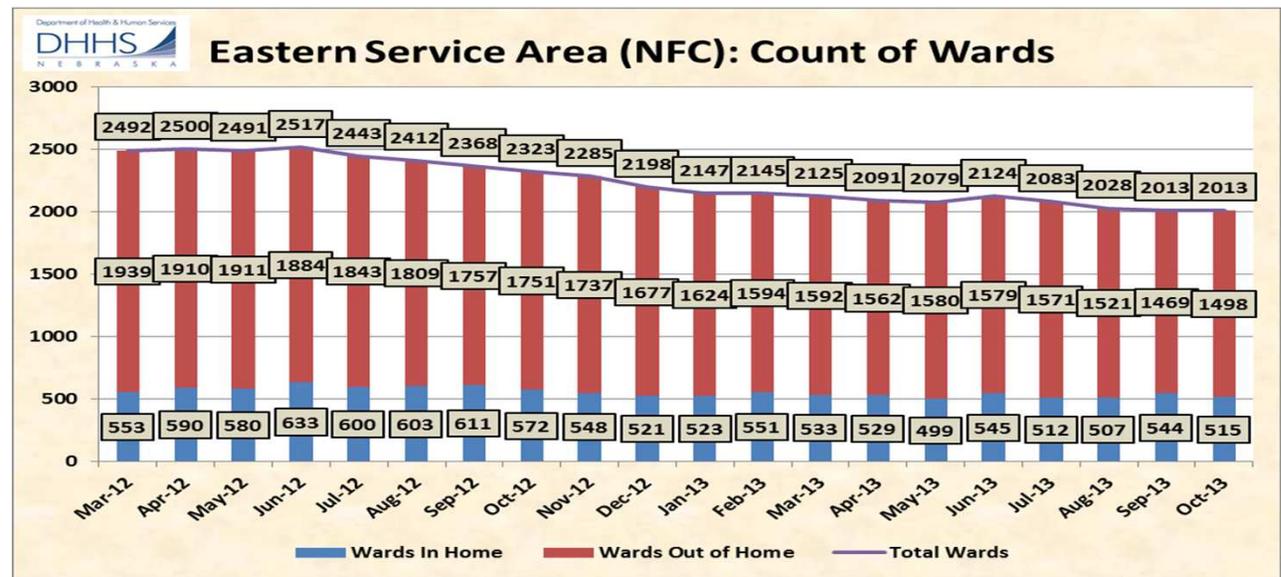
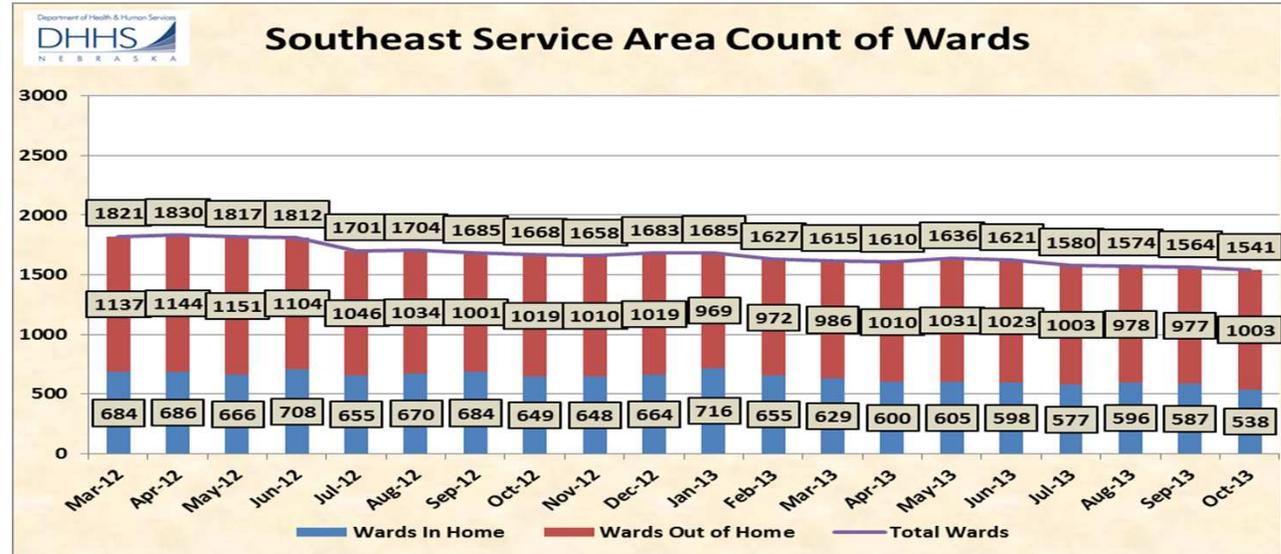
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CQI Team Priority:

* 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

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:***

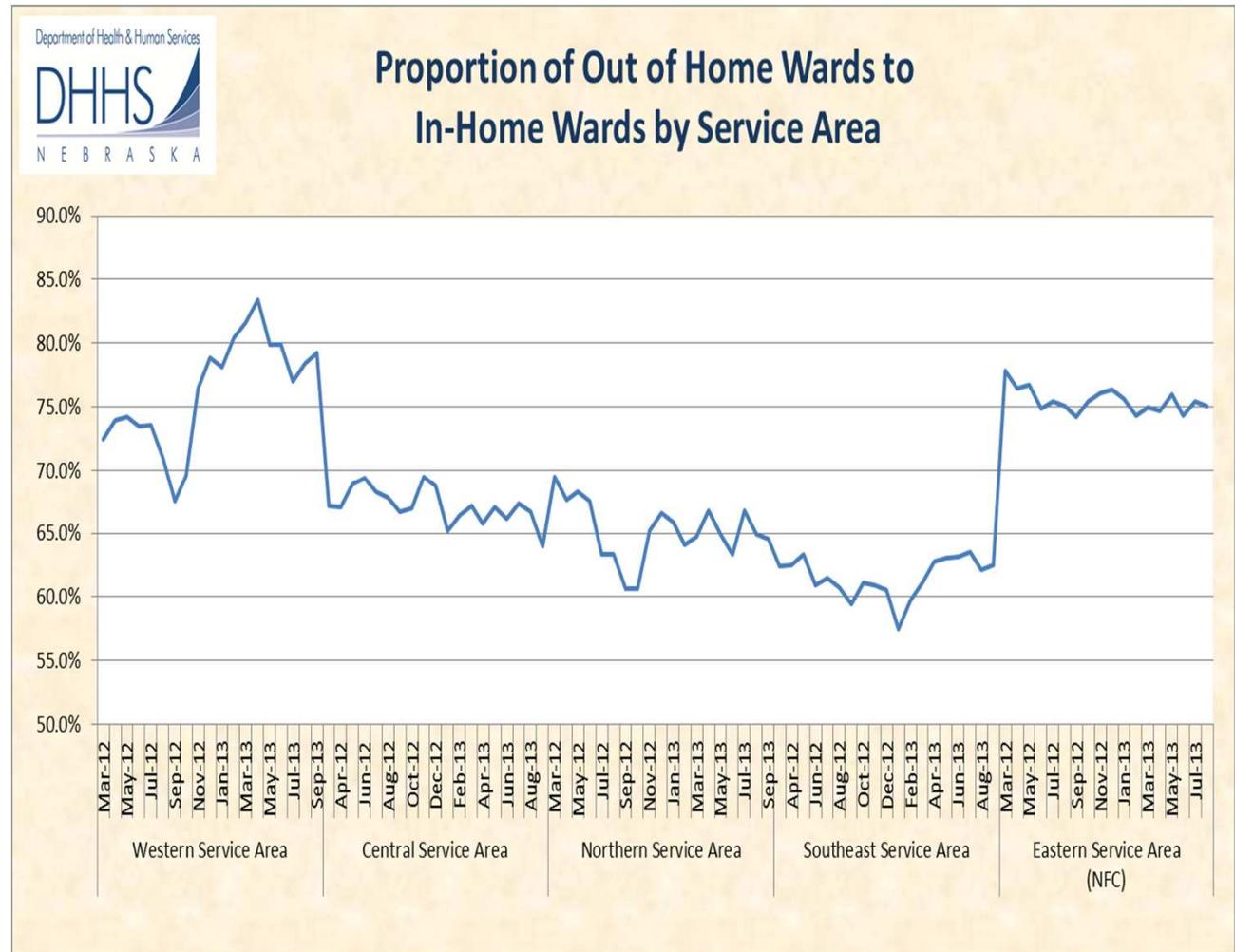
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****Planned:***

CQI Team Priority:

* Statewide

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



Point in time report 3/4/2013 OOH court wards using 2012 Claritas youth population < 19

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:*

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**Planned:*

CQI Team Priority:

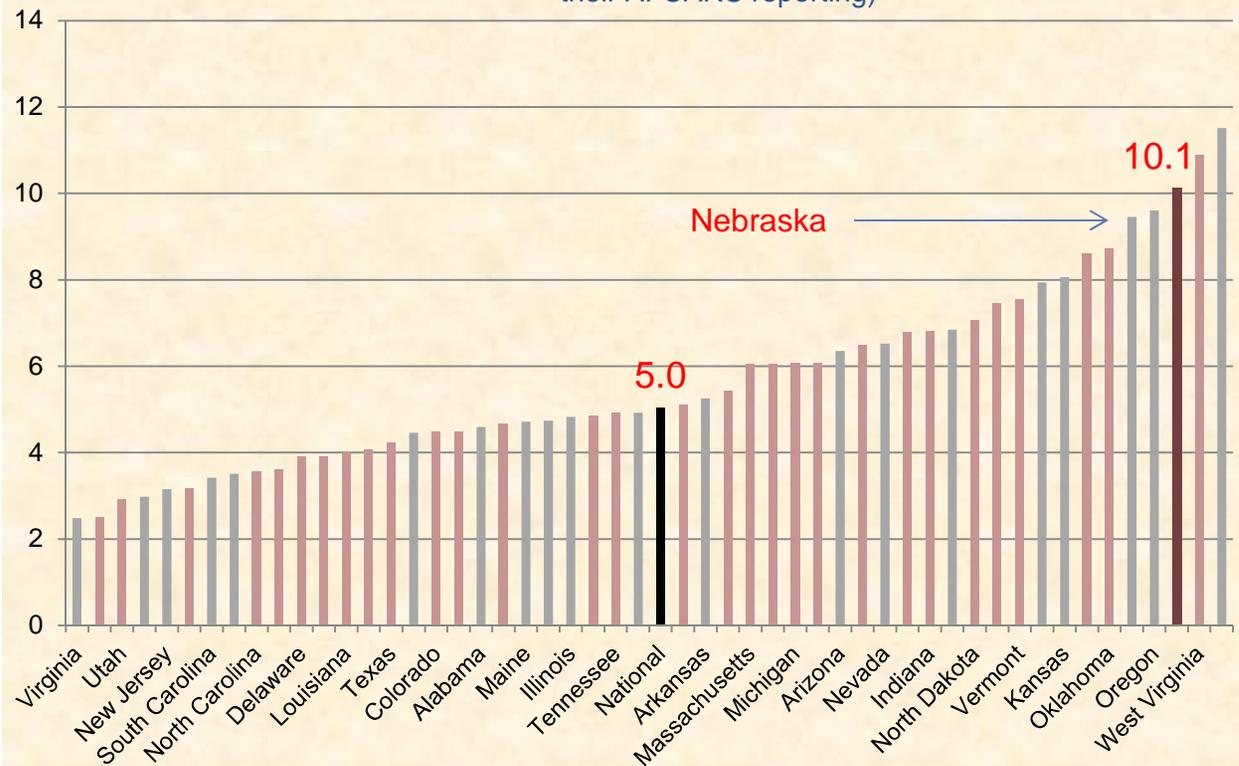
* Statewide

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:

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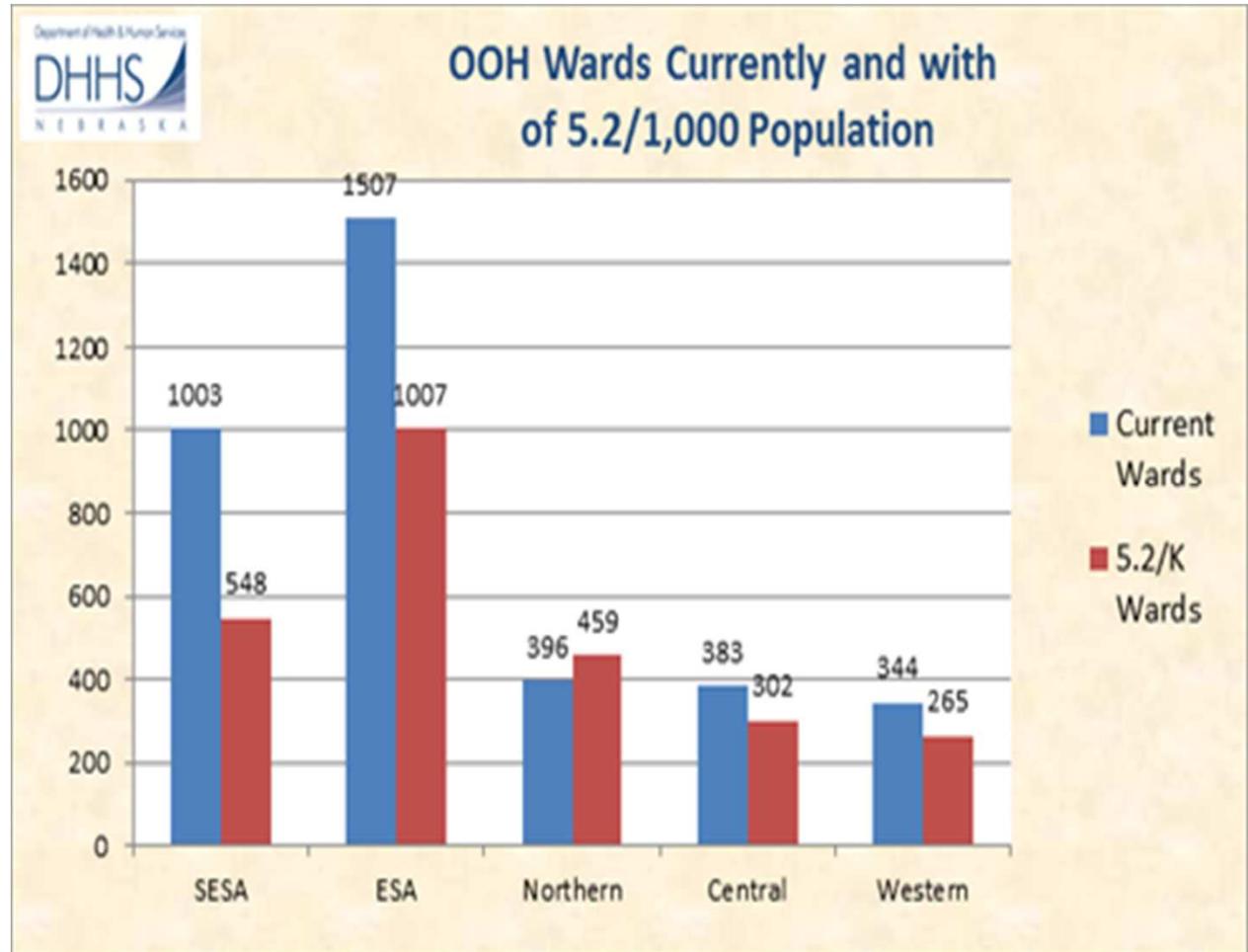
**Planned:*

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:

-Lower number of entries than exits.

Barriers:

Action Items:

**Completed:*

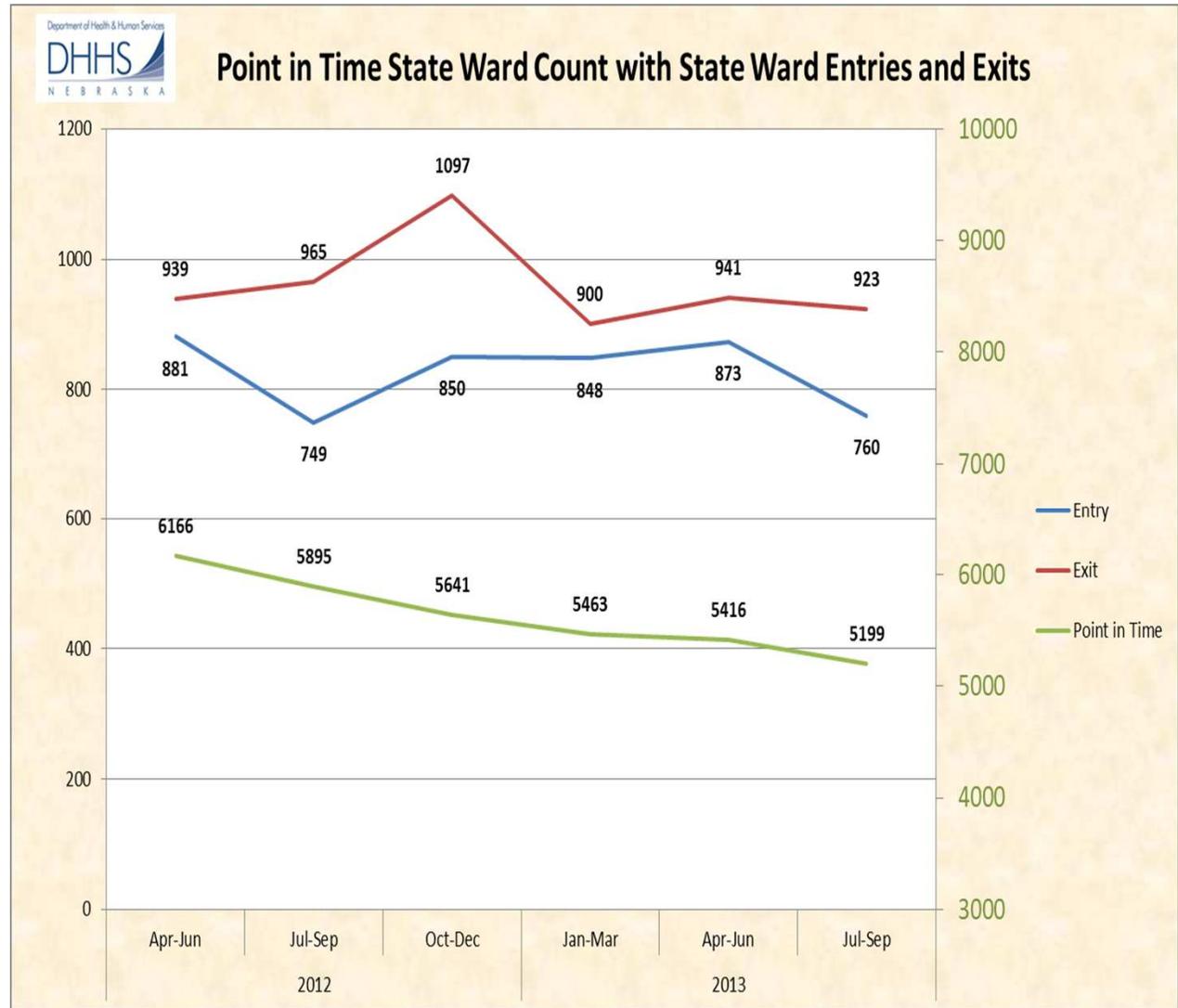
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CQI Team Priority:

* 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

Safely Decrease the Number of State Wards

Strengths/Opportunities:

-Entry numbers continue to be lower than exit numbers. Significant decrease in entry numbers between April to June and July to September 2013.

Barriers:

Action Items:

**Completed:*

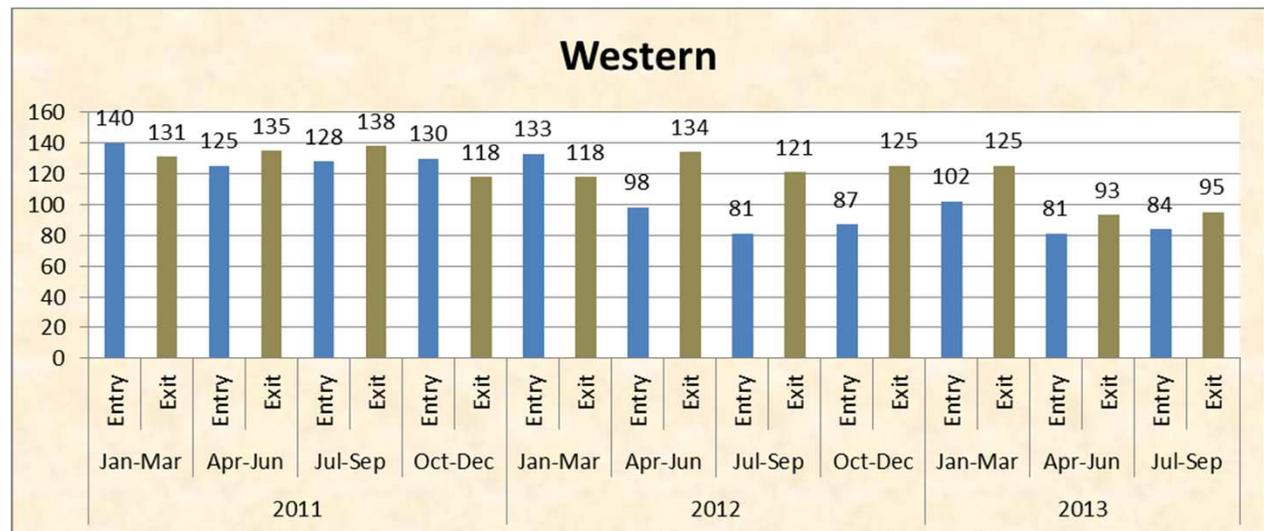
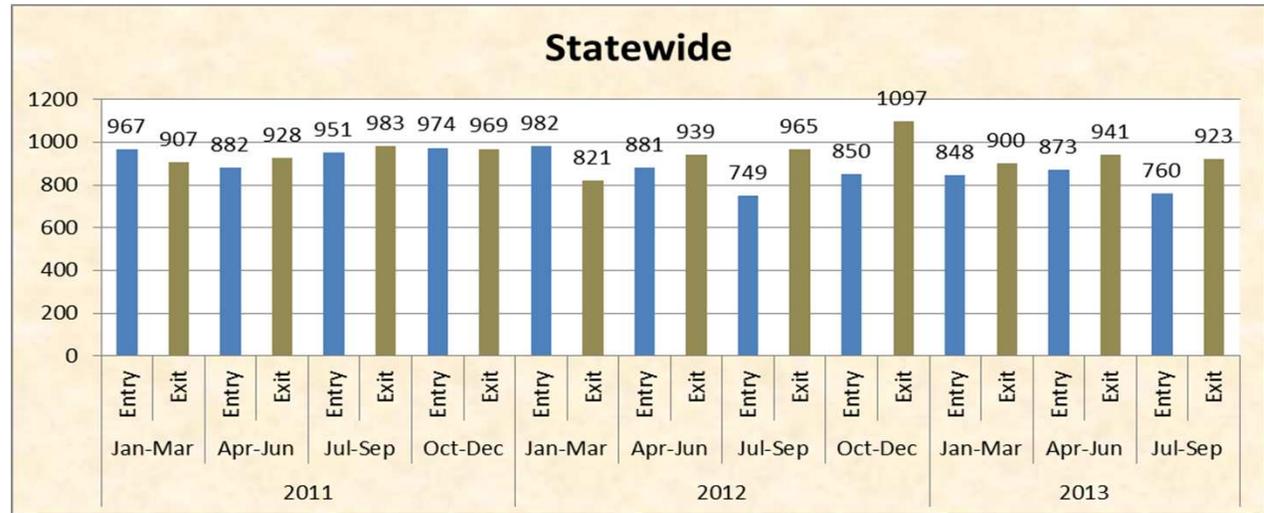
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CQI Team Priority:

* Statewide

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



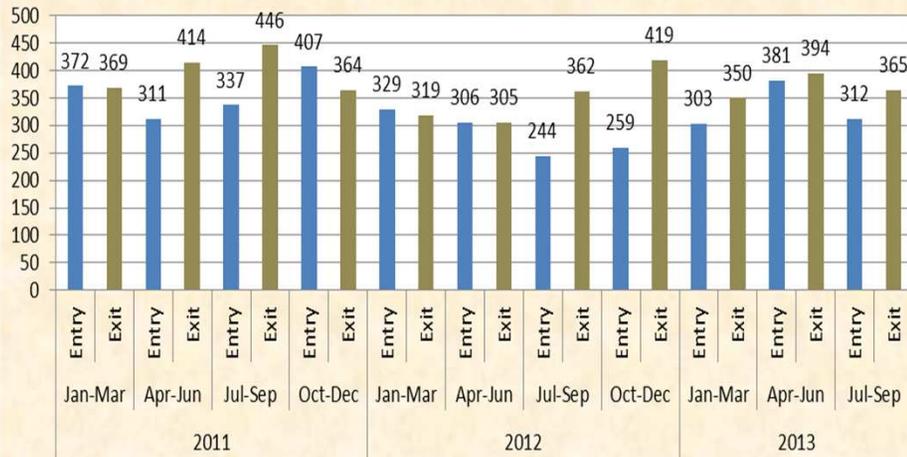
N-Focus Legal Status field. An entry occurs when a child is made a state ward. An exit occurs when the Legal Status changes to non-ward - not when it is entered into NFocus. Entries include youth that go from non-court to court. Counts based on date of action, not entry date into NFocus

Data Review Frequency: Quarterly

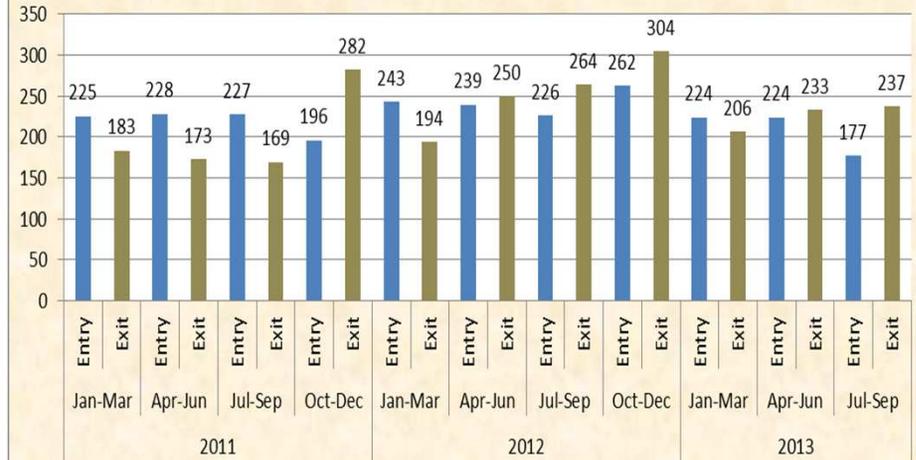
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OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect

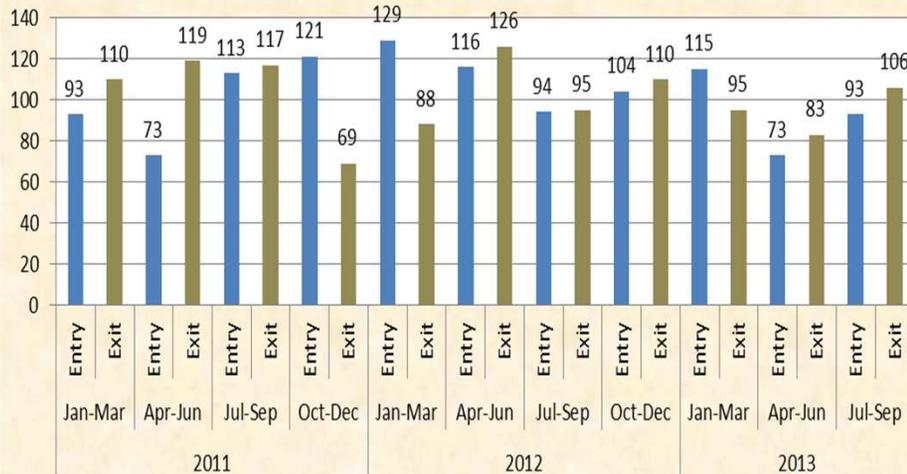
ESA (DHHS-Entries & NFC-Exits)



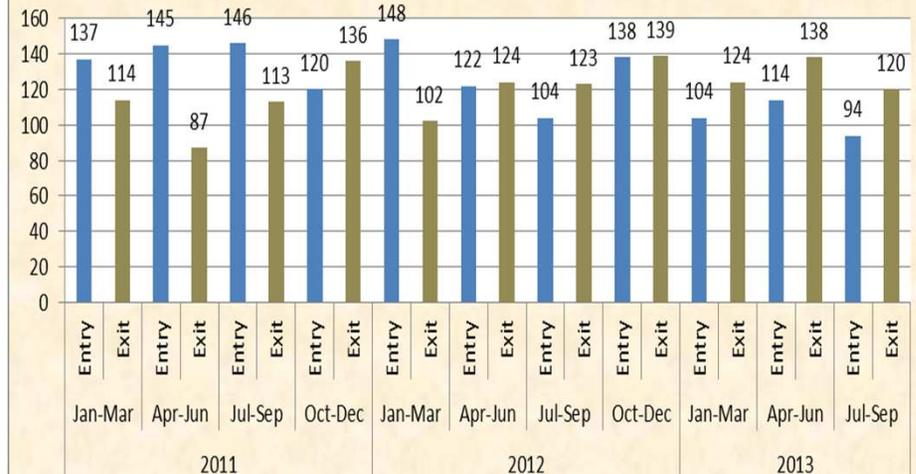
Southeast



Central

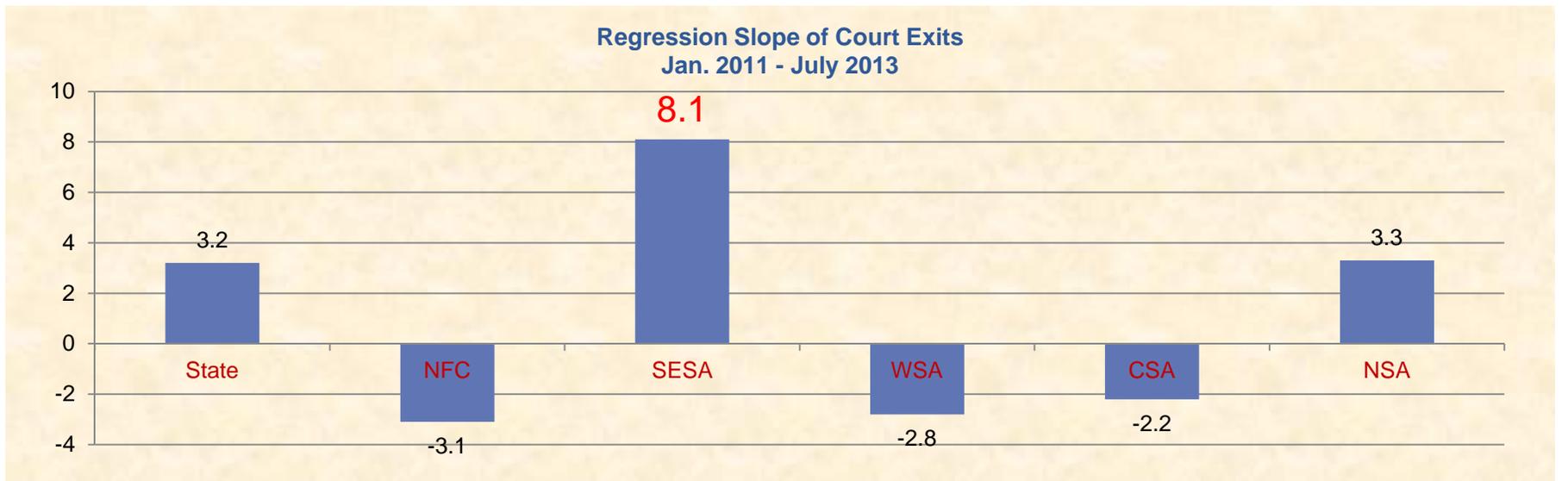


Northern



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

**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:

- September 2013 OOH Rates
- State – 69.8%
- NFC – 74.2%
- SESA – 64.0%
- CSA – 67.3%
- NSA – 64.9%
- WSA – 79.4%

Note: The OOH Rates may increase due to the LB 561 transition of OJS and 3B youth to Probation.

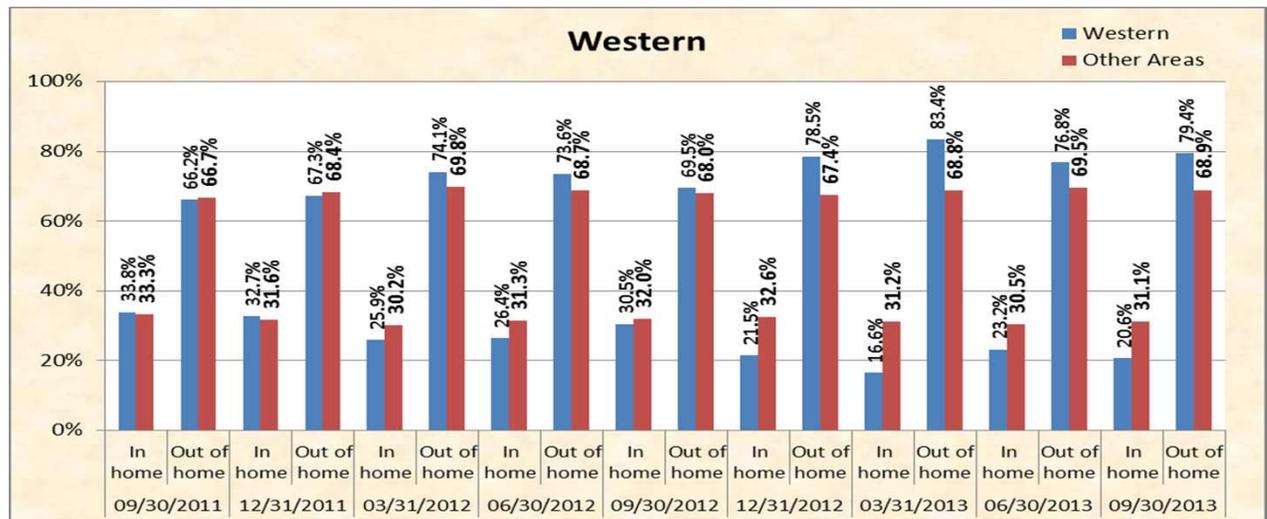
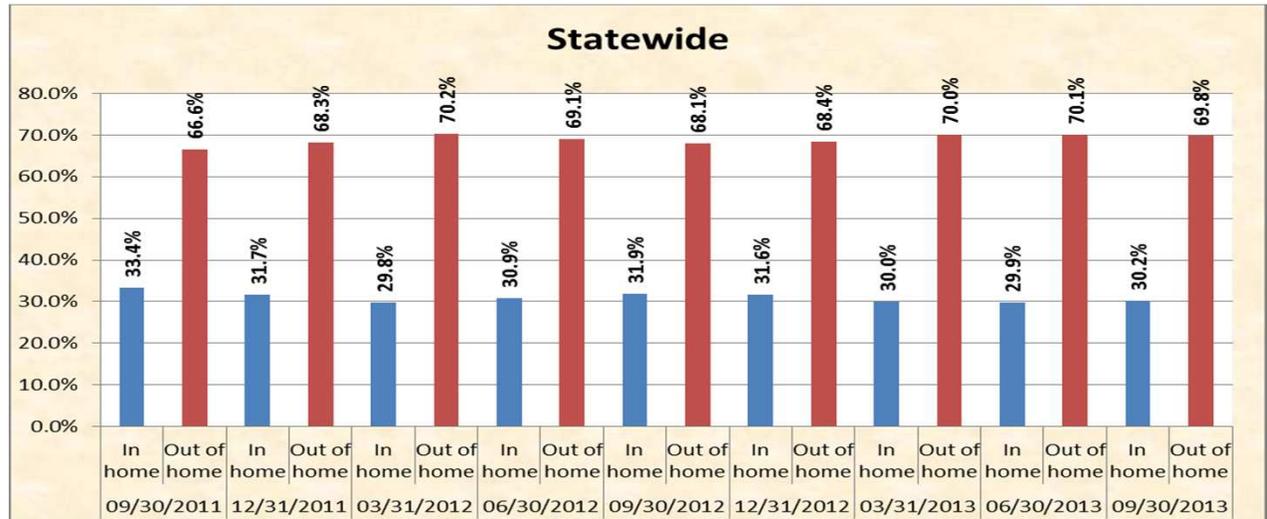
Barriers:

Action Items:

**Completed:*

**Planned:*

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

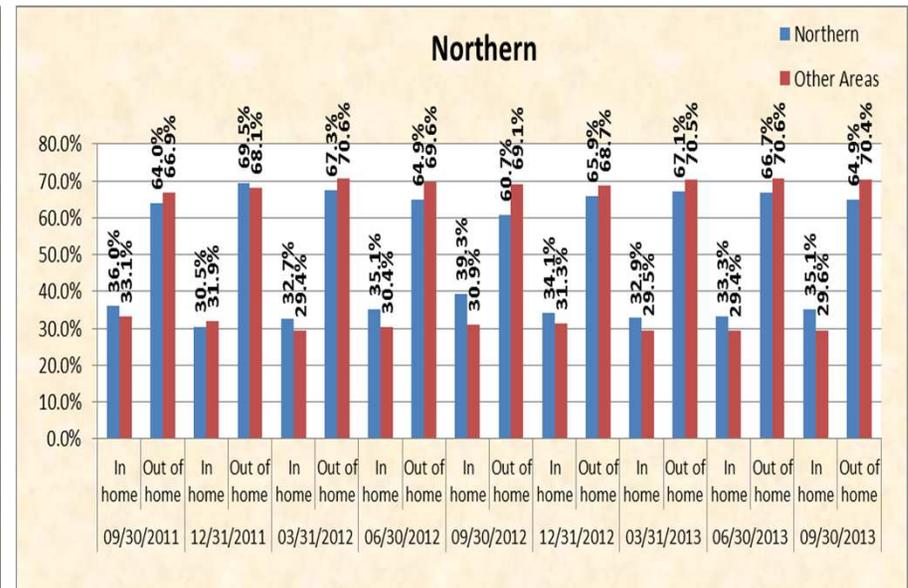
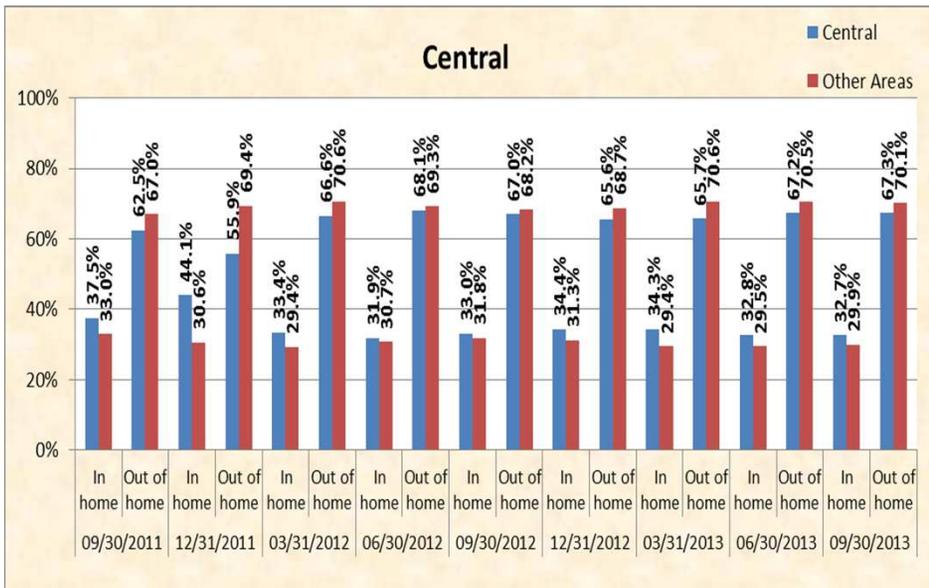
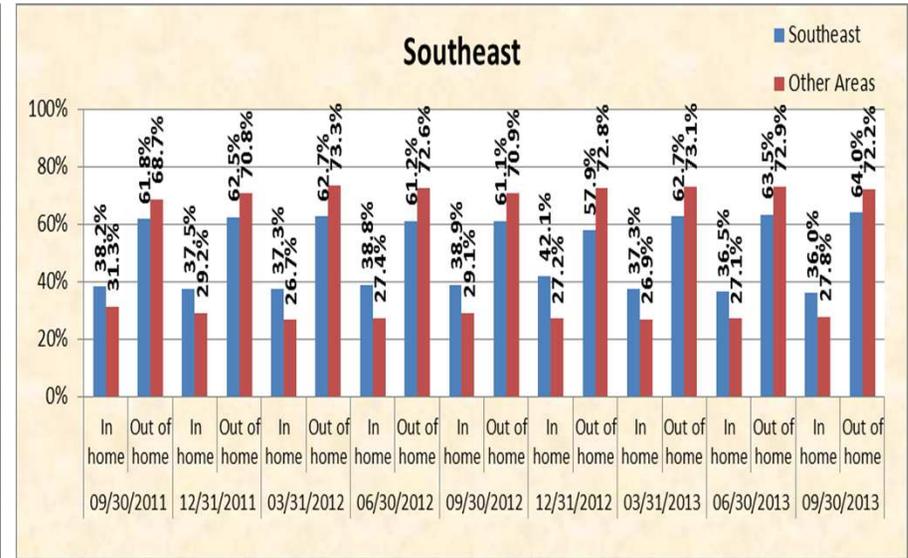
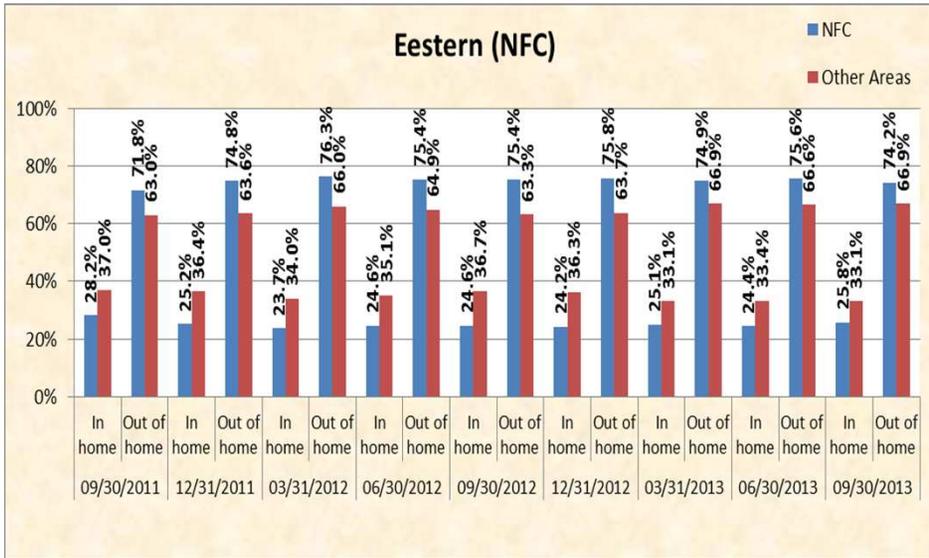


N-Focus Placement field. The In Home category includes state wards living with a parent, guardian or independently. The Out of Home category includes state wards in all types of out of home placements and those on runaway status. Data includes all court wards measured at a point-in-time on the last day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



Intake Calls/Responses

Strengths/Opportunities:

- Nov 2013: 88% of all calls to the hotline were answered within 18 seconds. 7% of the calls went to voicemail and were returned within 1 hour.

Barriers:

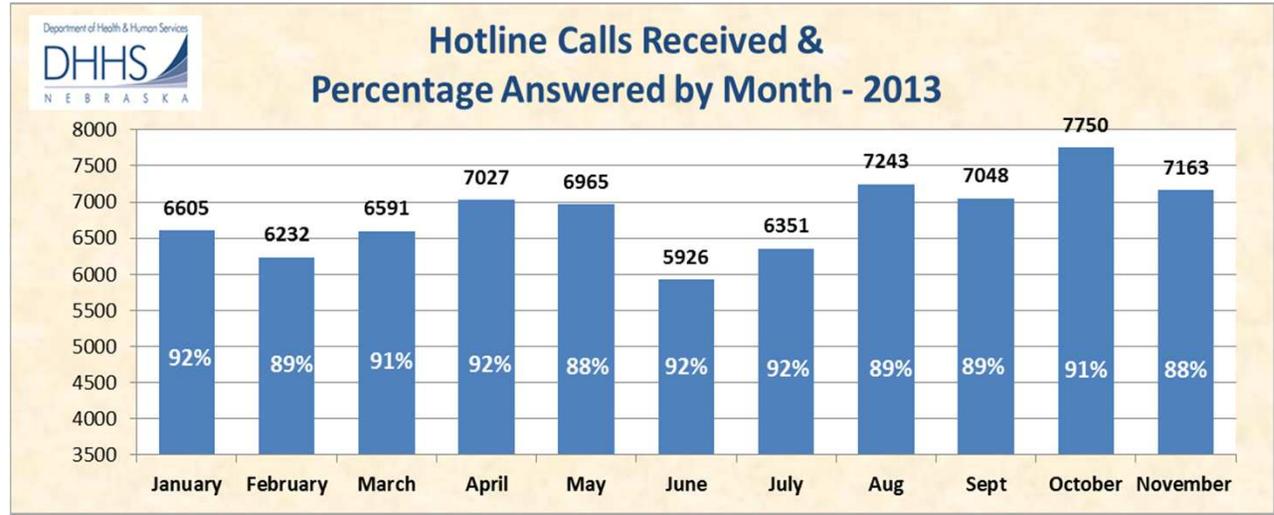
Action Items:

**Completed:*

**Planned:*

Data Review Frequency: Monthly

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



Definitions:

- * Abandoned-call comes in and is not answered due to something in the ACD system which caused a reason for a disconnect or caller hung up.*
- * Forceout-call comes in and call was sent to worker and worker did not answer -(maybe due to...forgot to log off while faxing)*
- * Voicemail-calls unanswered that go to voicemail. The goal is to return the call within 1 hour. Case Aides track when the message came in and when the call is returned.*

Intake Quality Measures

Strengths/Opportunities:

- Nov 2013: Increase in 2 of the measures. Decrease in percentage related to taking action to address immediate safety concerns.

Barriers:

Action Items:

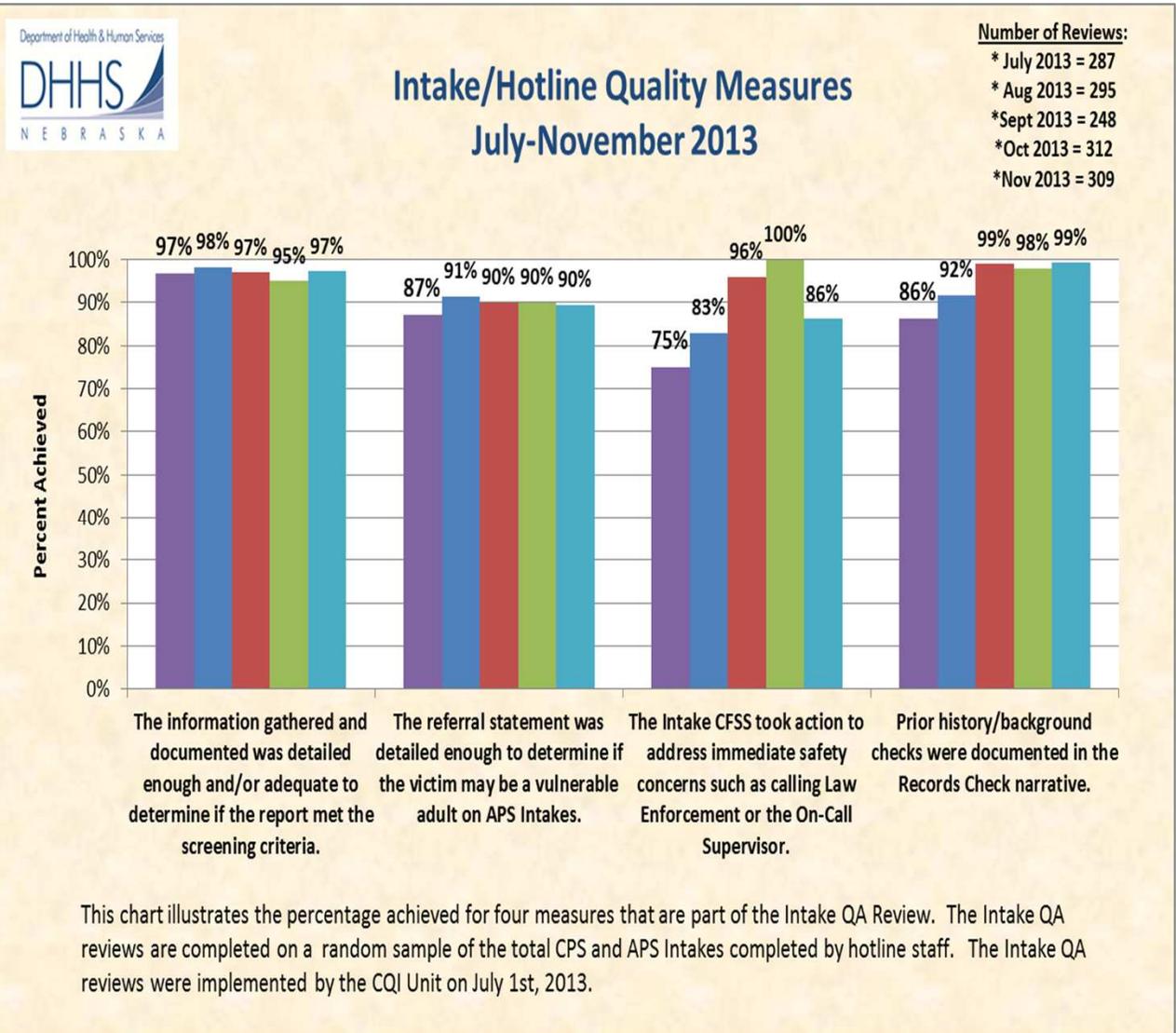
**Completed:*

- 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:*

- A satisfaction Survey will be implemented in 2014.

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



Data Review Frequency: Monthly

IA – Investigation Timeframes

Strengths/Opportunities:

-Nov 2013: Central Service Area continues to have the lowest number of Initial Assessments Not Finalized (33) that were due between Jan 2012 – Nov 2013. Western Service Area has the highest number of assessments Not Finalized (352) during this same period. **On 12/17/13, there were 1,115 Initial Assessments that were not finalized for the entire State for this same period.**

Barriers:

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.

-Quick tip video instructions are now available with information on how to use weekly InfoView reports to identify intakes not tied etc.

- IA Case Management Due date report is now available and includes all IA related timeframes.

*Planned:

-Systems Team/S.Haber will discuss and make a decision about IA completion timeframes.

-Systems Team/S.Haber will discuss and make a decision regarding instances when a risk assessment should not be completed.

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

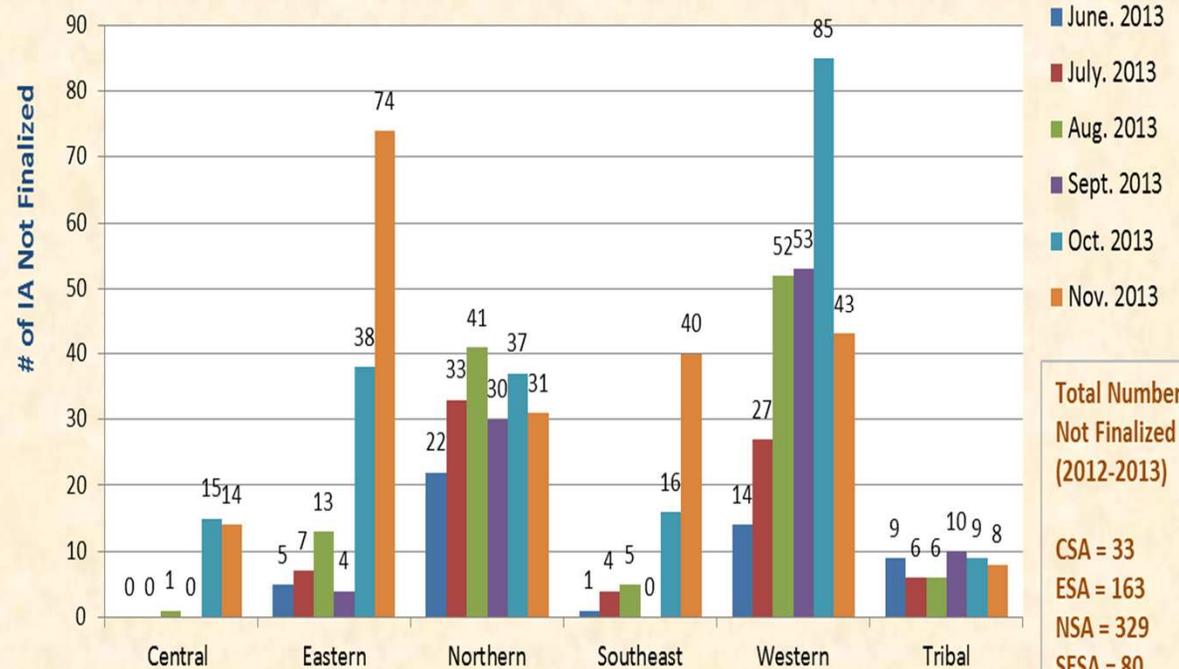
OUTCOME STATEMENT: CHILDREN ARE SAFELY MAINTAINED IN



Initial Assessment Not Finalized Within 30 Days (2012-2013)

* Initial Assessments not finalized within 30 days from the date the intake closed as of December 17th, 2013

This chart illustrates cases that are not finalized due to one or more of the following reasons: Safety assessment not tied to the intake, Risk assessment is not in final status, and/or Finding has not been entered.



Total Number Not Finalized (2012-2013)

CSA = 33
 ESA = 163
 NSA = 329
 SESA = 80
 WSA = 352
 Tribal = 158
 State = 1,115

The chart above shows the # of assessments not finalized that were due in the last six months.

The box to the right shows the total number of IA's that need to be finalized in each Service Area. These numbers are limited to those due in 2012-2013 as of 12/17/2013.

IA – Contact Timeframes

Strengths/Opportunities:

-Nov 2013: Decrease in performance for P1 and P2 Measures. .

Note: Intakes accepted for APSS or OH investigations were included in this measure for the first time in November 2013.

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.

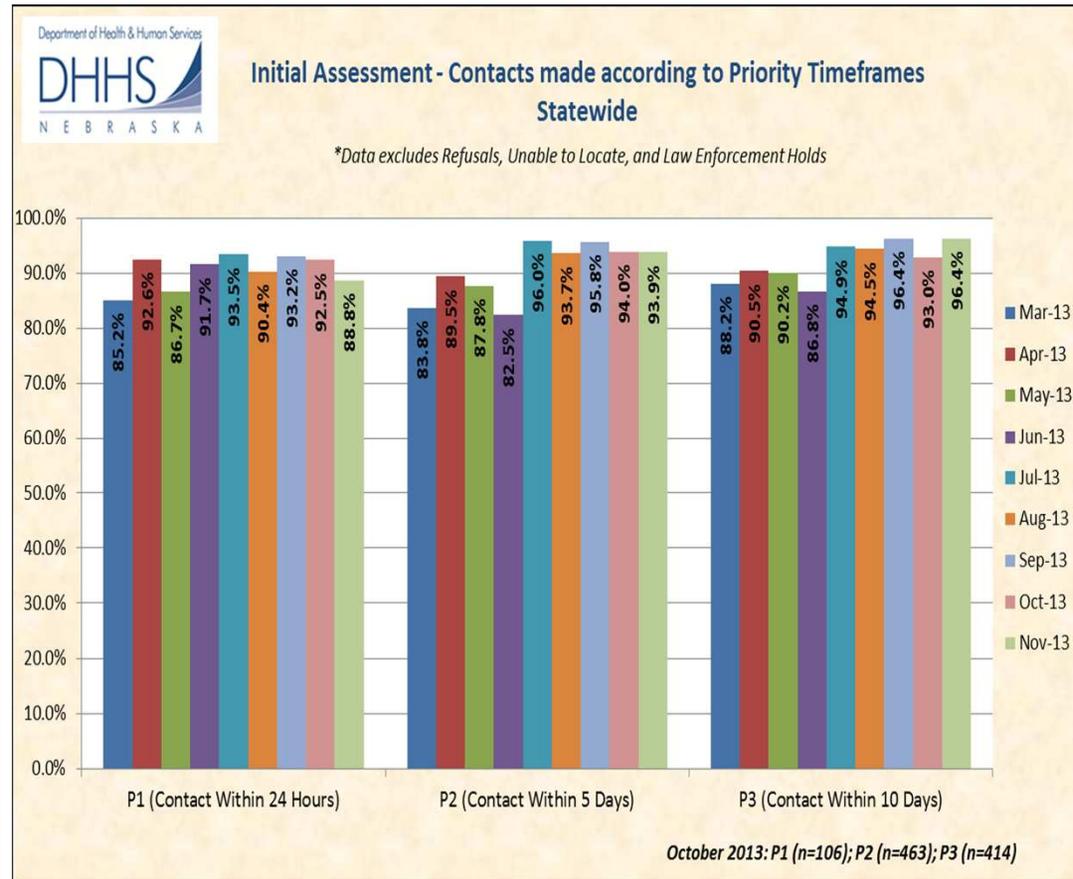
CQI Team Priority:

- 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.



Spilde	17
Tribal	10
Crankshaw	6
Alavi	5
Zimmerman	2
Runge	2
Baker	2
Duncan	2
Ullrich	1
Dement	1
Smith	1
Jelinek	1
Total	50

Not Tied	2
Not Timely	11
Contact Date Before Intake Date	5
No Contact Documented	6
ARP ID Issue	3
No Safety Assessment	16
Child not in Intake	1
No Safety Assessment & Child Not in Intake	3
OHA - No Safety Assessment	1
OHA - Not Tied	1
OHA - Not Contact Documented	1
Total	50

Note: Intakes accepted for APSS or OH investigations were included in this measure for the first time in November 2013.

IA – Contact Timeframes

Strengths/Opportunities:

* Nov 2013: ESA, CSA, and NSA achieved 100% for P1 this month. ESA and NSA achieved 99% and 100% on all 3 measures.

Barriers:

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

Action Items:

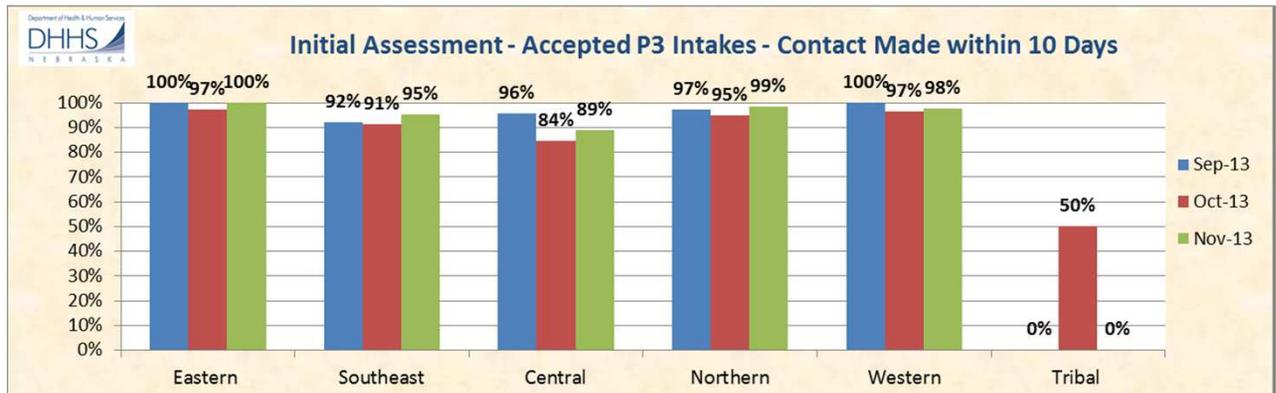
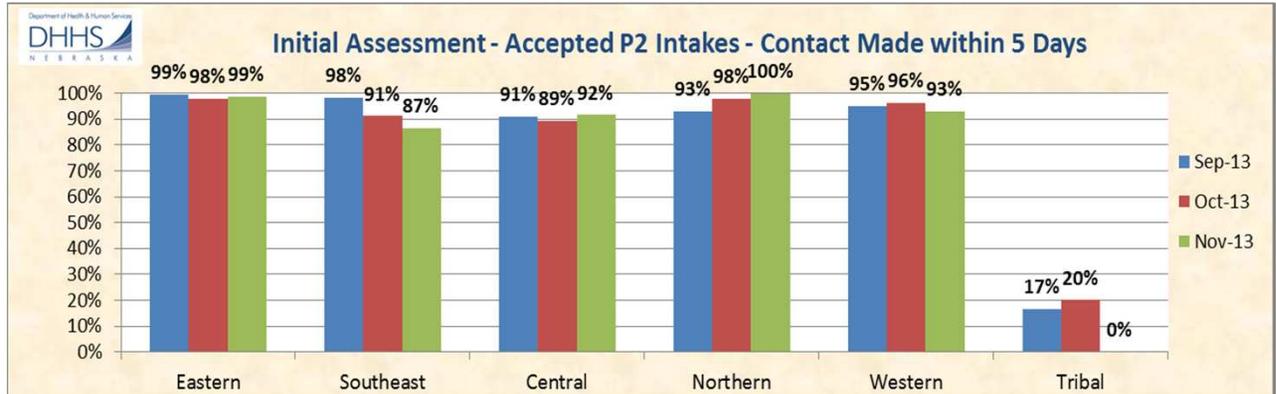
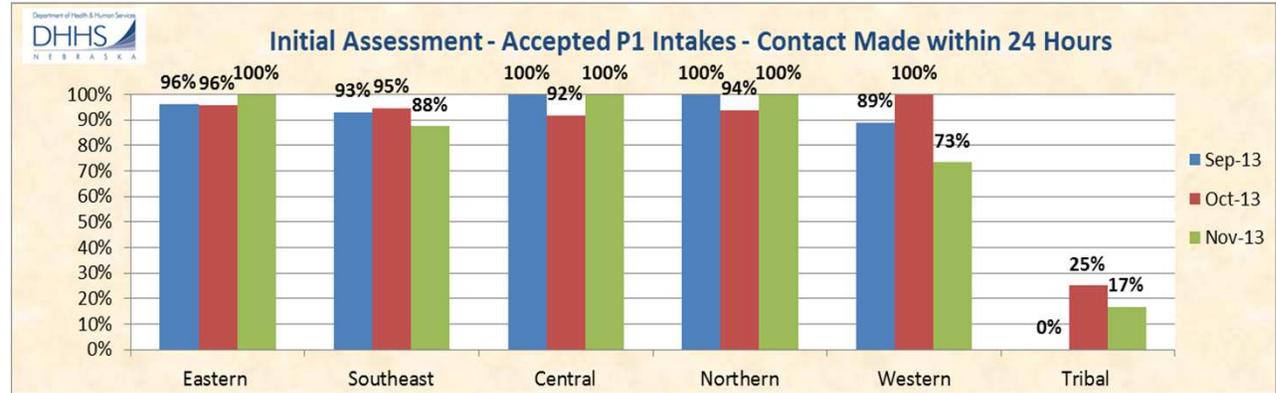
***Completed:**

- 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.
- IA Case management due date report is available and can be used daily to ensure timeframes are met.
- Quick Tip Videos are now available with instructions on how to access and use infoview reports to manage assessments.

***Planned:**

Data Review Frequency: Monthly

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



Absence of Maltreatment in Six Months

Strengths/Opportunities:

Nov 2013: ESA & NSA are the two service areas that are exceeding the target goal at this time. Close to achieving the goal on a statewide level.

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:*

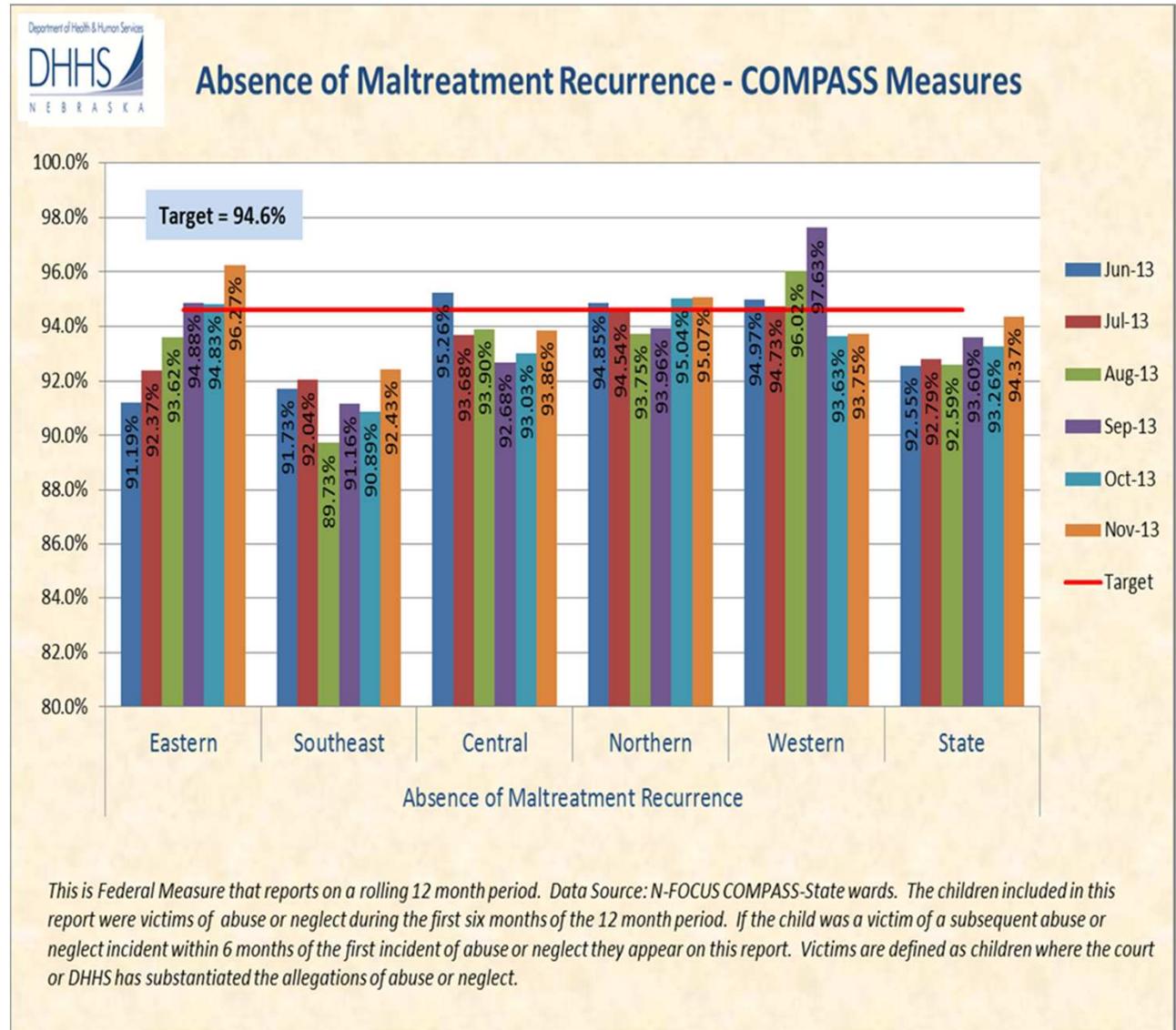
- A workgroup will convene to look at reason for case involvement and put instructions together on how to document reason for case involvement to better capture information about substance abuse and other reasons for case opening/involvement.
 -CQI team will complete additional breakdown of repeat maltreatment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

Nov 2013: ESA is the only Service Area that is not meeting the target goal for 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:*

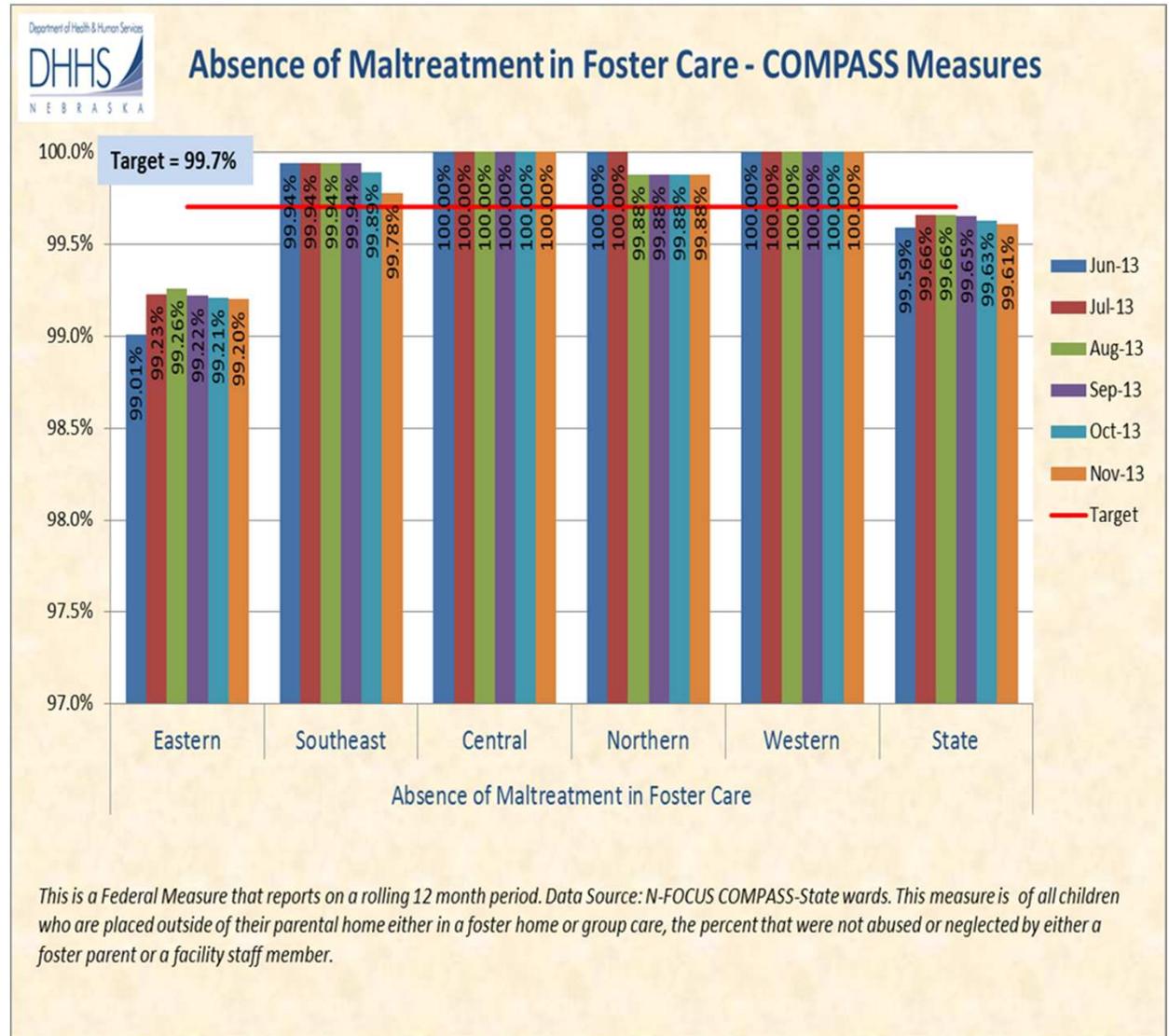
- A workgroup will convene to look at reason for case involvement and put instructions together on how to document reason for case involvement to better capture information about substance abuse and other reasons for case opening/involvement.

-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:

Nov 2013: All Service Areas continue to meet the target goals for this measure. NSA is seeing a decrease in the last few months.

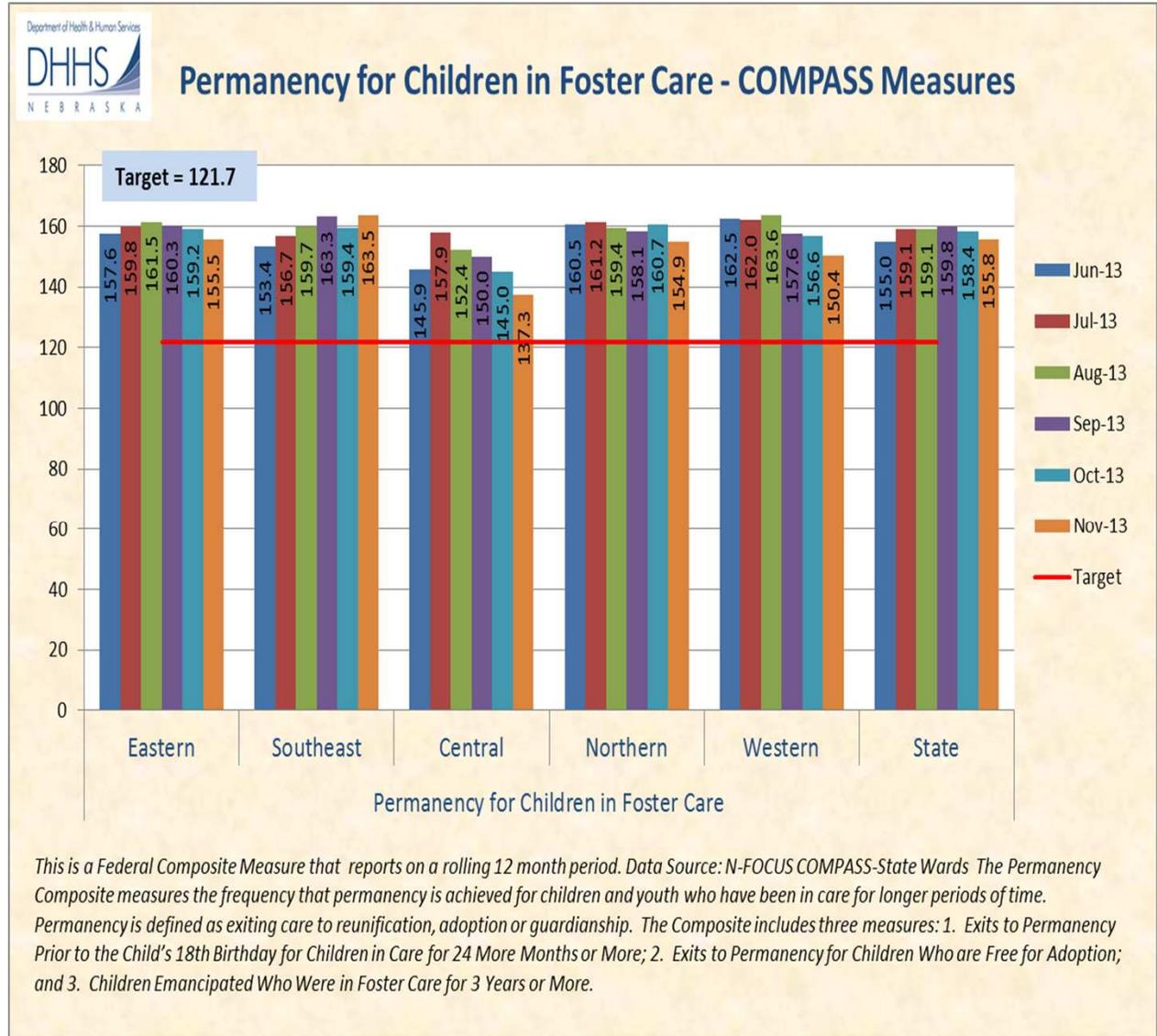
Barriers:

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:

Nov 2013: CSA is the only service area not meeting this measure. wSA leads the state in performance for this measure.

Barriers:

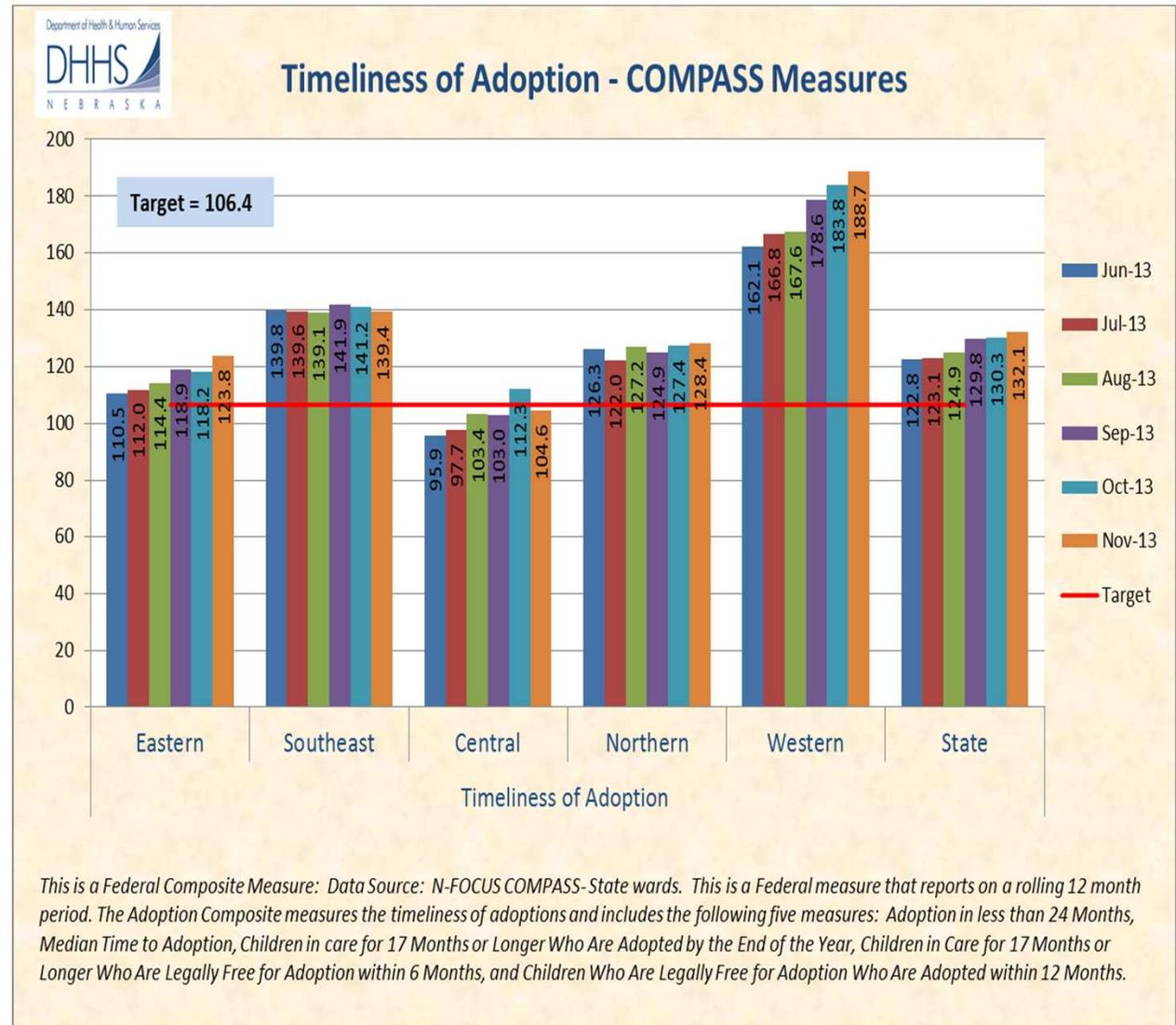
Action Items:

**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:

Nov 2013: NSA and WSA continue to meet the target goal for this measure. While NSA performance still exceeds the target goal, there has been a decrease in performance in the last few months.

Barriers:

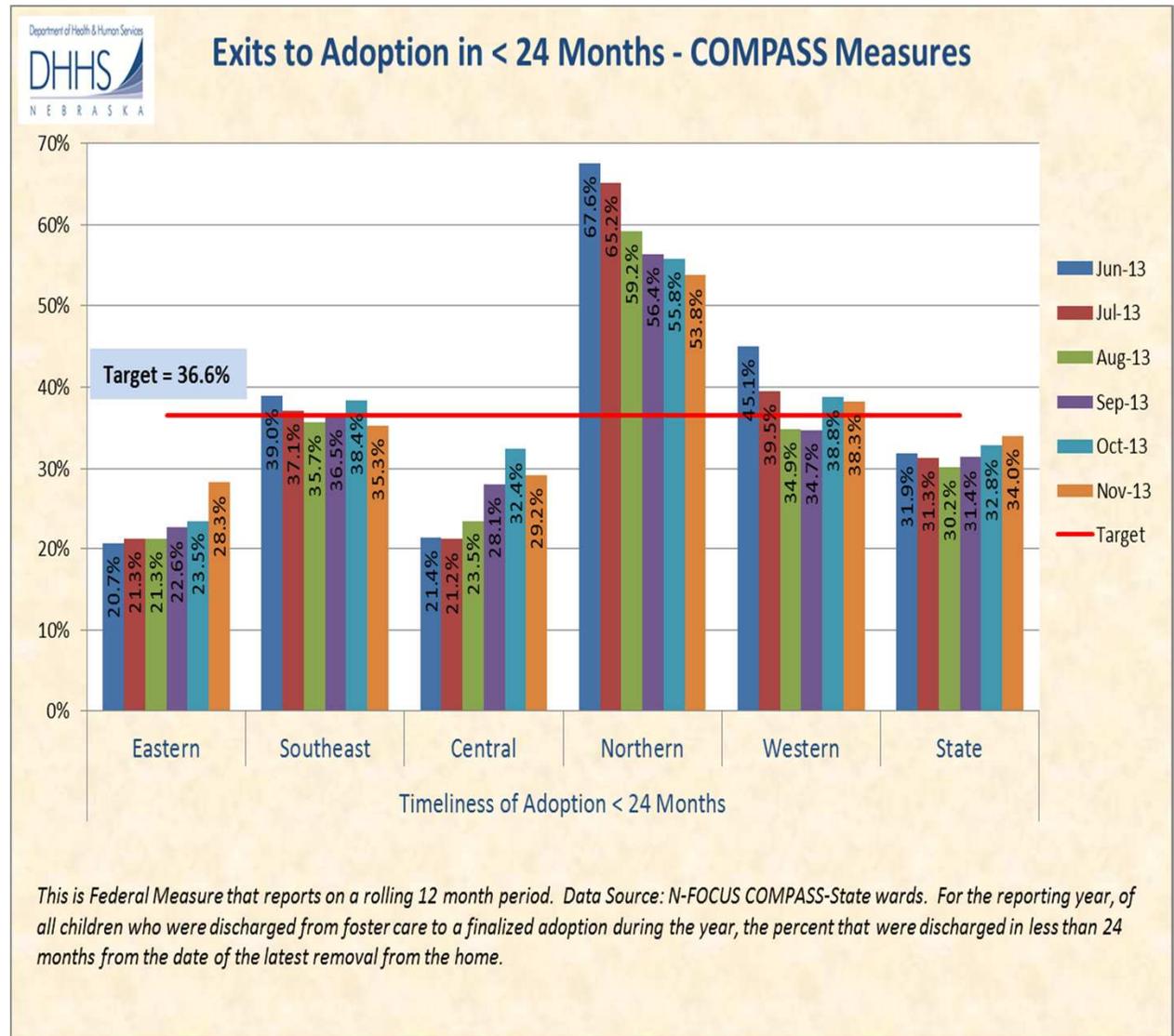
Action Items:

**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:

Nov 2013: WSA is the only Service Area that is meeting the target goal for this measure. Significant increase in performance was also seen in SESA.

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.

*Planned:

- CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.
- Service Area CQI teams need to drill down and identify barriers to reunification.
- Service Areas should track how many requests for early hearings are denied.
- Policy & Training will work together to develop quick tip or training materials to remind staff of their role as advocates and experts and to use assessments and tools available to them to request and promote achievement of reunification.

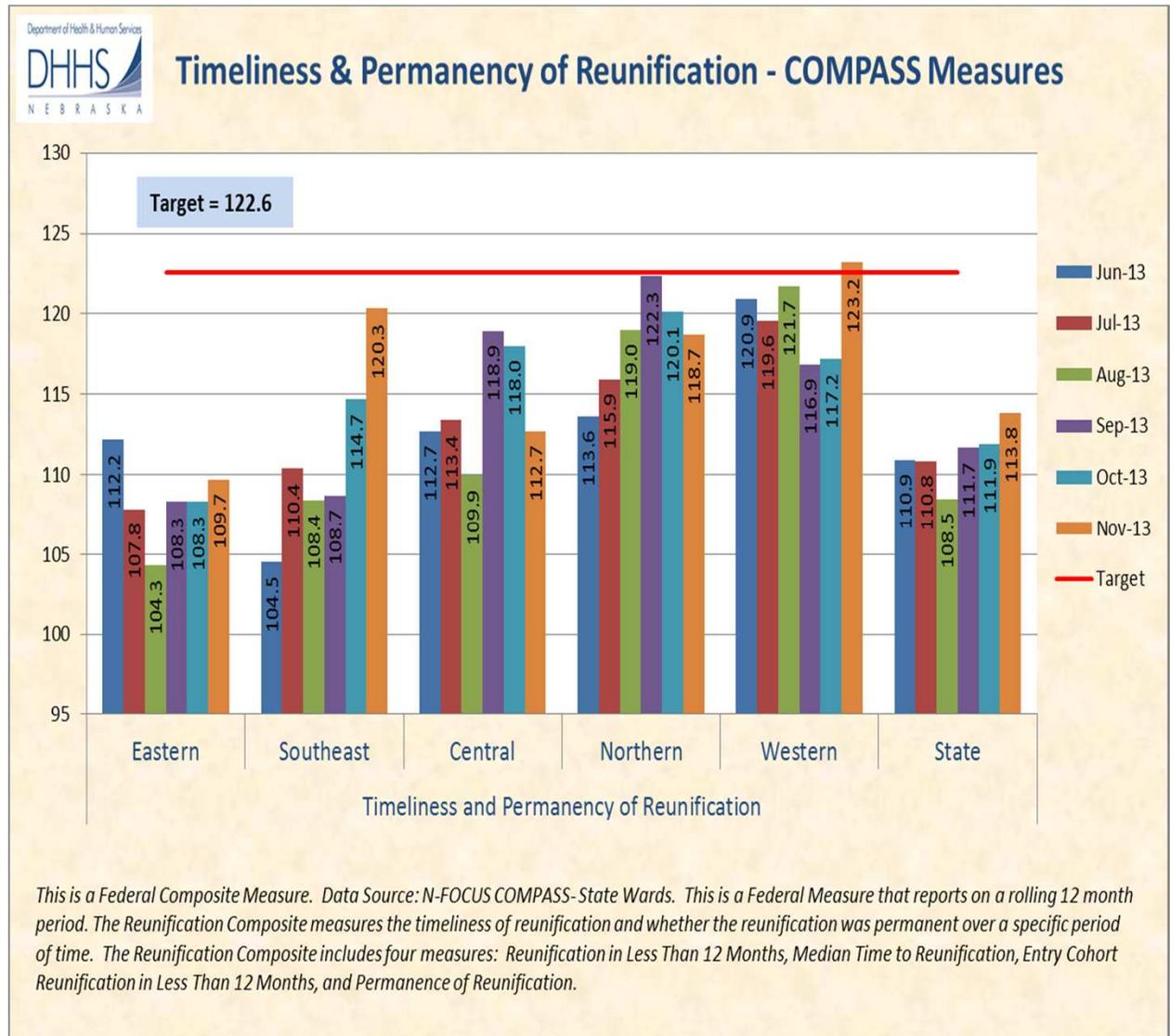
CQI Team Priority:

*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)

Timeliness & Permanency of Reunification

Strengths/Opportunities:

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.

**Planned:*

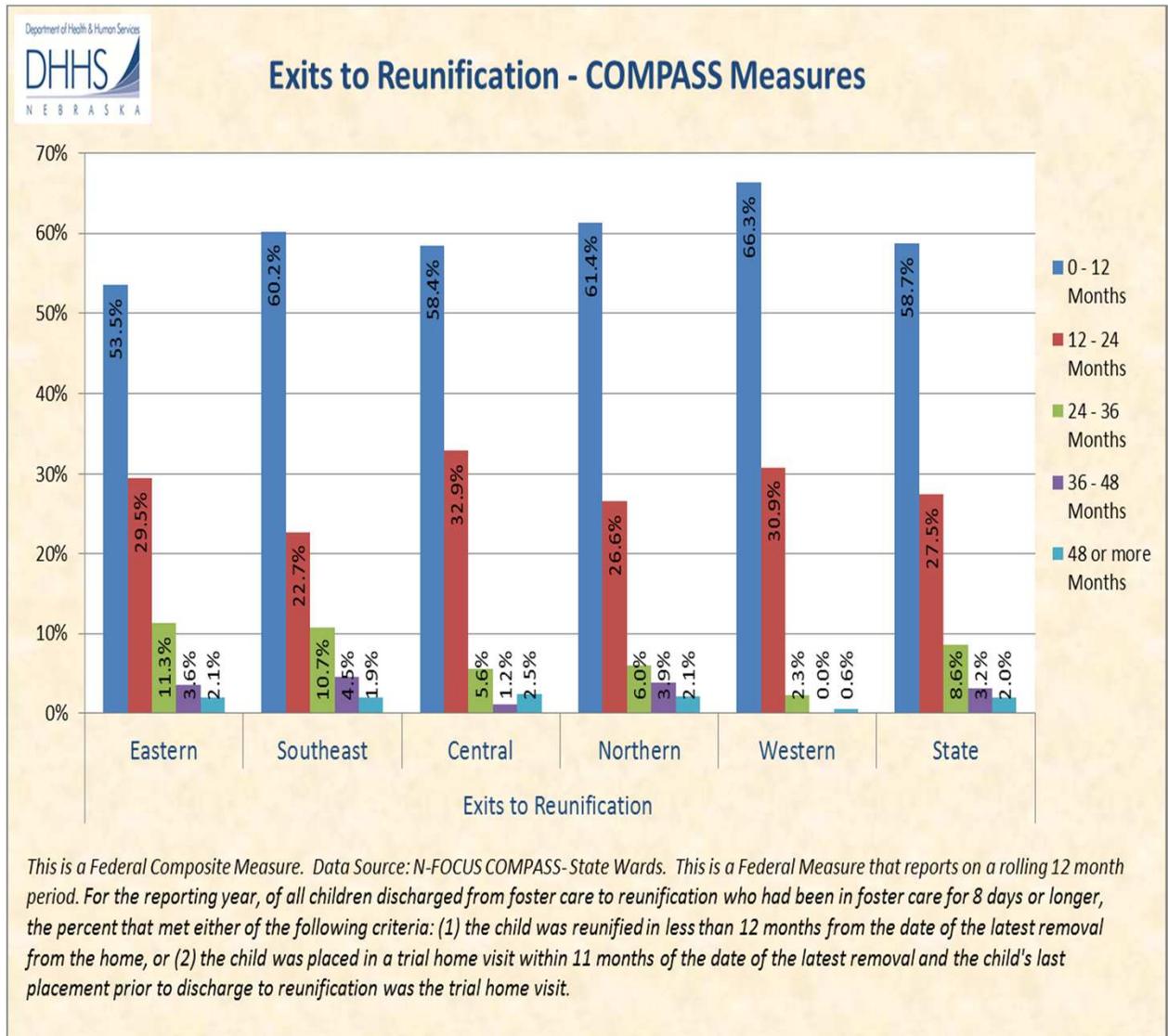
- CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

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)

Timeliness & Permanency of Reunification

Strengths/Opportunities:

Nov 2013: Increase in performance in WSA and CSA but no service area is meeting the target goal at this time.

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.

**Planned:*

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

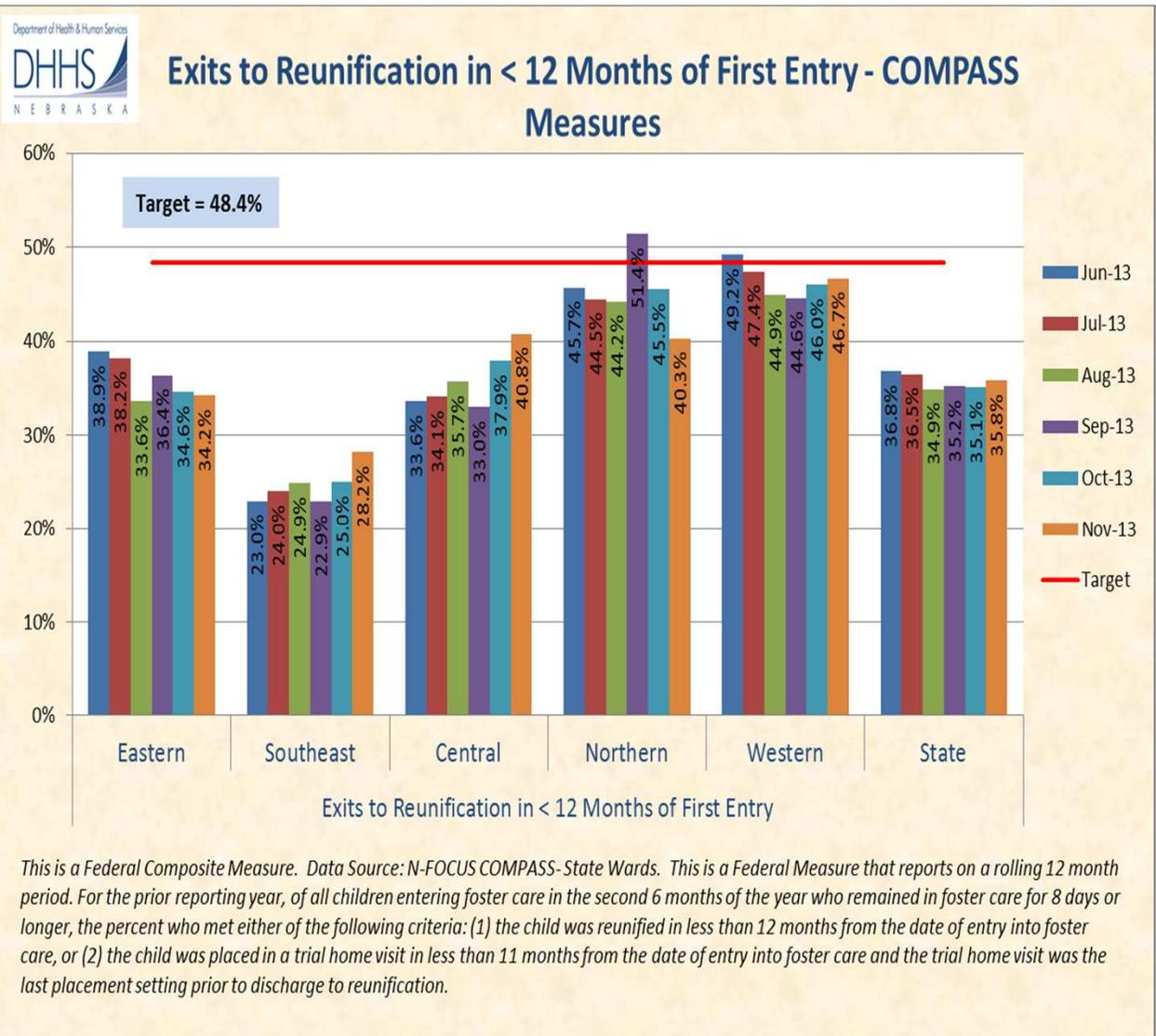
CQI Team Priority:

*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)

Timeliness & Permanency of Reunification

Strengths/Opportunities:

-Nov 2013: State average remains around 9 months.

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.

**Planned:*

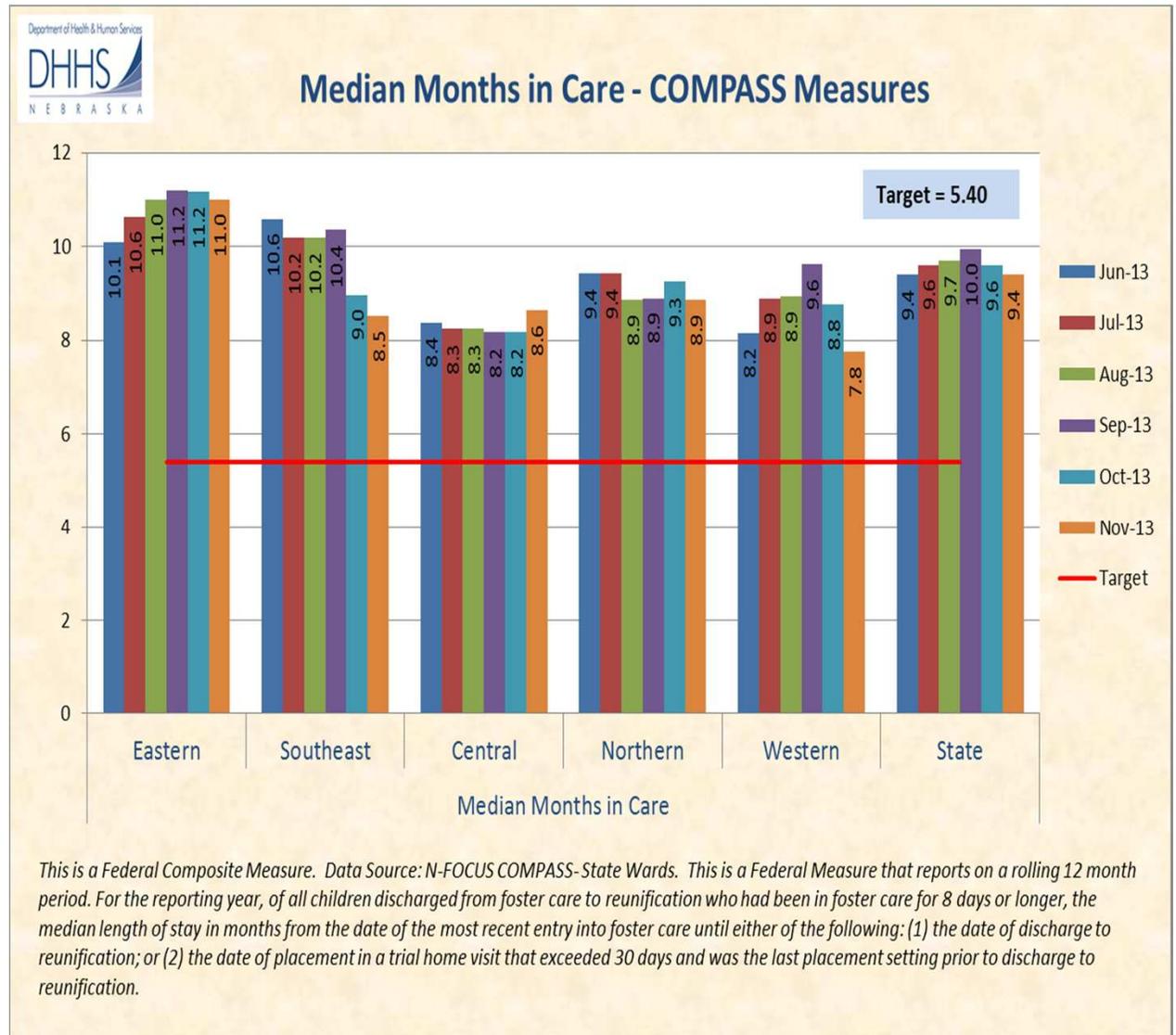
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

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)

Timeliness & Permanency of Reunification

Strengths/Opportunities:

-Nov 2013: Central and Western Service Areas have the highest re-entry into care in less than 12 months of discharge. All other Service Areas were below the target goal of 9.9% in 2013.

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.

**Planned:*

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

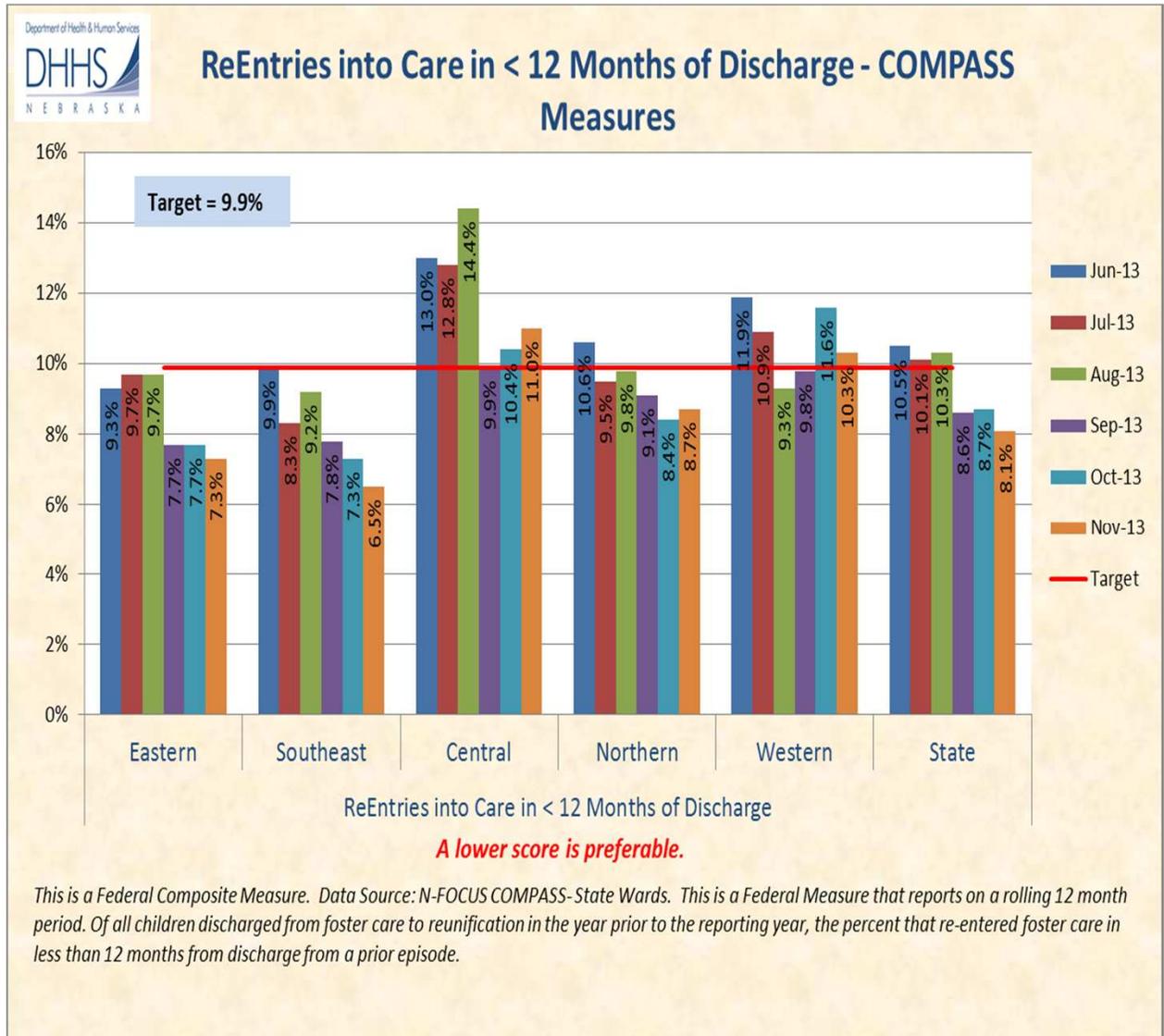
CQI Team Priority:

*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:

-Nov 2013: **State met the target goal for the 1st time this month!!!!** Northern Service Area continues to exceed the target goal performance continues to increase each month. NSA leads the state with 111.1. Eastern Service area met the target goal for this measure this month.

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:

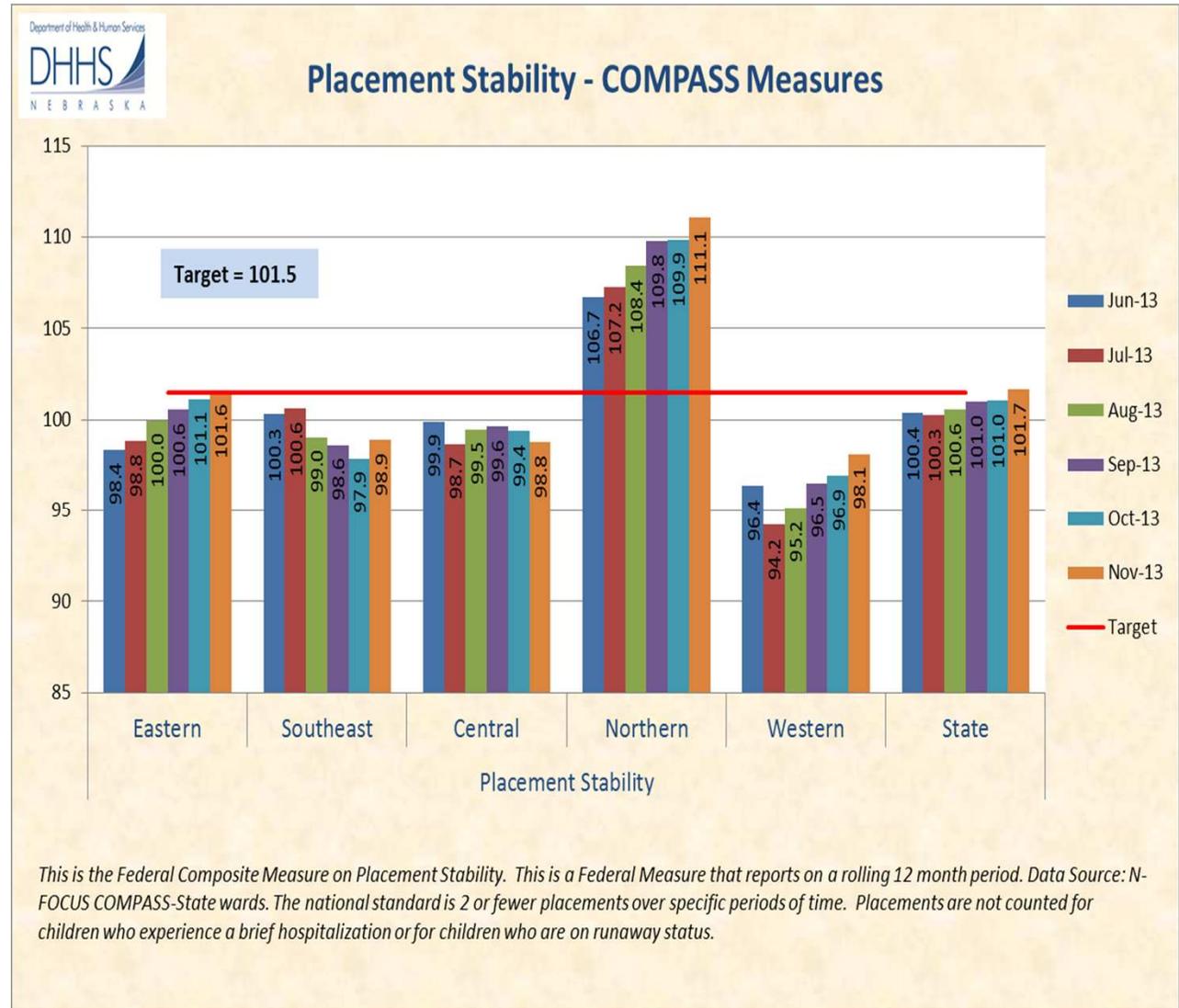
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement

CQI Team Priority:

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

*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)

Placement Stability

Strengths/Opportunities:

Nov 2013: ESA, NSA and WSA continue to exceed the target goal for this measure. Nice steady improvements each month in NSA and ESA. NSA leads the state at 94.4%.

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

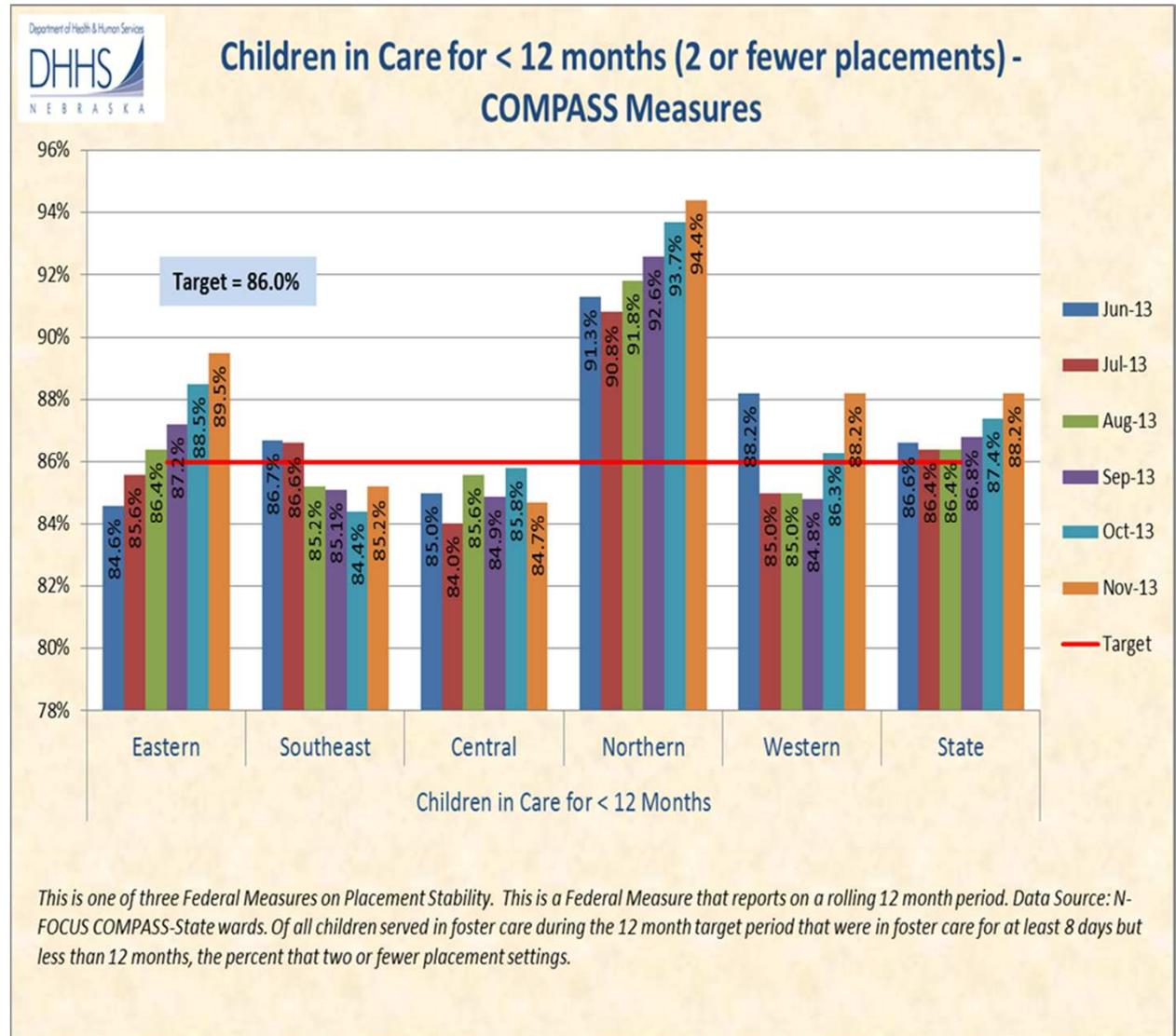
CQI Team Priority:

**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)

Placement Stability

Strengths/Opportunities:

Nov 2013: SESA and NSA continue to meet the target goal for this measure. NSA leads the state at 75.5%.

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

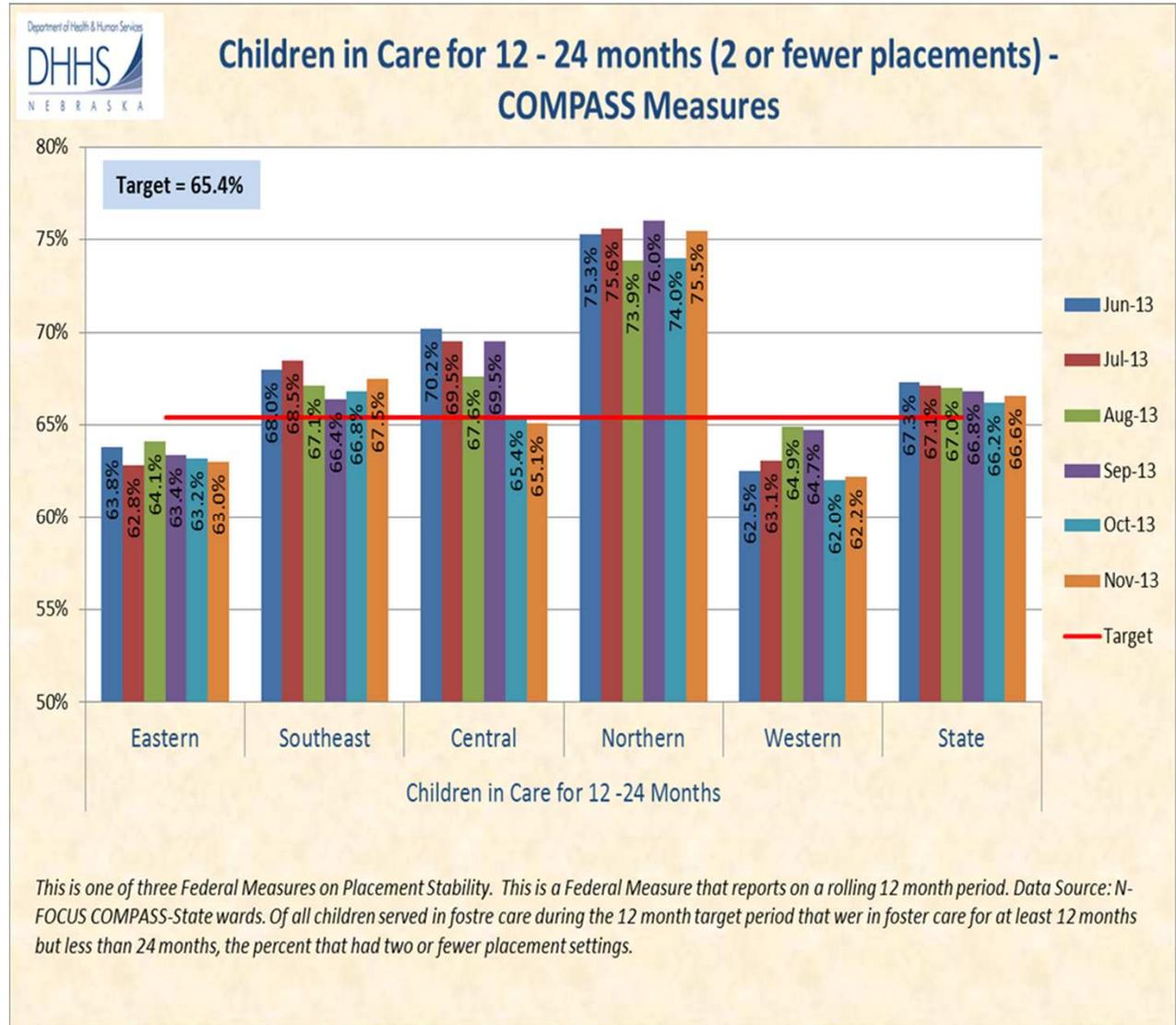
CQI Team Priority:

*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)

Placement Stability

Strengths/Opportunities:

Nov 2013: None of the areas are meeting the target goal at this time. NSA is the closest at 39.2%.

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

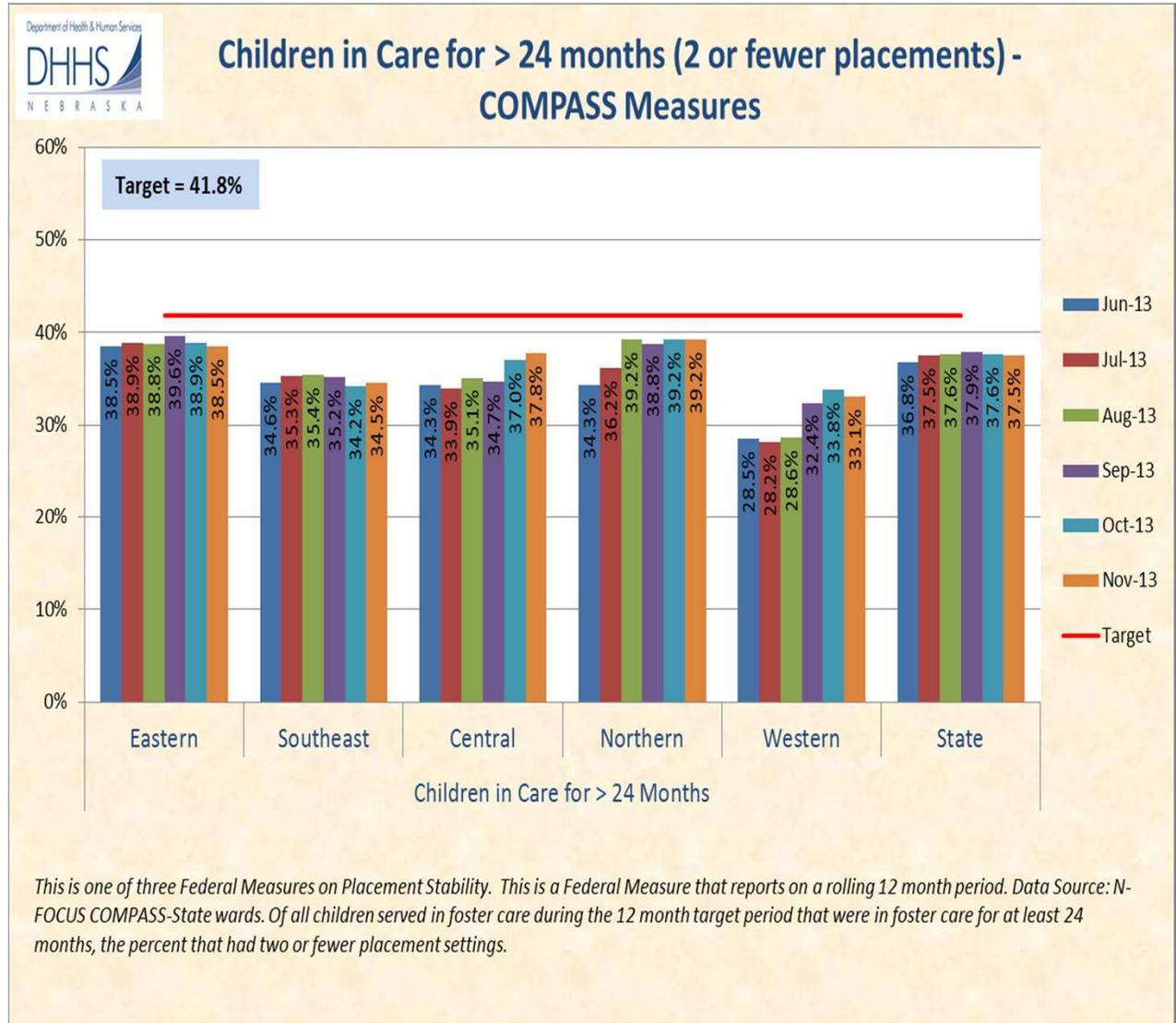
CQI Team Priority:

*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:

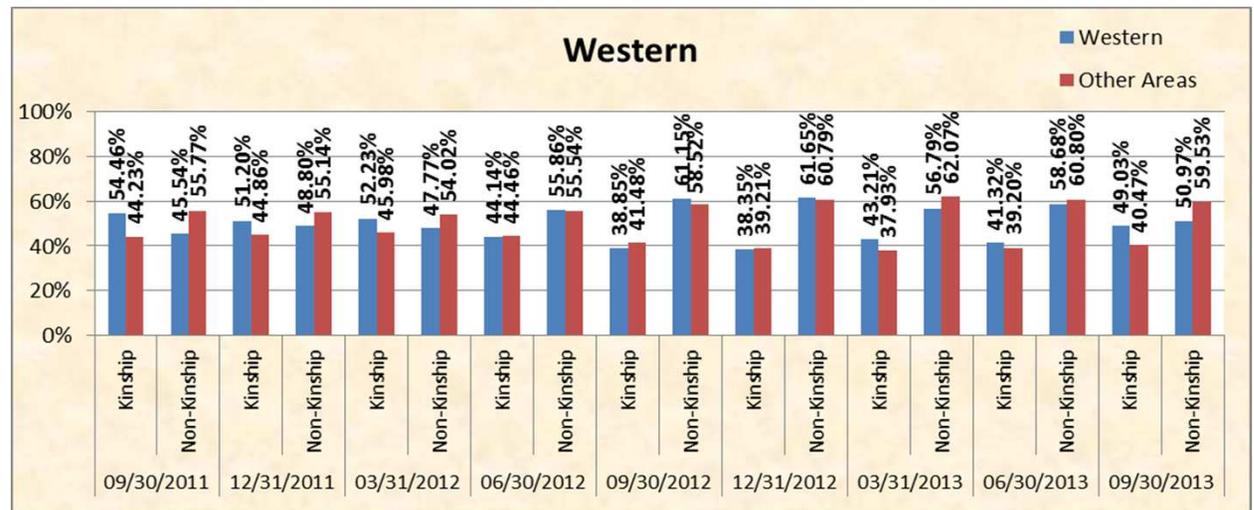
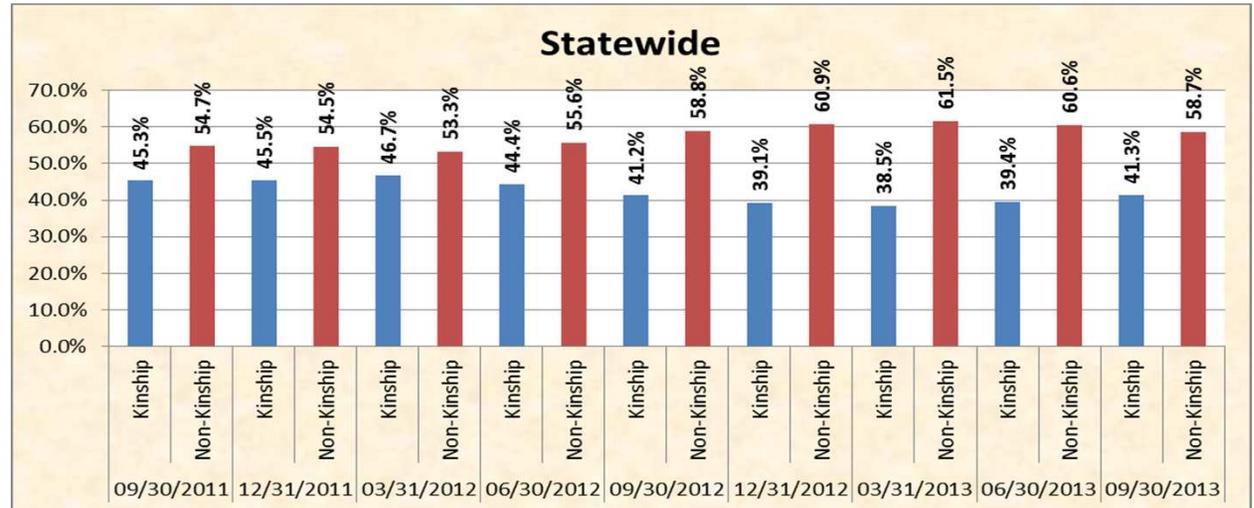
Sept 2013: Slight increase in statewide kinship placements since last quarter. Central Service Area has the lowest number of children in kinship care (29%) while Northern Service Area has the highest (50%).

Barriers:

Action Items:

**Completed:*

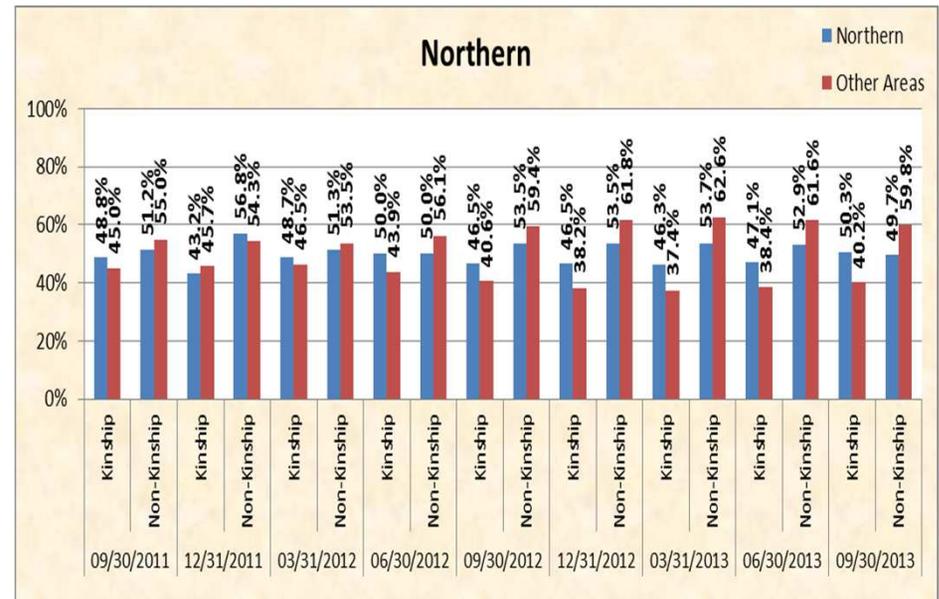
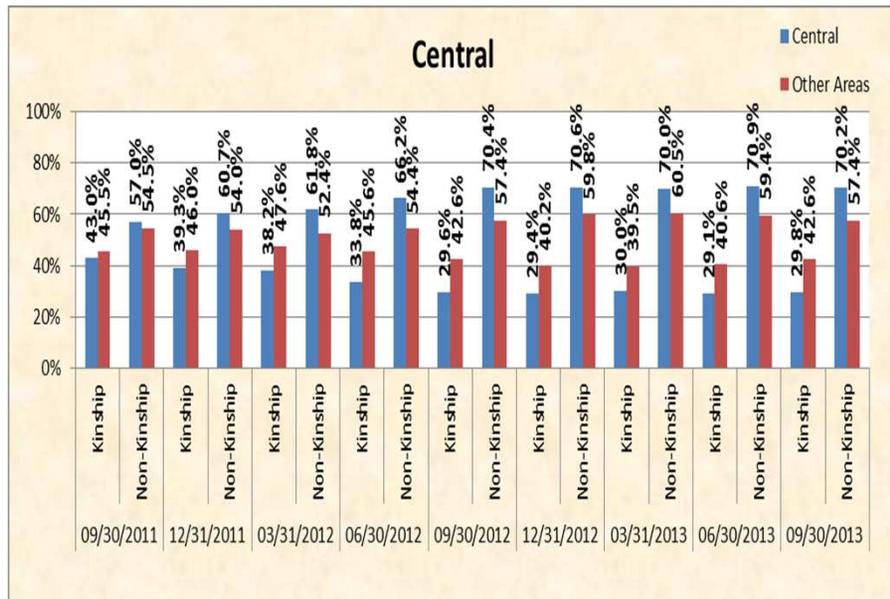
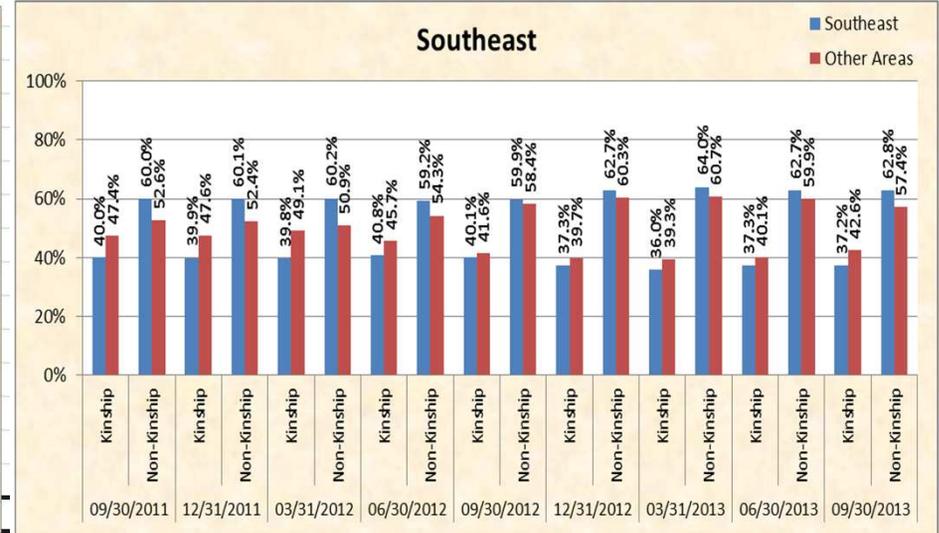
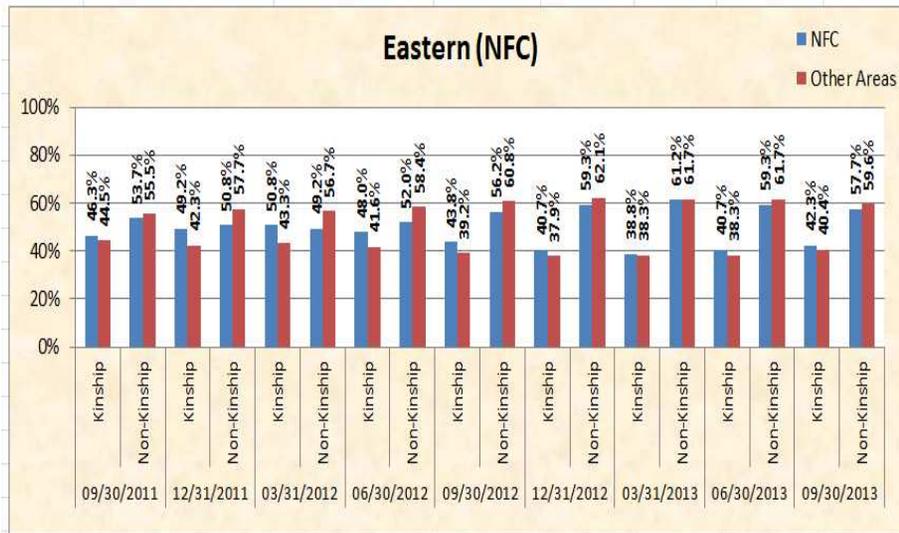
**Planned:*



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...."

Kinship Care for Out of Home Wards

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



Placement Change Documentation w/in 72 hours

Strengths/Opportunities:

-Nov 2013: Western Service Area achieved the highest score this month with 97.4%. ESA, NSA and SESA scored above 90% this month. *Note: State performance was at 56% in May 2012.*

Barriers:

- Probation changing placements and not notifying CFS
- 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.
- CQI Tip sent to CFS Staff with finalized definitions and instructions about removals and placement change documentation.

**Planned:*

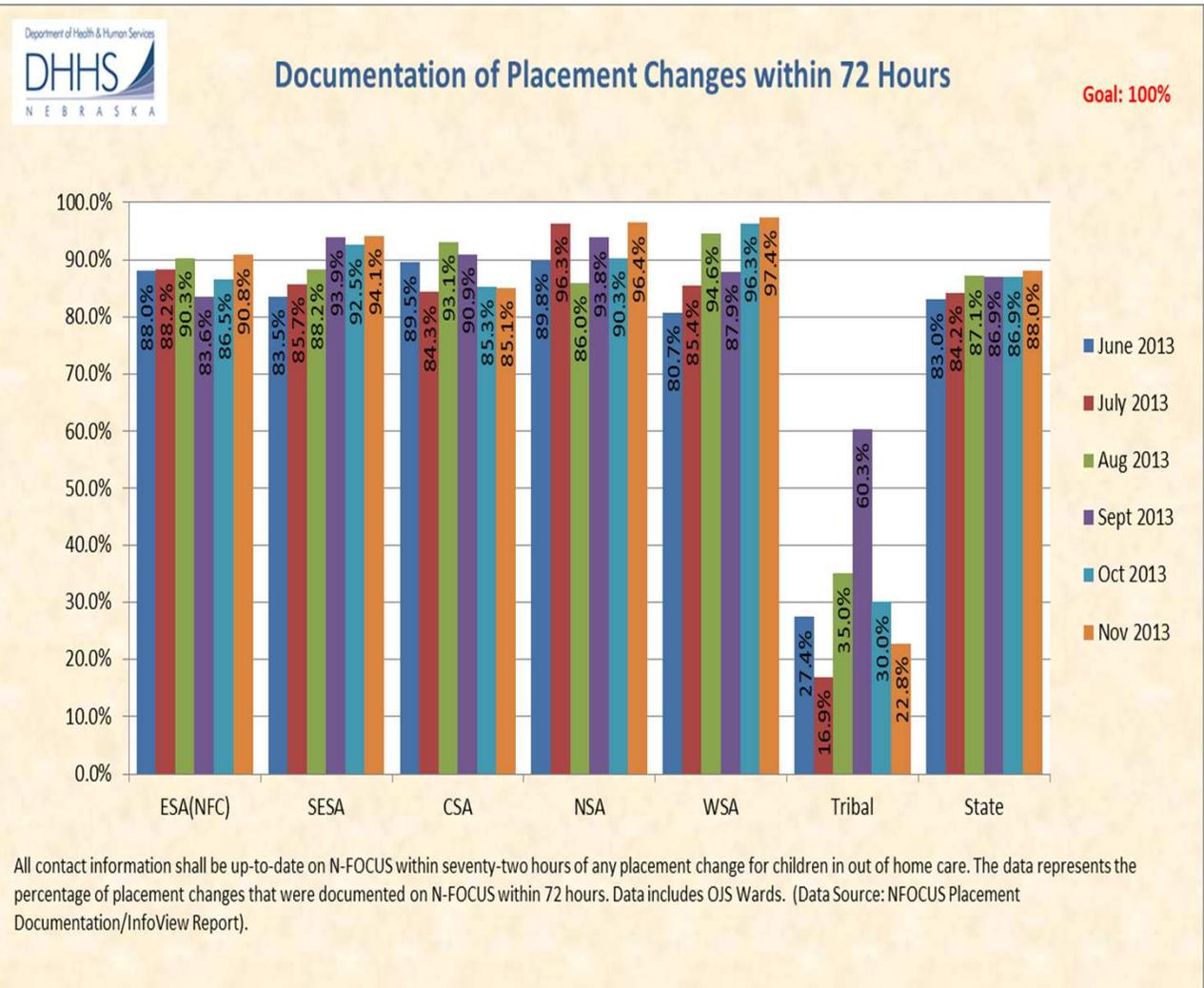
- Pop Up window will show on n-focus whenever staff document a placement that exceeds the 72 hour timeframe (March 2014 release).

CQI Team Priority:

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

**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

Family Team Meeting

Strengths/Opportunities:

-Nov 2013: State performance remained at 92% this month. NSA had the highest score at 99.5% followed by NFC at 99%. CSA and Tribes are the areas not currently meeting at least 90% in this measure.

Note: The State performance was at 76.2% in May 2012.

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.

-Central Office Staff made necessary changes to FTM report on Performance Accountability Report.

-Quality Team is reviewing FTM documentation that are submitted by CFSS and provide feedback to improve quality.

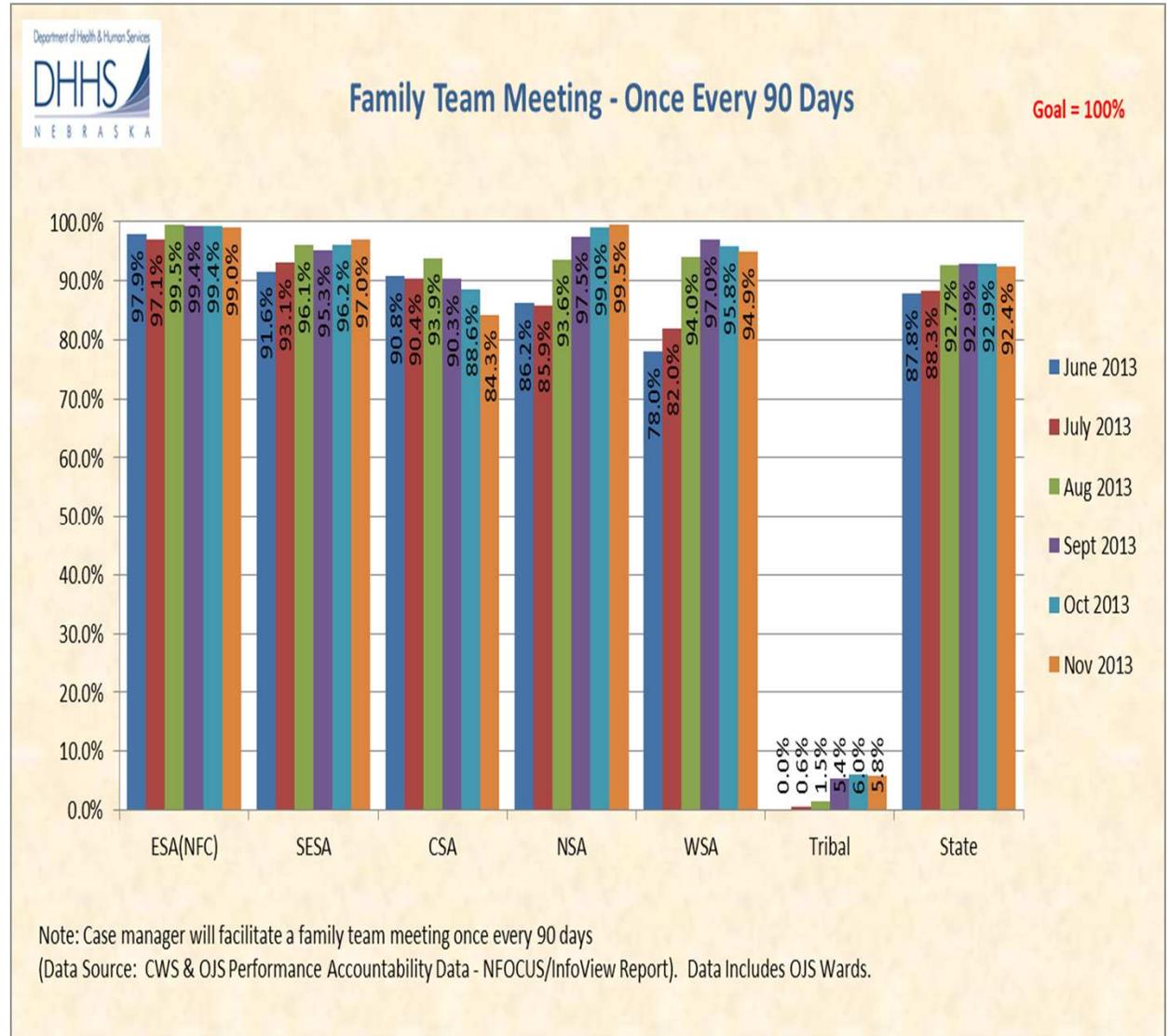
**Planned:*

--Deputy Director and Training Administrator will put together a plan to address Family Team Meeting Quality.

CQI Team Priority:

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

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



Data Review Frequency: Monthly

Case Planning Involvement – CFSS 18

Strengths/Opportunities:

Note: The CFSS review results are based on a review of N-FOCUS documentation and information obtained during phone interviews with the CFSS or FPS.

Barriers:

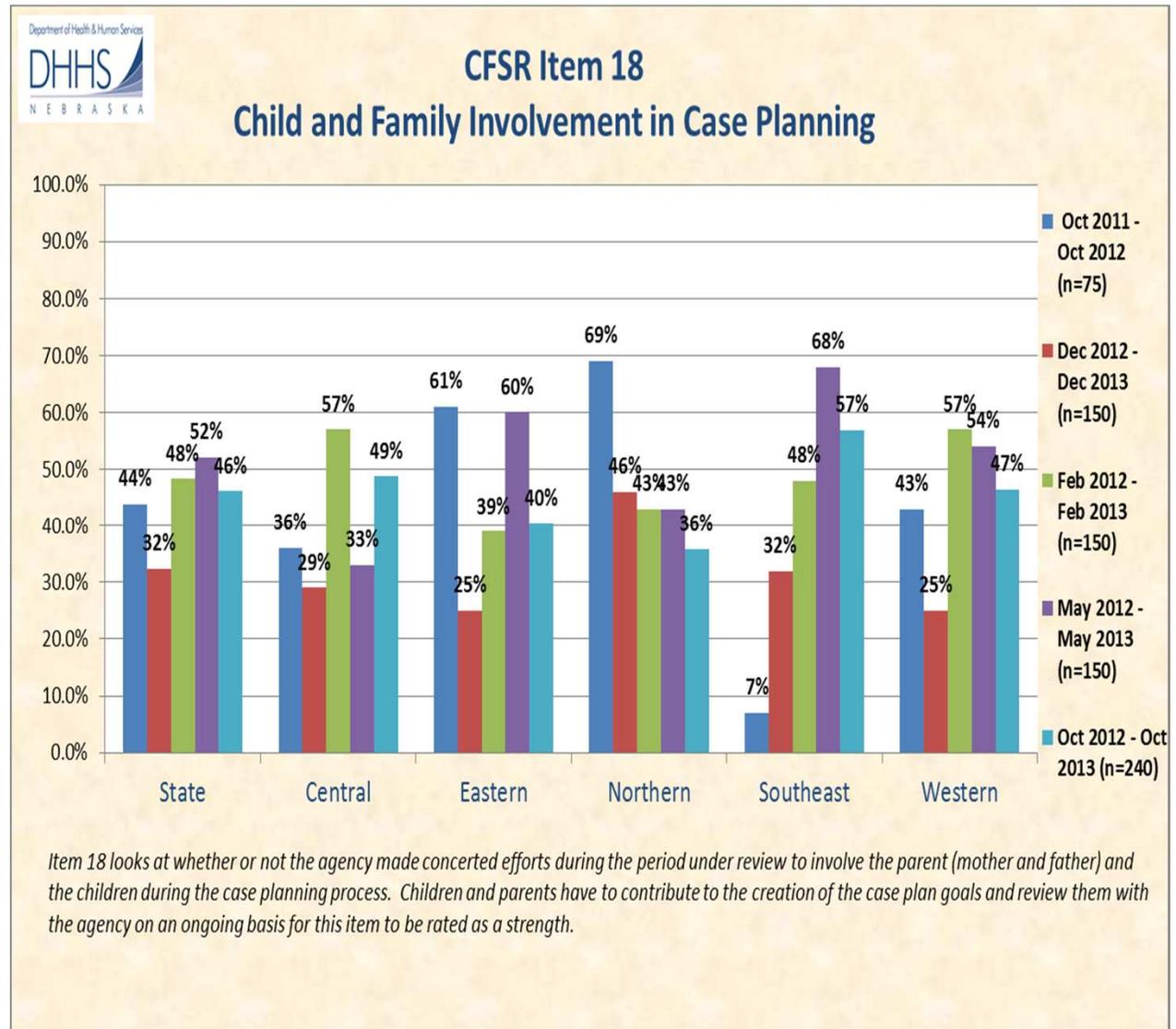
- Lack of ongoing efforts to locate and/or engage non-custodial parent in case planning (in most cases, this is the child's father).
- Lack of ongoing efforts engage developmentally appropriate children in case planning.
- Lack of good quality documentation during family team meetings and face to face contacts between the worker, children, mother and father. Documentation should clearly state how the parent or youth was engaged in the creation of, ongoing evaluation and discussions regarding progress and needs related to case plan goals.

Action Items:

**Completed:*

**Planned:*

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



Data Review Frequency: Monthly

Federal Visitation with State Wards

Strengths/Opportunities:

-Nov 2013: New Fed Fiscal Year begins this month. 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. NE is meeting this goal of 95% at this time. Performance is 98% and above for all Service Areas but at 6% for Tribal Cases.

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:

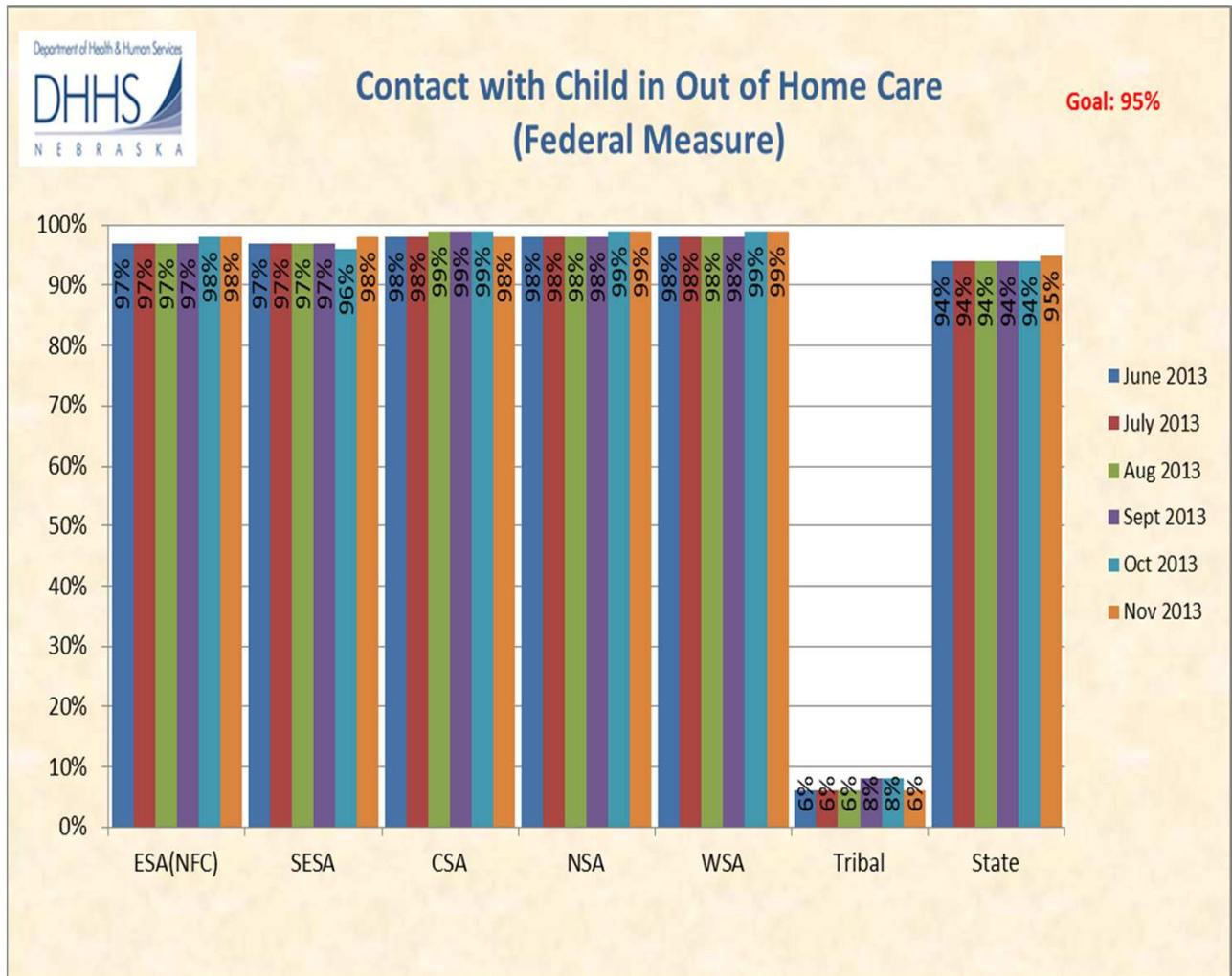
*Central and Southeast Service Areas

*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 State Wards and Non-Court Involved Child

Strengths/Opportunities:

Nov 2013: Non Court Case - statewide performance dropped from 97% to 94%. *Note: In May 2012, the state performance was at 53.4% for this measure.*

Nov 2013: State wards – performance dropped from 93% to 92%. Performance is over 96% for all Service Areas but less than 2% for Tribal Cases.

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

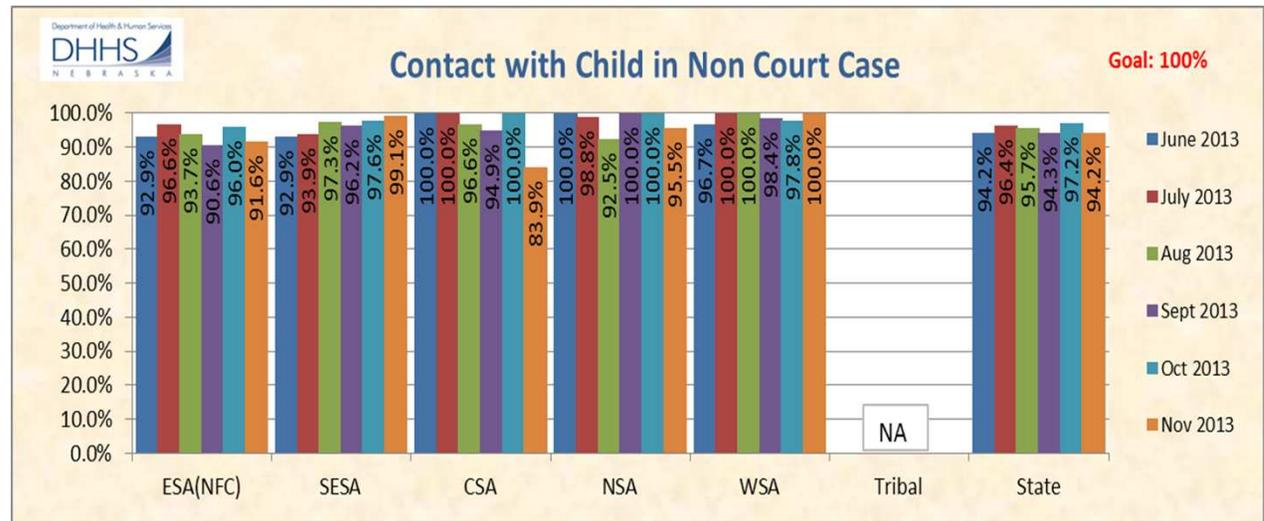
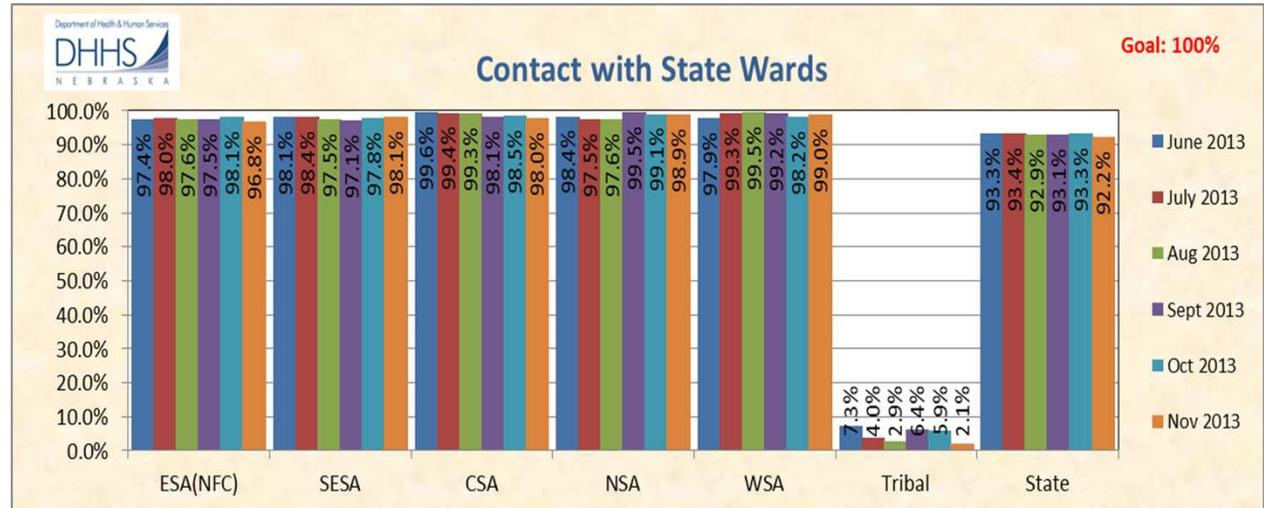
CQI Team Priority:

*Central and Southeast Service Areas

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

Data Review Frequency: Monthly

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).

Child, Parent & Foster Parent Needs Assessment – CFSR 17

Strengths/Opportunities:

Note: The CFSR review results are based on a review of N-FOCUS documentation and information obtained during phone interviews with the CFSS or FPS.

Barriers:

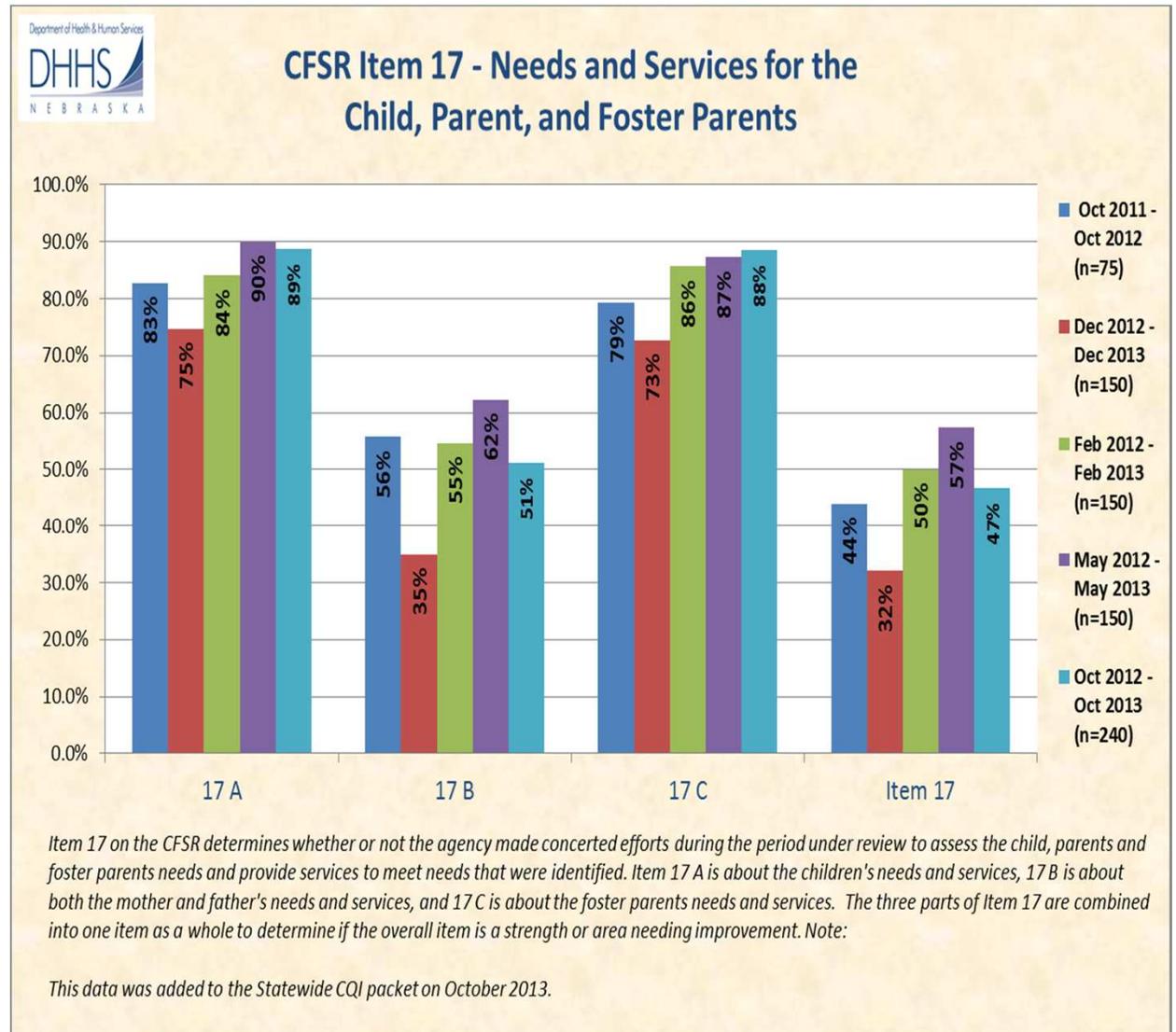
- Lack of good quality documentation during face to face contacts between the worker and the child. Documentation should contain sufficient information to address safety, permanency and well-being.

Action Items:

**Completed:*

**Planned:*

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



Data Review Frequency: Monthly

**Caseworker Contact with Child
CFSR 19**

Strengths/Opportunities:

Note: The CSFR review results are based on a review of N-FOCUS documentation and information obtained during phone interviews with the CFSS or FPS.

Barriers:

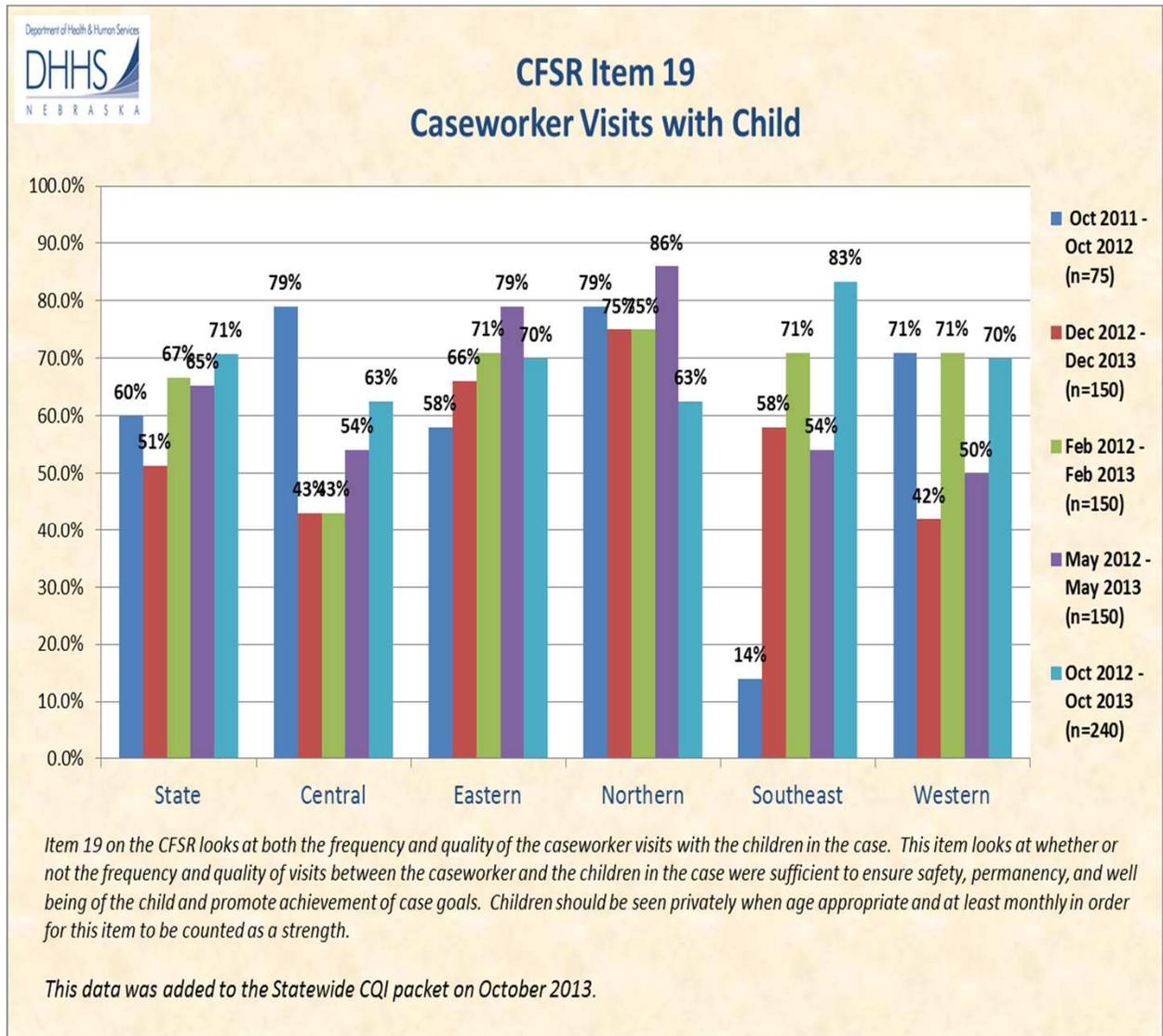
- Lack of ongoing efforts to locate and/or meet with the non-custodial parent on a monthly basis. (in most cases, this is the child's father).
- Lack of good quality documentation during face to face contacts between the worker and the child's mother and father. Documentation should contain sufficient information to address safety, permanency and well-being.

Action Items:

**Completed:*

**Planned:*

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



Data Review Frequency: Monthly

**Caseworker Contact with Parent
CFSR 20**

Strengths/Opportunities:

Note: The CSFR review results are based on a review of N-FOCUS documentation and information obtained during phone interviews with the CFSS or FPS.

Barriers:

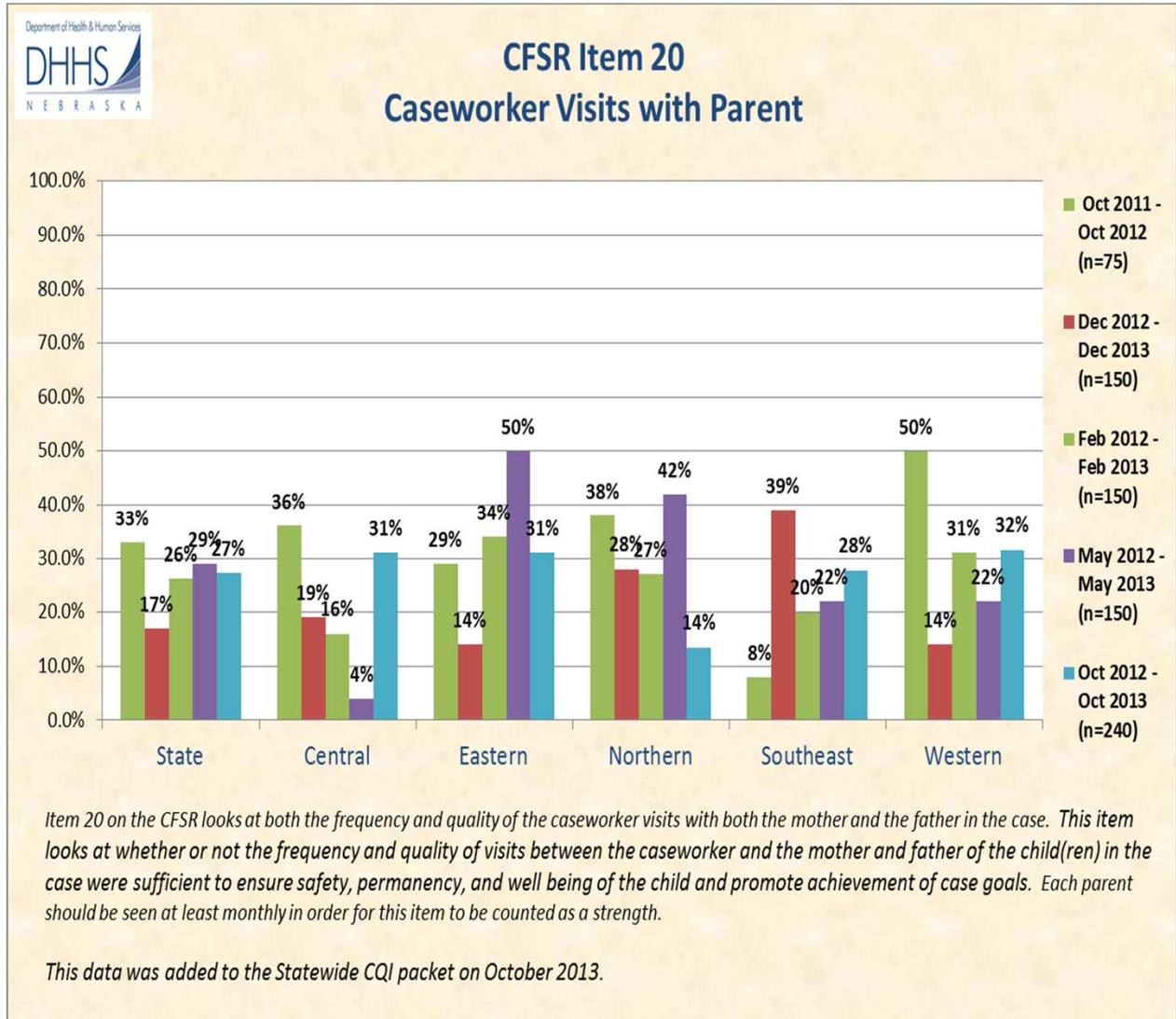
- Lack of ongoing efforts to locate and/or assess the needs of the child's non-custodial parent (in most cases, this is the child's father).
- Lack of good quality documentation during face to face contacts between the worker and the child, child's mother and father. Needs assessment for the child, mother and father can be addressed informally through monthly face to face contacts.
- Lack of ongoing formal needs assessment (no evidence of ongoing completion of SDM FSNA).

Action Items:

**Completed:*

**Planned:*

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



Data Review Frequency: Monthly

STRUCTURED DECISION MAKING (SDM)

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

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

SDM Risk Re & Reunification Assessments

Strengths/Opportunities:

# of All Youth with No Finalized Risk-Re or Reunification Assessments	Oct	Nov	Dec
State	582	287	246
CSA	56	31	27
ESA	232	108	85
NSA	72	48	53
SESA	126	56	39
WSA	96	44	42

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.)
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

**Planned:*

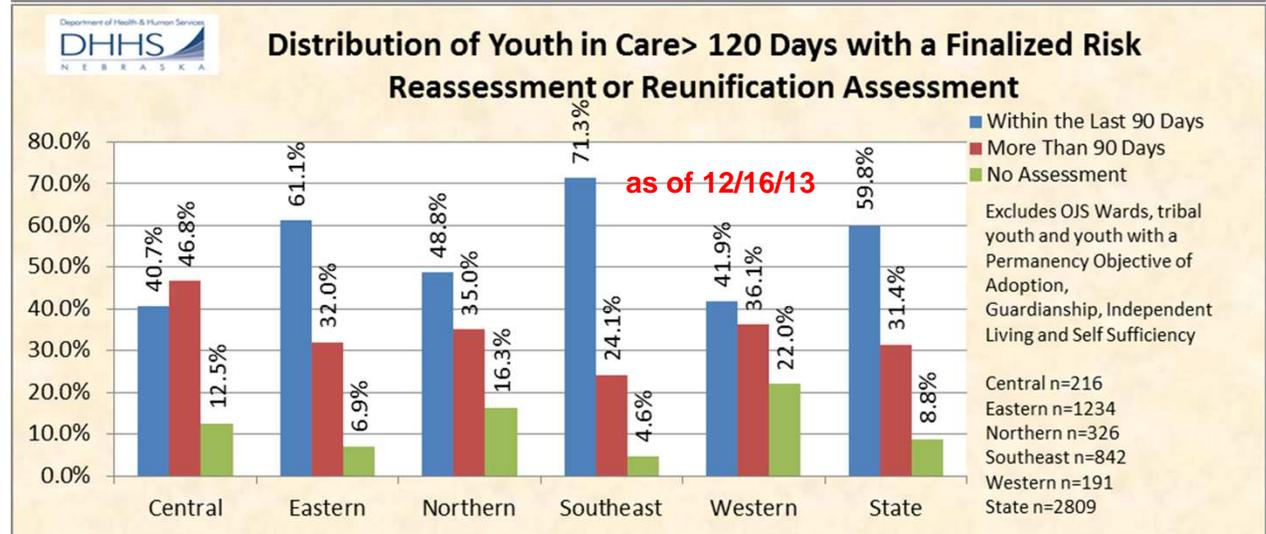
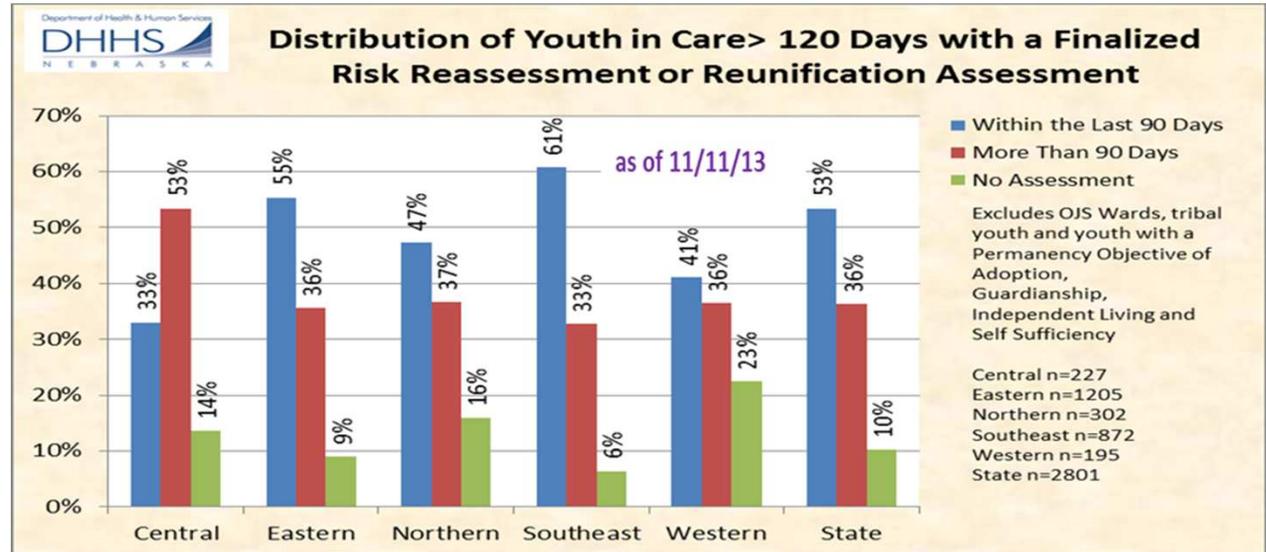
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

CQI Team Priority:

* ALL Service Areas

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

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



Data Review Frequency: Monthly

**These measures were added to the CQI packet in October 2013.*

SDM Risk Re & Reunification Assessments

Strengths/Opportunities:

# of State Wards with No Finalized Risk-Re or Reunification Assessments			
	Oct	Nov	Dec
State	363	226	193
CSA	46	31	23
ESA	123	66	55
NSA	60	42	42
SESA	77	48	36
WSA	57	39	37

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.)
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

**Planned:*

- 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.

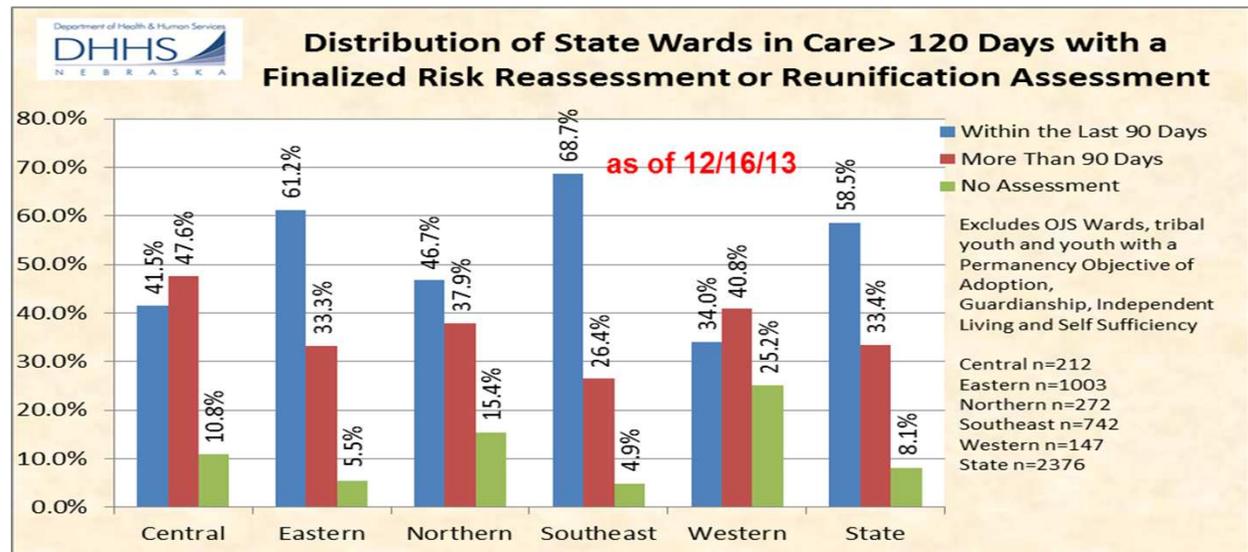
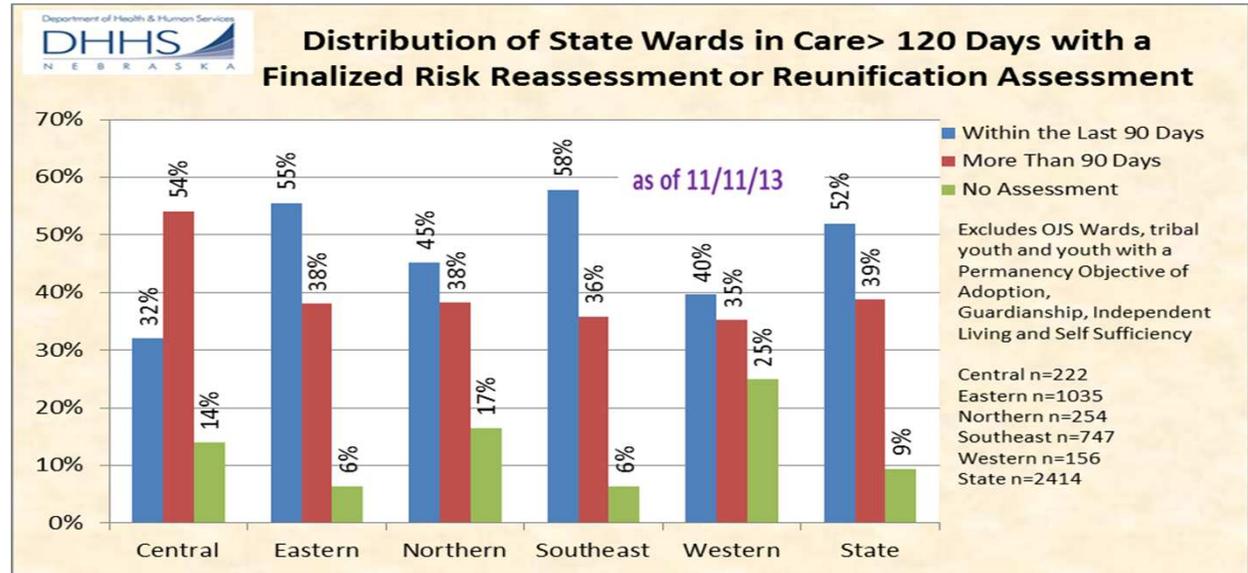
CQI Team Priority:

* 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



*These measures were added to the CQI packet in October 2013.

SDM Risk Re & Reunification Assessments

Strengths/Opportunities:

	# of Non-Court Youth with No Finalized Risk-Re or Reunification Assessments		
	Oct	Nov	Dec
State	127	61	53
CSA	2	0	4
ESA	69	42	30
NSA	4	6	11
SESA	49	8	3
WSA	3	5	5

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.)
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

**Planned:*

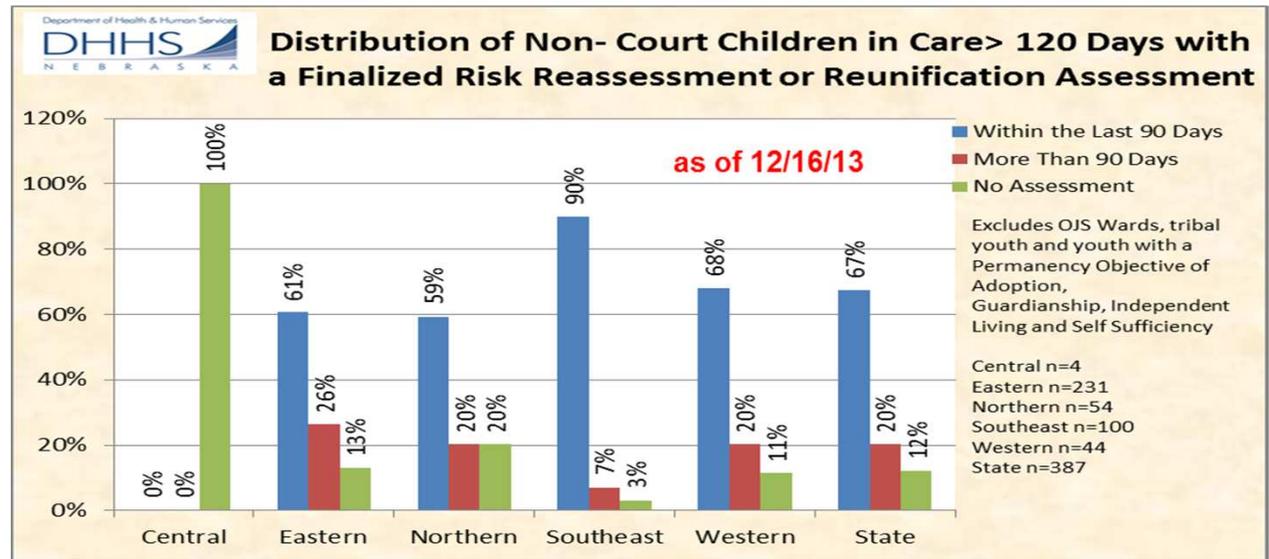
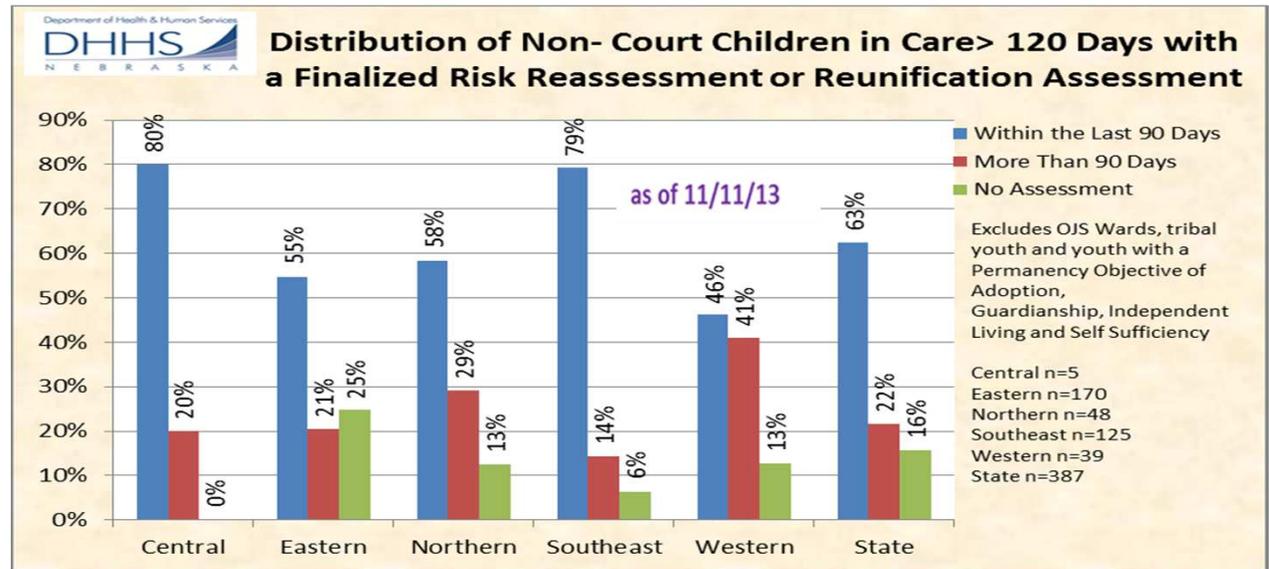
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

CQI Team Priority:

* ALL Service Areas

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

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



Data Review Frequency: Monthly

**These measures were added to the CQI packet in October 2013.*

SDM Family Strengths and Needs Assessment (FSNA)

Strengths/Opportunities:

# of ALL Youth with No Finalized FSNA			
	Oct	Nov	Dec
State	213	126	126
CSA	42	15	16
ESA	19	15	18
NSA	39	32	34
SESA	51	14	7
WSA	62	50	51

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.)
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

**Planned:*

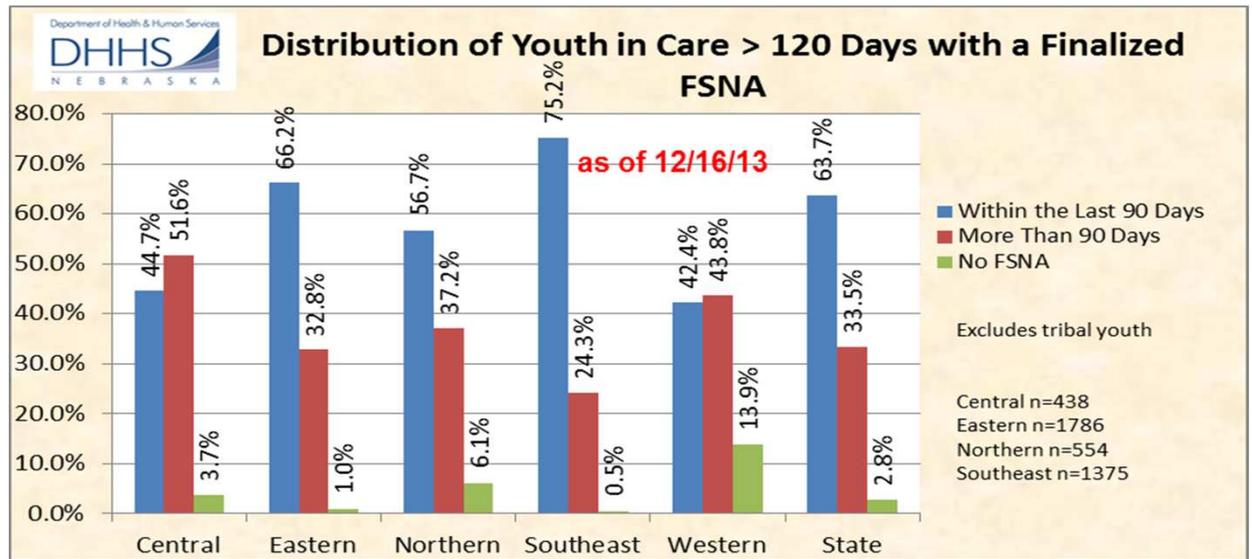
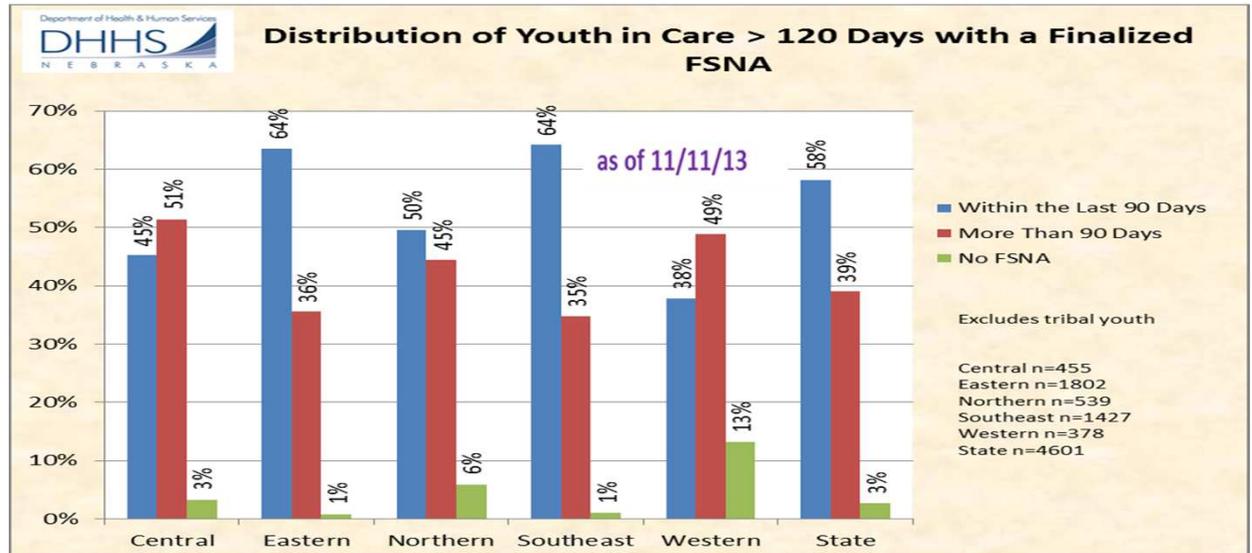
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

CQI Team Priority:

* ALL Service Areas

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

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



Data Review Frequency: Monthly

*These measures were added to the CQI packet in October 2013.

SDM Family Strengths and Needs Assessment (FSNA)

Strengths/Opportunities:

# of State Wards with NO Finalized FSNA			
	Oct	Nov	Dec
State	183	111	108
CSA	40	15	13
ESA	10	10	13
NSA	39	30	30
SESA	35	9	6
WSA	59	47	46

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.)
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

**Planned:*

- 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.

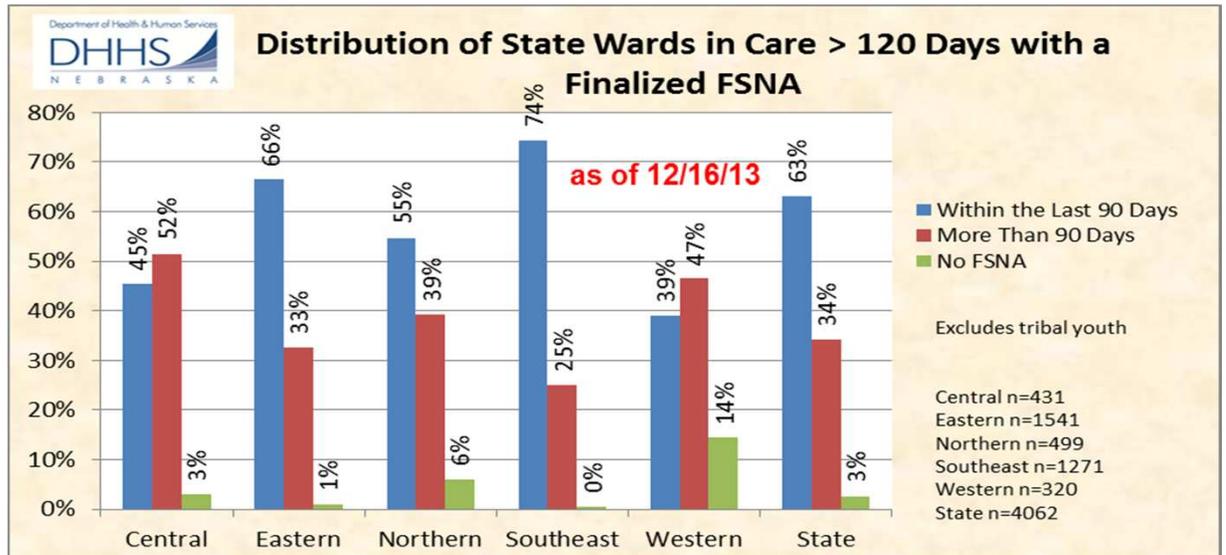
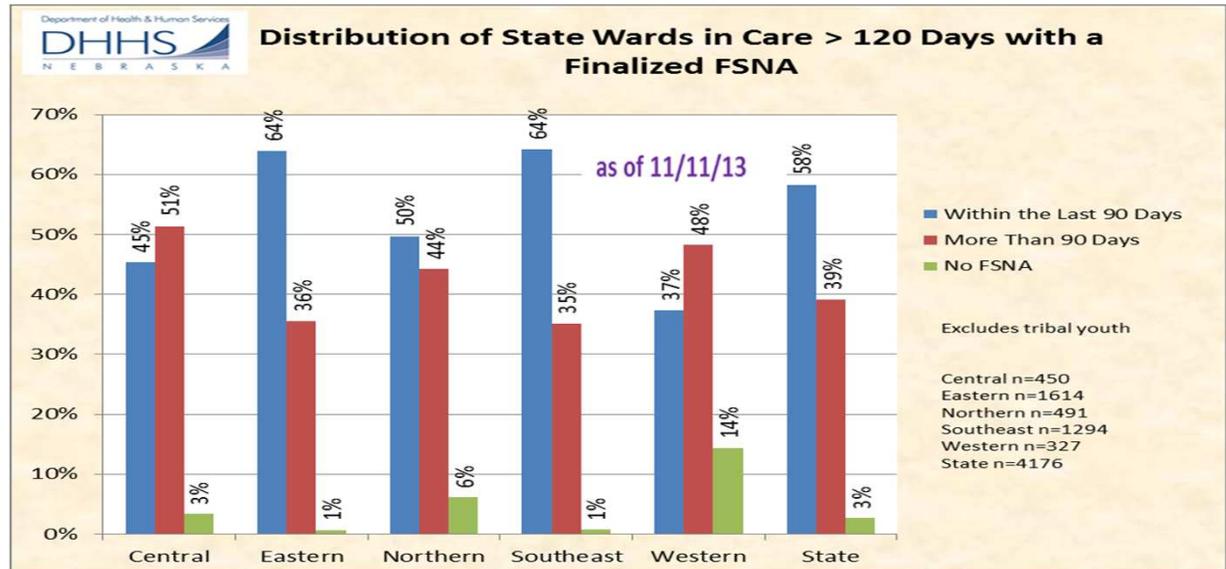
CQI Team Priority:

* 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



*These measures were added to the CQI packet in October 2013.

SDM Family Strengths and Needs Assessment (FSNA)

Strengths/Opportunities:

# of Non Court Children with NO Finalized FSNA	FSNA		
	Oct	Nov	Dec
State	30	15	18
CSA	2	0	3
ESA	9	5	5
NSA	0	2	4
SESA	16	5	1
WSA	3	3	5

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.)
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

**Planned:*

- 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.

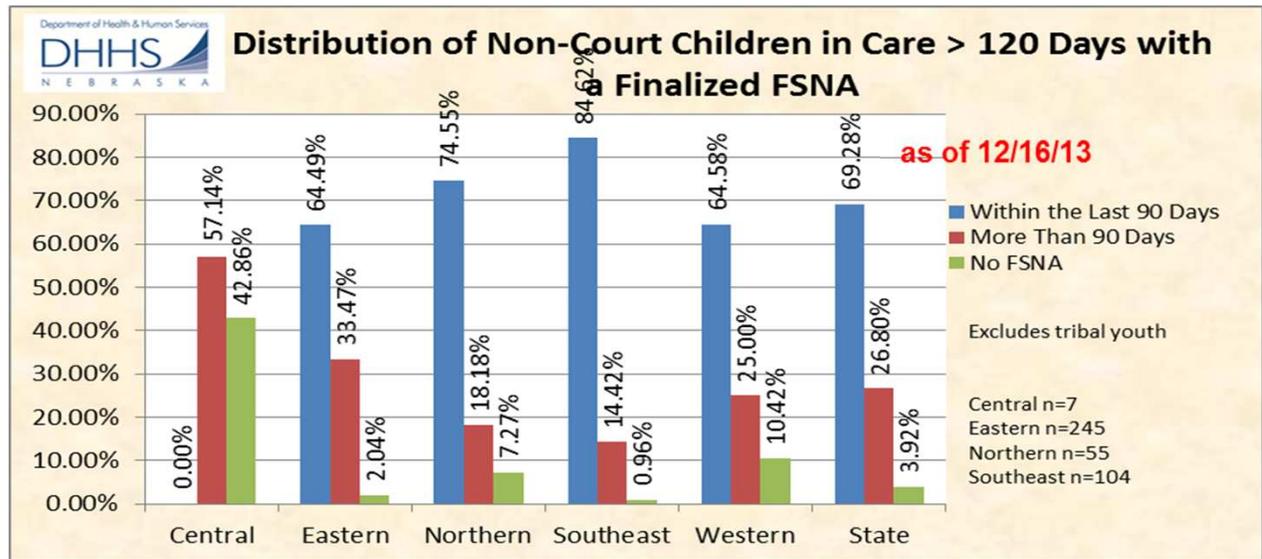
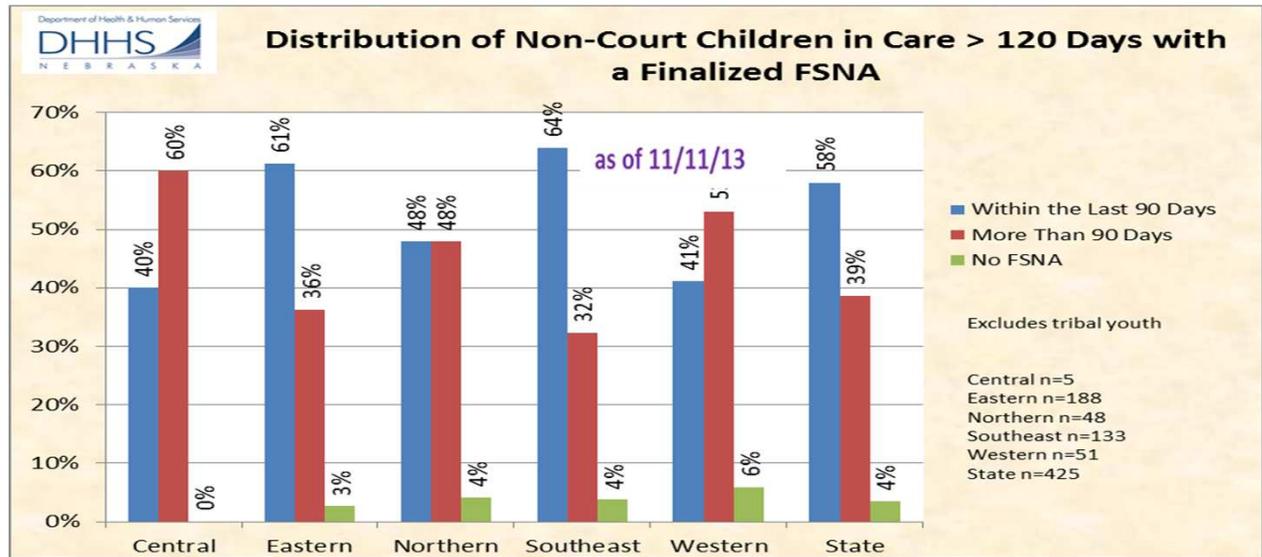
CQI Team Priority:

* 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



*These measures were added to the CQI packet in October 2013.

SDM Administrative Reviews

Strengths/Opportunities:

Nov 3013: Decrease in Admin reviews from 18 in October to 9 this month.

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 and IA Case Management Due Date Report includes SDM due dates.
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.
- Narrative boxes added on N-FOCUS (Risk & Prevention Assessments).

*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 (March 2014-Risk Re and Reunification)
- Quality & Training Teams providing additional one on one and team trainings on SDM.

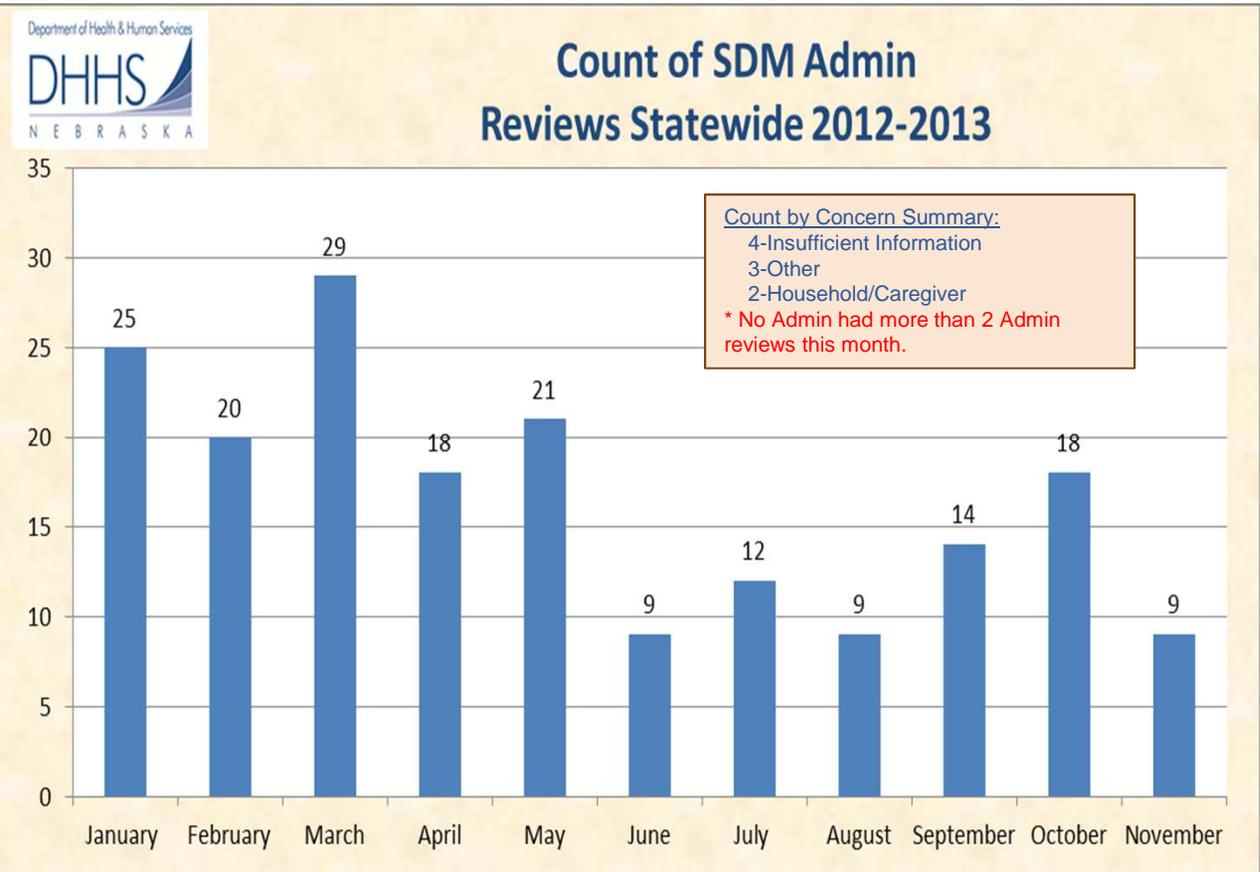
CQI Team Priority:

* 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:

Nov 2013: Highest level of quality documentation seen in Safety Assessments and lowest quality of documentation in Prevention 3B 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 and IA Case Management Due Date Report includes SDM due dates.
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.
- Narrative boxes added on N-FOCUS (Risk & Prevention Assessments).

**Planned:*

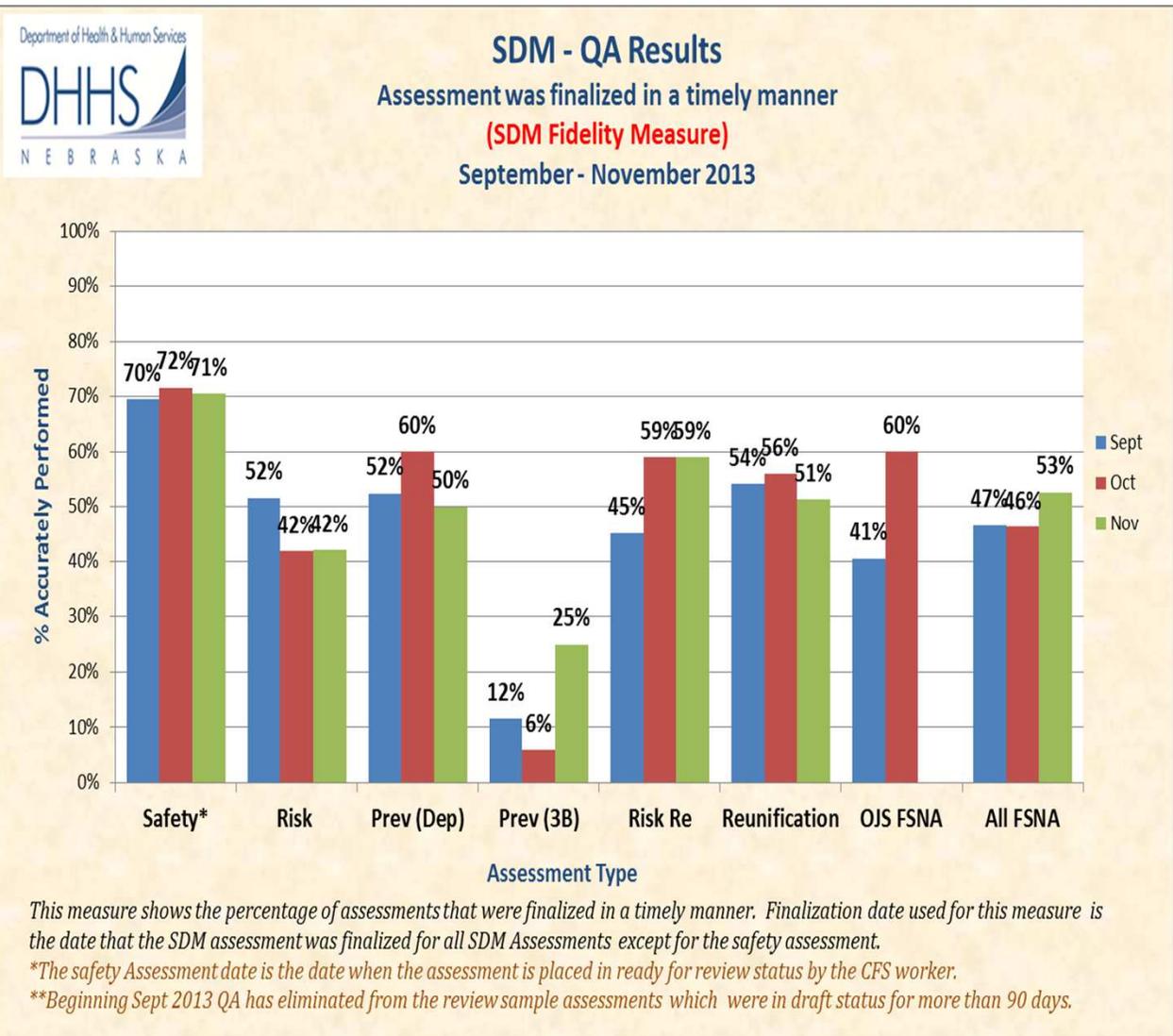
- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together 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 (March 2014-Risk Re and Reunification)
- Quality & Training Teams providing additional one on one and team trainings on SDM.

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:

-Nov 2013: 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 and IA Case Management Due Date Report includes SDM due dates.
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

- Narrative boxes added on N-FOCUS (Risk & Prevention Assessments).

*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 (March 2014-Risk Re and Reunification)
- Quality & Training Teams providing additional one on one and team trainings on SDM.

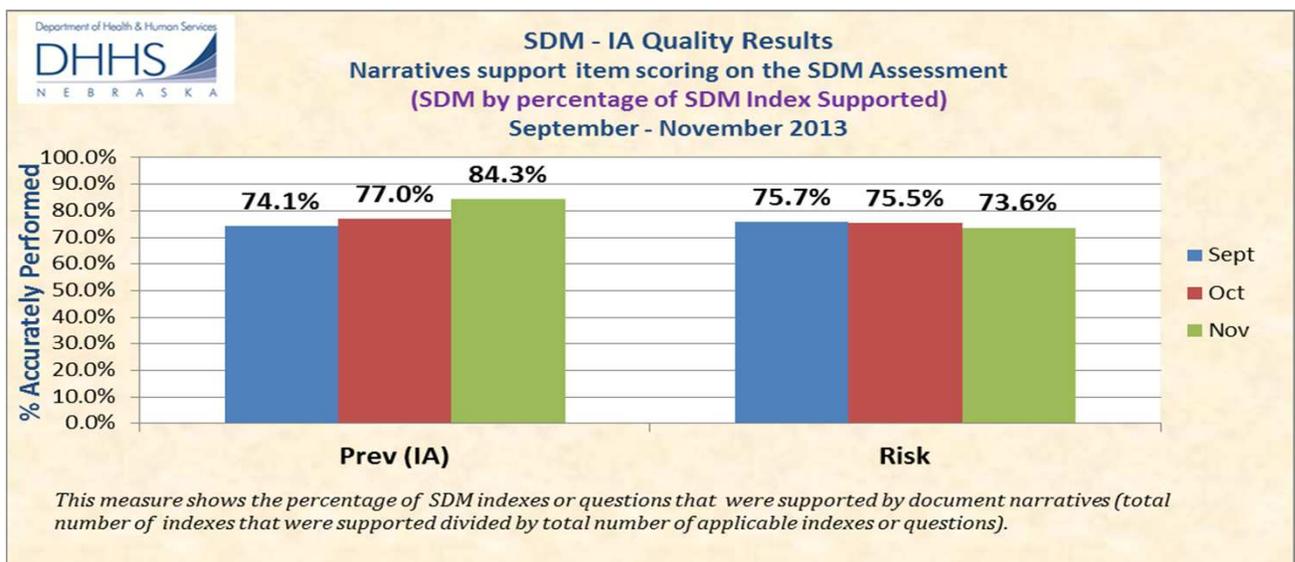
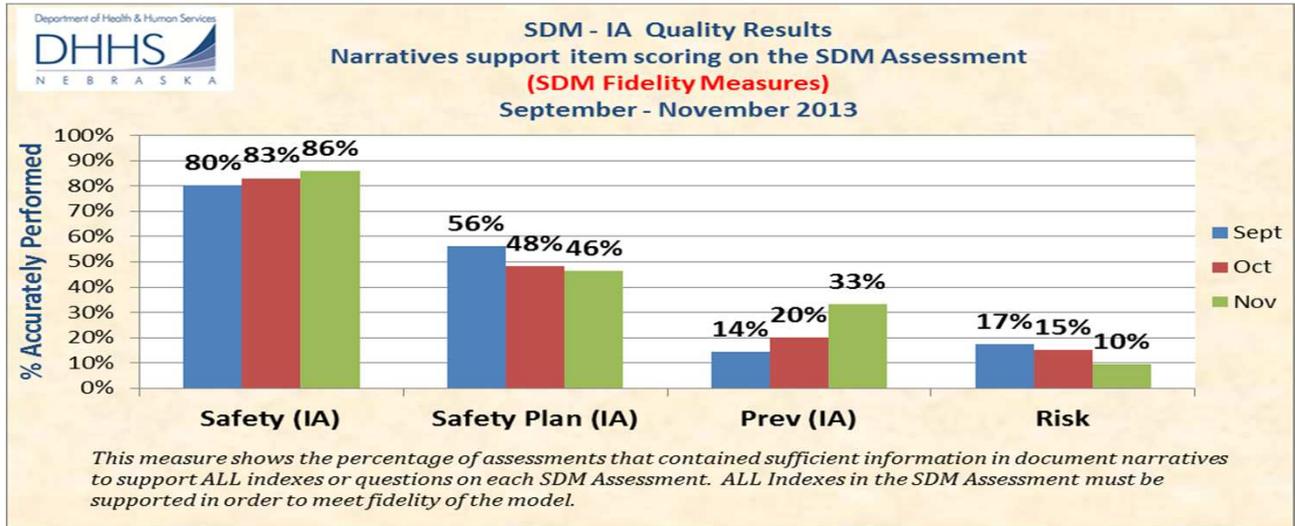
CQI Team Priority:

* 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



Note: August 2013 – QA changed the review process to match program memo and practice expectations of including all supporting information for each assessment in the narrative sections of all SDM Ongoing assessments. Prior to August, QA reviewers were looking for supporting information in all N-FOCUS documentation (FTM, Req. Contacts, Court Reports etc.).

SDM Ongoing Assessment Quality Results

Strengths/Opportunities:

-Nov 2013: Seeing an increase in the quality of Risk Reassessment documentation.

Barriers:

Action Items:

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 and IA Case Management Due Date Report includes SDM due dates.

-Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

- Narrative boxes added on N-FOCUS (Risk & Prevention Assessments).

*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 (March 2014-Risk Re and Reunification)

-Quality & Training Teams providing additional one on one and team trainings on SDM.

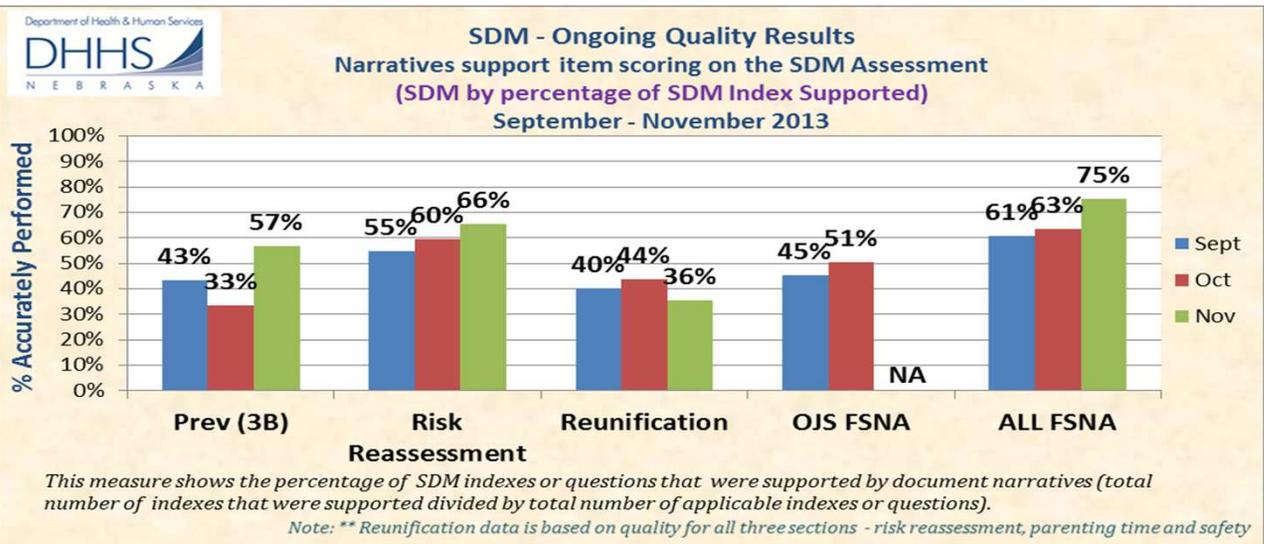
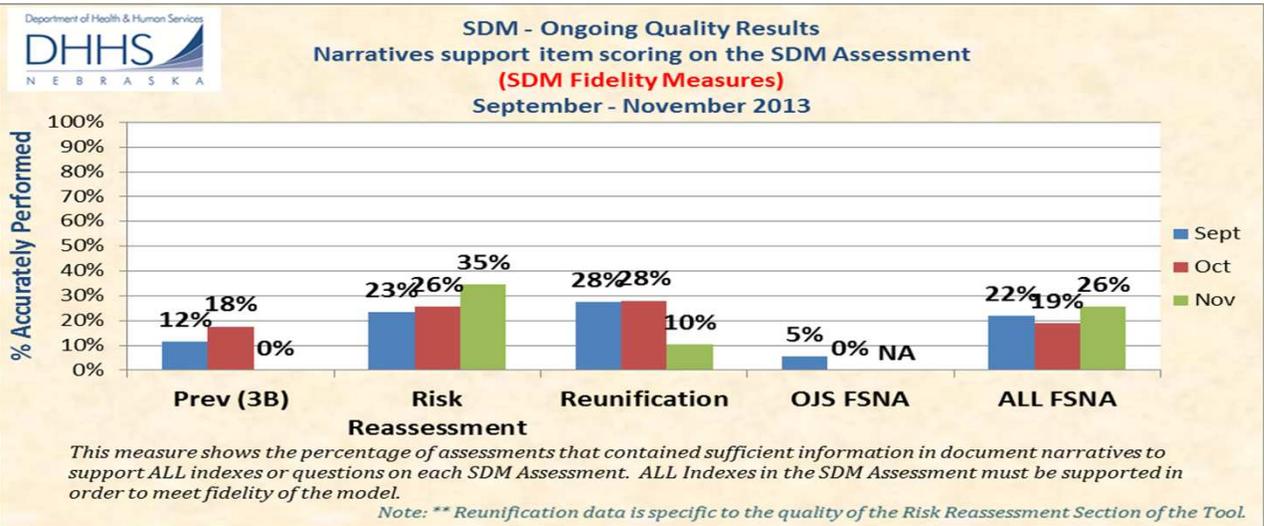
CQI Team Priority:

* 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



Note: August 2013 – QA changed the review process to match program memo and practice expectations of including all supporting information for each assessment in the narrative sections of all SDM Ongoing assessments. Prior to August, QA reviewers were looking for supporting information in all N-FOCUS documentation (FTM, Req. Contacts, Court Reports etc.).

CHAPTER 4: WORKFORCE STABILITY

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 Workers

Strengths/Opportunities:

-Nov 2013: 100% achievement by CSA and SESA.

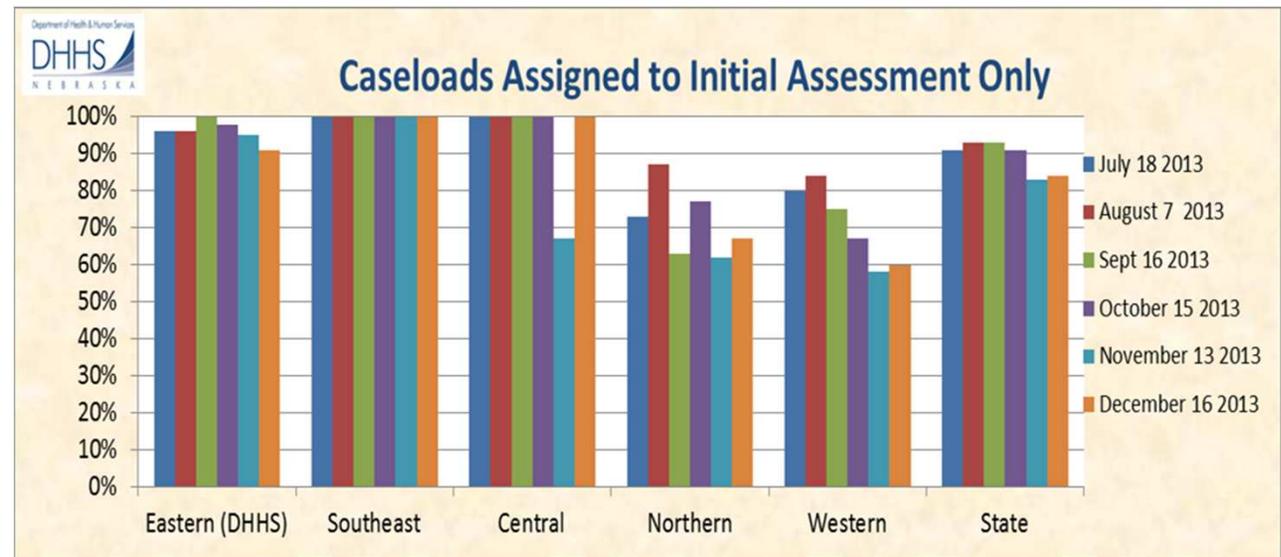
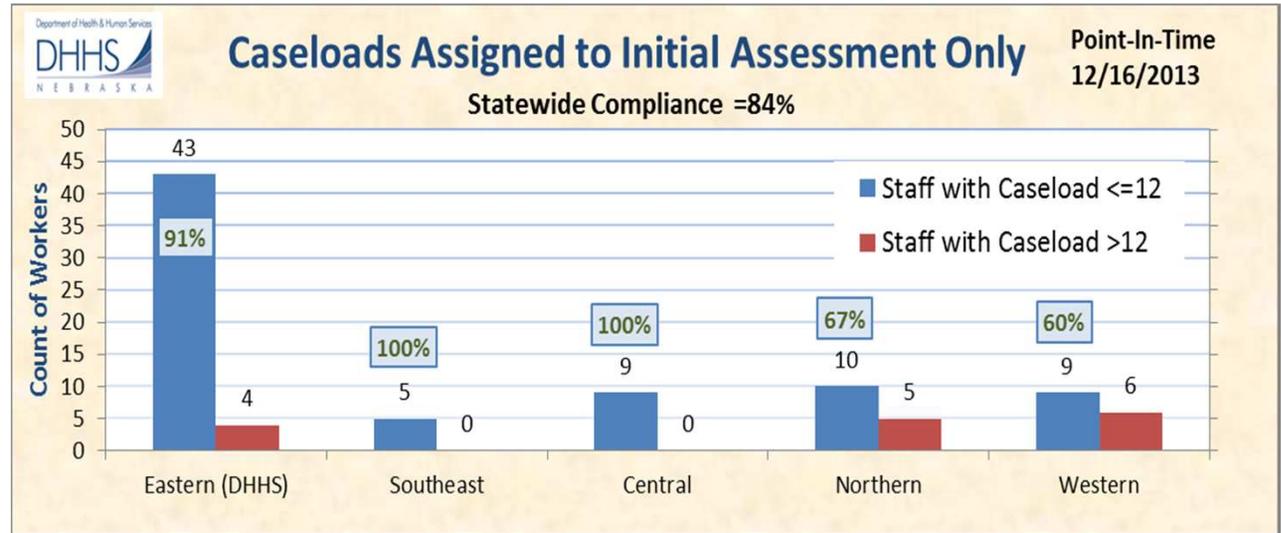
Barriers:

Action Items:

*Completed:

*Planned:

Data Review Frequency: Monthly



Notes:

- APSS assessments are not included in the IA caseload counts.
- Decrease in the total number of IA workers in some of the Service Areas is due to some IA workers carrying ongoing Non-Court Involved caseloads.

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

Caseload Sizes for IA & Ongoing

Strengths/Opportunities:

-Nov 2013: Increase in statewide compliance to 68%.

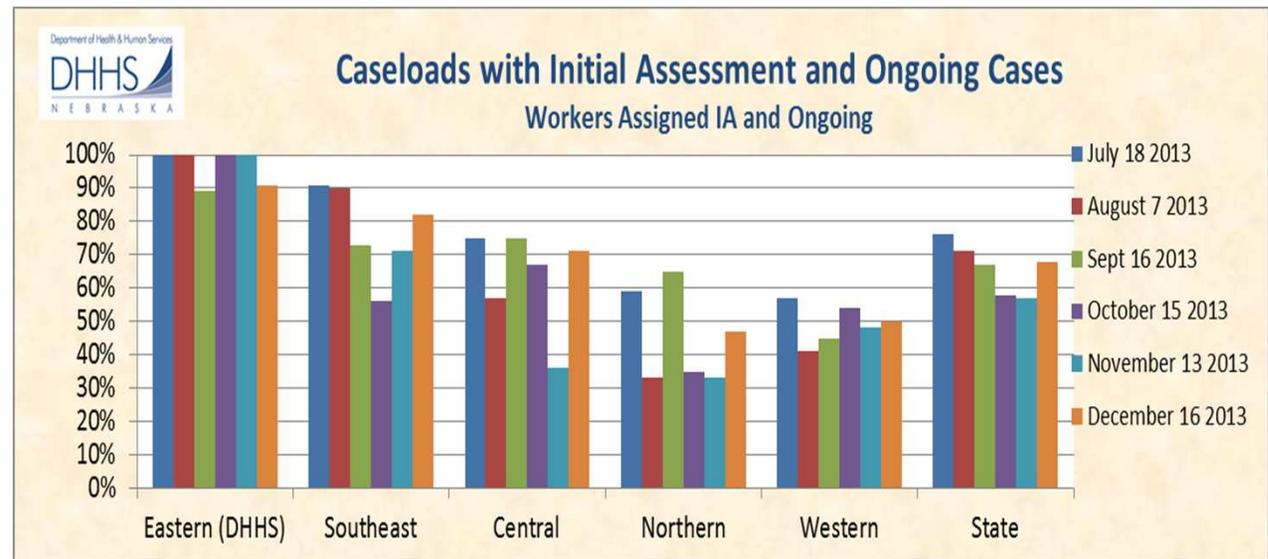
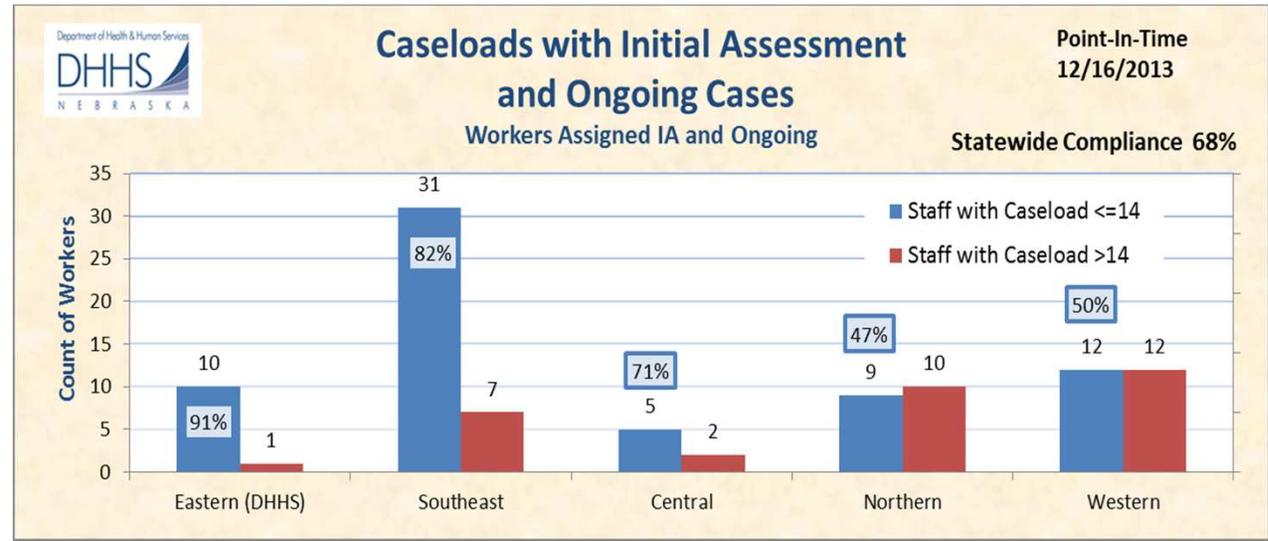
Barriers:

Action Items:

**Completed:*

**Planned:*

Data Review Frequency: Monthly



Note: APSS assessments are not included in the IA caseload counts.

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

Caseload Sizes

Strengths/Opportunities:

-Oct 2013: Increase in Statewide Compliance to 70%. CSA and ESA(NFC) have the lowest compliance – below 60%. WSA has the highest compliance at 96%.

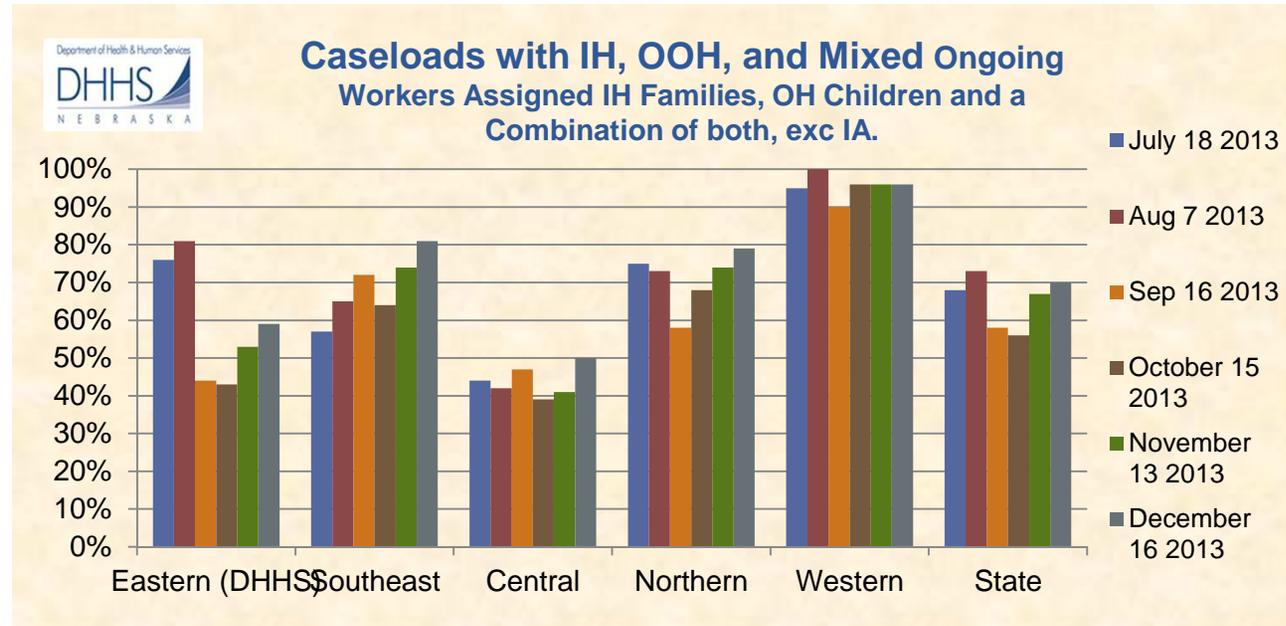
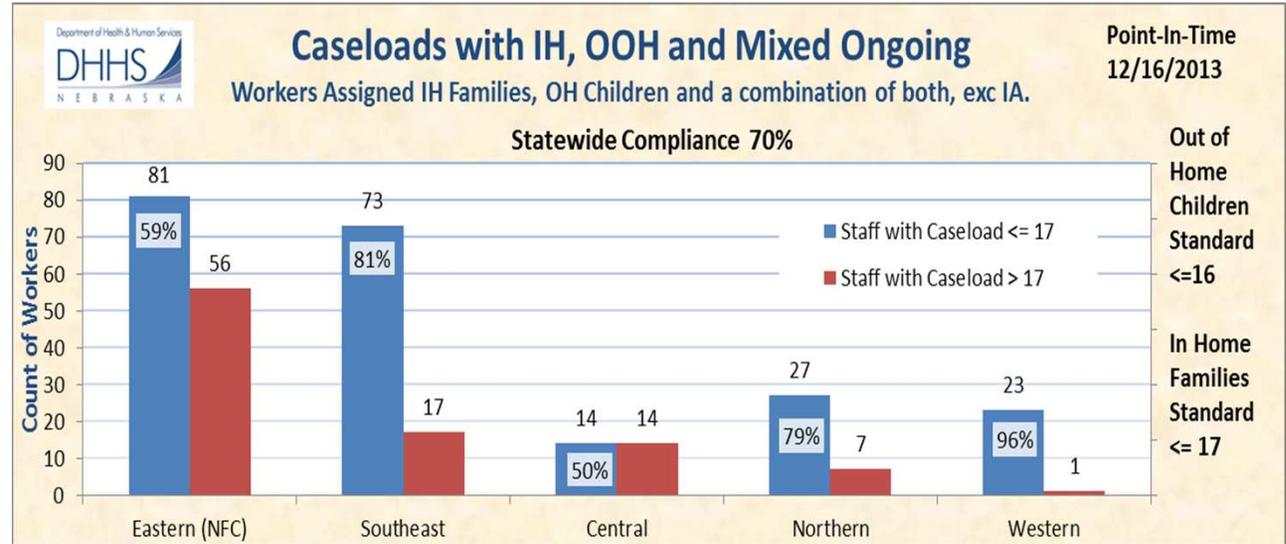
Barriers:

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:

- Oct 2013: Increase in Overall Compliance from 62% in October to 67% in November. Initial Assessment Only Caseloads have the highest compliance while Combined IA and Ongoing caseloads have the lowest compliance.

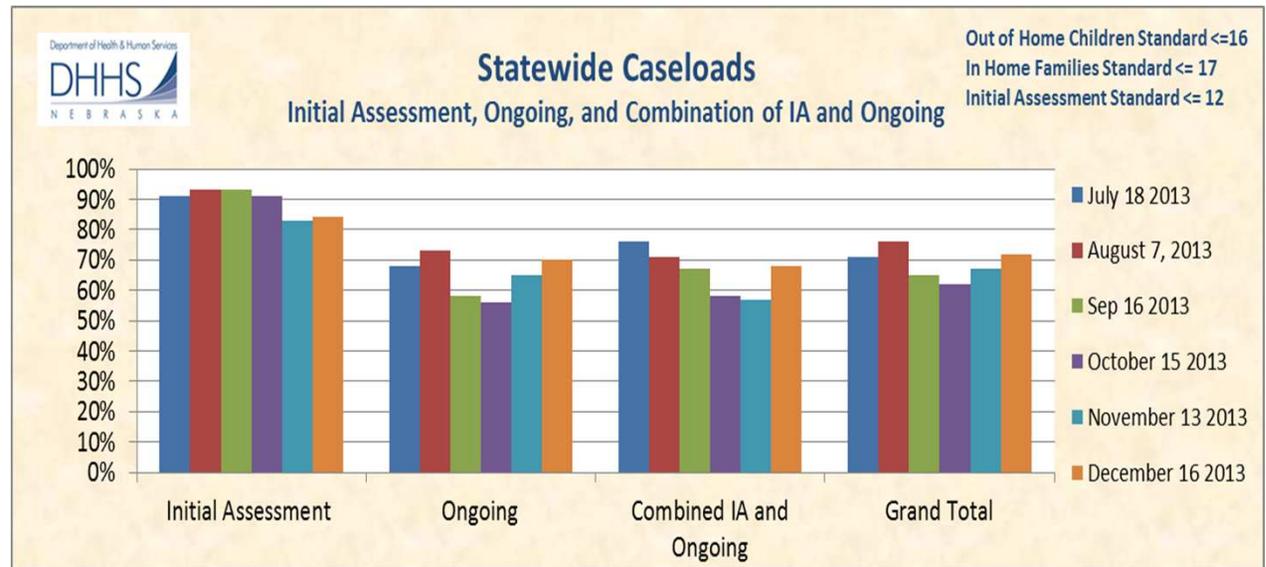
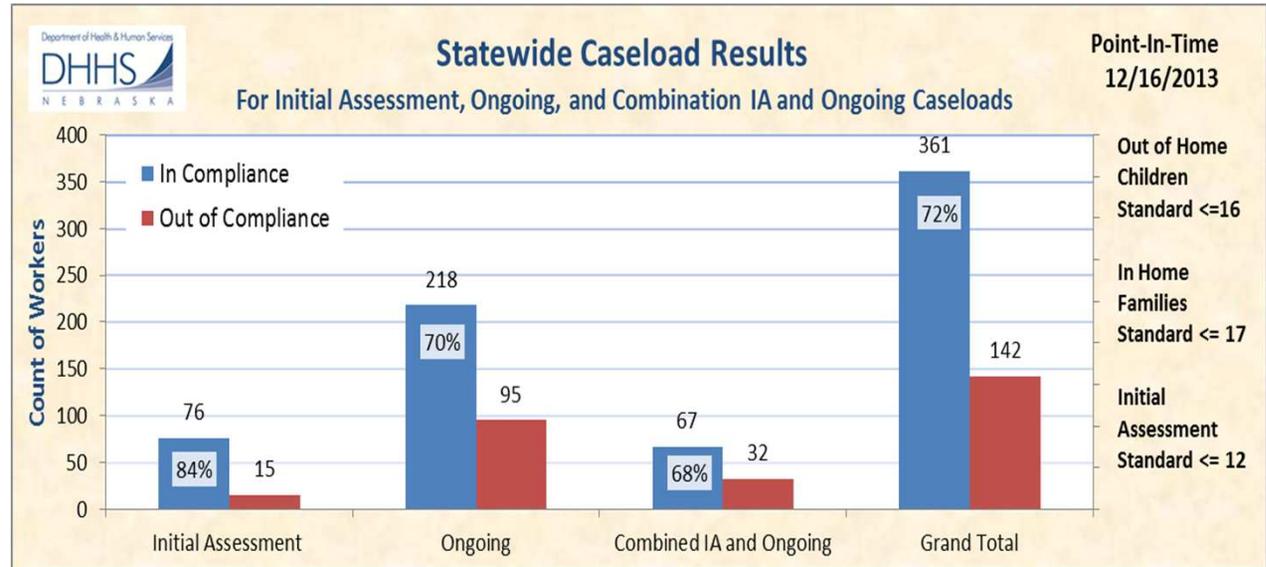
Barriers:

Action Items:

**Completed:*

**Planned:*

Data Review Frequency: Monthly



Note: APSS assessments are not included in the IA caseload counts.

CFS Staff Turnover

Strengths/Opportunities:

-Nov 2013: 6 CFS Specialist left the state government during this month.

Barriers:

Action Items:

**Completed:*

**Planned:*

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

Protection and Safety Turnover Percent*												
Title	Dec 2012	Jan 2013	Feb 2013	Mar 2013	Apr 2013	May 2013	June 2013	July 2013	Aug 2013	Sept 2013	Oct 2013	Nov 2013
CFS Spec Trainee	0.00%	4.26%	0.00%	0.00%	1.89%	1.89%	6.12%	7.32%	14.29%	5.13%	4.26%	4.88%
CFS Specialist	1.73%	1.17%	1.81%	2.04%	1.26%	1.99%	2.21%	2.21%	3.03%	1.01%	1.78%	1.54%
CFS Supervisors	0.00%	0.00%	0.00%	0.00%	1.32%	1.32%	2.74%	2.82%	2.90%	0.00%	0.00%	0.00%

Turnover Percent Nov 2013					
Title	CSA PS	ESA PS	NSA PS	SESA PS	WSA PS
CFS Spec Trainee	33.33%	0.00%	0.00%	5.26%	0.00%
CFS Specialist	2.25%	1.06%	1.53%	1.52%	1.79%
CFS Supervisors	0.00%	0.00%	0.00%	0.00%	0.00%

Turnover Counts Nov 2013					
Title	CSA PS	ESA PS	NSA PS	SESA PS	WSA PS
CFS Spec Trainee	1	0	0	1	0
CFS Specialist	1	1	1	2	1
CFS Supervisors	0	0	0	0	0

Aggregate Counts			
Title	Total Employee	Term Employee	Turnover
CFS Spec Trainee	41	2	4.88%
CFS Specialist	390.5	6	1.54%
CFS Supervisors	69.8	0	0.00%

**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.*

NFC Staff Turnover

Strengths/Opportunities:

Nov 2013: Decrease in turnover for both FPS and FPS Trainees this month.

Barriers:

Action Items:

**Completed:*

**Planned:*

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

NEBRASKA FAMILIES COLLABORATIVE TURNOVER PERCENT*												
Title	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13
FPS Trainee	0%	0%	0%	66.60%	0%	14.20%	0%	0	0%	0%	9.09%	0%
FPS	1.34%	4.92%	2.04%	4.22%	5.00%	2.15%	4.44%	5.22%	4.61%	11%	3.27%	2.32%
FP Supervisor	4.76%	4.50%	0%	0%	0%	0%	0%	4.76%	4.54%	5%	0%	0%

*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.

Aggregate Counts – November 2013			
Title	Total Employees	Term Employees	Turnover
FPS Trainee	21	0	0%
FPS	129	3	2%
FP Supervisor	20	0	0%

Data Review Frequency: Quarterly

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

YRTC Staff Turnover

Strengths/Opportunities:

Nov 2013: 1 YSS 1 and 2 YSSII left state employment this month.

Barriers:

Action Items:

**Completed:*

**Planned:*

YRTC Turnover Percent*												
Title	Dec 2012	Jan 2013	Feb 2013	Mar 2013	Apr 2013	May 2013	June 2013	July 2013	Aug 2013	Sept 2013	Oct 2013	Nov 2013
YOUTH SECURITY SPECIALIST I		0.00%	0.00%	0.00%	4.76%	0.00%	2.35%	4.75%	0.00%	0.00%	4.64%	4.87%
YOUTH SECURITY SPECIALIST II		2.79%	4.28%	5.69%	0.00%	4.38%	2.84%	6.01%	6.37%	7.78%	0.00%	3.10%

Turnover Percent Nov 2013		
Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0.00%	9.09%
YOUTH SECURITY SPECIALIST II	0.00%	5.48%

Turnover Counts Nov 2013		
Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0	1
YOUTH SECURITY SPECIALIST II	0	2

Aggregate Counts			
Title	Total Employe	Term Employe	Turnover
YOUTH SECURITY SPECIALIST I	20.55	1	4.87%
YOUTH SECURITY SPECIALIST II	64.55	2	3.10%

**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:

-Vacancy for CFSS+CFSS decreased to 4.8%. WSA has no vacancies this month.

Barriers:

Action Items:

**Completed:*

**Planned:*

CFSS + CFSS/T														
Location	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13
Central Service Area	3.4%	6.9%	6.9%	12.1%	8.6%	12.1%	8.9%	5.3%	6.9%	5.2%	8.8%	10.9%	7.3%	9.4%
Eastern Service Area	6.6%	6.6%	4.7%	5.7%	4.6%	5.6%	6.5%	3.7%	3.7%	3.7%	6.5%	8.3%	8.3%	7.5%
Northern Service Area	9.8%	12.0%	12.0%	6.0%	11.0%	10.8%	13.3%	9.6%	12.0%	16.9%	20.5%	18.1%	8.9%	5.1%
Southeast Service Area	7.5%	7.5%	10.6%	12.4%	8.1%	5.3%	5.9%	6.2%	1.8%	1.9%	6.2%	6.2%	3.1%	2.6%
Western Service Area	7.0%	5.6%	11.3%	11.3%	7.0%	2.8%	1.4%	4.3%	7.0%	9.9%	12.7%	7.0%	8.5%	0.0%
Total	7.1%	7.7%	9.2%	9.6%	7.7%	6.7%	7.0%	5.8%	5.4%	6.4%	10.0%	9.4%	6.6%	4.6%
YSS I														
Location	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Aug-13	Oct-13	Nov-13	Dec-13
YRTC Geneva	10.0%	10.0%	20.0%	30.0%	22.2%	20.0%	20.0%	20.0%	10.0%	0.0%	0.0%	0.0%	0.0%	0.0%
YRTC Kearney	14.3%	0.0%	14.3%	0.0%	0.0%	0.0%	0.0%	0.0%	7.1%	14.3%	6.7%	6.7%	13.3%	14.3%
Total	12.5%	4.2%	16.7%	12.5%	8.7%	8.3%	8.3%	8.3%	8.3%	8.3%	4.0%	4.0%	8.0%	8.3%
YSS II														
Location	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Aug-13	Oct-13	Nov-13	Dec-13
YRTC Geneva	6.7%	0.0%	0.0%	0.0%	12.9%	6.7%	16.7%	13.3%	6.7%	10.0%	6.7%	6.7%	6.7%	3.3%
YRTC Kearney	22.0%	22.0%	14.0%	14.0%	12.0%	15.7%	8.0%	15.7%	17.6%	21.6%	28.0%	30.6%	26.5%	26.0%
Total	16.3%	13.8%	8.8%	8.8%	12.3%	12.3%	11.3%	14.8%	13.6%	17.3%	20.0%	21.5%	19.0%	17.5%

*Date is effective as of first day of posted month

Data Review Frequency: Quarterly

NFC Staff Vacancy Rate

Strengths/Opportunities:

-NFC Vacancies decreased to 11% this month -- from 15% last month.

Barriers:

Action Items:

**Completed:*

**Planned:*

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

NFC VACANCY RATES

	Jul 13			Aug 13			Sep 13**			Oct 13**			Nov 13**		
Location	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate
NFC**	15	169	8.87%	18	169	10.65%	20	168	11.90%	26***	168	15.47%	19***	168	11.30%

**includes Family Permanency Supervisors and Family Permanency Specialists (based on 148 fully trained Family Permanency Specialists and 20 Family Permanency Supervisors)

***This does not include the Family Permanency Specialist Trainees

ADULT PROTECTIVE SERVICES (APS)

APS Contact Timeframes

Strengths/Opportunities:

-Nov 2013: Decrease from 100% to 75% in P1 contacts. Increase in performance for both P2 and P3.

Barriers:

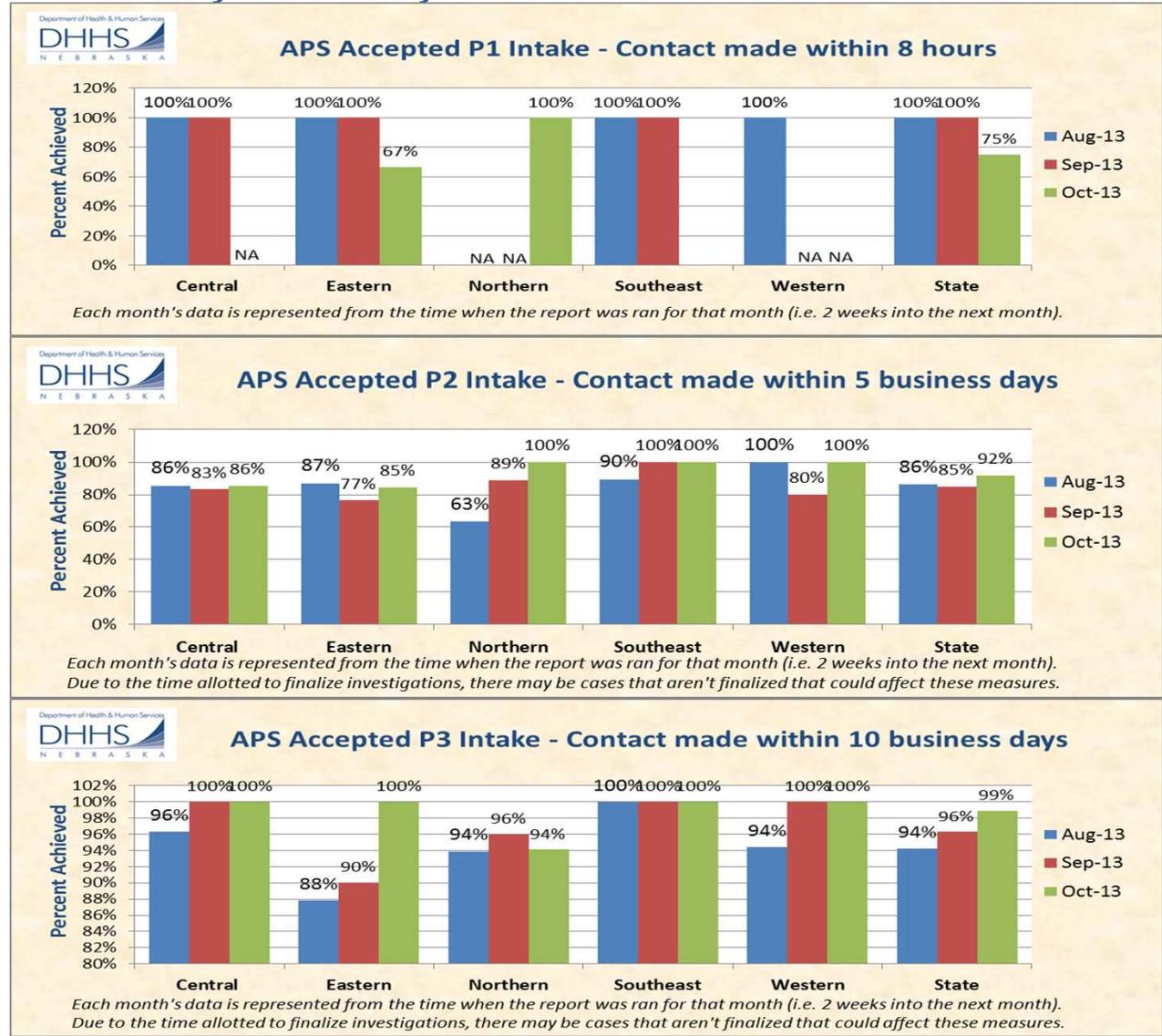
Action Items:

*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:

Nov 2013: Significant decrease in timeframes met for P1 investigations. Note: The New Timeframes for APS Investigations were incorporated into this report this month.

APS Investigation Timeframes changed per Policy direction in mid September 2013. The new timeframes are: P1=45 Days; P2=60 Days; and P3=60 Days.

Barriers:

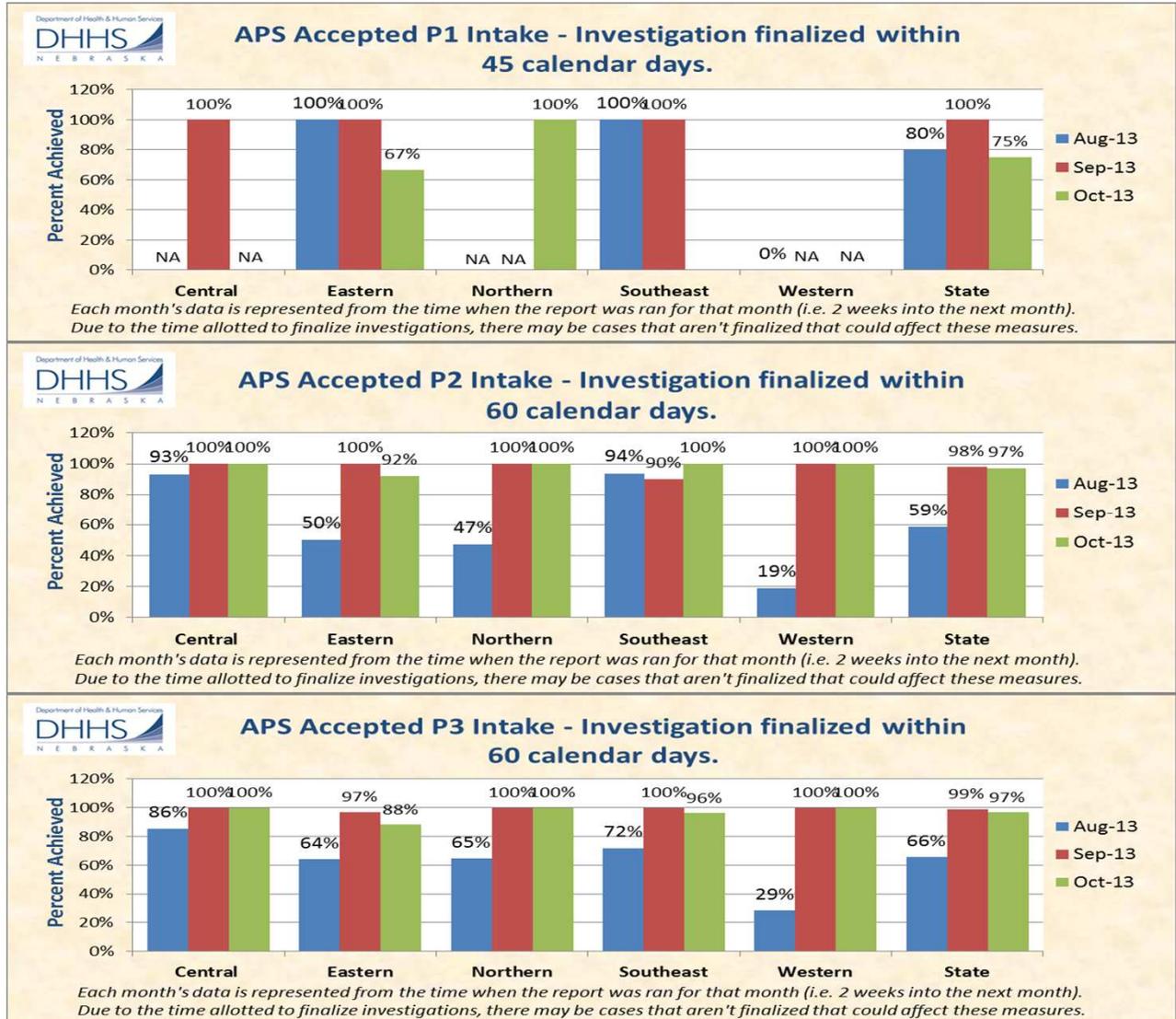
Action Items:

*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. The month noted on each chart reflects the intake receipt month, however, the data excludes investigations that are not due at the data is pulled for this report.

APS Quality Measures

Strengths/Opportunities:

- Nov 2013: Increase in all 4 quality measures this month.

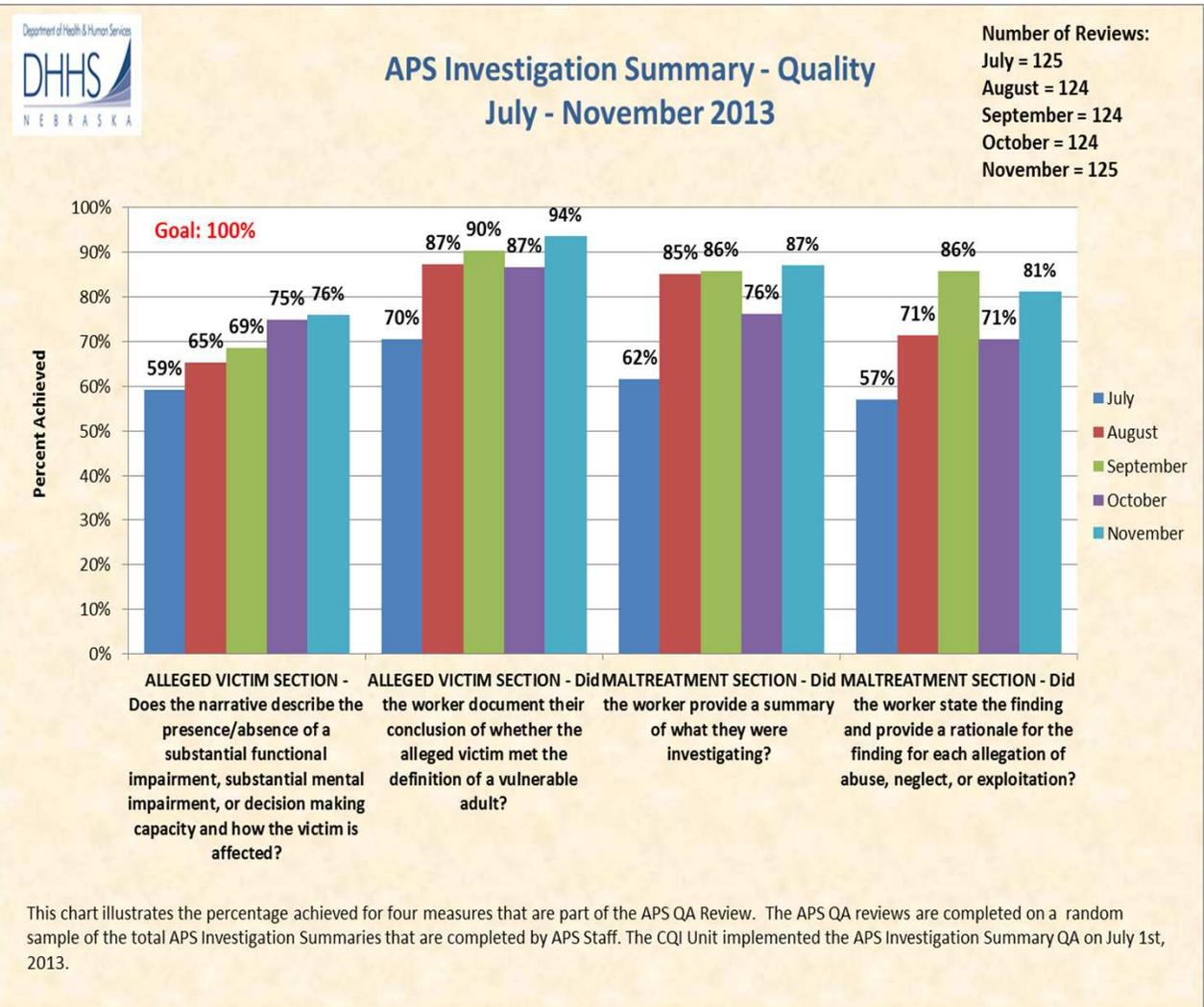
Barriers:

Action Items:

**Completed:*

**Planned:*

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



Data Review Frequency: Monthly