

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.

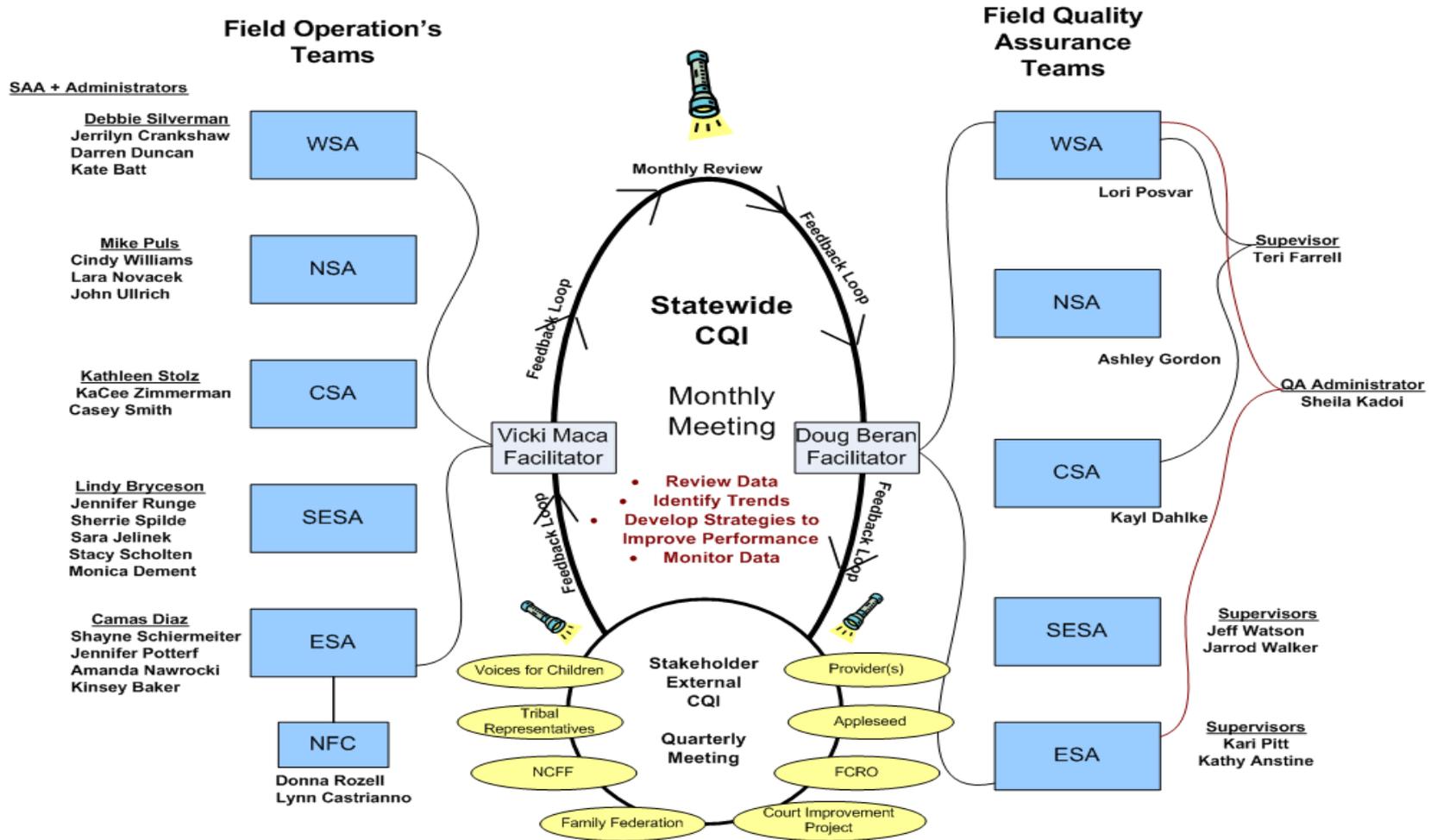
Schedule of Discussion Subjects 2014

- January 23 – ½ day CQI then Stakeholder CQI
 - Process Measures
 - Federal Results (COMPASS)
 - Intake / SDM Fidelity
 - Dictation Update
 - Barriers to Permanency
 - Quality Case-management discussion
- February 27
 - Process Measures
 - Intake / SDM Fidelity
 - Caseload/Turnover/Vacancy
 - Operations Data
 - Non-Court Data Discussion
 - Quality Case-management discussion
- March 27
 - Process Measures
 - Intake / SDM Fidelity
 - Quality Case-management discussion
 - ESA Local CQI Update
 - SESA SDM Process Improvements
- April 24 - ½ day CQI then Stakeholder CQI
 - Process Measures
 - Intake / SDM Fidelity
 - Federal Results (COMPASS)
 - Quality Case-management discussion
- May 29
 - Process Measures
 - Intake / SDM Fidelity
 - Turnover/Vacancy
 - Caseload/Turnover/Vacancy
 - Quality Case-management discussion
 - NSA Local CQI Update
- June 26
 - Process Measures
 - Intake / SDM Fidelity
 - Local CQI Update
 - Ward Count Review
 - SESA Local CQI Update
 - Quality Case-management discussion
- July 24 - ½ day CQI then Stakeholder CQI
 - Process Measures
 - Federal Results (COMPASS)
 - Intake / SDM Fidelity
 - Operations Data
 - Quality Case-management discussion
- August 28
 - Process Measures
 - Intake / SDM Fidelity
 - Caseload/Turnover/Vacancy
 - WSA Local CQI Update
 - Quality Case-management discussion
- September 25
 - Process Measures
 - NSA CQI Discussion
 - Intake / SDM Fidelity
 - LB-1160 Survey results
 - Quality Case-management discussion
- October 23 - ½ day CQI then Stakeholder CQI
 - Process Measures
 - Operations Data
 - Intake / SDM Fidelity
 - Federal Results (COMPASS)
 - Quality Case-management discussion
 - CSA Local CQI Update
- November 20
 - Process Measures
 - Intake / SDM Fidelity
 - CSA CQI Discussion
 - SDM Fidelity
 - Quality Case-management discussion
- December
 - No Meeting this month

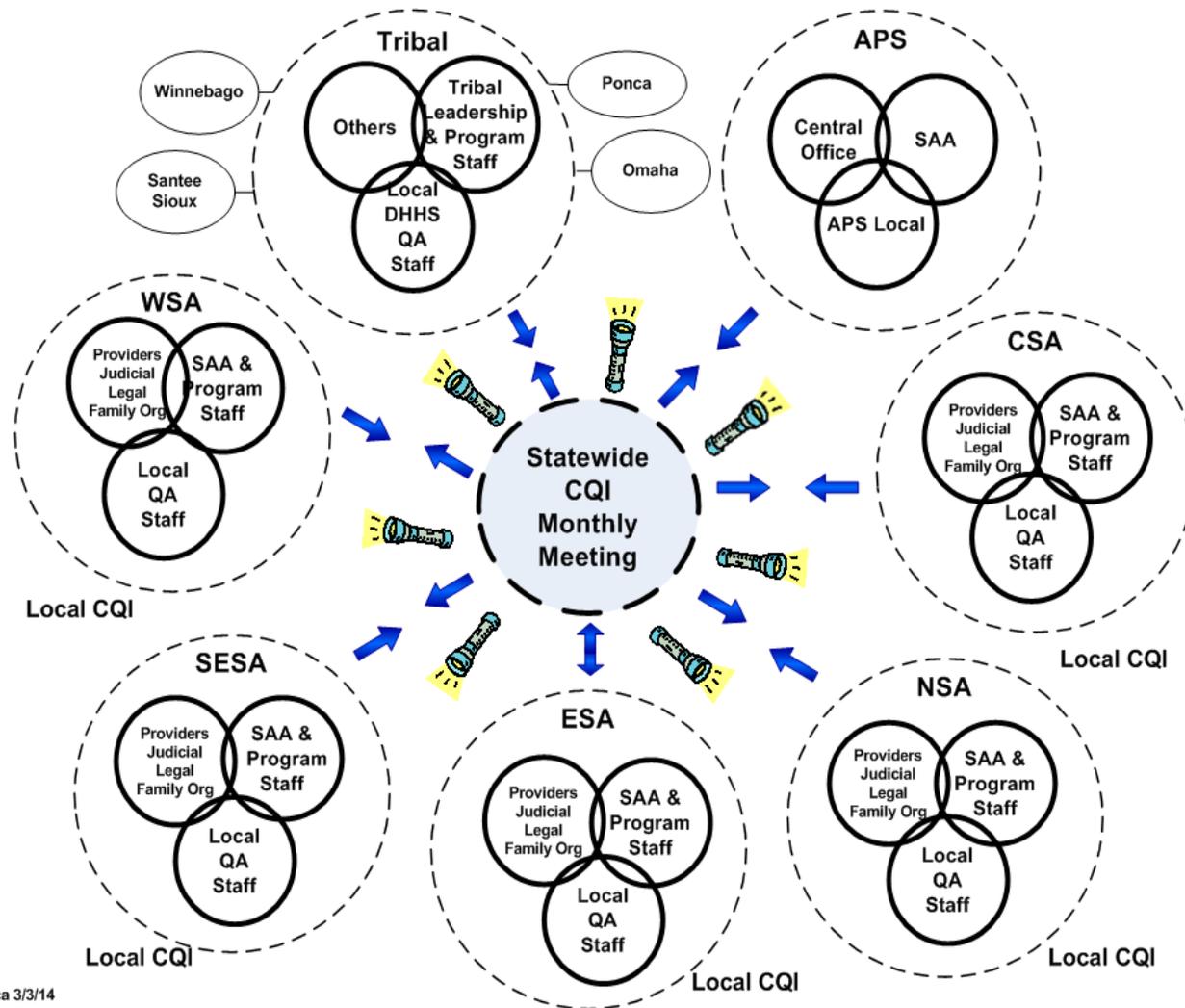
Federal IM 12-07

- **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.

Statewide CQI Process



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

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

Safely Decrease the Number of State Wards

Strengths/Opportunities:

Stateward Reductions March 2012 - Jan 2014	
WSA	207
CSA	87
NSA	26
SESA	383
ESA(NFC)	565
STATE	1,268

Barriers:

Action Items:

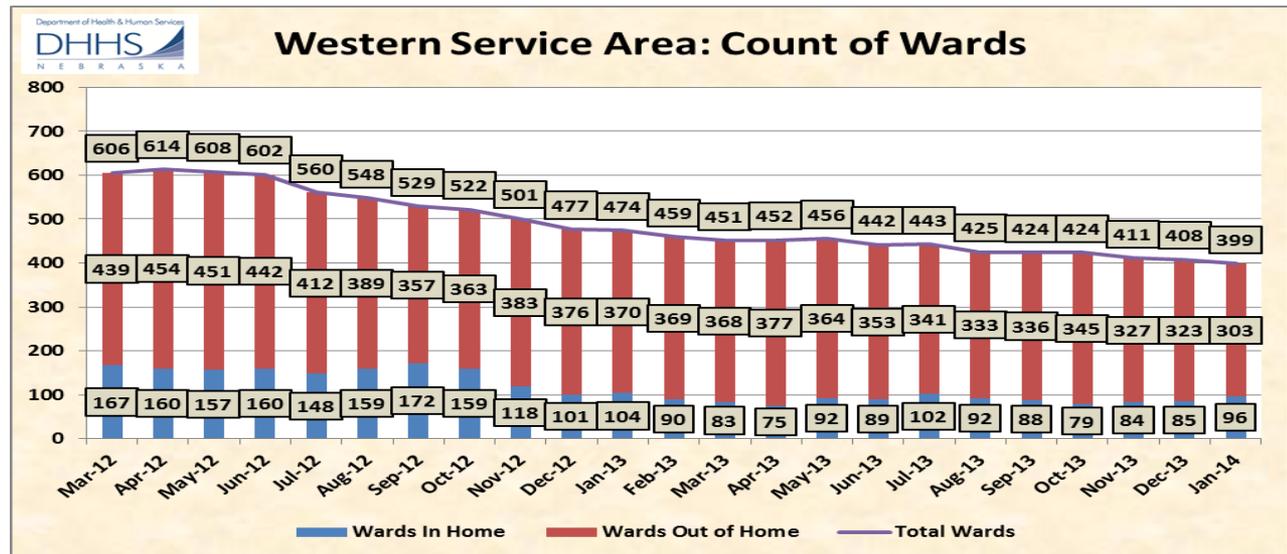
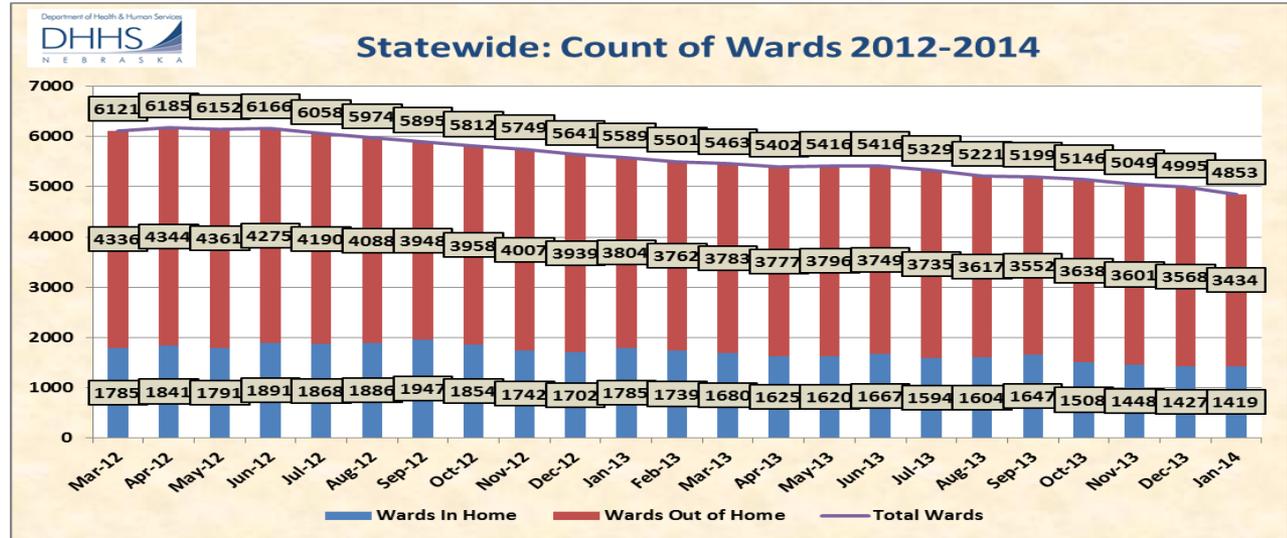
**Completed:*

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

**Planned:*

CQI Team Priority:

* Statewide



*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.

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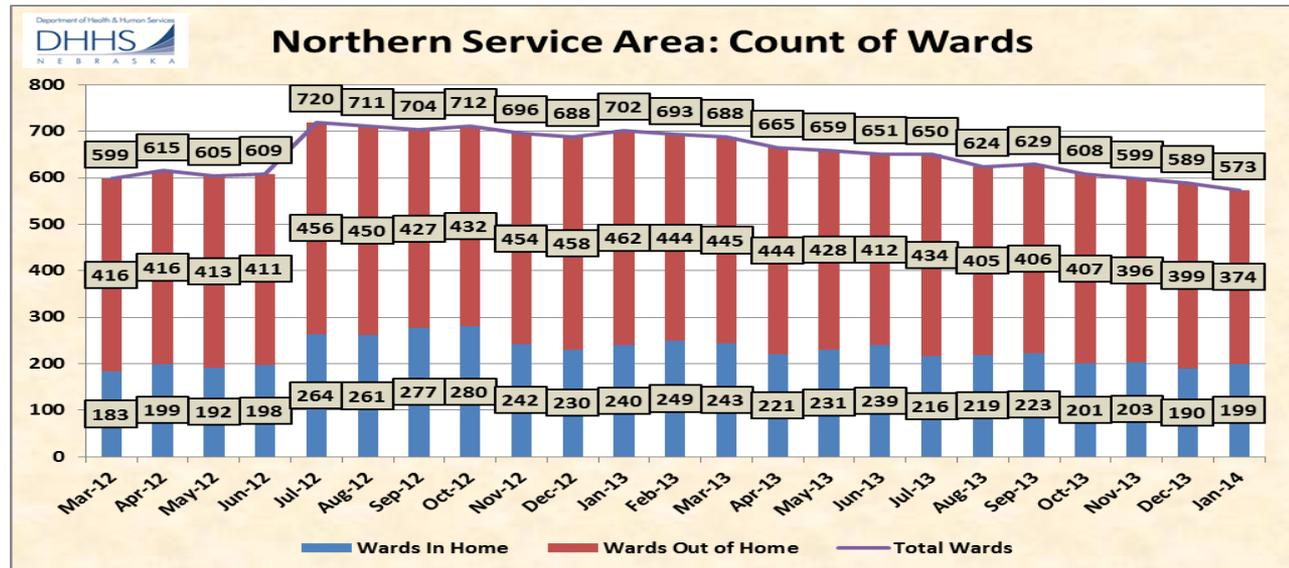
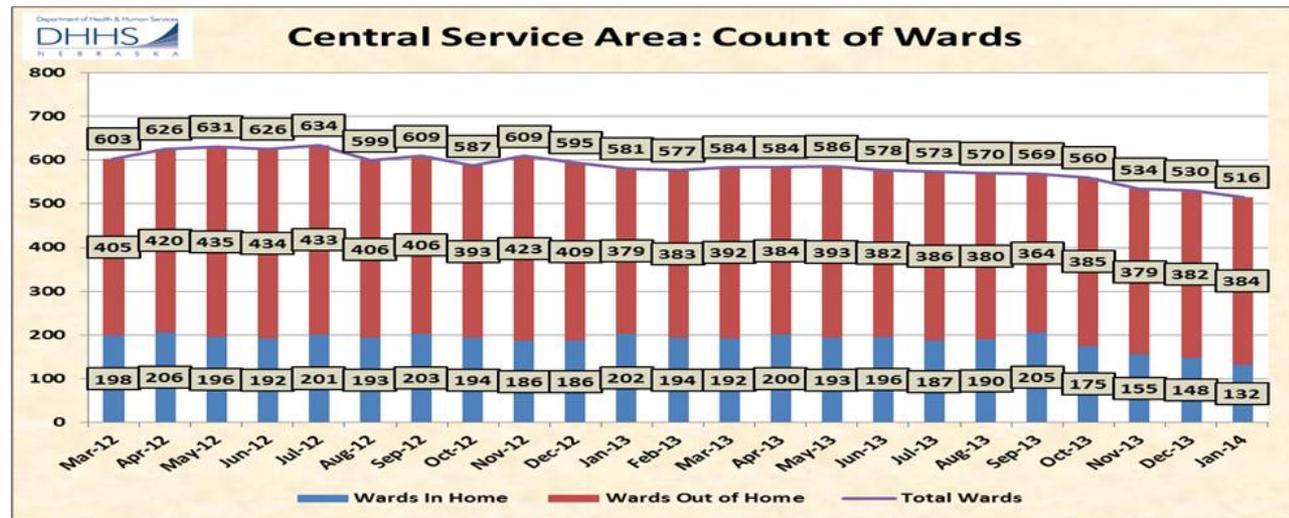
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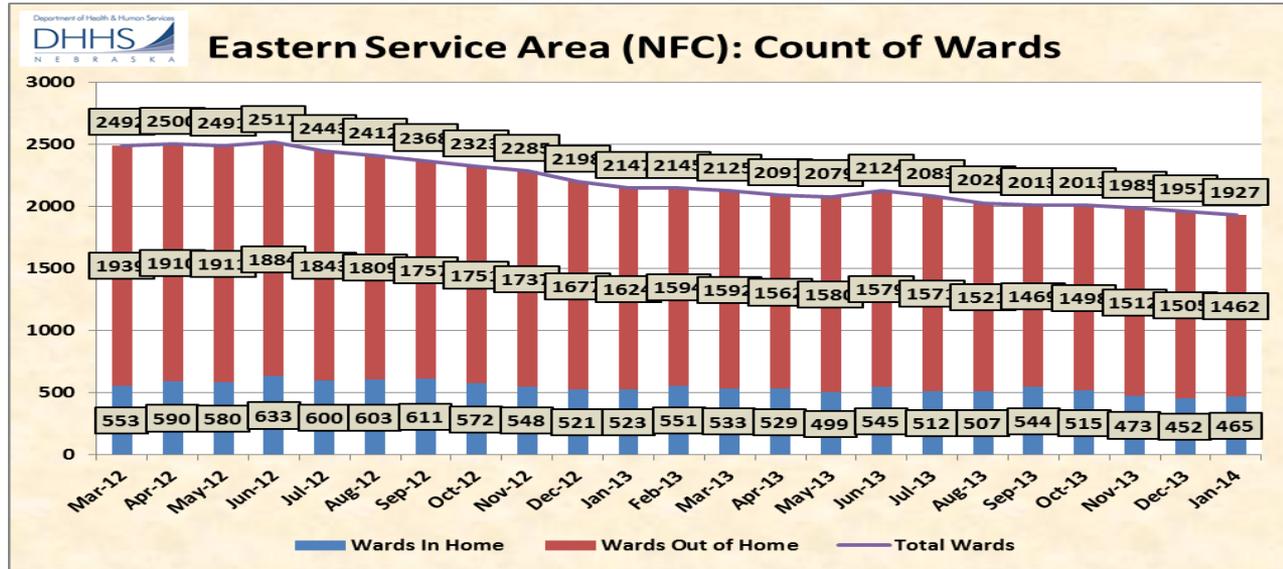
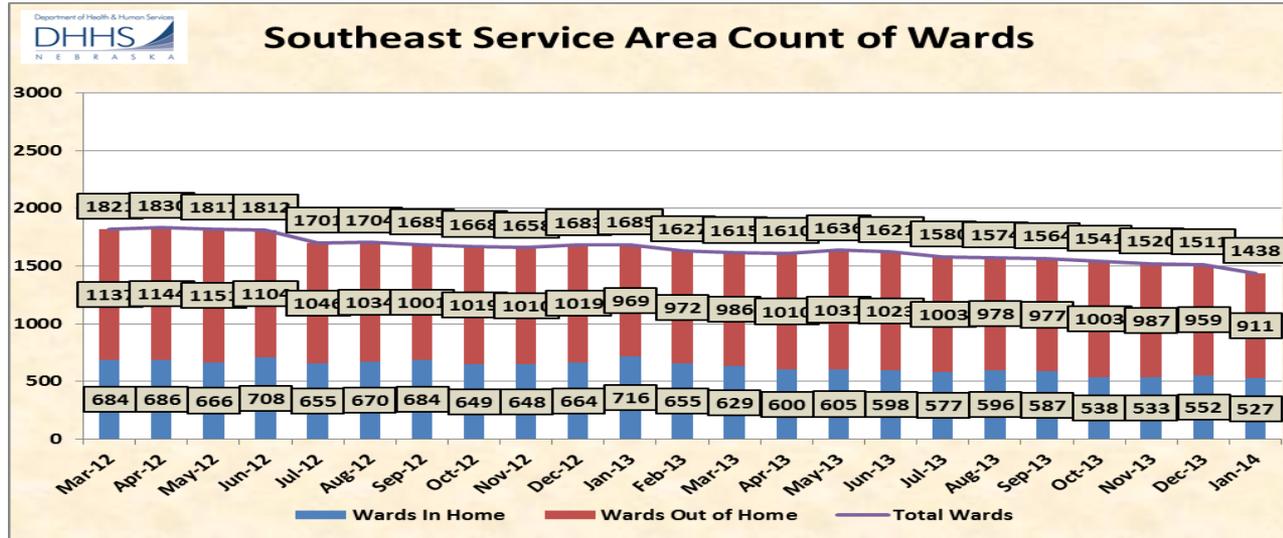
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*Planned:

CQI Team Priority:

* Statewide

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



Data Review Frequency: Quarterly

*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.

Safely Decrease the Number of State Wards

Strengths/Opportunities:

NSA continues to have fewer wards per 1,000 than what is expected compared to the national average of 5.2/1,000.

Barriers:

Action Items:

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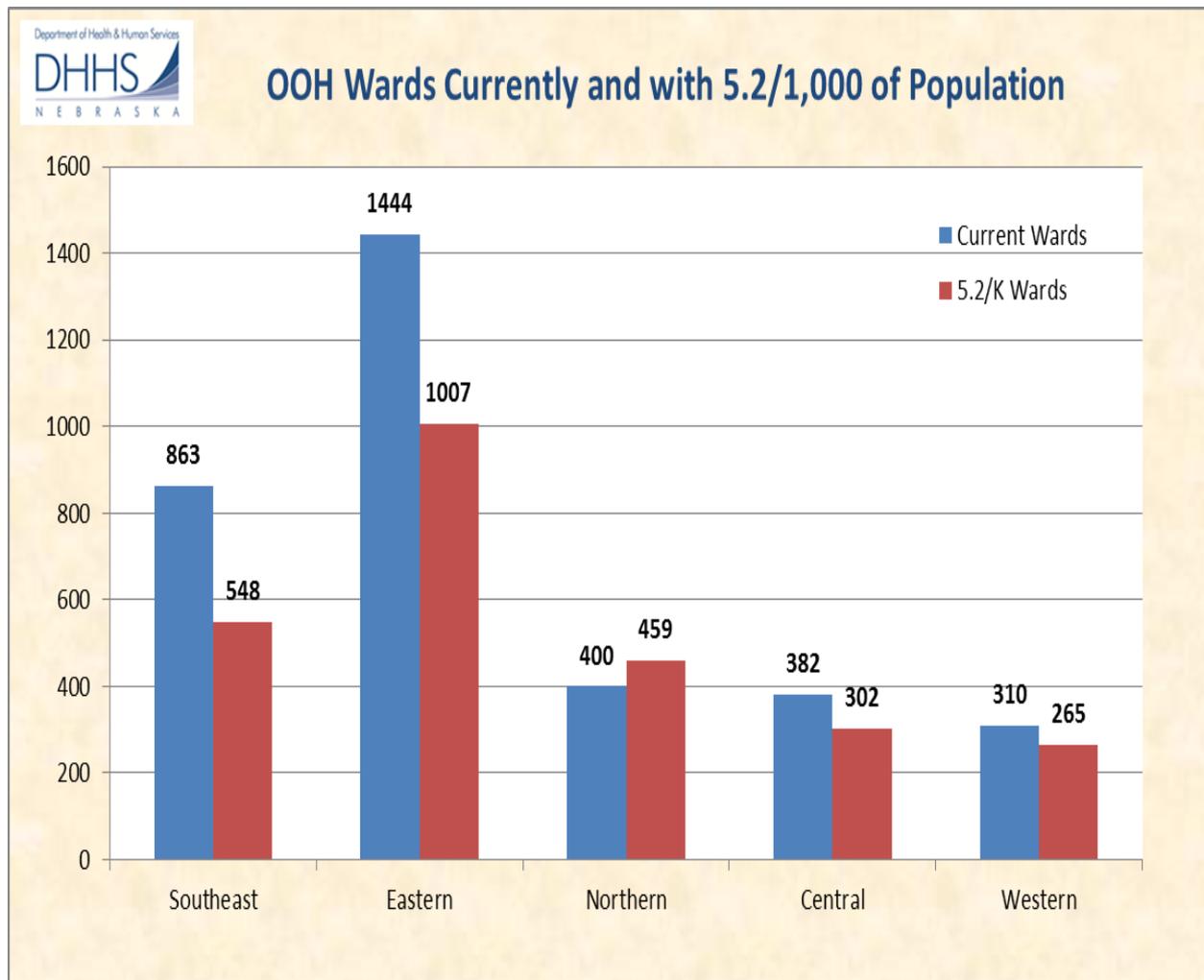
**Planned:*

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 2/24/14. Out of Home Court wards using 2012 Claritas youth population < 19 yrs. of age.

Note: Count by County Report is now available.

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

Safely Decrease the Number of State Wards

Strengths/Opportunities:

There has been a decrease in the # of wards per/1,000 in each Service Area since 2012. On Feb 2014, the state number was 6.9/1,000.

Barriers:

Action Items:

****Completed:***

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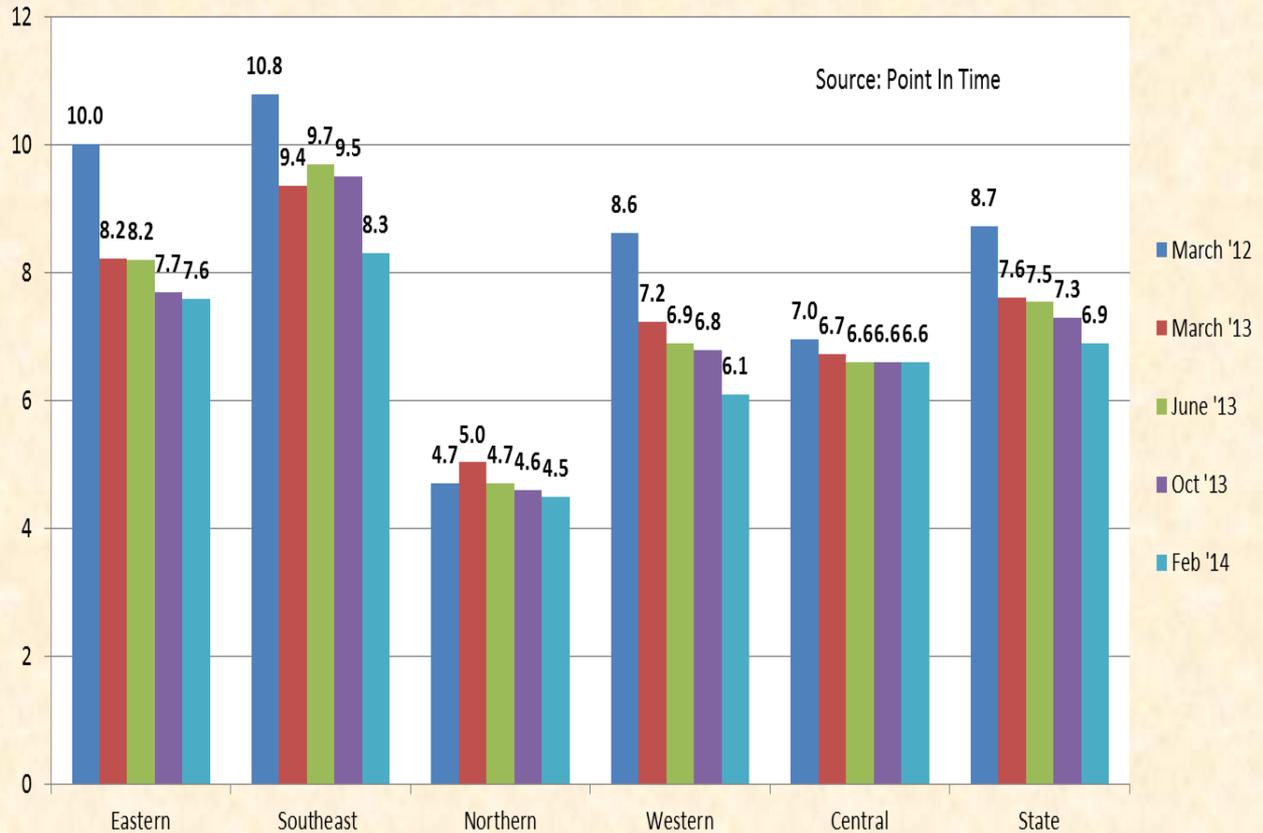
CQI Team Priority:

* Statewide

Data Review Frequency: Monthly



**OOH Wards per 1000 population by Service Area.
March 2012 - Feb 2014**



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.

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

Safely Decrease the Number of State Wards

Strengths/Opportunities:

Lower number of entries than exits.

LB-561 Became effective Oct 1, 2013. This results in youth being cared for by probation rather than CFS

Barriers:

Action Items:

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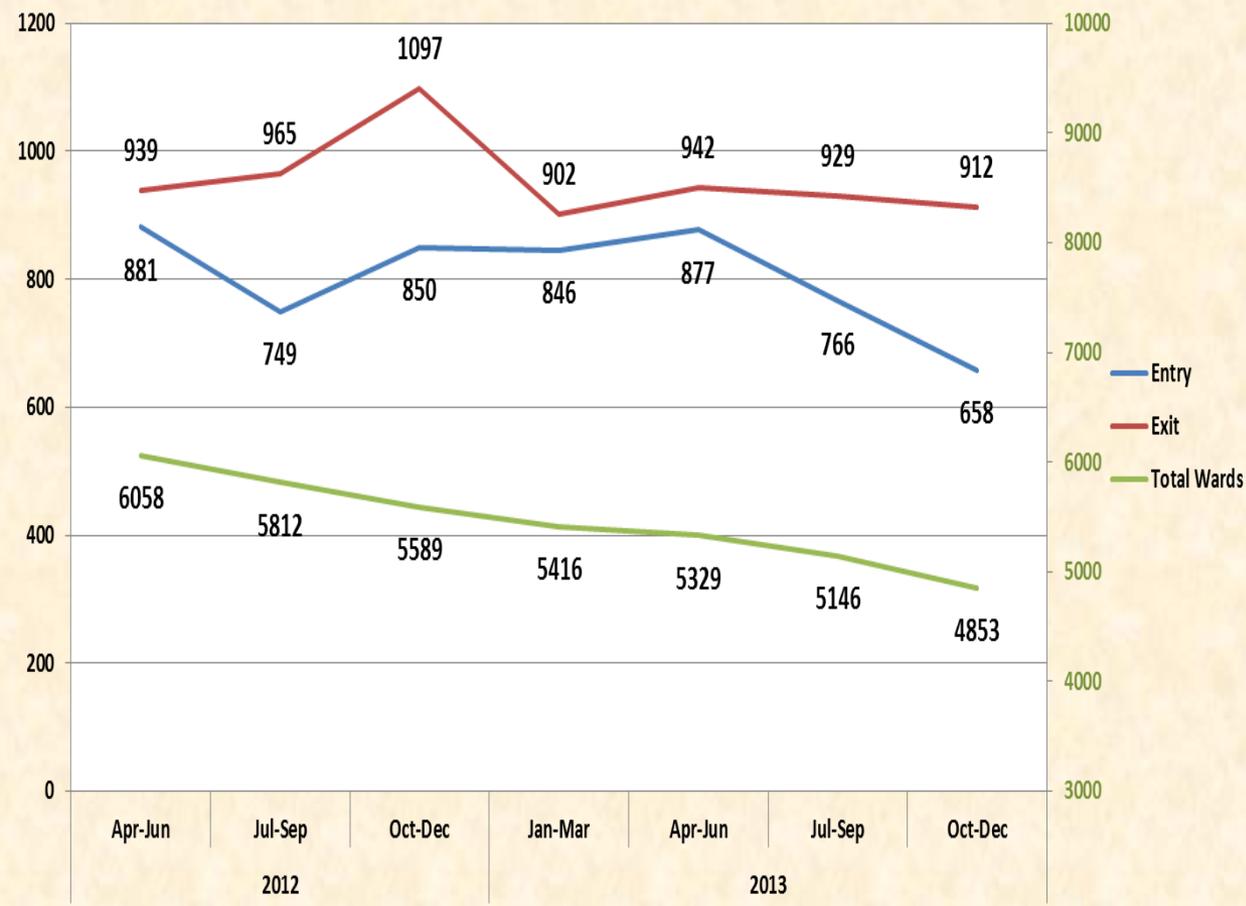
**Planned:*

CQI Team Priority:

* Statewide



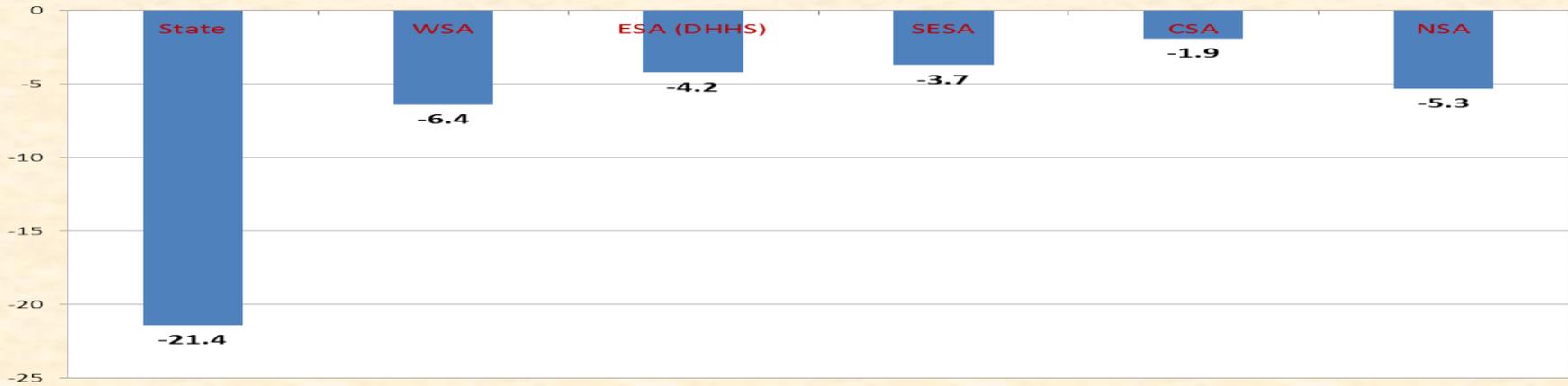
Point in Time State Ward Count with State Ward Entries and Exits



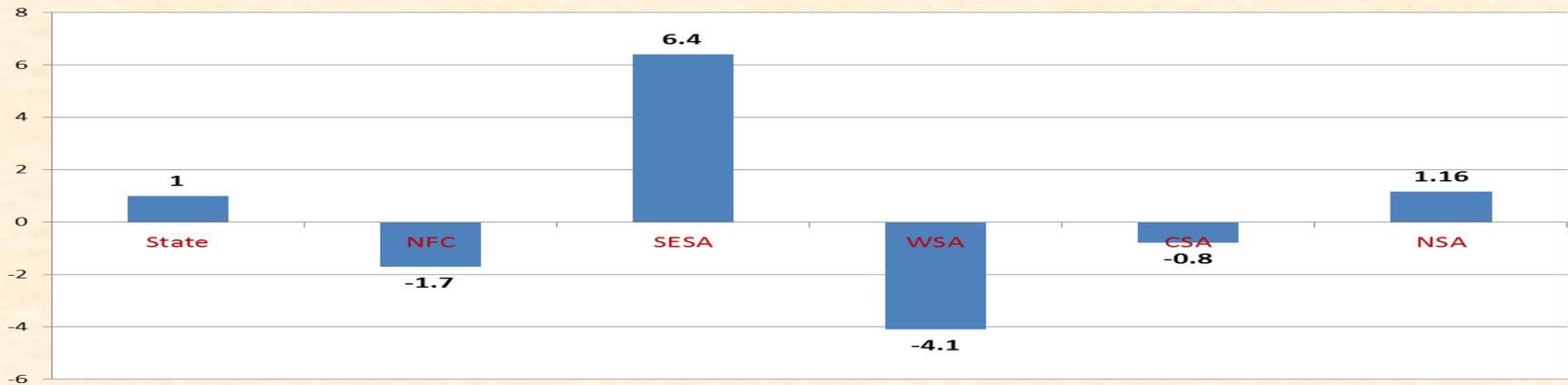
Safely Decrease the Number of State Wards

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

**Regression Slope of Entries
Jan. 2011 - Dec. 2013**



**Regression Slope of Exits
Jan. 2011 - Dec. 2013**



Exit Period is Measured Quarterly from Jan 2011 – Dec 2013

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

Safely Decrease the Number of State Wards

Strengths/Opportunities:

-Entry numbers continue to be lower than exit numbers.

Barriers:

Action Items:

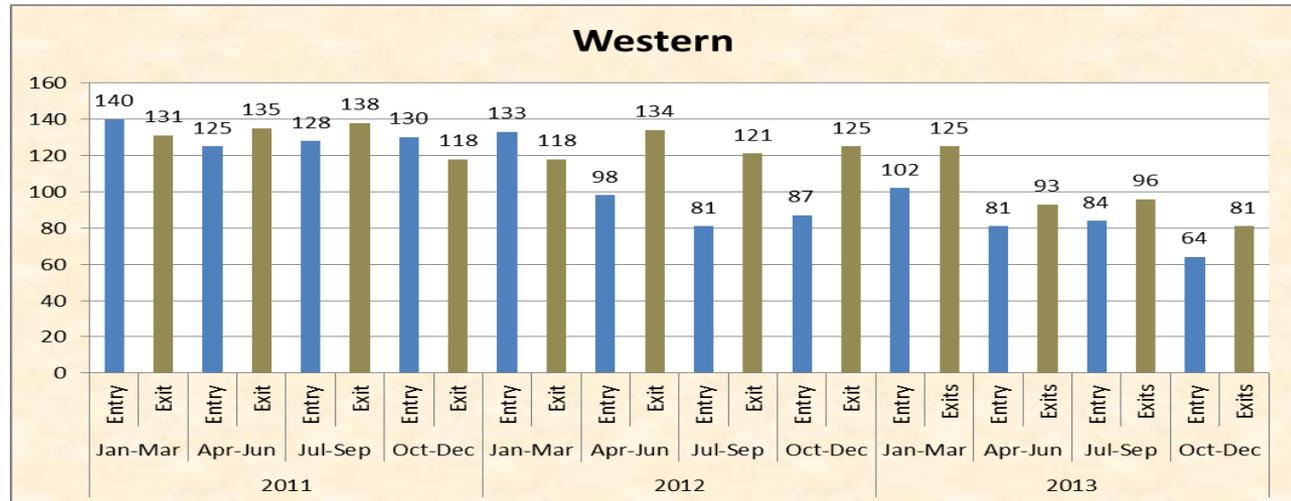
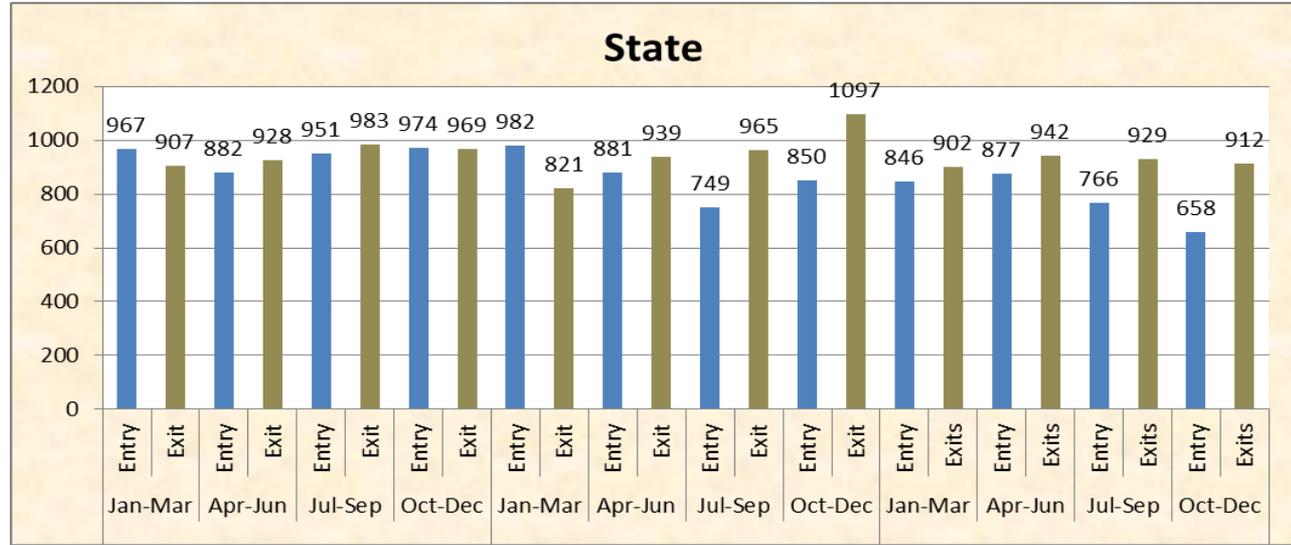
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CQI Team Priority:

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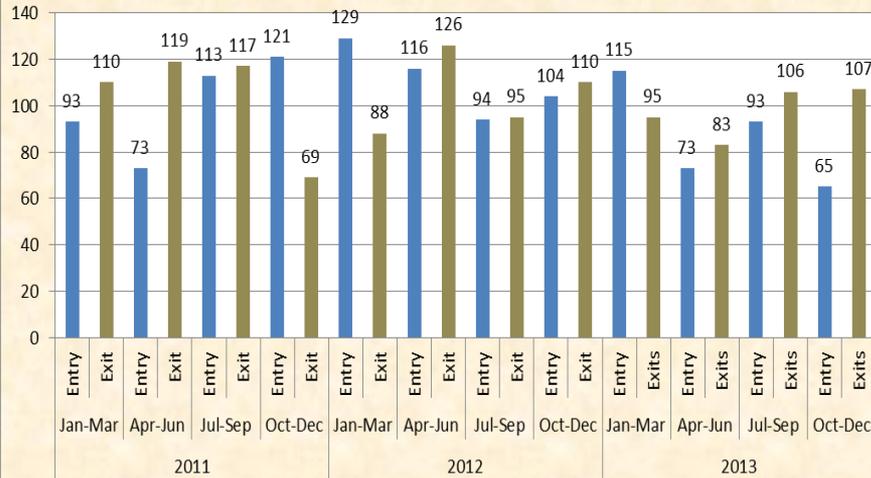
N-Focus Legal Status field. An entry occurs when a child is made a state ward. An exit occurs when the Legal Status changes to non-ward - not when it is entered into NFocus. Entries include youth that go from non-court to court. Counts based on date of action, not entry date into NFocus

Data Review Frequency: Quarterly

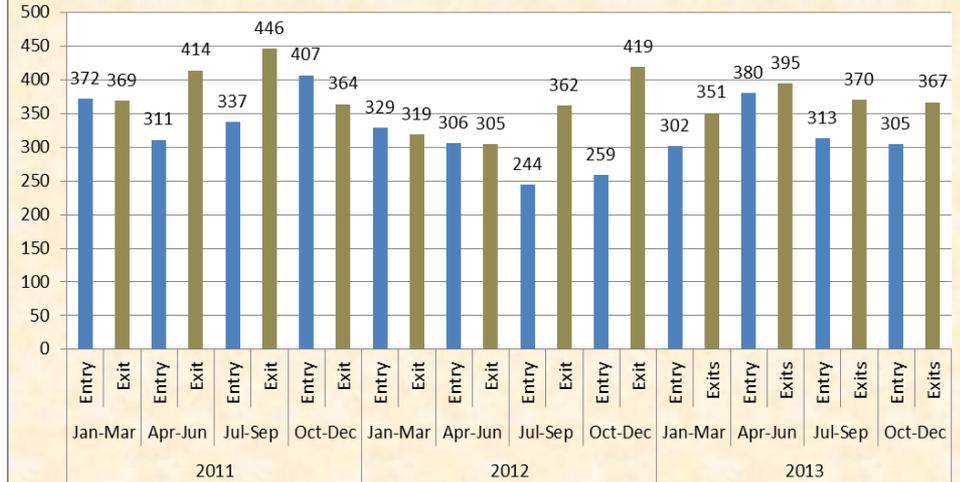
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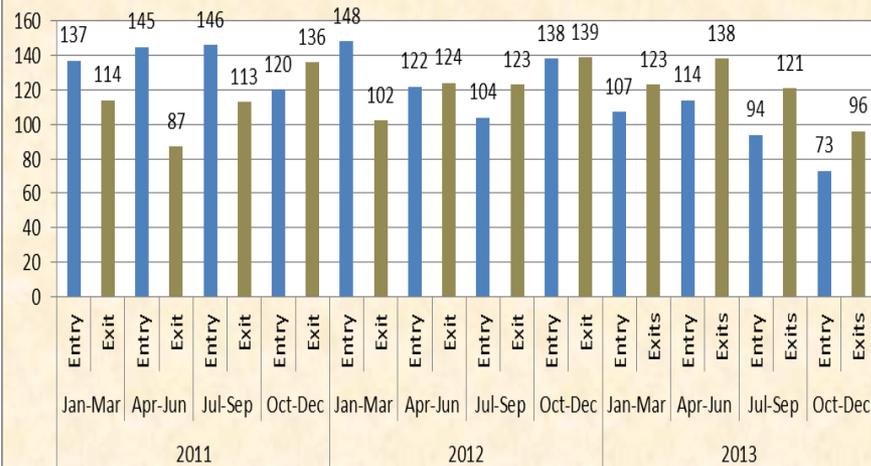
Central



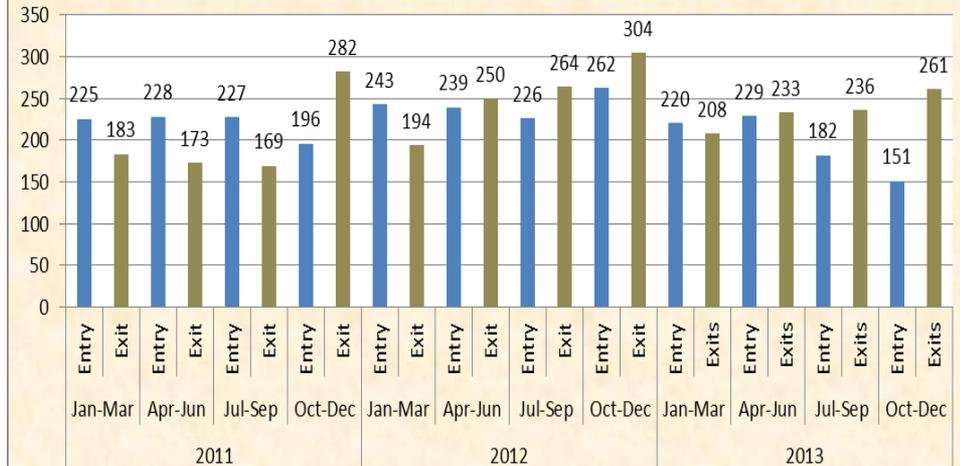
NFC



Northern



Southeast



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.**

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

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

Strengths/Opportunities:

Barriers:

Action Items:

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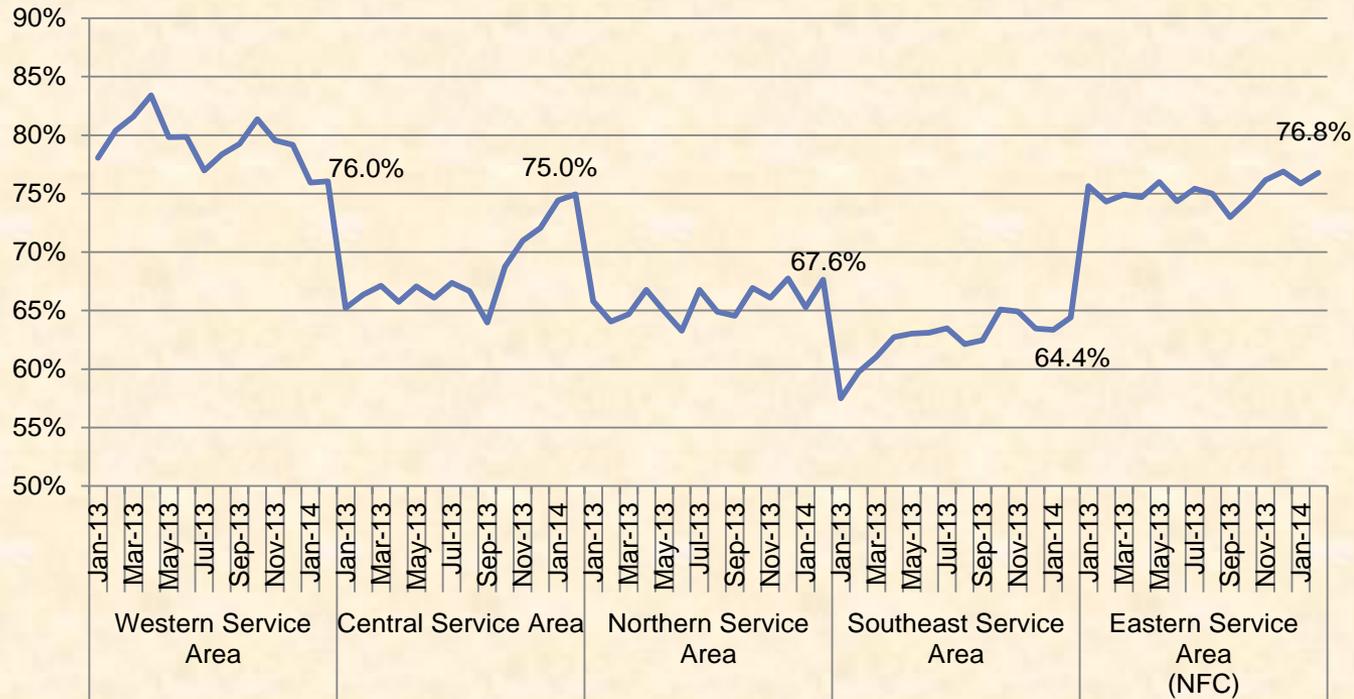
**Planned:*

CQI Team Priority:

* Statewide



Proportion of Out of Home to In-Home Wards by Service Area



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

Source – Point-in-Time 2/23/2013

Data Review Frequency: Quarterly

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

In-home versus out-of-home placements

Strengths/Opportunities:

- December OOH Rates (Increase in OOH Rates for all Service Areas this quarter).

State – 71%
 NFC – 76%
 SESA – 64%
 CSA – 74%
 NSA – 65%
 WSA – 76%

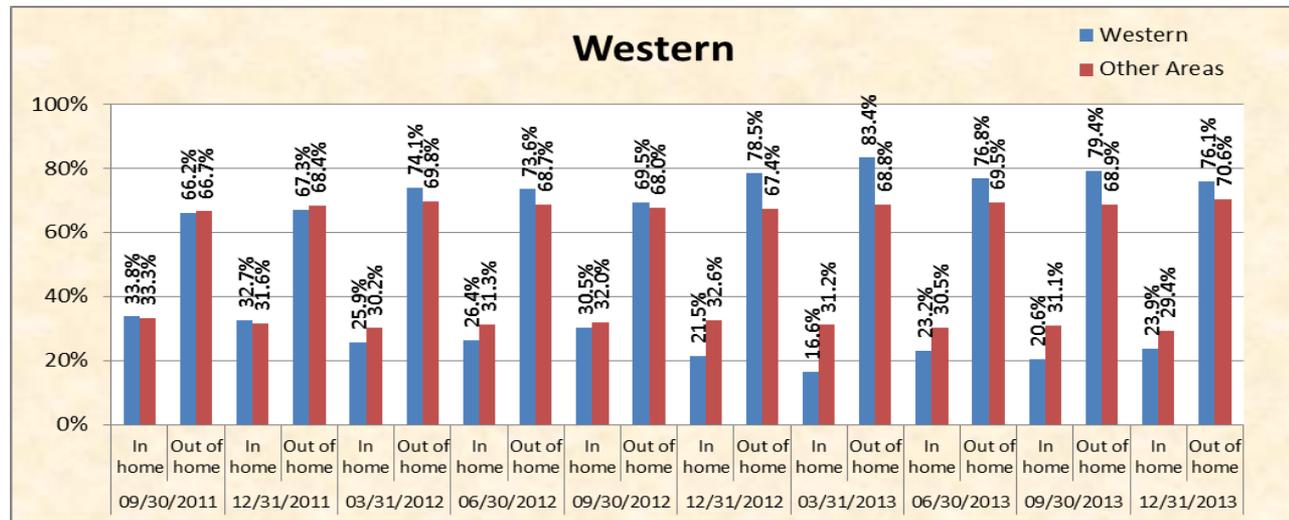
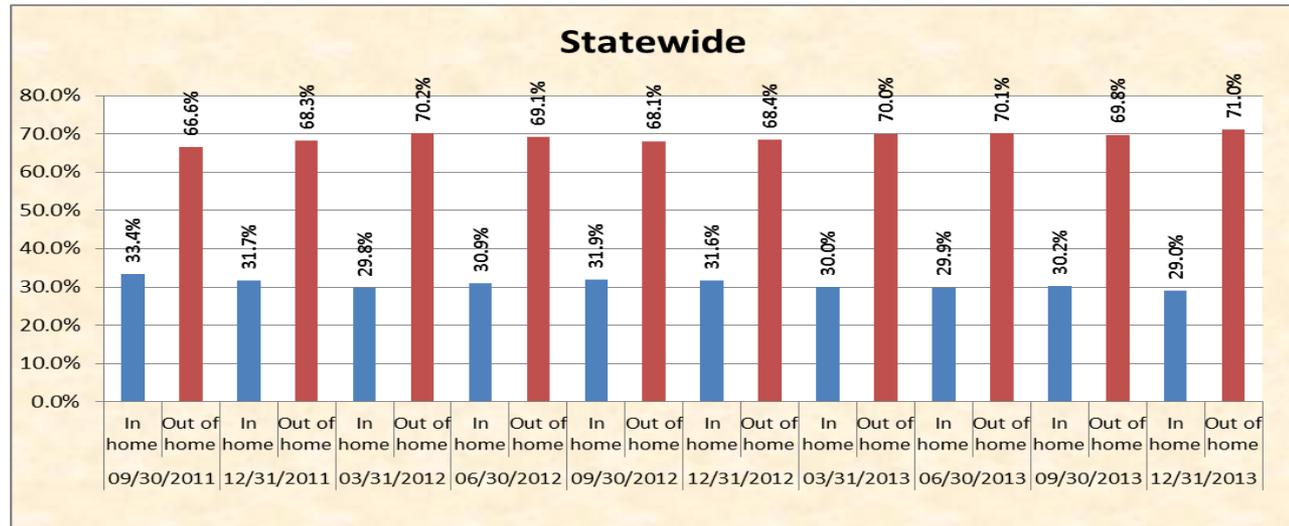
Note: The OOH Rates may increase due to the LB 561 transition of OJS and 3B youth to Probation.

Barriers:

Action Items:

*Completed:

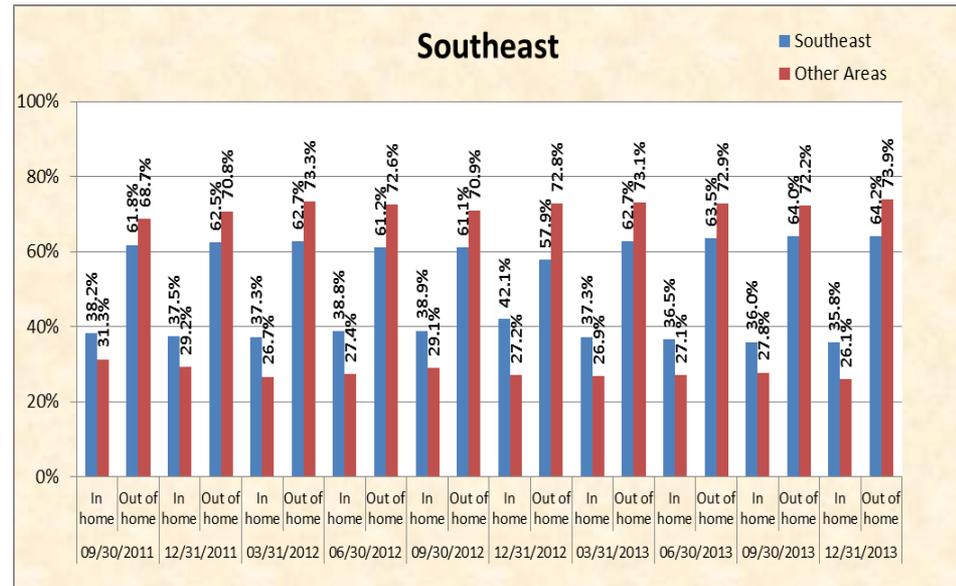
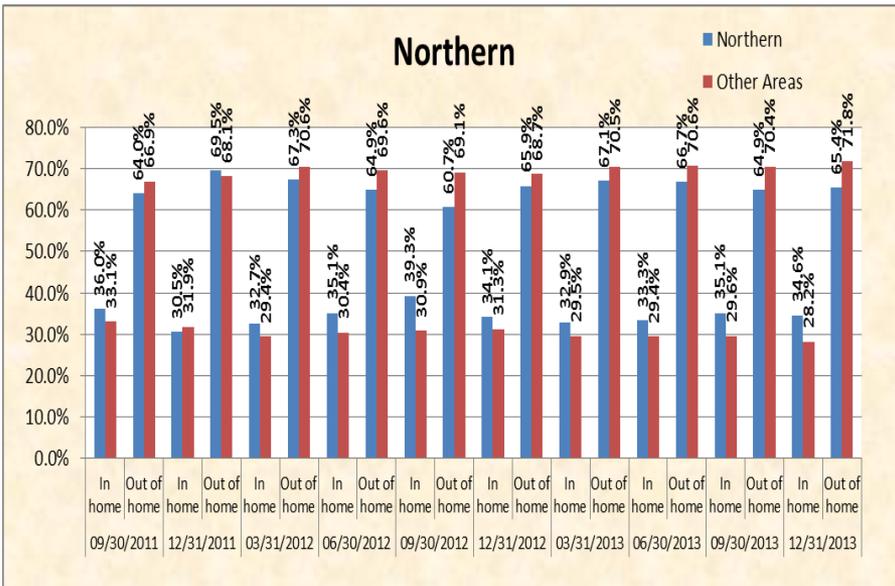
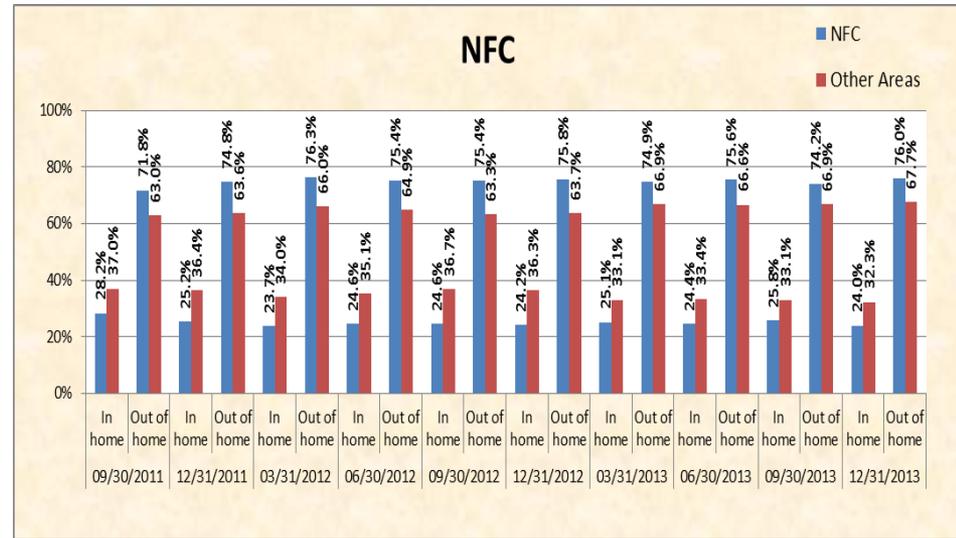
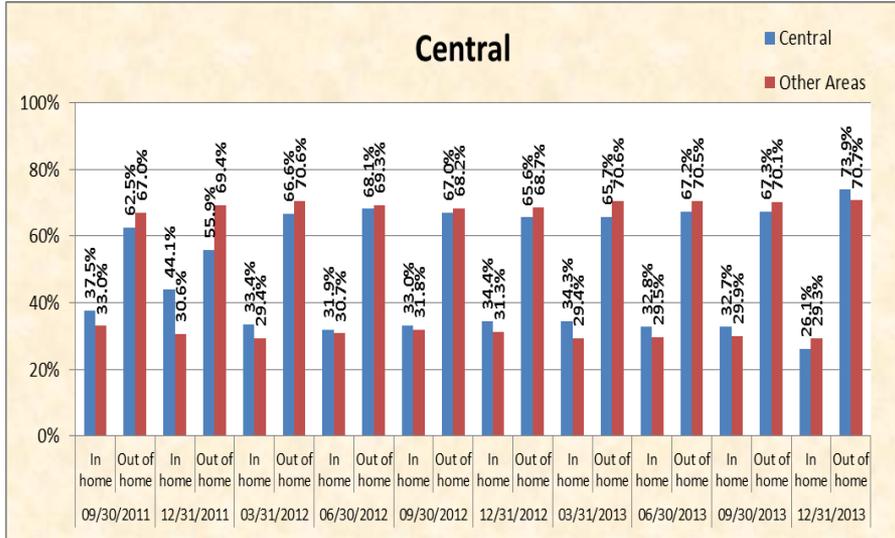
*Planned:



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.

In-home versus out-of-home placements

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



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

Intake Calls/Responses

Strengths/Opportunities:

- Jan 2014: 90% of all calls to the hotline were answered within 18 seconds. 5% of the calls went to voicemail and were returned within 1 hour. Increase in volume of calls in January 2014.

Barriers:

Action Items:

*Completed:

*Planned:

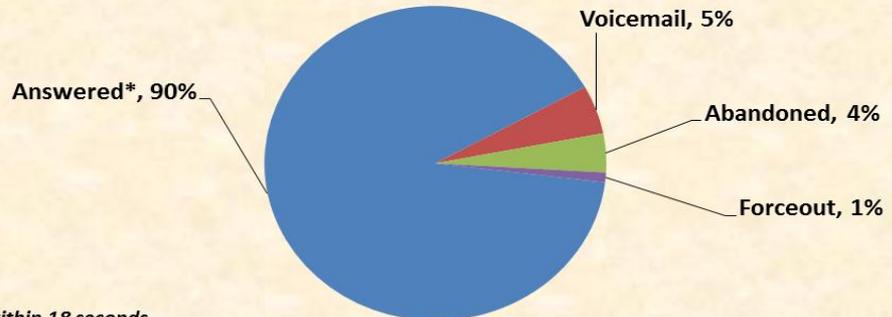


Hotline Calls Received & Percentage Answered by Month (2013 -2014)



January 2014 Call Breakout

Total Calls = 7228



* Calls answered within 18 seconds

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.

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

Intake Quality Measures

Strengths/Opportunities:

- Jan 2014: Slight decrease in all quality measures but all remain at 93% or above.

Barriers:

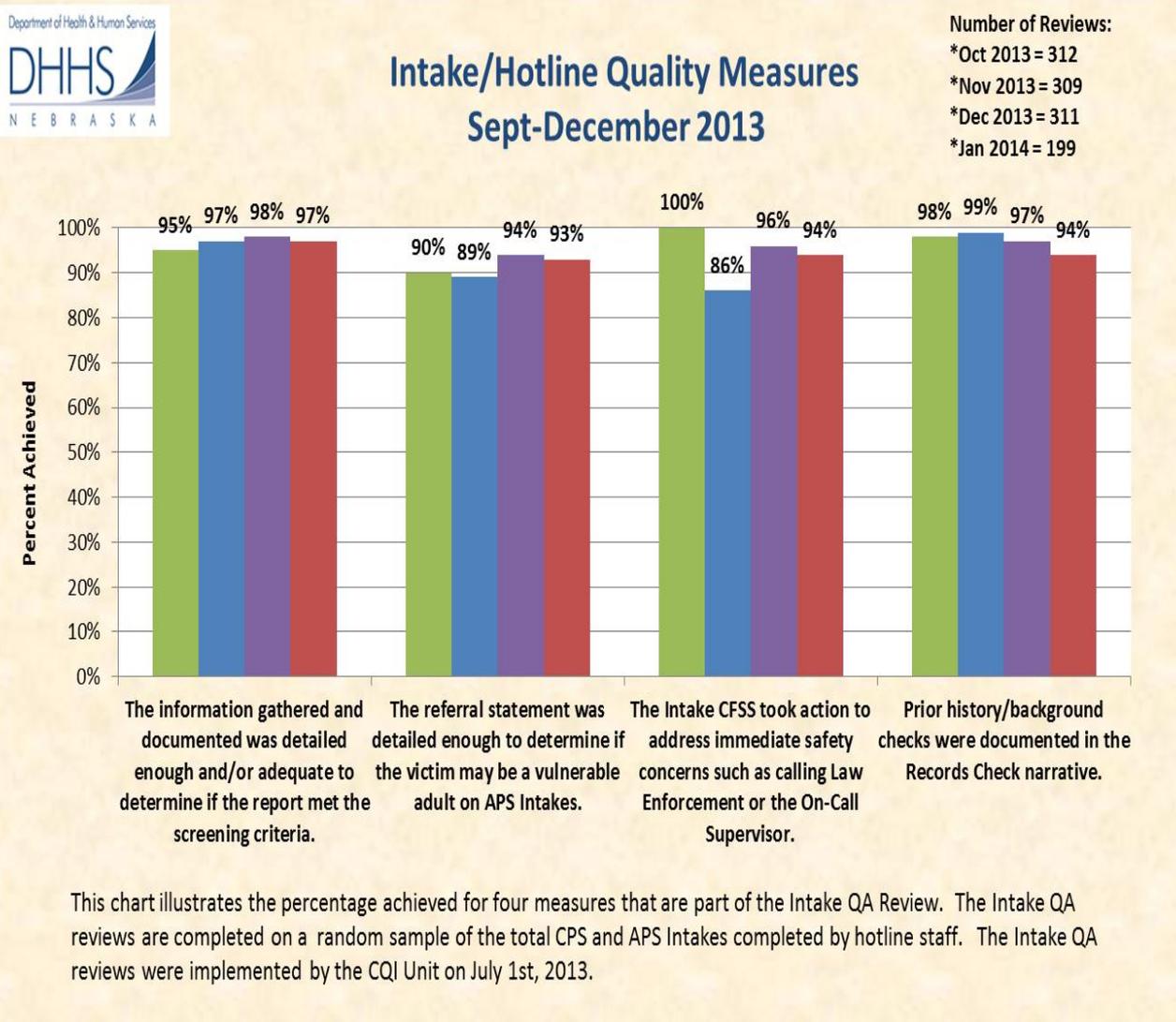
Action Items:

**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.

IA – Investigation Timeframes

Strengths/Opportunities:

-Jan 2014: Central Service Area continues to have the lowest number of Initial Assessments Not Finalized (21) that were due between Jan 2012 – Feb 2014 . Western Service Area has the highest number of assessments Not Finalized (281) during this same period. **On 2/18/14 there were 876 Initial Assessments that were not finalized for the entire State for this same period.** Significant decrease in NSA and WSA since last month.

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:

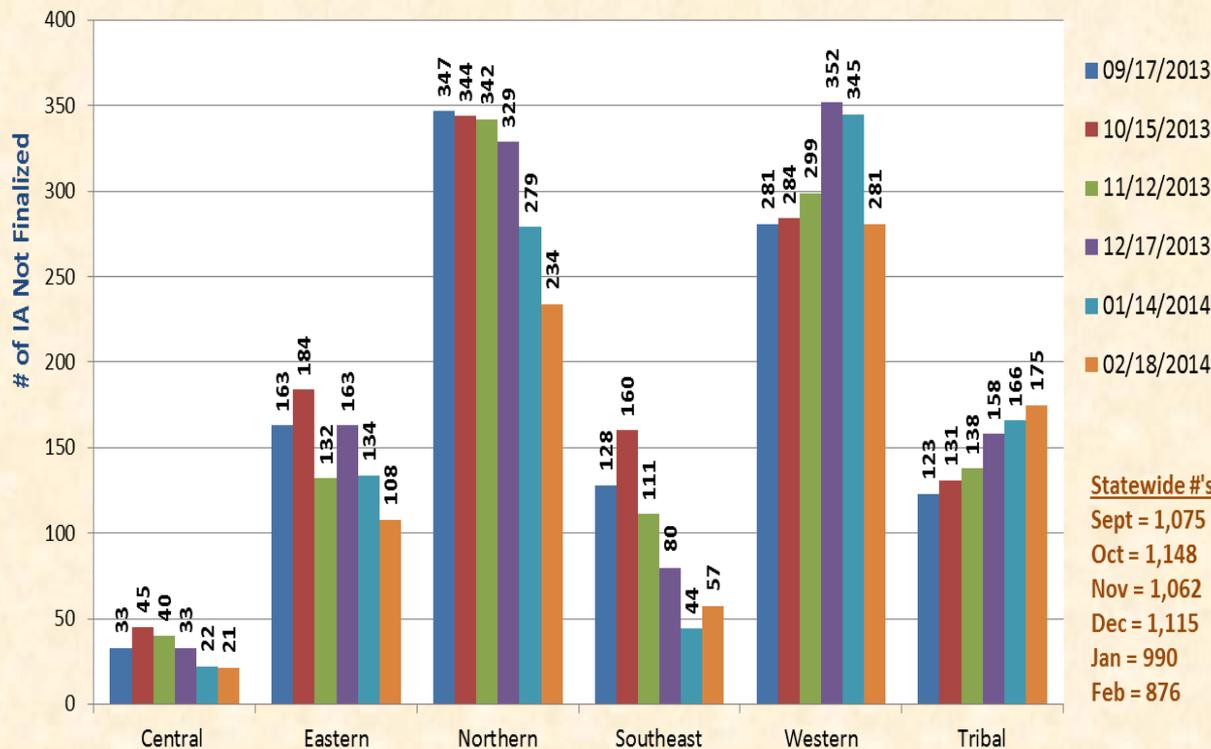
- Statewide
- Western Service Area

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



Initial Assessments - NOT FINALIZED (2012-2014)

* Initial Assessments that are not finalized past 30 days from the intake closure date. as of February 18, 2014



Statewide #'s:
 Sept = 1,075
 Oct = 1,148
 Nov = 1,062
 Dec = 1,115
 Jan = 990
 Feb = 876

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.

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

IA – Contact Timeframes

Strengths/Opportunities:

-Jan 2014: Increase in P2 and P3 measures. Slight decrease in P1. The most common reason for missed contacts is due to No SDM Found. 70% of the contacts missed belong to SESA and the Tribes.

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:

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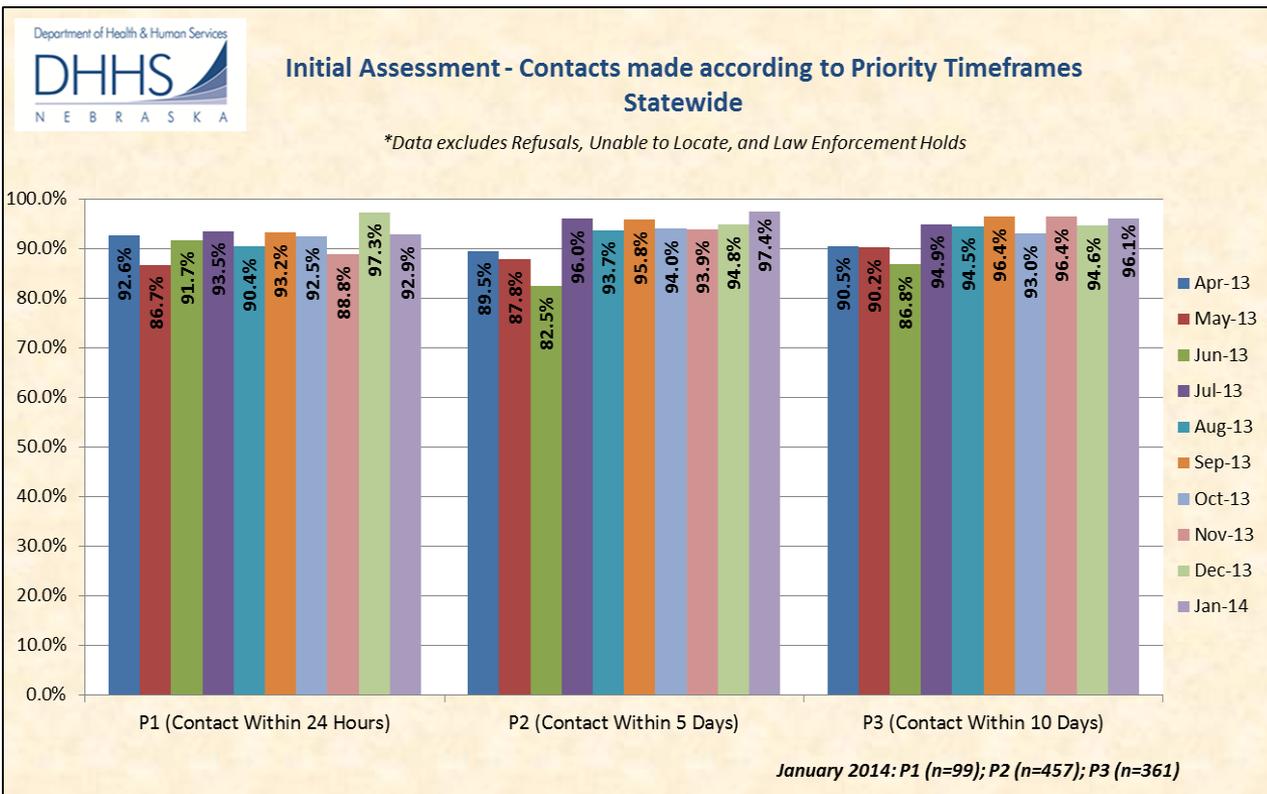
*Planned:

- 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.



Count Missed by Admin	
Spilde	6
Tribal	11
Alavi	4
Zimmerman	4
Duncan	1
Dement	1
Runge	1
Smith	1
Jelinek	3
Dement	1
Total	33

Reason for Missed Contacts	
Not Tied - No SDM Found	12
Not Timely	11
Contact Date Prior Intake Date	5
No Victim in the Intake	3
No Contact Documented	2
Total	33

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

IA – Contact Timeframes

Strengths/Opportunities:

* December 2013: ESA, SESA, NSA and WSA achieved 100% for P1 Contacts. **NSA and ESA achieved 100% for all timeframes this month. Congratulations!! WSA was close with 100% for P1&P2 and 98% for P3.**

Barriers:

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

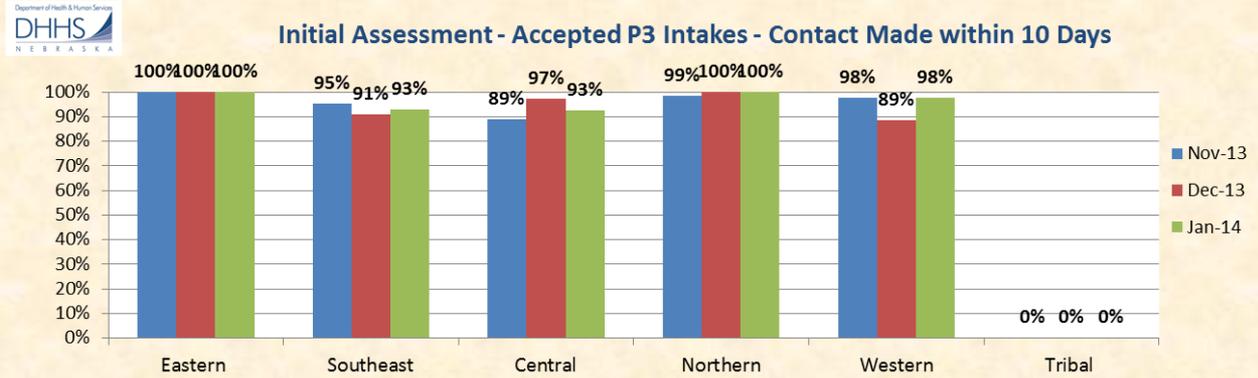
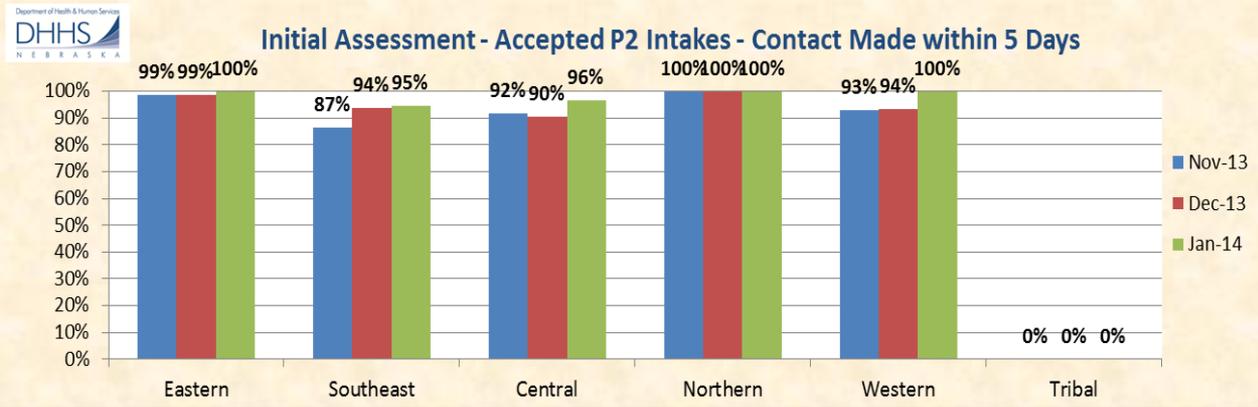
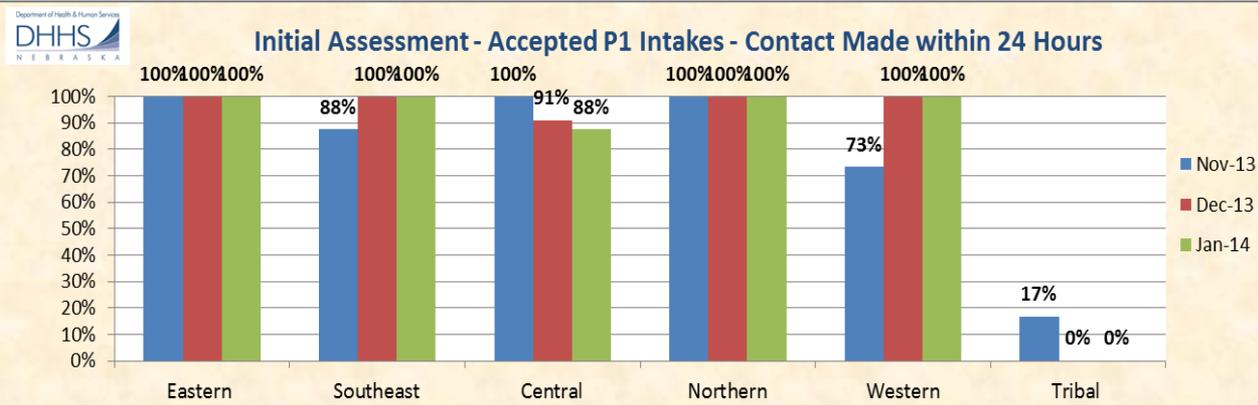
Action Items:

*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

APSS Data

Strengths/Opportunities:
 During this period, there were

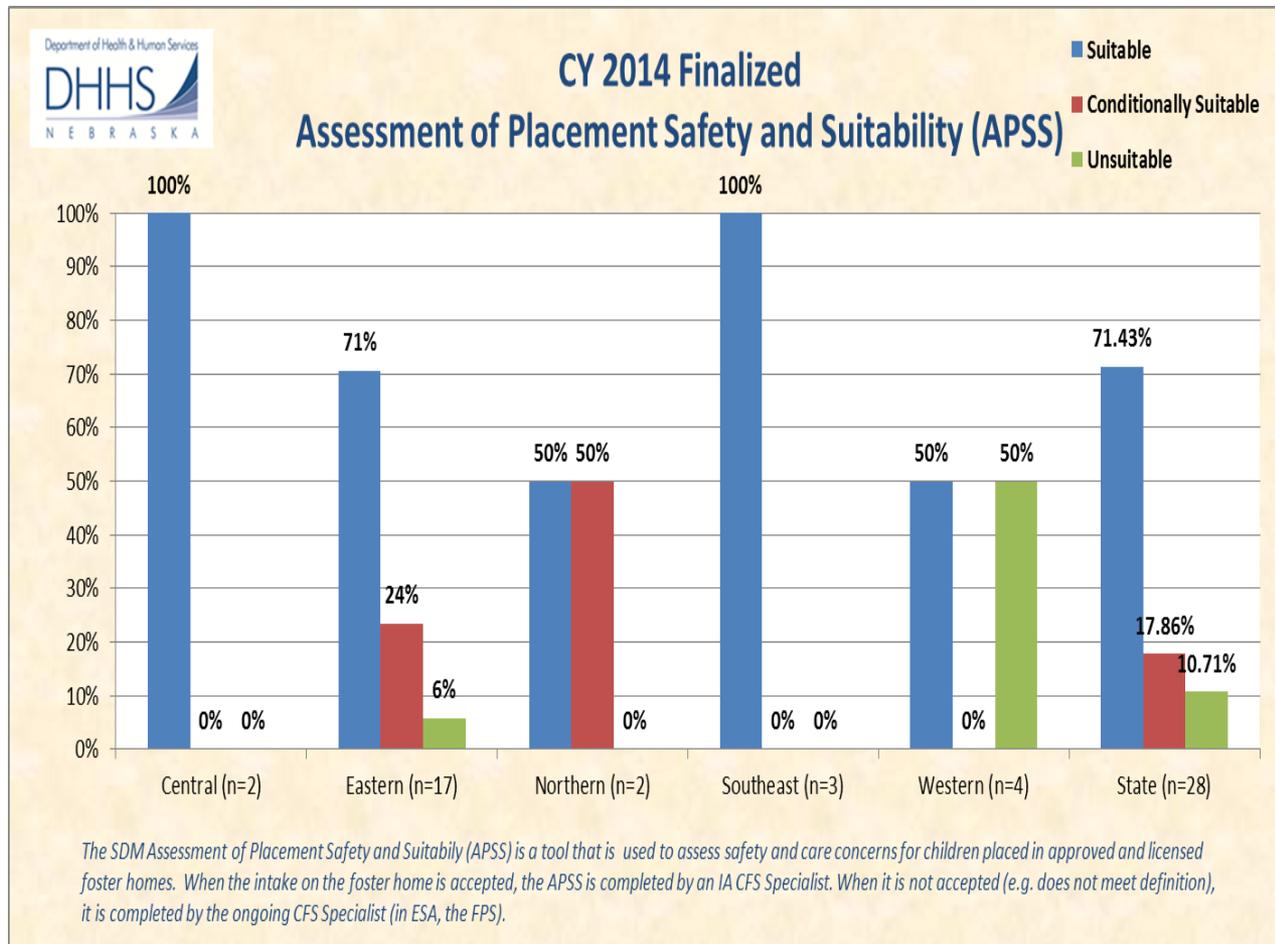
Barriers:

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:*



Definitions:

Suitable – Based on the information available (at this time), there are no child concerns in this placement.
 Conditionally Suitable – Based on interventions, the child will remain in the household at this time. An intervention plan is required.
 Unsuitable – Removal from the household is the only protective intervention possible for one or more children. Without removal, one or more children will likely be in danger of serious harm or in an unsuitable care arrangement

Data Review Frequency: Monthly

These charts are new to the CQI document this month (Feb 2014).

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

Absence of Maltreatment in Six Months

Strengths/Opportunities:

Jan 2014: ESA, CSA & NSA are exceeding the target goal at this time. **State performance fell just below the target goal this month.**

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.

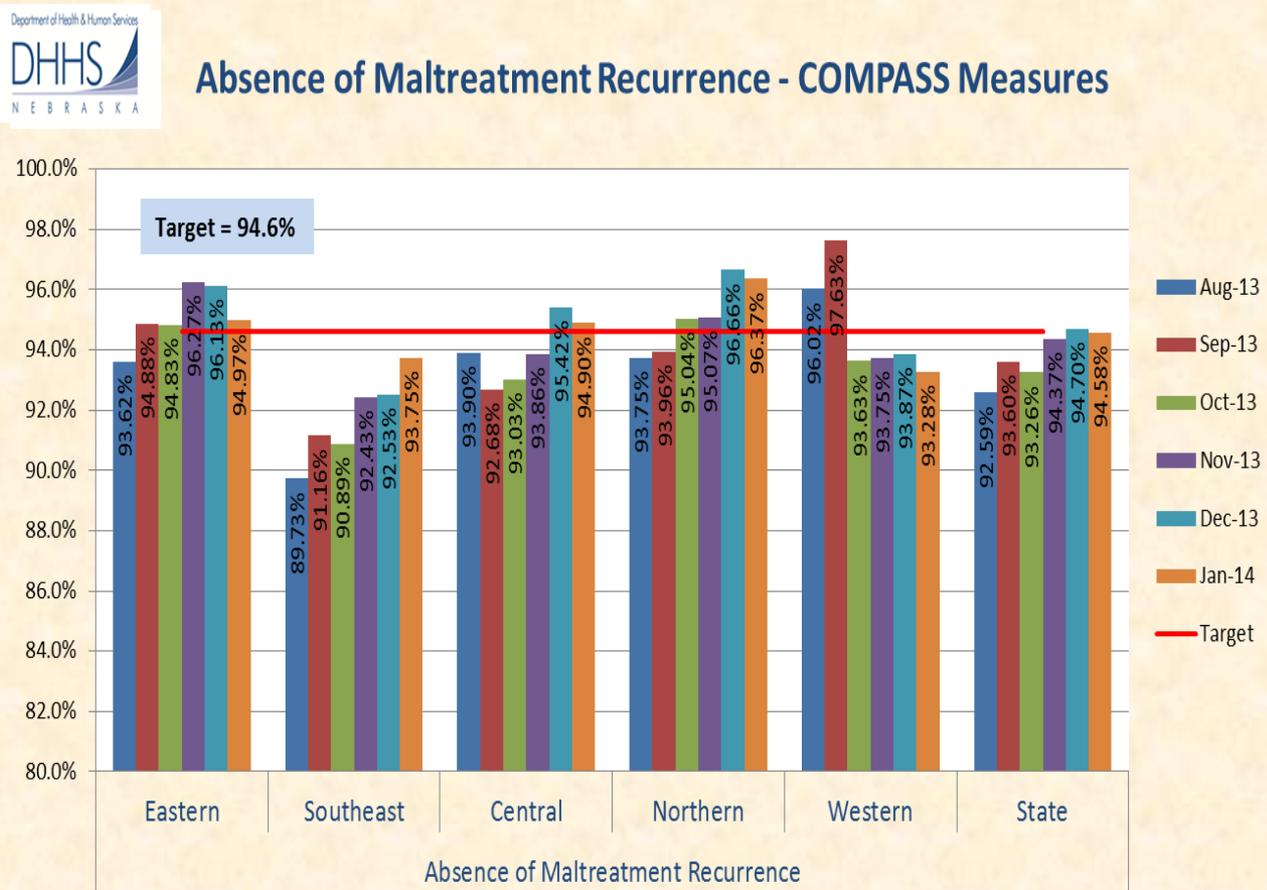
-CQI team will complete additional breakdown of repeat maltreatment data to help the team identify areas needing improvement.

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.**



This is Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. The children included in this report were victims of abuse or neglect during the first six months of the 12 month period. If the child was a victim of a subsequent abuse or neglect incident within 6 months of the first incident of abuse or neglect they appear on this report. Victims are defined as children where the court or DHHS has substantiated the allegations of abuse or neglect.

Absence of Maltreatment in Foster Care

Strengths/Opportunities:

Jan 2014: 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

- ESA places a home on hold until the investigation is complete when the intake is not accepted.

*Planned:

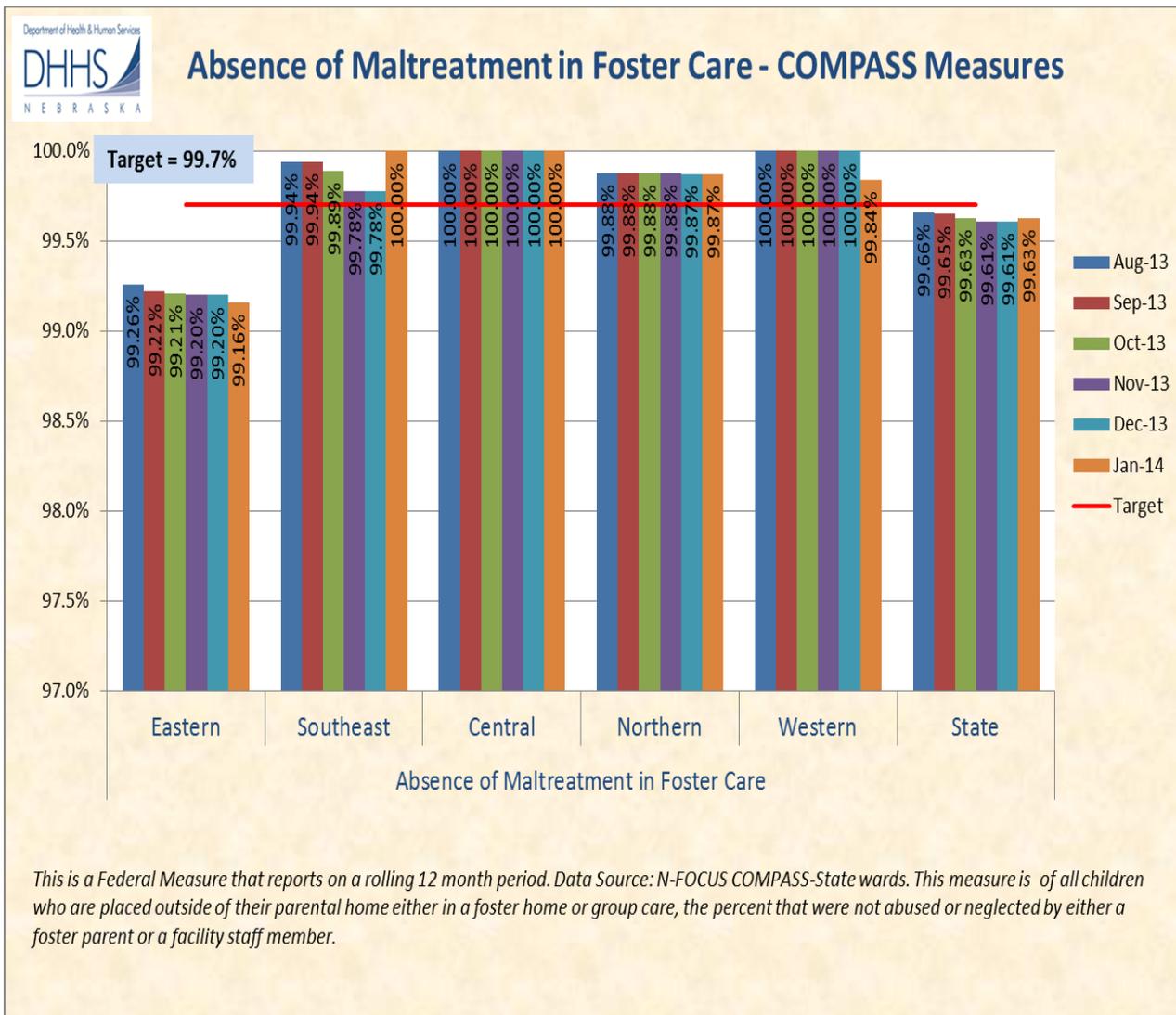
- A workgroup will convene to look at reason for case involvement and put instructions together on how to document reason for case involvement to better capture information about substance abuse and other reasons for case opening/involvement.

-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.



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

Permanency for Children in Foster Care

Strengths/Opportunities:

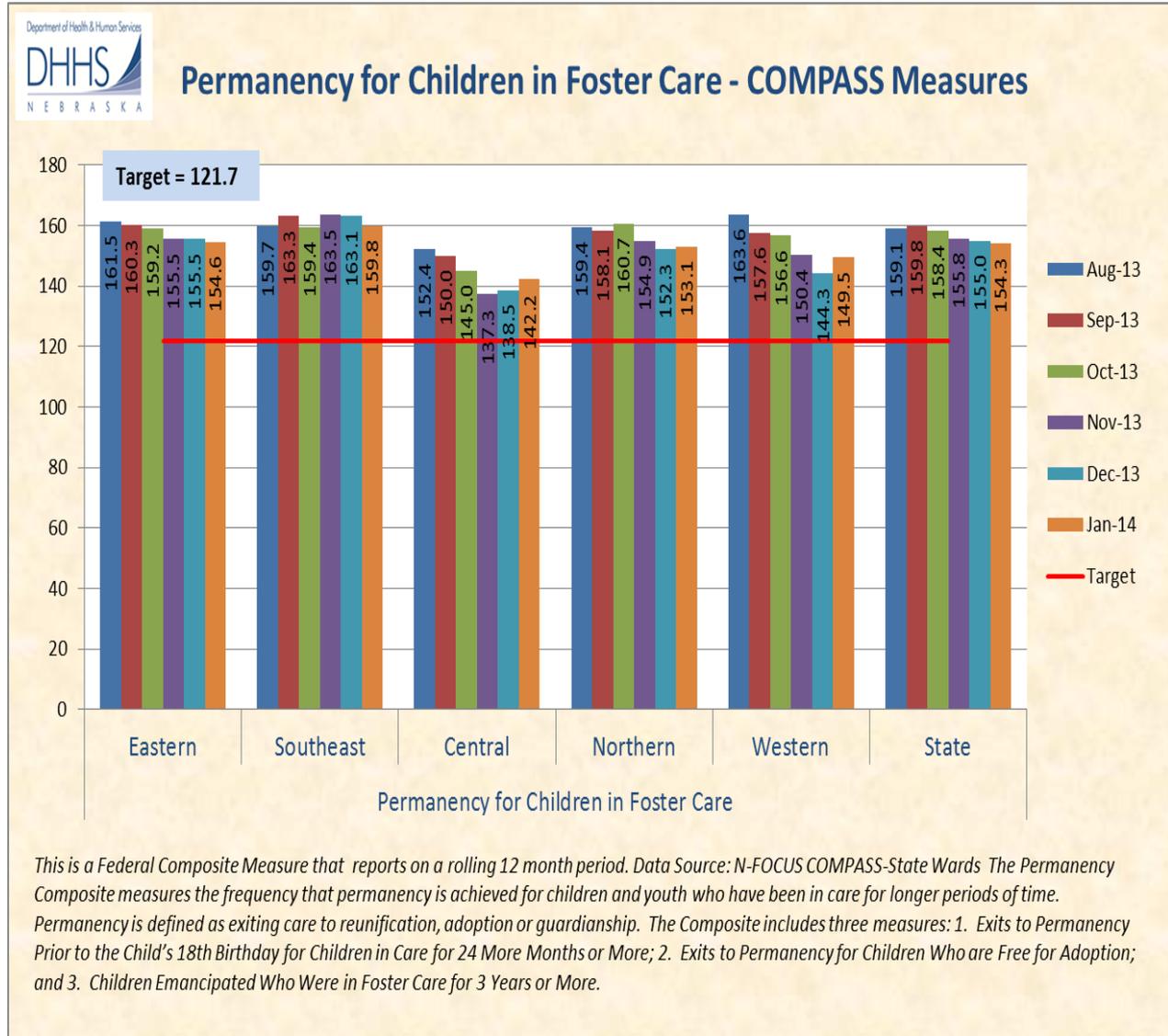
Jan 2014: All Service Areas continue to meet the target goals for this measure.

Barriers:

Action Items:

**Completed:*

**Planned:*



Timeliness of Adoption

Strengths/Opportunities:

Jan 2014: CSA is the only service area not meeting this measure. Significant decrease in WSA this month.

Barriers:

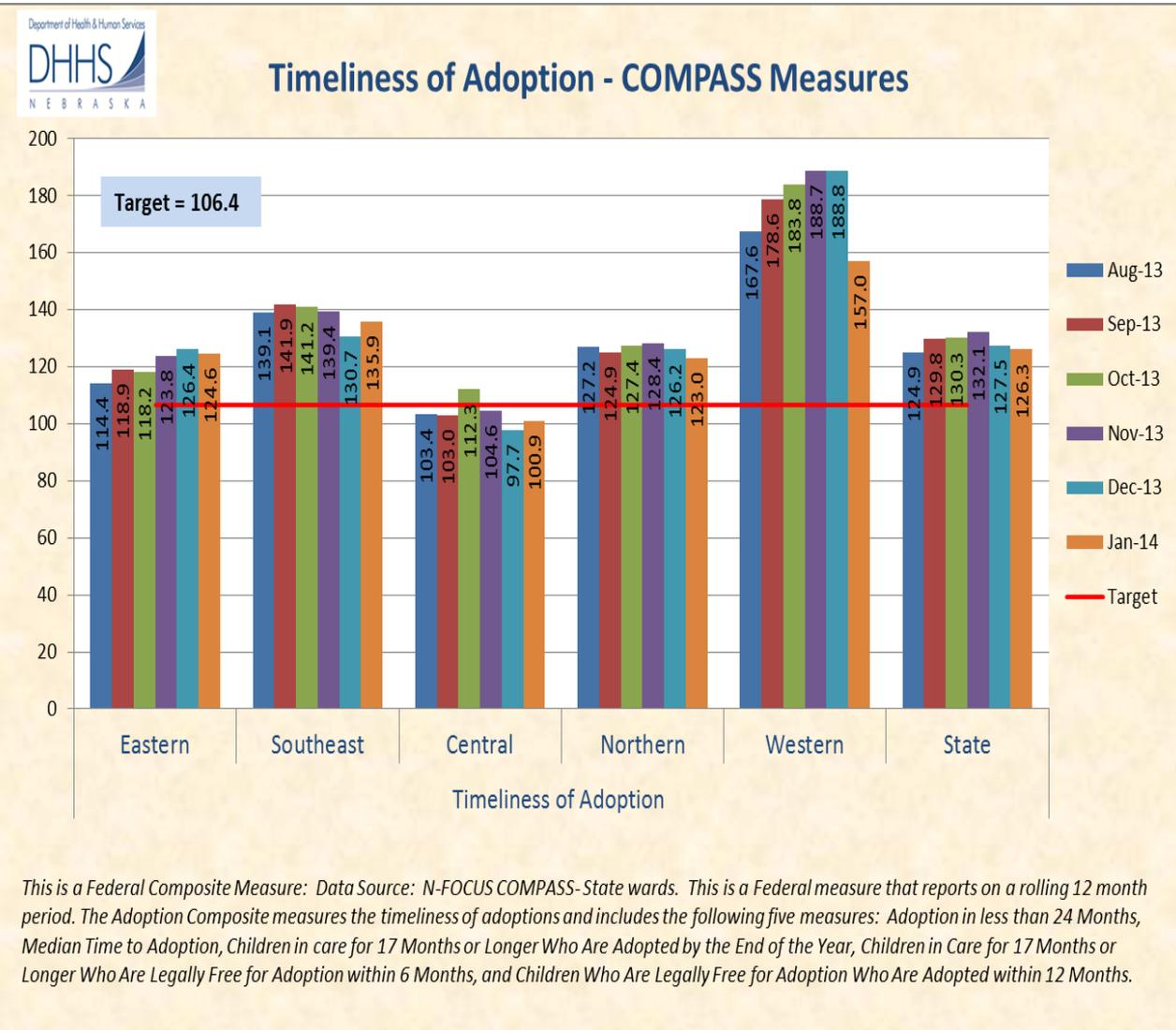
Action Items:

**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.



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

Timeliness of Adoption

Strengths/Opportunities:

Jan 2014: 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. There has also been a decrease in performance in SESA in the last few months.

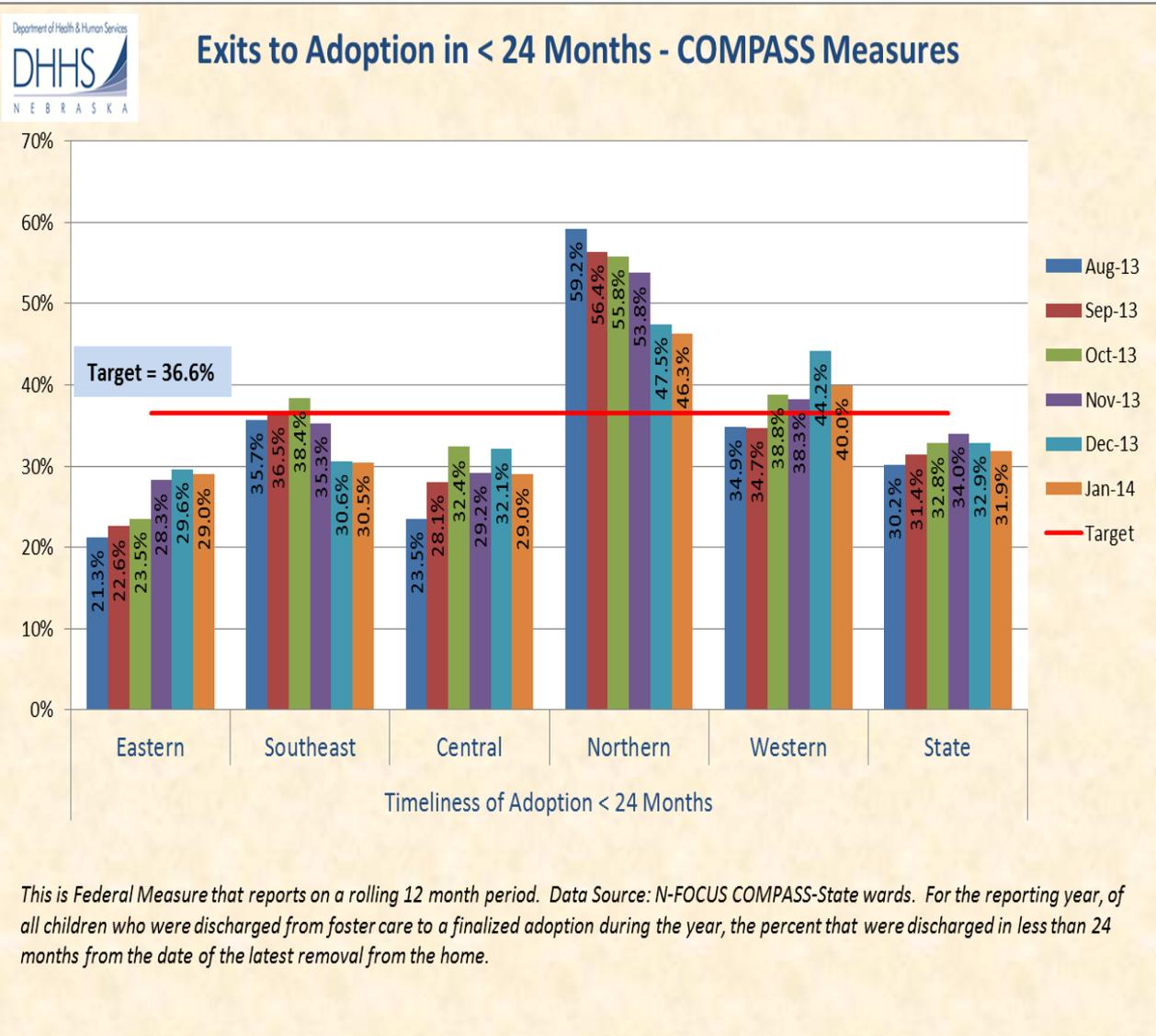
Barriers:

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:*



Timeliness & Permanency of Reunification

Strengths/Opportunities:

Jan 2014: None of the Service Areas are meeting the goal at this time. SESA is the closest to meeting the target goal for this measure.

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:

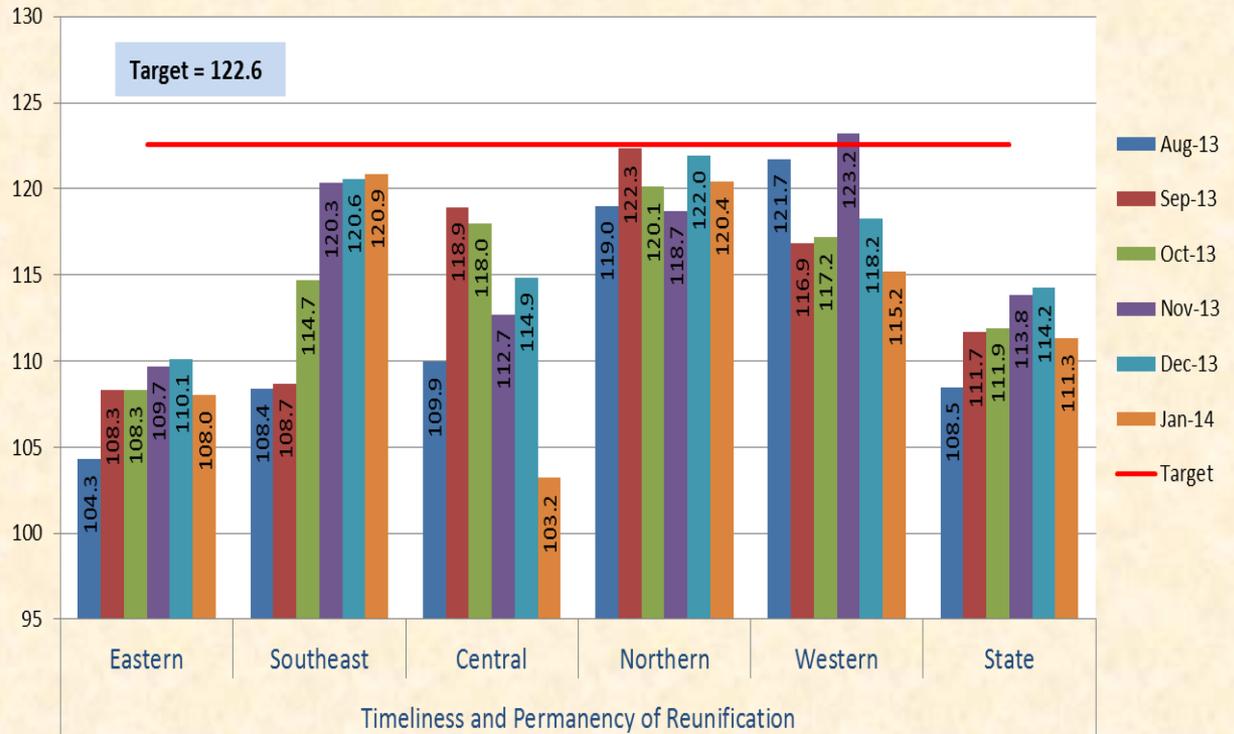
- *Statewide External Stakeholder Team
- *Eastern, Northern, Southeast and Western Service Areas

*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.



Timeliness & Permanency of Reunification - COMPASS Measures



This is a Federal Composite Measure. Data Source: N-FOCUS COMPASS-State Wards. This is a Federal Measure that reports on a rolling 12 month period. The Reunification Composite measures the timeliness of reunification and whether the reunification was permanent over a specific period of time. The Reunification Composite includes four measures: Reunification in Less Than 12 Months, Median Time to Reunification, Entry Cohort Reunification in Less Than 12 Months, and Permanence of Reunification.

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:

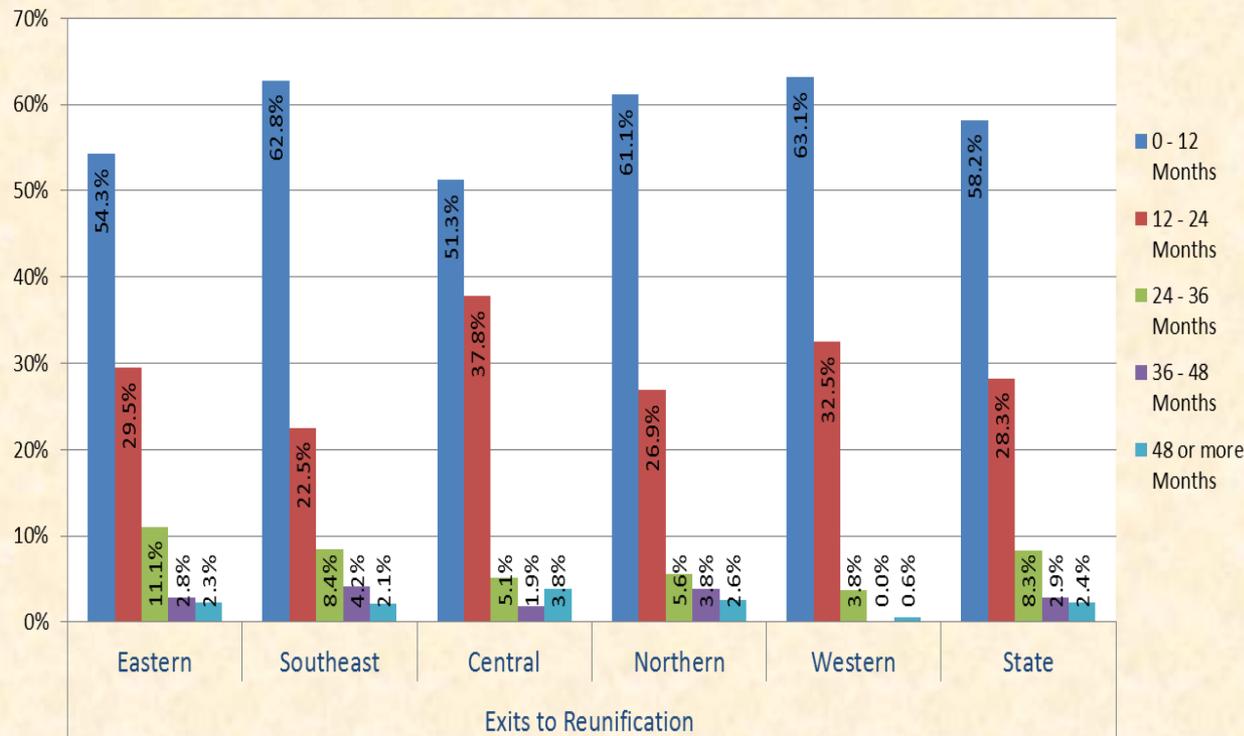
- *Statewide External Stakeholder Team
- *Eastern, Northern, Southeast and Western Service Areas

*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.



Exits to Reunification - COMPASS Measures



This is a Federal Composite Measure. Data Source: N-FOCUS COMPASS-State Wards. This is a Federal Measure that reports on a rolling 12 month period. For the reporting year, of all children discharged from foster care to reunification who had been in foster care for 8 days or longer, the percent that met either of the following criteria: (1) the child was reunified in less than 12 months from the date of the latest removal from the home, or (2) the child was placed in a trial home visit within 11 months of the date of the latest removal and the child's last placement prior to discharge to reunification was the trial home visit.

Timeliness & Permanency of Reunification

Strengths/Opportunities:

Jan 2014: Increase in performance in ESA.
Decrease in all other Service Areas.

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

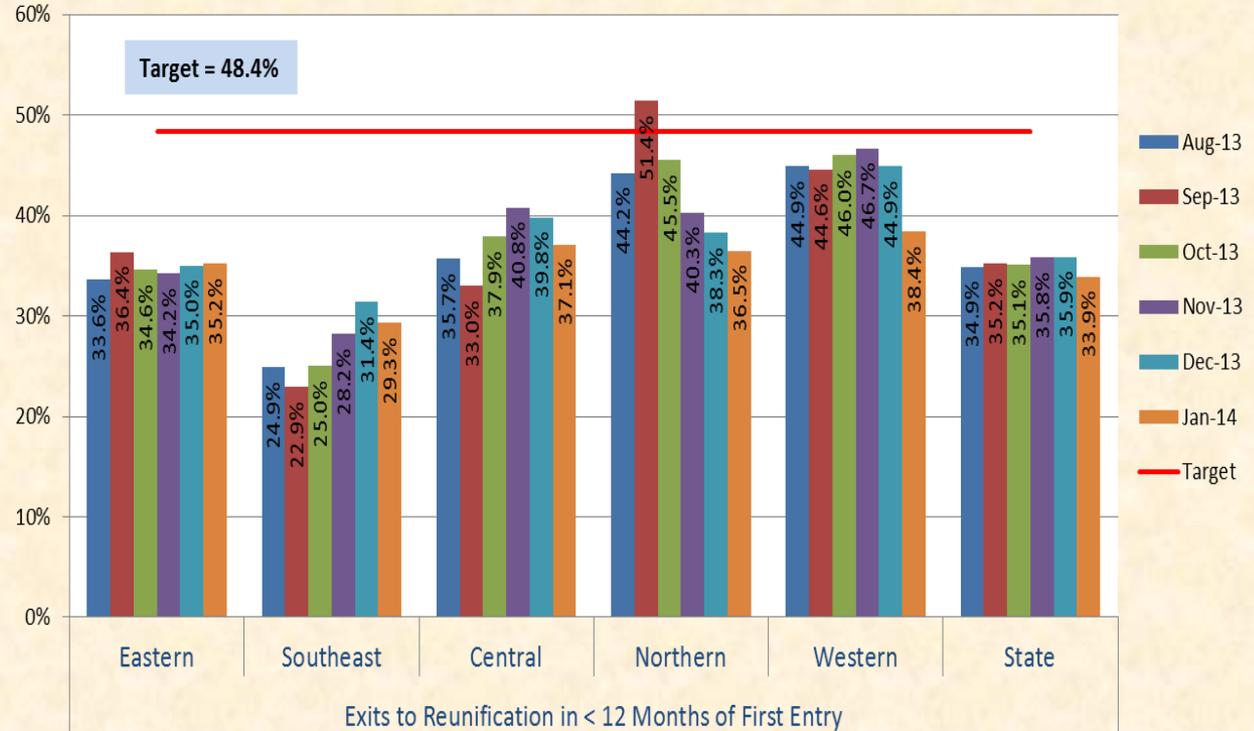
*Eastern, Northern, Southeast and Western Service Areas

*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.



Exits to Reunification in < 12 Months of First Entry - COMPASS Measures



This is a Federal Composite Measure. Data Source: N-FOCUS COMPASS-State Wards. This is a Federal Measure that reports on a rolling 12 month period. For the prior reporting year, of all children entering foster care in the second 6 months of the year who remained in foster care for 8 days or longer, the percent who met either of the following criteria: (1) the child was reunified in less than 12 months from the date of entry into foster care, or (2) the child was placed in a trial home visit in less than 11 months from the date of entry into foster care and the trial home visit was the last placement setting prior to discharge to reunification.

Timeliness & Permanency of Reunification

Strengths/Opportunities:

Jan 2014: Decrease in median months in care for SESA, ESA and NSA, while other Service Areas saw an increase. Significant increase in CSA.

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:

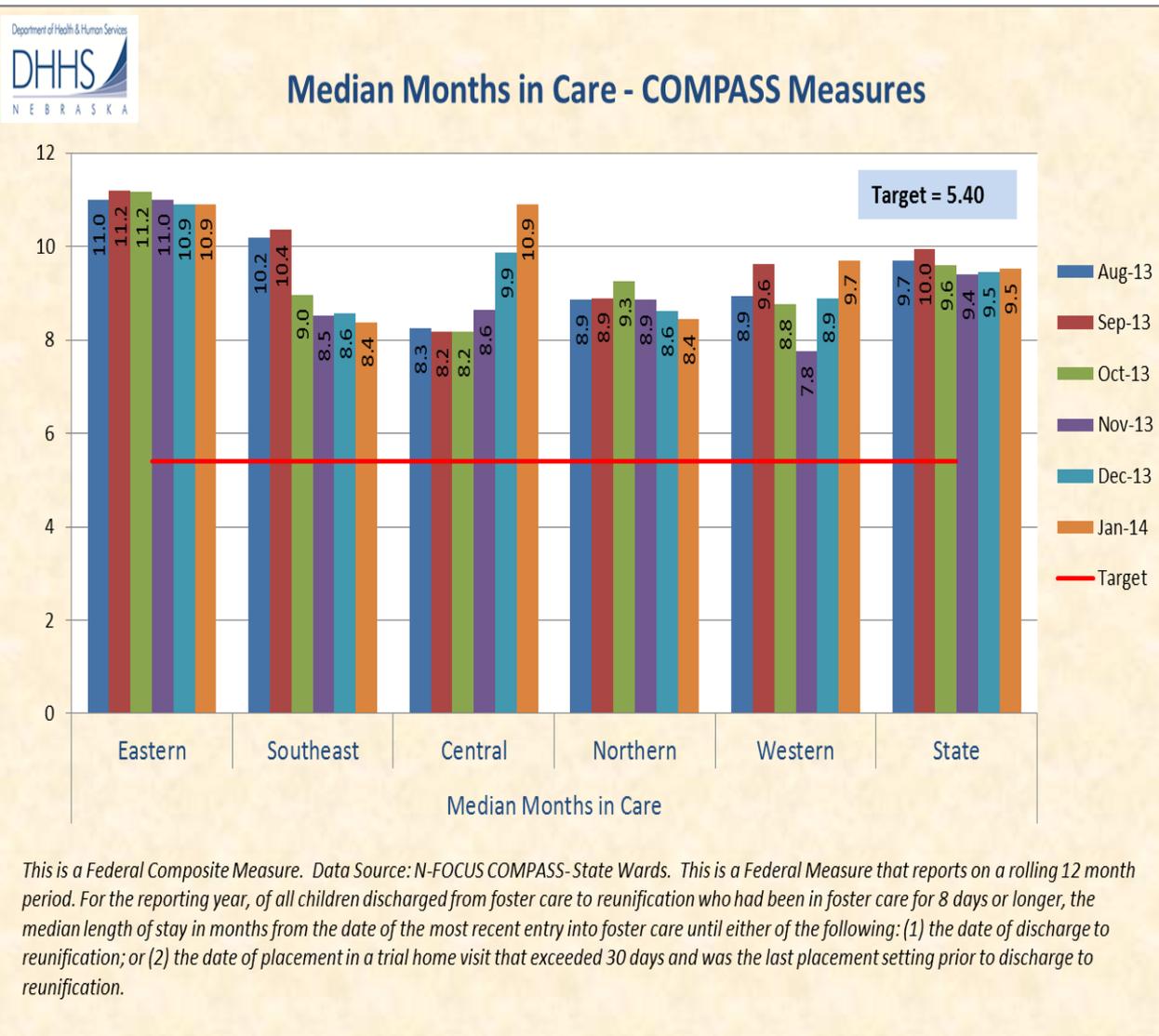
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

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.



Timeliness & Permanency of Reunification

Strengths/Opportunities:

Jan 2014: Central Service Area 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%.

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

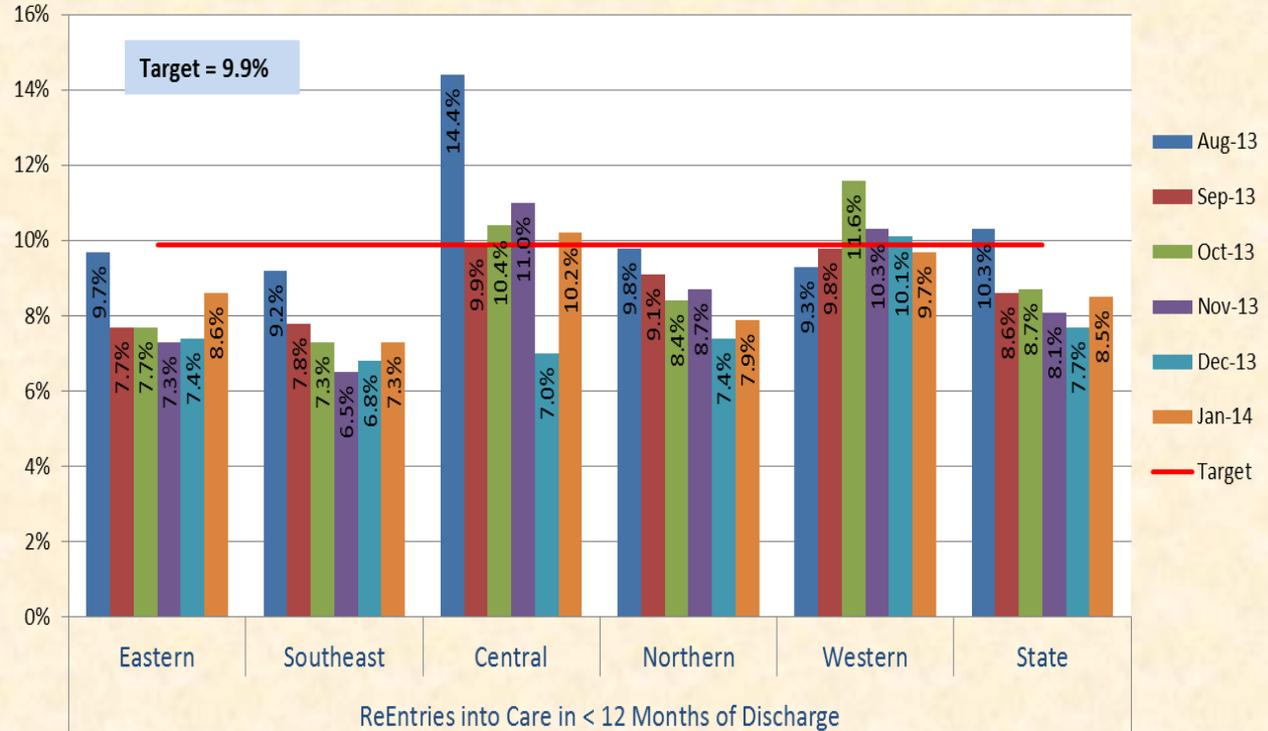
*Eastern, Northern, Southeast and Western Service Areas

*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.



ReEntries into Care in < 12 Months of Discharge - COMPASS Measures



A lower score is preferable.

This is a Federal Composite Measure. Data Source: N-FOCUS COMPASS-State Wards. This is a Federal Measure that reports on a rolling 12 month period. Of all children discharged from foster care to reunification in the year prior to the reporting year, the percent that re-entered foster care in less than 12 months from discharge from a prior episode.

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

Placement Stability

Strengths/Opportunities:

Jan 2014: **State met the target goal for the 1st time in November and maintains close to the same performance this month** 😊 Northern Service Area continues to exceed the target goal performance continues to increase each month. NSA leads the state with 110.4. Eastern Service area met the target goal for this measure in November and maintains the same performance this month. Great improvements each month by WSA.

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:

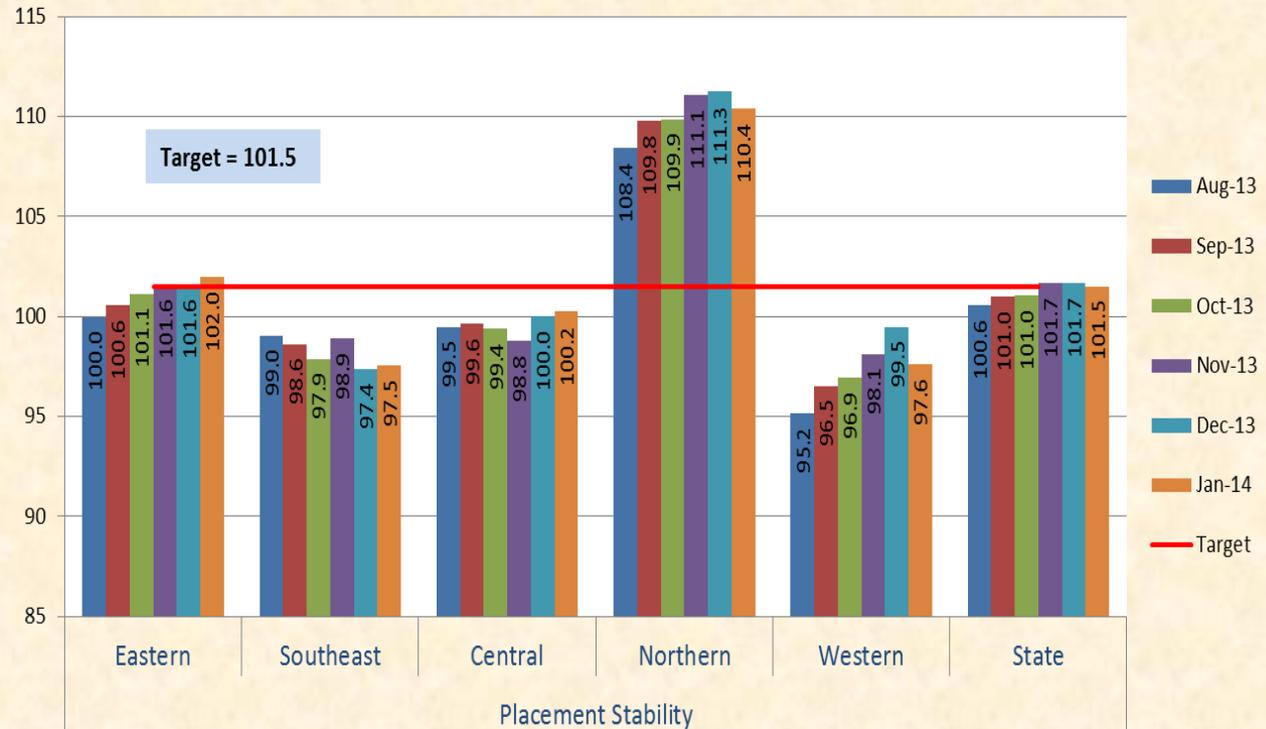
*Statewide External Stakeholder Team

*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.**



Placement Stability - COMPASS Measures



This is the Federal Composite Measure on Placement Stability. This is a Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. The national standard is 2 or fewer placements over specific periods of time. Placements are not counted for children who experience a brief hospitalization or for children who are on runaway status.

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

Placement Stability

Strengths/Opportunities:

Jan 2014: ESA, NSA and WSA continue to exceed the target goal for this measure. Increase in performance in SESA, while decrease in all the other Service Areas.

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.

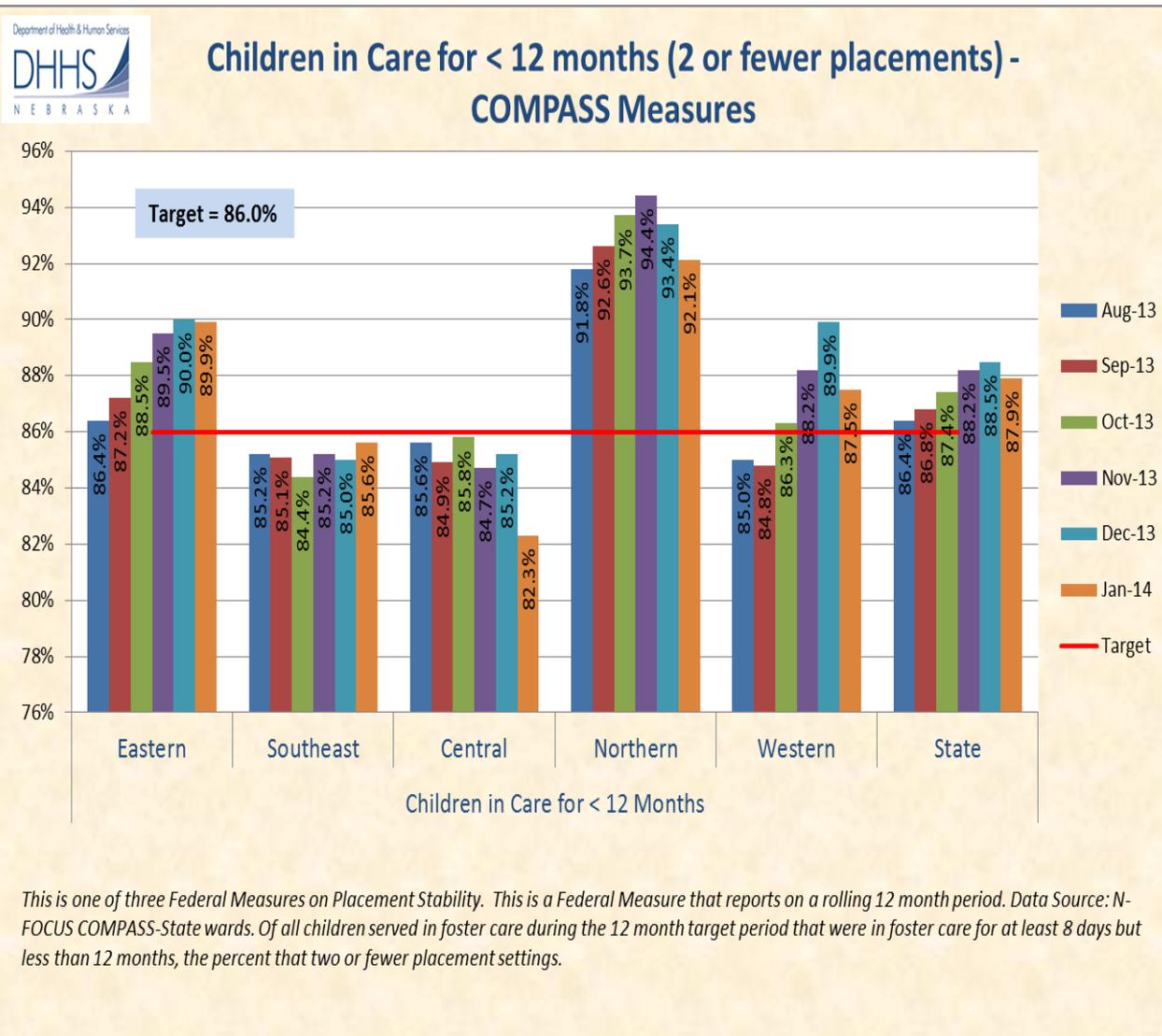
**Planned:*

- 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

Placement Stability

Strengths/Opportunities:

Jan 2014: CSA and NSA are meeting the target goal for this measure. NSA leads the state at 77%.

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:

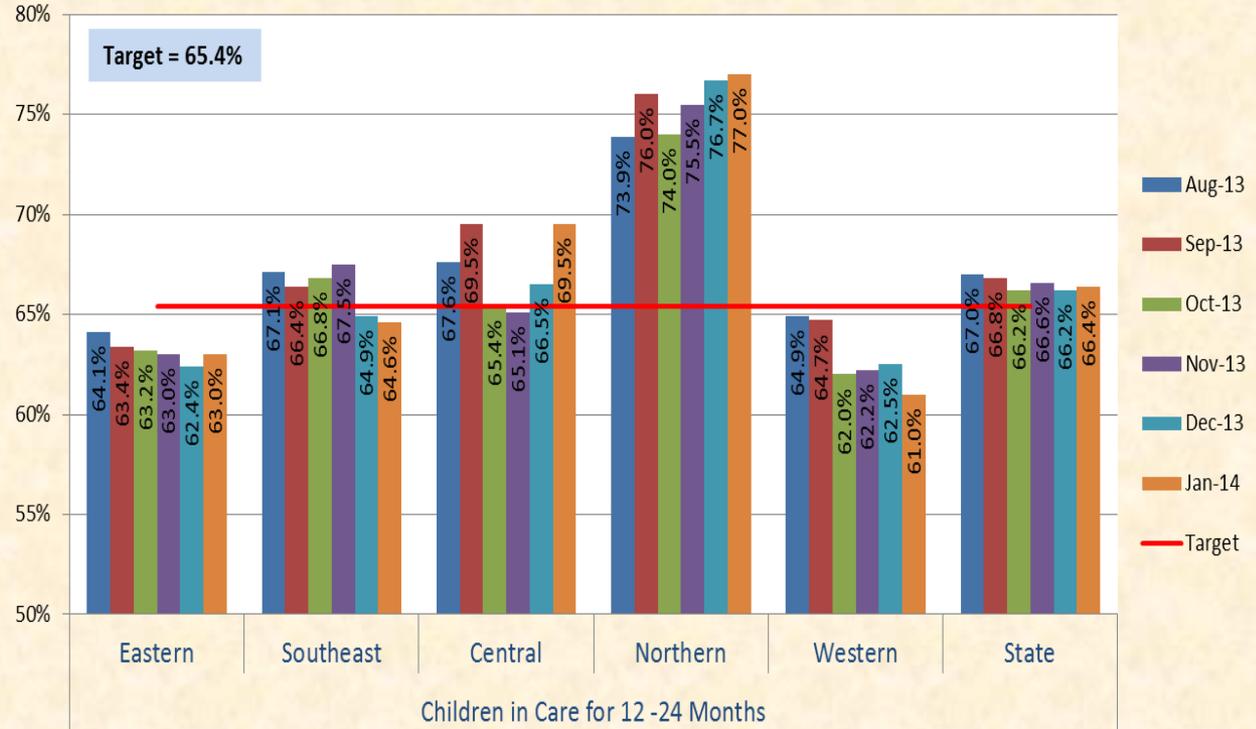
*Statewide External Stakeholder Team

*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.



Children in Care for 12 - 24 months (2 or fewer placements) - COMPASS Measures



This is one of three Federal Measures on Placement Stability. This is a Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. Of all children served in foster care during the 12 month target period that were in foster care for at least 12 months but less than 24 months, the percent that had two or fewer placement settings.

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

Placement Stability

Strengths/Opportunities:

Jan 2014: None of the areas are meeting the target goal at this time. CSA is the closest at 40.9%

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

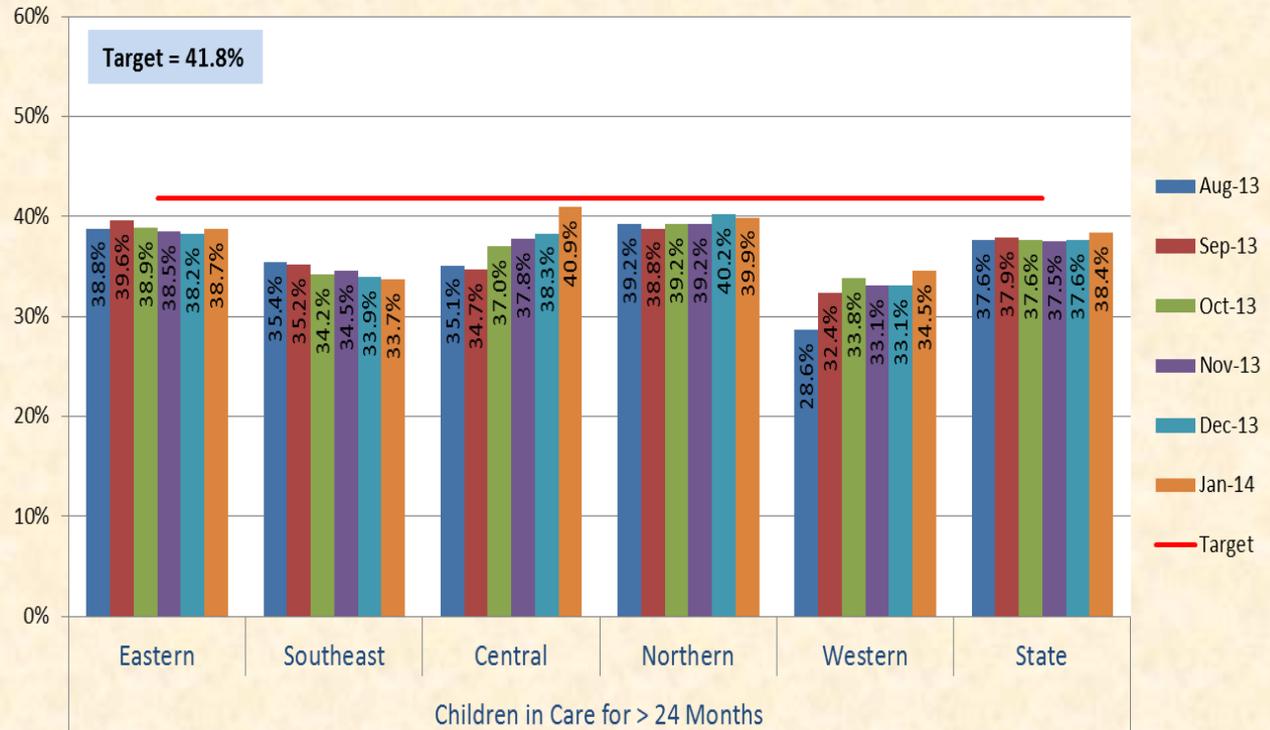
CQI Team Priority:

- *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.*



Children in Care for > 24 months (2 or fewer placements) - COMPASS Measures



This is one of three Federal Measures on Placement Stability. This is a Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. Of all children served in foster care during the 12 month target period that were in foster care for at least 24 months, the percent that had two or fewer placement settings.

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

Kinship Care for Out of Home Wards

Strengths/Opportunities:

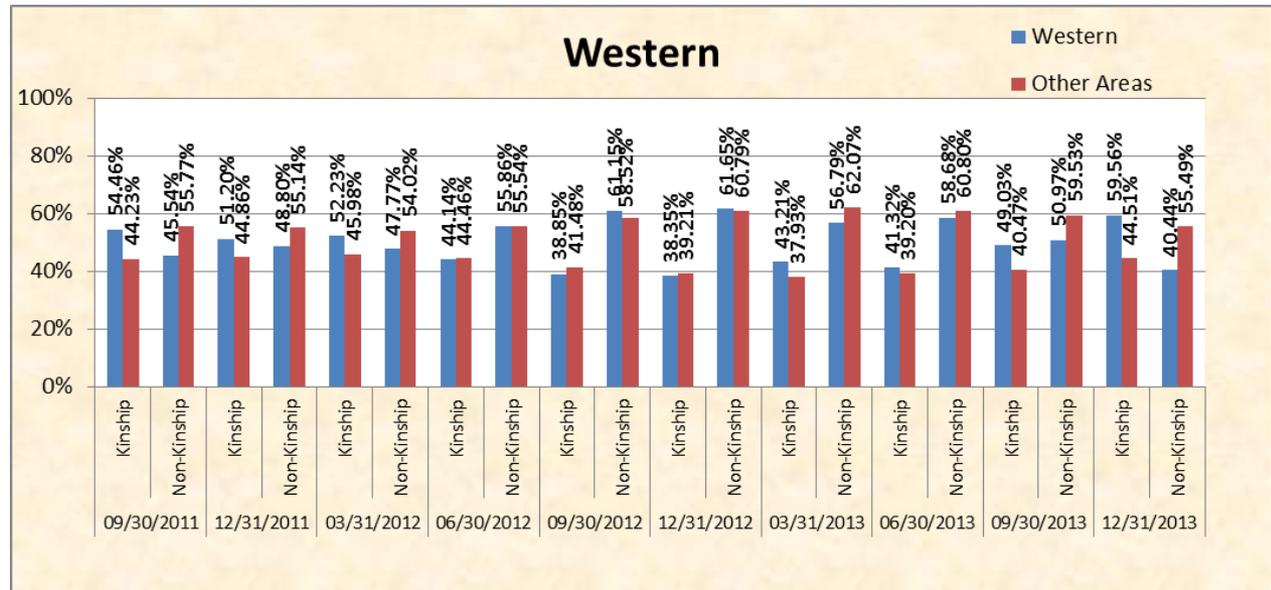
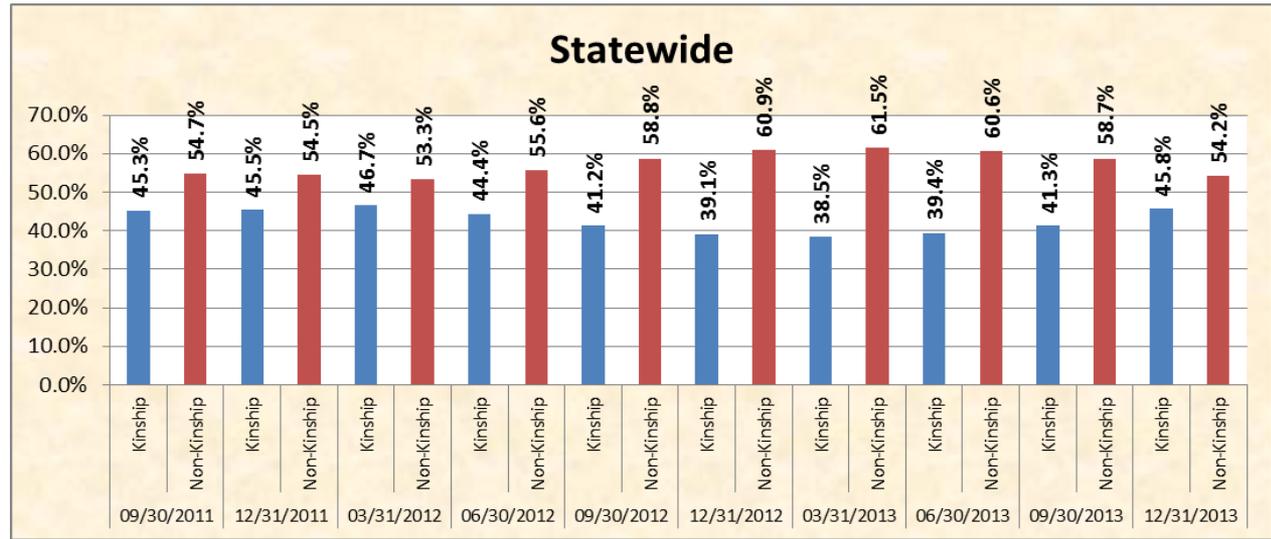
Dec 2013: Slight decrease in statewide kinship placements since last quarter.

Barriers:

Action Items:

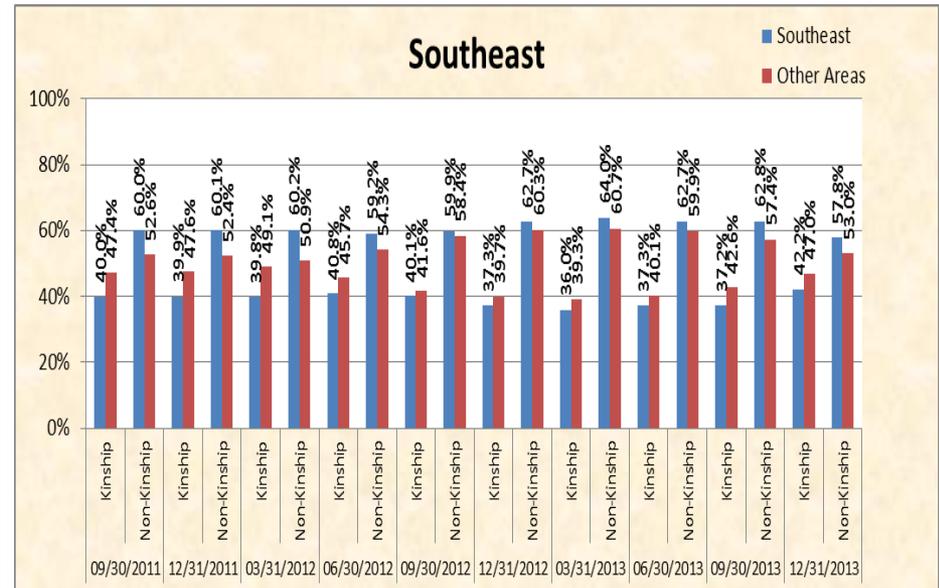
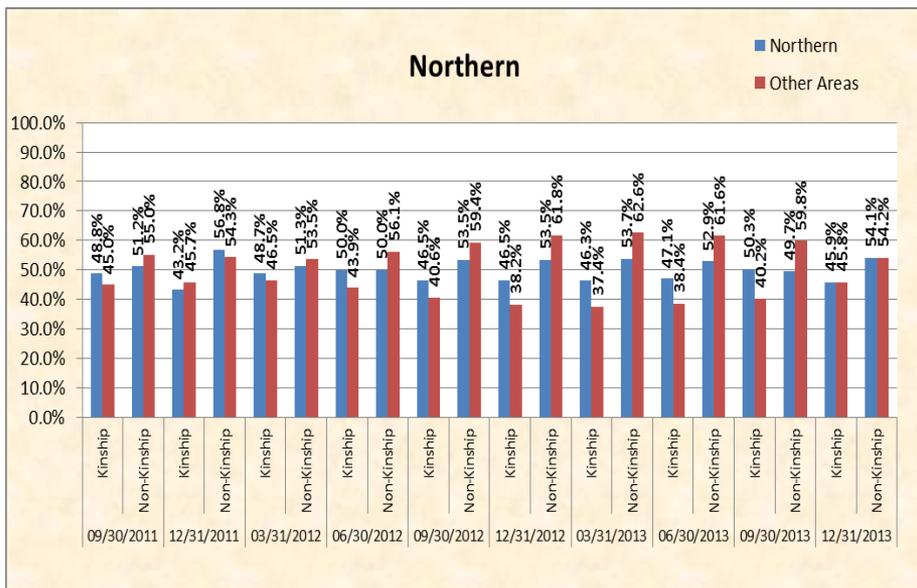
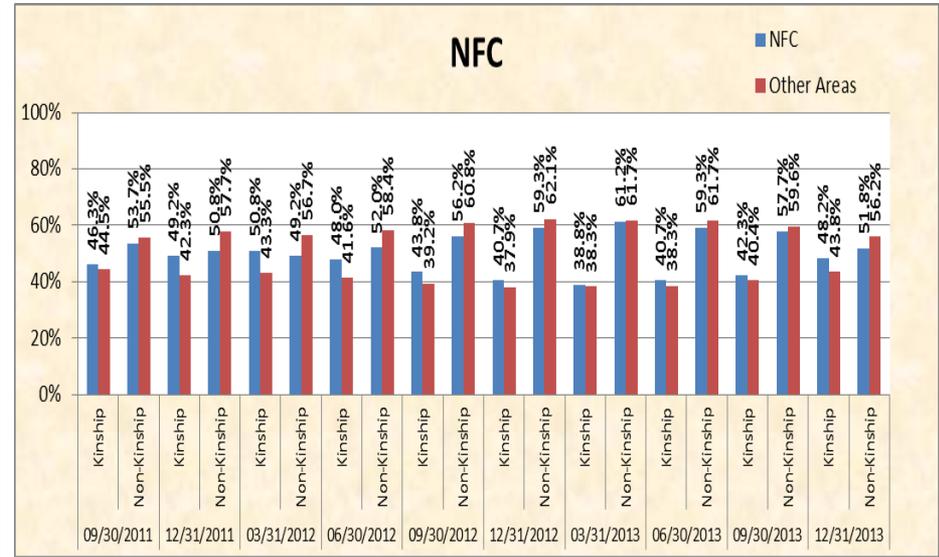
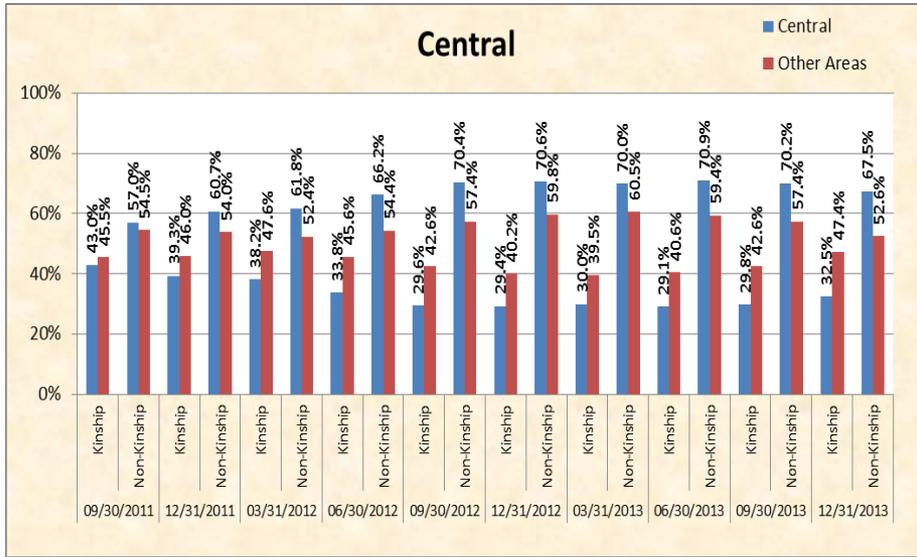
**Completed:*

**Planned:*



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:

Jan 2014: Increase in performance in all Service Areas 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).

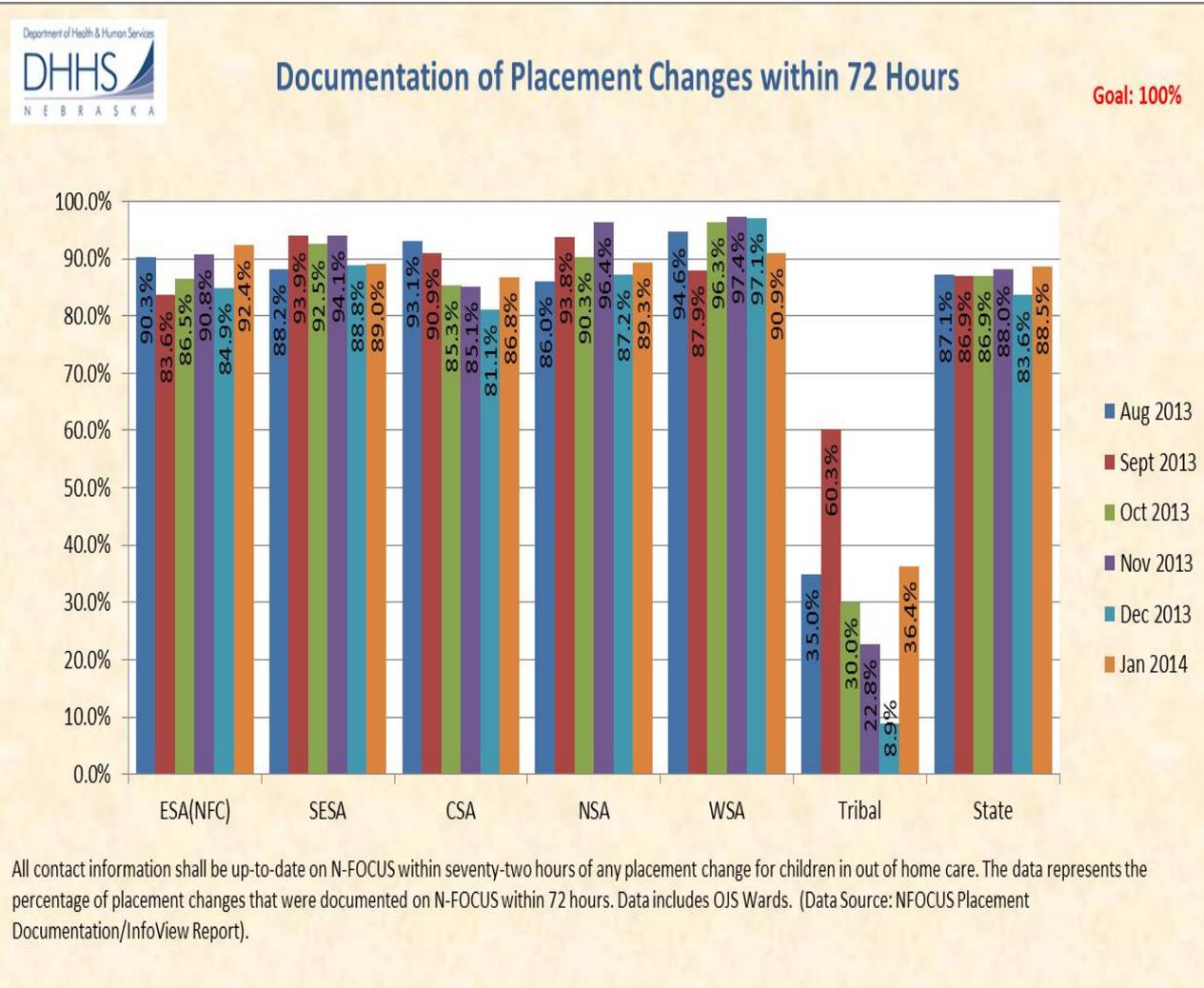
CQI Team Priority:

*Central, Northern, Southeast and Western Service Areas.

*Tribes

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

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



Family Team Meeting

Strengths/Opportunities:

Jan 2014: State performance remained at 92% this month. NSA and ESA have the highest scores at 99%

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

Barriers:

-Lack of documentation in tribal cases.

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.

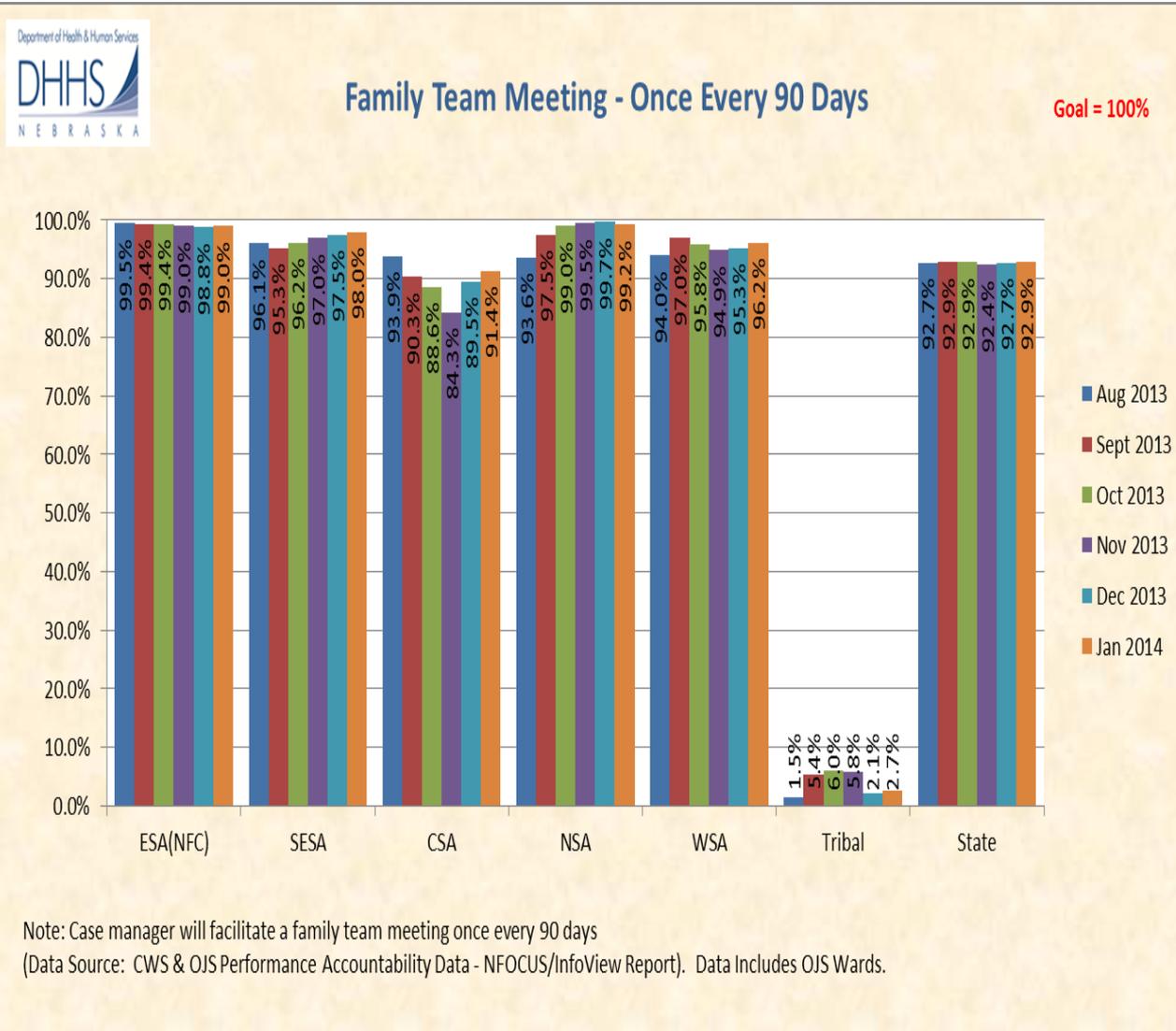
CQI Team Priority:

*Central, Eastern, Northern, and Western Service Areas

*Tribes

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

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



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:

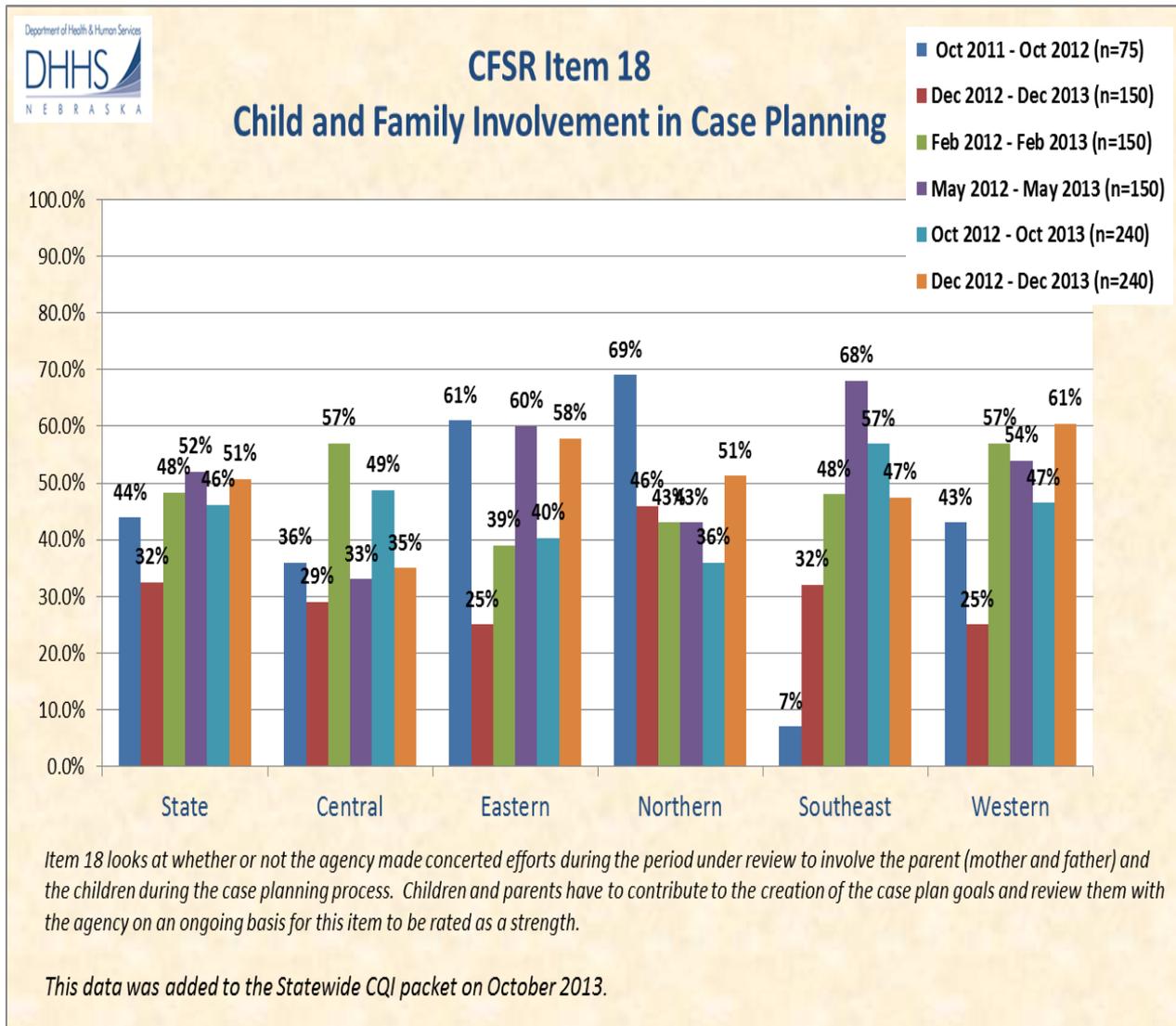
- Lack of ongoing efforts to locate and/or engage non-custodial parent in case planning (in most cases, this is the child's father).
- Lack of ongoing efforts engage developmentally appropriate children in case planning.
- Lack of good quality documentation during family team meetings and face to face 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



Federal Visitation with State Wards

Strengths/Opportunities:

Jan 2014: New Fed Fiscal Year began in October 2013. 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. State performance dropped to 94% this month. Performance is 98% and above for all Service Areas but at 4% 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:

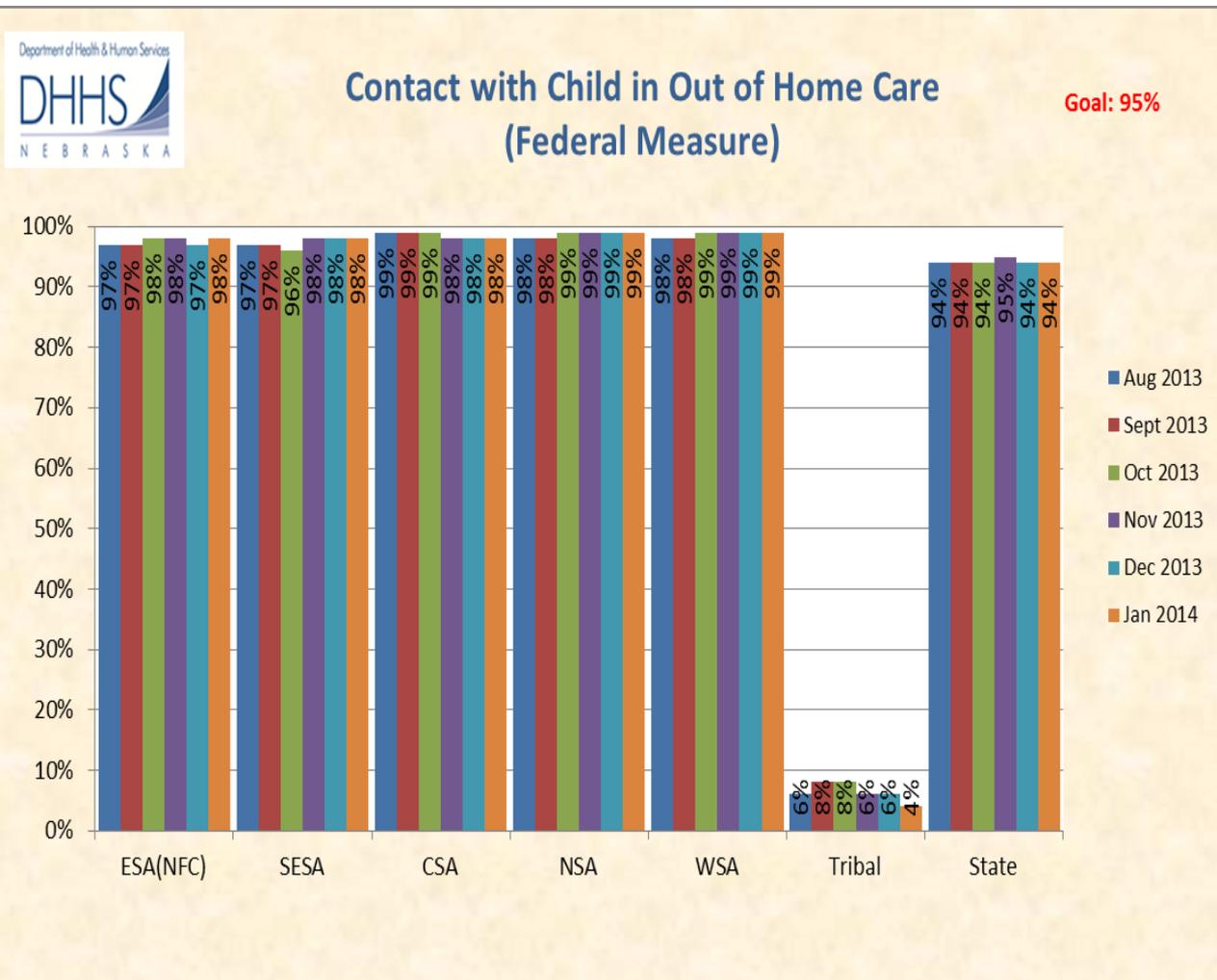
*Central and Southeast Service Areas

*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:

Jan 2014: Non Court Case - statewide performance increased to 96.5%. *Note: In May 2012, the state performance was at 53.4% for this measure.*

Jan 2014: State Wards – statewide increase to 92.3%. Performance is 97% and above for all Service Areas but only 1% 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:*

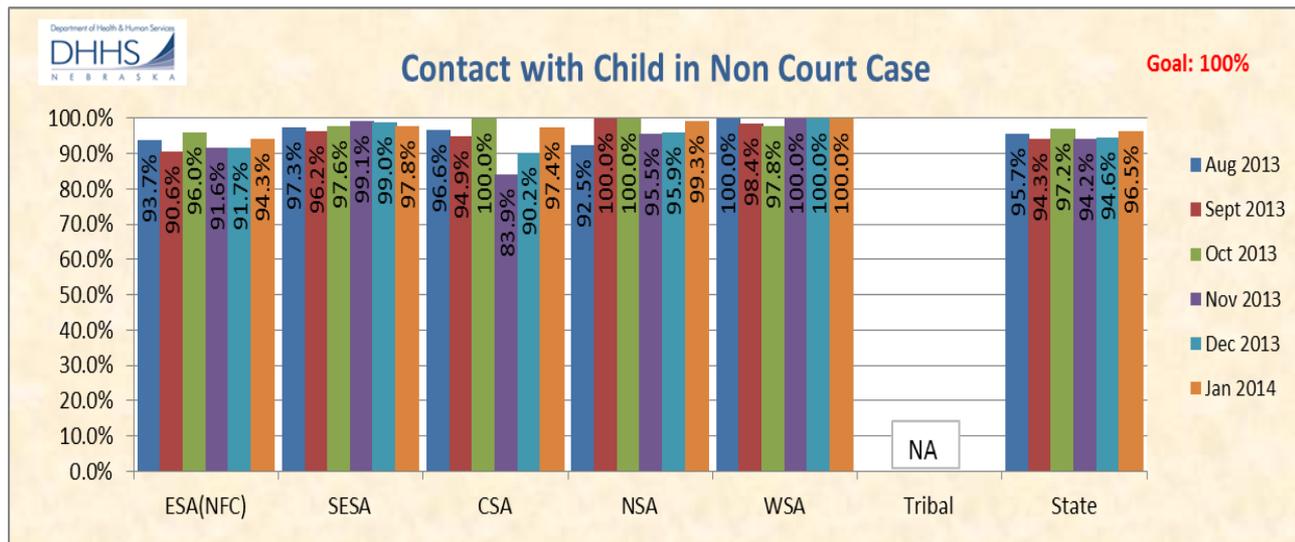
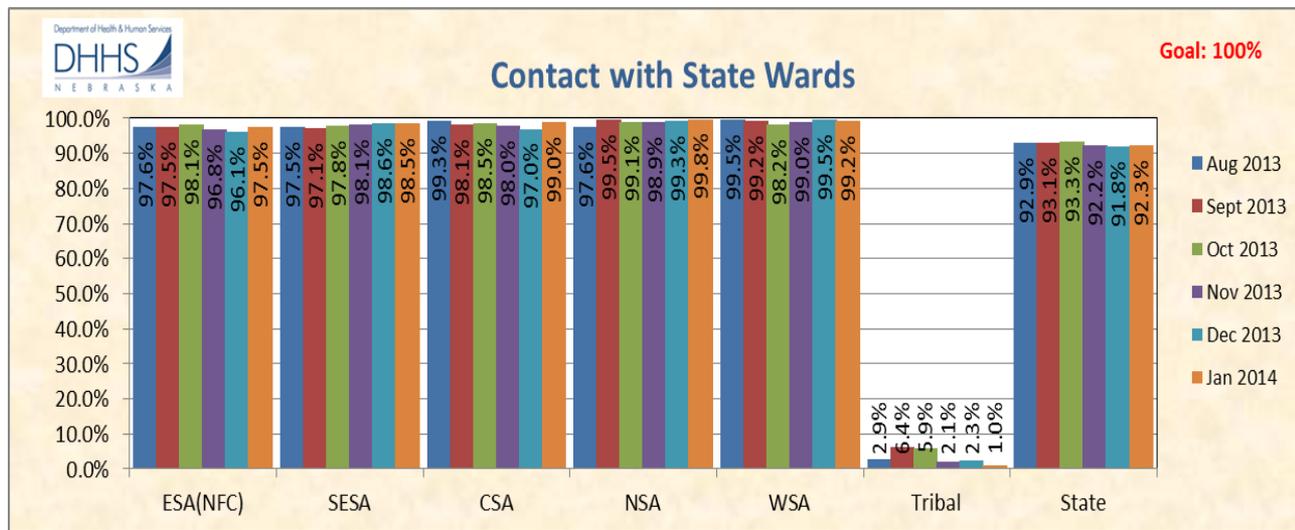
-Some Service areas are planning to implement quality reviews and training with their staff on the quality of face to face contact

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.**

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



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

Data Review Frequency: Monthly

Child, Parent & Foster Parent Needs Assessment – CFSSR 17

Strengths/Opportunities:

Note: The CFSSR 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:

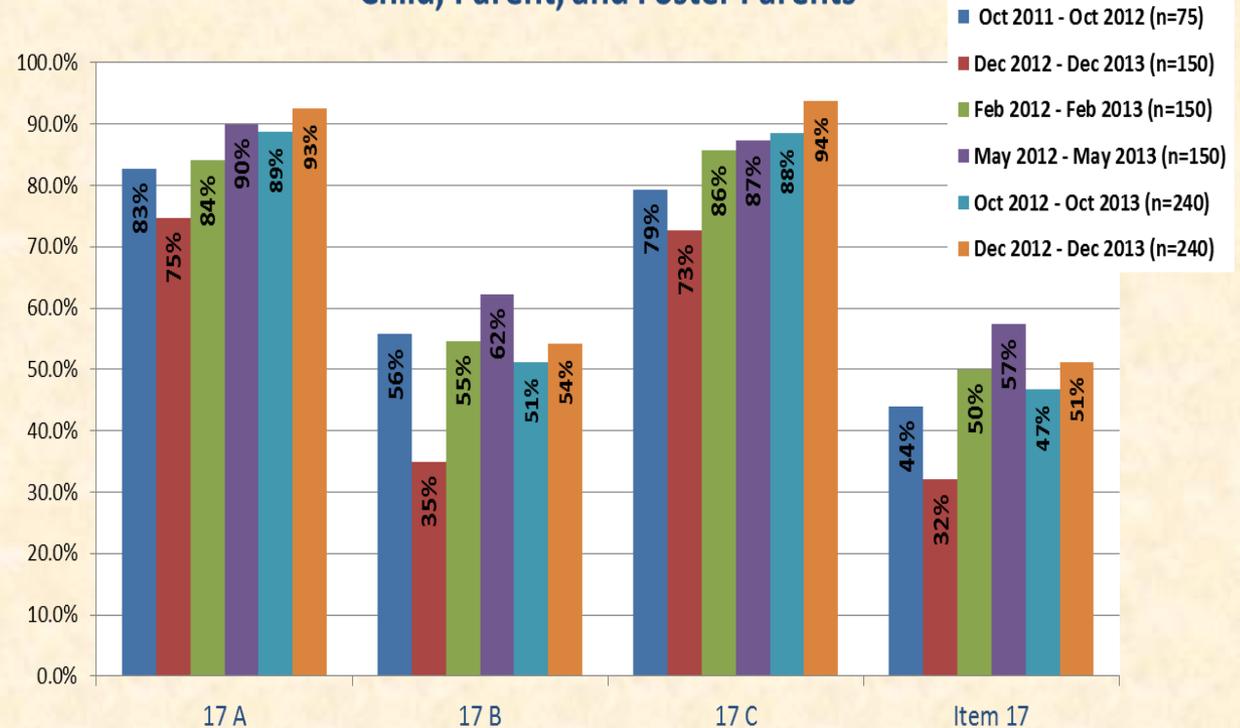
**Completed:*

**Planned:*

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



CFSSR Item 17 - Needs and Services for the Child, Parent, and Foster Parents



Item 17 on the CFSSR determines whether or not the agency made concerted efforts during the period under review to assess the child, parents and foster parents needs and provide services to meet needs that were identified. Item 17 A is about the children's needs and services, 17 B is about both the mother and father's needs and services, and 17 C is about the foster parents needs and services. The three parts of Item 17 are combined into one item as a whole to determine if the overall item is a strength or area needing improvement. Note:

This data was added to the Statewide CQI packet on October 2013.

**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:

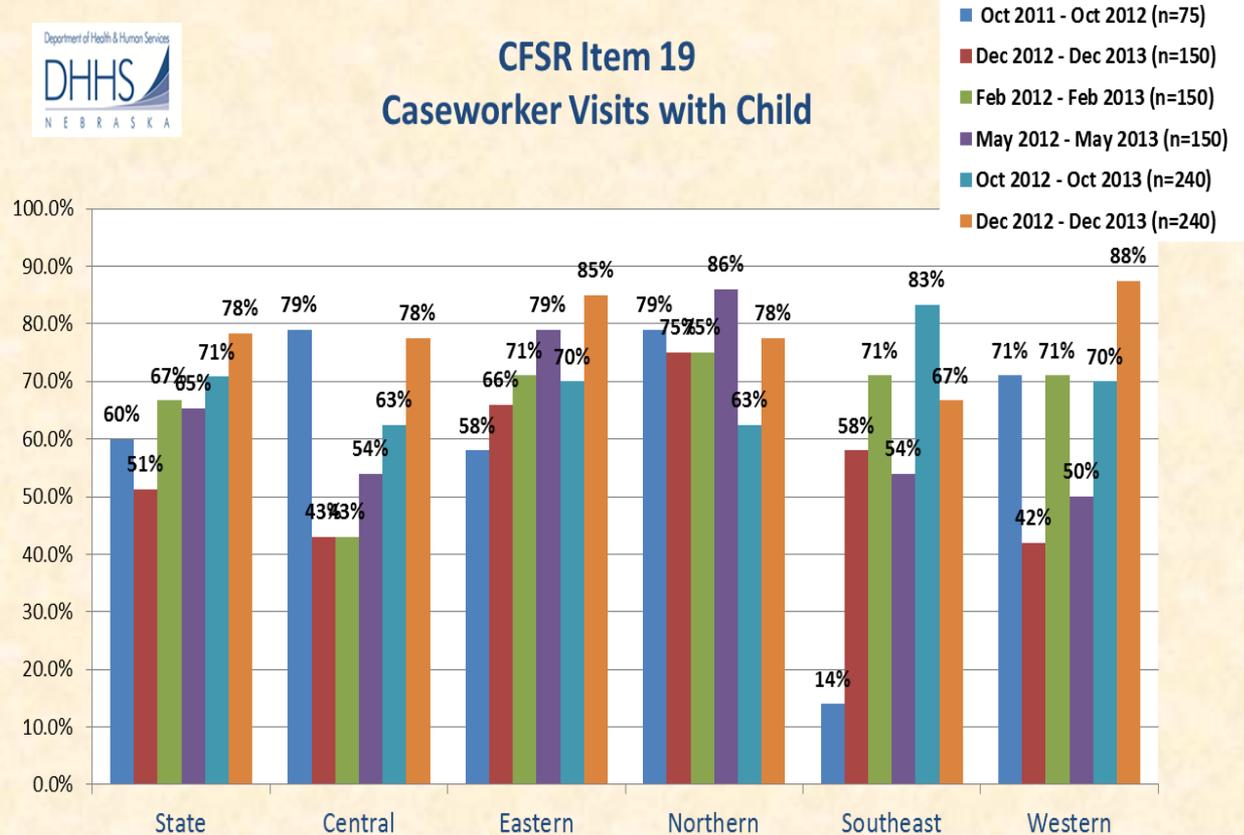
**Completed:*

**Planned:*

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



**CFSR Item 19
Caseworker Visits with Child**



Item 19 on the CSFR looks at both the frequency and quality of the caseworker visits with the children in the case. This item looks at whether or not the frequency and quality of visits between the caseworker and the children in the case were sufficient to ensure safety, permanency, and well being of the child and promote achievement of case goals. Children should be seen privately when age appropriate and at least monthly in order for this item to be counted as a strength.

This data was added to the Statewide CQI packet on October 2013.

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:

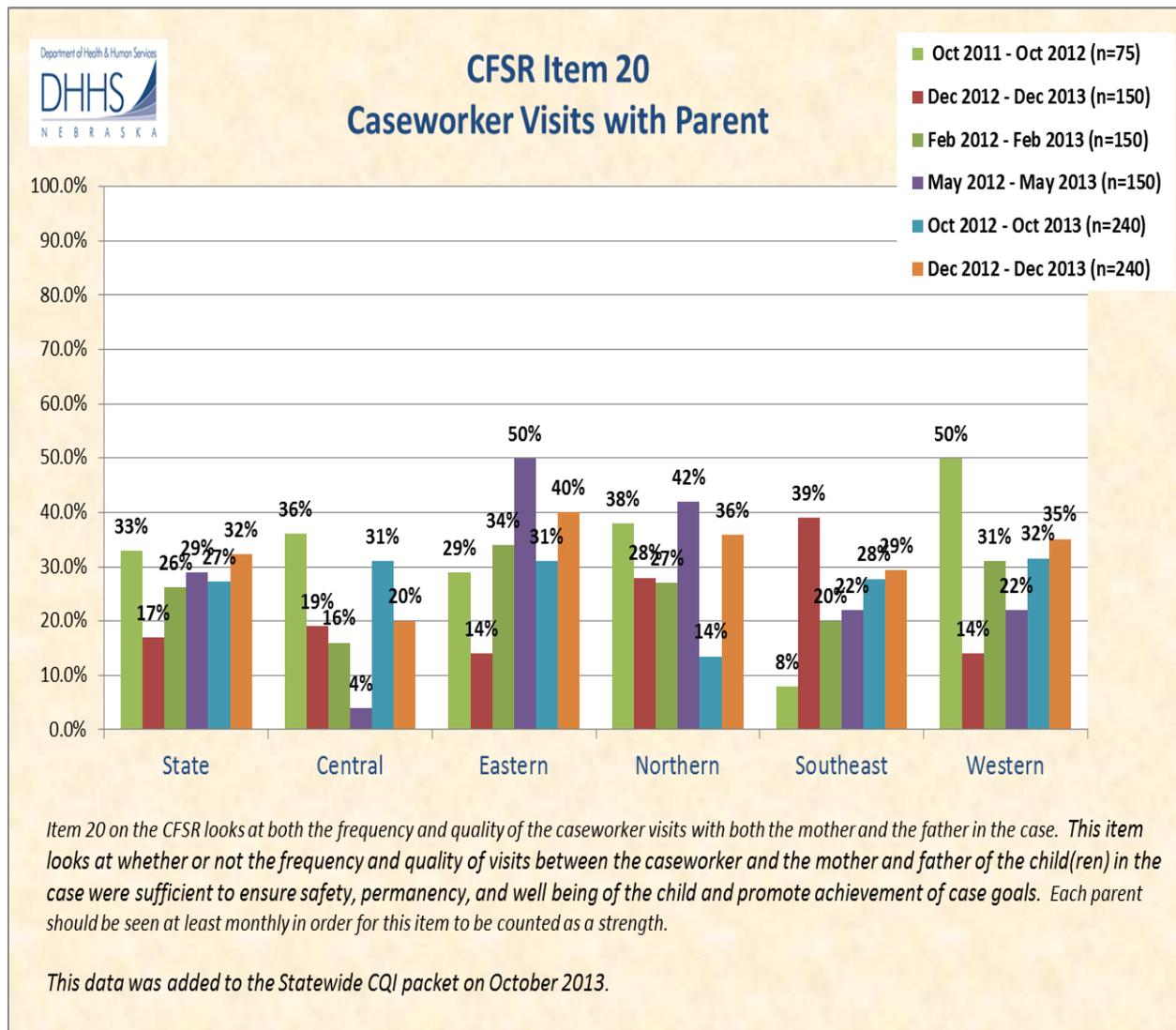
- Lack of ongoing efforts to locate and/or assess the needs of the child’s non-custodial parent (in most cases, this is the child’s father).
- Lack of good quality documentation during face to face contacts between the worker and the child, child’s mother and father. Needs assessment for the child, mother 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



STRUCTURED DECISION MAKING (SDM)

**OUTCOME STATEMENT: CHILDREN
ARE SAFELY MAINTAINED IN THEIR
HOMES WHENEVER 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	# of All Youth with No Finalized Risk-Re or Reunification Assessments		
	Dec	Jan	Feb
State	246	300	224
CSA	27	45	49
ESA	85	121	73
NSA	53	60	60
SESA	39	33	14
WSA	42	41	28

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:*

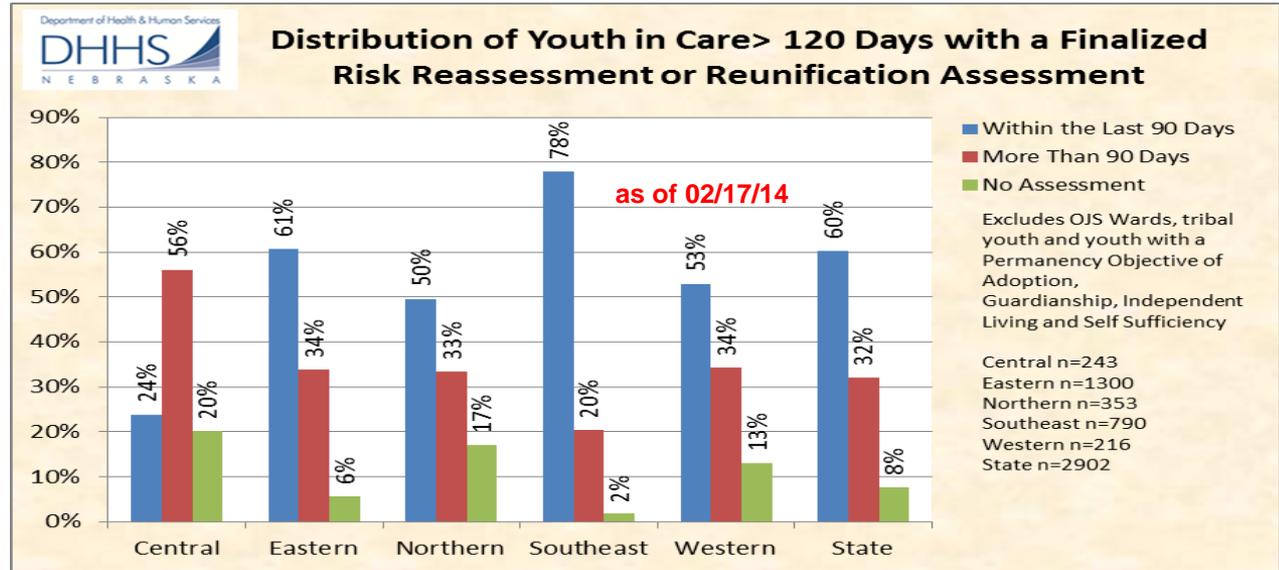
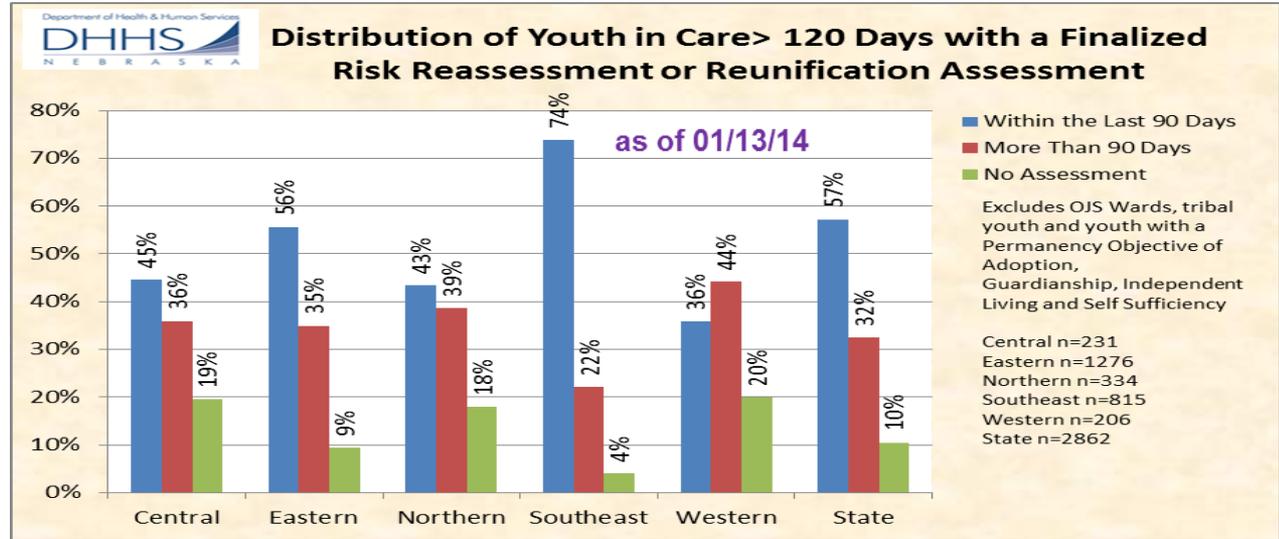
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

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



SDM Risk Re & Reunification Assessments

Strengths/Opportunities:

# of State Wards with No Finalized Risk-Re or Reunification Assessments			
	Dec	Jan	Feb
State	193	227	171
CSA	23	33	33
ESA	55	76	57
NSA	42	49	42
SESA	36	30	13
WSA	37	39	26

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:*

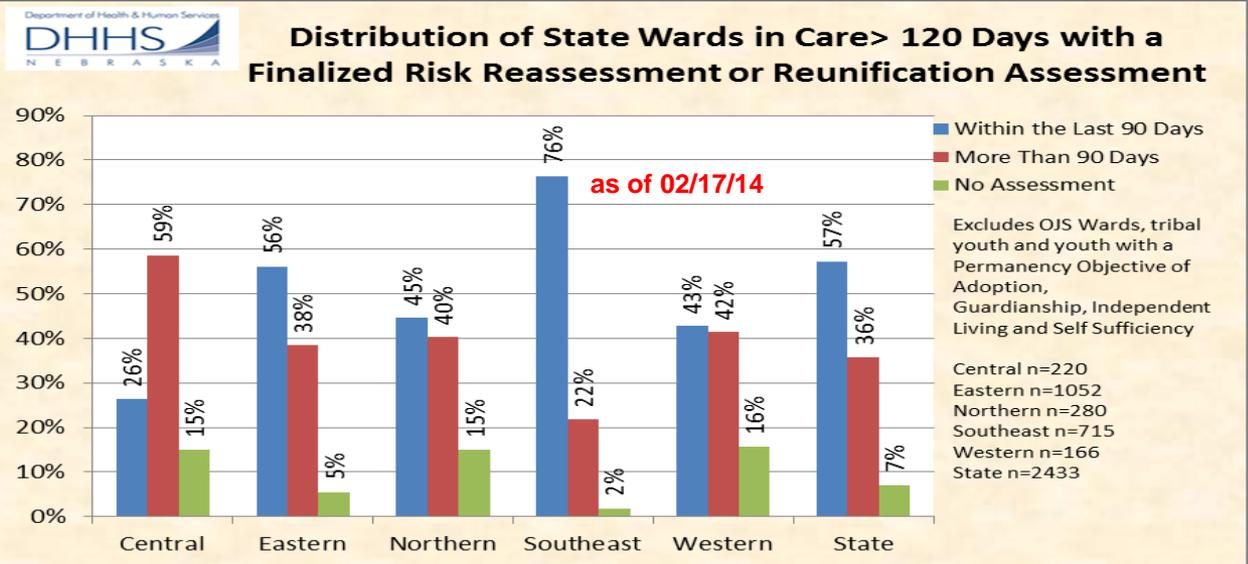
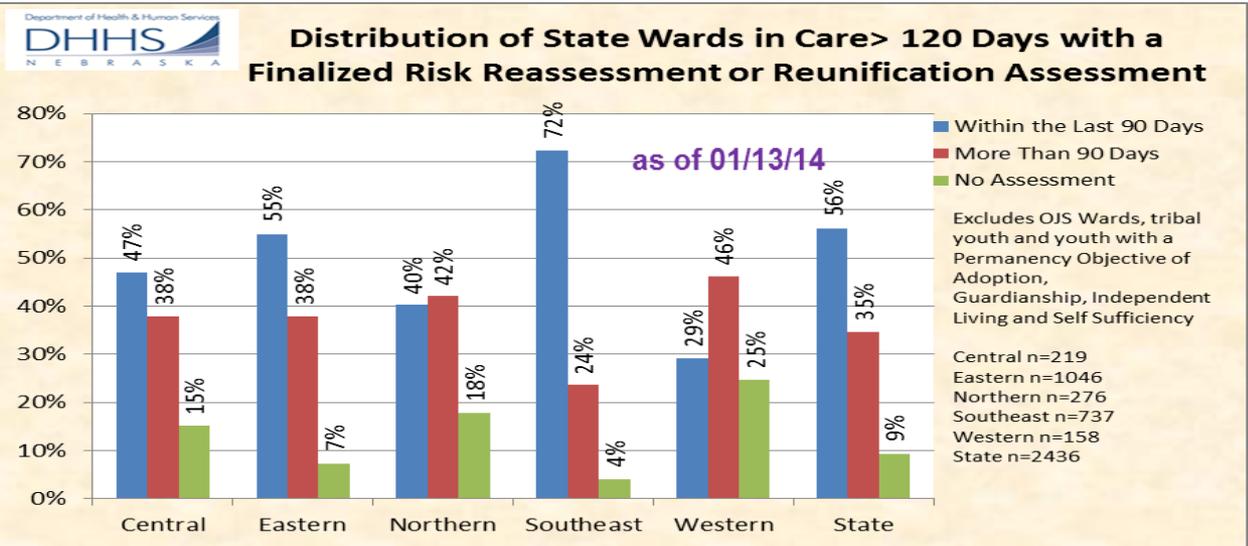
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

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



SDM Risk Re & Reunification Assessments

Strengths/Opportunities:

	# of Non-Court Youth with No Finalized Risk-Re or Reunification Assessments		
	Dec	Jan	Feb
State	53	75	53
CSA	4	12	16
ESA	30	47	16
NSA	11	11	18
SESA	3	3	1
WSA	5	2	2

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:*

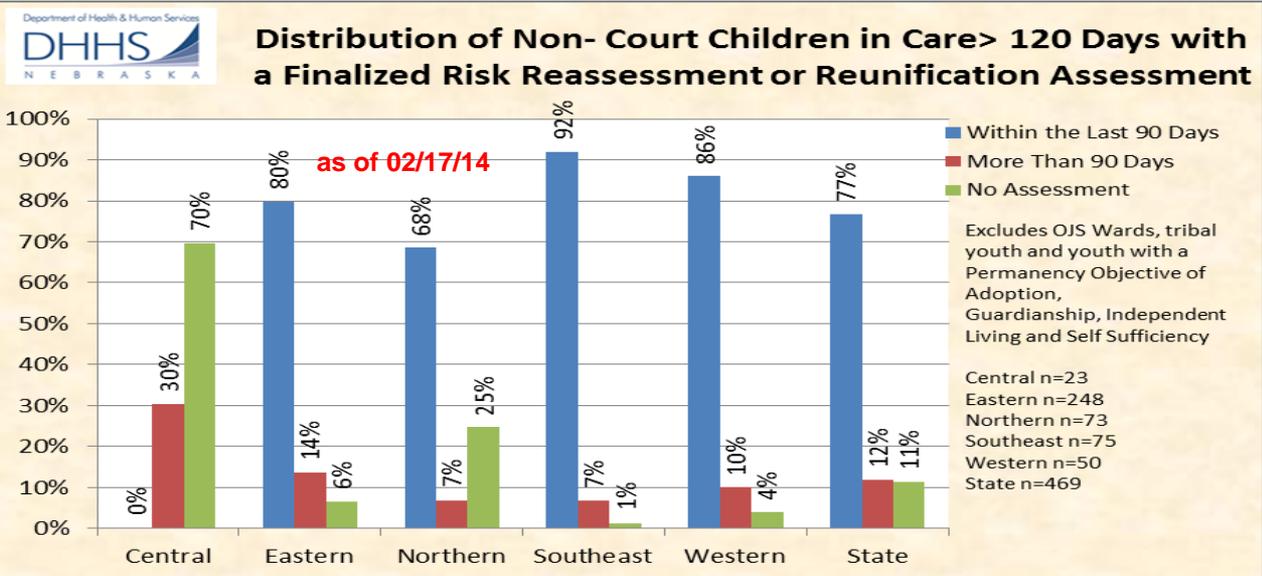
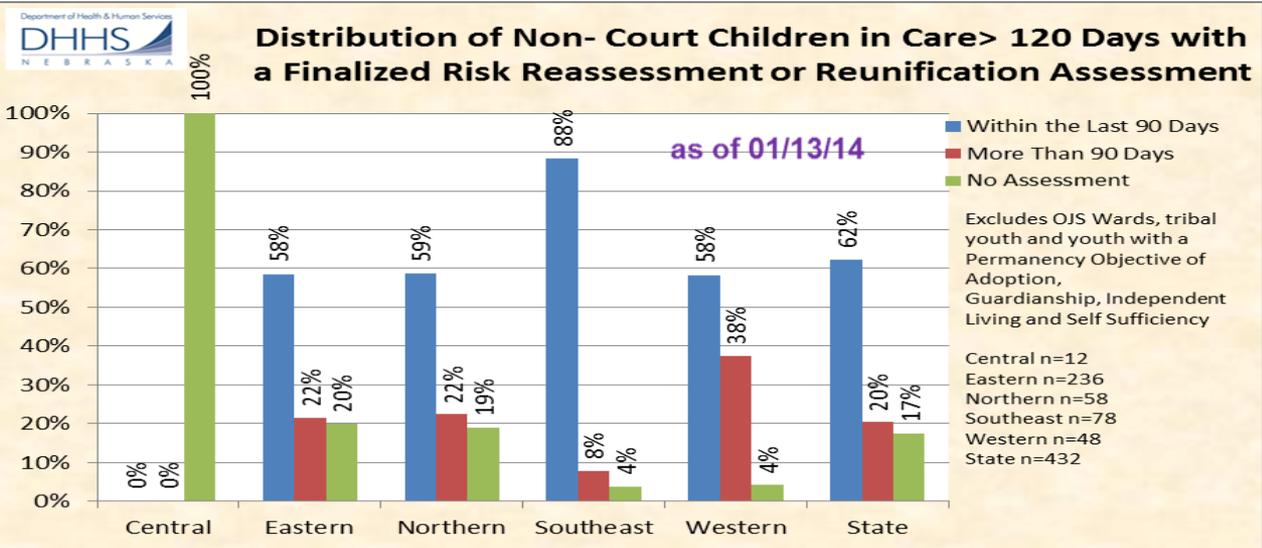
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

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



SDM Family Strengths and Needs Assessment (FSNA)

Strengths/Opportunities:

# of ALL Youth with No Finalized FSNA			
	Dec	Jan	Feb
State	126	123	87
CSA	16	22	27
ESA	18	23	20
NSA	34	25	15
SESA	7	5	5
WSA	51	48	20

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:*

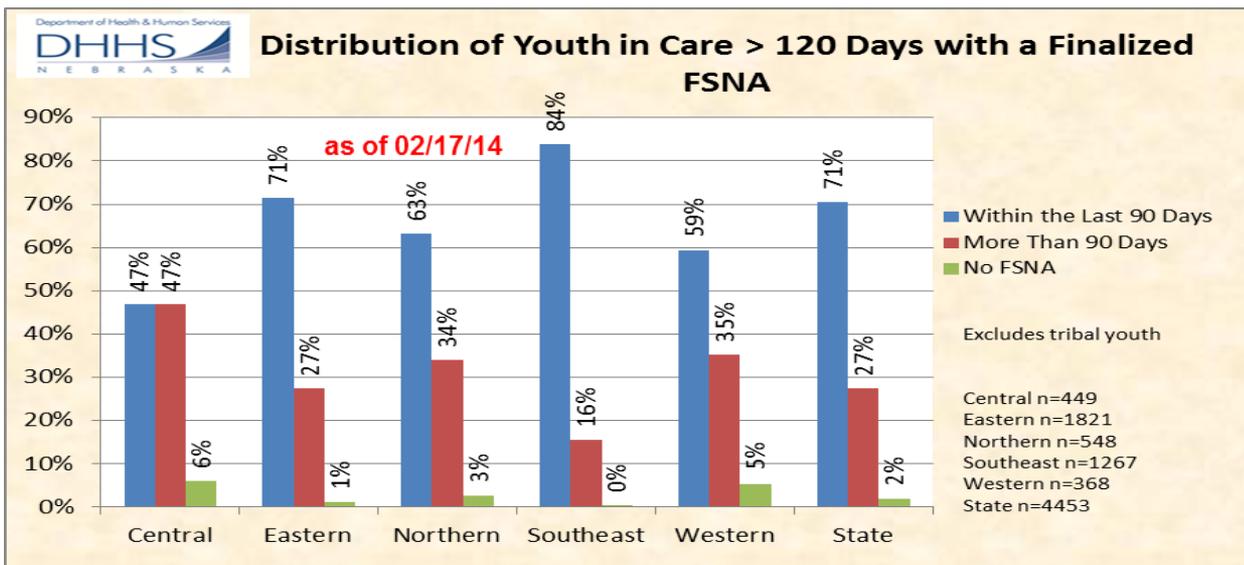
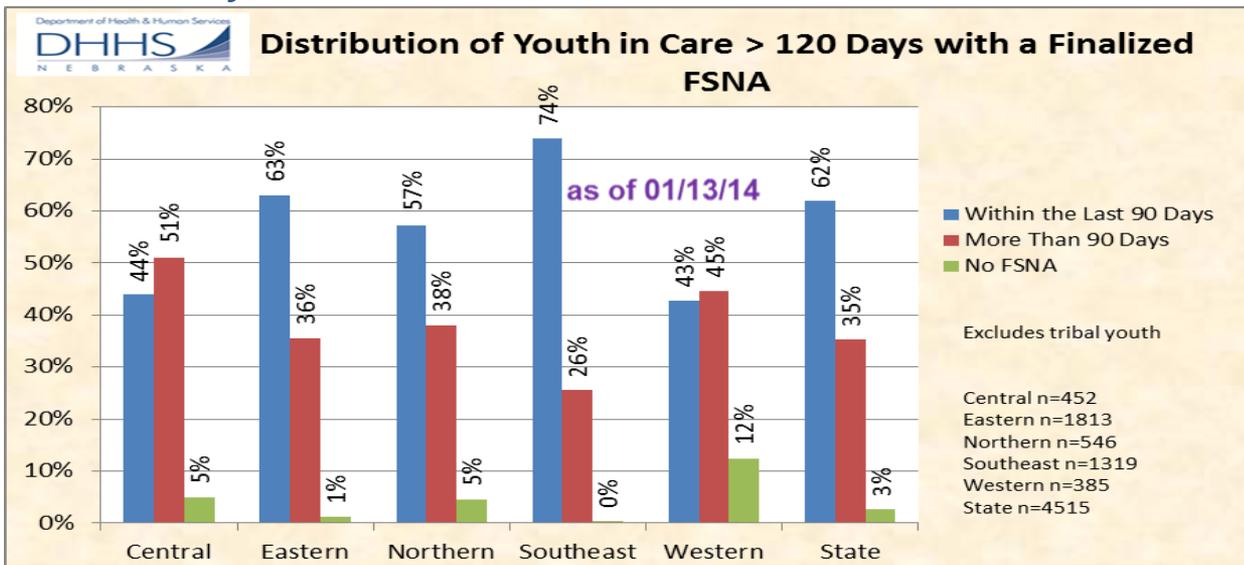
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

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	Dec	Jan	Feb
State	108	100	77
CSA	13	19	23
ESA	13	9	15
NSA	30	25	15
SESA	6	5	4
WSA	46	42	20

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:*

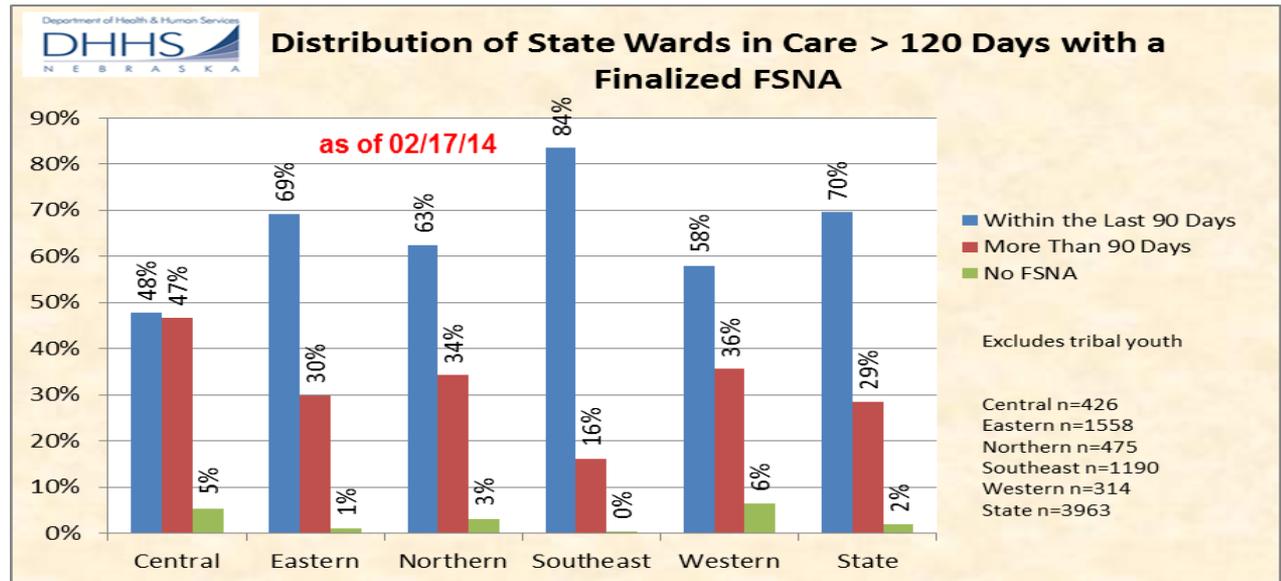
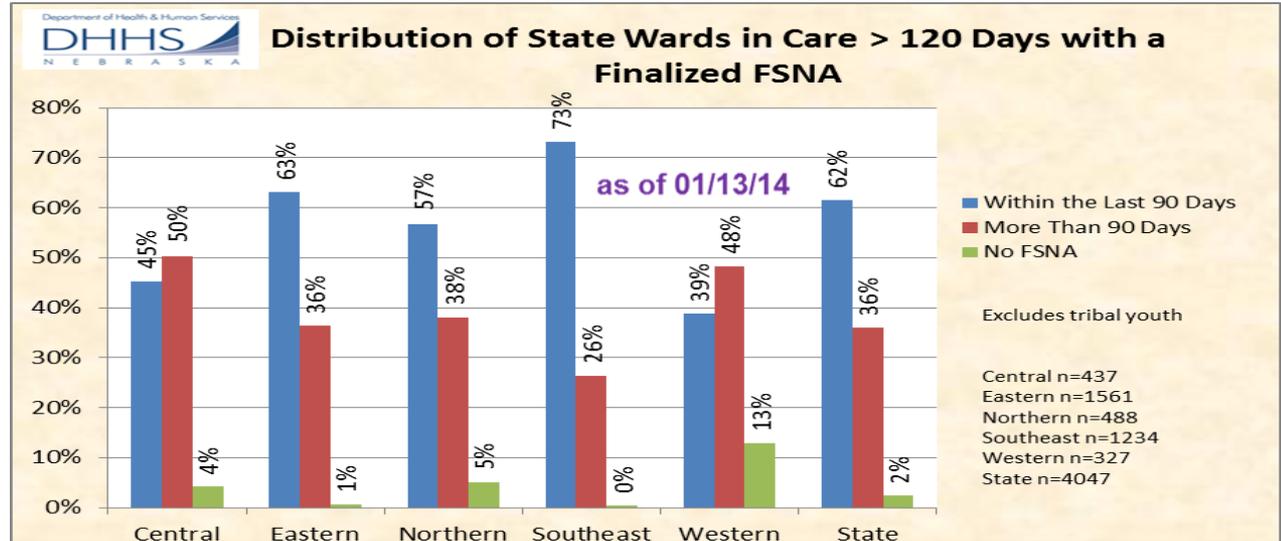
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

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 Non Court Children with NO Finalized FSNA	FSNA		
	Dec	Jan	Feb
State	18	23	10
CSA	3	3	4
ESA	5	14	5
NSA	4	0	0
SESA	1	0	1
WSA	5	6	0

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:

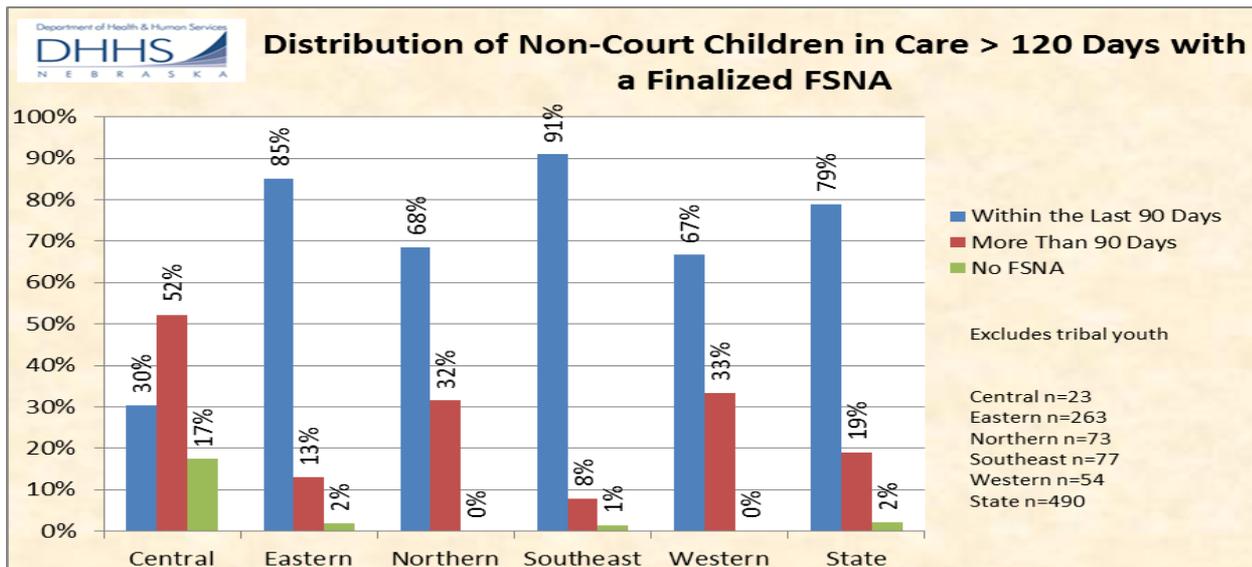
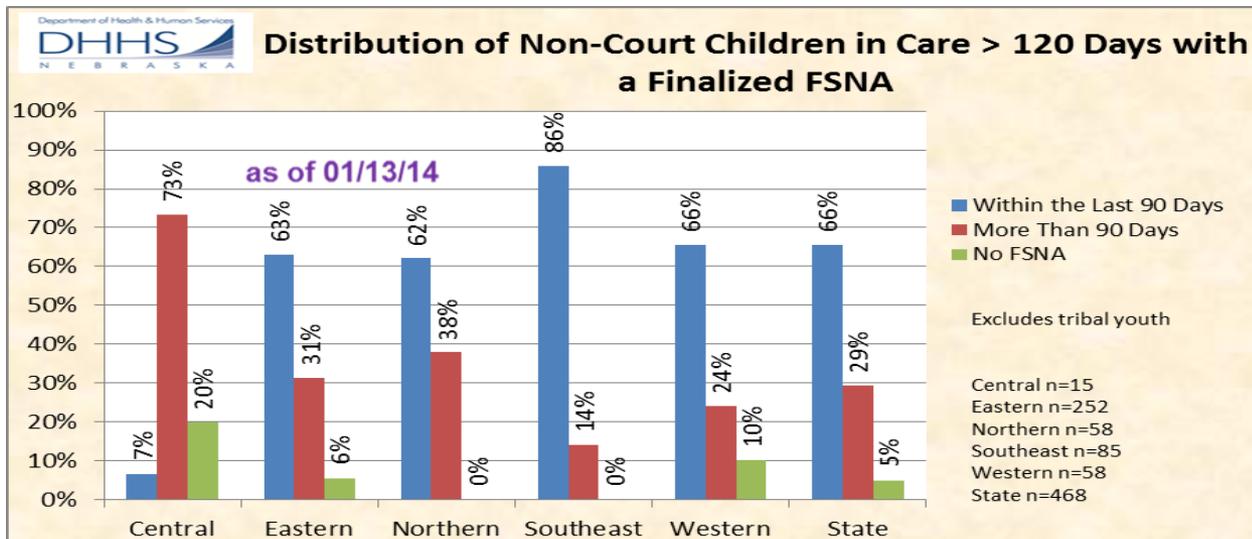
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

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 Administrative Reviews

Strengths/Opportunities:

Jan 2014: Increase to 10 Admin Reviews. No Admin had more than 2.

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:

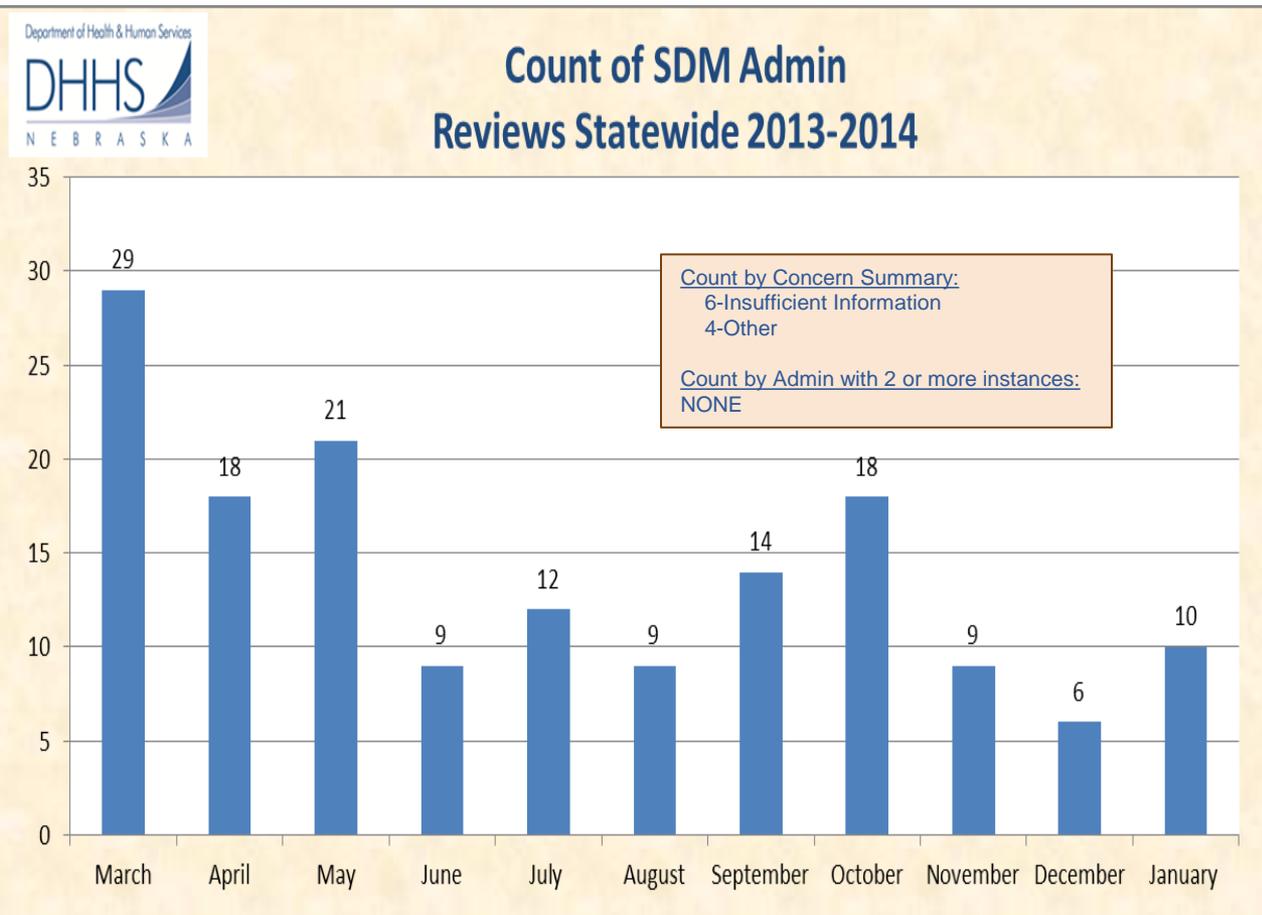
- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together 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



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.

Data Review Frequency: Monthly

SDM Assessment Quality Results – Finalized Timely

Strengths/Opportunities:

Jan 2014: Increase in timeliness in Ongoing SDM.

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:

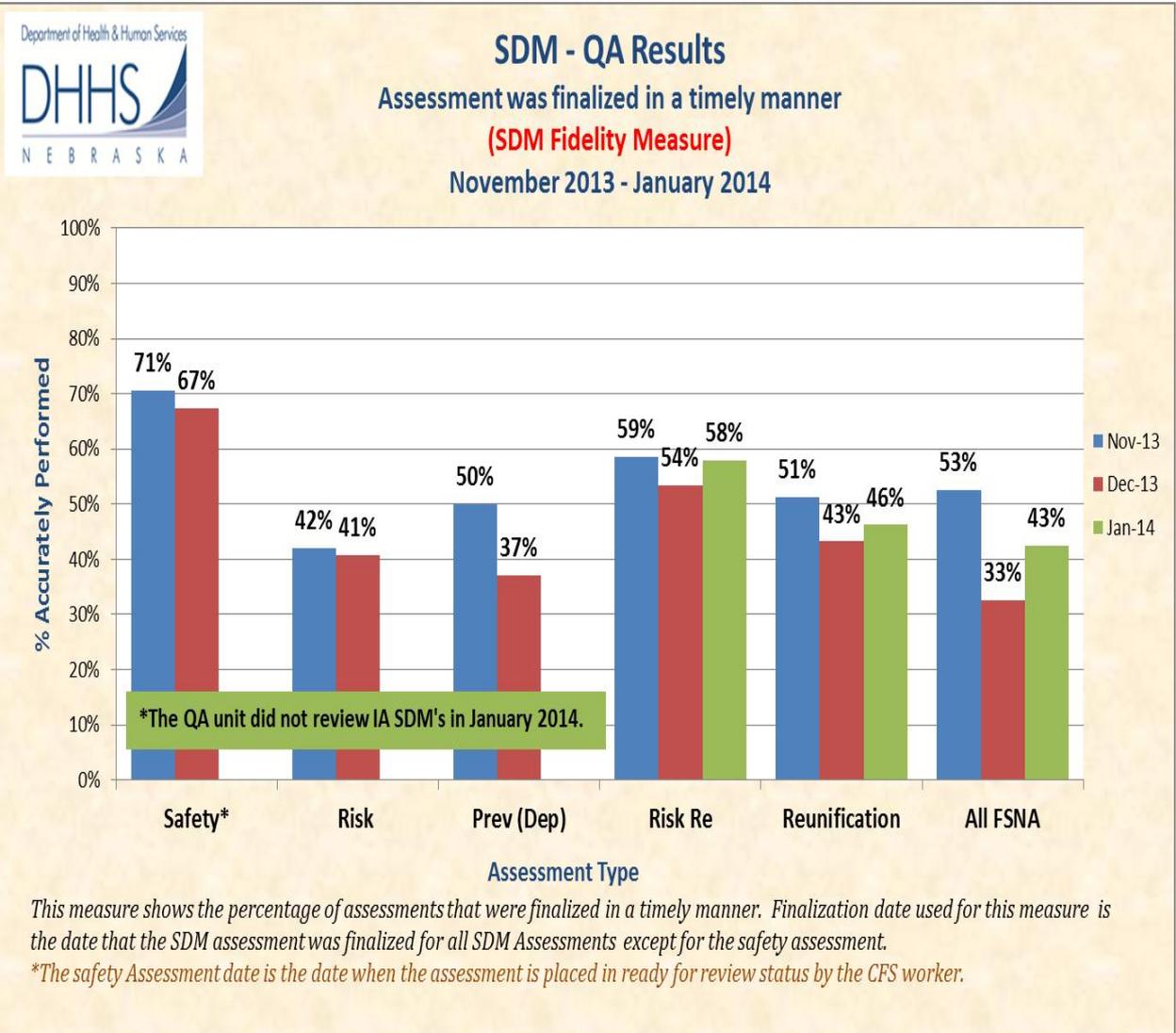
- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together 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



SDM Ongoing Assessment Quality Results

Strengths/Opportunities:

Jan 2014: Reunification Assessment continues to be the one that staff struggle with the most.

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.

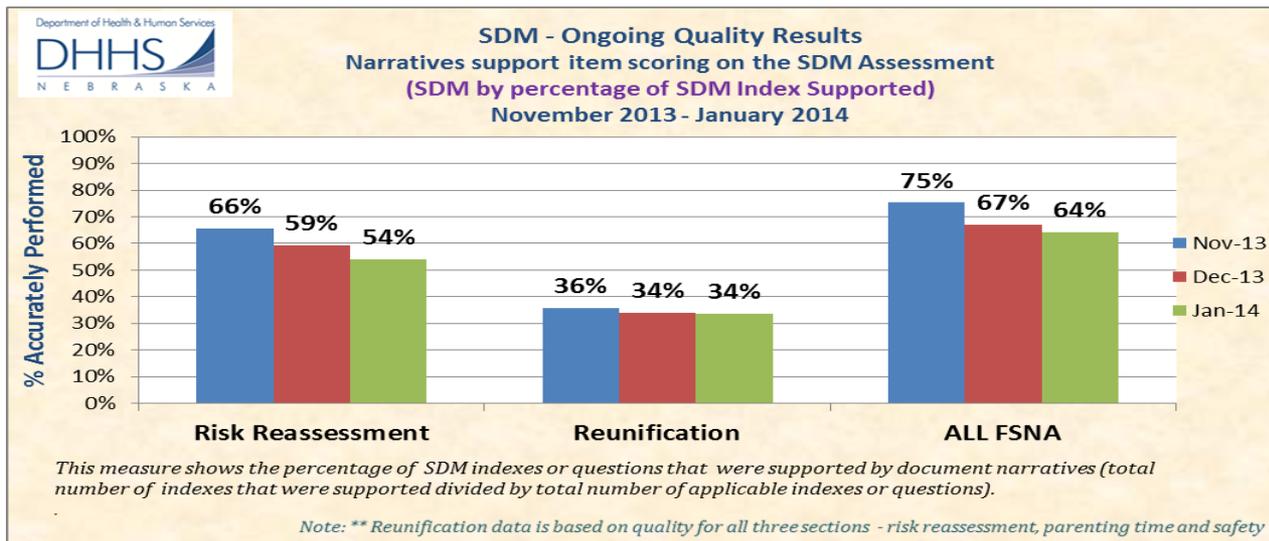
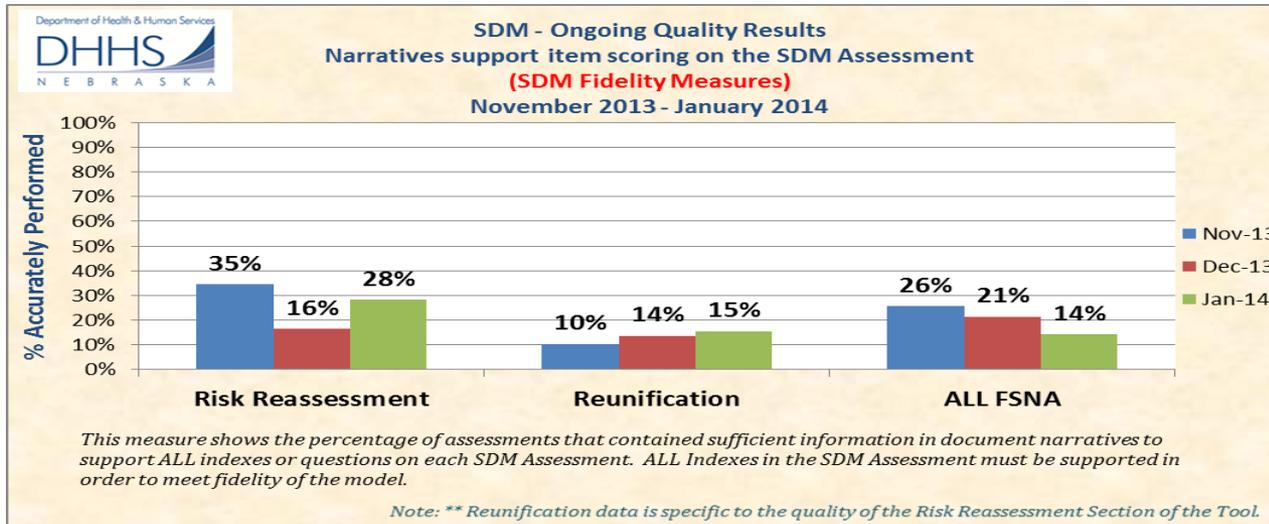
CQI Team Priority:

* 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.).

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:

Feb 2014: Highest Compliance in CSA (100%) and Lowest in WSA (67%)

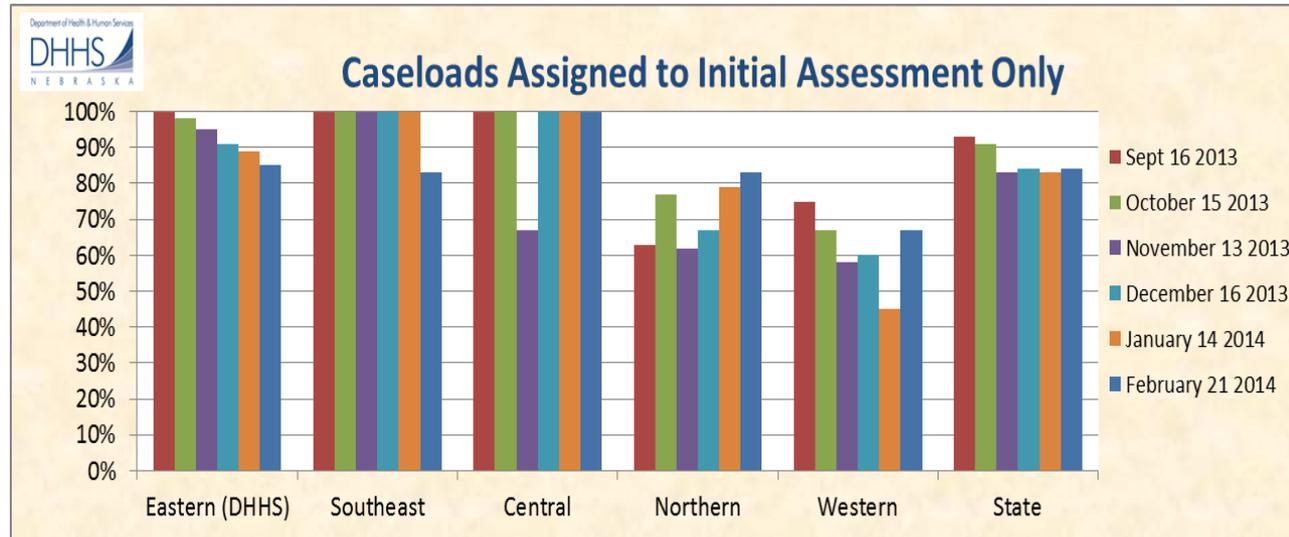
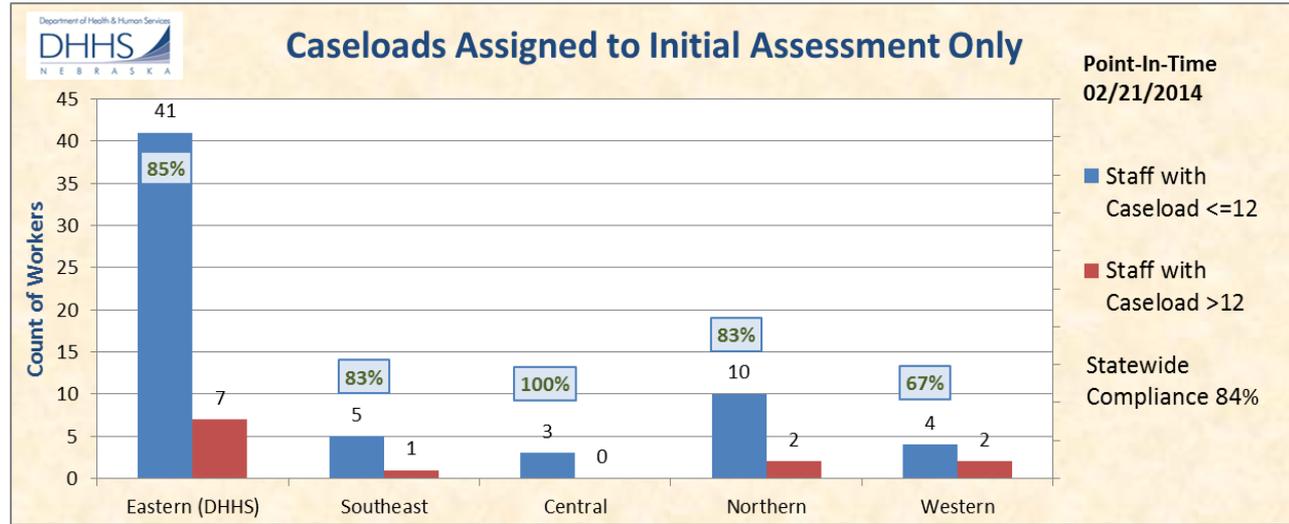
Barriers:

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:

Feb 2014: Decrease in statewide compliance to 70%. Highest compliance in ESA and lowest in WSA.

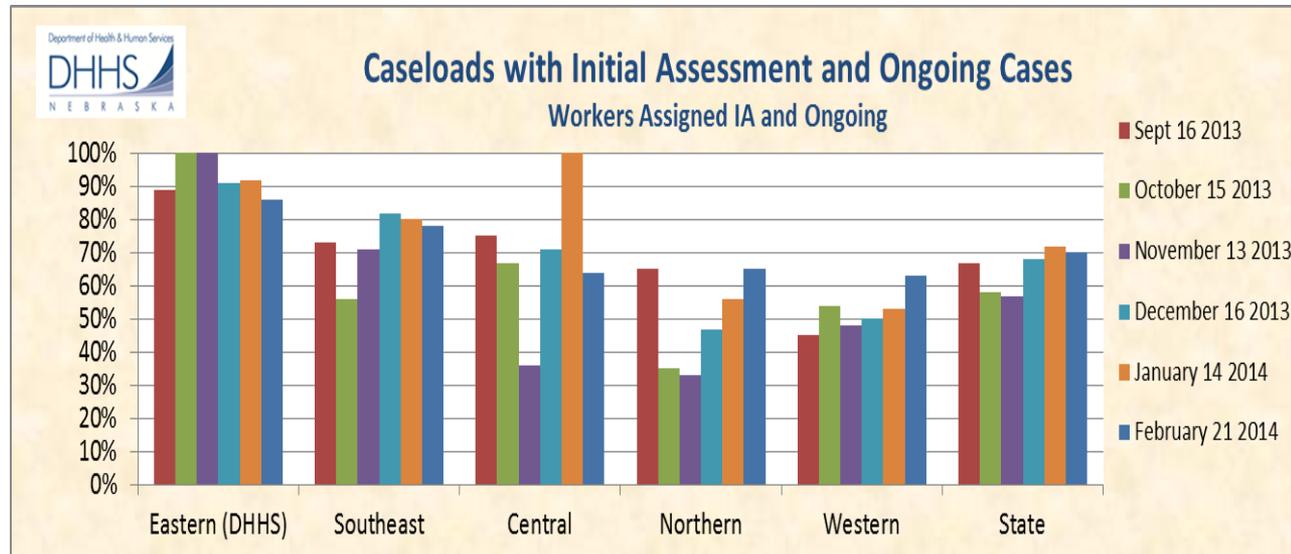
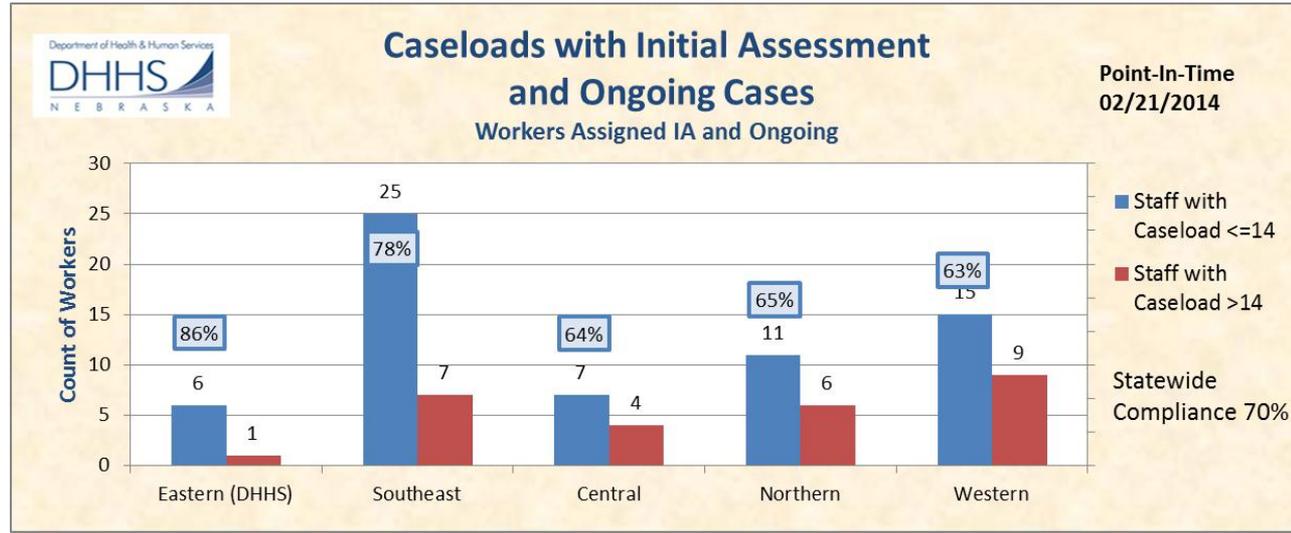
Barriers:

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:

Feb 2014: Increase in Statewide Compliance to 78%. Highest compliance in WSA (100%) and lowest compliance in CSA (55%).

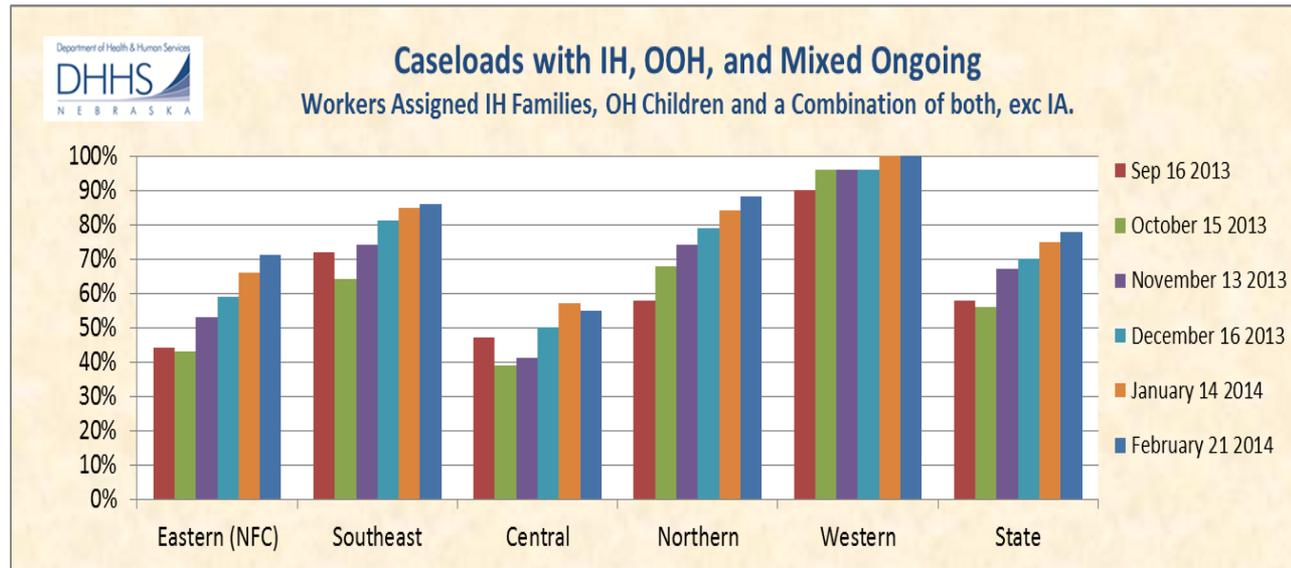
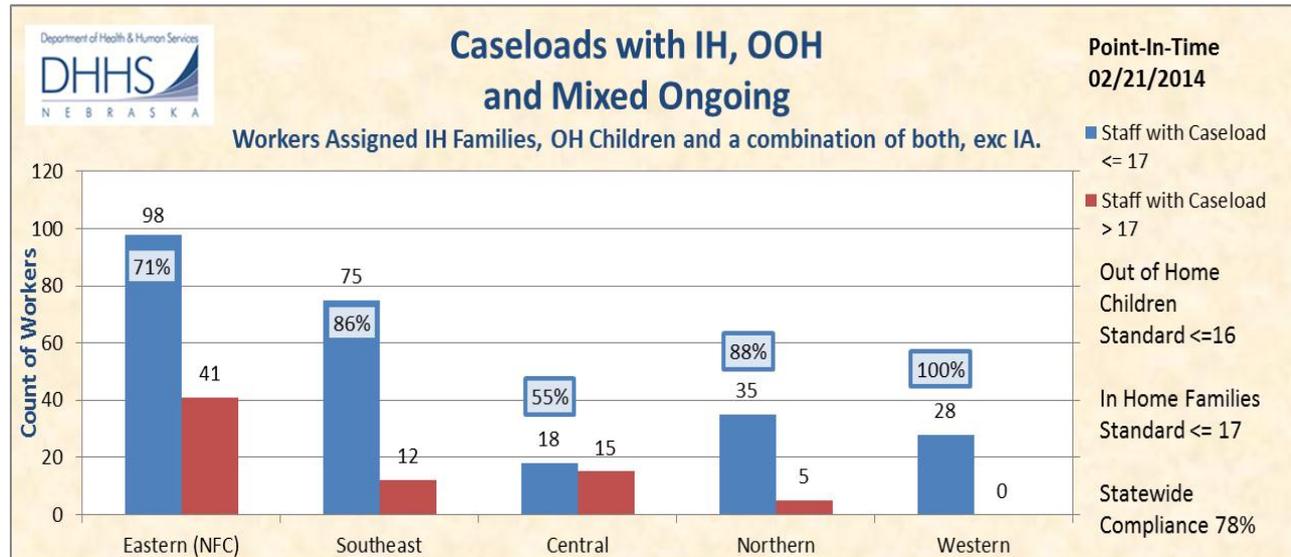
Barriers:

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:

Feb 2014: Increase in Overall Compliance to 77%. Initial Assessment Only Caseloads have the highest compliance at 84% while Combined IA and Ongoing caseloads have the lowest compliance at 70%.

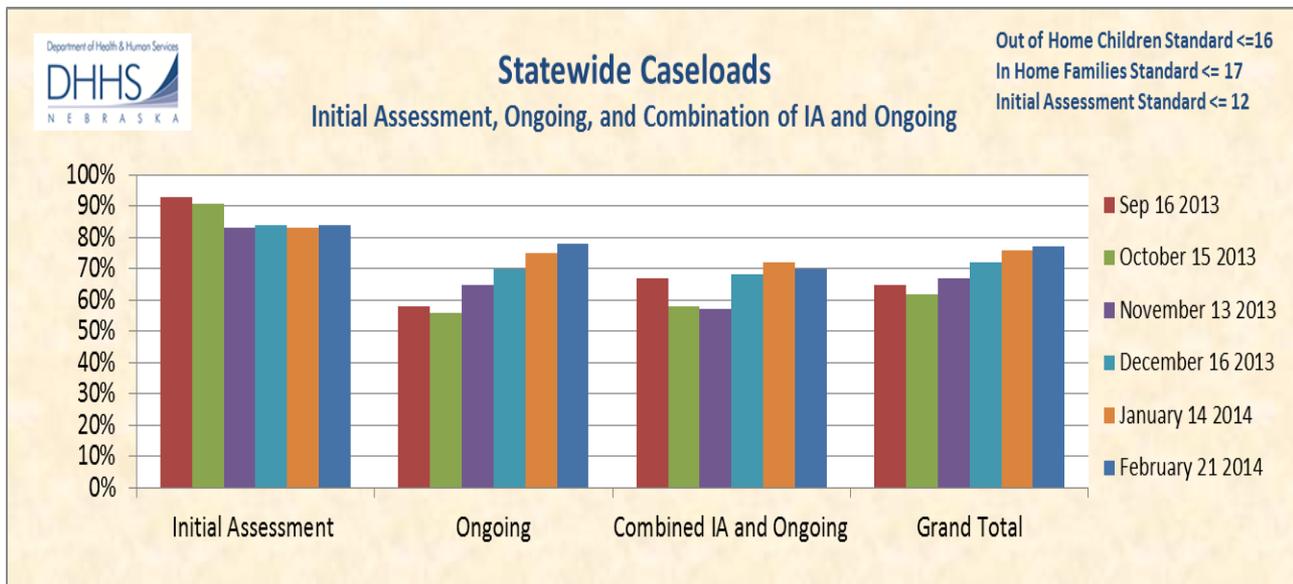
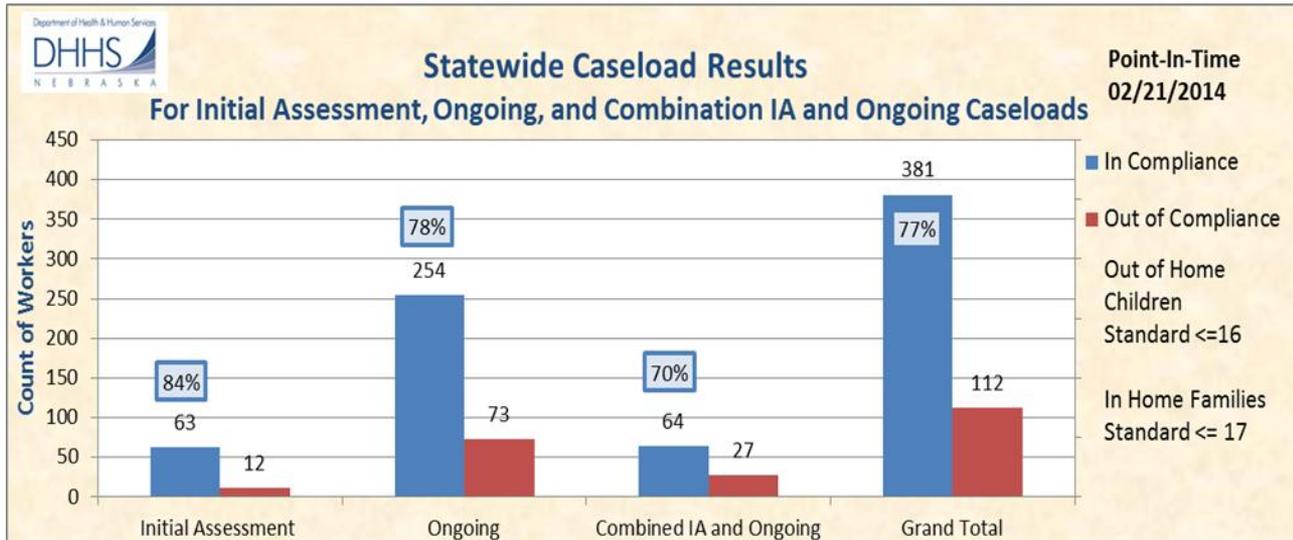
Barriers:

Action Items:

**Completed:*

**Planned:*

Data Review Frequency: Monthly



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

CFS Staff Turnover

Strengths/Opportunities:

-Jan 2014: 10 CFS Specialists and 1 Trainee left 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	Jan 2013	Feb 2013	Mar 2013	Apr 2013	May 2013	June 2013	July 2013	Aug 2013	Sept 2013	Oct 2013	Nov 2013	Dec 2013	Jan 2014
CFS Spec Trainee	4.26%	0.00%	0.00%	1.89%	1.89%	6.12%	7.32%	14.29%	5.13%	4.26%	4.88%	5.56%	3.33%
CFS Specialist	1.17%	1.81%	2.04%	1.26%	1.99%	2.21%	2.21%	3.03%	1.01%	1.78%	1.54%	0.00%	2.63%
CFS Supervisors	0.00%	0.00%	0.00%	1.32%	1.32%	2.74%	2.82%	2.90%	0.00%	0.00%	0.00%	0.00%	0.00%

Turnover Percent

Jan 2014

Title	CSA PS	ESA PS	NSA PS	SESA PS	WSA PS
CFS Spec Trainee	0.00%	0.00%	0.00%	9.09%	0.00%
CFS Specialist	2.44%	1.10%	3.17%	4.69%	0.00%
CFS Supervisors	0.00%	0.00%	0.00%	0.00%	0.00%

Turnover Counts

Jan 2014

Title	CSA PS	ESA PS	NSA PS	SESA PS	WSA PS
CFS Spec Trainee	0	0	0	1	0
CFS Specialist	1	1	2	6	0
CFS Supervisors	0	0	0	0	0

Aggregate Counts

Title	Total Employee	Term Employee	Turnover
CFS Spec Trainee	30	1	3.33%
CFS Specialist	380.5	10	2.63%
CFS Supervisors	67.8	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:

Jan 2014: Increase in turnover for FPS Trainees and FP Supervisors.

Barriers:

Action Items:

**Completed:*

**Planned:*

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

NEBRASKA FAMILIES COLLABORATIVE TURNOVER PERCENT*												
Title	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-13
FPS Trainee	0%	66.60%	0%	14.20%	0%	0	0%	0%	9.09%	0%	8.33%	9.09%
FPS	2.04%	4.22%	5.00%	2.15%	4.44%	5.22%	4.61%	11%	3.27%	2.32%	3.82%	3.67%
FP Supervisor	0%	0%	0%	0%	0%	4.76%	4.54%	5%	0%	0%	0%	5.55%

*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 – Jan 2014			
Title	Total Employees	Term Employees	Turnover
FPS Trainee	11	1	9.09%
FPS	136	5	3.67%
FP Supervisor	18	1	5.55%

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

YRTC Staff Turnover

Strengths/Opportunities:

Jan 2014: YSS II in Kearney – left state employment this month.

Barriers:

Action Items:

**Completed:*

**Planned:*

YRTC Turnover Percent*

Title	Jan 2013	Feb 2013	Mar 2013	Apr 2013	May 2013	June 2013	July 2013	Aug 2013	Sept 2013	Oct 2013	Nov 2013	Dec 2013	Jan 2014
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%	0.00%	2.35%
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%	5.00%	2.84%

Turnover Percent Jan 2014

Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0.00%	0.00%
YOUTH SECURITY SPECIALIST II	0.00%	5.26%

Turnover Counts Jan 2014

Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0	0
YOUTH SECURITY SPECIALIST II	0	2

Aggregate Counts

Title	Total Employe	Term Employe	Turnover
YOUTH SECURITY SPECIALIST I	21.05	0	0.00%
YOUTH SECURITY SPECIALIST II	64.30	2	3.11%

**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:

Feb 2014: Vacancy for CFSS+CFSS decreased to 5.1% this month. ESA has the highest number of vacancies.

Barriers:

Action Items:

**Completed:*

**Planned:*

CFSS + CFSS/T														
Location	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14
Central Service Area	6.9%	12.1%	8.6%	12.1%	8.9%	5.3%	6.9%	5.2%	8.8%	10.9%	7.3%	9.4%	1.9%	2.0%
Eastern Service Area	4.7%	5.7%	4.6%	5.6%	6.5%	3.7%	3.7%	3.7%	6.5%	8.3%	8.3%	7.5%	10.4%	10.5%
Northern Service Area	12.0%	6.0%	11.0%	10.8%	13.3%	9.6%	12.0%	16.9%	20.5%	18.1%	8.9%	5.1%	5.3%	4.1%
Southeast Service Area	10.6%	12.4%	8.1%	5.3%	5.9%	6.2%	1.8%	1.9%	6.2%	6.2%	3.1%	2.6%	5.2%	2.8%
Western Service Area	11.3%	11.3%	7.0%	2.8%	1.4%	4.3%	7.0%	9.9%	12.7%	7.0%	8.5%	0.0%	4.8%	4.8%
Total	9.2%	9.6%	7.7%	6.7%	7.0%	5.8%	5.4%	6.4%	10.0%	9.4%	6.6%	4.6%	6.0%	5.1%

YSS I														
Location	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Aug-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14
YRTC Geneva	20.0%	30.0%	22.2%	20.0%	20.0%	20.0%	10.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
YRTC Kearney	14.3%	0.0%	0.0%	0.0%	0.0%	0.0%	7.1%	14.3%	6.7%	6.7%	13.3%	14.3%	13.3%	12.5%
Total	16.7%	12.5%	8.7%	8.3%	8.3%	8.3%	8.3%	8.3%	4.0%	4.0%	8.0%	8.3%	8.0%	7.7%

YSS II														
Location	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Aug-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14
YRTC Geneva	0.0%	0.0%	12.9%	6.7%	16.7%	13.3%	6.7%	10.0%	6.7%	6.7%	6.7%	3.3%	16.7%	10.0%
YRTC Kearney	14.0%	14.0%	12.0%	15.7%	8.0%	15.7%	17.6%	21.6%	28.0%	30.6%	26.5%	26.0%	21.7%	17.4%
Total	8.8%	8.8%	12.3%	12.3%	11.3%	14.8%	13.6%	17.3%	20.0%	21.5%	19.0%	17.5%	19.7%	14.5%

*Date is effective as of first day of posted month

NFC Staff Vacancy Rate

Strengths/Opportunities:

Jan 2014: NFC Vacancies decreased to 8.33% this month -- from 10.11% last month.

Barriers:

Action Items:

**Completed:*

**Planned:*

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

VACANCY RATES

	Sep 13**			Oct 13**			Nov 13**			Dec 13**			Jan 14**		
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**	20	168	11.90%	26***	168	15.47%	19***	168	11.30%	17***	168	10.11%	14***	168	8.33%

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

ADULT PROTECTIVE SERVICES (APS)

APS Contact Timeframes

Strengths/Opportunities:

Jan 2014: Increase in P1 performance. 100% achievement in P1 for SESA and WSA this month.

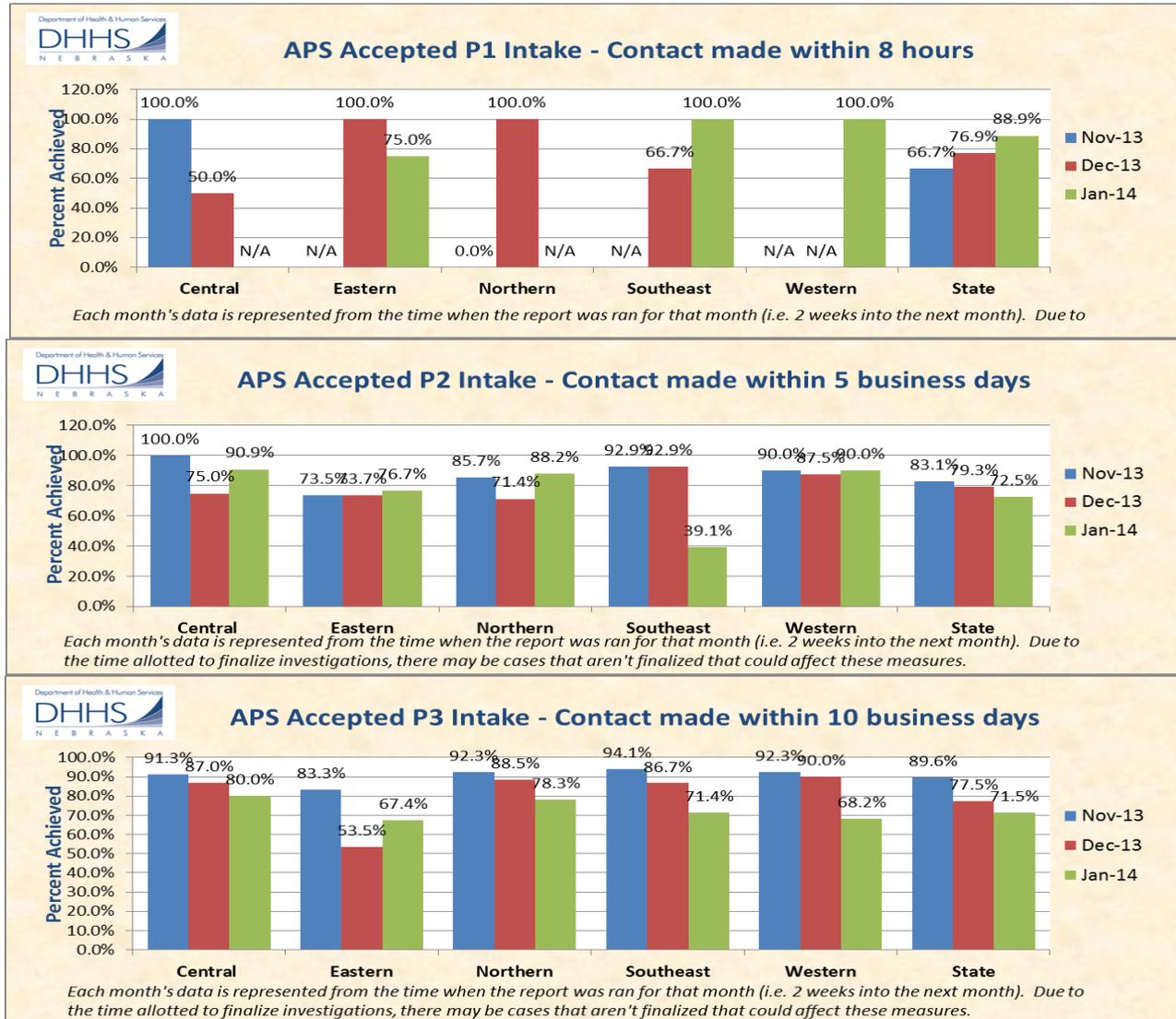
Barriers:

Action Items:

*Completed:

*Planned:

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



Data Review Frequency: Monthly

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:

Jan 2014: APS implemented a new measure of timeliness from Intake to Ready for Review: Performance in all measures was less than 35%

Note: The New Timeframes for APS Investigations were incorporated into this report in November 2013.

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:

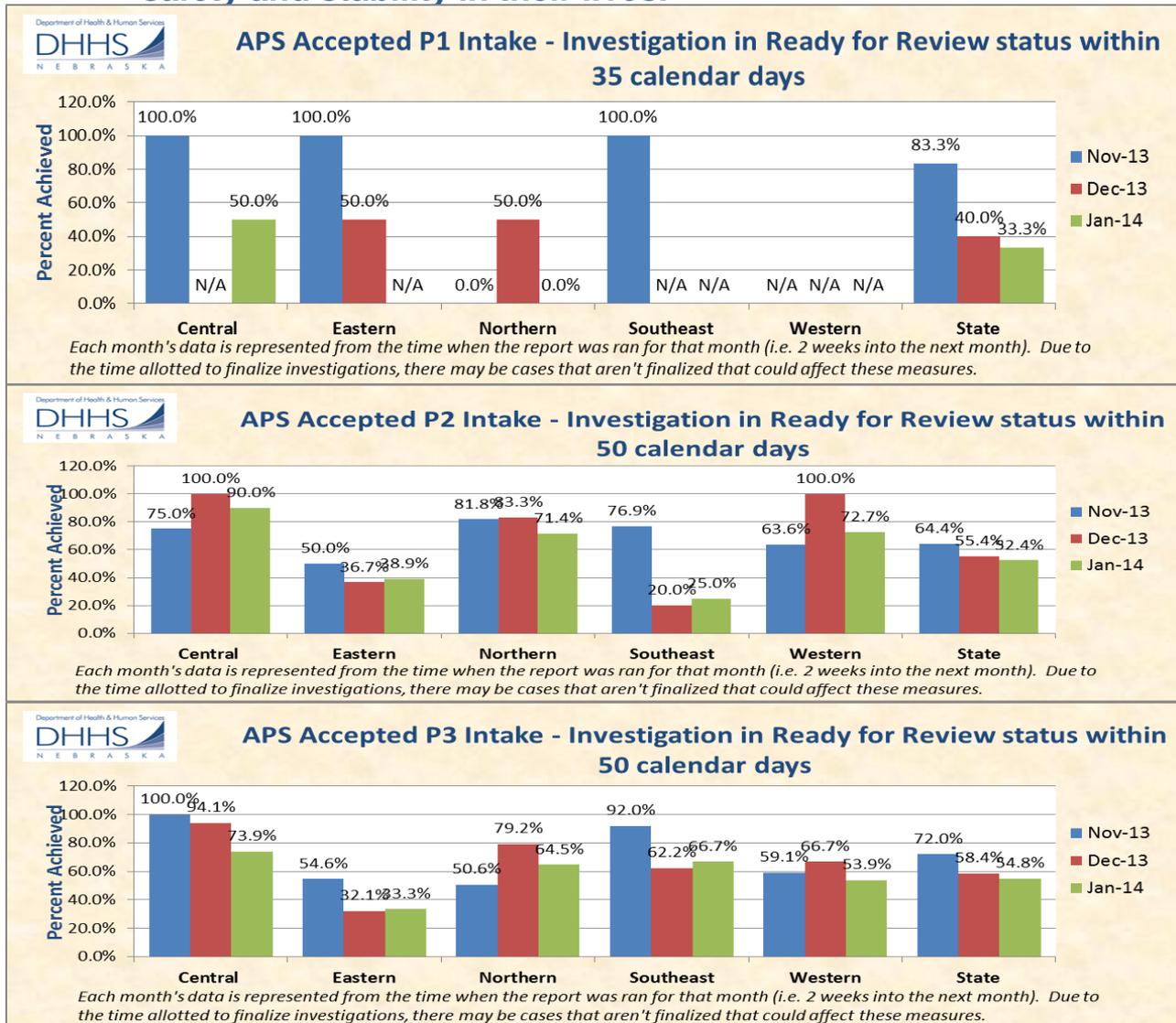
Action Items:

*Completed:

*Planned:

These Charts are new to the CQI document

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



These charts illustrate investigations that were put in Ready for Review Status per Priority. Measure is from Intake Closure/Acceptance to Investigation Ready for Review Status. 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 time data is pulled for this report.

Data Review Frequency: Monthly

APS Investigation Timeframes

Strengths/Opportunities:

Jan 2014: APS implemented a new measure of timeliness from Ready for Review to Finalization: Performance is 66% for P1, 84% for P2 and 92% for P3.

Note: The New Timeframes for APS Investigations were incorporated into this report in November 2013.

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:

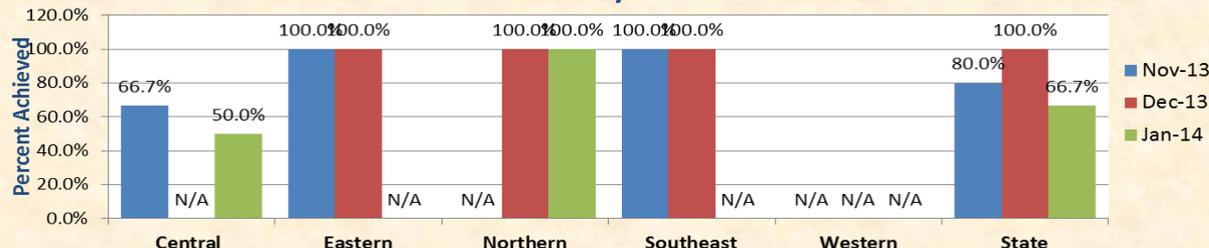
These Charts are new to the CQI document.

Data Review Frequency: Monthly

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



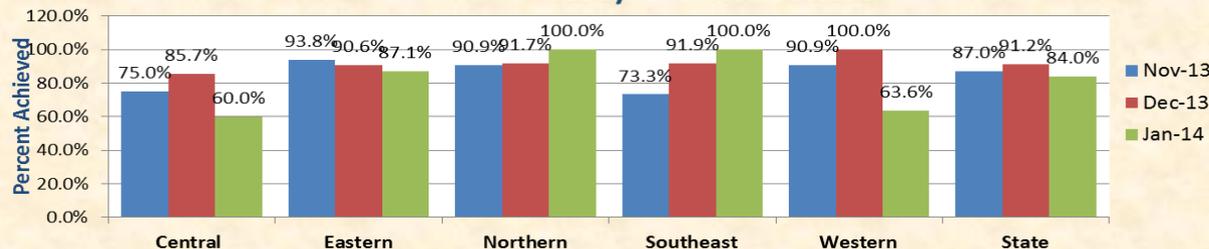
APS Accepted P1 Intake - Investigation in Final status within 10 days of Ready for Review status



Each month's data is represented from the time when the report was ran for that month (i.e. 2 weeks into the next month). Due to the time allotted to finalize investigations, there may be cases that aren't finalized that could affect these measures.



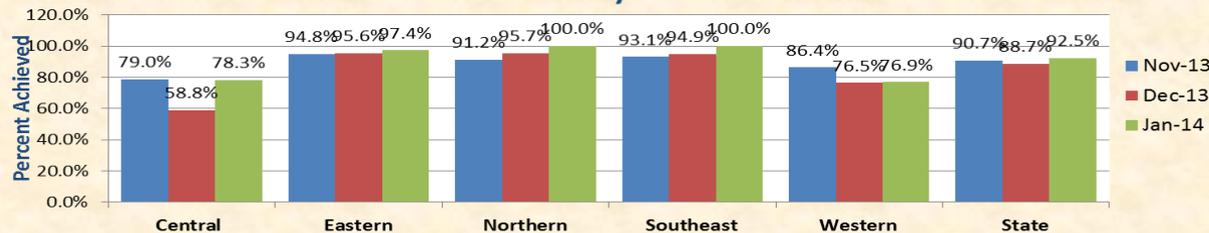
APS Accepted P2 Intake - Investigation in Final status within 10 days of Ready for Review status



Each month's data is represented from the time when the report was ran for that month (i.e. 2 weeks into the next month). Due to the time allotted to finalize investigations, there may be cases that aren't finalized that could affect these measures.



APS Accepted P3 Intake - Investigation in Final status within 10 days of Ready for Review status



Each month's data is represented from the time when the report was ran for that month (i.e. 2 weeks into the next month). Due to the time allotted to finalize investigations, there may be cases that aren't finalized that could affect these measures.

These charts illustrate investigations that were put in Ready for Review Status per Priority. Measure is from Intake Closure/Acceptance to Investigation Ready for Review Status. 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 time data is pulled for this report.

APS Quality Measures

Strengths/Opportunities:

- Jan 2014: Decrease in 3 out of the 4 APS Quality Measures. .

Barriers:

Action Items:

**Completed:*

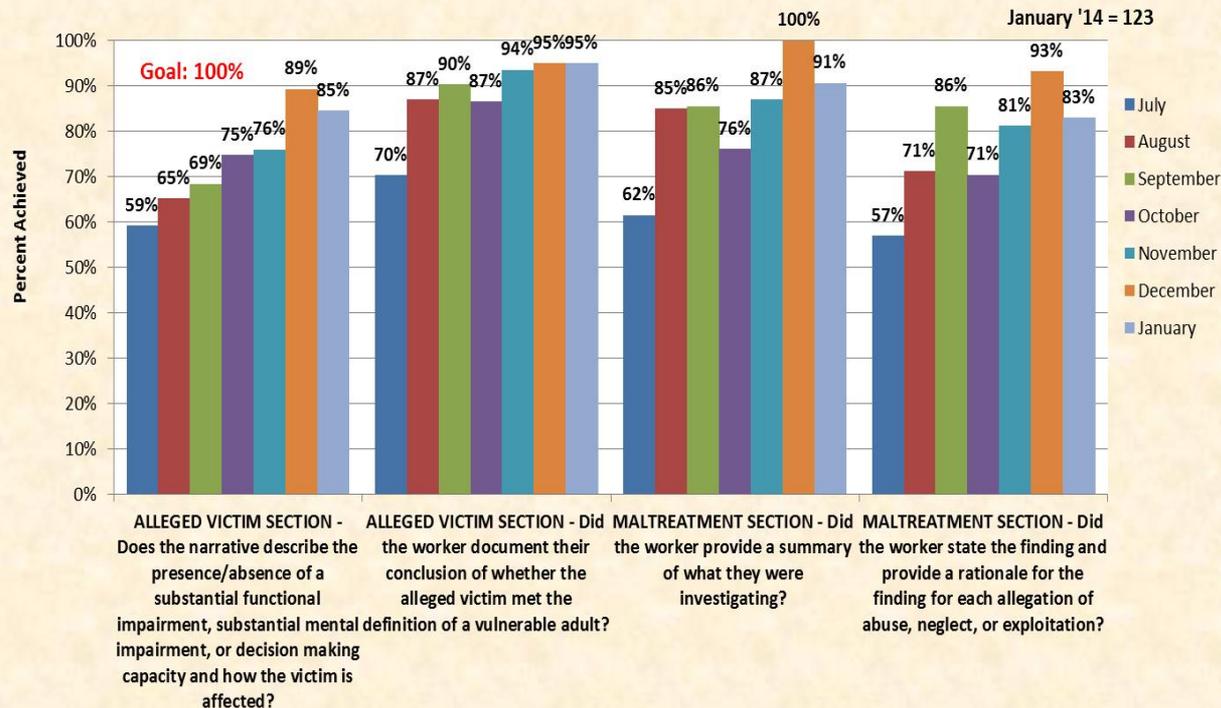
**Planned:*

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



APS Investigation Summary - Quality July 2013 - January 2014

Number of Reviews:
July '13 = 125
August '13 = 124
September '13 = 124
October '13 = 124
November '13 = 125
December '13 = 123
January '14 = 123



This chart illustrates the percentage achieved for four measures that are part of the APS QA Review. The APS QA reviews are completed on a random sample of the total APS Investigation Summaries that are completed by APS Staff. The CQI Unit implemented the APS Investigation Summary QA on July 1st, 2013.