

CHAPTER 1: CONTINUOUS QUALITY IMPROVEMENT (CQI)

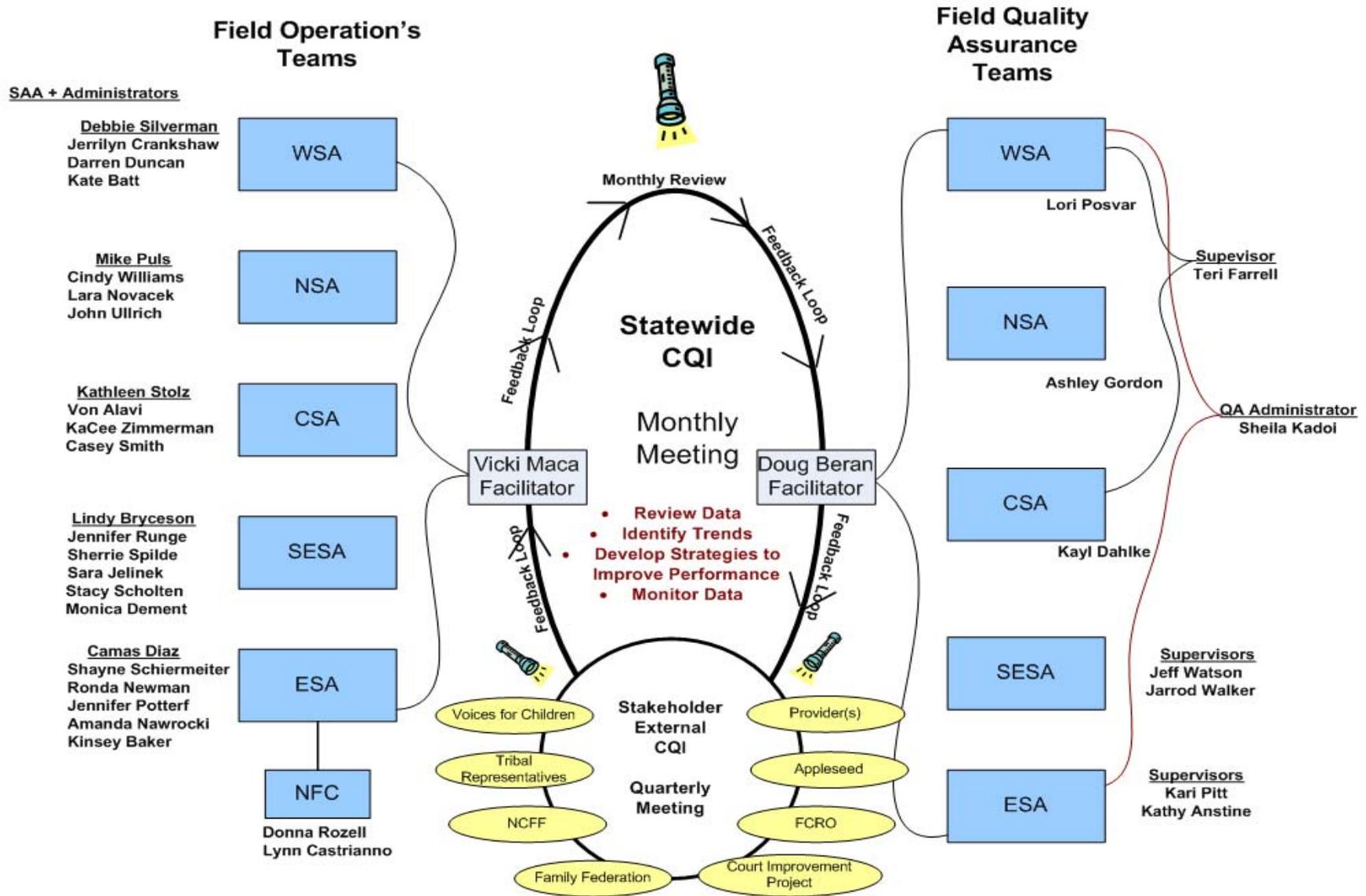
OUTCOME STATEMENT: CHILDREN AND FAMILY SERVICES WILL MEASURE AND EVALUATE THE QUALITY AND EFFECTIVENESS OF OUR WORK WITH CHILDREN AND FAMILIES.

Schedule of Discussion Subjects 2014

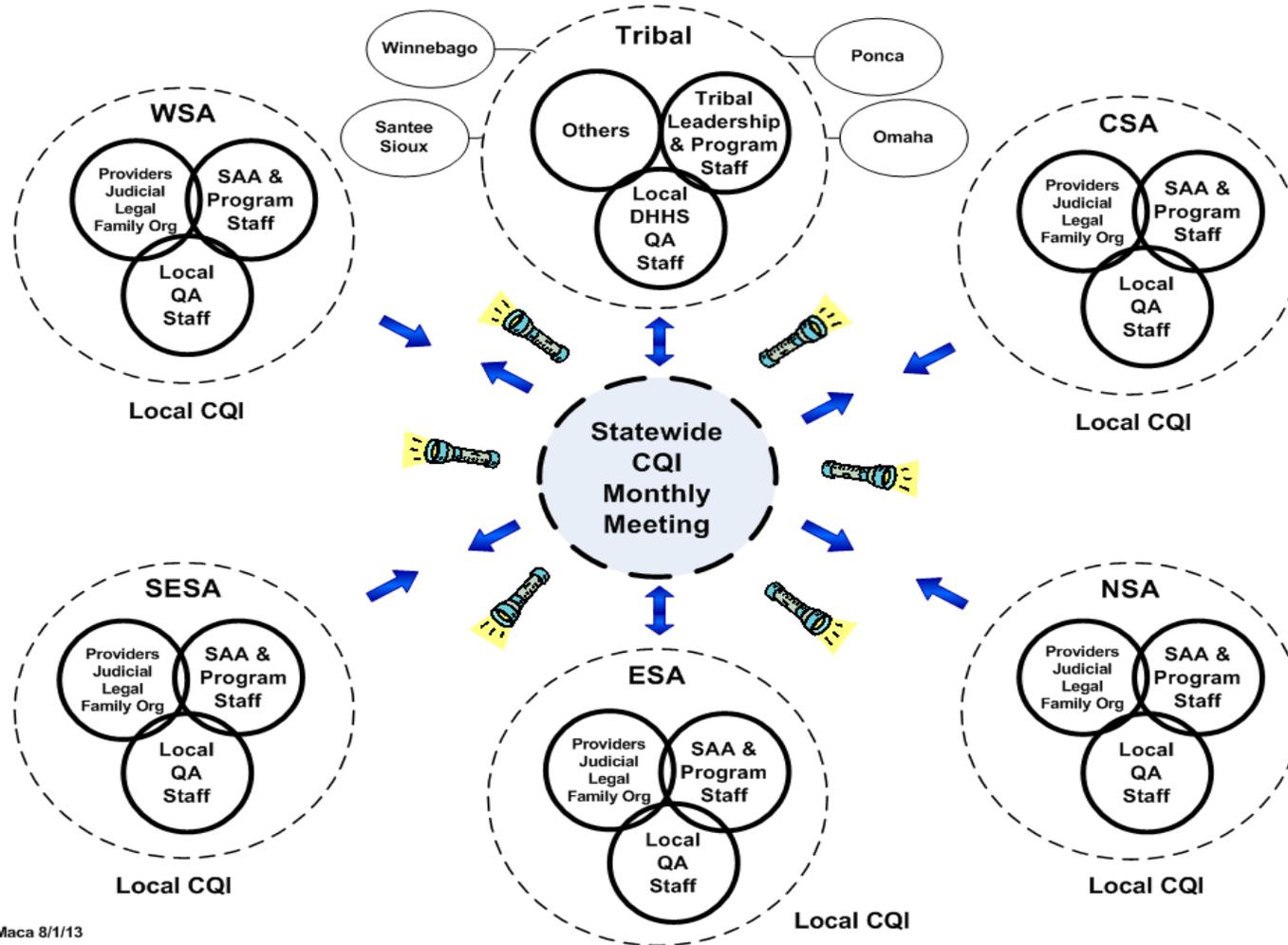
- January 23 – ½ day CQI then Stakeholder CQI
 - Process Measures
 - Federal Results (COMPASS)
 - Intake / SDM Fidelity
 - Dictation Update
 - Barriers to Permanency
 - Quality Case-management discussion
- February 27
 - Process Measures
 - Intake / SDM Fidelity
 - Caseload/Turnover/Vacancy
 - CFSR Results
 - Operations Data
 - Quality Case-management discussion
- March 27
 - Process Measures
 - Intake / SDM Fidelity
 - Quality Case-management discussion
 - ESA Local CQI Update
- 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.



Local CQI Process



CHAPTER 2: PREVENTION AND EARLY INTERVENTION

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

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

Safely Decrease the Number of State Wards

Strengths/Opportunities:

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

Barriers:

Action Items:

*Completed:

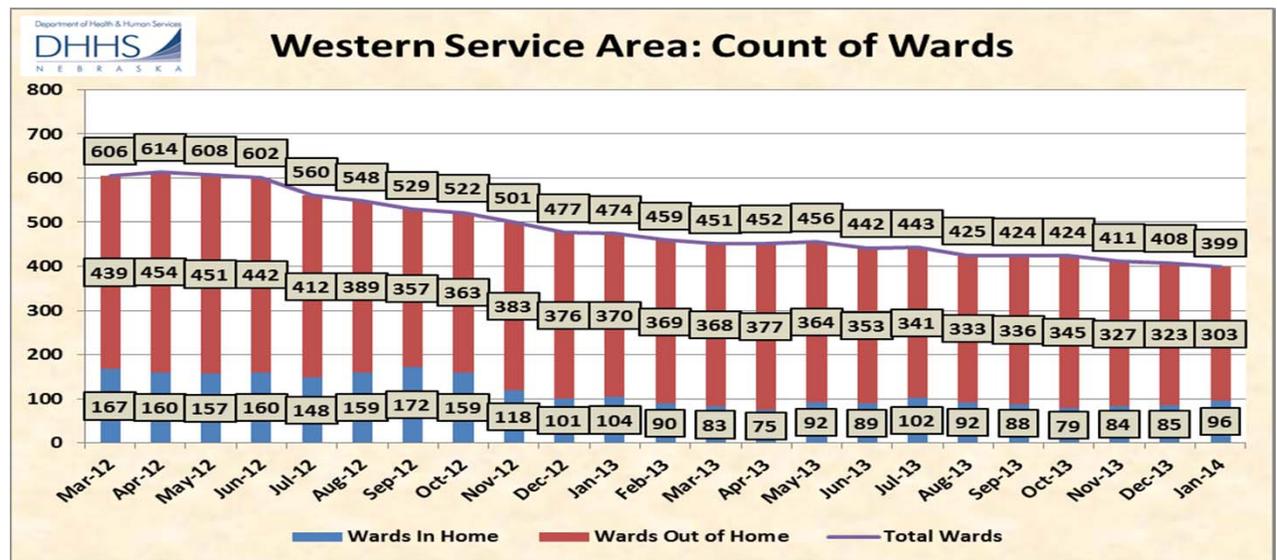
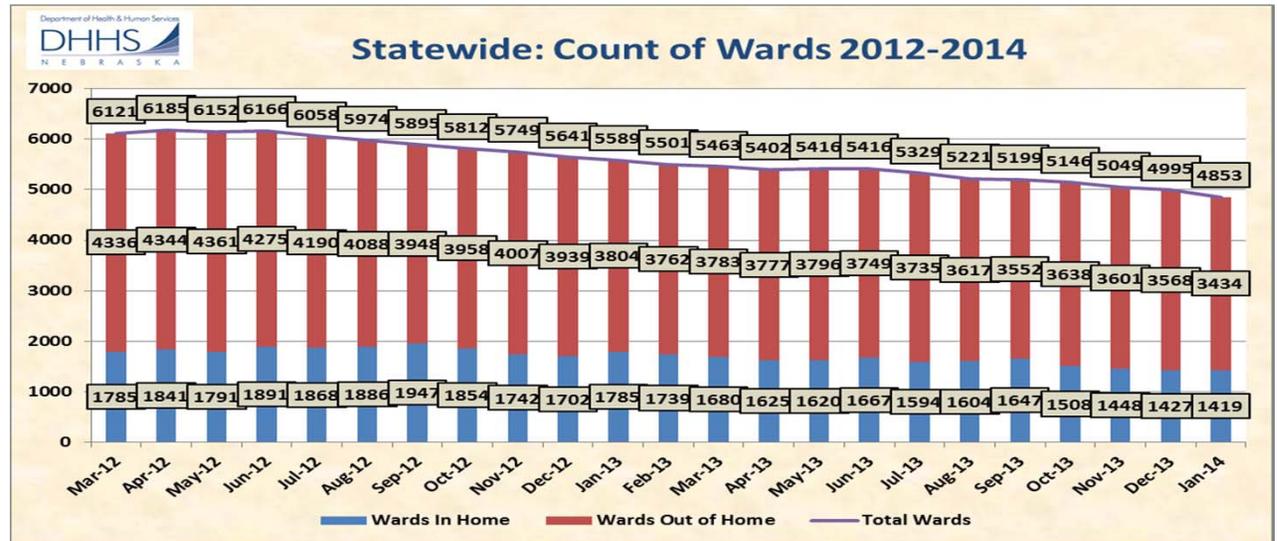
- 40 Day Focus Initiatives
 - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
 - B.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
 - C.) OJS & 3B Youth. 228 wards achieved permanency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

*Planned:

CQI Team Priority:

* Statewide

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



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

Data Review Frequency: Quarterly

Safely Decrease the Number of State Wards

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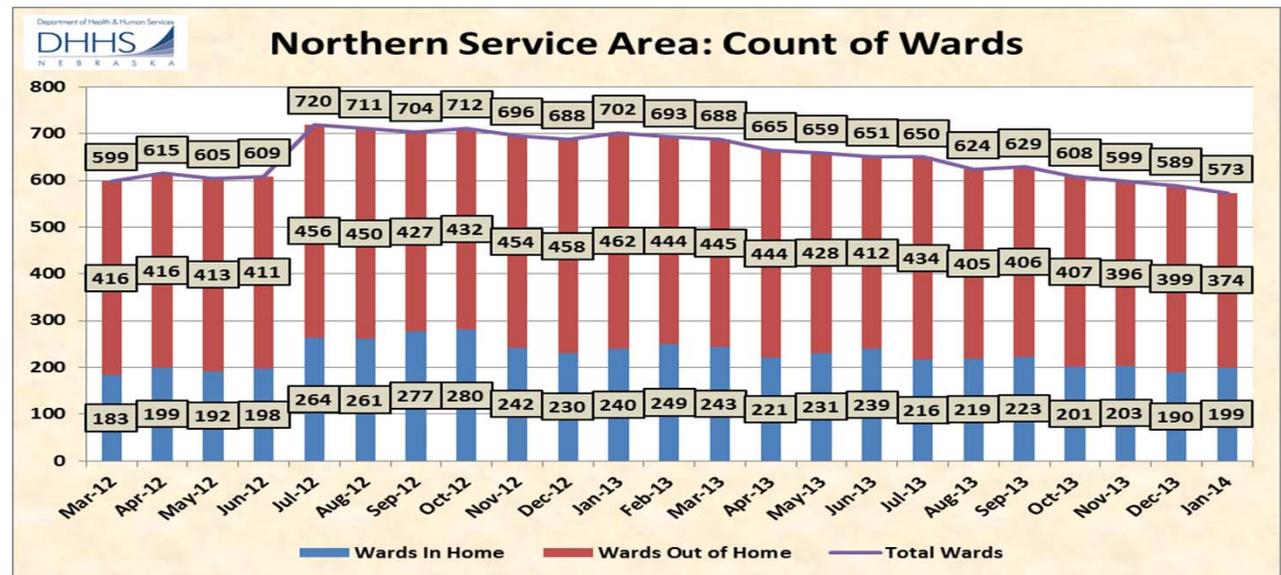
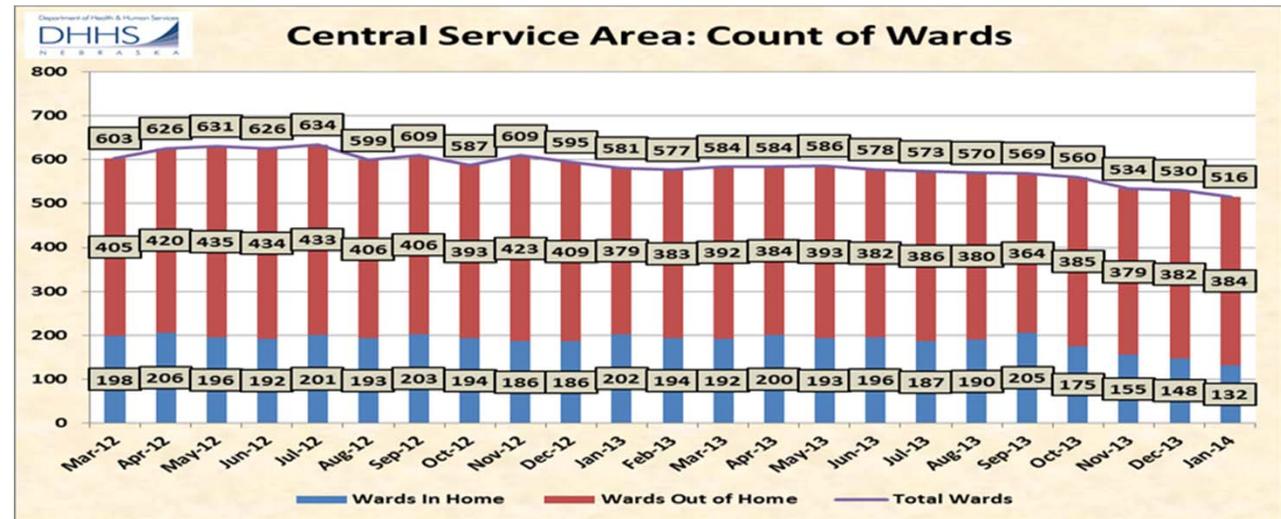
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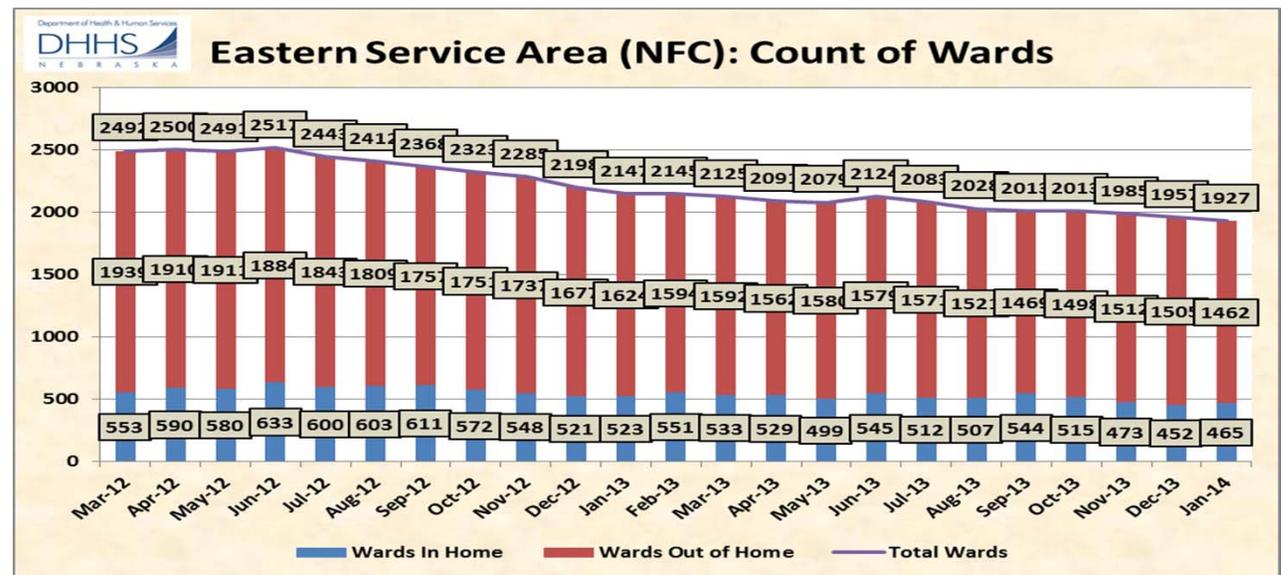
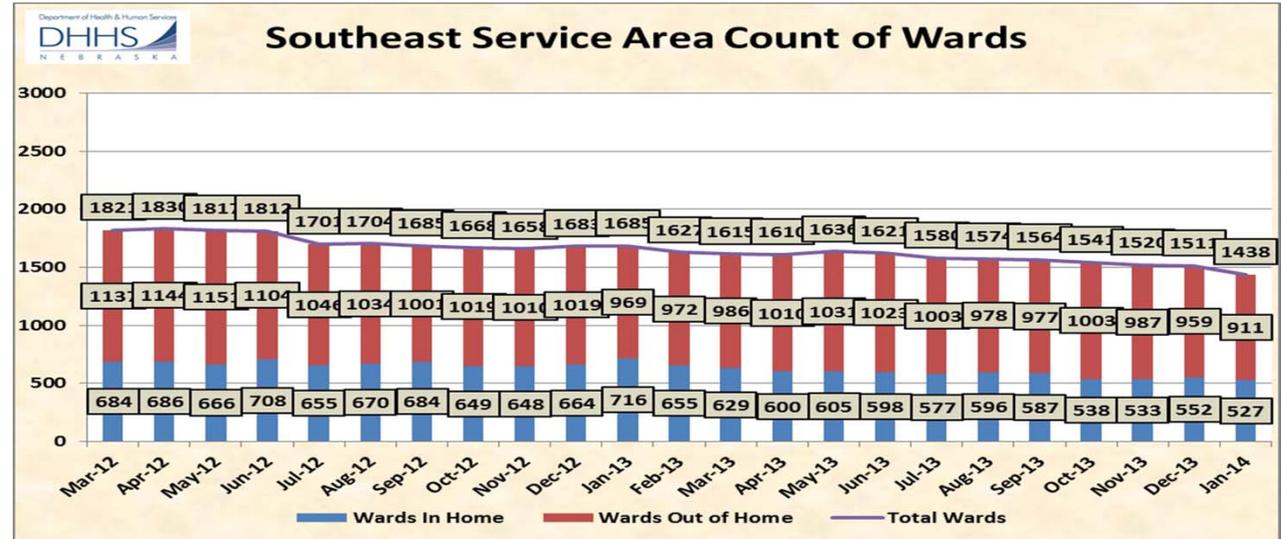
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OUTCOME STATEMENT: Deliver an Effective Systems Response That is Flexible, Family Centered and Focused on Preventing Child Abuse and Neglect



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 OOH Wards by Moving Them Back to In-Home Care

Strengths/Opportunities:

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

Barriers:

Action Items:

****Completed:***

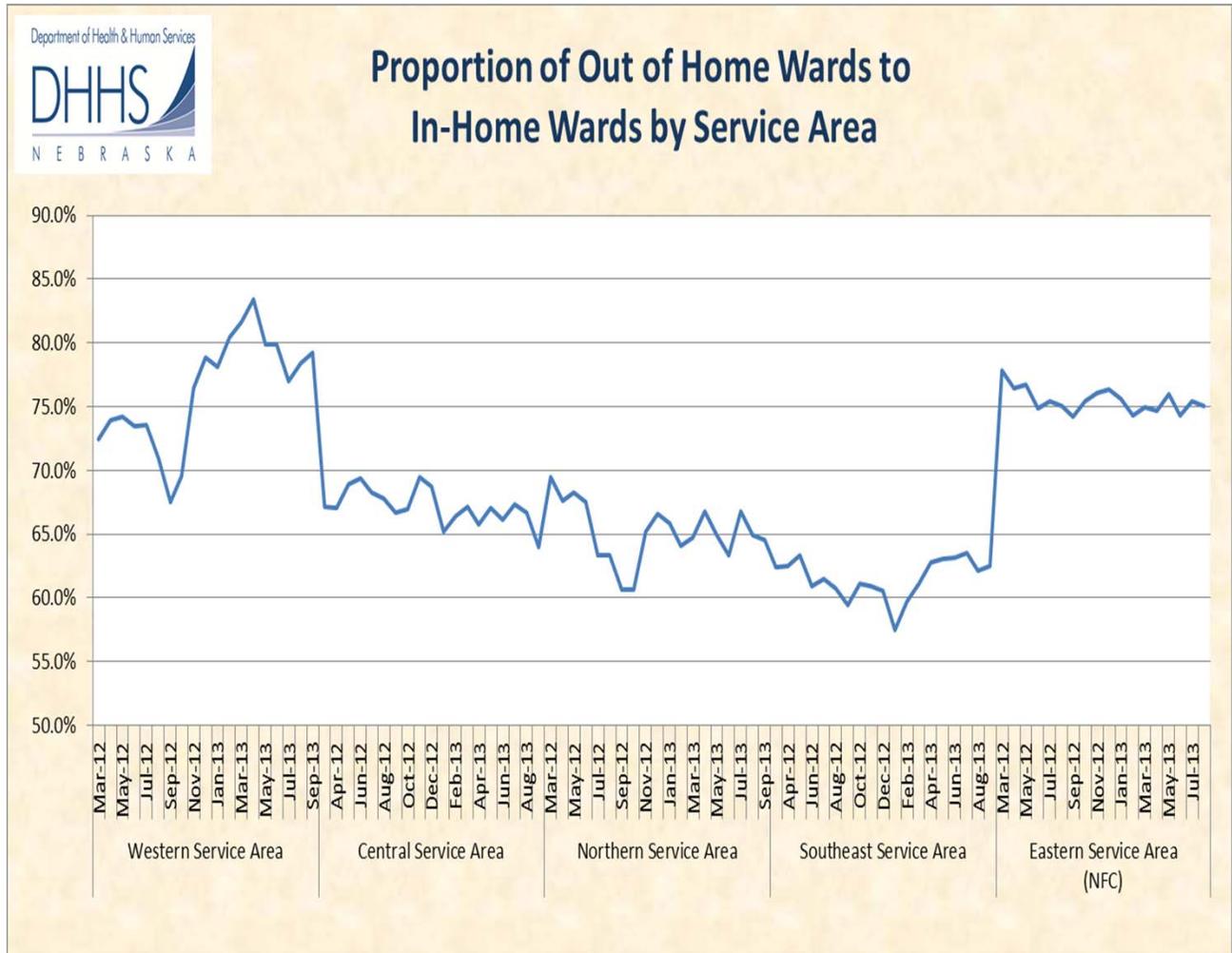
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CQI Team Priority:

* Statewide

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



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

Source – Point-in-Time 8/5/2013

Data Review Frequency: Quarterly

Safely Decrease the Number of State Wards

Strengths/Opportunities:

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

Barriers:

Action Items:

**Completed:*

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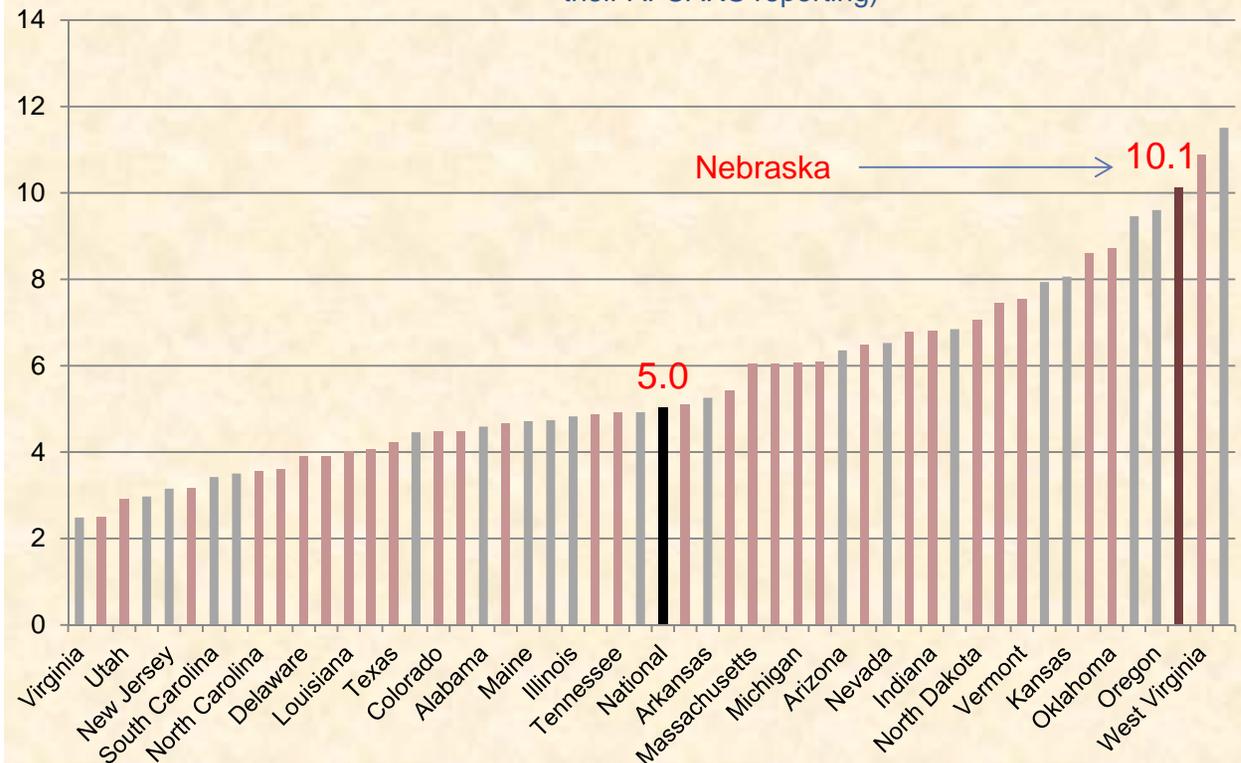
CQI Team Priority:

* Statewide

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



The in-care rate in Nebraska (10.1 per 1,000 in FY11) is twice the national in-care rate (5.0 in FY11). (Pink shaded states also include some number of Juvenile Justice youth in their AFCARS reporting)



Below is the website for more information on the source of population information.
 Data source: CASEY AFCARS - population of 18 years olds
<http://www.claritas.com/site/reports/default.jsp>

Data Review Frequency: Static

Safely Decrease the Number of State Wards

Strengths/Opportunities:

Barriers:

Action Items:

**Completed:*

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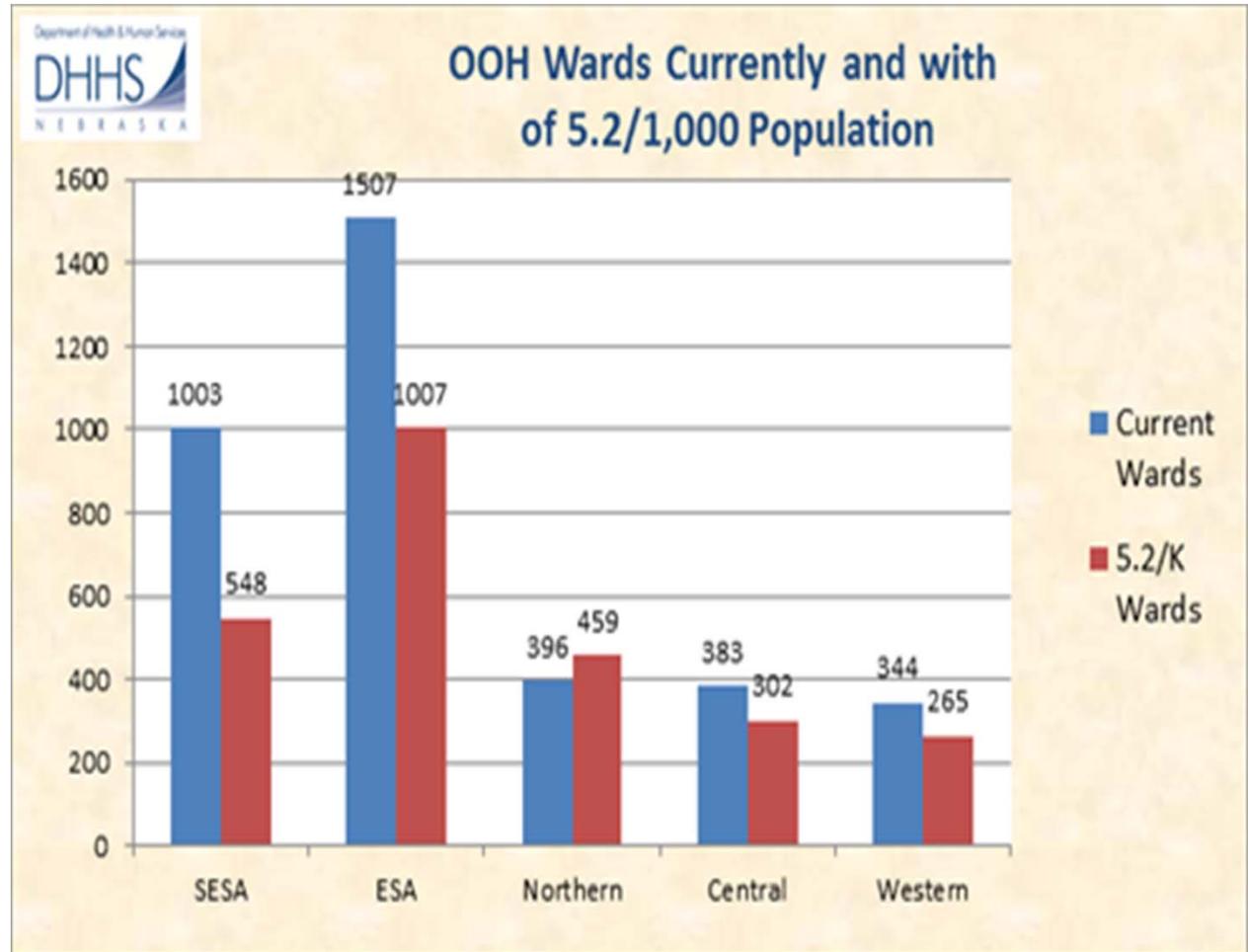
**Planned:*

CQI Team Priority:

* Statewide

Data Review Frequency: Monthly

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



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

Note: Count by County Report is now available.

Safely Decrease the Number of State Wards

Strengths/Opportunities:

- Lower number of entries than exits.
- 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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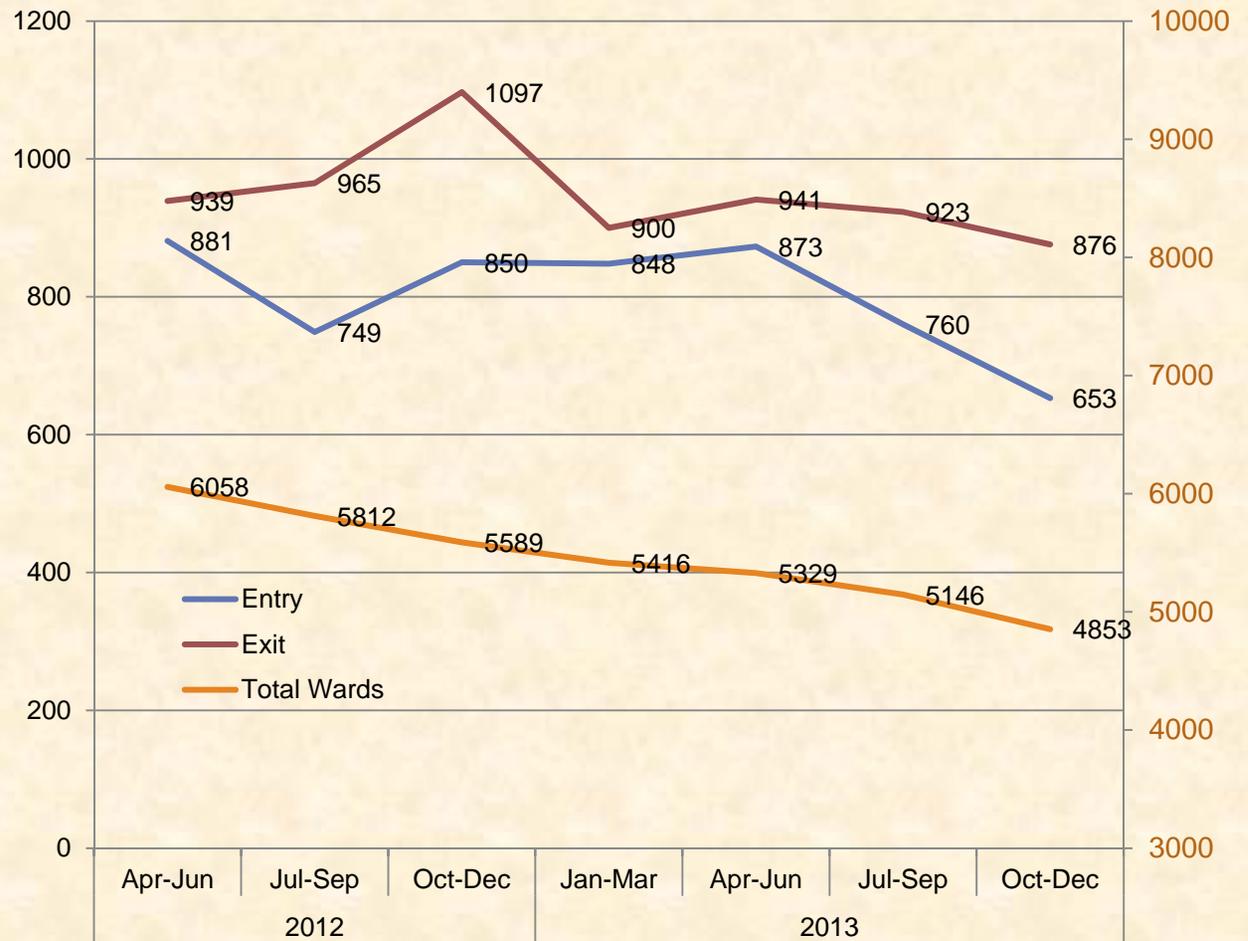
CQI Team Priority:

* Statewide

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



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



Data Review Frequency: Quarterly

Safely Decrease the Number of State Wards

Strengths/Opportunities:

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

Barriers:

Action Items:

**Completed:*

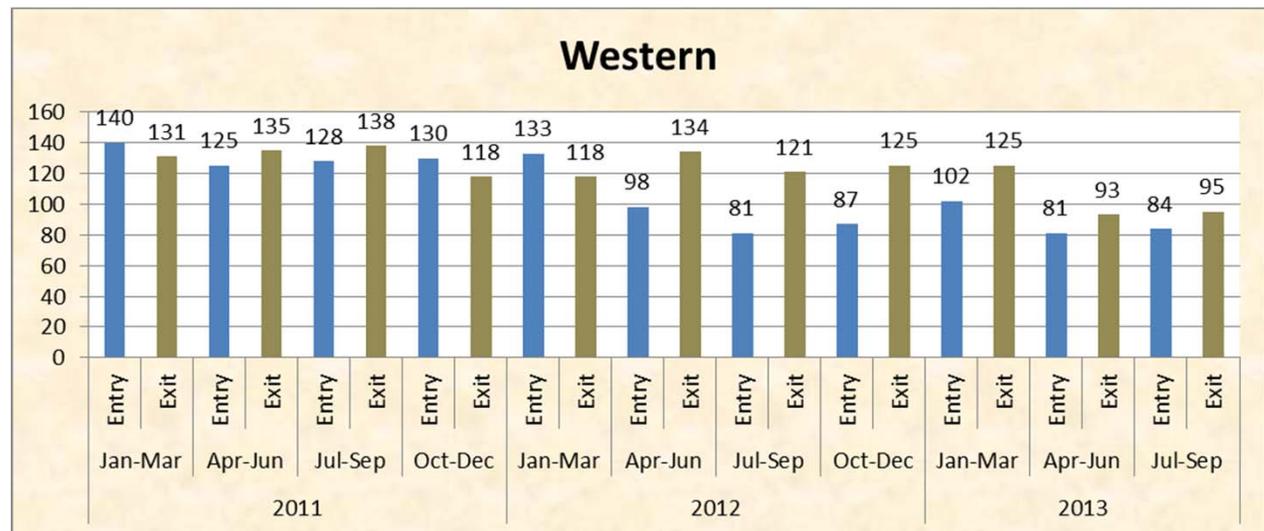
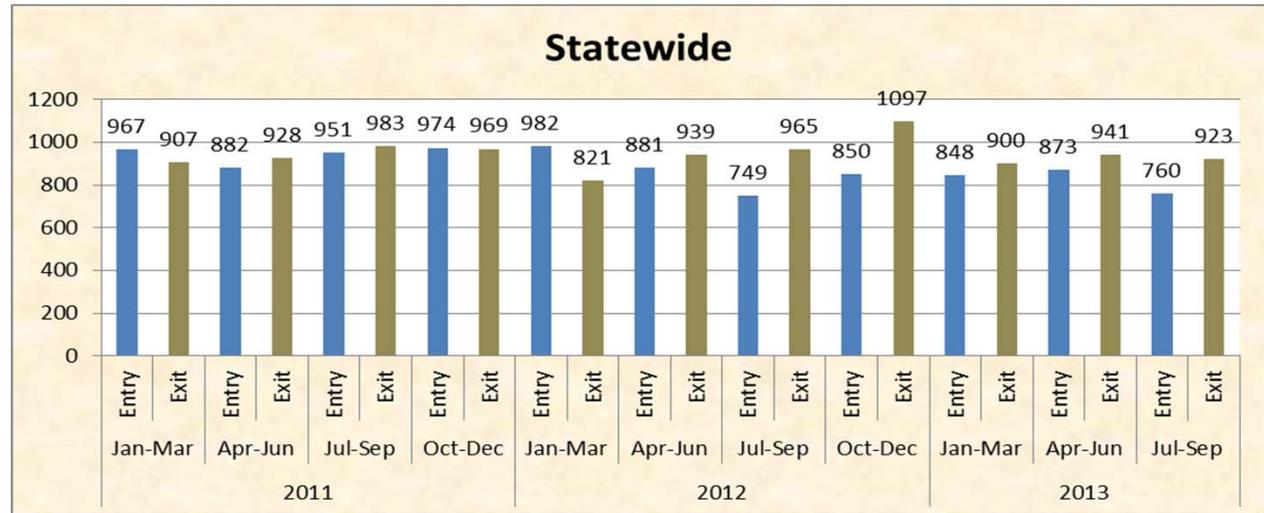
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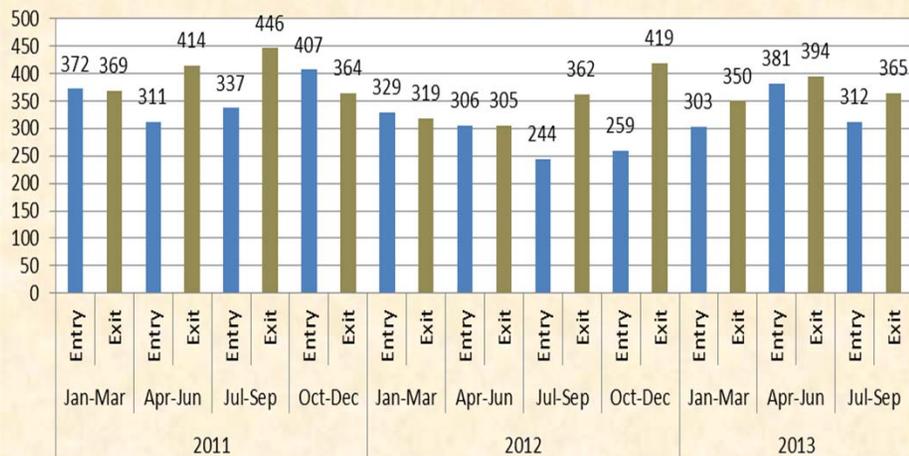
N-Focus Legal Status field. An entry occurs when a child is made a state ward. An exit occurs when the Legal Status changes to non-ward - not when it is entered into NFocus. Entries include youth that go from non-court to court. Counts based on date of action, not entry date into NFocus

Data Review Frequency: Quarterly

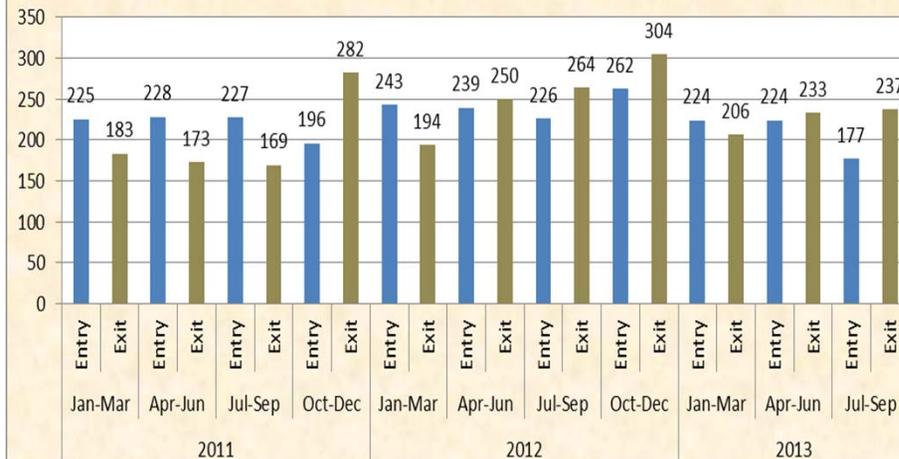
Safely Decrease the Number of State Wards

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

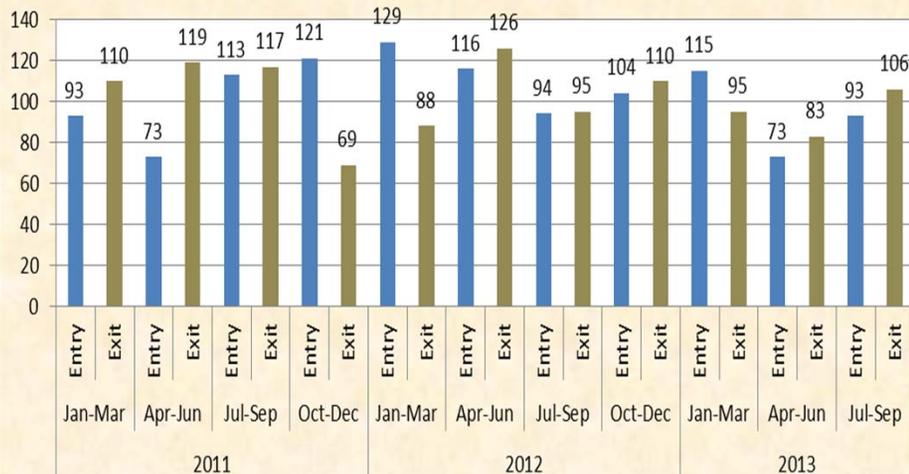
ESA (DHHS-Entries & NFC-Exits)



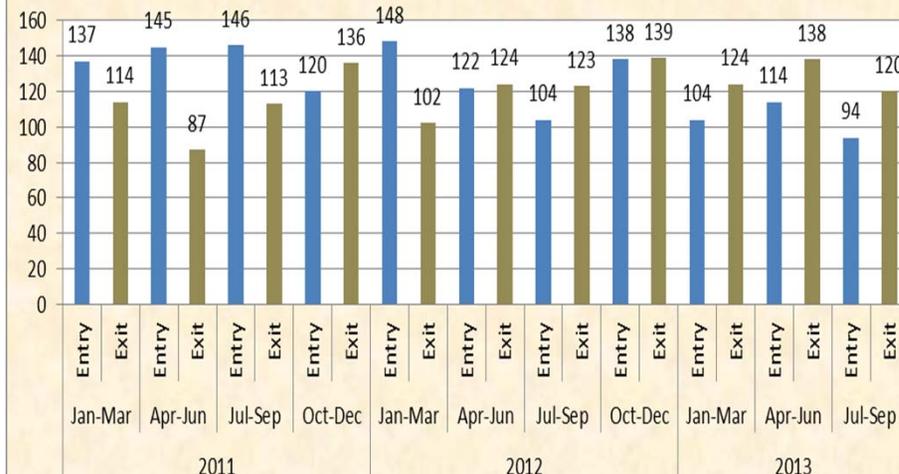
Southeast



Central

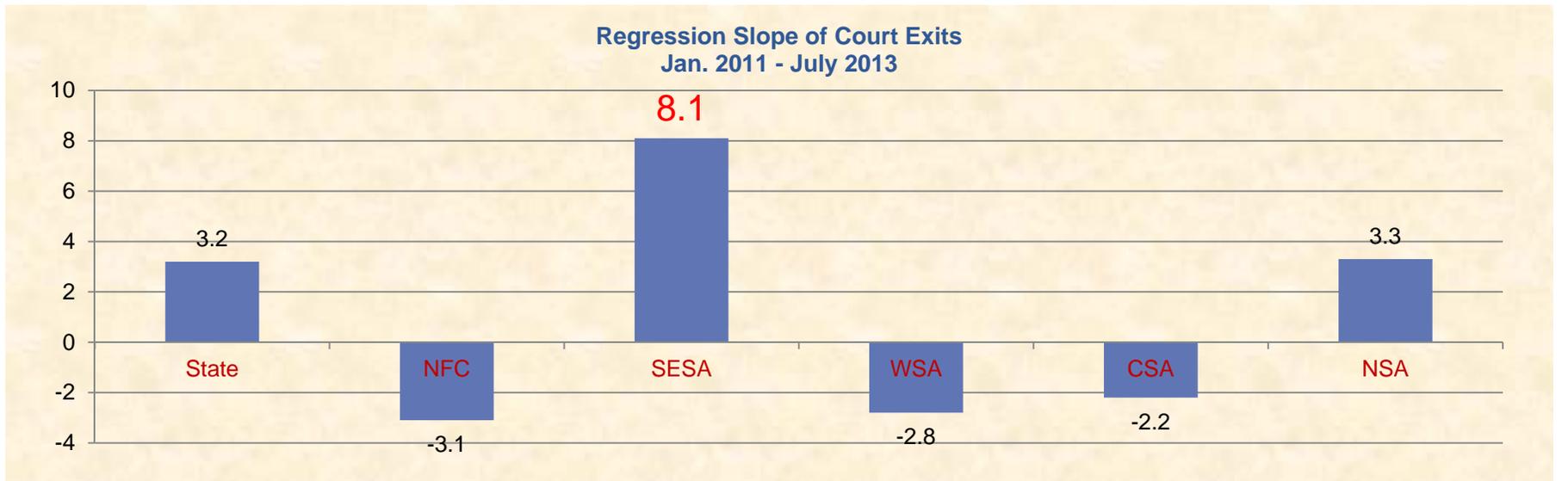


Northern



Safely Decrease the Number of State Wards

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



Exit Period is Measured Quarterly from Jan 2011 – July 2013

CHAPTER 3: PERFORMANCE AND ACCOUNTABILITY

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

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

In-home versus out-of-home placements

Strengths/Opportunities:

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

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

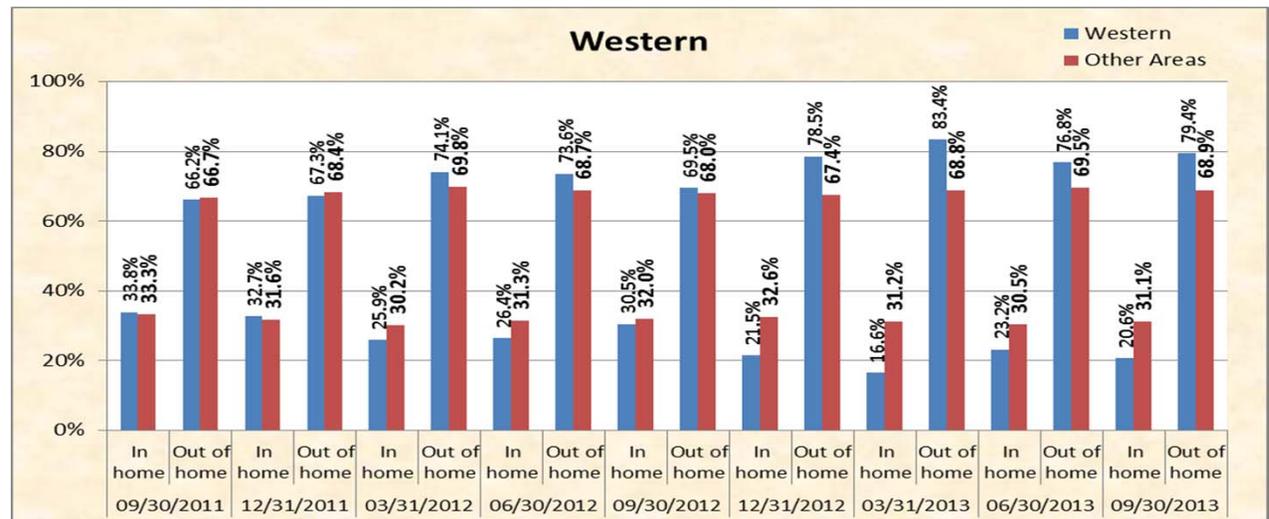
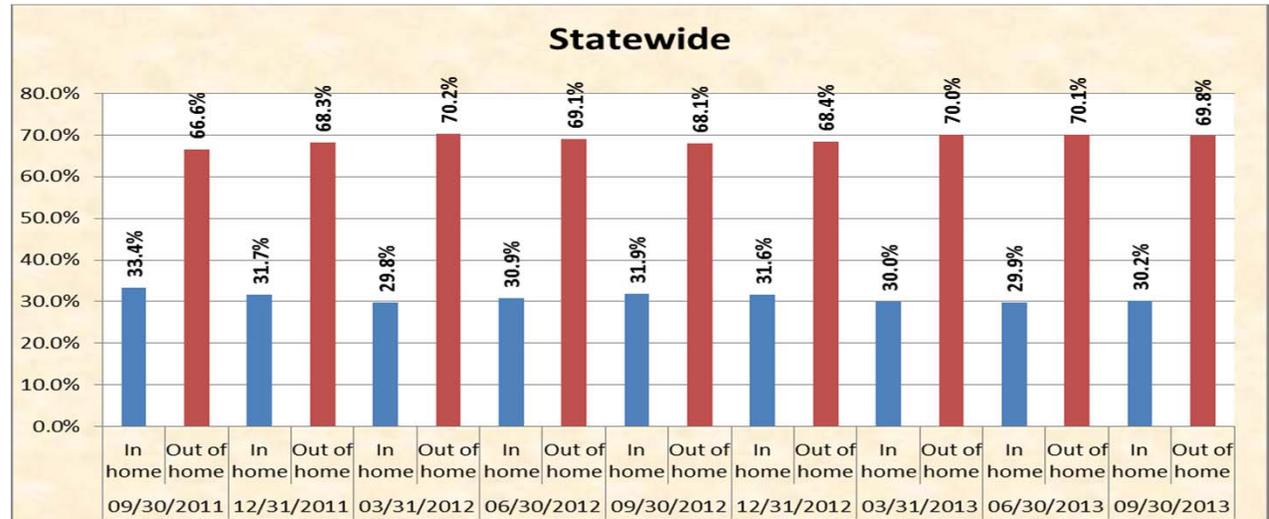
Barriers:

Action Items:

**Completed:*

**Planned:*

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

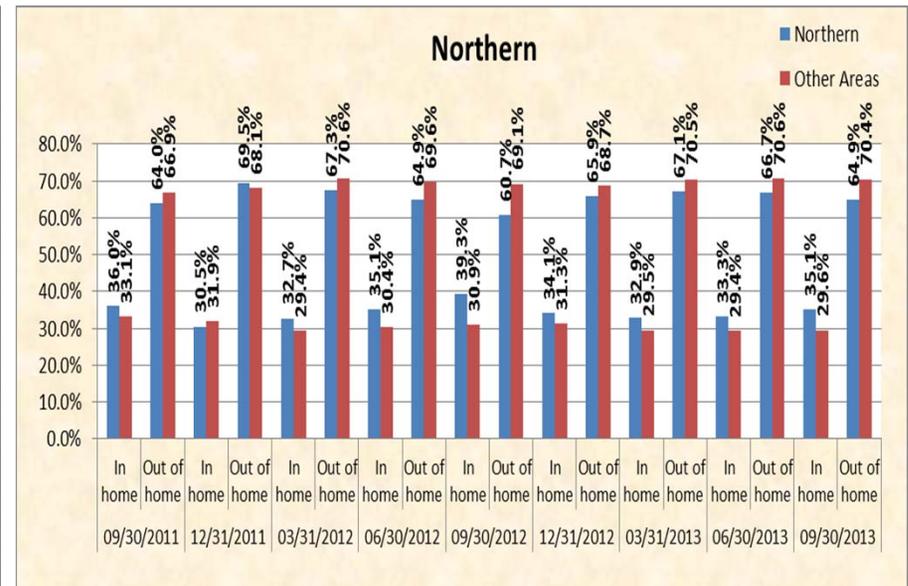
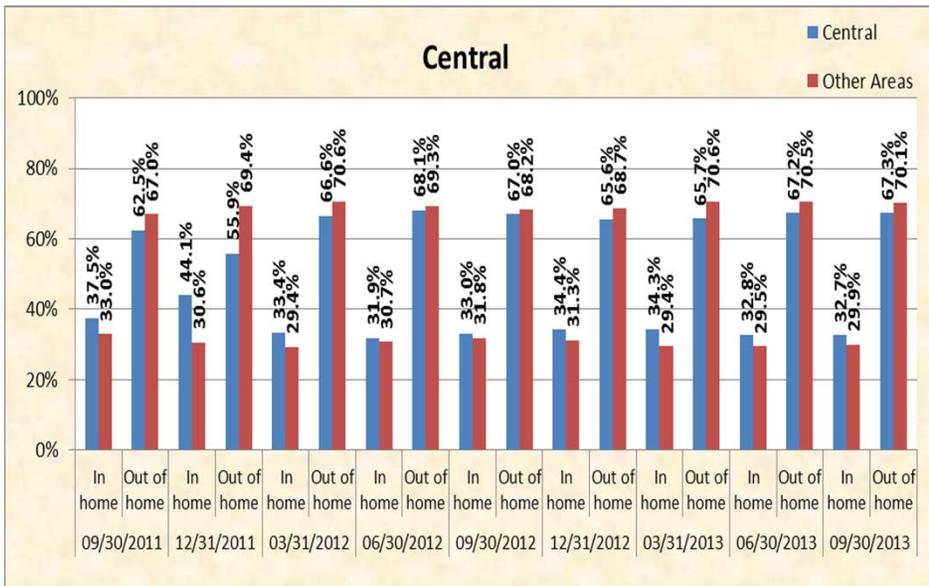
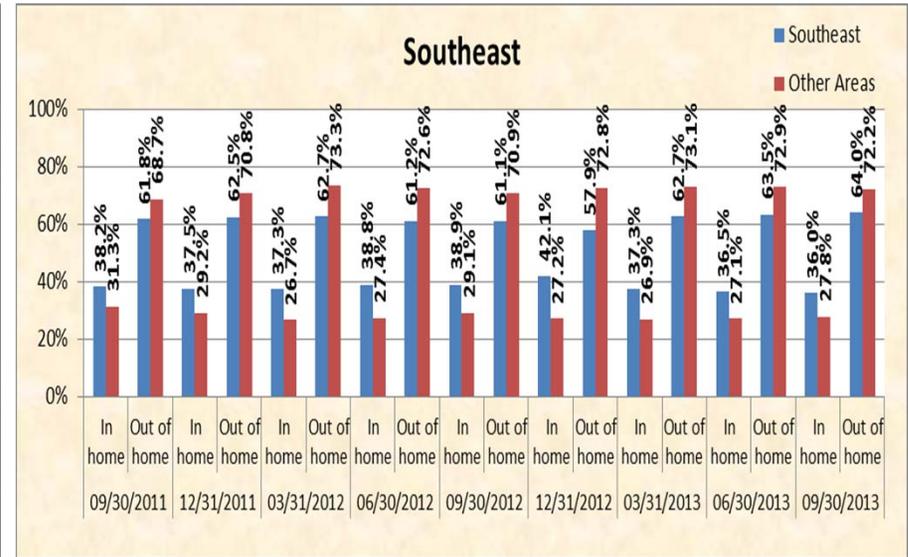
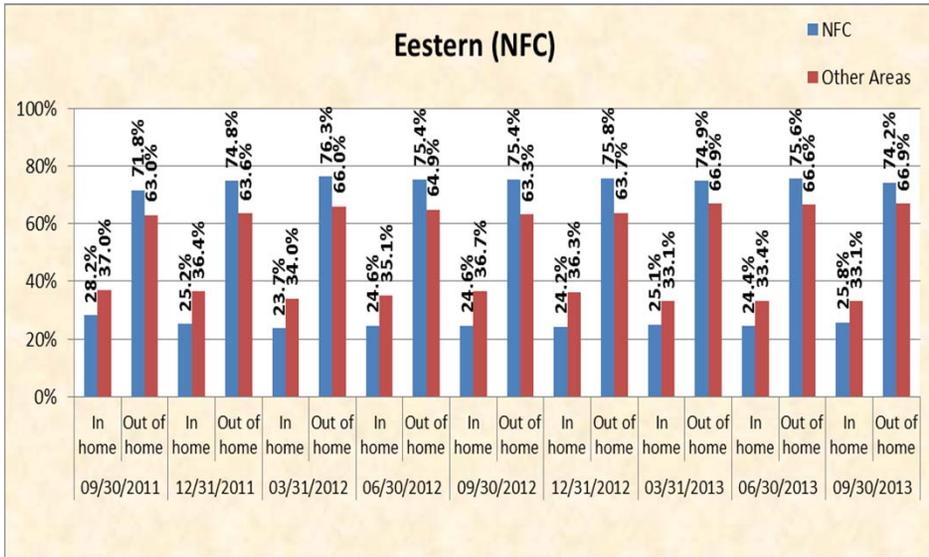


N-Focus Placement field. The In Home category includes state wards living with a parent, guardian or independently. The Out of Home category includes state wards in all types of out of home placements and those on runaway status. Data includes all court wards measured at a point-in-time on the last day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

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

In-home versus out-of-home placements

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



Intake Calls/Responses

Strengths/Opportunities:

- Dec 2013: 91% of all calls to the hotline were answered within 18 seconds. 3% of the calls went to voicemail and were returned within 1 hour. Large decrease in volume of calls from November to December 2013.

Barriers:

Action Items:

**Completed:*

**Planned:*

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



* 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.

Data Review Frequency: Monthly

Intake Quality Measures

Strengths/Opportunities:

- December 2013: Increase in 3 of the 4 quality measures. Slight decrease in documentation of prior history/background checks.

Barriers:

Action Items:

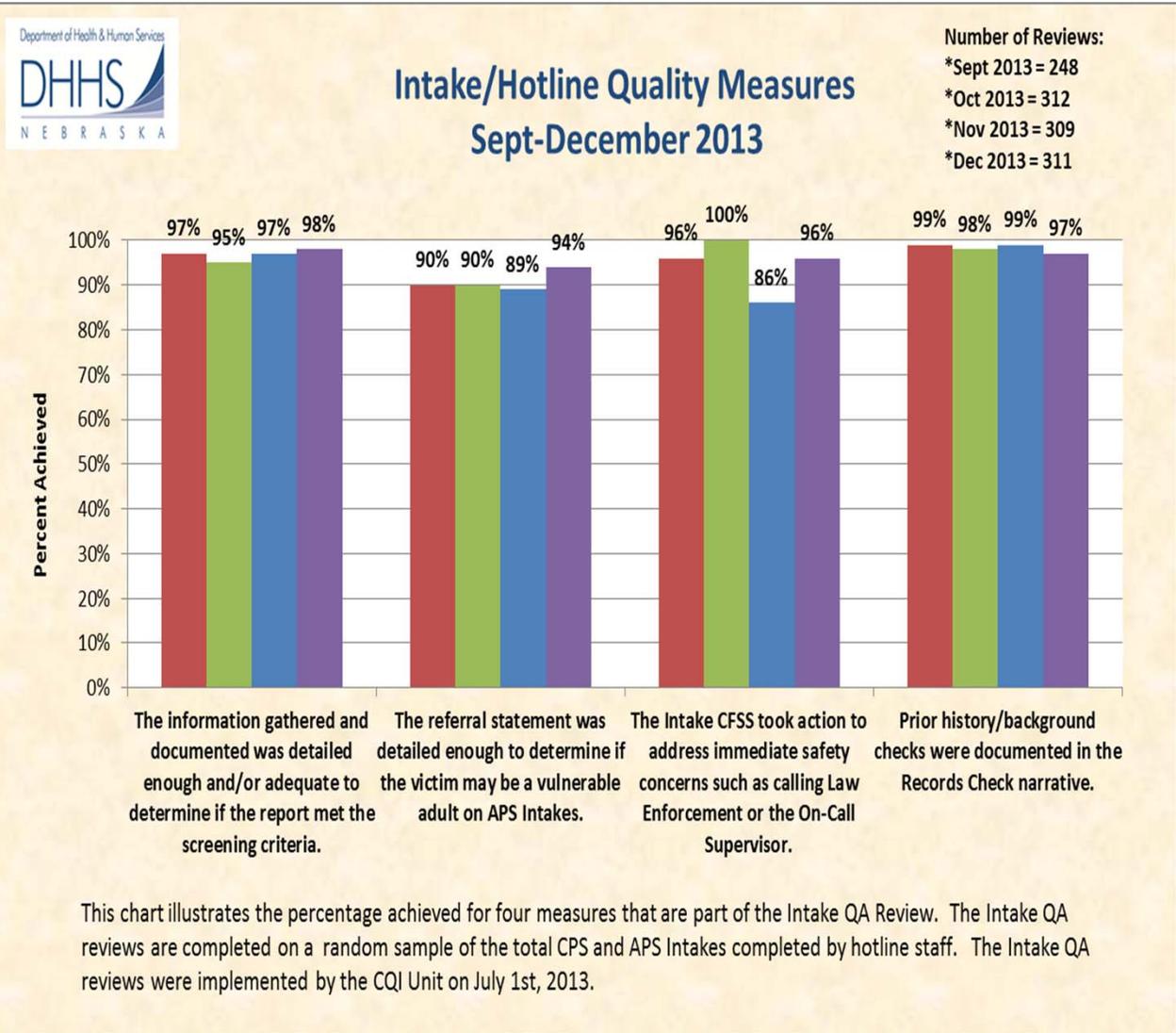
**Completed:*

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

**Planned:*

- A satisfaction Survey will be implemented in 2014.

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



Data Review Frequency: Monthly

IA – Investigation Timeframes

Strengths/Opportunities:

-Dec 2013: Central Service Area continues to have the lowest number of Initial Assessments Not Finalized (22) that were due between Jan 2012 – Jan 2014 . Western Service Area has the highest number of assessments Not Finalized (345) during this same period. **On 11/14/14, there were 990 Initial Assessments that were not finalized for the entire State for this same period.** SESA saw a significant decrease in the last 4 months.

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.

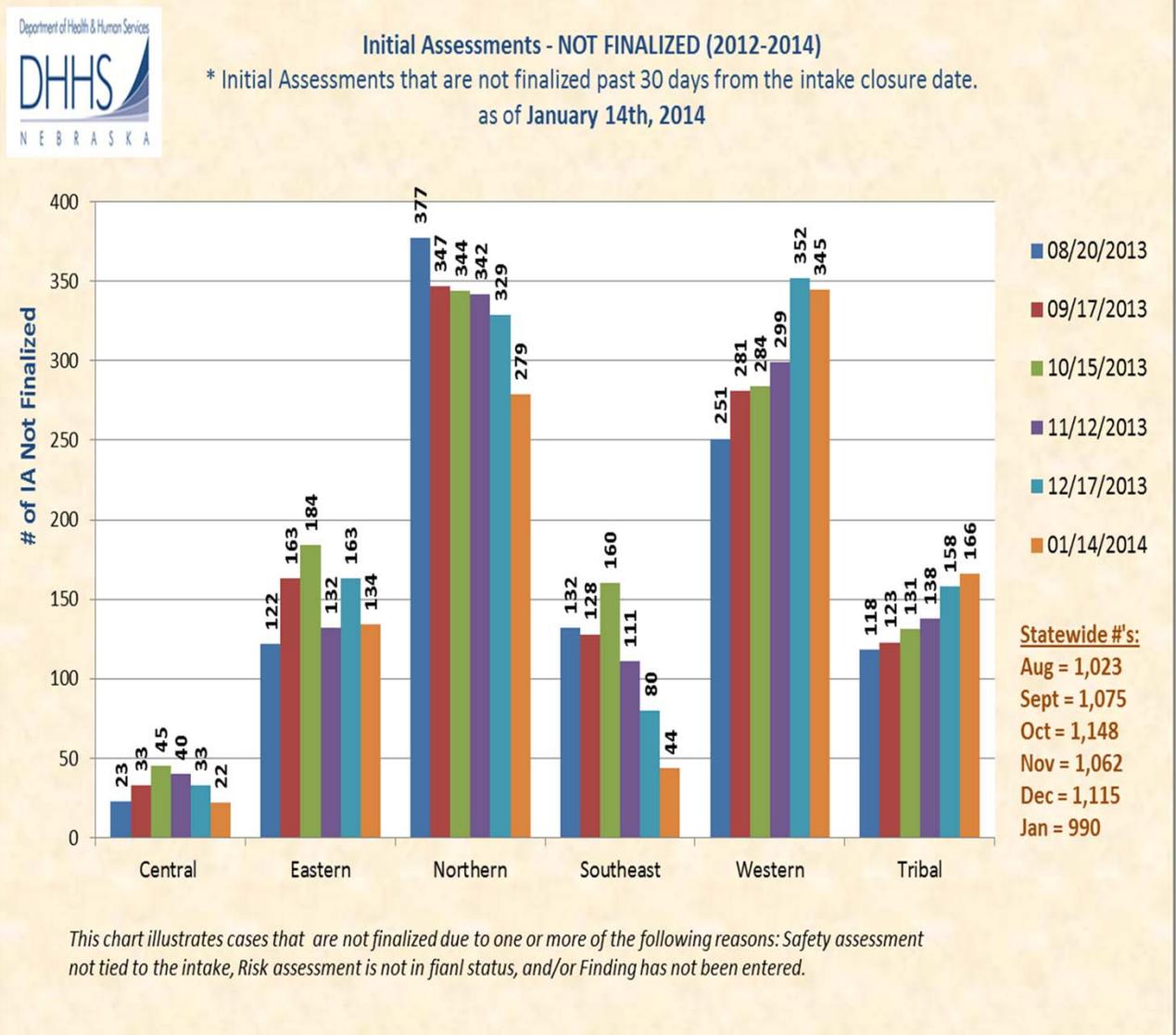
-Systems Team/S.Haber will discuss and make a decision regarding instances when a risk assessment should not be completed.

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.**

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



Data Review Frequency: Monthly

* Note: Chart is new – Information was displayed in a different format in previous reports.

IA – Contact Timeframes

Strengths/Opportunities:

-Dec 2013: Increase in P1 and P2 measures. Slight decrease in P3. The most common reason for missed contacts is due to No SDM Found. 1/2 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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- 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 is closed by the hotline, so 8:00 am means we must respond by 8:00 am the following day.
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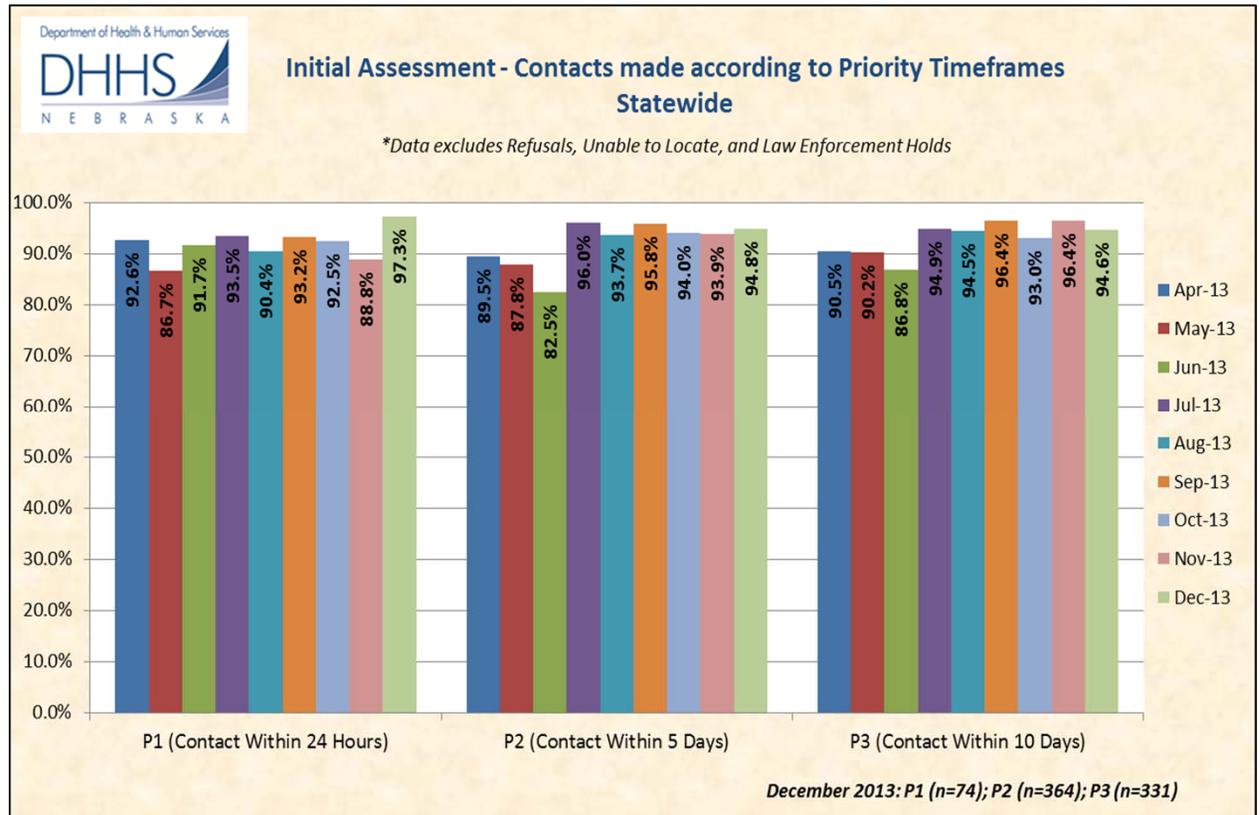
- Upcoming Quick Tip will include video instructions on how to use weekly InfoView reports to identify intakes not tied etc.

CQI Team Priority:

- Statewide

*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.



December 2013: Reason for Missed Contacts	
Not Tied - No SDM Found	19
Not Timely	6
Contact Date Prior Intake Date	4
No Victim in the Intake	4
ARP ID Issue - Contact Timely	3
No Contact Documented	2
APSS - Not Contact Documented	1
Total	39

Count Missed by Admin	
Spilde	10
Tribal	10
Crankshaw	7
Alavi	3
Zimmerman	2
Duncan	2
Dement	2
Baker	1
Schiermeister	1
Jelinek	1
Total	39

Data Review Frequency: Monthly

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

IA – Contact Timeframes

Strengths/Opportunities:

* December 2013: ESA, SESA, NSA and WSA achieved 100% for P1 Contacts. **NSA achieved 100% for all timeframes this month. Congratulations!! ESA was close with 100% for P1&P3 and 99% for P2.**

Barriers:

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

Action Items:

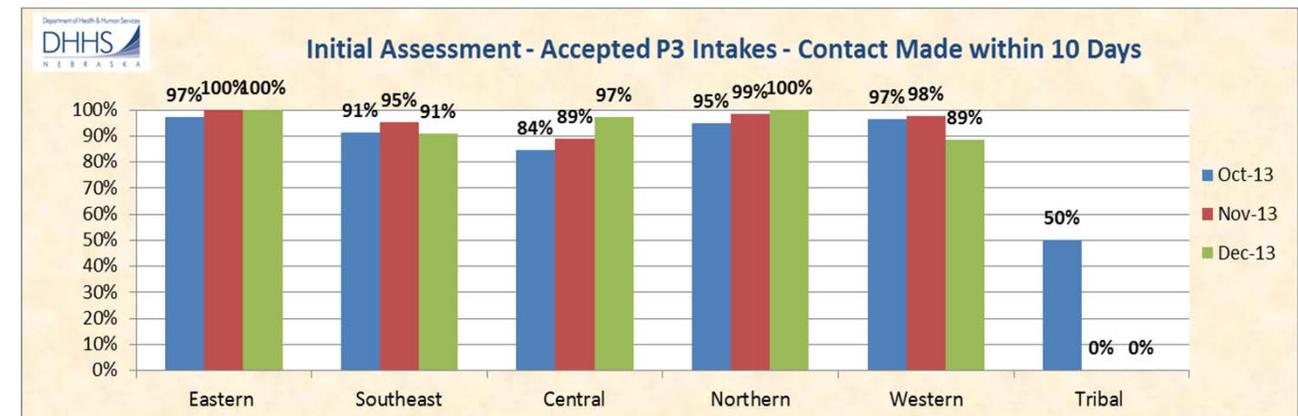
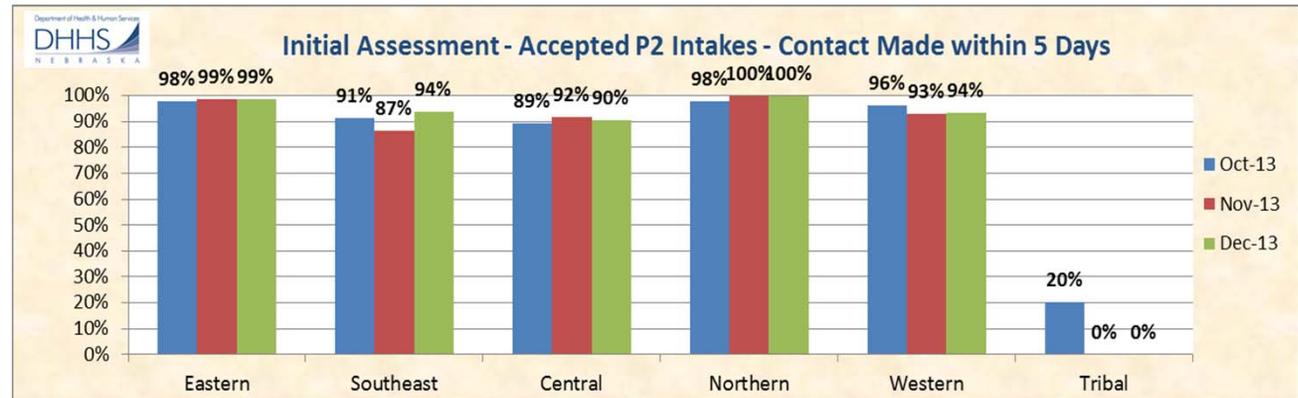
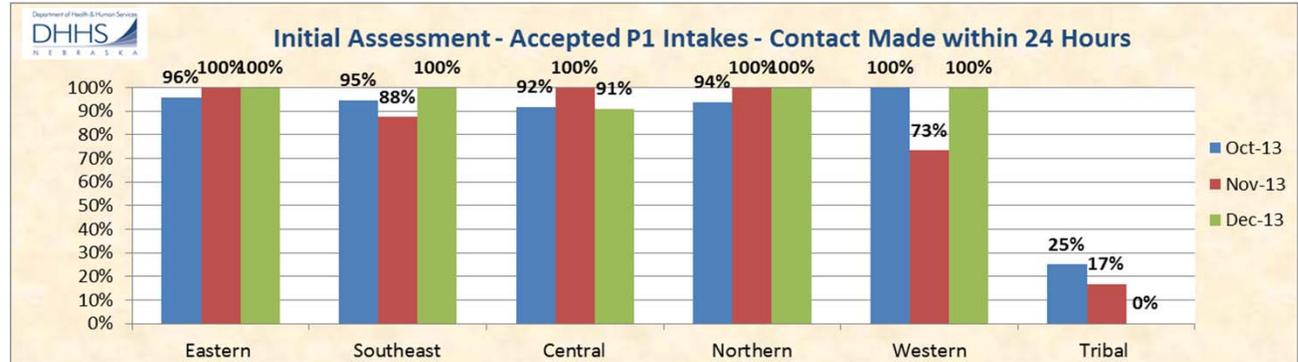
*Completed:

- 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:

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:**

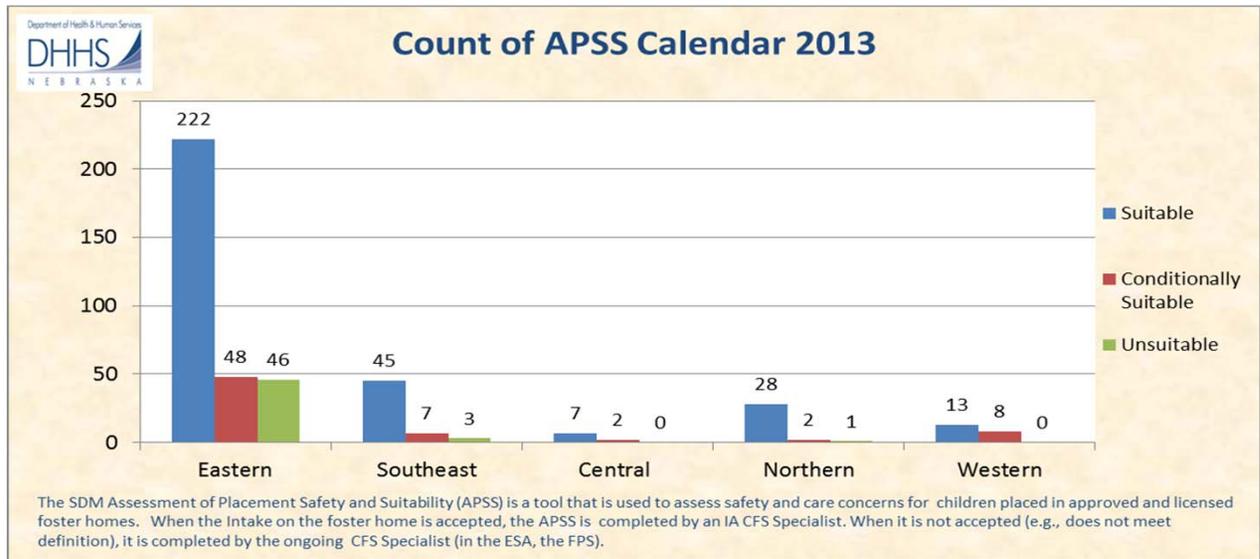
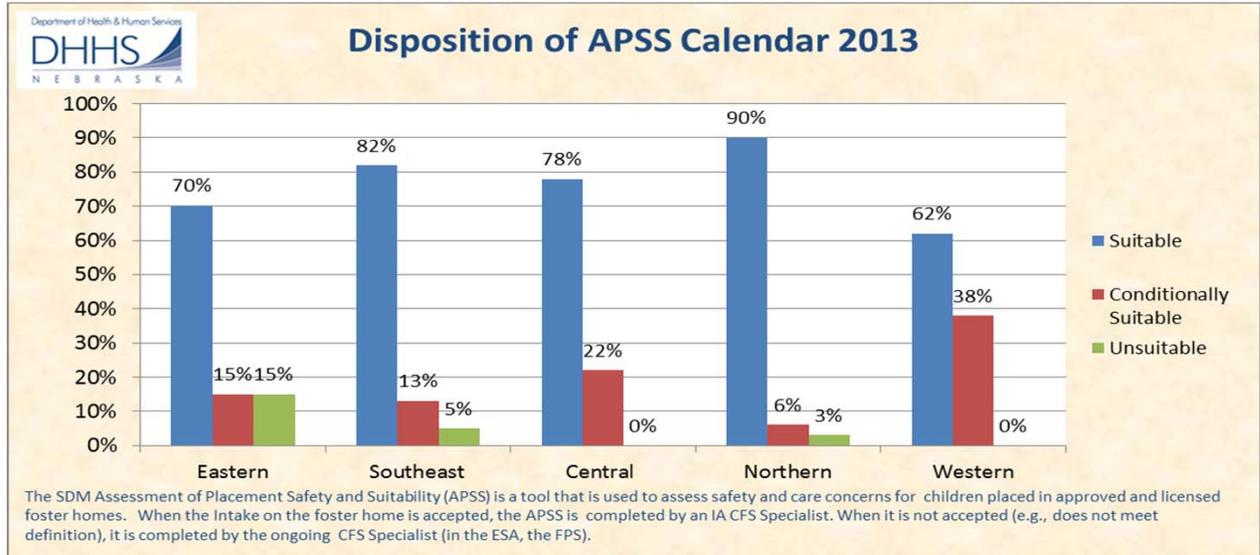
Definitions:

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.

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



Data Review Frequency: Monthly

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

Absence of Maltreatment in Six Months

Strengths/Opportunities:

Dec 2013: ESA, CSA & NSA are exceeding the target goal at this time. **State met the target goal for this measure 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:*

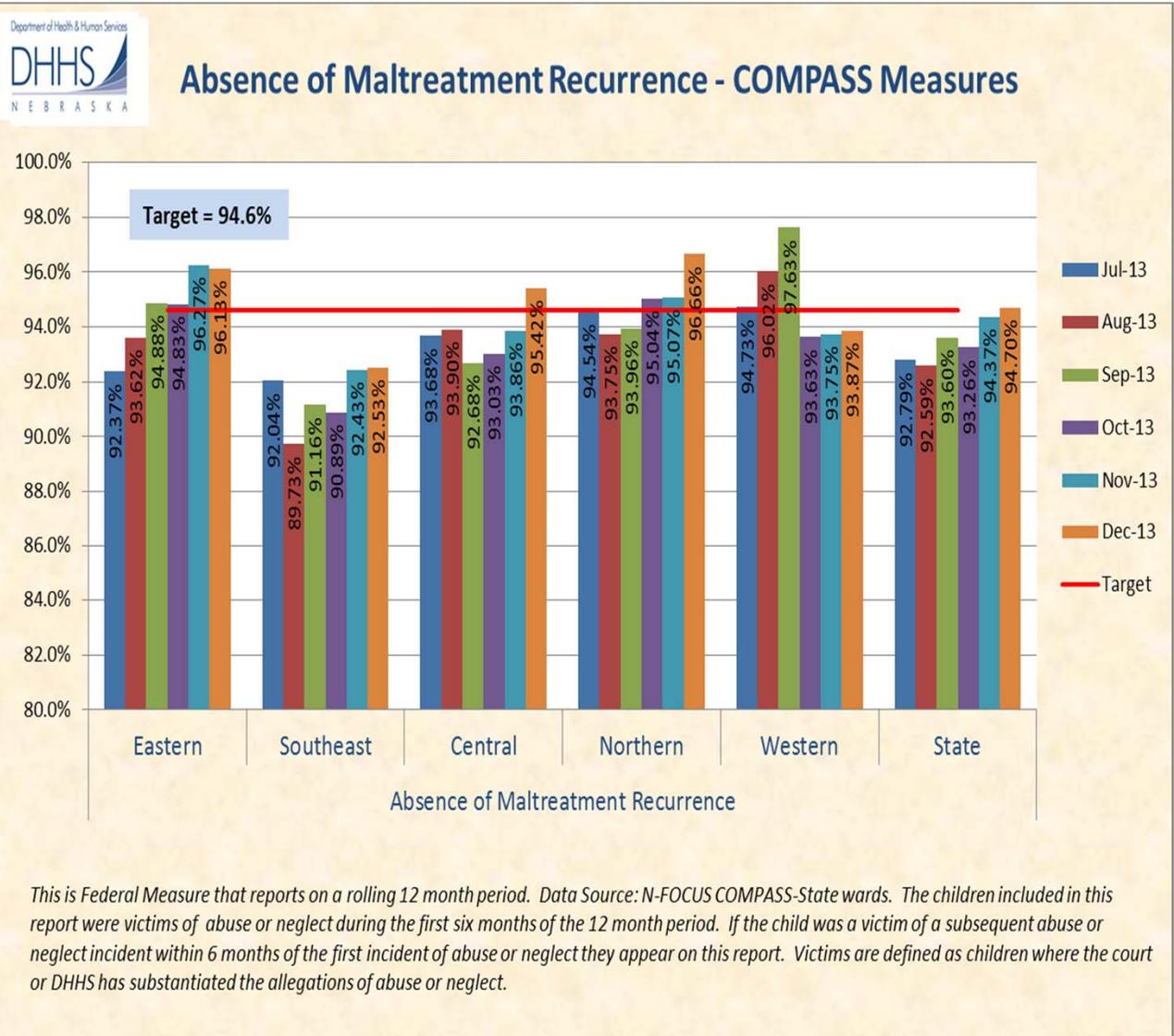
- A workgroup will convene to look at reason for case involvement and put instructions together on how to document reason for case involvement to better capture information about substance abuse and other reasons for case opening/involvement.
 -CQI team will complete additional breakdown of repeat maltreatment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

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



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

Absence of Maltreatment in Foster Care

Strengths/Opportunities:

Dec 2013: ESA is the only Service Area that is not meeting the target goal for this measure.

Barriers:

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

Action Items:

**Completed:*

- Southeast Service Area Administrator and the Foster Care Review Office Director met and created a process to staff and address barriers for repeat maltreatment in foster care cases in Southeast Service Area.

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

- 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.

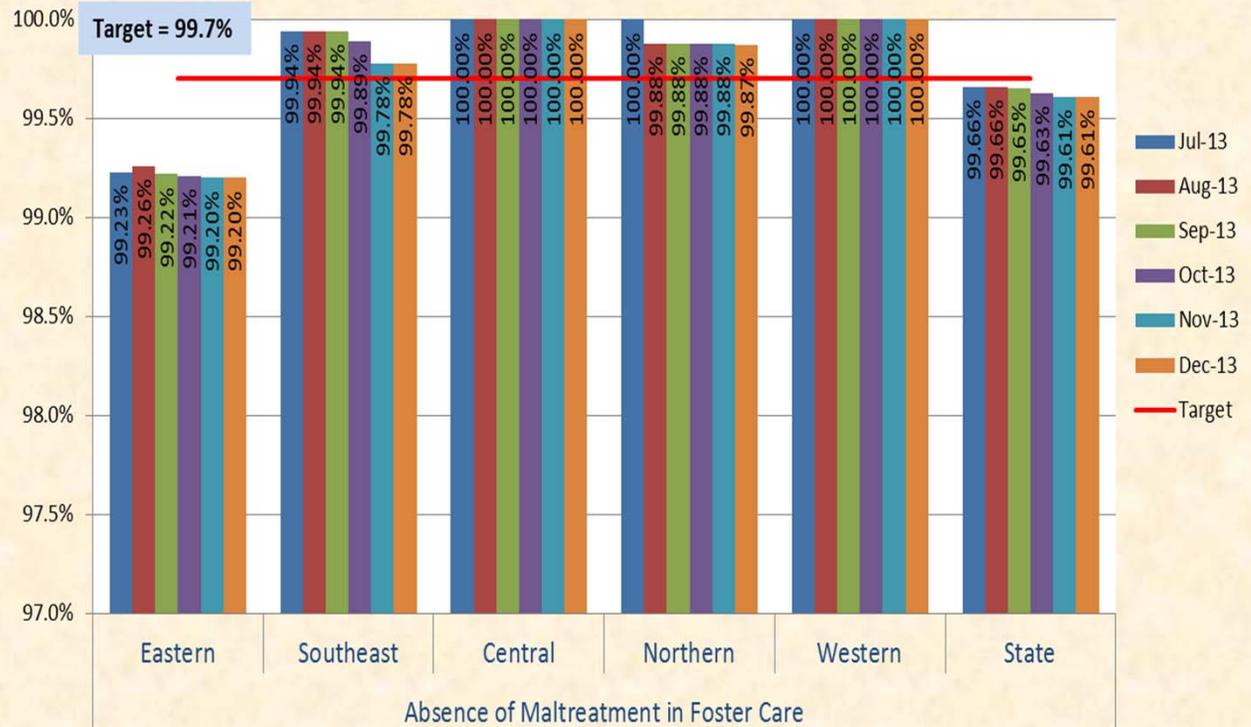
CQI Team Priority:

**Statewide External Stakeholder Team*

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



Absence of Maltreatment in Foster Care - COMPASS Measures



This is a Federal Measure that reports on a rolling 12 month period. Data Source: N-FOCUS COMPASS-State wards. This measure is of all children who are placed outside of their parental home either in a foster home or group care, the percent that were not abused or neglected by either a foster parent or a facility staff member.

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

Permanency for Children in Foster Care

Strengths/Opportunities:

Dec 2013: All Service Areas continue to meet the target goals for this measure. CSA,NSA and WSA are seeing a decrease in the last few months.

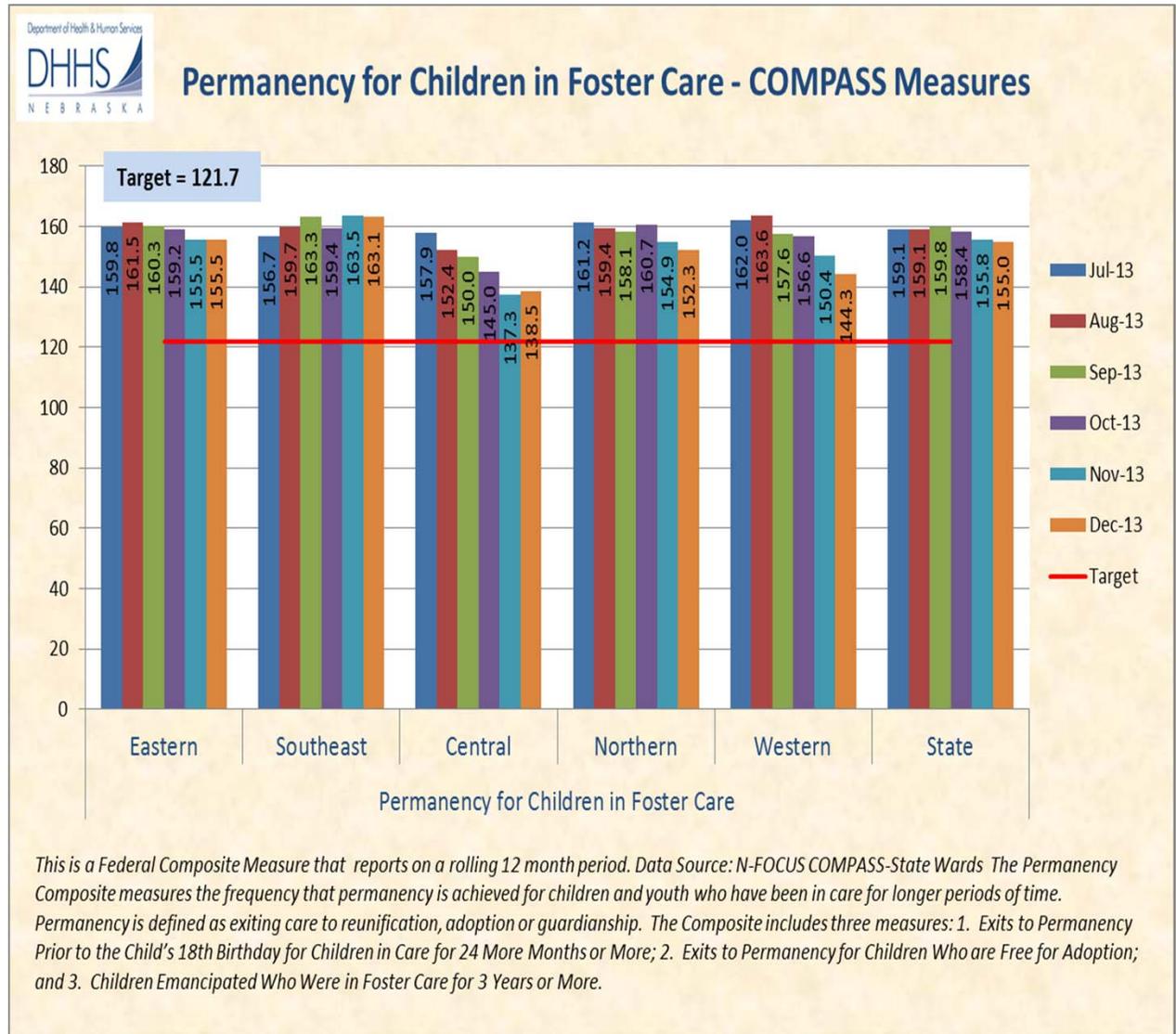
Barriers:

Action Items:

*Completed:

*Planned:

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



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

Timeliness of Adoption

Strengths/Opportunities:

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

Barriers:

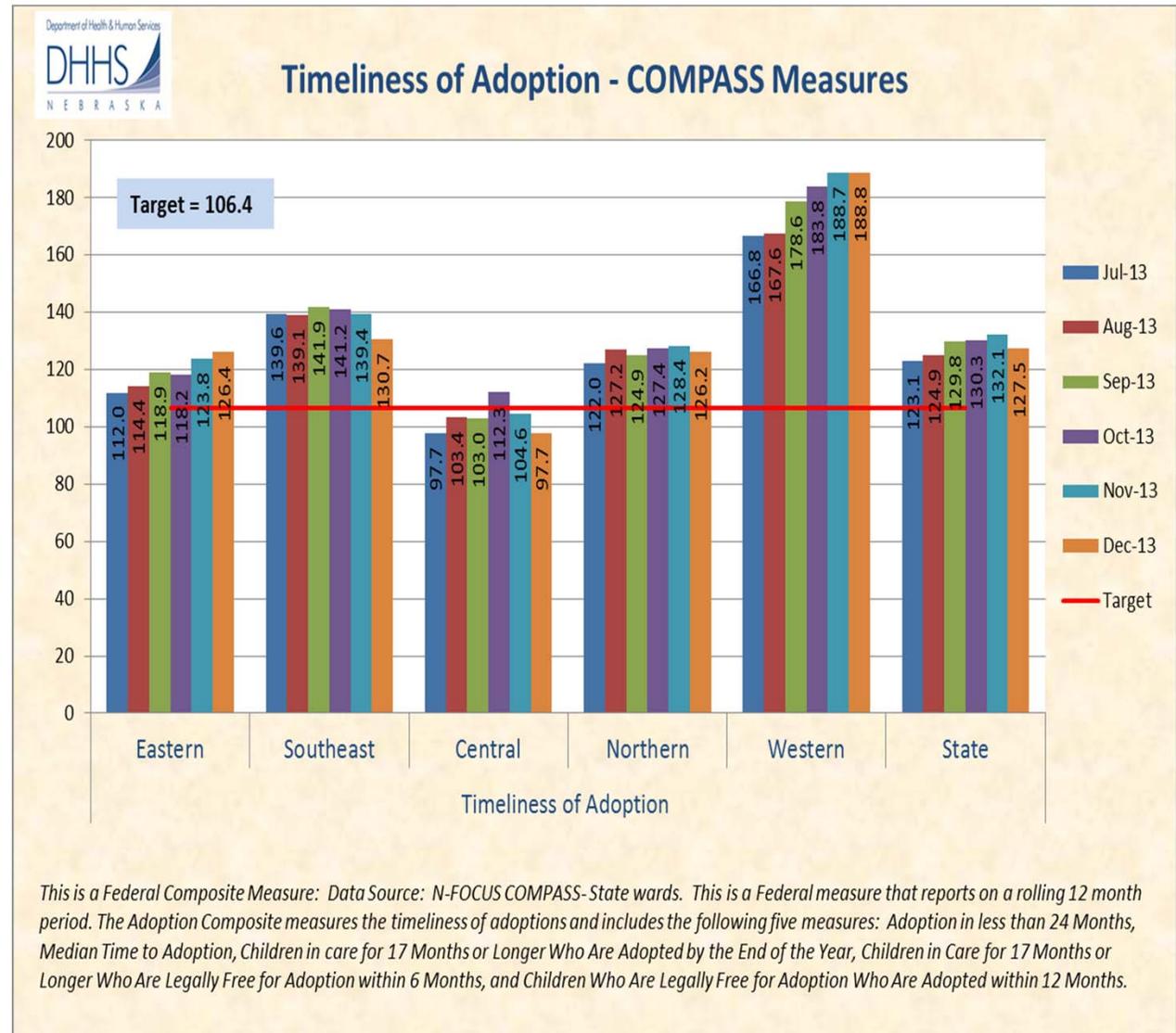
Action Items:

**Completed:*

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

**Planned:*

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



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

Timeliness of Adoption

Strengths/Opportunities:

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

Barriers:

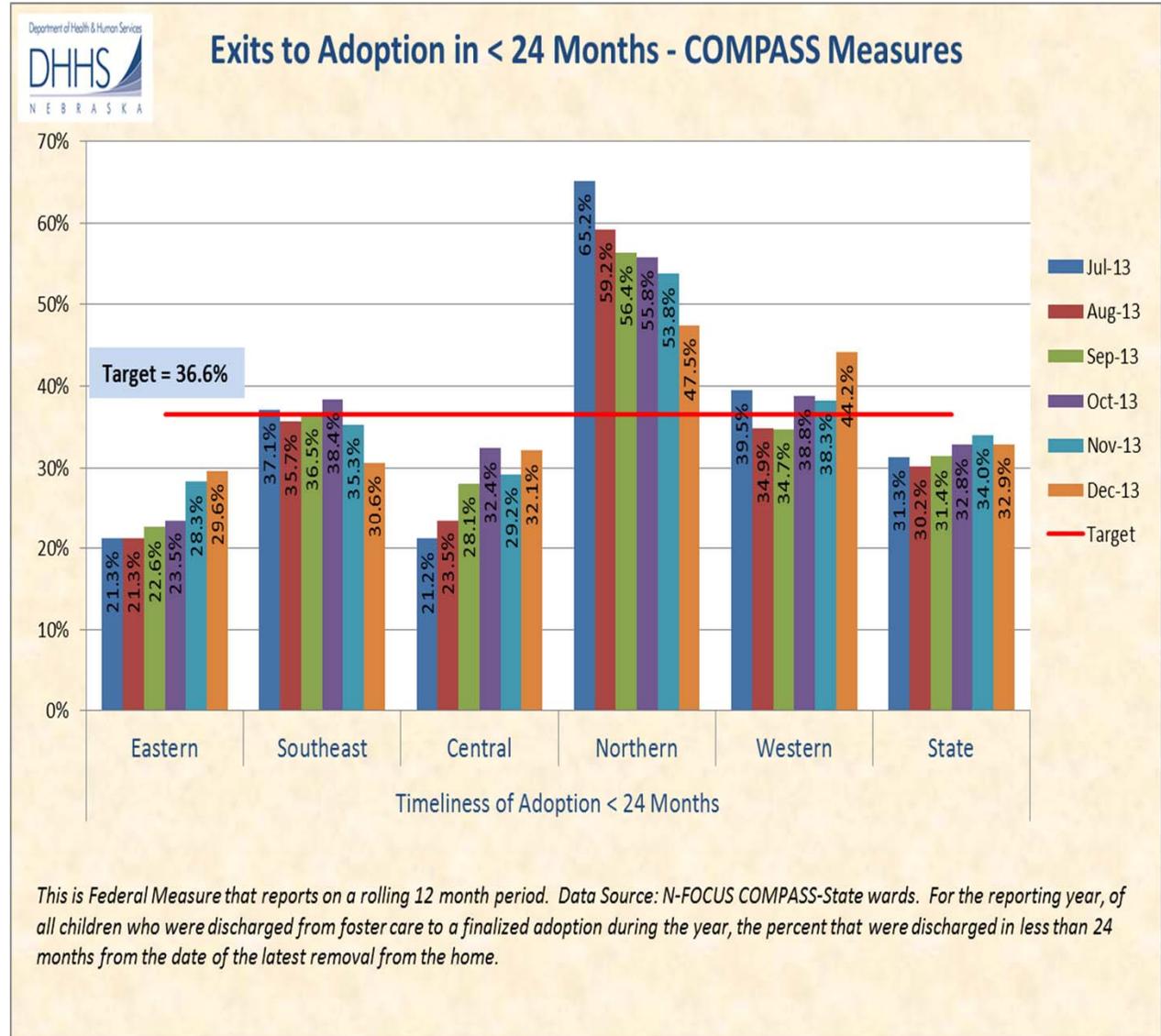
Action Items:

**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:*

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



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

Timeliness & Permanency of Reunification

Strengths/Opportunities:

Dec 2013: WSA was meeting this measure last month but performance dropped this month. All other service areas saw an increase this month.

Barriers:

Action Items:

**Completed:*

- CFS Staff are utilizing Average Number of Out of Home Report to look at length of time and address barriers for youth who are in Out of Home Care for an extended period of time.

- 40 Day Focus Initiatives

- A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
- B.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

**Planned:*

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

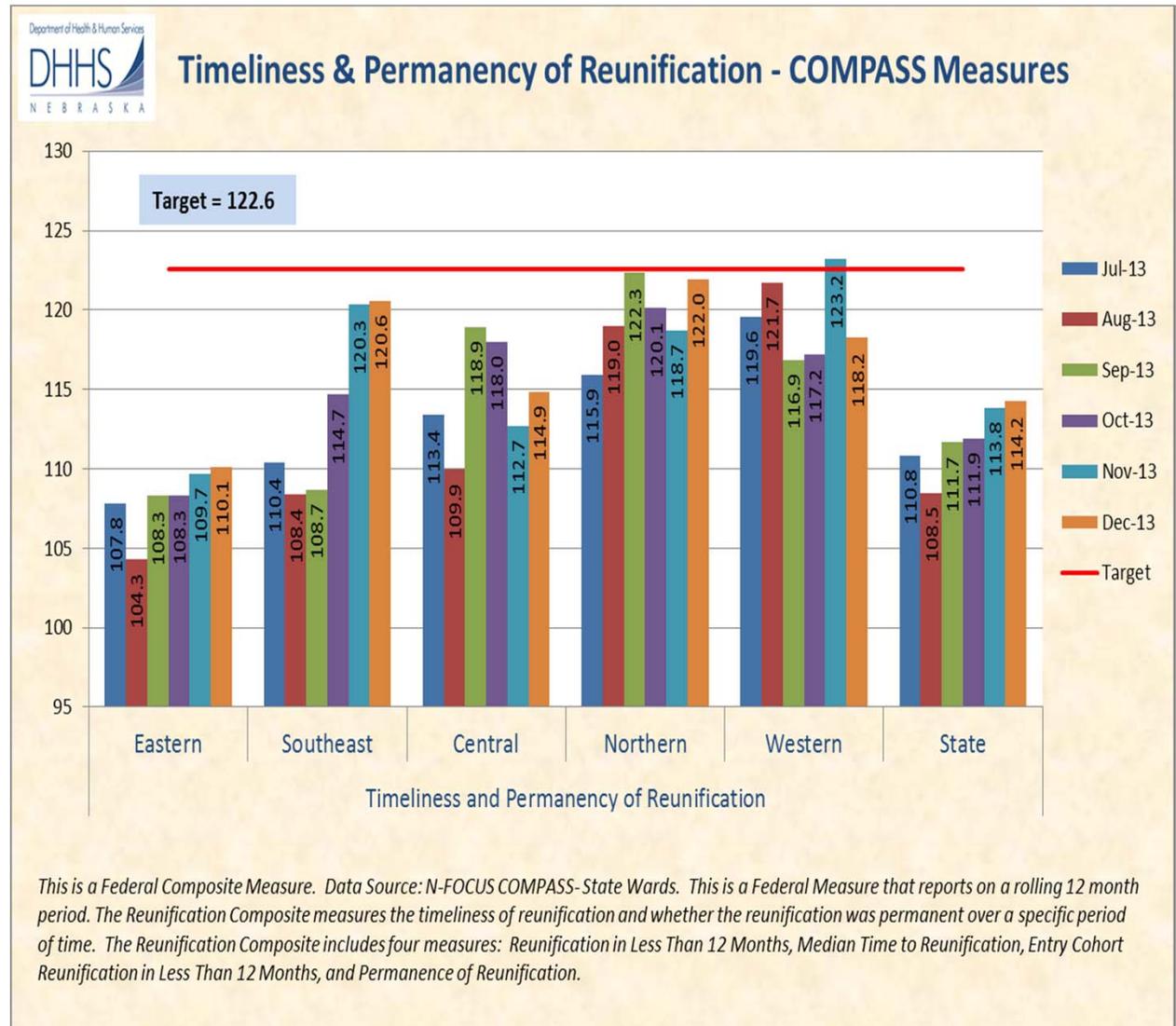
CQI Team Priority:

*Statewide External Stakeholder Team

*Eastern, Northern, Southeast and Western Service Areas

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

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



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

Timeliness & Permanency of Reunification

Strengths/Opportunities:

Barriers:

Action Items:

**Completed:*

- CFS Staff are utilizing Average Number of Out of Home Report to look at length of time and address barriers for youth who are in Out of Home Care for an extended period of time.
- 40 Day Focus Initiatives
 - A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
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**Planned:*

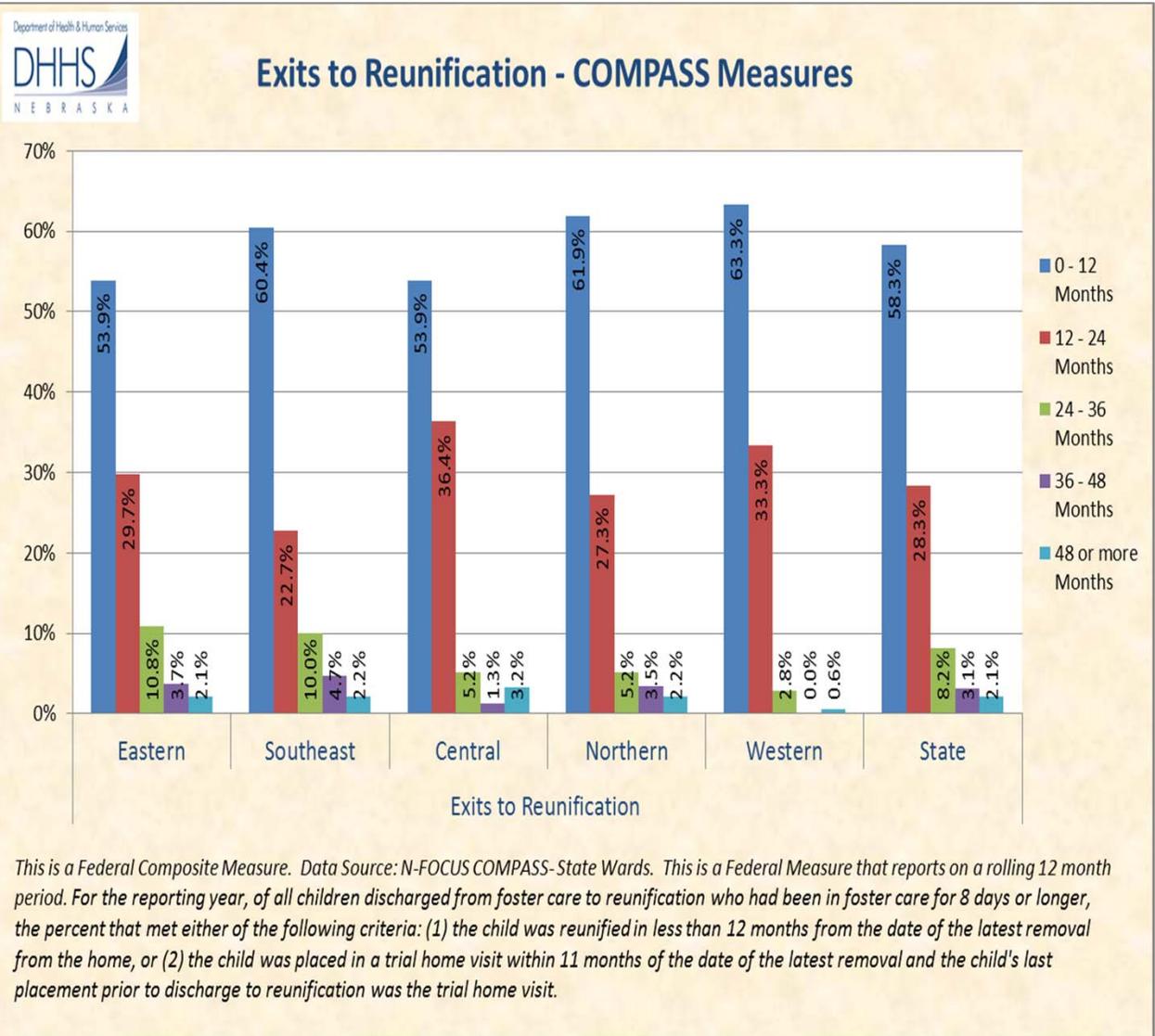
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

CQI Team Priority:

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

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

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



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

Timeliness & Permanency of Reunification

Strengths/Opportunities:

Dec 2013: Increase in performance in ESA and SESA.

Barriers:

Action Items:

**Completed:*

- CFS Staff are utilizing Average Number of Out of Home Report to look at length of time and address barriers for youth who are in Out of Home Care for an extended period of time.
- 40 Day Focus Initiatives
 - A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
 - B.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

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

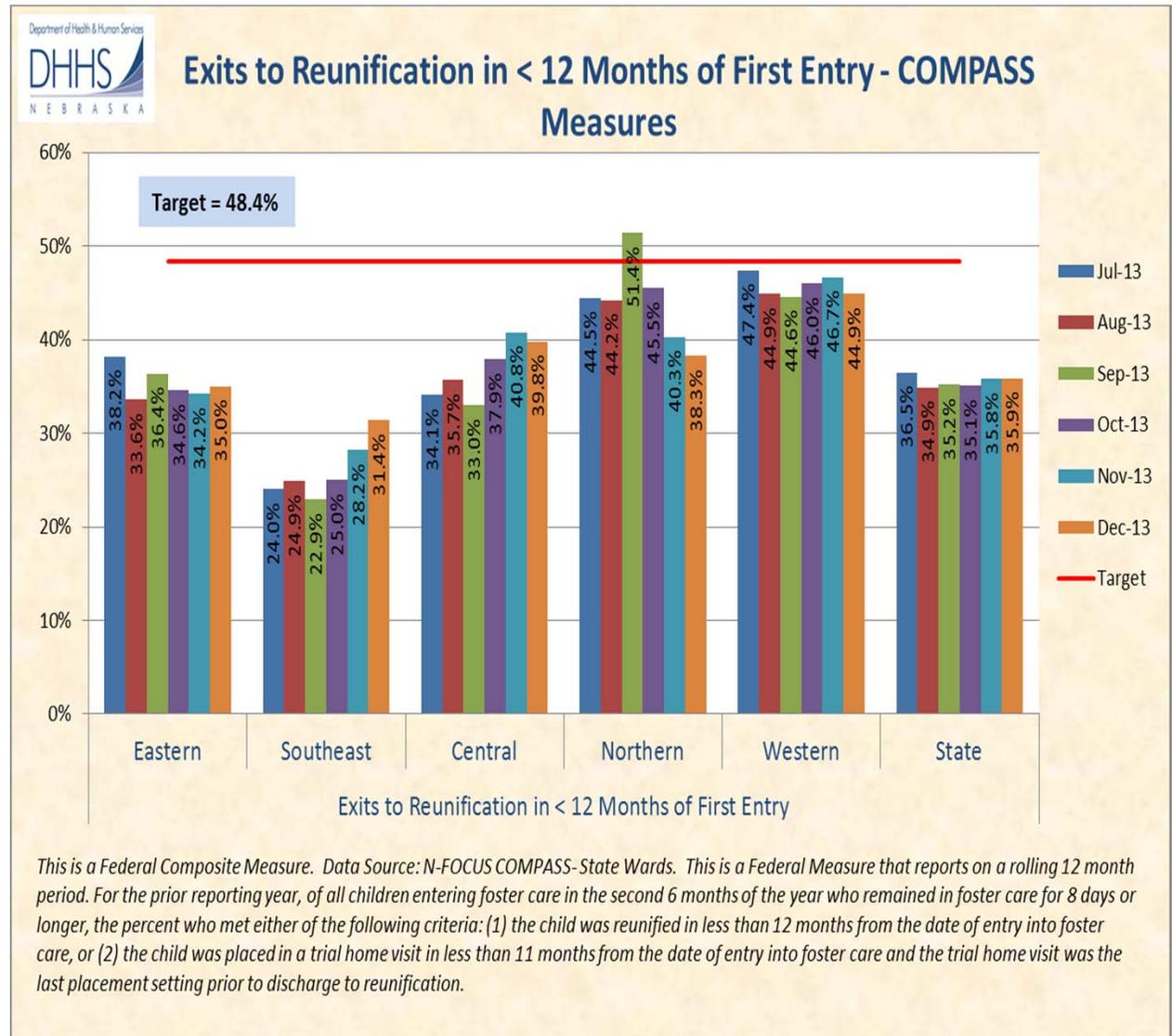
CQI Team Priority:

*Statewide External Stakeholder Team

*Eastern, Northern, Southeast and Western Service Areas

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



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

Timeliness & Permanency of Reunification

Strengths/Opportunities:

-Dec 2013: Decrease in median months in care for 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:*

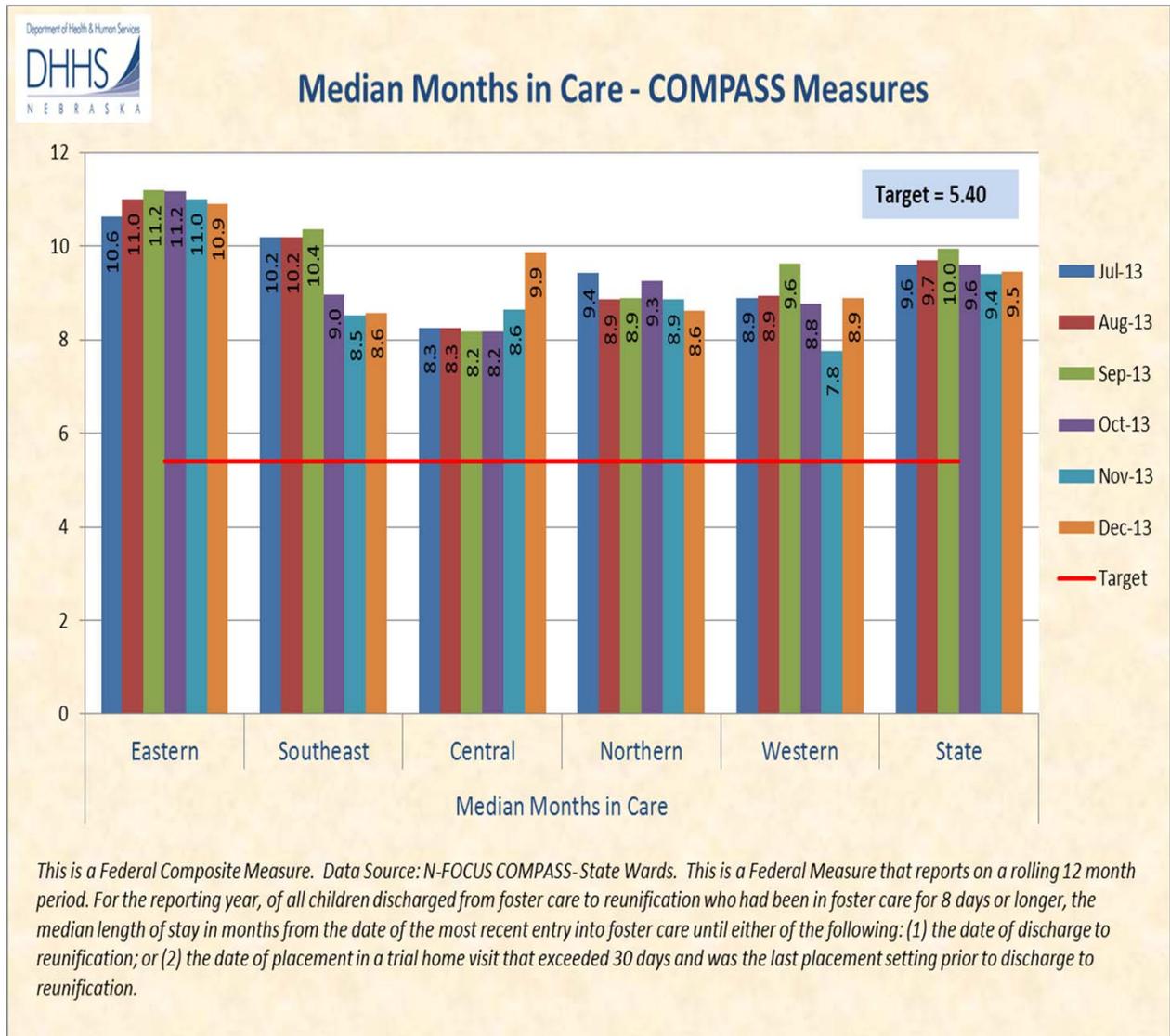
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

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.



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

Timeliness & Permanency of Reunification

Strengths/Opportunities:

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

Barriers:

Action Items:

**Completed:*

- CFS Staff are utilizing Average Number of Out of Home Report to look at length of time and address barriers for youth who are in Out of Home Care for an extended period of time.

- 40 Day Focus Initiatives

- A.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
- B.) OJS & 3B Youth. 228 wards achieved permanency as a result of this initiative.

**Planned:*

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

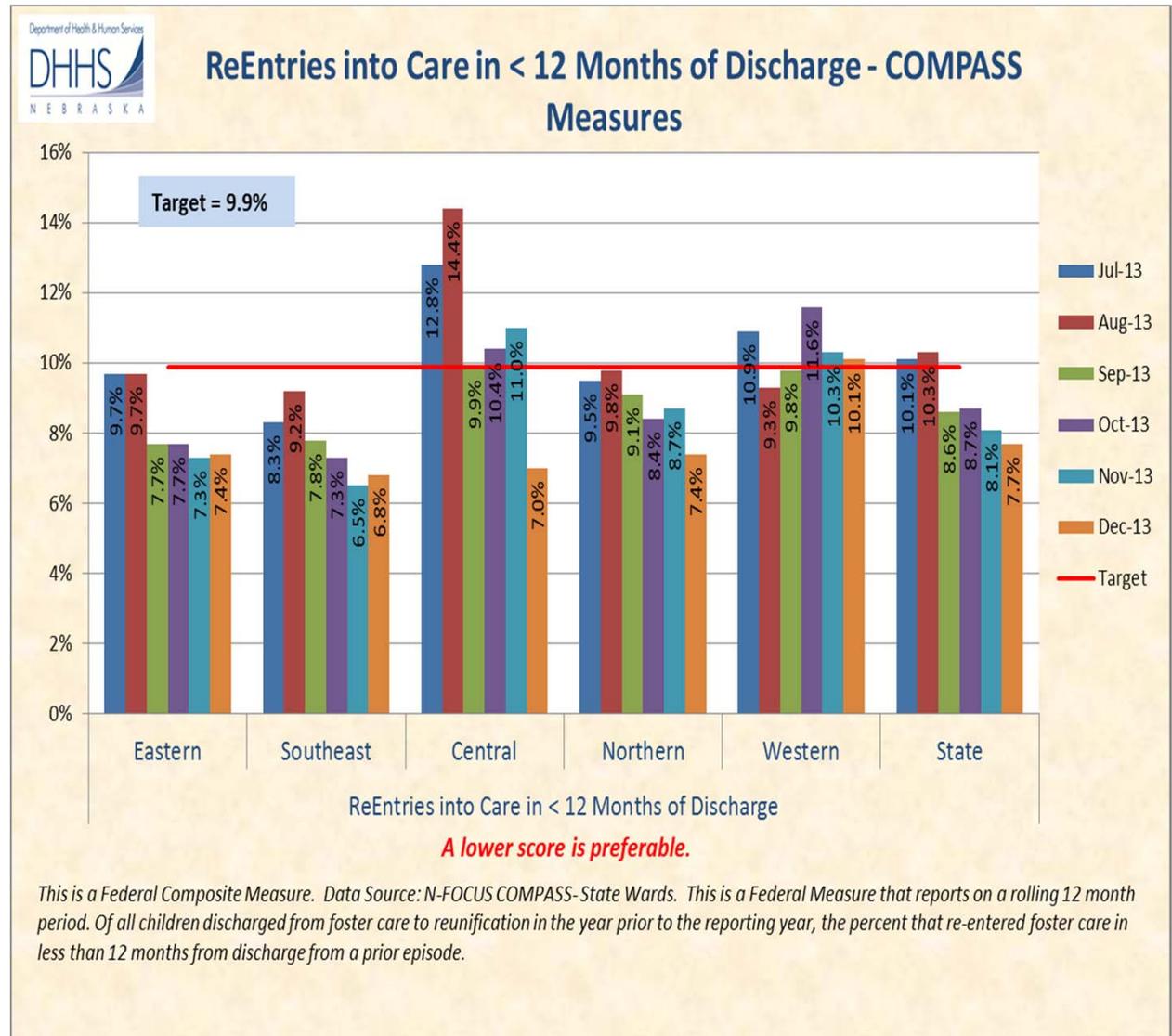
CQI Team Priority:

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*Eastern, Northern, Southeast and Western Service Areas

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

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



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

Placement Stability

Strengths/Opportunities:

-Dec2013: **State met the target goal for the 1st time in November and maintains 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 111.3. 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

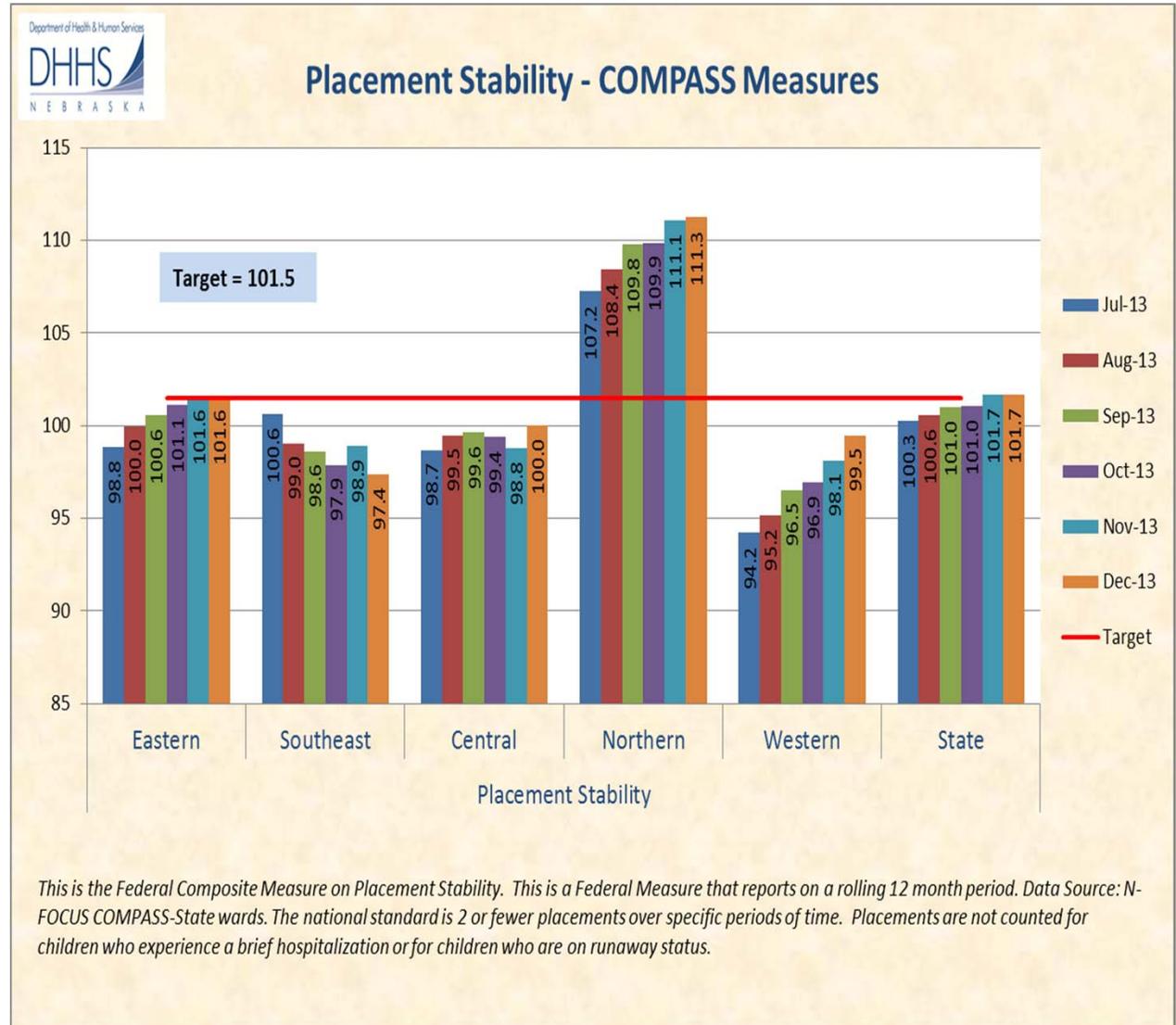
CQI Team Priority:

*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.

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



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

Placement Stability

Strengths/Opportunities:

Dec 2013: ESA, NSA and WSA continue to exceed the target goal for this measure. Nice steady improvements each month in NSA and ESA. Slight decrease in NSA but they still lead the state at 93.4%

Barriers:

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

Action Items:

**Completed:*

- Southeast and Western Service Areas are utilizing Denials and Disruption Tracking/Database to address placement stability issues/needs. Other Service Areas will be implementing this tracking method in the future. Data from this system is shared with foster care agency providers.
- CQI Team provided additional data to each Service Area regarding placement changes in N-FOCUS.

**Planned:*

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

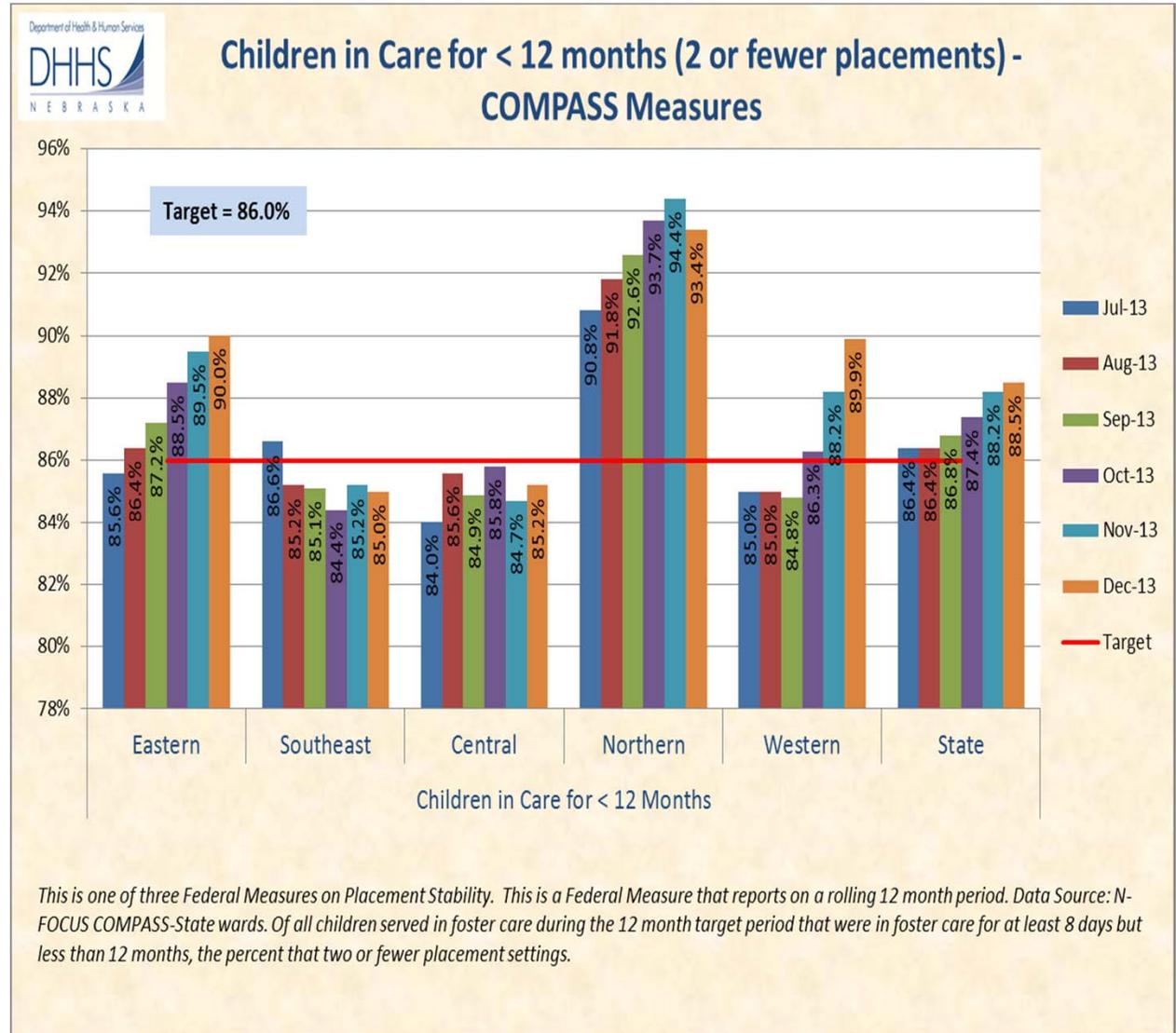
CQI Team Priority:

**Statewide External Stakeholder Team*

**Eastern, Northern, Southeast and Western*

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

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



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

Placement Stability

Strengths/Opportunities:

Dec 2013: CSA and NSA are meeting the target goal for this measure. NSA leads the state at 76.6%. SESA dropped below the target goal this month.

Barriers:

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

Action Items:

*Completed:

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

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

*Planned:

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

CQI Team Priority:

*Statewide External Stakeholder Team

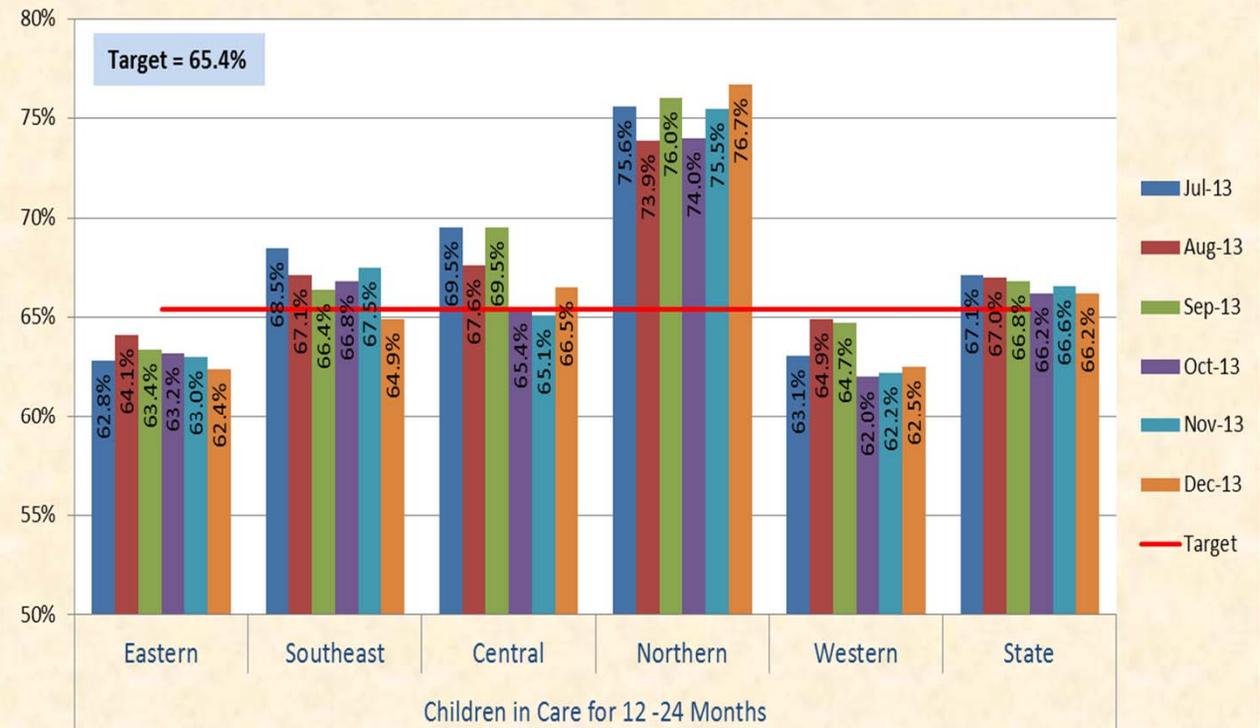
*Eastern, Northern, Southeast and Western Service Areas.

*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



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.

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

Placement Stability

Strengths/Opportunities:

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

Barriers:

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

Action Items:

*Completed:

- Southeast and Western Service Areas are utilizing Denials and Disruption Tracking/Database to address placement stability issues/needs. Other Service Areas will be implementing this tracking method in the future. Data from this system is shared with foster care agency providers.
- CQI Team provided additional data to each Service Area regarding placement changes in N-FOCUS.

*Planned:

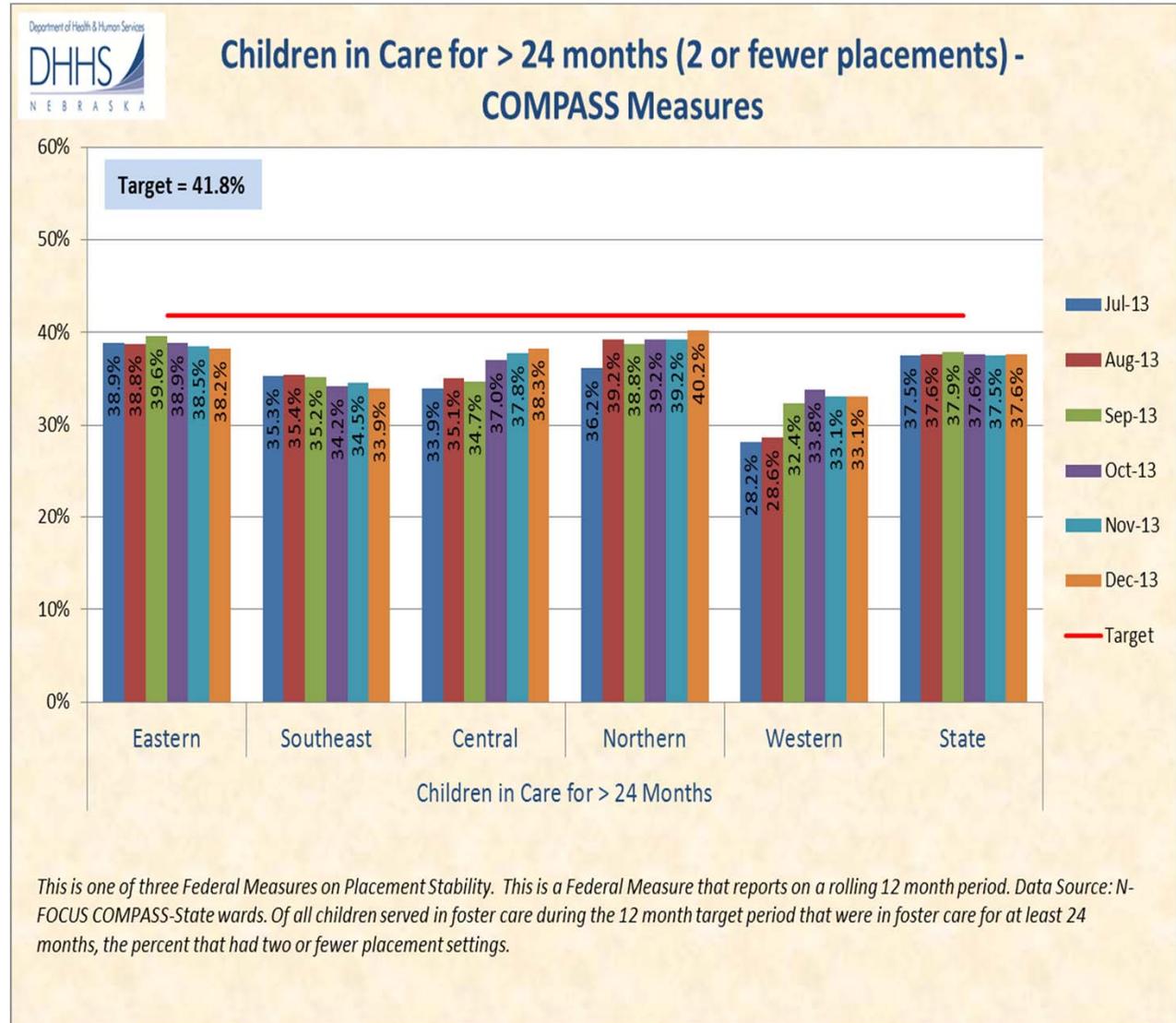
- CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement

CQI Team Priority:

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

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

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



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

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

Kinship Care for Out of Home Wards

Strengths/Opportunities:

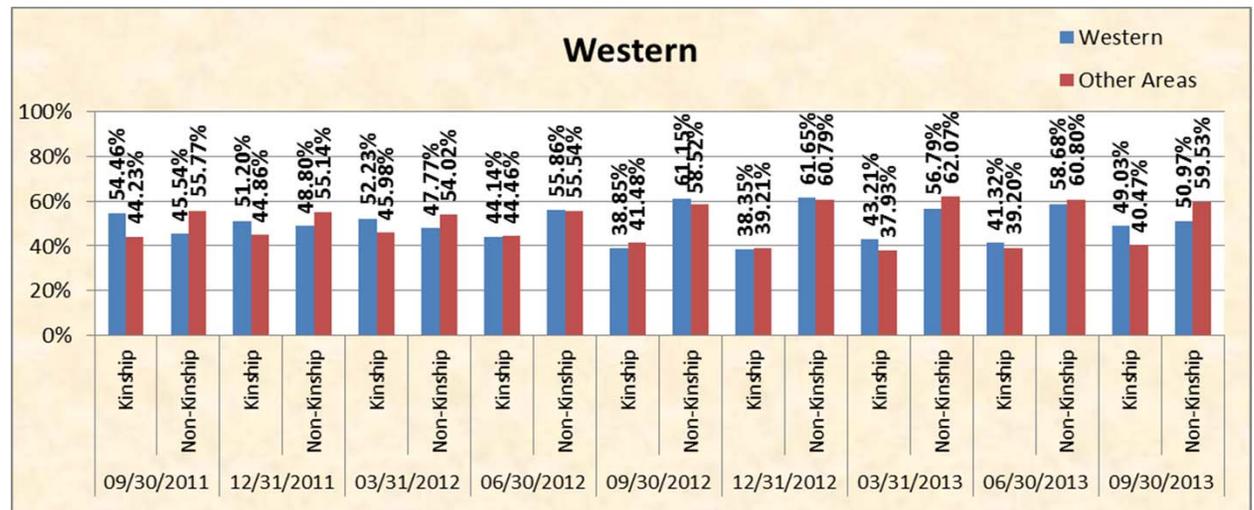
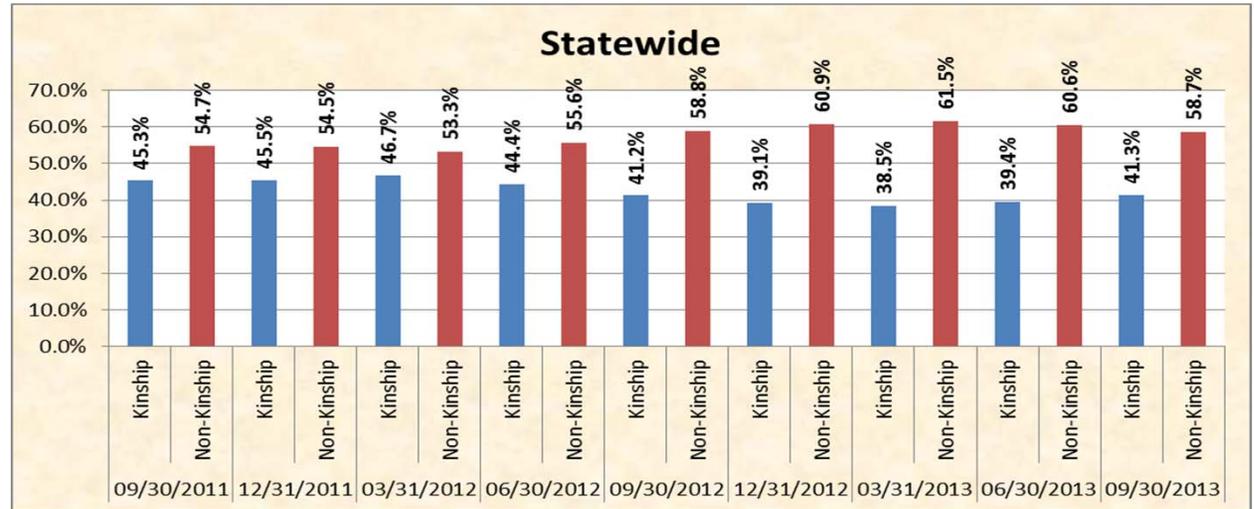
Sept 2013: Slight increase in statewide kinship placements since last quarter. Central Service Area has the lowest number of children in kinship care (29%) while Northern Service Area has the highest (50%).

Barriers:

Action Items:

**Completed:*

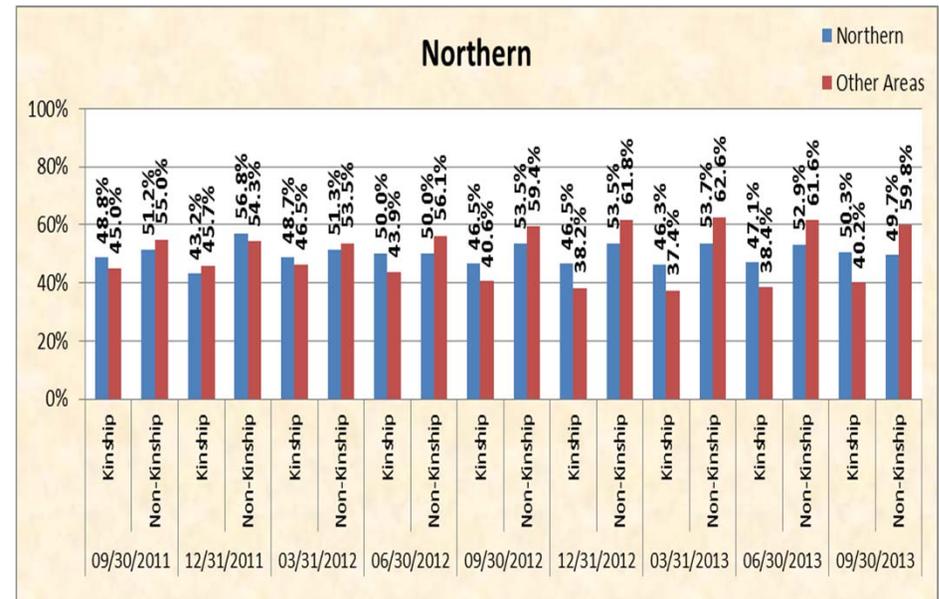
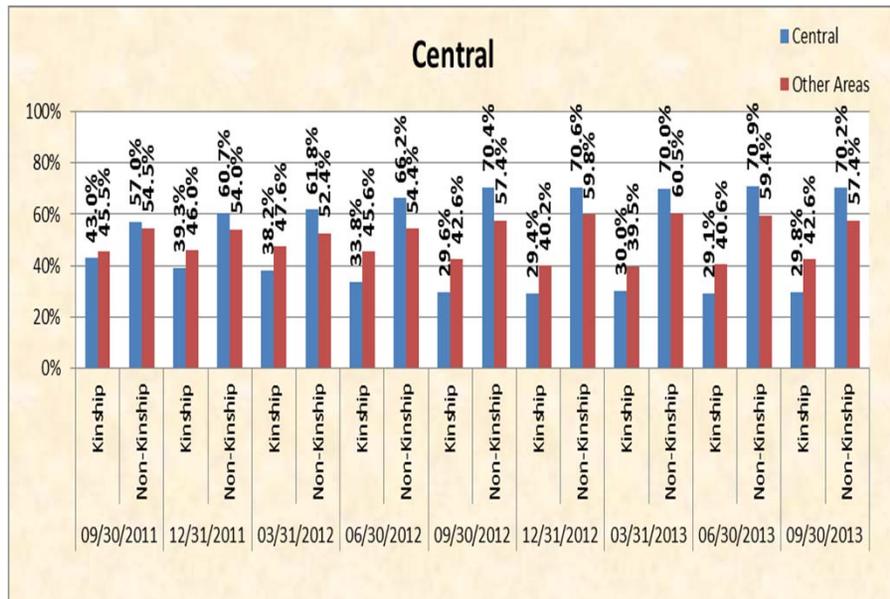
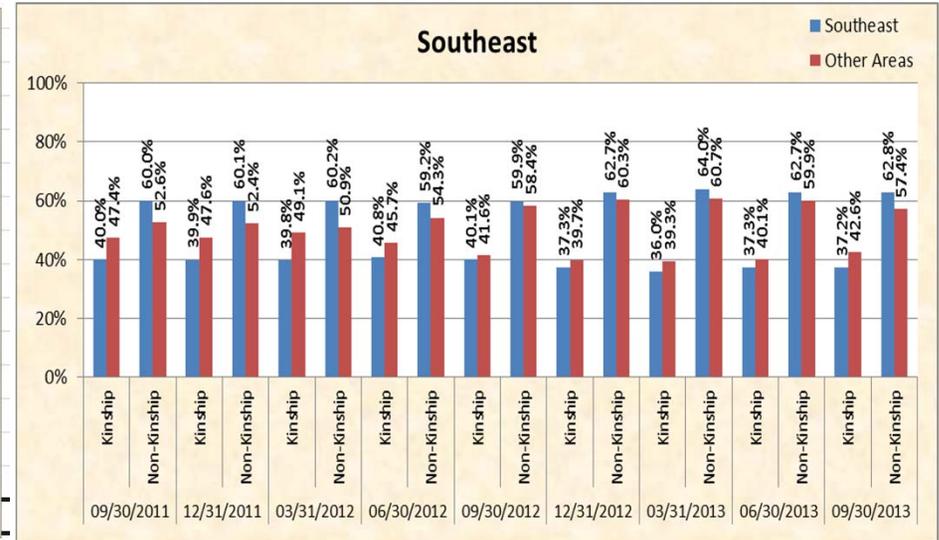
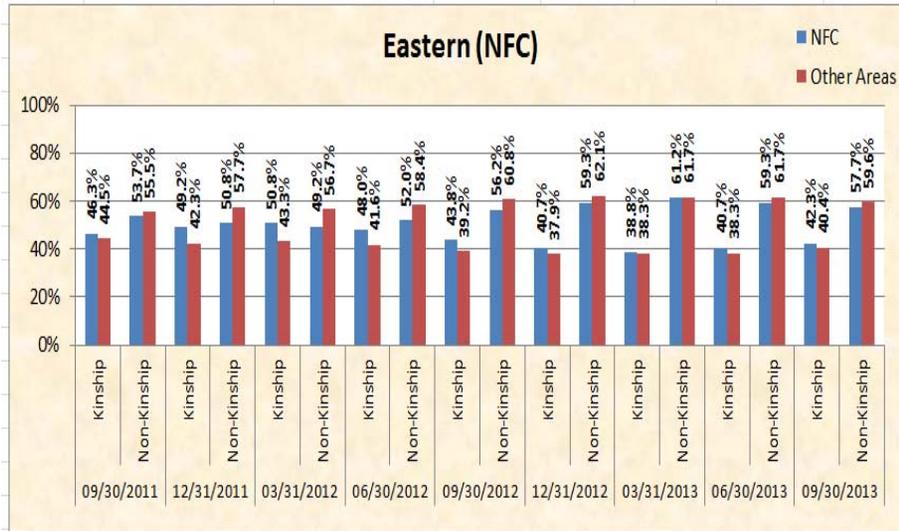
**Planned:*



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

Kinship Care for Out of Home Wards

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



Placement Change Documentation w/in 72 hours

Strengths/Opportunities:

-Dec 2013: Decrease 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).

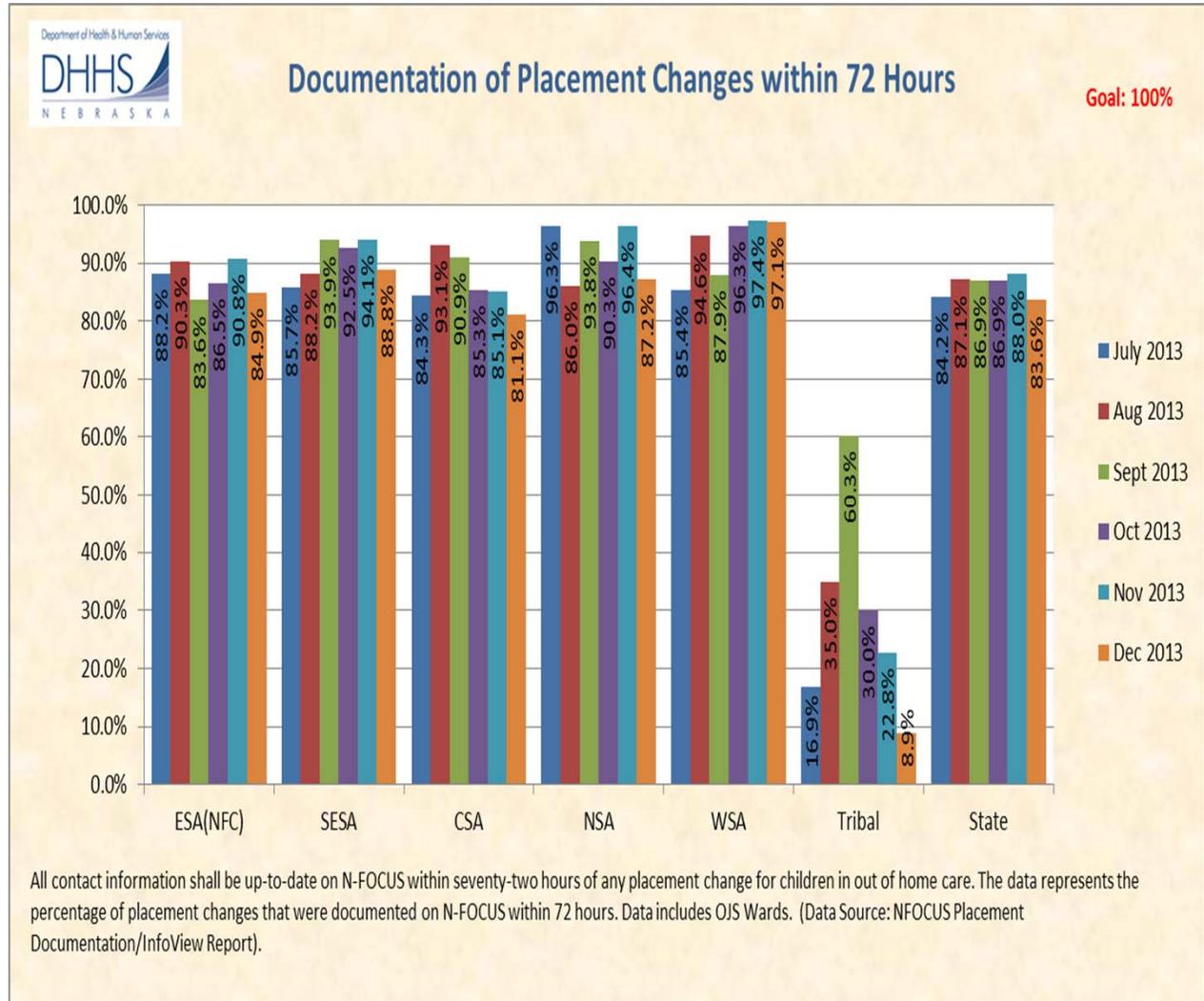
CQI Team Priority:

*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.



Data Review Frequency: Monthly

Family Team Meeting

Strengths/Opportunities:

-Dec 2013: State performance remained at 92% this month. NSA had the highest score at 99.5% followed by NFC at 99.7%. CSA and Tribes are the areas not currently meeting at least 90% in this measure.

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

Barriers:

-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.

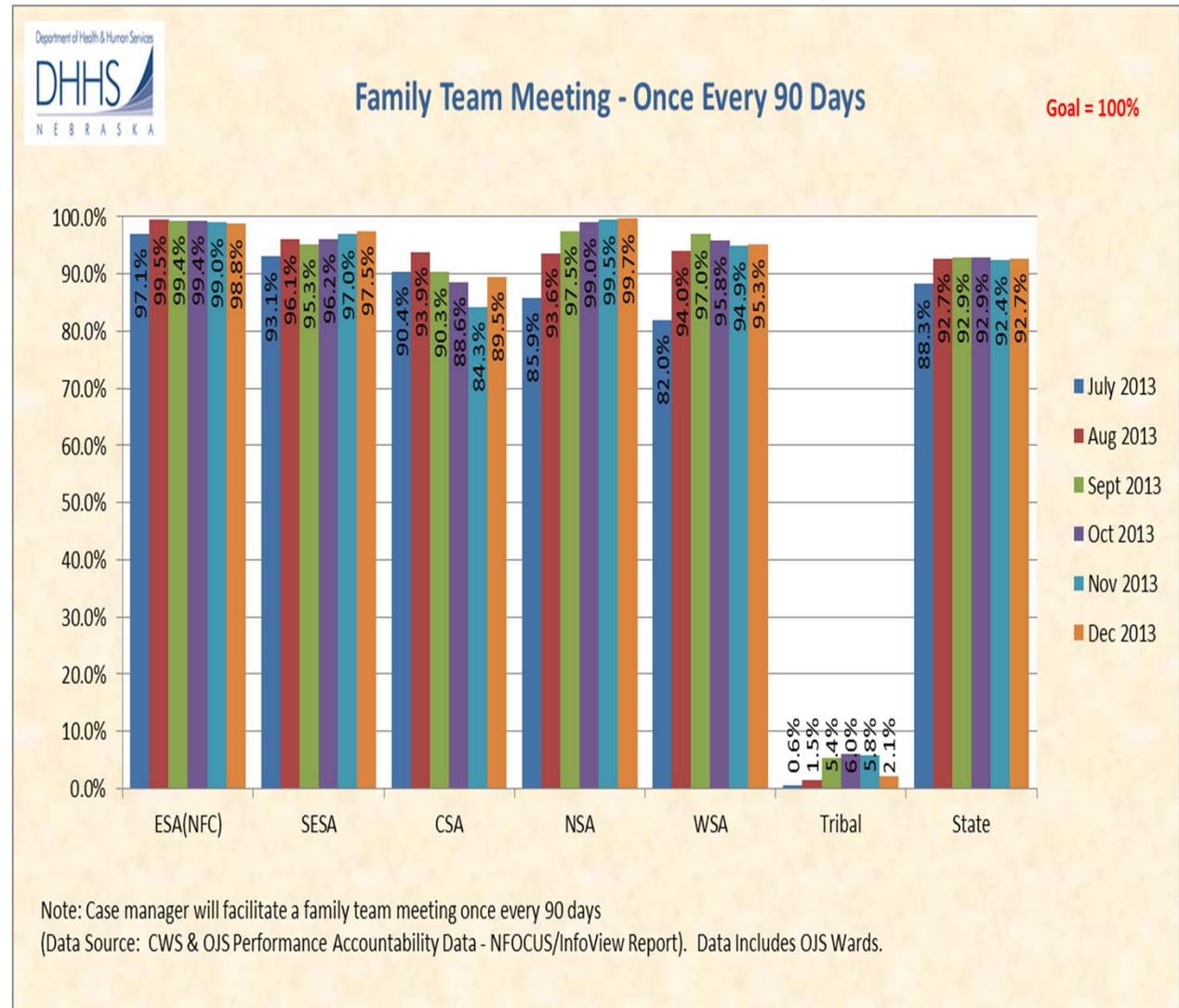
CQI Team Priority:

*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



Data Review Frequency: Monthly

**Case Planning Involvement –
CFSR 18**

Strengths/Opportunities:

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

Barriers:

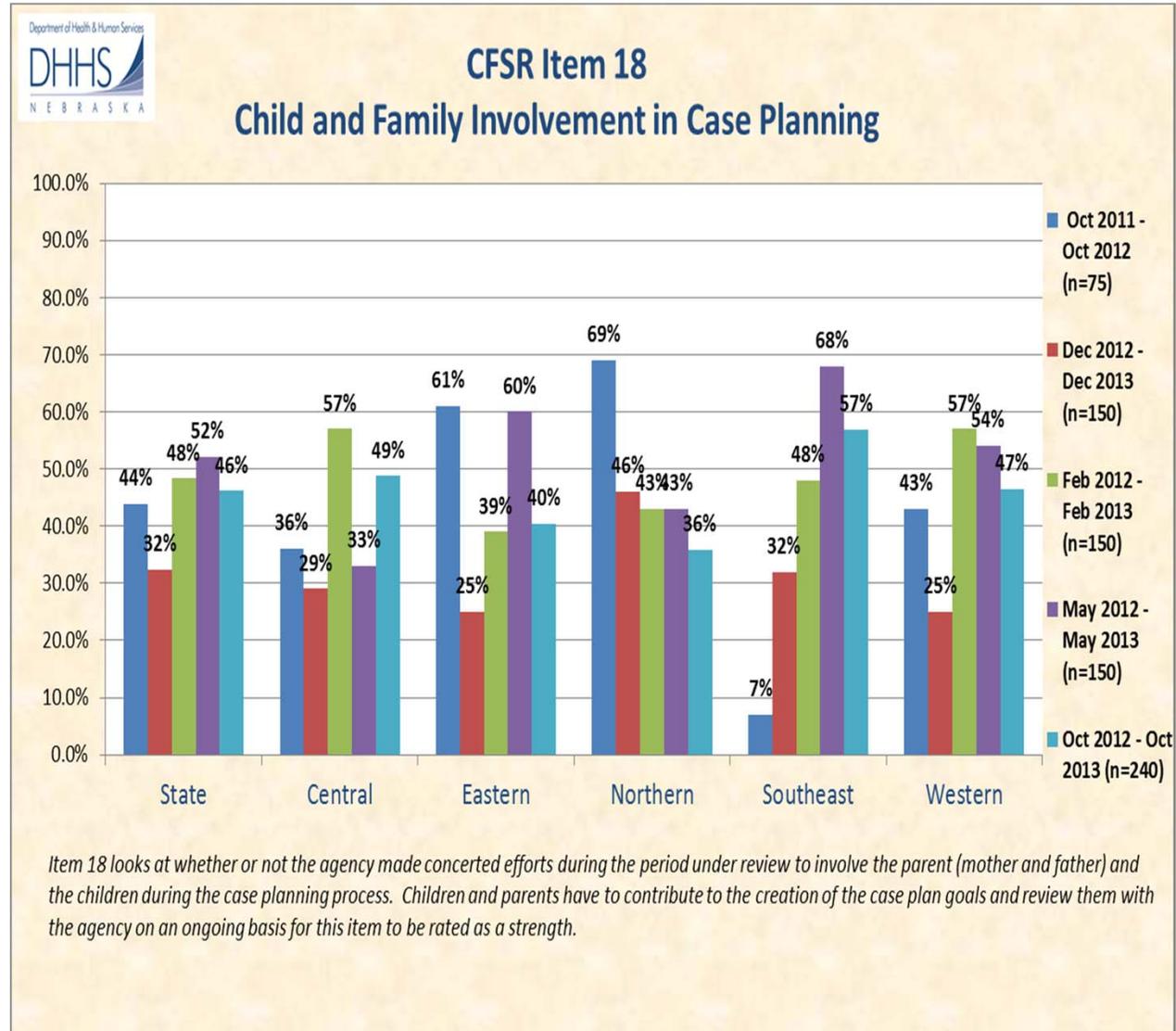
- Lack of ongoing efforts to locate and/or engage non-custodial parent in case planning (in most cases, this is the child's father).
- Lack of ongoing efforts engage developmentally appropriate children in case planning.
- Lack of good quality documentation during family team meetings and face to face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

Action Items:

**Completed:*

**Planned:*

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



Data Review Frequency: Monthly

Federal Visitation with State Wards

Strengths/Opportunities:

-Dec 2013: 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 97% and above for all Service Areas but at 6% for Tribal Cases.

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

Barriers:

-Lack of documentation in tribal cases

Action Items:

**Completed:*

-Case Management Due Date Report includes Monthly Child Contact.

-Sherri Haber and Sherri Eveleth will work with Vicki Maca to identify and provide support to the tribes

-SAA/CFS Admin have been submitting a list and reasons for all missed worker visits with the child to the Deputy Director for review.

-SAA/CFS Admin have been coordinating visits with all youth placed out of state to ensure visits are taking place every month.

**Planned:*

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

CQI Team Priority:

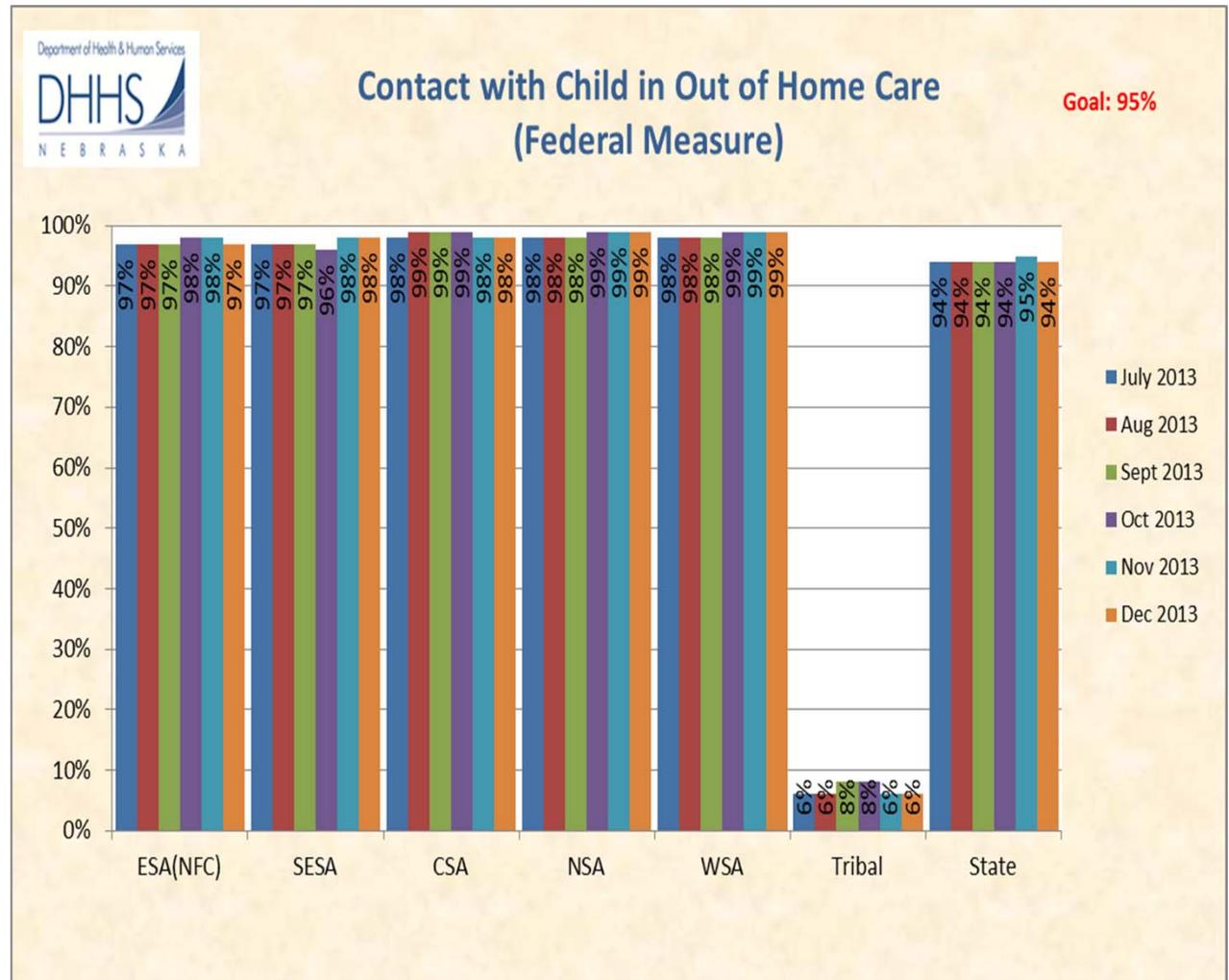
*Central and Southeast Service Areas

*Tribes

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

Data Review Frequency: Monthly

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



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

Monthly Contact with State Wards and Non-Court Involved Child

Strengths/Opportunities:

Dec 2013: Non Court Case - statewide performance increased to 94.6%. *Note: In May 2012, the state performance was at 53.4% for this measure.*

Nov 2013: State wards dropped to 91.6%. Performance is over 96% for all Service Areas but less than 3% for Tribal Cases.

Barriers:

-Lack of documentation in tribal cases

Action Items:

**Completed:*

-Case Management Due Date Report includes Monthly Child Contact.

-Sherri Haber and Sherri Eveleth will work with Vicki Maca to identify and provide support to the tribes

-SAA/CFS Admin have been submitting a list and reasons for all missed worker visits with the child to the Deputy Director for review.

-SAA/CFS Admin have been coordinating visits with all youth placed out of state to ensure visits are taking place every month.

**Planned:*

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

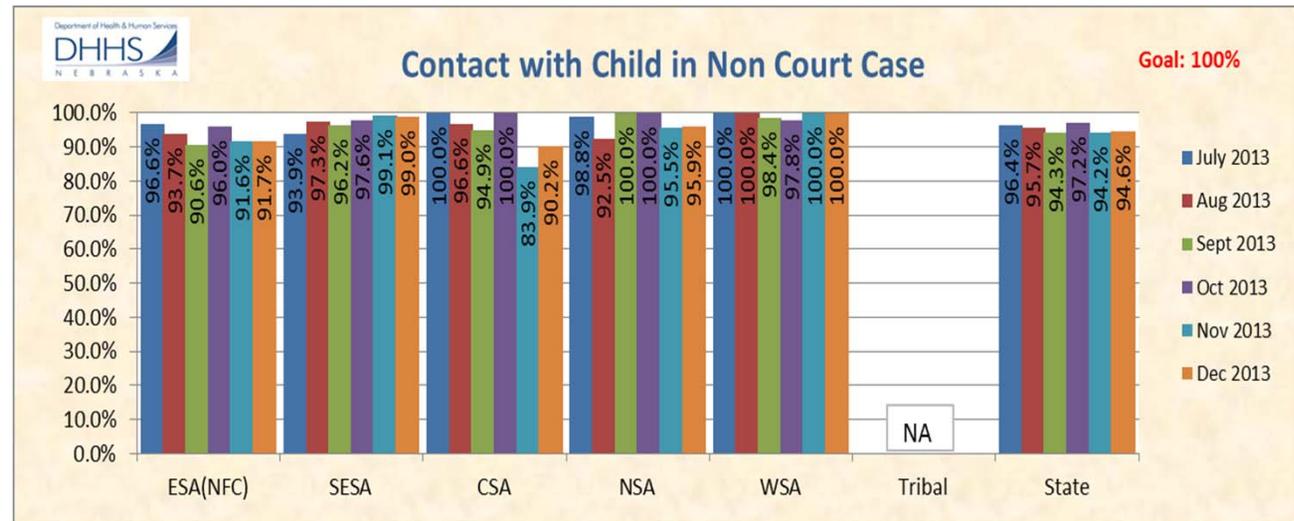
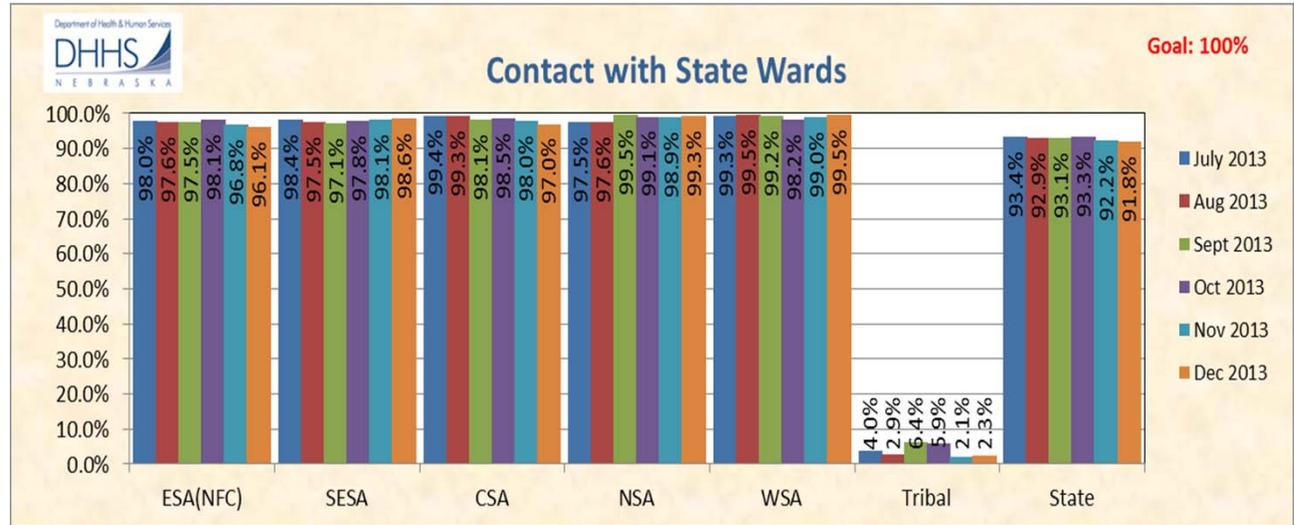
CQI Team Priority:

*Central and Southeast Service Areas

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

Data Review Frequency: Monthly

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



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

Child, Parent & Foster Parent Needs Assessment – CFSR 17

Strengths/Opportunities:

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

Barriers:

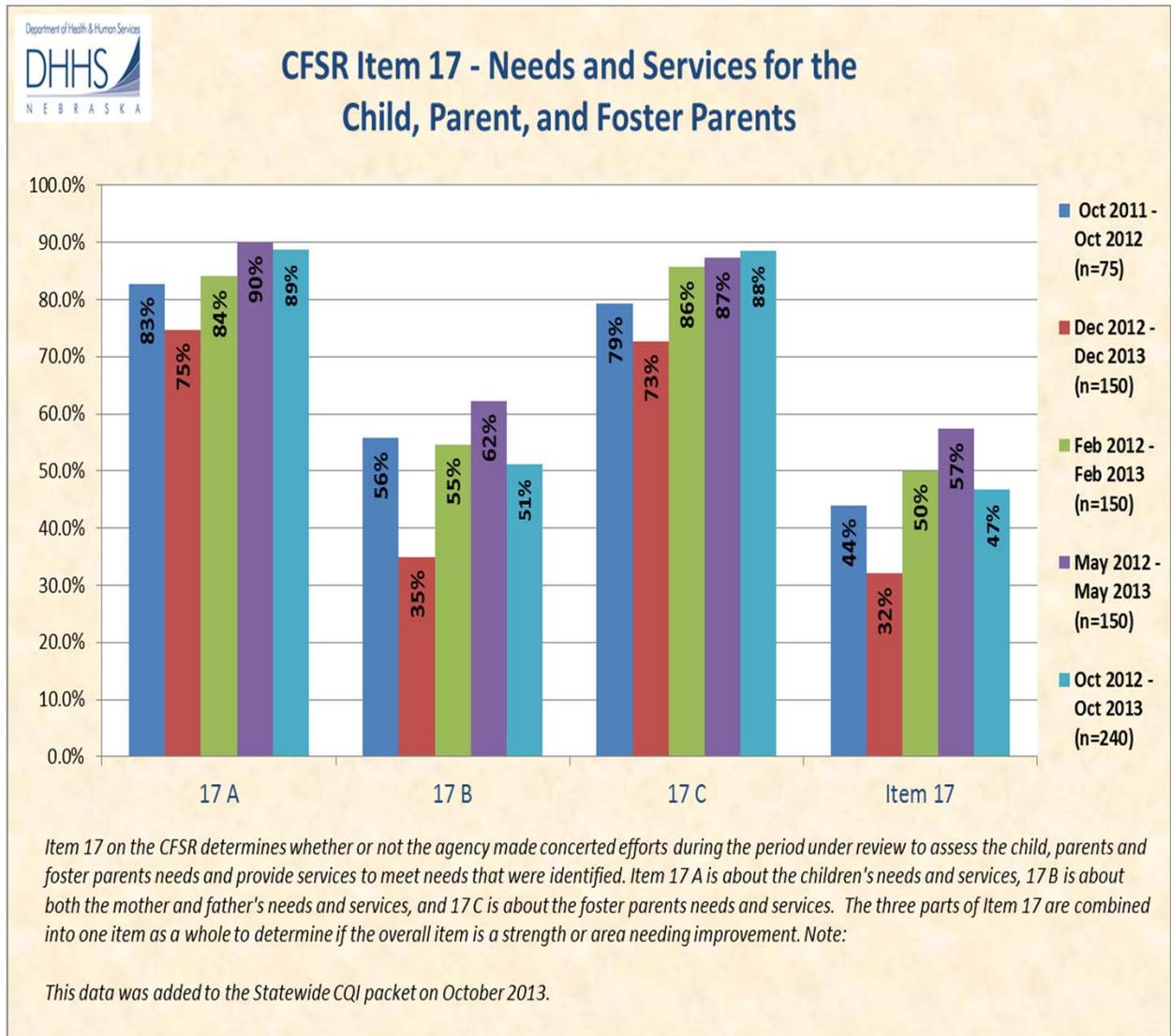
- Lack of good quality documentation during face to face contacts between the worker and the child. Documentation should contain sufficient information to address safety, permanency and well-being.

Action Items:

*Completed:

*Planned:

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



Data Review Frequency: Monthly

**Caseworker Contact with Child
CFSR 19**

Strengths/Opportunities:

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

Barriers:

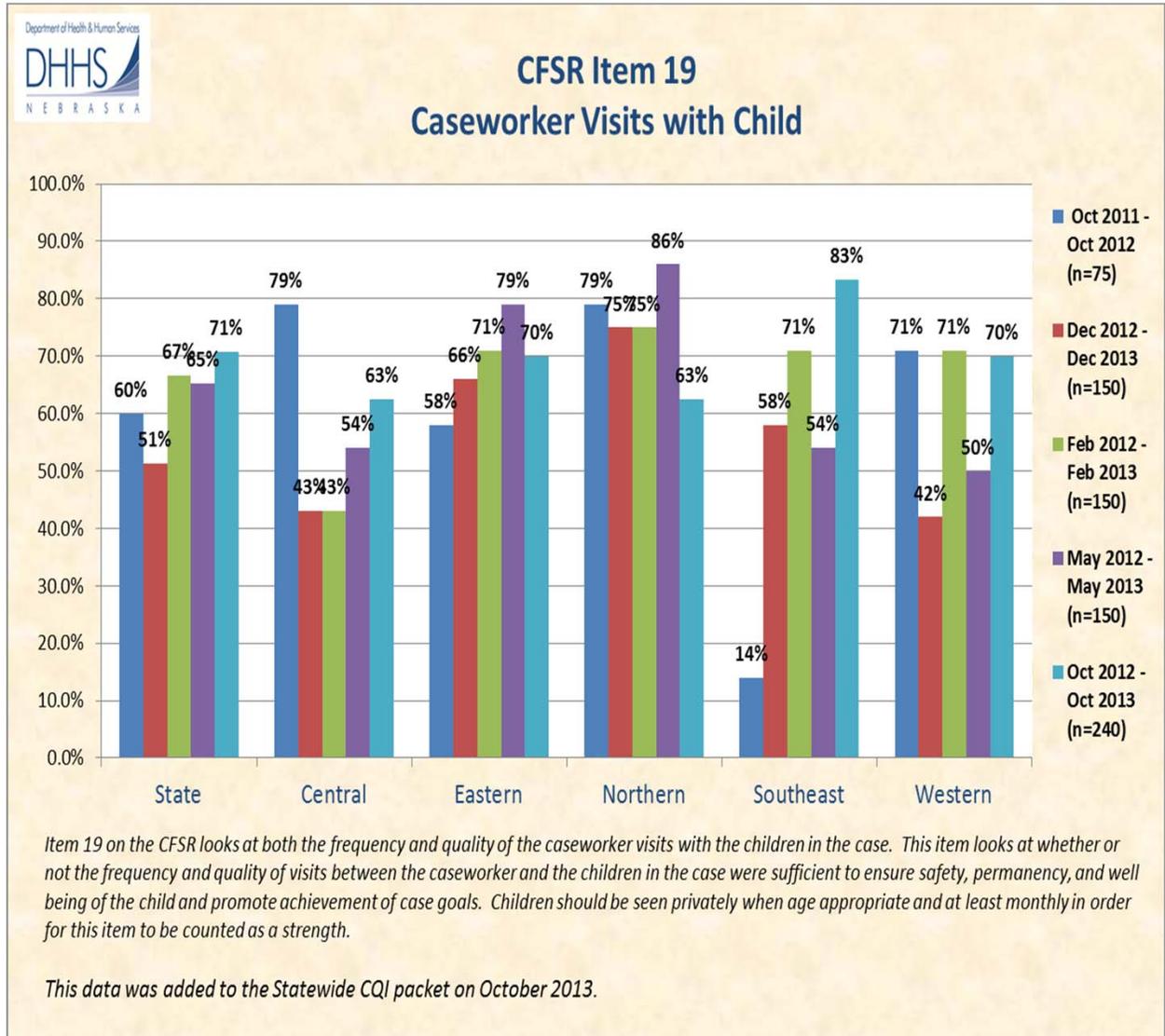
- Lack of ongoing efforts to locate and/or meet with the non-custodial parent on a monthly basis. (in most cases, this is the child's father).
- Lack of good quality documentation during face to face contacts between the worker and the child's mother and father. Documentation should contain sufficient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

Action Items:

**Completed:*

**Planned:*

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



Data Review Frequency: Monthly

**Caseworker Contact with Parent
CFSR 20**

Strengths/Opportunities:

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

Barriers:

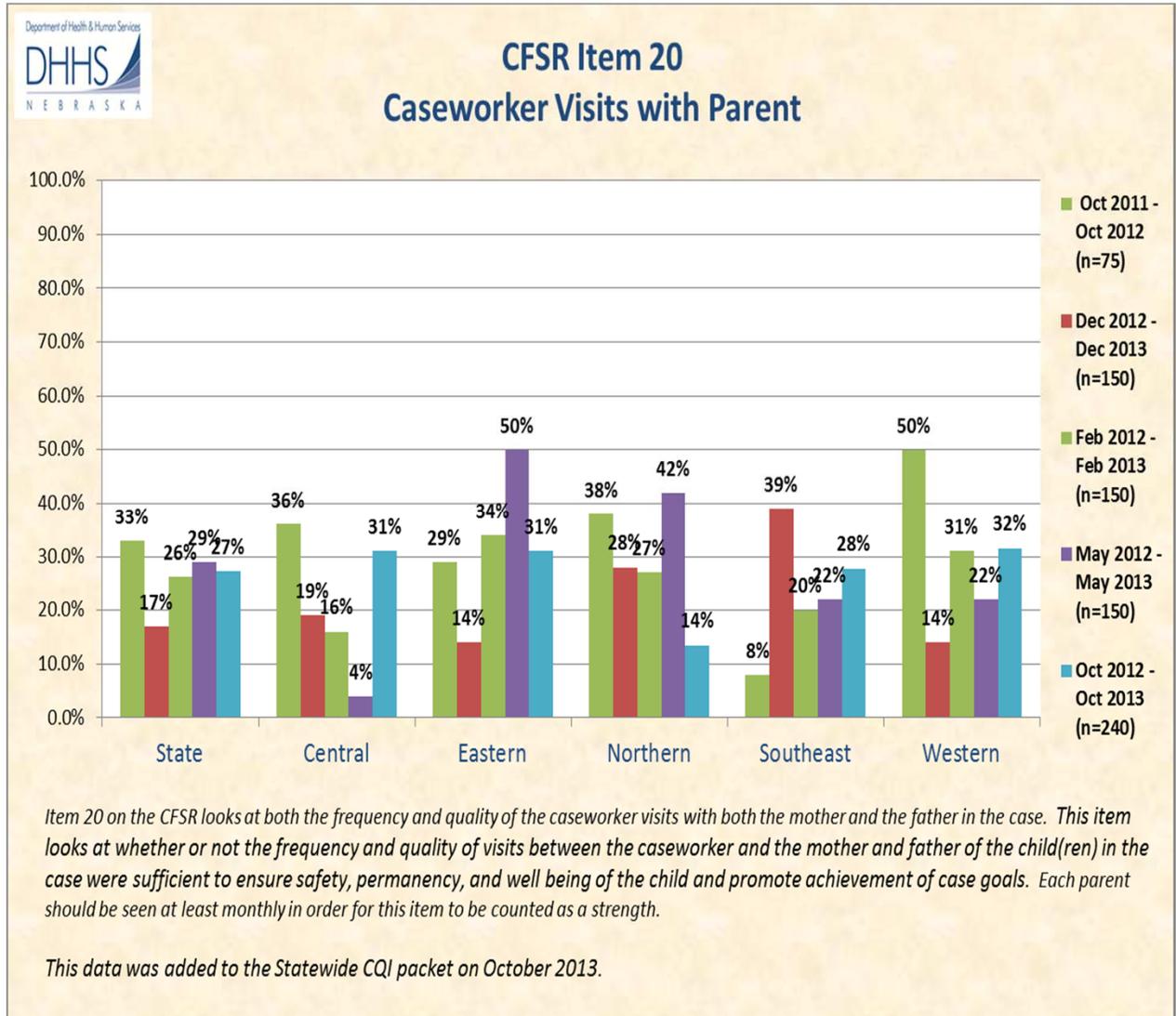
- Lack of ongoing efforts to locate and/or assess the needs of the child's non-custodial parent (in most cases, this is the child's father).
- Lack of good quality documentation during face to face contacts between the worker and the child, child's mother and father. Needs assessment for the child, mother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

Action Items:

**Completed:*

**Planned:*

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



Data Review Frequency: Monthly

STRUCTURED DECISION MAKING (SDM)

**OUTCOME STATEMENT: CHILDREN
ARE SAFELY MAINTAINED IN THEIR
HOMES 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			
	Nov	Dec	Jan
State	287	246	300
CSA	31	27	45
ESA	108	85	121
NSA	48	53	60
SESA	56	39	33
WSA	44	42	41

Barriers:

Action Items:

**Completed:*

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff etc.)
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

**Planned:*

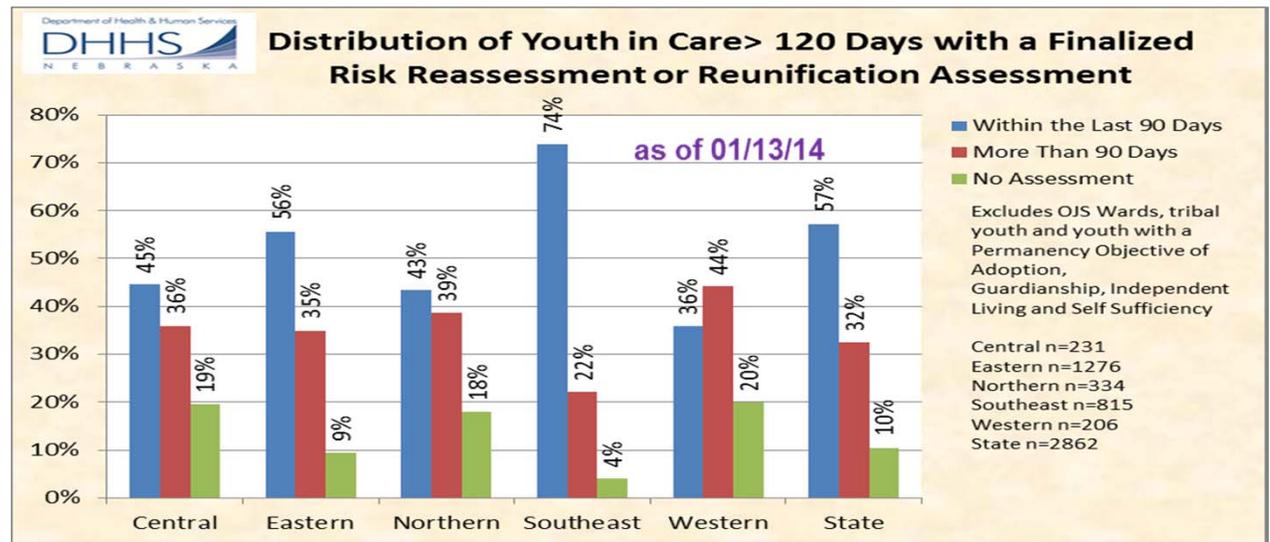
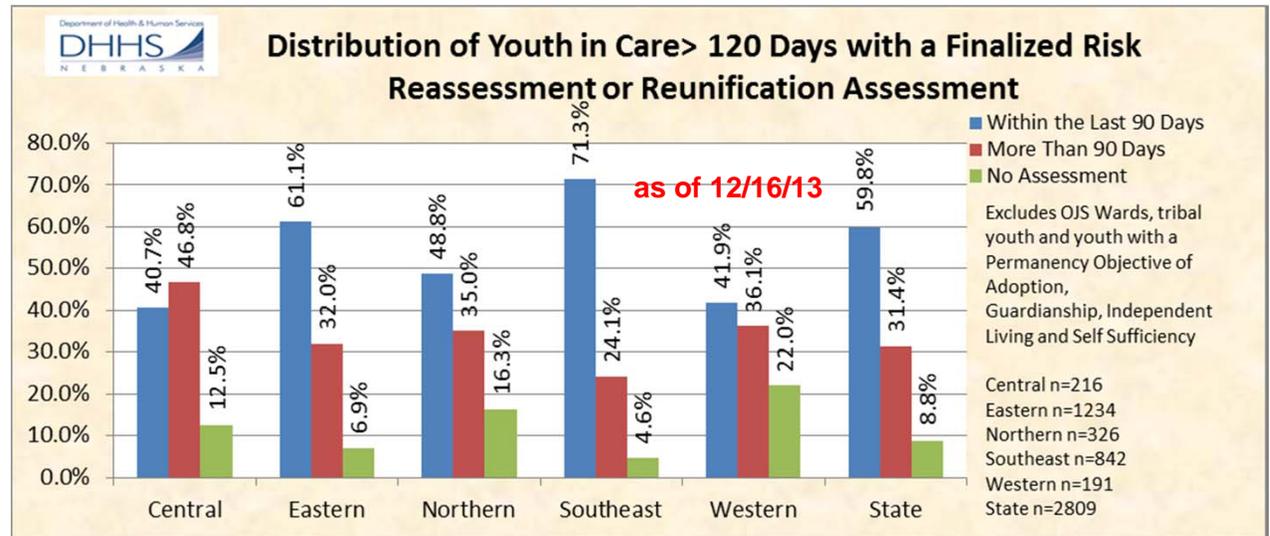
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

CQI Team Priority:

* ALL Service Areas

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

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



Data Review Frequency: Monthly

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

SDM Risk Re & Reunification Assessments

Strengths/Opportunities:

# of State Wards with No Finalized Risk-Re or Reunification Assessments			
	Nov	Dec	Jan
State	226	193	227
CSA	31	23	33
ESA	66	55	76
NSA	42	42	49
SESA	48	36	30
WSA	39	37	39

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:*

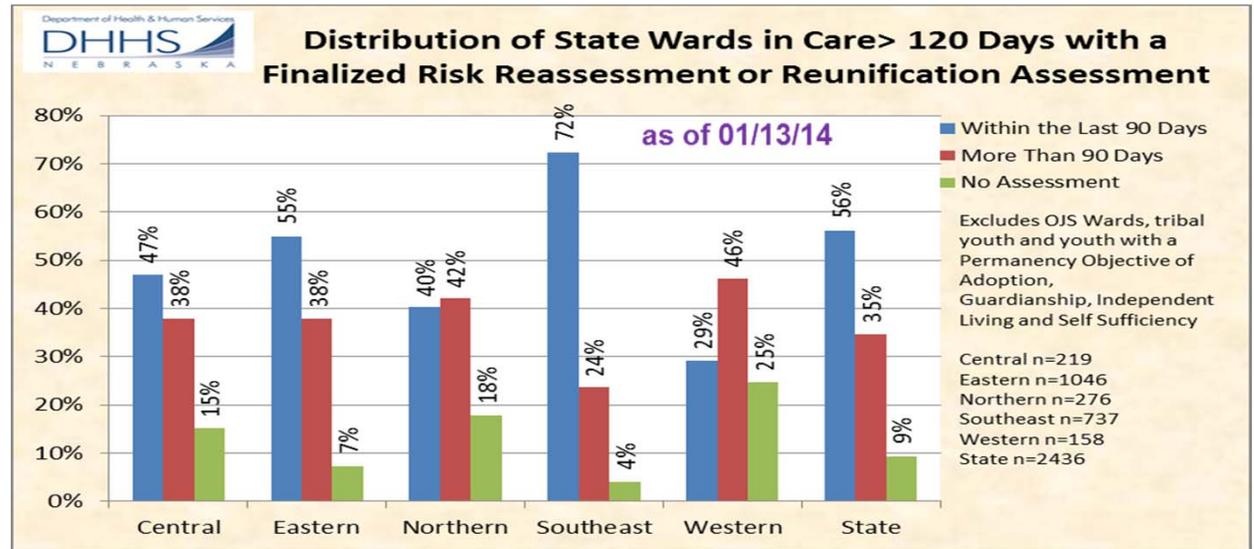
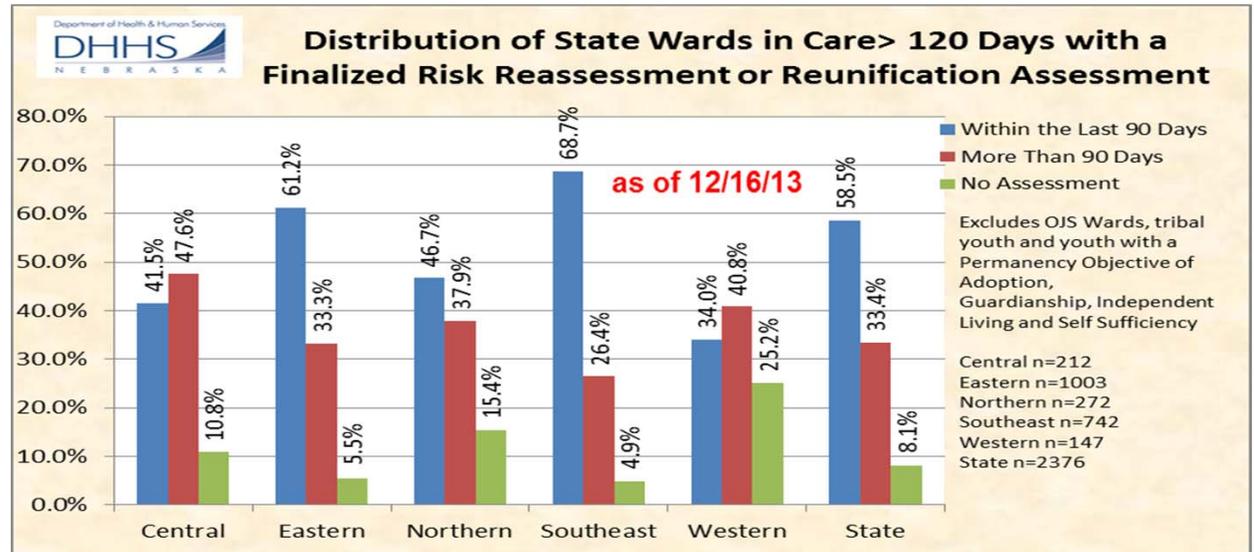
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- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

CQI Team Priority:

* ALL Service Areas

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

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



Data Review Frequency: Monthly

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

SDM Risk Re & Reunification Assessments

Strengths/Opportunities:

# of Non-Court Youth with No Finalized Risk-Re or Reunification Assessments			
	Nov	Dec	Jan
State	61	53	75
CSA	0	4	12
ESA	42	30	47
NSA	6	11	11
SESA	8	3	3
WSA	5	5	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:*

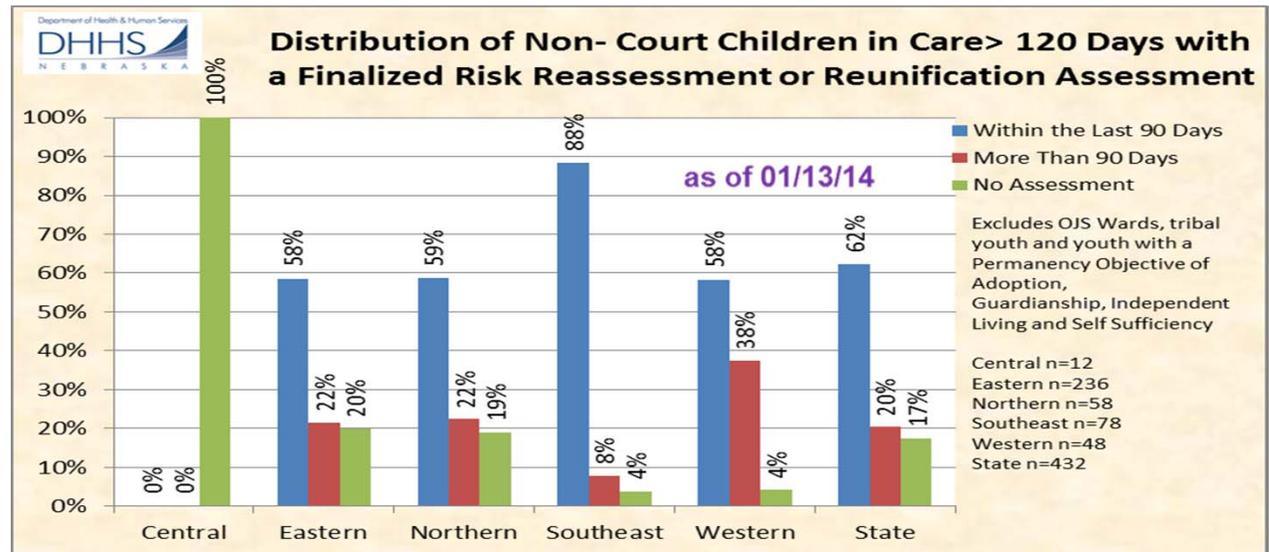
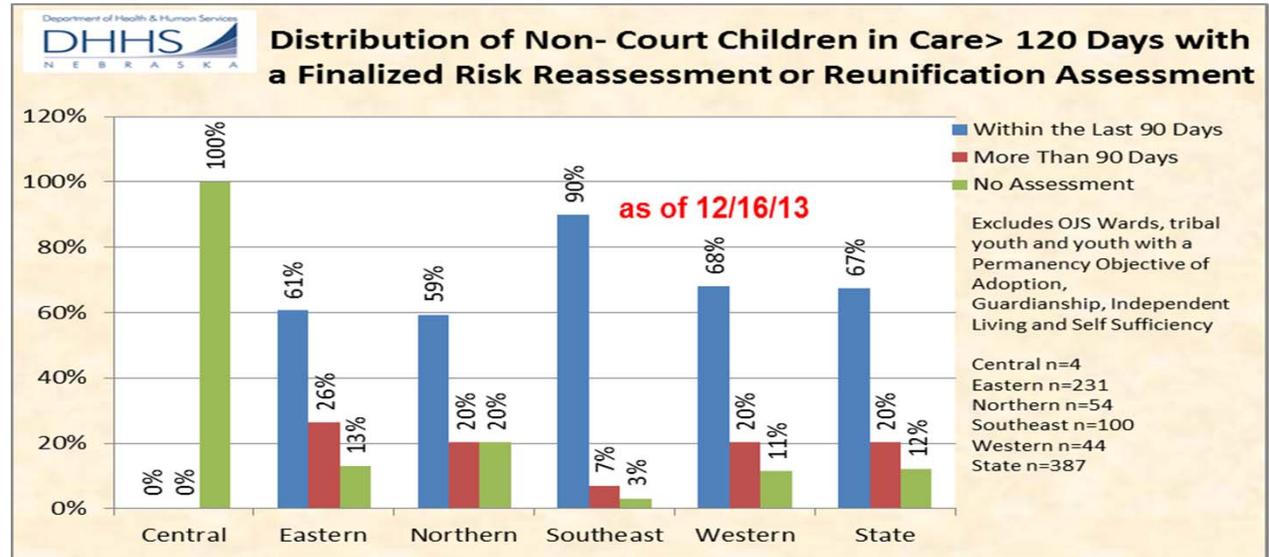
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.

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



Data Review Frequency: Monthly

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

SDM Family Strengths and Needs Assessment (FSNA)

Strengths/Opportunities:

# of ALL Youth with No Finalized FSNA			
	Nov	Dec	Jan
State	126	126	123
CSA	15	16	22
ESA	15	18	23
NSA	32	34	25
SESA	14	7	5
WSA	50	51	48

Barriers:

Action Items:

**Completed:*

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff, etc.)
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

**Planned:*

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

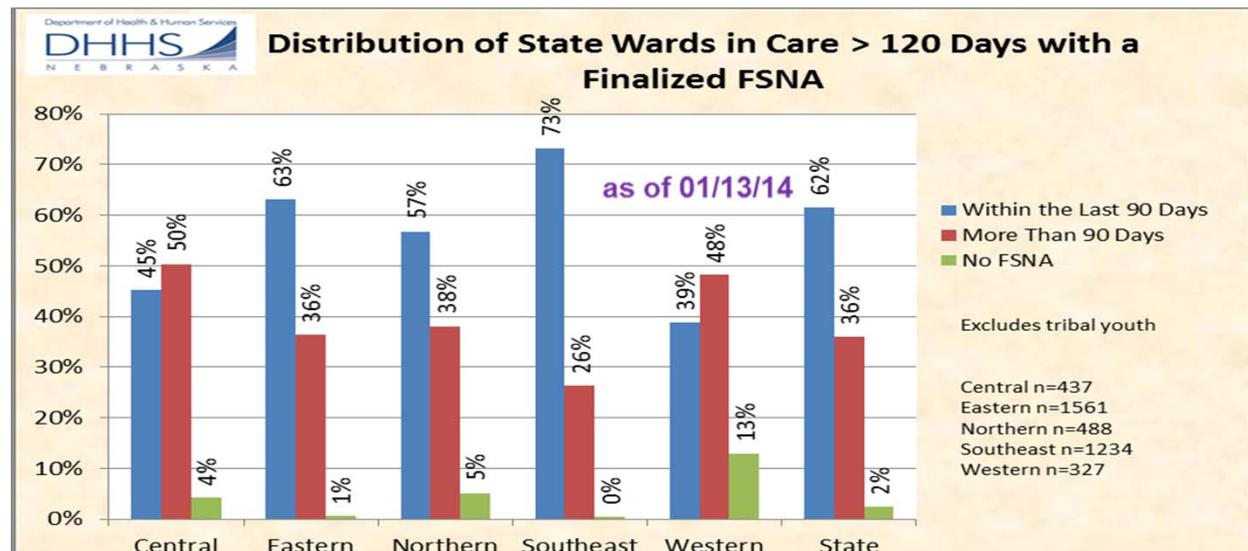
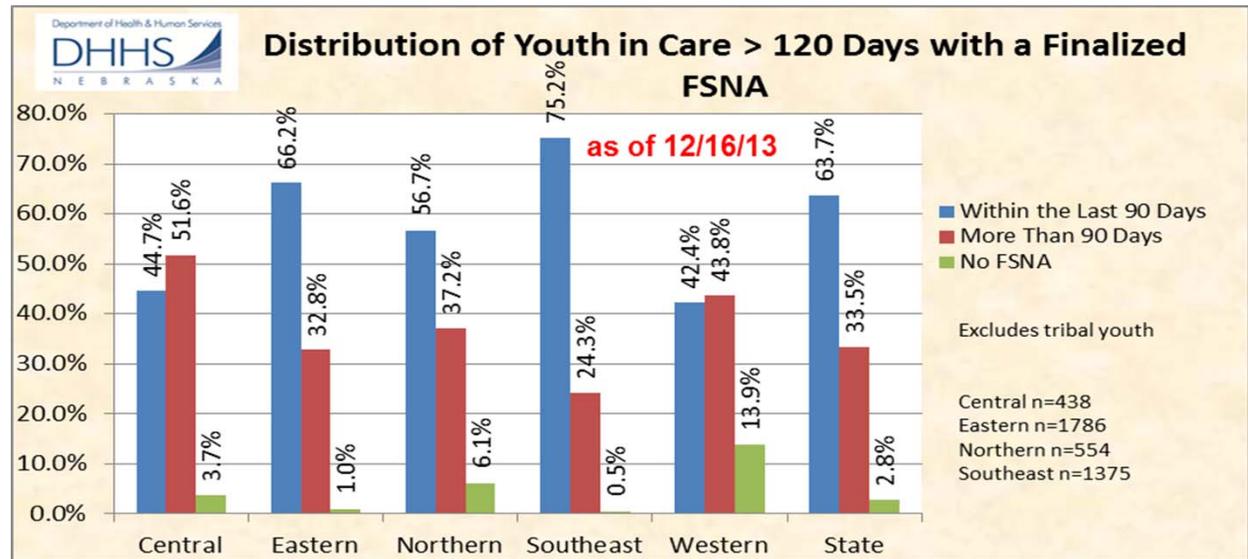
CQI Team Priority:

* ALL Service Areas

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

Data Review Frequency: Monthly

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



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

SDM Family Strengths and Needs Assessment (FSNA)

Strengths/Opportunities:

# of State Wards with NO Finalized FSNA			
	Nov	Dec	Jan
State	111	108	100
CSA	15	13	19
ESA	10	13	9
NSA	30	30	25
SESA	9	6	5
WSA	47	46	42

Barriers:

Action Items:

**Completed:*

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff, etc.)
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

**Planned:*

- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
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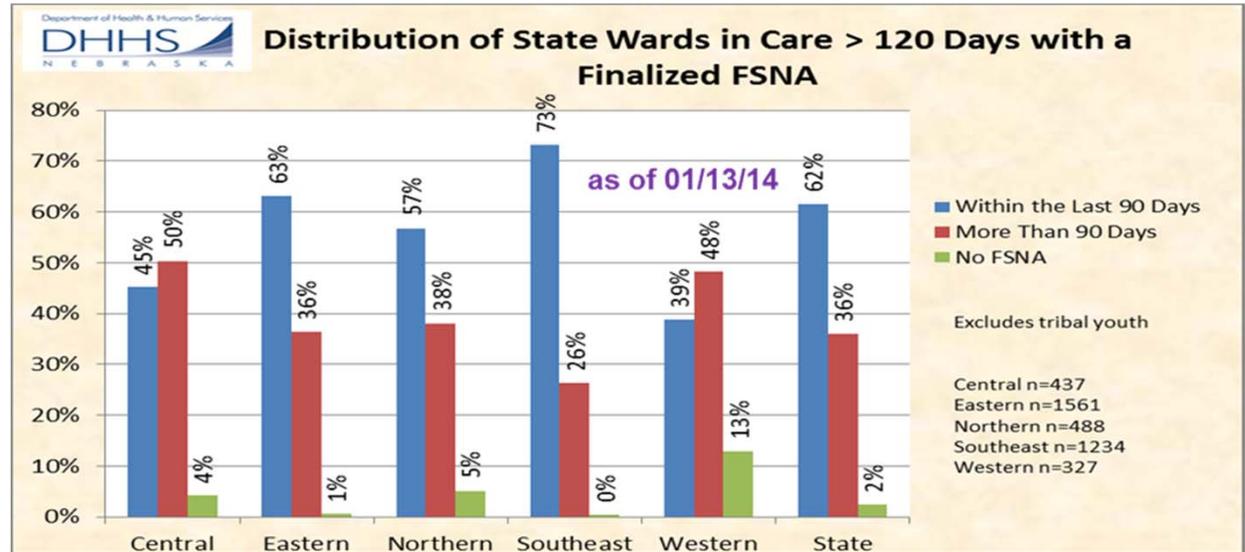
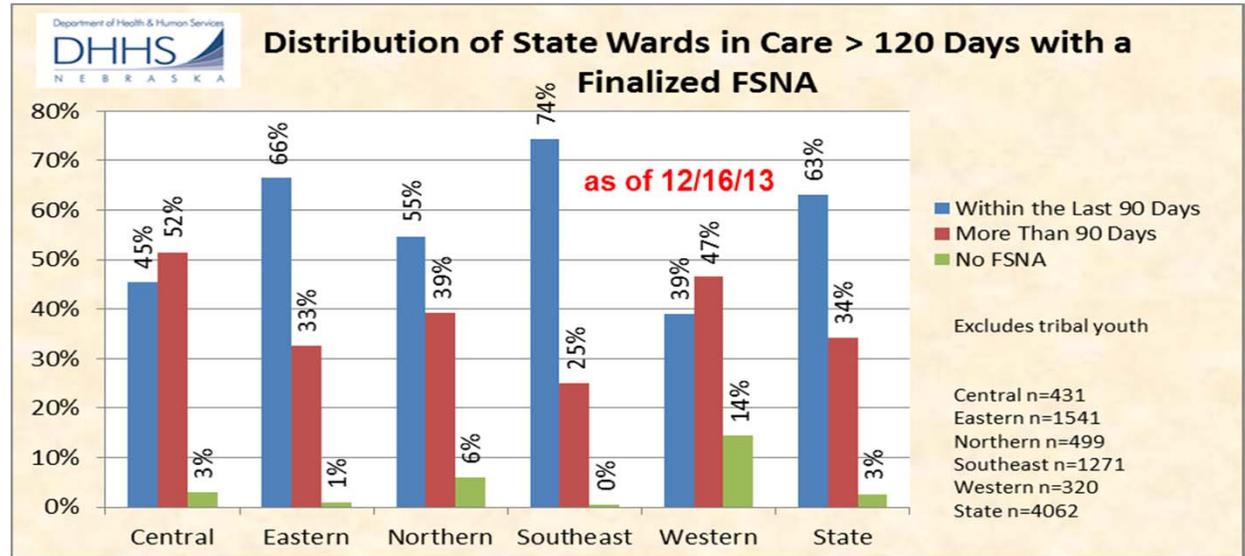
CQI Team Priority:

* ALL Service Areas

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

Data Review Frequency: Monthly

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



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

SDM Family Strengths and Needs Assessment (FSNA)

Strengths/Opportunities:

# of Non Court Children with NO Finalized FSNA	FSNA		
	Nov	Dec	Jan
State	15	18	23
CSA	0	3	3
ESA	5	5	14
NSA	2	4	0
SESA	5	1	0
WSA	3	5	6

Barriers:

Action Items:

**Completed:*

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff, etc.)
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.

**Planned:*

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

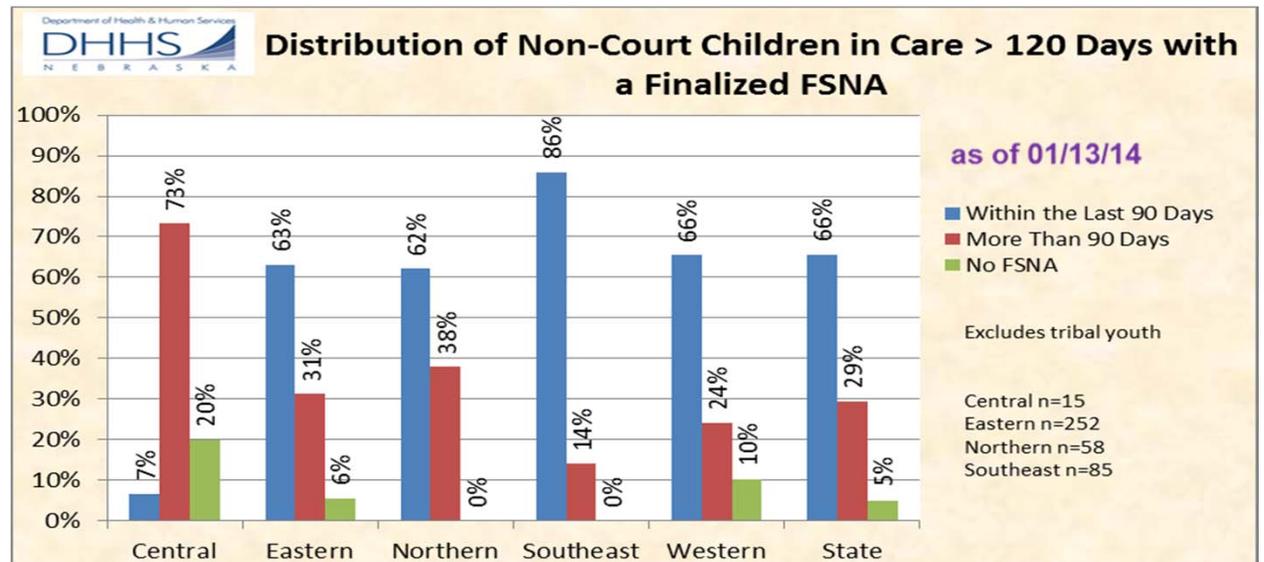
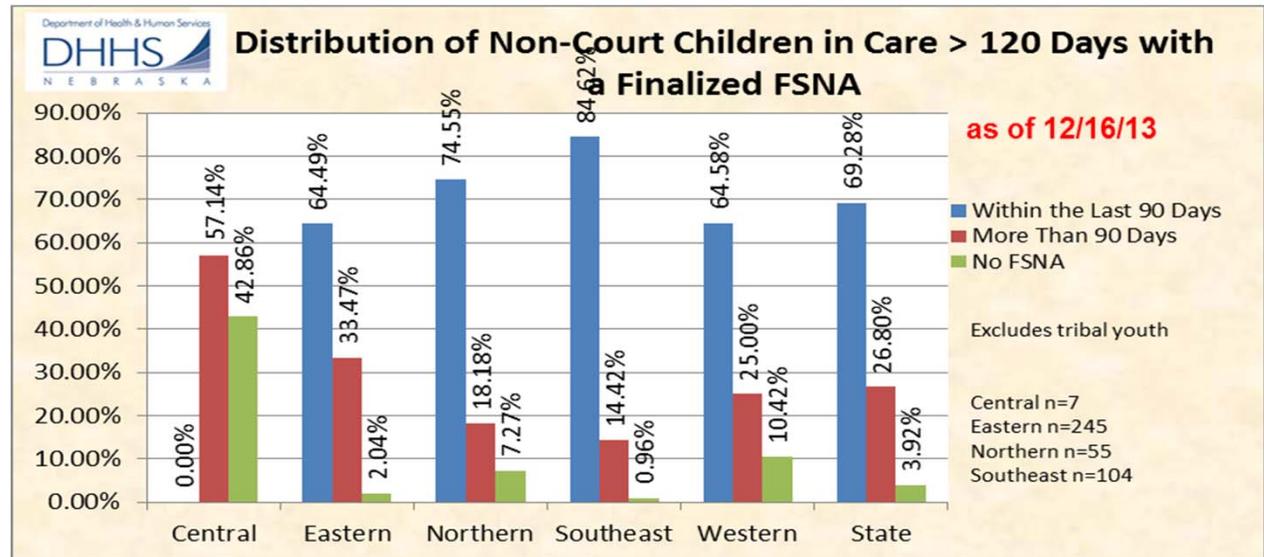
CQI Team Priority:

* ALL Service Areas

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

Data Review Frequency: Monthly

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



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

SDM Administrative Reviews

Strengths/Opportunities:

Dec 3013: Decrease in Admin reviews from 9 in November to 6 in December.

Barriers:

Action Items:

*Completed:

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff)
- N-FOCUS changes were implemented to add narrative boxes to each question on the FSNA.
- Ongoing and IA Case Management Due Date Report includes SDM due dates.
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.
- Narrative boxes added on N-FOCUS (Risk & Prevention Assessments).

*Planned:

- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
- N-FOCUS changes are planned to add narrative boxes to each question on the remaining SDM (March 2014-Risk Re and Reunification)
- Quality & Training Teams providing additional one on one and team trainings on SDM.

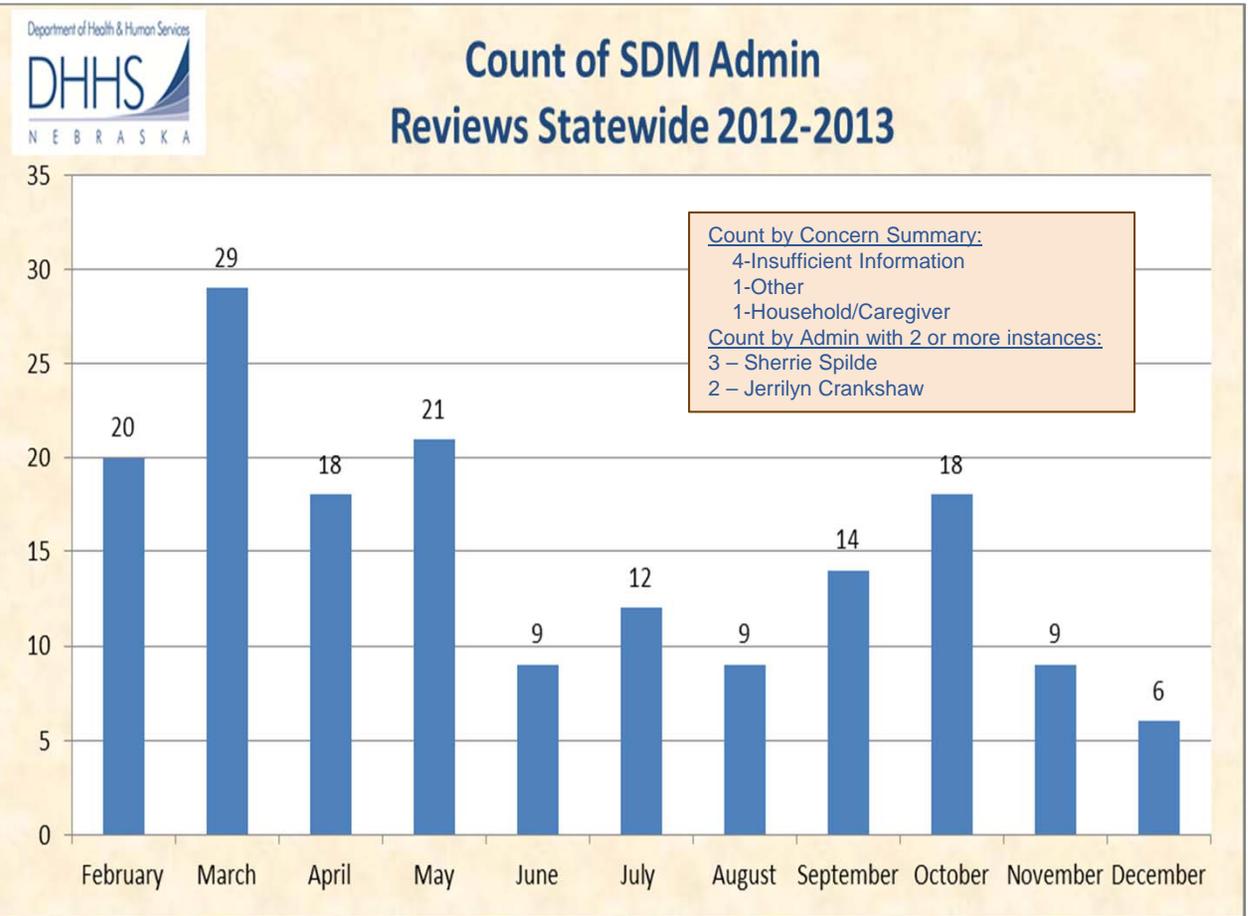
CQI Team Priority:

* ALL Service Areas

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

Data Review Frequency: Monthly

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



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

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

SDM Assessment Quality Results – Finalized Timely

Strengths/Opportunities:

Dec 2013: Saw a decrease in timeliness for all assessments this month.

Barriers:

Action Items:

**Completed:*

- 10 Week SDM Refresher Trainings were implemented statewide.
- Full Day SDM Training Sessions facilitated by Training, CQI and Policy staff for CFS Administrators and Supervisors
- Local CQI SDM workgroups implemented different strategies to improve staff proficiency in SDM (i.e. collaborative training with DHHS Legal staff)
- N-FOCUS changes were implemented to add narrative boxes to each question on the FSNA.
- Ongoing and IA Case Management Due Date Report includes SDM due dates.
- Quick Tip video instructions made available to CFSS Staff (1. Introduction to Infoview reports and 2.) How to use SDM Weekly reports to manage SDM assessments.
- Narrative boxes added on N-FOCUS (Risk & Prevention Assessments).

**Planned:*

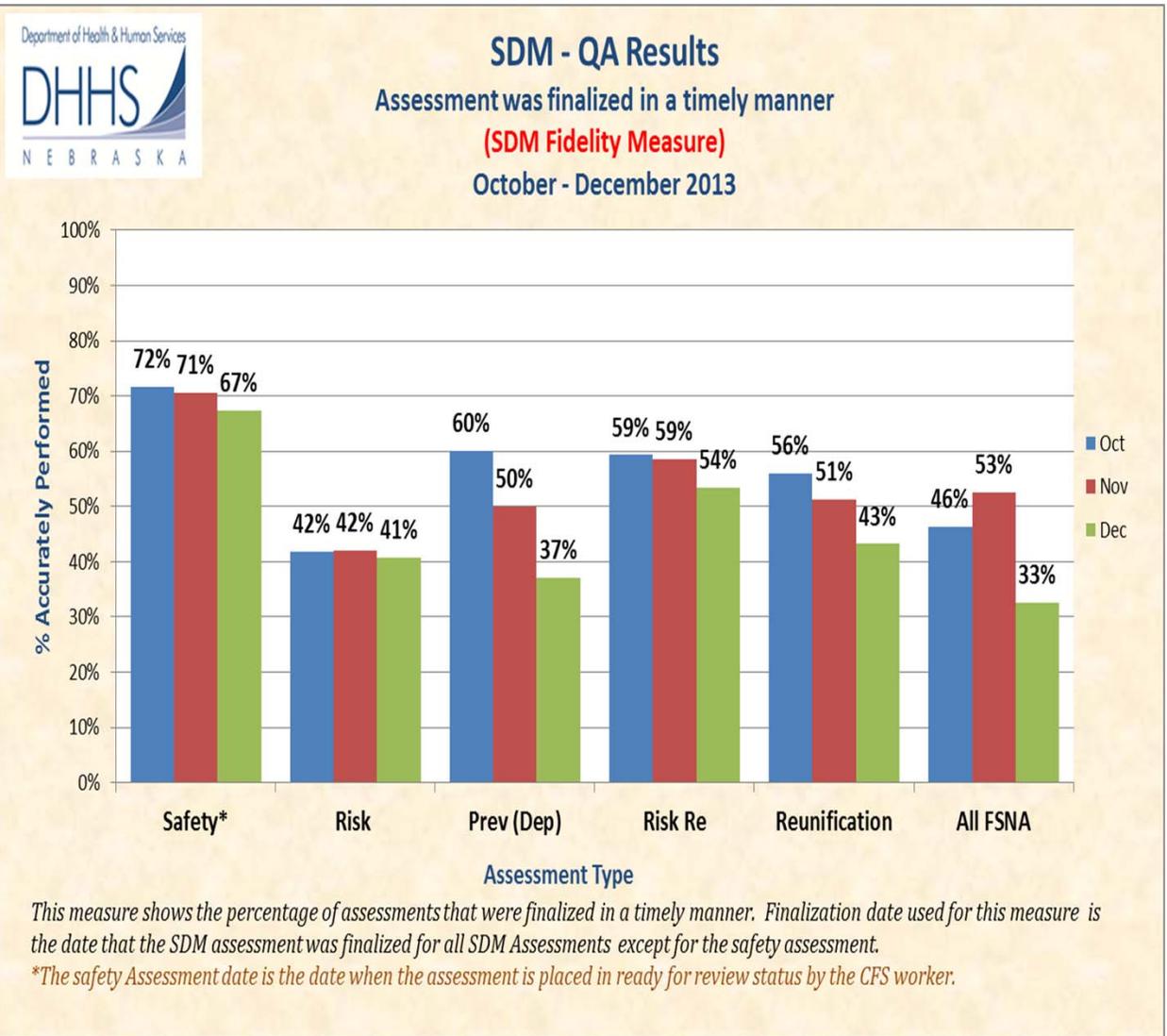
- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
- N-FOCUS changes are planned to add narrative boxes to each question on the remaining SDM (March 2014-Risk Re and Reunification)
- Quality & Training Teams providing additional one on one and team trainings on SDM.

CQI Team Priority:

* ALL Service Areas

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

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



Data Review Frequency: Monthly

SDM Initial Assessment Quality Results

Strengths/Opportunities:

-Dec 2013: Higher quality of documentation is seen in the Safety Assessments completed by IA staff. Increase in quality of Safety Plans.

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)
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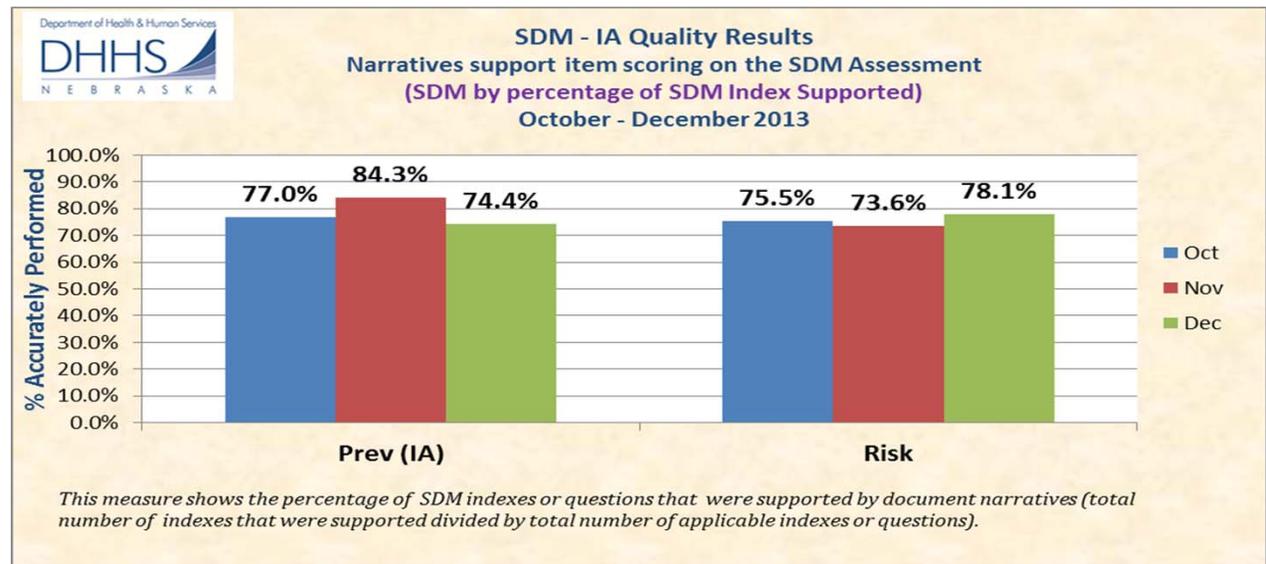
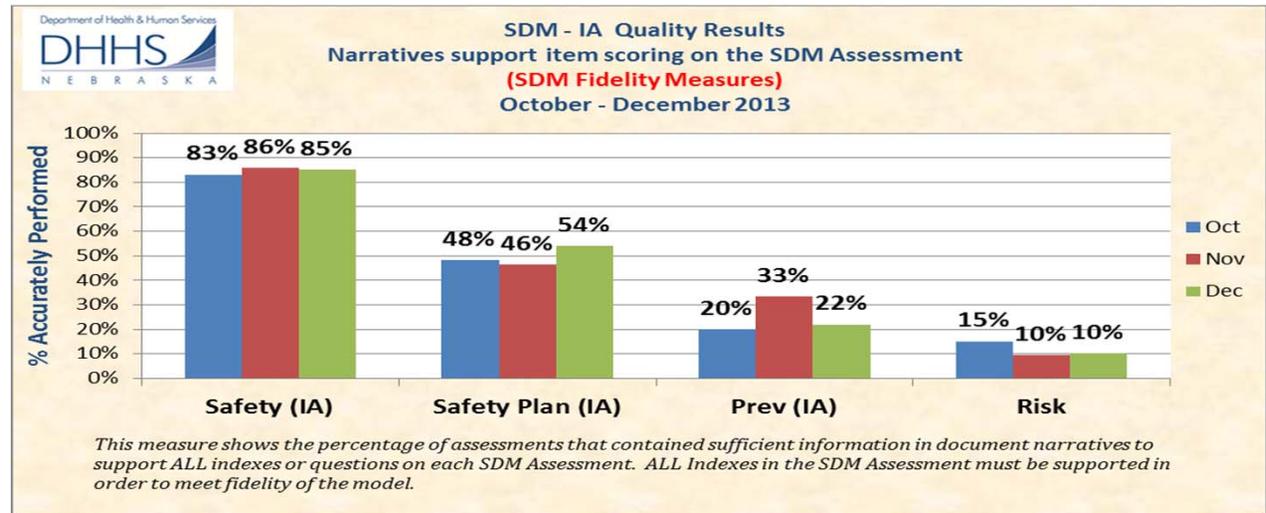
CQI Team Priority:

* ALL Service Areas

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

Data Review Frequency: Monthly

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



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

SDM Ongoing Assessment Quality Results

Strengths/Opportunities:

-Dec 2013: 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.

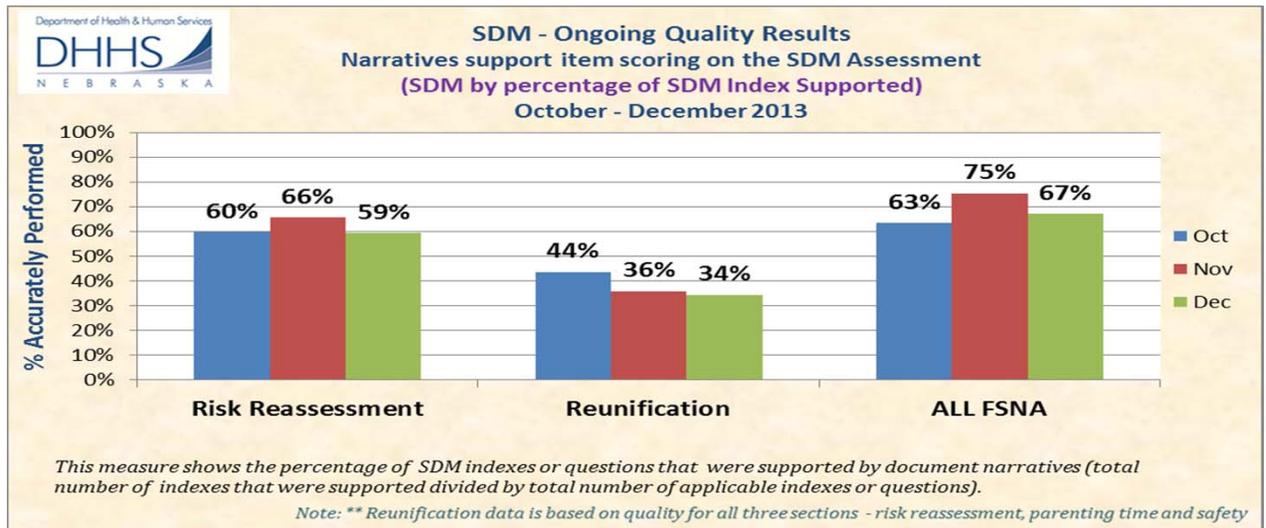
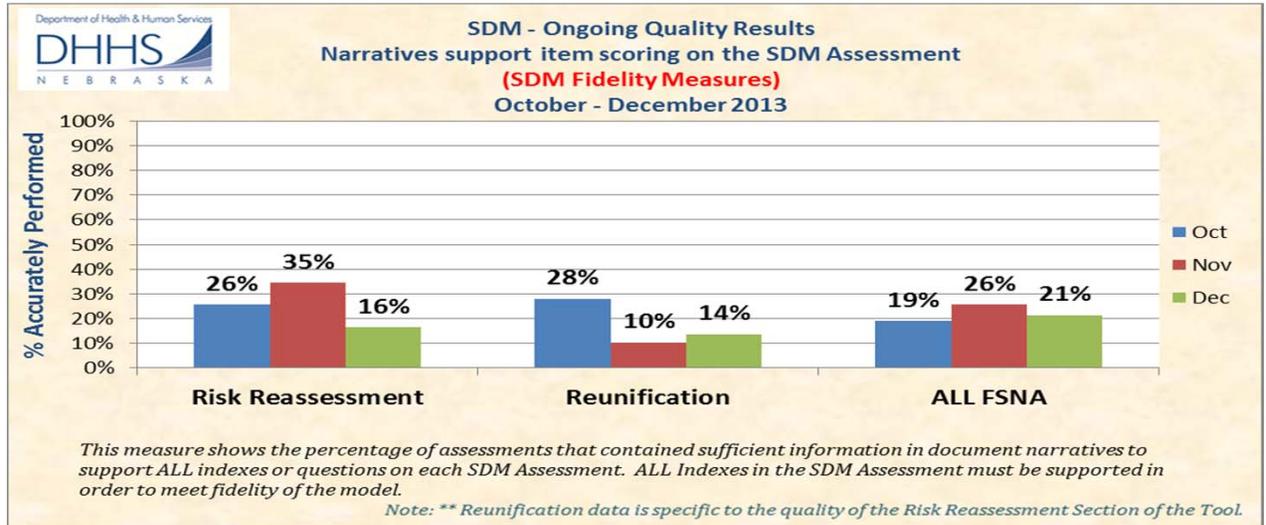
CQI Team Priority:

* 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:

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

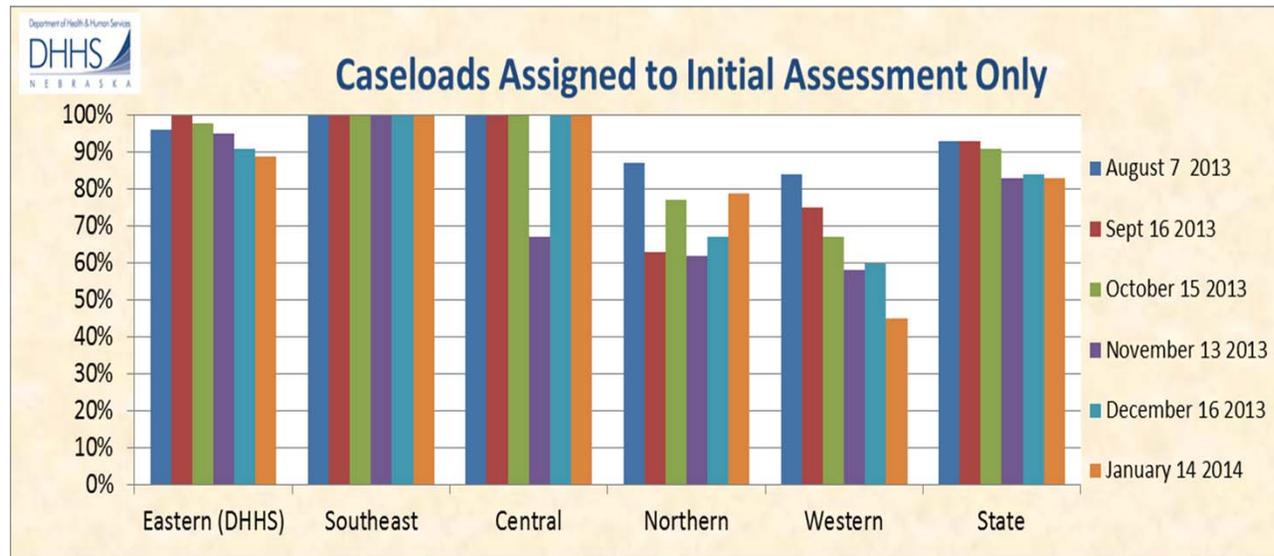
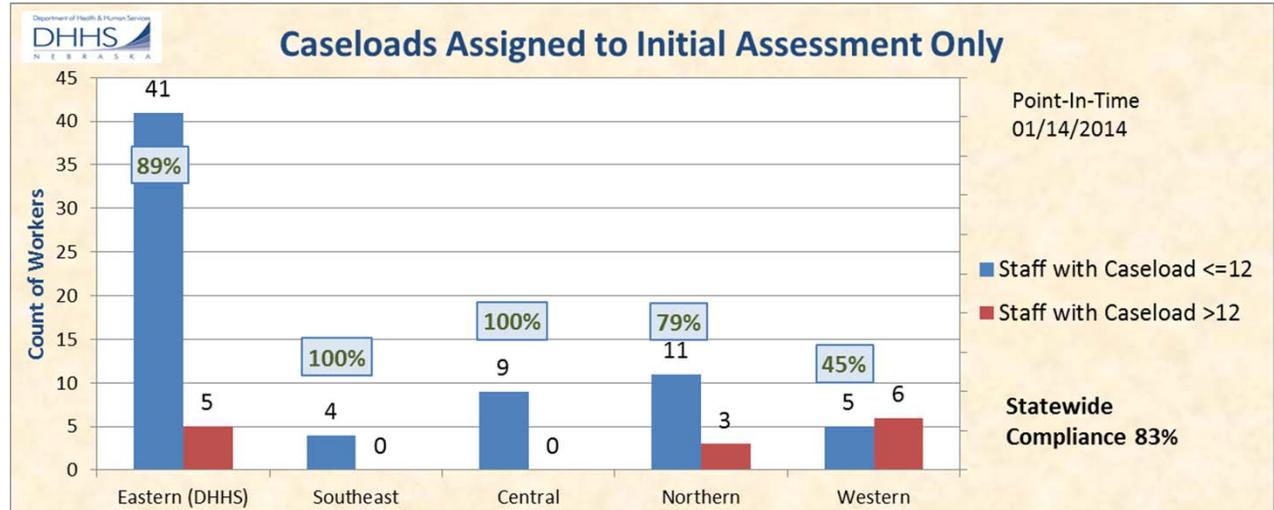
Barriers:

Action Items:

*Completed:

*Planned:

Data Review Frequency: Monthly



Notes:

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

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

Caseload Sizes for IA & Ongoing

Strengths/Opportunities:

-Dec 2013: Increase in statewide compliance to 72%. 100% achievement in CSA.

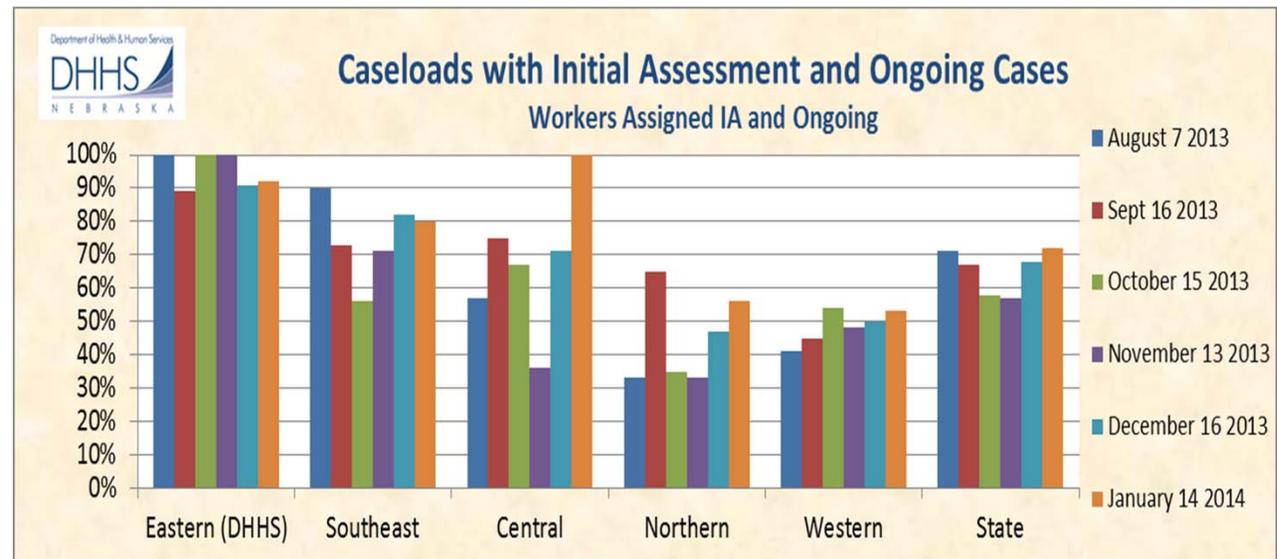
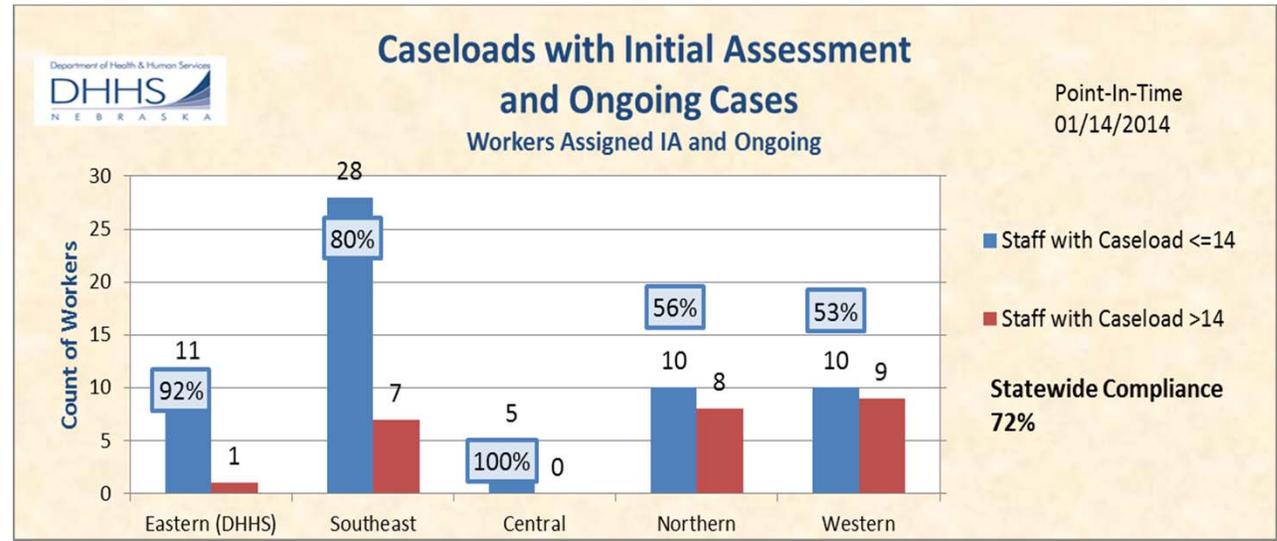
Barriers:

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:

-Dec 2013: Increase in Statewide Compliance to 75%. CSA and ESA(NFC) have the lowest compliance – below 67% and WSA has the highest compliance at 100%

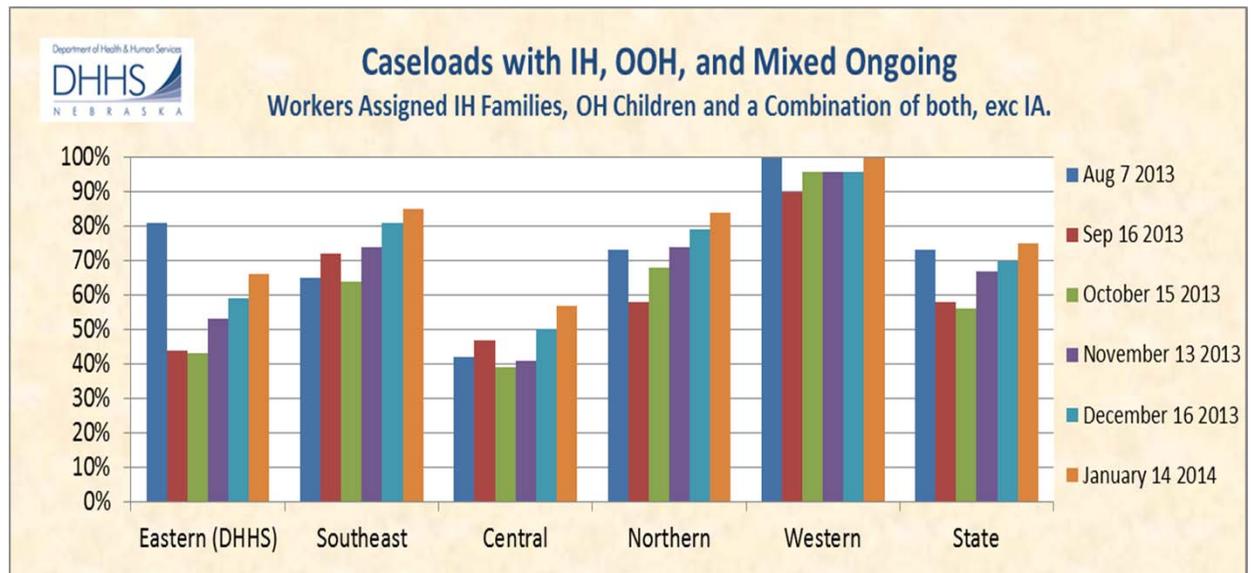
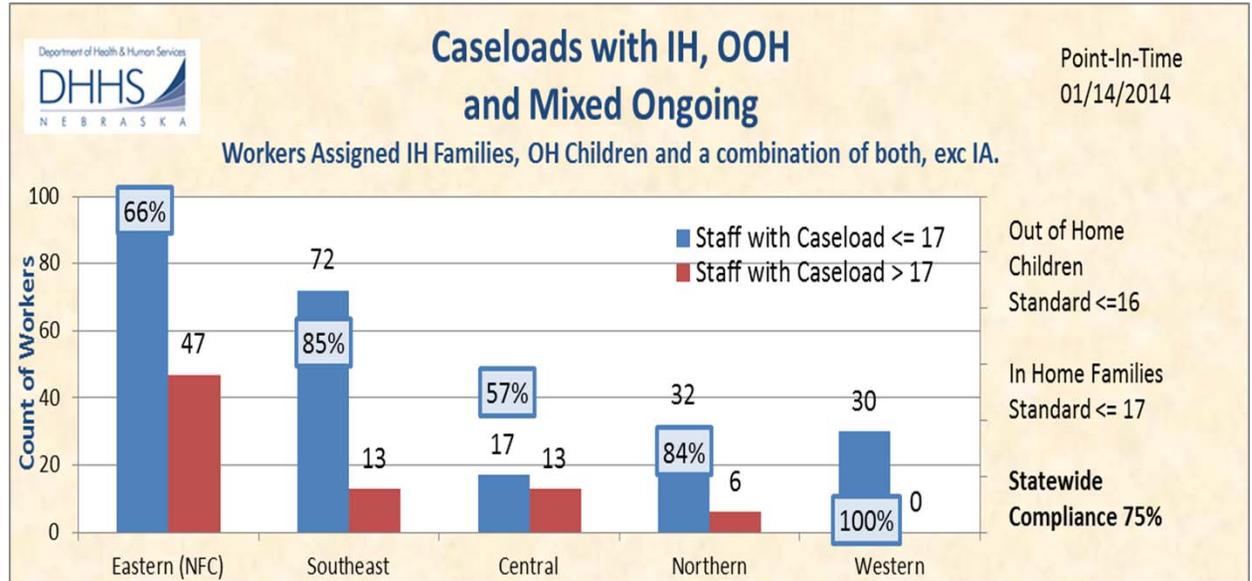
Barriers:

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:

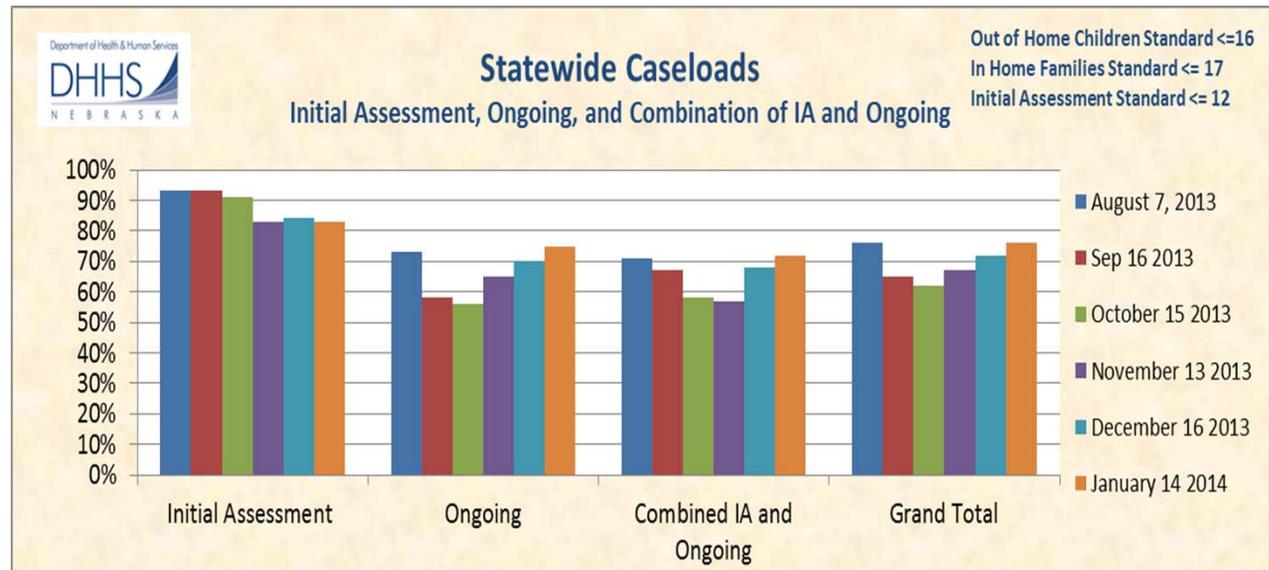
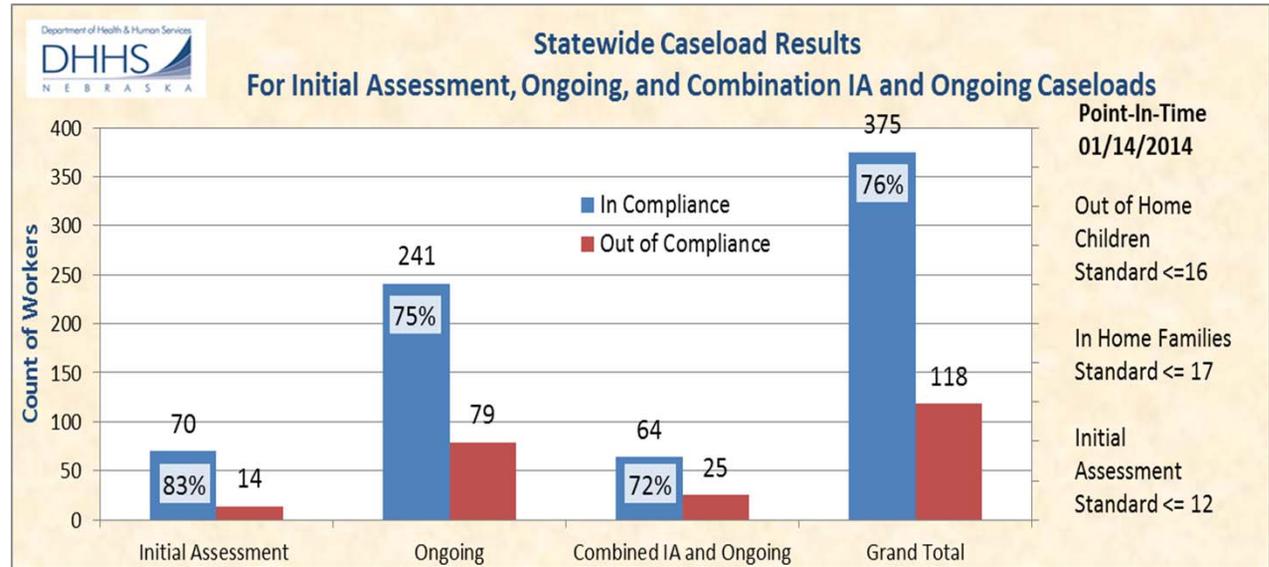
- Dec 2013: Increase in Overall Compliance to 76%. Initial Assessment Only Caseloads have the highest compliance while Combined IA and Ongoing caseloads have the lowest compliance.

Barriers:

Action Items:

**Completed:*

**Planned:*



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

Data Review Frequency: Monthly

CFS Staff Turnover

Strengths/Opportunities:

-Dec 2013: 2 CFS Trainees 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
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%
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%
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%

Turnover Percent Dec 2013

Title	CSA PS	ESA PS	NSA PS	SESA PS	WSA PS
CFS Spec Trainee	33.33%	0.00%	0.00%	0.00%	0.00%
CFS Specialist	0.00%	0.00%	0.00%	0.00%	0.00%
CFS Supervisors	0.00%	0.00%	0.00%	0.00%	0.00%

Turnover Counts Dec 2013

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

Aggregate Counts

Title	Total Employee	Term Employee	Turnover
CFS Spec Trainee	36	2	5.56%
CFS Specialist	386.5	0	0.00%
CFS Supervisors	69.8		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:

Dec 2013: Increase in turnover for both FPS and FPS Trainees this month.

Barriers:

Action Items:

**Completed:*

**Planned:*

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

NEBRASKA FAMILIES COLLABORATIVE TURNOVER PERCENT*												
Title	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13
FPS Trainee	0%	0%	66.60%	0%	14.20%	0%	0	0%	0%	9.09%	0%	8.33%
FPS	4.92%	2.04%	4.22%	5.00%	2.15%	4.44%	5.22%	4.61%	11%	3.27%	2.32%	3.82%
FP Supervisor	4.50%	0%	0%	0%	0%	0%	4.76%	4.54%	5%	0%	0%	0%

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

Aggregate Counts – Dec 2013			
Title	Total Employees	Term Employees	Turnover
FPS Trainee	12	1	8.33%
FPS	131	5	3.82%
FP Supervisor	20	0	0%

Data Review Frequency: Quarterly

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

YRTC Staff Turnover

Strengths/Opportunities:

Dec 2013 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
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%
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%

Turnover Percent Dec 2013		
Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0.00%	0.00%
YOUTH SECURITY SPECIALIST II	0.00%	8.33%

Turnover Counts Dec 2013		
Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0	0
YOUTH SECURITY SPECIALIST II	0	3

Aggregate Counts			
Title	Total Employee	Term Employee	Turnover
YOUTH SECURITY SPECIALIST I	21.05	0	0.00%
YOUTH SECURITY SPECIALIST II	60.05	3	5.00%

**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 last day of posted month.*

Data Review Frequency: Quarterly

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

Vacancies are allocated positions not filled, excluding frozen positions

CFS Staff Vacancy Rate

Strengths/Opportunities:

-Vacancy for CFSS+CFSS increased to 6% this month. ESA has the highest number of vacancies.

Barriers:

Action Items:

**Completed:*

**Planned:*

CFSS + CFSS/T														
Location	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14
Central Service Area	6.9%	6.9%	12.1%	8.6%	12.1%	8.9%	5.3%	6.9%	5.2%	8.8%	10.9%	7.3%	9.4%	1.9%
Eastern Service Area	6.6%	4.7%	5.7%	4.6%	5.6%	6.5%	3.7%	3.7%	3.7%	6.5%	8.3%	8.3%	7.5%	10.4%
Northern Service Area	12.0%	12.0%	6.0%	11.0%	10.8%	13.3%	9.6%	12.0%	16.9%	20.5%	18.1%	8.9%	5.1%	5.3%
Southeast Service Area	7.5%	10.6%	12.4%	8.1%	5.3%	5.9%	6.2%	1.8%	1.9%	6.2%	6.2%	3.1%	2.6%	5.2%
Western Service Area	5.6%	11.3%	11.3%	7.0%	2.8%	1.4%	4.3%	7.0%	9.9%	12.7%	7.0%	8.5%	0.0%	4.8%
Total	7.7%	9.2%	9.6%	7.7%	6.7%	7.0%	5.8%	5.4%	6.4%	10.0%	9.4%	6.6%	4.6%	6.0%

YSS I														
Location	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Aug-13	Oct-13	Nov-13	Dec-13	Jan-14
YRTC Geneva	10.0%	20.0%	30.0%	22.2%	20.0%	20.0%	20.0%	10.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
YRTC Kearney	0.0%	14.3%	0.0%	0.0%	0.0%	0.0%	0.0%	7.1%	14.3%	6.7%	6.7%	13.3%	14.3%	13.3%
Total	4.2%	16.7%	12.5%	8.7%	8.3%	8.3%	8.3%	8.3%	8.3%	4.0%	4.0%	8.0%	8.3%	8.0%

YSS II														
Location	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Aug-13	Oct-13	Nov-13	Dec-13	Jan-14
YRTC Geneva	0.0%	0.0%	0.0%	12.9%	6.7%	16.7%	13.3%	6.7%	10.0%	6.7%	6.7%	6.7%	3.3%	16.7%
YRTC Kearney	22.0%	14.0%	14.0%	12.0%	15.7%	8.0%	15.7%	17.6%	21.6%	28.0%	30.6%	26.5%	26.0%	21.7%
Total	13.8%	8.8%	8.8%	12.3%	12.3%	11.3%	14.8%	13.6%	17.3%	20.0%	21.5%	19.0%	17.5%	19.7%

*Date is effective as of first day of posted month

Data Review Frequency: Quarterly

NFC Staff Vacancy Rate

Strengths/Opportunities:

-NFC Vacancies decreased to 10.11% this month -- from 11% last month.

Barriers:

Action Items:

**Completed:*

**Planned:*

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

NFC VACANCY RATES

	Aug 13			Sep 13**			Oct 13**			Nov 13**			Dec 13**		
Location	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate	Vacant Positions	Total Positions	Vacancy Rate
NFC**	18	169	10.65%	20	168	11.90%	26***	168	15.47%	19***	168	11.30%	17***	168	10.11%

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

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

ADULT PROTECTIVE SERVICES (APS)

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

APS Contact Timeframes

Strengths/Opportunities:

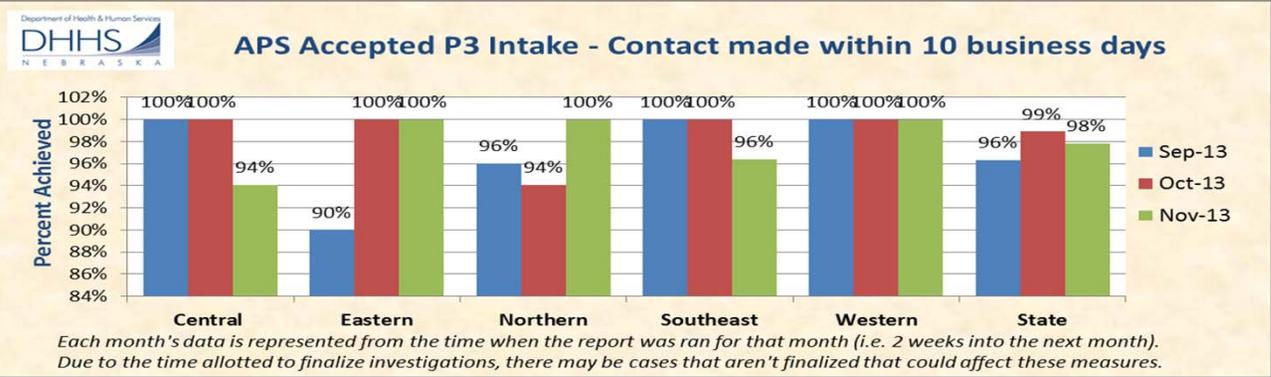
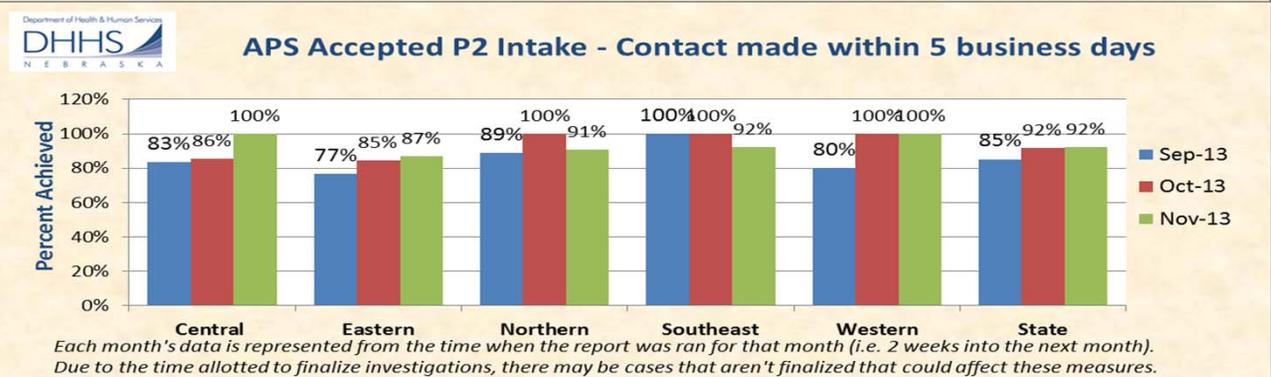
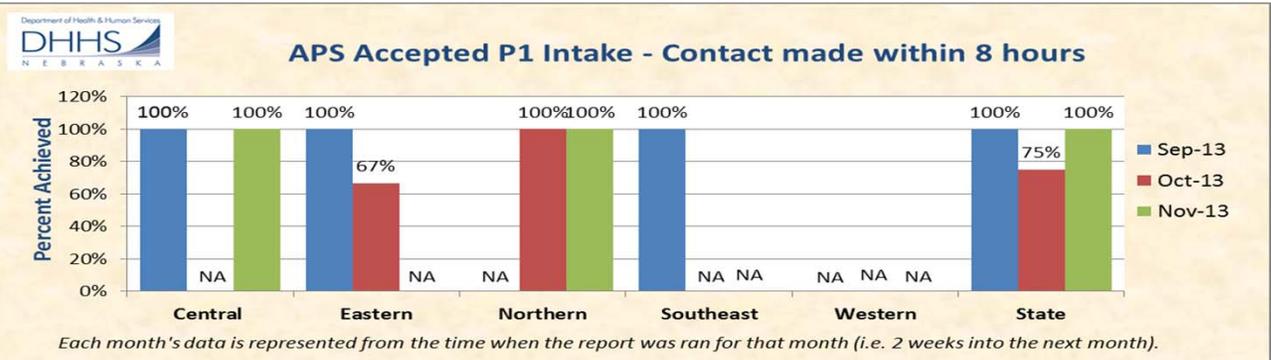
-Dec 2013: Increase in performance for P1 and P2 and decrease in P3.

Barriers:

Action Items:

*Completed:

*Planned:



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.

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

APS Investigation Timeframes

Strengths/Opportunities:

Dec 2013: 100% for P1 & P2 Timeframes. Decrease in P3 Timeframe. Northern Achieved 100% in P2 & P3 this month and did not have any P1 investigations.

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.

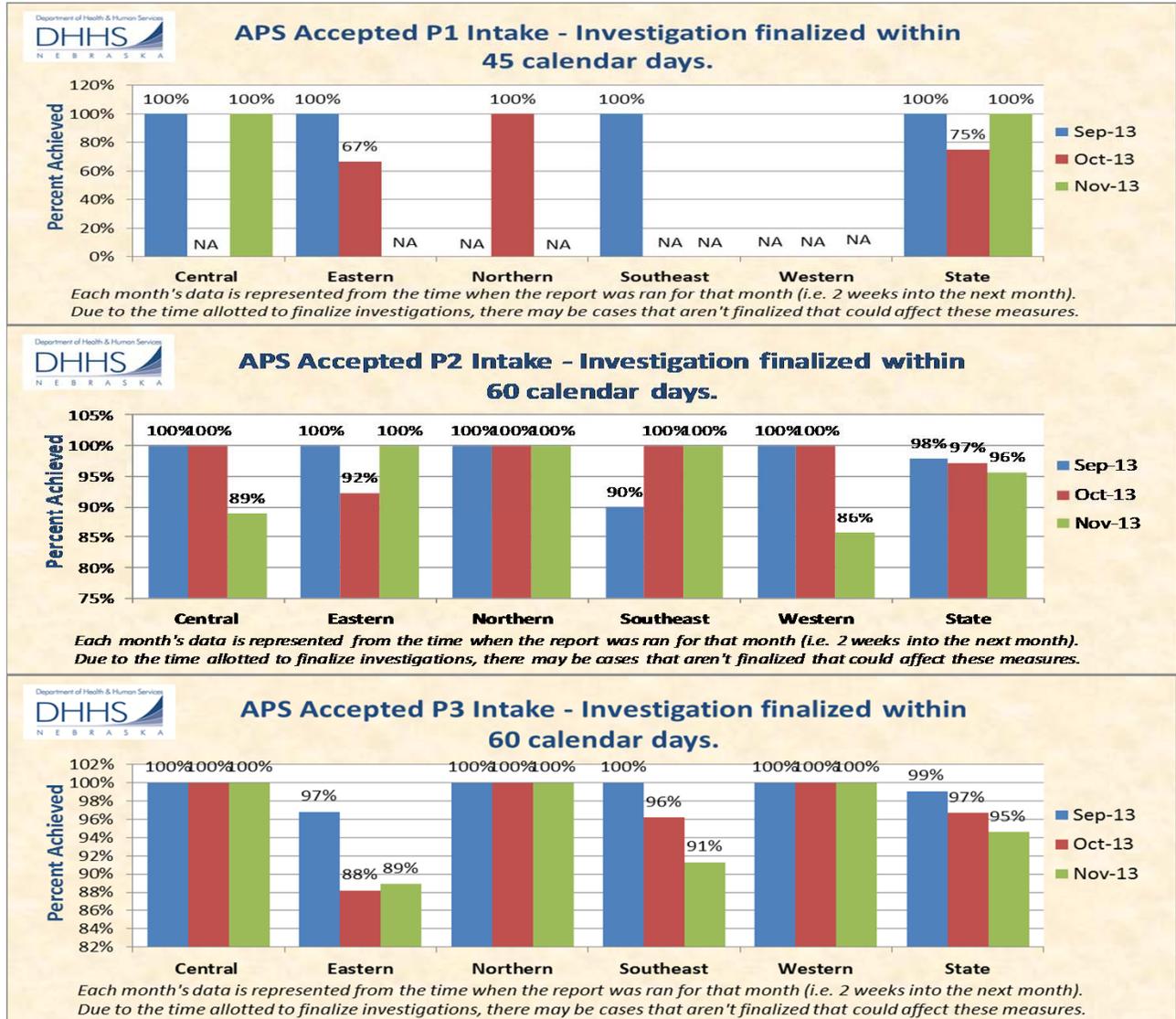
Barriers:

Action Items:

*Completed:

*Planned:

Data Review Frequency: Monthly



These charts illustrate investigations that were finalized within expected timeframes per intake priority. Measure is from Intake Closure/Acceptance to Investigation Finalization Date. Data Source: N-FOCUS Data from the APS Investigation Status Report on InfoView. The month noted on each chart reflects the intake receipt month, however, the data excludes investigations that are not due at the data is pulled for this report.

APS Quality Measures

Strengths/Opportunities:

- Dec 2013: Increase in all 4 quality measures this month. 100% achievement the measure related to the APS worker providing a summary of what they were investigating.

Barriers:

Action Items:

**Completed:*

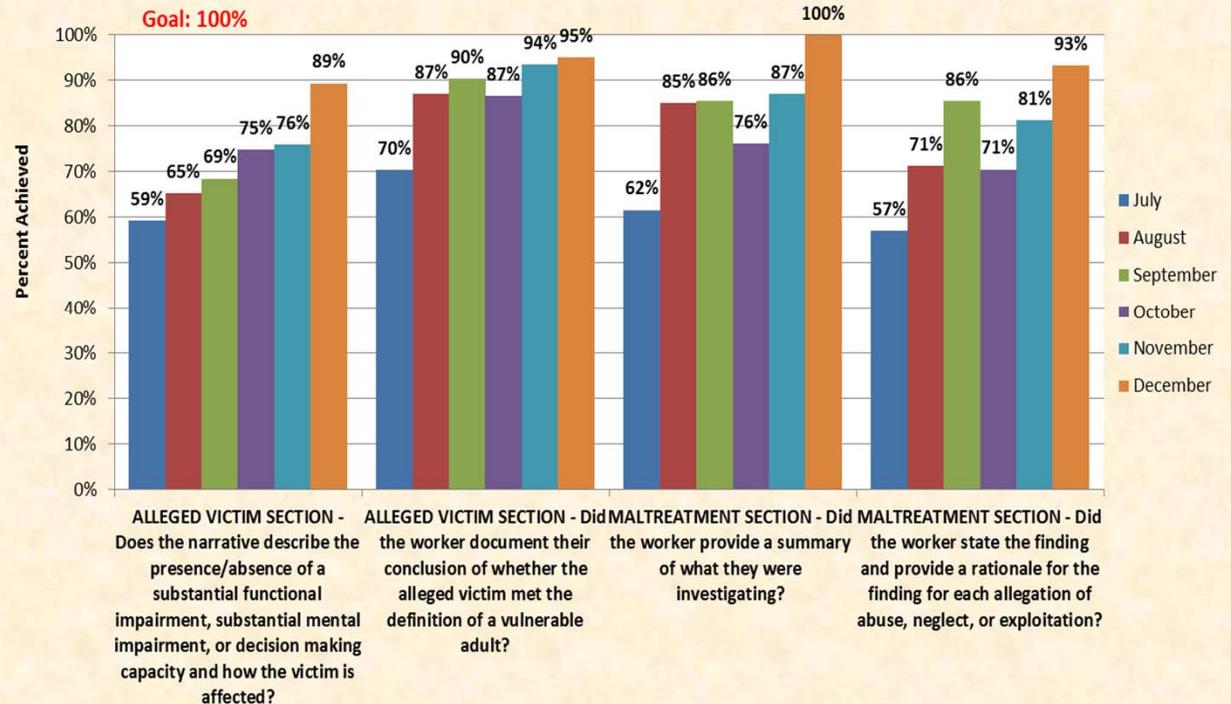
**Planned:*

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



APS Investigation Summary - Quality July - December 2013

Number of Reviews:
 July = 125
 August = 124
 September = 124
 October = 124
 November = 125
 December = 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.

Data Review Frequency: Monthly