

# CHAPTER 1: CONTINUOUS QUALITY IMPROVEMENT (CQI)

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

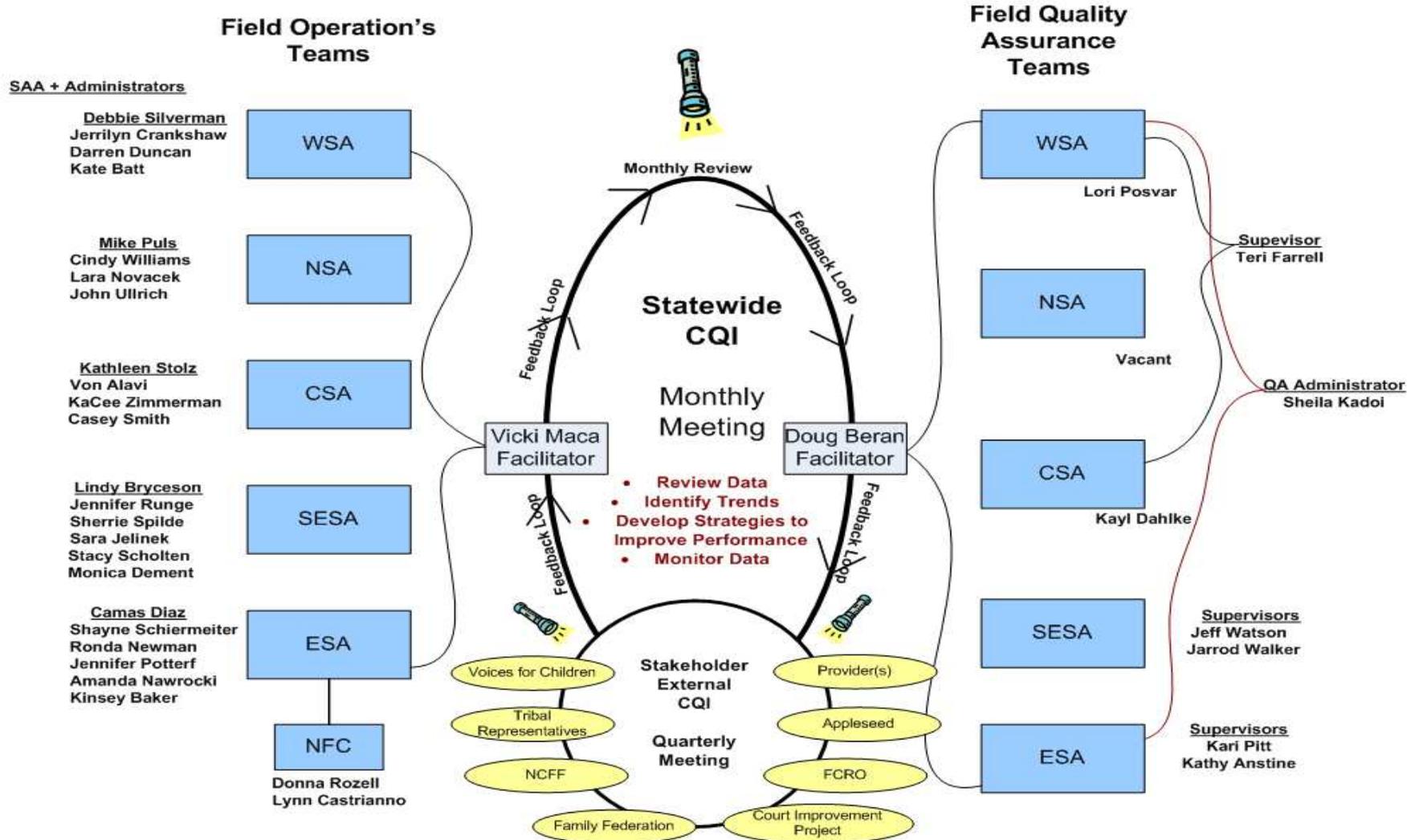
# Schedule of Discussion Subjects 2013

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

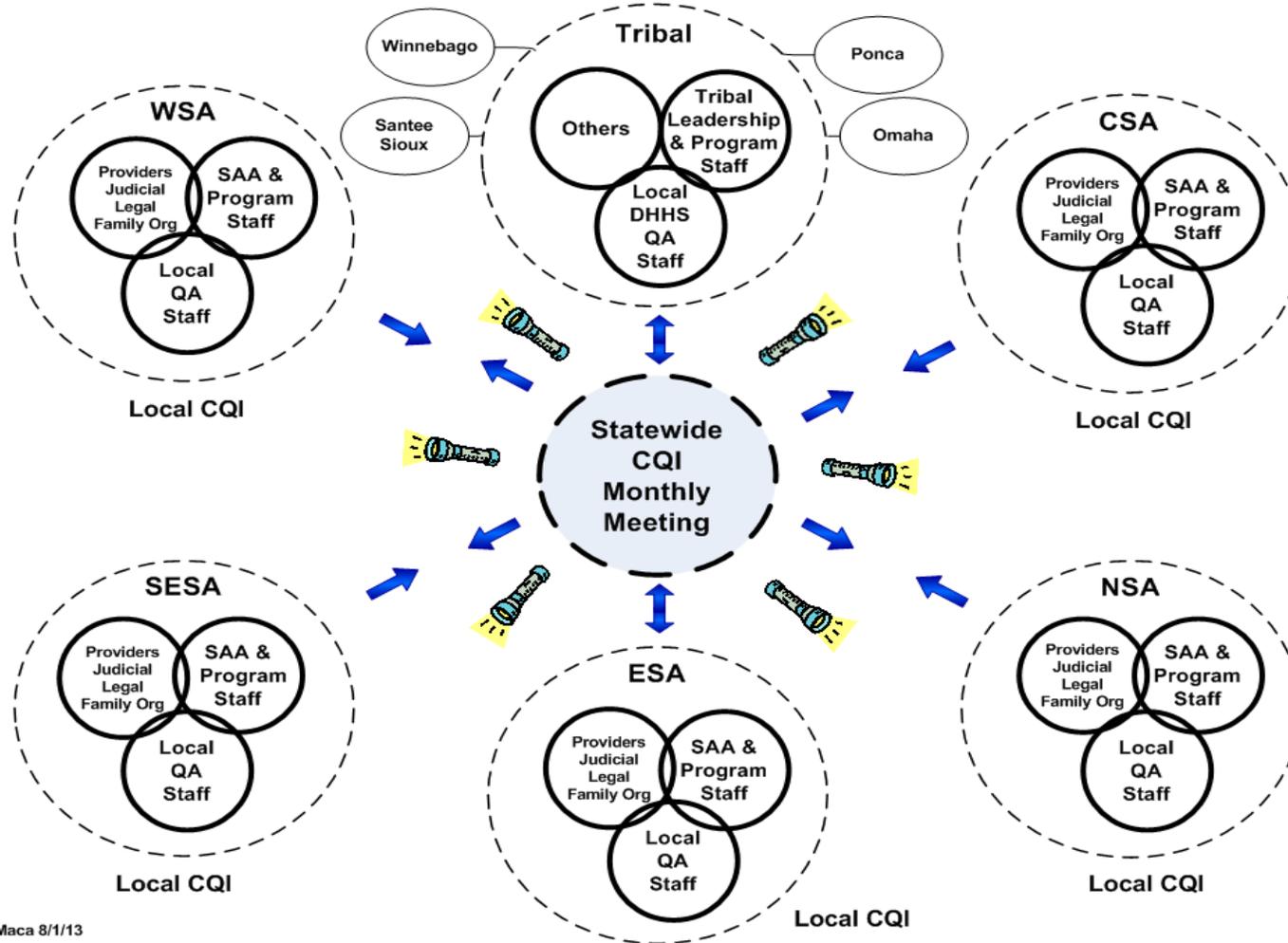
# Federal IM 12-07

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

# Statewide CQI Process



# Local CQI Process



# CHAPTER 2: PREVENTION AND EARLY INTERVENTION

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

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

## Safely Decrease the Number of State Wards

### Strengths/Opportunities:

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

### Barriers:

### Action Items:

#### \*Completed:

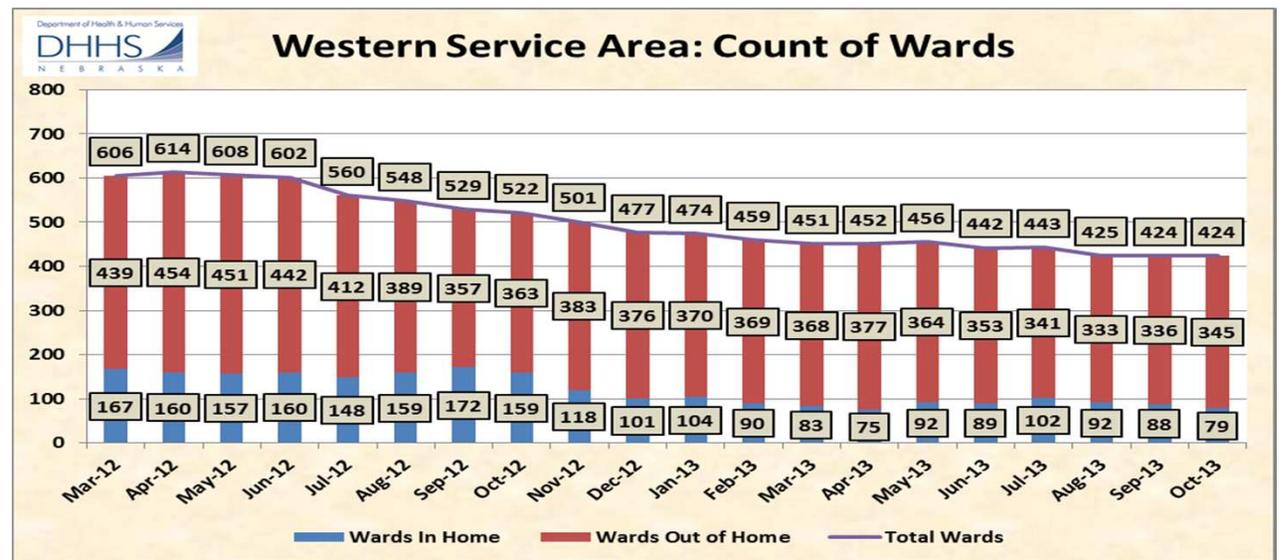
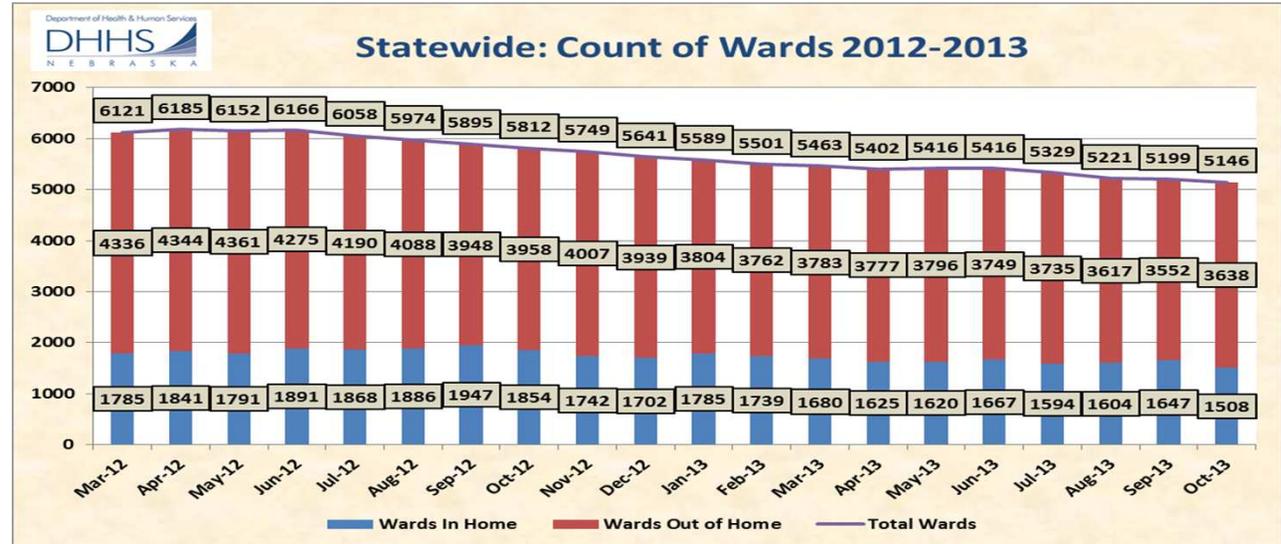
- 40 Day Focus Initiatives
  - A.) All wards living at home 60 days or more. 421 wards achieved permanency as a result of this initiative.
  - B.) All wards in out of home care over 180 days. 123 wards achieved permanency as a result of this initiative.
  - C.) OJS & 3B Youth. 228 wards achieved permanency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

### Strengths/Opportunities:

Stateward Reductions (Oct 2012 - Oct 2013)	
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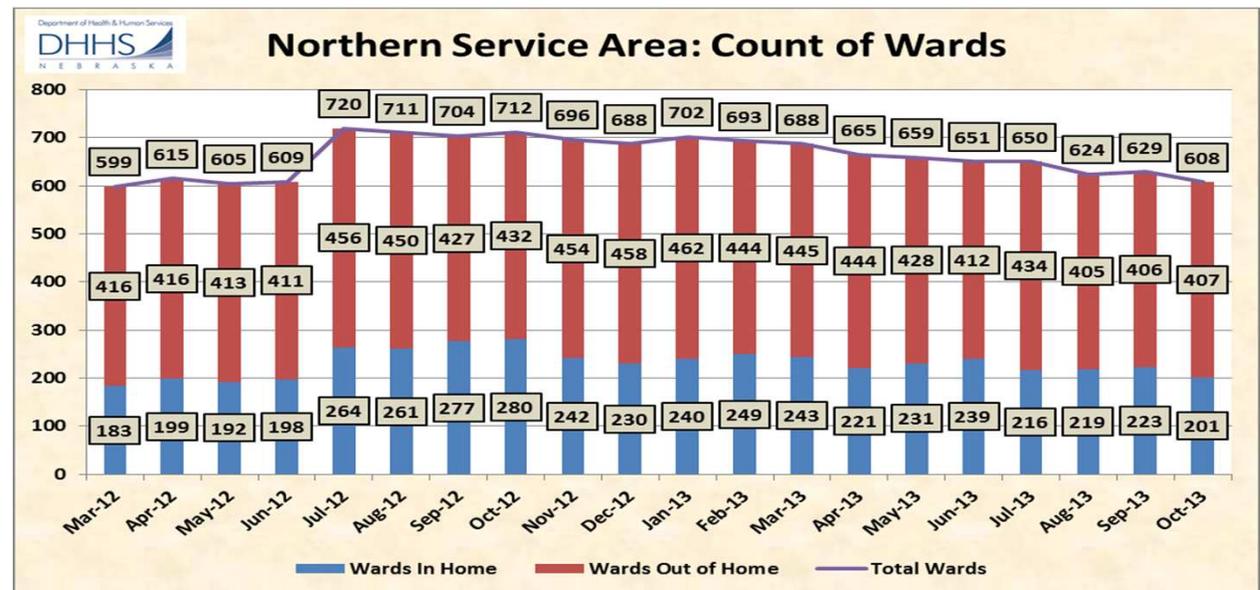
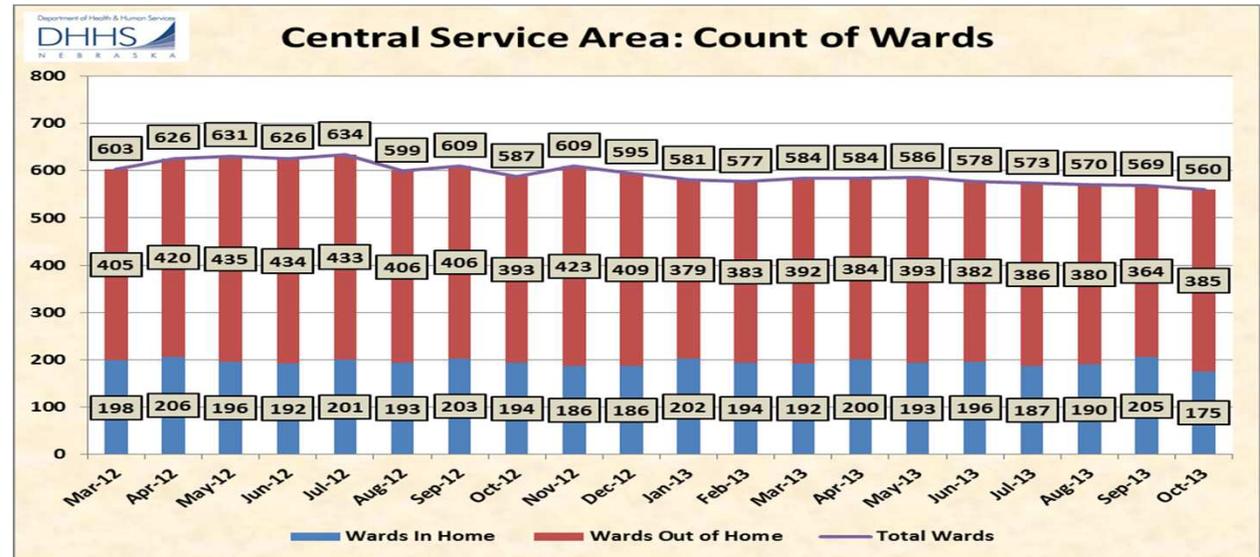
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Data Review Frequency: Quarterly

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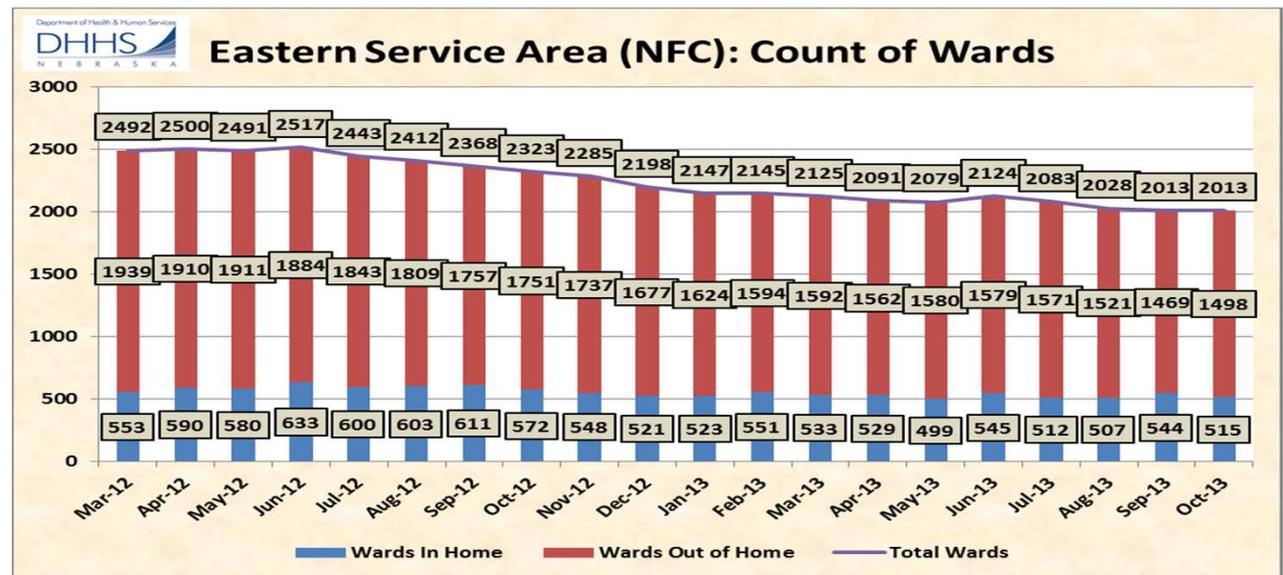
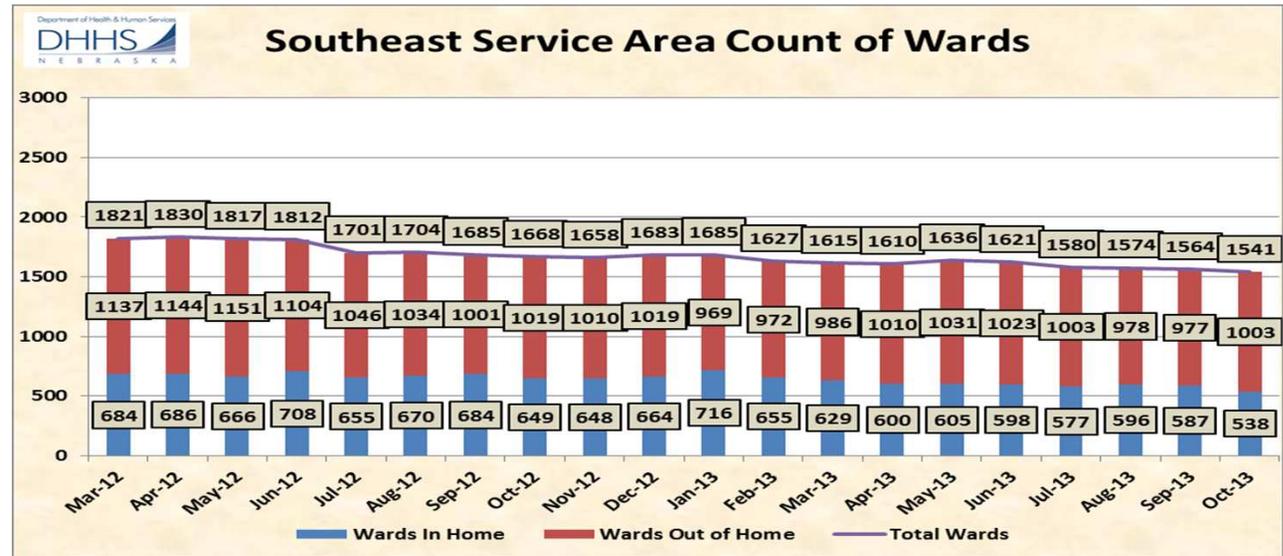
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### CQI Team Priority:

\* Statewide

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



Data Review Frequency: Quarterly

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

**Strengths/Opportunities:**

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

**Barriers:**

**Action Items:**

*\*Completed:*

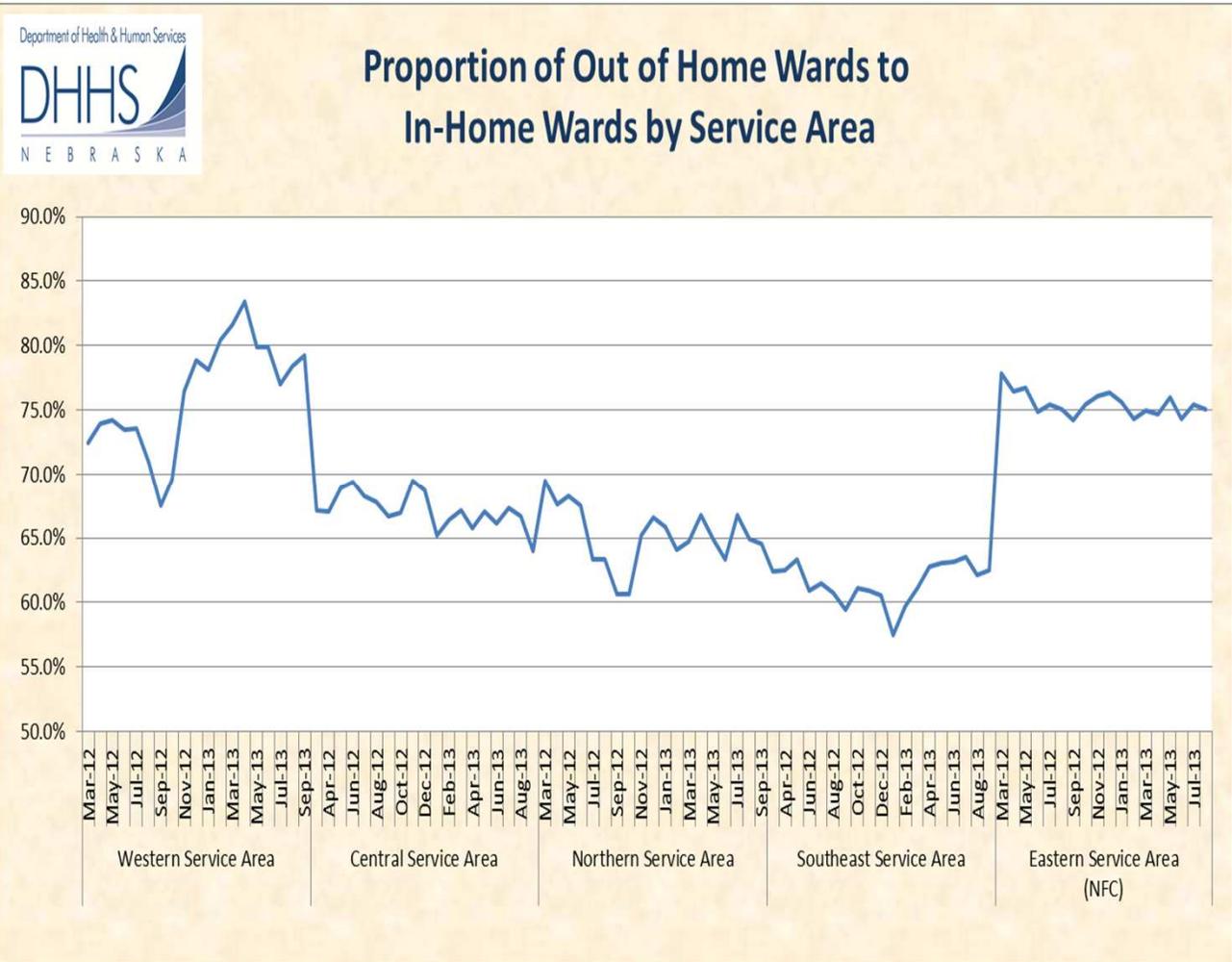
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**CQI Team Priority:**

\* 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:

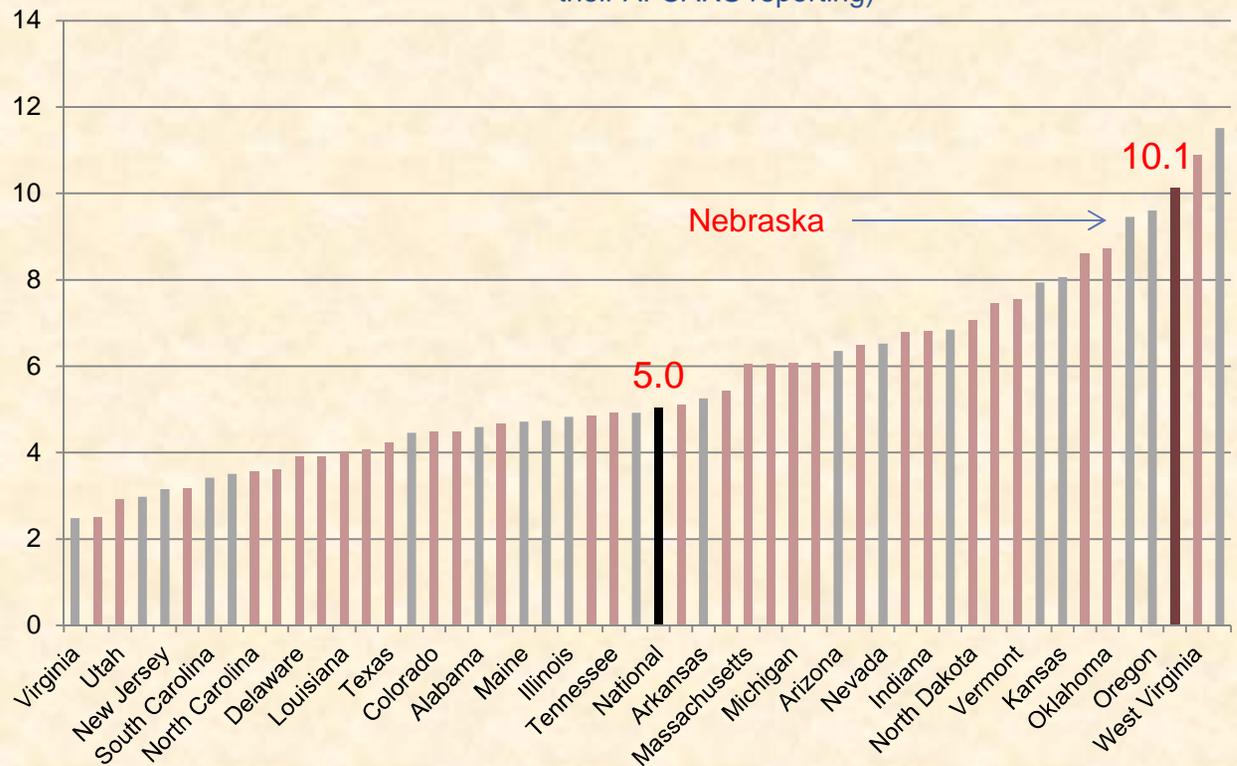
\* Statewide

## 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)



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

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

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

**Safely Decrease the Number of State Wards**

**Strengths/Opportunities:**

**Barriers:**

**Action Items:**

*\*Completed:*

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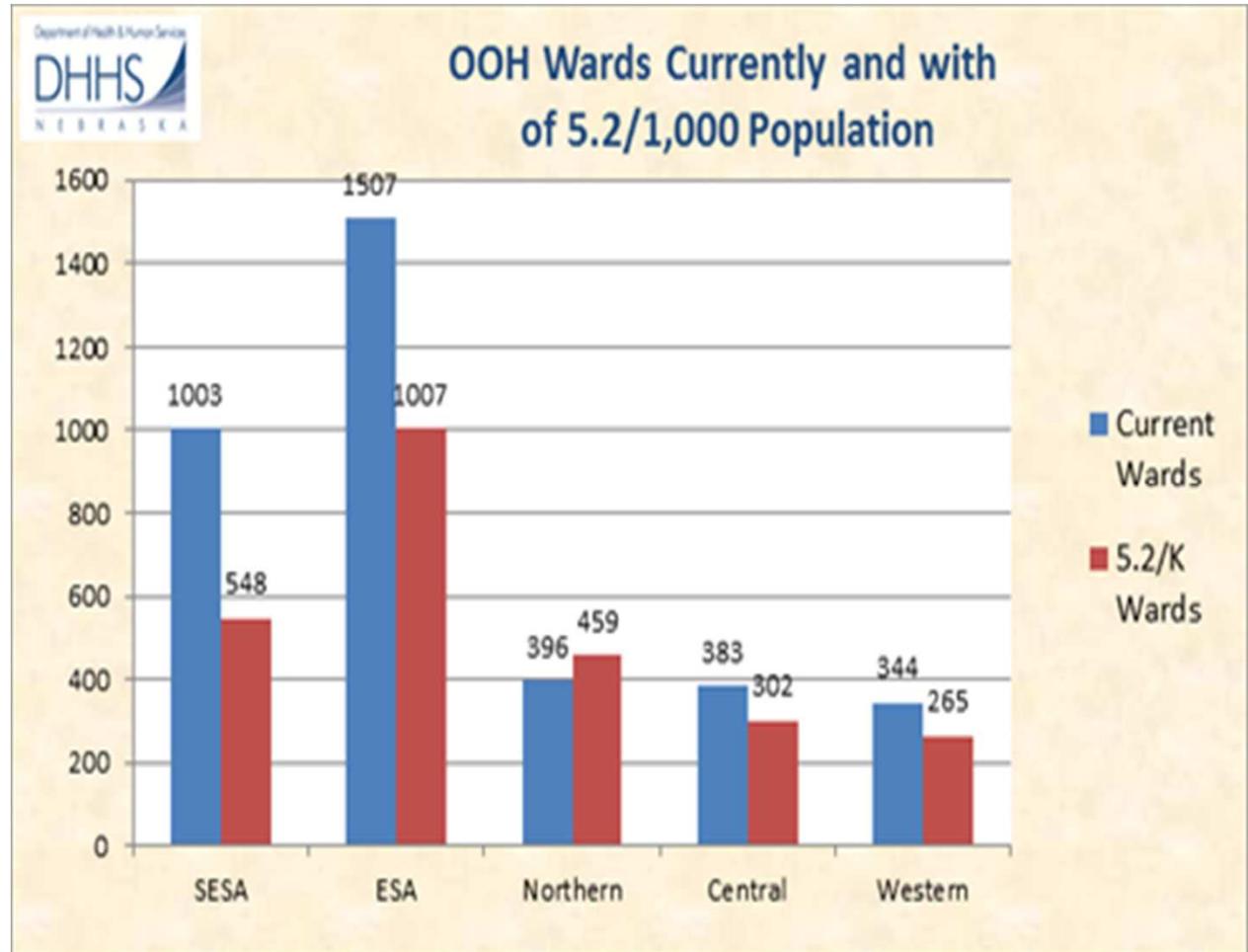
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**CQI Team Priority:**

\* Statewide

**Data Review Frequency: Monthly**

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



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

Note: Count by County Report is now available.

## Safely Decrease the Number of State Wards

### Strengths/Opportunities:

-Lower number of entries than exits.

### Barriers:

### Action Items:

#### *\*Completed:*

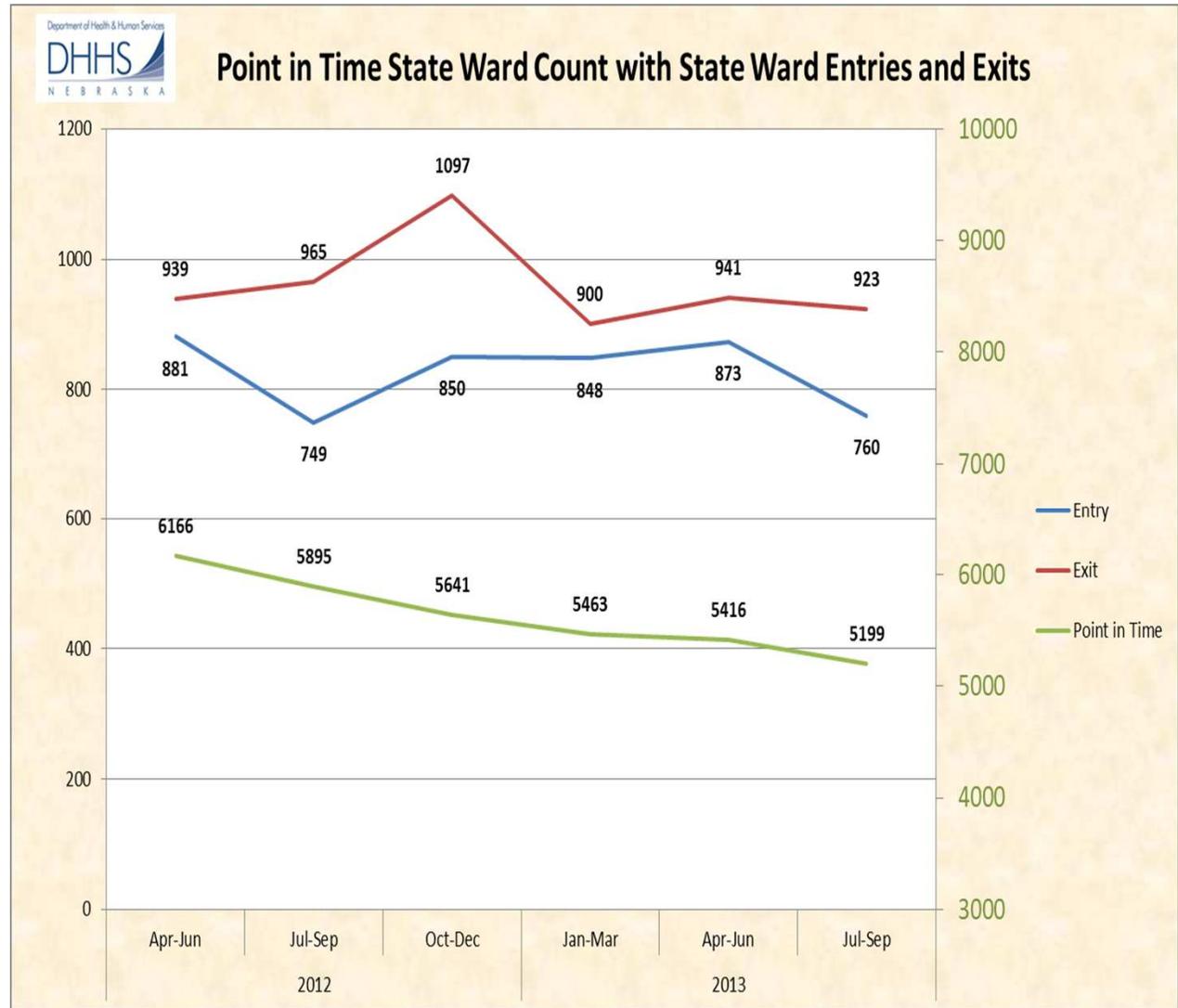
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#### *\*Planned:*

### CQI Team Priority:

\* Statewide

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



**Data Review Frequency: Quarterly**

## Safely Decrease the Number of State Wards

### Strengths/Opportunities:

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

### Barriers:

### Action Items:

#### *\*Completed:*

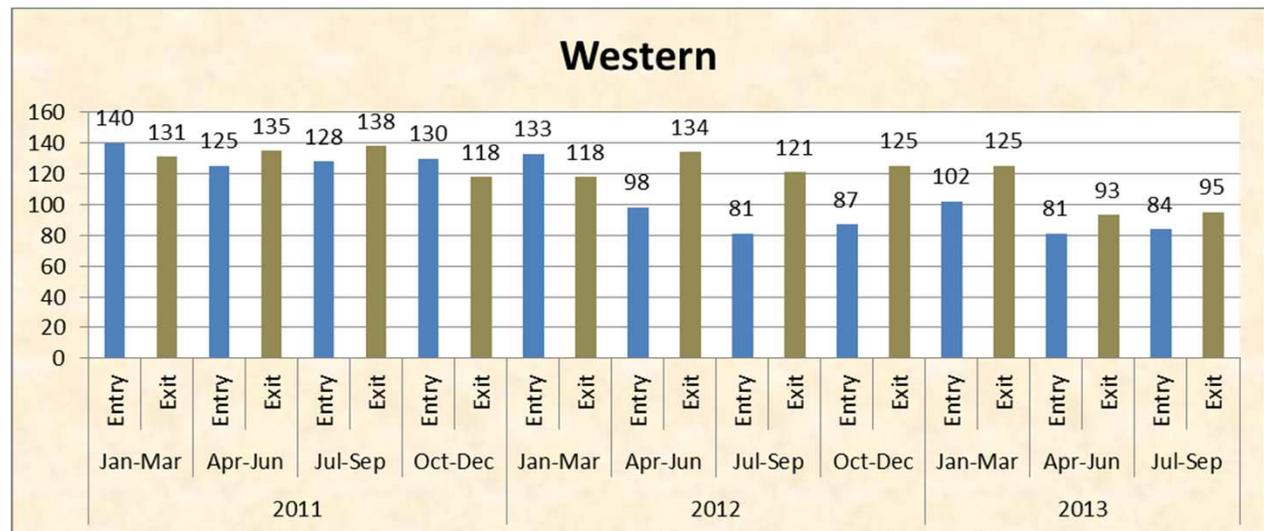
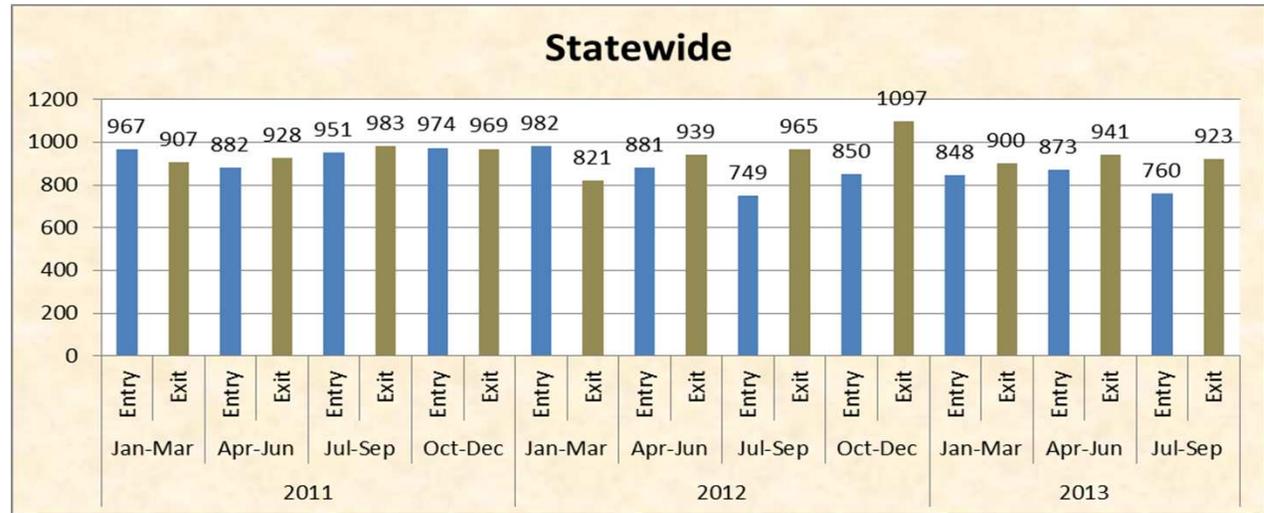
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### CQI Team Priority:

\* Statewide

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



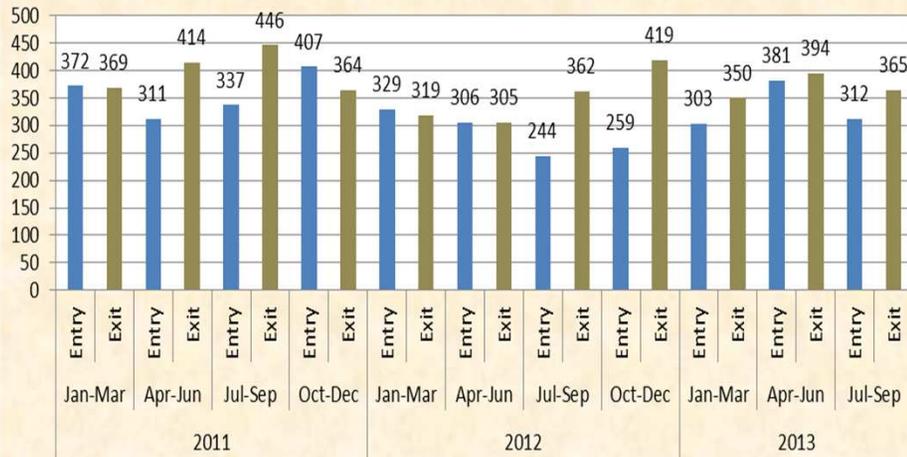
N-Focus Legal Status field. An entry occurs when a child is made a state ward. An exit occurs when the Legal Status changes to non-ward - not when it is entered into NFocus. Entries include youth that go from non-court to court. Counts based on date of action, not entry date into NFocus

**Data Review Frequency: Quarterly**

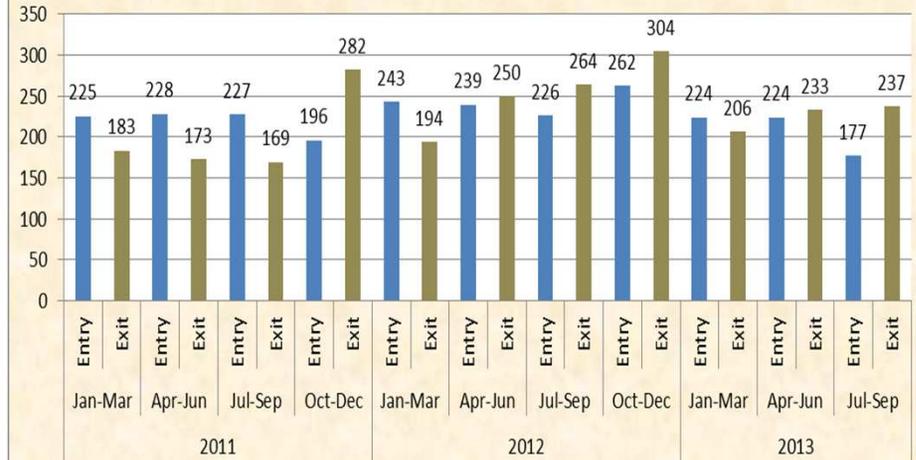
Safely Decrease the Number of State Wards

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

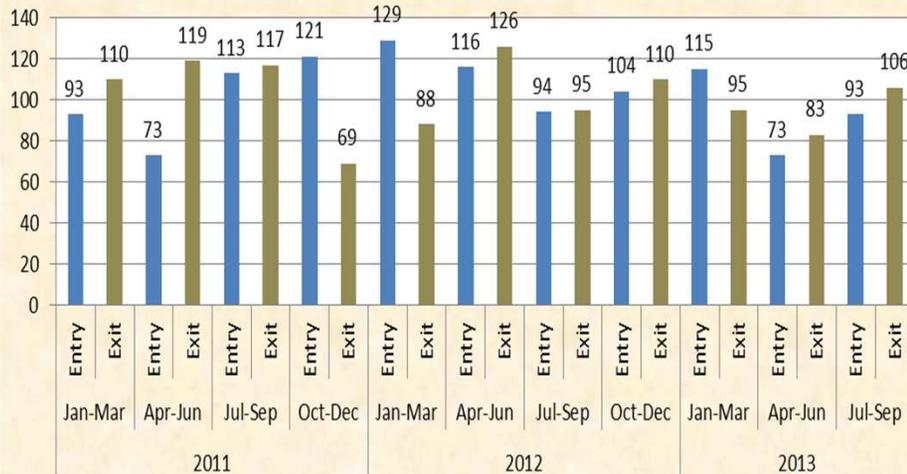
**ESA (DHHS-Entries & NFC-Exits)**



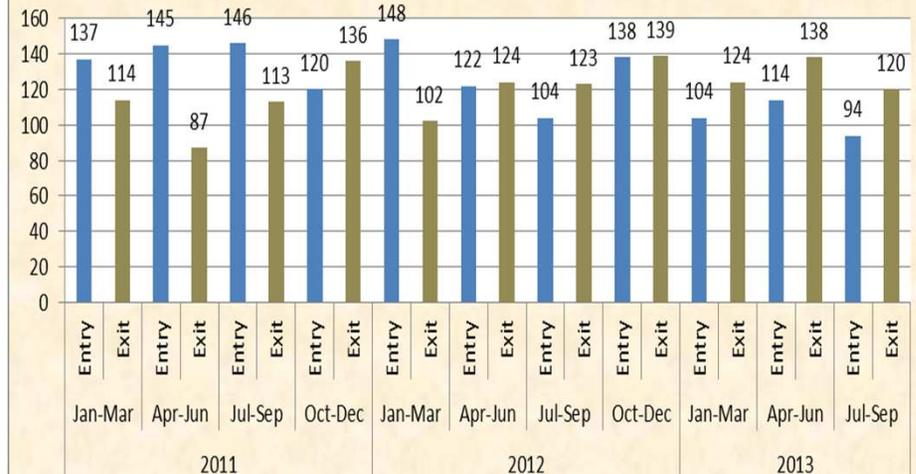
**Southeast**



**Central**

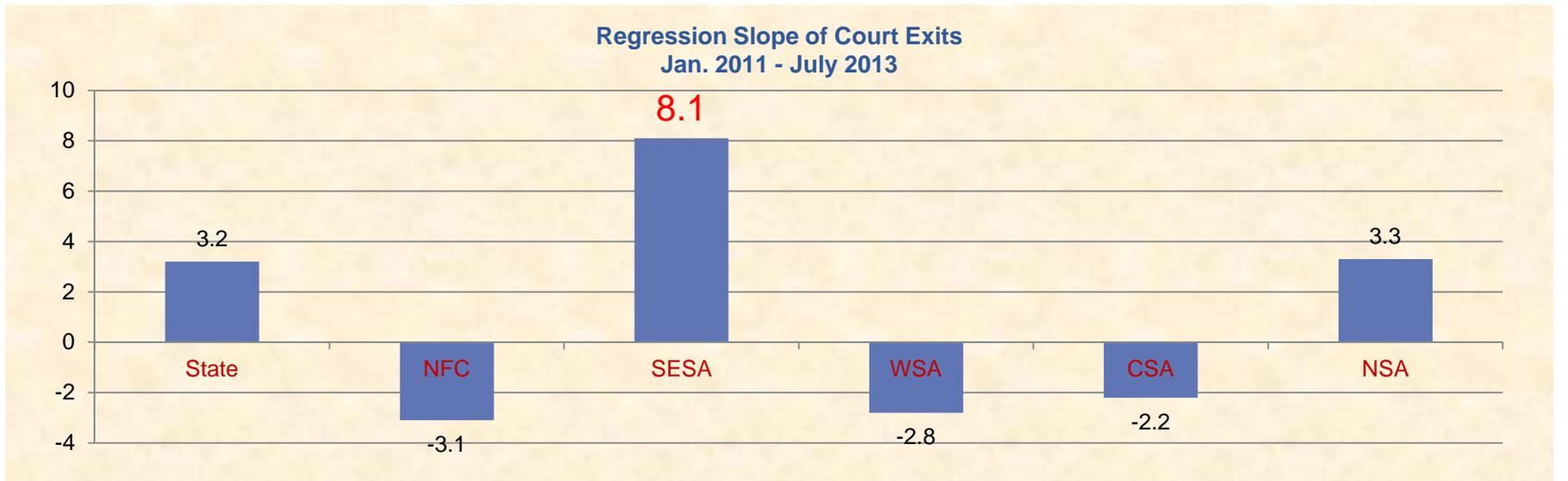


**Northern**



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

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

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

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

#### Strengths/Opportunities:

- 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.*

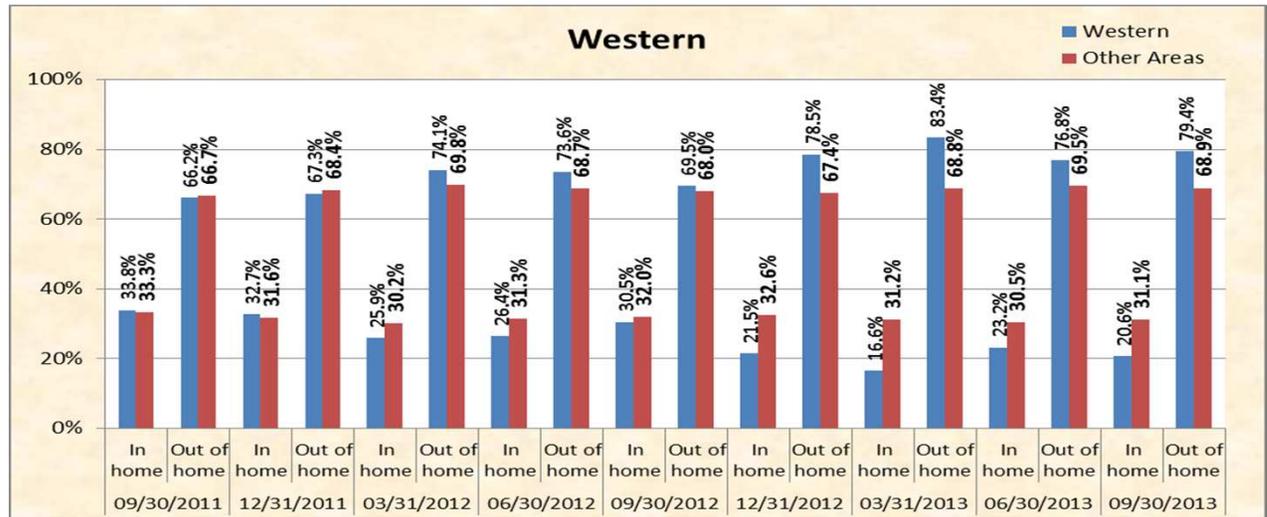
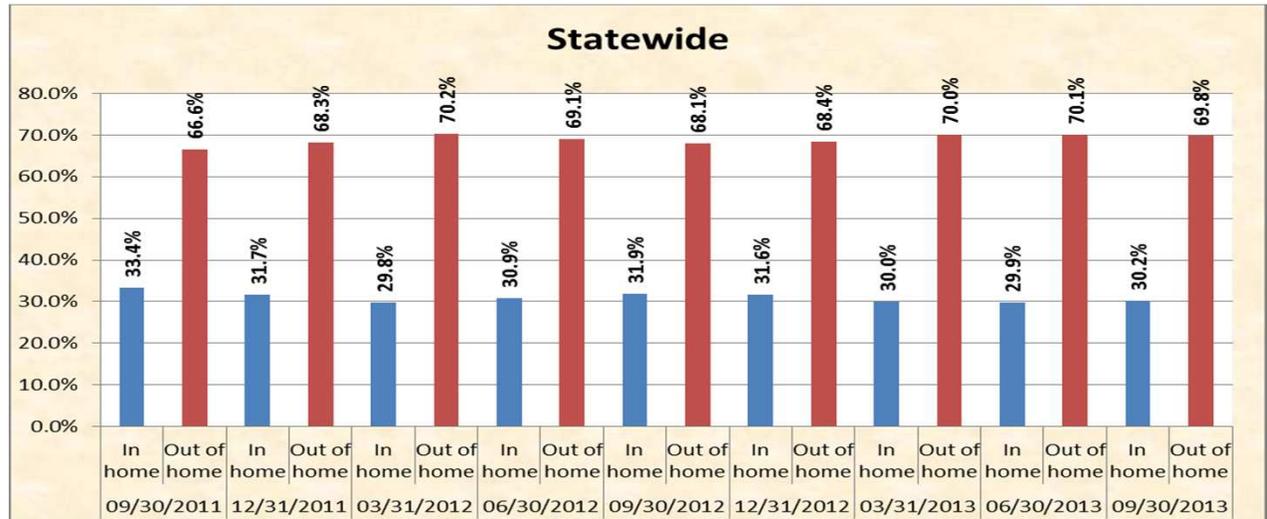
#### Barriers:

#### Action Items:

*\*Completed:*

*\*Planned:*

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

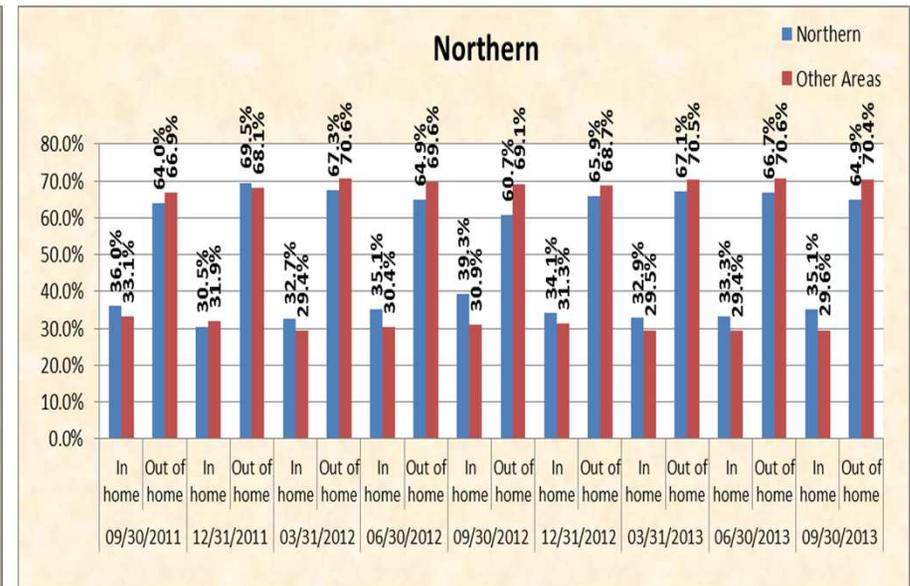
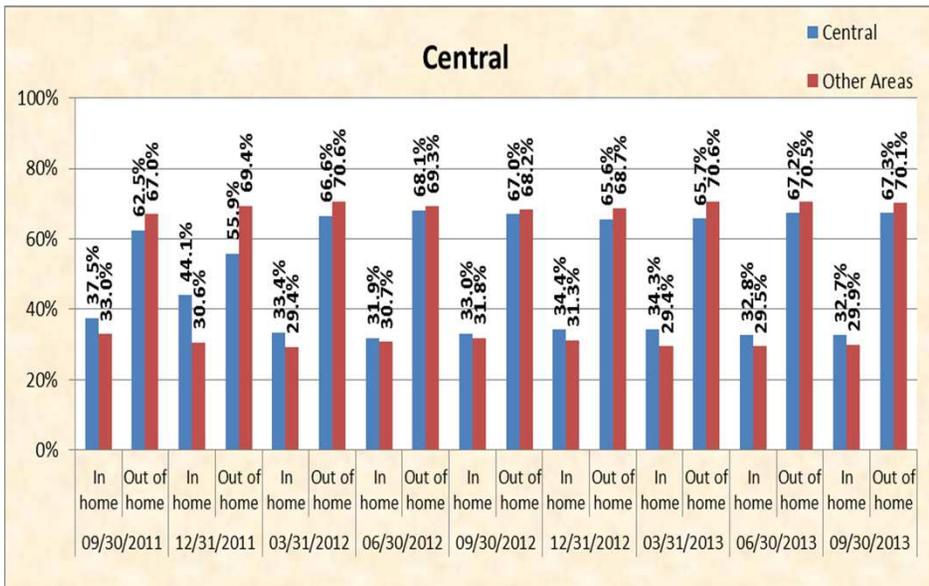
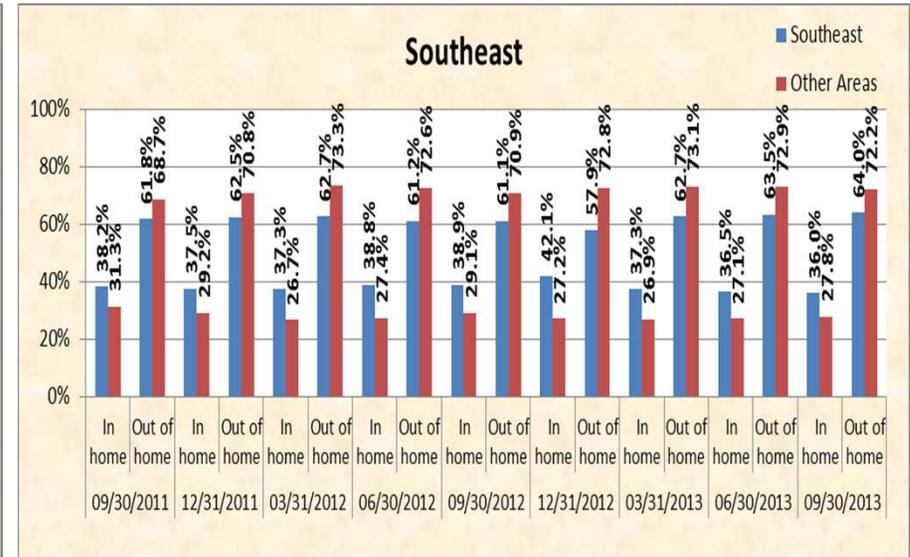
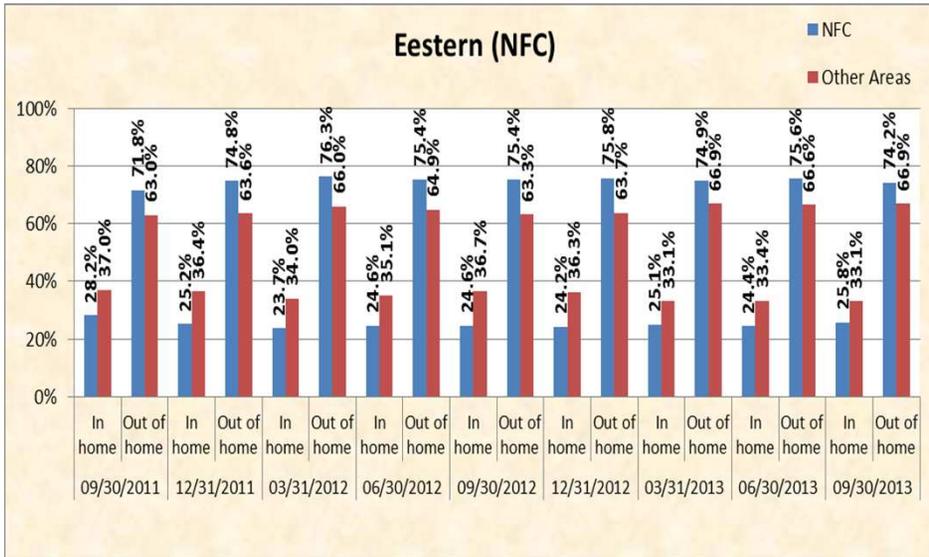


N-Focus Placement field. The In Home category includes state wards living with a parent, guardian or independently. The Out of Home category includes state wards in all types of out of home placements and those on runaway status. Data includes all court wards measured at a point-in-time on the last day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

- Sept 2013: 89% of all calls to the hotline were answered. The percentage of calls answered remained the same from Aug to September.
- Count of hotline calls decreased from August to September 2013.

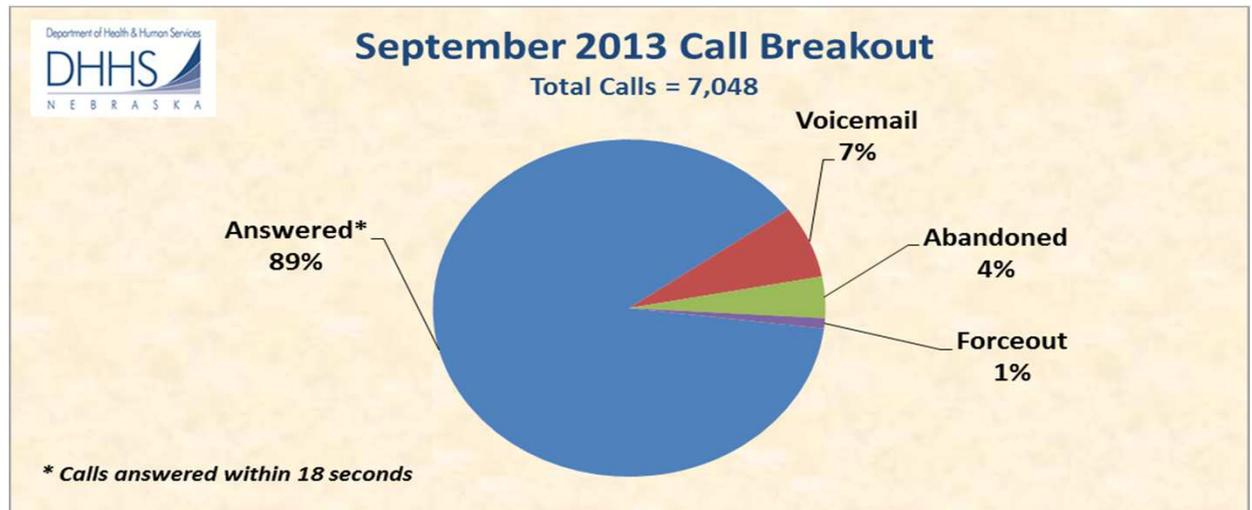
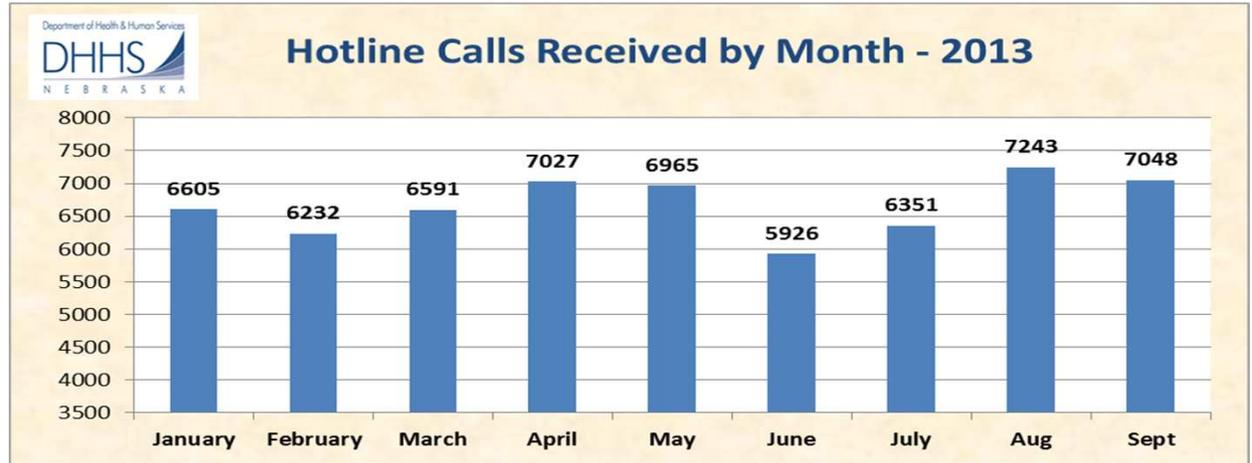
**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

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



**Definitions:**

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

**Data Review Frequency: Monthly**

### Intake Quality Measures

**Strengths/Opportunities:**

- Sept. 2013: Significant Increase in performance for all two of the four measures between August to September 2013.

**Barriers:**

**Action Items:**

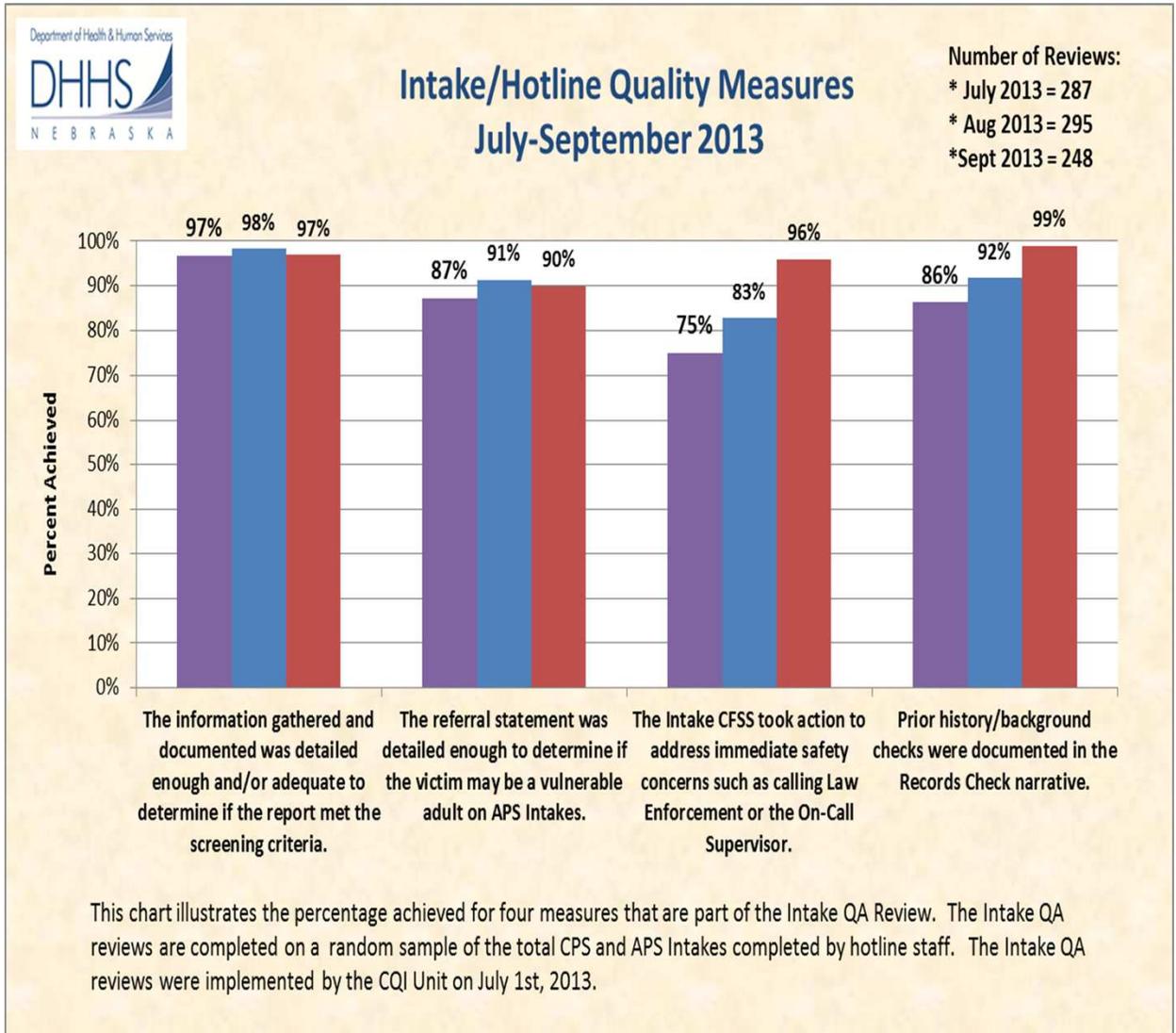
*\*Completed:*

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

*\*Planned:*

**Data Review Frequency: Monthly**

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



## IA – Contact Timeframes

### Strengths/Opportunities:

-Central Service Area continues to have the lowest number of Initial Assessments Not Finalized (45) that were due between Jan 2012 – Sept 2013. Northern Service Area continues to have the highest number of assessments Not Finalized (344) during this same period. On 10/15/2013, there were 1,148 Initial Assessments that were not finalized for the entire State for this same period.

### Barriers:

- Intakes not tied to Assessments
- ARP ID # errors

### Action Items:

#### \*Completed:

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

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

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

#### \*Planned:

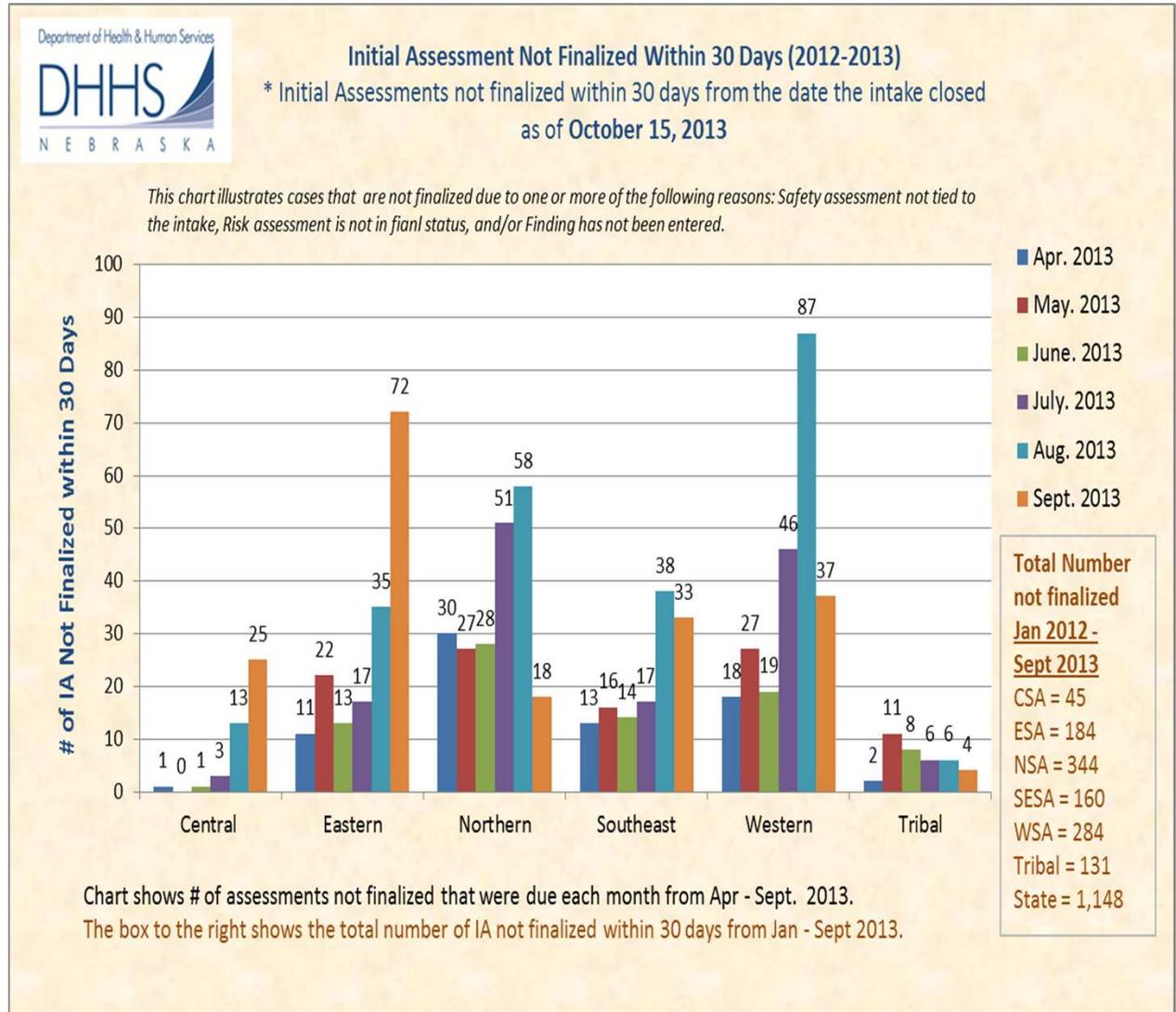
- Upcoming Quick Tip will include video instructions on how to use weekly InfoView reports to identify intakes not tied etc.
- Systems Team/S.Haber will discuss and make a decision about IA completion timeframes.
- Systems Team/S.Haber will discuss and make a decision regarding instances when a risk 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**

## IA – Contact Timeframes

### Strengths/Opportunities:

- Sept 2013: Northern Service Area achieved 100% for P1 timeframe in Aug 2013.
- Decrease in performance from August to September for all priority measures.

### Barriers:

- Intakes not tied to Assessments
- ARP ID # errors

### Action Items:

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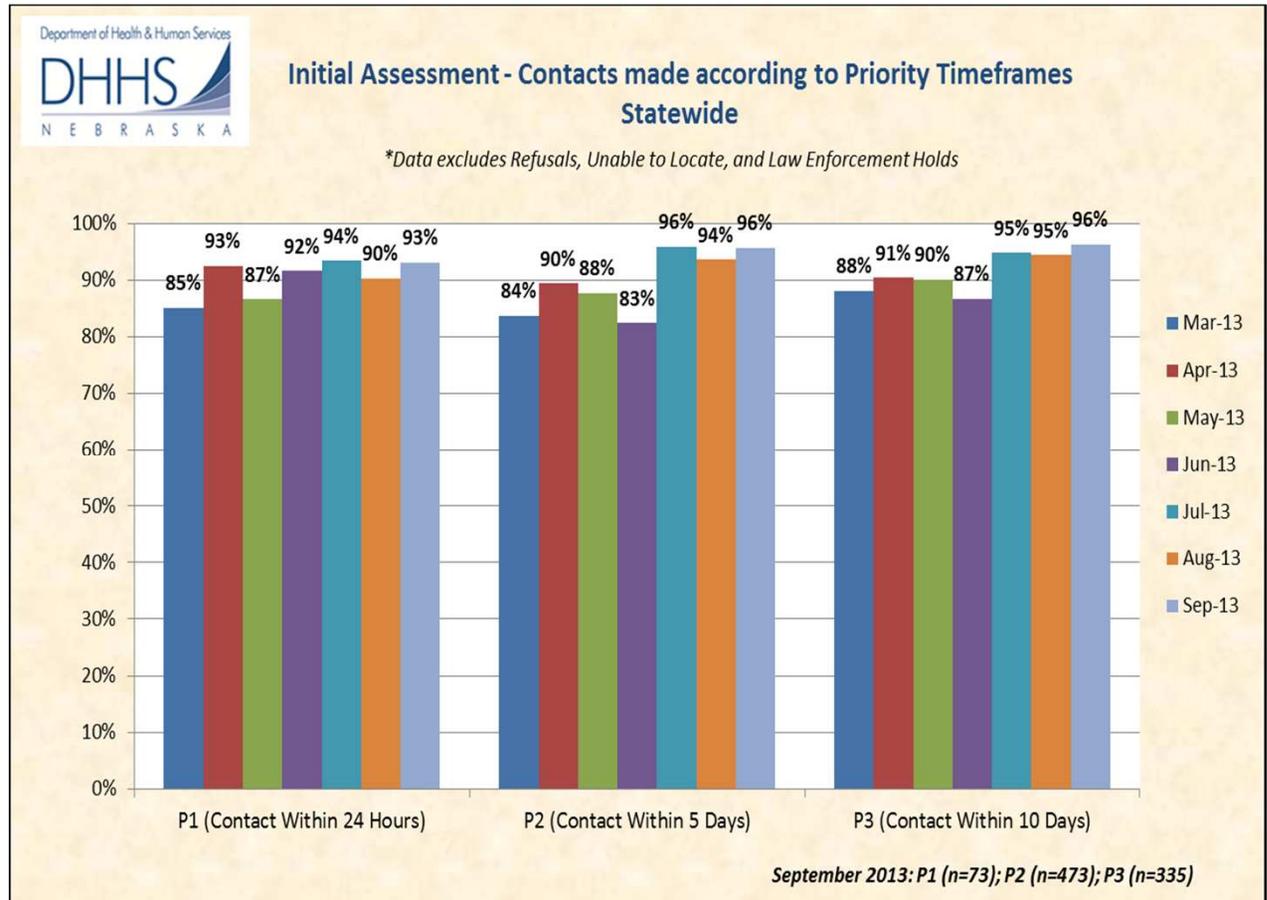
### CQI Team Priority:

- Statewide
- Western Service Area

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**Data Review Frequency: Monthly**

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



Sept 2013: Reasons for Missed Contact	
Contact Not Timely	11
Intake Not Tied	11
ARP ID Issues	8
Contact Not Made with Victim	3
Intake Not Tied & No Assessment	3
Contact date before Intake date	1
<b>Total</b>	<b>37</b>

**IA – Contact Timeframes**

**Strengths/Opportunities:**

\* Sept 2013: Northern Service Area achieved 100% in P1 measure for two months in a row – August and September 2013.

**Barriers:**

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

**Action Items:**

**\*Completed:**

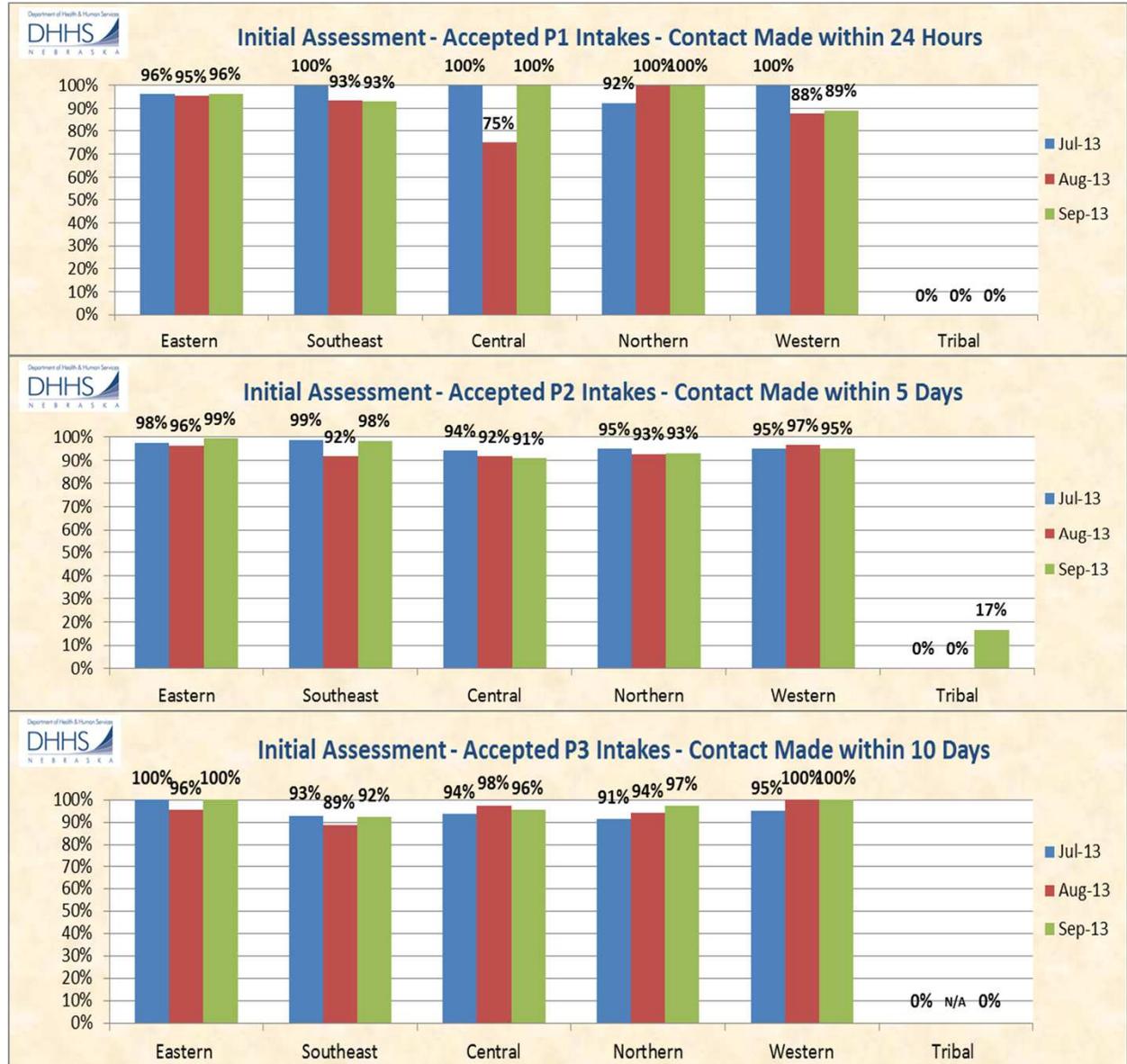
- New/Improved SDM Intake and Assessment Reports are now posted on InfoView. Reports identify assessments that are not tied to the intake, assessments with no findings entered etc. Instructions were emailed to CFS staff.
- Initial Assessment supervisors and workers are using InfoView reports to identify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

**\*Planned:**

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

**Data Review Frequency: Monthly**

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



### Absence of Maltreatment in Six Months

**Strengths/Opportunities:**

-Aug 2013: Eastern and Western Service Areas are showing a positive trend in this measure. Northern and Southeast saw an increase last month while Central saw a decrease.

**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:*

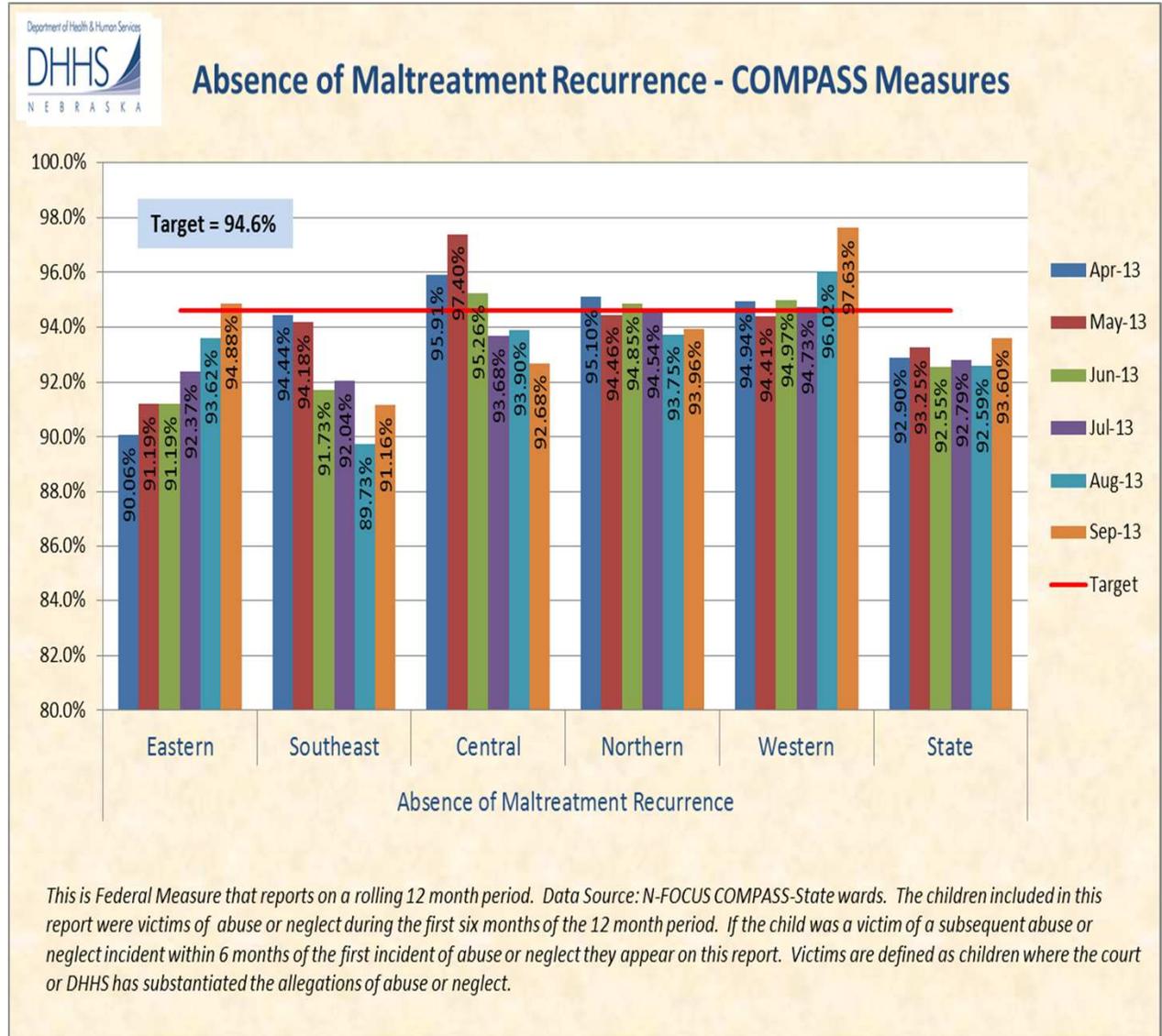
- A workgroup will convene to look at reason for case involvement and put instructions together on how to document reason for case involvement to better capture information about substance abuse and other reasons for case opening/involvement.  
 -CQI team will complete additional breakdown of repeat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

-Sept 2013: Eastern Service Area is the only Service Area not meeting this measure but is showing a positive trend in the past 5 months.

**Barriers:**

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

**Action Items:**

*\*Completed:*

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

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

*\*Planned:*

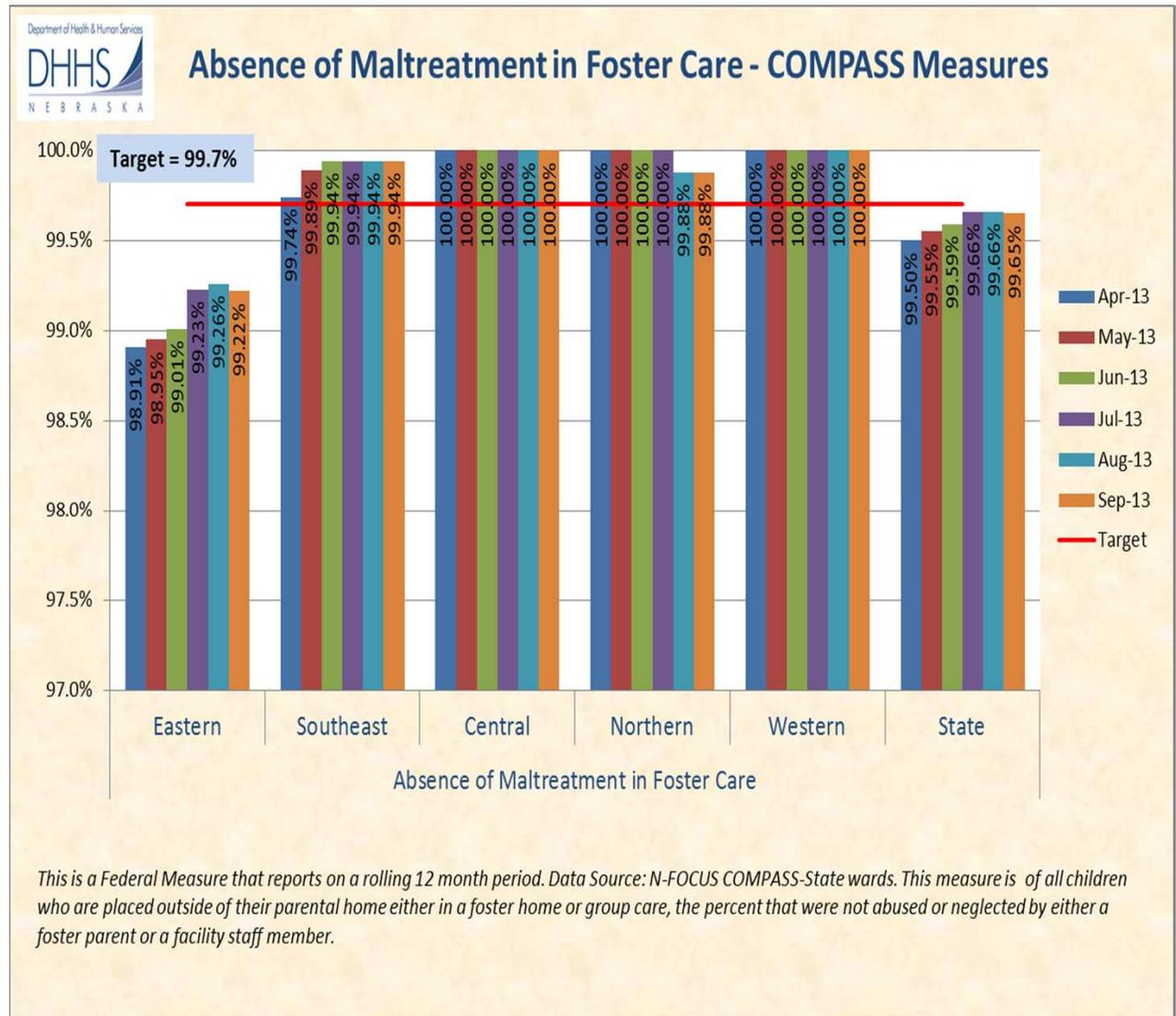
- A workgroup will convene to look at reason for case involvement and put instructions together on how to document reason for case involvement to better capture information about substance abuse and other reasons for case opening/involvement.

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

**CQI Team Priority:**

\*Statewide External Stakeholder Team

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



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

**Permanency for Children in Foster Care**

**Strengths/Opportunities:**

-Sept 2013: All Service Areas continue to exceed the target goal for this measure.

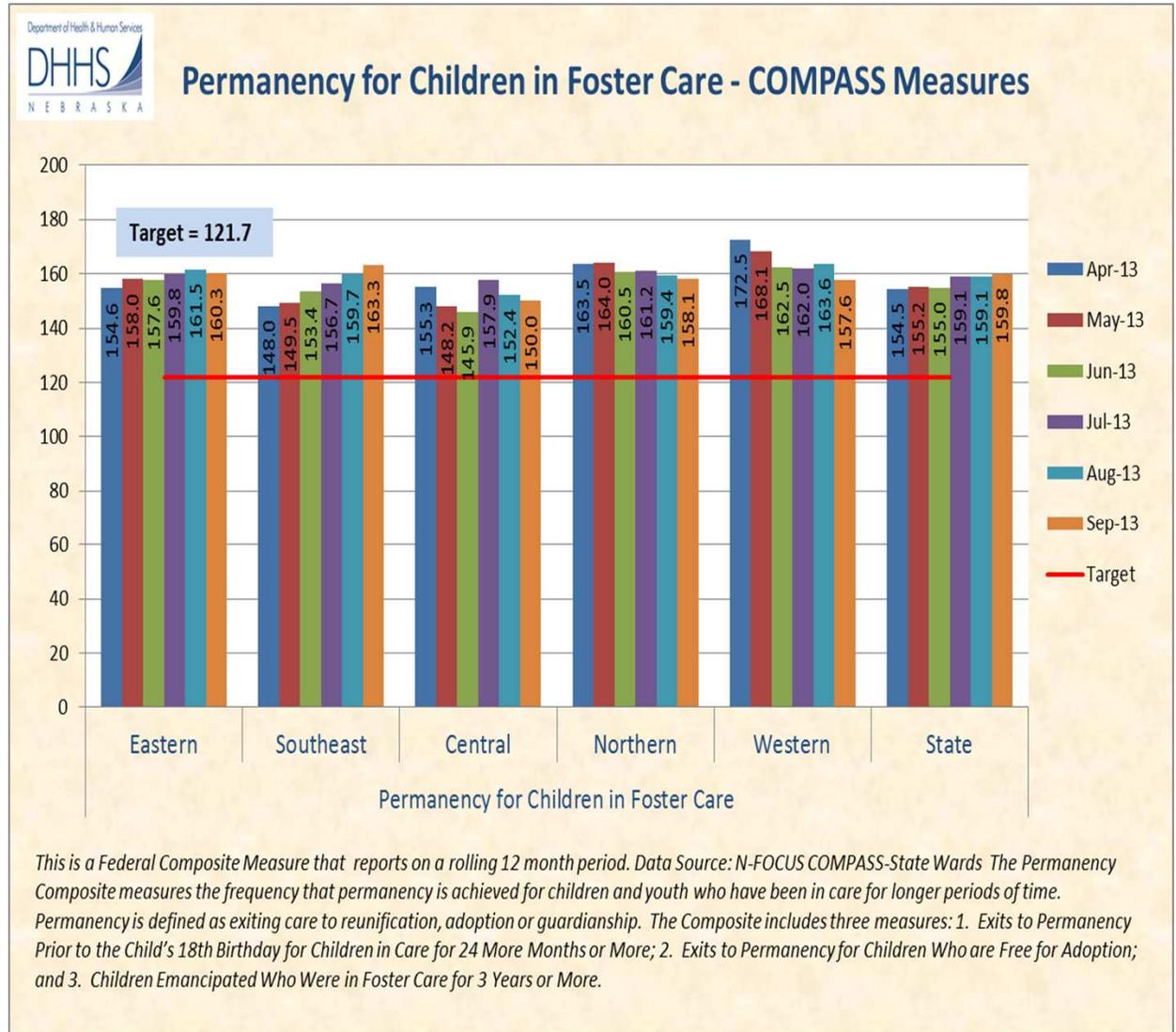
**Barriers:**

**Action Items:**

\*Completed:

\*Planned:

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



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

**Timeliness of Adoption**

**Strengths/Opportunities:**

- Sept 2013: Eastern and Western Service Areas are showing a positive trend in this measure.
- Central Service Area is the only Service Area not meeting the target goal for this measure but is showing a positive trend in the last few months.

**Barriers:**

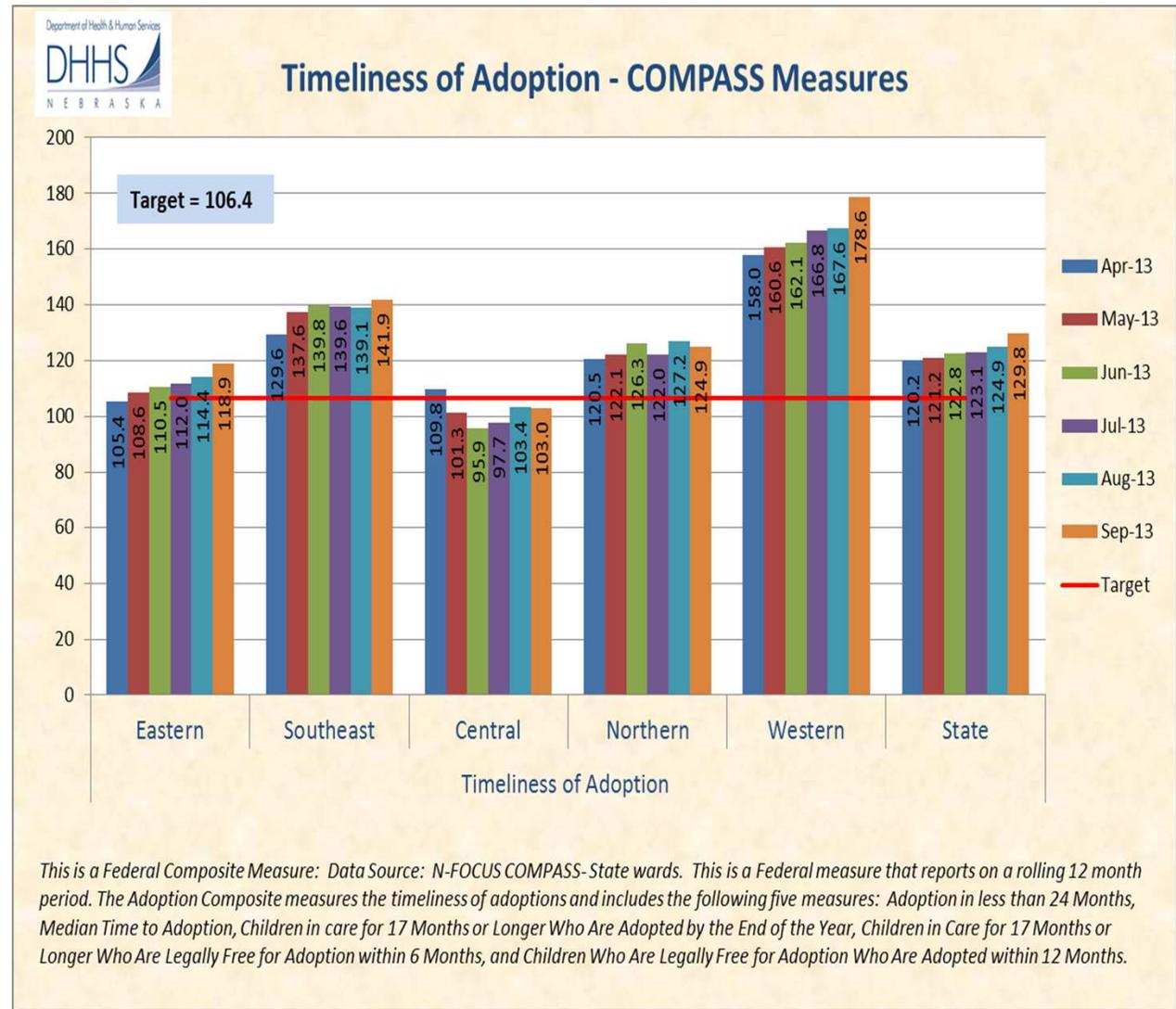
**Action Items:**

*\*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 of Adoption**

**Strengths/Opportunities:**

-- Sept 2013: Northern Service Area is the only Service Area meeting the goal for this measure, however, they are seeing a negative trend in the last 3 months.

**Barriers:**

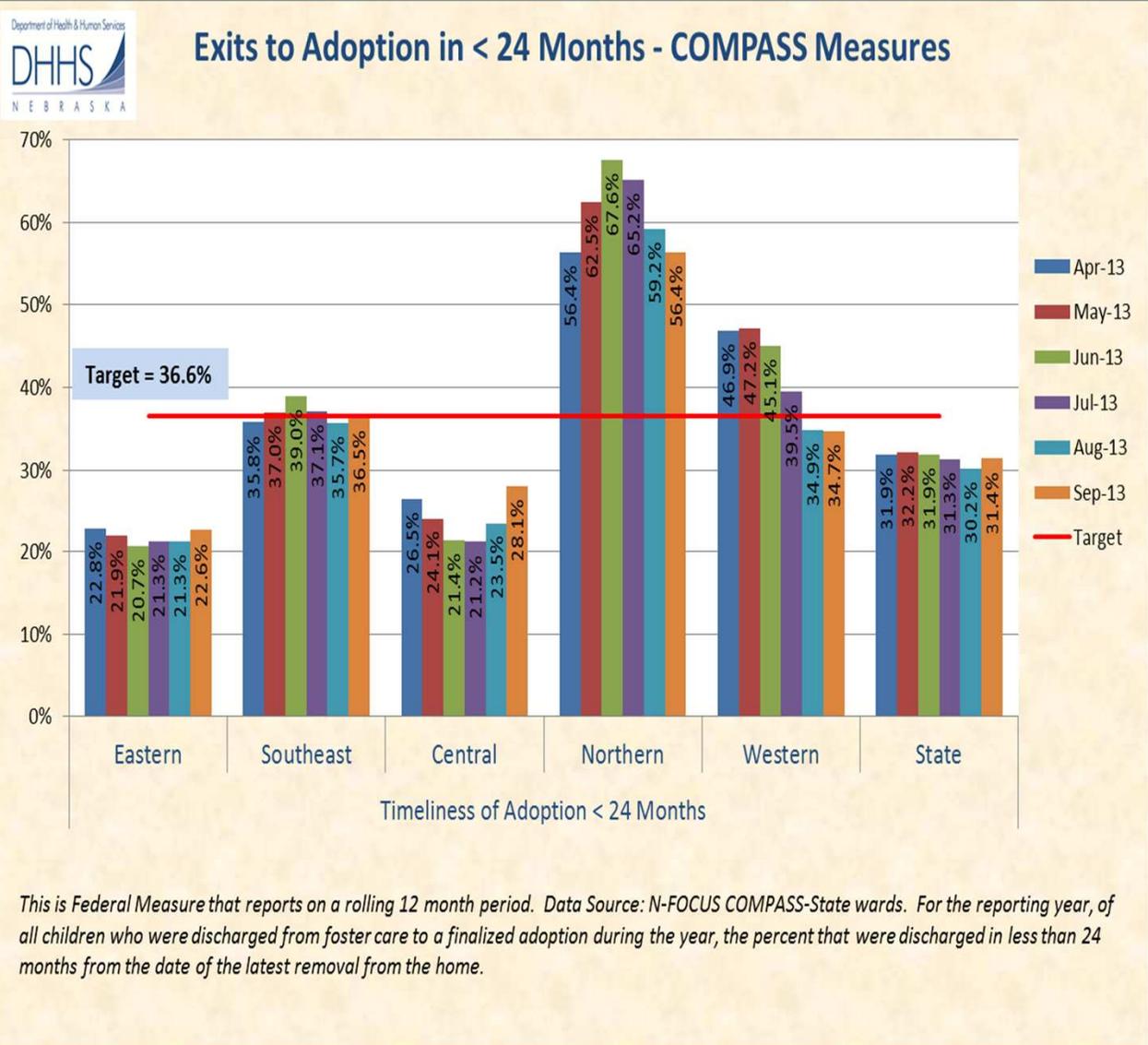
**Action Items:**

*\*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:**

-Sept 2013: Northern Service Area is within 0.3 points from meeting the target goal. Northern has seen a steady increase in performance in the last 5 months. Increase in Eastern, Southeast, Central and Northern and decrease in Western in the last 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.

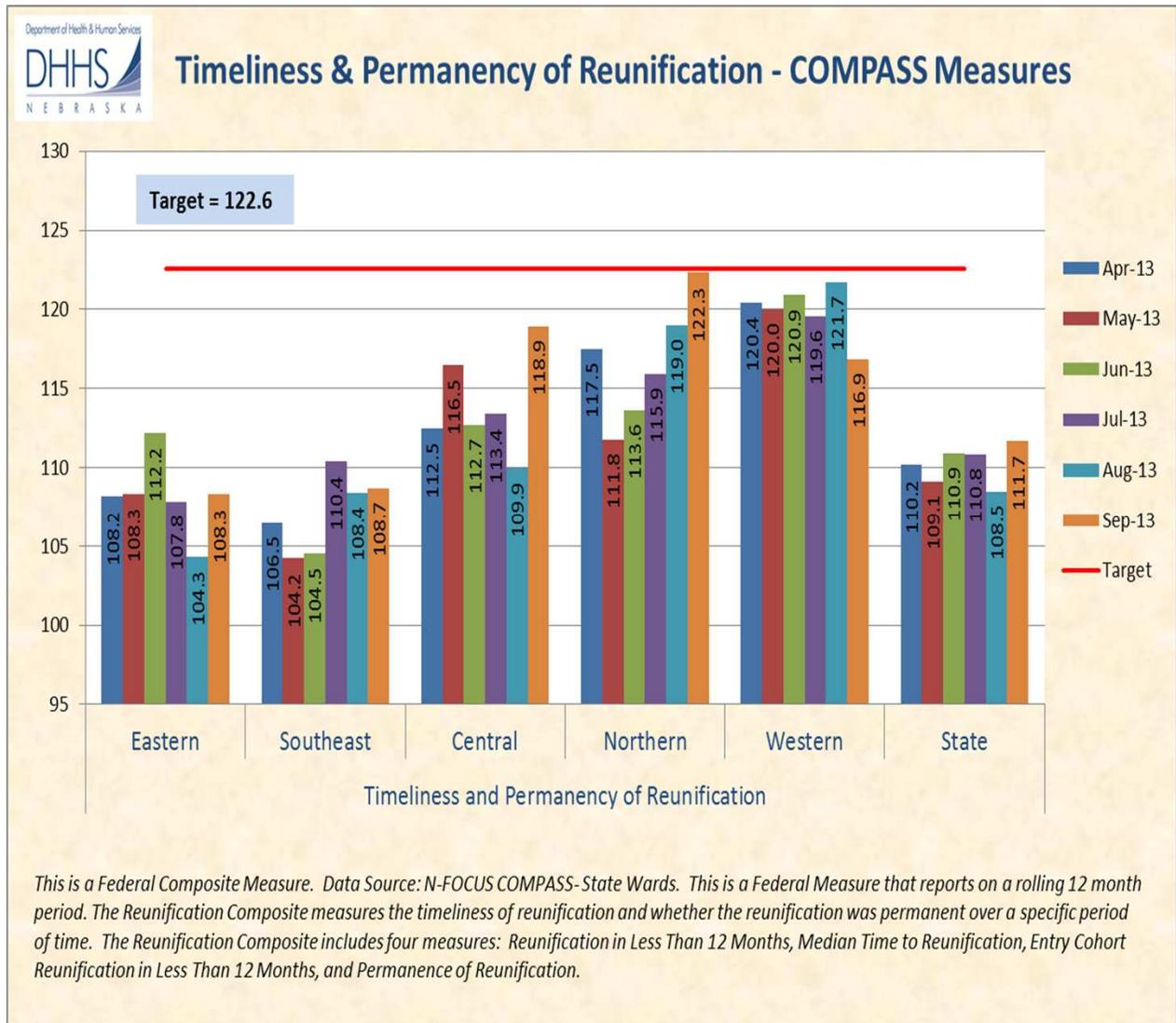
**CQI Team Priority:**

\*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:**

-Sept 2013: Central and Northern Service Areas have the highest percentage of youth exiting to Reunification in 0-12 months (over 65%).

**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:*

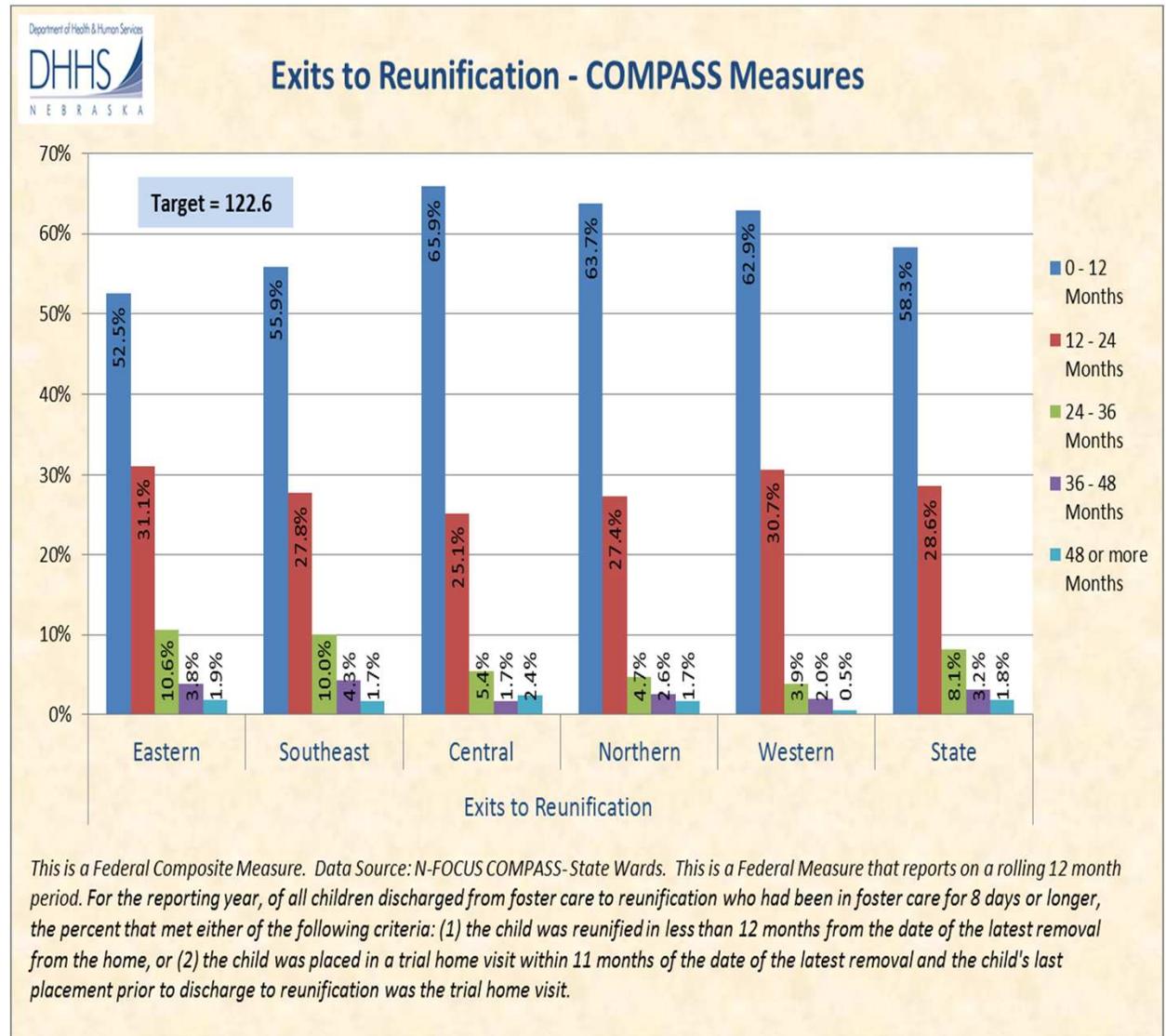
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

**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:**

-Sept 2013: Northern Service Area saw a significant increase this month and is the only Service Area meeting the target goal for this measure. Western Service Area met this measure in April 2013 but has seen a decline since then. Decrease seen in Southeast and Central Service Areas in the past few months.

**Barriers:**

**Action Items:**

*\*Completed:*

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

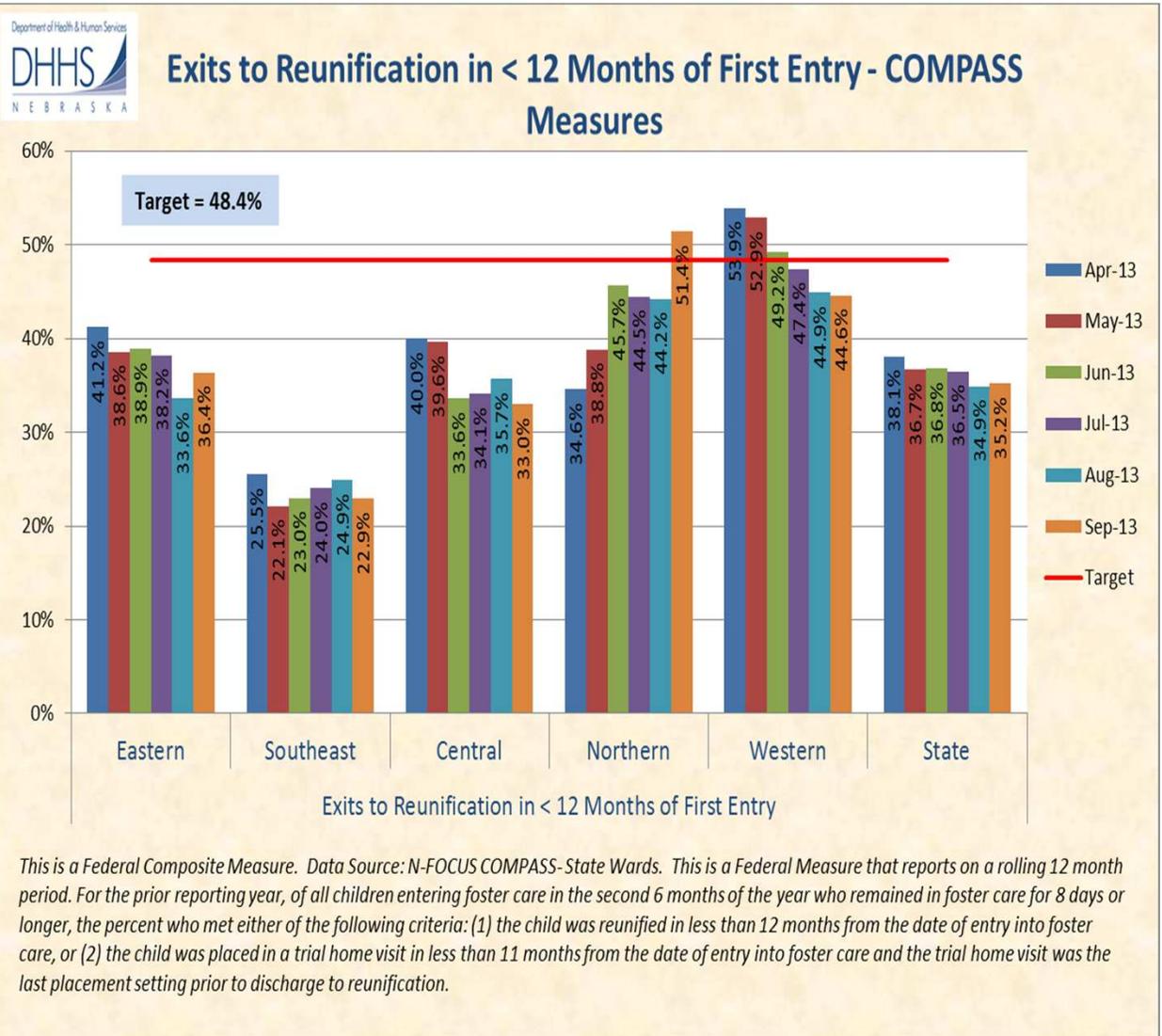
*\*Planned:*

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

**CQI Team Priority:**

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

-Sept 2013: Central Service Area has the lowest months in care (8.2). Eastern Service Area has the highest median months in care (11.2). State median months in care has increased in the last 4 months.

**Barriers:**

**Action Items:**

*\*Completed:*

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

*\*Planned:*

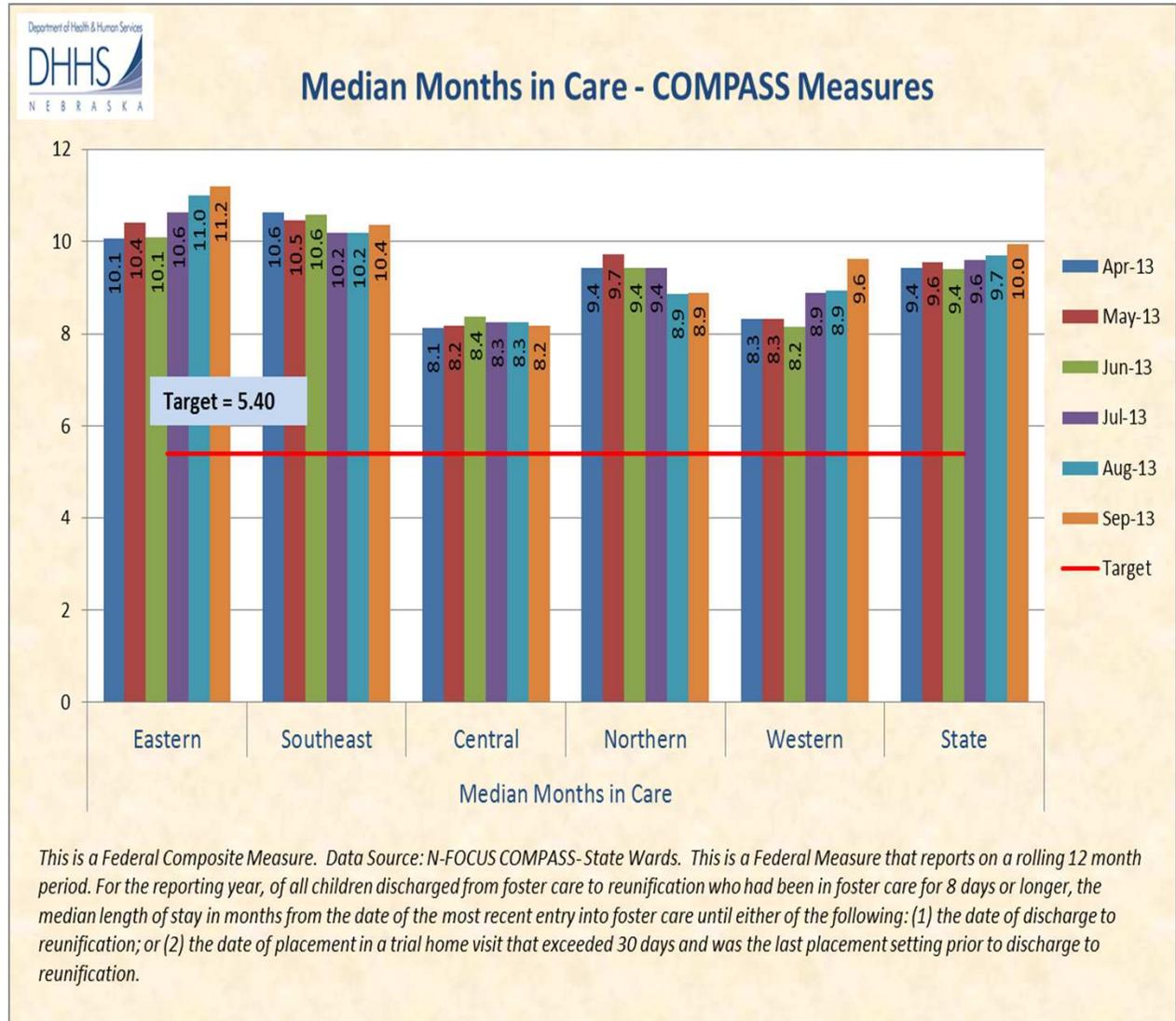
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement.

**CQI Team Priority:**

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

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

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



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

**Timeliness & Permanency of Reunification**

**Strengths/Opportunities:**

-Sept 2013: Central Service Area has 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 August 2013.

**Barriers:**

**Action Items:**

*\*Completed:*

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

- 40 Day Focus Initiatives

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

*\*Planned:*

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

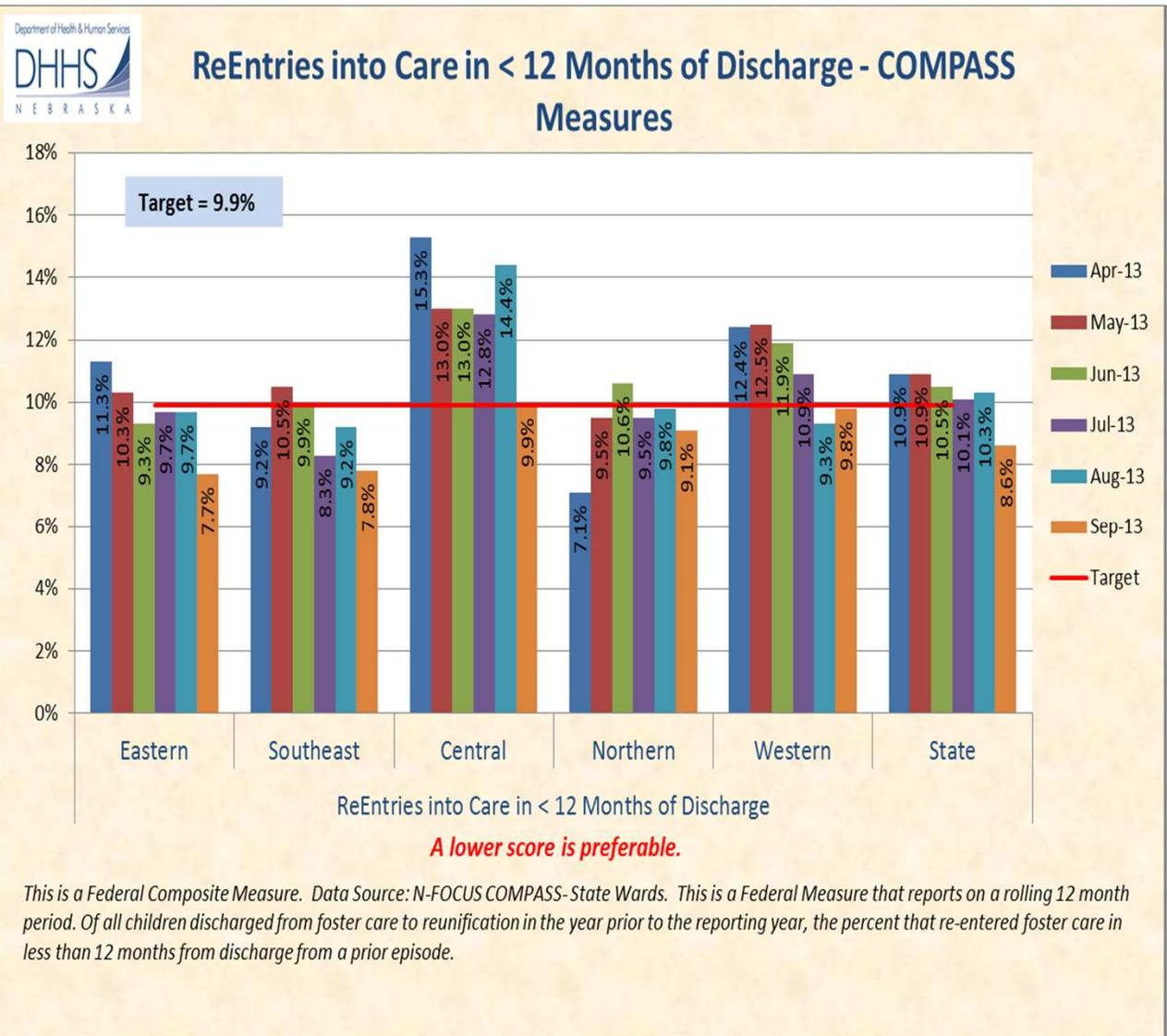
**CQI Team Priority:**

\*Statewide External Stakeholder Team

\*Eastern, Northern, Southeast and Western Service Areas

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

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



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

## Placement Stability

### Strengths/Opportunities:

-Sept 2013: Northern Service Area continues to exceed the target goal performance continues to increase each month. Eastern, Central and Western show an increase in performance since July while Southeast is showing a decrease in performance.

### 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:

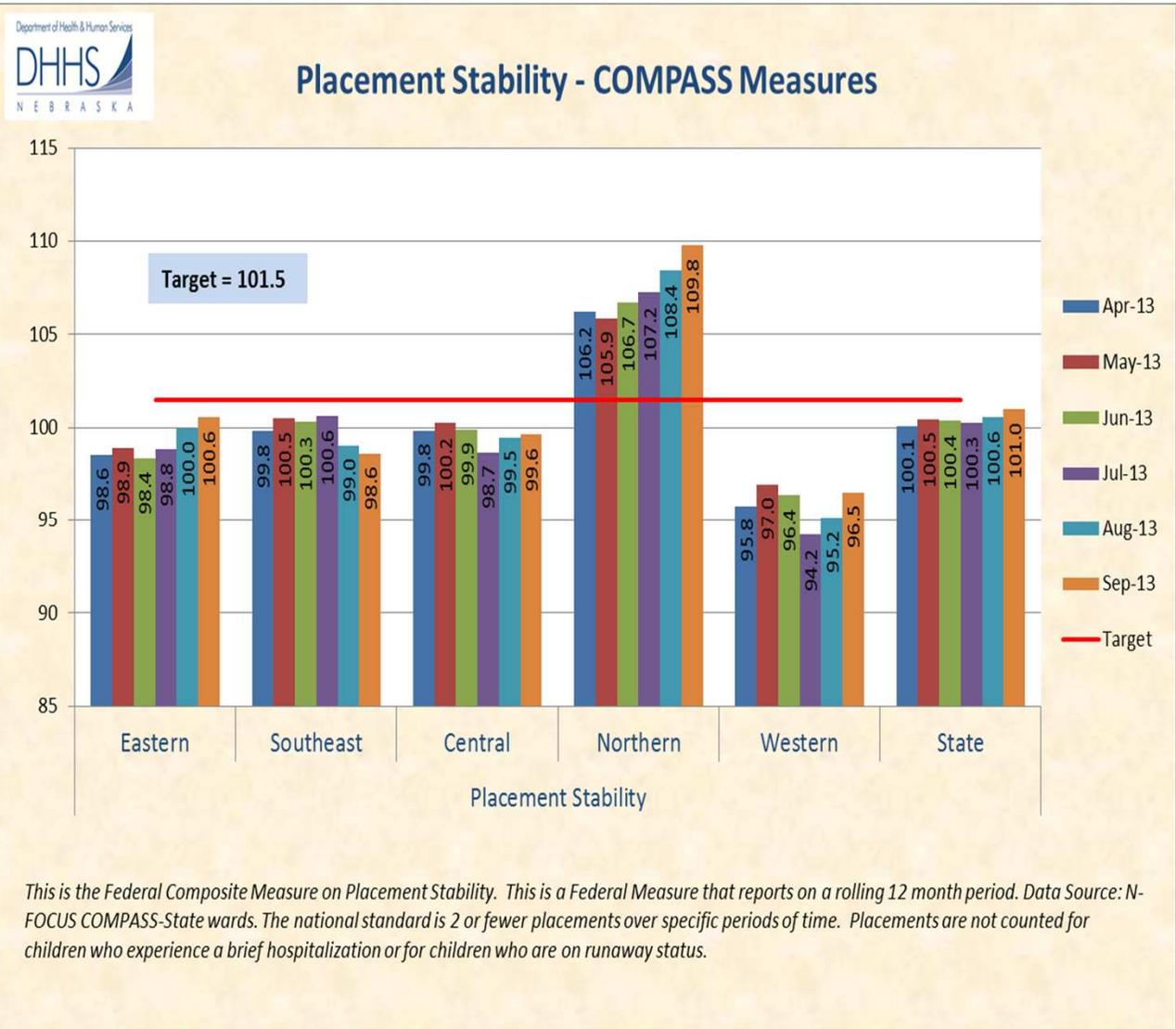
-CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement

### 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:

- Sept 2013: Northern Service Area is the only Service Area that has scored 90% or above on this measure and has scored over 90% in the last 6 consecutive months. Eastern Service Area is the other Service Area that is meeting that is meeting the target goal of 86% at this time.

### 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

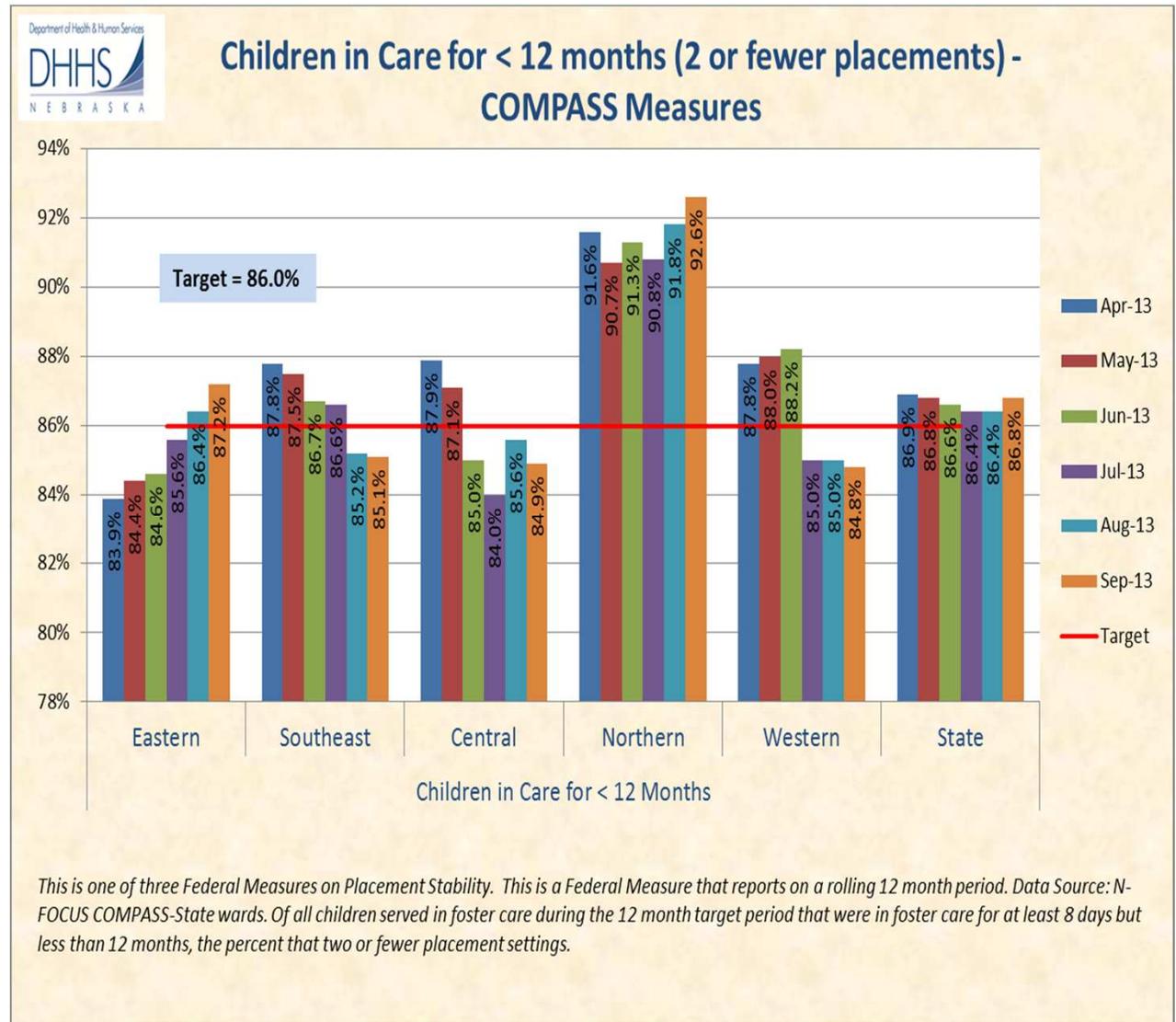
### CQI Team Priority:

\*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:**

- Sept 2013: Northern Service Area is the only Service Area that has scored over 70% in the last 6 consecutive months. Southeast is meeting the target goal for this measure but has seen a decline in the last 3 months. Central is meeting this measure and saw an increase this month. Eastern and Western are close to the target goal but saw a decrease 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

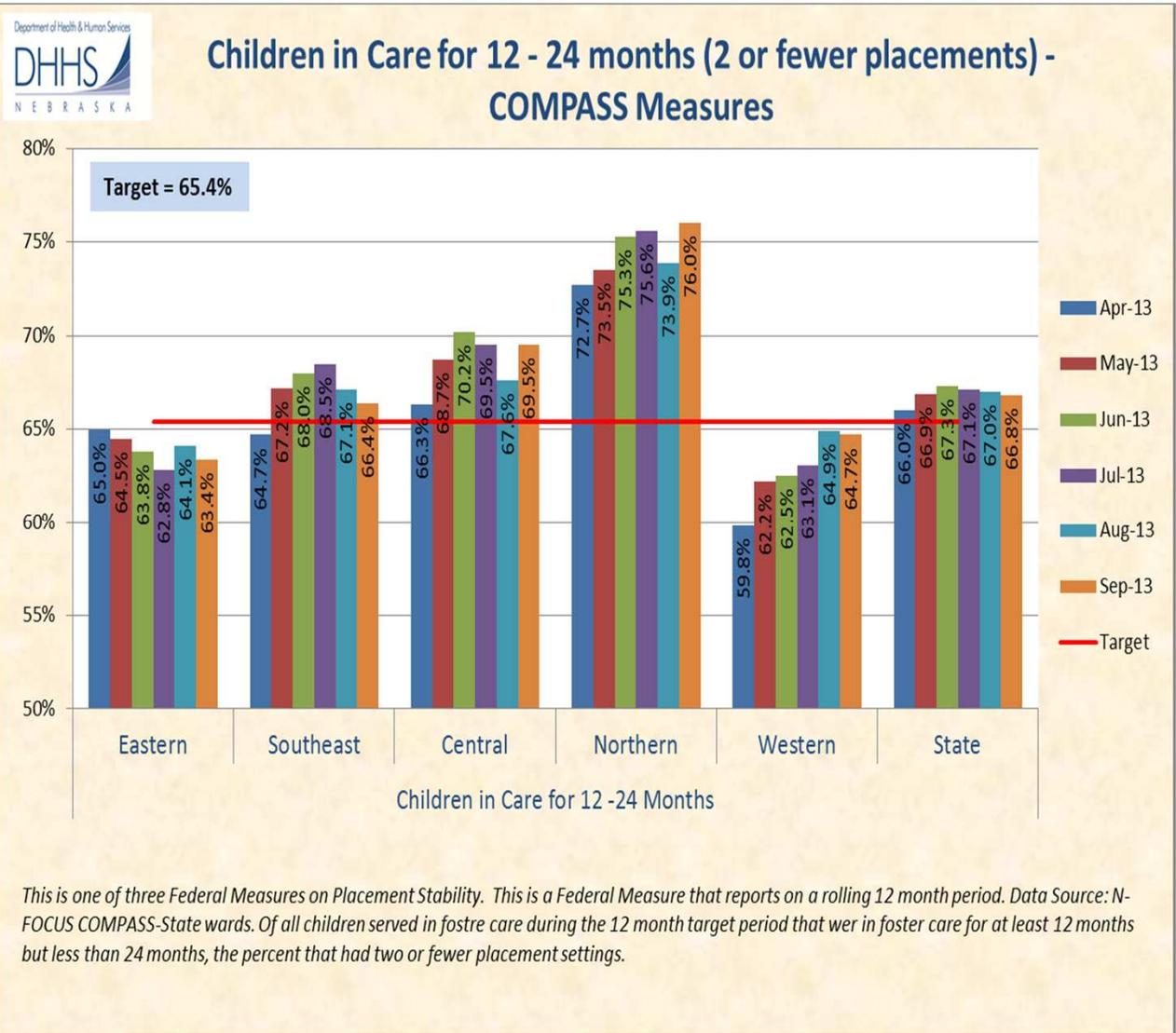
**CQI Team Priority:**

\*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**



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

## Placement Stability

### Strengths/Opportunities:

- Sept 2013: None of the Service areas are meeting the goal for this measure. However Eastern and Northern Service Areas are close.

### 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:

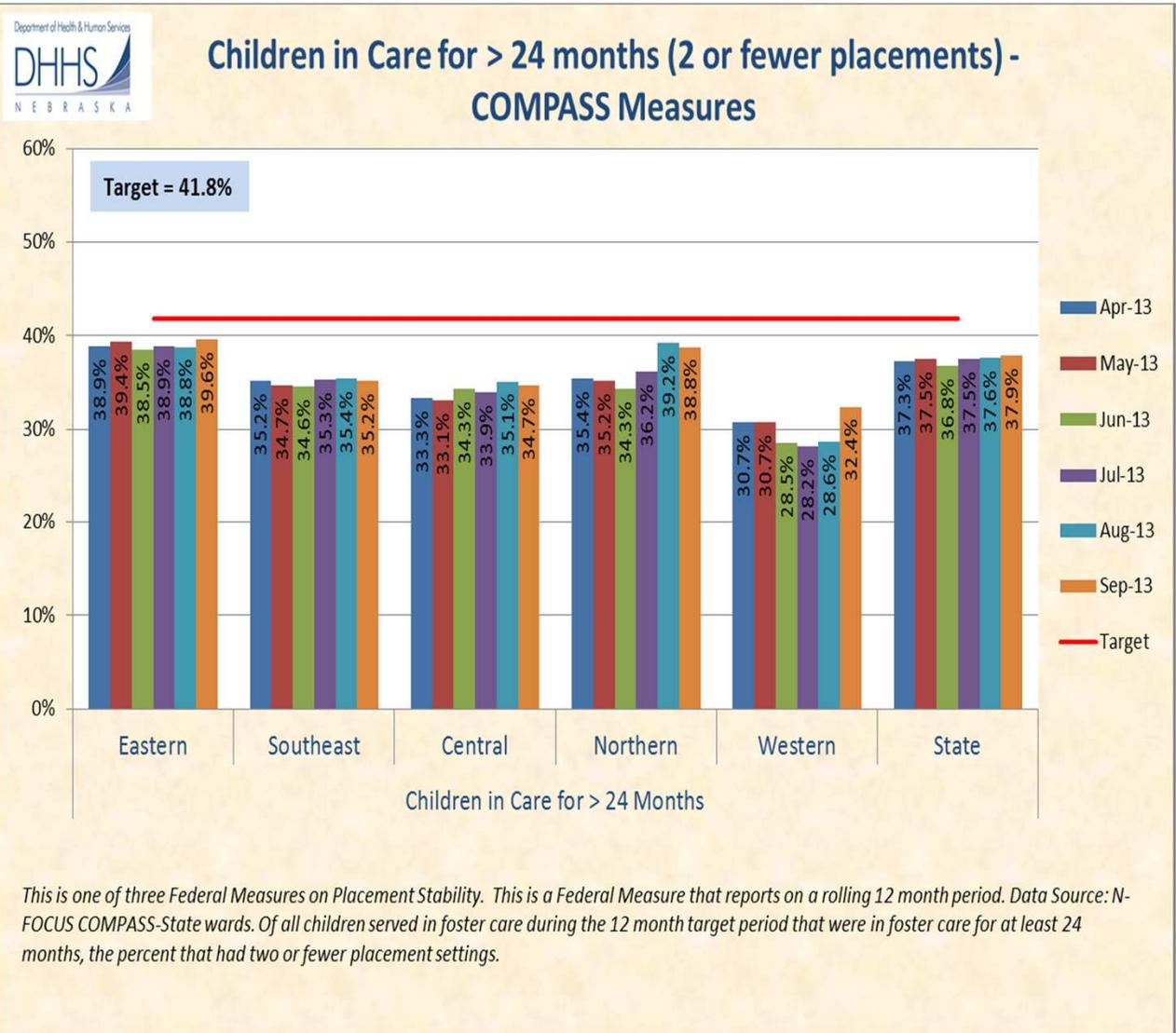
- CQI Team will provide additional data breakdown by adjudication, judge, and other variables to assist with identification of areas needing improvement

### 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:

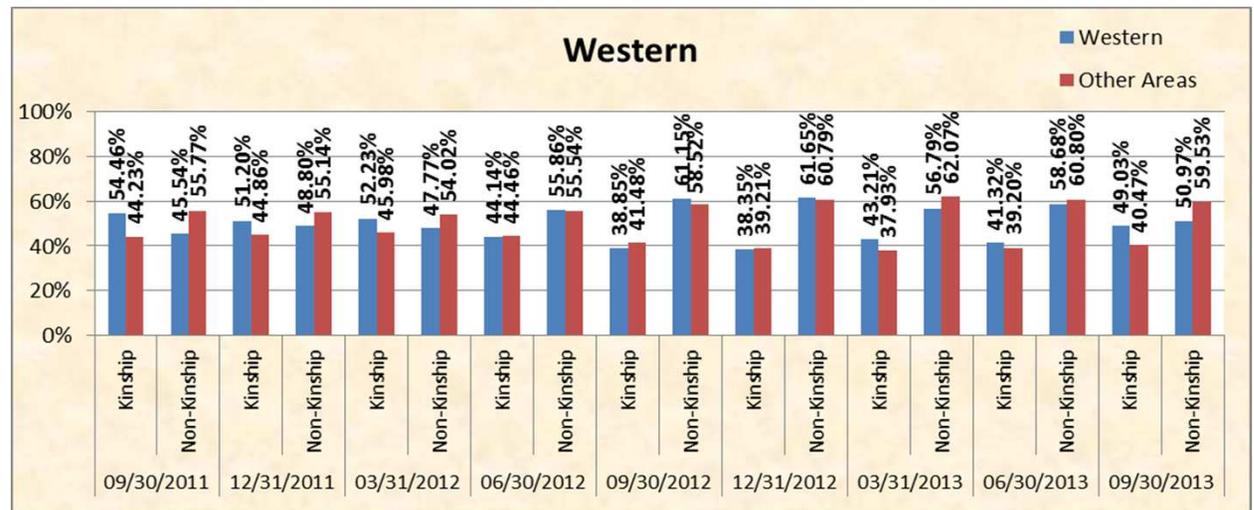
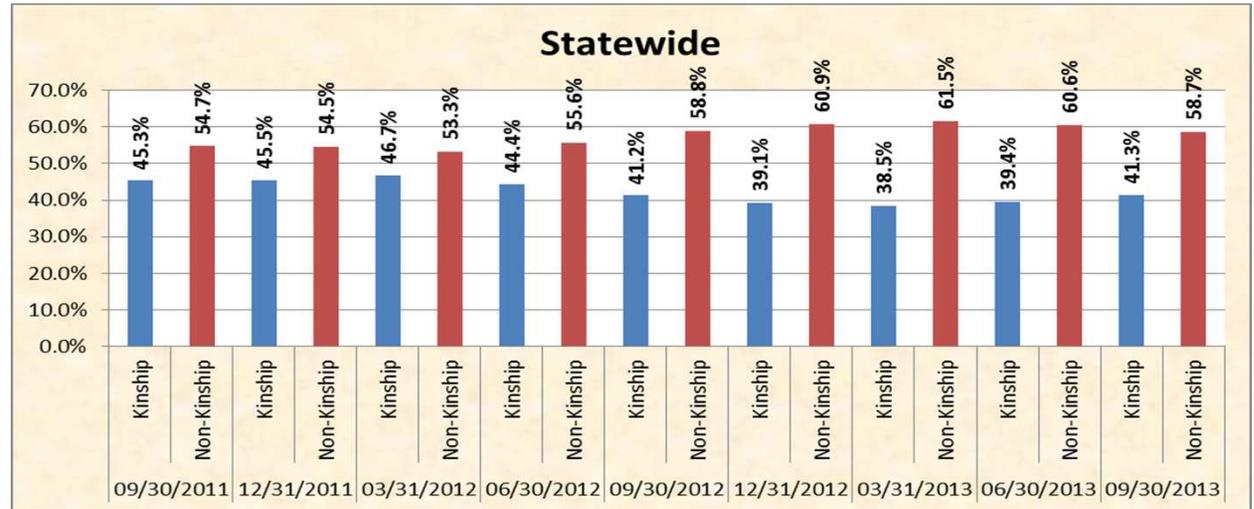
Sept 2013: Slight increase in statewide kinship placements since last quarter. Central Service Area has the lowest number of children in kinship care (29%) while Northern Service Area has the highest (50%).

#### Barriers:

#### Action Items:

*\*Completed:*

*\*Planned:*

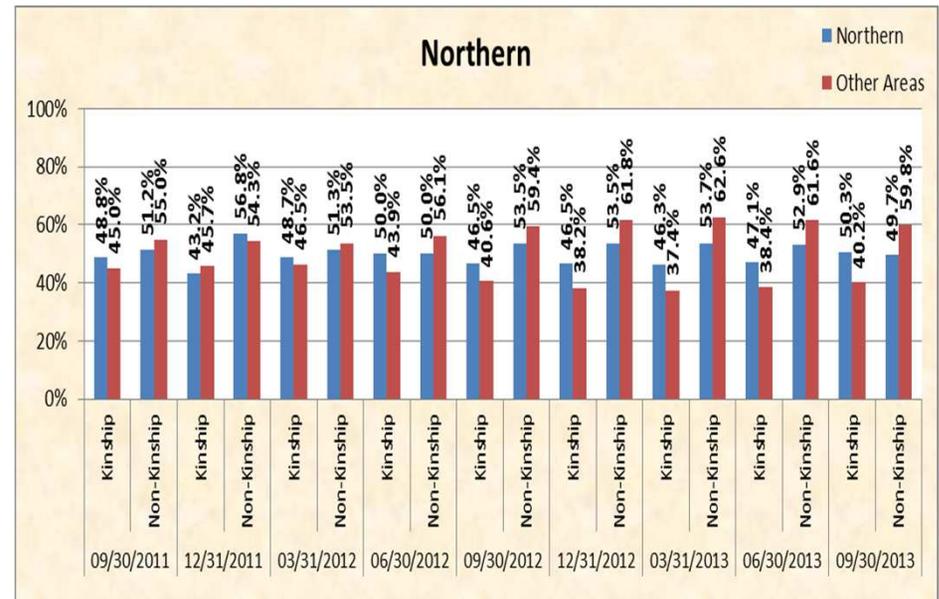
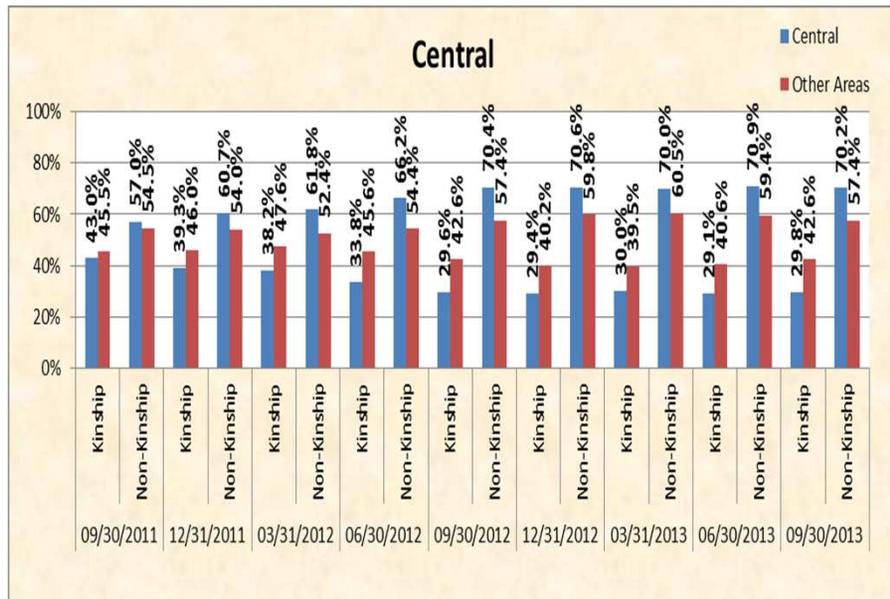
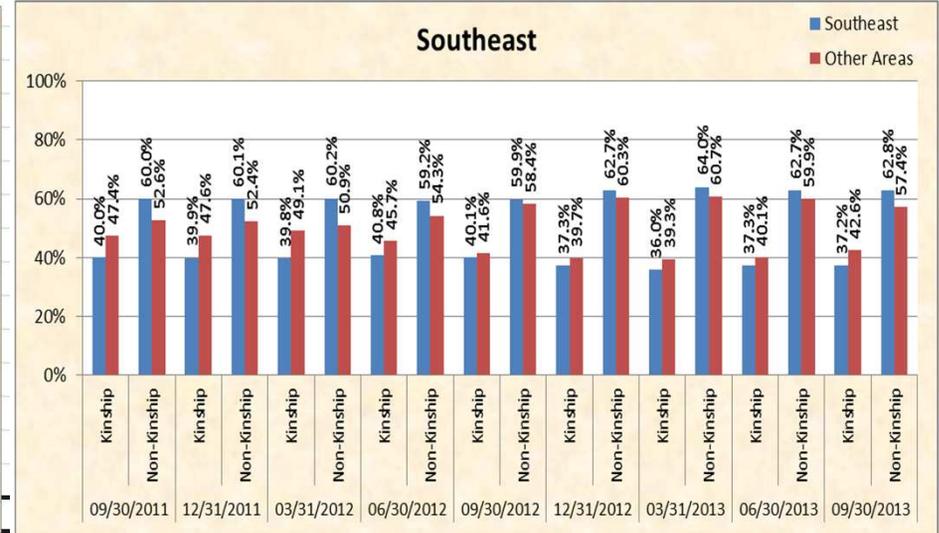
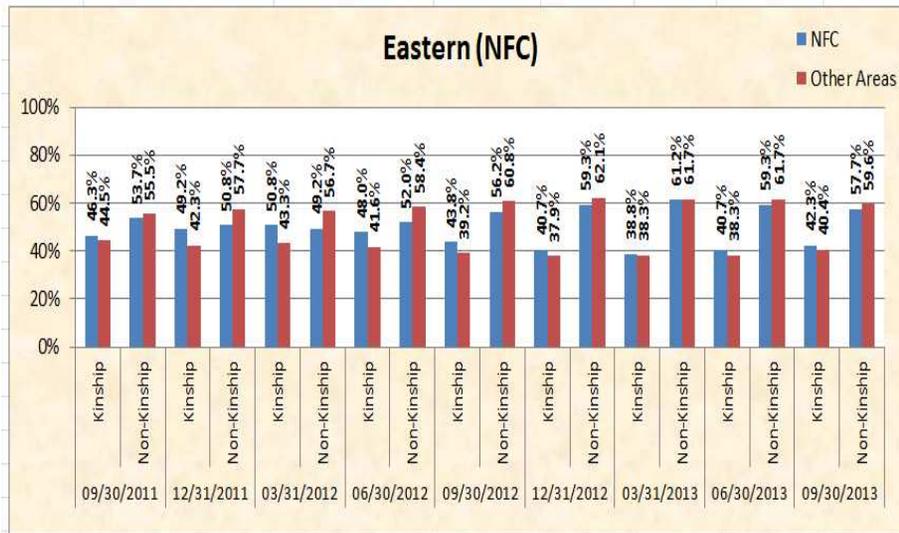


Per LB 265 (July 2013) a "kinship home means a home where a child or children receive foster care and at least one of the primary caretakers has previously lived with or is a trusted adult that has a pre-existing, significant relationship with the child or children or a sibling of such a child or children...."

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

Kinship Care for Out of Home Wards

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



## Placement Change Documentation w/in 72 hours

### Strengths/Opportunities:

-Sept 2013: Seeing improvements in the tribal data. Southeast Service Area achieved the highest score this month with 93.9%. Central and Northern Service Area also scored above 90% this month.  
 Note: State performance was at 56% in May 2012.

### Barriers:

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

### Action Items:

#### \*Completed:

-July 2013 – changes were made in N-FOCUS to allow CFS Supervisors to make corrections to placement changes in N-FOCUS.  
 -Workgroup tasked to work on definitions of removals and placement changes and create instruction materials for staff.  
 - Service areas are implementing creative methods to remind staff to document placement changes (email reminders, signage). Service area administrators are also holding staff accountable to providing explanations when documentation timeframes are not met.

#### \*Planned:

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

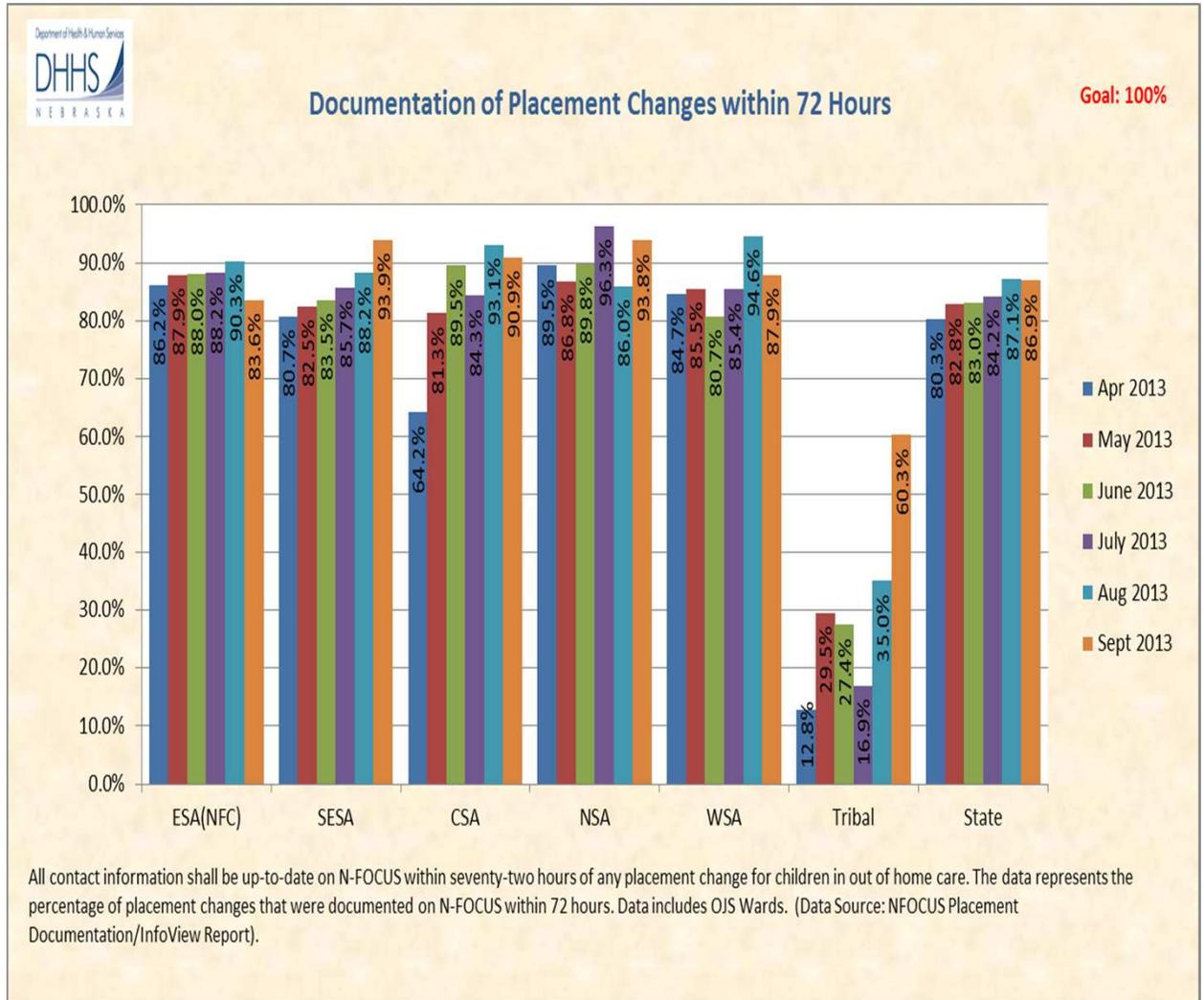
### CQI Team Priority:

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

\*Tribes

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

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



**Data Review Frequency: Monthly**

## Family Team Meeting

### Strengths/Opportunities:

-Sept 2013: **State reached an all time high!** - August report modified to exclude youth with a non-ward status but an open case.

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

### Barriers:

### Action Items:

*\*Completed:*

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

*\*Planned:*

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

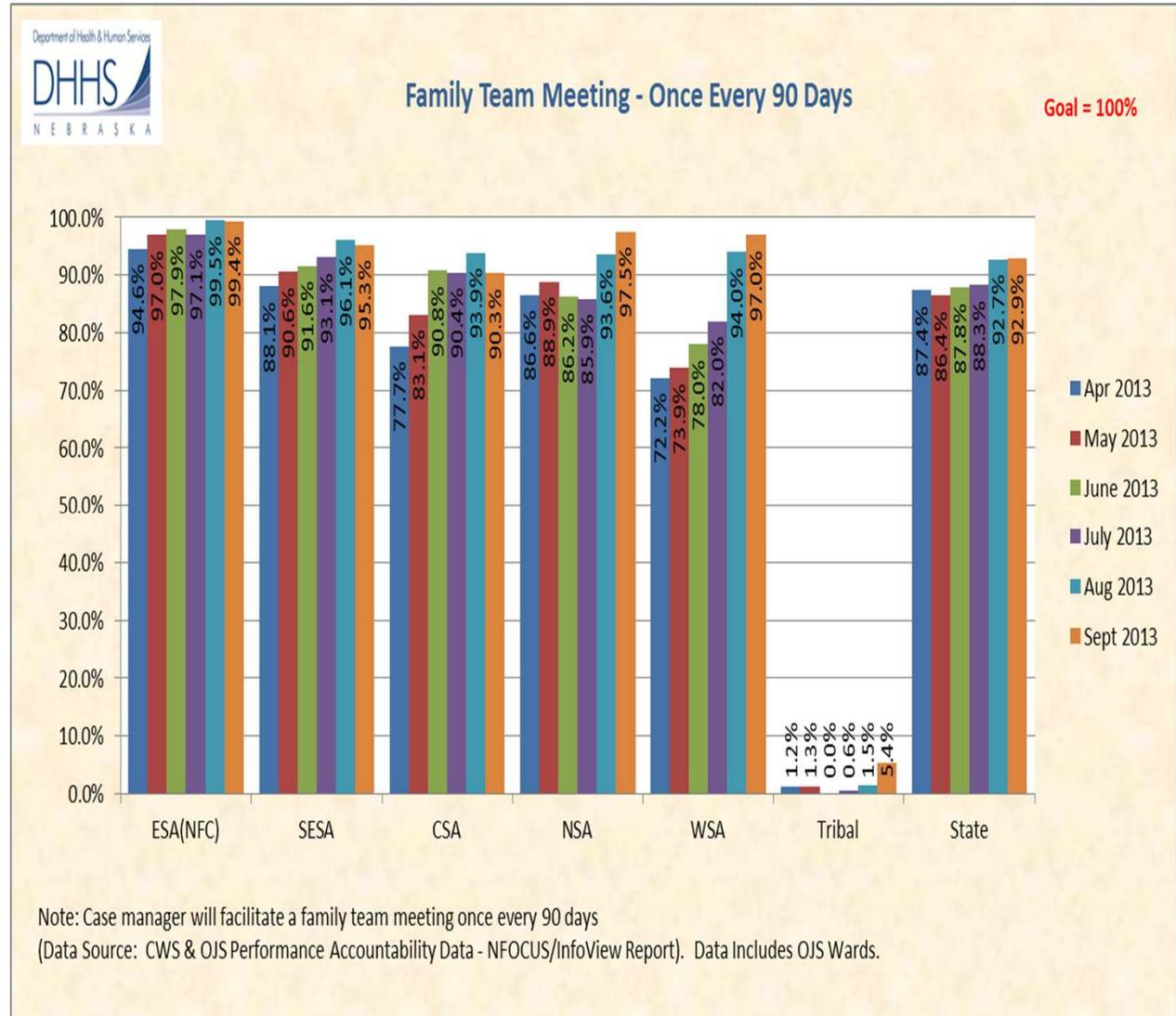
### CQI Team Priority:

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

\*Tribes

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

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



**Data Review Frequency: Monthly**

**Case Planning Involvement**

**Strengths/Opportunities:**

**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:**

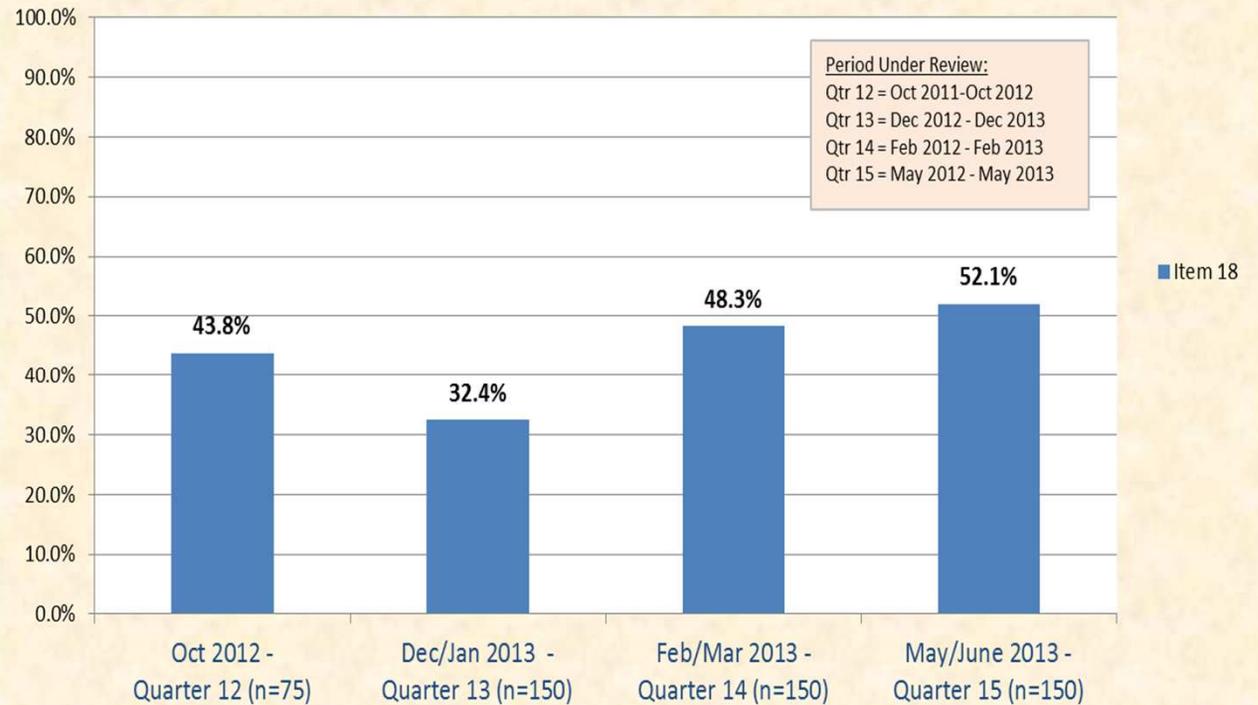
*\*Completed:*

*\*Planned:*

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



**CFSR Item 18 - Child and Family Involvement in Case Planning**



*Item 18 looks at whether or not the agency made concerted efforts during the period under review to involve the parent (mother and father) and the children during the case planning process. Children and parents have to contribute to the creation of the case plan goals and review them with the agency on an ongoing basis for this item to be rated as a strength.*

*This data is included in this statewide CQI packet for the first time this month - Oct 2013.*

**Data Review Frequency: Monthly**

**Federal Visitation with State Wards**

**Strengths/Opportunities:**

-Aug 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. All Service Areas are currently meeting this goal!!! Great Work!

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

**Barriers:**

-Lack of documentation in tribal cases

**Action Items:**

*\*Completed:*

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

*\*Planned:*

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

**CQI Team Priority:**

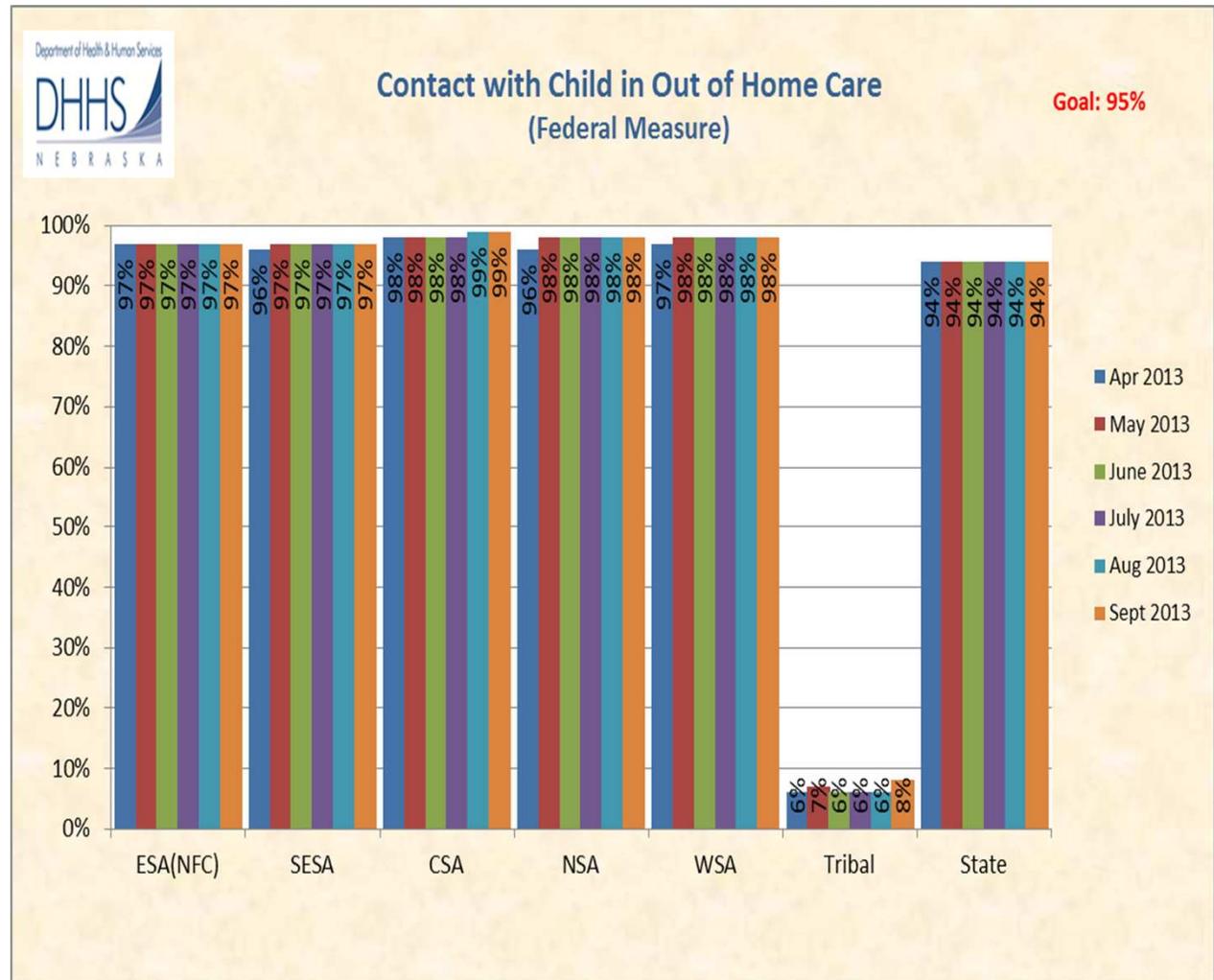
\*Central and Southeast Service Areas

\*Tribes

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

**Data Review Frequency: Monthly**

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



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

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

**Strengths/Opportunities:**

-Aug 2013: All Service Areas continue to achieve 97% and above in this measure.

**Barriers:**

-Lack of documentation in tribal cases

**Action Items:**

*\*Completed:*

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

*\*Planned:*

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

**CQI Team Priority:**

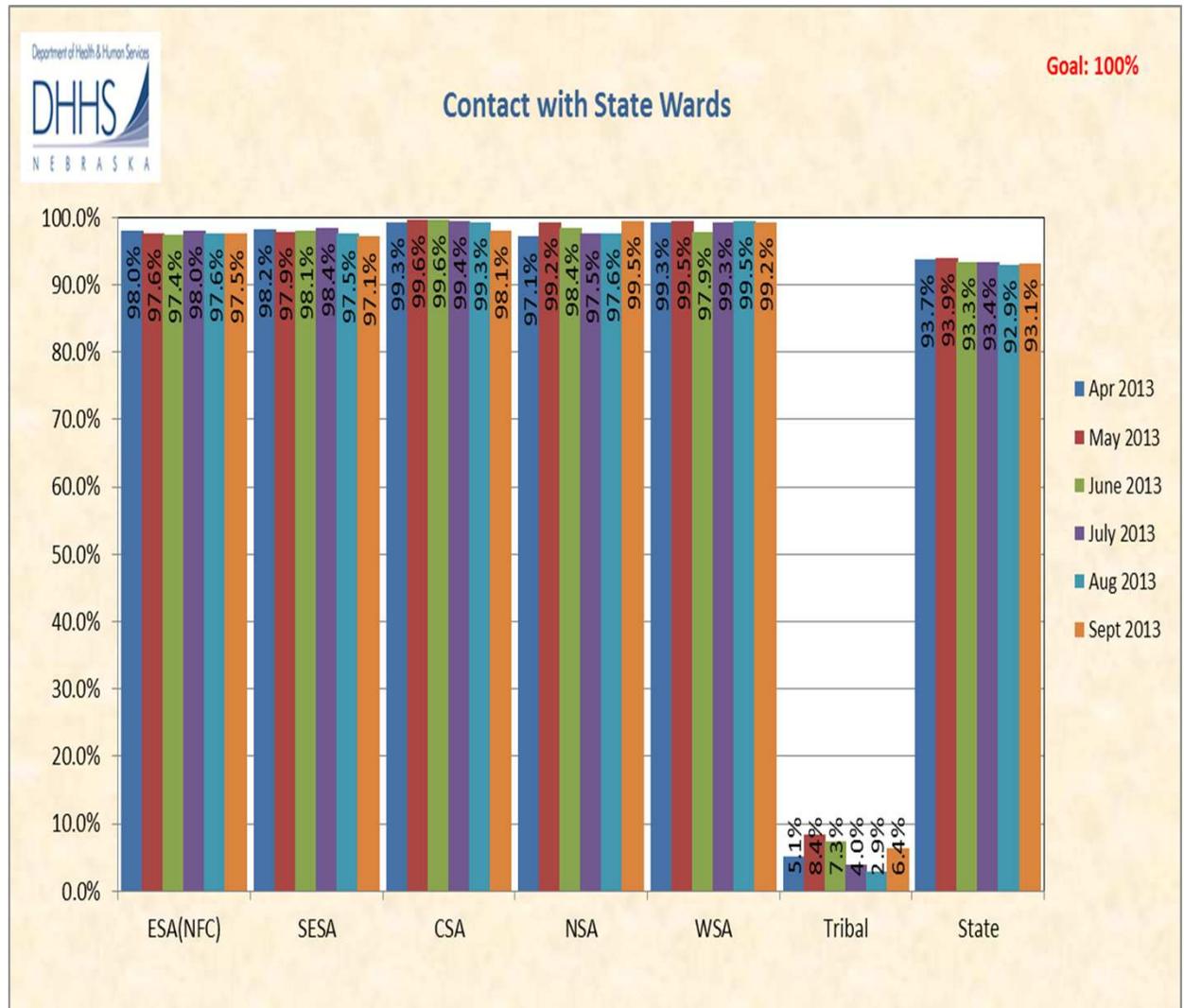
\*Central and Southeast Service Areas

\*Tribes

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

**Data Review Frequency: Monthly**

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



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

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

**Strengths/Opportunities:**

- Aug 2013: Decrease in performance to 95.7%  
*Note: In May 2012, the state performance was at 53.4% for this measure.*

-Central Service Area has achieved 100% in this measure in 4 out of the last 6 months. Western Service Area achieved 100% in this measure in the last two months. Positive trend in Southeast Service Area.

**Barriers:**

-Lack of documentation in tribal cases

**Action Items:**

*\*Completed:*

-Case Management Due Date Report includes Monthly Child Contact.

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

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

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

*\*Planned:*

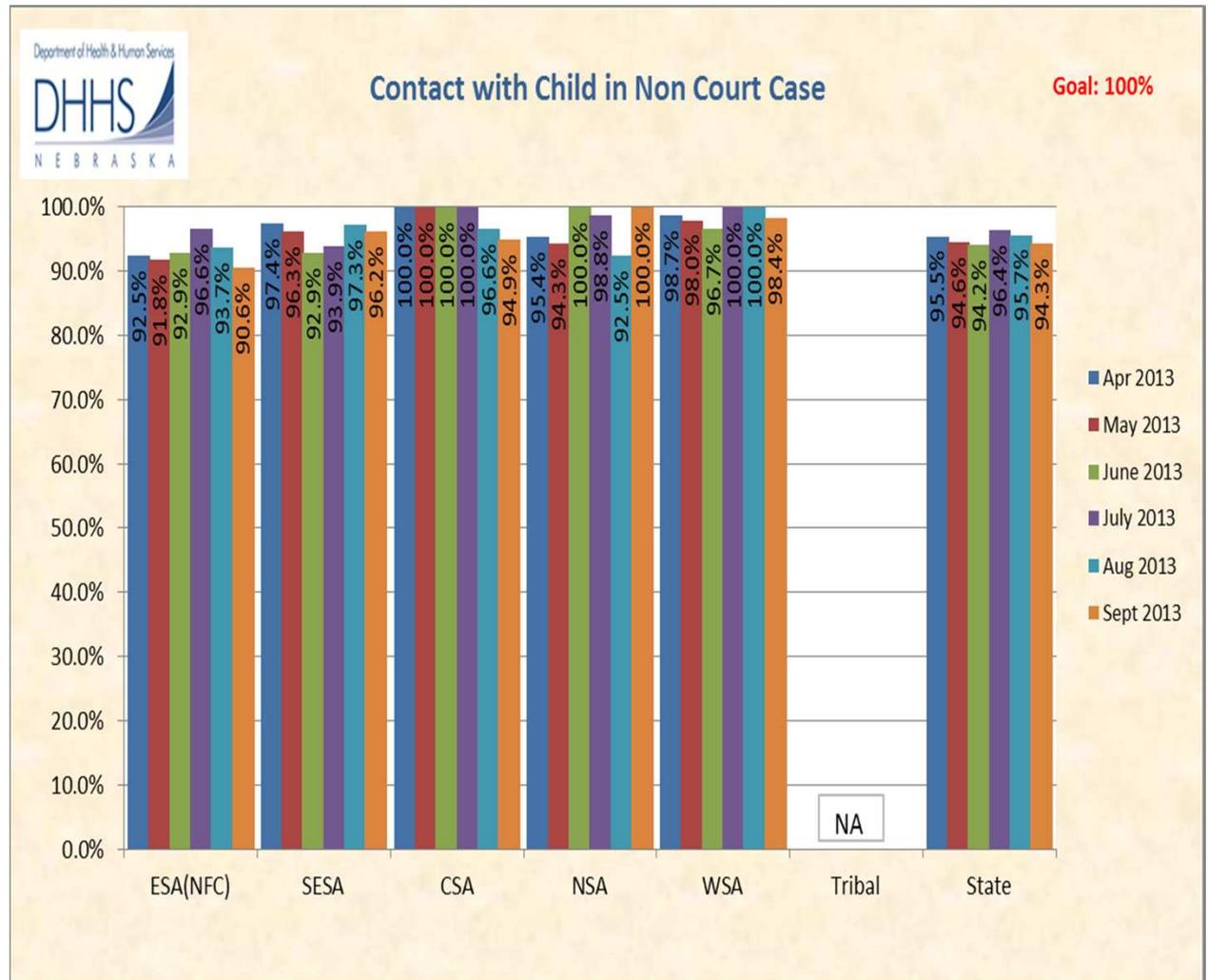
-Some Service areas are planning to implement quality reviews and training with their staff on the quality of face to face contact

**CQI Team Priority:**

\*Central and Southeast Service Areas

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

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



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

**Data Review Frequency: Monthly**

**Child, Parent & Foster Parent Needs Assessment**

**Strengths/Opportunities:**

**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:**

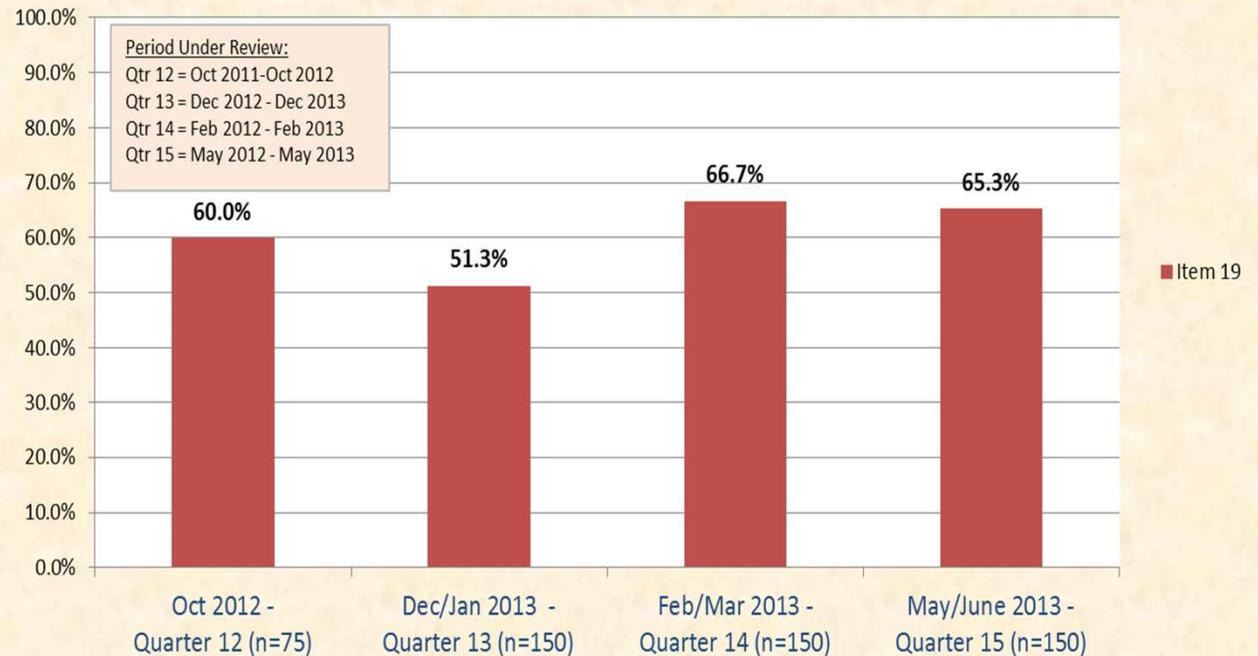
*\*Completed:*

*\*Planned:*

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



**CFSR Item 19 - Caseworker Visits with Child**



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

*This data is included in this statewide CQI packet for the first time this month - Oct 2013.*

**Data Review Frequency: Monthly**

**Caseworker Contact with Child**

**Strengths/Opportunities:**

**Barriers:**

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

**Action Items:**

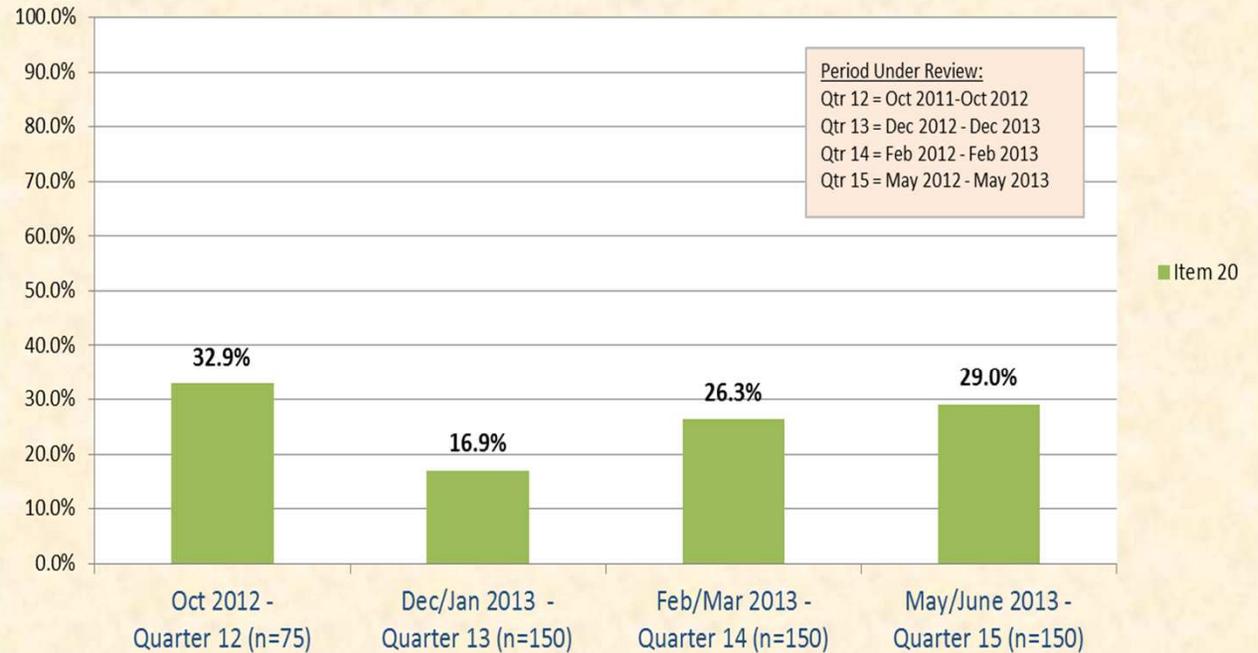
*\*Completed:*

*\*Planned:*

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



**CFSR Item 20 - Caseworker Visits with Parent**



*Item 20 on the CFSR looks at both the frequency and quality of the caseworker visits with both the mother and the father in the case. This item looks at whether or not the frequency and quality of visits between the caseworker and the mother and father of the child(ren) in the case were sufficient to ensure safety, permanency, and well being of the child and promote achievement of case goals. Each parent should be seen at least monthly in order for this item to be counted as a strength.*

*This data is included in this statewide CQI packet for the first time this month - Oct 2013.*

**Data Review Frequency: Monthly**

**Caseworker Contact with Parent**

**Strengths/Opportunities:**

**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:**

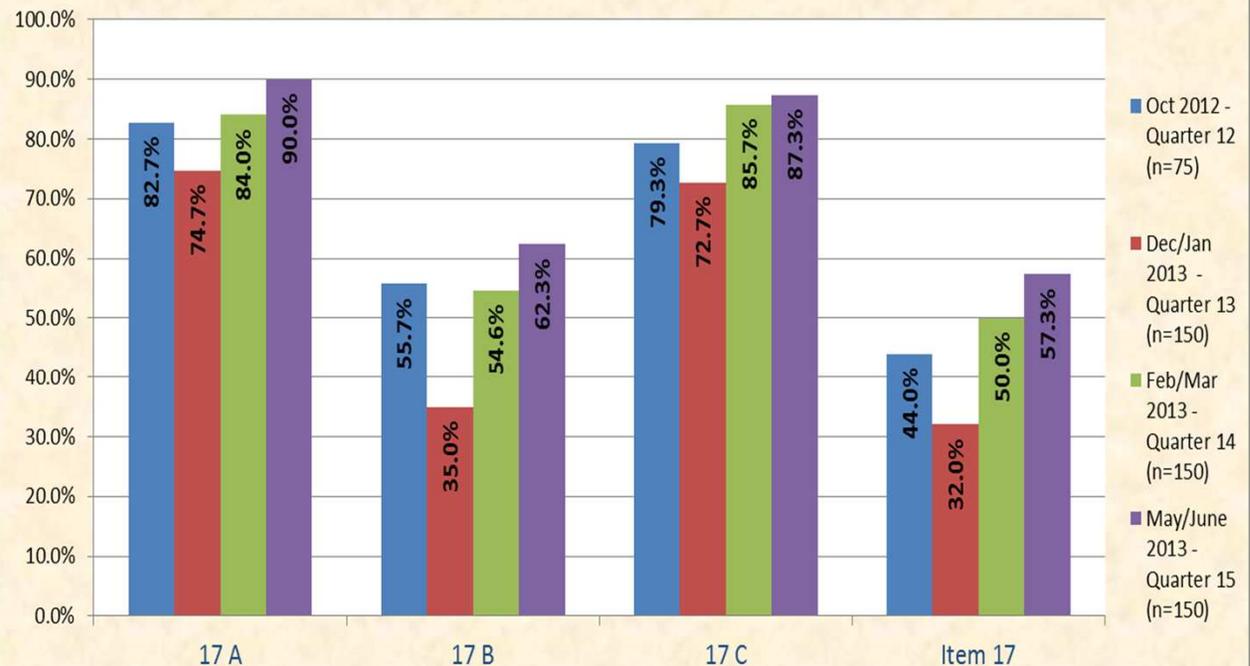
*\*Completed:*

*\*Planned:*

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



**CFSR Item 17 - Needs and Services of Child, Parent, and Foster Parents**



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

*This data is included in this statewide CQI packet for the first time this month - Oct 2013.*

**Data Review Frequency: Monthly**

# STRUCTURED DECISION MAKING (SDM)

---

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

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

### SDM Risk Re & Reunification Assessments

**Strengths/Opportunities:**

# of Youth with NO finalized Risk Re or Reunification assessments as of 10/23/13	
State	582
Central	56
Eastern	232
Northern	72
Southeast	126
Western	96

**Barriers:**

**Action Items:**

*\*Completed:*

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

*\*Planned:*

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

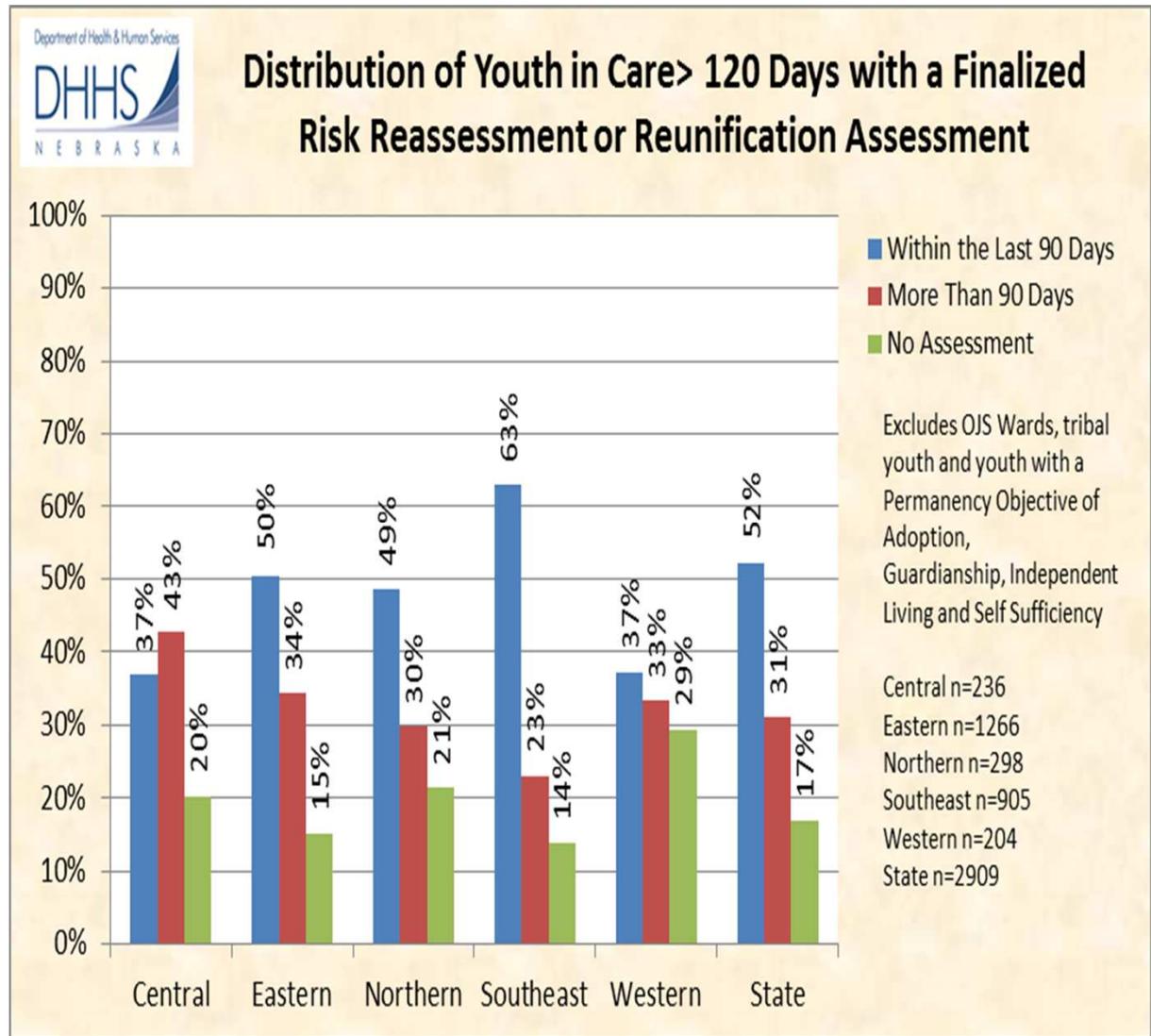
**CQI Team Priority:**

\* ALL Service Areas

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

**Data Review Frequency: Monthly**

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



\*This chart is a new addition to the CQI packet this month (Oct 2013)

### SDM Risk Re & Reunification Assessments

**Strengths/Opportunities:**

# of Youth with No Finalized Risk Re or Reunification Assessment as of 10/23/13		
	Court	Non-Court
Central	46	2
Eastern	123	69
Northern	60	4
Southeast	77	49
Western	57	3
<b>State</b>	<b>363</b>	<b>127</b>

**Barriers:**

**Action Items:**

*\*Completed:*

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

*\*Planned:*

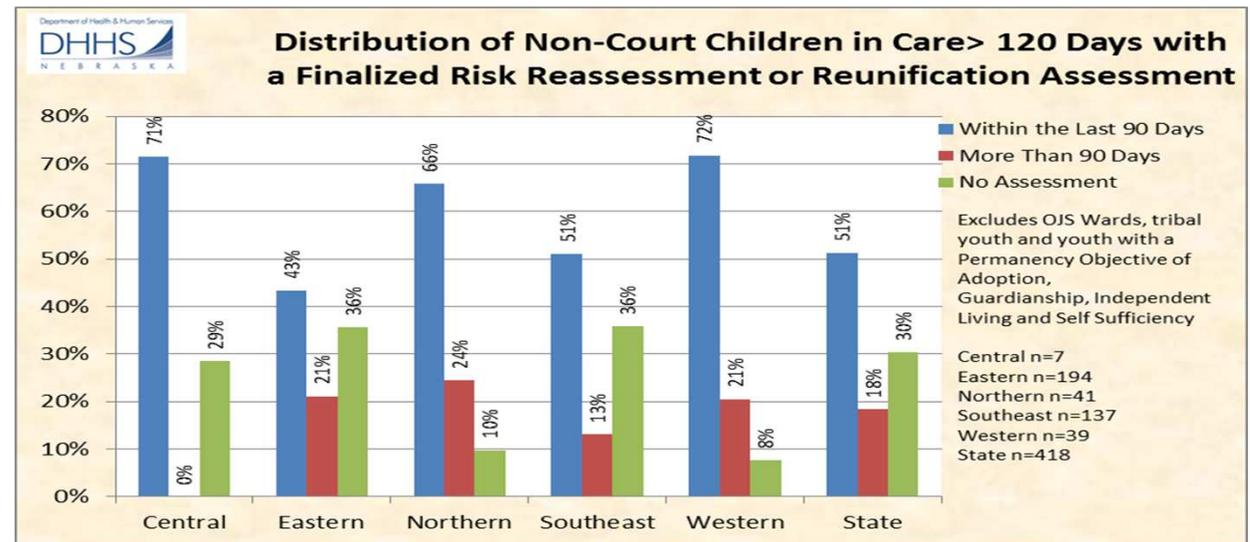
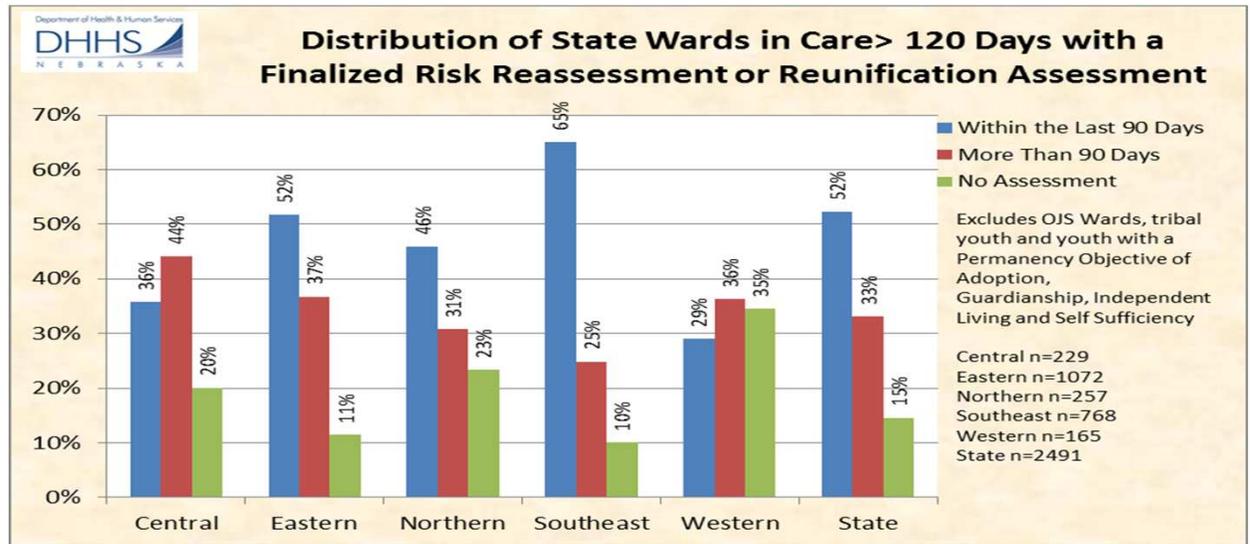
- Upcoming Quick Tip will include video instructions on how to use InfoView reports to identify and address cases that do not have finalized SDM Assessments.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting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

**CQI Team Priority:**

\* ALL Service Areas

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

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



**Data Review Frequency: Monthly**

*\*These charts are new additions to the CQI packet this month (Oct 2013)*

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

**Strengths/Opportunities:**

# of Youth with NO finalized FSNA as of 10/23/13	
State	108
Central	15
Eastern	8
Northern	16
Southeast	29
Western	40

**Action Items:**

*\*Completed:*

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

*\*Planned:*

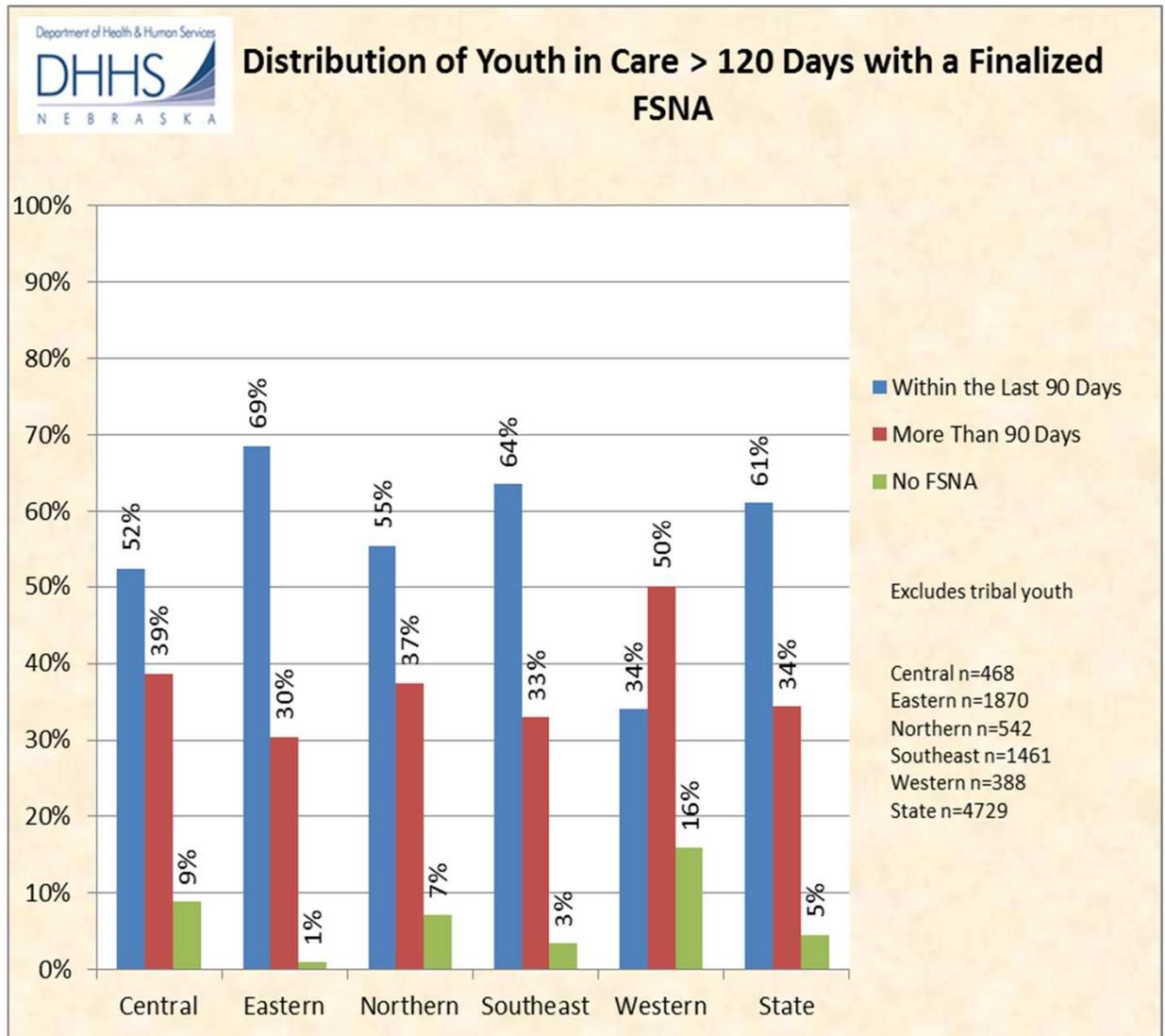
- Upcoming Quick Tip will include video instructions on how to use InfoView reports to identify and address cases that do not have finalized SDM Assessments.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting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

**CQI Team Priority:**

\* ALL Service Areas

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

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



**Data Review Frequency: Monthly**

*\*This chart is a new addition to the CQI packet this month (Oct 2013)*

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

**Strengths/Opportunities:**

# of Youth with No Finalized FSNA as of 10/23/13		
	Court	Non-Court
Central	40	2
Eastern	10	9
Northern	39	0
Southeast	35	16
Western	59	3
<b>State</b>	<b>183</b>	<b>30</b>

**Barriers:**

**Action Items:**

*\*Completed:*

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

*\*Planned:*

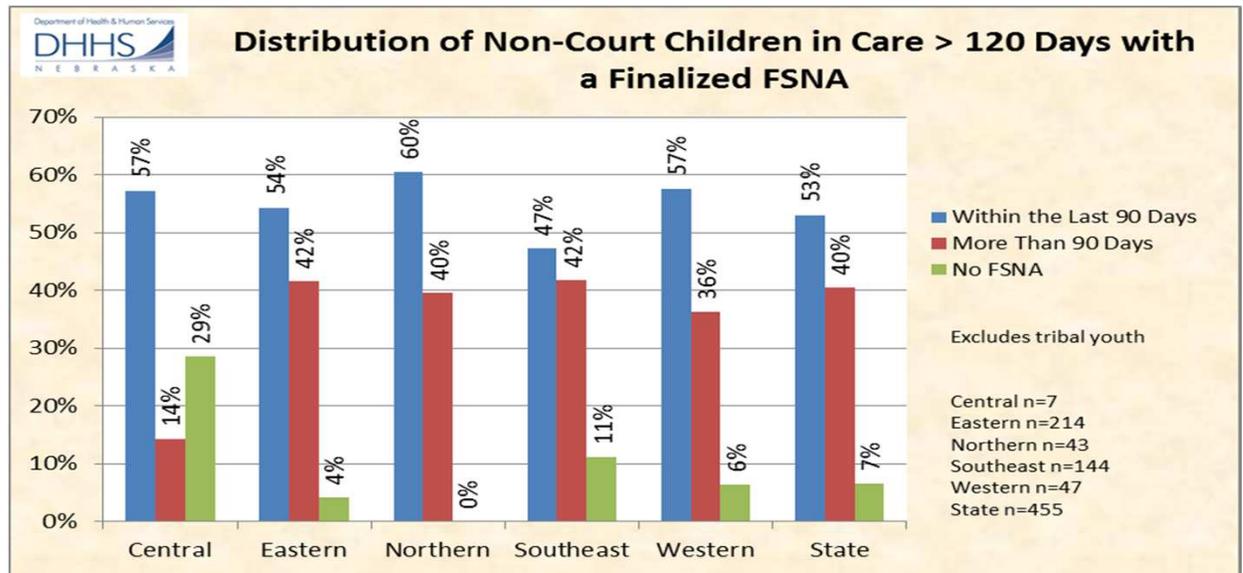
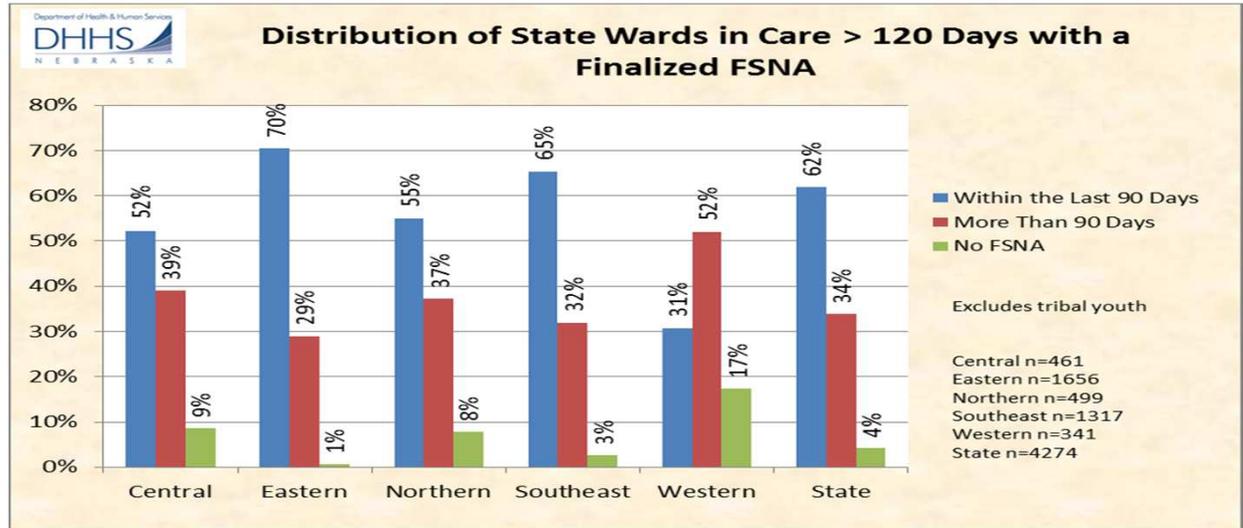
- Upcoming Quick Tip will include video instructions on how to use InfoView reports to identify and address cases that do not have finalized SDM Assessments.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting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

**CQI Team Priority:**

\* ALL Service Areas

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

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



**Data Review Frequency: Monthly**

*\*These charts are new additions to the CQI packet this month (Oct 2013)*

## SDM Administrative Reviews

### Strengths/Opportunities:

-Sept 2013. The number of Admin Reviews increased this month. There were 2 administrators with >2 admin reviews 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,

#### *\*Planned:*

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

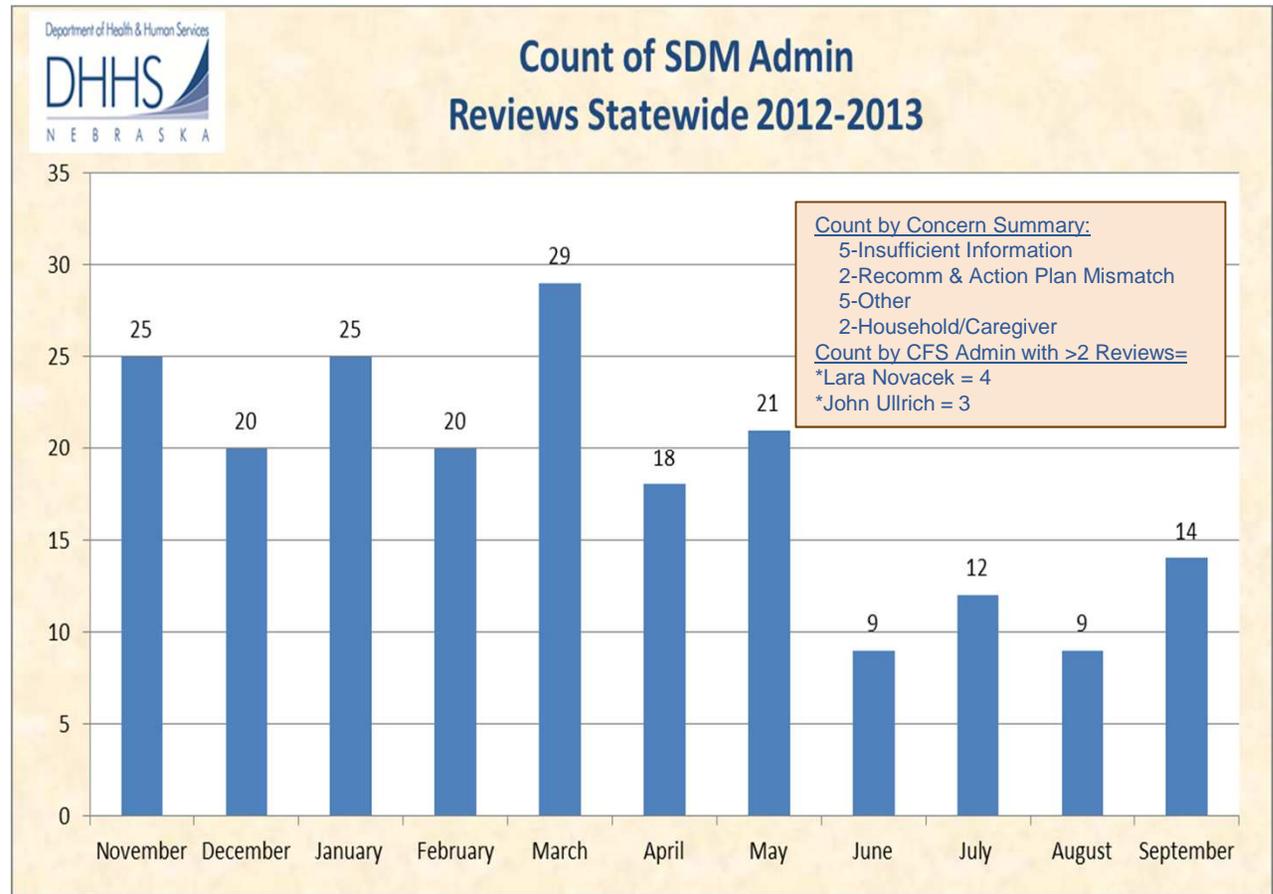
### CQI Team Priority:

\* ALL Service Areas

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

**Data Review Frequency: Monthly**

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



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

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

### SDM Assessment Quality Results – Finalized Timely

**Strengths/Opportunities:**

-Sept 2013: Increase in the timeliness of Reunification, FSAN, Risk and Prev(Dep). Continue to see a decrease in timely completion of Prev(3b).

**Barriers:**

**Action Items:**

*\*Completed:*

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

*\*Planned:*

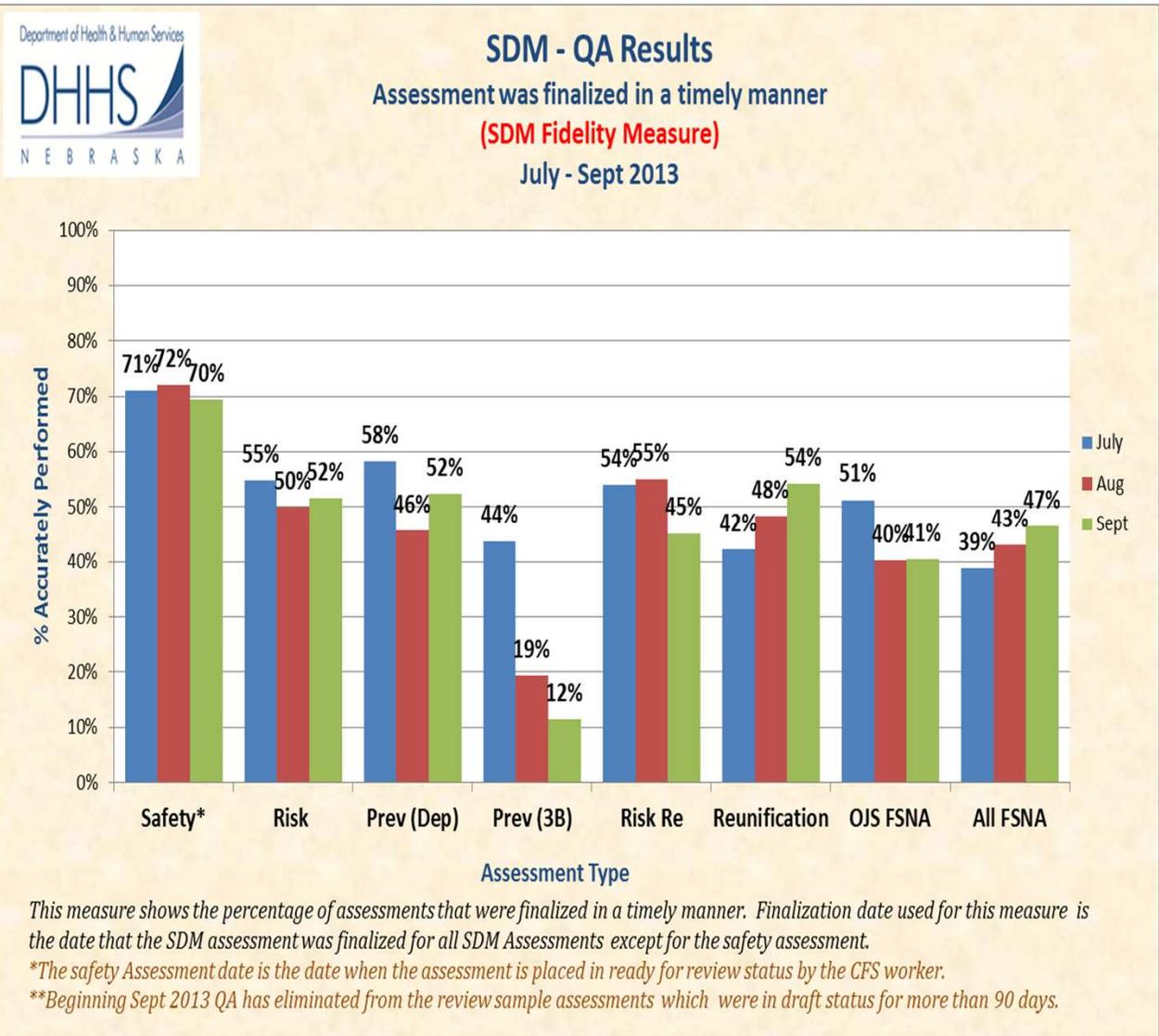
- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
- N-FOCUS changes are planned to add narrative boxes to each question on the remaining SDM Tools. (Nov 2013-Risk & Prevention; March 2014-Risk Re and Reunification)
- Initial Assessment Case Management Due Date Report is being developed to include SDM due dates.

**CQI Team Priority:**

\* ALL Service Areas

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

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



**Data Review Frequency: Monthly**

### SDM Initial Assessment Quality Results

**Strengths/Opportunities:**

-Sept 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 Case Management Due Date Report includes SDM due dates.

*\*Planned:*

- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports.
- N-FOCUS changes are planned to add narrative boxes to each question on the remaining SDM Tools (Nov 2013-Risk & Prevention; March 2014-Risk Re and Reunification)
- Initial Assessment Case Management Due Date Report is being developed to include SDM due dates.

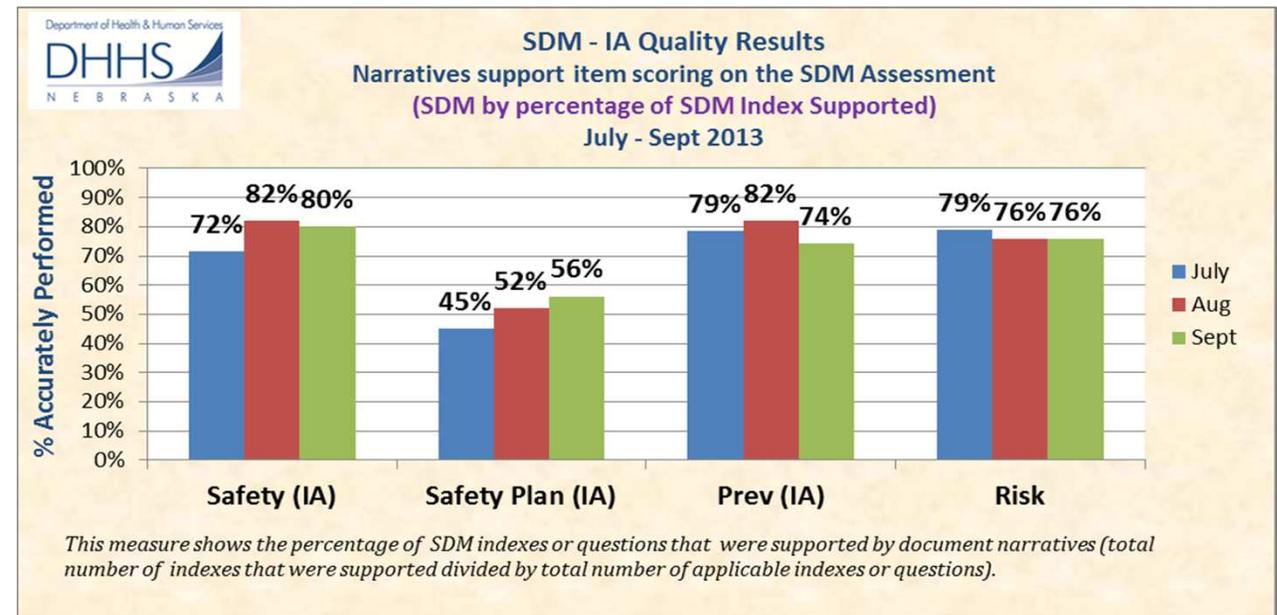
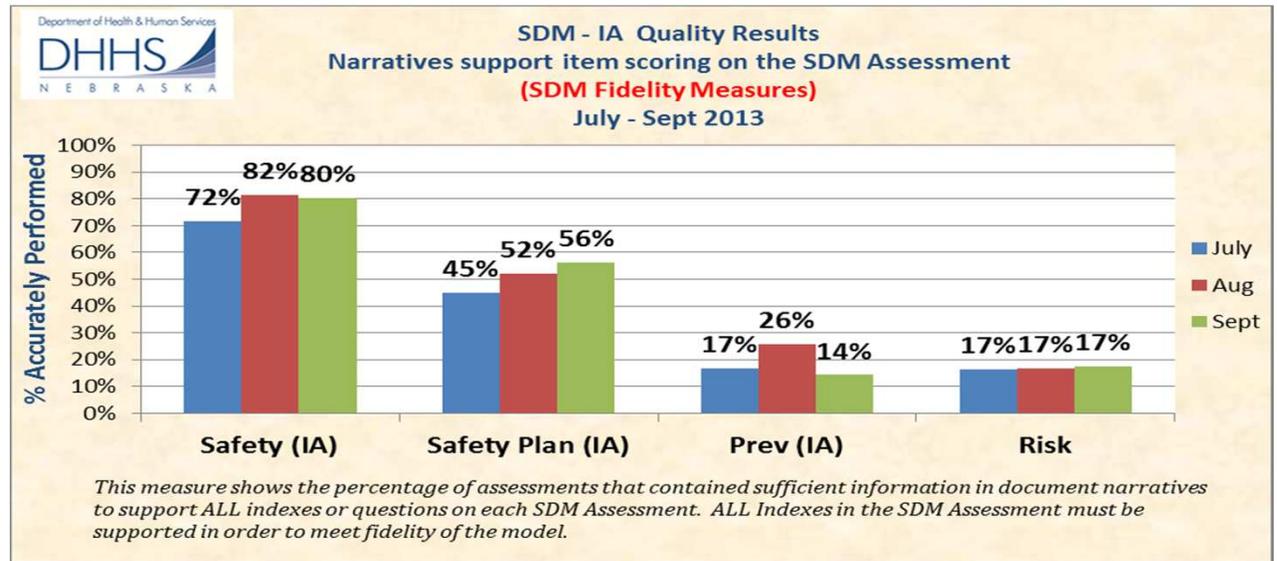
**CQI Team Priority:**

\* ALL Service Areas

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

**Data Review Frequency: Monthly**

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



### SDM Ongoing Assessment Quality Results

**Strengths/Opportunities:**

-Sept 2013: Lowest quality of documentation is seen in the FSNA Assessments. Completed for OJS youth.

**Barriers:**

**Action Items:**

*\*Completed:*

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

*\*Planned:*

- Brief quality quick tips will be sent to all CFS staff on SDM items that are not successfully addressed in the assessment per QA reviews.
- Supervisory Training will be implemented to assist supervisors to be able to coach and supervise to the SDM model.
- Workgroup will be meeting to put together materials to help staff use SDM tools to drive case plan goals and reflect progress in Court Reports. (Nov 2013-Risk & Prevention; March 2014-Risk Re and Reunification)
- N-FOCUS changes are planned to add narrative boxes to each question on the remaining SDM Tools.
- Initial Assessment Case Management Due Date Report is being developed to include SDM due dates.

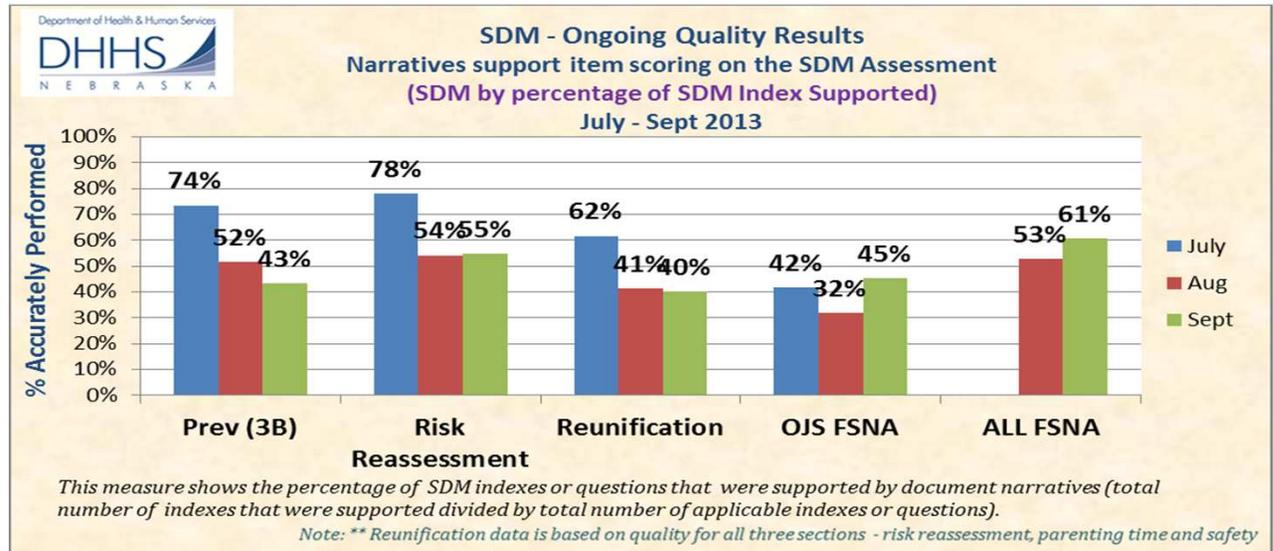
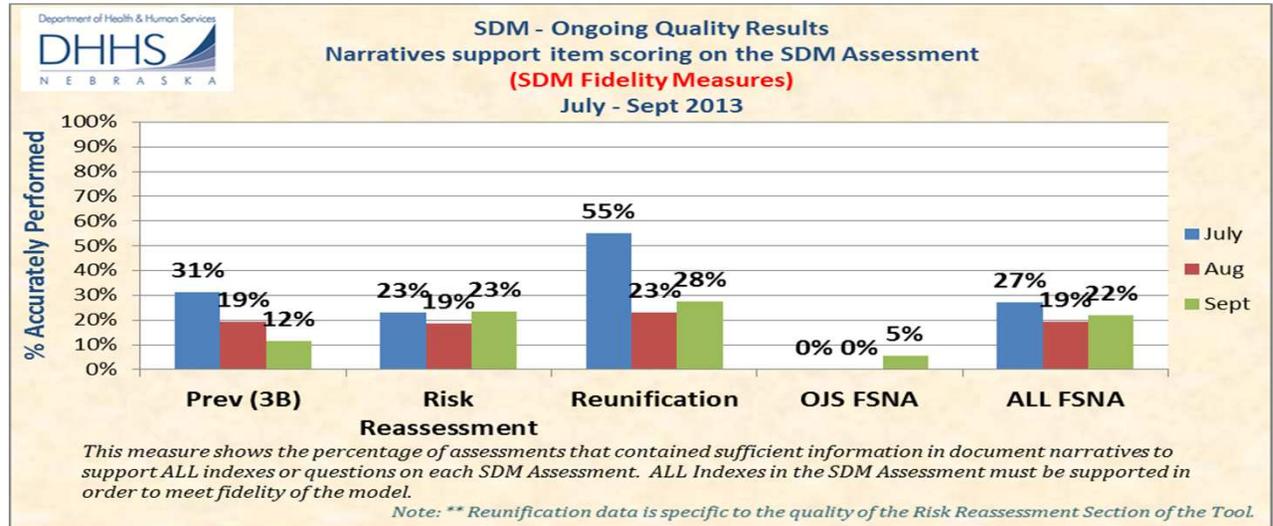
**CQI Team Priority:**

\* ALL Service Areas

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

**Data Review Frequency: Monthly**

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



*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

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

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

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

**Caseload Sizes for IA Workers**

**Strengths/Opportunities:**

-Sept 2013: Statewide compliance is 91%.  
100% compliance in Southeast and Central and 98% compliance in Eastern.

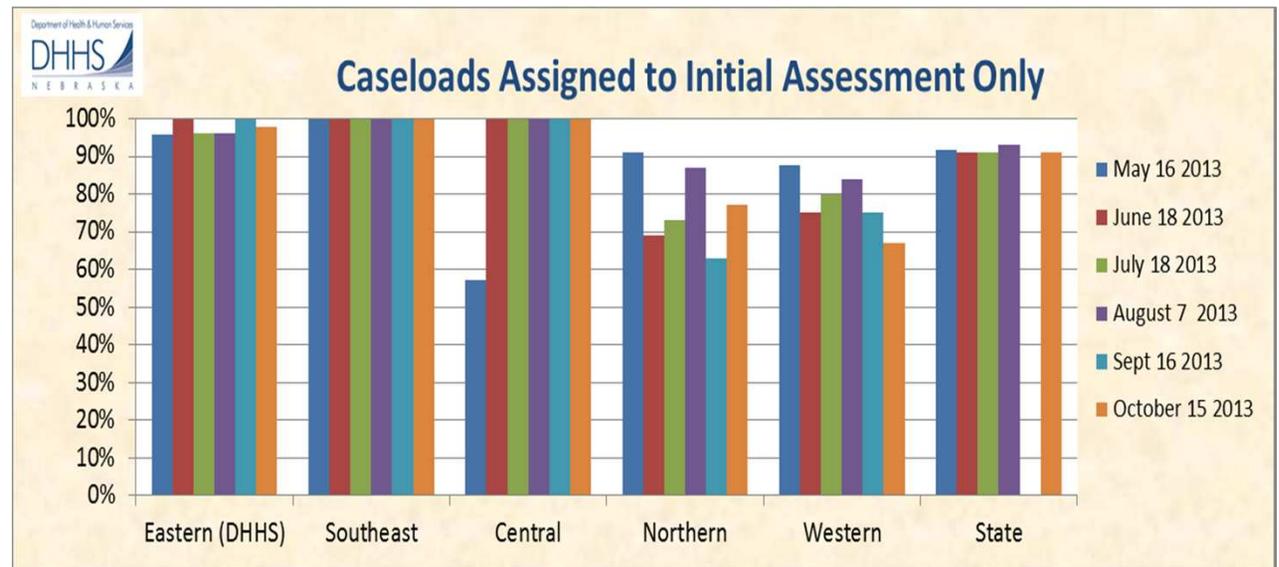
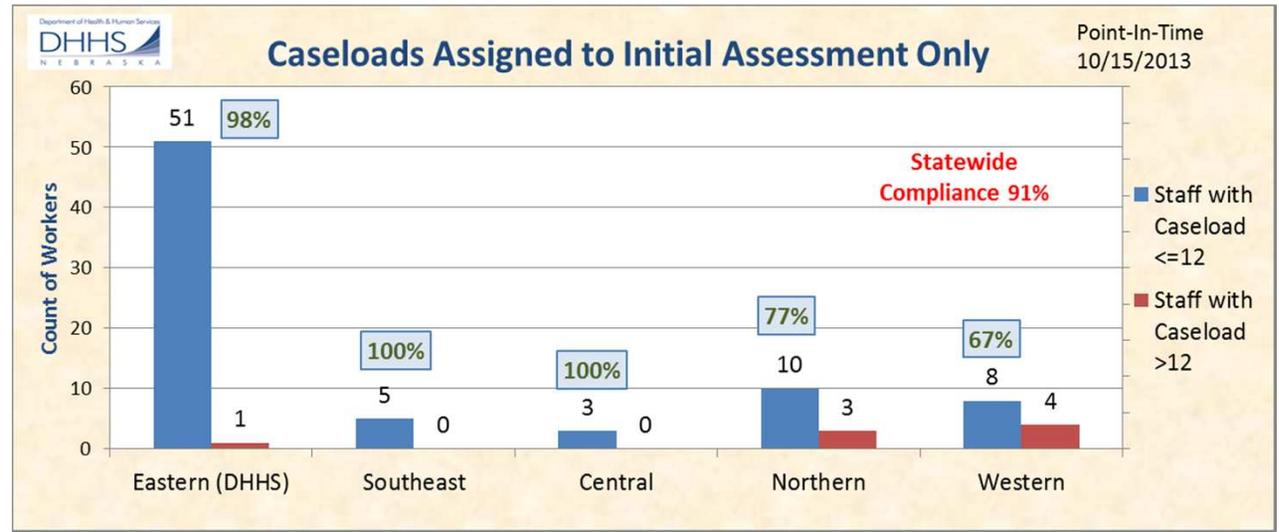
**Barriers:**

**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 for IA & Ongoing**

**Strengths/Opportunities:**

-Sept 2013: Decrease in statewide compliance from 67% in Sept to 58% in October. Eastern Service Area has the highest compliance at 100% while Northern Service Area has the lowest at 35%.

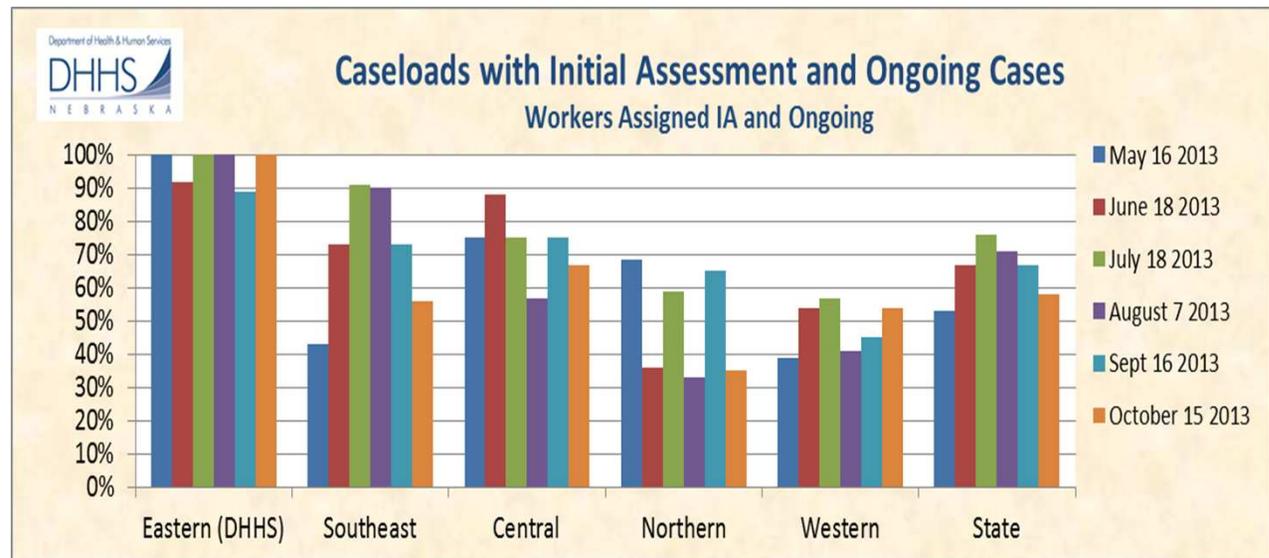
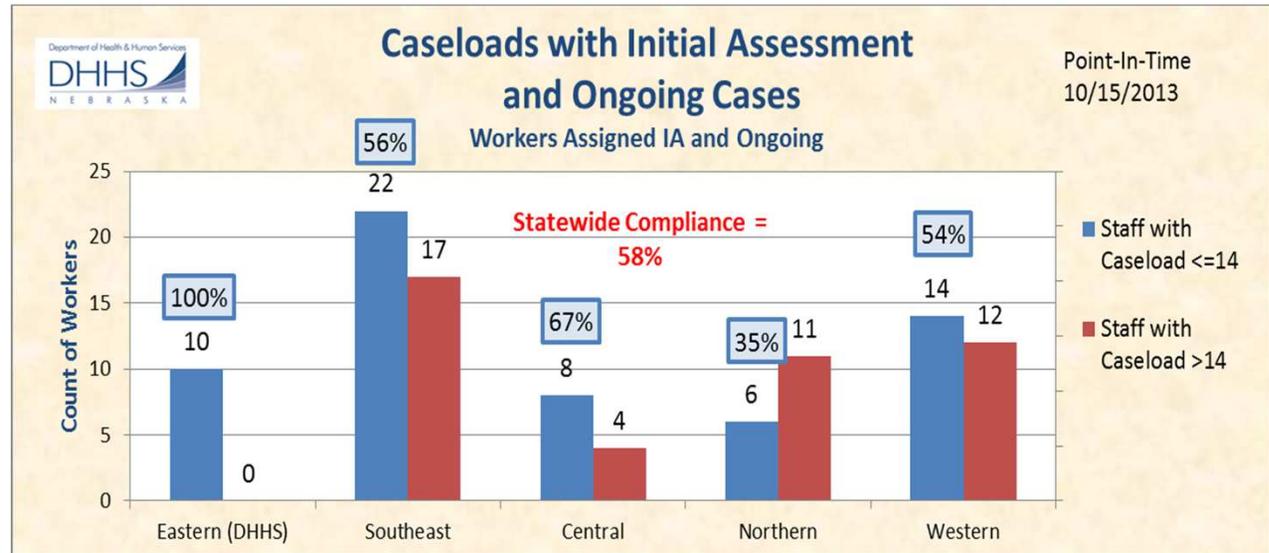
**Barriers:**

**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:**

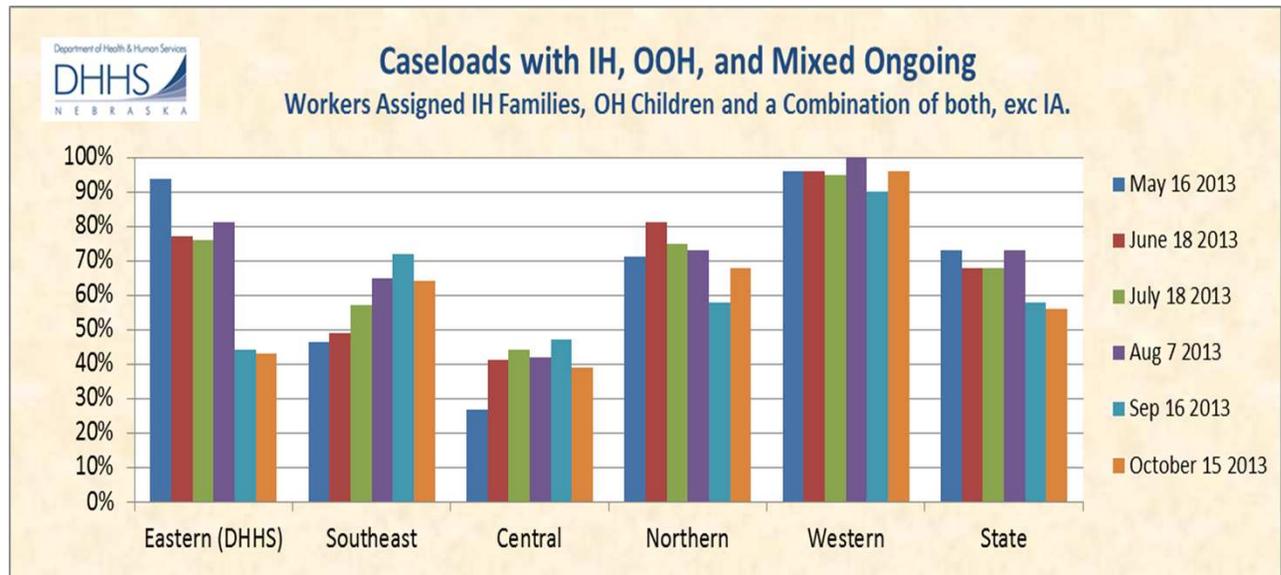
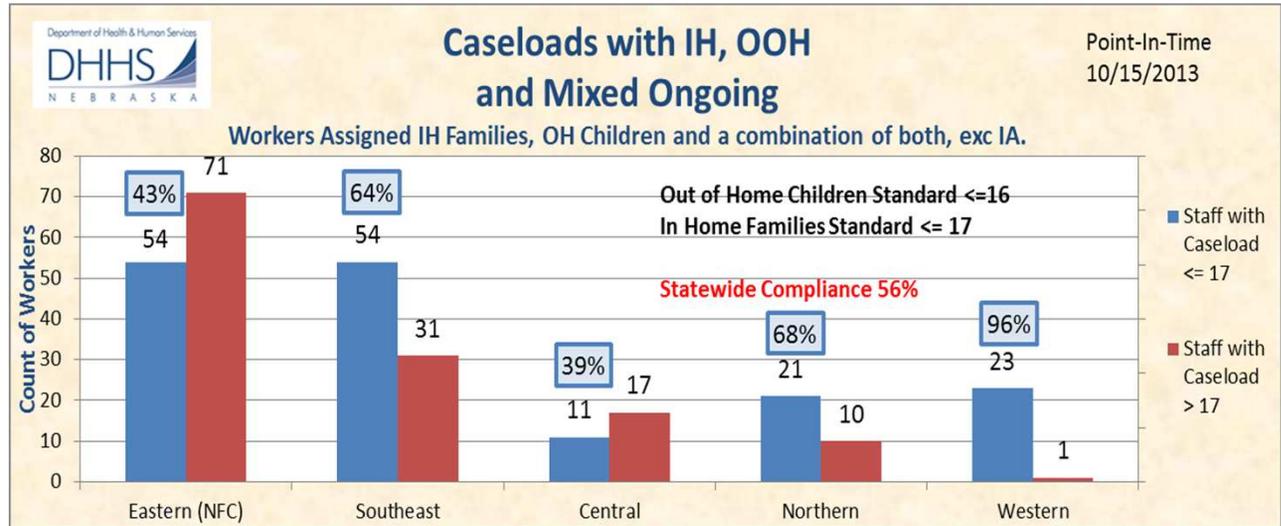
-Sept 2013:Decrease in Statewide Compliance from 58% in September to 56% in October. Western Service area has the highest compliance at 96% while Central Service area has the lowest at 39%.

**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:

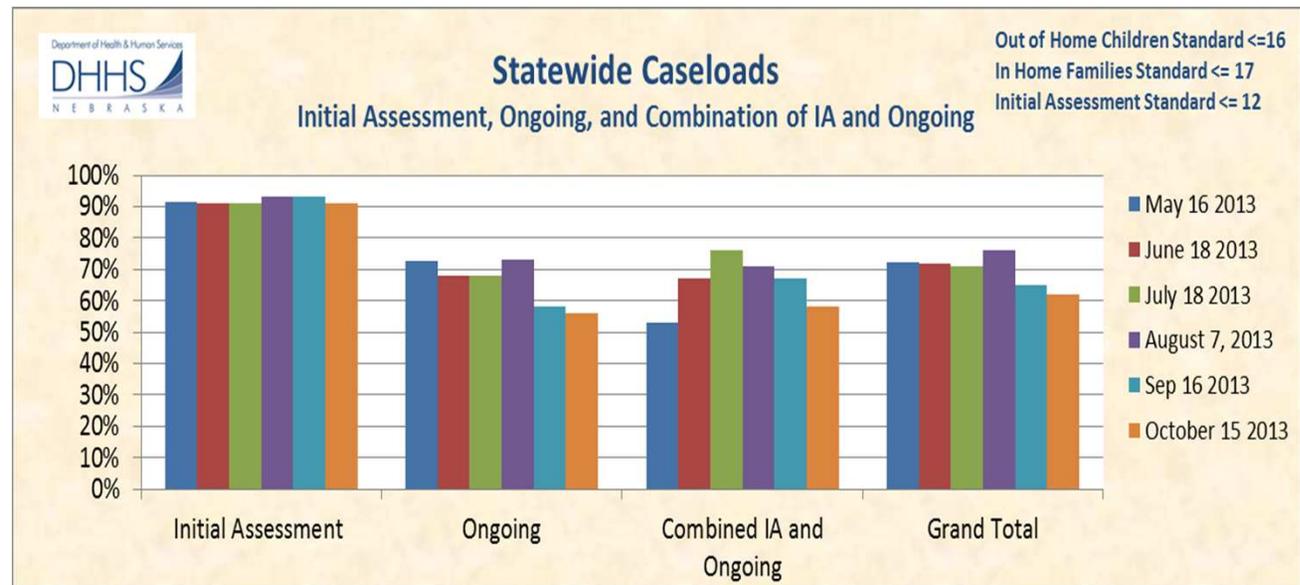
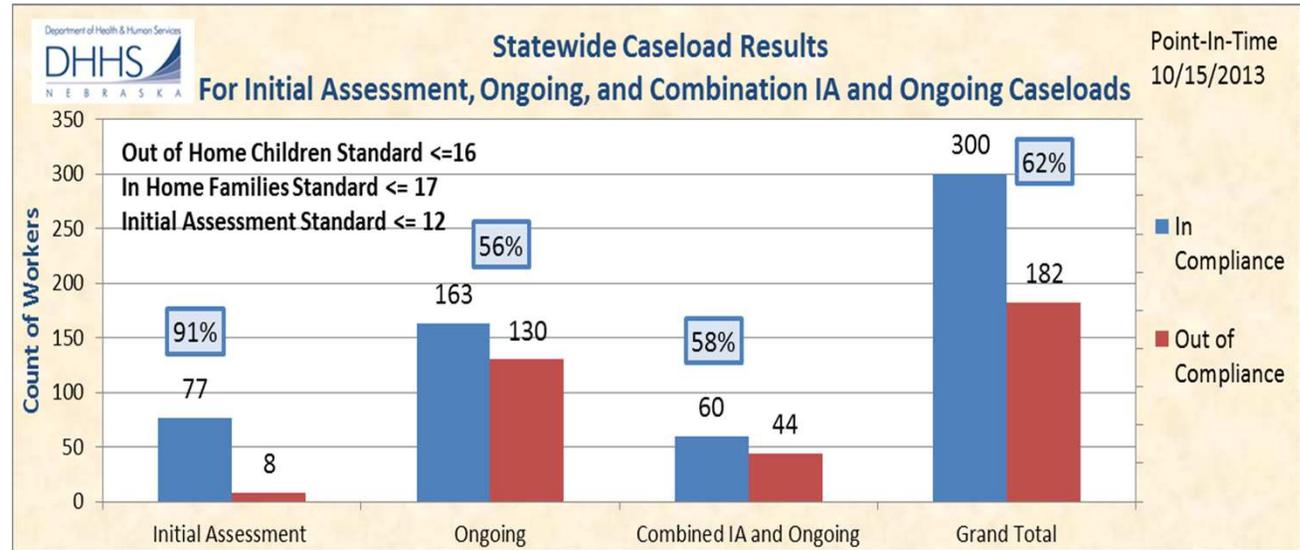
- Aug 2013: Decrease in Overall Compliance from 65% in September to 62% in October.

##### 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:**

-Sept 2013: Turnover % decreased for CFS Trainee, CFS Specialist and CFS Supervisors.

**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	Oct 2012	Nov 2012	Dec 2012	Jan 2013	Feb 2013	Mar 2013	Apr 2013	May 2013	June 2013	July 2013	Aug 2013	Sept 2013
CFS Spec Trainee	0.00%	2.60%	0.00%	4.26%	0.00%	0.00%	1.89%	1.89%	6.12%	7.32%	14.29%	5.13%
CFS Specialist	1.41%	2.35%	1.73%	1.17%	1.81%	2.04%	1.26%	1.99%	2.21%	2.21%	3.03%	1.01%
CFS Supervisors	0.00%	1.37%	0.00%	0.00%	0.00%	0.00%	1.32%	1.32%	2.74%	2.82%	2.90%	0.00%

**Turnover Percent Sept 2013**

Title	CSA PS	ESA PS	NSA PS	SESA PS	WSA PS
CFS Spec Trainee	0.00%	0.00%	20.00%	0.00%	0.00%
CFS Specialist	0.00%	0.00%	1.67%	1.47%	1.72%
CFS Supervisors	0.00%	0.00%	0.00%	0.00%	0.00%

**Turnover Counts Sept 2013**

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

**Aggregate Counts**

Title	Total Employee	Term Employee	Turnover
CFS Spec Trainee	39	2	5.13%
CFS Specialist	398	4	1.01%
CFS Supervisors	67.8	0	0.00%

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

**NFC Staff Turnover**

**Strengths/Opportunities:**

Sept 2013: Turnover % increased for FPS and FPS Supervisors.

**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

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

NFC TURNOVER PERCENT*									
Title	13-Jan	13-Feb	13-Mar	13-Apr	13-May	13-Jun	13-Jul	13-Aug	13-Sep
FPS Trainee	0.00%	0.00%	66.60%	0.00%	14.20%	0.00%	0.00%	0.00%	0.00%
FPS	4.92%	2.04%	4.22%	5.00%	2.15%	4.44%	5.22%	4.61%	11.00%
FP Supervisor	4.50%	0.00%	0.00%	0.00%	0.00%	0.00%	4.76%	4.54%	5.00%

Aggregate Counts – Sept 2013			
Title	Total Employees	Term Employees	Turnover
FPS Trainee	22	0	0%
FPS	118	13	11.00%
FP Supervisor	20	1	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 the last day of posted month.

**Data Review Frequency: Quarterly**

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

**YRTC Staff Turnover**

**Strengths/Opportunities:**

Sept 2013: No turnover for YSS I and increase in turnover for YSS II

**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

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

Turnover Percent Sept 2013		
Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0.00%	0.00%
YOUTH SECURITY SPECIALIST II	0.00%	13.51%

Turnover Counts Sept 2013		
Title	Geneva	Kearney
YOUTH SECURITY SPECIALIST I	0	0
YOUTH SECURITY SPECIALIST II	0	5

Aggregate Counts			
Title	Total Employee	Term Employee	Turnover
YOUTH SECURITY SPECIALIST I	22.55	0	0.00%
YOUTH SECURITY SPECIALIST II	64.30	5	7.78%

*\*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.**

**CFS Staff Vacancy Rate**

Vacancies are allocated positions not filled, excluding frozen positions

**Strengths/Opportunities:**

-Vacancy for CFSS+CFSS decreased to 9.4%. Northern Service Area continues to have the highest vacancy rate followed by Central Service Area.

**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

CFSS + CFSS/T												
Location	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13
Central Service Area	3.40%	6.90%	6.90%	12.10%	8.60%	12.10%	8.90%	5.30%	6.90%	5.20%	8.80%	10.90%
Eastern Service Area	6.60%	6.60%	4.70%	5.70%	4.60%	5.60%	6.50%	3.70%	3.70%	3.70%	6.50%	8.30%
Northern Service Area	9.80%	12.00%	12.00%	6.00%	11.00%	10.80%	13.30%	9.60%	12.00%	16.90%	20.50%	18.10%
Southeast Service Area	7.50%	7.50%	10.60%	12.40%	8.10%	5.30%	5.90%	6.20%	1.80%	1.90%	6.20%	6.20%
Western Service Area	7.00%	5.60%	11.30%	11.30%	7.00%	2.80%	1.40%	4.30%	7.00%	9.90%	12.70%	7.00%
<b>Total</b>	<b>7.10%</b>	<b>7.70%</b>	<b>9.20%</b>	<b>9.60%</b>	<b>7.70%</b>	<b>6.70%</b>	<b>7.00%</b>	<b>5.80%</b>	<b>5.40%</b>	<b>6.40%</b>	<b>10.00%</b>	<b>9.40%</b>

YSS I												
Location	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Aug-13	Oct-13
YRTC Geneva	10.00%	10.00%	20.00%	30.00%	22.20%	20.00%	20.00%	20.00%	10.00%	0.00%	0.00%	0.00%
YRTC Kearney	14.30%	0.00%	14.30%	0.00%	0.00%	0.00%	0.00%	0.00%	7.10%	14.30%	6.70%	14.30%
<b>Total</b>	<b>12.50%</b>	<b>4.20%</b>	<b>16.70%</b>	<b>12.50%</b>	<b>8.70%</b>	<b>8.30%</b>	<b>8.30%</b>	<b>8.30%</b>	<b>8.30%</b>	<b>8.30%</b>	<b>4.00%</b>	<b>8.30%</b>

YSS II												
Location	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Aug-13	Oct-13
YRTC Geneva	6.70%	0.00%	0.00%	0.00%	12.90%	6.70%	16.70%	13.30%	6.70%	10.00%	6.70%	0.00%
YRTC Kearney	22.00%	22.00%	14.00%	14.00%	12.00%	15.70%	8.00%	15.70%	17.60%	21.60%	28.00%	6.70%
<b>Total</b>	<b>16.30%</b>	<b>13.80%</b>	<b>8.80%</b>	<b>8.80%</b>	<b>12.30%</b>	<b>12.30%</b>	<b>11.30%</b>	<b>14.80%</b>	<b>13.60%</b>	<b>17.30%</b>	<b>20.00%</b>	<b>4.00%</b>

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

**Data Review Frequency: Quarterly**

**NFC Staff Vacancy Rate**

**Strengths/Opportunities:**

-NFC Vacancies increased from 10.58 to 11.90%

**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

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

Vacancies are allocated positions not filled, excluding frozen positions

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

**VACANCY RATES**

	May-13			Jun-13			Jul-13			Aug-13			Sep-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**	10	156	6.41%	15	156	9.61%	15	156	9.61%	18	170	10.58%	20	168	11.90%

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

**Data Review Frequency: Quarterly**

# **ADULT PROTECTIVE SERVICES (APS)**

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APS Contact Timeframes

**Strengths/Opportunities:**

-Sept 2013: Increase in performance all priority contacts for the state.

**Barriers:**

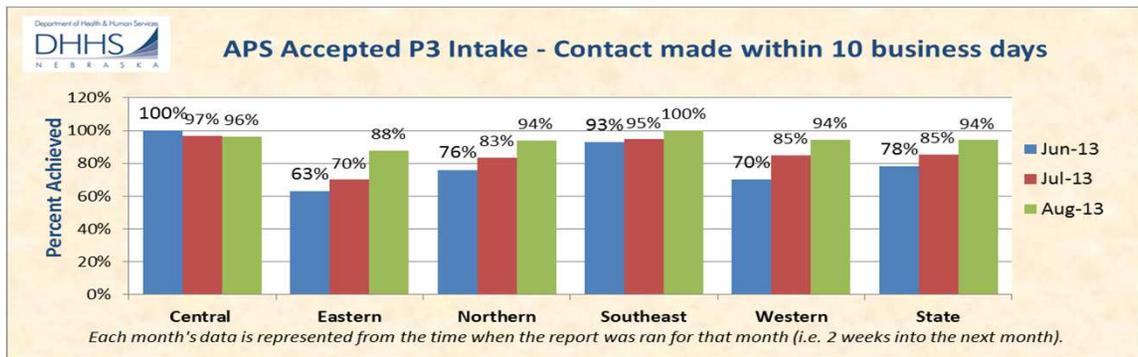
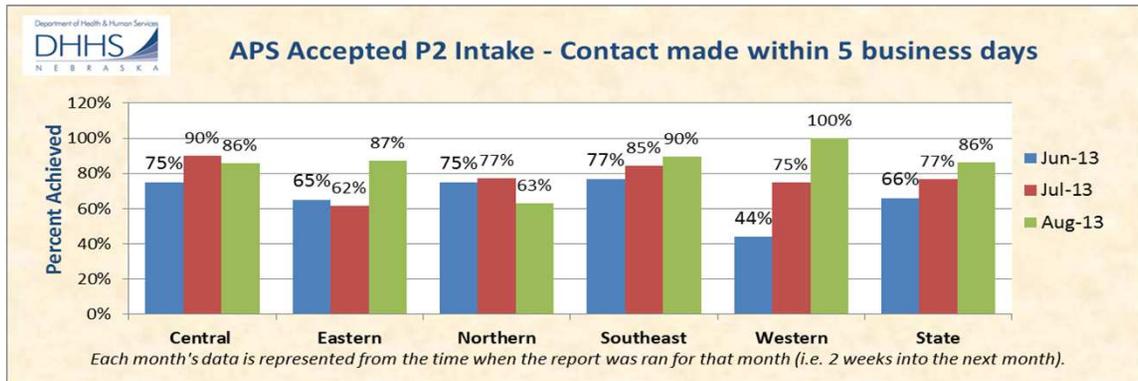
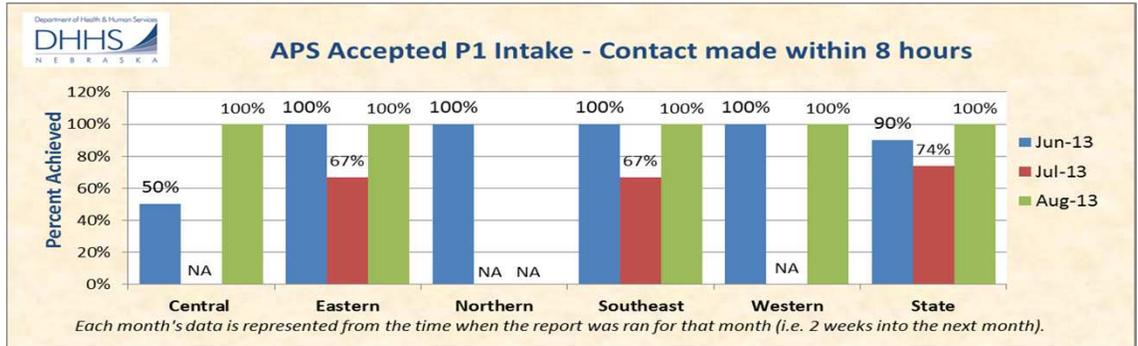
**Action Items:**

\*Completed:

\*Planned:

Data Review Frequency: Monthly

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



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

APS Investigation Timeframes

**Strengths/Opportunities:**

- Sept 2013: Continue to see increase in state performance for all priority timeframes.

**Barriers:**

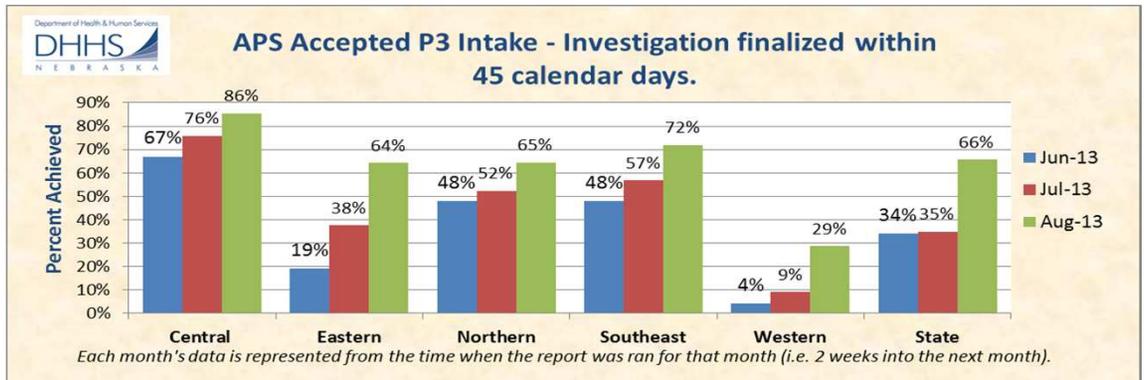
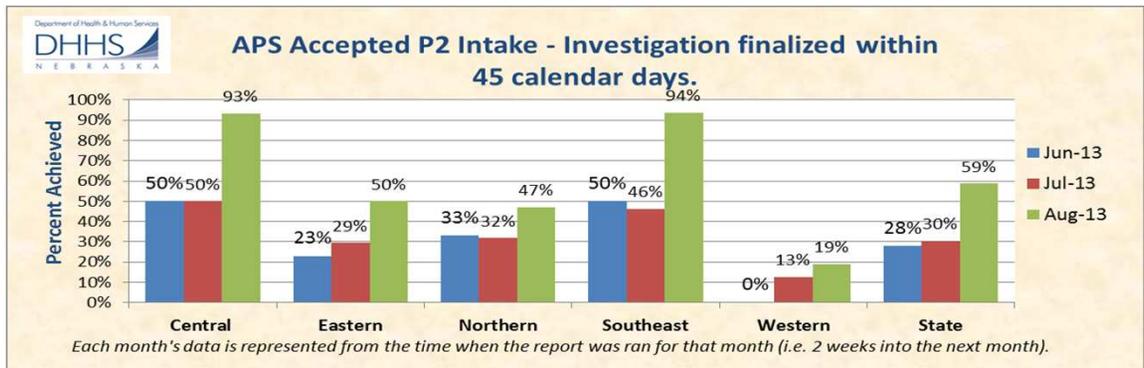
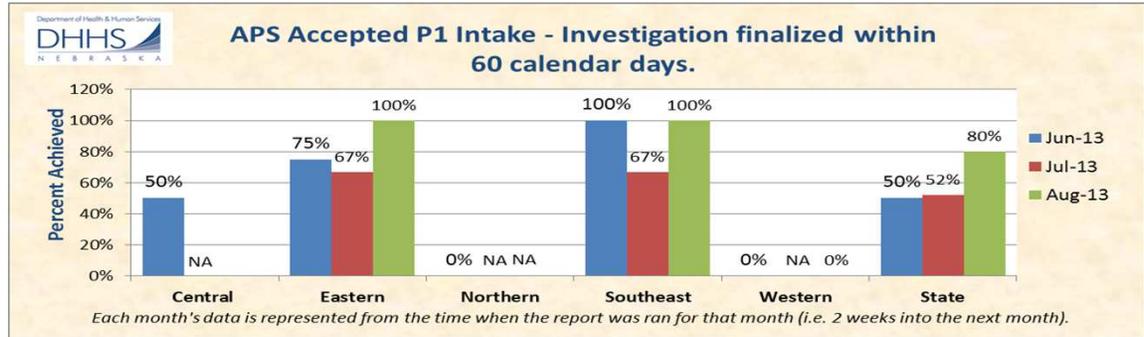
**Action Items:**

\*Completed:

\*Planned:

Data Review Frequency: Monthly

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



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

**APS Quality Measures**

**Strengths/Opportunities:**

- Sept 2013: Continue to see an increase in performance in all 4 measures.

**Barriers:**

**Action Items:**

*\*Completed:*

*\*Planned:*

**Data Review Frequency: Monthly**

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

