right turn

Help for post-adoptive parents & guardians is just around the corner

Quarter 3 Final
July-September 2010

Part 1. Access Line

Reporting data provided by KVC Behavioral Health, which operates the access line.

Total calls to the access line	**173**	
Test calls (A "test" call is defined by KVC as testing/quality assurance/training calls by KVC to ensure operability and preparedness of access line staff.)	**20**	**14%**
Wrong number	**15**	**10%**
Abandoned calls	**20**	**13%**
Inbound follow-up (current RT family requesting information)	**11**	**7%**
Information only	**30**	**20%**
Total referrals	**77**	**50%**

No calls had a hold time greater than 100 seconds.

8.56 seconds is the average hold time.

Part 2. Referrals to Right Turn

Total referrals **77**

Referrals responded to within 72 hours	**77**	**100%**
Duplicate referrals (referrals sent more than once)	**10**	**13%**
Ineligible referrals (includes ineligible and duplicate referrals)	**7**	**9%**
Eligible referrals	**60**	**78%**

Disposition of ineligible referrals

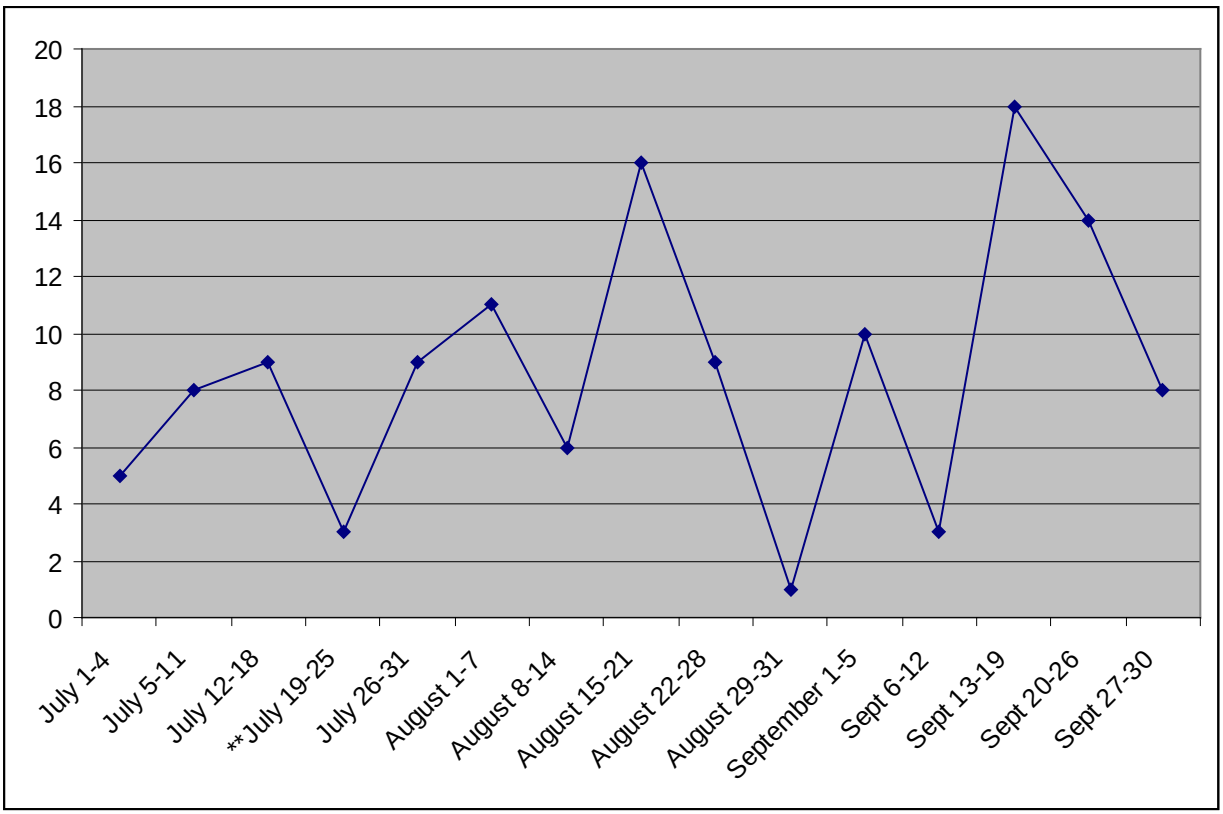
Total ineligible	**7**
Ineligible: Referred to post-adoption support <u>(Post-adoption support other than Right Turn)</u>**	**5/7**
Ineligible: Referred to Helpline for referral and support	**7/7**
Provided additional referrals to family	**3/7**

**Right Turn made contact with all ineligible families. Right Turn provided resources to these families in addition to referring them to the Helpline and post-adoption support when that was applicable. Families that are not eligible for Right Turn services and are not adoptive/guardianship parents are referred to other programs. If families are adoptive/guardianship parents that are not eligible for Right Turn, but post-adoption supports are needed, Right Turn refers them to other post-adoption programs. Right Turn has partnered with Nebraska Children's Home Society, which has post-adoption support for families who are not eligible for Right Turn. Right Turn is committed to ensuring all adoptive/guardianship families access the support they need, even when they are not eligible for Right Turn.

Disposition of eligible referrals

Total eligible	**60**	
Eligible: Accepted case management services	**58**	**97%**
Eligible: Declined case management (e.g. support needs resolved, not interested in case management, did not respond to attempts to contact)	**2**	**3%**

Number of Referrals Received Per Week (15 weeks in the quarter)



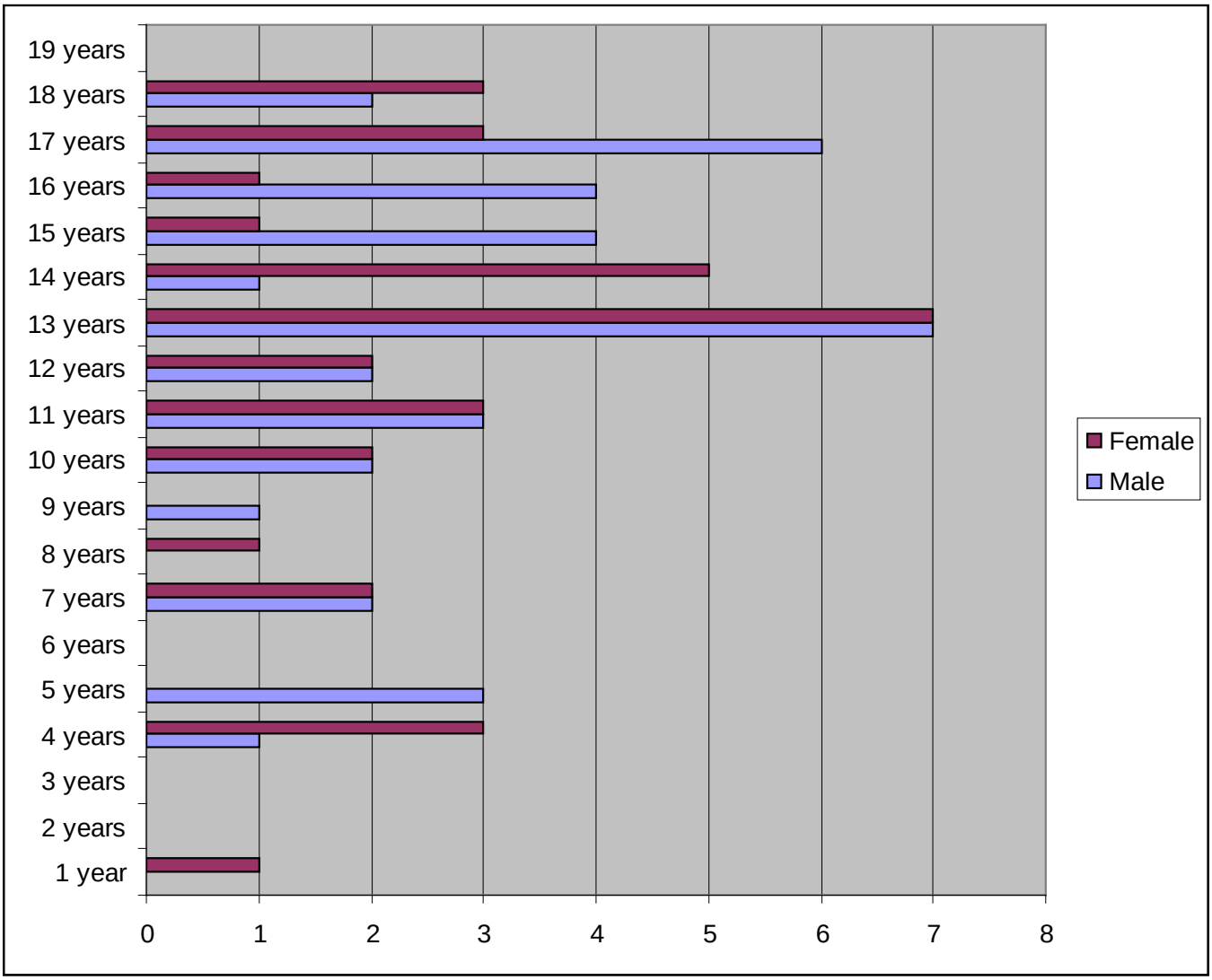
** Third quarter mailing

Part 3. Characteristics of case management families

Quarterly case management families **58**

Adoption	**47**	**81%**
Guardianship	**11**	**19%**
Total case management families	**58**	

Age and gender of the eligible child
This chart represents the age and gender of the child that qualifies a family for Right Turn *services in Quarter 3 2010*

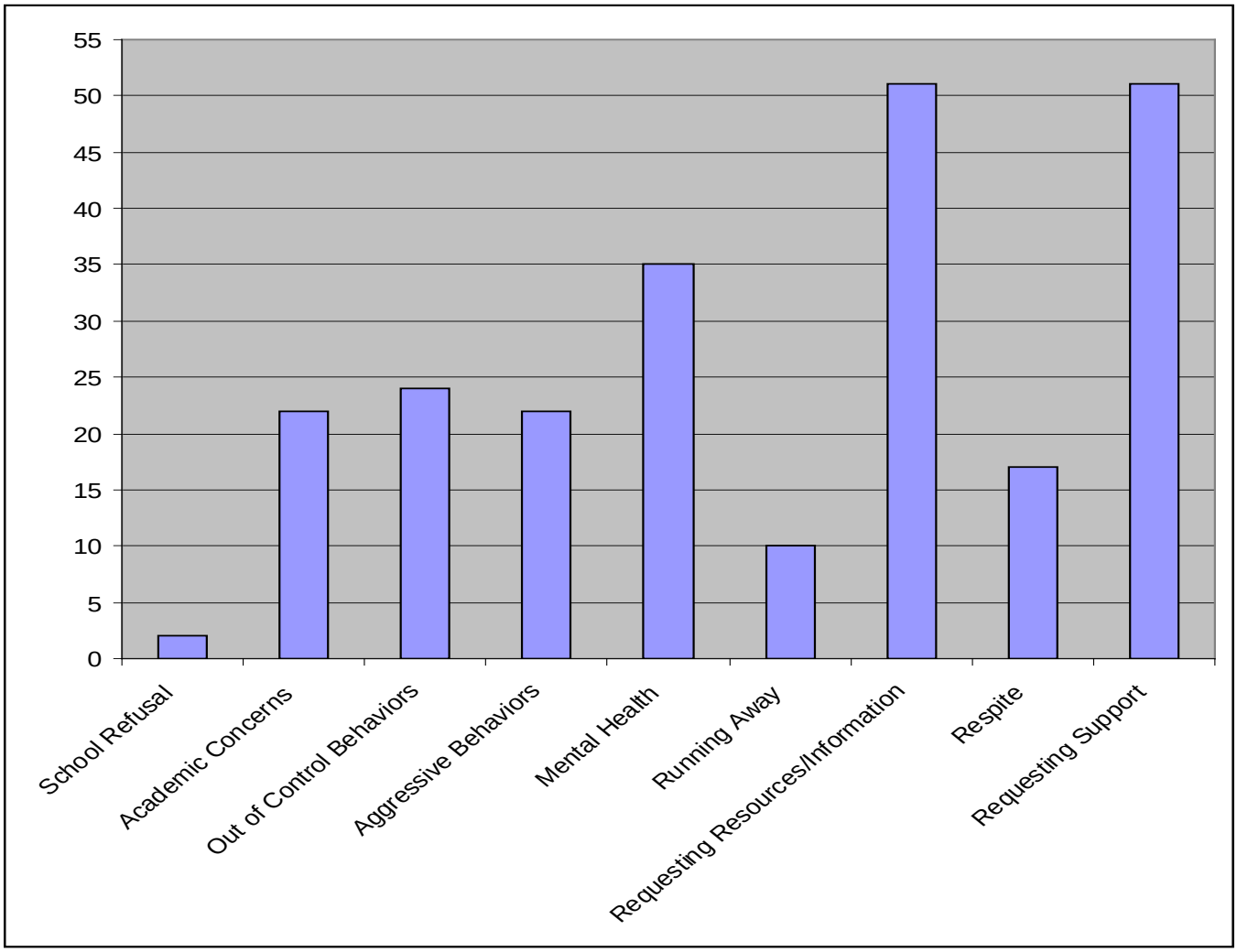


Total youth served (3rd quarter)
***accounts for total youth in families served, not the eligible child**

Female	**65**	**45%**
Male	**79**	**55%**
Total new youth served	**144**	

Issues identified as the reason for referral

More than one reason can be identified. Reasons for referral are identified by both the family and the Permanency Support Specialist once case management begins.



3rd Quarter	Adoption	Guardianship	Total
Families at start of the quarter	49	15	64
Families opened this quarter	47	11	58
Families closed this quarter	56	15	71
Families at the end of the quarter	40	11	51
Total families served	96	26	122

Families closed this quarter	**71**
Average length of service for families that closed this quarter (prior to the 90 days)	**91.1 days**

3rd Quarter	**Total**
Children at start of quarter	**88**
Children opened this quarter	**144**
Children closed this quarter	**162**
Children at the end of the quarter	**70**
Total children served	**232**

OUTCOMES FOR FAMILIES AT THE END OF SERVICE PROVISION

Outcomes are established in proposal prepared for and approved by NDHHS.

Right Turn assessment measures family outcomes at the end of the service provision. Right Turn began administering assessments to all Right Turn families on April 1, 2010 for a trial period. On June 1, 2010, this assessment was approved by Health and Human Services to be used as the primary tool for measuring outcomes. Post-assessment outcomes are not available at this time. Families who completed the pre-assessment in April will not be completing their post-assessment until the end of the 90-day case management service. Families who began services in April will complete post-assessments in July.

A total of thirty families have completed both the pre- and post-assessment. Fifty-eight families completed pre-assessments, which were scored and reported in the second quarter report. We have scores for thirty-three post assessments of the fifty-eight pre-assessments completed last quarter. Right Turn assessment is below.

Right Turn Family Assessment

Safety of my child

☐	My son or daughter is safe in the home
☐	My son/daughter is at risk to harm him/herself or others in my home
☐	My son/daughter is not in my home due to safety concerns

Families will remain intact without a need for out-of-home placement

☐	There is no need for placement of my son/daughter outside of my home
☐	I am seeking community-based services to prevent a need for my child to be placed outside of my home
☐	I am actively seeking a higher level of care for my son/daughter outside of my home
☐	My son/daughter is not placed in my home, but I am working to get him or her back
☐	My son/daughter is placed in my home, and I am actively seeking dissolution of my parental commitment
☐	My son/daughter is placed out of the home, and I am seeking dissolution of my parental commitment.

Ability to identify community resources (education, support, and treatment)

☐	I am able to locate community resources to meet the needs of my family
☐	I know there are resources available to my family but I am uncertain on how to access them
☐	I know there are resources available but they are not available in my community
☐	I am not aware of any resources that would help me in meeting the needs of my family

Ability to meet child's needs through parenting skills

☐	I feel competent in my parenting ability

☐	I feel good about my parenting ability
☐	I feel my parenting ability is adequate
☐	I feel my parenting ability is inadequate

Parent education and skill-building support

☐	I do not need additional parent education and skill-building support
☐	I would benefit from parent education and skill-building support
☐	I am in need of parent education and skill-building support

Parent understanding of child's needs

☐	I completely understand the emotional, educational, and/or physical needs of my son or daughter
☐	I partially understand the emotional, educational, and/or physical needs of my son or daughter
☐	I do not understand the emotional, educational, and/or physical needs of my son or daughter

Parent understanding of child's behavioral health-related diagnosis

☐	My son/daughter has a diagnosis that I fully understand

☐	My son/daughter has a diagnosis that I somewhat understand
☐	My son/daughter has a diagnosis that I do not understand
☐	My son/daughter does not have a diagnosis

Parent involvement in child's care and/or treatment

☐	I am actively involved in my son/daughter's care and/or treatment
☐	I am sometimes involved in my son/daughter's care and/or treatment
☐	I am not involved in my son/daughter's care and or treatment

Level of understanding of adoption issues

☐	I have a great understanding of the adoption/guardianship issues my son/daughter may experience as he/she ages
☐	I have some understanding of the adoption/guardianship issues my son/daughter may experience as he/she ages
☐	I have limited understanding of the adoption/guardianship issues my son/daughter may experience as he/she ages
☐	I have no understanding of the adoption/guardianship issues my son/daughter may experience as he/she ages

Level of informal support

☐	I have many friends and family who support me in my role as a parent
☐	I have many friends and family who support me but not in my role as a parent
☐	I have few friends and family who support me in my role as a parent
☐	I have few friends and family who support me but not in my role as a parent
☐	I am alone and I have no one to call for support

Outcomes

* "Intact" family is defined as parents who remain committed to their child's care and treatment even if the child required out-of-home care placement for a period of time or the child was placed in the custody of the Department of Health and Human Services in order to access mental health treatment.

Total families served	*212*
# of children served	452
# of children who became state wards for the purposes of accessing treatment	8
# of children who became state wards and their parents are no longer involved in their treatment (ended their parenting commitment)	2 of 8
Rate of Right Turn families which remained intact*	99%

- **There were 212 families served between January 2010 and September 2010 involving 452 children.**

- **1% of Right Turn families ended their parenting commitment with their child by formally dissolving/terminating their legal commitment to their child.**

1 of 8 families decided to terminate their adoption.

- The family called Right Turn for respite support and assistance in accessing mental health treatment for their son. In the first three weeks of service to family, the eligible child was in-patient for homicidal and suicidal thoughts and gestures. When the child returned home, the parents decided they were afraid of the child and thought he should be in residential treatment. At that time, the family disengaged with Right Turn services. One week later the family notified Right Turn they would no longer need Right Turn services, since they had begun the process of terminating their adoption.

1 of 8 families decided to dissolve their guardianship.

- The family initially began services with Right Turn because of a need for respite services. Right Turn made arrangements for respite, and the family discontinued contact with Right Turn services once the child was in respite. Within four days of calling the Right Turn Access Line, the family had made arrangements to dissolve their guardianship. No services or one-on-one case management services were provided to this family.

- **2.3% of Right Turn families (5 families) report being recommended - by a service provider, insurance company and/or clinician – to make their child a state ward to access mental health treatment and following through on that recommendation.**

  In each of these five case involving dependency filings, the family reported that it was recommended that they make their child a state ward in order to access mental health services. Parents of all five of these children are active in their child's treatment and want to continue with their parenting commitment. Each family has stated they intend to have their child return to their care when treatment is complete.

- **Less than 1% of Right Turn families (1 family) had their child return to the custody of the state as a result of a juvenile delinquency filing.**
- **Less than 1% of Right Turn families (1 family) completed a successor guardianship, with the assistance of Right Turn staff, to avoid their child being placed in custody of Health and Human Services.**

Families will remain intact	99% of Right Turn families remained intact (210/212 families). If children required out-of-home care for treatment purposes and the family remained involved in the child's treatment, these families were counted as "intact" families.
Families will be able to identify at least one community resource they will be able to access as needed after discharged from services	100% Right Turn staff made over 1,000 referrals for services.
Parents will report improved parenting skills through the participation of services	According to 54 satisfaction surveys returned by Right Turn families: "As a result of Right Turn services, my parenting skills have improved." 65% of families report improved parenting skills. 29% of families remained neutral. 6% of families disagreed. 6% of families did not provide a response.
Parents will report they have a better understanding of their children's specific needs and know how to deal with them as a result of participation in the program	According to 54 satisfaction surveys returned by Right Turn families: "As a result of Right Turn services, my parenting skills and abilities have improved." 67% of families reported improved parenting skills and the ability to put these skills into practice. 28% of families remained neutral. 6% of families disagreed. 3% of families did not provide a response.

Families will have improved scores on the assessments	All families had an overall higher score on the post-assessment than on the pre-assessment. The areas in which families had the most improvement were on questions related to: o Better understanding and identifying resources in the community o Better understanding of child's needs and issues related to adoption and guardianship Assessment scores consistently improved on both adoption and guardianship cases.

Satisfaction surveys

Families continue to have the option of either filling out the surveys through a website or mailing them after their services end. The surveys are anonymous and are entered by the Right Turn CQI specialist. Some of the questions were not answered by the families. Sixteen surveys were returned. Right Turn staff requests families complete the survey at case closure. Surveys are mailed to the Right Turn program assistant.

The results show an appreciation of what Right Turn is doing. Because of the anonymity of the survey, families are able to give honest feedback and on each question Right Turn is seen overall as positive.

Spot checks

Per the last report, spot checks continue. Spot checks are mid-service calls to families asking how their services have been. The spot checks allow an insight into perception of the program around 45 days into service, which could also give insight into areas of concern or areas of progress.

Of the five spot checks done from July to September by supervisors, all five recorded either a 6 or 7 in satisfaction on a 7-point-scale. The areas marked were: satisfaction with the program; satisfaction with their specialist; and overall progress since entering Right Turn. Spot checks are done over the phone and by Right Turn supervisors. The result of these spot check calls are entered into the Right Turn CQI database.

Quality improvement team

A quality improvement team met Aug. 5th to discuss the results of the Right Turn record review. Every first- and second-quarter record in the program was analyzed, and the results reported to the quality improvement team, Right Turn supervisors, and staff. The results were used for improvements in protocol (ex. "Every case note must be signed in the file"), education, and future care for families.

The team concluded that the format of peer record reviews was an enjoyable and effective way of evaluating records. The team recommended a greater attention to keeping a family history.

The third-quarter quality review of cases is currently under way. It will be completed in early November. The report will be forwarded in the fourth-quarter Right Turn Report, or forwarded after November 1st upon request.

Peer Reviews

Below are the numbers from the first- and second-quarter peer reviews. The two most error-prone areas, “service plan” and “case notes,” were addressed. For a majority of the case notes, the COA recommendation of signing every note in the file was not followed due to negligence by the staff in the first quarter, resulting in a low percentage of compliance. Case notes were consistently completed and filed, however, because they were not consistently signed (a COA requirement), this area of compliance was low.

The final compliance number of 46% could only be attained if all of the prior areas were in compliance.

January-June Peer Review
Total Records: 133

	Cumulative	Percentage
Intake	131	98.50%
Referral	133	100.00%
Consent	127	95.49%
Assessment	118	88.72%
Service plan	105	78.95%
Education	129	96.99%
Plan reflects issues	128	96.24%
Case notes	79	59.40%
Discharge (If Applicable)	124	93.23%
Overall compliance	62	46.62%

July-September peer reviews
Total records done thus far: 22

	Cumulative	Percentage
Intake	22	100.00%
Referral	22	100.00%
Consent	20	90.91%
Assessment	22	100.00%
Family history	19	86.36%
Service plan	19	86.36%

Education	22	100.00%
Plan reflects issues	19	86.36%
Case notes	21	95.45%
Discharge (If applicable)	22	100%
Overall compliance	17	77.27%

.

Gaps in service trends that have been discovered as families are served by Right Turn

Preliminary data taken from Intake questionnaire and interview:

1. The family is unfamiliar with type of treatment needed and how to access treatment.
2. The specialty service is not available or is only available a great distance away.
3. The family does not have a current mental-health diagnosis of their child that is acceptable to insurance providers when approving mental health services.
4. The family lacks training and understanding of the special needs of children who have experienced abuse, neglect, trauma, or losses associated with adoption/guardianship.
5. There are families who continue to believe and are continue to be told by service providers that if their child is a state ward the family will be able to better access mental health treatment services.
6. There are an insufficient number of mental health providers throughout the State that are able to adequately address losses associated with adoption/guardianship. This situation can leave a family in therapy for many years without issues being addressed or without improvement in child's mental health.

.

Right Turn's intake process includes a series of mental health questions asked of the parents. Right Turn began using this intake tool with all intakes in August, 2010.

74 families completed the intake questionnaire. The following diagnoses have been reported.

1. Does eligible child have mental health diagnosis?
Yes **49**
No **16**
Unknown **9**

Reactive attachment	10
Autism	3
Asperger's	8
ADHD	39
ADD	6
Depression	6
Anxiety	5
Conduct disorder	0
ODD	15
OCD	2
Bi-polar	18
Borderline	3
Schizophrenia	1
Schizoaffective	0

PTSD	5
Mood disorder NOS	9
FAS diagnosed	23
FAS suspected	13
Pre/postal natal drug exposure (documented)	17