

# Western Service Area \*B

*(\*B – Area supervised by Jerrilyn Crankshaw)*

## Initial Safety Assessments 2<sup>nd</sup> Round - Safety Model QA Review



**Nebraska Department of Health and Human Services  
Quality Assurance**

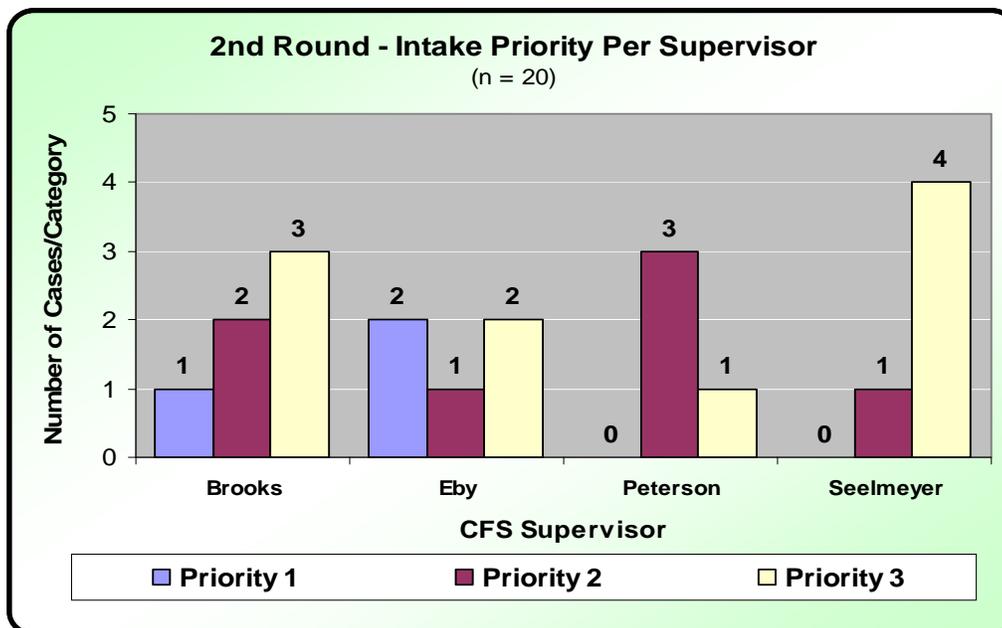
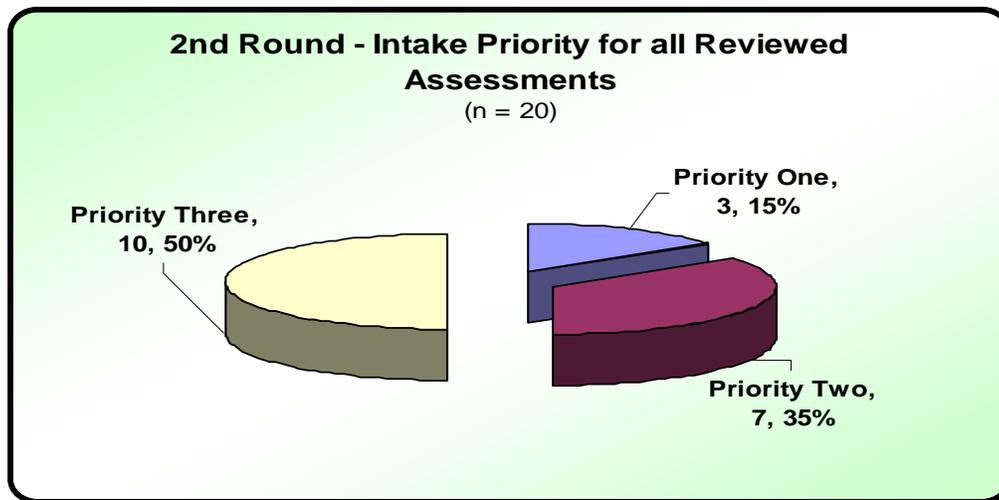
May 2009

The Quality Assurance (QA) Team completed second round of Initial Safety Assessment reviews in April 2009 in Western Service Area (WSA), specifically in the part of WSA under the supervision of **Jerrilyn Crankshaw**. For the purposes of this report, throughout this document and related charts, we will refer to this area supervised by Jerrilyn Crankshaw as **WSA\*B**. A total of **20** finalized safety assessments were randomly selected by QA staff from four Children and Family Services Supervisors (CFSS) in WSA\*B. Review consisted of six assessments from CFSS Brenda Brooks, four assessments from CFSS Nicole Peterson, and five assessments each from CFSS Michelle Eby and Kim Seelmeyer.

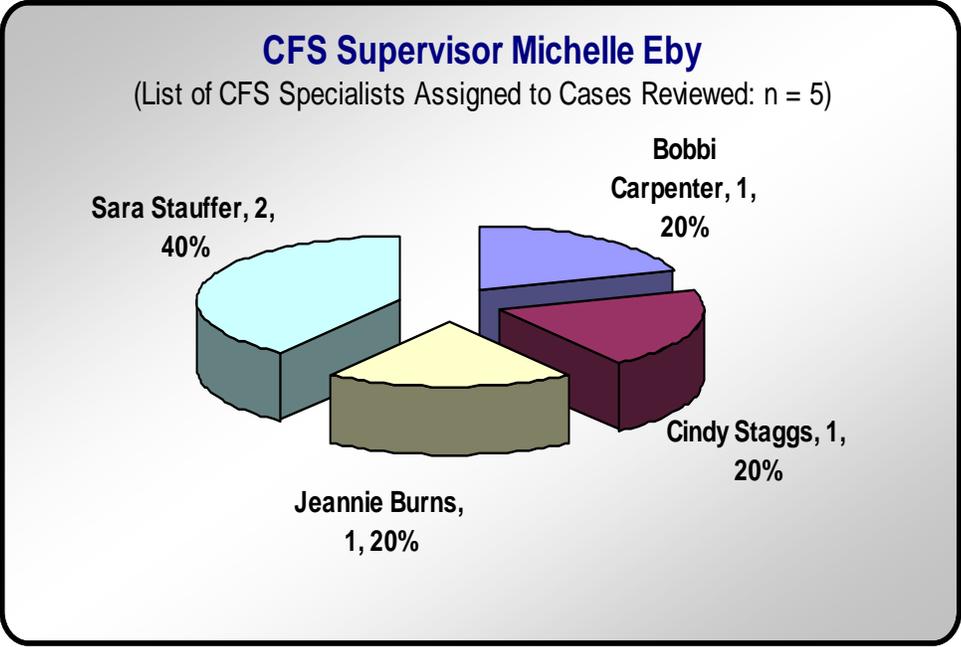
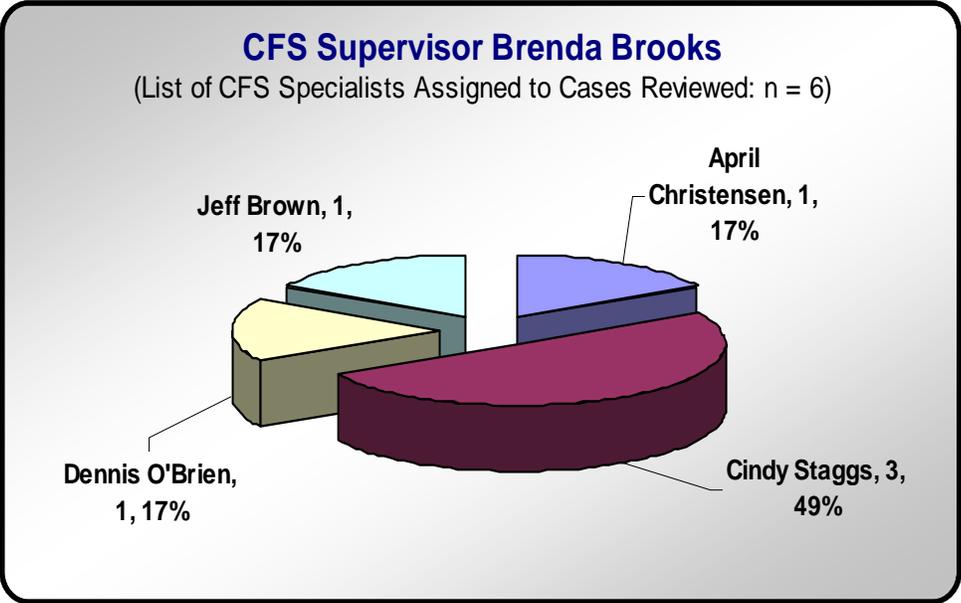
The first round of reviews of Initial Safety Assessment for **WSA\*B** was completed in September 2008. A total of **60** finalized Safety Assessments were submitted to QA staff from the same four CFS Supervisors.

**This report contains detailed information from the 2<sup>nd</sup> Round of Initial Assessment reviews.**

**Intake Priority (20 assessments reviewed): 3 were Priority One, 7 were Priority Two and 10 were Priority Three.**

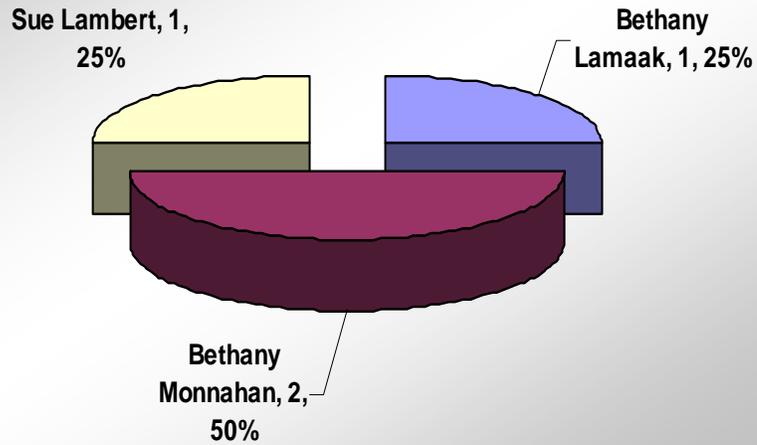


The following charts contain a breakdown of reviewed assessments per worker for each CFS Supervisor:



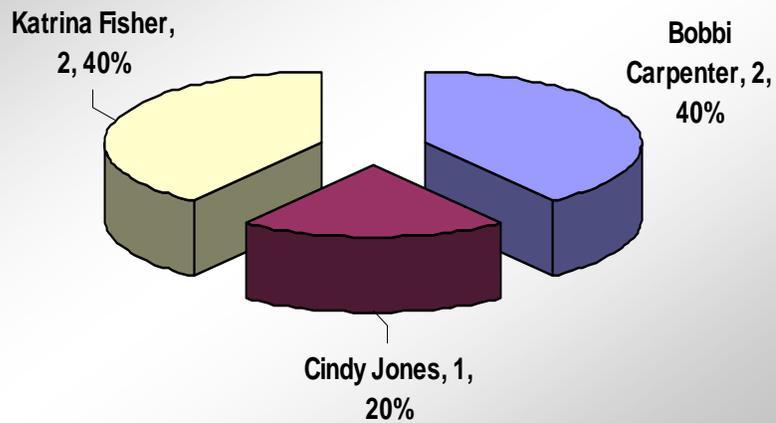
### CFS Supervisor Nicole Peterson

(List of CFS Specialists Assigned to Cases Reviewed: n = 4)



### CFS Supervisor Kim Seelmeyer

(List of CFS Specialists Assigned to Cases Reviewed: n = 5)



The following is a summary of **2<sup>nd</sup> Round** data from ALL 20 Initial Safety Assessment reviews. Please note that **some** reviewer comments were included in this report for several of the items that were reviewed. Charts for the overall data can be found in the attached excel file: *WSA-B Comparison Charts*. Charts in the excel attachment compares data from 1<sup>st</sup> round and 2<sup>nd</sup> round Initial Safety Assessment reviews.

***Initial Response/Contact Information (Chart 1):***

- Initial contact with child victim was made within required time frame in 80% of the Safety Assessments (16 out of 20 instances).
- Other children in the household were present in 40% or 8 of 20 of the reviewed assessments. Other children in the household were interviewed in 7 out of 8 instances (88%).
- 8 out of 20 (40%) of the reviewed assessments had a non-maltreating caregiver listed in the intake. The non-maltreating caregiver was interviewed in 7 out of 8 instances (88%).
- Other adults were present in 15% or 3 out of 20 of the reviewed assessments. Other adults in the home were interviewed in ALL 3 instances (100%).
- Interviews with the maltreating caregiver occurred in 19 out of 20 instances or 95% of the reviewed assessments. One assessment was completed on an intake that listed a perpetrator who was not a caregiver for the child.
- Interview protocol was followed in 40% or 8 out of 20 assessments. For those assessments that did not follow protocol, reviewers were **able** to find documentation to indicate the reason for the deviation from protocol in 1 out of 12 assessments (8%).
  - **Reviewer Comments:**
    - *The contact sheet is hard to follow and suggest the same date and time of interviews for all individuals even when the interviews took place at different locations.*
    - *It appears that the entire family was interviewed together.*
    - *Maltreating caregiver(s) was/were interviewed before the child(ren)/victims were interviewed.*

***Present Danger (Chart 2):***

- Present danger at the initial contact with the child victim and/or family was identified in 10% or 2 out of 20 of the reviewed assessments.
- Reviewers agreed with the worker's assessment of Present Danger in ALL instances (100%).
- While there were two assessments in which the worker identified present danger. Only one of the assessments had an Immediate Protective Action (IPA) plan documented on N-FOCUS.
  - Reason for the protective action was explained to the parent/caregiver in 1 out of 2 instances (50%).
  - 50% (1 of 2) of the IPA's included sufficient oversight requirements to assure child safety.
  - 50% (1 of 2) of the IPA's contained parent's willingness to cooperate.
  - 50% (1 of 2) of the IPA's contained a description of the persons responsible for the protective action.
  - 50% (1 of 2) of the IPA's taken contained confirmation of person responsible for the protective action.
  - 0% (0 of 2) of the IPA's contained a description of how the protective action was going to work.
  - 0% (0 of 2) of the IPA's contained timeframes for the protective action.
- Overall, none of the Protective Action Plans were judged to be sufficient by Reviewers (0%).

### **Domains (Chart 5):**

- **Maltreatment** – Sufficient information was collected in 80% (16 out of 20) of the assessments.
  - **Reviewer Comments:**
    - *Provide conclusion/overall analysis from interviews – include findings/conclusion.*
    - *Nothing is mentioned in the assessment about allegations that child put a toy gun in their mouth and said they were going to kill themselves.*
    - *Worker does not include information from the children about the maltreatment allegations.*
    - *Interview or include information for everyone listed as perpetrators.*
    - *Address all areas of concern in the intake.*
    - *Caution run on narratives, information needs to be separated into other domain areas.*
  
- **Nature** – Sufficient information was collected in 50% (10 out of 20) of the assessments.
  - **Reviewer Comments:**
    - *Most of the information in nature belongs to the maltreatment section.*
    - *Need to include caregiver's explanation of maltreatment*
    - *This section needs to include worker's analysis of lengthy history of intakes received on this family.*
    - *Summarize and discuss the major influences of the overarching causes to abuse and neglect.*
    - *Include analysis of events/factors surrounding the abuse and neglect.*
    - *Include information about circumstances of past removals and whether or not those circumstances relate to current maltreatment.*
    - *Need to provide brief summary of the factors leading to the CAN contained in the intakes.*
  
- **Child Functioning** – Sufficient information was collected in 70% (14 out of 20) of the assessments.
  - **Reviewer Comments:**
    - *Need to include information on other children in the home. It is difficult to tell if all children were observed by the worker.*
    - *What do the parents report about their child and his development and behavior?*
    - *Need information from doctor about child's development and weight gain.*
    - *Need more information about physical and emotional development.*
    - *Worker made reference to the child as "seem to be mentally and physically healthy" --- but no indication of supporting evidence.*
    - *Do not cut and paste information from previous assessments. If there has been no change in a specific domain since the last assessment – worker simply needs to include a statement in the documentation that there have been no changes since previous assessment.*
    - *Include description of overarching statements surrounding child's development or behavioral difficulties.*
  
- **Disciplinary Practices** – Sufficient information was collected in 55% (11 out of 20) of the assessments.
  - **Reviewer Comments:**
    - *Need information on types of behaviors that Hayden displays that she get's consequences for.*
    - *Need to include purpose for discipline for each child.*

- *Need to include information from children – what do they say about disciplinary practices.*
- *Address the purpose of discipline. When do the caregivers have to implement discipline...what behaviors are the children exhibiting? Include situations and detailed information in which the parent implements discipline for the child(ren).*
- *Address future discipline plans in assessments involving infants.*
- *Include information about patterns of discipline with older children.*
- **General Parenting** – Sufficient information was collected in 50% (10 out of 20) of the assessments.
  - **Reviewer Comments:**
    - *How does she feel about being a parent? Explain why her relationship with her children is lacking depth.*
    - *Assessment is lacking information about parenting style, skill and sensitivity to child's limits.*
    - *Include information about parenting satisfaction and expectations.*
    - *Include past parenting of children that may have been relinquished or terminated*
    - *Include information about family activities, family routine, and parental roles.*
    - *Include parenting for all individuals living in the home if they take role in caring for the children (i.e. live in boyfriend, grandparents living in the home and caring for the children).*

- **Adult Functioning** – Sufficient information was collected in 45% (9 out of 20) of the assessments.
  - **Reviewer Comments:**
    - *Worker states that there was no sign of any substance abuse, mental health issues, or domestic violence but does not provide supporting information about these. Include information for each adult's Mental Health, Domestic Violence and Substance Abuse (include corroborating statements or evidence to support statements made by parents regarding these issues).*
    - *Include relationship history, mother had a child with another man--was there DV present, visitation arrangements, etc?*
    - *The narrative states that Thomas is not allowed to be alone with Hayden per Julie. More information is needed on this and why he is not allowed to be alone with her.*
    - *Need to include information for ALL adults living in the home*
    - *Include information about community or family supports, employment and financial supports.*
    - *Talk about the nature of adult relationships within the home (marriage and other relationships).*

#### **Collateral Source (Chart 5):**

- 17 out of the 20 assessments indicated that information should have been collected from a collateral source. Collateral information was collected in 71% or 12 out the 17 assessments.
  - **Reviewer Comments:**
    - *Incorporate the information gained from collaterals into the assessment.*
    - *Information was not obtained from collateral contacts to corroborate statements made by caregivers in the assessment.*

### **Maternal/Paternal Relatives (Chart 5):**

- Maternal relatives were identified in 55% of the assessments (11 out of 20).
- Paternal relatives were identified in 60% of the assessments (12 out of 20).
  - **Reviewer Comments:**
    - *Documentation needs to contain at a minimum first name, last name, and location (city & state). Include in documentation parents' refusal to provide extended family information during assessment.*

### **ICWA (Chart 5):**

- Information regarding ICWA was obtained in 80% of the assessments (16 out of 20).
  - **Reviewer Comments:**
    - *Workers need to utilize the kinship narrative and include a statement as to how ICWA information was obtained by CFS Specialist. For example: If a worker states that ICWA does not apply to family or N/A, the worker needs to include a statement of how the worker learned that it did not apply.*
      - Good examples include:
        - *Per mother/name and father/name child does not meet criteria for ICWA because of the following reason.*
        - *Father was asked about enrollment or qualification he may meet in Native American Tribe in which he denied eligibility for him or his son.*
        - *According to (parents/name), no Native American Tribal heritage exists within the family.*

### **Impending Danger (Charts 4 & 6):**

**Impending Danger at the initial contact with the youth and/or family (Chart 4):** The worker identified impending danger at the initial contact with the child and family in 40% or 8 out of the 20 reviewed assessments. **The reviewer agreed with the worker's decision in 65% or 13 out of the 20 reviewed assessments.**

- *Reviewer disagreed with the worker in 7 of the assessments in which the worker indicated that there was NO impending danger at the initial contact with the child and family. The reviewers determined that there was **not enough information** in the assessment to make a determination of whether or not impending danger was present at worker's initial contact with the child and/or family.*

**Impending Danger at the end of the Initial Assessment (Chart 6):** The worker identified impending danger at the end of the initial assessment in 8 out of the 20 cases reviewed. Reviews of all 20 assessments indicate the following:

- 9 out of 20 (45%) of the reviewed assessments contained sufficient information to provide a reasonable understanding of family members and their functioning.
- 10 out of 20 (50%) of the reviewed assessments contained sufficient information to support and justify decision making.
- 10 out of 20 (50%) of the reviewed assessments contained sufficient information in the six domains to accurately assess all 14 safety factors.
- Safety threats were identified in 40% or 8 out of 20 of the reviewed assessments.
  - The reviewer agreed with the worker on all of the safety factors identified “yes” in 88% of these assessments (7 out of 8 instances).
    - Within the safety factors identified “yes”, 7 out of 8 (88%) contained threshold documentation for identification/justification of impending danger.

**Reviewer Comments:**

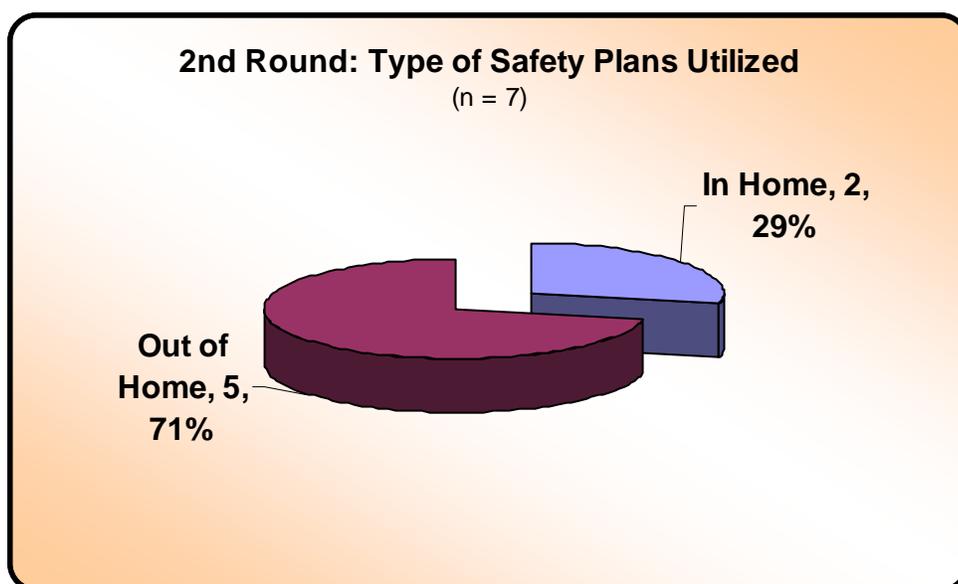
- *Regarding Safety factor #1: Concerned with identification of Safety threat #1- as the parents do appear to admit some level of DV in the home. Explanation is geared towards injury of parent and not to the child. Threat #13 would appear to fit better with the DV issues in the home. Threat #8 has same explanation as Threat #1 (Cut and Paste)*
- The reviewer agreed with the worker on all of the safety factors identified “no” in 40% or 8 out of all 20 assessments reviewed.
  - *The reviewers determined that there was **not enough information** in 12 of the assessment to accurately assess all 14 safety factors.*
- Safety Assessment Conclusion:
  - The worker determined that the child was UNSAFE at the conclusion of the safety assessment in 8 out 20 (40%) of the reviewed assessments. The reviewer agreed with the worker’s decision that the child was UNSAFE in all 8 assessments (100%).
  - The worker determined that the child was SAFE in 12 out of 20 (60%) of the reviewed assessments.
    - The reviewer agreed with the worker’s decision that the child was SAFE in 25% or 3 out of these 12 assessments.
    - The reviewer disagreed with the worker’s decision that the child was SAFE in 75% or 9 out of these 12 assessments.
      - *The reviewers determined that information in these 9 assessments was **not sufficient** to make a determination of safety (impending danger).*

**Note: Although there was not enough information to make a determination of impending danger, these Safety Assessments did not rise to the level of Service Area Administrator notification.**

**Safety Plan (Charts 7 & 8):** The worker determined that the child was unsafe in 40% or 8 out of the 20 reviewed assessments. **However, safety plans were established at the conclusion of the safety assessment in only 7 out of the 8 assessments (88%).**

- *Reviewer noted that in one of the cases in which worker indicated that a child was unsafe that a finalized safety plan was found on N-FOCUS however was not assessed as it listed the same statement in all areas of the safety plan: (This is being created so that the initial safety assessment can be completed. Worker Name will be completing a combination safety plan once the safety assessment is closed a new safety plan can be completed).*
- 29% or 2 out of 7 of the safety plans were in home safety plans.
  - A reviewer indicated that the worker should have considered utilizing an out of home safety plan in one case in which an in of home safety plan was utilized.
    - **Reviewer Comment:** *Child care services may have been appropriate for portion of day since father may become unemployed making it difficult to continue monitoring all hours of the day.*
- No combination safety plans were utilized.

- 71% or 5 out of 7 of the safety plans were out of home safety plans.
  - A reviewer indicated that the worker should have considered utilizing an in home safety plan in one case in which an out of home safety plan was utilized.
    - *Reviewer Comment: The safety plan says that Allen was living in an unclean home, however, information to support this was not provided in the safety assessment. If he was removed only due to the failure to follow through on doctor appointments and failure to put on medication daily, somebody could have come into the home daily to help with this and ensure that it was getting done. James and Shirley could have also been responsible for helping Daniel and Kayla get the infant to appointments.*



- 14% or 1 out of 7 safety plans completed contained a sufficient contingency plan.

**Examples of sufficient contingency plan:**

*Note: The intent of having a sufficient contingency plan is to have workers think ahead, anticipate situations that might come up and make a plan to deal with them. A good contingency plan is an actual backup plan with names and information of individual(s) that will take over or complete safety actions if the original safety plan participant is unable to do so. A good contingency plan is one that can prevent the need for immediate caseworker notification or action.*

**For Out of Home Safety Plans:**

1.) If (NAME) approved relative provider is unable to care for the (child/youth), the relative care provider will contact the child's caseworker and the child will be placed with (NAME) another identified and approved relative provider.

2.) If (NAMES) foster parents are unable to care for the (child/youth), the foster parents will contact the child's caseworker and the child will be placed with (NAME) identified respite care provider or (NAME) identified traditional or agency foster care provider.

### **For IN Home Safety Plans:**

1.) If (NAME) relative safety plan provider is unable to be at (NAME) family home as expected from 4-6pm. Then (NAME) will contact (NAME) another relative safety plan participant who will substitute for them during that time. If both are unavailable due to a family emergency then (NAME) the pastor's wife will substitute for them during that time.

2.) If (NAME) a contractor providing safety services for the family is unable to do what they agreed to do, they will notify the caseworker and (NAME) another safety service contractor will be utilized.

### **Examples of insufficient contingency plan:**

- 1) *The placement unit will need to find another placement.*
- 2) *Child will be made a state ward and placed into foster care.*
- 3) *This is an out of home safety plan and there is not a need for a backup plan.*
- 4) *The assigned caseworker should be contacted.*
- 5) *Their designee will take over*
- 6) *None*

- 71% or 5 out of 7 of the safety plan contained sufficient information to support the decision made with regards to suitability of safety plan participants.
  - **Reviewer Comments:** *Need to ensure suitability is completed for ALL participants including two-parent foster families, providers and informal supports. Include background checks on suitability.*
- All safety plans addressed who was going to make sure the child was protected (100%).
- All safety plans addressed what action is needed (100%).
- 86% or 6 out of 7 safety plans addressed where the plan and action are going to take place.
- 43% or 3 out of 7 safety plans addressed when the action will be finished.
  - **Reviewer Comments:** *Safety plans must be reviewed with the family on a timely basis even if there are no changes in the family situation. It is important to have the family's continued agreement to follow the safety plan, so please be sure to have an end date and to talk with the family when the plan is updated.*
- 71% or 5 out of 7 safety plans addressed how it is all going to work and how the actions are going to control for safety.
- 14% or 1 out of 7 of the safety plans contained caregiver promissory commitments.  
*(Note: This question uses a reverse scale: Lower number is better as we do not want the safety plans to contain caregiver promissory commitments).*
  - **Reviewer Comment:**
    - *The safety plan relies on mom to take the children and leave the home if dad is intoxicated and if he becomes angry to the point that it is affecting the children.*
- 29% or 2 out of 7 safety plans involved in home services.
- While all 16 safety plan forms addressed the oversight question, only 29% or 2 out of 7 safety plans contained sufficient oversight requirements to assure that the plan was implemented in accordance with expectation and was assuring child safety.
  - **Reviewer Comments:** *Please note that per policy, the-safety plan must be monitored no less than once a week prior to the completion of the assessment and monitoring should involve face to face contact with the child and family and phone calls to safety plan participants. Many of the safety plans did not include detailed information about frequency and type of contact with youth and or family.*

- When applicable, each of the 7 safety plans were adjusted by the worker when threats increased or decreased

**Protective Capacity Assessment (Chart 9):**

- At the time of the reviews, none of the 8 applicable assessments contained a finalized copy of the Protective Capacity Assessment (PCA).
  - **Reviewer Comments:** *As a reminder, the begin date for the PCA is to be within 7 days of the completion of the safety assessment. The PCA should be completed and documented on N-FOCUS within 60 days of initial custody date or 60 days from the begin date of the initial safety assessment, which ever is sooner.*

**Conditions of Return (Chart 9):**

- At the time of the reviews, none of the 5 applicable assessments included a finalized copy of the Conditions of Return.
  - **Reviewer Comments:** *Conditions of Return are to be started for all children likely to be out of the home longer than 30 days as soon as we know enough about the family to make decisions (this usually means the PCA has been started) and when the family has begun making changes and demonstrating that they are going to make progress. It needs to be completed and documented on N-F within 60 calendar days of removal.*

**NOTE:** *The QA tool does not assess whether or not the worker met their time frame in documenting the PCA or the Conditions of Return on N-FOCUS. The QA team only reviews the quality of the PCA and the Conditions of Return if it is finalized on N-FOCUS at the time of the review.*

## SUMMARY

Data collected from 2<sup>nd</sup> Round of reviews in the WSA\*B indicated the following:

### Strengths:

- \* 100% of the time the reviewer agreed with the worker's assessment of Present Danger.
- \* 100% of the time the reviewer agreed with the worker's determination that the child was UNSAFE.
- \* 100% of the time workers interviewed all maltreating caregivers.
- \* 100% of the time workers interviewed other adults in the home.
- \* 100 % of the time the safety plan addressed "WHAT"
- \* 100 % of the time the safety plan addressed "WHO"
- \* 88% of the time the worker interviewed all non-maltreating caregivers
- \* 88% of the time worker interviewed all other children in the household.
- \* 88% of the time the reviewer's agreed with the worker's identification of safety threats.
- \* 88% of the time the worker provided sufficient justification for each threshold criteria when identifying safety threats.

While there continues to be a need for improvement in the other areas that were assessed, a comparison of the data collected from Rounds 1 and 2 of QA reviews indicate the following:

### Areas showing an increase in percentage achieved:

#### Initial Response:

- Initial contact was made with all child victims within required timeframe.
- All other children in the household were interviewed.
- Other adults in the household were interviewed.

#### Present Danger/Protective Action

- Reviewer agreed with the worker's assessment of present danger.

#### 6 Domains/Collateral Info/Identification of Relatives/ICWA

- Sufficient information was gathered in the Maltreatment section.
- Sufficient information was gathered in the parenting discipline section.
- Sufficient information was gathered in the adult functioning section.
- Collateral information was collected when necessary.
- ICWA information was obtained.

#### Safety Evaluation

- Reviewer agrees with the worker that child is UNSAFE.
- Reviewer agrees with worker on safety threats – safety factors marked "YES"
- Documentation contained justification for identification of impending danger (threshold criteria).

#### Safety Plan:

- Suitability of safety plan participant(s) contained sufficient information.
- Safety plan addressed "WHO"
- Safety plan addressed "WHAT"
- Safety plan addressed "WHERE"
- Safety plan addressed "WHEN"
- Safety plan addressed "HOW"
- Safety plan involved in home services.
- Safety plan ran continuously as long as safety threats are present.
- Safety plan adjusted as threats increased or decreased.
- **Please note that there was an increase in percentage for the following items --- However, an INCREASE in percentage is NOT desirable for these items.**
  - An in home safety plan was not utilized but should have been considered/utilized.
  - A combination safety plan was not utilized but should have been considered/utilized.

## Areas showing a **decrease** in percentage achieved:

### Initial Response:

- Non -maltreating caregiver was interviewed.
- Interview protocol was followed and if not followed, there was documentation on the reason for the deviation.

### Present Danger/Protective Action

- The numbers decreased for all other questions related to protective action due to the fact that there were two assessments in which the worker identified present danger, but only one of those assessments had an Immediate Protective Action plan documented on N-FOCUS.

### 6 Domains/Collateral Info/Identification of Relatives/ICWA

- Sufficient information was gathered in the nature section.
- Sufficient information was gathered in the child functioning section.
- Sufficient information was gathered in the general parenting section.
- Sufficient information was gathered in the adult functioning section
- Worker identified maternal relatives

### Safety Evaluation

- Sufficient information – provide understanding of family members & their functioning.
- Sufficient information – justify decision making
- Sufficient information – to assess ALL 14 safety factors.
- Reviewer agrees with worker on safety factors “NO”
- Reviewer agrees with the worker that the child is SAFE.

### Safety Plan:

- Safety plan contained a sufficient/appropriate contingency plan.
- Safety plan included a sufficient plan for oversight
- Overall safety plan was judged by reviewers to be appropriate.
- **Please note that there was a decrease in percentage for the following item--- However, an DECREASE in percentage is DESIRABLE since we don't want the safety plans to contain promissory commitments.**
  - The safety plan contained promissory commitments.

## Other Comments:

### ▪ **Protective Capacity Assessments & Conditions of Return:**

*The QA tool does not assess whether or not the worker met their time frame in documenting the PCA or the Conditions of Return on N-FOCUS. The QA team only reviews the quality of the PCA and the Conditions of Return if it is finalized on N-FOCUS at the time of the review.*

- \* **Rounds 1 & 2:** There were no finalized PCA or Conditions of return found on N-FOCUS at the time of the reviews.

### ▪ **Supervisory Checklist Review:**

The reviewers also assessed the case using the same questions included in the Supervisory Review Checklist in the Assessment. The results of these reviews can be found in **Table 1** in the attached excel document (*WSA-B Comparison Charts*).