## DHHS Division of Children & Family Services Eastern Service Area Quality Performance Scorecard

|   | Measure   | Definition  | State or Federal<br>Measure | Measurement<br>Period | Result           | Goal        | Most Recent<br>Month<br>Jul-21 | Narrative Update  | Jun-21 | May-21 | Apr-21   | Mar-21 | Feb-21 | Jan-21 |
|---|---|---|-----------------------------|-----------------------|------------------|-------------|--------------------------------|---|--------|--------|----------|--------|--------|--------|
| OUTCOMES  Measurements of the impact of   | Youth in Care Achieving Permanency<br>in 12 Months*         | Of all children who enter foster care in a 12-month<br>period, what percentage are discharged to permanency<br>within 12 months?  | Federal                     | Monthly               | Not meeting goal | ≥43.8%      | 32.4%                          |   | 33.2%  | 35.1%  | 34.7%    | 37.3%  | 36.8%  | 37.5%  |
|   | Re-Entry into Foster Care within 12<br>Months of Discharge* | Of all children who enter foster care in a 12-month<br>period who were discharged within 12 months, what<br>percentage reentered foster care within 12 months?  | Federal                     | Monthly               | Meeting goal     | ≤8.3%       | 5.2%                           |   | 5.6%   | 7.4%   | 6.9%     | 6.2%   | 3.7%   | 3.5%   |
| case management and services that indicate <u>safety</u> , <u>permanency</u> <u>and well-being</u> of children and families | Recurrence of Maltreatment*                                 | Of all children who were victims of a substantiated or indicated maltreatment report during a 12-month period, what percent were victims of another substantiated or indicated maltreatment report within 12 months of the initial victimization? | Federal                     | Monthly               | Meeting goal     | ≤7.9%       | 3.2%                           |   | 3.2%   | 3.8%   | 3.6%     | 3.6%   | 4.0%   | 3.8%   |
|   |   | Of all children in foster care during a 12-month period,<br>what is the rate of substantiated victimization per<br>100,000 days of foster care?   | Federal                     | Monthly               | Meeting goal     | ≤7.0        | 2.82                           |   | 2.82   | 2.63   | 2.63     | 2.51   | 2.49   | 2.12   |
|   |   |   |                             |                       |                  |             |                                |   |        |        |          |        |        |        |
|   | Placement Stability*  | Of all children who enter foster care in a 12-month period, what is the rate of placement moves per 1,000 days of foster care?  | Federal                     | Monthly               | Meeting goal     | ≤4.12       | 3.9                            |   | 3.66   | 3.54   | 3.42     | 3.41   | 3.27   | 3.30   |
|   | Licensed Homes  | What percentage of foster homes with a placement are licensed?  | State                       | Monthly               | Not meeting goal | Improvement | 52.5%                          | SFM has slight improvement towards meeting this goal.   | 48.9%  | 43.8%  | 42.3% ** | 52.0%  | 53.0%  | 53.0%  |
|   | Average Caseload Ratios                                     | What percentage of average monthly caseload ratios are in compliance with statutory guidelines (ongoing cases only)?  | State                       | Monthly               | Not meeting goal | 100%        | 35.3%                          | SFM is currently on a corrective action<br>plan for this measure. A hiring plan is in<br>place with weekly reporting<br>requirements.   | 31.8%  | 38.0%  | 44.1%    | 44.0%  | 47.1%  | 52.8%  |
|   | Case Plans Created within 60 Days                           | What percentage of case plans or prevention plans are created within 60 days of a child entering care?  | State                       | Monthly               | Not meeting goal | 95%         | 75.5%                          | SFM is currently on a corrective action plan for this measure.  | 89.9%  | 78.4%  | 87.3%    | 93.9%  | 97.3%  | 86.3%  |
| ACTIVITIES & OUTPUTS  Measurements of actions and   | Placement Updated within 72 Hours                           | Of all children placed out of home the preceding month, what percentage of placements were documented within 72 hours?  | State                       | Monthly               | Not meeting goal | 98%         | 82.0%                          | SFM is currently on a corrective action plan for this measure.  | 80.4%  | 85.3%  | 90.5%    | 89.9%  | 84.2%  | 79.2%  |
| standards of <u>quality case</u> <u>management</u> that contribute to positive outcomes for children and families           | Monthly Face to Face Contact with<br>Youth                  | Of all court and non-court cases, what percentage had at least one face to face visit with their caseworker?  | Federal                     | Monthly               | Meeting goal     | 95%         | 96.6%                          | SFM is currently on a corrective action plan for this measure. SFM continues to increase in performance for this measure. July's performance exceeded goal for the first time.        | 93.6%  | 84.5%  | 89.0%    | 92.8%  | 93.0%  | 91.5%  |
|   |   | Of all children in foster care, what percentage had a family team meeting held on their behalf?   | State                       | Monthly               | Not meeting goal | 95%         | 58.4%                          | SFM needs to focus on ensuring monthly family team meetings occur to support family/child voice and choice in their case plan and service delivery. Performance continues to decline. | 61.0%  | 61.1%  | 63.6%    | 66.6%  | 67.5%  | 67.0%  |
|   | Sibling Placement   | Of all children in foster care with at least one sibling also in foster care what percentage are placed with a sibling?   | State                       | Monthly               | Not meeting goal | >79.5%      | 78.4%                          | SFM has been experiencing a decrease in this metric over recent months but remains close to goal.   | 79.0%  | 79.2%  | 79.3%    | 78.6%  | 80.4%  | 80.0%  |

|  | Relative/Kinship Placement | Of all children in foster care what percentage are placed with a relative or kin? | State | Monthly | Meeting goal | >58.7% | 60.2% | 60.5% | 60.8% | 61.0% | 62.0% | 60.6% | 60.3% |
|--|----------------------------|---|-------|---------|--------------|--------|-------|-------|-------|-------|-------|-------|-------|

<sup>\*</sup>Child and Family Services Review (CFSR) Round 3 Federal Indicators

\*\*This metric has changed to reflect children in emergency approvals where the end date of the approval has passed.

All federal measures are further defined by the Children's Bureau of the US Department of Health & Human Services, Administration for Children & Families:

Child and Family Services Review data indicators

## DHHS Division of Children & Family Services Eastern Service Area Contract Compliance Dashboard

|   |   |                       |   | contract compliance basinboard   |                            |  |
|---|---|-----------------------|---|--|----------------------------|--|
|   |   | Subaward<br>Reference | Area of Contract<br>Compliance                | Expectations   | Status<br>(08/26/21)       | Narrative Update<br>(08/26/21)   |
|   | 1 | Section 4<br>Page 2   | Maintain average cost per child               | SFM's average cost per child must be less than 5% over the average cost per child incurred by DHHS throughout the rest of the state. Calculations will be reviewed by DHHS and SFM every six months, beginning 11/1/21.  | Evaluation forthcoming     | N/A: First evaluation period 5/1/21 - 10/31/21.  |
|   | 2 | Section 8<br>Page 4   | Diligent recruitment of foster/adoptive homes | SFM must provide a plan for diligent recruitment of foster and adoptive families that reflect ethnic and racial demographics by 6/30 of each year.   | In compliance              | First plan due 6/30/21; received on 7/19/21.   |
| CONTRACT COMPLIANCE Status of key deliverables outlined in the Saint Francis Ministries | 3 | Section 8<br>Page 5   | Federal IV-E<br>claiming                      | SFM shall develop and implement an annual monitoring plan that addresses oversight and accountability of accurate federal funding (Title IV-E) eligibility. This plan is due for review and prior approval by 7/1 of each year.  | In compliance              | SFM submitted the plan 7/1/21.   |
| subaward executed on<br>January 29,2021   | 4 | Section 8<br>Page 5   | Caseload reporting                            | SFM shall report on their weekly caseload trend and the monthly report is due by the 5th day of each month. The quarterly report is due the 15th day following the quarter and the annual report is due each January 31.   | In compliance              | SFM reported weekly trend late for July.<br>(Caseload ratio compliance reported in on<br>monthly scorecard.)   |
|   | 5 | Section 8<br>Page 6   | Court performance                             | SFM shall submit the Court Report and Case Plan at least five business days prior to a hearing in the manner requested by the court. SFM shall submit the court Report and Case Plan to the assigned DHHS Attorney or designee at least six business days prior to the hearing. This will be monitored by SFM and DHHS through existing tracking mechanisms used in other Service Areas.   | CFS actively<br>monitoring | DHHS reviews weekly sampling of performance by DHHS courtroom attorneys reporting on attendance and preparation by caseworkers and timely submission of court reports. There is no significant change in performance in this area at this time.  |
|   | 6 | Section 8<br>Page 6-7 | Licensing of relative/kin foster homes        | SFM will submit a foster care license packet for relative/kin foster homes who are currently (as of 1/29/21) unlicensed and have children in placement by 7/1/21. Further, SFM will ensure: a. At least 40% of all ESA relative/kin homes must meet foster care home licensing requirements within 20 weeks of placement. b. The remaining < 60% of homes must meet licensing requirements, as evidenced by documentation submitted to DHHS, within 24 (twenty-four) weeks of placement. DHHS will use existing Foster Care Licensing tracking mechanisms to monitor progress. | Not in compliance          | SFM is not meeting 100% of this measure for relative/kin homes being licensed within 20 weeks of placement. SFM and DHHS continue to have weekly discussions. DHHS is considering corrective action.  SFM is piloting the implementation of provisional licensure for foster care. DHHS and NFAPA has approved relative and kinship foster parent trainings developed by SFM and Boystown to be piloted in the ESA.* |

| 7  | Section 8<br>Page 8   |  | SFM must develop and publish a FFPSA service referral guide. The initial guide shall be developed and made available within 90 days of Subaward execution, and updates shall made quarterly and available on SFM's website.  | In compliance                                       | SFM posted the referral guide on the Saint<br>Francis Ministries Nebraska website.  |
|----|---|--|--|---|---|
| 8  | Section 8<br>Page 9   | Qualified<br>Residential<br>Treatment Program<br>procurement | SFM will procure at least one QRTP, as defined by the FFPSA, which should be physically located in Douglas County or Sarpy County, unless granted an exception to establish the QRTP elsewhere. This will be monitored by DHHS through the FFPSA implementation plan.  | CFS actively<br>monitoring                          | SFM issued an RFQ for QRTP but SFM did not receive any responses.   |
| 9  |   | Background check compliance                                  | SFM shall provide a plan within 30 days of Subaward execution to come into compliance with background check and E-Verify requirements that will provide points of completion, processes necessary to complete the required elements of the plan, and regular reports that indicate areas of completion.  | In compliance                                       | DHHS completed a file audit on June 29-30, 2021. SFM is 100% in compliance with E-verify and background check requirements for new staff hired since implementation of the CAP.   |
| 10 | Section 8<br>Page 10  |  | If SFM fails to meet the Scope of Work or violates any term in the Subaward, DHHS may require the Subrecipient to complete a CAP. DHHS will establish the deadline(s) required for the CAP response. SFM must either respond to the CAP or request within said time period that the CAP be rescinded based on information provided to DHHS. Subrecipient shall have a senior level manager or executive overseeing each CAP.                                     | CFS actively monitoring                             | SFM has submitted Corrective Actions Plans for performance. For all active CAPs related to case management, action steps are being monitored.   |
| 11 | 391 NAC 8 -<br>Licensing Standards<br>for Child Placing<br>Agencies | Numerous   | To resolve deficiencies documented during a 2020 Child Placing Agency license renewal inspection by the DHHS Division of Public Health, SFM must submit information regarding numerous regulatory standards including: Finances, Administrative Records & Reports, Personnel, Foster Care Services, Preparation of the Child, Supervision of Placements and Agency Location Outside of Nebraska. The initial inspection report noted 25 regulatory deficiencies. | Division of Public<br>Health actively<br>monitoring | DHHS imposed disciplinary probation against the CPA license effective June 4, 2021. Probation has been extended. SFM is expected to demonstrate full compliance with licensing requirements no later than September 30, 2021. |