

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

| | Measure | Definition | State or Federal Measure | Measurement Period | Result | Goal | Most Recent Month Aug-21 | Narrative Update | Jul-21 | Jun-21 | May-21 | Apr-21 | Mar-21 | Feb-21 | Jan-21 |
|---|--|---|--------------------------|--------------------|------------------|-------------|--------------------------|--|--------|--------|--------|----------|--------|--------|--------|
| OUTCOMES Measurements of the impact of case management and services that indicate <u>safety, permanency and well being</u> of children and families | Youth in Care Achieving Permanency in 12 Months* | Of all children who enter foster care in a 12-month period, what percentage are discharged to permanency within 12 months? | Federal | Monthly | Not meeting goal | ≥43.8% | 30.0% | SFM has continuously not met this goal. There has been a decrease in the rate over the last several months. The higher the better for this measurement. | 32.4% | 33.2% | 35.1% | 34.7% | 37.3% | 36.8% | 37.5% |
| | Re-Entry into Foster Care within 12 Months of Discharge* | Of all children who enter foster care in a 12-month period who were discharged within 12 months, what percentage reentered foster care within 12 months? | Federal | Monthly | Meeting goal | ≤8.3% | 4.8% | SFM is meeting this goal. SFM has continued to decrease the rate for this measurement. The lower, the better. | 5.2% | 5.6% | 7.4% | 6.9% | 6.2% | 3.7% | 3.5% |
| | 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% | 4.3% | SFM continues to meet this goal, although a significant increase was seen from the previous month. The lower the better in this measurement. | 3.2% | 3.2% | 3.8% | 3.6% | 3.6% | 4.0% | 3.8% |
| | Maltreatment in Foster Care* | Of all children in foster care during a 12-month period, what is the rate of substantiated victimization per 100,000 days of foster care? | Federal | Monthly | Meeting goal | ≤7.0 | 2.47 | SFM continues to meet this goal. A slight decrease was seen in the rate of maltreatment in foster care for August. The lower the better in this measurement. | 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 | 4.06 | SFM has continuously met this goal; however, the trend line continues to increase, which is concerning as lower is better for this measurement. | 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 | 54.3% | SFM has been making small incremental improvements towards meeting this goal. | 52.5% | 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% | 44.9% | SFM is currently on a corrective action plan for this measure. A hiring plan is in place with weekly reporting requirements. | 35.3% | 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 | Meeting goal | 95% | 95.2% | Positive progress was made for this measure. In August, this target was met for the first time since February 2021. SFM is currently on a corrective action plan for this measure, which will remain in place at this time to ensure the goal is continuously met. | 75.5% | 89.9% | 78.4% | 87.3% | 93.9% | 97.3% | 86.3% |

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|---|--|---|---------|---------|------------------|--------|-------|--|-------|-------|-------|-------|-------|-------|-------|
| ACTIVITIES & OUTPUTS Measurements of actions and standards of <u>quality case management</u> that contribute to positive outcomes for children and families | 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% | 84.3% | Steady increases have been seen in this measure over the last 3 months; however, this target remains unmet. SFM is currently on a corrective action plan for this measure. Decline in SFM's performance was concerning, after months of steady improvement. DHHS reassumed the task of leading organizations July 1, 2021. | 82.0% | 80.4% | 85.3% | 90.5% | 89.9% | 84.2% | 79.2% |
| | Monthly Face to Face Contact with 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% | 96.9% | SFM continues to increase in performance for this measure and has exceeded the goal two months in a row. SFM is currently on a corrective action plan for this measure, which will remain in place at this time to ensure continuous achievement of the goal. | 96.6% | 93.6% | 84.5% | 89.0% | 92.8% | 93.0% | 91.5% |
| | Family Team Meetings Occurring Every Month | Of all children in foster care, what percentage had a family team meeting held on their behalf? | State | Monthly | Not meeting goal | 95% | 49.8% | 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. Corrective action plan may be considered for this measurement due to the continuous decline since the beginning of 2021, which is concerning. | 58.4% | 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% | 79.3% | SFM had been experiencing a decrease in this metric over recent months; however, a slight increase was seen from July to August. SFM remains close to goal attainment, but is not currently achieving it. | 78.4% | 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% | 59.6% | Although a decrease was seen for this measurement, SFM continues to meet this measurement goal. | 60.2% | 60.5% | 60.8% | 61.0% | 62.0% | 60.6% | 60.3% |

*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

| | Subaward Reference | Area of Contract Compliance | Expectations | Status (9/27/21) | Narrative Update (9/27/21) | |
|--|--------------------|-----------------------------|---|--|----------------------------|--|
| CONTRACT COMPLIANCE Status of key deliverables outlined in the Saint Francis Ministries subaward executed on January 29,2021 | 1 | Section 4 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 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. |
| | 3 | Section 8 Page 5 | Federal IV-E 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 | SF submitted the plan 7/1/21. |
| | 4 | Section 8 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 for August. |
| | 5 | Section 8 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. SF 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 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 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. SF 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 have approved relative and kinship foster parent trainings developed by SFM and Boystown to be piloted in the ESA.* |

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| | 7 | Section 8 Page 8 | Family First Prevention Services Act (FFPSA) service referral guide | 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 Francis Ministries Nebraska website. |
| | 8 | Section 8 Page 9 | Qualified Residential Treatment Program 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 monitoring | SFM issued an RFQ for QRTP but SFM did not receive any responses. |
| | 9 | Section 8 Page 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. DHHS will complete another file audit September 28-29, 2021. |
| | 10 | Section 8 Page 10 | Corrective Action Plan (CAP) responsiveness | 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 - Licensing Standards for Child Placing Agencies | Numerous | To resolve deficiencies documented during a 2020 Child Placing Agency license renewal inspection by the DHHS Division of Public Health, SF 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 Health actively monitoring | Effective October 1, 2021, Saint Francis Ministries is operating under a probationary, restricted Child Placing Agency (CPA) license for 60 days. To ensure that the children and families of Nebraska receive the needed supports, the Division of Children and Families (CFS) will assume all new referrals in the ESA. The license probation ends November 30, 2021. |