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Eastern Region Response to Decline in Child and Family Assessment Performance June 2008

As noted in the Office of Services Review's report of the Eastern Region Qualitative Case Review (QCR) dated March 2008, there was marked decline in the Child and Family Assessment domain. The David C. exit agreement requires the following:

If data collected in the CPR or QCR demonstrate a marked decline in performance or if there is a material increase in caseloads, DHS shall provide an appropriate response to the marked decline in writing, which shall be available on the DHS website.

The Division of Child and Family Services and the Office of Services Review have analyzed several pieces of information and data to determine which factors contributed to the marked decline in performance in Child and Family Assessments. The analysis included review of stakeholder interviews, worker/supervisor interviews, administrative analysis at the regional and state office level, and discussions with the Office of Services Review. Based on the analysis, the following factors have been identified:

Factors identified in the QCR Report:

1. There is a marked decline in the Child and Family Assessment scores from last year.
2. The Office of Services Review noted that assessments were missing or incomplete, and information from assessments was not shared with the team members.
3. There are also concerns that the assessment information did not migrate to the Child and Family Plan, and was not used to develop a big picture focus of the underlying needs of the family.

Other factors identified:

1. Community partners had concerns about the low pay that caseworkers receive. Staff turnover, staff burnout, and challenges in recruiting staff are all noted as additional stressors identified in stakeholder interviews.
2. The cost of living has increased in the Eastern Region. This has affected the ability of the system to hire and retain caseworkers. It has also had a dramatic impact on the families we serve, and has greatly compromised the ability of the community in general to meet the increasing needs of families in crisis.
3. There is a general lack of foster homes close to where children and families reside.
4. Mental Health services are scarce, particularly in the area of children's mental health. Services generally are under powered and gathering Child and Family Assessment resources takes an inordinate amount of time.
5. Substance abuse issues continue to plague the region, and there is a lack of substance abuse services available.

Eastern Region Response: In an effort to address and improve performance, the Division proposes the attached action plan. The action plan will be monitored by the Regional and State Administrative Teams of the Division at least quarterly.

Eastern Region

Action Plan for Decline in Child and Family Assessment Performance

June 2008

Contributing Factor	Action Item	Responsible Party	Target Date for Completion
Staff Turnover (Recruitment and Retention)	<ol style="list-style-type: none"> 1. Vacancies will be announced and interviews conducted within 30 days whenever possible in an effort to fill vacancies and avoid caseload increases. 2. State Office will increase the incentive capitation from .5% to 1%. This will allow the region to recognize exceptional performance through cash incentives. 3. Regional QICs will continue to focus on employment retention and recruitment. They can provide support through caseworker recognition and enlisting community support around the agency. 4. DCFS will initiate cross-training of legal partners to improve understanding of the DCFS Practice Model, and the impact of the court process on workers. 5. Rural differential will be explored by the State Office. 6. The State Office will eliminate the outdated HSW test. 7. Caseworker Recognition luncheon will be held to improve worker retention and morale. 8. The Regional Director will conduct exit interviews with all departing employees. 	<ol style="list-style-type: none"> 1. Management Team 2. HR Tech 3. QIC 4. State Administrative Team 	<ol style="list-style-type: none"> 1. Ongoing 2. July 1, 2008 3. December 31, 2008 4. August 1, 2008 5. July 1, 2008 6. Completed May 1, 2008 7. June 19, 2008 8. Ongoing
Caseload Issues	<ol style="list-style-type: none"> 1. The region goal will be that supervisors not carry a caseload. 2. If turnover of caseworkers is at a high rate, the region will manage cases, as appropriate, utilizing the management team, other region staff resources, support from outside region resources, and support from the state management team, etc. 	<ol style="list-style-type: none"> 1. Management Team 2. State Administrative Team 	Ongoing
Quality of Assessments	<ol style="list-style-type: none"> 1. The Finishing Touches document will be completed by the Practice Improvement Team on all cases as they become due for a Child and Family Plan. 2. The Practice Improvement Team will evaluate the quality of the assessment, stability of the placement, long-term view for the family, inclusion of formal/informal team supports, and team composition. 3. The Practice Improvement Team will also evaluate the plan for transitions and examine permanency outcomes. 4. The Practice Improvement Team will submit its findings to the appropriate supervisor. A follow-up interview will be conducted by the Practice Improvement Coordinator (recently approved by the State and will be filled on or before June 30, 2008) to ensure that all 	<ol style="list-style-type: none"> 1. Practice Improvement Team (Milestone Coordinator, Practice Improvement Coordinator, Practice Improvement Manager, Practice Improvement Reviewer). 2. Management Team 3. Professional Development Team 	<ol style="list-style-type: none"> 1. Ongoing 2. Ongoing 3. Ongoing 4. Ongoing 5. September 2008 6. Ongoing 7. October 2008

Contributing Factor	Action Item	Responsible Party	Target Date for Completion
	<p>recommendations are completed.</p> <ol style="list-style-type: none"> 5. Supervisors will be trained to thoroughly understand the QCR review protocol. 6. Supervisors will request and review all updated Child and Family Assessments. 7. The Professional Development Team (State Office) will evaluate and, if appropriate, modify the Practice Model Training (Assessment Module) following the exit protocols for material changes. 		
Quality of Child and Family Team Meetings	<ol style="list-style-type: none"> 1. The Practice Improvement Team will attend Child and Family Team Meetings. They will review the quality of the meeting and give feedback to the caseworker and the supervisor. 2. The Practice Improvement Coordinator will review the timeliness and regularity of team meetings. Concerns will be relayed to the supervisor. 3. The supervisor will ensure that team meetings are done in a timely and regular manner. 4. The Professional Development Team (State Office) will assess and update the Practice Model Training as needed (Teaming Module) utilizing the exit agreement protocols for material changes. 5. The following tools will be required to be used by caseworkers on each case: <ul style="list-style-type: none"> “QCR” Packets - Folders LTV outlines Genograms Ecomaps Timelines CFTM Template – go back to this form Pre-teaming Staff meeting discussions: “How are we teaming?” and “How to Manage Conflict.” 	<ol style="list-style-type: none"> 1. Practice Improvement Team (Milestone Coordinator, Practice Improvement Coordinator, Practice Improvement Manager, Practice Improvement Reviewer). 2. Management Team 3. Professional Development Team 	Ongoing
Community Partnerships And Key Stakeholders	<ol style="list-style-type: none"> 1. Enlist support and assistance from Mental Health providers in the development of a common understanding of the Child and Family Assessment. 2. Ensure that Mental Health assessments are shared with the Child and Family Team in a timely manner. 3. Recruit Mental Health employees to be a part of the QIC (Eastern/Vernal). 4. The Regional Administrative Team will schedule and meet with Mental Health administrators throughout the region. 5. Issues concerning Child and Family Assessments will have a place on the agenda at every combined staff meetings (Mental Health, Schools, 	<ol style="list-style-type: none"> 1. Management Team 2. Executive Team 3. Caseworkers 	<ol style="list-style-type: none"> 1. Ongoing 2. Ongoing 3. July 1, 2008 4. August 2008 5. Ongoing 6. August 2008 7. Ongoing 8. September 2008 9. October 2008

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	Courts, JJS). 6. Continue to attend LIC and focus on strategies to improve Child and Family Assessments (Moab). 7. The Agenda for the Table of 6 Meetings will include a discussion on the issues of Child and Family Assessments (train, discuss issues, and plan). 8. Sponsor an immersion specifically focused on Substance Abuse and Mental Health providers. 9. Plan and implement a strategy to provide information around Child Welfare to the local Chambers of Commerce.		