

UTAH DIVISION OF CHILD AND FAMILY SERVICES



Quarterly Report—Performance & Outcomes

4th Quarter FY08



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Supervisor Finishing Touches

The Division of Child and Family Services, along with the Office of Services Review, conduct annual Qualitative Case Reviews (QCR) in each region of the state to measure Child and Family Outcomes and System Status on Home-Based and Foster Care Cases. To assist in improving target areas, the Division has a supervisory review process called “Supervisor Finishing Touches”. Supervisors regularly review selected cases of their workers and enter the results in a form in SAFE, marking any follow-up action needed. Below are the results of the most recent Finishing Touches reviews for foster care and home-based cases served during the last quarter. The goal on these items is 70%, consistent with the QCR goal. The Program Improvement Team is currently assessing whether to modify this tool to improve its utility.

Supervisor Finishing Touches - Foster Care																	
Foster Care		Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q11	Q12	Q13	Q14	Q15	Q16	Q17	Q18
4/1/08 to 6/30/08	Number of cases reviewed	CFTM Frequency	Members of CFT	CFTM conducted	CFA includes assessments	CFA picture of family	CFA describes family	CFA identifies wants and needs	CFA good grammar	Plan flows from CFA	Plan has needs statements	Next transition identified	Visitation in written plan	LTV is in family voice	LTV is achievable	Steps to goal identified	LTV fits family situation
Northern	568	97%	75%	87%	92%	97%	97%	97%	97%	98%	98%	94%	96%	95%	95%	94%	95%
Salt Lake Valley	372	97%	69%	84%	73%	76%	77%	82%	92%	83%	83%	70%	81%	72%	77%	66%	75%
Western	133	95%	53%	56%	53%	67%	59%	67%	87%	69%	79%	54%	73%	62%	65%	63%	69%
Eastern	163	96%	86%	89%	93%	96%	96%	94%	95%	91%	94%	92%	92%	92%	93%	95%	91%
Southwest	66	100%	73%	77%	76%	80%	74%	80%	92%	88%	89%	74%	75%	83%	92%	94%	92%
State	1302	97%	72%	83%	82%	87%	86%	89%	94%	90%	91%	82%	68%	84%	87%	83%	86%
Goal		70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%

Below are the Home-Based Supervisor Finishing Touches Data. Green highlighting indicates that the region is meeting the goal for that question.

Supervisor Finishing Touches - Home Based																	
Home Based		Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q11	Q12	Q13	Q14	Q15	Q16	Q17	Q18
4/1/08 to 6/30/08	Number of cases reviewed	CFTM Frequency	Members of CFT	CFTM conducted	CFA includes assessments	CFA picture of family	CFA describes family	CFA identifies wants and needs	CFA good grammar	Plan flows from CFA	Plan has needs statements	Next transition identified	Visitation in written plan	LTV is in family voice	LTV is achievable	Steps to goal identified	LTV fits family situation
Northern	285	95%	59%	85%	88%	93%	91%	94%	96%	94%	97%	89%	89%	93%	94%	91%	92%
Salt Lake Valley	46	96%	61%	85%	87%	87%	80%	89%	98%	89%	91%	89%	86%	87%	87%	91%	87%
Western	58	81%	38%	53%	36%	47%	43%	40%	78%	48%	52%	36%	35%	45%	45%	40%	43%
Eastern	80	94%	65%	79%	78%	88%	80%	88%	93%	84%	86%	73%	88%	81%	89%	86%	90%
Southwest	27	89%	85%	93%	74%	93%	85%	85%	93%	93%	93%	89%	90%	81%	96%	93%	93%
State	496	93%	59%	80%	79%	86%	82%	85%	94%	87%	89%	80%	84%	84%	87%	84%	85%
Goal		70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%

Case Process Review Data

In addition to the QCR, an annual Case Process Review (CPR) is conducted to measure whether workers are, as much as possible, following Practice Guidelines and documenting their work in SAFE. The state is currently monitoring performance in this area in-between reviews by using (1) reports extracted from the SAFE information system, and (2) having regional teams and supervisors review cases and enter information in a CPR quality assurance (QA) form in SAFE for those areas where information cannot be extracted from the system or where there needs to be extra attention. For the CPR data charts you will see that some data elements are extracted from SAFE and some are extracted from the QA forms. Goals for these items vary from 85% to 90%. The discrepancy between the QA and the SAFE data may indicate either (1) workers are not documenting their efforts correctly even though they have done them, (2) the SAFE report programming needs to be checked, or (3) the QA data represents a small sample of cases and may not reflect overall performance. Additionally the SAFE extraction may not be able to account for exceptional circumstances that a case review may note. Below are the CPS CPR data.

CPS															
4/1/08 to 6/30/08	% Cases Reviewed/ Total Cases	A1 Timeliness	A2 Services	A3 Case Closure	B1 Victim interview	B2 Parents interviewed	B3 3rd party interview	B4 Unscheduled home visit	C1 P1 med exam	C2 Med neglect	D1 Findings based on facts	E2 48hr shelter visit	E3 Weekly shelter visits	E4 Info to shelter	E5 Inquire kin
Northern QA	9%		98%		97%	98%	98%	90%	NA	100%	99%	100%	75%	60%	67%
Northern SAFE	1422	87%		83%	91%	96%	88%	85%	NA	100%		91%	20%	97%	100%
Salt Lake Valley QA	7%		100%		100%	98%	99%	95%	0%	0%	99%	67%	100%	67%	100%
Salt Lake Valley SAFE	2078	90%		95%	96%	97%	95%	89%	NA	100%		87%	56%	60%	70%
Western QA	1%		100%		100%	100%	100%	100%	NA	NA	100%	100%	100%	100%	100%
Western SAFE	707	84%		90%	95%	93%	86%	78%	NA	100%		81%	40%	88%	94%
Eastern QA	14%		97%		100%	97%	100%	100%	86%	NA	98%	100%	100%	100%	67%
Eastern SAFE	359	87%		88%	89%	95%	83%	88%	NA	100%		83%	50%	100%	100%
Southwest QA	31%		94%		99%	96%	97%	89%	NA	NA	97%	100%	50%	100%	83%
Southwest SAFE	638	89%		94%	91%	96%	83%	86%	NA	100%		80%	33%	80%	87%
State QA	10%		96%		99%	97%	98%	91%	75%	33%	98%	93%	77%	82%	80%
State SAFE	5204	88%		91%	93%	96%	90%	86%	NA	100%		86%	42%	76%	83%
Goal		90%	90%	90%	90%	90%	90%	90%	90%	90%	85%	85%	85%	85%	85%

r_cps_cl_cpr_qaform_regoff, r_cps_cl_cpr_summary_regoff, r_cps_cl_cpr_universe_general in CPS.pbl

Below are data on CPS Unable to Locate Cases. Currently summary information is only available from the QA forms. SAFE detail reports are available and the Division is working on the programming for a summary report from the SAFE system.

The state Program Improvement Team (PIT) and the regional program improvement coordinators investigate areas on these reports where performance is low and do follow-up with workers and regions to ensure documentation is accurate and do training where necessary with a goal of improving performance.

CPS Unable to Locate						
		UTL1	UTL2	UTL3	UTL4	UTL5
4/1/08 to 6/30/08						
Northern QA		100%	NA	NA	100%	NA
Northern SAFE						
Salt Lake Valley QA		71%	80%	67%	83%	100%
Salt Lake Valley SAFE						
Western QA		NA	NA	NA	NA	NA
Western SAFE						
Eastern QA		NA	NA	NA	NA	NA
Eastern SAFE						
Southwest QA		NA	NA	0%	0%	0%
Southwest SAFE						
State QA		82%	80%	57%	75%	83%
State SAFE						
Goal		90%	90%	90%	90%	90%

Below are the home-based CPR data. The PIT team is working to investigate why involvement in planning is lower. They have discovered some issues related to absent documentation and some related to having multiple parents in a family and not including all of them. The training team is currently working to develop a purposeful visiting handbook and training that will be delivered to the regions in the future.

Home Based Cases											
		1	2	4.A1	4.A2	4.B	4.C	6	7	7	7
4/1/08 to 6/30/08	% Cases Reviewed/ Total Cases	Current plan	Initial plan on time	Mother involved	Father involved	Stepparent involved	Child involved	Services initiated	Visit month 1	Visit month 2	Visit month 3
Northern QA	22%	88%	86%	96%	77%	82%	81%	99%			
Northern SAFE	365	92%	83%	42%		71%	39%		94%	91%	86%
Salt Lake Valley QA	15%	93%	85%	98%	72%	100%	100%	100%			
Salt Lake Valley SAFE	398	96%	89%	75%		83%	65%		90%	84%	82%
Western QA	20%	95%	68%	74%	53%	57%	53%	92%			
Western SAFE	202	90%	72%	77%		89%	65%		95%	88%	83%
Eastern QA	10%	89%	97%	94%	93%	71%	67%	95%			
Eastern SAFE	191	99%	77%	47%		88%	38%		96%	92%	89%
Southwest QA	28%	83%	53%	79%	55%	89%	47%	96%			
Southwest SAFE	127	98%	64%	59%		100%	61%		95%	89%	90%
State QA	18%	90%	79%	90%	69%	79%	71%	97%			
State SAFE	1283	94%	82%	60%		84%	54%		93%	88%	85%
Goal		85%	85%	85%	85%	85%	85%	85%	85%	85%	85%

Foster Care CPR data is displayed on the next four pages. Of all cases served during the past six months, 36 to 61% have had a review done and entered in the SAFE system.

Below is the information on placement decision making. Note that on the question regarding proximity to parents, the QA question reviews whether caseworkers considered proximity to parents when making the placement decision. The SAFE data indicates if the child is currently placed in proximity to their parents. Lack of available foster parents may impact the ability of workers to place children close to their families, especially in rural regions. The PIT team has been investigate causes for the low scores on info to provider and found out that information is usually given by the regional Resource Family Consultants (RFCs) who did not have access to document it in the case. They are working to grant access to the RFCs so that they will be able to document this in the future.

Foster Care Cases - Placement					
		I.A.2	I.A.3	I.A.4	I.A.5
1/1/08 to 6/30/08	%Cases Reviewed Total Cases	Locate kin	Special needs	Proximity to parents	Info to provider
Northern QA	37%	97%	98%	96%	95%
Northern SAFE	760	89%		79%	35%
Salt Lake Valley QA	36%	86%	97%	95%	71%
Salt Lake Valley SAFE	1172	66%		89%	40%
Western QA	37%	78%	95%	91%	43%
Western SAFE	535	72%		73%	17%
Eastern QA	45%	77%	100%	93%	79%
Eastern SAFE	276	82%		58%	27%
Southwest QA	61%	81%	83%	87%	61%
Southwest SAFE	272	92%		71%	24%
State QA	40%	86%	95%	93%	72%
State SAFE	3015	76%		79%	32%
Goal		85%	85%	85%	85%

r_scf_sv_cpr_summary_plcmt_plnng_regoff, r_scf_cpr_qaform_regoff, r_scf_sv_cpr_universe in SCF.pbl

Below are foster care data on initial, annual, and follow-up health, mental health, and dental activities. The SAFE team, data unit, PIT team, and Fostering Healthy Children (FHC) are working to improvement documentation and extraction processes for reporting. QA review indicates performance close to the goal in meeting children’s health care needs. The PIT team and FHC are also looking at performance by placement providers and workers.

Foster Care Cases - Health							
		II.1	II.2	II.3	II.4	II.5	II.6
1/1/08 to 6/30/08	% Cases Reviewed Total Cases	Initial or annual health	Health followup	Initial or annual mental health	Mental health followup	Initial or annual dental	Dental followup
Northern QA	37%	97%	90%	95%	92%	92%	90%
Northern SAFE	760	90%		85%		89%	
Salt Lake Valley QA	36%	88%	84%	88%	95%	84%	86%
Salt Lake Valley SAFE	1172	79%		77%		83%	
Western QA	37%	87%	67%	65%	71%	76%	77%
Western SAFE	535	83%		74%		88%	
Eastern QA	45%	89%	85%	91%	87%	90%	75%
Eastern SAFE	276	84%		80%		90%	
Southwest QA	61%	83%	70%	78%	74%	82%	86%
Southwest SAFE	272	78%		70%		88%	
State QA	40%	89%	81%	84%	87%	85%	84%
State SAFE	3015	83%		78%		87%	
Goal		85%	85%	85%	85%	85%	85%

SCF CPR data on case planning is below. The PIT team has been investigating the low involvement in planning and has discovered that workers frequently do not correctly document their efforts in involving parents in planning. The training team is also working on a purposeful visiting curriculum to train workers.

Foster Care Cases - Planning											
		III.2	IV.A.1	IV.A.2	IV.A.3mo	IV.A.3fa	IV.A.3sp	IV.A.3.ch	IV.A.5	IV.A.6	IV.A.7
1/1/08 to 6/30/08	% Cases Reviewed/Total Cases	Ed assessment	Current plan	Initial plan on time	Mother involved	Father involved	Stepparent involved	Child involved	Services initiated	Opportunity for weekly parent visits	Opportunity for sibling visits
Northern QA	37%	87%	93%	80%	91%	76%	69%	95%	99%	96%	94%
Northern SAFE	760		89%	80%	57%	34%	35%	74%			
Salt Lake Valley QA	36%	81%	90%	82%	77%	52%	49%	91%	97%	92%	88%
Salt Lake Valley SAFE	1172		93%	87%	69%	49%	33%	79%			
Western QA	37%	81%	81%	61%	62%	38%	21%	80%	97%	84%	83%
Western SAFE	535		94%	85%	71%	39%	30%	79%			
Eastern QA	45%	85%	93%	71%	67%	45%	18%	91%	95%	79%	85%
Eastern SAFE	276		94%	94%	63%	48%	40%	82%			
Southwest QA	61%	63%	93%	71%	62%	37%	33%	70%	91%	87%	83%
Southwest SAFE	272		93%	86%	63%	44%	33%	88%			
State QA	40%	81%	90%	75%	73%	50%	40%	87%	97%	89%	87%
State SAFE	3015		92%	79%	65%	42%	34%	79%			
Goal		85%	85%	85%	85%	85%	85%	85%	85%	85%	85%

Division performance on meeting the required visits in foster care are indicated below. All visit data is extracted from the SAFE system.

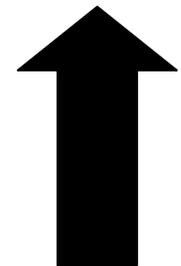
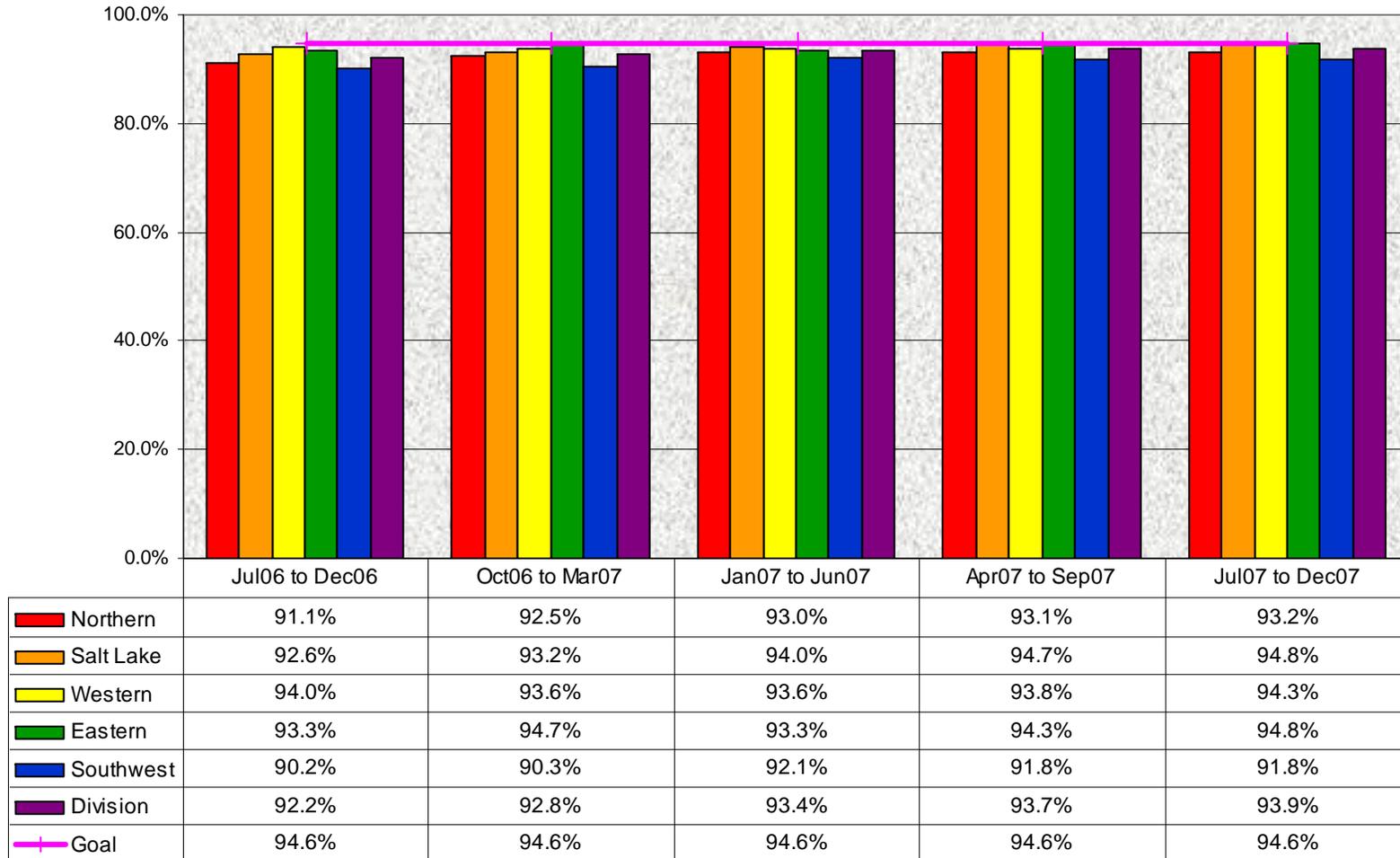
Foster Care Cases - Visits																			
		IB1.mo1	IB1mo2	IB1.mo3	IB1.mo4	IB1.mo5	IB1.mo6	IB2.mo1	IB2.mo2	IB2.mo3	IB2.mo4	IB2.mo5	IB2.mo6	IB4.mo1	IB4.mo2	IB4.mo3	IB4.mo4	IB4.mo5	IB4.mo6
	% Cases Reviewed/ Total Cases	Caretaker Visits	Child Private visits																
1/1/08 to 6/30/08																			
Northern QA	37%																		
Northern SAFE	760	96%	98%	94%	94%	94%	87%	96%	98%	94%	93%	93%	88%	85%	89%	84%	83%	83%	76%
Salt Lake Valley QA	36%																		
Salt Lake Valley SAFE	1172	97%	94%	92%	92%	93%	90%	96%	95%	91%	89%	93%	90%	89%	86%	83%	84%	85%	82%
Western QA	37%																		
Western SAFE	535	97%	95%	93%	92%	90%	88%	95%	93%	91%	91%	87%	86%	74%	71%	68%	69%	66%	65%
Eastern QA	45%																		
Eastern SAFE	276	99%	97%	95%	95%	96%	93%	98%	97%	95%	94%	92%	94%	82%	86%	80%	83%	81%	82%
Southwest QA	61%																		
Southwest SAFE	272	94%	94%	95%	92%	88%	87%	95%	95%	94%	92%	90%	88%	87%	84%	87%	86%	79%	77%
State QA	40%																		
State SAFE	3015	97%	96%	93%	93%	93%	89%	96%	95%	93%	92%	92%	89%	84%	84%	81%	81%	80%	77%
Goal			85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%	85%

Child and Family Services Review Data

Safety—Measure 1—Absence of Maltreatment Recurrence

Data below show, of all children who were victims of a supported maltreatment allegation during the first six months of the time period, what percent were NOT victims of another supported allegation within the six months following that maltreatment incident. The national standard set by the federal government is 94.6% or higher based on FY04 data from 45 states. The range of performance was from 86 to 98%.

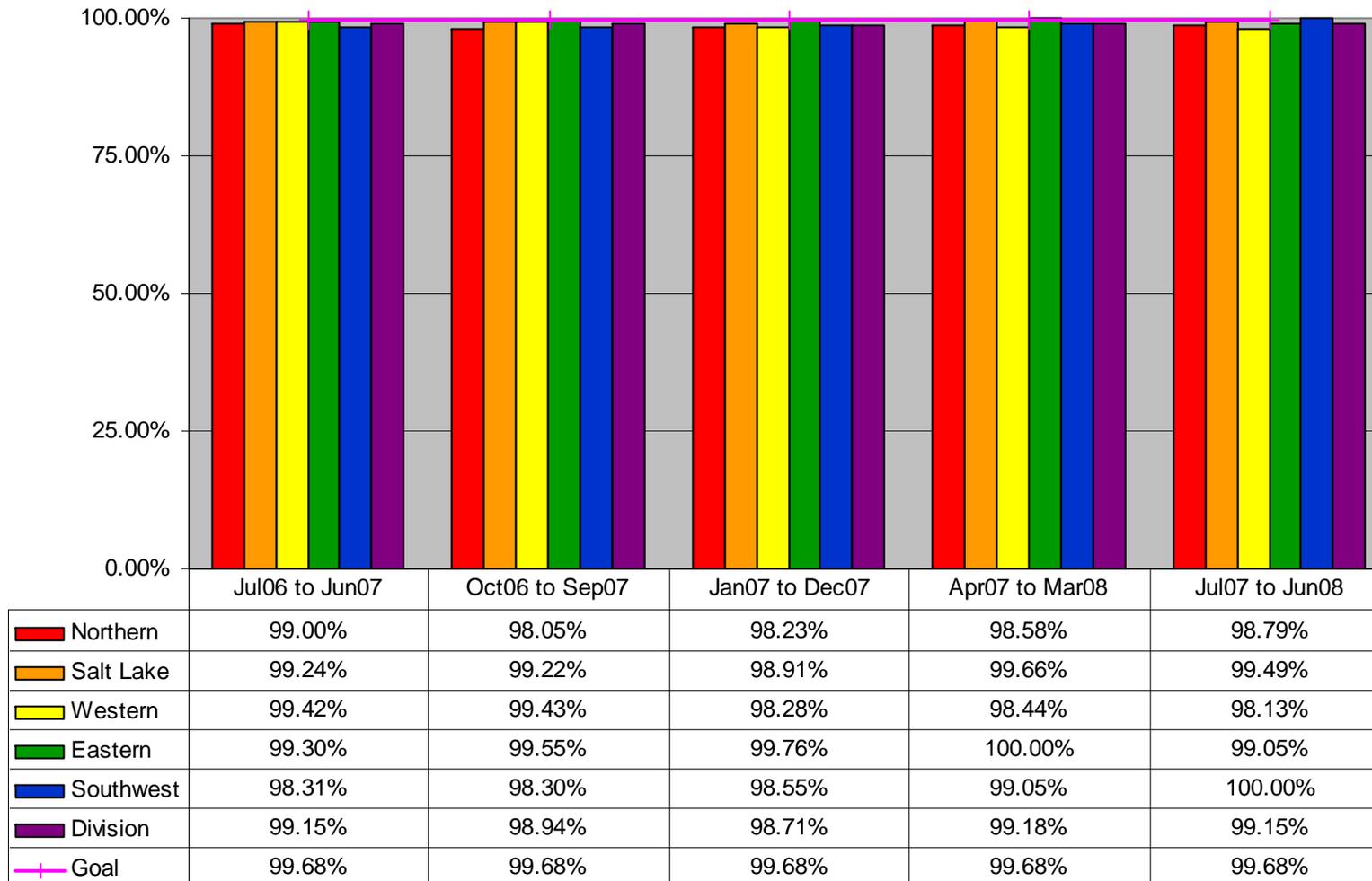
Percent of Children without Subsequent Supported CPS Case within 6 months



Safety—Measure 2—Abuse by Foster Parents, Residential Staff

The second safety data measure is of all children served in foster care, what percent were NOT victims of a supported maltreatment by a foster parent or facility staff member during the year. The national standard set by the federal government is 99.68% or higher based on FY04 data from 37 states. The range of performance was from 98.59% to 100%.

Percent of Children in Foster Care who DO NOT Experience Maltreatment by Foster Parent or Residential Staff

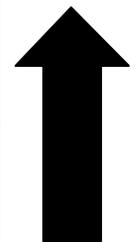
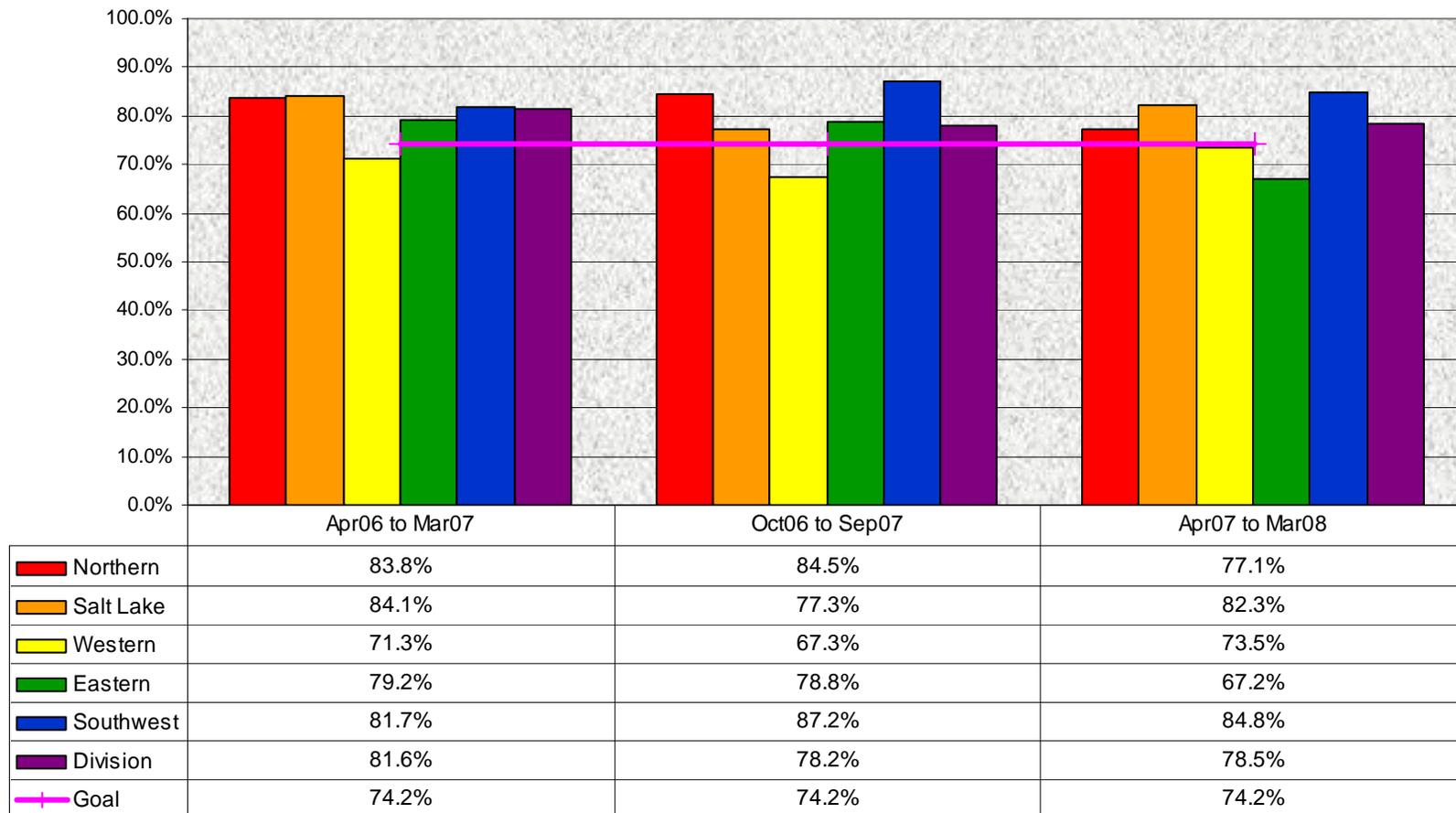


Permanency Composite 1—Timeliness and Permanency of Reunification

Measure 1—Timeliness of reunification

Measure 1 of this composite is of all children discharged from foster care to reunification who had been in foster care for 8 days or longer, what percent were reunified in less than 12 months from the date of the latest removal from home. There is no national standard set for individual measures, however the national 75th percentile on this measure is 74.2%.

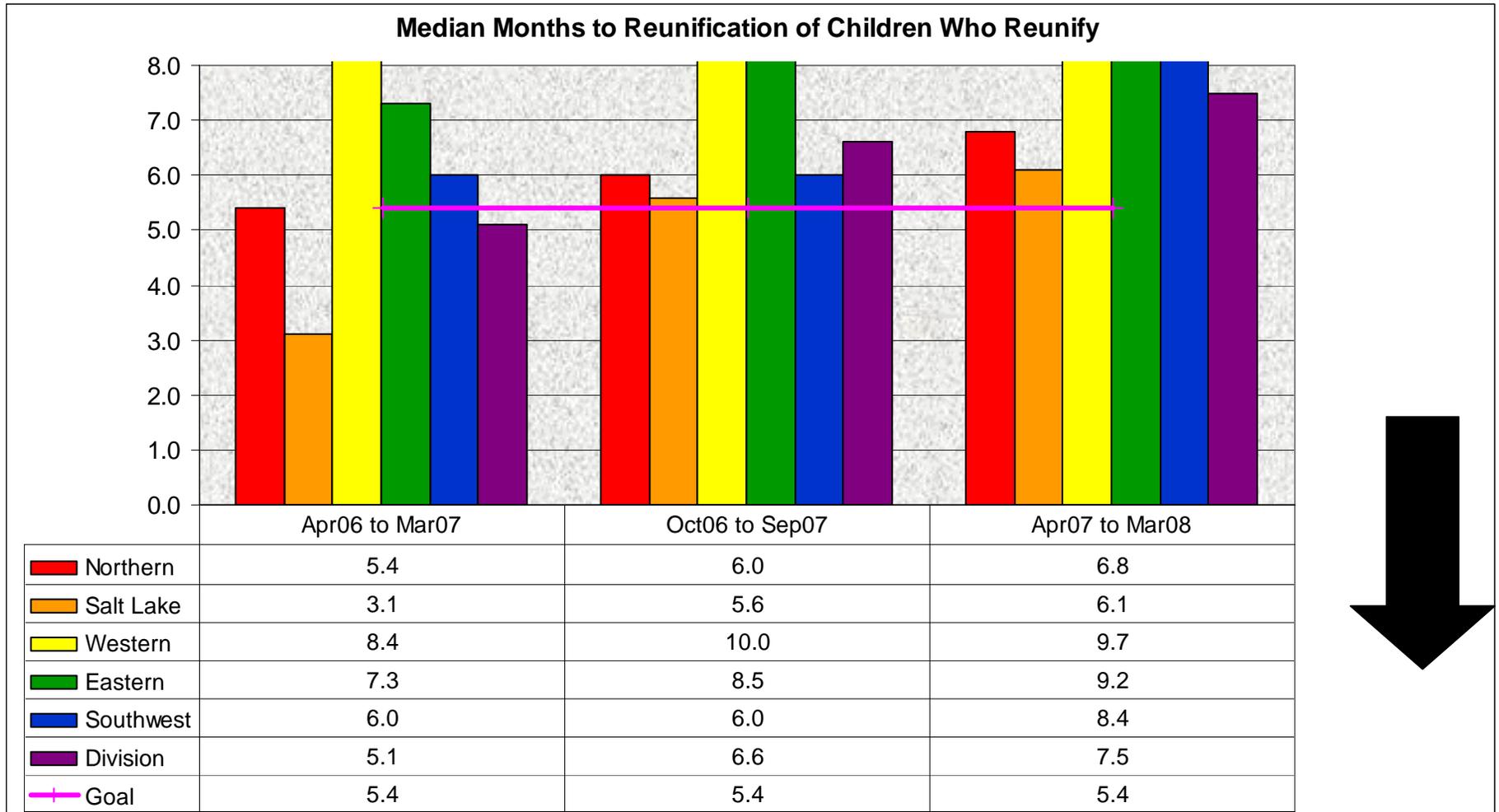
Percent of Children Who Reunify in Less than 12 Months



Permanency Composite 1—Timeliness and Permanency of Reunification

Measure 2—Timeliness of reunification

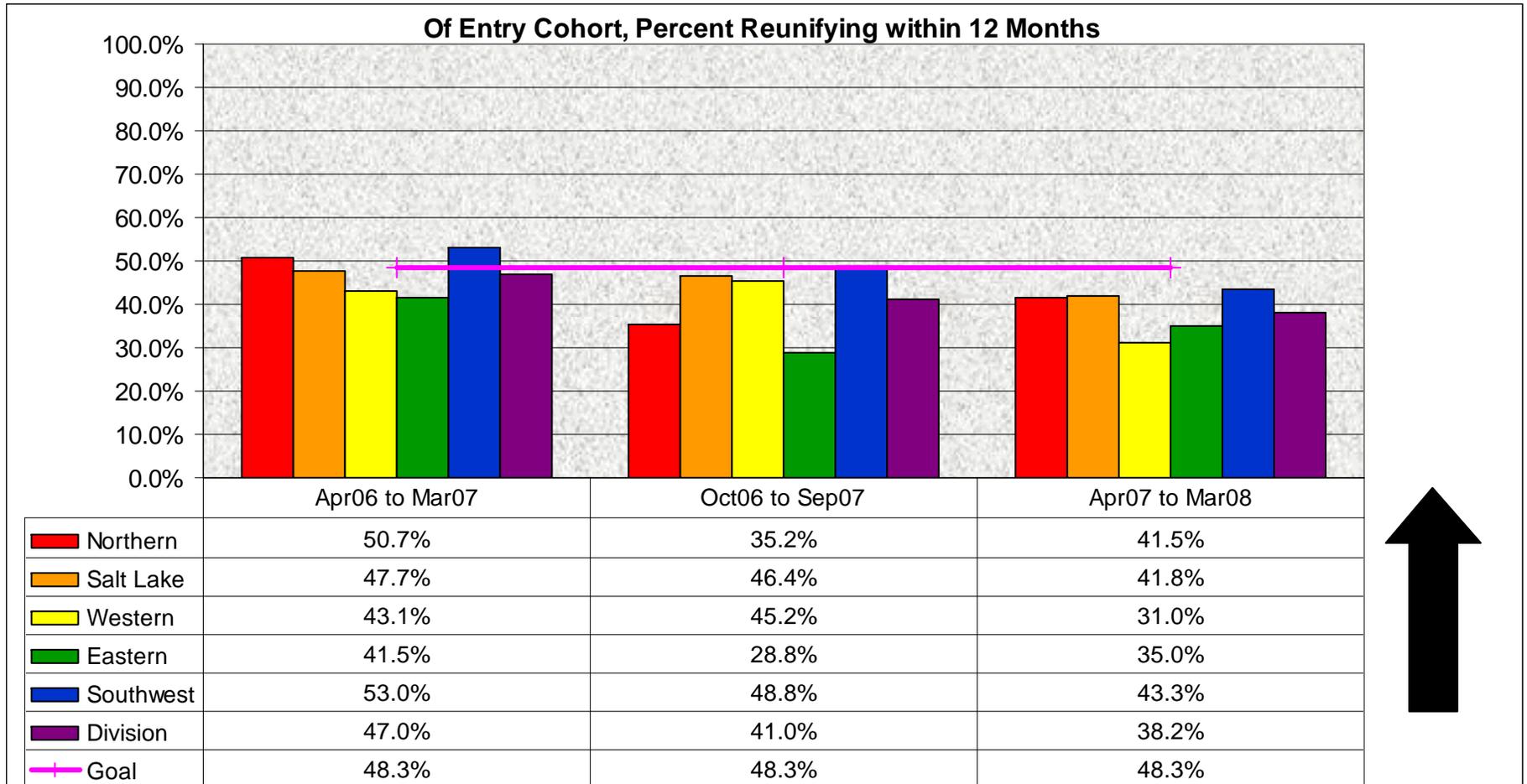
Measure two is of all children who were discharged from foster care to reunification, and who had been in foster care for 8 days or longer, what was the median length of stay in months from the date of discharge to reunification. The national 75th percentile on this measure is 5.4 months.



Permanency Composite 1—Timeliness and Permanency of Reunification

Measure 3—Timeliness of reunification

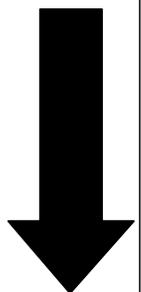
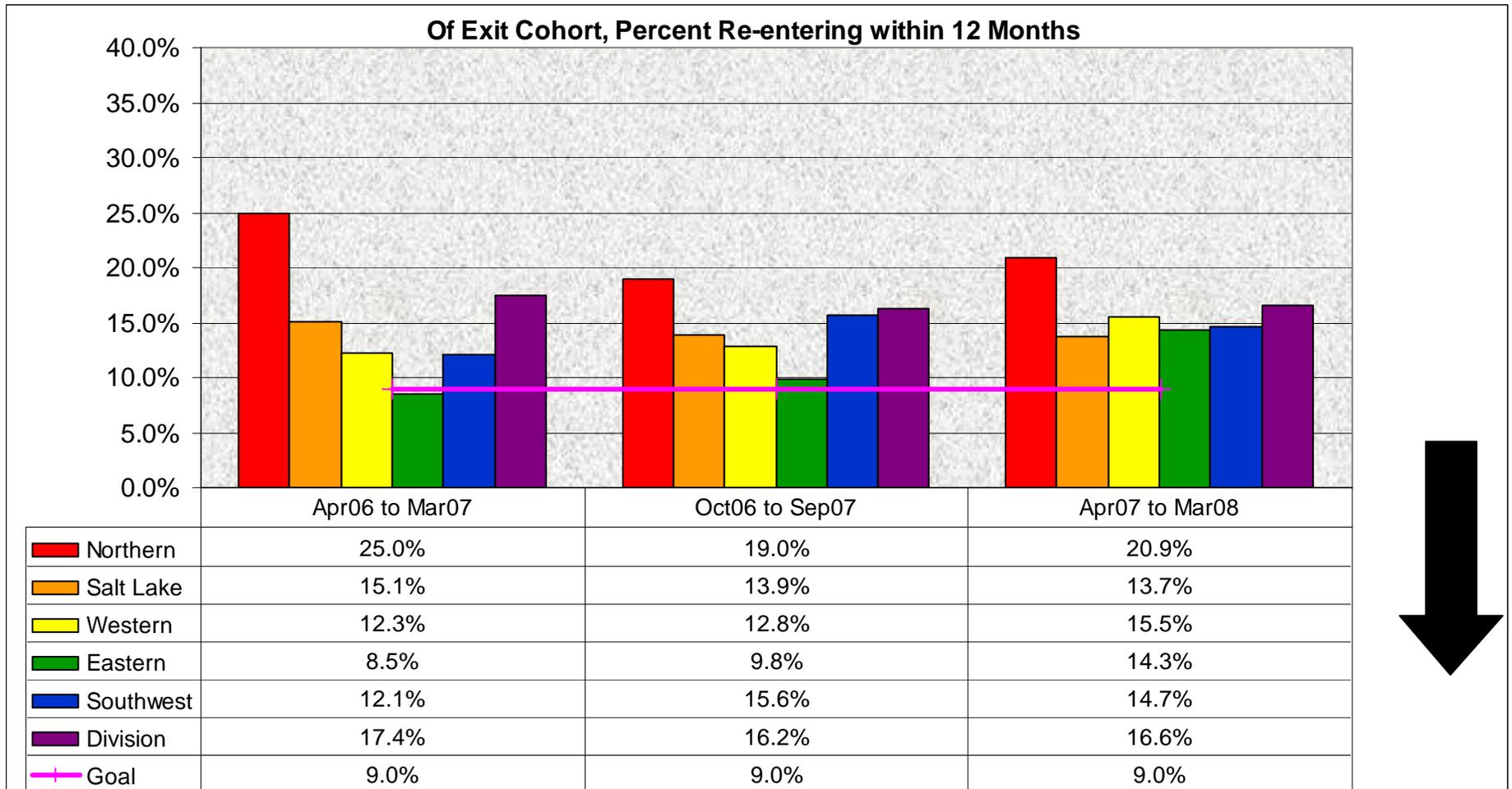
Of all children who entered foster care for the first time in the 6-month period, and who remained in foster care for 8 days or longer, what percent were discharged from foster care to reunification in less than 12 months from the date of latest removal from home. The national 75th percentile is 48.3%.



Permanency Composite 1—Timeliness and Permanency of Reunification

Measure 4—Permanency of reunification

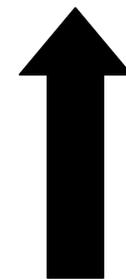
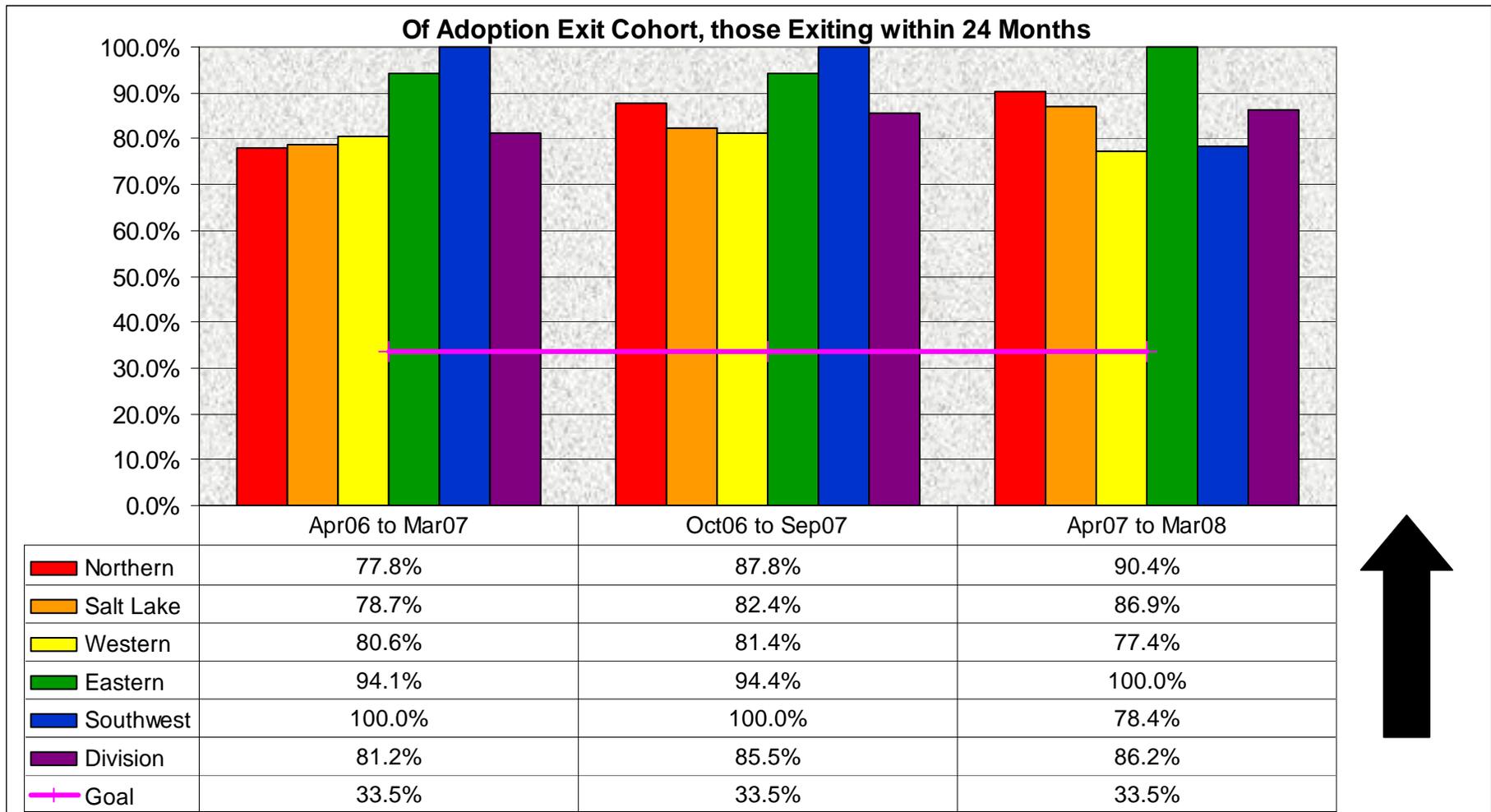
Of all children who were discharged from foster care to reunification in the 12-month time period, what percent re-entered foster care in less than 12 months from the date of discharge. The national 75th percentile is 9.0%



Permanency Composite 2—Timeliness of Adoptions

Measure 1—Timeliness of adoptions of children discharged from foster care.

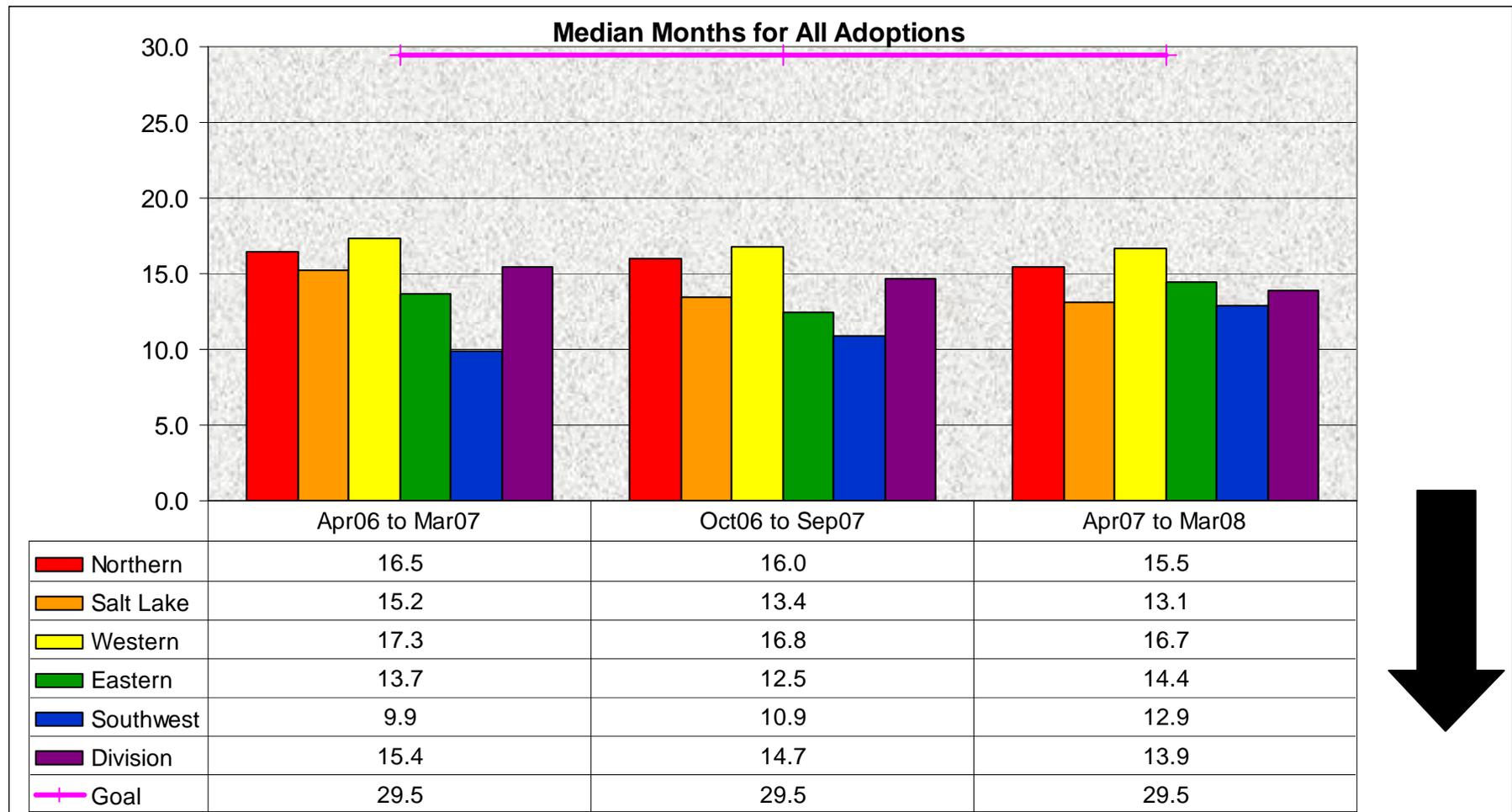
Measure 1 evaluates of all children who were discharged from foster care to a finalized adoption, what percent were discharged in less than 24 months from the date of latest removal from home. The national 75th percentile is 33.5%.



Permanency Composite 2—Timeliness of Adoptions

Measure 2—Timeliness of adoptions of children discharged from foster care.

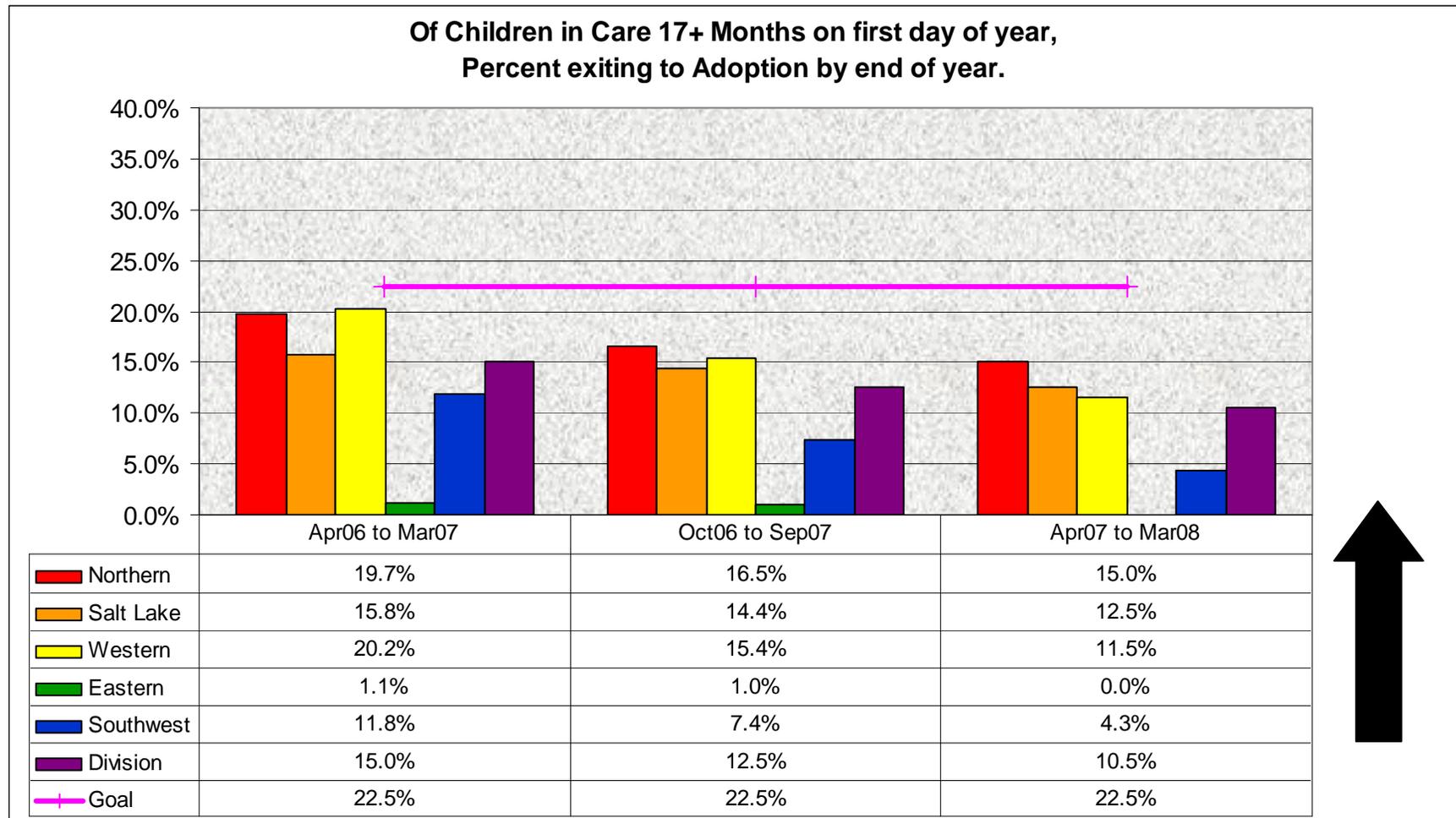
Measure 2 evaluates of all children who were discharged from foster care to a finalized adoption, what was the median length of stay in foster care in months from the date of latest removal from home to the date of discharge to adoption. The national 75th percentile is 29.5 months.



Permanency Composite 2—Timeliness of Adoptions

Measure 3—Progress toward adoption for children in foster care.

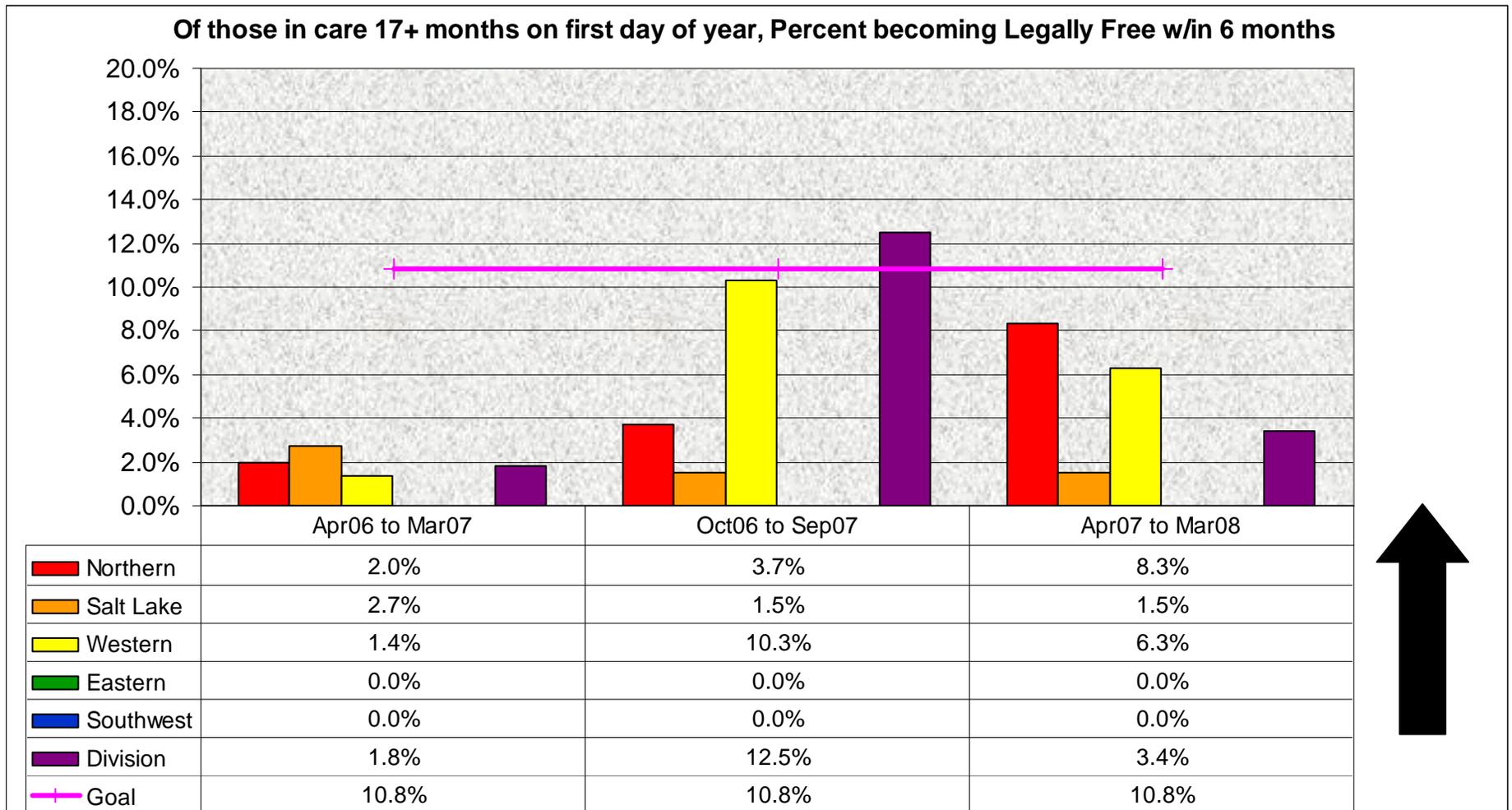
Measure 3 is of all children who were in foster care on the first day of the year, and who were in foster care for 17 continuous months or longer, what percent were discharged from foster care to a finalized adoption by the last day of the year. The national 75th percentile is 22.5%.



Permanency Composite 2—Timeliness of Adoptions

Measure 4—Progress toward adoption for children in foster care.

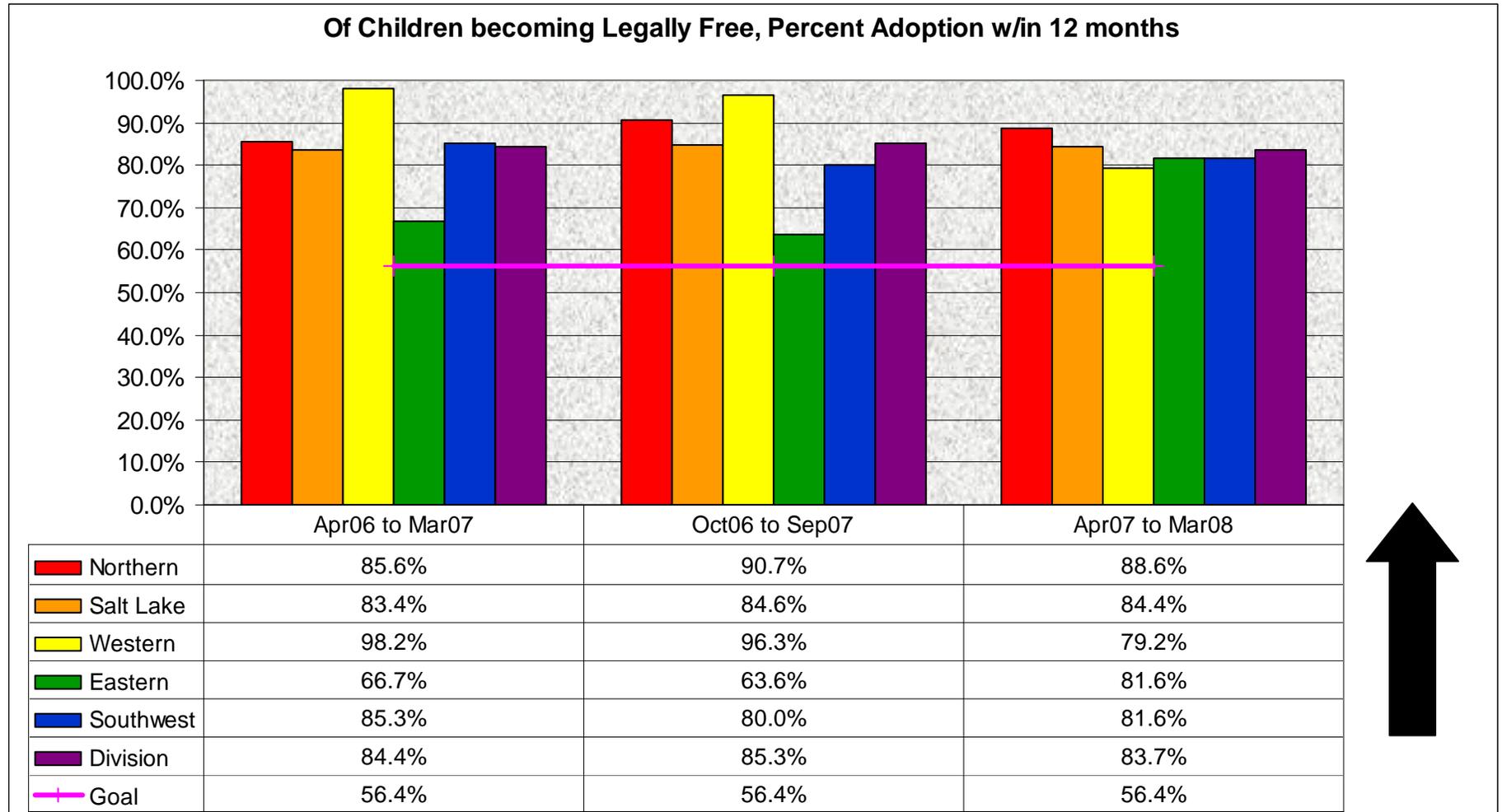
Measure 4 is of all children who were in foster care on the first day of the year for 17 continuous months or longer, and who were not legally free for adoption prior to that day, what percent became legally free for adoption during the first 6 months of the year. The national 75th percentile is 10.8%.



Permanency Composite 2—Timeliness of Adoptions

Measure 5—Progress toward adoption of children who are legally free.

Measure 5 is of all children who became legally free for adoption during the year, what percent were discharged from foster care to a finalized adoption in less than 12 months of becoming legally free. The national 75th percentile is 56.4%.

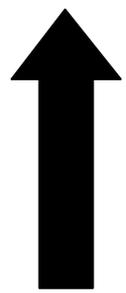
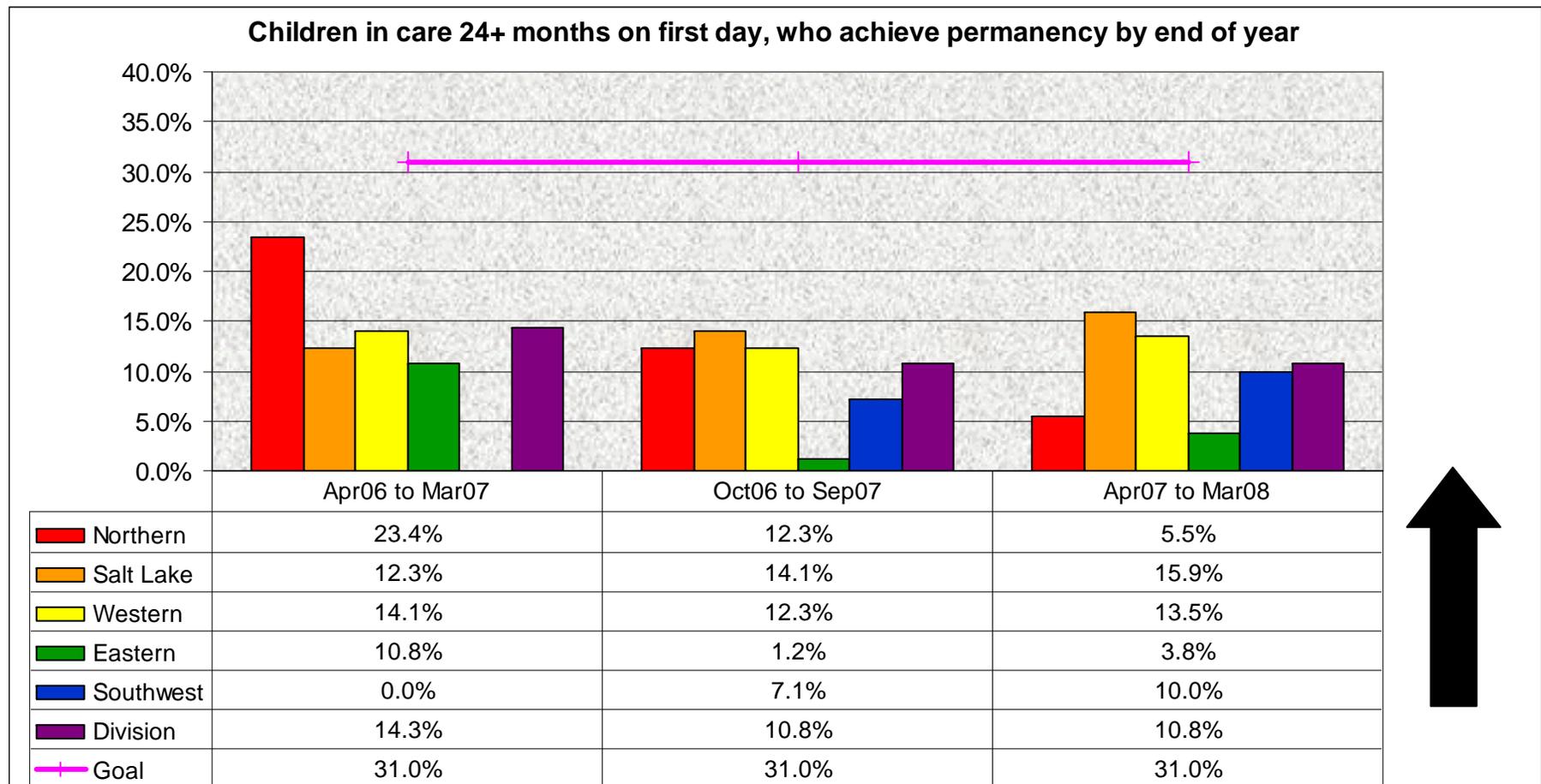


SPSS program using AFCARS data

Permanency Composite 3—Achieving Permanency for Children in Foster Care for Long Periods of Time

Measure 1—Permanency for children in foster care for long periods of time.

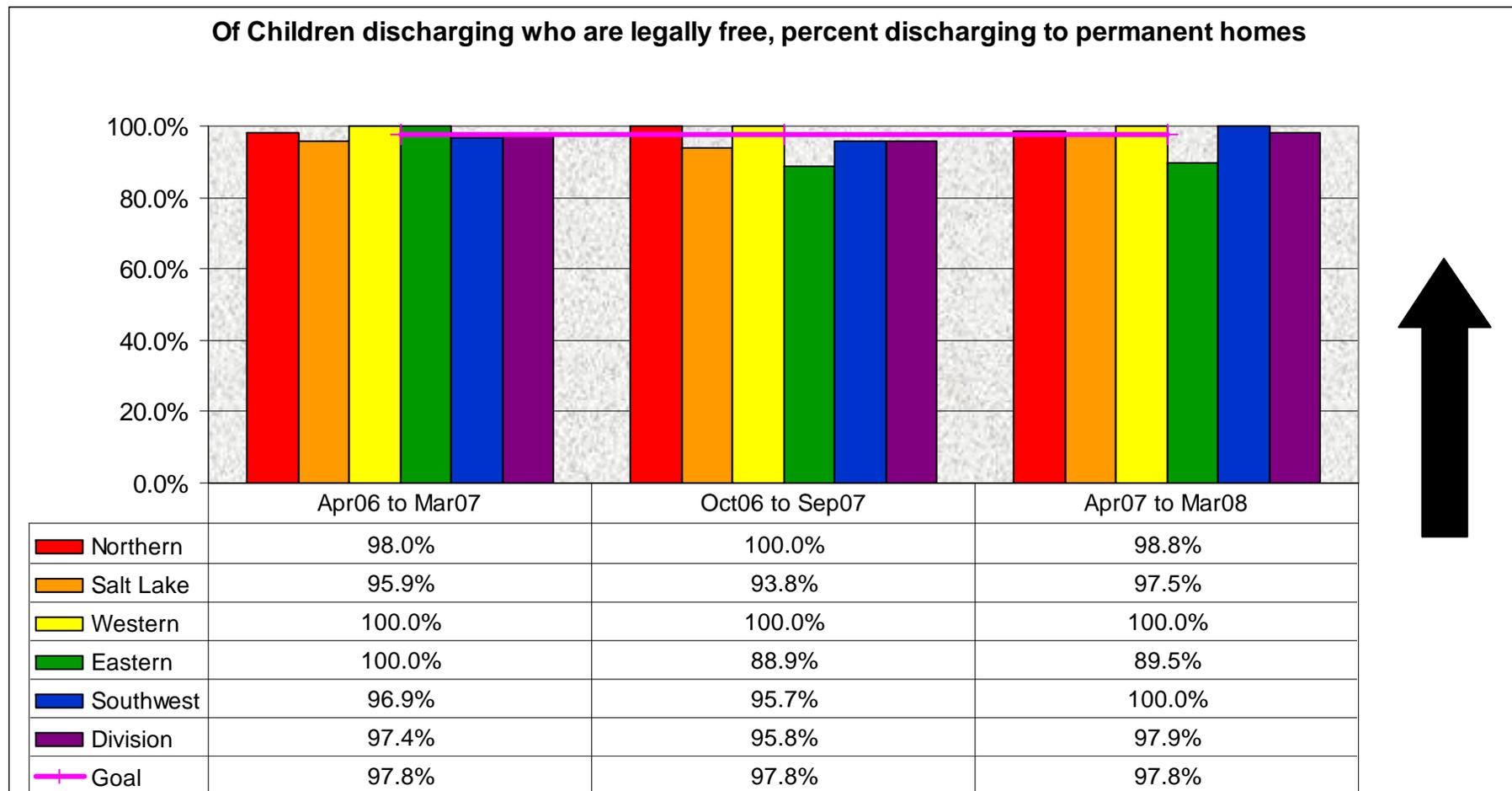
This measure evaluates of all children who were in foster care for 24 months or longer on the first day of the year, what percent were discharged to a permanent home prior to their 18th birthday and by the end of the fiscal year. A child is considered discharged to a permanent home if the discharge reason is adoption, guardianship, reunification, or live with relative. The national 75th percentile is 31.0%.



Permanency Composite 3—Achieving Permanency for Children in Foster Care for Long Periods of Time

Measure 2—Permanency for children in foster care for long periods of time.

This measure evaluates of all children who were discharged from foster care in the year who were legally free for adoption at the time of discharge, what percent were discharged to a permanent home prior to their 18th birthday. A child is considered discharged to a permanent home if the discharge reason is adoption, guardianship, reunification, or live with relative. The national 75th percentile is 97.8%.

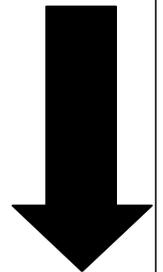
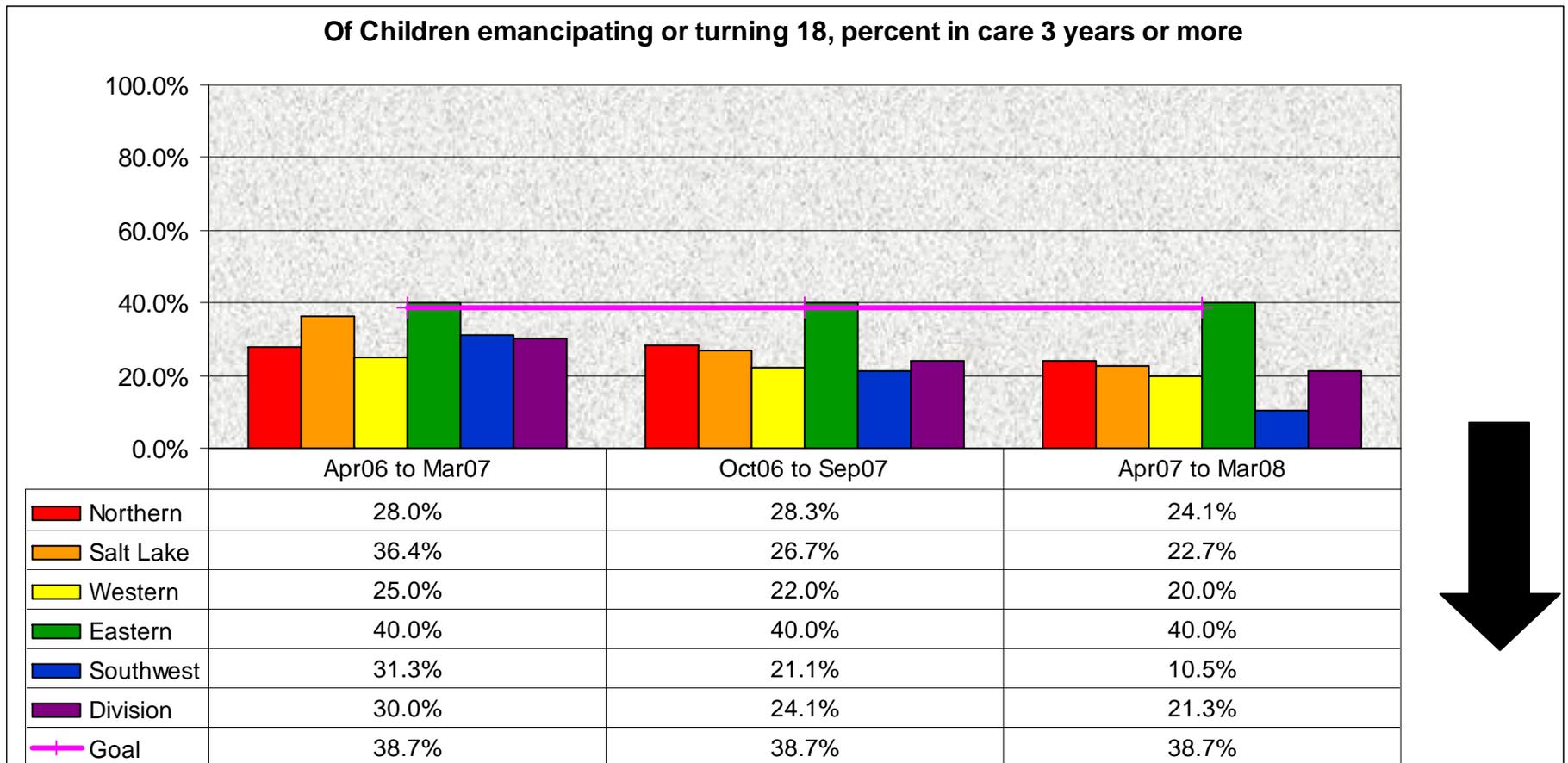


SPSS program using AFCARS data

Permanency Composite 3—Achieving Permanency for Children in Foster Care for Long Periods of Time

Measure 3—Children growing up in foster care.

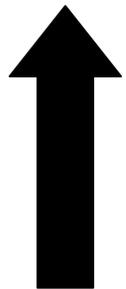
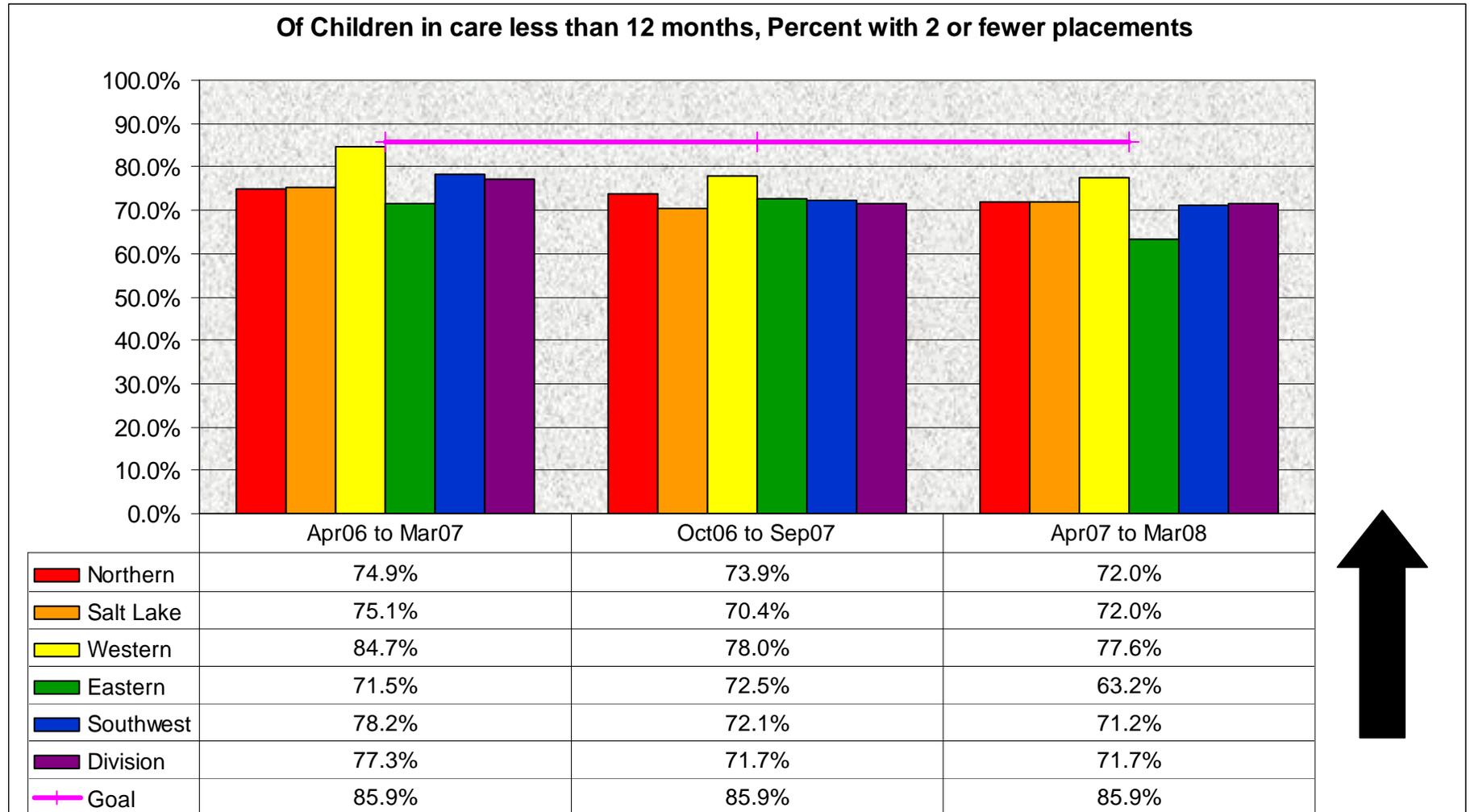
Of all children who either (1) were discharged from foster care during the year with a discharge reason of emancipation, or (2) reached their 18th birthday during the year while in foster care, what percent were in foster care for 3 years or longer. The national 75th percentile is 38.7%.



Permanency Composite 4—Placement Stability

Measure 1—Placement Stability.

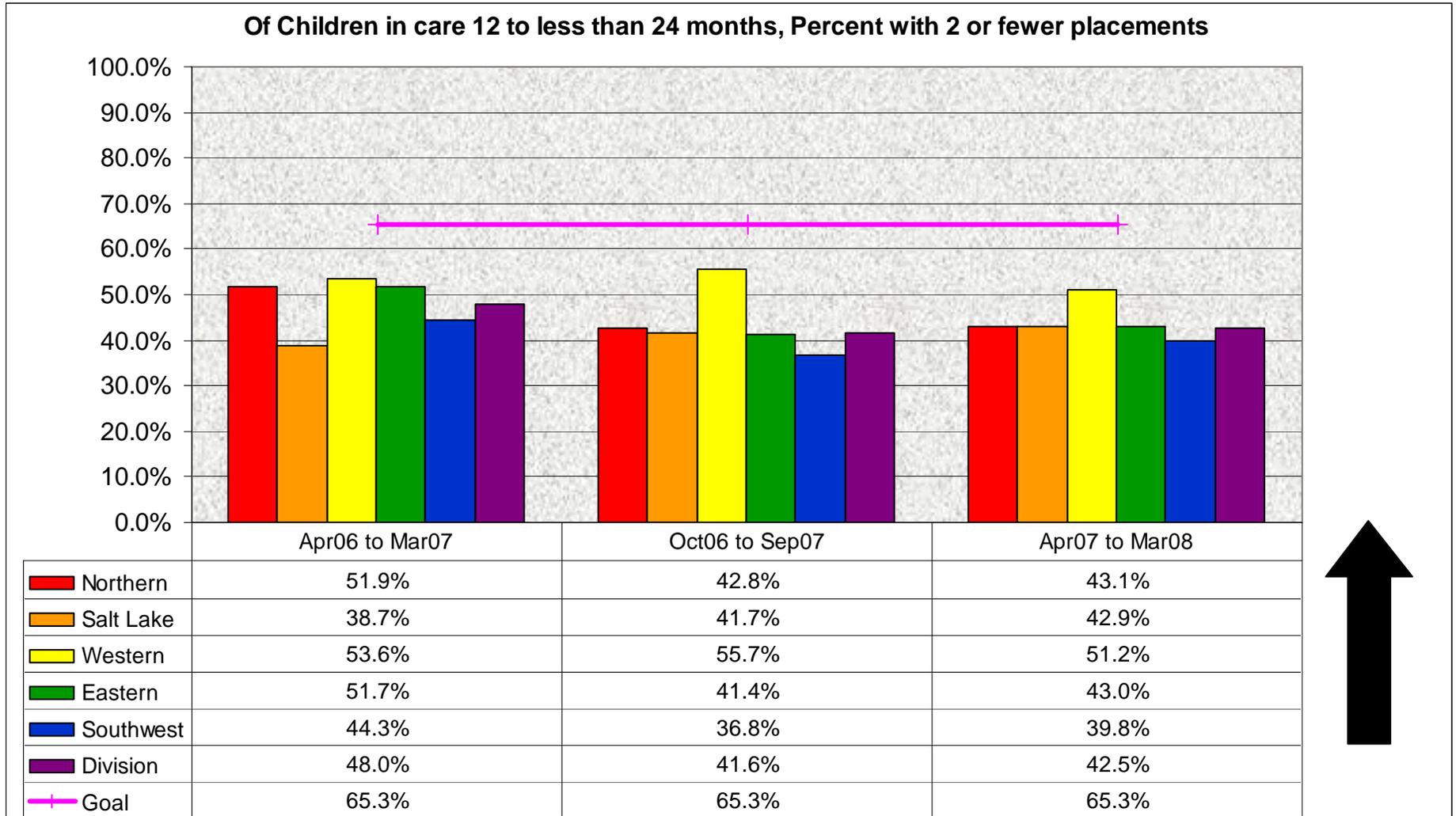
This measure evaluates of all children who were served in foster care during the year, and who were in foster care for at least 8 days but less than 12 months, what percent had two or fewer placement settings. The national 75th percentile is 85.9%.



Permanency Composite 4—Placement Stability

Measure 2—Placement Stability.

This measure evaluates of all children who were served in foster care during the year, and who were in foster care for at least 12 months but less than 24 months, what percent had two or fewer placement settings. The national 75th percentile is 65.3%.



Permanency Composite 4—Placement Stability

Measure 3—Placement Stability.

This measure evaluates of all children who were served in foster care during the year, and who were in foster care for at least 24 months, what percent had two or fewer placement settings. The national 75th percentile is 39.2%.

