Department of Children and Families Qualitative Framework + Activities



Children's Committee Presentation



Grounding Qualitative Foci



Legislative Mandates
 Agency Mission
 Cross-Cutting Themes
 Agency Values

2016 DCF Performance Expectations

- □ Successfully exit from Juan F. Consent Decree
- Ensure children reside safely with families whenever possible
- □ Achieve racial justice across the DCF system
- Prepare children and adolescents in care for success
- Prepare and support the workforce to meet the needs of children and families

Federal QA/CQI Framework Guidance

Informational Memorandum 12-07 (August 2012)

Continuous quality improvement (CQI) is the complete process of identifying, describing, and analyzing strengths and problems and then testing, implementing, learning from, and revising solutions. It relies on an organizational culture that is proactive and supports continuous learning.

CQI is firmly grounded in the overall mission, vision, and values of the agency. Perhaps most importantly, it is dependent upon the active inclusion and participation of staff at all levels of the agency, children, youth, families, and stakeholders throughout the process

Outcome Focused Performance Management Assessment

External Evaluation:

The Annie E. Casey Foundation Child Welfare Strategy Group (May 2013):

Common Agency Outcomes
 Supply and Quality of Analytic Resources

Processes

Practices and Policies

2013 External Evaluation Findings

CT is poised for Self-Evaluation Monitoring compliance Data Informed Practice Outcome focus Little or no outcome focus Pre-OFPM (Self-evaluation) Outcome focus Focus is on counting what Agency targets practice we do Outcome focus OFPM change but does not Analysis connect to outcomes Agency leaders identify Outcome focus IT creates monitoring and Outcomes are driven by targeted outcomes Agency leaders know agency compliance reports external forces such as All staff accept ownership status on outcomes & identify CFSR reviews or courts for outcomes Management reports on targeted outcomes for change key agency processes are Leaders are aware of Analysis All staff accept ownership for available agency status on some outcomes Commit data analyst & IT CESR measures CFSR reports may be resources to support Analysis available. Analysis outcome analysis Apply learnings Analysis on special issues is IT staff create updates on Entry cohort longitudinal completed as needed CFSR measures data available Managers review reports Diverse data are used Outcome analysis uses Workers often feel data Data available on key together to understand AFCARS data or other used against them practice areas outcome and practice issues point-in-time and exit Regular outcome reports Well-being data used cohort data available Apply learnings Apply learnings Apply learnings Commit practice & analytic Managers review reports Staff understand how their resources to OPM team and may implement work in connected to Budget, staffing, practice practice change as result outcome changes decisions based upon what's Agency may have selfneeded to change targeted

evaluation team

outcomes

Radiating QA/CQI Approach



Practice + Systems: Improvement Inventory Schema



- Common Language
- Clear Expectations
- "Manualized" for Consistency, Reliability, Replication + Assessment
- Established Mechanisms for Quality Control + Improvement
- Communication/Information/Feedback Distribution Plan

Data + QA/CQI: Integrated Performance Management



Federal CQI Guidance: Essential Components

Federal IM 12-07 Components	Select DCF Features
Administrative structure to oversee effective CQI system functioning	 Senior Leadership Authority Office of Administrative Case Review (OACR) Dedicated Office of Research and Evaluation (ORE) Regional QA Managers Program Development and Outcomes Coordinators Director of Performance Management COPs Operational Strategies
Quality data collection	 Inter-Rater Reliability ACRi + CCRS OACR CQI Plan RBA Report Cards Data Training Data Reporting/Dashboards + Use
Method for conducting ongoing case reviews	 ~50 dedicated Case Reviewers Qualitative Reviews + Evaluations Special Reviews (Fatalities and Severe A/N)
Process for the analysis and dissemination of quality data on all performance measures	 ACR Reports Site Service Array Resource Allocation Meetings Quarterly Operational Strategies Meetings ORE SharePoint Site DCF Data Connect
Process for providing feedback to stakeholders and decision makers and as needed, adjusting State programs and process.	 Senior Administrator's Meeting Statewide + Regional Advisory Bodies Internal CO + AO/Regional Meetings Statewide Provider + Trade Association Meetings

Select Current QA/CQI Activities

- Careline Decision Making QA reviews
- Investigations QA Reviews
- FAR/Differential Response System Independent Evaluation
- □ Administrative Case Reviews + Exceptional Case Planning
- □ Juan F. Reviews
- □ Fatality Tracking + Review
- □ Foster Care Satisfaction Survey
- Contracted Services RBA Report Cards
- □ Staff Satisfaction
- Staff Development (Training, Mentoring, + Coaching)

Careline Quality Assurance

CY 2015 FAR DETERMINATION REVIEW

3 Quarters
727 reviews

Methodology:

Random sample drawn by ORE

Standard Tool for Review and Data Collection

Reviews conducted by:

Careline Mangers

CPS Investigations Manger

DCF Workforce Development Academy

DCF Licensing Manager



Careline Quality Assurance, Cont.





Investigations and FAR Review

Includes questions from the Federal OSRI and the following:

- Was the report assigned the right response time and track by Careline?
- Did we commence on time per the policy (same day, 24 hours, 72 hours)
- Was the track (Investigations, FAR) appropriate given the facts of the case?
- If the track changed, did it change appropriately for safety reasons?
- Did we make face-to-face contact with the children in a timely manner?
- Quality of the SDM safety assessment
- Quality of the SDM risk assessment
- Quality of the Protective Factors assessment
- Did we interview all the children alone?
- Did we make sufficient, quality visits to the home based on the circumstances of the case?
- Did the worker make the necessary collateral contacts?
- Did the SWS provide and document effective supervision at the beginning, middle and end of the Intake
- If the children had to be removed, was a considered removal meeting held?
- If a considered removal meeting was held, how effective were we at getting all the right parties to the table?
- Quality of the protocol
- How effective were we at offering services when needed?
- Was the disposition of the case adequate given the facts and circumstances?
- Did we complete the Investigation or FAR on time?
- How effective were we at transitioning the case to the CPA or Ongoing Services, if needed?

Administrative Case Review

- □ 13,718 administrative case review meetings during CY 2015, covering 4457 unique cases
- DCF's case review system has been designed to ensure that a periodic review for each child occurs no less than once every six (6) months
- Case plan reviews and ratings are guided by and captured in the ACRi (a standardized, electronic tool)
- ACRi was developed to capture Federal (CFSR) items pertaining to safety, permanency and well-being.
- Under the Exceptional Case Planning approach, Area Office CPS Mangers review the completed ACRis
- Individual Support Plans (ISP) are created for SWs for whom the Exceptional Case Planning process identifies as having continuing challenges
- □ 2015 ACR Practice Review:
 - Assess consistency of ACR reviewers' inclusion of safe sleep assessments in the review process and the impact to ratings for safety
 - Compare visitation narrative documentation to ACR Social Work Supervisors' (SWS) rating for safety for accuracy/consistency
 - Provide general feedback to Child Protection Services (CPS) and ACR staff related to Safe Sleep documentation

Select Items Reviewed + Rated by ACR

- Have the appropriate SDM tools been completed in a timely and accurate manner?
- Were concerted efforts made to assess and address the risk and safety concerns, via formal or informal assessments, related to the child(ren) in the home. Consider whether or not the Department conducted initial and ongoing safety and risk assessments. If concerns were noted, were they adequately and appropriately addressed by the Department? If a safety plan was developed, did the Department continually monitor and update the safety plan, including encouraging family engagement in services designed to promote achievement of the goals of the safety plan? Indicate the source of your information.
- Quality of the case plan: consider whether or not the case plan is complete. Does the case plan include an assessment of the family? Do the sections adequately represent the facts? Are the strengths and needs of the family identified? Are there objectives and action steps for all appropriate members? Is there evidence in the case record or via discussion at the ACR, that the case plan was discussed with the parents?
- Was the frequency of the visits between the social worker (or other responsible party) and the parent/guardian sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?
- Was the quality of the visits between the social worker and the parent/guardian sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?

Select Items Reviewed + Rated by ACR, Cont.

- Did the agency assess the child's physical health care needs?
- Is the child involved/engaged in services to address mental health issues or strengthen coping skills? (Including medication management)
- Did the agency make concerted efforts to assess the child's educational/developmental needs?
- □ Is child in placement **visiting with all siblings**?
- Did the social worker make sufficient ongoing concerted efforts throughout the period under review to assess and address the parenting skills of the parent/guardian/caretaker?
- Did the social worker make sufficient ongoing concerted efforts throughout the period under review to assess and address the emotional health issues or strengthen coping skills of the parent/guardian/caretaker? (Including medication management)
- Quality of the visits between the social worker and the child sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals

ACR Quality System Frame



Operational Strategies + RBA Report Cards

- Established agency performance expectations
- Annual operational strategies, developed within an RBA frame, are presented to and reviewed on a quarterly basis by DCF Senior Leadership
- RBA report cards created on a quarterly basis for DCF
 POS contracts
- RBA report cards presented monthly at Senior
 Leadership meeting
- 26 different service types have been reviewed since July 2015

Services Oversight and Performance Management: Conceptual Integration Model



Staff QA/CQI Development



Formalized introduction to data/CQI through Data 101 course



Some Data/CQI exposure in LAS + LAMM



Ramp up through Introduction to Data Leadership



Extended exposure through Data Leadership Academy (NM/STEP Curriculum)



Skill deepening through Advanced Analytics Institute

loc Opportunities:

- PDOC Training
- PIE Training
- ROM Training
- Excel Training (e.g., Pivot Tables)
- RBA Training

2016 QA/CQI Enhancements

TRAINING

- QA+ Data for New Managers
- QA through a Racial Justice Lens
- DCF Data Leadership Academy – based on NM STEP curriculum

DATA + EVALUATION

- CFRS CCRS
- DCF Data Connect
- CT Data Portal Additions
- New ROM system
- New Dashboards (JJ, ESI + Case flow)
- Data Governance
- Contracted Services Tier Classification System
- IRB Lean Management
- FAR Eval Next Steps
- Research Agenda

CONSULTATION + PARTNERSHIPS

- Center for State Capacity Building (Federal contractor)
- Eckerd Rapid Safety Feedback
- NM Safety + Success
- CRC regarding SDM enhancements and QA

Family Assessment Response (FAR)

- □ FAR was implemented in March 2012.
- As of April 2015, a total of 4,371 unique families were served by Community Supports for Families (CSF) program..
- □ Mean age of children is 7.84 years (range 0 17).
- □ 32% of the children served in CSF were ages 0-3.
- Racial breakdown of CSF participants: Black/African American - 17%; White - 42%; Hispanic/Latino - 35%; Other - 6%
- Data Source: Evaluation from the Performance Improvement Center, UConn School of Social Work, August 2015

FAR + Investigations Comparative Data

	Invest.	FAR	Invest.	FAR	Total	
	#		%		#	%
Total Accepted Reports 4/1/12 - 6/30/15	61595	34872	63.9%	36.2%	96384	100%
Reports Responses Completed On Time	52850	30168	85.8%	86.5%	83018	86%
Reports Resulting in Case Opening	13147	1006	21.3%	2.9%	14153	15%
Reports with Alleged Victims in Repeat Report in Same Case Within 6 Months	10114	5404	16.4%	15.5%	15518	43%
Reports with Alleged Victims with Substantiation in Same Case Within 6 Months	3014	1171	4.9%	3.4%	4185	9%
Reports with an Alleged Victim that Entered DCF Placement Within 6 Months	3832	300	6.2%	0.9%	4132	2%

FOR REPORTS	WITH ALLEG	ED VICTIMS	6 AGES 0 - 2			
	Invest.	FAR	Invest.	FAR	Total	
	#		%		#	%
Total Accepted Reports 4/1/12 - 6/30/15	15855	7264	68.6%	31.4%	23119	100%
Reports Responses Completed On Time	13861	6367	87.4%	87.7%	20228	87%
Reports Resulting in Case Opening	5188	301	32.7%	4.1%	5489	24%
Reports with Alleged Victims in Repeat Report in Same Case Within 6 Months	2741	1250	17.3%	17.2%	3991	17%
Reports with Alleged Victims with Substantiation in Same Case Within 6 Months	1054	342	6.6%	4.7%	1396	6%
Reports with an Alleged Victim that Entered DCF Placement Within 6 Months	1727	75	10.9%	1.0%	1802	8%

Current data suggests that CT FAR cases, including those that involve children under age 3, have lower re-referral and repeat maltreatment percentages than traditional CT Investigation cases

FAR Racial Justice Considerations

Reason for CSF Discharge by Child Race*



FAR Racial Justice Considerations, cont.

CSF Survival Time to First Subsequent Report by Caregiver Race/Ethnicity



- Non-Hispanic Blacks are 15% less likely to have a subsequent report than Non-Hispanic Whites.
- After adjusting for race/ethnicity, the survival time to an investigation subsequent report between Region 5 & 3 becomes nonsignificant.

FAR QA Timeline

2012

- DCF entered into an MOA with the UCONN School of Social Work to assure a robust review and analysis of those FAR cases referred to the Community Support for Families.

- Together with regions and providers we review quarterly and annual data.

- Biannual meetings are held with the providers, central office and regions and facilitated by UCONN to examine data

2013

- Case review audits conducted

2014

- Case review audit report released

- based on UCONN reports and case review audits - updated practice guide was issued

2015

- expanded MOA with UCONN to evaluate the work with all families receiving a FAR as well as those referred to CSF

2016

- in process of further expansion of MOA to allow UCONN to evaluate all Intakes (Investigations, FAR and those referred to CSF)

FAR Evaluation Next Steps

Next Steps:

- Increased access to demographic variables to allow for further analysis of FAR data
- NCFAS-G roll-out
- > Site visits

Future analysis: continue to widen the scope of the outcome analysis:

- ✓ Identify and match demographic and background variables to various data levels: i.e., victim/children, perpetrator, and family primary care givers, to allow for developing profiles of children/families with risk of subsequent reports.
- Closely examine services/programmatic factors, e.g., FTM, "length of service", and how they are related to subsequent reports during and after CSF episodes.
- Evaluation of CSF vs non-CSF families (adjusted for various confounding factors to obtain "unbiased" estimate of CSF "treatment effect").
- ✓ Utilize the NCFAS-G to explore family interactions, well-being, and social and community connections.
- ✓ Evaluation of FAR vs. Investigation tracks (pending available resources).

Racial Justice Data



Placement Disproportionality Report



	Hispanic, RAC		Non-Hist BLAC		Non-Hisj O THER		Non-Hisp WHP		Grand Total		
Month / Yiear	#	96	#	# %		96	#	96	#	96	
Child Pop	0	0.0%	0	0.0%	•	0.095	0	0.0%	0	100%	
OP Average	1,321	33.0%	999	25.0%	366	9.2%	1,312	32.8%	3,998	100%	
CIP- CC	181	31.6%	170	29.7%	42	7.3%	179	31.3%	572	100%	
OP- FC	600	34.8%	400	23.2%	162	9.496	563	32.6%	1,725	100%	
CIP- KC	491	32.7%	352	23.5%	145	9.7%	S13	34.2%	1,501	100%	
CP-L	49	24.6%	77	38.7%	17	8.5%	56	28,1%	199	100%	

Averages are based on CP on the 1st of the month from:

Starting Month: January - 15 Ending Month: January - 16

Permanency Goals



Race/Ethnicity	Adoption	APPLA	Long Term FC Relative	No Goal ²	Reunification	TOG	Grand Total
HISPANIC, ANY RACE	46	292	19	52	142	31	582
Non-Hispanic, OTHER	14	62	8	14	29	2	129
Non-Hispanic, BLACK	45	264	21	86	126	33	575
Non-Hispanic, WHITE	57	259	15	26	165	33	555

ACR Case Practice Data Report

Case Practice

			Statewide			Region 1			Region 2			Region 3		Region 4		
		January, 2018	February, 2016	Maroh, 2016	January, 2018	February, 2016	Maroh, 2016	January, 2018	February, 2016	Maroh, 2018	January, 2016	February, 2018	Maroh, 2016	January, 2018	February, 2018	Maroh, 2016
		Strength	Strength	Strength												
81.No	Meacure	%	%	%	%	%	%	%	%	%	%	%	56	%	%	56
1	1 Visitation with Child and Parents	64%	0%	0%	64%	0%	0%	86%	0%	0%	69%	0%	0%	56%	0%	0%
:	2 Frequency of visits - Parents	65%	0%	0%	59%	0%	0%	78%	0%	0%	64%	0%	0%	58%	0%	0%
3	3 Frequency of visits - Father	58%	0%	0%	55%	0%	0%	80%	0%	0%	54%	0%	0%	53%	0%	0%
4	4 Frequency of visits - Mother	69%	0%	0%	63%	0%	0%	77%	0%	0%	71%	0%	0%	63%	0%	0%
5	5 Quality of visits - Parents	68%	0%	0%	70%	0%	0%	78%	0%	0%	64%	0%	0%	59%	0%	0%
6	6 Quality of visits - Father	62%	0%	0%	66%	0%	0%	80%	0%	0%	58%	0%	0%	49%	0%	096
3	7 Quality of visits - Mother	72%	0%	0%	74%	0%	0%	77%	0%	0%	68%	0%	0%	65%	0%	0%
8	8 Frequency of visits - Child	77%	0%	0%	78%	0%	0%	88%	0%	0%	74%	0%	0%	77%	0%	0%
5	9 Quality of visits - Child	78%	0%	0%	88%	0%	0%	83%	0%	0%	76%	0%	0%	73%	0%	0%
10	0 Risk & Safety - Child in Placement	91%	0%	0%	87%	0%	0%	94%	0%	0%	95%	0%	0%	90%	0%	0%
11	1 Risk & Safety - Children in Home	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
12	2 Continuity of Relationship - Child w/ Parents	87%	0%	0%	78%	0%	0%	98%	0%	0%	99%	0%	0%	84%	0%	0%
13	3 Continuity of Relationship - Child w/ Fathers	85%	0%	0%	72%	0%	0%	100%	0%	0%	98%	0%	0%	82%	0%	0%
14	4 Continuity of Relationship - Child w/ Mothers	90%	0%	0%	83%	0%	0%	96%	0%	0%	100%	0%	0%	85%	0%	0%
15	5 Collateral Contact - Parents	76%	0%	0%	67%	0%	0%	71%	0%	0%	84%	0%	0%	69%	0%	0%
16	6 Collateral Contact - Fathers	71%	0%	0%	50%	0%	0%	70%	0%	0%	79%	0%	0%	63%	0%	0%
17	7 Collateral Contact - Mothers	8186	0%	0%	76%	0%	0%	73%	0%	0%	89%	0%	0%	75%	0%	0%
18	8 Collateral Contact - Child	77%	0%	0%	67%	0%	0%	82%	0%	0%	63%	0%	0%	79%	0%	0%
15	9 Parent Needs	69%	0%	0%	67%	0%	0%	75%	0%	0%	79%	0%	0%	57%	0%	0%
20	0 Needs Assessed - Fathers	68%	0%	0%	43%	0%	0%	75%	0%	0%	76%	0%	0%	55%	0%	0%
21	1 Needs Assessed - Mothers	82%	0%	0%	68%	0%	0%	86%	0%	0%	89%	0%	0%	76%	0%	0%
22	2 Timely Accurate SDM - Parents	72%	0%	0%	51%	0%	0%	79%	0%	0%	83%	0%	0%	63%	0%	0%
23	3 Timely Accurate SDM - Child	67%	0%	0%	88%	0%	0%	91%	0%	0%	50%	0%	0%	58%	0%	0%
24	4 Physical health care - Child	85%	0%	0%	80%	0%	0%	94%	0%	0%	86%	0%	0%	80%	0%	0%
29	5 SA/Social Support/MH - Child	87%	0%	0%	78%	0%	0%	90%	0%	0%	91%	0%	0%	89%	0%	0%
26	6 Educational/development needs - Child	95%	0%	0%	87%	0%	0%	96%	0%	0%	98%	0%	0%	96%	0%	0%
27	7 Physical health care needs assessed - Child	96%	0%	0%	93%	0%	0%	100%	0%	0%	97%	0%	0%	94%	0%	0%
28	8 Physical health care needs addressed - Child	93%	0%	0%	87%	0%	0%	96%	0%	0%	95%	0%	0%	89%	0%	0%
29	9 Dental health care needs assessed - Child	93%	0%	0%	89%	0%	0%	96%	0%	0%	92%	0%	0%	90%	0%	0%
30	0 Dental health care needs addressed - Chlid	93%	0%	0%	88%	0%	0%	96%	0%	0%	95%	0%	0%	92%	0%	0%
31	1 Vision needs - Child	95%	0%	0%	84%	0%	0%	96%	0%	0%	100%	0%	0%	93%	0%	0%
33	2 Education/development needs assessed - Child	97%	0%	0%	89%	0%	0%	98%	0%	0%	99%	0%	0%	98%	0%	0%
33	3 Education/development needs addressed - Child	95%	0%	0%	85%	0%	0%	96%	0%	0%	99%	0%	0%	95%	0%	0%
34	4 Maternal relatives	90%	0%	0%	92%	0%	0%	88%	0%	0%	100%	0%	0%	89%	0%	0%
36	5 Patemai relatives	87%	0%	0%	88%	0%	0%	82%	0%	0%	100%	0%	0%	85%	0%	0%

ACR NEEDS ASSESSMENT REPORT

Actions - 🛞 14 - 4 1 of 1	⊳ N į ¢	1	indNext 100%	۷											
Needs Assessment - Percentages For Sta	eeds Assessment - Percentages For State Date Range 1/1/2016 To 3/31/2016														
	State Region 1 Region 2 Region 3 Region 4 Region 6 Region 8														
	Total # people	%Not Receiving Services	%Not Receiving Service s	%Not Receiving Service s	%Not Receiving Services	%Not Receiving Services	%Not Receiving Service s	%Not Receiving Services							
🗉 Bubstance Abuse	388	22%	28%	19%	14%	33%	14%	16%							
🗄 Physical Health	388	19%	28%	19%	136	28%	10%	9%							
🗉 Soolal Support System	388	20%	36%	19%	136	27%	10%	9%							
🗄 House hold Relation ship Skills	383	21%	36%	19%	13%	32%	10%	9%							
🗄 Parenting Skills	388	22%	28%	21%	16%	30%	13%	14%							
🗄 Emotional Health/Coping skills	383	23%	33%	24%	16%	33%	13%	119							
🗄 Re sou roe M anagem e nt/Eas lo ne ed s	288	19%	28%	17%	13%	26%	12%	9%							

Sunday, January 31, 2016 1:12 PM

Risk Management Data: SFY 2015

Race	•	Youth Arrested	% Arrested
Asian		4	0.48%
Bi-Racial		47	5.68%
Black/African America	an	342	41.35%
Caucasian		175	21.16%
Hispanic		252	30.47%
Native American India	n	2	0.24%
Other		4	0.48%
Unknown		1	0.12%
Grand Total		827	100.00%

Fatality Data Report

JAN 1, 2005 - DEC 31, 2015

Calendar Year	Child	Deaths Due to Maltrea	tment	DCF Involved But	Not DCF Involved	Total Child Deaths
of Incident	DCF In	volved	No DCF Involvement	Death Not Due to	and	Reported to DCF Risk
of incident	Open DCF Case	Prior DCF Case	NO DEP INVOlvement	Maltreatment	Not Maltreatment	Management
2005	0	0	1	11	7	19
2006	1	1	1	13	9	25
2007	2	2	0	15	5	24
2008	2	5	4	12	14	37
2009	1	2	4	12	12	31
2010	0	3	2	12	17	34
2011	4	4	2	14	17	41
2012	1	5	4	11	15	
2013	5	5	6	12	13	41
2014	7	8	2	21	12	50
2015	4	3	2	16*	16	
2005	0.0%	0.0%	5.3%	57.9%	36.8%	I I
2006	4.0%	4.0%	4.0%	52.0%	36.0%	
2007	8.3%	8.3%	0.0%	62.5%	20.8%	I I
2008	5.4%	13.5%	10.8%	32.4%	37.8%	100.0%
2009	3.2%	6.5%	12.9%	38.7%	38.7%	
2010	0.0%	8.8%	5.9%	35.3%	50.0%	100.0%
2011	9.8%	9.8%	4.9%	34.1%	41.5%	
2012	2.8%	13.9%	11.1%	30.6%	41.7%	I I
2013	12.2%	12.2%	14.6%	29.3%	31.7%	100.0%
2014	14.0%	16.0%	4.0%	42.0%	24.0%	
2015	9.8%	7.3%	4.9%	39.0%	39.0%	100.0%

* 5 Cases from 2015 are still being investigated for possible maltreatment





Connecticut Juvenile Training School (DCF) Restraint & Seclusion Report

For

November 2015

Data Source: DCF Web-Based ESI Reporting System Facility Data_Entry file

Report Date: 1/13/2016

Prepared By: DCF Office for Research & Evaluation

DATA FOR

SELECTED PERIOD

Unique Placements: 77 Unique Persons: 77

ESI's: 233

ESI Involved Clients: 35 (45.5%) All Unique Clients: 77 ESI-free Clients: 42 (54.5%)

ESI s/1KC-Days: 116.73

Physical Restraints: 71 (30.5%) PR Clients: 31 (40.3%) PR's/1KC-Days: 35.57 PR-Free Clients 46 (59.7%)

Prone Restraints: 6 (8.5%) Prone Clients: 6 (19.4%) Prone/1KC-Days: 3.01 Escort Only PR: 1 (1.4%) Mech. Restraints: 15 (6.4%) Mech. Restr Clients: 9 (11.7%) Locked Seclusion: 107 (45.9%) Locked Secl. Clients: 32 (41.6%) UnLocked Seclusion: 40 (17.2%) UnLocked Secl Clints: 22 (9.4%)

Outliers For November 2015:

Most ESI's:	-		-	-	
Most PR's:					
Most MR's:					
Most LS's:					
Most ULS's:					

ADC For Month: 66.53

Results Oriented Management Reports

Remember to Save Selected Reports after changing your selected reports

Summary and Other Reports

Summary Reports Exit Summary

Racial Disproportionality & Disparity

- Outcomes Summary by Race
- Disproportionality: All Child Reports
- Disproportionality: Accepted Referrals
- Disproportionality: Child Victim
- Disproportionality: Entered Foster Care
- Disproportionality: In Foster Care
- Disproportionality: Exit Foster Care
- Π Disparity: All Child Reports
- Disparity: Accepted Referrals
- Disparity: Child Victim
- Disparity: Entered Foster Care
- Disparity: In Foster Care
- Disparity: Exit Foster Care

Executive Summary Reports

Outcomes Summary by Unit

What Can We Still Do?

- Reports & Responses
- Exit Plan #2: Report Responses Pending/Completed Within 45 Days ✓

In-Home Care

Exit Plan #17: Pending In-home Visits

Out-of-Home Care

- Exit Plan #16: Worker-Child Visitation Pending/Completed In Current Month
- Exit Plan #22: Pending MDE

Permanency Countdown Reports

- Countdown for Placement Resources
- Countdown to Permanency (of those that entered care in last 24 months)
 - Countdown to Adoption/Other Permanency (those given TPR in last 24 months)
- Countdown to TPR (of those starting 17th month in last 24 months)

How Much Did We Do?

Reports & Responses

- Maltreatment Allegations Received by Maltreatment Type
- Completed Report Responses by Substantiation Decision

Out-of-Home Care

- Child Placement Episode ~ Counts
- Average Daily Population Out of Home
- Discharge Reason (of those discharged)
- Placement Type (of those in care)

How Well Did We Do? Reports & Responses Exit Plan #1: Report Response

- Commencement Exit Plan #2: Report Response
- Completion
- Exit Plan #17: Twice Monthly Worker-**V** Family Visitation In-Home

Out-of-Home Care

- Exit Plan #16: Monthly Worker-Child Visitation
- Exit Plan #22: Multidisciplinary Exams Completed Within 30 Days
- Search
- those entering care)
- Placement in same or adjoining Town (of those in care)
- siblings in out-of-home placement)
- Length of Stay (for those in care)

CFSR Round 3

(Federal) Placement Stability

CFSR Round 3: Supplemental

- Placement Moves Rate per 1,000 Days of Care
- Adopted in less than 12 months of TPR (of those TPR 12 months ago)

Months Exit Plan #6: Child Safe While In DCF

Are Our Children Better Off?

Reports & Responses

Care

Exit Plan #5: Child Safety Maintained 6

Out-of-Home Care

- Exit Plan #7: Reunified Within 12 Months (of those reunified)
- Exit Plan #9: Guardianship Within 24 Months (of guardianships transferred)
- Exit Plan #8: Adopted Within 24 Months (of those adopted)
- Exit Plan #11: Maintained Permanency 12 Months (of entries to care)
- Permanency in 12 Months (of those entering care 12 months ago)
- Permanency in 24 Months (of those entered care 24 months ago)
- No Re-Entry into Custody (of those discharged 12 months ago)

CFSR Round 3

- (Federal) Recurrence of Maltreatment
- (Federal) Maltreatment in Foster Care
- (Federal) Permanency in 12 Months
- (Federal) Permanency in 12 Months for Children in Foster Care 12-23 Months
- (Federal) Permanency in 12 Months for Children in Foster Care 24+ Months
- (Federal) Re-Entry to Foster Care

CFSR Round 3: Supplemental

- Safe from Maltreatment Recurrence for 6 months (of victims 6 mos. ago)
- Maltreatment Reports During Foster Care
- Permanency in 12 months (of those entered care 12 months ago)
- Permanency in 24 months (of those entered care 24 months ago)
- Permanency Maintained 12 months (of those discharged 12 mos ago)
- Cumulative Permanency for Children in Foster Care 12 to 23 Months
- Cumulative Permanency for Children in Foster Care 24+ Months

- - Exit Plan #4: Placement Resource
 - Initial Placement With Relatives (of

 - Siblings Placed Together (of those with

Service System Data: Thinking About Better Off

					Multi-				Unable to				Grand	
Reasons for Discharge ages 0 -17: CY 2014	Black	%	Hispanic	%	Racial	%	Other	%	Report	%	White	%	Total	Total %
Agency Discontinued: Administrative	583	17%	1551	44%	63	2%	131	4%	144	4%	1035	30%	3507	10.31%
Agency Discontinued: Clinical	68	21%	100	30%	12	4%	9	3%	33	10%	106	32%	328	0.96%
Child Adopted	6	10%	28	47%	2	3%	0	0%	1	2%	22	37%	59	0.17%
Child Needs Different Setting	5	17%	16	53%	1	3%	0	0%	3	10%	5	17%	30	0.09%
Child placed w\ another foster fam. outside Provider network	10	37%	6	22%	0	0%	0	0%	3	11%	8	30%	27	0.08%
Child placed w\ another foster fam. within Provider network	51	35%	61	42%	7	5%	2	1%	0	0%	23	16%	144	0.42%
Child placed with relative	15	39%	9	24%	1	3%	1	3%	2	5%	10	26%	38	0.11%
Child ran away	29	25%	47	41%	4	3%	3	3%	9	8%	23	20%	115	0.34%
Child Refused Continued Placement	0	0%	1	25%	1	25%	0	0%	0	0%	2	50%	4	0.01%
Child Requires Other Out-of-Home Care	59	25%	73	31%	4	2%	9	4%	4	2%	90	38%	239	0.70%
Child returned to parent(s)	11	21%	21	40%	3	6%	1	2%	1	2%	15	29%	52	0.15%
Client Hospitalized: medically	7	23%	9	29%	0	0%	1	3%	1	3%	13	42%	31	0.09%
Client Hospitalized: psychiatrically	82	11%	206	28%	16	2%	33	4%	54	7%	351	47%	742	2.18%
Client Incarcerated	49	45%	39	36%	5	5%	4	4%	2	2%	9	8%	108	0.32%
Client Requires Higher Level of Care	178	14%	502	40%	41	3%	46	4%	36	3%	451	36%	1254	3.69%
Client Requires Out of Home Placement	9	28%	12	38%	0	0%	1	3%	3	9%	7	22%	32	0.09%
Client/Family Moved	124	16%	339	43%	16	2%	35	4%	28	4%	248	31%	790	2.32%
Current D/C Plan Achieved	58	26%	71	32%	5	2%	8	4%	4	2%	78	35%	224	0.66%
Family Discontinued	933	17%	1935	34%	104	2%	226	4%	513	9%	1940	34%	5651	16.62%
Met Treatment Goals	2760	15%	6097	33%	419	2%	791	4%	1253	7%	7255	39%	18575	54.63%
Grand Total	5405	16%	11885	35%	758	2%	1386	4%	2145	6%	12421	37%	34000	100%

Placement Projections by Race/Ethnicity





Trend in the Percentage of NON-HISPANIC, BLACK Children in DCF Placement by Placement Type:

Trend in the Percentage of NON-HISPANIC, WHITE Children in DCF Placement by Placement Type: Observed Data Thru January 2015, Forecasted Data From February 2015



Continued gap of af. american children being placed with kin (green line)

Children in Placement Dashboard

Statewide

Total Caseload Points and Children-in-Placement (CIP) Distributions February, 2015 to January, 2016

State Region 1 Region 2 Region 3 Region 4 Region 5 Region 6 # and % of Children Entering Placement During Time Period CIP DASHBOARD % of Total Children-In-Placement (CIP) # in Congregate Care Subgroups Family Foster Care Age Group Kinship Care Total Entries Observation Caseload Points Foster Relative Special Independent Congregate Living Care Out of During Period Relative Special Foster Congregate Care Independent Living Date Total CIP >=13 7-12 Саге Care Śtudy State Śtudy Care Care -06 02/01/2015 13,714 3,993 44.6 % 29.5 % 6.4 % 4.2 % 15.3 % 12 567 36 28.1 % 5.0 % 40.3 % 21.6 % 5.0 % 6 139 03/01/2015 13,827 4.011 44.6 % 28.6 % 6.6 % 5.0 % 15.3 % 12 574 33 5 167 37.1 % 6.6 % 36.5 % 16.8 % 3.0.9 04/01/2015 13,879 4,008 44.6 % 28.8 % 6.4 % 5.0 % 15.1 % 13 567 35 5 151 40.4 % 4.6 % 39.7 % 13.2 % 2.0 % 13,737 44.5 % 6.3 % 5.0 % 14.7 % 543 178 42.7 % 18.0 % 05/01/2015 3,990 29.5 % 11 35 8 29.2 % 7.9% 229 06/01/2015 31.4 % 14.193 4.009 44.5 % 29.4 % 6.6 % 5.0 % 14.5 % 11 542 33 6 185 42.2 % 7.6 % 17.8 % 1.1 % 07/01/2015 13,955 3,997 43.7 % 30.1 % 6.8 % 5.2% 14.3 % 10 532 32 6 195 40.5 % 8.7 % 35.9 % 13.3 % 1.5.% 08/01/2015 13.614 3,988 43.4 % 30.8 % 7.0 % 5.0 % 13.8 % 10 514 30 5 227 48.0 % 53% 35.2 % 10.6 % 0.9 % 09/01/2015 13.679 3.977 42.0 % 32.3 % 7.0 % 5.3 % 13.4 % 9 500 26 8 198 40.9 % 3.5 % 35.9 % 17.7 % 2.0 % 14.279 4.026 6.9 % 5.1 % 9 7 0.7 % 10/01/2015 32.8 % 13.6.% 514 28 143 29.4.% 49.7% 12.6 % 41.5 % 77% 11/01/2015 14.519 4.013 41.5 % 32.8 % 7.1% 5.2 % 13.4 % 9 502 30 6 181 31.5 % 7.7 % 48.1 % 11.6 % 1.1.% 12/01/2015 14.575 3.990 41.0 % 33.3 % 6.9 % 5.5% 13.4 % 10 499 27 7 162 28.4 % 6.2 % 54.3.% 11.1 % 0.0 % 01/01/2016 14,338 3.993 40.9 % 33.4 % 7.1 % 5.5 % 13.1 % 11 489 29 7 54 25.9 % 1.9 % 48.1 % 22.2 % 1.9 % % Change from 2/1/2015 4.6% 13.0% 11.4% -8.3% -13.8% -19.4% 16.7% -64.1% -85.7% -53.6% to Latest 0.0% -8.2% 29.0% -13.8% -61.2% -60.0% -85.7% Children Entering Care by Intial Total DCF Caseload and Number Children in Placement (CIP) by Number of Children in Cong Care: Placement Type of Children in Placement (CIP) Placement Type) by Age Group and Out-of-State 16000 50 60 % 14000 40 9 40.55 12000 400 30.5 . 10000 20.% 8000 20.5 6000 14 H H 200 10.9 0.1 4000 2046 202 2015 2018 2016 246 8 8 246 2010 2016 ŝ 2000 1 푝 Ĵ. 2015 Sec. 2015 848 步 Mar Apr. 直 100 8 10 8 ä Ř 2015 2015 2015 2015 2015 2015 夏 hu bu bu bu bu Mar, Mar, 6 Marr. Marrie Mar ie. Foster Care Month Percent Relative Care Month Percent ----- Ind Living Percent Special Study Month Percent Easter Care Percent ---- out of state ---- Age 7-12 ----- Age >=13 Relative Care Percent ---- Cong Care Percent - Cong Care Month Percent - TOTAL PTS - TOTAL CIP Special Study Percent - Age <=8

