Juan F. v. Malloy Exit Plan Quarterly Report January 1, 2012 - March 31, 2012 Civil Action No. 2:89 CV 859 (SRU)

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Juan F. v Malloy Exit Plan Quarterly Report January 1, 2012 - March 31, 2012

Highlights

- The Court Monitor's quarterly review of the Department's efforts to meet the Exit Plan Outcome Measures during the period of January 1, 2012 through March 31, 2012 indicates the Department achieved 15 of the 22 Outcome Measures. The seven measures not met included: Outcome Measure 3 (Case Planning), Outcome Measure 7 (Reunification), Outcome Measure 8 (Adoption), Outcome Measure 10 (Sibling Placements), Outcome Measure 15 (Children's Needs Met), Outcome Measure 17 (Worker-Child Visitation, In-Home), and Outcome Measure 18 (Caseload Standards).
- Statewide, of the sample reviewed for Outcome Measure 3, a total of 21 of the 53 cases or 39.6% achieved the measure. This is a decline from the 44.4% reported last quarter (see page 11). As reported in our prior report, in response to the continuing challenge to improve on this critical measure, the Court Monitor has assigned Court Monitor staff to liaison with each region. The result has been promising. The liaison activities have fostered greater collaboration and information sharing on a face-to-face basis. Along with increased inclusion of DCF Administrative Case Review staff, this communication generates a much more effective transfer of knowledge between all parties. Regionally there are signs that all levels of social work staff are beginning to prioritize engagement of families to effectively develop their case plans. This was seen most recently in a meeting attended by the Court Monitor staff in which each region reported on the progress of their rigorously pursued implementation of the key components of the regional strategic plans for Outcome Measure 3.

As reported in previous quarters, improvement in the identification of priority goals and action steps as well as developing and incorporating complete assessments remains a challenge. Furthermore, the Area Office staff has not consistently utilized the feedback from the Administrative Case Review (ACR) Social Work Supervisors.

• Two of the three permanency measures were not met this quarter. Outcome Measure 7 (Reunification) fell below the 60% compliance target for the first time since 2009 at 58.9%. Outcome Measure 8 (Adoption) recorded the lowest finding since 2004. This measure identifies the percentage of children who achieved finalized adoptions in the First Quarter 2012 within 24 months of child's removal from his home. In all, 23.7% of the finalized adoptions during the First Quarter 2012 occurred within two years of the child's removal from home. This quarter's results represented a significant departure from previous quarters which have been at or near the required 32.0% standard. A review of the findings by the Department and the Court Monitor notes that in addition to timeliness issues, the number of finalized adoptions was lower than typical quarters over the last several years. This could be the result of recent changes to procedures regarding subsidized adoption, or reflective of the changing make-up of children in care with an adoption goal. The impact of increased utilization of relatives may also play a role in the decrease in the overall number of adoptions, or the increase in length of time to adoption, as relatives may require more time to come to a

decision regarding this commitment when transfer of guardianship is also an option they can explore.

• Statewide, a total of 32 of the 53 cases or 60.4% of the cases sampled achieved Outcome Measure 15 (Children's Needs Met) an increase over the 55.6% achieved during the prior quarter (see page 17). There were four area offices that achieved the 80% measure during the First Quarter 2012. These are: Middletown, Norwich, Manchester and Meriden. Region III achieved the goal of 90.0% with the combined scores of its three area offices (Willimantic, Norwich and Middletown).

The most problematic areas for meeting the service needs of children and families were in the categories of Permanency: "DCF Case Management - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months", which was at 56.6% statewide. This domain measures the agency's internal case management practice and ability to secure appropriate services that are not mental health, substance abuse behavioral health, medical, dental and education (which all have their own categories of measurement). "Well-Being: Mental Health, Behavioral and Substance Abuse Services" measured at 67.9% within the statewide sample. "Risk: In-Home" (appropriate assessment and response to identified risk to child/family safety within the in-home population) was rated at 70.6%.

An examination of individually identified Unmet Needs on pages 18 and 21, reveals a significant number of situations (over 350: 254 unmet in prior six months, 103 not included in the planning for the upcoming six months) where barriers included: delays in making a referral, the lack of a service provider specific to the need, or refusal by clients to utilize the service at the time of referral or shortly thereafter.

• The current administration has demonstrated significant progress on a number of initiatives related to policy changes. In particular, <u>Juan F.</u> Quarterly reports have detailed the decline in the use of congregate care treatment. Under the current leadership, the Department has effectively reduced the utilization of congregate care for children under the age of 12, those residing in out-of-state facilities and those residing in temporary settings. This decrease in the utilization of a restrictive level of care necessitates the need to review and monitor the outcomes for the diverted children.

To address this issue, the Department has focused on strategies, both macro and micro to ensure that children are receiving appropriate care and services. These include a close examination of a variety of system issues as well as an analysis of automated data detailing the number of re-entries, repeat maltreatment, placement changes, etc. In addition, case specific efforts by Regional Office and Central Office staff have been utilized on an ongoing basis.

Both parties in the <u>Juan F.</u> Consent Decree expressed an interest in devising a methodology to examine the outcomes for children exiting from congregate care. Fernando Muniz, DCF Chief of Quality and Planning and the Court Monitor's Office led an effort to develop and implement a review methodology that included both Department staff and Court Monitor

reviewers. These 14 reviewers included Court Monitor staff, Administrative Case Review managers and Regional Office Quality Assurance managers. Analysis of the review data is being performed primarily by the Department's Office for Research and Evaluation.

The methodology included a review of a sample from all children exiting congregate care during April-June 2011 with a focus on these cohorts of children: children under 12 years old; children returning from out-of-state residential placement, and children discharging from temporary congregate settings (Safe Homes, STAR homes, etc.).

The full report on this congregate care discharge review has not been completed at the time of this report. The report will be released either as a stand alone report or included in the next quarterly report. The report will provide three components that include: an examination of automated data for each of the cohorts from the full universe of children leaving congregate care during the quarter, a review of a random sample of 60 children, and a summary of the comments of the 14 reviewers as a result of a debriefing held at the conclusion of the review.

The notable preliminary findings include:

- There is no evidence in the 60 reviewed cases of children being "rushed out" of placements due to directives or mandates.
- There is considerable evidence of collaborative case planning in most cases. A
 very important factor for children's needs being identified prior to discharge and
 subsequently met appeared to be solid partnership and alliance between the
 Department, providers, families and youth. SAFE Home discharges had the most
 planful directives and service implementation.
- There is no indication that the administrative mandate for reduction of congregate care census for the three defined populations has led to newly identified systemic issues harmful to the planning or service provision to *Juan F*. children and youth.
- Systemic issues identified in previous review activities by DCF, Court Monitor and other external groups were evident in the sample review, such as:
 - Consequences of ineffective engagement of family and providers
 - Consequences of ineffective assessment and delays, wait-lists and unavailability of individualized service
 - Negative impact to youth who AWOL
 - Variability in planning when youth indicate a strong desire to reunite with the family from who they were removed
 - Utilization of a waiver to facilitate relative placements
 - Lack of appropriate documentation in the case record
- Since January 2009, almost two out of every three children discharging from congregate care consistently exit from DCF custody/placement or step-down to a lower level of care.
- In viewing data over the last four years, close to 30% of children discharging from congregate care move again within 90 days of their exit and another 13% move between 90 and 180 days.

- For those children that exited DCF placement, the majority (over 60%) of them tend to be discharged to some form of permanency, most often Reunification.
- In viewing the data over that last four years, over 80% of the children who exit DCF care (under 18 years of age) maintained the stability of their discharge and avoided subsequent re-entry to DCF care.
- The Court Monitor is continuing the process of precertifying the Outcome Measures. This effort is designed to conduct a comprehensive review of the Consent Decree in order to identify strengths, weaknesses and make a determination whether the outcome is currently in compliance, both quantitative and qualitative with an eye toward establishing the path to exit. The determination of compliance via precertification will allow specific measures to be deemphasized and thus narrow the focus of the Department's effort on the most critical measures and issues. The *Juan F*. parties have held discussions regarding the findings and a final determination of the initial group of measures that will be precertified will be established in August 2012.

The findings from Outcome Measures 12-Multiple Placements, 14-Placement Within Licensed Capacity, 16-Worker-Child Visitation (Out-of-Home), 17-Worker-Child Visitation (In-Home), 20-Discharge Measures, and 21-Discharge for Mentally III or Mentally Retarded Children have been published in previous quarterly reports. The three permanency measures 7-Reunification, 8-Adoption, 9-Transfer of Guardianship will be reported in the subsequent report in October 2012.

- Outcome Measure 20 (Discharge Measures) was met in the First Quarter 2012. This measure requires 85% of the youth age 18 or older to have achieved educational and/or vocational goals at the time of their discharge from DCF custody. Fifty-three (53) of the sixty-one (61) youth in this quarter's universe or 86.9% achieved one or more of the measures. Of the 53 children who met the measure:
 - o 24 met one measure
 - o 29 met two or more measures
 - o 44 earned a high school diploma
 - o 9 earned a GED
- As of May 2012, there were 316 <u>Juan F.</u> children placed in residential facilities. This is a decrease of 56 children compared to the 372 children reported last quarter. The number of children residing in residential care for greater than 12 months was 113, which is a decrease of 11 children in comparison to the 124 reported last quarter.
- The number of <u>Juan F.</u> children residing and receiving treatment in out-of-state residential facilities as of May 2012 decreased by 29 to 138 compared to the 167 reported for February 2012. There has been a decrease of 150 <u>Juan F.</u> children in out-of-state residential facilities in the last year.
- The number of children age 12 years old or younger in congregate care decreased from 90 in February 2012 to 78 as of May 2012. This reduction was primarily in Residential placement facilities.

- As of May 2012, there were two (2) children aged 1 to 5 years of age residing in a SAFE Home placement. This is a decrease of two (2) children from February 2012. There were 34 children age 12 and under in SAFE Home settings as of May 2012.
- The number of children utilizing SAFE Home temporary placements increased to 63 as of May 2012 compared with the 60 reported as of February 2012. The number of children in SAFE Home overstay status (>60 days), decreased to 40 children compared with the 44 children reported last quarter. The First Quarter data indicates 63.4% (40 of 63) of the children are in overstay status. There were 11 children with lengths of stay in excess of six months as of May 2012. The lack of sufficient foster/adoptive resources remains a significant barrier to timely discharge for these children.
- There were 71 youth in STAR programs as of May 2012, four less than the 75 reported in February 2012. The number of youth in overstay status (>60 days) in STAR placements decreased to 37 youth, compared with the 40 youth noted last quarter. Fifty-two percent (52.1%) of the youth (40 of 75) in STAR programs were in overstay status as of May 2012. There were 9 children with lengths of stay longer than six months as of May 2012. The lack of sufficient and appropriate treatment/placement services especially family-based settings for older youth hamper efforts to reduce the utilization of STAR services and manage short lengths of stay.
- The Division of Foster Care's monthly report for April 2012 indicates that there are 2,285 licensed DCF foster homes. This is a decrease of 10 homes compared with the Fourth Quarter 2011 report. The number of approved private provider foster care homes is 869. The number of private provider foster homes currently available for placement is 69. The Department's goal as outlined in the Stipulation Regarding Outcome Measures 3 and 15 required (1) a statewide gain of 350 foster homes by June 30, 2009; and (2) an additional statewide gain of 500 foster homes by June 30, 2010. The baseline set in June 2008 and revised during the Second Quarter 2011 is 3,287 foster homes. The Department's status as of April 2012 is 3,154 homes, a net loss of 133 homes compared with the baseline set in June 2008. Additional foster care and adoptive resources remain an essential component required to address the needs of children, reduce discharge delays, avoid overcapacity placements, and ensure placement in the most appropriate and least restrictive setting.
- The number of children with the goal of Another Planned Permanent Living Arrangement (APPLA) decreased by 40 from the 711 to 671 this quarter. The Department's efforts to appropriately pursue APPLA goals for youth, including modifying the goal of children with an APPLA goal to a preferred goal, and the continued age-out of older youth contributes to the sizeable reduction in the number of children with APPLA over the last few years.

- The Monitor's quarterly review of the Department for the period of January 1, 2012 through March 31, 2012 indicates that the Department did not achieve compliance with seven (7) measures:
 - Treatment Planning (39.6%)
 - Reunification (58.9%)
 - Adoption (23.7%)
 - Sibling Placements (88.5%)
 - Children's Needs Met (60.4%)
 - Worker-Child Visitation In-Home Cases (84.8%)¹
 - Caseload Standards (99.8%)
- The Monitor's quarterly review of the Department for the period of January 1, 2012 through March 31, 2012 indicates the Department has achieved compliance with the following 15 Outcome Measures:
 - Commencement of Investigations (96.6%)
 - Completion of Investigations (91.9%)
 - Search for Relatives (89.3%)
 - Repeat Maltreatment (4.3%)
 - Maltreatment of Children in Out-of Home Cases (0.1%)
 - Transfer of Guardianship (81.4%)
 - Re-Entry into DCF custody (5.8%)
 - Multiple Placements (96.6%)
 - Foster Parent Training (100.0%)
 - Placement within Licensed Capacity (97.7%)
 - Worker-Child Visitation Out-of Home Cases (95.1% Monthly/99.2% Quarterly)
 - Residential Reduction (7.5%)
 - Discharge Measures regarding Education, Work, and Military Status (86.9%)
 - Discharge to DMHAS and DMR (100.0%)
 - Multi-disciplinary Exams (90.0%)

¹ Analysis of the recent certification review of In-Home visitation revealed that LINK/ROM data does not reflect the specific standard outlined in the Exit Plan. The automated LINK data only records whether someone within the family is seen twice a month rather than whether all active participants are seen twice a month.

- The Department has maintained compliance for at least two (2) consecutive quarters² with 14 of the Outcome Measures reported as achieved this quarter. (Measures are shown designating the number of consecutive quarters for which the measure was achieved):
 - Commencement of Investigations (thirtieth consecutive quarter)
 - Completion of Investigations (thirtieth consecutive quarter)
 - Search for Relatives (twenty-fifth consecutive quarter)
 - Repeat Maltreatment (twentieth consecutive quarter)
 - Maltreatment of Children in Out-of-Home Care (thirty-third consecutive quarter)
 - Transfer of Guardianship (thirteenth consecutive quarter)
 - Re-Entry into DCF custody (second consecutive quarter)
 - Multiple Placements (fifteenth consecutive quarter)
 - Placement within Licensed Capacity (second consecutive quarter)
 - Foster Parent Training (fifteenth consecutive quarter)
 - Visitation Out-of-Home (twenty-sixth consecutive quarter)
 - Residential Reduction (twenty-fourth consecutive quarter)
 - Discharge to DMHAS and DMR (second consecutive quarter)
 - Multi-disciplinary Exams (twenty-fifth consecutive quarter)

A full copy of the Department's First Quarter 2012 submission including the Commissioner's Highlights may be found on page 42.

² The Defendants must be in compliance with all of the outcome measures, and in sustained compliance with all of the outcome measures for at least two consecutive quarters (six-months) prior to asserting compliance and shall maintain compliance through any decision to terminate jurisdiction.

| Statewide | Juan F. | Exit P | an Re | port (| Outcon | ne Me | asure | Over | view | | | | | | | | | | | | | | |
|------------------------------------------------------------------|----------------|---------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|
| Measure | Measure | Base- line | 1Q 2012 | 4Q 2011 | 3Q 2011 | 2Q 2011 | 1Q 2011 | 4Q 2010 | 3Q 2010 | 2Q 2010 | 1Q 2010 | 4Q 2009 | 3Q 2009 | 2Q 2009 | 1Q 2009 | 4Q 2008 | 3Q 2008 | 2Q 2008 | 1Q 2008 | 4Q 2007 | 3Q 2007 | 2Q 2007 | 1Q 2007 |
| 1: Commencement of Investigation | >=90% | × | 96.6% | 97.1% | | | | 96.8% | 97.4% | 97.6% | | 97.8% | | | 97.6% | 97.9% | 97.4% | 97.5% | | 97.4% | | 97.1% | |
| 2: Completion of the Investigation | >= 85 % | 73.7% | 91.9% | 93.3% | 94.0% | 94.4% | 92.7% | 90.0% | 91.5% | 92.9% | 93.7% | 94.3% | 94.0% | 91.8% | 91.3% | 91.4% | 89.9% | 93.7% | 91.5% | 92.9% | 94.2% | 93.7% | 93.0% |
| 3: Treatment Plans | > =90 % | × | 39.6% | 44.4% | 50.9% | N/A | 81.1% | 67.9% | 66.0% | 75.5% | 86.5% | 47.2% | 53.8% | 73.1% | 65.4% | 81.1% | 62.3% | 55.8% | 58.8% | 51.0% | 30.0% | 30.3% | 41.3% |
| 4: Search for Relatives | >= 85 % | 58% | 89.3% | 92.8% | 94.5% | 94.5% | 90.1% | 88.8% | 90.9% | 91.2% | 92.0% | 90.0% | 91.0% | 91.2% | 94.3% | 94.3% | 96.3% | 95.8% | 95.3% | 93.6% | 91.4% | 93.8% | 92.0% |
| 5: Repeat Maltreatment of In- Home Children | <=7% | 9.3% | 4.3% | 6.0% | 6.1% | 5.4% | 5.7% | 6.2% | 6.5% | 6.5% | 5.8% | 6.0% | 5.4% | 4.8% | 5.8% | 6.1% | 5.7% | 5.9% | 5.7% | 5.4% | 6.1% | 6.3% | 7.4% |
| 6: Maltreatment of Children in Out-of-Home Care | <=2% | 1.2% | 0.1% | 0.1% | 0.2% | 0.1% | 0.1% | 0.4% | 0.2% | 0.1% | 0.2% | 0.3% | 0.4% | 0.1% | 0.3% | 0.2% | 0.3% | 0.3% | 0.2% | 0.2% | 0.3% | 0.0% | 0.2% |
| 7: Reunification | >=60% | 57.8% | 58.9% | 65.8% | 65.3% | 73.1% | 61.7% | 64.9% | 68.3% | 67.1% | 61.2% | 71.4% | 56.0% | 71.9% | 68.1% | 69.6% | 57.1% | 59.4% | 56.5% | 58.0% | 65.5% | 67.9% | 70.5% |
| 8: Adoption | >=32% | 12.5% | 23.7% | 33.6% | 40.0% | 32.7% | 35.6% | 38.5% | 25.8% | 36.0% | 34.7% | 35.2% | 36.7% | 33.2% | 44.7% | 27.2% | 32.3% | 33.0% | 41.5% | 35.5% | 36.2% | 40.6% | 34.5% |
| 9: Transfer of Guardianship | >= 70 % | 60.5% | 81.4% | 83.1% | 83.6% | 78.4% | 86.2% | 87.3% | 78.6% | 74.6% | 82.3% | 76.3% | 81.8% | 75.7% | 75.3% | 64.9% | 71.7% | 70.0% | 70.4% | 80.8% | 76.8% | 88.0% | 78.0% |
| 10: Sibling Placement | >= 95 % | 57% | 88.5% | 91.8% | 89.3% | 85.8% | 86.7% | 83.3% | 81.9% | 84.8% | 85.6% | 83.4% | 84.7% | 83.1% | 83.4% | 82.1% | 82.6% | 86.8% | 86.7% | 85.2% | 83.3% | 79.1% | 84.9% |
| 11: Re-Entry into DCF Custody | <=7% | 6.9% | 5.8% | 6.4% | 7.2% | 4.4% | 7.7% | 6.3% | 7.3% | 6.7% | 8.4% | 7.8% | 9.9% | 8.8% | 8.2% | 7.4% | 6.7% | 6.7% | 11.0% | 7.8% | 9.0% | 8.5% | 7.5% |
| 12: Multiple Placements | >=85% | × | 96.6% | 96.4% | 96.4% | 96.1% | 96.1% | 96.1% | 95.7% | 95.8% | 95.9% | 95.4% | 95.7% | 95.8% | 96.0% | 95.8% | 95.9% | 96.3% | 91.2% | 92.7% | 94.4% | 96.0% | 96.3% |
| 13: Foster Parent Training | 100% | × | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| 14: Placement Within Licensed Capacity | >=96% | 94.9% | 97.7% | 96.1% | 95.2% | 95.6% | 96.8% | 96.8% | 95.4% | 95.1% | 96.9% | 96.9% | 96.3% | 96.6% | 96.6% | 96.6% | 97.0% | 96.8% | 96.4% | 96.8% | 96.9% | 97.1% | 96.8% |
| 15: Children's Needs Met | >=80% | × | 60.4% | 55.6% | 60.4% | N/A | 58.5% | 56.6% | 58.5% | 52.8% | 67.3% | 45.3% | 55.8% | 63.5% | 61.5% | 58.5% | 52.8% | 55.8% | 58.8% | 47.1% | 64.0% | 51.3% | 45.3% |
| 16: Worker-Child Visitation (Out-of-Home) | >=85%(M) | × | 95.1% | 92.3% | 95.0% | 95.1% | 95.8% | 95.3% | 95.3% | 95.7% | 96.2% | 95.8% | 95.1% | 95.7% | 95.7% | 95.0% | 95.4% | 94.9% | 95.9% | 94.6% | 94.8% | 94.6% | 95.1% |
| | =100%(Q) | × | 99.2% | 98.6% | 99.0% | 99.2% | 99.2% | 98.9% | 98.9% | 99.3% | 99.6% | 99.7% | 99.0% | 99.3% | 99.2% | 98.9% | 98.6% | 98.7% | 99.1% | 98.5% | 98.7% | 98.7% | 99.1% |
| 17: Worker-Child Visitation (In- Home) | >= 85 % | × | 84.8% | 85.9% | 86.3% | 89.7% | 88.5% | 89.7% | 89.4% | 89.7% | 89.6% | 88.5% | 88.8% | 89.6% | 90.5% | 89.7% | 90.3% | 91.4% | 90.8% | 89.9% | 89.4% | 90.9% | 89.0% |
| 18: Caseload Standards | 100% | 69.2% | 99.8% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 99.9% | 100.0% | 100.0% | 99.9% | 99.6% | 99.6% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| 19: Reduction in the Number of Children Placed in Residential | <= 11 % | 13.5% | 7.5% | 8.5% | 8.8% | 9.8% | 10.0% | 9.9% | 9.4% | 10.1% | 10.0% | 9.9% | 9.6% | 9.7% | 10.0% | 10.0% | 10.0% | 10.4% | 10.5% | 10.9% | 10.8% | 11.0% | 10.9% |
| 20: Discharge Measures | >= 85 % | 61% | 86.9% | 76.5% | 88.0% | 79.4% | 82.9% | 87.2% | 88.5% | 87.9% | 86.0% | 86.9% | 80.0% | 92.2% | 85.3% | 92.2% | 93.0% | 92.0% | 92.0% | 96.0% | 95.0% | 100.0% | 98.0% |
| 21: Discharge of Mentally Ill or Mentally Retarded Children | 100% | × | 100.0% | 100.0% | 95.7% | 92.0% | 97.0% | 96.1% | 97.3% | 98.1% | 100.0% | 97.6% | 100.0% | 97.2% | 96.7% | 95.0% | 95.0% | 98.0% | 97.0% | 96.0% | 95.0% | 83.0% | 90.0% |
| 22: Multi-disciplinary Exams (MDE) | >=85% | 5.6% | 90.0% | 93.4% | 93.3% | 96.3% | 91.9% | 97.5% | 96.1% | 96.4% | 95.7% | 95.7% | 91.4% | 94.5% | 93.6% | 90.1% | 94.0% | 93.6% | 98.7% | 96.4% | 95.2% | 96.8% | 91.1% |

Monitor's Office Case Review for Outcome Measure 3 and Outcome Measure 15

Statewide, the Outcome Measure 3 total for 1st Quarter 2012 was 39.6%. None of the area offices achieved the 90% requirement. The closest to achievement of this measure was the New Britain Office which attained 83.3% compliance within the sample cases. Region VI was the highest scoring region across the six regions of the state each with an overall average of 75.0% compliance. Regions I and V struggled this quarter, each with combined regional averages of 12.5%.

DCF Region Crosstabulation 1: What is the social worker's area office assignment? * Overall Score for OM3 * $\,$

| DCF Region | What is the social w | orker's area office assignment? | Ove | erall Score for OM | 3 |
|------------|----------------------|---------------------------------|--------------------------|------------------------------------|--------|
| | | _ | Appropriate Case Plan | Not an Appropriate Case Plan | Total |
| Region I | Bridgeport | Count | 1 | 3 | 4 |
| | | % within Area Office | 25.0% | 75.0% | 100.0% |
| | Norwalk | Count | 0 | 2 | 2 |
| | | % within Area Office | .0% | 100.0% | 100.0% |
| | Stamford | Count | 0 | 2 | 2 |
| | | % within Area Office | .0% | 100.0% | 100.0% |
| | Total | Count | 1 | 7 | 8 |
| | | % within Area Office | 12.5% | 87.5% | 100.0% |
| Region II | Milford | Count | 2 | 2 | 4 |
| | | % within Area Office | 50.0% | 50.0% | 100.0% |
| | New Haven | Count | 0 | 4 | 4 |
| | | % within Area Office | .0% | 100.0% | 100.0% |
| | Total | Count | 2 | 6 | 8 |
| | <u>l</u> | % within Area Office | 25.0% | 75.0% | 100.0% |
| Region III | Middletown | Count | 1 | 1 | 2 |
| | | % within Area Office | 50.0% | 50.0% | 100.0% |
| Norw | Norwich | Count | 4 | 1 | 5 |
| | | % within Area Office | 80.0% | 20.0% | 100.0% |
| | Willimantic | Count | 1 | 2 | 3 |
| | | % within Area Office | 33.3% | 66.7% | 100.0% |
| | Total | Count | 6 | 4 | 10 |
| | | % within Area Office | 60.0% | 40.0% | 100.0% |
| Region IV | Hartford | Count | 2 | 5 | 7 |
| | | % within Area Office | 28.6% | 71.4% | 100.0% |
| | Manchester | Count | 3 | 1 | 4 |
| | | % within Area Office | 75.0% | 25.0% | 100.0% |
| | Total | Count | 5 | 6 | 11 |
| | | % within Area Office | 45.5% | 54.5% | 100.0% |
| Region V | Danbury | Count | 0 | 2 | 2 |
| 3 | · | % within Area Office | .0% | 100.0% | 100.0% |
| | Torrington | Count | 0 | 2 | 2 |
| | | % within Area Office | .0% | 100.0% | 100.0% |
| | Waterbury | Count | 1 | 3 | 4 |
| | J | % within Area Office | 25.0% | 75.0% | 100.0% |
| | Total | Count | 1 | 7 | 8 |
| | | % within Area Office | 12.5% | 87.5% | 100.0% |
| Region VI | Meriden | Count | 1 | 1 | 2 |
| 8 | | % within Area Office | 50.0% | 50.0% | 100.0% |
| | New Britain | Count | 50.070 | 1 | 6 |
| | Diituin | % within Area Office | 83.3% | 16.7% | 100.0% |
| | Total | Count | 65.576 | 2 | 8 |
| | Total | % within Area Office | 75.0% | 25.0% | 100.0% |

Assessment, Engagement, Action Steps and Goals continue to be the most problematic areas of case planning. Statewide percentages are shown in the column headings below.

Table 1: Case Summaries for First Quarter 2012 Outcome Measure 3: Appropriate Case Planning

| What is the socia area office assign | | Has the treatment plan been approved by the SWS? | Reason for DCF Involvement 88.7% | Identifying Information 86.8% | Engagement of Child and Family 50.9% | Present Situation and Assessment to Date of Review 45.3% | Determining the Goals/ Objectives 58.5% | Progress 72.0% (excluding too early to note) | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period 56.6% | Planning for Permanency 77.4% | Overall Score for OM3 39.6% | Was the family or child's language needs accommodated ? 96.2% |
|-----------------------------------------|---|--------------------------------------------------|-------------------------------------------|-------------------------------------|-----------------------------------------------|----------------------------------------------------------|--------------------------------------------------|----------------------------------------------|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------|------------------------------------------------------------------------------|
| Bridgeport | 1 | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Marginal | Marginal | Marginal | Not an Appropriate Case Plan | yes |
| | 2 | yes | Optimal | Very Good | Very Good | Marginal | Very Good | Optimal | Very Good | Marginal | Appropriate Case Plan | yes |
| | 3 | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | yes |
| | 4 | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Marginal | Marginal | Not an Appropriate Case Plan | yes |
| Danbury | 1 | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Marginal | Marginal | Very Good | Not an Appropriate Case Plan | yes |
| | 2 | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Too early to note progress | Marginal | Optimal | Not an Appropriate Case Plan | no |
| Milford | 1 | yes | Very Good | Marginal | Very Good | Marginal | Marginal | Poor | Very Good | Very Good | Not an Appropriate Case Plan | yes |
| | 2 | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Appropriate Case Plan | yes |
| | 3 | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Appropriate Case Plan | yes |
| | 4 | yes | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Marginal | Poor | Not an Appropriate Case Plan | yes |

| What is the social area office assignt | | Has the treatment plan been approved by the SWS? | Reason for DCF Involvement 88.7% | Identifying Information 86.8% | Engagement of Child and Family 50.9% | Present Situation and Assessment to Date of Review 45.3% | Determining the Goals/ Objectives 58.5% | Progress 72.0% (excluding too early to note) | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period 56.6% | Planning for Permanency 77.4% | Overall Score for OM3 39.6% | Was the family or child's language needs accommodated ? 96.2% |
|-------------------------------------------|---|-----------------------------------------------------------|-------------------------------------------|-------------------------------------|-----------------------------------------------|----------------------------------------------------------|--------------------------------------------------|----------------------------------------------|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------|------------------------------------------------------------------------------|
| Hartford | 1 | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | yes |
| | 2 | no | Marginal | Marginal | Absent/ Averse | Poor | Poor | Poor | Poor | Marginal | Not an Appropriate Case Plan | yes |
| | 3 | yes | Optimal | Very Good | Marginal | Marginal | Marginal | Marginal | Marginal | Very Good | Not an Appropriate Case Plan | yes |
| | 4 | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Optimal | Very Good | Very Good | Appropriate Case Plan | yes |
| | 5 | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Marginal | Very Good | Not an Appropriate Case Plan | no |
| | 6 | no | Poor | Poor | Poor | Poor | Poor | Poor | Poor | Poor | Not an Appropriate Case Plan | yes |
| | 7 | no | Marginal | Very Good | Marginal | Marginal | Poor | Marginal | Poor | Marginal | Not an Appropriate Case Plan | yes |

| What is the social area office assigni | | Has the treatment plan been approved by the SWS? | Reason for DCF Involvement 88.7% | Identifying Information 86.8% | Engagement of Child and Family 50.9% | Present Situation and Assessment to Date of Review 45.3% | Determining the Goals/ Objectives 58.5% | Progress 72.0% (excluding too early to note) | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period 56.6% | Planning for Permanency 77.4% | Overall Score for OM3 39.6% | Was the family or child's language needs accommodated ? 96.2% |
|-------------------------------------------|---|-----------------------------------------------------------|-------------------------------------------|-------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------|----------------------------------------------|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------|------------------------------------------------------------------------------|
| Manchester | 1 | yes | Very Good | Very Good | Very Good | Very Good | Marginal | Very Good | Very Good | Marginal | Not an Appropriate Case Plan | yes |
| | 2 | yes | Optimal | Very Good | Very Good | Very Good | Optimal | Optimal | Very Good | Optimal | Appropriate Case Plan | yes |
| | 3 | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | yes |
| | 4 | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Marginal | Very Good | Optimal | Appropriate Case Plan | yes |
| Meriden | 1 | yes | Very Good | Very Good | Marginal | Marginal | Very Good | Very Good | Marginal | Very Good | Not an Appropriate Case Plan | yes |
| | 2 | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | yes |
| Middletown | 1 | yes | Optimal | Very Good | Very Good | Very Good | Marginal | Very Good | Marginal | Very Good | Not an Appropriate Case Plan | yes |
| | 2 | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Appropriate Case Plan | yes |
| New Britain | 1 | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Appropriate Case Plan | yes |
| | 2 | yes | Very Good | Optimal | Optimal | Very Good | Optimal | Optimal | Very Good | Optimal | Appropriate Case Plan | yes |
| | 3 | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | yes |
| | 4 | yes | Optimal | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | yes |
| | 5 | yes | Optimal | Very Good | Optimal | Very Good | Very Good | Optimal | Very Good | Very Good | Appropriate Case Plan | yes |
| | 6 | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | yes |

| What is the social area office assign | | Has the treatment plan been approved by the SWS? | Reason for DCF Involvement 88.7% | Identifying Information 86.8% | Engagement of Child and Family 50.9% | Present Situation and Assessment to Date of Review 45.3% | Determining the Goals/ Objectives 58.5% | Progress 72.0% (excluding too early to note) | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period 56.6% | Planning for Permanency 77.4% | Overall Score for OM3 39.6% | Was the family or child's language needs accommodated ? 96.2% |
|------------------------------------------|---|-----------------------------------------------------------|-------------------------------------------|-------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------|----------------------------------------------|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------|------------------------------------------------------------------------------|
| New Haven | 1 | yes | Optimal | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | yes |
| | 2 | yes | Optimal | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | yes |
| | 3 | yes | Marginal | Very Good | Very Good | Marginal | Very Good | Very Good | Marginal | Very Good | Not an Appropriate Case Plan | yes |
| | 4 | yes | Marginal | Very Good | Marginal | Marginal | Marginal | Marginal | Very Good | Marginal | Not an Appropriate Case Plan | yes |
| Norwalk | 1 | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Very Good | Marginal | Not an Appropriate Case Plan | yes |
| | 2 | yes | Very Good | Marginal | Marginal | Marginal | Very Good | Marginal | Very Good | Very Good | Not an Appropriate Case Plan | yes |
| Norwich | 1 | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | yes |
| | 2 | yes | Optimal | Optimal | Very Good | Very Good | Very Good | Optimal | Very Good | Optimal | Appropriate Case Plan | yes |
| | 3 | yes | Optimal | Very Good | Very Good | Optimal | Very Good | Marginal | Marginal | Optimal | Not an Appropriate Case Plan | yes |
| | 4 | yes | Optimal | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | yes |
| | 5 | yes | Optimal | Optimal | Very Good | Optimal | Very Good | Very Good | Very Good | Optimal | Appropriate Case Plan | yes |

| What is the social area office assign | | Has the treatment plan been approved by the SWS? | Reason for DCF Involvement 88.7% | Identifying Information 86.8% | Engagement of Child and Family 50.9% | Present Situation and Assessment to Date of Review 45.3% | Determining the Goals/Objectives 58.5% | Progress 72.0% (excluding too early to note) | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period 56.6% | Planning for Permanency 77.4% | Overall Score for OM3 39.6% | Was the family or child's language needs accommodate d? 96.2% |
|------------------------------------------|---|-----------------------------------------------------------|-------------------------------------------|-------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------|------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------------------|---------------------------------------------------------------|
| Stamford | 1 | yes | Marginal | Marginal | Poor | Poor | Absent/Averse | Absent/ Averse | Absent/ Averse | Absent/Averse | Not an Appropriate Case Plan | yes |
| | 2 | yes | Very Good | Very Good | Very Good | Marginal | Marginal | Marginal | Marginal | Very Good | Not an Appropriate Case Plan | yes |
| Torrington | 1 | yes | Very Good | Very Good | Very Good | Marginal | Marginal | Very Good | Marginal | Very Good | Not an Appropriate Case Plan | yes |
| | 2 | no | Very Good | Marginal | Marginal | Marginal | Very Good | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | yes |
| Waterbury | 1 | yes | Very Good | Marginal | Marginal | Poor | Marginal | Poor | Marginal | Marginal | Not an Appropriate Case Plan | yes |
| | 2 | yes | Optimal | Very Good | Marginal | Marginal | Marginal | Very Good | Marginal | Very Good | Not an Appropriate Case Plan | yes |
| | 3 | yes | Very Good | Optimal | Very Good | Optimal | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | yes |
| | 4 | yes | Optimal | Optimal | Marginal | Marginal | Very Good | Too early to note progress | Marginal | Very Good | Not an Appropriate Case Plan | yes |
| Willimantic | 1 | yes | Optimal | Very Good | Very Good | Optimal | Very Good | Optimal | Marginal | Very Good | Appropriate Case Plan | yes |
| | 2 | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Too early to note progress | Marginal | Very Good | Not an Appropriate Case Plan | yes |
| | 3 | yes | Optimal | Very Good | Marginal | Very Good | Marginal | Optimal | Marginal | Very Good | Not an Appropriate Case Plan | yes |
| Total | N | 53 | 53 | 53 | 53 | 53 | 53 | 53 | 53 | 53 | 53 | 53 |

The overall statewide achievement for OM15 during the 1st Quarter 2012 is 60.4%. There were four area offices that achieved the 80% measure during the 1st Quarter 2012. These are: Middletown, Norwich, Manchester and Meriden. Region III achieved the goal of 90.0% with the combined scores of its three area offices (Willimantic, Norwich, and Middletown).

Crosstabulation 2: What is the social worker's area office assignment? * Overall Score for

Outcome Measure 15 * DCF Region First Quarter 2012

| DCF Region | What is the social v | worker's area office assignment? | Overall Score for Outcome Measure 15 | | | | | |
|------------|----------------------|----------------------------------|--------------------------------------|------------------|--------|--|--|--|
| | | | Needs Met | Needs Not Met | Total | | | |
| Region I | Bridgeport | Count | 3 | 1 | 4 | | | |
| | | % within Area Office | 75.0% | 25.0% | 100.0% | | | |
| | | Count | 0 | 2 | 2 | | | |
| | Norwalk | % within Area Office | .0% | 100.0% | 100.0% | | | |
| | | Count | 1 | 1 | 2 | | | |
| | Stamford | % within Area Office | 50.0% | 50.0% | 100.0% | | | |
| | Region Total | Count | 4 | 4 | 8 | | | |
| | | % within Area Office | 50.0% | 50.0% | 100.0% | | | |
| Region II | Milford | Count | 2 | 2 | 4 | | | |
| | | % within Area Office | 50.0% | 50.0% | 100.0% | | | |
| | New Haven | Count | 1 | 3 | 4 | | | |
| | | % within Area Office | 25.0% | 75.0% | 100.0% | | | |
| | Region Total | Count | 3 | 5 | 8 | | | |
| | | % within Area Office | 37.5% | 62.5% | 100.0% | | | |
| Region III | Middletown | Count | 2 | 0 | 2 | | | |
| | | % within Area Office | 100.0% | .0% | 100.0% | | | |
| | Norwich | Count | 5 | 0 | 5 | | | |
| | | % within Area Office | 100.0% | .0% | 100.0% | | | |
| | Willimantic | Count | 2 | 1 | 3 | | | |
| | | % within Area Office | 66.7% | 33.3% | 100.0% | | | |
| | Region Total | Count | 9 | 1 | 10 | | | |
| | | % within Area Office | 90.0% | 10.0% | 100.0% | | | |
| Region IV | Hartford | Count | 3 | 4 | 7 | | | |
| | | % within Area Office | 42.9% | 57.1% | 100.0% | | | |
| | Manchester | Count | 4 | 0 | 4 | | | |
| | | % within Area Office | 100.0% | .0% | 100.0% | | | |
| | Region Total | Count | 7 | 4 | 11 | | | |
| | | % within Area Office | 63.6% | 36.4% | 100.0% | | | |
| Region V | Danbury | Count | 0 | 2 | 2 | | | |
| | | % within Area Office | .0% | 100.0% | 100.0% | | | |
| | Torrington | Count | 1 | 1 | 2 | | | |
| | | % within Area Office | 50.0% | 50.0% | 100.0% | | | |
| | | Count | 2 | 2 | 4 | | | |
| | Waterbury | % within Area Office | 50.0% | 50.0% | 100.0% | | | |
| | Region Total | Count | 3 | 5 | 8 | | | |
| | | % within Area Office | 37.5% | 62.5% | 100.0% | | | |
| Region VI | Meriden | Count | 2 | 0 | 2 | | | |
| | | % within Area Office | 100.0% | .0% | 100.0% | | | |
| | New Britain | Count | 4 | 2 | 6 | | | |
| | | % within Area Office | 66.7% | 33.3% | 100.0% | | | |
| | Region Total | Count | 6 | 2 | 8 | | | |
| | | % within Area Office | 75.0% | 25.0% | 100.0% | | | |

The most problematic areas for meeting the service needs met of children and families were in the categories of Permanency: "DCF Case Mgmt - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months", which was at 56.6% statewide. This domain measures the agency's internal case management practice and ability to secure appropriate services that are not mental health, substance abuse behavioral health, medical, dental and education (which all have their own categories of measurement). "Well-Being: Mental Health, Behavioral and Substance Abuse Services" measured at 67.9% within the statewide sample. "Risk: In-Home" (appropriate assessment and response to identified risk to child/family safety within the in-home population) was rated at 70.6%.

There were a total of 254 individually identified specific Unmet Needs which included the following:

Table 2: Unmet Needs in the Prior Six Month Period

| Table 2. Uninet Needs in the I | | _ |
|--------------------------------------------------|-------------------------------------------------------------------------------|-----------|
| Unmet Need | Barrier | Frequency |
| Adoption Supports (PPSP) | Delay in Referral | 1 |
| Anger Management | Client Referred but was subsequently discharged for | 2 |
| | noncompliance/missed appointments/or refusal of follow-up services | |
| Anger Management | No Service Identified to Meet this Need | 1 |
| ARG Consultation | Delay in Referral | 9 |
| Behavior Management | No Service Identified to Meet this Need | 3 |
| Behavior Management | Client Referred but was subsequently discharged for | 1 |
| | noncompliance/missed appointments/or refusal of follow-up services | |
| Behavior Management | Delay in Referral | 1 |
| Behavior Management | Provider Issues - untimely provision of services related to staffing, lack of | 1 |
| | follow through, etc | |
| Case Management/Support/Advocacy | Supervisory oversight of delays in referrals/lack of communication with | 21 |
| | providers, and documentation noted | |
| Case Management/Support/Advocacy | Failure to address ACR recommendations | 1 |
| Case Management/Support/Advocacy | Lack of concurrent planning | 1 |
| Day Treatment/Partial Hospitalization for | Client Referred but was subsequently discharged for | 1 |
| Child | noncompliance/missed appointments/or refusal of follow-up services | |
| Delinquency Prevention Program | No Service Identified to Meet this Need | 1 |
| Dental or Orthodontic Services | Client Referred but was subsequently discharged for | 2 |
| | noncompliance/missed appointments/or refusal of follow-up services | |
| Dental Screening or Evaluation | Delay in Referral | 5 |
| Dental Screening or Evaluation | Client Referred but was subsequently discharged for | 4 |
| | noncompliance/missed appointments/or refusal of follow-up services | |
| Dental Screening or Evaluation | No Service Identified to Meet this Need | 1 |
| Dental Screening or Evaluation | UTD from Case Plan or Area Office Response | 1 |
| Developmental Screening or Evaluation | Client discharged for noncompliance/missed appointments/or refusal of | 1 |
| 1 | follow-up services | |
| Domestic Violence Services - Perpetrators | Client Referred but was subsequently discharged for | 3 |
| • | noncompliance/missed appointments/or refusal of follow-up services | |
| Domestic Violence Services - Perpetrators | Delay in Referral | 2 |
| Domestic Violence Services - Perpetrators | No Service Identified to Meet this Need | 1 |
| Domestic Violence Services - Victims | Client Referred but was subsequently discharged for | 3 |
| | noncompliance/missed appointments/or refusal of follow-up services | |
| Domestic Violence Services - Victims | Delay in Referral | 1 |
| Domestic Violence Services - Victims | No Service Identified to Meet this Need | 1 |
| Drug/Alcohol Education - Parent | Client Referred but was subsequently discharged for | 1 |
| Drug/riconor Education Turent | noncompliance/missed appointments/or refusal of follow-up services | • |
| Drug/Alcohol Testing - Parent | Delay in Referral | 1 |
| Education: IEP Programming | Client Referred but was subsequently discharged for | 1 |
| Education: 121 110gramming | noncompliance/missed appointments/or refusal of follow-up services | 1 |
| Education: IEP Programming | No Service Identified to Meet this Need | 1 |
| Educational Screening or Evaluation | No Service Identified to Meet this Need | 3 |
| Educational Screening or Evaluation | Client Referred but was subsequently discharged for | 2 |
| Educational Scienning of Evaluation | noncompliance/missed appointments/or refusal of follow-up services | 2 |
| Educational Screening or Evaluation | Lack of Communication between DCF and Provider | 1 |
| Family or Marital Counseling | Client Referred but was subsequently discharged for | 6 |
| ranniy or iviarital Counseling | noncompliance/missed appointments/or refusal of follow-up services | 0 |
| Family on Manital Counseling | Wait List | 1 |
| Family or Marital Counseling | wan List | 1 |

| Unmet Need | Barrier | Frequency |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Family Preservation Services | Client Referred but was subsequently discharged for | 2 |
| | noncompliance/missed appointments/or refusal of follow-up services | |
| Family Preservation Services | Delay in Referral | 1 |
| Family Stabilization Services | Delay in Referral | 1 |
| Flex Funds for Basic Needs | No Service Identified to Meet this Need | 1 |
| Foster Care - Basic | Delay in Referral | 2 |
| Foster Care - Therapeutic Level | Delay in Referral | 1 |
| Foster Care Support | Delay in Referral | 2 |
| Foster Care Support | No Service Identified to Meet this Need | 2 |
| Health/Medical Screening or Evaluation | Client Referred but was subsequently discharged for | 2 |
| Health/Medical Careening or Evaluation | noncompliance/missed appointments/or refusal of follow-up services Delay in Referral | 1 |
| Health/Medical Screening or Evaluation Housing Assistance (Section 8) | Client Referred but was subsequently discharged for | 1 1 |
| Housing Assistance (Section 6) | noncompliance/missed appointments/or refusal of follow-up services | 1 |
| Housing Assistance (Section 8) | Wait List | 1 |
| Individual Counseling - Child | Client Referred but was subsequently discharged for | 5 |
| marriada counsening cinia | noncompliance/missed appointments/or refusal of follow-up services | 3 |
| Individual Counseling - Child | Provider Issues - untimely provision of services related to staffing, lack of | 2 |
| | follow through, etc | |
| Individual Counseling - Child | No Service Identified to Meet this Need | 1 |
| Individual Counseling - Child | Provider Issues - untimely provision of services related to staffing, lack of | 1 |
| | follow through, etc | |
| Individual Counseling - Child | Wait List | 1 |
| Individual Counseling - Parent | Client Referred but was subsequently discharged for | 5 |
| | noncompliance/missed appointments/or refusal of follow-up services | |
| Individual Counseling - Parent | Delay in Referral | 1 |
| Individual Counseling - Parent | Insurance Issues | 1 |
| Individual Counseling - Parent | No Service Identified to Meet this Need | 1 |
| Individual Counseling - Parent | Service Deferred Pending Completion of Another | 1 |
| In-Home Parent Education and Support | Client Referred but was subsequently discharged for | 4 |
| | noncompliance/missed appointments/or refusal of follow-up services | |
| In-Home Parent Education and Support | Service Deferred Pending Completion of Another | 2 |
| In-Home Parent Education and Support In-Home Treatment | No Service Identified to Meet this Need | 1 |
| | No Service Identified to Meet this Need | 3 |
| In-Home Treatment Inpatient Substance Abuse Treatment - | Delay in Referral Client Referred but was subsequently discharged for | 1 2 |
| Parent | noncompliance/missed appointments/or refusal of follow-up services | 2 |
| Job Coaching/Placement | Service Deferred Pending Completion of Another | 1 |
| Life Skills Training | Delay in Referral | 2 |
| Matching/Processing/ICO | Delay in Referral | 1 |
| Medication Management - Child | Client Referred but was subsequently discharged for | 1 |
| Wedleadon Wanagement Clina | noncompliance/missed appointments/or refusal of follow-up services | 1 |
| Medication Management - Parent | Client Referred but was subsequently discharged for | 2 |
| The state of the s | noncompliance/missed appointments/or refusal of follow-up services | |
| Mental Health Screening or Evaluation - | No Service Identified to Meet this Need | 3 |
| Child | | |
| Mental Health Screening or Evaluation - | Client Referred but was subsequently discharged for | 1 |
| Child | noncompliance/missed appointments/or refusal of follow-up services | |
| Mental Health Screening or Evaluation - | Delay in Referral | 1 |
| Child | | |
| Mental Health Screening or Evaluation - | Client Referred but was subsequently discharged for | 3 |
| Parent | noncompliance/missed appointments/or refusal of follow-up services | |
| Mental Health Service - Other (Child | Delay in Referral | 1 |
| required DBT therapy) | D-1 in D-51 | |
| Mentoring | Delay in Referral | 4 |
| Mentoring | No Service Identified to Meet this Need | 3 |
| Other In-Home Service - Parenting | No Service Identified to Meet this Need | 1 |
| Education for Parent of PDD child | Incurence Iccue | 1 |
| Other Medical Intervention (Child) - | Insurance Issue | 1 |
| Nutritionist to address obesity Other OOH Service - Probate Involvement | Delay in Referral | 1 |
| Other State Agency - DHMAS | Delay in Referral | 1 |
| Outpatient Substance Abuse Treatment - | Client Referred but was subsequently discharged for | 6 |
| Parent | noncompliance/missed appointments/or refusal of follow-up services | Ü |
| * | r interest in the second of th | |

| Unmet Need | Barrier | Frequency |
|--------------------------------------------|-----------------------------------------------------------------------|-----------|
| Outpatient Substance Abuse Treatment - | Transportation | 1 |
| Parent | | |
| Parenting Classes | Client Referred but was subsequently discharged for | 6 |
| _ | noncompliance/missed appointments/or refusal of follow-up services | |
| Parenting Classes | Delay in Referral | 1 |
| Parenting Classes | No Service Identified to Meet this Need | 1 |
| Parenting Classes | Service Deferred Pending Completion of Another | 1 |
| Parenting Groups | Delay in Referral | 1 |
| Parenting Groups | No Service Identified to Meet this Need | 1 |
| Psychiatric Evaluation - Child | Other- Conflicting Professional Opinions | 1 |
| Psychological or Psychosocial Evaluation - | Client Referred but was subsequently discharged for | 1 |
| Child | noncompliance/missed appointments/or refusal of follow-up services | |
| Relapse Prevention Program - Parent | Client Referred but was subsequently discharged for | 1 |
| | noncompliance/missed appointments/or refusal of follow-up services | |
| Social Recreational Programs | Delay in Referral | 1 |
| Social Recreational Programs | No Service Identified to Meet this Need | 1 |
| Substance Abuse Screening - Child | Client Referred but was subsequently discharged for | 1 |
| | noncompliance/missed appointments/or refusal of follow-up services | |
| Substance Abuse Screening - Child | Delay in Referral | 1 |
| Substance Abuse Screening - Parent | Client Referred but was subsequently discharged for | 6 |
| | noncompliance/missed appointments/or refusal of follow-up services | |
| Supervised Visitation | No Service Identified to Meet this Need | 2 |
| SW/Child Visitation | Visitation Not at Benchmark/Policy levels | 13 |
| SW/Child Visitation | Client AWOL, refusing visits | 1 |
| SW/Child Visitation | UTD from Case Plan or Area Office Response | 1 |
| SW/Parent Visitation | Visitation Not at Benchmark/Policy levels | 16 |
| SW/Parent Visitation | Client refusing visits | 1 |
| SW/Parent Visitation | Lack of discussion related to Permanency Identified by Reviewer | 1 |
| SW/Provider &Collateral Contacts | Lack of timely communication, delays in referrals and follow through. | 24 |
| Therapeutic Mentor | Wait List | 1 |
| Translation/Interpreter Services | Delay in Referral | 1 |
| | | 254 |

The ACR was identified as an area of strength for many of the CIP cases reviewed, and though there is little documentation of participants outside of immediate family when family conferencing occurs, there is increased evidence of documentation identifying a discussion of case planning in both the child-in-placement cases and in-home services cases. That being said, there is still a disconnect between what is identified as unmet, and what is then incorporated as a need within the action steps of case plan for the upcoming six month cycle. This quarter's review found that, 18.9% of the sample had plans that addressed all unmet needs identified. 58.2% of the case plans partially addressed the identified needs. 3.8% failed to address any of the needs identified within the action steps written.

Table 3: Were all needs and services unmet during the prior six month discussed at the ACR (FC) and, as appropriate, incorporated as action steps on the current case plan?

| | | Frequency | Percent | Valid Percent | Cumulative Percent |
|-------|--------------------------------|-----------|---------|------------------|-----------------------|
| Valid | Yes - All | 10 | 18.9 | 18.9 | 18.9 |
| | Yes - Partially | 31 | 58.5 | 58.5 | 77.4 |
| | No - None | 2 | 3.8 | 3.8 | 81.1 |
| | N/A - There are no Unmet Needs | 6 | 11.3 | 11.3 | 92.5 |
| | N/A - this is the initial plan | 4 | 7.5 | 7.5 | 100.0 |
| | Total | 53 | 100.0 | 100.0 | |

In 26.4% of the cases, one or more had an unmet need(s) which had been identified in the prior ACR six months ago, and still remained unaddressed at the time of the current case plan approval.

In addition, in 62.3% of the cases, there were unmet service needs at the time of the review which were not identified on the case plan or possibly the DCF-553 as recommendations. In some instances these needs did not rise to the level of priority to require their own objective, but should have been folded under another related objective, or addressed within the assessment of the case plan document. It appeared to the reviewer through the LINK documentation and/or discussion at the ACR that these needs were contributory to the reason for continued placement or directly impacted the well being, safety or permanency of the child and merited attention, yet these needs were not given weight within the case plan document.

The listing of the 103 needs not addressed in the approved case plan for the next six months is:

Table 4: First Quarter 2012 Needs Not Incorporated into Case Planning

| | eeds Not Incorporated into Case Planning | |
|--------------------------------------------|-------------------------------------------------------------------------|-----------|
| Unmet Need | Barrier | Frequency |
| Adoption Recruitment | No Service Identified to Meet this Need | 1 |
| Adoption Supports (PPSP) | No Service Identified to Meet this Need | 2 |
| Anger Management - Child | No Service Identified to Meet this Need | 1 |
| ARG Consultation | No Service Identified to Meet this Need | 3 |
| ARG Consultation | Delay in Referral | 1 |
| Basic Foster Care | No Service Identified to Meet this Need | 1 |
| Behavior Management | No Service Identified to Meet this Need | 2 |
| Case Management/Support/Advocacy | Lack of Assessment for services, legal and oversight | 3 |
| Day Treatment/Partial Hospitalization | Client Refused Service or was Subsequently Discharged for Non- | 1 |
| Program - Child | Compliance in the past | |
| Dental or Orthodontic Services | Lack of Communication - Child well past due for routine maintenance | 1 |
| Dental Screening or Evaluation | No Service Identified to Meet this Need | 7 |
| Dental Screening or Evaluation | Delay in Referral | 1 |
| Dental Screening or Evaluation | Lack of Communication between DCF and Provider (Foster Parent) | 1 |
| Dental Screening or Evaluation | Other - Appointment made for future date after prior missed appointment | 1 |
| Developmental Screening or Evaluation | No Service Identified to Meet this Need | 2 |
| Domestic Violence Services - Perpetrator | No Service Identified to Meet this Need | 3 |
| Domestic Violence Services - Victim | No Service Identified to Meet this Need | 3 |
| Educational Screening or Evaluation | No Service Identified to Meet this Need | 1 |
| Family or Marital Counseling | No Service Identified to Meet this Need | 2 |
| Family or Marital Counseling | Client Refused Service or was Subsequently Discharged for Non- | 1 |
| | Compliance in the past | |
| Foster Care Support | Appears Client is currently engaged per AO response - was not | 1 |
| | incorporated into case planning. | |
| Group Home | No Service Identified to Meet this Need | 1 |
| Health Screening or Evaluation - Child | Delay in Referral | 2 |
| Health Screening or Evaluation - Child | No Service Identified to Meet this Need | 2 |
| Health Screening or Evaluation - Child | Client Refused Service or was Subsequently Discharged for Non- | 1 |
| | Compliance in the past | |
| Health/Medical Screening or Evaluation | No Service Identified to Meet this Need | 1 |
| IEP Programming | No Service Identified to Meet this Need | 1 |
| Individual Counseling - Child | No Service Identified to Meet this Need | 5 |
| Individual Counseling - Parent | Client Refused Service or was Subsequently Discharged for Non- | 1 |
| | Compliance in the past | |
| Individual Counseling - Parent | No Service Identified to Meet this Need | 1 |
| In-Home Parent Education | No Service Identified to Meet this Need | 2 |
| In-Home Treatment | No Service Identified to Meet this Need | 4 |
| Job Coaching/Placement | Client Refused Service or was Subsequently Discharged for Non- | 1 |
| | Compliance in the past | |
| Life Skills Training | Delay in Referral | 1 |
| Matching/Placement Processing (Includes | No Service Identified to Meet this Need | 2 |
| ICO) | | |

| Unmet Need | Barrier | Frequency |
|--------------------------------------------|------------------------------------------------------------------------|-----------|
| | | 1 |
| Matching/Placement Processing (Includes | | |
| ICO) | Delay in Referral | |
| Matching/Placement Processing (Includes | UTD from case plan, narrative or area office response provided | 1 |
| ICO) | | |
| Medical Intervention - Other | Delay in Referral | 1 |
| Nutritionist or Weight Management | | |
| Medical Intervention - Other | UTD - Little/no documentation regarding establishing medically complex | 1 |
| Adolescent Discharge Planning regarding | youth as client in adult systems of care | |
| medical well being | N G 1 11 10 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| Medication Management - Child | No Service Identified to Meet this Need | 2 |
| Mentoring | No Service Identified to Meet this Need | 3 |
| Mentoring | Appears Client is currently engaged per AO response - was not | 2 |
| | incorporated into case planning. | |
| Other In-Home Service - Basic Resource | No Service Identified to Meet this Need | 1 |
| Management/Budgeting | | |
| Other State Agency Program - DHMAS | No Service Identified to Meet this Need | 1 |
| Outpatient Substance Abuse Treatment - | No Service Identified to Meet this Need | 1 |
| Parent | NT 0 1 T1 10 1 NT 11 NT 11 | |
| Parenting Classes | No Service Identified to Meet this Need | 2 |
| Parenting Groups | No Service Identified to Meet this Need | 1 |
| Psychological or psychosocial evaluation - | No Service Identified to Meet this Need | 1 |
| parent | Type C | |
| Residential Facility Care | UTD from case plan, narrative or area office response provided | 1 |
| Social Recreational Program | No Service Identified to Meet this Need | 2 |
| Social Recreational Program | No Service Identified to Meet this Need | 1 |
| Substance Abuse Screening - Parent | No Service Identified to Meet this Need | 3 |
| Substance Abuse Screening/Evaluation - | No Service Identified to Meet this Need | 1 |
| Child | | |
| Supervised Visitation | No Service Identified to Meet this Need | 1 |
| SW/Child Visitation | Deficits from prior period not addressed | 3 |
| SW/Parent Visitation | Deficits from prior period not addressed | 3 |
| SW/Provider Contacts | Delays in contacts | 3 |
| Therapeutic Foster Care | No Service Identified to Meet this Need | 1 |
| Therapeutic Mentor | No Service Identified to Meet this Need | 1 |
| Young Parents Program | No Service Identified to Meet this Need | 1 |
| | | 103 |

Below are the Case summaries detailing the 11 domains of Outcome Measure 15 and individual score by case within each area office for the First Quarter 2012. The overall percentages for the state are indicated in the column headings.

Case Summaries for OM15

| What is the socia worker's area of assignment? | | Risk: In- Home 70.6% | Risk: Child In Placement 97.3% | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months 86.5% | Permanency: DCF Case Mgmt - Legal Action to Achieve the Permanency Goal During the Prior Six Months 84.9% | Permanency: DCF Case Mgmt - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months 91.9% | Permanency: DCF Case Mgmt - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months 56.6% | Well- Being: Medical Needs 92.4% | Well- Being: Dental Needs 88.7% | Well-Being: Mental Health, Behavioral and Substance Abuse Services 67.9% | Well-Being: Child's Current Placement 100.0% | Well-Being: Education 83.0% | Overall Score for Outcome Measure 15 60.4% |
|------------------------------------------------------|---|----------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------|-----------------------------------|-----------------------------------------------------------|
| Bridgeport | 1 | N/A to Case Type | Very Good | Very Good | Optimal | Optimal | Very Good | Optimal | Very Good | Very Good | Optimal | Optimal | Needs Met |
| | 2 | Very Good | N/A to Case Type | N/A to Case Type | Absent/Averse | N/A to Case Type | Very Good | Very Good | Very Good | Very Good | N/A to Case Type | Optimal | Needs Met |
| | 3 | N/A to Case Type | Very Good | Very Good | Optimal | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Very Good | Needs Met |
| | 4 | N/A to Case Type | Very Good | Marginal | Very Good | Marginal | Marginal | Very Good | Very Good | Marginal | Very Good | Marginal | Needs Not Met |
| Danbury | 1 | N/A to Case Type | Very Good | Very Good | Absent/Averse | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Needs Not Met |
| | 2 | Very Good | N/A to Case Type | N/A to Case Type | Very Good | N/A to Case Type | Marginal | Very Good | Optimal | Marginal | N/A to Case Type | N/A to Case Type | Needs Not Met |
| Milford | 1 | Very Good | N/A to Case Type | N/A to Case Type | Optimal | N/A to Case Type | Marginal | Optimal | Very Good | Very Good | N/A to Case Type | Marginal | Needs Not Met |
| | 2 | N/A to Case Type | Optimal | Very Good | Optimal | Optimal | Very Good | Optimal | Optimal | Optimal | Optimal | Very Good | Needs Met |
| | 3 | N/A to Case Type | Very Good | Optimal | Optimal | Optimal | Marginal | Very Good | Optimal | Very Good | Very Good | Very Good | Needs Met |
| | 4 | N/A to Case Type | Very Good | Marginal | Very Good | Very Good | Marginal | Marginal | Very Good | Marginal | Optimal | Very Good | Needs Not Met |
| Hartford | 1 | N/A to Case Type | Optimal | Optimal | Very Good | Optimal | Very Good | Very Good | Optimal | Optimal | Optimal | Very Good | Needs Met |
| | 2 | Marginal | N/A to Case Type | N/A to Case Type | Marginal | N/A to Case Type | Poor | Very Good | Very Good | Marginal | N/A to Case Type | Marginal | Needs Not Met |
| | 3 | N/A to Case Type | Very Good | Very Good | Optimal | Very Good | Very Good | Marginal | Marginal | Very Good | Very Good | Optimal | Needs Not Met |
| | 4 | N/A to Case Type | Very Good | Very Good | Optimal | Very Good | Marginal | Very Good | Optimal | Very Good | Very Good | Very Good | Needs Met |
| | 5 | Marginal | N/A to Case Type | N/A to Case Type | Poor | N/A to Case Type | Marginal | Marginal | Marginal | Marginal | N/A to Case Type | Poor | Needs Not Met |
| | 6 | N/A to Case Type | Optimal | Very Good | Very Good | Very Good | Marginal | Very Good | Optimal | Very Good | Very Good | Optimal | Needs Met |
| | 7 | N/A to Case Type | Very Good | Poor | Very Good | Marginal | Marginal | Optimal | Very Good | Very Good | Very Good | N/A to Case Type | Needs Not Met |

| What is the social worker's area off assignment? | | Risk: In- Home 70.6% | Risk: Child In Placement 97.3% | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months 86.5% | Permanency: DCF Case Mgmt - Legal Action to Achieve the Permanency Goal During the Prior Six Months 84.9% | Permanency: DCF Case Mgmt - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months 91.9% | Permanency: DCF Case Mgmt - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months 56.6% | Well- Being: Medical Needs 92.4% | Well- Being: Dental Needs 88.7% | Well-Being: Mental Health, Behavioral and Substance Abuse Services 67.9% | Well-Being: Child's Current Placement 100.0% | Well- Being: Education 83.0% | Overall Score for Outcome Measure 15 60.4% |
|--------------------------------------------------|---|----------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------|-----------------------------------------------------------|
| Manchester | 1 | N/A to Case Type | Very Good | Very Good | Very Good | Very Good | Marginal | Optimal | Optimal | Optimal | Very Good | Optimal | Needs Met |
| | 2 | N/A to Case Type | Optimal | Optimal | Optimal | Optimal | Very Good | Very Good | Very Good | Very Good | Optimal | Optimal | Needs Met |
| | 3 | N/A to Case Type | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Needs Met |
| | 4 | Very Good | N/A to Case Type | N/A to Case Type | Optimal | N/A to Case Type | Very Good | Optimal | Marginal | Marginal | N/A to Case Type | Marginal | Needs Met |
| Meriden | 1 | Very Good | Very Good | Very Good | Optimal | Optimal | Very Good | Very Good | Very Good | Very Good | Optimal | Optimal | Needs Met |
| | 2 | N/A to Case Type | N/A to Case Type | N/A to Case Type | Very Good | N/A to Case Type | Very Good | Optimal | Marginal | Marginal | N/A to Case Type | Very Good | Needs Met |
| Middletown | 1 | N/A to Case Type | Very Good | Very Good | Optimal | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Very Good | Needs Met |
| | 2 | Very Good | N/A to Case Type | N/A to Case Type | Optimal | N/A to Case Type | Very Good | Very Good | Very Good | Very Good | N/A to Case Type | Very Good | Needs Met |
| New Britain | 1 | Very Good | N/A to Case Type | N/A to Case Type | Optimal | N/A to Case Type | Very Good | Optimal | Optimal | Very Good | N/A to Case Type | Optimal | Needs Met |
| | 2 | N/A to Case Type | Optimal | Optimal | Very Good | Optimal | Very Good | Optimal | Optimal | Optimal | Optimal | Very Good | Needs Met |
| | 3 | N/A to Case Type | Very Good | Very Good | Very Good | Very Good | Marginal | Optimal | Optimal | Marginal | Very Good | Very Good | Needs Not Met |
| | 4 | N/A to Case Type | Very Good | Very Good | Optimal | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Needs Not Met |
| | 5 | N/A to Case Type | Very Good | Very Good | Optimal | Very Good | Very Good | Optimal | Optimal | Marginal | Very Good | Very Good | Needs Met |
| | 6 | N/A to Case Type | Very Good | Very Good | Optimal | Very Good | Very Good | Optimal | Optimal | Very Good | Very Good | Optimal | Needs Met |

| What is the social worker's area off assignment? | | Risk: In- Home 70.6% | Risk: Child In Placement 97.3% | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months 86.5% | Permanency: DCF Case Mgmt - Legal Action to Achieve the Permanency Goal During the Prior Six Months 84.9% | Permanency: DCF Case Mgmt - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months 91.9% | Permanency: DCF Case Mgmt - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months 56.6% | Well- Being: Medical Needs 92.4% | Well- Being: Dental Needs 88.7% | Well-Being: Mental Health, Behavioral and Substance Abuse Services 67.9% | Well-Being: Child's Current Placement 100.0% | Well- Being: Education 83.0% | Overall Score for Outcome Measure 15 60.4% |
|--------------------------------------------------------|---|----------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------|-----------------------------------------------------------|
| New Haven | 1 | N/A to Case Type | Very Good | Optimal | Optimal | Very Good | Marginal | Very Good | Optimal | Very Good | Very Good | Marginal | Needs Not Met |
| | 2 | N/A to Case Type | Very Good | Very Good | Optimal | Very Good | Very Good | Optimal | Optimal | Very Good | Very Good | Very Good | Needs Met |
| | 3 | Marginal | N/A to Case Type | N/A to Case Type | Marginal | N/A to Case Type | Poor | Very Good | Very Good | Marginal | N/A to Case Type | Poor | Needs Not Met |
| | 4 | N/A to Case Type | Very Good | Very Good | Very Good | Very Good | Marginal | Very Good | Optimal | Very Good | Very Good | Optimal | Needs Not Met |
| Norwalk | 1 | N/A to Case Type | Very Good | Marginal | Optimal | Very Good | Marginal | Very Good | Optimal | Very Good | Very Good | Very Good | Needs Not Met |
| | 2 | Very Good | N/A to Case Type | N/A to Case Type | Absent/Averse | N/A to Case Type | Marginal | Very Good | Optimal | Marginal | N/A to Case Type | Very Good | Needs Not Met |
| Norwich | 1 | Very Good | N/A to Case Type | N/A to Case Type | Optimal | N/A to Case Type | Very Good | Very Good | Very Good | Very Good | N/A to Case Type | N/A to Case Type | Needs Met |
| | 2 | N/A to Case Type | Very Good | Optimal | Optimal | Optimal | Optimal | Very Good | Very Good | Very Good | Optimal | Optimal | Needs Met |
| | 3 | N/A to Case Type | Optimal | Very Good | Optimal | Optimal | Very Good | Optimal | Optimal | Very Good | Optimal | Optimal | Needs Met |
| | 4 | N/A to Case Type | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Needs Met |
| | 5 | N/A to Case Type | Very Good | Very Good | Optimal | Optimal | Very Good | Optimal | Optimal | Very Good | Optimal | Optimal | Needs Met |

| What is the social worker's area offic assignment? | ce | Risk: In- Home 70.6% | Risk: Child In Placement 97.3% | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months 86.5% | Permanency: DCF Case Mgmt - Legal Action to Achieve the Permanency Goal During the Prior Six Months 84.9% | Permanency: DCF Case Mgmt - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months 91.9% | Permanency: DCF Case Mgmt - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months 56.6% | Well- Being: Medical Needs 92.4% | Well- Being: Dental Needs 88.7% | Well-Being: Mental Health, Behavioral and Substance Abuse Services 67.9% | Well-Being: Child's Current Placement 100.0% | Well- Being: Education 83.0% | Overall Score for Outcome Measure 15 60.4% |
|----------------------------------------------------------|----|----------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------|-----------------------------------------------------------|
| Stamford | 1 | Poor | N/A to Case Type | N/A to Case Type | Absent/Averse | N/A to Case Type | Poor | Very Good | Very Good | Marginal | N/A to Case Type | Very Good | Needs Not Met |
| | 2 | N/A to Case Type | Very Good | Optimal | Optimal | Optimal | Marginal | Optimal | Optimal | Very Good | Optimal | Optimal | Needs Met |
| Torrington | 1 | N/A to Case Type | Very Good | Very Good | Optimal | Optimal | Marginal | Optimal | Optimal | Very Good | Very Good | Very Good | Needs Met |
| | 2 | Marginal | N/A to Case Type | N/A to Case Type | Marginal | N/A to Case Type | Marginal | Marginal | Very Good | Marginal | N/A to Case Type | N/A to Case Type | Needs Not Met |
| Waterbury | 1 | N/A to Case Type | Marginal | Marginal | Very Good | Marginal | Very Good | Very Good | Marginal | Marginal | Very Good | N/A to Case Type | Needs Not Met |
| | 2 | Very Good | N/A to Case Type | N/A to Case Type | Optimal | N/A to Case Type | Very Good | Very Good | Very Good | Marginal | N/A to Case Type | Marginal | Needs Not Met |
| : | 3 | N/A to Case Type | Very Good | Very Good | Optimal | Optimal | Very Good | Optimal | Very Good | Very Good | Very Good | N/A to Case Type | Needs Met |
| | 4 | Very Good | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Needs Met |
| Willimantic | 1 | Very Good | N/A to Case Type | N/A to Case Type | Optimal | N/A to Case Type | Very Good | Very Good | Very Good | Very Good | N/A to Case Type | Very Good | Needs Met |
| | 2 | N/A to Case Type | Very Good | Very Good | Optimal | Optimal | Very Good | Very Good | Optimal | Marginal | Optimal | Optimal | Needs Met |
| | 3 | N/A to Case Type | Very Good | Optimal | Very Good | Optimal | Very Good | Optimal | Optimal | Marginal | Very Good | Very Good | Needs Not Met |
| Total | N | 16 | 37 | 37 | 53 | 37 | 53 | 53 | 53 | 53 | 37 | 47 | 53 |

JUAN F. ACTION PLAN MONITORING REPORT

May 2012

This report includes data relevant to the permanency and placement issues and action steps embodied within the Action Plan. Data provided comes from several sources: the monthly point-in-time information from LINK, the Chapin Hall database and the Behavioral Health Partnership database.

A. PERMANENCY ISSUES

Progress Towards Permanency:

The following table developed using the Chapin Hall database provides a longitudinal view of permanency for annual admission cohorts from 2002 through 2011.

Figure 1: Children Exiting With Permanency, Exiting Without Permanency, Unknown Exits and Remaining In Care (Entry Cohorts)

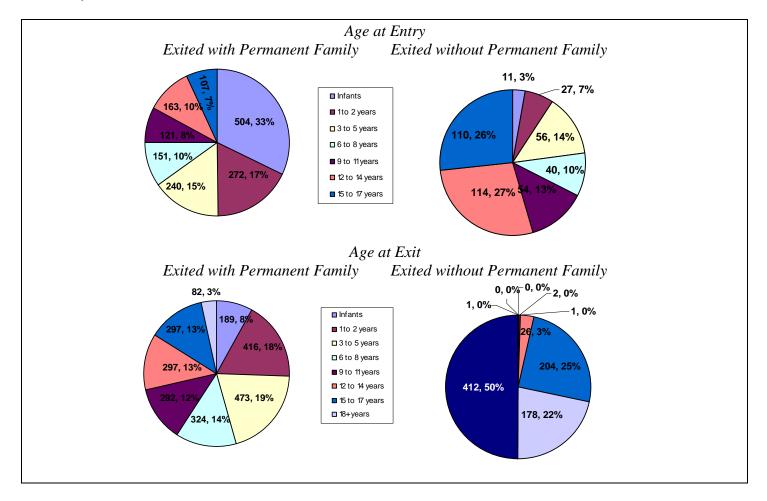
| | | | |] | Period o | of Entry | to Care | • | | | |
|------------------|------|------|------|-------|----------|----------|---------|------|------|------|------|
| | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |
| Total Entries | 3102 | 3547 | 3204 | 3092 | 3408 | 2853 | 2829 | 2629 | 2694 | 2298 | 458 |
| | | | | Peri | manent | Exits | | | Į. | | |
| In 1 yr | 1179 | 1406 | 1229 | 1131 | 1263 | 1095 | 1098 | 1091 | 1023 | | |
| • | 38.0 | 39.6 | 38.4 | 36.6 | 37.1 | 38.4 | 38.8 | 41.5 | 38.0 | | |
| | % | % | % | % | % | % | % | % | % | | |
| In 2 yrs | 1639 | 2078 | 1806 | 1742 | 1973 | 1675 | 1676 | 1580 | | | |
| | 52.8 | 58.6 | 56.4 | 56.3 | 57.9 | 58.7 | 59.2 | 60.1 | | | |
| | % | % | % | % | % | % | % | % | | | |
| In 3 yrs | 1966 | 2385 | 2093 | 2015 | 2324 | 1973 | 1944 | | | | |
| | 63.4 | 67.2 | 65.3 | 65.2 | 68.2 | 69.2 | 68.7 | | | | |
| | % | % | % | % | % | % | % | | | | |
| In 4 yrs | 2137 | 2540 | 2263 | 2160 | 2500 | 2089 | | | | | |
| | 68.9 | 71.6 | 70.6 | 69.9 | 73.4 | 73.2 | | | | | |
| | % | % | % | % | % | % | | | | | |
| To Date | 2304 | 2703 | 2363 | 2244 | 2589 | 2119 | 2017 | 1738 | 1273 | 565 | 33 |
| | 74.3 | 76.2 | 73.8 | 72.6 | 76.0 | 74.3 | 71.3 | 66.1 | 47.3 | 24.6 | 7.2% |
| | % | % | % | % | % | % | % | % | % | % | |
| | | | | Non-P | Permane. | nt Exits | | | | | |
| In 1 yr | 274 | 249 | 231 | 289 | 259 | 263 | 250 | 208 | 196 | | |
| | 8.8% | 7.0% | 7.2% | 9.3% | 7.6% | 9.2% | 8.8% | 7.9% | 7.3% | | |
| In 2 yrs | 332 | 320 | 301 | 371 | 345 | 318 | 320 | 267 | | | |
| | 10.7 | 9.0% | 9.4% | 12.0 | 10.1 | 11.1 | 11.3 | 10.2 | | | |
| | % | | | % | % | % | % | % | | | |
| In 3 yrs | 365 | 366 | 366 | 431 | 401 | 354 | 363 | | | | |
| | 11.8 | 10.3 | 11.4 | 13.9 | 11.8 | 12.4 | 12.8 | | | | |
| | % | % | % | % | % | % | % | | | | |

| | | | | No | n-Perm | anent E. | xits | | | | |
|----------|------|------|------|------|--------|----------|------|------|------|------|------|
| In 4 yrs | 406 | 392 | 403 | 461 | 449 | 391 | | | | | |
| | 13.1 | 11.1 | 12.6 | 14.9 | 13.2 | 13.7 | | | | | |
| | % | % | % | % | % | % | | | | | |
| To Date | 492 | 481 | 481 | 533 | 488 | 409 | 387 | 293 | 227 | 115 | 9 |
| | 15.9 | 13.6 | 15.0 | 17.2 | 14.3 | 14.3 | 13.7 | 11.1 | 8.4% | 5.0% | 2.0% |
| | % | % | % | % | % | % | % | % | | | |

| | | | |] | Period o | f Entry | to Care | <u> </u> | | | |
|----------|------|------|------|------|----------|---------|---------|----------|------|------|------|
| | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |
| | | | | Un | known l | Exits | | | | | |
| In 1 yr | 106 | 153 | 129 | 83 | 76 | 62 | 60 | 78 | 128 | | |
| | 3.4% | 4.3% | 4.0% | 2.7% | 2.2% | 2.2% | 2.1% | 3.0% | 4.8% | | |
| In 2 yrs | 136 | 193 | 171 | 124 | 117 | 98 | 92 | 144 | | | |
| | 4.4% | 5.4% | 5.3% | 4.0% | 3.4% | 3.4% | 3.3% | 5.5% | | | |
| In 3 yrs | 161 | 220 | 208 | 163 | 140 | 126 | 127 | | | | |
| | 5.2% | 6.2% | 6.5% | 5.3% | 4.1% | 4.4% | 4.5% | | | | |
| In 4 yrs | 179 | 244 | 234 | 181 | 167 | 157 | | | | | |
| | 5.8% | 6.9% | 7.3% | 5.9% | 4.9% | 5.5% | | | | | |
| To Date | 250 | 316 | 285 | 215 | 199 | 166 | 153 | 177 | 246 | 144 | 4 |
| | 8.1% | 8.9% | 8.9% | 7.0% | 5.8% | 5.8% | 5.4% | 6.7% | 9.1% | 6.3% | 0.9% |
| | | | | Ren | nain In | Care | | | | | |
| In 1 yr | 1543 | 1739 | 1615 | 1589 | 1810 | 1433 | 1421 | 1252 | 1347 | | |
| | 49.7 | 49.0 | 50.4 | 51.4 | 53.1 | 50.2 | 50.2 | 47.6 | 50.0 | | |
| | % | % | % | % | % | % | % | % | % | | |
| In 2 yrs | 995 | 956 | 926 | 855 | 973 | 762 | 741 | 638 | | | |
| | 32.1 | 27.0 | 28.9 | 27.7 | 28.6 | 26.7 | 26.2 | 24.3 | | | |
| | % | % | % | % | % | % | % | % | | | |
| In 3 yrs | 610 | 576 | 537 | 483 | 543 | 400 | 395 | | | | |
| | 19.7 | 16.2 | 16.8 | 15.6 | 15.9 | 14.0 | 14.0 | | | | |
| | % | % | % | % | % | % | % | | | | |
| In 4 yrs | 380 | 371 | 304 | 290 | 292 | 216 | | | | | |
| | 12.3 | 10.5 | 9.5% | 9.4% | 8.6% | 7.6% | | | | | |
| | % | % | | | | | | | | | |
| To Date | 56 | 47 | 75 | 100 | 132 | 159 | 272 | 421 | 948 | 1474 | 412 |
| | 1.8% | 1.3% | 2.3% | 3.2% | 3.9% | 5.6% | 9.6% | 16.0 | 35.2 | 64.1 | 90.0 |
| | | | | | | | | % | % | % | % |

The following graphs show how the ages of children upon their entry to care, as well as at the time of exit, differ depending on the overall type of exit (permanent or non-permanent).

FIGURE 2: CHARACTERISTICS OF CHILDREN EXITING WITH AND WITHOUT PERMANENCY (2011 EXIT COHORT)



Permanency Goals:

The following chart illustrates and summarizes the number of children (which excludes youth ages 18 and older) at various stages of placement episodes, and provides the distribution of Permanency Goals selected for them.

FIGURE 3: DISTRIBUTION OF PERMANENCY GOALS ON THE PATH TO PERMANENCY (CHILDREN IN CARE ON MAY 1, 2012³)

| Is the child | legally free (| his or her parent | ts' rights have b | een terminated)? | |
|-------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| Yes 687 | No ↓ 2901 | | | | |
| Goals of: | Has the chil | d been in care m | ore than 15 mor | ths? | |
| 533 (78%) Adoption | No 1,639 | Yes | | | |
| 138 (20%) | | Has a TPR pro | oceeding been fi | led? | |
| APPLA 9 (1%) | | Yes 398 | No ↓ 864 | | |
| Relatives | | Goals of: | Is a reason do | cumented not to fi | le TPR? |
| 3 (<1%) Blank | | 278 (70%) Adoption | Yes 474 | | No 390 |
| 3 (<1%) Trans. of Guardian: Sub/Unsub 1 (<1%) Reunify | | 84 (21%) APPLA 22 (6%) Reunify 7 (2%) Relatives 5 (1%) Trans. of Guardian: Sub/Unsub 3 (1%) Blank | Goals of: 266 (56%) APPLA 89 (19%) Reunify 62 (13%) Trans. of Guardian: Sub/Unsub 31 (7%) Relatives 25 (5%) Adoption 1 (<1%) Blank | Documented Reasons: 74% Compelling Reason 17% Child is with relative 5% Petition in process 5% Service not provided | Goals of: 161 (41%) Reunify 111 (2428 APPLA 63 (16%) Adoption 41 (11%) Trans. of Guardian: Sub/Unsub 12 (3%) Relatives 2 (1%) Blank |

³ Children over age 18 are not included in these figures.

Preferred Permanency Goals:

| | Feb | May | Aug | Nov | Feb | May |
|--------------------------------------------|------|------|------|------|------|------|
| Reunification | 2011 | 2011 | 2011 | 2011 | 2012 | 2012 |
| Total number of children with | 1615 | 1610 | 1585 | 1531 | 1495 | 1382 |
| Reunification goal, pre-TPR and post-TPR | | | | | | |
| Number of children with Reunification goal | 1615 | 1606 | 1584 | 1527 | 1494 | 1381 |
| pre-TPR | | | | | | |
| Number of children with | 275 | 286 | 277 | 245 | 301 | 272 |
| Reunification goal, pre-TPR, >= 15 | | | | | | |
| months in care | | | | | | |
| Number of children with | 36 | 31 | 36 | 40 | 43 | 41 |
| Reunification goal, pre-TPR, >= 36 | | | | | | |
| months in care | | | | | | |
| Number of children with Reunification | 0 | 4 | 1 | 4 | 1 | 1 |
| goal, post-TPR | | | | | | |

| Transfer of Guardianship (Subsidized and Non-Subsidized) | Feb 2011 | May 2011 | Aug 2011 | Nov 2011 | Feb 2012 | May 2012 |
|--------------------------------------------------------------------------------------------------------------------------|-------------|----------|-------------|-------------|-------------|----------|
| Total number of children with Transfer of Guardianship goal (subsidized and non- subsidized), pre-TPR and post TPR | 166 | 162 | 177 | 228 | 229 | 223 |
| Number of children with Transfer of Guardianship goal (subsidized and non- subsidized), pre-TPR | 163 | 159 | 177 | 225 | 226 | 220 |
| • Number of children with Transfer of Guardianship goal (subsidized and non-subsidized, pre-TPR, >= 22 months | 47 | 39 | 39 | 49 | 43 | 31 |
| • Number of children with Transfer of Guardianship goal (subsidized and non-subsidized), pre-TPR, >= 36 months | 26 | 17 | 15 | 13 | 15 | 9 |
| Number of children with Transfer of Guardianship goal (subsidized and non- subsidized), post-TPR | 3 | 3 | 0 | 3 | 3 | 3 |

| Adoption | Feb 2011 | May 2011 | Aug 2011 | Nov 2011 | Feb 2012 | May 2012 |
|----------------------------------------------------------------------------|-------------|----------|-------------|-------------|-------------|-------------|
| Total number of children with Adoption goal, pre-TPR and post-TPR | 1136 | 1159 | 1103 | 1057 | 1042 | 1106 |
| Number of children with Adoption goal, pre-TPR | 624 | 629 | 632 | 626 | 583 | 573 |
| Number of children with Adoption goal, TPR not filed, >= 15 months in care | 126 | 123 | 129 | 98 | 94 | 88 |

| Adoption | Feb 2011 | May 2011 | Aug 2011 | Nov 2011 | Feb 2012 | May 2012 |
|------------------------------------------------------------------------------------------------------|-------------|----------|-------------|-------------|-------------|----------|
| Reason TPR not filed, Compelling Reason | 15 | 20 | 15 | 4 | 6 | 6 |
| Reason TPR not filed, petitions in progress | 37 | 27 | 24 | 20 | 13 | 14 |
| Reason TPR not filed, child is in placement with relative | 1 | 7 | 6 | 4 | 3 | 5 |
| Reason TPR not filed, services needed not provided | 3 | 1 | 0 | 0 | 0 | 0 |
| Reason TPR not filed, blank | 70 | 68 | 84 | 70 | 72 | 63 |
| Number of cases with Adoption goal post- TPR | 512 | 530 | 471 | 431 | 459 | 533 |
| Number of children with Adoption goal, post-TPR, in care >= 15 months | 481 | 496 | 439 | 398 | 425 | 493 |
| • Number of children with Adoption goal, post-TPR, in care >= 22 months | 418 | 430 | 384 | 349 | 359 | 406 |
| Number of children with Adoption goal, post-TPR, no barrier, > 3 months since TPR | 33 | 41 | 33 | 25 | 21 | 17 |
| Number of children with Adoption goal, post-TPR, with barrier, > 3 months since TPR | 162 | 146 | 146 | 120 | 112 | 115 |
| Number of children with Adoption goal, post-TPR, with blank barrier, > 3 months since TPR | 216 | 231 | 203 | 200 | 203 | 272 |

| Progress Towards Permanency: | Feb | May | Aug | Nov | Feb | May |
|----------------------------------------|------|------|------|------|------|------|
| | 2011 | 2011 | 2011 | 2011 | 2012 | 2012 |
| Total number of children, pre-TPR, TPR | 287 | 324 | 355 | 343 | 422 | 390 |
| not filed, >=15 months in care, no | | | | | | |
| compelling reason | | | | | | |

Non-Preferred Permanency Goals:

| | Feb | May | Aug | Nov | Feb | May |
|-------------------------------------------|------|------|------|------|------|------|
| Long Term Foster Care Relative: | 2011 | 2011 | 2011 | 2011 | 2012 | 2012 |
| Total number of children with Long Term | 74 | 73 | 79 | 70 | 65 | 70 |
| Foster Care Relative goal | | | | | | |
| Number of children with Long Term Foster | 62 | 62 | 69 | 61 | 54 | 61 |
| Care Relative goal, pre-TPR | | | | | | |
| Number of children with Long | 6 | 4 | 7 | 10 | 5 | 7 |
| Term Foster Care Relative goal, 12 | | | | | | |
| years old and under, pre-TPR | | | | | | |
| Long Term Foster Care Rel. goal, post-TPR | 12 | 11 | 10 | 9 | 11 | 9 |
| Number of children with Long | 0 | 0 | 0 | 0 | 0 | 0 |
| Term Foster Care Relative goal, 12 | | | | | | |
| years old and under, post-TPR | | | | | | |

| | Feb | May | Aug | Nov | Feb | May |
|-----------------------------------------------------------------------------|------|------|------|------|------|------|
| APPLA* | 2011 | 2011 | 2011 | 2011 | 2012 | 2012 |
| Total number of children with APPLA goal | 806 | 775 | 752 | 751 | 711 | 671 |
| Number of children with APPLA goal, pre- TPR | 638 | 606 | 596 | 588 | 559 | 533 |
| Number of children with APPLA goal, 12 years old and under, pre- TPR | 28 | 22 | 23 | 27 | 28 | 31 |
| Number of children with APPLA goal, post-TPR | 168 | 169 | 156 | 163 | 152 | 138 |
| Number of children with APPLA goal, 12 years old and under, post- TPR | 11 | 13 | 10 | 8 | 8 | 7 |

^{*} Columns prior to Aug 07 had previously been reported separately as APPLA: Foster Care Non-Relative and APPLA: Other. The values from each separate table were added to provide these figures. Currently there is only one APPLA goal.

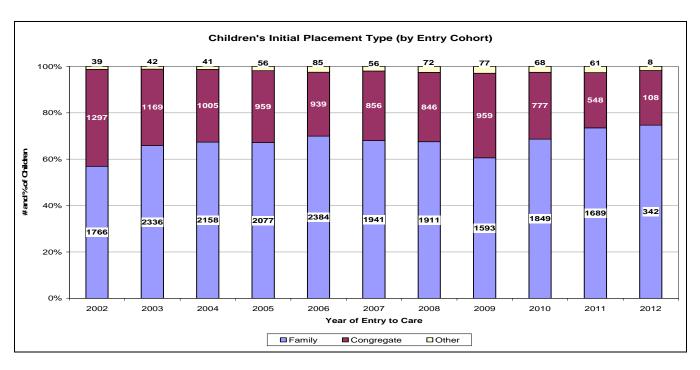
Missing Permanency Goals:

| | Feb 2011 | May 2011 | Aug 2011 | Nov 2011 | Feb 2012 | May 2012 |
|----------------------------------------|-------------|-------------|-------------|-------------|-------------|----------|
| Number of children, with no Permanency | 23 | 19 | 16 | 17 | 25 | 24 |
| goal, pre-TPR, >= 2 months in care | | | | | | |
| Number of children, with no Permanency | 13 | 9 | 7 | 8 | 10 | 11 |
| goal, pre-TPR, >= 6 months in care | | | | | | |
| Number of children, with no Permanency | 7 | 5 | 2 | 5 | 6 | 5 |
| goal, pre-TPR, >= 15 months in care | | | | | | |
| Number of children, with no Permanency | 3 | 5 | 2 | 3 | 3 | 2 |
| goal, pre-TPR, TPR not filed, >= 15 | | | | | | |
| months in care, no compelling reason | | | | | | |

B. PLACEMENT ISSUES

Placement Experiences of Children

The following chart shows the change in use of family and congregate care for admission cohorts between 2002 and 2012.

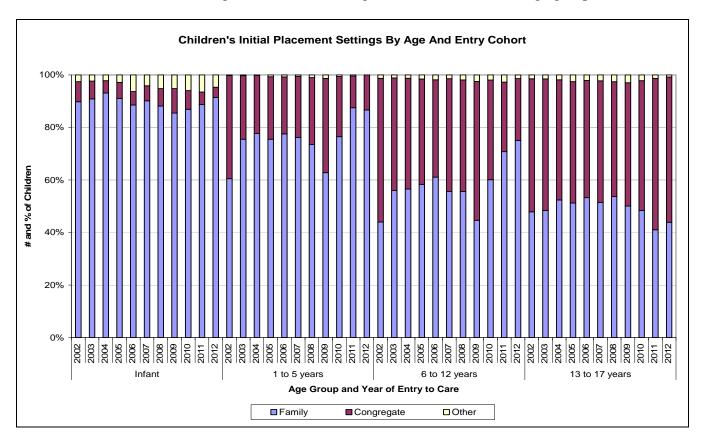


The next table shows specific care types used month-by-month for entries between April 2011 and March 2012.

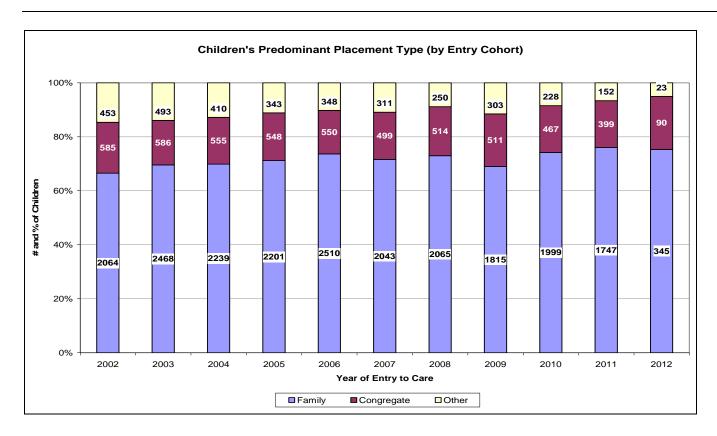
Case Summaries

| | enter |
|----------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| First placement type | Apr11 | May11 | Jun11 | Jul11 | Aug11 | Sep11 | Oct11 | Nov11 | Dec11 | Jan12 | Feb12 | Mar12 |
| Residential N | 8 | 10 | 13 | 12 | 13 | 10 | 10 | 11 | 11 | 13 | 9 | 10 |
| % | 4.4% | 4.4% | 5.9% | 5.7% | 6.7% | 4.7% | 5.6% | 7.1% | 7.9% | 8.5% | 6.1% | 6.4% |
| DCF Facilities N | 4 | 2 | 1 | 1 | 3 | 1 | 4 | 2 | 3 | 2 | 4 | 2 |
| % | 2.2% | .9% | .5% | .5% | 1.5% | .5% | 2.2% | 1.3% | 2.1% | 1.3% | 2.7% | 1.3% |
| Foster Care N | 86 | 112 | 111 | 105 | 80 | 112 | 82 | 67 | 61 | 85 | 69 | 92 |
| % | 47.3% | 49.1% | 50.0% | 49.8% | 41.2% | 52.1% | 45.6% | 42.9% | 43.6% | 55.6% | 46.6% | 58.6% |
| Group Home N | 1 | 1 | 6 | 6 | 5 | 5 | 4 | 4 | | 6 | 2 | |
| % | .5% | .4% | 2.7% | 2.8% | 2.6% | 2.3% | 2.2% | 2.6% | | 3.9% | 1.4% | |
| Relative Care N | 43 | 59 | 47 | 45 | 45 | 46 | 37 | 30 | 37 | 21 | 29 | 27 |
| % | 23.6% | 25.9% | 21.2% | 21.3% | 23.2% | 21.4% | 20.6% | 19.2% | 26.4% | 13.7% | 19.6% | 17.2% |
| Medical N | 3 | 1 | 6 | 3 | 9 | 7 | 5 | 4 | 5 | 4 | 3 | 1 |
| % | 1.6% | .4% | 2.7% | 1.4% | 4.6% | 3.3% | 2.8% | 2.6% | 3.6% | 2.6% | 2.0% | .6% |
| Safe Home N | 13 | 14 | 14 | 14 | 12 | 9 | 11 | 18 | 7 | 3 | 12 | 9 |
| % | 7.1% | 6.1% | 6.3% | 6.6% | 6.2% | 4.2% | 6.1% | 11.5% | 5.0% | 2.0% | 8.1% | 5.7% |
| Shelter N | 17 | 24 | 13 | 12 | 23 | 20 | 12 | 16 | 8 | 12 | 10 | 14 |
| % | 9.3% | 10.5% | 5.9% | 5.7% | 11.9% | 9.3% | 6.7% | 10.3% | 5.7% | 7.8% | 6.8% | 8.9% |
| Special Study N | 7 | 5 | 11 | 13 | 4 | 5 | 15 | 4 | 8 | 7 | 10 | 2 |
| % | 3.8% | 2.2% | 5.0% | 6.2% | 2.1% | 2.3% | 8.3% | 2.6% | 5.7% | 4.6% | 6.8% | 1.3% |
| Total N | 182 | 228 | 222 | 211 | 194 | 215 | 180 | 156 | 140 | 153 | 148 | 157 |
| % | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |

The chart below shows the change in level of care usage over time for different age groups.



It is also useful to look at where children spend most of their time in DCF care. The chart below shows this for admission the 2002 through 2012 admission cohorts.



The following chart shows monthly statistics of children who exited from DCF placements between April 2011 and March 2012, and the portion of those exits within each placement type from which they exited.

| Case Summaries | | | | | | | | | | | | | |
|---------------------------|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Last placement type in | | exit |
| spell (as of censor date) | | Jan11 | Feb11 | Mar11 | Apr11 | May11 | Jun11 | Jul11 | Aug11 | Sep11 | Oct11 | Nov11 | Dec11 |
| Residential | N | 17 | 12 | 21 | 9 | 19 | 29 | 19 | 19 | 12 | 10 | 9 | 8 |
| | % | 12.7% | 7.8% | 9.5% | 4.5% | 7.9% | 9.8% | 9.3% | 6.9% | 7.3% | 6.0% | 6.8% | 4.3% |
| DCF Facilities | N | | | 2 | 4 | 2 | 4 | 1 | 5 | | 2 | 2 | 2 |
| | % | | | .9% | 2.0% | .8% | 1.4% | .5% | 1.8% | | 1.2% | 1.5% | 1.1% |
| Foster Care | N | 63 | 77 | 104 | 98 | 115 | 142 | 81 | 132 | 93 | 78 | 63 | 103 |
| | % | 47.0% | 50.3% | 47.1% | 48.8% | 47.9% | 48.1% | 39.7% | 47.8% | 56.4% | 46.7% | 47.7% | 54.8% |
| Group Home | N | 10 | 10 | 11 | 16 | 8 | 30 | 15 | 15 | 6 | 11 | 6 | 11 |
| | % | 7.5% | 6.5% | 5.0% | 8.0% | 3.3% | 10.2% | 7.4% | 5.4% | 3.6% | 6.6% | 4.5% | 5.9% |
| Independent Living | N | 4 | 4 | 4 | 6 | 3 | 8 | 1 | 3 | 1 | 1 | 4 | |
| | % | 3.0% | 2.6% | 1.8% | 3.0% | 1.3% | 2.7% | .5% | 1.1% | .6% | .6% | 3.0% | |
| Relative Care | N | 26 | 30 | 53 | 42 | 59 | 53 | 56 | 66 | 40 | 47 | 37 | 48 |
| | % | 19.4% | 19.6% | 24.0% | 20.9% | 24.6% | 18.0% | 27.5% | 23.9% | 24.2% | 28.1% | 28.0% | 25.5% |
| Medical I | N | | 3 | 4 | 3 | 2 | | 2 | 2 | 1 | 1 | | 1 |
| | % | | 2.0% | 1.8% | 1.5% | .8% | | 1.0% | .7% | .6% | .6% | | .5% |
| Safe Home | N | 3 | 6 | 6 | 6 | 9 | 7 | 6 | 2 | 2 | 2 | 2 | 4 |
| | % | 2.2% | 3.9% | 2.7% | 3.0% | 3.8% | 2.4% | 2.9% | .7% | 1.2% | 1.2% | 1.5% | 2.1% |
| Shelter | N | 7 | 6 | 13 | 11 | 14 | 2 | 11 | 17 | 2 | 6 | 4 | 8 |
| | % | 5.2% | 3.9% | 5.9% | 5.5% | 5.8% | .7% | 5.4% | 6.2% | 1.2% | 3.6% | 3.0% | 4.3% |
| Special Study | N | 4 | 3 | 2 | 4 | 8 | 19 | 11 | 14 | 5 | 7 | 2 | 2 |
| | % | 3.0% | 2.0% | .9% | 2.0% | 3.3% | 6.4% | 5.4% | 5.1% | 3.0% | 4.2% | 1.5% | 1.1% |
| Uknown | N | | 2 | 1 | 2 | 1 | 1 | 1 | 1 | 3 | 2 | 3 | 1 |
| | % | | 1.3% | .5% | 1.0% | .4% | .3% | .5% | .4% | 1.8% | 1.2% | 2.3% | .5% |
| Total | N | 134 | 153 | 221 | 201 | 240 | 295 | 204 | 276 | 165 | 167 | 132 | 188 |
| | % | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |

The next chart shows the primary placement type for children who were in care on April 1, 2012 organized by length of time in care.

Primary type of spell (>50%) * Duration Category Crosstabulation

| | | | | | | uration Categ | jory | | | |
|---------------|--------------------|-----------|------------|------------|-------------|---------------|-------------|--------------|-----------|---------|
| | | | 1 <= | 30 <= | 90 <= durat | 180 <= | 365 <= | 545 <= durat | more than | |
| | | | durat < 30 | durat < 90 | < 180 | durat < 365 | durat < 545 | < 1095 | 1095 | Total |
| Primary | Residential | Count | 9 | 22 | 33 | 76 | 75 | 97 | 96 | 408 |
| type of spell | | % of Row | 2.2% | 5.4% | 8.1% | 18.6% | 18.4% | 23.8% | 23.5% | 100.0% |
| (>50%) | | % of Col | 7.9% | 7.3% | 7.3% | 9.6% | 11.8% | 10.7% | 8.2% | 9.3% |
| (20070) | DCF Facilities | Count | 0 | 5 | 7 | 7 | 3 | 8 | 5 | 35 |
| | | % of Row | .0% | 14.3% | 20.0% | 20.0% | 8.6% | 22.9% | 14.3% | 100.0% |
| | | % of Col | .0% | 1.7% | 1.5% | .9% | .5% | .9% | .4% | .8% |
| | Foster Care | Count | 47 | 105 | 178 | 320 | 317 | 491 | 682 | 2140 |
| | | % of Row | 2.2% | 4.9% | 8.3% | 15.0% | 14.8% | 22.9% | 31.9% | 100.0% |
| | | % of Col | 41.2% | 34.7% | 39.1% | 40.3% | 49.9% | 54.3% | 58.2% | 48.9% |
| | Group Home | Count | 0 | 7 | 15 | 22 | 27 | 60 | 81 | 212 |
| | | % of Row | .0% | 3.3% | 7.1% | 10.4% | 12.7% | 28.3% | 38.2% | 100.0% |
| | | % of Col | .0% | 2.3% | 3.3% | 2.8% | 4.3% | 6.6% | 6.9% | 4.8% |
| | Independent Living | Count | 0 | 0 | 0 | 0 | 1 | 5 | 1 | 7 |
| | | % of Row | .0% | .0% | .0% | .0% | 14.3% | 71.4% | 14.3% | 100.0% |
| | | % of Col | .0% | .0% | .0% | .0% | .2% | .6% | .1% | .2% |
| | Relative Care | Count | 31 | 89 | 140 | 255 | 157 | 140 | 74 | 886 |
| | | % of Row | 3.5% | 10.0% | 15.8% | 28.8% | 17.7% | 15.8% | 8.4% | 100.0% |
| | | % of Col | 27.2% | 29.4% | 30.8% | 32.1% | 24.7% | 15.5% | 6.3% | 20.2% |
| | Medical | Count | 3 | 3 | 6 | 3 | 1 | 4 | 2 | 22 |
| | | % of Row | 13.6% | 13.6% | 27.3% | 13.6% | 4.5% | 18.2% | 9.1% | 100.0% |
| | | % of Col | 2.6% | 1.0% | 1.3% | .4% | .2% | .4% | .2% | .5% |
| | Mixed (none >50%) | Count | 1 | 1 | 2 | 17 | 17 | 50 | 172 | 260 |
| | | % of Row | .4% | .4% | .8% | 6.5% | 6.5% | 19.2% | 66.2% | 100.0% |
| | | % of Col | .9% | .3% | .4% | 2.1% | 2.7% | 5.5% | 14.7% | 5.9% |
| | Safe Home | Count | 6 | 24 | 18 | 22 | 8 | 10 | 4 | 92 |
| | | % of Row | 6.5% | 26.1% | 19.6% | 23.9% | 8.7% | 10.9% | 4.3% | 100.0% |
| | | % of Col | 5.3% | 7.9% | 4.0% | 2.8% | 1.3% | 1.1% | .3% | 2.1% |
| | Shelter | Count | 9 | 25 | 31 | 22 | 8 | 0 | 0 | 95 |
| | | % of Row | 9.5% | 26.3% | 32.6% | 23.2% | 8.4% | .0% | .0% | 100.0% |
| | | % of Col | 7.9% | 8.3% | 6.8% | 2.8% | 1.3% | .0% | .0% | 2.2% |
| | Special Study | Count | 7 | 20 | 22 | 47 | 20 | 38 | 49 | 203 |
| | | % of Row | 3.4% | 9.9% | 10.8% | 23.2% | 9.9% | 18.7% | 24.1% | 100.0% |
| | | % of Col | 6.1% | 6.6% | 4.8% | 5.9% | 3.1% | 4.2% | 4.2% | 4.6% |
| | Unknown | Count | 1 | 2 | 3 | 3 | 1 | 1 | 5 | 16 |
| | | % of Row | 6.3% | 12.5% | 18.8% | 18.8% | 6.3% | 6.3% | 31.3% | 100.0% |
| | | % of Col | .9% | .7% | .7% | .4% | .2% | .1% | .4% | .4% |
| Total | | Count | 114 | 303 | 455 | 794 | 635 | 904 | 1171 | 4376 |
| | | % of Row | 2.6% | 6.9% | 10.4% | 18.1% | 14.5% | 20.7% | 26.8% | 100.0% |
| | | % of Col | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| L | | ,0 01 001 | 100.078 | 100.076 | 100.076 | 1 00.076 | 100.076 | 100.076 | 100.078 | 100.070 |

Congregate Care Settings

| Placement Issues | Feb 2011 | May 2011 | Aug 2011 | Nov 2011 | Feb 2012 | May 2012 |
|----------------------------------------------------------------------------------------------------|-------------|----------|-------------|-------------|-------------|-------------|
| Total number of children 12 years old and under, in Congregate Care | 171 | 149 | 132 | 105 | 90 | 78 |
| Number of children 12 years old and under, in DCF Facilities | 4 | 6 | 4 | 2 | 5 | 5 |
| Number of children 12 years old and under, in Group Homes | 37 | 34 | 31 | 28 | 24 | 23 |
| Number of children 12 years old and under, in Residential | 51 | 44 | 40 | 34 | 25 | 15 |
| Number of children 12 years old and under, in SAFE Home | 78 | 61 | 54 | 36 | 35 | 34 |
| Number of children 12 years old and under, in Permanency Diagnostic Center | 1 | 1 | 0 | 0 | 0 | 0 |
| Number of children 12 years old and under in Shelter | 0 | 3 | 3 | 5 | 1 | 1 |
| Total number of children ages 13-17 in Congregate Placements | 748 | 752 | 729 | 713 | 675 | 624 |

Use of SAFE Homes, Shelters and PDCs

The analysis below provides longitudinal data for children (which may include youth ages 18 and older) who entered care in Safe Homes, Permanency Diagnostic Centers and Shelters.

| | | | | | Period | of Entry | to Car | e | | | |
|---------------|-----|------|------|------|--------|----------|--------|------|------|------|------|
| | 200 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |
| | 2 | | | | | | | | | | |
| Total Entries | 310 | 3547 | 3204 | 3092 | 3408 | 2853 | 2829 | 2629 | 2694 | 2298 | 458 |
| | 2 | | | | | | | | | | |
| SAFE | 728 | 629 | 453 | 394 | 395 | 382 | 335 | 471 | 331 | 146 | 24 |
| Homes/PDCs | 23% | 18% | 14% | 13% | 12% | 13% | 12% | 18% | 12% | 6% | 5% |
| Shelters | 165 | 135 | 147 | 178 | 114 | 136 | 144 | 186 | 175 | 193 | 36 |
| | 5% | 4% | 5% | 6% | 3% | 5% | 5% | 7% | 6% | 8% | 8% |
| Total | 893 | 764 | 600 | 572 | 509 | 518 | 479 | 657 | 506 | 339 | 60 |
| | 29% | 22% | 19% | 18% | 15% | 18% | 17% | 25% | 19% | 15% | 13% |

| | Period of Entry to Care | | | | | | | | | | |
|---------------|-------------------------|------|------|------|------|------|------|------|------|------|------|
| | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 |
| Total Initial | 893 | 764 | 600 | 572 | 509 | 518 | 479 | 657 | 506 | 339 | 60 |
| Plcmnts | | | | | | | | | | | |
| <= 30 days | 351 | 308 | 249 | 241 | 186 | 162 | 150 | 229 | 135 | 103 | 41 |
| | 39% | 40% | 42% | 42% | 37% | 31% | 31% | 35% | 27% | 30% | 68% |
| 31 - 60 | 284 | 180 | 102 | 114 | 73 | 73 | 102 | 110 | 106 | 57 | 10 |
| | 32% | 24% | 17% | 20% | 14% | 14% | 21% | 17% | 21% | 17% | 17% |
| 61 - 91 | 106 | 121 | 81 | 76 | 87 | 79 | 85 | 157 | 91 | 54 | 9 |
| | 12% | 16% | 14% | 13% | 17% | 15% | 18% | 24% | 18% | 16% | 15% |
| 92 - 183 | 101 | 107 | 124 | 100 | 118 | 131 | 110 | 124 | 136 | 92 | 0 |
| | 11% | 14% | 21% | 17% | 23% | 25% | 23% | 19% | 27% | 27% | 0% |
| 184+ | 51 | 48 | 44 | 41 | 45 | 73 | 32 | 37 | 38 | 33 | 0 |
| | 6% | 6% | 7% | 7% | 9% | 14% | 7% | 6% | 8% | 10% | 0% |

The following is the point-in-time data taken from the monthly LINK data, and may include those youth ages 18 and older.

| Placement Issues | Nov 2010 | Feb 2011 | May 2011 | Aug 2011 | Nov 2011 | Feb 2012 | May 2012 |
|--------------------------------------------------------------------------------------|-------------|-------------|----------|-------------|-------------|-------------|----------|
| Total number of children in SAFE Home | 99 | 90 | 70 | 79 | 63 | 60 | 63 |
| Number of children in SAFE Home, > 60 days | 59 | 56 | 50 | 42 | 35 | 44 | 40 |
| • Number of children in SAFE Home, >= 6 months | 14 | 12 | 15 | 13 | 14 | 9 | 11 |
| Total number of children in STAR/Shelter Placement | 84 | 75 | 80 | 80 | 79 | 75 | 71 |
| • Number of children in STAR/Shelter Placement, > 60 days | 44 | 41 | 41 | 48 | 43 | 40 | 37 |
| • Number of children in STAR/Shelter Placement, >= 6 months | 3 | 6 | 4 | 3 | 11 | 7 | 9 |
| Total number of children in Permanency Planning Diagnostic Center | 11 | 1 | 1 | 0 | 0 | 0 | 0 |
| • Total number of children in Permanency Planning Diagnostic Center, > 60 days | 9 | 1 | 1 | 0 | 0 | 0 | 0 |
| • Total number of children in Permanency Planning Diagnostic Center, >= 6 months | 1 | 1 | 1 | 0 | 0 | 0 | 0 |
| Total number of children in MH Shelter | 2 | 0 | 1 | 2 | 5 | 2 | 1 |
| • Total number of children in MH Shelter, > 60 days | 1 | 0 | 1 | 1 | 4 | 2 | 0 |
| • Total number of children in MH Shelter, >= 6 months | 0 | 0 | 0 | 1 | 1 | 1 | 1 |

Time in Residential Care

| Placement Issues | Nov | Feb | May | Aug | Nov | Feb | May |
|-------------------------------------------|------|------|------|------|------|------|------|
| | 2010 | 2011 | 2011 | 2011 | 2011 | 2012 | 2012 |
| Total number of children in | 462 | 477 | 488 | 454 | 403 | 372 | 316 |
| Residential care | | | | | | | |
| Number of children in | 129 | 129 | 132 | 126 | 119 | 124 | 113 |
| Residential care, >= 12 | | | | | | | |
| months in Residential | | | | | | | |
| placement | | | | | | | |
| Number of children in | 2 | 1 | 2 | 2 | 1 | 1 | 1 |
| Residential care, >= 60 | | | | | | | |
| months in Residential | | | | | | | |
| placement | | | | | | | |

Appendix 1 Commissioner's Highlights from The Department of Children & Families First Quarter 2012 Exit Plan Report

Commissioner Statement

The first 18 months of this new administration have been marked by major transformations throughout the Department, its central and regional offices, and its facilities. Major reorganization has occurred, and meaningful practice changes have started to re-shape how we do our work and where we serve the children who enter care. We have ended the routine practice of unannounced visits to homes unless necessary, increased the use of relatives as foster homes, and decreased the use of congregate care for young children and the overall use of out of state programs.

Important shifts already have taken place. For instance:

- The percentage of children placed with relatives when initially entering care in 2011 rose to 24 percent compared to 14 percent the year before. The percentage of children overall placed with relatives has risen to 20.4 percent in July 2012 compared to 15.3 percent in January 2011;
- The number of children in an out-of-state placement fell to 131 on July 1, 2012 compared to 364 children at the beginning of 2011;
- The use of congregate care for younger children has been significantly reduced. The number of children age six and under in congregate care settings declined from 38 in January 2011 to 4 in July 2012. The number of children ages 12 and under in congregate care also has decreased from 201 in January 2011 to 85 in July 2012; and
- The percentage of children in a family setting rose to 75.4 percent in July 2012 compared to 67.5 percent in January 2011. The percentage of children in congregate care declined to 24.6 percent in July 2012 compared to 29.8 percent in January 2011; and
- The total number of children in care (including committed abused/neglected, committed delinquent, and voluntary placements) decreased to 4,285 children in July 2012 compared to 4,784 children in January 2011 -- a decrease of 10.4 percent during that eighteen-month period.

All of these changes represent important improvements for our work with children and families. Still, there is much more that remains to be done to fully institute a family-centered and strengths-based practice that most effectively enhances the holistic well-being of children. For that reason, we are at the crossroads in our transformation as we implement two seminal reforms. In March, the Department launched a Differential Response System (DRS) that eschews the traditional, forensic-style investigation for low-risk families and instead engages families to join in an assessment of their strengths and needs in an effort to connect them to community services. In the coming months, the Strengthening Families Practice Model will apply a strengths-based approach to all our work, including all responses to child protection reports, behavioral health and juvenile services, and our facilities. While the earlier changes had major effects across our systems, the impact of Strengthening Families and DRS promises to transform our relationships with families and children. That will be the greatest transformation of all because solid evidence indicates this relationship has tremendous bearing on the outcomes of our interventions.

In just the first months of implementation of DRS, our staff reports that families and the community have responded in a highly-positive manner. Families feel our interactions with them are more respectful and our efforts more helpful and families who receive assessments are more open in sharing information with us and more satisfied with the services they receive as a result of the collaborative process. While growing pains are evident, staff are expressing greater satisfaction with the work and are receiving expressions of thanks from the families. This constitutes a great contrast with the mistrust and fear that previously permeated too much of our relations with families.

Undoubtedly, the Department still has further development in relation to the new DRS system. For example, in March only 24 percent of accepted Careline reports were sent to the assessment track. By the end of June, we already saw that number grow to 37 percent as staff became more comfortable with the decision process. Even during this early stage, however, the staff feedback and the positive response from families bode well for the overall Strengthening Families Practice Model. In the context of the Exit Plan Outcome Measures 3 and 15, improved family participation is certain to improve the quality of our treatment planning and our effectiveness in meeting children's needs.

In addition to the implementation of Strengthening Families and DRS, 2012 will bring a focus on permanency, especially for the older youths who remain in our care. Major strides have taken place in reducing the number of young children in congregate care. Now the Department is set to make permanency a focus for the older children as well. The Team Decision Making process, whereby families, DCF staff and service providers come together to identify and implement family-centered solutions for children in care, will be used for the youths 13 years and older who are in congregate care. The goal, as it has been for the younger children, will be finding a family setting suitable for meeting the individual youth's treatment needs. We believe this process will lead to greater permanency for the older children who have presented a greater challenge in finding permanent homes.

Permanency for older children is just one of the significant challenges we face. Although there have been improvements in the use of relative care and the use of family settings more generally, continued progress is complicated due to issues regarding access to effective community services. In addition, we continue to work with in-state providers to develop placements for children with complex needs, including problem sexual behavior and other complex behavioral health needs. Limited access to appropriate needed services has rippling effects throughout the system, including excessive lengths of stay in temporary settings and other congregate settings. Foster parents, both relative and non-relative, remain a pressing need, and retention of our existing foster parents must be improved. Currently, a campaign is underway to raise awareness among our own staff about the need to improve how all of us support foster and relative care providers.

Clearly, these are important challenges to confront. The progress made in a short time and the major reforms now just underway should, however, encourage us to continue the path we are taking. Family-centered, strengths-based practice that aligns the Department closely with families, communities and providers has set us in the right direction and promises to continue the advances already made. I am confident that by working together with our families and other partners, we will continue to make positive strides toward making Connecticut a leader in "Strengthening Families" and improving the lives and futures of our children.

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