Juan F. v. Malloy Exit Plan Quarterly Report July 1, 2013 - September 30, 2013 Civil Action No. 2:89 CV 859 (SRU)

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## **Juan F.** v Malloy Exit Plan Quarterly Report July 1, 2013 - September 30, 2013

### **Highlights**

- The Court Monitor's quarterly review of the Department's efforts to meet the Exit Plan Outcome Measures during the period of July 1, 2013 through September 30, 2013 indicates the Department achieved 17 of the 22 Outcome Measures. The five measures not met include: Outcome Measure 3 (Case Planning), Outcome Measure 10 (Sibling Placements), Outcome Measure 15 (Children's Needs Met), Outcome Measure 17 (Worker-Child Visitation In-Home)<sup>1</sup>, and Outcome Measure 18 (Caseload Standards).
- According to the 55 case, blind-sample conducted for the Third Quarter 2013, the Department's performance on Outcome Measure 3 (Case Planning) improved slightly (63.0% to 65.5%) while the findings for Outcome Measure 15 (Children's Needs Met) declined from 74.1% to 67.3%.

The Department continued to pursue family-based resources as the first course of action and consideration of relatives occurs more routinely. Reductions in the use of congregate care services continue and the number of children residing out-of-state decreased to only 30 children as of December 1, 2013. Similar to previous blind quarterly OM3/OM15 reviews there were numerous examples of diligent, effective and sometimes heroic casework efforts provided by DCF Social Workers and Social Work Supervisors on behalf of the families. Their efforts led to very positive permanency and service outcomes for children and families. Many staff have embraced the new initiatives directed at promoting better collaboration with both families and stakeholders and the increased utilization of family conferencing has made a significant difference on the outcomes for children. Nevertheless, there were also a number of concerns identified this quarter. They included: poor documentation, ongoing issues with engagement and assessment., the lack of adequate levels of community-based services, insufficient foster care resources, the need for additional relative supports, concerns over the delivery of service for the thousands of children diverted from congregate care, and the inconsistency of the Department's efforts regarding Intake and Family Assessment Response (FAR) reports. These issues and others continue to undermine the overall quality of service. Even extraordinary efforts by Social Workers and Social Work Supervisors cannot compensate for the system level problems that persist.

While the Department routinely manages training needs and performance issues regarding its staff, the additional impact of excessive caseload and workload situations for both Investigations and Ongoing Services is exacerbating deficiencies with the overall quality of the Department's efforts. The number of Social Workers exceeding the caseload cap for more lengthy periods of time has increased dramatically over the last few months. My previous report stated that:

<sup>&</sup>lt;sup>1</sup> Outcome Measure 17 Worker-Child Visitation In-Home - Current automated reporting indicates the measure as statistically achieved, however this does not accurately reflect performance findings. The Outcome Measure 17 Pre-Certification Review indicated that compliance is not achieved. While DCF reports are numerically accurate based upon the algorithms utilized, user error in selection of narrative entry types, and a failure to demonstrate that workers are meeting the specific steps called for with the definition of 'visit' calls into question the automated report findings. As such, the Monitor will not indicate achievement of the measure based solely on the current reporting.

"In addition, front-line staffing levels are inadequate given the complexity of cases that now make up the pool of Investigation and Ongoing Service cases that Social Workers have on their caseloads since the implementation of the Differential Response System (DRS). DRS results in the diversion of low-risk cases from workers caseloads, leaving staff with caseloads made up of only complex cases. (Caseload standards were adopted with the assumption of a mixed risk caseload.) Social Workers reluctantly note on a fairly regular basis that they are forced to make difficult decisions on how to allocate their case management efforts. They describe their inability to effectively meet all of the daily demands to assist their clients. In order to continue the improvements noted in this report, achieve positive outcomes for children and allow staff to meet the case management expectations set by the current administration, a reduction of the case standards and approval for increased staffing will also need to be addressed."

The situation has worsened and appears directly tied to the weaknesses in service delivery, case management concerns and the quality of the assessment and documentation efforts regarding new reports that have been noted by Court Monitor Reviewers.

Along with the workload problems, the need to provide additional mental health and permanency services remains. The thousands of children being diverted from congregate care need access to timely community-based services and the relatives who have stepped forward in increasing numbers need sufficient support services in order to safely maintain children in the community. The lack of placement and mental health service is in part reflected in the fact that over 60 % of the children currently in the temporary settings of SAFE Homes and STAR programs are in overstay status. It is also demonstrated by the 268 instances of clearly identifiable unmet needs that are detailed on pages 27-30 and 32 as part the review of 55 sample cases for Outcome Measure 15 (Children's Needs Met). These 268 unmet needs reflect parent and child refusals of service, the lack of availability of services and case management deficiencies.

- The Court Monitor has continued the work to Pre-Certify Outcome Measures to advance the exit process from federal oversight. During the Third Quarter 2013, a Pre-Certification Review of Outcome Measure 5 (Repeat Maltreatment, In-Home) was undertaken. Data collection was completed and the data entry is nearly concluded. Preliminary data gleaned from the reviewers raised concerns with the quality and consistency of Intake/Investigations and FAR efforts statewide. The Court Monitor detailed the preliminary concerns with Senior Management and also met with the Communities of Practice for Intake/FAR and the Area Directors to provide this feedback directly. Several Program Managers are utilizing this information to conduct quality checks and internal audits at the time of this reporting in attempt to better understand the scope of the issues within their own offices.
- The number of children with the goal of Another Planned Permanent Living Arrangement (APPLA) decreased by 19 from the 602 to 583 this quarter. The Department is undertaking a review of the implementation of action steps taken on behalf of the children/youth since they were part of the "Permanency Roundtable" initiative two quarters ago. The Court Monitor's Office will assist the Department in the data collection. In collaboration with Casey Family Programs, five professional teams held facilitated round table reviews of over 130 older youth.

Most of these youth had "Another Planned Permanency Living Arrangement" (APPLA) as a permanency goal. While this goal may be appropriate for some youth, it is not a preferred goal due to it's lack of a formal permanent and stable relationship with an adult support system be it relative or future kin. The round table discussion identified and advanced alternate permanency options and improvements to the existing plans for these youth.

- As of November 2013, there were 147 *Juan F*. children placed in residential facilities. This is a decrease of an additional 26 children compared to the 173 children reported last quarter. Compared to February 2012 there has been a decrease of 225 children in residential care. The number of children residing in residential care for greater than 12 months was 42, which is a decrease of 9 children in comparison to the 51 reported last quarter and 82 less children than February 2012 (124).
- The Department continues to reduce the number of <u>Juan F.</u> children residing and receiving treatment in out-of-state residential facilities. As of December 2013, the number of children decreased by 7 for a total of 31 children compared to the 38 children reported for August 2013.
- The number of children age 12 years old or younger in congregate care increased by 6 to 47 children as of November 2013. Twenty one of these children reside in SAFE Homes, 12 are placed in group homes, 11 are placed in Residential Care two are in Shelters and one is receiving treatment at a DCF facility.
- As of November 2013, there were 3 children aged 1 to 5 years of age residing in Congregate Care
  placements. One of these children was placed due to complex medical conditions. One was in a
  SAFE Home and one child was placed with legal commitment/with a teenage mother in a group
  home setting.
- The number of children utilizing SAFE Home temporary placements decreased to 33 as of November 2013 compared with the 35 reported as of August 2013. The number of children in SAFE Home overstay status (>60 days) during the Third Quarter, was 66.6% or 22 children. There were 8 children with lengths of stay in excess of six months as of November 2013. The lack of sufficient foster/adoptive resources, the need for ongoing reunification efforts and the need for community-based services remain the significant barriers to timely discharge for these children.
- There were 73 youth in STAR programs as of November 2013, two less than the 75 reported in August 2013. Well over half (63.0%) of the youth (46 of 73) in STAR programs were in overstay status (>60 days) as of November 2013; compared with the 35 youth noted last quarter. There were 5 children with lengths of stay longer than six months and 20 children with stays of longer than four months as of November 2013. 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 October 2013 indicates that there are 2,007 licensed DCF foster homes. This is a decrease of 51 homes when compared with the Second Quarter 2013 report. While the percentage of children utilizing relative/kin resources has increased substantially since 2011 the number of non-relative homes continues to decline. The

number of approved private provider foster care homes is 833 which is a reduction of 26 homes. The number of private provider foster homes currently available for placement is 74. The Department's goal as outlined in the <u>Stipulation Regarding Outcome Measures 3 and 15</u> 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 October 2013 is 2,840 homes, a net loss of 447 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 Monitor's quarterly review of the Department for the period of April 1, 2013 through June 30, 2013 indicates that the Department did not achieve compliance with five (5) measures:
  - Treatment Planning (65.5%)
  - Sibling Placements (92.5%)
  - Children's Needs Met (67.3%)
  - Worker-Child Visitation In-Home (N/A)<sup>2</sup>
  - Caseload Standards (99.9%)
- The Monitor's quarterly review of the Department for the period of July 1, 2013 through September 30, 2013 indicates the Department has achieved compliance with the following 17 Outcome Measures:
  - Commencement of Investigations (96.0%)
  - Completion of Investigations (92.5%)
  - Search for Relatives (90.2%)
  - Repeat Maltreatment (4.9%)
  - Maltreatment of Children in Out-of Home Cases (0.2%)
  - Reunification (62.4%)
  - Adoption (32.8%)
  - Transfer of Guardianship (77.3%)
  - Re-Entry into DCF Custody (5.5%)
  - Multiple Placements (96.6%)
  - Foster Parent Training (100.0%)
  - Placement within Licensed Capacity (96.2%)
  - Worker-Child Visitation Out-of Home Cases (94.6% Monthly/98.8% Quarterly)
  - Residential Reduction (4.3%)
  - Discharge Measures regarding Education, Work, and Military Status (85.7%)
  - Discharge to Adult Services (100.0%)
  - Multi-disciplinary Exams (94.1%)

<sup>&</sup>lt;sup>2</sup> Outcome Measure 17 Worker-Child Visitation In-Home - Current automated reporting indicates the measure as statistically achieved, however this does not accurately reflect performance findings. The Outcome Measure 17 Pre-Certification Review indicated that compliance is not achieved. While DCF reports are numerically accurate based upon the algorithms utilized, user error in selection of narrative entry types, and a failure to demonstrate that workers are meeting the specific steps called for with the definition of 'visit' calls into question the automated report findings. As such, the Monitor will not indicate achievement of the measure based solely on the current reporting.

- The Department has maintained compliance for at least two (2) consecutive quarters<sup>3</sup> 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 (thirty-sixth consecutive quarter)
  - Completion of Investigations (thirty-sixth consecutive quarter)
  - Search for Relatives (thirty-first consecutive quarter)
  - Repeat Maltreatment (twenty-sixth consecutive quarter)
  - Maltreatment of Children in Out-of-Home Care (thirty-ninth consecutive quarter)
  - Reunification (second consecutive quarter)
  - Multiple Placements (twenty first consecutive quarter)
  - Foster Parent Training (thirty-eighth consecutive quarter)
  - Placement Within Licensed Capacity (fourth consecutive quarter)
  - Visitation Out-of-Home (thirty-second consecutive quarter)
  - Residential Reduction (thirtieth consecutive quarter)
  - Discharge of Youth with High School diplomas, work or military service (seventh consecutive quarter)
  - Discharge of Youth to Adult Services (second quarter)
  - Multi-disciplinary Exams (twenty-ninth consecutive quarter)

A full copy of the Department's Third Quarter 2013 submission including the Commissioner's Highlights may be found on page 48.

<sup>3</sup> 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	Plan I	Repo	rt Out	come	Mea	sure	Over	view																					
Measure	Measure	Base- line				4Q 2012		2Q 2012	1Q 2012	4Q 2011		2Q 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	4Q 2006	3Q 2006
1: Commencement of nvestigation	>=90%	×																		97.7%								97.1%			98.7%
2: Completion of the	>=85%	73.7%	92.5%	92.2%	89.1%	90.2%	92.5%	92.4%	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%	93.7%	94.2%
3: Treatment Plans	>=90%	×	65.5%	63.0%	56.4%	53.7%	47.8%	63.0%	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%	41.1%	54.3%
4: Search for Relatives	>=85%	58%	90.2%	85.3%	92.2%	87.3%	87.5%	89.5%	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%	91.4%	93.1%
5: Repeat Maltreatment of In- Home Children	<=7%	9.3%	4.9%	5.7%	4.4%	4.9%	4.3%	4.1%	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%	7.9%	7.9%
6: Maltreatment of Children in Out-of-Home Care	<=2%	1.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	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%	0.2%	0.7%
7: Reunification	>=60%	57.8%	62.4%	62.8%	56.3%	57.6%	52.0%	61.1%	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%	62.5%	64.4%	66.4%	61.0%	64.2%	67.9%	70.5%	61.3%	62.5%
8: Adoption	>=32%	12.5%	32.8%	31.6%	29.5%	25.9%	39.0%	34.3%	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%	33.6%	27.0%
9: Transfer of Guardianship	>=70%	60.5%	77.3%	65.6%	77.6%	76.5%	84.0%	76.7%	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%	76.4%	70.2%
10: Sibling Placement	>=95%	57×	92.5%	88.0%	89.5%	87.5%	87.5%	89.2%	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%	85.5%	84.8%
11: Re-Entry into DCF Custody	<=7%	6.9%	5.5%	8.6%	7.4%	7.0%	9.1%	6.8%	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%	8.2%	4.3%	7.5%	6.7%	7.6%	7.2%	8.5%	7.5%	8.2%	4.3%
12: Multiple Placements	>=85%	×	96.6%	96.7%	96.4%	96.5%	96.4%	96.6%	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%	95.0%	95.6%
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%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
14: Placement Within Licensed Capacity	>=96%	94.9%	96.2%	96.4%	97.1%	96.7%	95.8%	95.3%	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%	96.5%	96.7%
15: Children's Needs Met	>=80%	x	67.3%	74.1%	61.8%	53.7%	53.6%	61.1%	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×	62.0%	55.8%	58.8%	47.1%	64.0%	51.3%	45.3%	52.1%	62.0%
16: Worker-Child Visitation Out-of-Home)	>=85%(M)	×	94.6%	95.8%	95.9%	94.2%	93.6%	92.7%	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%	94.7%	92.5%
<u>out-or-none</u>	=100%(Q)	×	98.8%	99.0%	99.2%	99.1%	98.7%	98.7%	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%	91.5%	90.9%	93.1%	93.1%	92.8%	95.7%	93.3%	91.0%	91.5%
17: Worker-Child Visitation (In- Home)	>=85%	×	86.1%	88.6%	88.1%	84.1%	87.0%	85.8%	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%	89.2%	85.7%
18: Caseload Standards	100%	69.2%	99.9%	99.9%	99.8%	99.9%	100.0%	99.7%	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%	100.0%	100.0%
19: Reduction in the Number of Children Placed in Residential	<=11%	13.5%	4.3%	4.9%	5.1%	5.8%	6.3%	6.9%	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%	11.0%	10.9%
20: Discharge Measures	>=85%	61%	85.7%	86.3%	86.5%	95.9%	89.2%	85.7%	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%	100.0%
21: Discharge of Mentally Ill or Mentally Retarded Children	100%	x	100.0%	100.0%	90.0%	100.0%	100.0%	100.0%	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%	×	×	97.0%	100.0%
22: Multi-disciplinary Exams	>=85%	5.6%	94.1%	93.6%	95.0%	89.7%	95.5%	93.8%	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%	94.2%	86.0%

### **Juan F. Pre-Certification Review-Status Update Third Quarter 2013**

Under the Revised Exit Plan (¶5), the Court Monitor is required to conduct what the parties and the Court Monitor refer to as a "Certification" review as follows:

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 quarters (six months) prior to asserting compliance and shall maintain compliance through any decision to terminate jurisdiction. The Court Monitor shall then conduct a review of a statistically significant valid sample of case files at a 96% confidence level, and such other measurements as are necessary, to determine whether Defendants are in compliance. The Court Monitor shall then present findings and recommendations to the District Court. The parties shall have a meaningful opportunity to be heard by the Court Monitor before rendering his findings and recommendations.

In recognition of the progress made and sustained by the Department with respect to a number of Outcome Measures, and the fact that the well-being of the <u>Juan F.</u> class members will be promoted by the earliest possible identification and resolution of the any quantitative or qualitative problems affecting class members that may be identified by the review required by Revised Exit Plan ¶5, the parties and the Court Monitor agree that it is in the best-interests of the <u>Juan F.</u> class members to create a "Pre-Certification" review process. It is expected that this "pre-certification" process may, in certain instances, obviate the need to implement the full certification review for certain outcome measures after sustained compliance is achieved for all Outcome Measures.

The "Pre-Certification" process that parties and the Court Monitor have created, and to which they have agreed, is as follows:

If DCF has sustained compliance as required by the Revised Exit Plan for at least two consecutive quarters (6 months) for any Outcome Measure ("OM"), the Court Monitor may, in his discretion, conduct a "pre-certification review" of that OM ("Pre-Certification Review"). The purpose of the Pre-Certification Review is to recognize DCF's sustained improved performance, to identify and provide a prompt and timely opportunity to remedy any problem areas that are affecting the well-being of *Juan F*. class members, and to increase the efficiency of DCF's eventual complete compliance and exit from the Consent Decree.

Other than conducting the Pre-Certification Review earlier than the review mandated by Revised Exit Plan ¶5, the Pre-Certification Review will be conducted in accordance with the provision for review

as described in the Revised Exit Plan ¶5 unless otherwise agreed upon by the parties and the Court Monitor.

If the Pre-Certification Review does not identify any material issues requiring remediation, and no assertions of noncompliance with the specific Outcome Measures(s) at issue are pending at the time Defendants assert sustained compliance with all Outcome Measures, the Parties agree that the full review as per paragraph 5 of the Revised Exit Plan will not be required after the Defendants assert sustained compliance with all Outcome Measures. Upon Defendants' assertion of sustained compliance with all Outcome Measures, the parties, with the involvement and consent of the Court Monitor, agree to present for the Court's review, any agreement to conduct less than the full review process required by Revised Exit Plan (¶5) for any specific Outcome Measures, as a proposed modification of the Revised Exit Plan.

During the Third Quarter 2013, a Pre-Certification Review of Outcome Measure 5 (Repeat Maltreatment of Children) was undertaken. Data collection was completed and the data entry is nearly concluded. Preliminary data gleaned from the reviewers raised concerns with the quality and consistency of Intake/Investigations and FAR efforts statewide. The Court Monitor detailed the preliminary concerns with Senior Management and also met with the Communities of Practice for Intake/FAR and the Area Directors to provide this feedback directly. Several Program Managers are utilizing this information to conduct quality checks and internal audits at the time of this reporting in attempt to better understand the scope of the issues within their own offices.

The <u>Juan F.</u> parties and the Court Monitor have determined that the results from nine of the eleven completed pre-certification reviews have met the quantitative and qualitative standards set forth for each of them and are thus pre-certified while one Pre-Certification Review was determined to not meet either the quantitative or qualitative standard. While pre-certified, these reviews have identified systemic issues that undermine DCF's successful path to achieving timely outcomes for children. These issues are more prominent in some of the reviewed measures than others. Consistency in supervision, documentation of casework efforts and communication and collaboration with families and external stakeholders all were identified as issues that impede the quality of the Department's casework and require improvement. In brief, the results of pre-certification determinations to date are reported below.

Outcome Measure	Statement of Outcome	Status
OM 4: Search for	If a child(ren) must be removed from his or her	Pre-Certified
Relatives	home, DCF shall conduct and document a search for	
	maternal and paternal relatives, extended formal or	
	informal networks, friends of the child or family,	
	former foster parents, or other persons known to the	
	child. The search period shall extend through the	
	first six (6) months following removal from home.	
	The search shall be conducted and documented in at	
	least 85.0% of the cases.	
OM 5: Repeat	No more than 7% of the children who are victims of	In progress
Maltreatment of	substantiated maltreatment during any six-month	1 0
Children	period shall be the substantiated victims of	
	additional maltreatment during any subsequent six-	
	month period. This outcome shall begin to be	
	measured within the six-month period beginning	
	January 1, 2004.	
OM 7: Reunification	At least 60% of the children, who are reunified with	Not Pre-
	their parents or guardians, shall be reunified within	Certified
	12 months of their most recent removal from home.	
OM 8: Adoption	At least 32% of the children who are adopted shall	Pre-Certified
	have their adoptions finalized within 24 months of	
	the child's most recent removal from his/her home.	
OM 9: Transfer of	At least 70% of all children whose custody is legally	Pre-Certified
Guardianship	transferred shall have their guardianship transferred	
Cuur ununsmp	within 24 months of the child's most recent removal	
	from his/her home.	
OM 12: Multiple	Beginning on January 1, 2004, at least 85% of the	Pre-Certified
Placements	children in DCF custody shall experience no more	
	than three (3) placements during any twelve month	
	period.	
OM 14: Placement	At least 96% of all children placed in foster homes	Pre-Certified
within Licensed Capacity	shall be in foster homes operating within their	
The state of the s	licensed capacity, except when necessary to	
	accommodate sibling groups.	
OM 16: Worker/ Child	DCF shall visit at least 85% of all out-of-home	Pre-Certified
Visitation (Child in	children at least once a month, except for probate,	
Placement)	interstate, or voluntary cases. All children must be	
ĺ	seen by their DCF Social Worker at least quarterly.	
OM 17: Worker-Child	DCF shall visit at least 85% of all in-home family	Not Pre-
Visitation (In-Home)	cases at least twice a month, except for probate,	Certified
	interstate or voluntary cases.	
	Definitions and Clarifications:	
	Twice monthly visitation must be documented	
	with each active child participant in the case.	
	Visitation occurring in the home, school or other	
	community setting will be considered for Outcome	
	Measure 17.	
		l .

Outcome Measure	Statement of Outcome	Status
OM 20: Discharge	At least 85.0% of all children age 18 or older shall	Pre-Certified
Measures	have achieved one or more of the following prior to	
	discharge from DCF custody: (a) Graduation from	
	High School; (b) Acquisition of GED; (c)	
	Enrollment in or completion of college or other post	
	secondary training program full-time; (d)	
	Enrollment in college or other post secondary	
	training program part-time with part-time	
	employment; (e) Full-time employment; (f)	
	Enlistment full-time member of the military.	
OM 21: Discharge of	DCF shall submit a written discharge plan to	Pre-Certified
Mentally Ill or	either/or DMHAS or DDS for all children who are	
Developmentally	mentally ill or developmentally delayed and require	
Disabled Youth	adult services."	
OM22: Multi-	At least 85% of the children entering the custody of	Pre-Certified
disciplinary Exams	DCF for the first time shall have an MDE conducted	
	within 30 days of placement."	

### **Pre-Certification Next Steps**

In discussion with the parties it was determined that prior to proceeding with additional statistically valid methodologies outlined in the Revised Exit Plan for the remaining outcome measures, the Court Monitor would establish the need for such intensive and resource heavy focused review efforts/evaluation, with proposals for conducting reviews of the remaining outcome measures to be shared with the parties for consideration and approval.

This work has been completed and the Court Monitor is conducting additional reviews. Future reports will update both completed reviews and reviews in progress.

### Review of Outcome Measure 3 and Outcome Measure 15 for the Third Quarter 2013

Statewide, the Third Quarter 2013 result for Outcome Measure 3 (OM3) - Case Plans, is 65.5%. This is an improvement compared to the prior quarter's result of 63.0% and represents 36 of the 55 case plans achieving the score of "Appropriate Case Plan"; the highest performance achieved to date on a statewide basis in our blind case review process. Region III achieved the highest regional performance with 90.0%; Region IV continues to struggle with a rate of 46.2%.

Danbury, Middletown, New Haven, Stamford and Willimantic all achieved the measure during the quarter at 100.0%. Norwalk, by contrast, failed to pass its case resulting in 0.0% compliance.

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

Who	t is the social worker's	s amos office	Ove	erall Score for OM3	
	nment?	s area office	Appropriate Case Plan	Not an Appropriate Case Plan	Total
	Bridgeport	Count	3	2	5
	Bridgeport	%	60.0%	40.0%	100.0%
	Norwalk	Count	0	1	1
I	1101 Walk	%	0.0%	100.0%	100.0%
	Stamford	Count	1	0	1
		%	100.0%	0.0%	100.0%
	Region I		57.1%	42.9%	100.0%
	Milford	Count	2	2	4
П	Willion	%	50.0%	50.0%	100.0%
**	New Haven	Count	5	0	5
		%	100.0%	0.0%	100.0%
	Region II		77.8%	22.2%	100.0%
	Middletown	Count	2	0	2
	Wilduictown	%	100.0%	0.0%	100.0%
Ш	Norwich	Count	4	1	5
111	1401 WICH	%	80.0%	20.0%	100.0%
	Willimantic	Count	3	0	3
		%	100.0%	0.0%	100.0%
	Region III		90.0%	10.0%	100.0%
	Hartford	Count	2	6	8
IV	Hai tivi u	%	25.0%	75.0%	100.0%
1,4	Manchester	Count	4	1	5
		%	80.0%	20.0%	100.0%
	Region IV		46.2%	53.8%	100.0%
	Danbury	Count	2	0	2
	Danbury	%	100.0%	0.0%	100.0%
V	Torrington	Count	1	2	3
V	Torrington	%	33.3%	66.7%	100.0%
	Watanham	Count	3	1	4
	Waterbury	%	75.0%	25.0%	100.0%
	Region V		66.7%	33.3%	100.0%
	Maridan	Count	1	1	2
VI	Meriden	%	50.0%	50.0%	100.0%
V I	Now Duitain	Count	3	2	5
	New Britain	%	60.0%	40.0%	100.0%
	Region VI		57.1%	42.9%	100.0%
		Count	36	19	55
	<b>Total State</b>		65.4%	34.6%	100.0%

Two of the cases were identified as having issues with case planning efforts that were not documented as accommodating of the family's primary language. One indicated a need for translation of the case plan with no subsequent documentation of that being done, and a second did not indicate that interpreter services were provided at the ACR for a family with a language preference other than English.

Two (3.6%) of the case plans were still not approved at the point our reviewers finalizing our review process, in addition, six case plans were delayed in approval past 25 days of the ACR or family conference. We note that in no case was the lack of approval the only reason that a case plan was deemed "not appropriate"; additional concerns were noted regarding the quality of case planning in all that did not achieve the measure. This issue of delayed approvals continues to be a concern to this office as we cannot underscore the importance of timely sharing of accurate and clear assessments and expectations with the case participants by utilizing the case plans. While there has been an overall improvement in case planning efforts over the last few years, there remains a sizable number of cases reviewed where timely and effective case planning is lacking.

Statewide scores are reflected at the end of the table for ease of reference. This quarter, individual regions and individual offices fluctuated in areas of strength within various elements of case planning. In this quarter three individual domain areas (Reason for Involvement, Identifying Information and Planning for Permanency) were above the ninety percentile range for compliance. Regional performance continues to be variable. Twenty four case plans achieved the rating of "Appropriate" on their own merit via ranking optimal or very good across all domains, being approved timely and with appropriate accommodations for the primary or preferred language of the client. Twelve additional case plans were assessed as "Appropriate" upon designation of an override by the Court Monitor. This designation allowed for deficits within the case planning that were remedied by actions or facts documented elsewhere in the case record.

Our Office continues to see evidence of growth in case planning efforts, with renewed training and additional focus to basics for those who are lagging behind their counterparts in the automated data reporting that is now becoming available as a tool for the management teams.

Outcome Measure 3 Third Quarter 2013 Domain Case Summaries by Area Office with Percent Totals Displayed by Area Office and Region

What is the soc worker's area office assignme		What is the type of case assignment noted in LINK?	Reason for DCF Involvement	Identifying Information	Engagement of Child and Family (formerly Strengths, Needs and Other Issues)	Present Situation and Assessment to Date of Review	Determining the Goals/ Objectives	Progress	Action Steps to Achieving Goals Identified for the Upcoming Six Month Period	Planning for Permanency	Overall Score for OM3
	1	Voluntary Services CIP	Optimal	Optimal	Very Good	Optimal	Optimal	Optimal	Optimal	Optimal	Appropriate Case Plan
	2	CPS CIP	Very Good	Very Good	Very Good	Marginal	Optimal	Very Good	Very Good	Very Good	<mark>Appropriate</mark> Case Plan
Bridgeport	3	CPS In-Home Family	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Very Good	Very Good	Not an Appropriate Case Plan
	4	CPS CIP	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan
	5	CPS CIP	Very Good	Optimal	Very Good	Marginal	Marginal	Very Good	Marginal	Optimal	Not an Appropriate Case Plan
	Ar	ea Office %	100.0%	100.0%	60.0%	60.0%	60.0%	100.0%	80.0%	100.0%	60.0%
Nouvelly/	1	CPS In-Home Family	Very Good	Marginal	Marginal	Marginal	Marginal	Very Good	Very Good	Marginal	Not an Appropriate Case Plan
Norwalk/ Stamford	1	CPS CIP	Very Good	Optimal	Very Good	Very Good	Optimal	Marginal	Very Good	Optimal	Appropriate Case Plan
	Ar	ea Office %	100.0%	50.0%	50.0%	50.0%	50.0%	50.0%	100.0%	50.0%	50.0%
	Re	egion I %	100.0%	85.7%	57.1%	57.1%	57.1%	85.7%	85.7%	85.7%	57.1%

What is the soc worker's area office assignme		What is the type of case assignment noted in LINK?	Reason for DCF Involvement	Identifying Information	Engagement of Child and Family (formerly Strengths, Needs and Other Issues)	Present Situation and Assessment to Date of Review	Determining the Goals/ Objectives	Progress	Action Steps to Achieving Goals Identified for the Upcoming Six Month Period	Planning for Permanency	Overall Score for OM3
	1	CPS CIP	Marginal	Very Good	Marginal	Marginal	Very Good	Marginal	Very Good	Very Good	Not an Appropriate Case Plan
Milford	2	CPS CIP	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan
Millord	3	CPS In-Home Family	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan
	4	CPS CIP	Optimal	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan
	Are	ea Office %	75.0%	100.0%	75.0%	50.0%	100.0%	75.0%	100.0%	100.0%	50.0%
	1	CPS CIP	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan
	2	CPS In-Home Family	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan
New Haven	3	CPS CIP	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan
		CPS In-Home Family	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	<mark>Appropriate</mark> Case Plan
	5	CPS CIP	Optimal	Very Good	Very Good	Very Good	Optimal	Optimal	Very Good	Optimal	Appropriate Case Plan
	Are	ea Office %	100.0%	100.0%	100.0%	100.0%	80.0%	100.0%	100.0%	100.0%	100.0%
	Re	gion II %	88.9%	100.0%	88.9%	77.8%	88.9%	88.9%	100.0%	100.0%	77.8%

What is the socia worker's area office assignmen		What is the type of case assignment noted in LINK?	Reason for DCF Involvement	Identifying Information	Engagement of Child and Family (formerly Strengths, Needs and Other Issues)	Present Situation and Assessment to Date of Review	Determining the Goals/ Objectives	Progress	Action Steps to Achieving Goals Identified for the Upcoming Six Month Period	Planning for Permanency	Overall Score for OM3
Middletown	1	CPS CIP	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan
Middletown 2		CPS In-Home Family	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Optimal	Appropriate Case Plan
	Are	ea Office %	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	50.0%	100.0%	100.0%
	1	CPS CIP	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Marginal	Very Good	Appropriate Case Plan
	2	CPS CIP	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Appropriate Case Plan
Norwich	3	CPS In-Home Family	Optimal	Very Good	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Not an Appropriate Case Plan
	4	CPS CIP	Optimal	Very Good	Very Good	Very Good	Optimal	Very Good	Optimal	Optimal	Appropriate Case Plan
	5	CPS CIP	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan
	Are	ea Office %	100.0%	100.0%	100.0%	80.0%	80.0%	80.0%	60.0%	100.0%	80.0%
	1	CPS CIP	Optimal	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan
Willimantic	2	CPS CIP	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan
willmantic	3	CPS In-Home Family	Optimal	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Optimal	Appropriate Case Plan
	Are	ea Office %	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Regi	on I	II %	100.0%	100.0%	100.0%	90.0%	80.0%	90.0%	70.0%	100.0%	90.0%

What is the soci worker's area office assignmen		What is the type of case assignment noted in LINK?	Reason for DCF Involvement	Identifying Information	Engagement of Child and Family (formerly Strengths, Needs and Other Issues)	Present Situation and Assessment to Date of Review	Determining the Goals/ Objectives	Progress	Action Steps to Achieving Goals Identified for the Upcoming Six Month Period	Planning for Permanency	Overall Score for OM3
	1	CPS CIP	Marginal	Very Good	Very Good	Marginal	Very Good	Marginal	Marginal	Very Good	Not an Appropriate Case Plan
	2	CPS In-Home Family	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Marginal	Marginal	Not an Appropriate Case Plan
	3	CPS CIP	Optimal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Optimal	<mark>Appropriate</mark> Case Plan
Hartford	4	CPS In-Home Family	Very Good	Marginal	Marginal	Marginal	Very Good	Very Good	Marginal	Very Good	Not an Appropriate Case Plan
	5	Voluntary Services CIP	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan
	6	CPS CIP	Very Good	Marginal	Marginal	Marginal	Marginal	Marginal	Poor	Very Good	Not an Appropriate Case Plan
	7	CPS CIP	Optimal	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan
	8	CPS CIP	Optimal	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Optimal	Not an Appropriate Case Plan
	Are	ea Office %	87.5%	75.0%	50.0%	25.0%	75.0%	62.5%	50.0%	87.5%	25.0%
	1	Voluntary Services CIP	Optimal	Very Good	Very Good	Very Good	Optimal	Very Good	Optimal	Optimal	Appropriate Case Plan
	2	CPS CIP	Very Good	Very Good	Marginal	Very Good	Optimal	Very Good	Very Good	Very Good	Not an Appropriate Case Plan
Manchester 3 4	Voluntary Services CIP	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan	
	CPS CIP	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	5	CPS In-Home Family	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan
		ea Office %	100.0%	100.0%	80.0%	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%
Reg	ion l	!V %	92.3%	84.6%	61.5%	53.9%	84.6%	76.9%	69.2%	92.3%	46.2%

What is the soc worker's area office assignme		What is the type of case assignment noted in LINK?	Reason for DCF Involvement	Identifying Information	Engagement of Child and Family (formerly Strengths, Needs and Other Issues)	Present Situation and Assessment to Date of Review	Determining the Goals/ Objectives	Progress	Action Steps to Achieving Goals Identified for the Upcoming Six Month Period	Planning for Permanency	Overall Score for OM3
	1	CPS In-Home Family	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan
Danbury	2	CPS CIP	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan
	Are	ea Office %	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	1	CPS CIP	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	<mark>Appropriate</mark> Case Plan
Transfer de la	2	CPS In-Home Family Case	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Very Good	Very Good	Not an Appropriate Case Plan
Torrington	3	CPS CIP	Optimal	Very Good	Very Good	Marginal	Marginal	Very Good	Marginal	Very Good	Not an Appropriate Case Plan
	Are	ea Office %	100.0%	100.0%	66.7%	0.0%	33.3%	100.0%	66.7%	100.0%	33.3%
	1	Voluntary Services In- Home Family	Very Good	Very Good	Marginal	Marginal	Very Good	Marginal	Marginal	Very Good	Not an Appropriate Case Plan
	2	CPS CIP	Optimal	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	<mark>Appropriate</mark> Case Plan
Waterbury	Waterbury 3	CPS CIP	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan
	4	CPS CIP	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Optimal	Appropriate Case Plan
	Are	ea Office %	100.0%	100.0%	75.0%	75.0%	75.0%	75.0%	75.0%	100.0%	75.0%
		Region V %	100.0%	100.0%	77.8%	55.6%	66.7%	88.9%	77.8%	100.0%	66.7%

What is the social worker area office assignment?	's	What is the type of case assignment noted in LINK?	Reason for DCF Involvement	Identifying Information	Engagement of Child and Family (formerly Strengths, Needs and Other Issues)	Present Situation and Assessment to Date of Review	Determining the Goals/ Objectives	Progress	Action Steps to Achieving Goals Identified for the Upcoming Six Month Period	Planning for Permanency	Overall Score for OM3
	1	CPS CIP	Optimal	Very Good	Marginal	Very Good	Very Good	Very Good	Marginal	Marginal	Not an Appropriate Case Plan
Meriden	2	CPS In-Home Family	Very Good	Optimal	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Appropriate Case Plan
	Are	ea Office %	100.0%	100.0%	50.0%	100.0%	100.0%	50.0%	50.0%	50.0%	50.0%
	1	CPS In-Home Family	Optimal	Optimal	Marginal	Optimal	Very Good	Optimal	Very Good	Very Good	<mark>Appropriate</mark> Case Plan
	2	CPS CIP	Optimal	Optimal	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Appropriate Case Plan
New Britain	3	CPS In-Home Family	Marginal	Very Good	Marginal	Marginal	Marginal	Marginal	Very Good	Marginal	Not an Appropriate Case Plan
	4	CPS CIP	Optimal	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan
	5	CPS CIP	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan
	Are	ea Office %	80.0%	100.0%	40.0%	60.0%	80.0%	80.0%	100.0%	80.0%	60.0%
Re	gion	VI %	85.7%	100.0%	42.8%	71.4%	85.7%	71.4%	85.7%	71.4%	57.1%
Sta	itew	ide %	94.5%	94.5%	72.7%	67.3%	78.2%	83.6%	80.0%	92.7%	65.4%

Overrides are designated by highlighted, italics font. A Court Monitor's Override allows for overall appropriate score due to information presented in the case documentation or in conversation with the area office related to case planning that may be marginal within the identified area of the case plan document, but can be demonstrated to have been achieved via other avenues.

### **Outcome Measure 15**

Outcome Measure 15 requires that all needs be met within the case for 80% of the children and families served. This was achieved at a rate of 67.3% for the Third Quarter 2013, down from the rate of 74.1% within the sample last quarter. This translates to 37 of the 55 cases reviewed being assessed as having all of the priority needs of the children and families identified during the period under review met timely and adequately. Twelve of these designations were granted via Court Monitor override. Several offices met or exceeded this mark during the quarter: Bridgeport, Danbury, Manchester, New Haven, Norwich and Willimantic all achieved 80.0% or greater. The highest performing region was Region III with 90.0%, which was the only region to meet or surpass the requirement for the measure this quarter.

Crosstabulation 2: Social worker's area office assignment? \* Overall Score for Outcome Measure 15

			Overall Score for Outcome Measure 1:		
Wha	t is the social worker's	area office assignment?	Needs Met	Needs Not Met	Total
	Bridgeport	Count	4	1	5
	Driugeport	%	80.0%	20.0%	100.0%
ī	Norwalk	Count	0	1	1
1	Norwalk	%	0.0%	100.0%	100.0%
	Stamford	Count	0	1	1
	Stainford	%	0.0%	100.0%	100.0%
	Region I		57.1%	42.9%	100.0%
	Milford	Count	3	1	4
	Milloru	%	75.0%	25.0%	100.0%
	Name II aman	Count	4	1	5
	New Haven	%	80.0%	20.0%	100.0%
	Region II		77.8%	22.2%	100.0%
	MC111.4	Count	1	1	2
	Middletown	%	50.0%	50.0%	100.0%
111	NT	Count	5	0	5
III	Norwich	%	100.0%	0.0%	100.0%
	**************************************	Count	3	0	3
	Willimantic	%	100.0%	0.0%	100.0%
	Region III		90.0%	10.0%	100.0%
	TT (C. )	Count	3	5	8
TX 7	Hartford	%	37.5%	62.5%	100.0%
IV	3.5	Count	4	1	5
	Manchester	%	80.0%	20.0%	100.0%
	Region IV		53.8%	46.2%	100.0%
		Count	2	0	2
	Danbury	%	100.0%	0.0%	100.0%
<b>X</b> 7	- ·	Count	1	2	3
V	Torrington	%	33.3%	66.7%	100.0%
	***	Count	3	1	4
	Waterbury	%	75.0%	25.0%	100.0%
	Region VI		66.7%	33.3%	100.0%
		Count	1	1	2
X 7T	Meriden	%	50.0%	50.0%	100.0%
VI	N. D. '.	Count	3	2	5
	New Britain	%	60.0%	40.0%	100.0%
	Region V		66.7%	33.3%	100.0%
		Count	37	18	55
	Total	%	67.3%	32.7%	100.0%
		1	7 0	, -	

# Outcome Measure 15 Third Quarter 2013 Domain Case Summaries by Area Office with Percent Totals Displayed by Area Office and Region

DCF Reg	ion	What is the social worker's area office assignment?	Risk: In-Home	Risk: Child In Placement	Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months	: DCF Case ion to Achievery Goal Duri	Permanency: DCF Case Mgmt- Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months	Permanency: DCF Case Mgmt - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months	Well-Being: Medical Needs	Well-Being: Dental Needs	Well-Being: Mental Health, Behavioral and Substance Abuse Services	Well-Being: Child's Current Placement	Well-Being: Education	Overall Score for Outcome Measure 15
	1	Bridgeport	N/A to Case	Optimal	Optimal	Very Good	Optimal	Very Good	Optimal	Optimal	Optimal	Optimal	Optimal	Needs Met
	2	Bridgeport	N/A to Case	Optimal	Optimal	Optimal	Optimal	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Met
	3	Bridgeport	Marginal	N/A to Case	N/A to Case	Optimal	N/A to Case	Marginal	Very Good	Very Good	Very Good	N/A to Case	Very Good	Needs Not Met
ъ .	4	Bridgeport	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Needs Met
Region I	5	Bridgeport	Very Good	Optimal	Optimal	Optimal	Optimal	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Met
	Bri	dgeport %	50.0%	100.0%	100.0%	100.0%	100.0%	80.0%	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%
	6	Norwalk	Marginal	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Marginal	Very Good	Very Good	N/A to Case	N/A to Case	Needs Not Met
	7	Stamford	N/A to Case	Marginal	Very Good	Very Good	Very Good	Very Good	Optimal	Optimal	Marginal	Marginal	Very Good	Needs Not Met
	N	orwalk/Stamford %	0.0%	0.0%	100.0%	100.0%	100.0%	50.0%	50.0%	100.0%	50.0%	0.0%	100.0%	0.0%
		Region I %	33.3%	80.0%	100.0%	100.0%	100.0%	71.4%	85.7%	100.0%	85.7%	80.0%	100.0%	57.1%

DCF R	egion	What is the social worker's area office assignment?	Risk: In-Home	Risk: Child In Placement	Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months		Permanency: DCF Case Mgmt - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months	Permanency: DCF Case Mgmt - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months	Well-Being: Medical Needs	Well-Being: Dental Needs	Well-Being: Mental Health, Behavioral and Substance Abuse Services	Well-Being: Child's Current Placement	Well-Being: Education	Overall Score for Outcome Measure 15
	1	Milford	N/A to Case	Very Good	Very Good	Optimal	Very Good	Marginal	Very Good	Optimal	Marginal	Very Good	Very Good	Needs Not Met
	2	Milford	Very Good	Optimal	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	N/A to Case	Needs Met
	3	Milford	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Very Good	Marginal	Marginal	N/A to Case	Marginal	Needs Met
	4	Milford	Very Good	Optimal	Optimal	Optimal	Optimal	Very Good	Optimal	Optimal	Optimal	Optimal	Very Good	Needs Met
	M	lilford %	100%	100.0%	100.0%	100.0%	100.0%	75.0%	100.0%	75.0%	50.0%	100.0%	66.7%	75.0%
Region II	5	New Haven	N/A to Case	Very Good	Very Good	Optimal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Needs Met
	6	New Haven	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Very Good	Very Good	Very Good	N/A to Case	Very Good	Needs Met
	7	New Haven	N/A to Case	Very Good	Very Good	Optimal	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Optimal	Needs Met
	8	New Haven	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Marginal	Marginal	Marginal	N/A to Case	Marginal	Needs Not Met
	9	New Haven	N/A to Case	Very Good	Optimal	Optimal	Optimal	Very Good	Optimal	Optimal	Optimal	Optimal	Optimal	Needs Met
	N: %	ew Haven	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%	80.0%	80.0%	80.0%	100.0%	80.0%	80.0%

Region		What is the social worker's area office assignment?	Risk: In-Home	Risk: Child In Placement	Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months	<b>—</b> •	Permanency: DCF Case Mgmt - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months	Permanency: DCF Case Mgmt - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months	Well-Being: Medical Needs	Well-Being: Dental Needs	Well-Being: Mental Health, Behavioral and Substance Abuse Services	Well-Being: Child's Current Placement	Well-Being: Education	Overall Score for Outcome Measure 15
	1	Middletown	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Optimal	Optimal	Very Good	N/A to Case	Very Good	Needs Not Met
	2	Middletown	N/A to Case	Very Good	Very Good	Optimal	Very Good	Marginal	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Met
	Mic	ldletown %	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%
	3	Norwich	N/A to Case	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Needs Met
	4	Norwich	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Very Good	Very Good	Very Good	N/A to Case	Very Good	Needs Met
	5	Norwich	N/A to Case	Very Good	Very Good	Optimal	Optimal	Very Good	Marginal	Optimal	Very Good	Optimal	Optimal	Needs Met
Region III	6	Norwich	N/A to Case	Very Good	Optimal	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	Optimal	Needs Met
	7	Norwich	N/A to Case	Very Good	Optimal	Optimal	Optimal	Optimal	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Met
	Noi	wich %	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	8	Willimantic	N/A to Case	Very Good	Very Good	Optimal	Optimal	Optimal	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Met
	9	Willimantic	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Optimal	Optimal	Very Good	N/A to Case	Very Good	Needs Met
	10	Willimantic	N/A to Case	Optimal	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Needs Met
	V	Villimantic %	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
		Region III %	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%	90.0%	100.0%	100.0%	100.0%	100.0%	90.0%

Region		What is the social worker's area office assignment?	Risk: In-Home	Risk: Child In Placement	Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months	Permanency: DCF Case Mgmt - Legal Action to Achieve the Permanency Goal During the Prior Six Months	Permanency: DCF Case Mgmt- Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months	Permanency: DCF Case Mgmt - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months	Well-Being: Medical Needs	Well-Being: Dental Needs	Well-Being: Mental Health, Behavioral and Substance Abuse Services	Well-Being: Child's Current Placement	Well-Being: Education	Overall Score for Outcome Measure 15
	1	Hartford	N/A to Case	Very Good	Very Good	Very Good	Very Good	Marginal	Marginal	Optimal	Very Good	Marginal	Very Good	Needs Not Met
	2	Hartford	Marginal	N/A to Case	N/A to Case	Marginal	N/A to Case	Marginal	Very Good	Very Good	Marginal	N/A to Case	Very Good	Needs Not Met
	3	Hartford	N/A to Case	Marginal	Very Good	Very Good	Very Good	Marginal	Optimal	Optimal	Marginal	Very Good	Marginal	Needs Not Met
	4	Hartford	Marginal	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Very Good	Very Good	Poor	N/A to Case	Marginal	Needs Not Met
	5	Hartford	N/A to Case	Very Good	Very Good	Optimal	Very Good	Marginal	Optimal	Very Good	Very Good	Marginal	Optimal	Needs Not Met
	6	Hartford	N/A to Case	Very Good	Very Good	Optimal	Optimal	Very Good	Optimal	Very Good	Very Good	Very Good	N/A to Case	Needs Met
	7	Hartford	N/A to Case	Very Good	Optimal	Optimal	Optimal	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Needs Met
Region IV	8	Hartford	N/A to Case	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Needs Met
	Har	rtford %	0.0%	83.3%	100.0%	87.5%	100.0%	37.5%	87.5%	100.0%	75.0%	66.7%	71.4%	37.5%
	9	Manchester	N/A to Case	Very Good	Optimal	Optimal	Optimal	Optimal	Very Good	Optimal	Marginal	Very Good	Very Good	Needs Met
	10	Manchester	N/A to Case	Very Good	Very Good	Optimal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Needs Not Met
	11	Manchester	N/A to Case	Optimal	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Optimal	Optimal	Optimal	Needs Met
	12	Manchester	N/A to Case	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Marginal	Very Good	Marginal	Marginal	Needs Met
	13	Manchester	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Marginal	Marginal	Very Good	Marginal	N/A to Case	Very Good	Needs Met
	Ma	nchester %	100.0%	100.0%	100.0%	100.0%	100.0%	60.0%	80.0%	80.0%	60.0%	80.0%	80.0%	80.0%
		a Office %	33.3%	90.0%	100.0%	92.3%	100.0%	46.2%	84.6%	92.3%	61.5%	70.0%	75.0%	53.9%

Region		What is the social worker's area office assignment?	Risk: In-Home	Risk: Child In Placement	Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months	Permanency: DCF Case Mgmt - Legal Action to Achieve the Permanency Goal During the Prior Six Months	Permanency: DCF Case Mgmt - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months		Well-Being: Medical Needs	Well-Being: Dental Needs	Well-Being: Mental Health, Behavioral and Substance Abuse Services	Well-Being: Child's Current Placement	Well-Being: Education	Overall Score for Outcome Measure 15
	1	Danbury	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Very Good	Optimal	Very Good	N/A to Case	Optimal	Needs Met
	2	Danbury	N/A to Case	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Needs Met
	Do	anbury %	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	3	Torrington	Very Good	Optimal	Very Good	Optimal	Optimal	Very Good	Optimal	Very Good	Marginal	Very Good	Very Good	Needs Met
	4	Torrington	N/A to Case	Very Good	Optimal	Optimal	Very Good	Marginal	Very Good	Optimal	Very Good	Very Good	Very Good	Needs Not Met
n .	5	Torrington	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Marginal	Poor	Marginal	N/A to Case	Poor	Needs Not Met
Region V	To	orrington %	100.0%	100.0%	100.0%	100.0%	100.0%	33.3%	66.7%	66.7%	33.3%	100.0%	66.7%	33.3%
•	6	Waterbury	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Optimal	Optimal	Marginal	N/A to Case	Very Good	Needs Met
	7	Waterbury	N/A to Case	Optimal	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Needs Met
	8	Waterbury	Very Good	Very Good	Optimal	Optimal	Optimal	Very Good	Optimal	Optimal	Very Good	Very Good	N/A to Case	Needs Met
	9	Waterbury	N/A to Case	Optimal	Very Good	Very Good	Optimal	Marginal	Optimal	Poor	Very Good	Optimal	Optimal	Needs Not Met
	W	aterbury %	100.0%	100.0%	100.0%	100.0%	100.0%	75.0%	100.0%	75.0%	75.0%	100.0%	100.0%	75.0%
	Re	gion V %	100.0%	100.0%	100.0%	100.0%	100.0%	66.7%	88.9%	77.8%	66.7%	100.0%	87.5%	66.7%

Region		What is the social worker's area office assignment?	Risk: In-Home	Risk: Child In Placement	Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months	Permanency: DCF Case Mgmt- Legal Action to Achieve the Permanency Goal During the Prior Six Months	Permanency: DCF Case Mgmt-Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months	Permanency: DCF Case Mgmt - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months	Well-Being: Medical Needs	Well-Being: Dental Needs	Well-Being: Mental Health, Behavioral and Substance Abuse Services	Well-Being: Child's Current Placement	Well-Being: Education	Overall Score for Outcome Measure 15
	1	Meriden	N/A to Case	Marginal	Marginal	Very Good	Very Good	Marginal	Very Good	Very Good	Poor	Marginal	Marginal	Needs Not Met
	2	Meriden	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Optimal	Optimal	Very Good	N/A to Case	Very Good	Needs Met
	M	eriden %	100.0%	0.0%	0.0%	100.0%	100.0%	50.0%	100.0%	100.0%	50.0%	0.0%	50.0%	50.0%
	3	New Britain	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Very Good	Optimal	Very Good	N/A to Case	Very Good	Needs Met
Region	4	New Britain	Very Good	Very Good	Very Good	Optimal	Optimal	Optimal	Optimal	Optimal	Very Good	Marginal	Very Good	Needs Not Met
VI	5	New Britain	Marginal	N/A to Case	N/A to Case	Poor	N/A to Case	Marginal	Poor	Poor	Marginal	N/A to Case	Marginal	Needs Not Met
	6	New Britain	N/A to Case	Very Good	Optimal	Optimal	Optimal	Very Good	Very Good	Very Good	Optimal	Optimal	Optimal	Needs Met
	7	New Britain	N/A to Case	Very Good	Very Good	Optimal	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Met
	Ne	ew Britain %	66.7%	100.0%	100.0%	80.0%	100.0%	80.0%	80.0%	80.0%	80.0%	66.7%	80.0%	60.0%
		Region VI %	75.0%	75.0%	75.0%	85.7%	100.0%	71.4%	85.7%	85.7%	71.4%	50.0%	71.4%	57.1%
Third Qua	ırter	Statewide %	78.3%	92.1%	97.4%	96.4%	100.0%	67.3%	87.3%	89.1%	74.5%	84.2%	84.3%	67.3%

Highlight italics indicates Court Monitor's application of the Override exception to achieve "met" status in one or more of the cases within the area office.

There were multiple needs noted in this quarter among the 55 cases. The number did rise slightly from that reported in our prior quarter. In all 215 clearly identifiable unmet needs in the prior six month period rose to the level of what reviewers felt impactful on the health, safety or well being of the children and families within the sample. The most common barrier identified is again noted as the client refusal, this accounted for just under half of the documented barriers at 49.8%. The remaining genesis for unmet need is related to internal case management (i.e. delays in referrals, lack of service identification) and external systems issues (i.e. provider issues, communication issues between DCF and providers, wait lists).

**Table 1: Unmet Needs** 

Unmet Need	Barrier	Frequency
Adoption Supports (PPSP)	No Service Identified to Meet this Need	1
ARG Consultation	Delay in Referral	5
ARG Consultation	No Consultation Documented - UTD barrier	1
Day Treatment/Partial	Client Referred refused service or was subsequently discharge for	3
Hospitalization Program - Parent	non-compliance	
DCF Foster Home Placement	Client Refused Service	1
DCF Foster Home Placement	Delay in Referral	1
Dental or Orthodontic Services	Client Refused Service	3
Dental Screening or Evaluation	Client Refused Service	6
Dental Screening or Evaluation	Delay in Referral	3
Dental Screening or Evaluation	Other: Awaiting Confirmation of Dates of Service in School Based Clinic	1
<b>Dental Screening or Evaluation</b>	Working with older adolescent to schedule appointment as part of independent living skills.	1
Developmental Screening or Evaluation	Client Refused Service	1
Developmental Screening or Evaluation	Provider Issue - Untimely provision of service or gap in service related to staffing or lack of follow through on the part of the provider	1
Domestic Violence Prevention Program	No Service Identified to Meet this Need	1
Domestic Violence Services - Perpetrator	Client Refused Service or was subsequently discharged for non- compliance	2
Domestic Violence Services -	No Service Identified to Meet this Need	1
Perpetrator	No Service Identified to Weet this Need	1
Domestic Violence Services - Victims	Client Refused Service	2
Domestic Violence Services - Victims  Domestic Violence Services - Victims	No Service Identified to Meet this Need	2
Domestic Violence Services - Victims  Domestic Violence Services - Victims	Service Deferred Pending Completion of Another	1
Education: IEP Programming	Delay in Referral	1
Education: IEP Programming	Provider Issue - Untimely provision of service or gap in service related to staffing or lack of follow through on the part of the provider (in this case school)	1
<b>Educational Screening or Evaluation</b>	Client Referred refused service or was subsequently discharge for non-compliance	3
Educational Screening or Evaluation	Lack of Communication between DCF and provider	2
<b>Educational Screening or Evaluation</b>	Delay in Referral	1
Emergency Mobile Psychiatric Services	Client Refused Services	1
Extended Day Treatment	Referred Service is Unwilling to Engage Client	1

Unmet Need	Barrier	Frequency
Family or Marital Counseling	Client refused service or was subsequently discharged for non-	2
v	compliance	
Family or Marital Counseling	Delay in Referral	1
Family or Marital Counseling	Provider Issue - Untimely provision of service or gap in service	1
	related to staffing or lack of follow through on the part of the	
	provider	
Family or Marital Counseling	Service Delayed Pending Completion of Another	1
Family Preservation Services	Client refused service or was subsequently discharged for non-	1
- manage - a casa , manage a casa , a casa	compliance	_
Family Preservation Services	Wait List	1
Family Ties Programming	Delay in Referral	1
Flex Funds	Lack of Communication between DCF and provider	1
Foster Care Support	Client Refused Services	1
Foster Parent Training	Provider Issue - Untimely provision of service or gap in service	1
roster ratent framing	related to staffing or lack of follow through on the part of the	1
	provider	
Group Home	Client refused service or was subsequently discharged for non-	1
Group Home	compliance	1
Group Home	No Slot Available	1
Group Home	Service Does not exist in the community	1
Group Home	Youth became incarcerated	1
Head Start	Client refused service or was subsequently discharged for non-	1
neau Start	compliance	1
Health/Medical - Medication	Client Referred refused service or was subsequently discharge for	4
	non-compliance	4
Management (Child) Health/Medical - Medication	Client Referred refused service or was subsequently discharge for	1
Management (Parent)	non-compliance	1
Health/Medical - Other Medical	Client Refused	1
Intervention: Referral for specialists	Cheffi Refused	1
(plastic surgeon)		
Health/Medical - Other Medical	Delay in referral	1
Intervention: Referral for specialists	Delay iii lelellal	1
(gynecological exam)		
Health/Medical - Other Medical	Delay in referral	1
Intervention: Referral for specialists	Belay in reterial	1
(MRI)		
Health/Medical - Other Medical	No Service Identified to Meet this Need	1
Intervention: Referral for specialists	Two Service Identified to Weet this Need	1
(weight evaluation)		
Health/Medical Screening or	Client Referred refused service or was subsequently discharge for	5
Evaluation	non-compliance	3
Health/Medical Screening or	Delay in Referral	3
Evaluation	Boldy in Relevant	3
Health/Medical Screening or	Other: Documentation issues date of appointment not available (1),	2
Evaluation	mother delayed in securing appointment - states appointment has	_
	been set one month post PUR (1)	
Health/Medical Screening or	No Service Identified to Meet this Need	1
Evaluation	The second secon	
Health/Medical Screening or	Provider Issue - untimely provision of services or gaps in service	1
Evaluation	related to staffing, lack of follow through, etc.	1
Housing Assistance (Section 8)	No Slots Available	1
Housing Assistance (Section 8)	Referred Service is Unwilling to engage client	1
Housing Assistance (Section 8)	Wait List	1
mousing Assistance (Section o)	Walt List	1

Unmet Need	Barrier	Frequency
Individual Counseling - Child	Client Referred but refused service or was subsequently discharged	8
	for non-compliance	_
Individual Counseling - Child	Provider Issue - untimely provision of services or gaps in service	2
	related to staffing, lack of follow through, etc.	
Individual Counseling - Child	Wait List	2
Individual Counseling - Parent	Client Referred but refused service or was subsequently discharged	13
Individual Counseling Turent	for non-compliance	13
Individual Counseling - Parent	No Service Identified to Meet this Need	1
In-Home Parent Education and	Client Referred but refused service or was subsequently discharged	1
Support	for non-compliance	1
In-Home Parent Education and	Placed on Wait List	1
Support	Traced on wait List	1
In-Home Parent Education and	Service Deferred Pending Completion of Another	1
Support	Service Deterred rending completion of Another	1
In-Home Treatment	Client Referred but refused service or was subsequently discharged	2
in-mome freatment	for non-compliance	2
In Home Tweetmert	Delay in Referral	1
In-Home Treatment In-Home Treatment	Wait List	
		1
Job Coaching/Placement	Other - Unclear if client meets criteria for this service, more	1
T.I.C. II. (DI	assessment needed	-
Job Coaching/Placement	Service Deferred pending completion of another	1
Job Coaching/Placement	Wait List	1
Juvenile/Criminal Diversion Program	Client Refused Services	1
Life Skills Training	Client Referred but refused service or was subsequently discharged	1
	for non-compliance	
Life Skills Training	Delay in Referral	1
Life Skills Training	Service Deferred Pending Completion of Another	1
Matching/Placement Processing	ICO referral is planned to review step father, but he is in the process	1
(includes ICO)	of relocating to another state so process cannot begin until he has	
	made that move.	
Matching/Placement Processing	Provider Issues - untimely provision of services related to staffing,	1
(includes ICO)	lack of follow through, etc	
Mental Health Screening or	Client Refused Services	4
Evaluation - Parent		
Mental Health Screening or	No Service Identified to Meet this Need	1
Evaluation - Parent		
Mentoring	Delay in Referral	1
Mentoring	Provider Issues - untimely provision of services related to staffing,	1
8	lack of follow through, etc	
Mentoring	Wait List	1
Other Mental Health Service - Child:	Delay in Referral	1
Play Therapy		•
Other Mental Health Service -Child:	Wait List	1
Trauma Therapy		•
Other Mental Health Service Parent -	Client Referred refused service or was subsequently discharge for	1
Intensive Inpatient Program for Dual	non-compliance	1
Diagnosis Treatment		
Other OOH Service:	Approval Process	1
Advocacy/Assistance getting SSI	119910.111100000	1
Other State Agency Program (DMR,	Provider Issues - untimely provision of services related to staffing,	1
DMHAS, MSS)	lack of follow through, etc	1
Parenting Classes	Client Referred refused service or was subsequently discharge for	3
1 arenting Classes	non-compliance	3
Parenting Groups	Client Referred refused service or was subsequently discharge for	1
1 archung Groups	non-compliance	1
	non-compitance	

Unmet Need	Barrier	Frequency
Problem Sexual Behavior Therapy	Client Referred refused service or was subsequently discharge for	1
	non-compliance	
Psychiatric Evaluation - Child	Client Referred refused service or was subsequently discharged for	2
	non-compliance/missed appointments	
Psychiatric Evaluation - Child	Other: Lack of compliance by Foster Parent	1
Psychiatric Evaluation - Parent	Wait List	1
Psychological or Psychosocial	Client Referred refused service or was subsequently discharged for	1
Evaluation - Child	non-compliance/missed appointments	1
Psychological or Psychosocial	No Service Identified to Meet this Need	1
Evaluation - Child	Two betwee facilities to Meet this 1400s	1
Relative Foster Care	Client Referred refused service or was subsequently discharge for	1
Relative Poster Care	non-compliance	1
Residential Treatment Facility	Service Does not Exist in the Community	1
Shelter - Emergency Adult/Family	Client Referred refused service or was subsequently discharge for	1
Sheller - Emergency Addit/Family	non-compliance	1
Social Despectional Description	No Service Identified to Meet this Need	1
Social Recreational Programs		1
Substance Abuse Screening - Parent	Client Refused	7
Substance Abuse Screening - Parent	No Service Identified to Meet this Need	1
<b>Substance Abuse Treatment:</b>	Client Referred refused service	4
Drug/Alcohol Testing - Parent		
Substance Abuse Treatment:	Client Referred refused service or was subsequently discharge for	1
Inpatient - Child	non-compliance	
Substance Abuse Treatment:	Delay in Referral	1
Inpatient - Child		
Substance Abuse Treatment:	Insurance Issues	1
Inpatient - Child		
Substance Abuse Treatment:	Client Referred refused service or was subsequently discharge for	3
Inpatient - Parent	non-compliance	
Substance Abuse Treatment:	Client Referred refused service or was subsequently discharged for	1
Outpatient - Child	non-compliance/missed appointments	
Substance Abuse Treatment:	No Service Identified to Meet this Need	1
Outpatient - Child		
Substance Abuse Treatment:	Client Referred refused service or was subsequently discharged for	7
Outpatient - Parent	non-compliance/missed appointments	
Substance Abuse Treatment: Relapse	Client Referred refused service or was subsequently discharged for	1
Prevention - Child	non-compliance/missed appointments	1
Substance Abuse Treatment: Relapse	Wait List	1
Prevention - Parent	11 411 2101	1
Supervised Visitation	Client Referred refused service or was subsequently discharged for	2
Superviseu visitution	non-compliance/missed appointments	
Supportive Housing for Recovering	Client Refused	1
Families (SHRF)	Cheff Refused	1
SW/ Parent Visitation	Visitation/Contact Standard not Met	8
	Visitation/Contact Standard not Met  Visitation Standard not Met	6
SW/Child Visitation SW/Provider Contacts	Lack of communication was evident between DCF and the	
Sw/rrovider Contacts		11
	community provider(s) active in the case	
Therapeutic Foster Care	No Slots Available	1
		215

This quarter, the general engagement of families in case planning as narrated within the ACR, case planning and visitation documentation was consistent with the prior quarter's findings. A total of 72.7% of the cases showed very good or optimal engagement of families in the case planning process through documented discussions with the families and the Social Worker *throughout* the period under review.

Our reviewers reading of the ACR documentation, narratives and case plan feedback reflect that 86.5% of the cases did document a discussion (or in the case of in-home family cases the family meeting or case conference) of all (50.0%) or some (36.5%) of the needs that were identified as unmet in the just completed six-month planning cycle. The reviewers identified three cases (4.3%) where the planning process did not seem to address any of the needs that were unmet from the last planning cycle. In five of the cases, the reviewers indicated there were no "unmet needs" indicating that needs identified at the prior ACR were "fully achieved" or "no longer needed" and new needs were established for the period going forward, or the case was nearing closure. Three additional cases were excluded from these percentage calculations as the plan that was reviewed was the initial case plan.

Table 2: Were all needs and services unmet during the prior six month discussed at the ACR and, as appropriate, incorporated as action steps on the current case plan?

Needs " Unmet" Incorporated Into the Case Planning	Frequency	Valid Percent
Yes - All	26	50.0%
Yes - Partially	19	36.5%
No - None	2	3.9%
N/A - There were no Unmet Needs	5	9.6%
	52	100.0%
N/A - this is the initial plan	3	
Total	55	

In approaching needs assessment from a different perspective, reviewers were asked to look at the utilization of the SDM tools. In 22 of 30 cases (73.3%) in which SDM was conducted, a need was identified in the current SDM identical to that which was identified on the prior case plan assessment. (This would indicate and unmet objective/need for greater than 6 months for a family or individual.)

Though many needs were appropriately planned for via the objectives and action steps developed within the 55 case plans reviewed; in 40.0% of the sample it was the opinion of the Court Monitor's staff that there was at least one priority need evident from the review of the LINK documentation that was not incorporated into the newly developed case plan document.

To gain a sense of those areas that continue to be under assessed or overlooked the reviewers collect the data reflecting the needs unmet that are not carried forward. We identified 53 priority needs and the barriers related to each unmet need were identified. The majority are cited as "no service identified to meet this need" as the office had not yet identified a service category or provider to attend to the priority need, or had not yet put a label to the behaviors that were being demonstrated and documented. Though the area offices have made great improvements in this area of case planning and service delivery, there is still a need to focus on identification of clear objectives, progress, and action steps that identify the responsible parties. The domains that measure these areas in case planning are intertwined with the Outcome Measure 15 success, and

have been problematic for several area offices. Targeted training re-emphasizing these areas is underway as we draft this report.

Table 3: List of Know Priority Areas Not Incorporated as Unmet Needs in the Next Six Month's Case Plans and the identified barrier

Unmet Need	Barrier	Frequency
Adoption Supports (PPSP)	No Service Identified to Meet this Need	1
ARG Consultation	No Service Identified to Meet this Need	1
Day Treatment Partial Hospitalization Program	No Service Identified to Meet this Need	1
- Parent		
DCF Case Management/Support/Advocacy	DCF Action Steps Not Clear to address referral delays,	6
	visitation lapses noted at ACR or other meeting.	
Dental Screenings or Evaluations	No Service Identified to Meet this Need	5
Domestic Violence Services - Victims	No Service Identified to Meet this Need	2
Education: IEP Programming	No Service Identified to Meet this Need	1
Educational Screening of Evaluation	No Service Identified to Meet this Need	2
Family or Marital Counseling	No Service Identified to Meet this Need	1
Family Preservation Services	No Service Identified to Meet this Need	1
Flex Funds	No Service Identified to Meet this Need	1
Health/Medical Screening or Evaluations	No Service Identified to Meet this Need	6
In Home Parent Education	No Service Identified to Meet this Need	1
Individual Counseling - Child	No Service Identified to Meet this Need	2
Individual Counseling - Parent	No Service Identified to Meet this Need	1
In-Home Treatment	No Service Identified to Meet this Need	2
Job Coaching/Placement	No Service Identified to Meet this Need	1
Mental Health Screening or Evaluation - Child	No Service Identified to Meet this Need	2
Mental Health Screening or Evaluation - Parent	No Service Identified to Meet this Need	2
Mentoring	No Service Identified to Meet this Need	1
Other In-Home Service: Clinical Wrap Services	Service does not currently exist in the community	1
Other Medical Intervention: Specialist Referral	No Service Identified to Meet this Need	1
- Plastic Surgeon Consultation for Burn Scars		
Other Mental Health Service - Play Therapy	No Service Identified to Meet this Need	1
Other State Agency Program: DMR, DMHASS,	UTD from Treatment Plan, LINK Narrative or Area	1
MSS)	Office Response	
Psychiatric Evaluation - Child	No Service Identified to Meet this Need	2
Psychiatric Hospitalization	No Services Identified to Meet this Need	1
Psychological Evaluation - Child	No Service Identified to Meet this Need	2
Relative Foster Care	No Service Identified to Meet this Need	1
Substance Abuse Treatment: Parent	No Service Identified to Meet this Need	1
Drug/Alcohol Testing		
<b>Substance Abuse Treatment: Child</b>	No Service Identified to Meet this Need	1
Inpatient		
Substance Abuse Treatment: Parent	No Service Identified to Meet this Need	1
Screening		
		53

### JUAN F. ACTION PLAN MONITORING REPORT

### November 2013

This report includes data relevant to the permanency and placement issues and action steps embodied within the Action Plan. Data provided comes from the monthly point-in-time information from LINK and the Chapin Hall 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 2013.

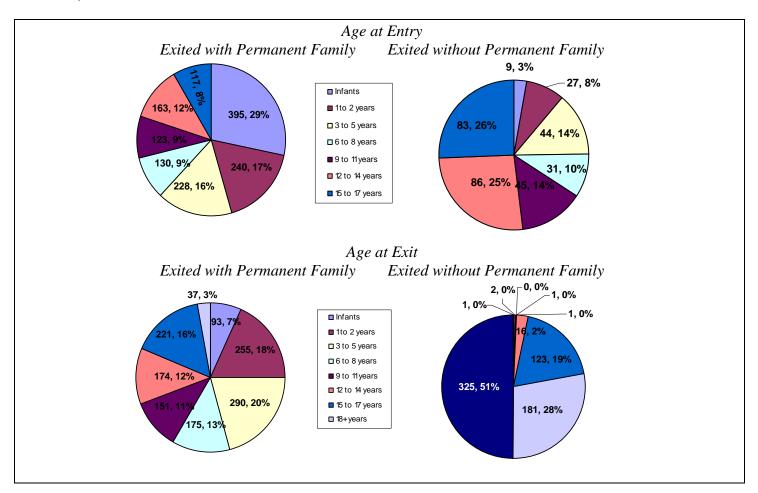
Figure 1: Children Exiting With Permanency, Exiting Without Permanency, Unknown Exits and Remaining In Care (Entry Cohorts)

	Period of Entry to Care											
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Total Entries	3099	3545	3203	3091	3407	2854	2829	2629	2691	2299	1858	1465
			•		Perman	ent Exits						
In 1 yr	1178	1406	1228	1129	1263	1095	1098	1093	1023	703		
	38.0%	39.7%	38.3%	36.5%	37.1%	38.4%	38.8%	41.6%	38.0%	30.6%		
In 2 yrs	1637	2078	1805	1740	1973	1675	1676	1582	1374			
	52.8%	58.6%	56.4%	56.3%	57.9%	58.7%	59.2%	60.2%	51.1%			
In 3 yrs	1964	2385	2092	2013	2324	1974	1944	1792				
	63.4%	67.3%	65.3%	65.1%	68.2%	69.2%	68.7%	68.2%				
In 4 yrs	2134	2539	2262	2158	2500	2090	2034					
	68.9%	71.6%	70.6%	69.8%	73.4%	73.2%	71.9%					
To Date	2304	2705	2366	2251	2608	2152	2086	1907	1696	1099	615	182
	74.3%	76.3%	73.9%	72.8%	76.5%	75.4%	73.7%	72.5%	63.0%	47.8%	33.1%	12.4%
					Non-Perm	anent Exit	S					
In 1 yr	274	249	231	289	259	263	250	208	196	138		
	8.8%	7.0%	7.2%	9.3%	7.6%	9.2%	8.8%	7.9%	7.3%	6.0%		
In 2 yrs	332	320	301	371	345	318	320	267	243			
	10.7%	9.0%	9.4%	12.0%	10.1%	11.1%	11.3%	10.2%	9.0%			
In 3 yrs	365	366	366	431	401	354	363	300				
	11.8%	10.3%	11.4%	13.9%	11.8%	12.4%	12.8%	11.4%				
In 4 yrs	406	392	403	461	449	392	394					
	13.1%	11.1%	12.6%	14.9%	13.2%	13.7%	13.9%					
To Date	505	487	498	553	517	433	423	333	278	195	104	57
	16.3%	13.7%	15.5%	17.9%	15.2%	15.2%	15.0%	12.7%	10.3%	8.5%	5.6%	3.9%

	Period of Entry to Care											
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
					Unk	nown Exits						
In 1 yr	106	151	129	83	76	62	60	75	129	211		
	3.4%	4.3%	4.0%	2.7%	2.2%	2.2%	2.1%	2.9%	4.8%	9.2%		
In 2 yrs	136	191	171	124	117	98	91	139	309			
	4.4%	5.4%	5.3%	4.0%	3.4%	3.4%	3.2%	5.3%	11.5%			
In 3 yrs	161	218	208	163	140	124	125	194				
	5.2%	6.1%	6.5%	5.3%	4.1%	4.3%	4.4%	7.4%				
In 4 yrs	179	242	234	181	167	156	168					
	5.8%	6.8%	7.3%	5.9%	4.9%	5.5%	5.9%					
To Date	256	319	293	226	212	190	187	225	394	432	191	42
	8.3%	9.0%	9.1%	7.3%	6.2%	6.7%	6.6%	8.6%	14.6%	18.8%	10.3%	2.9%
		•			Rem	ain In Care						
In 1 yr	1541	1739	1615	1590	1809	1434	1421	1253	1343	1247		
	49.7%	49.1%	50.4%	51.4%	53.1%	50.2%	50.2%	47.7%	49.9%	54.2%		
In 2 yrs	994	956	926	856	972	763	742	641	765			
	32.1%	27.0%	28.9%	27.7%	28.5%	26.7%	26.2%	24.4%	28.4%			
In 3 yrs	609	576	537	484	542	402	397	343				
	19.7%	16.2%	16.8%	15.7%	15.9%	14.1%	14.0%	13.0%				
In 4 yrs	380	372	304	291	291	216	233					
	12.3%	10.5%	9.5%	9.4%	8.5%	7.6%	8.2%					
To Date	34	34	46	61	70	79	133	164	323	573	948	1184
	1.1%	1.0%	1.4%	2.0%	2.1%	2.8%	4.7%	6.2%	12.0%	24.9%	51.0%	80.8%

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 (2012 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 NOVEMBER  $3,2013^4$ )

Yes 610	No ↓ 2,595				
Goals of:	Has the chil	d been in care more tl	han 15 months?		
476 (78%) Adoption 125 (20%)	No 1,540	Yes ↓ 1,055 Has a TPR proce	eeding been filed?		
APPLA 4 (1%)		Yes 280	No		
Relatives		Goals of:	Is a reason docu	mented not to file TPR	?
3 (<1%) Blank		191 (68%) Adoption	Yes 386		No 389
2 (<1%) Reunification		61 (22%) APPLA 20 (7%) Reunify 4 (1%) Trans. of Guardian: Sub/Unsub 4 (1%) Relatives	Goals of:  207 (54%) APPLA 63 (16%) Trans. of Guardian: Sub/Unsub 56 (15%) Reunify 40 (10%) Adoption 20 (5%)	Documented Reasons: 69% Compelling Reason 17% Child is with relative 10% Petition in process 4% Services not provided	Goals of: 124 (32%) APPLA 119 (31%) Reunify 62 (16%) Trans. of Guardian: Sub/Unsub 65 (17%) Adoption
			20 (5%) Relatives		14 (4%) Relatives 5 (1%) Blank

<sup>&</sup>lt;sup>4</sup> Children over age 18 are not included in these figures.

# **Preferred Permanency Goals:**

	Aug	Nov	Feb	May	Aug	Nov
Reunification	2012	2012	2013	2013	2013	2013
Total number of children with Reunification	1300	1254	1242	1200	1172	1164
goal, pre-TPR and post-TPR						
Number of children with Reunification goal	1298	1254	1242	1200	1171	1162
pre-TPR						
Number of children with Reunification	282	254	260	235	227	195
goal, pre-TPR, >= 15 months in care						
Number of children with Reunification	40	31	30	33	38	41
goal, pre-TPR, >= 36 months in care						
Number of children with Reunification goal,	2	0	0	0	1	2
post-TPR						

Transfer of Guardianship (Subsidized and	Aug	Nov	Feb	May	Aug	Nov
Non-Subsidized)	2012	2012	2013	2013	2013	2013
Total number of children with Transfer of	272	259	258	263	245	238
Guardianship goal (subsidized and non-						
subsidized), pre-TPR and post TPR						
Number of children with Transfer of	268	254	255	259	243	238
Guardianship goal (subsidized and non-						
subsidized), pre-TPR						
<ul> <li>Number of children with Transfer of</li> </ul>	58	63	69	79	82	64
Guardianship goal (subsidized and non-						
subsidized, pre-TPR, >= 22 months						
<ul> <li>Number of children with Transfer of</li> </ul>	9	11	14	9	14	15
Guardianship goal (subsidized and non-						
subsidized), pre-TPR, >= 36 months						
Number of children with Transfer of	4	5	3	4	2	0
Guardianship goal (subsidized and non-						
subsidized), post-TPR						

Adoption	Aug 2012	Nov 2012	Feb 2013	May 2013	Aug 2013	Nov 2013
Total number of children with Adoption goal, pre-TPR and post-TPR	1117	1058	974	966	922	947
Number of children with Adoption goal, pre- TPR	528	500	496	473	477	471
Number of children with Adoption goal, TPR not filed, >= 15 months in care	106	112	130	115	103	105
Reason TPR not filed, Compelling     Reason	10	6	2	7	8	6
Reason TPR not filed, petitions in progress	12	26	29	31	27	27
Reason TPR not filed, child is in placement with relative	1	1	2	1	2	2
Reason TPR not filed, services needed not provided	1	2	2	2	3	5
Reason TPR not filed, blank	82	77	95	74	63	65
Number of cases with Adoption goal post-TPR	589	558	478	493	445	476
• Number of children with Adoption goal, post-TPR, in care >= 15 months	549	522	453	464	419	433
Number of children with Adoption goal, post-TPR, in care >= 22 months	457	437	374	381	357	372
Number of children with Adoption goal, post- TPR, no barrier, > 3 months since TPR	18	22	32	32	14	8
Number of children with Adoption goal, post- TPR, with barrier, > 3 months since TPR	123	124	103	102	98	89
Number of children with Adoption goal, post- TPR, with blank barrier, > 3 months since TPR	312	283	268	257	244	275

Progress Towards Permanency:	Aug	Nov	Feb	May	Aug	Nov
	2012	2012	2013	2013	2013	2013
Total number of children, pre-TPR, TPR not	435	422	456	434	411	389
filed, >=15 months in care, no compelling						
reason						

### **Non-Preferred Permanency Goals:**

	Aug	Nov	Feb	May	Aug	Nov
<b>Long Term Foster Care Relative:</b>	2012	2012	2013	2013	2013	2013
Total number of children with Long Term	61	61	53	55	61	53
Foster Care Relative goal						
Number of children with Long Term Foster	52	55	46	49	55	49
Care Relative goal, pre-TPR						
Number of children with Long Term	7	9	5	5	2	5
Foster Care Relative goal, 12 years old						
and under, pre-TPR						
Long Term Foster Care Rel. goal, post-TPR	9	6	7	6	6	4
Number of children with Long Term	1	0	0	0	0	1
Foster Care Relative goal, 12 years old						
and under, post-TPR						

	Aug	Nov	Feb	May	Aug	Nov
APPLA*	2012	2012	2013	2013	2013	2013
Total number of children with APPLA goal	634	629	613	643	602	583
Number of children with APPLA goal, pre-TPR	504	494	479	513	482	458
<ul> <li>Number of children with APPLA goal,</li> <li>12 years old and under, pre-TPR</li> </ul>	21	22	19	20	6	19
Number of children with APPLA goal, post- TPR	130	135	134	130	120	125
<ul> <li>Number of children with APPLA goal,</li> <li>12 years old and under, post-TPR</li> </ul>	7	11	11	11	5	8

<sup>\*</sup> 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.

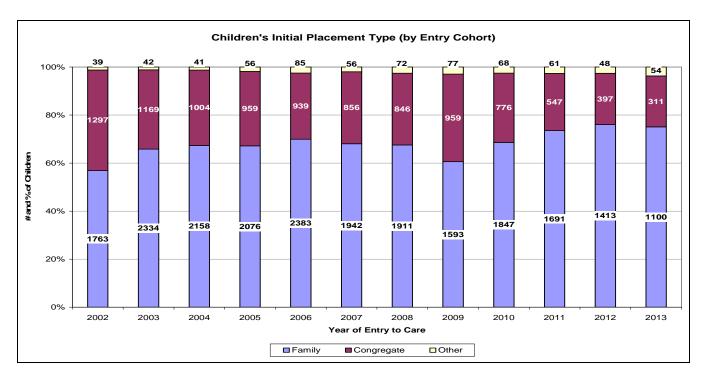
### **Missing Permanency Goals:**

	Aug 2012	Nov 2012	Feb 2013	May 2013	Aug 2013	Nov 2013
Number of children, with no Permanency goal, pre-TPR, >= 2 months in care	21	21	22	24	19	19
Number of children, with no Permanency goal, pre-TPR, >= 6 months in care	16	13	11	17	11	9
Number of children, with no Permanency goal, pre-TPR, >= 15 months in care	9	11	9	8	7	5
Number of children, with no Permanency goal, pre-TPR, TPR not filed, >= 15 months in care, no compelling reason	6	9	3	7	5	5

### **B. PLACEMENT ISSUES**

## **Placement Experiences of Children**

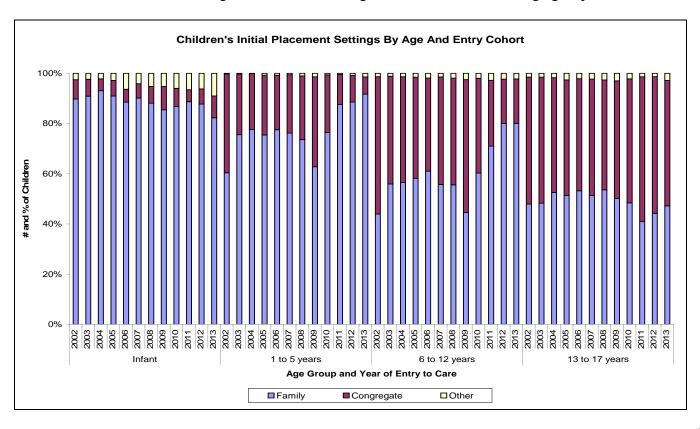
The following chart shows the change in use of family and congregate care for admission cohorts between 2002 and 2013.



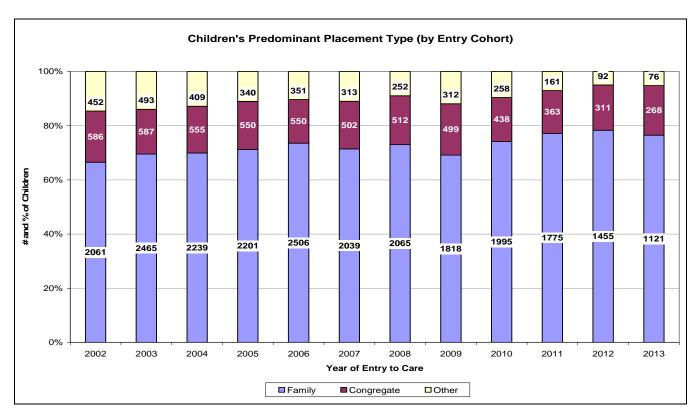
The next table shows specific care types used month-by-month for entries between Nov 2012 and October 2013.

**Case Summaries** First placement type enter Oct12 enter Nov12 enter enter May13 enter Aug13 enter Sep13 enter enter enter Jul13 enter enter enter Dec12 Jan13 Feb13 Mar13 Apr13 Jun13 Residential Ν 14 6 6 13 5 4 % 2.3% 3.8% 4.3% 8.4% 5.0% 4.4% 4.1% 6.6% 4.0% 2.8% 2.5% 4.3% 2 2 **DCF** Facilities Ν 2 5 7 5 3 3 3 6 2 % 1.2% 1.5% 4.3% 4.2% .7% 1.5% 3.4% 1.5% 1.7% 1.7% 3.8% 1.2% Foster Care Ν 92 55 39 83 62 58 86 87 60 62 % 53.5% 41.4% 33.6% 49.7% 44.0% 42.3% 47.6% 43.7% 49.4% 42.5% 37.5% 38.5% 2 Group Home Ν 2 3 4 2 3 4 6 2 6 % 1.2% 2.3% .9% 2.4% 2.2% 3.0% 1.1% 1.1% 3.8% 4.3% 1.4% 2.7% 51 Relative Care Ν 38 36 50 30 36 42 33 49 41 56 55 % 22.1% 27.1% 43.1% 18.0% 25.5% 30.7% 22.4% 24.9% 23.3% 31.3% 31.9% 34.2% Medical Ν 5 6 6 8 6 6 .6% 4.2% 3.9% 3.8% % .8% 3.5% 4.4% 4.1% 4.1% 3.4% 1.9% Safe Home Ν 4 2 1 3 6 5 3 6 2 5 6 % 2.3% 1.5% .9% 1.8% 4.3% 3.6% 2.0% 3.0% 1.1% 2.8% 3.8% .6% Shelter Ν 24 18 9 14 16 12 12 17 21 17 15 13 % 14.0% 13.5% 7.8% 8.4% 11.3% 8.8% 8.2% 8.6% 11.9% 9.5% 9.4% 8.1% Ν Special Study 5 11 6 5 6 3 8 9 8 6 11 5.2% 3.0% 4.0% 4.5% 3.8% % 2.9% 8.3% 4.3% 2.2% 5.4% 4.6% 6.8% Total Ν 172 133 116 167 141 137 147 197 176 179 160 161 % 1.0E2% 1.0E2% 1.0E2% 1.0E2% 1.0E2% 1.0E2% .0E2% 1.0E2% 1.0E2% 1.0E2% 1.0E2% 1.0E2%

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 2013 admission cohorts.



The following chart shows monthly statistics of children who exited from DCF placements between July 2012 and June 2013, and the portion of those exits within each placement type from which they exited.

Case Summaries

Last placement type in spell (as of censor date)	exit Oct12	exit Nov12	exit Dec12	exit Jan13	exit Feb13	exit Mar13	exit Apr13	exit May13	exit Jun13	exit Jul13	exit Aug13	exit Sep13
Residential N	13	11	8	9	15	11	13	9	4	8	12	5
%	6.0%	6.8%	3.7%	5.2%	11.6%	6.2%	8.3%	4.6%	2.3%	4.3%	6.2%	4.5%
DCF Facilities N	2	2	6	4	3	4	1	3	5	2	5	2
%	.9%	1.2%	2.8%	2.3%	2.3%	2.3%	.6%	1.5%	2.9%	1.1%	2.6%	1.8%
Foster Care N	112	83	101	75	45	75	70	88	89	82	73	45
%	51.6%	51.2%	47.0%	43.1%	34.9%	42.4%	44.9%	44.9%	51.1%	44.1%	37.8%	40.9%
Group Home N	13	10	19	15	19	14	7	9	13	19	13	8
%	6.0%	6.2%	8.8%	8.6%	14.7%	7.9%	4.5%	4.6%	7.5%	10.2%	6.7%	7.3%
Independent Living N	1	2	8	4	3	4	3	5	6	3	4	2
%	.5%	1.2%	3.7%	2.3%	2.3%	2.3%	1.9%	2.6%	3.4%	1.6%	2.1%	1.8%
Relative Care N	60	34	52	47	26	49	41	66	42	48	57	32
%	27.6%	21.0%	24.2%	27.0%	20.2%	27.7%	26.3%	33.7%	24.1%	25.8%	29.5%	29.1%
Medical N	1			2			1	2	1	1	2	
%	.5%			1.1%			.6%	1.0%	.6%	.5%	1.0%	
Safe Home N		1	3	3	1	2	2	3	3		2	1
%		.6%	1.4%	1.7%	.8%	1.1%	1.3%	1.5%	1.7%		1.0%	.9%
Shelter N	8	8	8	5	7	10	9	4	6	12	12	11
%	3.7%	4.9%	3.7%	2.9%	5.4%	5.6%	5.8%	2.0%	3.4%	6.5%	6.2%	10.0%
Special Study N	6	10	8	10	8	6	7	5	4	10	12	3
%	2.8%	6.2%	3.7%	5.7%	6.2%	3.4%	4.5%	2.6%	2.3%	5.4%	6.2%	2.7%
Uknown N	1	1	2		2	2	2	2	1	1	1	1
%	.5%	.6%	.9%		1.6%	1.1%	1.3%	1.0%	.6%	.5%	.5%	.9%
Total N	217	162	215	174	129	177	156	196	174	186	193	110
%	1.0E2%											

The next chart shows the primary placement type for children who were in care on October 1, 2013 organized by length of time in care.

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

						Duration Category	,			
			1 <= durat < 30	30 <= durat < 90	90 <= durat < 180	180 <= durat < 365	365 <= durat < 545	545 <= durat < 1095	more than 1095	Total
Primary type of spell	Residential	Count	7	10	24	38	16	40	63	198
(>50%)		% Row	3.5%	5.1%	12.1%	19.2%	8.1%	20.2%	31.8%	100.0%
		% Col	4.5%	3.5%	5.8%	6.5%	3.3%	4.6%	6.7%	5.3%
	DCF Facilities	Count	2	9	3	7	5	4	1	31
		% Row	6.5%	29.0%	9.7%	22.6%	16.1%	12.9%	3.2%	100.0%
		% Col	1.3%	3.1%	.7%	1.2%	1.0%	.5%	.1%	.8%
	Foster Care	Count	55	96	175	251	242	460	552	1831
		% Row	3.0%	5.2%	9.6%	13.7%	13.2%	25.1%	30.1%	100.0%
		% Col	35.5%	33.4%	42.1%	42.7%	50.2%	52.8%	59.0%	49.0%
	Group Home	Count	7	8	8	33	16	38	89	199
		% Row	3.5%	4.0%	4.0%	16.6%	8.0%	19.1%	44.7%	100.0%
		% Col	4.5%	2.8%	1.9%	5.6%	3.3%	4.4%	9.5%	5.3%
	Independent Living	Count	0	0	0	0	0	2	4	6
		% Row	.0%	.0%	.0%	.0%	.0%	33.3%	66.7%	100.0%
		% Col	.0%	.0%	.0%	.0%	.0%	.2%	.4%	.2%
	Relative Care	Count	56	117	129	198	127	205	69	901
		% Row	6.2%	13.0%	14.3%	22.0%	14.1%	22.8%	7.7%	100.0%
		% Col	36.1%	40.8%	31.0%	33.7%	26.3%	23.5%	7.4%	24.1%
	Medical	Count	2	3	2	2	3	2	3	17
		% Row	11.8%	17.6%	11.8%	11.8%	17.6%	11.8%	17.6%	100.0%
		% Col	1.3%	1.0%	.5%	.3%	.6%	.2%	.3%	.5%
	Mixed (none >50%)	Count	0	2	5	6	20	62	130	225
		% Row	.0%	.9%	2.2%	2.7%	8.9%	27.6%	57.8%	100.0%
		% Col	.0%	.7%	1.2%	1.0%	4.1%	7.1%	13.9%	6.0%
	Safe Home	Count	0	9	15	8	7	3	1	43
		% Row	.0%	20.9%	34.9%	18.6%	16.3%	7.0%	2.3%	100.0%
		% Col	.0%	3.1%	3.6%	1.4%	1.5%	.3%	.1%	1.2%
	Shelter	Count	12	18	29	10	11	1	0	81
		% Row	14.8%	22.2%	35.8%	12.3%	13.6%	1.2%	.0%	100.0%
		% Col	7.7%	6.3%	7.0%	1.7%	2.3%	.1%	.0%	2.2%
	Special Study	Count	13	12	25	25	33	47	21	176
		% Row	7.4%	6.8%	14.2%	14.2%	18.8%	26.7%	11.9%	100.0%
		% Col	8.4%	4.2%	6.0%	4.3%	6.8%	5.4%	2.2%	4.7%
	Unknown	Count	1	3	1	10	2	7	3	27
		% Row	3.7%	11.1%	3.7%	37.0%	7.4%	25.9%	11.1%	100.0%
		% Col	.6%	1.0%	.2%	1.7%	.4%	.8%	.3%	.7%
Total		Count	155	287	416	588	482	871	936	3735
		% Row	4.1%	7.7%	11.1%	15.7%	12.9%	23.3%	25.1%	100.0%
		% Col	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

### **Congregate Care Settings**

Placement Issues	Aug 2012	Nov 2012	Feb 2013	May 2013	Aug 2013	Nov 2013
Total number of children 12 years old and under, in Congregate Care	55	58	43	57	41	47
Number of children 12 years old and under, in DCF Facilities	5	4	5	3	0	1
Number of children 12 years old and under, in Group Homes	21	22	17	14	13	12
<ul> <li>Number of children 12 years old and under, in Residential</li> </ul>	10	7	5	4	8	11
Number of children 12 years old and under, in SAFE Home	17	24	15	20	18	21
Number of children 12 years old and under in Shelter	2	1	1	1	2	2
Total number of children ages 13-17 in Congregate Placements	576	556	538	516	477	442

### **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 Care											
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	
Total Entries	3099	3545	3203	3091	3407	2854	2829	2629	2691	2299	1858	1465	
SAFE	728	629	453	394	395	382	335	471	330	146	68	37	
Homes/PDCs	23%	18%	14%	13%	12%	13%	12%	18%	12%	6%	4%	3%	
Shelters	165	135	147	178	114	136	144	186	175	193	169	137	
	5%	4%	5%	6%	3%	5%	5%	7%	7%	8%	9%	9%	
Total	893	764	600	572	509	518	479	657	505	339	237	174	
	29%	22%	19%	19%	15%	18%	17%	25%	19%	15%	13%	12%	

	Period of Entry to Care											
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Total	893	764	600	572	509	518	479	657	505	339	237	174
Initial												
Plcmnts												
<= 30 days	351	308	249	241	186	162	150	229	135	103	60	58
	39.3	40.3	41.5	42.1	36.5	31.3	31.3	34.9	26.7	30.4	25.3	33.3
	%	%	%	%	%	%	%	%	%	%	%	%
31 - 60	284	180	102	114	73	73	102	110	105	57	44	39
	31.8	23.6	17.0	19.9	14.3	14.1	21.3	16.7	20.8	16.8	18.6	22.4
	%	%	%	%	%	%	%	%	%	%	%	%
61 - 91	106	121	81	76	87	79	85	157	91	54	39	29
	11.9	15.8	13.5	13.3	17.1	15.3	17.7	23.9	18.0	15.9	16.5	16.7
	%	%	%	%	%	%	%	%	%	%	%	%
92 - 183	101	107	124	100	118	131	110	124	136	84	56	43

	Period of Entry to Care											
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Total	893	764	600	572	509	518	479	657	505	339	237	174
Initial												
<b>Plcmnts</b>												
	11.3	14.0	20.7	17.5	23.2	25.3	23.0	18.9	26.9	24.8	23.6	24.7
	%	%	%	%	%	%	%	%	%	%	%	%
184+	51	48	44	41	45	73	32	37	38	41	38	5
	5.7%	6.3%	7.3%	7.2%	8.8%	14.1	6.7%	5.6%	7.5%	12.1	16.0	2.9%
						%				%	%	

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	May 2012	Aug 2012	Nov 2012	Feb 2013	May 2013	Aug 2013	Nov 2013
Total number of children in SAFE Home	63	45	49	31	40	35	33
• Number of children in SAFE Home, > 60 days	40	35	31	21	35	24	22
• Number of children in SAFE Home, >= 6 months	11	7	8	7	12	12	8
Total number of children in STAR/Shelter Placement	71	84	78	73	64	75	73
• Number of children in STAR/Shelter Placement, > 60 days	37	53	40	42	30	35	46
• Number of children in STAR/Shelter Placement, >= 6 months	9	9	9	10	8	8	5
Total number of children in MH Shelter	1	2	1	1	1	1	1
• Total number of children in MH Shelter, > 60 days	1	1	1	1	1	1	1
• Total number of children in MH Shelter, >= 6 months	0	0	0	1	1	1	1

### **Time in Residential Care**

Placement Issues	May 2012	Aug 2012	Nov 2012	Feb 2013	May 2013	Aug 2013	Nov 2013
Total number of children in Residential care	316	273	252	244	190	173	147
• Number of children in Residential care, >= 12 months in Residential placement	113	89	76	64	54	51	42
Number of children in Residential care, >= 60 months in Residential placement	1	1	0	2	2	2	2

# Appendix 1 Commissioner's Highlights from The Department of Children & Families Third Quarter 2014 Exit Plan Report

### **Commissioner Statement**

The release of the <u>Juan F.</u> Report for the third quarter of 2013 comes at a critical juncture for the Department in our development as a family-centered, strengths-based child welfare agency. This administration has for three years supported a dedicated, talented staff in a broad and fundamental reform of the way we do our work. As we head into 2014, this next year affords us an exceptional opportunity to take another leap forward in our evolution. I am certain that there will always be ways to further improve our work, and so I do not ascribe to the idea that we will achieve some level of performance that is considered to be "good enough." I do, however, think we can be proud of our accomplishments to date and be ambitious in our plans for this next phase of advancement.

Beyond doubt, the Strengthening Families Practice Model -- including the Differential Response System, the emphasis on kinship care, the rightsizing of congregate care, and the continuing and expanding implementation of child and family team meetings -- has made a sizable impact on the profile of Connecticut's child welfare system. As of December 1, 2013 and compared to January 2011:

- There are <u>816 fewer children in care</u> -- a decrease of 17.1 percent;
- The percentage of <u>children in care who live with a relative</u> or someone else they know grew <u>from 21% in January 2011 to 31.8%</u> -- an increase of 51.4 percent;
- The percentage of <u>children</u> in care who live in <u>congregate (group) care</u> dropped <u>from 29.8% in January 2011 to 21.8%</u> -- a decrease of 26.9 percent; and
- There are 330 fewer children in out of state care -- a decrease of 91.2 percent.

Family participation in our work has been greatly enhanced. The child and family team meetings, which first were focused on returning children in congregate care to family settings and now is being used when children are being considered for removal, has been a critical tool for the Department. Team meetings have been instrumental in both reducing the number of children in congregate care settings and in reducing the number of children in care overall. During the seven-month period ending November 18, 2013, 1,289 children were the subject of a Considered Removal-Child and Family Team Meeting, and 62 percent of the children received the meeting *prior* to removal. About half the children were not removed and another quarter were either (1) placed with family or someone else they knew or (2) were returned home after the meeting. Only about one in five of the children were placed into care with someone they did not know (non-relative foster home).

Next year, the team meeting process will be applied to support permanency for children in care. The Annie E. Casey Foundation continues to provide its expertise and guidance in the arena and has been a tremendous partner with the Department throughout this administration. The permanency teaming process will begin next year with the expectation that teenagers in particular will be the beneficiaries. Teenagers make up more than half the children in care and more than 90 percent of children in congregate settings. If we are going to continue to make progress in reducing out of home care and the use of group settings, then finding teenagers permanent family relationships is

paramount. It goes without saying that finding permanent family relationships is the best way to ensure the well-being of all our children. The need to build such natural supports around teenagers, who before long will be expected to be independent of our assistance, could not be more urgent.

I am confident the permanency teams and the other teaming processes will continue to build the momentum for the Strengthening Families Practice Model that has already realized important progress. The Department's staff have done a fantastic job assimilating and implementing the many changes. Staff have embraced these reforms and rallied our agency around the principles of family-centered and strengths-based practice. I am very proud of their work and thank them for the contributions they make every day to the lives of so many children and families.